



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
 DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

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Advocate Community Providers, Inc. (PPS ID:25)

Quarterly Report - Implementation Plan for Advocate Community Providers, Inc.











Year and Quarter: DY2, Q2

Quarterly Report Status:  Adjudicated

Status By Section

Section	Description	Status
Section 01	Budget	 Completed
Section 02	Governance	 Completed
Section 03	Financial Stability	 Completed
Section 04	Cultural Competency & Health Literacy	 Completed
Section 05	IT Systems and Processes	 Completed
Section 06	Performance Reporting	 Completed
Section 07	Practitioner Engagement	 Completed
Section 08	Population Health Management	 Completed
Section 09	Clinical Integration	 Completed
Section 10	General Project Reporting	 Completed
Section 11	Workforce	 Completed

Status By Project

Project ID	Project Title	Status
2.a.i	Create Integrated Delivery Systems that are focused on Evidence-Based Medicine / Population Health Management	 Completed
2.a.iii	Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access to high quality primary care and support services	 Completed
2.b.iii	ED care triage for at-risk populations	 Completed
2.b.iv	Care transitions intervention model to reduce 30 day readmissions for chronic health conditions	 Completed
3.a.i	Integration of primary care and behavioral health services	 Completed
3.b.i	Evidence-based strategies for disease management in high risk/affected populations (adult only)	 Completed
3.c.i	Evidence-based strategies for disease management in high risk/affected populations (adults only)	 Completed
3.d.iii	Implementation of evidence-based medicine guidelines for asthma management	 Completed
4.b.i	Promote tobacco use cessation, especially among low SES populations and those with poor mental health.	 Completed
4.b.ii	Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings (Note: This project targets chronic diseases that are not included in domain 3, such as cancer)	 Completed



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

Section 01 – Budget

IPQR Module 1.1 - PPS Budget - Waiver Revenue (Baseline) - READ ONLY

Instructions :

READ ONLY - The Baseline Budget table was left for ease of reference during reporting.

Budget Items	DY1 (\$)	DY2 (\$)	DY3 (\$)	DY4 (\$)	DY5 (\$)	Total (\$)
Waiver Revenue	53,823,271	57,357,917	92,754,950	82,134,154	53,823,271	339,893,561
Cost of Project Implementation & Administration	16,146,981	17,207,375	27,826,485	24,640,246	16,146,981	101,968,068
Implementation	12,917,269	13,249,679	20,313,334	16,262,562	10,011,128	72,753,972
Administration	3,229,712	3,957,696	7,513,151	8,377,684	6,135,853	29,214,096
Revenue Loss	6,458,793	6,882,950	11,130,594	9,856,098	6,458,793	40,787,228
Internal PPS Provider Bonus Payments	20,452,843	21,796,008	35,246,881	31,210,979	20,452,843	129,159,554
Cost of non-covered services	2,691,164	2,867,896	4,637,748	4,106,708	2,691,164	16,994,680
Other	8,073,491	8,603,688	13,913,243	12,320,123	8,073,490	50,984,035
Contingency Fund	5,382,327	5,735,792	9,275,495	8,213,415	5,382,327	33,989,356
Other	2,691,164	2,867,896	4,637,748	4,106,708	2,691,163	16,994,679
Total Expenditures	53,823,272	57,357,917	92,754,951	82,134,154	53,823,271	339,893,565
Undistributed Revenue	0	0	0	0	0	0

Current File Uploads

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Narrative Text :

Budget above is consistent with the percentages and distribution dollars as described in the original application due December 2014. Percentages contemplated were discussed by members of ACP prior to submission of the original application. The numbers assumes earning 100% of 'Net Project Valuation' amount listed in the PPS Award Letter.



**New York State Department Of Health
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Advocate Community Providers, Inc. (PPS ID:25)

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
 DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✓ IPQR Module 1.2 - PPS Budget - Waiver Revenue (Quarterly)

Instructions :

Please include updates on waiver revenue budget items for this quarterly reporting period. Reported actual spending will be compared to baseline projections and deviations will be evaluated. Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

Benchmarks

Waiver Revenue DY2	Total Waiver Revenue	Undistributed Revenue YTD	Undistributed Revenue Total
57,357,917	339,893,561	52,149,351	308,897,932

Budget Items	DY2 Q2 Quarterly Amount - Update	Cumulative Spending to Date (DY1 - DY5)	Remaining Balance in Current DY	Percent Remaining in Current DY	Cumulative Remaining Balance	Percent Remaining of Cumulative Balance
Cost of Project Implementation & Administration	1,340,656	21,080,281	12,487,739	72.57%	80,887,787	79.33%
Implementation	1,033,797					
Administration	306,859					
Revenue Loss	0	0	6,882,950	100.00%	40,787,228	100.00%
Internal PPS Provider Bonus Payments	0	9,915,348	21,307,078	97.76%	119,244,206	92.32%
Cost of non-covered services	0	0	2,867,896	100.00%	16,994,680	100.00%
Other	0	0	8,603,688	100.00%	50,984,035	100.00%
Contingency Fund	0					
Other	0					
Total Expenditures	1,340,656	30,995,629				

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Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.



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DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✓ IPQR Module 1.3 - PPS Flow of Funds - Waiver Revenue (Baseline) - READ ONLY

Instructions :

READ ONLY - The Baseline Funds Flow table was left for ease of reference during reporting.

Funds Flow Items	DY1 (\$)	DY2 (\$)	DY3 (\$)	DY4 (\$)	DY5 (\$)	Total (\$)
Waiver Revenue	53,823,271	57,357,916	92,754,950	82,134,154	53,823,271	339,893,561
Practitioner - Primary Care Provider (PCP)	11,841,119	12,618,742	20,406,089	18,069,514	11,841,120	74,776,584
Practitioner - Non-Primary Care Provider (PCP)	2,691,164	2,867,896	4,637,746	4,106,708	2,691,164	16,994,678
Hospital	7,363,001	7,846,539	12,688,838	11,235,918	7,363,001	46,497,297
Clinic	285,030	303,749	491,200	434,955	285,030	1,799,964
Case Management / Health Home	663,996	707,601	1,144,279	1,013,256	663,996	4,193,128
Mental Health	932,736	993,990	1,607,407	1,423,353	932,736	5,890,222
Substance Abuse	932,736	993,990	1,607,407	1,423,353	932,736	5,890,222
Nursing Home	526,731	561,323	907,729	803,791	526,731	3,326,305
Pharmacy	251,955	268,501	434,199	384,481	251,955	1,591,091
Hospice	187,457	199,767	323,049	286,059	187,457	1,183,789
Community Based Organizations	447,267	476,639	770,789	682,528	447,267	2,824,490
All Other	27,700,079	29,519,180	47,736,218	42,270,238	27,700,078	174,925,793
Uncategorized						0
PPS PMO	0	0	0	0	0	0
Total Funds Distributed	53,823,271	57,357,917	92,754,950	82,134,154	53,823,271	339,893,563
Undistributed Revenue	0	0	0	0	0	0

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Narrative Text :

Budget percentage allocations listed below is consistent with the funds flow model that was outlined in our original application due December 2014.

- 22% to Primary Care Physicians
- 5% to Specialists
- 11% to remaining providers (including Hospitals)



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-Projection of involvement by project and level of effort of each project by each provider category determined that determine allocation
-Percent rolled up to PPS as a whole (all 10 projects)
-Overall percent applied to this category to determine allocation by provider type
-12% Revenue Loss included under Hospital category
-62% under 'All Other' and includes: Cost of Project Implementation (30%), Costs of Services Not Covered (5%), Contingency Fund (10%), Other (5%).

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



**New York State Department Of Health
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Advocate Community Providers, Inc. (PPS ID:25)

IPQR Module 1.4 - PPS Flow of Funds - Waiver Revenue (Quarterly)

Instructions :

Please include updates on waiver revenue flow of funds for this quarterly reporting period by importing the PIT file and filling out the PPS PMO line manually. Reported actual fund distribution will be compared to baseline projections and deviations will be evaluated. Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

Benchmarks

Waiver Revenue DY2	Total Waiver Revenue	Undistributed Revenue YTD	Undistributed Revenue Total
57,357,917.00	339,893,561.00	49,505,746.64	321,081,184.40

Funds Flow Items	DY2 Q2 Quarterly Amount - Update	Percentage of Safety Net Funds - DY2 Q2 Quarterly Amount - Update	Safety Net Funds Flowed YTD	Safety Net Funds Percentage YTD	Total Amount Disbursed to Date (DY1-DY5)	Percent Spent By Project											DY Adjusted Difference	Cumulative Difference
						Projects Selected By PPS												
						2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii			
Practitioner - Primary Care Provider (PCP)	1,900,718.29	90.31%	2,047,937.58	90.79%	7,673,869.10	12	10	4	4	15	15	10	10	10	10	10	10,363,033.60	67,102,714.90
Practitioner - Non-Primary Care Provider (PCP)	643,539.77	52.63%	357,864.33	52.97%	1,149,999.18	5.9	14.86	3.1	8.73	14.49	14.48	13.84	13.84	5.38	5.38		2,192,294.14	15,844,678.82
Hospital	0	0.00%	0	0.00%	3,431,579	0	0	0	0	0	0	0	0	0	0		7,846,539	43,065,718
Clinic	437,043.21	100.00%	437,043.21	100.00%	437,043.21	5	11.38	14.65	21.2	15	10	10	10	1.38	1.38		0	1,362,920.79
Case Management / Health Home	0	0.00%	0	0.00%	0	0	0	0	0	0	0	0	0	0	0		707,601	4,193,128
Mental Health	28,654.68	100.00%	28,654.68	96.99%	36,666.58	5	15	2	10	15	15	15	15	4	4		964,445.11	5,853,555.42
Substance Abuse	0	0.00%	0	0.00%	0	0	0	0	0	0	0	0	0	0	0		993,990	5,890,222
Nursing Home	0	0.00%	0	0.00%	0	0	0	0	0	0	0	0	0	0	0		561,323	3,326,305
Pharmacy	0	0.00%	0	0.00%	0	0	0	0	0	0	0	0	0	0	0		268,501	1,591,091
Hospice	0	0.00%	0	0.00%	0	0	0	0	0	0	0	0	0	0	0		199,767	1,183,789
Community Based Organizations	0	0.00%	0	0.00%	0	0	0	0	0	0	0	0	0	0	0		476,639	2,824,490
All Other	59,983.76	63.84%	38,291.83	30.36%	1,106,253.09	7.54	12.55	10.37	10.37	15	11.81	10	10	6.18	6.18		29,393,071.02	173,819,539.91
Uncategorized	859.45	98.80%	1,711.94	5.07%	287,949.69	12	10	4	4	15	15	10	10	10	10		0	0
Additional Providers	0	0.00%	0	0.00%	0													
PPS PMO	1,340,656	100.00%	4,294,381	100.00%	4,689,016.75												0	0
Total	4,411,455.16	88.42%	7,205,884.57	91.77%	18,812,376.60													



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Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Practitioner - Primary Care Provider (PCP)		1,900,718.29
Li Yanlun	Practitioner - Primary Care Provider (PCP)	19,590.80
Laud Sheela G Md	Practitioner - Primary Care Provider (PCP)	1,900.66
Nazarian Habib	Practitioner - Primary Care Provider (PCP)	11,211.78
Jothianandan Kanthimathi Md	Practitioner - Primary Care Provider (PCP)	3,475.09
Cohen Stanley Bart Md	Practitioner - Primary Care Provider (PCP)	104.36
Albarran Marzan Julio E Md	Practitioner - Primary Care Provider (PCP)	205.78
Chaughtai Khalid Akhtar Md	Practitioner - Primary Care Provider (PCP)	1,059.43
Tam Kenneth C Md	Practitioner - Primary Care Provider (PCP)	3,468.10
Dove Arthur Renner Md	Practitioner - Primary Care Provider (PCP)	1,067.27
Macenat Jean R Md	Practitioner - Primary Care Provider (PCP)	3,297.77
Zeng Lingling Md	Practitioner - Primary Care Provider (PCP)	6,520.42
Shi Shelly Md	Practitioner - Primary Care Provider (PCP)	1,256.92
Dairo Oluwatoyos	Practitioner - Primary Care Provider (PCP)	1,768.14
Chiu Karen Md	Practitioner - Primary Care Provider (PCP)	5,139.18
Ngai Yi Md	Practitioner - Primary Care Provider (PCP)	5,667.50
Cecilia Griselda Calderon Md	Practitioner - Primary Care Provider (PCP)	12,900.16
Rahman Mohammed Matiur Md	Practitioner - Primary Care Provider (PCP)	15,371.24
Zhao Jingbo	Practitioner - Primary Care Provider (PCP)	1,649.03
Mesbah Reza	Practitioner - Primary Care Provider (PCP)	2,622.17
Carreno-Rijo Elizabeth	Practitioner - Primary Care Provider (PCP)	18,773.67
Campusano Clarinelda	Practitioner - Primary Care Provider (PCP)	855.22
Olivo-Mercedes Yohanna M	Practitioner - Primary Care Provider (PCP)	211.37
Harris Michael Eli	Practitioner - Primary Care Provider (PCP)	28,121.80
Nukalapati Prasuna R Md	Practitioner - Primary Care Provider (PCP)	10,042.92
Carvajal Ruben U Md Pc Md	Practitioner - Primary Care Provider (PCP)	14,916.46
Patel Baldevbhai V Md Pc	Practitioner - Primary Care Provider (PCP)	10,018.67
Ng Hung Fai Md	Practitioner - Primary Care Provider (PCP)	2,671.39
Master Kalpana Rashmin	Practitioner - Primary Care Provider (PCP)	7,651.81

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Mpi Catherine Alikor	Practitioner - Primary Care Provider (PCP)	3,344.31
Pignanelli Eduardo L Md	Practitioner - Primary Care Provider (PCP)	9,591.72
Soni Sharad	Practitioner - Primary Care Provider (PCP)	2,274.22
Perez Jose Md	Practitioner - Primary Care Provider (PCP)	10,106.69
Mitchell Harrison Md	Practitioner - Primary Care Provider (PCP)	1,247.23
Ozoude Sylvester A Md	Practitioner - Primary Care Provider (PCP)	6,681.30
Duggirala Rudrama D Md	Practitioner - Primary Care Provider (PCP)	15,294.48
Zambon Roberto	Practitioner - Primary Care Provider (PCP)	1,486.77
Gupta Indranil Md	Practitioner - Primary Care Provider (PCP)	3,781.34
Lin Wei Guo Md Pc	Practitioner - Primary Care Provider (PCP)	3,323.41
Flores-Castillo Edgar A Md	Practitioner - Primary Care Provider (PCP)	28,510.73
Huang Zheng-Bo Md	Practitioner - Primary Care Provider (PCP)	2,141.14
Li Ka Md	Practitioner - Primary Care Provider (PCP)	3,537.72
Qadri Syed S Md	Practitioner - Primary Care Provider (PCP)	30,642.37
Bhavana R Japi Physician Pc	Practitioner - Primary Care Provider (PCP)	17,244.38
Farhat Laila Ali Md	Practitioner - Primary Care Provider (PCP)	6,376.56
Cheng Jennifer	Practitioner - Primary Care Provider (PCP)	5,894.74
Brena M Desai Pediatrician Pc	Practitioner - Primary Care Provider (PCP)	3,423.57
Rodriguez Rafael Md	Practitioner - Primary Care Provider (PCP)	6,851.11
Zhu Dening	Practitioner - Primary Care Provider (PCP)	5,916.50
Jiangping Gan	Practitioner - Primary Care Provider (PCP)	2,324.50
Chixin Fang Medical Pc	Practitioner - Primary Care Provider (PCP)	9,018.09
Cai Min	Practitioner - Primary Care Provider (PCP)	6,614.12
Butt Rahila Md	Practitioner - Primary Care Provider (PCP)	4,059.66
Santana Domingo A Md	Practitioner - Primary Care Provider (PCP)	3,657.76
Lee Karen Tin Md	Practitioner - Primary Care Provider (PCP)	8,120.79
Jin Yan Md	Practitioner - Primary Care Provider (PCP)	7,751.04
Levitt Howard Lawrence Md	Practitioner - Primary Care Provider (PCP)	1.13
Ren Lili Md	Practitioner - Primary Care Provider (PCP)	5,110.94



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
 DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Ben-Meir Amos David	Practitioner - Primary Care Provider (PCP)	303.37
Rella Vincent J Md	Practitioner - Primary Care Provider (PCP)	686.47
Sencion Sergio M	Practitioner - Primary Care Provider (PCP)	1,537.79
Rim An Moo Md	Practitioner - Primary Care Provider (PCP)	142.03
Hwu Charles Joseph	Practitioner - Primary Care Provider (PCP)	2,530.58
Khanijou Rita Md	Practitioner - Primary Care Provider (PCP)	1,345.65
Decoo Ydelfonso A Md	Practitioner - Primary Care Provider (PCP)	2,753.82
Barbery Maria-Pilar	Practitioner - Primary Care Provider (PCP)	13,465.34
Garcia-Albarran Carmen M Md	Practitioner - Primary Care Provider (PCP)	2,026.84
Acevedo Mabel Md	Practitioner - Primary Care Provider (PCP)	741.19
Fashakin Emmanuel O Md	Practitioner - Primary Care Provider (PCP)	5,539.10
Gonjon Cheng Antonio Md	Practitioner - Primary Care Provider (PCP)	5,450.38
Yang Hui Chih Md	Practitioner - Primary Care Provider (PCP)	6,244.40
Alba Juan Andres Md	Practitioner - Primary Care Provider (PCP)	4,119.07
Lazala Polanco Carmen Md	Practitioner - Primary Care Provider (PCP)	10,353.66
Alcindor Claudia	Practitioner - Primary Care Provider (PCP)	42,425.26
Li Xiao-Qing Md	Practitioner - Primary Care Provider (PCP)	2,244.36
Jing Wuhua	Practitioner - Primary Care Provider (PCP)	28.65
Cornielle Jorge Luis Md	Practitioner - Primary Care Provider (PCP)	19,425.25
Cruz Alcedo Anselmo Md	Practitioner - Primary Care Provider (PCP)	6,305.89
Hu Jiong-Ming Md	Practitioner - Primary Care Provider (PCP)	1,963.87
Shah Sangita Tushar Md	Practitioner - Primary Care Provider (PCP)	1,055.15
Streete Sophia Md	Practitioner - Primary Care Provider (PCP)	20.98
Chhipa Mohammad Haroon Md	Practitioner - Primary Care Provider (PCP)	13,472.31
Teng Rui Er Md	Practitioner - Primary Care Provider (PCP)	5,778.79
Li Paul	Practitioner - Primary Care Provider (PCP)	2,352.86
Korneeva-Vladimirsky Irina Lvovna	Practitioner - Primary Care Provider (PCP)	1,366.02
Pena Pena Yomaris Mercedes Md	Practitioner - Primary Care Provider (PCP)	3,766.71
Benjamin Wu Md Pc	Practitioner - Primary Care Provider (PCP)	9,317.11

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Zheng Yi Xiu	Practitioner - Primary Care Provider (PCP)	1,961.01
Gao Pei	Practitioner - Primary Care Provider (PCP)	922.05
George Jacob V Md	Practitioner - Primary Care Provider (PCP)	12,402.81
Mejia Enrique F	Practitioner - Primary Care Provider (PCP)	4,116.21
Ganesh Lalitha Md	Practitioner - Primary Care Provider (PCP)	4,256.64
Jerez Jose R Md	Practitioner - Primary Care Provider (PCP)	10,591.47
Tio Arsenio Miguel Md	Practitioner - Primary Care Provider (PCP)	6,374.45
Sayad Karim Md	Practitioner - Primary Care Provider (PCP)	194.31
Modern East West Medical Pc	Practitioner - Primary Care Provider (PCP)	1,041.31
Huey Howard E Do	Practitioner - Primary Care Provider (PCP)	1,907.41
Estevez Juan T Md	Practitioner - Primary Care Provider (PCP)	8,153.34
Torres Marino A Md	Practitioner - Primary Care Provider (PCP)	17,253.41
Majeed Salamat Md	Practitioner - Primary Care Provider (PCP)	9,916.33
Nguyen Dustin Triet Md	Practitioner - Primary Care Provider (PCP)	5,224.29
Cheung William Md	Practitioner - Primary Care Provider (PCP)	5,049.27
Lyo Rosie Yen-Cho Md	Practitioner - Primary Care Provider (PCP)	1,553.88
A T Adebayo Md Pc	Practitioner - Primary Care Provider (PCP)	1,197.82
Hailiu Zuo Physician Pc	Practitioner - Primary Care Provider (PCP)	5,488.06
Castillo Alfredo Md	Practitioner - Primary Care Provider (PCP)	16,865.97
Zheng Hanbin Md	Practitioner - Primary Care Provider (PCP)	3,628.65
Alla Vijayakumar Md	Practitioner - Primary Care Provider (PCP)	60,347.41
Jiang Bao En Md	Practitioner - Primary Care Provider (PCP)	4,943.37
Jimenez Marcial	Practitioner - Primary Care Provider (PCP)	12,060.63
Mendez Jose Manuel Md	Practitioner - Primary Care Provider (PCP)	6,300.47
Wan Soo Lee Md Pc	Practitioner - Primary Care Provider (PCP)	3,357.74
Yahodaei Kamran Md	Practitioner - Primary Care Provider (PCP)	19,790.21
Chen Haifan Md	Practitioner - Primary Care Provider (PCP)	7,719.66
Sencion Franklin Md	Practitioner - Primary Care Provider (PCP)	9,320.13
Gamundi-Joaquin Rosa E Md	Practitioner - Primary Care Provider (PCP)	16,723.52



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

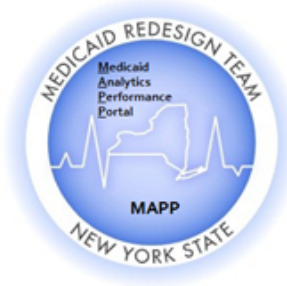
Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Moarefi Mehran-Reza Md	Practitioner - Primary Care Provider (PCP)	9.89
Bukhman Leonid Md	Practitioner - Primary Care Provider (PCP)	6,529.20
Ponieman Diego Andres Md	Practitioner - Primary Care Provider (PCP)	1,377.13
Alvarado-Rivera Jorge V Md	Practitioner - Primary Care Provider (PCP)	4,712.24
Janny A Ozuna Md Pllc	Practitioner - Primary Care Provider (PCP)	1,138.31
Hasan Muhammad A Md	Practitioner - Primary Care Provider (PCP)	2,613.58
Cerri Ruben Walter	Practitioner - Primary Care Provider (PCP)	17,771.97
Derek Sun	Practitioner - Primary Care Provider (PCP)	6,554.71
Feng Yun Md	Practitioner - Primary Care Provider (PCP)	1,459.95
Kumar Manish	Practitioner - Primary Care Provider (PCP)	3,840.10
Kreuze Jeanette	Practitioner - Primary Care Provider (PCP)	6,964.27
Haque Muhammad Mazharul Md	Practitioner - Primary Care Provider (PCP)	41,707.67
Babubhai I Patel Physician Pc	Practitioner - Primary Care Provider (PCP)	3,292.79
Norberto Candido Cesar Md	Practitioner - Primary Care Provider (PCP)	1,007.91
Villegas Emilio Md Pc	Practitioner - Primary Care Provider (PCP)	4,863.71
Gilani Tajammal H Md	Practitioner - Primary Care Provider (PCP)	2,639.34
Mazza Michael Anthony Md	Practitioner - Primary Care Provider (PCP)	4,497.41
Guzman Damiani Rodolfo W	Practitioner - Primary Care Provider (PCP)	1,898.30
Zhu Ming Md	Practitioner - Primary Care Provider (PCP)	4,305.99
Frousios Costas Anthony Md	Practitioner - Primary Care Provider (PCP)	16,035.61
Trinh Tuyen T Do Pllc	Practitioner - Primary Care Provider (PCP)	1,774.45
Martinez De Pimentel Nadia Md	Practitioner - Primary Care Provider (PCP)	18,129.28
Salim-Ortiz Jadiyi Md	Practitioner - Primary Care Provider (PCP)	1,283.56
Xu Min Md	Practitioner - Primary Care Provider (PCP)	3,708.30
Patel Babu A Md	Practitioner - Primary Care Provider (PCP)	840.49
Long Ann Yongzhou Md	Practitioner - Primary Care Provider (PCP)	1,274.09
Kan Sang Md	Practitioner - Primary Care Provider (PCP)	3,306.22
Francisco Richard L Md	Practitioner - Primary Care Provider (PCP)	5,313.09
Hanna Nader Ramses Md	Practitioner - Primary Care Provider (PCP)	8,087.15

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Carreno Jacqueline Md	Practitioner - Primary Care Provider (PCP)	52,061.45
Correa Michael Md	Practitioner - Primary Care Provider (PCP)	2,407.05
Zheng Jean Qingjun Md	Practitioner - Primary Care Provider (PCP)	2,553.47
Chan Robin Y C Md	Practitioner - Primary Care Provider (PCP)	90,136.35
Martinez Virginia Md	Practitioner - Primary Care Provider (PCP)	8,153.07
Acosta Dalisa J Md	Practitioner - Primary Care Provider (PCP)	11,869.26
Singiri Archana	Practitioner - Primary Care Provider (PCP)	12,220.29
Nejati Golali Md	Practitioner - Primary Care Provider (PCP)	5,836.57
Ambrose-Flaherty Stephanie	Practitioner - Primary Care Provider (PCP)	165,685.09
Diaz Angel A	Practitioner - Primary Care Provider (PCP)	1,024.34
Alberto Glendalyz	Practitioner - Primary Care Provider (PCP)	2,639.57
Krivitskaya Nataliya	Practitioner - Primary Care Provider (PCP)	3,994.82
Boxer William Paul	Practitioner - Primary Care Provider (PCP)	847.88
Byfield Celecia	Practitioner - Primary Care Provider (PCP)	21,219.50
Fukilman Ocas Jorge Md	Practitioner - Primary Care Provider (PCP)	1,817.90
Lui Sheung Bun Md	Practitioner - Primary Care Provider (PCP)	1,007.91
Thanjan Thresiamma George Md	Practitioner - Primary Care Provider (PCP)	4,037.01
Castanos Dilia M Md	Practitioner - Primary Care Provider (PCP)	3,103.89
Cheng King Shek Eric Md	Practitioner - Primary Care Provider (PCP)	1,471.58
Lederman Elliot Charles Md Pc	Practitioner - Primary Care Provider (PCP)	1,206.38
Ares Luz Delia Md	Practitioner - Primary Care Provider (PCP)	6,319.29
Zhao Jiansheng	Practitioner - Primary Care Provider (PCP)	4,039.35
Goris Jose Armando Md	Practitioner - Primary Care Provider (PCP)	10,146.87
Vijaykumar Sudha Md	Practitioner - Primary Care Provider (PCP)	16,712.84
Li Michael Yang Md	Practitioner - Primary Care Provider (PCP)	5,758.86
Adeyemo Adenike	Practitioner - Primary Care Provider (PCP)	9,019.54
Sahni Gunjeet Mandvi Md	Practitioner - Primary Care Provider (PCP)	13,646.33
Soto Maria B	Practitioner - Primary Care Provider (PCP)	6,073.73
Jamaica Family Practice &	Practitioner - Primary Care Provider (PCP)	2,748.10



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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Ramirez Julio Alberto Md	Practitioner - Primary Care Provider (PCP)	3,602.79
Shen Kuan Hung Md	Practitioner - Primary Care Provider (PCP)	15,895.12
Perez Emilio Ivan	Practitioner - Primary Care Provider (PCP)	2,404.01
Bouallali Hind	Practitioner - Primary Care Provider (PCP)	4,988.18
Cheung Sandy	Practitioner - Primary Care Provider (PCP)	2,724.99
Awan Khurram Shahzad	Practitioner - Primary Care Provider (PCP)	13,788.73
De Lara Francisco Arturo	Practitioner - Primary Care Provider (PCP)	11,013.43
Karimi Mahmood M Md	Practitioner - Primary Care Provider (PCP)	12,082.39
Wong Martha Shih Md	Practitioner - Primary Care Provider (PCP)	3,657.25
Caro Sixto R Md	Practitioner - Primary Care Provider (PCP)	13,645.39
Castellanos Roman Dario Md	Practitioner - Primary Care Provider (PCP)	66.59
Kairam Indira R Md	Practitioner - Primary Care Provider (PCP)	1,803.59
Ahuja Kishore Kanayalal Md	Practitioner - Primary Care Provider (PCP)	31,366.79
Mohan Santha Md	Practitioner - Primary Care Provider (PCP)	4,361.61
Patel Rajesh Jayantilal Md	Practitioner - Primary Care Provider (PCP)	9,704.04
Pinckney Isaiah Howard Ii Md	Practitioner - Primary Care Provider (PCP)	913.46
Florimon Felix Md	Practitioner - Primary Care Provider (PCP)	2,899.79
Espinal Alberto Comas Md	Practitioner - Primary Care Provider (PCP)	666.92
Ortiz Carlos A Jr Md	Practitioner - Primary Care Provider (PCP)	6,603.42
Lam Kin Yui Md	Practitioner - Primary Care Provider (PCP)	5,993.97
Pichardo Jesus Manuel Md	Practitioner - Primary Care Provider (PCP)	26,396.85
Catucci Candida	Practitioner - Primary Care Provider (PCP)	4,486.53
Qureshi Pervaiz Iqbal Md	Practitioner - Primary Care Provider (PCP)	1,027.95
Lee Hung-Sam Do	Practitioner - Primary Care Provider (PCP)	1,736.66
Adam Muhammad Sanni Md	Practitioner - Primary Care Provider (PCP)	5,886.28
Pilarte Juan Jose Md	Practitioner - Primary Care Provider (PCP)	5,318.31
Ginebra Fernando Arturo Md	Practitioner - Primary Care Provider (PCP)	3,882.29
Lao Wilfredo Sy Md	Practitioner - Primary Care Provider (PCP)	7,879.72
He Lan Md Pc	Practitioner - Primary Care Provider (PCP)	3,326.26

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Rosario-Amaro Francisco Md	Practitioner - Primary Care Provider (PCP)	16,371.81
Quijada Reucar Md	Practitioner - Primary Care Provider (PCP)	6,716.08
Apoeso Taiye Olubunmi Md	Practitioner - Primary Care Provider (PCP)	4,832.63
Jovellanos Valentin Pardo Md	Practitioner - Primary Care Provider (PCP)	2,884.72
Kevin J Guo Medical Pc	Practitioner - Primary Care Provider (PCP)	6,337.24
Mui Wingtat Md	Practitioner - Primary Care Provider (PCP)	1,691.97
Gonzalez Fausto A Md	Practitioner - Primary Care Provider (PCP)	12,961.31
Gonzalez Adrian Md	Practitioner - Primary Care Provider (PCP)	10,802.45
Chabla Juan Francisco Do	Practitioner - Primary Care Provider (PCP)	4,099.20
Haroon Sameera N Md	Practitioner - Primary Care Provider (PCP)	3,744.13
Ghaffar Tahira Farooqi Md	Practitioner - Primary Care Provider (PCP)	4,262.86
Hangjun Jang Md	Practitioner - Primary Care Provider (PCP)	3,206.33
Belliard Christian Arturo Estevez	Practitioner - Primary Care Provider (PCP)	2,939.41
Jianlin Wu	Practitioner - Primary Care Provider (PCP)	5,842.09
Karayil Ajith	Practitioner - Primary Care Provider (PCP)	4,217.62
De La Cadena Flor S Md	Practitioner - Primary Care Provider (PCP)	10,767.40
Haimi Joseph Shayani Md	Practitioner - Primary Care Provider (PCP)	4,267.90
Cristinoiu Lucia L Md	Practitioner - Primary Care Provider (PCP)	6,590.91
Valencia Hector Antonio	Practitioner - Primary Care Provider (PCP)	5,697.18
Nina Ortega Luis Cesar Md	Practitioner - Primary Care Provider (PCP)	8,571.72
Skeivys Saulius J Md Pc	Practitioner - Primary Care Provider (PCP)	8,725.87
Procure Medical Services Pc	Practitioner - Primary Care Provider (PCP)	3,057.21
Tan Reynaldo G Md	Practitioner - Primary Care Provider (PCP)	1,352.91
Arumugam Thangamuthu R Md	Practitioner - Primary Care Provider (PCP)	3,145.94
Ramirez Alvaro Md	Practitioner - Primary Care Provider (PCP)	6,463.49
Molnar Thomas	Practitioner - Primary Care Provider (PCP)	577.01
Comprehensive Community Pediatrics	Practitioner - Primary Care Provider (PCP)	996.46
Molina Alveris Md	Practitioner - Primary Care Provider (PCP)	2,987.28
Amr Nayel Md Pc	Practitioner - Primary Care Provider (PCP)	8,878.83



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
First Step Pediatrics Pc	Practitioner - Primary Care Provider (PCP)	7,471.83
Gad Medical Pllc	Practitioner - Primary Care Provider (PCP)	4,803.73
Chan Chun-Kit	Practitioner - Primary Care Provider (PCP)	5,230.42
Mercedes Betty Md	Practitioner - Primary Care Provider (PCP)	4,598.34
Jindal Michelle Anne Md	Practitioner - Primary Care Provider (PCP)	1,623.61
Rishe Eric Md	Practitioner - Primary Care Provider (PCP)	267.87
Wang Yuancong Md	Practitioner - Primary Care Provider (PCP)	3,858.37
Eric Zhou Medical Office Pc	Practitioner - Primary Care Provider (PCP)	4,502.60
Marte Grecia A Md	Practitioner - Primary Care Provider (PCP)	1,509.26
Adeyanju Olufunmilayo Olajumoke Md	Practitioner - Primary Care Provider (PCP)	5,823.11
Lu Li	Practitioner - Primary Care Provider (PCP)	10,340.05
Cordoba Vargas Sandra Edith	Practitioner - Primary Care Provider (PCP)	3,588.68
Practitioner - Non-Primary Care Provider (PCP)		643,539.77
Leung Ching Sum Md	Practitioner - Non-Primary Care Provider (PCP)	5,495.62
Ward Andrea Maria Dpm	Practitioner - Non-Primary Care Provider (PCP)	81.83
Hirshfield Gary S Md	Practitioner - Non-Primary Care Provider (PCP)	5,880.20
Weimin Qu	Practitioner - Non-Primary Care Provider (PCP)	3,219.78
Ma Keyan Md	Practitioner - Non-Primary Care Provider (PCP)	933.04
Liang Lawrence Md	Practitioner - Non-Primary Care Provider (PCP)	7,579.17
C & W Medical Llc	Practitioner - Non-Primary Care Provider (PCP)	3,342.56
Zhang David	Practitioner - Non-Primary Care Provider (PCP)	849.12
Ansari Parswa Md	Practitioner - Non-Primary Care Provider (PCP)	32.90
Diaz- Valdez Ariam	Practitioner - Non-Primary Care Provider (PCP)	9,746.14
Au Chun Shuen	Practitioner - Non-Primary Care Provider (PCP)	65,192.86
Ko Wilson Md	Practitioner - Non-Primary Care Provider (PCP)	3,566.12
Thaw Emerald M	Practitioner - Non-Primary Care Provider (PCP)	2,304.97
Aldana-Bernier Lilian	Practitioner - Non-Primary Care Provider (PCP)	6,145.67
Huo Jerry Md	Practitioner - Non-Primary Care Provider (PCP)	7,078.51
Hu Mary Xiao-Jiang Md	Practitioner - Non-Primary Care Provider (PCP)	942.68

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Thierman David H	Practitioner - Non-Primary Care Provider (PCP)	103.29
Losier Robert J	Practitioner - Non-Primary Care Provider (PCP)	181.44
Yin Xuebin Md	Practitioner - Non-Primary Care Provider (PCP)	2,924.80
Shankar Adurthy Ananth	Practitioner - Non-Primary Care Provider (PCP)	153,731.05
Tenembaum Moises Marcos Md	Practitioner - Non-Primary Care Provider (PCP)	434.54
Bamji Dinshaw D Md	Practitioner - Non-Primary Care Provider (PCP)	149.83
Kalman Jill Md	Practitioner - Non-Primary Care Provider (PCP)	392.56
Cheng Ling Ouyang Md	Practitioner - Non-Primary Care Provider (PCP)	4,696.78
Xu Richard Li-Cheng	Practitioner - Non-Primary Care Provider (PCP)	1,568.38
Yeung Vincent Wah-Sang Md	Practitioner - Non-Primary Care Provider (PCP)	2,139.84
Kuang Liren Md	Practitioner - Non-Primary Care Provider (PCP)	1,041.51
Holtzman Dvorah G	Practitioner - Non-Primary Care Provider (PCP)	6.81
Hasanovic Adnan	Practitioner - Non-Primary Care Provider (PCP)	17.02
Markowitz Mindy	Practitioner - Non-Primary Care Provider (PCP)	2.27
Lee Michael Jerry	Practitioner - Non-Primary Care Provider (PCP)	13,521.52
Gu Yeon Sook	Practitioner - Non-Primary Care Provider (PCP)	13,443.57
Daniel Mathews, Dpm	Practitioner - Non-Primary Care Provider (PCP)	570.68
Foong Anthony Md	Practitioner - Non-Primary Care Provider (PCP)	77.37
Chan Richard Md	Practitioner - Non-Primary Care Provider (PCP)	2,281.65
Lim Jessica Wong Md	Practitioner - Non-Primary Care Provider (PCP)	4.54
Hernandez Miguel Rafael Md	Practitioner - Non-Primary Care Provider (PCP)	162.92
Ng John Paul Tracy Md	Practitioner - Non-Primary Care Provider (PCP)	1,268.58
Dorsky Joshua I Md	Practitioner - Non-Primary Care Provider (PCP)	9.08
Hsieh Helen Md	Practitioner - Non-Primary Care Provider (PCP)	5,007.73
Cui Jian Md	Practitioner - Non-Primary Care Provider (PCP)	10,817.75
Garcia Sandra Patricia Dpm	Practitioner - Non-Primary Care Provider (PCP)	68.41
Mo Lihua Md	Practitioner - Non-Primary Care Provider (PCP)	1,199.86
Samadi David Md	Practitioner - Non-Primary Care Provider (PCP)	5.67
Li Wensong	Practitioner - Non-Primary Care Provider (PCP)	2,279.31



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Mao Yongming Md	Practitioner - Non-Primary Care Provider (PCP)	2,315.17
Christopher Chow	Practitioner - Non-Primary Care Provider (PCP)	6.55
Wang Mei	Practitioner - Non-Primary Care Provider (PCP)	933.04
Teresa Min Jung O Md	Practitioner - Non-Primary Care Provider (PCP)	11.35
Tom Winston Chet Ying Md	Practitioner - Non-Primary Care Provider (PCP)	2,605.48
Tsai Nancy M.D.	Practitioner - Non-Primary Care Provider (PCP)	6,323.07
Ho Garman T Md	Practitioner - Non-Primary Care Provider (PCP)	6,789.05
Mintzer Susan H	Practitioner - Non-Primary Care Provider (PCP)	116,338.23
Narasimhan Gopal	Practitioner - Non-Primary Care Provider (PCP)	5,668.43
Yin June	Practitioner - Non-Primary Care Provider (PCP)	4,646.92
Ahn Myung Cha	Practitioner - Non-Primary Care Provider (PCP)	68,989.92
Drew Michael S Md	Practitioner - Non-Primary Care Provider (PCP)	48.79
Lochard Jean Joseph Md	Practitioner - Non-Primary Care Provider (PCP)	814.95
Posner David H Md	Practitioner - Non-Primary Care Provider (PCP)	11,213.40
He Cong Md	Practitioner - Non-Primary Care Provider (PCP)	3,048.31
Wei Huachen Md	Practitioner - Non-Primary Care Provider (PCP)	16,278.31
Stepensky Leon Dpm	Practitioner - Non-Primary Care Provider (PCP)	197.37
Nyein Roland Md	Practitioner - Non-Primary Care Provider (PCP)	4,856.34
Chen Chun Ming Md	Practitioner - Non-Primary Care Provider (PCP)	1,102.15
Lus Medical Associates Pllc	Practitioner - Non-Primary Care Provider (PCP)	2,251.68
Bai Chun	Practitioner - Non-Primary Care Provider (PCP)	66.77
Li Jianjun	Practitioner - Non-Primary Care Provider (PCP)	23,274.15
Dai Guorong Md	Practitioner - Non-Primary Care Provider (PCP)	1,459.69
Guzman Eliscer Md	Practitioner - Non-Primary Care Provider (PCP)	7,849.92
Kuan Jackson Hsun Md	Practitioner - Non-Primary Care Provider (PCP)	1,328.63
Chang Keith C Md	Practitioner - Non-Primary Care Provider (PCP)	9,873.07
Chan Alice Man Ccc-Audiology	Practitioner - Non-Primary Care Provider (PCP)	45.55
Youngewirth Elizabeth Dpm	Practitioner - Non-Primary Care Provider (PCP)	311.70
Taveras Fernando T	Practitioner - Non-Primary Care Provider (PCP)	1,279.30

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Adebiyi Adelowo Kayode Md	Practitioner - Non-Primary Care Provider (PCP)	678.29
He Zili	Practitioner - Non-Primary Care Provider (PCP)	1,816.53
Hernandez Lincoln Md	Practitioner - Non-Primary Care Provider (PCP)	61.20
Attoti Chandana	Practitioner - Non-Primary Care Provider (PCP)	556.54
Hospital		0
	Hospital	0
Clinic		437,043.21
Joseph P Addabbo Family Hlth	Clinic	124,742.90
Samaritan Village Inc	Clinic	24,172.96
Charles B Wang Comm Hth Ctr I	Clinic	261,785.55
Hillside Polymedic D Ant T Ctr	Clinic	26,341.80
Case Management / Health Home		0
	Case Management / Health Home	0
Mental Health		28,654.68
Aids Ctr Of Queens County Inc	Mental Health	28,654.68
Substance Abuse		0
	Substance Abuse	0
Nursing Home		0
	Nursing Home	0
Pharmacy		0
	Pharmacy	0
Hospice		0
	Hospice	0
Community Based Organizations		0
	Community Based Organizations	0
All Other		59,983.76
Mb Medical Associates Pc	All Other	5,384.53
Help/Psi Aids Adhcp	All Other	38,233.14
Global Medical Associates Pllc	All Other	3,097.26



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
 DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Ny Empire Medical Pc	All Other	3,156.79
Wong Timothy	All Other	58.69
Ablan Danilo Nagtalon	All Other	5,172.79
Dong-Hong Shong Md Pc	All Other	10.33
Cheuk W Lau Md Pc	All Other	4,870.23
Uncategorized		859.45
David Mun Md Pc	Uncategorized	849.12
Cindy Chen Md Pc	Uncategorized	10.33



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Waiver Quarterly Update Amount By Provider			
Provider Name	Provider Category	IA Provider Approval/Rejection Indicator	DY2Q2
Additional Providers			0
	Additional Providers		0



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Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 1.5 - Prescribed Milestones

Instructions :

Please provide updates to baseline target dates and work breakdown tasks with target dates for required milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement. Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Complete funds flow budget and distribution plan and communicate with network	Completed	Funds Flow Budget and Distribution Plan, signed off by your Finance Committee, including details of your approach to funds flow on a whole-PPS and project-by-project basis; evidence of involvement of provider network in developing funds flow methodology.	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	YES

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Complete funds flow budget and distribution plan and communicate with network	



**New York State Department Of Health
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Advocate Community Providers, Inc. (PPS ID:25)

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 1.6 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
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No Records Found

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
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**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 1.7 - PPS Budget - Non-Waiver Revenue (Baseline)

Instructions :

This table contains five budget categories for non-waiver revenue baseline budget reporting . Please add rows to this table as necessary in order to identify sub-categories.

Budget Items	DY1 (\$)	DY2 (\$)	DY3 (\$)	DY4 (\$)	DY5 (\$)	Total (\$)
Non-Waiver Revenue	58,268,131	58,268,131	58,268,131	58,268,130	58,268,130	291,340,653
Cost of Project Implementation & Administration	17,480,440	17,480,440	17,480,440	17,480,440	17,480,436	87,402,196
Administration	5,244,132	5,244,132	5,244,132	5,244,132	5,244,131	26,220,659
Implementation	12,236,308	12,236,308	12,236,308	12,236,308	12,236,305	61,181,537
Revenue Loss	6,992,176	6,992,176	6,992,176	6,992,176	6,992,174	34,960,878
Internal PPS Provider Bonus Payments	22,141,890	22,141,890	22,141,890	22,141,890	22,141,888	110,709,448
Cost of non-covered services	2,913,407	2,913,407	2,913,407	2,913,407	2,913,405	14,567,033
Other	8,740,220	8,740,220	8,740,220	8,740,220	8,740,218	43,701,098
Contingency	5,826,813	5,826,813	5,826,813	5,826,813	5,826,813	29,134,065
Other	2,913,407	2,913,407	2,913,407	2,913,407	2,913,405	14,567,033
Total Expenditures	58,268,133	58,268,133	58,268,133	58,268,133	58,268,121	291,340,653
Undistributed Revenue	0	0	0	0	9	0

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
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Narrative Text :

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 1.8 - PPS Budget - Non-Waiver Revenue (Quarterly)

Instructions :

Please include updates on non-waiver revenue budget items for this quarterly reporting period. Reported actual spending will be compared to baseline projections and deviations will be evaluated. Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

Benchmarks

Non-Waiver Revenue DY2	Total Non-Waiver Revenue	Undistributed Non-Waiver Revenue YTD	Undistributed Non-Waiver Revenue Total
58,268,131	291,340,653	53,281,496	286,354,018

Budget Items	DY2 Q2 Quarterly Amount - Update	Cumulative Spending to Date (DY1 - DY5)	Remaining Balance in Current DY	Percent Remaining in Current DY	Cumulative Remaining Balance	Percent Remaining of Cumulative Balance
Cost of Project Implementation & Administration	4,986,635	4,986,635	12,493,805	71.47%	82,415,561	94.29%
Administration	4,986,635					
Implementation	0					
Revenue Loss	0	0	6,992,176	100.00%	34,960,878	100.00%
Internal PPS Provider Bonus Payments	0	0	22,141,890	100.00%	110,709,448	100.00%
Cost of non-covered services	0	0	2,913,407	100.00%	14,567,033	100.00%
Other	0	0	8,740,220	100.00%	43,701,098	100.00%
Contingency	0					
Other	0					
Total Expenditures	4,986,635	4,986,635				

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Narrative Text :



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Advocate Community Providers, Inc. (PPS ID:25)

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
 DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 1.9 - PPS Flow of Funds - Non-Waiver Revenue (Baseline)

Instructions :

In the table below, please detail your PPS's projected flow of non-waiver funds by provider type.

Funds Flow Items	DY1 (\$)	DY2 (\$)	DY3 (\$)	DY4 (\$)	DY5 (\$)	Total (\$)
Non-Waiver Revenue	58,268,131	58,268,131	58,268,131	58,268,130	58,268,130	291,340,653
Practitioner - Primary Care Provider (PCP)	12,818,990	12,818,990	12,818,990	12,818,989	12,818,989	64,094,948
Practitioner - Non-Primary Care Provider (PCP)	2,913,407	2,913,407	2,913,407	2,913,407	2,913,407	14,567,035
Hospital	7,971,080	7,971,080	7,971,080	7,971,080	7,971,080	39,855,400
Clinic	640,949	640,949	640,949	640,949	640,949	3,204,745
Case Management / Health Home	58,268	58,268	58,268	58,268	58,268	291,340
Mental Health	582,681	582,681	582,681	582,681	582,681	2,913,405
Substance Abuse	582,681	582,681	582,681	582,681	582,681	2,913,405
Nursing Home	699,218	699,218	699,218	699,218	699,218	3,496,090
Pharmacy	116,536	116,536	116,536	116,536	116,536	582,680
Hospice	75,749	75,749	75,749	75,749	75,749	378,745
Community Based Organizations	798,273	798,273	798,273	798,273	798,273	3,991,365
All Other	850,715	850,715	850,715	850,715	850,715	4,253,575
Uncategorized	9,410,303	9,410,303	9,410,303	9,410,303	9,410,303	47,051,515
PPS PMO	20,749,281	20,749,281	20,749,281	20,749,281	20,749,281	103,746,405
Total Funds Distributed	58,268,131	58,268,131	58,268,131	58,268,130	58,268,130	291,340,653
Undistributed Non-Waiver Revenue	0	0	0	0	0	0

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
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Narrative Text :



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
 DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✓ IPQR Module 1.10 - PPS Flow of Funds - Non-Waiver Revenue (Quarterly)

Instructions :

Please include updates on flow of funds for this quarterly reporting period by importing the PIT file and filling out the PPS PMO line manually. Reported actual fund distribution will be compared to baseline projections and deviations will be evaluated.

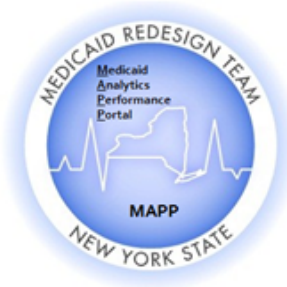
Any explanations regarding deviations from baseline projections must be included within the textbox, not as narrative within uploaded documentation.

Benchmarks

Non-Waiver Revenue DY2	Total Non-Waiver Revenue	Undistributed Non-Waiver Revenue YTD	Undistributed Non-Waiver Revenue Total
58,268,131.00	291,340,653.00	53,281,496.00	286,354,018.00

Funds Flow Items	DY2 Q2 Quarterly Amount - Update	Percentage of Safety Net Funds - DY2 Q2 Quarterly Amount - Update	Safety Net Funds Flowed YTD	Safety Net Funds Percentage YTD	Total Amount Disbursed to Date (DY1-DY5)	DY Adjusted Difference	Cumulative Difference
Practitioner - Primary Care Provider (PCP)	0	0.00%	0	0.00%	0	12,818,990	64,094,948
Practitioner - Non-Primary Care Provider (PCP)	0	0.00%	0	0.00%	0	2,913,407	14,567,035
Hospital	0	0.00%	0	0.00%	0	7,971,080	39,855,400
Clinic	0	0.00%	0	0.00%	0	640,949	3,204,745
Case Management / Health Home	0	0.00%	0	0.00%	0	58,268	291,340
Mental Health	0	0.00%	0	0.00%	0	582,681	2,913,405
Substance Abuse	0	0.00%	0	0.00%	0	582,681	2,913,405
Nursing Home	0	0.00%	0	0.00%	0	699,218	3,496,090
Pharmacy	0	0.00%	0	0.00%	0	116,536	582,680
Hospice	0	0.00%	0	0.00%	0	75,749	378,745
Community Based Organizations	0	0.00%	0	0.00%	0	798,273	3,991,365
All Other	0	0.00%	0	0.00%	0	850,715	4,253,575
Uncategorized	0	0.00%	0	0.00%	0	9,410,303	47,051,515
Additional Providers	0	0.00%	0	0.00%	0		

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Advocate Community Providers, Inc. (PPS ID:25)

Funds Flow Items	DY2 Q2 Quarterly Amount - Update	Percentage of Safety Net Funds - DY2 Q2 Quarterly Amount - Update	Safety Net Funds Flowed YTD	Safety Net Funds Percentage YTD	Total Amount Disbursed to Date (DY1-DY5)	DY Adjusted Difference	Cumulative Difference
PPS PMO	4,986,635	100.00%	4,986,635	100.00%	4,986,635	15,762,646	98,759,770
Total	4,986,635	100.00%	4,986,635	100.00%	4,986,635		

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
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No Records Found

Narrative Text :

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Non-Waiver Quarterly Update Amount By Provider		
Provider Name	Provider Category	DY2Q2
Practitioner - Primary Care Provider (PCP)		0
	Practitioner - Primary Care Provider (PCP)	0
Practitioner - Non-Primary Care Provider (PCP)		0
	Practitioner - Non-Primary Care Provider (PCP)	0
Hospital		0
	Hospital	0
Clinic		0
	Clinic	0
Case Management / Health Home		0
	Case Management / Health Home	0
Mental Health		0
	Mental Health	0
Substance Abuse		0
	Substance Abuse	0
Nursing Home		0
	Nursing Home	0
Pharmacy		0
	Pharmacy	0
Hospice		0
	Hospice	0
Community Based Organizations		0
	Community Based Organizations	0
All Other		0
	All Other	0
Uncategorized		0
	Uncategorized	0



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 Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Non-Waiver Quarterly Update Amount By Provider			
Provider Name	Provider Category	IA Provider Approval/Rejection Indicator	DY2Q2
Additional Providers			0
	Additional Providers		0

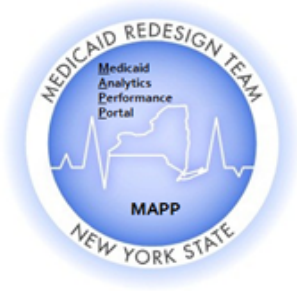


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Advocate Community Providers, Inc. (PPS ID:25)

IPQR Module 1.11 - IA Monitoring

Instructions :



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
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Advocate Community Providers, Inc. (PPS ID:25)

Section 02 – Governance

✅ IPQR Module 2.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Note some milestones include minimum expected completion dates.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Finalize governance structure and sub-committee structure	Completed	This milestone must be completed by 9/30/2015. Governance and committee structure, signed off by PPS Board.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	YES
Task 1 ACP Board Structure	Completed	1 Complete ACP Board Structure	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 ACP Committee Structure	Completed	2 Complete ACP Committee Structure	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 3 ACP Board of Directors	Completed	3 Select and confirm ACP Board of Directors	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 4 ACP Officers	Completed	4 Appoint ACP Officers	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 5 Approve Bylaws	Completed	5 Approve Bylaws	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 6 Steering Committee	Completed	6 Establish Steering Committee	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 7 Committee Chairs/Co-Chairs	Completed	7 Select Committee Chairs/Co-Chairs	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 8 ACP Subcommittees	Completed	8 Finalize ACP subcommittees and membership	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 9 Meeting Schedules	Completed	9 Establish Board and Committee Meeting Schedules	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 10 Operational Locations	Completed	10 Determine ACP operational locations	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Milestone #2 Establish a clinical governance structure, including clinical quality committees for each DSRIP project	Completed	This milestone must be completed by 12/31/2015. Clinical Quality Committee charter and committee structure chart	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	YES



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Advocate Community Providers, Inc. (PPS ID:25)

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Task 1 Appoint CMO	Completed	1 Appoint Chief Medical Officer, Jackson Kuan, MD	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 Clinical Quality Committees	Completed	2 Establish clinical quality committees for each project	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 3 Evidence-Based Protocols	Completed	3 Establish and distribute evidence-based clinical protocols and processes	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 4 Procedure Manual	Completed	4 Create and distribute process and procedure manuals for compliance	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 5 Physician Engagement Teams	Completed	5 Establish physician engagement teams to monitor adherence to protocols and workflow processes. The physician engagement teams include members from the communities in which the physicians serve. They are culturally and linguistically competent therefore understand the culture of the communities and can provide assistance and support to the physicians in the implementation of the projects in a way that is most efficient.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 6 Performance Reporting Metrics	Completed	6 Create and adopt Performance reporting Metrics. These performance metrics are developed from industry and evidence based monitoring standards which reveal not only when a patient is engaged, but also the timeliness and effectiveness of the interventions. These metrics include such values a, Hgb a1c levels to demonstrate effectiveness of hypoglycemic therapy, Monitoring BP levels, Flow sheets demonstrating episodic treatments and exacerbations, Rates of hospital utilizations and trending of these values to show progression or control and enhanced performance and outcome.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 7 PAC and Care Team Roles	Completed	7 Confirm PAC and Care Team members and establish defined roles for each. The PAC serves in ACP as a true advisory committee, reviewing processes and protocols and providing ACP's Project Management Office with input on efficacy of same. ACP's PAC represents and communicates the voice of its over 200 partners. The PAC is made up of ACP partners from all different provider types and they are part of the ACP Care Teams which they then serve to represent before the PMO. They bring the voice of the	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		partners as well as the feedback on processes, which they also assist in creating. The Care Teams are regional and are made up of all ACP partners of all provider types within a geographical area. The Care Teams are the "ground troops" of ACP. They are the partners committed to providing care to ACP's patients in accordance with the ACP established protocols and processes.							
Task 8 Meeting Schedules	Completed	8 Establish committee meeting schedules	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Milestone #3 Finalize bylaws and policies or Committee Guidelines where applicable	Completed	This milestone must be completed by 9/30/2015. Upload of bylaws and policies document or committee guidelines.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	YES
Task 1 Approve bylaws	Completed	1 Board of Directors will approve bylaws which shall be adopted immediately	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 Appoint Compliance Officer	Completed	2 Appoint Compliance Officer and Communicate Compliance Policies and Procedures	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 3 Adopt Key Corporate Compliance Policies	Completed	3 Compliance Officer and committee will develop and Adopt Key Corporate Policies and Procedures including but not limited to: Code of ethics, Conflict of interest, compliance, document destruction and Retention, HR policies and procedures, HIPAA, whistleblower policy.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 4 Dispute Resolution Policies	Completed	4 Board, compliance officer, and in-house attorney will draft and Adopt Dispute Resolution Policies and Procedures. If there is a conflict among partners, stakeholders or within any committees, the Board will make a determination after considering the facts and feedback from such partners and stakeholders. Depending on the nature of the issue, the issue may be submitted to one of the functional committees (i.e., clinical, finance, HIT, audit, and compliance committees) if the issue falls within the scope of any such committee, or a special subcommittee of the Steering Committee or the PAC.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 5 Provider Performance Policies	Completed	5 Board, compliance officer and in-house attorney shall draft and Adopt Underperforming Provider Policies and Procedures and include them in the Provider Contracts	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 6 Committee Guidelines	Completed	6 Develop Committee guidelines for each committee	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	



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Advocate Community Providers, Inc. (PPS ID:25)

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #4 Establish governance structure reporting and monitoring processes	Completed	This milestone must be completed by 12/31/2015. Governance and committee structure document, including description of two-way reporting processes and governance monitoring processes.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	YES
Task 1 Analytics Team	Completed	1 Create Analytics team for pulling metrics, creating reports and providing analysis to present to clinical management	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 2 Clinical Quality Team Roles	Completed	2 Define roles of Clinical Quality Committee in monitoring and reporting	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 3 Identify Performance Metrics	Completed	3 Identify and Select Key Metrics to Assess Achievement/Engagement performance. These metrics will include analysis of patients achieving target goals and those not, number of patients engaged using internal reporting codes pulled from EMR and practice management systems, measurement of avoidable hospital utilizations based on PPS developed algorithms that use predictive measures such as length of hospital stay/ICD/number of episodes, and others. Performance of the governing committees will also be measured. These will be measured through committee meeting minute analysis, through review of committee reports on analyses done on reports received and reviewed. Results should be analyzed by the committees and reports provided to the PMO including General Project Manager and CMO, Reports from the committees shall be due periodically, sometimes monthly and sometimes quarterly depending on the committee and the data being analyzed. Some examples are the Clinical Quality Committee may receive and review reports on performance monthly, which it then must analyze and present findings to the PMO monthly. The Clinical Committee shall review and update evidence based protocols and processes at a minimum yearly which it will then present to the PMO for distribution to partners. All other committees and workgroups also have deliverables that will be measured consistently and evaluated for efficiency, accuracy and effectiveness.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 4 Collecting and Reporting Data	Completed	4 Develop Tools for Collecting and Reporting Data from all Participating Providers and Communicating Results. These	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		tools will include homegrown reporting codes that are posted at encounters, use of registries, MCO reports, laboratory test result values, amongst others.							
Task 5 Reporting Schedule	Completed	5 Establish reporting periodicity. The PPS foresees a monthly reporting schedule	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 6 Reporting Baselines and Thresholds	Completed	6 Establish baselines and thresholds to measure provider performance and implement corrective action plan implementation needs	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 7 Corrective Action Plan	Completed	7 Develop a provider corrective action plans and penalty/reward system to be implemented by provider quality control and communications committee	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 8 Reporting Workflows	Completed	8 Establish upstream information workflow processes (information from providers to PPS)	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 9 Oversight Authority	Completed	9 Determine oversight authority for implementation of corrective action	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Milestone #5 Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services, housing providers, law enforcement)	Completed	Community engagement plan, including plans for two-way communication with stakeholders.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	NO
Task 1 Community Engagement	Completed	1 Establish community engagement unit/hire unit director and Manager of Community Health Worker Program.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 Establish Communications Committee	Completed	2 Establish Communications committee and hire and engage a communications/public relations firm with experience in health care.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 3 Messaging	Completed	3 Conduct messaging exercise	05/01/2015	07/31/2015	05/01/2015	07/31/2015	09/30/2015	DY1 Q2	
Task 4 Finalize Communications Plan	Completed	4 Finalize Communications Plan in accordance with DSRIP guidelines	05/01/2015	07/31/2015	05/01/2015	07/31/2015	09/30/2015	DY1 Q2	
Task 5 Communications Plan	Completed	5 Provide draft of community engagement plan. The plan includes the following components: definition of the role that neighborhood based medical practices will play within the overall community engagement plan; plan to conduct outreach to patients within the community that may not be in contact with primary care physicians; Identification of major/local engagement events to include engagement	08/01/2015	09/30/2015	08/01/2015	09/30/2015	09/30/2015	DY1 Q2	



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		through educational activities such as health fairs and Stanford Model educational meetings/seminars, amongst others; plans for media outreach (including local and ethnic Media); schedule of outreach efforts to key elected and appointed officials; CBO outreach and engagement plan and schedule; public and non-provider organizations engagement plan; Outreach to community and school boards and local health department offices; and Recruitment, training and deployment of CHWs as a major component of the overall plan to engage the community. This engagement will insure our ability to reach patients in their own culture and neighborhood, increase health literacy, and allow patients access to more efficient care and preventative services.							
Task 6 Finalize Schedule	Completed	6 Finalize monthly schedule of engagement activities/events	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 7 Steering Committee Review	Completed	7 Submit final draft of the community engagement plan to Steering Committee for input and governance board for review and approval.	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Milestone #6 Finalize partnership agreements or contracts with CBOs	In Progress	Signed CBO partnership agreements or contracts.	04/01/2016	03/31/2020	04/01/2016	03/31/2020	03/31/2020	DY5 Q4	NO
Task 1 Establish CBO Proposal	Completed	1 Working closely with partners and selected leaders of major CBOs, ACP staff under the division of Workforce, Community and Government Relations will develop a "Proposal to Establish the CBO Partnership Program" (CBOPP) for collaborating on outreach and organizing, patient engagement and education, community health workers, and cultural competence and health literacy training. Once proposal is approved by Senior Management, staff initiates implementation.	08/01/2015	09/30/2015	08/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 2 Expression of Interest Request	Completed	2 The partnership development process begins with the issuance of A request for An Expression of Interest (EI). The request for an EI is circulated amongst key CBOs throughout the target area on an invitational basis. A number of factors will be utilized to determine which CBOs will be invited to submit responses to the EI request. These may include:	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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		Affinity with ACP's goals and objectives; population health needs and capacity to provide needed services; CBOs whose major area of operations is within a "Hotspot;" relationship of the CBO to the community; experience of the CBO in the engagement and deployment of CHWs; cultural competence; and service offerings compatible with ACP needs and interests. Prior to the release of the solicitation, staff submits the proposed EI to the Compliance Officer and legal counsel for review and approval.							
Task 3 Review EI Responses	Completed	3 ACP staff reviews responses to the EI and works with the pre-selected CBOs to draft contractual agreements delineating areas of collaboration. An Ad Hoc Committee composed of Board and Steering Committee members is created to review and finalize agreements with CBOs based on staff recommendations. The agreements clearly define project objectives and a plan to monitor and evaluate activities and outcomes.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 4 Execute Agreement and Training	Completed	4 Contractual agreements with CBOs are executed and staff provide training, oversight and guidance.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Milestone #7 Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and mental hygiene, Social Services, Corrections, etc.)	In Progress	Agency Coordination Plan.	04/01/2016	03/31/2020	04/01/2016	03/31/2020	03/31/2020	DY5 Q4	NO
Task 1 Identify Local Support Agencies	Completed	1 Through the CNA process ACP identified several agencies including local neighborhood, state and city that can afford services to its patients to better help in the implementation of treatment plans and to improve patient's health and health literacy. These agencies include the New York City department of health and mental hygiene, NYC Department of Education, NY QUITs, and the NYC HRA among others. ACP also has relationships and partners that it is leveraging such as with Office of Mental Health, and organizations of people with disability such as Federation of Organizations for NYS Mentally Disabled Through its relationship with these	04/01/2015	07/31/2015	04/01/2015	07/31/2015	09/30/2015	DY1 Q2	



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		and other agencies ACP will coordinate patient care and education . Some of these agencies represented on the PAC, Clinical Quality Committees as well as the Care Teams. ACP will Identify and select all pertinent state and local public sector agencies that will assist in providing services to ACP patients including housing, tobacco cessation, in school treatment plans, etc.							
Task 2 Develop an ACP Public Agency Coordination Plan	Completed	2 Establish division for Workforce, Community and Government Relations; appoint Division Director.	04/01/2015	07/31/2015	04/01/2015	07/31/2015	09/30/2015	DY1 Q2	
Task 3 CBO Liaison	Completed	3 Identify staff (liaison) responsible for coordinating with public sector agencies; coordinate plan development activities with the PAC.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 4 Review ACP Public Agency Coordination Plan	Completed	4 Draft report identifying public sector agencies that will assist in providing services to ACP patients. The report will include information about the services to be provided, the roles and responsibilities of key public sector agencies within DSRIP.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 5 Finalize ACP Public Agency Coordination Plan	Completed	5 Finalize plan to execute collaborative agreements with public sector agencies. Such agreements will include process and procedures for the exchange of information including patient specific information in accordance with HIPPA regulations, process and procedures for client referrals, opportunities for joint planning including involvement in Advisory Committees whenever possible, collaboration around domain 4 initiatives, opportunities for training around a wide range of issues including cultural competency and health literacy, involvement in joint community engagement activities and events, and participation in public/community events.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 6 Submit Agency Coordination Plan	Completed	6 Submit agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels to Steering Committee for input and governing board for review and approval.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Milesk #8 Finalize workforce communication and engagement plan	Completed	Workforce communication & engagement plan, including plans for two-way communication with all levels of the workforce, signed off by PPS workforce governance body	09/01/2015	12/31/2015	09/01/2015	12/31/2015	12/31/2015	DY1 Q3	NO



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		(e.g. workforce transformation committee).							
Task 1 Workforce Communication and Engagement Strategy	Completed	1 Establish a working group of the Workforce Committee to develop a comprehensive Workforce Communication and Engagement Strategy based on PPS Communication Plan; subcommittee includes labor representatives.	09/01/2015	09/30/2015	09/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 2 Workforce Communication and Engagement Plan	Completed	2 The subcommittee finalizes a draft of the Workforce Communication and Engagement Plan; the plan will include strategies for communications about job requirements, training opportunities, and advancement opportunities to all pertinent staff; strategies for partners to communicate changes in the workforce at the partner level-training and retraining needs as well as new hires to Workforce Department for consistency in reporting, training and staff development; utilize a broad range of media from print to the internet and the ACP website, to text and emails as well as the media at large; the plan will communicate information regarding ACP, DSRIP, job training and growth opportunities, employment availability postings and other job and employment related issues; the plan will be interactive and include opportunities for two-way communication with the workforce.	10/01/2015	10/31/2015	10/01/2015	10/31/2015	12/31/2015	DY1 Q3	
Task 3 Workforce Review	Completed	3 The plan is presented to and reviewed by selected members of the workforce for additional input.	11/01/2015	12/31/2015	11/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 4 Final Approval	Completed	4 Final draft of the plan is presented to the Steering Committee and the PPS Governance Board for final approval.	12/01/2015	12/31/2015	12/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 5 Review and Approve Communication Plan	Completed	5 Communication plan is reviewed and approved by Governing Board	12/01/2015	12/31/2015	12/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Milestone #9 Inclusion of CBOs in PPS Implementation.	In Progress	Explain your plans for contracting with CBOs and their continuing role as your PPS develops over time; detail how many CBOs you will be contracting with and by when; explain how they will be included in project delivery and in the development of your PPS network.	07/01/2015	06/30/2017	07/01/2015	06/30/2017	06/30/2017	DY3 Q1	NO
Task 1 Identify CBOs	Completed	1 Identify CBOs in network, determine gaps in network (service-level and geographic level), determine capabilities for integration and review/execute PPS agreements with CBOs. Network CBOs, such as God's Love We Deliver, a meals	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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		delivery organization; Catholic Charities which has several branches providing housing and social services; local YM/WHA, which provides services to seniors and children; NY QUITs; City Department of health and mental hygiene; Department of Education and many others will be part of the milestone. However, there are still others that ACP will be reaching out to further increase its reach to ACP's vast network of patients, providers and geographical area.							
Task 2 Establish Roles	Completed	2 Establish roles for each CBO. CBOs provide a wide variety of services. Important to convey expected roles for each so that PPS service delivery is comprehensive.	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 3 System Integration	In Progress	3 Based on capabilities, establish plan to integrate CBOs. Ideal state is CBO has robust system that can fully integrate with PPS HIE and/or care management system. If system will not be compatible for integration (ie paper, limited technology), workflows will be developed to ensure effective communication with feedback loop are present. Adequate support will be evaluated at the individual CBO level.	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1	

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
Finalize governance structure and sub-committee structure	If there have been changes, please describe those changes and upload any supporting documentation as necessary.	Please state if there have been any changes during this reporting quarter. Please state yes or no in the corresponding narrative box.
Finalize bylaws and policies or Committee Guidelines where applicable	If there have been changes, please describe those changes and upload any supporting documentation as necessary.	Please state if there have been any changes during this reporting quarter. Please state yes or no in the corresponding narrative box.

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Finalize governance structure and sub-committee structure	jd593813	Templates	25_DY2Q2_GOV_MDL21_PRES1_TEMPL_ACP_[CQC]_Meeting_Template_7370.xlsx	ACP [CQC] Meeting Template	10/28/2016 01:43 PM
	jd593813	Templates	25_DY2Q2_GOV_MDL21_PRES1_TEMPL_ACP_[PAC]_Meeting_Template_7368.xlsx	ACP [PAC] Meeting Template	10/28/2016 01:42 PM



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Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
	jd593813	Templates	25_DY2Q2_GOV_MDL21_PRES1_TEMPL_ACP_[Finance_Committee]_Meeting_Template_7364.xlsx	ACP [Finance Committee] Meeting Template	10/28/2016 01:39 PM
	jd593813	Templates	25_DY2Q2_GOV_MDL21_PRES1_TEMPL_ACP_[Compliance]_Meeting_Template_7361.xlsx	ACP [Compliance] Meeting Template	10/28/2016 01:36 PM
	jd593813	Templates	25_DY2Q2_GOV_MDL21_PRES1_TEMPL_ACP_[Communications]_Meeting_Template_7360.xlsx	ACP [Communications] Meeting Template	10/28/2016 01:35 PM
	jd593813	Templates	25_DY2Q2_GOV_MDL21_PRES1_TEMPL_ACP_[Audit_Committee]_Meeting_Template_7359.xlsx	ACP [Audit Committee] Meeting Template	10/28/2016 01:34 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Finalize governance structure and sub-committee structure	
Establish a clinical governance structure, including clinical quality committees for each DSRIP project	
Finalize bylaws and policies or Committee Guidelines where applicable	
Establish governance structure reporting and monitoring processes	
Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services, housing providers, law enforcement)	
Finalize partnership agreements or contracts with CBOs	
Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and mental hygiene, Social Services, Corrections, etc.)	
Finalize workforce communication and engagement plan	
Inclusion of CBOs in PPS Implementation.	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Complete	
Milestone #3	Pass & Complete	
Milestone #4	Pass & Complete	
Milestone #5	Pass & Complete	
Milestone #6	Pass & Ongoing	
Milestone #7	Pass & Ongoing	
Milestone #8	Pass & Complete	
Milestone #9	Pass & Ongoing	



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✔ IPQR Module 2.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone 1 Inclusion of CBOs	Completed	<p>Working with existing CBO network partners (such as RAIN, East Harlem HELP, God's Love We Deliver, Samaritan Village, Narco Freedom, Catholic Charities, YM/WHA) and selected leaders of major CBOs (such as the Hispanic Federation, the Federation of Protestant and Welfare Agencies, The NY Immigration Coalition, the Association of Black Executive Directors and others) ACP staff under the division of Workforce, Community and Government Relations will develop a "Proposal to Establish the CBO Partnership Program" (CBOPP). CBOPP was designed in order to insure that CBOs play an important role in the development of ACP. The CBOPP program will carve out roles for CBOs within ACP to include but not be limited to:</p> <ul style="list-style-type: none"> • Service delivery; • Outreach and organizing; • Patient engagement and education; • Deployment of community health workers; • Cultural competence and health literacy training; • Community organizing and mobilization <p>Once solicitation instruments are approved by Senior Management, staff initiate implementation activities.</p> <p>A request for An Expression of Interest (EI) is circulated to key CBOs throughout the target area on an invitational basis.</p> <p>A sub-Committee of the Workforce Committee composed of Board and Steering Committee members is created to review and finalize</p>	04/01/2015	03/30/2016	04/01/2015	03/30/2016	03/31/2016	DY1 Q4



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
		<p>agreements with CBOs based on staff recommendations.</p> <p>The agreements clearly define project objectives and a plan to monitor and evaluate activities and outcomes.</p> <p>Contractual agreements with CBOs are executed and staff provide oversight, training and guidance.</p> <p>ACP expects to contract with 10-20 CBOs with a special emphasis on "Hotspots" by DY1, Q4.</p>						
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
1 Inclusion of CBOs	
Mid-Point Assessment	



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✔ IPQR Module 2.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges or risks that you foresee in implementing your governance structure and processes and achieving the milestones described above, as well as potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

Time Commitment: to be successful we need dedicated people who are knowledgeable and who will attend meetings regularly and provide their best advice and judgment. ACP has the unique identity of being a physician-led PPS. While ACP comprises many other types of providers including but not limited to significant hospital partners, it needs to have physicians, particularly PCPs, at the helm to stay true to its identity. Physician providers who have been selected to participate in governance are busy with their practices and/or other activities. We are asking them to make a significant commitment-- to volunteer substantial amount of time serving on the Board and/or Committees and Workgroups. There is a risk that they will burn out and lose their motivation over the five years of the program. We hope this is not the case but must be prepared by developing a backup set of community physician leaders, champions and influencers who are engaged and aligned to the PPS goals and objectives and who are willing to step into the seat of governance should they be needed. DSRIP is complex evolving program that requires significant study and knowledge for the Board and Committees to make appropriate decisions. There is a risk that physicians may not have the necessary knowledge about DSRIP goals and objectives to be effective decision-makers. They may also not be aware of their obligations as members of nonprofit governing structures. Notwithstanding these considerations we understand that medical practices across all PPSs will face similar challenges. To mitigate potential risk ACP will develop various educational and training programs. There is a risk that Board members become overwhelmed by information and the complexity of the DSRIP program workstreams and projects. To mitigate this we look to provide the board with concise and specific information in the form of a Dashboard for effective and efficient decision-making.

✔ IPQR Module 2.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

All of the work streams are Interdependent and dependent on governance. The Board and Committees have an overarching role to play in each of the work streams. The board, committees, PAC Leadership Council provide guidance with respect to all of the work flows. While the board and committees do not manage the work streams themselves, they have a role in overseeing management and the work stream processes and progress. They have a keen interest in the Workforce work stream and a direct fiduciary interest in the budget and funds flow work streams.



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✔ IPQR Module 2.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for the development of your governance structure and processes and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
Lead Applicant	Advocate Community Partners (CEO: Mario Paredes)	Governance, Staffing, Funding
Physician Organizations	NYCPP, FQHC, ACOs, IPAs	Board and Committee Representation, Develop and approve EBM protocols and provide service to Medicaid recipients
Major Hospital Partners	NSLIJ, Medisys	Board and Committee Representation, Funding
Major CBOs	Several	Provide intervention services as necessary and education to ACP patients
Social Services Agencies	Several	Feedback, Representation, Patient engagement and intervention, providing necessary services
Key Advisors	Tom Hoering- In house counsel, Thomas Gimler -Compliance Officer	Create Governance Documents, compliance documents, provider agreements, policies and procedures



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✔ Module 2.6 - IPQR Module 2.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS with regard to your governance structure and processes.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
Advocate Community Providers Board of Directors	Governance	Finalized governance document, approved contractual agreements/PPS fiscal & programmatic oversight
NYCPP	Governance	Funding, governance, operational staff
NSLIJ	Fiduciary	Timely disbursement of funds/internal controls
Medisys	Key Hospital Partner, Non-voting Member of ACP	Provide critical input/participate in deliberations of governing body
External Stakeholders		
PAC Leadership Council	Provide critical input to Project Management on implementation and performance of all projects	Review and advise on processes and procedures as related to project development and implementation
Labor Unions (Helen Schaub)	Workforce	Participate Workforce issues, agreements and documents,
Community Organizations	Engage patients and provide services within the community in culturally sensitive manner	Deliver services to ACP patients, liaise within community, provide patient education
Religious Organizations	Contribute to community engagement, health literacy, patient outreach	Service delivery/Advice and advocacy. Site availability
Elected Officials	Community outreach and advisory	Advice and advocacy
NYS DOH, CMS, KPMG, IA	Key DSRIP Program Administrators	Funding; Timely responses to PPS queries and requests/Monitoring, Support, Technical assistance
State and City organizations, NYC Dept of Health and Mental Hygiene, NY QUITs,	Learning Collaborative, collaborate in patient services	Share best practices, provide input on service efficacy, help coordinate collaboration amongst PPS'
Other PPS Organizations	Learning Collaborative, collaborate in patient services	Provide services to common patients and report on treatment records, Share best practices
TEF (Sandi Vito)	Workforce Training and Redeployment	Participate on Workforce Training and Redeployment issues, agreements and documents



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✓ IPQR Module 2.7 - IT Expectations

Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream and your ability to achieve the milestones described above.

The development and implementation of ACP's IT Strategy including shared services and infrastructures will assist the Board of Directors with relevant data collected from all participating providers to support effective decision and formulation of operational strategies. The IT platform shall be upstream and downstream of information allowing for metric pulls and data analysis that will be used for performance evaluations using set baselines against DSRIP commitments and goals. The platform will include alerts and structure to ensure compliance and adherence to set processes as approved by the governing bodies.

Accurate information and data will provide for transparency and objective decisions making process and reports for the Board of Directors and other governance committees and sub-committees such as Financial, Clinical, IT, etc. Decisions based on relevant and timely data will form the bases for building and maintaining trusting relationships and credibility with stakeholders including participating providers, partners, the public at large and most importantly, the population that will be served by the PPS. We envision the development and launch of a Partner Portal/Intranet solution where all partners can track progress, and report activities against set milestones and goals. Furthermore, the provider portal/intranet will be an efficient communications channel for collaboration and ongoing discussion of issues and activities impacting governance of the ACP PPS and offers a direct communications channel from the participating partners to the Board of Directors, executive staff and other governance entities.

✓ IPQR Module 2.8 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

We look to create and adopt a dashboard with insightful data presented in an attractive format that informs and brings greater clarity to collective decision-making and reporting. While staff often track many metrics as part of a broader performance management system, Boards do not want to be overwhelmed with information. Therefore, the best governance dashboards use as few metrics as possible to communicate the organization's performance and progress against key initiatives. It can be as simple as indicating the targets and indicating whether or not ACP is meeting the targets. Nonprofit dashboards that use Green, Yellow and Red indicators demonstrate one simple way to let the board know if the organization is on track in terms of progress against key initiatives, including but not limited to, achieving the milestones laid out for ACP such as creating the governance structure, recruiting and filling the board and committee positions, developing and adopting bylaws, policies and procedures, contracting with CBOs and other key participants and others. The key is to get the board's attention on asking the right questions. The success of the board depends on its ability to make sound judgments in situations that involve balancing the competing interests of different stakeholders while delivering on key milestone results. Best practice governance embraces the 'CRAFTED' principles of governance: a culture and a climate of Consistency, Responsibility, Accountability, Fairness, Transparency, and Effectiveness that is deployed throughout the entire organization.



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Numerous governance rating models exist. We look to use or develop a model that not only looks at structural aspects of governance, such as the composition of the board and committees, but also aspects such as the decision-making process, the quality of information, and the results of oversight and guidance functions of the board of directors. ACP will build an organizational dashboard to standardize the tracking of ACP performance in terms of key measures of performance and outcomes. We will look to capture objectives, inputs, outputs, intermediate outcomes (benchmarks), final outcomes and performance indicators. The dashboard will show both current status (snapshot) and progress in terms of trends. Such reporting will include: attendees in meetings, meeting minutes, decision points suggested or made, and reporting to show approvals of outstanding committee or board meetings, etc. We will look to capture information to report on all of the work streams and projects. ACP has developed and is developing several reporting and monitoring metrics as well as clinical quality measures that will be used to monitor success of the clinical and related work streams. Appropriately engaging and systematically communicating with stakeholders is important to the successful design and implementation of the governance plan. The participation and acceptance of key stakeholder groups is crucial in developing a system that is supported by the larger community and likely to be sustained. Ongoing and targeted communication between project leaders and stakeholder groups is critical to ensure programmatic success. Implementing value-based, performance-pay and risk-based systems is a way of securing continued interest, buy-in and sustainability of transformation. Commitment to a new compensation system is essential to a program's success as well as its long-term sustainability.

IPQR Module 2.9 - IA Monitoring

Instructions :



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Section 03 – Financial Stability

✅ IPQR Module 3.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Note some milestones include minimum expected completion dates.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Finalize PPS finance structure, including reporting structure	Completed	This milestone must be completed by 12/31/2015. PPS finance structure chart / document, signed off by PPS Board.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	YES
Task 1 Identify Leadership	Completed	1 Identify and hire CFO	07/01/2015	07/31/2015	07/01/2015	07/31/2015	09/30/2015	DY1 Q2	
Task 2 Finance Charter	Completed	2 Define roles and responsibilities of Finance team (i.e. Charter), including reporting structure(completion of org chart).	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 3 Staffing Needs	Completed	3 Define staffing needs, roles and responsibilities	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 4 Hire Staff	Completed	4 Identify and hire Finance Directors and other support staff	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 5 Finalize Fiduciary Agreement	Completed	5 Define duties of fiduciary (NSLIJ) including policies, structure and fees	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 6 Finance Committee	Completed	6 Identify members of the Finance Committee	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 7 Establish Policies and Procedures	Completed	7 Establish policies and procedures regarding: -Funds flow -Accounting (selection of software, system) -Budget process, including orders and requests	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 8 Board Approval	Completed	8 Obtain Board approval for proposed Finance functions.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Milestone #2 Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	Completed	This milestone must be completed by 3/31/2016. Network financial health current state assessment (to be performed at least annually). The PPS must: - identify those providers in their network that are financially	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4	YES



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		fragile, including those that have qualified as IAAF providers; -- define their approach for monitoring those financially fragile providers, which must include an analysis of provider performance on the following financial indicators: days cash on hand, debt ratio, operating margin and current ratio; -- include any additional financial indicators that they deem necessary for monitoring the financial sustainability of their network providers							
Task 1 DSRIP Reporting Requirements	Completed	1 Determine reporting requirements as defined by DSRIP guidelines regarding financial sustainability	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 Create Financial Sustainability Survey	Completed	2 Create Financial Sustainability Survey to assess current state of PPS providers	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 3 Determine Criteria	Completed	3 Determine criteria of what defines financially fragile providers and create policies and procedures that include support of these providers	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 4 Assess Impact	Completed	4 Assess impact of projects in terms of implementation costs (training, in-servicing, etc.) and business impacts (reduction of inpatient services).	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 5 Develop Strategy	Completed	5 Develop financial stability strategies for those at risk partners	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 6 Hire Support Staff	Completed	6 Hire staff (financial analyst) dedicated to collecting and monitoring providers and financial stability measures	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 7 Complete Assessment	Completed	7 Complete assessment (analyze results, identify providers at risk, identify providers who are recipients of the IAAF). Determine next steps with at-risk providers including understanding of drivers of financial instability and assistance with revenue stream improvement. Propose potential PPS support including: - Centralized resource support - Training for additional billable services - Support for value-based services - Allocation of funds flow dollars	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 8 Develop Schedule	Completed	8 Develop an annual schedule to monitor financial sustainability of providers (more frequently if provider is considered financially fragile)	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task	Completed	9 8 Obtain Board approval for proposed Financial	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
9 Board Approval		Sustainability strategy							
Task 9 Continue Monitoring	Completed	9 Continue with sustainability monitoring based on annual schedule, for financially fragile providers	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Milestone #3 Finalize Compliance Plan consistent with New York State Social Services Law 363-d	Completed	This milestone must be completed by 12/31/2015. Finalized Compliance Plan (for PPS Lead).	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	YES
Task 1 Draft Compliance Plan	Completed	1 Identify and retain proper counsel to draft compliance plan consistent with 363-d, including written policies and procedures that includes all required elements (code of conduct, training and education program, communication lines to Compliance Officer (Tom Hoering), disciplinary procedures, [routine] system of identifying risks and areas of non compliance, system to respond to identified issues, policy of non-retaliation) and applicable departments and workstreams. Ensure compliance program certification requirements are in place.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 Approve Plan	Completed	2 Approve plan and execute on deliverables required by such plan	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 3 Reporting Needs	Completed	3 Engage IT to configure system that meets compliance plan's reporting needs	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 4 Plan for Non-Compliance	Completed	4 Develop process that addresses providers who do not meet compliance requirements, including Corrective Action Plans that will assist with meeting compliance.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 5 Compliance Officer	Completed	5 Appoint Compliance Officer	04/01/2015	04/30/2015	04/01/2015	04/30/2015	06/30/2015	DY1 Q1	
Task 6 Compliance Meeting Schedule	Completed	6 Implement frequent meetings between Compliance Officer and Board to ensure plan is effective and maintained.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 7 Training	Completed	7 Provide recurring training that satisfies requirements.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Milestone #4 Develop detailed baseline assessment of revenue linked to value based payment, preferred compensation modalities for different provider types and functions, and MCO strategy for the PPS and for facilitating network partner engagement with the MCOs.	Completed	This milestone must be completed by 09/30/2016. Value-based payment plan, signed off by PPS board.	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4	YES



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Task 1 Leverage Existing Relationships w MCOs and Develop VBP Transition Plan	Completed	1 Leverage PPS relationships with MCOs already in place for value based payments. Present, educate and align PPS providers to value-based payment methodologies and partner with MCOs to develop value-based payment plans - Introduce value-based concept and perform a survey to engage providers, including performance tiering and establish expectations - Perform analysis of revenue as well as expense models (revenue: understand appropriate loss ratio targets based on Medicaid premium, potential admin and care management costs, and costs of other impacts such as workforce impact, and expense: expected expense thresholds in provider settings, expected expense targets for MCO's to determine revenue targets) - Establish detailed baseline based on current utilization and model outcomes - Establish roles and expectations for each participating provider - Monitor funds flow - Present transition timeline	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 2 Establish Data Feeds	Completed	2 Establish appropriate and recurring data feeds from MCOs to monitor revenue and expense trends (cost and utilization). Establish value initiatives that improve or target highlighted trends.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 3 Engage MCO for PPS Performance	Completed	3 Engage with MCOs to identify (timely) PPS performance at all levels, engage partners to ensure that plan is satisfactory and considers concerns that are raised. Performance includes medical expense trends and care gaps, amongst others.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 4 Reporting	Completed	4 Create reporting from MCO data at appropriate detail levels (by provider, by region/county) for management review and distribution to providers	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 5 Performance Grading	Completed	5 Develop methodology to 'grade' providers - establish guidelines for surplus sharing based on provider type. Conversely, establish mitigation plans if providers are in deficit.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Task 6 Provide Support	Completed	6 Ensure adequate support for providers throughout entire process, including monthly meetings to discuss performance and mitigation steps if performance is negative. Support includes: Provider Engagement Outreach Team, education and training, standard reporting definitions, etc.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 7 Underperforming Provider Support	Completed	7 Develop action plan to support providers unable to perform under value-based system. At this point, providers have been educated about VBP plan and transition timeline (see step 1), provided reports, expectations and actionable steps, and presented a support structure.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 8 Corrective Action Plans	Completed	8 Establish corrective action plan for treatment of providers unable to improve performance	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 9 Board Approval	Completed	9 Appropriate Board approval of all proposed policies and procedures.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Milestone #5 Finalize a plan towards achieving 80% value-based payments across network by year 5 of the waiver at the latest, including efforts to educate PPS network partners on VBP, organizational models to support VBP contracting such as ACOs and IPAs, and to facilitate network partner engagement with MCOs.	Completed	This milestone must be completed by 3/31/2017. Value-based payment plan, signed off by PPS board.	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2	YES
Task 1 VBP Plan	Completed	1 Develop VBP plan with input from MCO, providers, and key stakeholders and determine approach for PPS in its entirety (IPC vs bundles of care vs subpopulation risk) including ramp-up steps until Level III VBP is achieved. Plan includes milestones such as time frame for each value-based approach, ultimately achieving value-based payments that are 90% of total payments to providers. Plan includes: - Understanding of provider capabilities and knowledge of value based payments (FFS vs capitation with withholds vs upside and risk vs global cap arrangements) - Development of key performance indicators and reporting set that directly tie to value based reimbursement - Development of baseline for each provider/group and	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		highlight actionable items to produce positive VBP, establish goals and targets for provider - Provide tools and support to assist providers with incorporating workflow improvements and efficiencies within each practice/provider setting (incorporate integrated delivery system tools within workflows, centralized care management, etc) - Provide monthly/quarterly progress reports and actionable items aligned with goals and targets - transition timeline, cost/benefit analysis with each VBP level scenario							
Task 2 Engage MCOs	Completed	2 Engage MCOs with VBP plan to gauge feasibility of plan implementation within MCO system, establish appropriate data feeds, and reporting requirements. Leverage MCO expertise and resources (actuarial, contracting, provider outreach) to assist with transition include metric development and communication with providers.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 3 Provider Engagement and Adoption	Completed	3 Establish roll-out plan for provider engagement and adoption. Introduce plan to providers in PPS, specifying roles of all provider types and those considered safety-net vs non-safety net.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 4 Establish Reporting Set	Completed	4 Develop robust reporting set so providers can monitor their performance at all levels (provider, group, county, etc.) and develop actionable items to positively impact trends, where necessary. Also develop plan to assist providers who are in 'deficit' or where performance doesn't allow for value-based payments.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 5 Board Approval	Completed	5 Finalize and acquire Board approval for VBP plan for PPS. Plan to include scope, provider type at risk, expectations, metrics required and reporting requirements.	07/01/2016	09/30/2016	07/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Milestone #6 ≥10% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs	On Hold		04/01/2015	03/31/2020	04/01/2015	03/31/2020	03/31/2020	DY5 Q4	YES
Milestone #7 ≥50% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs,	On Hold		04/01/2015	03/31/2020	04/01/2015	03/31/2020	03/31/2020	DY5 Q4	YES



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
and ≥ 8%* (blended for 15% target for fully capitated plans (MLTC and SNPS) and 5% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher									
Milestone #8 ≥80% of total MCO payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 20%* (blended for 35% target for fully capitated plans (MLTC and SNPS) and 15% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher	On Hold		04/01/2015	03/31/2020	04/01/2015	03/31/2020	03/31/2020	DY5 Q4	YES

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
Finalize PPS finance structure, including reporting structure	If there have been changes, please describe those changes and upload any supporting documentation as necessary.	Please state if there have been any changes during this reporting quarter. Please state yes or no in the corresponding narrative box.

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Finalize a plan towards achieving 80% value-based payments across network by year 5 of the waiver at the latest, including efforts to educate PPS network partners on VBP, organizational models to support VBP contracting such as ACOs and IPAs, and to facilitate network partner engagement with MCOs.	jd593813	Other	25_DY2Q2_FS_MDL31_PRES5_OTH_Financial_Stability_5.3_Physician_Engagement_Plan_7667.pdf	Financial Stability 5.3 Physician Engagement Plan.	10/31/2016 05:44 PM
	jd593813	Other	25_DY2Q2_FS_MDL31_PRES5_OTH_Financial_Sustainability_5.5_Board_Meeting_Approvals_7600.pdf	Financial Sustainability 5.5 Board Meeting Approvals	10/31/2016 12:57 PM
	jd593813	Other	25_DY2Q2_FS_MDL31_PRES5_OTH_Financial_Stability_5.0_ACP_VBP_Plan_7599.pdf	Financial Stability 5.0 ACP VBP Plan	10/31/2016 12:57 PM
	jd593813	Other	25_DY2Q2_FS_MDL31_PRES5_OTH_Financial_Stability_5.4_Reporting_Roadmap_7598.docx	Financial_Stability_5.4_Reporting_Roadmap	10/31/2016 12:56 PM



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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Finalize PPS finance structure, including reporting structure	
Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	
Finalize Compliance Plan consistent with New York State Social Services Law 363-d	
Develop detailed baseline assessment of revenue linked to value based payment, preferred compensation modalities for different provider types and functions, and MCO strategy for the PPS and for facilitating network partner engagement with the MCOs.	
Finalize a plan towards achieving 80% value-based payments across network by year 5 of the waiver at the latest, including efforts to educate PPS network partners on VBP, organizational models to support VBP contracting such as ACOs and IPAs, and to facilitate network partner engagement with MCOs.	
≥10% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs	
≥50% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 8%* (blended for 15% target for fully capitated plans (MLTC and SNPS) and 5% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher	
≥80% of total MCO payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 20%* (blended for 35% target for fully capitated plans (MLTC and SNPS) and 15% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Complete	
Milestone #3	Pass & Complete	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	
Milestone #6	Pass & Ongoing	
Milestone #7	Pass & Ongoing	
Milestone #8	Pass & Ongoing	



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✔ IPQR Module 3.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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✔ IPQR Module 3.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges or risks that you foresee in implementing these cross-cutting organizational strategies, including potential impacts on specific projects and, crucially, any risks that will undermine your ability to achieve outcome measure targets.

Financial Instability: some providers may face financial instability throughout the DSRIP period from decreased operational revenue (reduced admissions) or increased administrative expenses through involved process changes. These could be mitigated by the PPS's proposed funds flow (in the case of decreased operational revenue) or centralized systems and support (care management, IT staff for PCMH and integration) that would assist providers achieve efficiency (in the case of increased administrative expenses).

Cash Flow: there could be cash flow issues due to wide seasonality in utilization with our population that we serve. There are often high expenses in certain time periods (flu season, back-to-school time) where expenses spike which could reduce payouts to physicians once VBP programs are in place. Reserve strategies or alternate contracting terms addressing seasonality could play a role in helping physicians.

Data and Analytics: Because VBP is heavily based on data and analytics, the accuracy and timely delivery and processing of data could pose additional dependency risks. Delays in data process and within reporting process could have set-backs in trying to achieve VBP. Also, providers who are driven toward FFS reimbursement methodologies could take some time with transition to VBP. Additionally, analytics should be completely actionable to drive behavior. This should be directly aligned with existing metrics (ie PCMH, QARR) so providers can leverage existing expertise to achieve goals.

Provider Behavior: Provider resistance to change is a factor that we may encounter, whether due to resource issues, workforce instability or inefficient processes. Sufficient training and support will be necessary to overcome this risk.

✔ IPQR Module 3.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

Financial Sustainability relies on funds flow (to ensure adequate cash flows to implement DSRIP within each provider's office), workforce (to ensure that adequate training and retraining continue to keep staff engaged and up-to-date with latest DSRIP processes) and practitioner engagement (similarly with staff training, practitioners from all provider types need to remain adequately engaged throughout the DSRIP process). Additionally, internal dependencies exist including governance (ensures appropriate management of provider and PPS financial sustainability and to develop tools to assist providers in need), IT and Performance Reporting (to incorporate all data for accurate reporting of performance).



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✔ IPQR Module 3.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
CFO	Tracey Lin	Lead and provide financial function for DSRIP (bookkeeping, procurement, funds flow, etc.). Ensure all departments are compliant with not-for-profit law.
Treasurer (Board Position)	John McGovern	Present/Execute Finance Workstream goals to the Board.
Director of Operations - Uptown	Alex Damiron	Ensure Uptown operations functions efficiently and stays within budgeted targets. Develop initiatives as necessary in the event budgets are trending unfavorably.
Director of Operations - Downtown	Gloria Wong	Ensure Downtown operations functions efficiently and stays within budgeted targets. Develop initiatives as necessary in the event budgets are trending unfavorably.
Compliance Officer	Tom Hoering	Develop and ensure compliance of Compliance Plan (Social Services Law 363d)
Fiduciary	NSLIJ (John McGovern)	Development of proper controls that follow non-profit rules as well as DSRIP required processes, AP, AR and other financial functions as required



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✓ IPQR Module 3.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
ACP Board (Chairman: Dr Ramon Tallaj, MD)	Approval/Rejection of key initiatives associated with DSRIP program.	Ensure appropriate approvals/rejections of initiatives that directly involve execution of DSRIP programs.
Network Providers	Ensure buy-in of DSRIP program to staff for program execution.	Ensure processes are implemented that follow PPS protocols.
ACP COO	Project Management to ensure sustainability of providers	Management of processes and proposals
CEO (Mario Paredes)	Oversight of overall financial decisions related to the projects and DSRIP in general.	Management of processes and proposals. Ensure adequate quarterly reporting to earn Achievement Values.
CFO (Tracey Lin)	Oversight of policies regarding financial sustainability	Management of processes and proposals. Ensure adequate quarterly reporting to earn Achievement Values.
External Stakeholders		
NY DOH and other state/city agencies	Oversight of DSRIP program, designation of Safety Net providers	Ensure Safety Net providers continue to operate to provide services to Medicaid patients. Ensure timely payments to prevent cash flow issues with PPS. Ensure reimbursement policies follow VBP roadmap guidelines that positively impact provider billing practices (ie FFS transition to Level III VBP). Ensure PCMH reimbursement program continues to assist physicians with upkeep of PCMH certifications.
NCQA/PCMH	Continuous improvement of PCMH (focus on developing evidence-based policy that increases patient satisfaction)	Ensure adequate evolution of policies that focuses on patient satisfaction (increase patient compliance) and preventive measures (early detection of potential chronic diseases).
MCOs (Affinity, Anthem, Fidelis, Healthfirst, WellCare, etc)	Data source for cost and utilization information	Provide data to track and measure physician performance. Allow for adequate support to providers for VBP.
CMS	Oversight of DSRIP program	Continued support in DSRIP program, allow for contingencies in the event unintended consequences arise. Align future initiatives with DSRIP goals (ie recent reimbursement policy changes to knee/hip replacement).
Policymakers	Continued sustainability of Medicaid program	Ensure policies continue to follow VBP and allow for reinvestment into Medicaid program.



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✔ IPQR Module 3.7 - IT Expectations

Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream.

Financial sustainability is very directly related to other key work streams such as funds flow and performance reporting. The strong dependency of funds flow and performance reporting on IT needs to be properly monitored so that providers remain financially sustainable throughout the DSRIP program. This reporting mechanism will help show providers current status and identify areas for improvement (key tools needed to support a provider's path toward high performance), including dashboard reports that may be provided by the DOH. Additionally, IT connectivity amongst providers is important for an effective integrated delivery system (with automatic and real-time data feeds and alerts) which is integral to achieving desired outcomes and measures with patient utilization and management - a major component for achieving financial sustainability for providers.

✔ IPQR Module 3.8 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

The PPS Finance department will be responsible for developing, monitoring and disseminating reports (with support from IT functions and other work streams) and ensure the financial stability of providers. These progress reports will identify areas of weakness that the Finance department will have to address and support to achieve long term financial sustainability. Progress reporting and mitigation plans will be presented to the Board and Finance Committee so that appropriate corrective action plans can be developed. Additionally, metrics, goals and targets will be established (similar to gap-to-goal targets) to measure performance. Performance metrics include: expense management (appropriate expenses by cost category, especially IP Admissions and Readmissions/ER visits), quality care gaps (ensure patients receive appropriate preventive care), appropriate documentation and establishment of care plans specific to disease categories (ensure patient care has adequate documentation), etc. Ensuring appropriate utilization, as measured by these metrics, will pave the way for a successful VBP environment. Lastly, engagement surveys and measures (1] Completion of Financial Sustainability surveys 2] Success or positive trends regarding overall patient engagement) will provide the PPS the ability to understand financial sustainability of the network providers.

IPQR Module 3.9 - IA Monitoring

Instructions :



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Section 04 – Cultural Competency & Health Literacy

✅ IPQR Module 4.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement. Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Note some milestones include minimum expected completion dates.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Finalize cultural competency / health literacy strategy.	Completed	This milestone must be completed by 12/31/2015. Cultural competency / health literacy strategy signed off by PPS Board. The strategy should: -- Identify priority groups experiencing health disparities (based on your CNA and other analyses); -- Identify key factors to improve access to quality primary, behavioral health, and preventive health care -- Define plans for two-way communication with the population and community groups through specific community forums -- Identify assessments and tools to assist patients with self-management of conditions (considering cultural, linguistic and literacy factors); and -- Identify community-based interventions to reduce health disparities and improve outcomes.	08/01/2015	12/31/2015	08/01/2015	12/31/2015	12/31/2015	DY1 Q3	YES
Task 1 Convene Advisory Group/Committee	Completed	1 Form a Cultural Competency and Health Literacy Advisory Committee of practitioners, advocates and SMEs to provide assistance and recommendations on the implementation of the cultural competency and health literacy strategy.	08/01/2015	08/30/2015	08/01/2015	08/30/2015	09/30/2015	DY1 Q2	
Task 2 Identify Target Areas ('Hotspots')	Completed	2 Identify and map the "hotspots" in the service area as it pertains to health disparities. The following methodology will be utilized to conduct the assessment: Review of DSRIP Program data on Health Data NY and other publicly available documents, including studies conducted by research institutes and advocacy groups in the field.	08/01/2015	08/30/2015	08/01/2015	08/30/2015	09/30/2015	DY1 Q2	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Task 3 Identify CBOs and Key Partners	Completed	3 Identify key CBOs and partner organizations that can deploy resources within the PPS to increase cultural competency and health literacy.	09/01/2015	09/30/2015	09/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 4 Understand Best Practices Regarding Patient Outcomes	Completed	4 Complete compilation of best practices and methodologies for improving patient's health outcomes as it pertains to cultural competency and health literacy.	09/01/2015	09/30/2015	09/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 5 Resource Inventory	Completed	5 Establish comprehensive inventory of all resources that can be deployed and accessed to increase cultural competency and health literacy across the network.	09/01/2015	09/30/2015	09/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 6 Educational Campaign	Completed	6 Launch fact-finding campaign to gauge the needs of the PPS on issues related to cultural competency and health literacy. Meetings to be held with key physicians and stakeholder organizations coordinated through clinical care teams and the PAC Leadership Council.	09/01/2015	10/31/2015	09/01/2015	10/31/2015	12/31/2015	DY1 Q3	
Task 7 Financial Impact Report	Completed	7 Complete report on determining the costs associated with developing formal partnership agreements with other entities to help support the work of the PPS.	10/01/2015	10/31/2015	10/01/2015	10/31/2015	12/31/2015	DY1 Q3	
Task 8 Complete Final Draft	Completed	8 Complete final draft of the comprehensive cultural competency/health literacy strategy, including descriptions of the instruments, processes and procedures for monitoring and evaluating feedback and outcomes across the four major sectors of the PPS. The strategy will also include recommendations for assigning the implementation plan to the ACP Management Team with guidelines as to expected phase-in and completion dates. The assigned management team will be required to prepare quarterly reports on the progress of the plan to the Steering Committee and the Board.	10/15/2015	11/30/2015	10/15/2015	11/30/2015	12/31/2015	DY1 Q3	
Task 9 Present/Approve Final Draft	Completed	9 Present final draft of the comprehensive cultural competency/health literacy strategy for review and input to the Steering Committee. The Steering Committee submits the final document to the governance body for approval.	12/01/2015	12/31/2015	12/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Milestone #2 Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate	Completed	This milestone must be completed by 6/30/2016. Cultural competency training strategy, signed off by PPS Board. The strategy should include: -- Training plans for clinicians, focused on available evidence-	08/01/2015	06/30/2016	08/01/2015	06/30/2016	06/30/2016	DY2 Q1	YES



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
material).		based research addressing health disparities for particular groups identified in your cultural competency strategy -- Training plans for other segments of your workforce (and others as appropriate) regarding specific population needs and effective patient engagement approaches							
Task 1 Convene Advisory Group/Committee	Completed	1 Convene Cultural Competency and Health Literacy Advisory Committee to provide input on the training strategy.	10/01/2015	10/31/2015	10/01/2015	10/31/2015	12/31/2015	DY1 Q3	
Task 2 Identify Groups Experiencing Health Disparities	Completed	2 Conduct Health Literacy Environment Review Survey to assess cultural competency levels, efforts to improve health literacy and training needs throughout the PPS.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 3 Review Survey	Completed	3 Work with SMEs to review survey results and evaluate training approaches.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 4 Draft Training Strategy	Completed	4 Draft preliminary training strategy based on data gathered; formulate desired outcomes and evaluation criteria (i.e. performance metrics) based on assessment of training needs.	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1	
Task 5 Training Strategy	Completed	5 Submit final draft of training strategy to the Steering Committee for review and input. The Steering Committee submits the final strategy document to the PPS Board of Directors for review and approval.	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1	
Task 6 Implementation	Completed	6 Commence process of incorporating training into PPS workflow: build guiding coalition of PPS members, select target audiences, identify training vendors, establish training modes and locations, and determine length of training sessions.	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1	

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Finalize cultural competency / health literacy	jd593813	Meeting Materials	25_DY2Q2_CCHL_MDL41_PRES1_MM_CCHL_1.	CCHL_1.1_Meeting_Minutes	10/28/2016 03:10 PM



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Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
strategy.			1_Advisory_Committee_Meeting_Minutes_7383.docx		
	jd593813	Templates	25_DY2Q2_CCHL_MDL41_PRES1_TEMPL_CCHL_1.1_Meeting_and_Training_Templates_7382.xlsx	CCHL_1.1_Meeting_and_Training_Templates	10/28/2016 03:09 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Finalize cultural competency / health literacy strategy.	
Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Complete	



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✔ IPQR Module 4.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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✔ IPQR Module 4.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges or risks that you foresee in implementing your cultural competency / health literacy strategy and addressing the specific health disparities you are targeting (based on your CNA), and achieving the milestones described above - including potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

Cultural competency: There is still debate about what constitutes as cultural competency, and this lack of consensus about the subject matter could potentially impede progress. ACP will mitigate this risk by engaging providers across all sectors in the development of the overall strategy and all related activities within the realm. We will go to our membership for their best ideas, resources and initiatives in order to develop ACP's strategic vision.

Health literacy: This strategy revolves around overcoming socio-economic barriers to quality healthcare. ACP will mitigate these barriers by deploying Community Health Workers that are from the community they serve. In addition, subject matter experts and key stakeholders from within the communities will assist in the development and evaluation of all materials for cultural appropriateness.

✔ IPQR Module 4.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

All other workstreams are related to cultural competency. For example, the workforce stream shares the primary goal of assembling a culturally and linguistically competent staff. In addition, the IT platform must facilitate clinical integration across cultures and languages, and report patient demographics including language and ethnicity. Furthermore, practitioner engagement places a high premium on providers that can deliver culturally sensitive care.



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✓ IPQR Module 4.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this workstream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
Lead, Work stream	Moisés Pérez, Director of Workforce, Community and Government Relations	Implementation Plan / lead development process
PPS Governance Body	Dr. Ramón Tallaj, MD, Chairman	Approve strategy / provide oversight
PPS Staff	Migna Taveras, Manager Cultural Competency and Health Literacy	Implementation Plan / Execute project activities
Subject Matter Experts	Lourdes Rodríguez, Program Officer, New York State Health Foundation. Marianela Núñez, MSW, Independent Consultant. Florence Wong, Deputy Executive Director, 1199SEIU.	Review results of Health Literacy Environment Review Survey in order to assess training needs; provide input into curriculum development, training approaches and evaluation criteria
Curriculum Development Vendor	City University of New York	Curriculum development, training and evaluation
Training Vendor	TBD	Conduct training sessions



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✓ IPQR Module 4.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
Physician	Dr. Juan Tapia, CEO and Founder, Pediatrics 2000	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan
Physician	Dr. Adegboyega Adebayo, Independent Practitioner	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan
Physician	Dr Henry Chen, Independent Practitioner	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan
Hospital Group	Bill Lynch, Chief Operating Officer, Jamaica Hospital Medical Center	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan
Hospital Group	Representative NSLIJ/TBD	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan
External Stakeholders		
Subject Matter Expert	Anthony Feliciano, Director of the Commission on the Public's Health System	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan
Subject Matter Expert	Todd Bennett, Field Coordinator, 1199SEIU	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan
Medicaid Beneficiaries	Ramon Anibal Ramos	Participate in Advisory Committee / Provide assistance and recommendations on implementation of strategy and training plan



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✔ IPQR Module 4.7 - IT Expectations

Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support the development and implementation of your cultural competency / health literacy strategy and the achievement of the milestones described above.

ACP will develop IT capabilities to identify priority groups, evaluate survey results and build online inventory of resources. In addition, IT resources will be used to facilitate communication with healthcare providers, track training dates and report training program outcomes.

✔ IPQR Module 4.8 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

Success of the cultural competency and health literacy efforts will be measured using performance metrics linked to desired outcomes. Although the outcomes will be specified and developed throughout the implementation process, the measurements of success will fall into several categories, including healthcare navigation system (are patients able to access care?), print communication, oral exchange, use of technology, and policies and protocols. Additionally, patient satisfaction surveys will include questions regarding cultural competency and sensitivity of the providers (ie CAHPS survey). The PPS will look to these tools to understand overall cultural competency of practices and its impact on general patient population.

IPQR Module 4.9 - IA Monitoring

Instructions :



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Section 05 – IT Systems and Processes

✅ IPQR Module 5.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #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).	Completed	Detailed IT current state assessment. Relevant QEs (RHIOs/HIEs) should be involved in performing this assessment.	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4	NO
Task 1 Establish Governance Structure	Completed	1 Establish IT Governance Structure: identify Director of IT, workstream structure and HIT committee.	07/01/2015	08/30/2015	07/01/2015	08/30/2015	09/30/2015	DY1 Q2	
Task 2 Readiness Assessment	Completed	2 Conduct IT readiness assessment and analyze results - assessment to include readiness of data sharing at provider level, and mapping of the various systems in use throughout the PPS network and their potential interoperability including QE/HIE/RHIOs. Assessment results to be tracked and maintained for each partner within the PPS and gaps addressed to ensure full functionality of an interoperable platform.	08/01/2015	12/31/2015	08/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 3 Creation of Work Plan	Completed	3 Data from assessments will drive work plan. Plan expected to include: - Aggregate data to prioritize gaps - Establish workgroups to close gaps (expected gaps include: paper medical records, non-certified EHRs, data-sharing/connectivity barriers, workforce and other resource gaps, provider stakeholder buy-in, required technical support, etc) - Assess budgetary requirements for workgroups - develop	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		timeline based on resource need - Acquire necessary approvals (board, committee) - Deploy workgroups to close gaps - Provide periodic progress reports - if necessary, develop contingency plans to address new issues							
Task 4 Final Report	Completed	4 Develop final report, including work plan to close gaps and impact to implementation of an interoperable IT platform, and present to leadership/Board.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 5 Share/Review Results	Completed	5 Share results of IT readiness assessment and work plan with network partners and discuss implications at Provider IT workgroups and committee meetings.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 6 Workgroup Feedback	Completed	6 Incorporate workgroup and committee suggestions into final plan regarding development of interoperable IT platform. Incorporate workgroup and committee suggestions into final plan.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 7 Board Approval	Completed	7 Obtain Board approval.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Milestone #2 Develop an IT Change Management Strategy.	Completed	IT change management strategy, signed off by PPS Board. The strategy should include: -- Your approach to governance of the change process; -- A communication plan to manage communication and involvement of all stakeholders, including users; -- An education and training plan; -- An impact / risk assessment for the entire IT change process; and -- Defined workflows for authorizing and implementing IT changes	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4	NO
Task 1 Key Stakeholder Support	Completed	1 Acquire support and buy-in from key stakeholders (Board, committees, PAC).	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 2 Current State Review	Completed	2 Understand current landscape based on assessment results.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 3 Future State Review	Completed	3 Identify changes required to achieve future target state of delivery system integration.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 4 Catalogue Results	Completed	4 Catalogue required changes into system-wide/PPS level, individual provider/partner level, or other and prioritize based on PPS goal of delivery system integration.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task	Completed	5 Establish process to deploy system changes at various	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
5 Change Management Process		<p>levels (system-wide vs provider level). Process includes:</p> <ul style="list-style-type: none"> - Bi-directional communication plan that addresses: 1) announces planned changes 2) determine business impact 3) determine process impact 4) forum for discussion regarding proposed change - Establish support structure and resource expectations and availability (establish roles - PPS responsibility vs partner/other party responsibility) - Create and distribute mitigation plans including temporary workarounds during change implementation and workflow changes, if any - Create training and educational materials of new processes and workflows - Conduct a post-implementation analysis ('regression testing', where applicable), to ensure changes were deployed correctly 							
Task 6 Planned/Unplanned Changes	Completed	6 Establish protocols to respond to planned and unplanned changes. Previous steps can apply to both changes based on assessments from previous milestone and any future planned or unplanned changes.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 7 Board or Other Approval	Completed	7 Formalize process (ie formalization of Change Management Policies and Procedures), obtain required approvals, and communicate change request process to internal staff and external partners.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Milestone #3 Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	Completed	<p>Roadmap document, including current state assessment and workplan to achieve effective clinical data sharing and interoperable systems where required. The roadmap should include:</p> <ul style="list-style-type: none"> -- A governance framework with overarching rules of the road for interoperability and clinical data sharing; -- A training plan to support the successful implementation of new platforms and processes; and -- Technical standards and implementation guidance for sharing and using a common clinical data set -- Detailed plans for establishing data exchange agreements between all providers within the PPS, including care 	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4	NO



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		management records (completed subcontractor DEAs with all Medicaid providers within the PPS; contracts with all relevant CBOs including a BAA documenting the level of PHI to be shared and the purpose of this sharing).							
Task 1 Establish Governance Structure	Completed	1 Establish governance structure. Director of IT (John Dionisio) will champion development of roadmap. Acquire support and buy-in from key stakeholders including CEO (Mario Paredes), CMO (Dr Jackson Kuan), Director of Clinical Operations (Lidia Virgil), HIT Committee (Chair: John Dionisio), PAC, and Board.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 2 Define Project Needs	Completed	2 Define needs of the ten projects regarding clinical data needs, connectivity and system requirements, and interoperability functionalities, including EHR interface, workflow development, clinical protocols to establish common clinical processes (which lead to common clinical data sets).	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 3 Compare Results	Completed	3 Compare needs against IT Assessments results. Leverage existing processes where possible.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 4 Establish Guiding Principles	Completed	4 Establish key parameters and guiding principles including: -Respect physician/practitioner's time - minimize any additional steps and maximize automation ('Let Physicians be Physicians') - System shall integrate with existing EHRs if certified. Maximize utilization of existing certified EHRs where clinical data can be aggregated and shared so appropriate providers and care management staff has access to relevant clinical history to optimize care and establishment of care plans. - Ensure training and support is readily available. - Data security is a priority. Provide proper training to key staff, key stakeholders, network providers and ensure agreements (BAAs, subcontractor DEAs, Participation Agreements, appropriate HIPAA/HIE consent forms) are in place. - Functionalities of integrated system must adhere to evidence-based clinical protocols (ie automation of care plans for all diabetics). Any updates to clinical protocols must be incorporated in a timely manner (as part of change management system).	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		- Follow PCMH processes where applicable to allow for singular process requirements where possible.							
Task 5 Target Operating Model Findings	Completed	5 Leverage findings from Target Operating Model workshops (facilitated by KPMG) - including Context Operating Model (to ensure requirements are traced back to functionality) and Capability Reference Model (ensure processes are comprehensive and consider various use-case scenarios likely to face ACP's operations (while considering 80/20 rule - use cases covers 80% of probable future scenarios). Additionally, utilize Business Requirements Documents and System Requirement Specifications created as a result for TOM workshops to drive workflows and systematic processes during system design of interoperable system.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 6 Engage Back Office Vendor	Completed	6 ACP is expected to use a key vendor partner to provide back-office functionalities such as call center, HIE development, centralized care management operations (ACP is still under negotiations with vendor as of this draft and is unable to name vendor). Vendor will plan an integral role in the development of interoperable system as well as workplans and timelines.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 7 Utilize Partner IT Assessments	Completed	7 Utilize partner IT assessments to develop interoperable connectivity plan specific to each partner within ACP's network. If EHRs are certified, interface capabilities exist to connect and integrate data (HL7, CCD, CCDA, SIU, etc). Providers with non-certified EHRs or paper records will be strongly encouraged to convert to a certified EHR. As a stop-gap measure, providers in this category will utilize portal access to securely exchange information. ACP will establish and provide secure portal access and templates to providers so engagement data and clinical information is tracked (templates will allow for common data sets).	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 8 RHIO Connectivity	Completed	8 RHIO connectivity will be established to finalize interoperability and clinical data sharing.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 9 Board or Other Approvals	Completed	9 Obtain necessary approvals to finalize roadmap.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Milestone #4 Develop a specific plan for engaging attributed	Completed	PPS plan for engaging attributed members in Qualifying Entities, signed off by PPS Board. The plan should include	07/01/2015	06/30/2016	07/01/2015	06/30/2016	06/30/2016	DY2 Q1	NO



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
members in Qualifying Entities		your approach to outreach into culturally and linguistically isolated communities.							
Task 1 Identify System Needs	Completed	1 Identify system needs, interfaces, and action plan for existing / new attributed members, ensuring culturally and linguistically appropriate needs are defined and included in plan, to engage members in QEs. Additionally, ensure outreach staff (with appropriate cultural competence and linguistic capabilities) is hired and trained. Language translation services can be used if necessary. Utilize DOH post-opt out attribution roster to determine target population.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 2 Gap Analysis	Completed	2 Perform gap analysis of existing communication channels to engage with attributed members, establish strategies based on results of gap analysis. EHR demographic data as well as MCO demographic data can be leveraged and cross-referenced to ensure contact information is accurate. Any existing relationship with member will be key in physically reaching member. Outreach can be performed in various ways including direct telephonic, mailers and utilization of Community Health Worker model for hard to reach members.	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 3 Monitor Outreach Effectiveness	Completed	3 Monitor reach rates to determine if outreach channels need to be modified or new channels established. Emphasize use of Community Health Worker model where literature suggests high success rates over general telephonic or mailing outreach. Health fairs and presence in community health centers can assist with engaging patients who may not be reachable using traditional methods.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 4 Ensure Continued Engagement	Completed	4 PPS needs to ensure engaged members continue to be engaged. Various outreach including smart-phone application technologies will be explored to maintain engagement levels.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 5 Metrics	Completed	5 Incorporate patient engagement metrics into performance monitoring to understand remaining required Scale and Speed engagements and existing care gaps.	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1	
Milestone #5 Develop a data security and confidentiality plan.	Completed	Data security and confidentiality plan, signed off by PPS Board, including: -- Analysis of information security risks and design of controls to mitigate risks	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	NO



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		-- Plans for ongoing security testing and controls to be rolled out throughout network.							
Task 1 Understand DSRIP Requirements	Completed	1 Understand DSRIP requirements for data security and confidentiality at the PPS level regarding HIPAA, HITECH, telecom, internet and cloud-based securities, mobile/wireless devices (phone, laptop, mobile drives, usb and other mobile media), at-rest and during transmission and transfer encryption of data, physical security of server rooms and employee computers, laptops and other peripherals and employee roles and responsibilities.	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 2 Creation of Policies and Procedures	Completed	2 Create policies and procedures to address security and confidentiality issues. Policies and procedures shall include specific sections regarding appropriate use of Mental Health, Substance Abuse and HIV data.	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 3 Define Access Rights	Completed	3 Establish roles and access rights to determine who can access patient records. Establish minimum necessary use and disclosure of PHI policies, including 'break the glass' policies. Policies regarding roles and access shall include proper identification and authentication of employee who is accessing records (additionally, HR policies shall include appropriate background checks of employees including review of any appropriate exclusion lists).	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 4 Data Security and Confidentiality at the Network Provider Level	Completed	4 Policies and procedures shall also include provider-level data security and confidentiality plan including adequate compliance and HIPAA training for network providers, partners and appropriate staff.	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 5 Contingency and Emergency Planning	Completed	5 Contingency and emergency planning policies and procedures will be developed to ensure proper protocols are in place in the event of disasters or emergency events. Policies will include: data backup plans, disaster recovery plan, emergency mode operation plan, testing and revision procedures and applications and data criticality analysis.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 6 Training Policy and Timeframes	Completed	6 Appropriate training/education (as well as annual/as needed re-training and re-education) policies and scheduling will be developed to ensure all employees are aware of latest data security and confidentiality policies and to understand regular and anonymous reporting mechanisms (contact information	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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Advocate Community Providers, Inc. (PPS ID:25)

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		for Compliance Officer and Privacy Officer will be distributed to all employees) in order to appropriately report issues or potential breaches.							
Task 7 RHIO/SHIN-NY Policy	Completed	7 Policies regarding RHIO and SHIN-NY connectivity will be developed that incorporates internal policies and procedures as well as RHIO and SHIN-NY policies and procedures.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
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).	
Develop an IT Change Management Strategy.	
Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	
Develop a specific plan for engaging attributed members in Qualifying Entities	
Develop a data security and confidentiality plan.	



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Advocate Community Providers, Inc. (PPS ID:25)

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Complete	
Milestone #3	Pass & Complete	
Milestone #4	Pass & Complete	
Milestone #5	Pass & Ongoing	



**New York State Department Of Health
 Delivery System Reform Incentive Payment Project
 DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 5.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✓ IPQR Module 5.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges or risks that you foresee in creating and implementing your IT governance structure, your plans for data sharing across your network, your approach to data security and confidentiality, and the achievement of the milestones described above, including the potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

IT Adoption: our preliminary current state assessment found a wide variety of IT readiness among participating providers. Some providers may be reluctant to adopt EHRs within tight timeframes to achieve MU 1/2, PCMH Level 3, and be linked into the clinically interoperable system within the tight timeframe. Our IT Transformation Group has discuss possible risk mitigating strategies. 1) For network partners who are still on paper-based records, we have negotiated special pricing package with two of the more frequently used EHRs within our network, some of our hospital partners are also offering EHRs subsidy programs, there is also the option of free EMRs such as Practice Fusion which is 2014 certified, and there is also a short-term option of online care planning through "lite" versions of EHRs. A capital loan for EHR purchase and PCMH 2014 Level 3 certification adjusted towards DSRIP based savings may also be an option. In addition, we plan to create a trained EHR-MU support team to assist the practice to adopt EHRs, from installation, training through MU attestations. For those who are on EHRs, we plan to assemble a trained PCMH 2014 Level 3 support team to assist the practice to achieve certification by DY3. We are also assembling a data analysis team who will be skilled in Salient tool and analytic reporting to support custom programming of performance reports to support education, monitoring, and rapid cycle evaluation among network providers. The State is working out the patient consent policy, procedures, and provision of patient level data which will help finalize the patient engagement plan. With respect to connectivity to the State's Health Home platform or RHIO / SHNY-NY, we are awaiting the State's guidance document. State working out patient consent policy, procedures and provision of patient level data.

✓ IPQR Module 5.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

The IT Committee will not be able to drive the technological infrastructure transformation and development program without working closely with the PPS Finance Committee to review available capital and DSRIP funding sources. We also need to work closely with the PPS Workforce Committee because additional IT staff is also required for adding new technologies, interfaces, reporting and monitoring solutions, and providing assistance and support to our over 4,000 partners within our PPS network. In addition, training of the workforce to use new and expanded systems effectively will also be crucial. The success of the IT Committee's development and transformation work streams have direct impact on the success of many of the other PPS work streams, including, in particular, clinical integration, population health management, performance reporting, and development of an integrate delivery system.



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Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 5.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
Director of Data and Analytics	John Dionisio	Data analytics and reporting development
Data infrastructure and Security Lead	Rong Zhao	Data security and confidentiality plan, data exchange plan and other operational requirements, both internal and external to the PPS
HIE Application Lead	Rong Zhao	Application strategy and data architecture
HIE Application Support	Third-party Vendor	Application strategy and data architecture
IT Operations Proj Manage and PCMH	Pabel Medina	Ensure proper controls and protocols are in place for effective day-to-day operational activities including monitoring
CIO	Tonguc Yaman	IT Governance, Change Management, IT operations
CTO	Corey Maher	IT Architecture, RHIO connectivity, EHR integration



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Advocate Community Providers, Inc. (PPS ID:25)

✓ IPQR Module 5.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
ACP Board (Chairman: Dr Ramon Tallaj, MD)	Approval/Rejection of key initiatives associated with DSRIP program.	Ensure appropriate approvals/rejections of initiatives that directly involve execution of DSRIP programs.
ACP Directors of Operations (Alexander Damiron, Josephine Wu)	Project Management to ensure sustainability of plan	Management of processes and proposals
CIO (Tonguc Yaman)	Oversight of policies, work groups and deliverables regarding IT	Management of processes and proposals. Ensure adequate quarterly reporting to earn Achievement Values.
IT Committee Chair (John Dionisio)	Interface between IT Committee and front line end users	Input into system design, testing, and training strategies
PCMH / EHRs-MU Certification Lead (Pabel Medina)	Support and assist PPS network providers to achieve PCMH-EHRs-MU certification by DY3	PCMH 2014 Level 3 certification of all PPS safety net providers by DY3
Chief Compliance Officer (Tom Gimler)	Approver	Data security plan
Privacy and Security Officer (Tom Gimler)	Policy and standards maintenance and enforcement	Data security
External Stakeholders		
EHRs vendors	Partner in EHRs and HIE solutions	EHRs and HIE solutions that meets DSRIP requirements for integrated delivery system, connectivity and interoperability
RHIOs/QEs	Global-level data sharing	DSRIP requirements for integrated delivery system, connectivity and interoperability
NCQA/PCMH	Continuous improvement of PCMH (focus on developing evidence-based policy that increases patient satisfaction)	Ensure adequate evolution of policies that focuses on patient satisfaction (increase patient compliance) and preventive measures (early detection of potential chronic diseases).
MCOs	Source of data	Ensure interface compatibility and consistency of data feeds



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Advocate Community Providers, Inc. (PPS ID:25)

✓ IPQR Module 5.7 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

Our IT Governance Committee has established expectation with all partners to provide monthly updated reports on key performance metrics. We will monitor these performance metrics across the network to ensure continuous progress towards our IT transformation management strategy. Following is a preliminary list of the key performance measures that will be reported monthly:

- Annual gap assessment - adoption of IT infrastructure, enablement of clinical workflow, application of population analytics
- Annual update of IT strategic plan
- Annual data security audit findings and mitigation plan
- Monthly workforce training compliance report
- Monthly project portfolio 'Earned Value' report for all IT related projects within DSRIP project portfolio
- Weekly shared services performance report that includes specific performance metrics (connectivity levels, adoption and continued appropriate use of protocols and templates, PCMH roll-out plan (if provider is a PCP), project engagement requirements, medical expense performance [provider type specific, ie loss ratios, expense PMPMs for various categories within appropriate levels], quality care gap rates). Most performance metrics are binary (Yes/No, Achieved/Not Achieved) but others will need comparative data (medical expense performance, quality care gap rates)
- Weekly performance report on each IT vendor's service level agreement

IPQR Module 5.8 - IA Monitoring

Instructions :



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Delivery System Reform Incentive Payment Project**

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Advocate Community Providers, Inc. (PPS ID:25)

Section 06 – Performance Reporting

IPQR Module 6.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Establish reporting structure for PPS-wide performance reporting and communication.	Completed	Performance reporting and communications strategy, signed off by PPS Board. This should include: -- The identification of individuals responsible for clinical and financial outcomes of specific patient pathways; -- Your plans for the creation and use of clinical quality & performance dashboards -- Your approach to Rapid Cycle Evaluation	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4	NO
Task 1 ACP Reporting Dashboard Model	Completed	1 Develop for ACP a model of the State's PPS-specific dashboard with all the measures, metrics and milestones for PPS-wide and specific to each of the 10 selected project with target completion dates and reporting unit. Discuss with relevant Project Leadership Team, workgroups, sub-committees, committees to strategize, verify processes, reporting structures, identify gaps, needs, possible solutions , including interim solutions before State's roll out of its resources.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 2 Communications Process	Completed	2 Establish process for regular two-way communications with each level of reporting participants. Discuss with relevant Project Leadership Team and PPS committees to strategize, verify processes, identify gaps, needs, possible solutions.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 3 Rapid Cycle Evaluation	Completed	3 Establish rapid cycle evaluation process and workflow: identify key individuals and key data values that will inform the designated person (s) in a timely fashion of issue, processes and resources to handle the issue, escalation points, and next steps. Review and obtain feedback with Project Leadership Teams, participant champions, PPS committees, especially	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		the Compliance Committee.							
Task 4 Finalize Reporting Strategy	Completed	4 Finalize the layered PPS-wide reporting structure: from individual providers through their associated projects' metrics and the Project Leadership Teams, up to the Advocate PPS PMO. Performance information made available by the State through MAPP and Salient will be maximally integrated into this reporting structure. We will also incorporate additional items so as to achieve the type of information needed to manage the network towards value-based payment as our PPS evolves. The final performance reporting strategy (including Rapid Cycle Evaluation process) will be signed off by the PPS Board and incorporated into the provider participation agreement. Chief Medical Officer Dr Jackson Kuan, MD and CFO Wallace Lau will be the responsible parties to ensure that clinical and financial outcomes of patient pathways are trending appropriately.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 5 Education Plan	Completed	5 Establish process and schedule for communicating / educating all participating providers and staff their respective performance metrics and reporting structure, and the relation to PPS-wide performance metrics, reporting structure, and rapid cycle evaluation.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 6 Reporting Schedule	Completed	6 Develop interim regularly scheduled performance reports to supplement the State's roll-out, tailored for each reporting layers, from individual providers through their associated projects, Project Leadership Team, PMO, Clinical Quality Committee, Finance Committee, and PPS executive body.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 7 Board Approval	Completed	7 Finalize performance reporting and communication plan signed off by PPS Board.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Task 8 Establish Baseline Parameters	Completed	8 Establish performance baseline parameters to identify high performance incentives and corrective action for low performers.	01/01/2016	03/31/2016	01/01/2016	03/31/2016	03/31/2016	DY1 Q4	
Milestone #2 Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	Completed	Finalized performance reporting training program.	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4	NO
Task 1 Develop Analytics Training and Support Group	Completed	1 The Analytics Training and Support Group to train PCMH / EHR-MU support team staff on integrating new reporting	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		processes and clinical metric monitoring workflow. There will be an initial one-time training with subsequent periodic refresher training for the trainers. The PCMH / EHR-MU support team staff will be the front-line hands-on educators for on-going assistance and support to participating providers in correct and accurate data input for data collection and reporting and reviewing the reports for timely actionable items.							
Task 2 Implementation and Training	Completed	2 In collaboration with the Clinical Quality Committee, develop provider and staff training on clinical protocol implementation, performance reporting, rapid cycle evaluation, and communications, leveraging on existing provider organization group meetings. Monthly group meetings began in DY0 and will continue throughout the DSRIP term. Training covers provider and staff roles and responsibilities. Training will include the full range of providers in addition to physicians and their staff; hospital triage / ED staff, home health providers, long term care, behavior health providers, community-based service providers, etc.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 3 Training Schedule	Completed	3 Schedule and roll out training to all network providers, leveraging on their respective existing meeting of peer groups and hubs for more efficient training schedules and venues. These will include physician offices, as well as hospital triage / ED staff, home health, long term care, behavioral health, community-based services, etc. ACP will start with monthly meetings in DY1 and then transition to quarterly meetings when appropriate.	10/01/2015	10/31/2015	10/01/2015	10/31/2015	12/31/2015	DY1 Q3	
Task 4 Metrics Reporting Training Effectiveness	Completed	4 Establish feedback loop to gauge training effectiveness. Providers will be periodically surveyed to check understanding of new policies and procedures established to improve clinical quality. Providers will be provided with monthly/quarterly performance reporting, but as important, follow up items at actionable levels (often at the member level). As with milestones listed under Financial Sustainability, adequate support such as a provider engagement team and formal/informal education and training, will be available to ensure providers meet the requirements of DSRIP.	10/31/2015	03/31/2016	10/31/2015	03/31/2016	03/31/2016	DY1 Q4	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		Additionally, continual review of performance reporting will highlight providers who require additional training (ex. low care gap completions rates, low patient engagement rates).							
Task 5 Identifying Performance Champions	Completed	5 In collaboration with leadership staff (Officers and Directors), the training team to identify primary contact at each site and encourage to become performance champions to help cultivate performance reporting culture and ongoing fine tuning of performance reporting, communication plan, rapid cycle evaluation process.	10/31/2015	03/31/2016	10/31/2015	03/31/2016	03/31/2016	DY1 Q4	

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Establish reporting structure for PPS-wide performance reporting and communication.	
Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #2	Pass & Complete	



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Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 6.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 6.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges or risks that you foresee in implementing performance reporting structures and processes and effective performance management within your network, including potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

Provider and Staff Culture: providers and staff may have been accustomed to a certain culture and now may have to adjust to new ways of documentation. We plan to mitigate this risk thorough dedicated teams for specific communication, education, hands-on training, on-going support, and engagement of all PPS providers and staff on adopted protocols, procedures and metrics. In addition, the IT analytics group and dashboard group will work closely with the user groups, practitioner champions, performance management champions, project leadership teams to design user-friendly, concise, and meaningful and actionable tools and reports to improve accurate reporting, timely and easy access and meaningful interpretation of reports for immediate actionable items, rapid cycle evaluation, including self-evaluation, and feedback to reinforce and cultivate a positive performance reporting experience and culture going forward. Certainly, we will depend on IT systems and processes to address all technical issues properly such as data integration and normalization from different source, dashboard views and security assignments for different users, etc.

✔ IPQR Module 6.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

Departments with major dependencies include Workforce (with IT and Clinical Integration being a key dependency) and Financial Sustainability. IT and Clinical integration allows for the PPS to understand performance at the clinic level in more real time than using claims or other process flows with inherent time lags. Similarly, the PPS can also send data to the providers efficiently that provides feedback on current initiatives. Integration at all levels will allow providers to review performance and develop steps to improve. Additionally, financial sustainability plays a major role in the prioritization of initiatives in a physician office. The provider has to be financially sustainable in order to be effective in deployment of initiatives based on the information from performance reporting.



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✓ IPQR Module 6.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
CIO	Tonguc Yaman	Develop ACP performance reporting module with underlying layered reporting structure with all measures, metrics, milestones for required reporting, rapid cycle evaluation, manage network evolution to value-based payment.
10 Clinical Quality Committees	TBD	Criteria, input, feedback as to data elements, decision-making algorithms, data values, technical specifications, user interface specifications. Oversight and review of reports with measurements of performance, provide feedback to providers.
IT Support Team (including PCMH)	Luis Ramirez	Communication, education and continuing education, hand-on assistance, on-going support, cultivation
IT Committee (Chair: John Dionisio)	IT Committee Members	Establish guidelines for IT platform development to meet reporting metrics in a usable format
Provider Engagement Team	TBD	Educate and support ACP participating providers on project metrics and reporting
VP of Clinical Initiatives	Lidia Virgil	Together with IT Director establish parameters for reporting, metrics and deliverables. Ensure All ACP providers are engaged and trained on all aspects of project implementation.
CTO	Corey Maher	IT Architecture, systems development
Sr Director of Data and Analytics	John Dionisio	Data analytics and reporting



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Advocate Community Providers, Inc. (PPS ID:25)

✔ IPQR Module 6.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
IT Vendors of EHRs and HIEs (various Points of Contact)	Provide required technical capabilities	Access to accurate and timely data required
Back Office Vendor	Provide required technical capabilities and reporting best practices	Reporting templates, Data and Analytics functionalities
ACP Directors of Operations (Alexander Damiron, Gloria Wong)	Project Management to ensure sustainability of providers	Management of processes and proposals
Director of Data and Analytics (John Dionisio)	Oversight of policies, work groups and deliverables regarding IT	Management of processes and proposals. Ensure adequate quarterly reporting to earn Achievement Values.
PCMH / EHRs-MU Certification Lead (Pabel Medina)	Support and assist PPS network providers to achieve PCMH-EHRs-MU certification by DY3	PCMH 2014 Level 3 certification of all PPS safety net providers by DY3
PAC	Advise and assist by providing feedback from PPS network and community at large	Advise on reporting metrics, clarity and frequency of distribution
CTO	Corey Maher	IT Architecture, systems development
CIO	Tonguc Yaman	Overall IT process development
External Stakeholders		
Data consumers	Use data to gauge performance for their own network, or other network providers, individually or collectively	Comparative score cards
MCOs (various Points of Contact)	Provide supplemental data	Supplemental data for performance reporting, managing network and its evolution to value-based payment
RHIO/SHIN-NY (Healthix)	Global-level data sharing	DSRIP requirements for integrated delivery system, connectivity and interoperability and common data sets



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✔ IPQR Module 6.7 - IT Expectations

Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support your approach to performance reporting.

Having IT infrastructure across the PPS will facilitate the performance reporting process, in a more efficient, comprehensible manner with less effort and time compared to manual reporting. All information will be gathered centrally in a secure HIPAA compliant data warehouse, normalized, integrated, longitudinal, from which all metrics may be gathered, organized, analyzed, presented. Data provided by different sources, such as from State, MCOs, EHRs, hospitals, etc. will be reconciled and clearly identified so that all analyses, projections, and presentations are accurate.

✔ IPQR Module 6.8 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

ACP will create a performance reporting platform for the PPS which will integrate measurable activities performed by each partner, physician, non-physician, organizational, community based, etc. to allow for reporting and monitoring of all services provided to attributed patients and the overall community population. The platform is to be accurate, timely, easily accessible, meaningful and actionable for all levels of participants involved, so that all are informed / educated, motivated to contribute to constructive decision-making and actions to drive improvements, deploy resources, and work towards achieving DSRIP program goals. Data gathered will be used to monitor performance, but also to enhance services provided to the communities ACP serves. Specifically, data that measures the requirements of engagement and gap-to-goal care gap hit rates, as well as performance data (admissions, re-admissions within 30 days and ED cost and utilization rates [admits/1000, days/1000], acuity scores, preventive medicine such as immunizations and screenings, etc). ACP will also measure care plan compliance which will include both provider and member compliance (compliance with approved care plans are key to the success of ACP) and achieving target states (ie controlled blood pressure and appropriate A1C levels). Additionally, reports on effectiveness of training programs that focus impacting utilization metrics will be created to identify provider understanding of reports, actionable steps and overall engagement with DSRIP requirements. Metrics will include: Participation - providers are open to training and subsequent retraining if necessary, Follow-thru - measuring follow thru of provider with set goals (ie close specific care gaps in agreed-upon time frame) and positive trending of engagement membership.

IPQR Module 6.9 - IA Monitoring

Instructions :



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Section 07 – Practitioner Engagement

IPQR Module 7.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Develop Practitioners communication and engagement plan.	Completed	Practitioner communication and engagement plan. This should include: -- Your plans for creating PPS-wide professional groups / communities and their role in the PPS structure -- The development of standard performance reports to professional groups --The identification of profession / peer-group representatives for relevant governing bodies, including (but not limited to) Clinical Quality Committee	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	NO
Task 1 Create Practitioner Engagement Team	Completed	1 Create practitioner engagement team and practitioner engagement plan led Lidia Virgil, Director of Programs	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 Recruit Practitioner Champions	Completed	2 Recruit Practitioner champions and influencers from among the key professional practitioner groups such as physicians, nurses, behavioral health and substance abuse practitioners, community health workers, navigators and others throughout the care continuum within the ACP service area. Organize these individuals as a representative body that will represent the views of practitioners to the ACP Board. This group of selected practitioner champions and influencers will participate on the Clinical Quality Committee and will serve as the spokespersons for their respective professional peer groups. Clinical Quality Committee will be chaired by Dr Jackson Kuan, MD with support from workstream directors (Lidia Virgil, John Dionisio).	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 3 Develop a Communication Campaign Strategy	Completed	3 Develop a communication campaign leveraging existing professional groups to gather and stimulate practitioners for	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		participation in physician engagement meetings.							
Task 4 Develop Physician Engagement Teams	Completed	4 Develop physician engagement teams which will provide on site support and guidance to practitioners. These teams will periodically visit the practitioners and maintain active contact with them to encourage compliance and serve to liase between the individual practitioner and the PPS.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 5 Develop Physician Engagement Plan	Completed	5 Develop a practitioner engagement meeting plan with established PPS wide practitioner meetings to provide updates on implementation and performance and provide the practitioner a platform for actively providing feedback and discussing any issues.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 6 Develop DSRIP Protocol Manual	Completed	6 Develop user friendly materials for distribution to physicians on DSRIP processes and procedures including reporting metrics, Evidence based protocols, procedure manuals for support.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 7 Develop Reporting Metrics and Benchmarks	Completed	7 Develop reporting metrics and benchmarks to be used to monitor compliance with DSRIP measures and provide training to practitioners on each measure. Metrics include patient engagement, care gap close rates, care plan compliance, etc.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Milestone #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.	Completed	Practitioner training / education plan.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	NO
Task 1 Develop Education Campaign	Completed	1 Develop educational campaign and training venue for practitioner that provides information on Key Goals and Objective of the DSRIP program by Lidia Virgil, Director of Programs.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 2 Develop Evidence-Based Protocols	Completed	2 Develop and disseminate evidence-based protocols for project implementation and performance.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 3 Develop Procedure Manual and How-to's	Completed	3 Develop procedure manuals and how-to workflow tools for documenting procedures.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 4 Develop Performance Reporting	Completed	4 Develop downstream reporting to present to individual practitioners regarding individual performance and corrective action plans for quality improvement.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Task 5 Hold Practitioner Engagement Meetings	Completed	5 Hold PPS wide practitioner engagement meetings to educate on DSRIP goals and requirements.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1	
Task 6 Develop ACP Website Repository	Completed	6 Develop ACP website and include all DSRIP support information, ACP procedures, processes, protocols and reporting structure.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Develop Practitioners communication and engagement plan.	
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.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Complete	



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✔ IPQR Module 7.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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✓ IPQR Module 7.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the current level of engagement of your physician community in the DSRIP program and describe the key challenges or risks that you foresee in implementing your plans for physician engagement and achieving the milestones described above. Describe any potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

Practitioner engagement is the initial and ongoing initiative with active and committed practitioners. A substantial portion of the ACP practitioner community currently has a significant interest in the DSRIP program since the program affects their clients, the Medicaid recipients.

Lack of Practitioner Champions and Influencers: The first major risk is that we don't find a sufficient number of practitioners who are willing and able to take time away from their day job to become significantly involved with ACP in this critical stewardship role. To mitigate this we look to attract those practitioners who are currently leaders in the clinical community and who have shown a strong interest in DSRIP. We also intend to find back-up leaders who are willing and able to step in should the first set of champions and influencers have to step out for whatever reasons.

Physician Behavior Change: Practitioners are in the business of healthcare and therefore the required core behavior changes vital to DSRIP transformation are likely to affect their practice styles and their practice financial situations. This will make it difficult for practitioner champions and influencers to get the average practitioner's buy-in. To mitigate this risk we will establish a value based payment program that rewards practitioners for changing their behavior. Community practitioners are likely to show a resistance to "cookbook medicine" including the adoption and adherence to EBM, clinical protocols and paths. To mitigate this practitioner leaders must be willing and able to model the behavior change required and educate their peers on the necessity to change in order to survive in the future health care system. The development of financial incentives for short run behavior modification and value-based payment in the long run behavior change is a key component of practitioner engagement.

Administrative Support: A majority of the activities surround provider engagement are at the grassroots level. Engagement teams must be very efficient, properly trained, develop lasting relationships and have the ability to cover large territories (ie borough-wide) to ensure provider engagement, training and re-training are adequate. This group will be the main point of contact with the PPS network.

✓ IPQR Module 7.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

All of the work streams are interrelated. They all depend on an effective and efficient governance structure and process. Our plans for practitioner engagement depend on an HIT infrastructure that allows for reliable communication across the care continuum. We look to make sure that every PCP has an EMR and proficiently uses it. We intend to have our champions practitioners evangelize clinical integration and the use of EBM among independent practitioners. The dual role and responsibilities of practitioner champions extends beyond advocating on behalf of the ACP DSRIP program to practitioners to advocating on behalf of the practitioner communities they represent and communicating information back to the ACP governance. Clinical quality committees and medical directors will have a major impact on the practitioner engagement. The Clinical Quality Committees and the Medical Director will have direct oversight and monitor metrics providing invaluable feedback to each provider, encouraging them to achieve higher performance and working to ensure the highest quality of care is given to each patient the PPS serves. IT shall provide the infrastructure to achieve meaningful reporting of performance and continued efficient HIE . Workforce dependencies are a primary source,



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Practitioners will need much support and a well trained staff in order to provide the best and most efficient, cost effective care, which in turn shall produce success in all DSRIP goals.



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✓ IPQR Module 7.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
Director of Clinical Programs	Lidia Virgil	Manage the development and implementation of the practitioner engagement communication strategy and report progress to the ACP Board
Physician Champions	Dr Cheng Gonjon, MD, Dr Jose Goris, MD, Dr Juan Tapia, MD, Dr Henry Chen, MD, and others	Motivate physicians in ACP to make necessary behavior changes required by DSRIP, serve on the Clinical Quality Committee; responsible for ACP clinical care project initiatives
Practitioner Engagement Manager	Lidia Virgil	Provide outreach and support to practitioners in the implementation of DSRIP projects. Be a consistent point of contact for practitioners.
Behavioral Health and Substance Abuse Practitioners	Dr Fernando Taveras, MD, Dr Rodney Campos, MD	Motivate behavioral health and substance abuse practitioners in ACP to make necessary behavior changes required by DSRIP, serve on the Clinical Quality Committee; responsible for ACP clinical care project initiatives
Other Key Service Type Practitioner Champions	Members of PAC leadership council	Motivate other key practitioner types in ACP to make necessary behavior changes required by DSRIP, serve on the Clinical Quality Committee; responsible for ACP clinical care project initiatives
Patient representative	Ramon Anibal Ramos	Represent the interest of Medicaid recipients and uninsured to practitioner champions with respect to patient centered care.
New York City Department of Health & Mental Hygiene	Rosemary Martinez	Ensure development disease population policies are current. Provide support to PPS specific to initiatives and engagement activities to developmental disease populations.
Life Adjustment Center, Inc	Yuri Feynberg, PHD	Provide support to PPS specific to initiatives and engagement activities to developmental disease populations.
Intellectual and Deelopmental Disabilities Services	TBD	Provide support to PPS specific to initiatives and engagement activities to developmentally disabled populations.



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✓ IPQR Module 7.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
Practitioners throughout the network	Target engagement activities	Attend training sessions, specific patient engagement activities, report to relevant Practitioner Champions
Lidia Virgil, Director of Clinical Programs	Oversight of all training strategies, including practitioner education / training.	Create practitioner engagement, education / training plan
Clinical Quality Committee	ACP Board committee	Review and advise on practitioner engagement plan and changes to the plan
Corinthian/Balance IPA Lead (Dr Ramon Tallaj, MD)	Engage and encourage physicians to participate in DSRIP	Liaise with practitioners, assist in planning meetings and engaging practitioners, distribute communications and updates, leverage experience in at risk contracting and value based payments
ECAP IPA Lead (Dr Henry Chen, MD)	Engage and encourage physicians to participate in DSRIP	Liaise with practitioners, assist in planning meetings and engaging practitioners, distribute communications and updates, leverage experience in at risk contracting and value based payments
Excelsior IPA Lead (Dr Emilio Villegas, MD)	Engage and encourage physicians to participate in DSRIP	Liaise with practitioners, assist in planning meetings and engaging practitioners, distribute communications and updates, leverage experience in at risk contracting and value based payments
Dr. Angelo Canedo, Medisys Health System	Engage and encourage Medisys physicians to participate in DSRIP	Liaise with practitioners, assist in planning meetings and engaging practitioners, distribute communications and updates, leverage experience in at risk contracting and value based payments
External Stakeholders		
DOH (PCMH)	Provide incentive payments for PCMH status	Ensure PCMH incentives continue to be a part of the program. Physicians rely on these additional incentives to maintain PCMH status.
ECW, MD Land	EMR Vendors	Provide training and efficient processes within EMR to create smooth DSRIP compliant workstreams to assist providers in care



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✓ IPQR Module 7.7 - IT Expectations

Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream.

Within the evolving New York health care landscape there is an increasing demand for coordination, new organizational structures, greater transparency, greater patient-centered care and value-based payment models. Building strong practitioner engagement and alignment to DSRIP goals and objectives is pivotal to achieving success. Strong practitioner engagement and alignment to the mission, vision and values of ACP is needed to obtain voluntary behavior change. The goal is to meaningfully engage with practitioners in order for them to collaborate and deliver exceptional care and outcomes to the Medicaid and uninsured population. Communication across the continuum of care is fundamental to meeting ACP Goals and Objectives. Stated otherwise, without a newly designed and implemented HIT infrastructure whereby practitioners can share clinical information in an integrated fashion nothing much will change. Therefore, the development of an HIT infrastructure that connects all practitioners large and small in an easy to use platform is a critical necessity for success. We look to create a HIT infrastructure through the use of established vendors. We look to involve practitioner champions in review of the design of the HIT system. Over time we look to make improvements that will heighten the ability of individual practitioners to share clinical information and become part of a clinically integrated whole. An HIT infrastructure that will meet the needs of DSRIP healthcare transformation will also be critical for the success of practitioner engagement.

✓ IPQR Module 7.8 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

Being able to attract a sufficient number of dedicated practitioner champions and influencers for our practitioner education and training programs is a first indicator of our ability to be successful in rolling out this work stream. The number of practitioners who enroll and turn out for the engagement programs is a further indicator of success. We look to deliver education and training by using various venues such as face to face, Webinars, conference calls, learning collaboratives and web-based/online training. We look to establish target metrics for success as well as develop various assessment methods and tools such as testing (pre and post), interviews, discussion forums, town halls as well as questionnaires. These metrics include: attendance (report on attendance logs), patient engagement rates (report on volume of patients w project-specific engagement requirements), care gap hit rates, performance data (admissions, re-admissions and ED cost and utilization rates [admits/1000, days/1000, acuity score]), also gauged for performance will be achievement of disease specific target goals and disease progression or detention rates. ACP will also measure care plan compliance, an indicator that providers are engaged and following established care plans (while considering the potential for member non-compliance).

IPQR Module 7.9 - IA Monitoring



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Instructions :



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Section 08 – Population Health Management

IPQR Module 8.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Develop population health management roadmap.	Completed	Population health roadmap, signed off by PPS Board, including: -- The IT infrastructure required to support a population health management approach -- Your overarching plans for achieving PCMH 2014 Level 3 certification in relevant provider organizations --Defined priority target populations and define plans for addressing their health disparities.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	NO
Task 1 Identify Hotspots	Completed	1 Based on the CNA results, identify population hotspots, both in the PPS area and in specific geographic areas, to target those with greatest needs within each of the chosen projects. Solicit participating providers' feedback before finalization.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 2 Distribute Protocols	Completed	2 Distribute protocols/ care guidelines for providers on engaging and treating target population. Establish metrics for each clinical area to monitor progress in managing population health.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 3 Create Reporting Dashboard	Completed	3 Create a dashboard that can be easily accessed by all participating providers to monitor population health outreach and patient engagement and compliance.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 4 Create Workgroup	Completed	4 Create Clinical Operations/IT Workgroup to establish population health criteria with metrics to incorporate within integrated delivery system design.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 5 Data Inventory	Completed	5 Inventory available data sets with individual demographic, health, and community status information , to supplement our use of the data available through available state tools such as	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		MAPP tool, etc.							
Task 6 Database Development	Completed	6 Develop a relational database for individual care management. Perform data analyses to identify target population through algorithms and registries; identify priority practice groups to have access to registries	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 7 Workforce Assessment	Completed	7 Complete workforce assessment for priority practice groups' care management capabilities, including staff skills and resources required to manage priority at risk populations in each geographic area. Develop workforce training / re-training / support staff assignment to mitigate workforce gaps.	04/01/2015	03/30/2016	04/01/2015	03/30/2016	03/31/2016	DY1 Q4	
Task 8 PCMH	Completed	8 Establish PCMH / EHR-MU Certification Team and vendor support to identify key gaps and develop plan to achieve Level 3 certification by DY3.	10/01/2015	03/30/2016	10/01/2015	03/30/2016	03/31/2016	DY1 Q4	
Task 9 Support Staff Deployment	Completed	9 Deploy staff support at provider level to train providers to use and apply information learned from registries; how to implement established care guidelines; develop disease pathways; inform on metrics for monitoring progress in managing population health; implement plan to achieve PCMH Level 3 certification by DY3.	10/01/2015	03/30/2016	10/01/2015	03/30/2016	03/31/2016	DY1 Q4	
Task 10 Promotional Education Materials	Completed	10 Create promotional educational materials and distribution plan for population wide health campaigns	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 11 CBO Engagement	Completed	11 Work with CBOs and other PPS's in reaching target populations, disseminating materials in a culturally sensitive manner in the promotion of population health and specifically those projects chosen by ACP PPS.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 12 Finalize CBO Agreements	Completed	12 Finalize Agreements with CBOs for the provision of services related to population health in specific projects such as tobacco cessation, sex education, cancer prevention, etc.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 13 Finalize Roadmap	Completed	13 Clinical Quality Committee to finalize population health management roadmap	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Milestone #2 Finalize PPS-wide bed reduction plan.	In Progress	PPS Bed Reduction plan, signed off by PPS Board. This should set out your plan for bed reductions across your network, including behavioral health units/facilities, in line with planned reductions in avoidable admissions and the shift of activity from inpatient to outpatient settings.	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4	NO
Task 1 Establish Service Utilization Monitoring Team	Completed	1 1. Establish Service Utilization Monitoring Team (SUMT) with partner hospitals and behavioral health units / facilities.	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		This team will report to the PMO and Clinical Quality Committee and will be responsible for monitoring and reporting on reductions in avoidable hospital use and modeling the impact of all DSRIP projects on inpatient activities. Team will collect and produce utilization reports based on bed type (BH, Med/Surg, OB/Maternity) and utilization in the ED to ensure appropriate metrics are developed for each bed type and department.							
Task 2 Data Analysis	Completed	2 SUMT to analyze and model the impact of all DSRIP projects on avoidable hospital use and utilization of hospital services (inpatient and outpatient) and demand for community-based services. Model can be updated regularly (monthly or quarterly)	10/01/2015	03/30/2016	10/01/2015	03/30/2016	03/31/2016	DY1 Q4	
Task 3 Data Forecasting	Completed	3 Based on the modeling and in consultation with provider network, establish a high level forecast of: - Reduced avoidable hospital use over time - Changes in inpatient capacity (including BH, Med/Surge, OB/Maternity and others) - Resulting changes in community / outpatient / ED capacity (non-psych/MH/SUD ED and psych/MH/SUD-ED)	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 4 Draft Capacity Plan	In Progress	4 SUMT to lead consultation on first draft capacity change plans	04/01/2016	12/31/2016	04/01/2016	12/31/2016	12/31/2016	DY2 Q3	
Task 5 Publish Capacity Plan	In Progress	5 Finalize and publish final capacity change / bed reduction plan and schedule updates of capacity changes across the network	10/01/2016	03/31/2017	10/01/2016	03/31/2017	03/31/2017	DY2 Q4	

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Finalize PPS-wide bed reduction plan.	jd593813	Other	25_DY2Q2_PHM_MDL81_PRES2_OTH_Pop_Hea	Pop Health 2.3 Bed Reduction Plan	10/31/2016 12:25 PM



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Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
			lth_2.3_Bed_Reduction_Plan_7585.docx		

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Develop population health management roadmap.	
Finalize PPS-wide bed reduction plan.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Ongoing	



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✔ IPQR Module 8.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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✓ IPQR Module 8.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges or risks that you foresee in implementing these cross-cutting organizational strategies, including potential impacts on specific projects and, crucially, any risks that will undermine your ability to achieve outcome measure targets.

Provider and Staff Culture: Changing the culture of how services are delivered represents a true challenge in the area of population health. At present, the healthcare system is set up in a way that care is delivered on a one on one basis and is delivered in the face of specific conditions, to address those specific conditions. In the population health projects, the PPS will need to address conditions that a patient and/or member of the target population may not have yet. The culture of all of the practices must be changed to a more predictive and proactive method. This will be difficult as it represents additional expenses at little or no reimbursement since at present, there is little to no reimbursement on the part of payers for preventive services. The PPS aims to mitigate this risk by negotiating with payers, MCOs to provide reimbursement for educational visits, and other preventive care services. The PPS will also mitigate this risk through the training and retraining of its providers in the provision of preventive care services. Another way to mitigate this risk is through population wide campaigns through several methods, achievable with the help of Community partners.

Patient Engagement: Another risk is in effectively reaching out to and engaging the at risk populations. ACP plans to mitigate this risk with the use of Community Health Workers/Health Advocates who have direct connections with the community and share cultures and language with the patients.

Population Health Analytics: Another risk is that population health data analyses are time consuming and expensive and it takes a long time for organizations to develop new services or interventions. To mitigate this risk, we plan to start with available high level data at hand from our CNA, refine them and apply them at actionable levels first and then supplement them with the more detailed data analyses.

Continue population health management approach: To facilitate continued education and cultivation of the population health management approach, we will improve on our communications and workforce training strategies to ensure meaningful education on population health management.

✓ IPQR Module 8.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

Successful implementation of multiple workstreams will contribute significantly to the development of effective population health management across ACP PPS.

1. Effective and rapid communication and data sharing will be used to ascertain defined target and outreach methodology for implementation of population health initiatives Thus, a robust and functional set of data gathering and monitoring tools surveys, CNA, registries shall be implemented with the IT platform functionality.
2. Population Health will also be highly dependent on workforce as it will require staff re-training as well as new staff deployment including community health workers/health advocates, etc.



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3. Finance has an integral role in population health management since all campaigns and new systems and processes will require a financial commitment from the PPS to cover high costs of same.
4. Governance in all of its forms will play a key role since agreements with CBOs, community leaders, other PPS' will have to be in place for shared information and outreach. The PMO will have direct intervention in since it will distribute and implement protocols and processes for patient engagement and intervention.
5. Another major dependency is the Provider Engagement team, who will have to provide the providers with information, training materials and achieve provider buy in and support. Training or re-training of care managers, care coordinators, and other care team support staff would also be a key dependency for our network providers. In addition, an integrated delivery system where information technology are leveraged for clinical care would help to round out the tool set for the population health management care team.
6. Cultural competency is also important in educating and engaging patients in taking appropriate action and changing health behaviors in the PPS' population health projects of tobacco cessation and prevention of chronic diseases.



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✓ IPQR Module 8.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this organizational work stream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
Program Director	Lidia Virgil	Structure and Oversee the implementation of the population health management strategy; Prepare provider engagement plan and Oversee population Health campaigns
Project Manager	Katherine Morillo	Oversee the implementation of the population health management strategy; reports to the Program Director, Clinical Quality Committee and PPS executive body.
Medical Director	Dr Diego Ponieman, MD	Provide guidance on protocols and provider and patient engagement strategies. Enusre clinical quality.
Clinical Quality Committee	Chair: Dr Diego Ponieman, MD	Monitor the impact of DSRIP projects on avoidable hospitalization reduction, changes in inpatient, outpatient, and community capacities; oversee the modeling and implementation of capacity change improvements.
Dir of Data and Analytics	John Dionisio	Lead the development and implementation of the PPS-wide work plan for all relevant providers to achieve PCMH 2014 Level 3 by DY3. Work in coordination with PPS central IT team to ensure population health management IT needs are procured and developed.
IT Committee	Chair: John Dionisio	Assist in procuring / Developing a robust and functional set of data gathering and monitoring tools and expert analysts
Provider Engagement	Lidia Virgil	Educate and communicate population health management approach. Communication of strategies on population health management implementation



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✓ IPQR Module 8.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
ACP CEO (Mario Paredes)	Oversight of DSRIP projects	Jointly responsible for population health initiative implementation and Bed Reduction Plan
Hospital partners in Advocate PPS Bed Reduction plan (Medisys - Jamaica and Flushing Hospitals, NSLIJ - Lenox Hill and Forrest Hills)	Participate in bed reduction plan and analysis	Represent the Bed Reduction Working Group; will review and advise on any bed reduction goals
Nursing Homes (CareNext, Various)	Stakeholder to bed reduction plan	Represent the Bed Reduction Working Group; will review and advise on any bed reduction goals
Behavioral health units / facilities	Stakeholder to bed reduction plan	Represent the Bed Reduction Working Group; will review and advise on any bed reduction goals
ACP Providers	Adoption of population health management practices	Active engagement of patients and deployment of training and education materials
CBOs, including organizations focused on social determinants of health	Vital components to ensure success of the population health management strategy – the "glue" services	Work with care management teams to address social determinants of health issues which may be major obstacles for improved health care and health in target population.
External Stakeholders		
MCOs	Key partner in payment reform	Provide insight and partner with Advocate PPS on population health management approach to be implemented across the PPS. They are collaborators in PPS payment reform in line with NYS value based payment (VBP) roadmap.
Community Leaders	Assist in identifying and achieving target patient outreach and engagement	Assist in providing culturally appropriate and linguistically correct information to the community served by the PPS for population wide campaigns



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✓ IPQR Module 8.7 - IT Expectations

Instructions :

Please describe the current Population Health Management IT capabilities in place throughout your PPS network and what your plans are at this stage for leveraging these capabilities and/or developing new IT infrastructure.

Our data and analytics team will be responsible for ensuring practitioners will have timely and useful data and tools readily available to allow them to help develop interventions and services that will address population health issues for their patient population. These will include MAPP, Salient, EHRs, and other platforms to be developed with providers' input. Our participation agreement will require all relevant providers to adopt and use EHRs and achieve MU and PCMH 2014 Level 3 by DY3. Our PCMH / EHR-MU Certification Workgroup will assist providers and systematically implement the plan to achieve MU and PCMH 2014 Level 3 by DY3. ACP's IT integration will also include patient interactive portal for patient engagement and communication, educational materials and referral tracking and appointment assistance. ACP's platform will include data analytics and predictive modeling module that will allow for early intervention and prevention based on aggregate data with standard deviations, algorithmic values and risk assessment. The data obtained will align with patient engagement strategies for each of ACP's DSRIP projects as well as go beyond the projects into a preventive, preemptive, value based practice. ACP's website will contain materials on ACP's population Health projects together with links to community services both state and local through which patients may obtain services including educational and anonymous services.

✓ IPQR Module 8.8 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

We will monitor the progress and impact of our population health management work stream through a combination of DSRIP outcome measures and specific population health metrics. These will be identified in the Advocate PPS population health roadmap and will be monitored by the Advocate PPS PMO and Clinical Quality Committee. ACP will also use internal and nationally recognized performance measures such as CPTs, claims data, referral tracking and evidence based screenings to monitor engagement, compliance and progress. ACP will also use meaningful use dashboards, EHR and state immunization registries and ERx records to monitor and report progress. Metrics, specific to the two Domain 4 projects that have been selected, will include established rates (smoking rates/100,000, preventive medicine prevalence rates, care gap rates) that are widely available, as well as from internal PPS data derived from physician EHRs. Reporting metrics will be sliced in various ways to create effective population health education plans and outreach campaigns (smoking prevention approach will vary depending on age group, culture, etc). We will build continuous quality improvement into our population health roadmap; establish timeframes for re-evaluation and update of data sets, functionality of registries, and priority issues for population health management. We will certainly identify provider champions and share the knowledge and best practices throughout the PPS network.

IPQR Module 8.9 - IA Monitoring



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Instructions :



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Section 09 – Clinical Integration

✅ IPQR Module 9.1 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement.

Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Perform a clinical integration 'needs assessment'.	Completed	Clinical integration 'needs assessment' document, signed off by the Clinical Quality Committee, including: -- Mapping the providers in the network and their requirements for clinical integration (including clinical providers, care management and other providers impacting on social determinants of health) -- Identifying key data points for shared access and the key interfaces that will have an impact on clinical integration -- Identify other potential mechanisms to be used for driving clinical integration	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	NO
Task 1 Perform IT Assessment of Network	Completed	1 Survey of all providers to determine electronic record, connectivity, and data sharing capabilities, leverage existing systems where applicable, identify gaps in readiness, staffing, workflows. Create assessment tool to determine readiness and capabilities of providers within the network. Director of IT, John Dionisio, with support from clinical operations team (lead: Lidia Virgil) will be responsible for the conducting of the survey (however potential vendor assistance may be an option). Survey questions are aimed to gather information on partner IT structure (centralized, independent, outsourced), operating system compatibility, EHR type, experience with electronic data feeds, MU/PCMH certification, Care Coordination processes and workflows, patient engagement and communication and information exchange capabilities.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 2 Review Assessment Results	Completed	2 Use survey and assessment tool results to determine capabilities of each individual provider's electronic system for	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		integration; gauge individual provider level of preparedness for EMR and level 3 PCMH certification.							
Task 3 Determine Provider Preparedness Level	Completed	3 Determine individual provider level of preparedness for practice workflow restructuring based on current staff and future staff needs, as well as staff educational status and need for retraining. Establish acceptable transition plan with provider if necessary that includes re-training of staff and introducing potential centralized functions that ACP will retain.	10/01/2015	03/30/2016	10/01/2015	03/30/2016	03/31/2016	DY1 Q4	
Task 4 Document Results	Completed	4 Document results and compare against future state. Determine final roll out plan. Gather Board approvals where necessary.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 5 Ensure Provider Readiness for Integrations	Completed	5 Develop and roll out process to ensure provider readiness for integration, where gaps exist.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Milestone #2 Develop a Clinical Integration strategy.	Completed	Clinical Integration Strategy, signed off by Clinical Quality Committee, including: -- Clinical and other info for sharing -- Data sharing systems and interoperability -- A specific Care Transitions Strategy, including: hospital admission and discharge coordination; and care transitions and coordination and communication among primary care, mental health and substance use providers -- Training for providers across settings (inc. ED, inpatient, outpatient) regarding clinical integration, tools and communication for coordination -- Training for operations staff on care coordination and communication tools	04/01/2015	09/30/2016	04/01/2015	09/30/2016	09/30/2016	DY2 Q2	NO
Task 1 Define Project Target State for Clinical Integration	Completed	1 For each DSRIP project: define with the project group what the target clinical integrated state should look like from a people, process, technology and data perspective (including assessment and care protocols and specific attention to care transitions). Identify the main functional barriers to achieving this from the perspective of both provider organizations and individual clinicians. Currently ACP has been a participating PPS with KPMG in the creation of the TOM system, which has provided a basis for integration.	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2	
Task 2 Determine Gaps Between Current and Target	Completed	2 Based on this target state and the gaps identified in the integrated care needs assessment, define and prioritize the	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
State		steps required to close the gaps between current state and desired end state (in terms of the needs for people, process, technology and data).							
Task 3 Transition Paper-based Providers and Non-Certified EHR-based to Certified EHR	Completed	3 Contact providers without EHRs or those with non-certified EHRs as identified in gap analysis and provide contracts for EHR implementation. ACP will support providers and provide assistance and support with implementation of EHR.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3	
Task 4 Develop PCMH Implementation Plan	Completed	4 Contact providers identified in gap analysis and implement plan as in project 2.a.i regarding achievement of PCMH level 3 certification.	10/01/2015	03/30/2016	10/01/2015	03/30/2016	03/31/2016	DY1 Q4	
Task 5 Establish Referral Pathways	Completed	5 Establish referral pathways of integration in which referrals flow between partners in an efficient electronic fashion that can be monitored and in accordance with implemented evidence based protocols and best practices.	10/01/2015	03/30/2016	10/01/2015	03/30/2016	03/31/2016	DY1 Q4	
Task 6 Identify Common Processes for Each Project	Completed	6 Identify the common steps required for each project. For example: the need for supportive IT infrastructure to enable data sharing.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 7 Identify Key Clinical Data Required	Completed	7 Conduct engagement exercise with practitioners and other stakeholders, focused on identifying the key clinical (and other) data that will be required to support effective information exchange at transitions of care	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 8 Create Care Coordination and Provider Education Program	Completed	8 Create care coordination and provider education program and schedule including training and strategies to use based on provider	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 9 Define Incentives	Completed	9 Define incentives to encourage the behaviors and practices that underpin the target state (e.g. multi-disciplinary care planning). These incentives might include financial / personnel support to providers looking to improve the efficiency of their operations in order to create more time for coordinated care practices; or the creation of shared back office service functions to improve the efficiency of provider organizations.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 10 Clinical Integration Stakeholder Input	Completed	10 Consult internal and external stakeholders (including patients) on draft clinical integration and transformation strategy.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 11 Finalize Strategy	Completed	11 Finalize PPS strategy and roadmap document on clinical integration across all projects.	06/01/2016	09/30/2016	06/01/2016	09/30/2016	09/30/2016	DY2 Q2	



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IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Develop a Clinical Integration strategy.	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_IT_Reporting_Roadmap_2016_02_05_(004)_7461.docx	Clinical Integration 2.11 IT Reporting Roadmap 2016 02 05	10/30/2016 02:25 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_How_to_Engage_Patients_Certification_Form_7460.docx	Clinical Integration 2.11 How to Engage Patients Certification Form	10/30/2016 02:25 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_Care_Management_7459.docx	Clinical Integration 2.11 Care Management	10/30/2016 02:24 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_ACP_Training_Checklist_7458.pdf	Clinical Integration 2.11 ACP Training Checklist	10/30/2016 02:24 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_ACP_Population_Health_Roadmap_(2016-6-10)_7457.docx	Clinical Integration 2.11 ACP Population Health Roadmap	10/30/2016 02:23 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_3diii_Asthma_7456.pdf	Clinical Integration 2.11 3diii Asthma	10/30/2016 02:23 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_3ci_Diabetes_7455.docx	Clinical Integration 2.11 3ci Diabetes	10/30/2016 02:22 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_3bi_Cardiovascular_7454.pdf	Clinical Integration 2.11 3bi Cardiovascular	10/30/2016 02:21 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_3ai_PCP-BH_Integration_7453.docx	Clinical Integration 2.11 3ai PCP-BH Integration	10/30/2016 02:20 PM
	ew593815	Other	25_DY2Q2_CI_MDL91_PRES2_OTH_Clinical_Integration_2.11_2aiii_Health_Home_at_Risk_7452.docx	Clinical_Integration_2.11_2aiii_Health_Home_at_Risk	10/30/2016 02:20 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Perform a clinical integration 'needs assessment'.	
Develop a Clinical Integration strategy.	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass (with Exception) & Ongoing	Documentation submitted for the approval of the Clinical integration Strategy is inadequate. The IA considers this milestone to be incomplete and the PPS should mark the milestone to In Progress and resubmit at a later date.



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✔ IPQR Module 9.2 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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✓ IPQR Module 9.3 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges or risks that you foresee in improving the level of clinical integration throughout your network and achieving the milestones described above. Describe potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

IT/EHR Adoption: One of the risks is that some providers may be reluctant to adopt EHRs within tight timeframe to achieve MU 1/2, PCMH Level 3, and to be linked into the clinically interoperable system within the tight timeframe. ACP will provide the providers with support and training through its support center, "hub", in order to help alleviate anxiety and provide efficiency of implementation. Strong provider engagement and buy in is key to this process, therefore the provider engagement team will schedule and run training meetings as well as do individual outreach and surveying of provider status, providing the support teams and governance with readiness and specific action plans.

Referral and Patient Tracking: Another risk is in tracking patient compliance with referrals as coordinated by PCP or specialist providers with such a vast network of providers and such a low health literacy rate we understand that patients tend to seek care through word of mouth in the communities more than through standard evidence based channels. The PPS will mitigate this risk by fostering strong relationships within the community with PCPs, CBOs and providing patient educational campaigns and one on one coaching by the PCP, Care Coordinators and Case managers. The support center, "Hub" care coordination staff will maintain open lines of communication with the patients and provide follow up with them to ensure fulfillment of the referrals and the flow of information to and from PCP and specialty services. The PPS also will use its strength of having such a vast network to ensure that all partners are clinically integrated and have open lines of communication via electronic platform with the ability to share all pertinent patient information so as to track our patients wherever they may receive care. All PPS partners will communicate with central office, (Hub) regarding patient services.

System Integration: Another risk is related to the inadequacy of certain provider's systems for integration. The PPS will mitigate this by creating a platform that is interconnected to many types of systems as well as partnerships with EMR and systems vendors that will provide lower cost systems with stronger support to our partners. The PPS' support center/hub will provide the providers with support, training and assistance. IT policies and process must account for this dependency and create potential workarounds.

✓ IPQR Module 9.4 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

Major dependencies for Clinical Integration are mostly all other aspects of the full implementation plan.

1. Adoption of EHR by all providers is in it's own rite a major dependency since HIE must be timely, efficient and up to the moment.
2. Adoption of PPS clinical protocols and processes by all providers throughout PPS must happen for a successful integration.
3. Governance model must be operational for clear and consistent communication of all providers and follow through, monitoring, incentives for compliance.
4. Clinical integration has a major dependency on workforce strategy. The workforce will need to supply the additional staff needed for implementation of clinical integration, provider engagement and support center staff as well as current staff retraining.



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✔ IPQR Module 9.5 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
Director of Data and Analytics	John Dionisio	IT Governance, Change Management, IT architecture, data security and confidentiality, data exchange
CTO	Corey Maher	Data security and confidentiality plan, data exchange plan and other operational requirements, both internal and external to the PPS
HIE Application Lead	Rong Zhao	Application strategy and data architecture
IT Operations Proj Manage and PCMH	Pabel Medina	Ensure proper controls and protocols are in place for effective day-to-day operational activities including monitoring
CMO	Dr Diego Poniman, MD	Ensure proper controls and protocols are in place for effective day-to-day operational activities including monitoring
Director of Clinical Operations	Lidia Virgil	Structure and Oversee clinical integration requirements from a clinical perspective; Prepare provider engagement plan



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✓ IPQR Module 9.6 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
ACP Board (Chairman: Dr Ramon Tallaj, MD)	Approval/Rejection of key initiatives associated with DSRIP program.	Ensure appropriate approvals/rejections of initiatives that directly involve execution of DSRIP programs.
ACP Directors of Operations (Alexander Damiron, Gloria Wong)	Project Management to ensure sustainability of providers	Management of processes and proposals
Director of Data and Analytics (John Dionisio)	Oversight of policies, work groups and deliverables regarding IT	Management of processes and proposals. Ensure clinical project requirements are incorporated into IT solution.
IT Committee Chair (John Dionisio)	Interface between IT Committee and front line end users	Input into system design, testing, and training strategies
Director of Workforce (Moises Perez)	Oversight of all training strategies, including practitioner/staff education	Input into practitioner / staff training plan
Director of Clinical Programs	Lidia Virgil	Ensure clinical protocols are part of business requirements document that will drive IT development
External Stakeholders		
Patients (Patient Rep: Ramon Anibal Ramos)	Care improved upon by the clinical integration of the PPS	Response to consultation on clinical integration strategy
Patient Family members and Caregivers	Communication with practitioners, particularly on behalf of children, the elderly, or those without mental capacity	Response to consultation on clinical integration strategy
EHRs vendors	Partner in EHRs and HIE solutions	EHRs and HIE solutions that meets DSRIP requirements for integrated delivery system, connectivity and interoperability



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✅ IPQR Module 9.7 - IT Expectations

Instructions :

Please clearly describe how the development of shared IT infrastructure across the PPS will support this particular workstream.

Key elements of the IT infrastructure include the adoption of EHRs by all participating providers, and the achievement of PCMH Level 3, as well as the development of interconnectivity platform for HIE. Full EHR connectivity will enable electronic linkage and sharing of pertinent data on a common platform. ACP will also connect to RHIO / SHIN-NY for more effective HIE and reporting throughout and across all PPS'. Until full EHR / HIE connectivity is achieved, ACP has developed alternate internal HIE systems and processes and will utilize State platforms such as MAPP and Salient to share milestone and metric progress and analytics PPS wide. This will be supplemented with our own performance metrics and analytics. ACP will use its support center, which includes IT support teams, to provide support to all of our providers to report on all clinical and quality measures. The IT teams will provide support with EHR, PCMH, interconnectivity and data exchange. While our platform is being finalized, we will use a mix of manual and electronic methods, such as HIEs that are available from our EMR vendors. We will adhere to the DSRIP's requirements and protocols for data sharing and confidentiality. We have had successful pilots with three of our partner hospitals in secure messaging and alerts for ED and hospital admission / discharge / transfer (ADT) and will be able to deploy this for all of our network providers. While we await the availability of the State's Health Home platform and RHIO platforms, we will use patient and physician portals that are associated with our current major EHR vendors used by our network providers.

✅ IPQR Module 9.8 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

ACP will develop monitoring metrics which will be run periodically to measure success of the processes. Process success will be measured based on patient information exchange and efficiency of providing services to patient as referred by all ACP providers. Measures will include effective communication between providers as well as HIE. Performance monitoring will include completion and receipt of referral reports as well as the turnaround time for these. Success and the integrity of the process will also be measured based on MU dashboard data which will show proper use of the EMR, also via Care Coordination platform measuring patient outreach and compliance also being used for PCMH certification. Metrics to be measured and tracked include: referral close rates ('referral aging schedule' to measure response time and actual close rate percentages), patient engagement rates, care plan compliance, etc. for all providers and especially for CBOs (CBO role in entire process is crucial to ensure patients receive adequate social supports). Other typical metrics will include admission, re-admission and ED utilization rates to ensure that those who do have high utilization are outreached to and provide care management.

IPQR Module 9.9 - IA Monitoring:



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Instructions :



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Section 10 – General Project Reporting

✅ IPQR Module 10.1 - Overall approach to implementation

Instructions :

Please summarize your intended approach to the implementation of your chosen DSRIP projects, including considerations around how this approach will allow for the successful development of concurrently implementing DSRIP projects.

ACP's network requires alignment of a range of providers to ensure the PPS's performance meets milestones, goals of the projects and overall goals of DSRIP. Each project will have its own leadership with clinical and operational leads, representative of the service providers involved and will be responsible for project management, tracking and monitoring progress toward milestones and metrics at all levels, ensuring compliance with project requirements, speed and scale, and reporting the progress on these to the workstream directors and Clinical Quality Committee. The project team will also oversee the development of provider/staff/patient education, training and support, and ensuring adherence to Clinical Committee guidelines. Medical Directors will be responsible for providing support to providers and their patients by providing care coordination, care management, education, training, and outreach. The staff for care coordinators, care managers, outreach staff are consistent with workforce streams.

ACP will use internal and State platforms for continuous education and communication. In addition, all leadership and participating providers will be encouraged to participate in workgroups and collaborative learning groups. We will build on our existing IPA/ACO regional physician engagement teams and meet monthly/quarterly. Experience has found that peer education is a key component for maintaining meaningful engagement among physicians.

We will use a platform for data sharing to empower providers with information for clinical decision making, behavior change, and performance achievement. This platform is being put together in Project 2.a.i and will have connectivity and real-time exchange in addition to connectivity with RHIO/SHINY and other state reporting sites such as Salient.

In addition to the general framework for DSRIP, ACP intends to approach project implementation in several ways. All projects will follow:

1. Creation and implementation of evidence-based protocols. ACP has developed and drafted evidence-based and process manuals to support quality treatment of its patients and a consistent approach to care. Each protocol also has been condensed into shorter summaries for easier approach and understanding by providers.
2. Creation of a support center who will provide ongoing support to all of ACP's providers. This will consist of IT Support, Outreach, Care Coordination/Management, and Reporting/Analytics staff.
3. ACP has Physician Engagement teams who shall be the first line of communication with providers and staff to provide ongoing outreach and training. The Physician Engagement teams will be comprised of staff of the same culture and regional area as the providers. The processes will provide the tools that providers will need to be successful without implementing new workflows on their own. Many times the providers treat all of the conditions addressed in the DSRIP projects in a vacuum and without support, causing them to not being able to provide close monitoring and follow up. ACP's implementation plan takes the providers current workflows and promotes higher rates of compliance and quality care.
4. The project implementation process will be guided and overseen by Directors and the clinical quality committee. Progress will be monitored through metrics developed by ACP for reporting which will include MU and PCMH quality reporting as well as claims data, CDSS alerts and other ACP quality metrics.
5. Throughout all of ACP's projects, ACP will work collaboratively with all other PPS' and will include joint campaigns for population health, health



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literacy and community engagement and project specific initiatives including patients receiving services for care transitions and ED triage.

✓ IPQR Module 10.2 - Major dependencies between work streams and coordination of projects

Instructions :

Please describe how your approach will handle interdependencies between complementary projects, as well as between projects and cross-cutting PPS initiatives - for example, an IT infrastructure upgrade, or the establishment of data sharing protocols.

Many interdependencies exist between ACP's DSRIP projects. These interdependencies live in the major IT infrastructure that ACP is developing with an interconnected IT platform that will allow for real-time data sharing between providers and fostering of exquisite care coordination. A care coordinator and PCP staff will be able to follow a patient from the point of initial contact through the referral and consult back process, never losing site of the patient status and care. All PCPs will attain PCMH level 3 status thus improving the quality of care and care coordination of their patients. ACP's protocols are comprehensive and extensive and cover many often-missed elements of disease care which involve and intertwine with care for comorbid conditions also addressed in other of ACP's DSRIP projects. Several of the projects being implemented by ACP have several synergies in their treatment plans and approaches to care and many patients have comorbidities corresponding with the disease specific projects being implemented. ACP plans to capitalize on these synergies to avoid duplications and create more efficient treatment of patients and increased patient engagement. ACP will have staff that is trained in several aspects of care and not just one project, to address those patients with comorbidities, or more than one condition pertaining to more than one of our projects. For example a Diabetic who also has Hypertension and who will receive Lifestyle coaching and disease management techniques for both diseases will receive care from one PCP and be followed by the same care coordination and case manager. This alignment creates a greater rapport between the patient and the practice/staff and translate into increased compliance.

With respect to overlapping project requirements, we have mapped these out in a matrix format showing the cross-cutting of requirements. For those project requirements that are most pervasive, we have set up specific work teams tasked with ensuring consistent and coordinated implementation. The achievement of PCMH 2014 Level 3 certification is one example - we have a dedicated PCMH / EHR-Meaningful Use (MU) team that will be responsible for assisting all relevant providers to meet this project requirement according to the timetable set out in speed and scale commitments. This work team will be responsible for the overlapping requirements of using EHRs to track all patients engaged in projects and ensure all EHR systems used by participating safety-net providers meet MU and PCMH Level 3 by the end of DY3.

The Clinical Quality Committee will also work collaboratively with other work stream committees to ensure activities are complementary and supplementary to their activities as there are dependencies among them. We will depend on IT systems and processes for our data sharing communications strategies, clinical integration, and timely performance reporting for rapid cycle evaluation. Access and understanding analytics will help in more accurate population health management.



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✅ IPQR Module 10.3 - Project Roles and Responsibilities

Instructions :

Please outline the key individuals & organizations that play a role in the delivery of your PPS's DSRIP projects, as well as what their responsibilities are regarding governance, implementation, monitoring and reporting on your DSRIP projects.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
New York State Department of Health	Peggy Chan	Provide guidance for project implementation, metrics and reporting Funds - payments for goal attainment
Board of Directors	Chairman: Dr Ramon Tallaj MD	Oversight and performance evaluation feedback Provide necessary funds for project implementation
ACP CEO	Mario Paredes	Oversee all management functions, Staffing Organizational functions Assist in funds distribution
Clinical Committee	Chair: Dr Diego Ponieman, MD	Provide oversight and advise on clinical elements of project implementation Advisory on clinical protocols, process and procedure manuals
IT Committee	Chair: John Dionisio	Provide oversight and guidance on clinical integration for project implementation Review IT proposals, vendors and IT security Provide advisory on selections
CMO	Chair: Dr Diego Ponieman, MD	Provide guidance on clinical protocols and oversight in all clinical projects, evaluate performance and provide feedback and implement corrective action plan for low performers.
CTO	Corey Maher	Assist in creation of HIE platform, attainment of PCMH level 3 certification for all PCPs and EMR implementation for all practitioners Plan for successful implementation of EMR, PCMH certification and HIE interconnectivity platform.
Workforce Director	Moises Perez	Analyze staffing necessary for implementation of each project and success. Provide oversight and guidance on staffing needs Identify retraining and new staff needs.
Community Based Organizations	Several, God's Love we Deliver, Association of People with Developmental Disabilities	Assist in providing necessary services to patients including social services and community engagement
Patient / User Groups	Ramon Anibal Ramos	Ensure the patient view and insight drive project strategy and implementation.
TEF (Sandi Vito)	Workforce Training and Redeployment	Participate on Workforce Training and Redeployment issues, agreements and documents,
NYS DOHMH & Divisions	Gary Belkin	Provide resources and insights into project implementation and standards of care and best practices.



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Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
Labor Union (Helen Schaub)	Labor representation	Participate on Workforce issues, agreements and documents,



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✓ IPQR Module 10.4 - Overview of key stakeholders and how influenced by your DSRIP projects

Instructions :

In the below table, please set out who the key stakeholders are that play a major role across multiple DSRIP projects. Please give an indication of the role they play and how they impact your approach to delivering your DSRIP projects.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
ACP Primary Care Providers	Primary Care Providers	Implementation of clinical protocols Implementation of EHR Attainment of PCMH level 3 certification
Hospital partners	Medisys (Bruce Flanz) and NSLIJ (Grace Wong)	Participate interconnectivity for efficient HIE Implement hospital based projects Work closely with PCPs and Health Homes to foster greater PCP/patient interaction and loyalty to achieve DSRIP goals
General Project Manager/Director of Programs	Lidia Virgil	Written process and procedure manuals for implementation, periodic metrics reports analysis
CTO	Corey Maher	Contact all providers with EMR implementation proposal Assist in PCP PCMH certification implementation plan Develop IT platform for integration and interconnectivity
Clinical Quality Committee	Chair: Dr Diego Ponienan, MD	Provide oversight and guidance on all project implementation protocols and metrics. Evaluate provider performance toward achievement of goals.
Finance Committee	Chair: Bruce Flanz	Provide financial analysis and plan to fully support project implementation with proper staffing levels, well designed incentives and access to funds for infrastructure
Workforce Director	Moises Perez	Provide workforce roadmap to achieve a competent and efficient workforce that provides support and needed services to achieve successful project implementation
External Stakeholders		
MCOs	Data source	Ensure interface compatibility and consistency of data feeds
EHRs vendors	Partner in EHRs and HIE solutions	EHRs and HIE solutions that meets DSRIP requirements for integrated delivery system, connectivity and interoperability
NY DOH and other state/city agencies	Oversight of Safety Net providers	Ensure Safety Net providers continue to operate to provide services to Medicaid patients. Ensure timely payments to prevent cash flow issues with PPS. Ensure reimbursement policies follow VBP roadmap guidelines that positively impact provider billing



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Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
		practices (ie FFS transition to Level III VBP). Ensure PCMH reimbursement program continues to assist physicians with upkeep of PCMH certifications.



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✅ IPQR Module 10.5 - IT Requirements

Instructions :

Information technology will play a crucial role in the development of an effective, integrated performing provider system. It is likely that most projects will require some level of supporting IT infrastructure. Please describe the key elements of IT infrastructure development that will play a role in multiple projects.

After the conclusion of the IT Target Operating Model discussions with KPMG, several documents were created to capture the requirements for the two projects that were highlighted (2ai Integrated Delivery Service and 3ai Integration of Primary Care and Behavioral Health):

- Business Requirements Document – this document highlighted the processes and systems needed to accommodate the workflow discussed during the use case scenarios presented, specific to ACP's needs. Tremendous focus was placed on coordination, given ACP's network of independent community-based providers, so that care is delivered to the patient appropriately, timely and efficiently. ACP's vast network of safety net providers provides care to patients with various clinical and socio-economic needs. As part of the discovery process, many use cases, aside from the three that were scrutinized, would require the support and services of Community Based Organizations (CBOs). Additionally, culturally competent support is required to navigate the overall healthcare system at the community level, or after an event has occurred at the institutional setting (ie inpatient admission).
- Systems Requirement Specifications – this document identified the key systems and processes required to be able to streamline workflows and accommodate information from a variety of sources. System interfaces such as HL7, CCDs, amongst others, will be used to connect various providers together. ADT feeds will also be a key interface to bring real time alerts to physicians so that they are aware of patients who are receiving services in institutional settings.

These two documents will be used to create ACP's Integrated Delivery System that will support all projects. Key framework components will include:

- Care Management/Care Coordination system which will be the source of outreach for ACP to patients, providers and other organizations to assist with patient navigation and coordination.
- Analytics platform which will identify patients with care gaps, those with chronic conditions or those who seek care in inappropriate settings (ie repeat visits to the ED).
- Health Information Exchange will be developed leveraging the capabilities of existing EHRs. Centralization of data will be key so information can be consolidated for population health activities and other data-driven reporting. Analytics functions will provide support.
- RHIO connectivity is also part of the plan in order to satisfy DSRIP requirements.

✅ IPQR Module 10.6 - Performance Monitoring

Instructions :

Please explain how your DSRIP projects will fit into your development of a quality performance reporting system and culture.

Data captured from a variety of sources, such as the state, MCOs, provider EHRs, will provide the Analytics function to be able to create performance reporting as it relates to DSRIP. ACP will develop a robust Analytics function as part of the general Integrated Delivery Service framework. General benchmark data ('Attribution Benchmark' and 'Panel Benchmark') will be used to provide providers with knowledge of their



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level of patient engagement as defined by the DSRIP projects. Attribution Benchmark is defined as patient engagement counts relative to DSRIP attribution. Panel Benchmark is defined as patient engagement counts relative to a provider's Medicaid and Medicaid Managed Care rosters. Additionally, quality, expense, utilization and clinical data reporting will be provided as tools to assist providers to target areas of opportunities with their panel, as well as immediate surrounding population. Quality reports will identify preventive care gaps that continue to exist. Expense and utilization reporting will give a provider insight into the expense patterns of his/her patients and the community. Clinical data will be used to ensure patients are receiving the right services based on health history of the patient.

As the transition to value-based payments occurs, these reporting sets will evolve to give providers a better understanding of actionable next steps to ensure success in the value-based settings. MCOs will play a strong part in providing some operational support to ensure data is accurate and complete. ACP will leverage MCO expertise to ensure that all areas of opportunities are identified and initiatives deployed to further the success of provider's role in a value-based setting.

Overall, ACP will encourage providers to review reporting and take the next actionable steps in order to improve on areas of opportunity. ACP will provide tools (such as the care management and care coordination functions) to assist providers achieve initiative goals.



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✓ IPQR Module 10.7 - Community Engagement

Instructions :

Please describe your PPS's planned approach for driving community involvement in the DSRIP projects, how you will contract with CBOs for these projects, how community engagement will contribute to the success of the projects, and any risks associated with this.

General Approach

ACP approach recognizes that the success and sustainability of DSRIP in the years to come will largely ride on our ability to creatively align and re-engineer community resources. A successful re-engineering entails the creation of new and more vibrant lines of communications and relations among providers, governmental entities and a diverse patient population. Institutional reforms, the introduction of evidence-based protocols and population health management interventions will create the foundation for the financial sustainability of the PPS. However, the successful engagement, involvement and active participation of the community will ensure sustainability. In this regard ACP envisions Medicaid recipients as active agents in the management of their healthcare and the most critical element of success. By success we refer to the overall goal of making the community healthier.

ACPs concern for community involvement drove the creation of the PPS. ACPs providers are community grounded. The medical practices are neighborhood based and some of our hospital partners even bear the name of the main community within their target area: Jamaica Hospital, Flushing hospital, Forest Hills Hospital, etc. The CBOs in our network are also firmly based in community. The staff of the medical practices are largely from the surrounding communities and form part of the larger landscape.

Risks

- Poor provider integration
- Ineffective CHW integration into PPS delivery structure
- Increased demand for service falling behind the supply

Major Elements of the Plan

1. Using the Medical Practice as the "Organizing Principle" for Community Engagement
2. The Community Health Worker Program
3. Communication Strategy
4. Cultural Competency Vision and Initiative

Major Initiatives

1. The Community Based Organizations Partnership Program (CBOPP)
2. The Waiting Room Project
3. Community Resource Mapping Exercise
4. "Health Week" Engaging the Health Business Industry
5. Get Focused on Reading and Exercising" Campaign Targeting Children and parents in afterschool Programs
6. Public agency Coordination Plan



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ACP will establish the Community Based Organizations Partnership Program (CBOPP) as the main vehicle for contracting with CBOs. As the health system for Medicaid recipients moves from hospitals to ambulatory settings and from episodic to care management and coordination; prevention, outreach and community engagement have taken a more prominent role in the delivery of health care. With over 650,000 patients in every community in the Bronx, Brooklyn, Manhattan and Queens, ACP is looking for community-based partners to more effectively engage and serve its patient base. Overall goals include: Integration of CBOs into the work of ACP within target areas and establishment of a base of community support for ACP projects and activities.

ACP will achieve the stated goals and objective through:

1. Development of written partnership agreements
2. Establishment of the "Advocate Fund" to engage CBOs
3. Involvement of CBOs in a wide range of activities that include but are not limited to:
 - a. Health promotion and education,
 - b. Cultural competency,
 - c. Health literacy,
 - d. Disease management education, others.

IPQR Module 10.8 - IA Monitoring

Instructions :



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Section 11 – Workforce

IPQR Module 11.1 - Workforce Strategy Spending (Baseline)

Instructions :

Please include details on expected workforce spending on a semi-annual basis. Funds may be shifted from one funding type category to another within the workforce strategy spending table, as long as the PPS adheres to their overall spend commitments. However, the PPS may apply a 25% discount factor to the DY1 Workforce Strategy Spend target. If the PPS applies this discount in DY1, the PPS will be expected to reallocate those funds appropriately in DY2-4 to fully meet their DY1-4 total commitment.

Funding Type	Year/Quarter										Total Spending(\$)
	DY1(Q1/Q2)(\$)	DY1(Q3/Q4)(\$)	DY2(Q1/Q2)(\$)	DY2(Q3/Q4)(\$)	DY3(Q1/Q2)(\$)	DY3(Q3/Q4)(\$)	DY4(Q1/Q2)(\$)	DY4(Q3/Q4)(\$)	DY5(Q1/Q2)(\$)	DY5(Q3/Q4)(\$)	
Retraining	283,609.00	2,869,039.00	3,676,045.00	3,676,045.00	3,457,890.00	3,457,890.00	3,203,704.00	3,203,704.00	3,231,279.00	3,231,279.00	30,290,484.00
Redeployment	0.00	0.00	316,900.00	316,900.00	303,324.00	303,324.00	525,197.00	525,197.00	692,417.00	692,417.00	3,675,676.00
New Hires	1,306,026.00	2,809,013.00	1,267,602.00	1,267,602.00	1,213,295.00	1,213,295.00	525,197.00	525,197.00	230,806.00	230,806.00	10,588,839.00
Other	653,675.00	754,555.00	1,077,461.00	1,077,461.00	1,091,964.00	1,091,964.00	997,876.00	997,876.00	461,611.00	461,612.00	8,666,055.00
Total Expenditures	2,243,310.00	6,432,607.00	6,338,008.00	6,338,008.00	6,066,473.00	6,066,473.00	5,251,974.00	5,251,974.00	4,616,113.00	4,616,114.00	53,221,054.00

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
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No Records Found

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Pass & Complete	



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✓ IPQR Module 11.2 - Prescribed Milestones

Instructions :

Please enter and update target dates, as well as breakdown tasks with target dates for prescribed milestones. For milestones that are due within the reporting period, documentation is required to provide evidence of milestone achievement. Any explanations regarding altered or missed target commitments must be included within the textbox, not as narrative within uploaded documentation. Please note some milestones include minimum expected completion dates.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
Milestone #1 Define target workforce state (in line with DSRIP program's goals).	Completed	Finalized PPS target workforce state, signed off by PPS workforce governance body.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	NO
Task 1 Workforce Committee	Completed	Formation of ACP Workforce Committee (WC) who will review workforce strategies and provide feedback, monitoring and advice. The committee includes members from labor as well as PPS Project Managers/Directors, providers and staff. The committee utilizes stakeholders and subject matters experts to inform its work.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 2 Project Requirements Analysis	Completed	Conduct an in-depth analysis of the requirements of each project in order to determine any changes to the a new service delivery structure of the PPS	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 3 Organizational Impact Assessment	Completed	Complete Organizational Impact Assessment, determine the project by project impact on the workforce of each of the four sectors: hospitals, physicians, cbo partners, and PPS. The assessment information will be utilized to make projections about the potential impact on the workforce and to make decisions about the need for re-training and re-deployment of staff. The WC to identify/develop instruments (surveys and forms) to conduct the assessment. The assessment is specific and includes the impact on mission, organizational structure, staff lines, talent, organizational culture, budgets, and strategic plans.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 4 Creation of Workforce Portal	Completed	The WC works with the IT Director to implement a web based monitoring mechanism to track training effectiveness and impact. The system will send alerts and brief questionnaires to each traininee after completion of initial training and to key administrative personnel to gather information about the level of job related knowledge and skill, job efficiency and	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		effectiveness of newly trained personnel. The data will be obtained and reviewed again in 6 month interval after completion of training with implementation of corrective action plans to follow if needed. Every corrective plan of action is monitored consistently and more formally reviewed after a 6 month interval.							
Task 5 Workforce Strategy	Completed	Complete Future State Workforce strategy analysis and needs assessment. These reports will note the wide range of knowledge, skills, and attitudes required to support the DSRIP projects across all sectors and suggest the level of support that each sector of the PPS will require in order to successfully implement each project.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 6 Current State Analysis	Completed	Workforce current state analysis report presented to PPS Governing Body for review. Analysis to include current state and impact on DSRIP project implementation and achievement of goals.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 7 Analysis Approval	Completed	PPS Governing Body reviews and approves Target Workforce state analysis and approves considering budget, impact analysis .	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Milestone #2 Create a workforce transition roadmap for achieving defined target workforce state.	Completed	Completed workforce transition roadmap, signed off by PPS workforce governance body.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	NO
Task 1 Develop Recommendation Process	Completed	Establish a process for making recommendations to the governing body regarding the allocation of workforce resources; identify key players and "decision-makers;" the decision making body to be fully representative of the PPS.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 2 Draft Roadmap Development	Completed	The Workforce Committee hires a SME to provide a preliminary draft of the "roadmap" that is based on the current state of the workforce and the desired future state. The roadmap includes the components, elements, steps and timeline for each sector of the workforce. The WC reviews the report and submits to the PAC and then the Steering Committee for additional input.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 3 Roadmap Approval	Completed	Finalize the transition roadmap and present to the PPS Governing body for review and approval.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Milestone #3 Perform detailed gap analysis between current	Completed	Current state assessment report & gap analysis, signed off by PPS workforce governance body.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	NO



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
state assessment of workforce and projected future state.									
Task 1 Future State Gap Analysis	Completed	Conduct gap analysis of current state versus future state based on a detailed comparison of positions and competencies across each of the four sectors. The report is thorough and specific to all projects and staff positions, and identifies gaps in the staff structure of the overall PPS, and need/opportunities for re-training and re-deployment maximizing the overall talent pool and ensuring readiness.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 2 Workforce Budget	Completed	Complete preliminary draft of 5 year Workforce budget based on the gap analysis and other Workforce Implementation Plan deliverables.	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4	
Task 3 Complete Analysis	Completed	Review and complete gap analysis report.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 4 Finalize Budget	Completed	Complete final workforce budget based on gap analysis results	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 5 Approve Analysis Report and Budget	Completed	Gap analysis report and final workforce budget approved by the PPS Governing body.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Milestone #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.	Completed	Compensation and benefit analysis report, signed off by PPS workforce governance body.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	YES
Task 6 Comp Plan Approvals	Completed	Compensation and benefit report and package reviewed and approved by PPS Governing body	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 5 Policy for Staff Declining Retraining	Completed	Develop policy recommendations for staff partially placed and/or who refuse new re-training and deployment.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 1 Identification of Staff to Retrain	Completed	Identify all staff lines to be retrained/redeployed across all sectors utilizing Current State Analysis.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 2 Compensation and Benefit Analysis	Completed	Complete the compensation and benefit analysis/assessment engaging all partners; HR Departments fully engaged. The analysis will contain current salaries and benefits allowing for comparison analysis between current and future to determine how staff hiring and redeployment will be impacted.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Task 3 Complete Report	Completed	Complete report about changes to the compensation and benefit structure and its impact on DSRIP implementation;	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter	AV
		report noted changes to job roles, functions and locations across all projects to workforce committee, and PPS governance							
Task 4 Compensation and Benefit Package	Completed	Develop compensation and benefit package for retrained, redeployed staff impacted by DSRIP project implementation and for new hires whose services and skills will be instrumental in achieving DSRIP goals.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1	
Milestone #5 Develop training strategy.	Completed	Finalized training strategy, signed off by PPS workforce governance body.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	NO
Task 1 Identify Training Needs	Completed	Complete itemized description of Current State training needs; the needs are specific, delineating the skills, knowledge and attitudes that staff will require to be successful in the implementation of the DSRIP projects.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 2 Create Inventory of Skills	Completed	Complete itemized inventory of the skills and competencies of the current workforce in each sector and compare to the skills and competencies required of the future workforce. Draft a training strategy to bridge the gaps. Identify training materials, champions and/or vendor(s) to provide staff re-training and training.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 3 Training Strategy	Completed	Complete comprehensive training strategy; the strategy will include philosophical underpinnings, goals and objectives, measurable outcomes, methodology and deployment plan, activities, evaluation, and program process and procedures. The strategy will also include: plan to identify/collect/create/test and evaluate training materials that are culturally competent and language specific; and a Communications Strategy to disseminate information about changes to the workforce, training opportunities and the overall initiative.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	
Task 4 Approve Strategy	Completed	Acquire approvals for training strategy by PPS governing body.	04/01/2016	09/30/2016	04/01/2016	09/30/2016	09/30/2016	DY2 Q2	

IA Instructions / Quarterly Update

Milestone Name	IA Instructions	Quarterly Update Description
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No Records Found



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Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Define target workforce state (in line with DSRIP program's goals).	jd593813	Other	25_DY2Q2_WF_MDL112_PRES1_OTH_Workforce_1.7_Target_Workforce_State_Report_7522.pdf	Workforce 1.7 Target Workforce State Report	10/31/2016 10:46 AM
	jd593813	Other	25_DY2Q2_WF_MDL112_PRES1_OTH_Workforce_1.7_Board_Meeting_Approvals_7521.pdf	Workforce 1.7 Board Meeting Approvals	10/31/2016 10:45 AM
	jd593813	Other	25_DY2Q2_WF_MDL112_PRES1_OTH_Workforce_1.6_Current_State_Analysis_7520.pdf	Workforce 1.6 Current State Analysis	10/31/2016 10:43 AM
Create a workforce transition roadmap for achieving defined target workforce state.	jd593813	Other	25_DY2Q2_WF_MDL112_PRES2_OTH_Workforce_M2_and_M3_Gap_Analysis_7876.pdf	Workforce M2 and M3 Gap Analysis.pdf	12/15/2016 11:31 PM
	jd593813	Other	25_DY2Q2_WF_MDL112_PRES2_OTH_Workforce_2.3_Board_Meeting_Approvals_7525.pdf	Workforce 2.3 Board Meeting Approvals	10/31/2016 10:51 AM
	jd593813	Other	25_DY2Q2_WF_MDL112_PRES2_OTH_Workforce_2.3_Transition_Roadmap_7524.pdf	Workforce 2.3 Transition Roadmap	10/31/2016 10:49 AM
Perform detailed gap analysis between current state assessment of workforce and projected future state.	jd593813	Other	25_DY2Q2_WF_MDL112_PRES3_OTH_Workforce_M2_and_M3_Gap_Analysis_7877.pdf	Workforce M2 and M3 Gap Analysis.pdf	12/15/2016 11:31 PM
	jd593813	Other	25_DY2Q2_WF_MDL112_PRES3_OTH_Workforce_3.5_Board_Meeting_Approvals_7533.pdf	Workforce 3.5 Board Meeting Approvals	10/31/2016 11:21 AM
	jd593813	Other	25_DY2Q2_WF_MDL112_PRES3_OTH_Workforce_3.3_Gap_Analysis_7526.pdf	Workforce 3.3 Gap Analysis	10/31/2016 10:59 AM
Develop training strategy.	jd593813	Other	25_DY2Q2_WF_MDL112_PRES5_OTH_Workforce_5.1-5.3_Training_Strategy_7668.pdf	Workforce 5.1-5.3 Training Strategy	10/31/2016 06:00 PM
	jd593813	Other	25_DY2Q2_WF_MDL112_PRES5_OTH_Workforce_5.4_Board_Meeting_Approvals_7547.pdf	Workforce 5.4 Board Meeting Approvals	10/31/2016 11:45 AM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Define target workforce state (in line with DSRIP program's goals).	
Create a workforce transition roadmap for achieving defined target workforce state.	
Perform detailed gap analysis between current state assessment of workforce and projected future state.	
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.	
Develop training strategy.	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Complete	
Milestone #3	Pass & Complete	
Milestone #4	Pass & Complete	
Milestone #5	Pass & Complete	



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✔ IPQR Module 11.3 - PPS Defined Milestones

Instructions :

Please enter and update baseline target dates, as well as work breakdown tasks with target dates for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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✓ IPQR Module 11.4 - Major Risks to Implementation & Risk Mitigation Strategies

Instructions :

Please describe the key challenges and risks that you foresee in achieving the milestones set out above, including potential impacts on specific projects and any risks that will undermine your ability to achieve outcome measure targets.

1. Staff reaction to change:
Fear of job loss and security,
Resistance to-new roles
Resistance to new processes and procedures
Resistance to training offerings
Nurses in particular have expressed through the public comment process that some of their functions may be delegated to new staff; leading to dissatisfaction in nursing ranks and loss of positions to less trained, income and motivation. Unaddressed, fear and resistance to new changes can have a negative impact on implementation of DSRIP and the timely completion of milestones.
The major strategy to mitigate this factor is the development and implementation of a comprehensive Communication Plan that includes sections specifically targeting the workforce in conjunction with other partners. The communication Plan will call for the creation of forums including members of the Workforce, to provide information and voice concerns about DSRIP, its philosophical underpinnings and practices.
2. Workforce shortages and recruitment challenges: (especially for some of the more specialized positions) may represent important challenges to the PPS. The successful recruitment and hiring of critical members of the talent pool is critical to a successful project implementation. In order to mitigate this factor the WC will carefully analyze and advise on the final workforce budget to insure that it includes adequate funding for recruitment.
3. New hires: the major challenge consists in putting together a mission conscious, driven, culturally competent, effective team, in a relatively short period of time. Lack of team cohesion can have a negative impact on the work of the PPS. The PPSs commitment to hire from within the community is a positive mitigating factor for this challenge.
4. Systems change: change tends to transpire over a longer period of time than that prescribed for DSRIP implementation much is being asked of all partners in a PPS at an accelerated pace. This impacts workforce as it impacts employees at all levels and may require the hiring of new, and re-training and/or redeployment of staff thus creating some difficulties and variations in the workflows and dynamics of practices. Clearly PPS success depends on high levels of cooperation and performance from all partners. The fact that all of the physicians in the network are organized through IPAs and ACOs and are familiar with operations within a capitated environment is a very favorable and mitigating factor.
5. Overall risks: the implementation of the DSRIP projects will most definitely require change in the workflows and dynamics of the primary care practices. This may require hiring of new staff since these offices are already functioning at staff capacity. This presents a dual challenge because the offices may also be operating at capacity in their physical space and they have no budget for new staff salaries and benefits. The PPS plans to mitigate this challenge by streamlining as many processes as possible and creating incentives that help the providers and provide support with the hiring process.



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✓ IPQR Module 11.5 - Major Dependencies on Organizational Workstreams

Instructions :

Please describe any interdependencies with other organizational workstreams (IT Systems and Processes, Clinical Integration, etc.)

The PPS understands that in order to launch a functional and effective Integrated Delivery System, it must recruit, train, re-train, and deploy a workforce that can perform and deliver on program goals and objectives. In this manner all Work streams are interdependent on the Workforce Work stream. More specifically:

- The workforce strategy will incorporate input from the CBOs and PAC for cultural competency to ensure training materials are prepared and seminars are conducted in a culturally competent and linguistically sensitive manner.
- The workforce strategy will work closely with the clinical integration workgroups of each project to ensure appropriate staffing levels are maintained and in the appropriate categories to efficiently complete the project goals, i.e. employing sufficient care managers to manage high risk patients to minimize hospital readmissions.
- The workforce transformation will rely heavily on the success of an efficient IT system throughout the PPS to maintain current health records, to streamline the workload and efforts of the workforce, utilizing the information to manage Medicaid beneficiary health. In return the Workforce Work stream will work with the IT Work stream to insure that IT has sufficient staffing to build and manage new systems and that the IT staff is properly trained to insure efficiency and compliance.
- To achieve the workforce transformation, the Governance, Finance and Workforce must work closely together to ensure adequate financial resources to execute key workforce activities.



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✓ IPQR Module 11.6 - Roles and Responsibilities

Instructions :

Please list and elaborate upon the key people/organizations responsible for this organizational workstream and describe what their responsibilities involve.

Role	Name of person / organization (if known at this stage)	Key deliverables / responsibilities
PPS Governing body	Ramon Tallaj, Md, Chairman	Review and approval of all reports, training strategy, budget, consultants and vendors/oversight and approval
Workforce lead	Moises Perez-Martinez, Director of Workforce, Community and Government Relations	Complete workstream milestones/manage workflow
Member, Workforce Committee	Howard Tuchman, HR Specialist NSLIJ; Sheila Garvey, HR Medisys	Current/Future State Report for Lenox and Forest Hills Hospitals and Medisys hospital system/ Fully populated template Execution of implementation plan
Member Workforce Committee	Liz Webb, Director of HR, ACP	Current/Future Status Report for physicians and PPS sectors/ Fully populated template Execution of implementation plan
Member Workforce Committee	Gloria Wong/Alex Damiron, Dir Operations, PPS Representative	Current/Future Status Report for physicians and PPS sectors/ Fully populated template Execution of implementation plan
Member Workforce Committee	Joanne King, East Harlem HELP, CBO Representative	Current/Future Status Report for CBOs/ Fully populated template Execution of implementation plan
Labor representative	Florence Wong, Deputy Director of the 1199 Training and Employment Funds	Workforce training Strategy/provide administrative services in execution of strategy
Workforce Budget/staff analyst	Tracey Lin, CFO, ACP	Workforce budget/Provide data and report on staffing pattern and Workforce budget
Staff support to workstream	Manager, Workforce Workstream	Complete workstream milestones/assist in workflow task completion, coordinate training
Director of Data and Analytics/Project Lead	John Dionisio, Director of IT, ACP	System and process to track and evaluate workforce workstream activities and outcomes/Oversight of the development and implementation of IT systems to monitor DSRIP impact on workforce



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✔ IPQR Module 11.7 - Key Stakeholders

Instructions :

Please identify the key stakeholders involved in your workforce transformation plans, both within and outside the PPS.

Key stakeholders	Role in relation to this organizational workstream	Key deliverables / responsibilities
Internal Stakeholders		
Liz Webb	ACP HR Lead	Assemble workforce/HR functions
Howard Tuchman, NSLIJ	HR Specialist	Assemble workforce/HR functions
Sheila Garvey, Vice President Human Resources at Jamaica Hospital Medical Center/Medisys	HR Lead	Assemble workforce/HR functions
Oscar Fukilman, MD	Corinthian and Balance Medical IPAs	Support data collection/oversight
Joanne King, Director EH HELP	CBO Representative	Support data collection/oversight
Rebecca Gordon, Chief Collective Bargaining , NSLIJ	Labor Liaison	Agreement with 1199TEF/labor negotiations
External Stakeholders		
Sen. Gustavo Rivera, Member Health Committee	Legislative oversight in NYS Senate	PPS support/legislator
Helen Schaub, Director of Policy and Government Affairs, 1199 SEIU	Labor representative	Advise on workstream development and implementation/participate on Steering Committee
Faith Based Organizations	Assist in engaging community resources for cultural competency	Provide input/streamline communication with community workforce
Marianela Nunez, MA, and Sobeira Guillen, MSW training consultants	Training consultant	Provide training curriculum



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✅ IPQR Module 11.8 - IT Expectations

Instructions :

Please describe how the development of shared IT infrastructure across the PPS will support your plans for workforce transformation.

A shared IT infrastructure will have a transformative impact on the workforce by making fundamental changes to patterns of communication and the basic manner in which the PPS partners approach the work. Specifically, the development of an IT infrastructure is essential to the development and implementation of the Integrated Delivery System. In turn, the effective interaction of the workforce through the system represents a major transformation of the workforce.

A robust HIE platform will increase the PPS' analytics capabilities. The HIE platform will provide a wide range of information streams related to the workforce. Some of these may include but not be limited to:

- Expansion/reduction of workforce
- Number of displaced workers
- Number of new hires
- Number of workers re-trained and re-deployed
- Retention efforts
- Geographic distribution of the workforce

The IT infrastructure will make it possible for the PPS to more efficiently focus on "hotspots" and facilitate staff deployment.

Succession planning and staff development will also be enhanced through the deployment of a shared IT infrastructure.

✅ IPQR Module 11.9 - Progress Reporting

Instructions :

Please describe how you will measure the success of this organizational workstream.

The overall success of the Workforce organizational work stream will be measured on the basis of the following 3 criteria:

1. Documented ability to mitigate negative impacts on the workforce as a result of DSRIP

Maintaining the integrity of the labor force is a high priority for the PPS. Careful assessment and planning related to workforce will be critical to achieving this goal. The PPS will maintain complete records of number of employees displaced, re-trained and re-deployed in "real time" through enhanced analytics capabilities. Once a common IT infrastructure is established, the PPS will be able to analyze and report on progress on



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demand.

2. Successful recruitment, hire, training and deployment of new staff

The task of assembling a new staff will be critical to the success of the PPS. While the process of skills training can take place over a longer time frame, it is absolutely essential that the newly hired workforce fully understand and accept the mission, vision and philosophical underpinnings of DSRIP and the PPS. The PPS will administer surveys and questionnaires to measure the level of understanding and acceptance of the PPS' vision and mission and report on the outcome of these interventions.

3. Increased readiness to engage in value based contracting

Increased readiness to engage in value based contracting is an important goal of the PPS. The PPS and WC will draft a roadmap to meet this goal and report regularly on its implementation.

Reporting on progress against PPS targets will be systematic and continuous. The following steps will be followed in order to insure timely and accurate reporting on progress against targets:

Targets set across all PPS sectors

PPS Workforce Lead meets with key staff to review targets/anticipate challenges

Supervisory staff responsible for specific target area is responsible for developing a schedule of activities aimed at successful attainment of desired targets

Staff report on activities against targets bi-monthly

Corrective plan of action is drafted for targets determined to be behind schedule

Review of progress on corrective plan of action is conducted weekly

Monthly reports are generated and shared across the PPS with members of the WC and other pertinent members

Timely reports are prepared and presented to NYSDOH within the specified schedule. Progress reports will track: the number of employees trained, the number of employees retrained and redeployed, and the number of new hires.



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✔ IPQR Module 11.10 - Staff Impact

Instructions :

Please upload the Workforce Staffing Impact (Projections) and the Workforce Staffing Impact (Actuals) tables provided for quarterly reporting.

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Other	25_DY2Q2_WF_MDL1110_OTH_Workforce_Module_11.10_Staffing_Impact_Projections_7662.xlsx	Workforce Module 11.10 Staffing Impact Projections	10/31/2016 03:30 PM
jd593813	Templates	25_DY2Q2_WF_MDL1110_TEMPL_Workforce_Module_11.10_Staffing_Impact_Actuals_7660.xlsx	Workforce Module 11.10 Staffing Impact Actuals	10/31/2016 03:29 PM

Narrative Text :

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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✔ IPQR Module 11.11 - Workforce Strategy Spending (Quarterly):

Instructions :

Please include details on workforce spending for DY2. The workforce spending actuals should reflect only what was spent during the relevant quarters and is not cumulative across semi-annual periods. The PPS can shift funding across categories; e.g., from Retraining to New Hires. Please note that the "Cumulative Percent of Commitments Expended through Current DSRIP Year (DY2)" section is calculated based on the total yearly commitments.

Benchmarks	
Year	Amount(\$)
Total Cumulative Spending Commitment through Current DSRIP Year(DY2)	21,351,933.00

Funding Type	Workforce Spending Actuals		Cumulative Spending to Date (DY1-DY5)(\$)	Cumulative Percent of Commitments Expended through Current DSRIP Year (DY2)
	DY1(Q1/Q2)(\$)	DY1(Q3/Q4)(\$)		
Retraining	6,029,225.00	0.00	9,181,873.00	87.41%
Redeployment	0.00	0.00	0.00	0.00%
New Hires	249,579.00	0.00	4,364,618.00	65.63%
Other	1,672,555.00	0.00	3,080,785.00	86.46%
Total Expenditures	7,951,359.00	0.00	16,627,276.00	77.87%

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
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No Records Found

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.



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Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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IPQR Module 11.12 - IA Monitoring:

Instructions :



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Project 2.a.i – Create Integrated Delivery Systems that are focused on Evidence-Based Medicine / Population Health Management

✓ IPQR Module 2.a.i.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

1. IDS: ACP providers have been independent and the change to an IDS (IDS) might be a risk. We intend to educate a shared vision at all levels, from the Board down to participating providers and their staff. Provider buy-in will be developed through communication and education and on-going support to will be available. Sufficient budget dollars and workforce are critical to support the IT plans for and IDS. Funds flow will also motivate providers to change practice and workflow behaviors. Additionally, while many use cases have been projected, there could be scenarios that may not have been considered. The PPS will have back-up processes in place in case of a gap in the system, including manual work-arounds and web-based portals to securely send information with providers and care managers.
2. Budget: the wide scope requires a budget that can accommodate project implementation. Funds flow allocated toward building an IDS needs to be sufficient to cover the 'must-have' items. The PPS has a contingency line item in the budget that can accommodate potential costs not currently specifically budgeted.
3. Patient compliance and engagement: the PPS will need to find creative ways to ensure patient compliance and engagement. Current efforts by the providers and health plans have some impact, but still find that many patients do not seek care in clinically appropriate settings. The PPS has to work closely with all providers to ensure proper identification and engagement of patients are effective. Literature suggests that high levels of patient satisfaction leads to improved patient engagement. The PPS can assess and identify barriers that prevent patient satisfaction to assist with improvement of patient engagement.
4. Provider Culture: providers' ability and time to document a disease-specific, personalized care plan for each patient with an at-risk chronic illness could be a potential risk. This will require additional time with the patients to provide, not only, a written care plan and sufficient documentation, but also educating the patient on the importance of plan compliance. ACP plans to mitigate by providing support at the provider level. This support includes care teams that are culturally competent, which include other practitioners, BH providers, pharmacists, nurse educators and care managers. In addition, ACP has developed electronic versions of disease specific care plans that can be personalized within the EMR to provide trackable documentation. This will assist providers in billing for complex care management services for their additional time and effort per patient. Also, given the unique structure of our PPS that spans more than 2,000 physicians and community based providers, communication and information sharing could be a challenge. ACP is reaching out and discussing possible collaborations with all of the hospitals in ACP's catchment area and those which any ACP attributed patient may receive services.
5. PCMH Certification Requirement: an additional risk is PCP compliance with level 3 PCMH certification. As referenced in the second risk, ACP has developed templates within the EMR minimizing the time that it will take providers to complete.
6. Physician/Patient Relationship: many cultures are biased towards going to the emergency department (ED) for care, as it is seen as more convenient and immediately responsive than a PCP visit. Our PPS will provide education and awareness to emphasize connecting to a PCP and working with community organization partners to expand outreach into the ethnic groups represented in the population. Additionally, the ED triage process will include a team of Patient Navigators available to every patient to satisfy project requirements such as ensuring appointments prior to ED discharge, with the intent of connecting to a PCP and reduce avoidable ED visits.



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✅ IPQR Module 2.a.i.2 - Prescribed Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #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.	DY3 Q4	Project	N/A	Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task PPS includes continuum of providers in IDS, including medical, behavioral health, post-acute, long-term care, and community-based providers.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Develop participation agreement language for each provider type requiring mandatory participation in the ACP Integrated Delivery System. Assess feasibility of developing borough-level organization regarding communication and large-scale implementation, such as integrated delivery system or the population health projects. ACP PPS is community-based and community-physician led. A majority of our community partners have been included because the Medicaid patients assigned to our physicians use the physicians within the network. Thus, these providers have been included in large scale within ACP's network and will continue to assist the providers and the patients in providing appropriate medical care and social support. Additionally, most community-based provider types (including Mental Health, Substance Abuse and Social Supports) will be included in the PPS network.		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 2 Establish a Project 2.a.i. Leadership Team with roles and responsibilities to take a leadership role on this project. Project will be co-led by the Director of Clinical Operations, Lidia Virgil and Director of IT, John Dionisio. Team will include expertise from all areas (IT and IT security, Clinical Operations, Workforce		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
[Moises Perez], Compliance (Tom Hoering), amongst others) and will require support from providers and staff. Additionally, because of the heavy dependencies on IT, support from physician EHR vendors will also be key in the success of the creation of an integrated delivery system.										
Task 3 Develop Project 2.a.i. Roadmap with timeline which would include flexibility to be reviewed and updated at least annually and ability to explore adding potential partners (including social service organizations/CBOs). The roadmap will incorporate any IT assessments derived from the IT milestones, determine future state and propose solutions to achieve the target state. The roadmap will consider the connectivity needs of all provider types (including Mental Health, Substance Abuse and Social Supports) to create an integrated solution.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Finalize (including ACP Board approval) Project 2.a.i. Roadmap with timeline, including timeline for provider contracting with partners within the organization.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #2 Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	DY2 Q4	Project	N/A	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS produces a list of participating HHs and ACOs.		Project		Completed	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task Participating HHs and ACOs demonstrate real service integration which incorporates a population management strategy towards evolving into an IDS.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task Regularly scheduled formal meetings are held to develop collaborative care practices and integrated service delivery.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Identify key Health Homes and ACO partners to create workgroup (include discussions with relevant committees, for example, IT Committee on integrating IT capabilities)		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 2. Develop matrix of core capabilities of partnering Health Homes and ACOs, including provider services, IT assessments, etc. Matrix, as part of roadmap, should identify strengths and weaknesses of existing systems and processes. IT integration		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3



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solution shall incorporate existing system strengths (strong network, structured communication processes, referral tracking, care management capabilities, strategies regarding patient compliance) and complement weaknesses (manual workarounds, workflow gaps, resource gaps, IT shortfalls).										
Task 3. Develop strategy for partnering with Health Home and ACO population management systems and capabilities that incorporates roadmap and matrix developments. Leverage existing effective processes and understand components that are needed to scale processes to broader network. Introduce centralized processes that the PPS will manage to assist with expanding scale.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Finalize strategy and incorporate into Project 2.a.i Roadmap with timeline, with flexibility to be reviewed and updated at least annually. Flexibility of design will allow for continuous system improvement that will maximize impact within network.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #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.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Clinically Interoperable System is in place for all participating providers.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task PPS has protocols in place for care coordination and has identified process flow changes required to successfully implement IDS.		Project		In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS has process for tracking care outside of hospitals to ensure that all critical follow-up services and appointment reminders are followed.		Project		In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS trains staff on IDS protocols and processes.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 ACP needs to understand the population it serves in order to ensure appropriate care is provided. Categorize ACP attributed beneficiaries into stratified risk groups using a common model (e.g., HCC, John Hopkins, 3M) and identify priority disease conditions for each category (based on State provided data on		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4



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ACP's attributed beneficiaries, claims data from MAPP, Salient, IPAs' / ACOs' data from MCOs and Medicare, and providers' EHRs / medical record data). The data can come from variety of sources, including State, MCO and physician EHR. Stratification then allows PPS to understand and develop specific interventions that can positively impact patients (High-risk patients will require extensive, coordinated care. Moderate-risk patients will require some care, but as important, should received proper care that keeps the patient at moderate-risk status or potentially drop to low-risk status if possible [goal is to prevent patient from entering high-risk status]. Low-risk patients will need to receive preventive care to ensure that this cohort remain low-risk and does not move up to moderate or high-risk status.). Stratification algorithm based on common models can be developed/formalized in concert with PPS analytics team that is being assembled.										
Task 2 Review and adopt clinical protocols from PPS's selected Domain 2,3 and 4 projects for priority disease conditions among ACP attributed members. Protocols outline care steps that will guide physicians to ensure appropriate health care is provided. If required, appropriate community and social supports will be included in care plans to ensure member receives holistic (or whole-person) care. ACP's leadership and network safety-net community partners understands the population that it serves often require more than medical care. Supports from CBOs, Mental Health/Substance Abuse organizations, post-acute care such as Skilled Nursing Facilities and some Nursing Homes, long-term care providers and public health services are key to ensuring care is provided and maintained in between physician visits.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task 3 Develop a directory of available resources (includes typical and atypical providers types). Typical providers types are those who provide medical care such as physicians, clinics, hospitals, behavioral health, substance abuse, etc. Atypical providers are those who address socio-economic factors such as housing agencies, community-based organizations and social services. These resources can provide services based on the clinical protocols for care coordination needs and address gaps that are delivered in appropriate settings.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4



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<p>Task 4 Identify additional provider type gaps based on resource directory and take necessary action to fill those gaps looking at all provider types, such as reaching out to CBOs and providers for participation in ACP. Network will continue to evolve as ACP's members' needs change. It is important to ensure patients needs are continually monitored to ensure appropriate care is given. Stratification step (step 1) will be completed periodically to ensure that the appropriate provider types are available.</p>		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
<p>Task 5 Develop system to engage patients with PPS using variety of methods such as patient navigators, community health workers, or access to patient portals that allow for a systematic way of communication between PPS, its partners and the patient requiring care. Currently, many agencies conduct patient outreach, however there is opportunity to improve patient engagement. ACP will assess creative yet practical ways to engage with patients including electronic outreach (smart phone apps, telephonic/text reminders) and community-based outreach (outreach to caregivers). PPS will also utilize patient satisfaction survey tools to assess ways to improve patient satisfaction (high levels of patient satisfaction has shown high levels of compliance) to improve patient compliance.</p>		Project		Completed	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2
<p>Task 6 Finalize ACP care coordination strategy to include structure, roles, responsibilities, services, policies and procedures, with linkages to other work streams as detailed in the ACP projects implementation plan. ACP plans to centralize its care coordination function (while leveraging existing effective care coordination processes within its network) where referral management and patient engagement strategies are key roles. Care coordination is a core function within an integrated delivery system - sufficient resources, tools and support, workflows and strategies will be included in the final roadmap. Support from other workstreams such as IT (ensure technology enables communication and the coordination), clinical operations (ensure protocols provide appropriate evidence-based care pathways for physicians to follow), workforce (appropriate training and re-training is provided so that the process is followed), and practitioner engagement (ensure physicians understand their</p>		Project		Completed	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2



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roles with the provision of care) will assist with effective care coordination.										
Task 7 Develop tracking and monitoring capabilities (audit function) to ensure that services are delivered timely to patients. Processes will be developed to track progress, including providing feedback that allow for process improvement. Metrics to assist with measuring timely delivery of services include: Referral close times and rates, monitor global outreach rates, general patient visit rates (ie reduce non-utilizing patient rates), quality care gap hit rates, patient satisfaction, etc.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 8 Begin implementation of ACP projects implementation plan which includes tracking that patients receive appropriate support and care. This can be performed in various ways, such as understanding care gaps and outreaching to patients to close. PCMH, a major component of this project, specifically outlines various clinical care process improvement requirements involving immunization, preventive care and chronic or acute care measures.		Project		In Progress	07/01/2016	03/31/2017	07/01/2016	03/31/2017	03/31/2017	DY2 Q4
Milestone #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.	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Non-Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Hospital	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Mental Health	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Nursing Home	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4



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Task PPS uses alerts and secure messaging functionality.		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Establish work plans with eClinical Works, MDLand and other major EHR vendors to establish bi-directional EHX platform to share information among PPS safety net partners who use eClinical Works EHR.		Project		Completed	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 2 Establish work plans with hospital partners to develop Admission / Discharge / Transfer (ADT) feed into HIE.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Establish work plans with eClinical Works, MDLand and other major EHR vendors among ACP participating safety net providers for data feed into HIE platform.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task 4 Develop other interim solutions for sharing health information among clinical partners using direct exchange, alerts, and patient record lookup. Determine other needs or enhancements based on IT/integration gap analyses.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 Connect with RHIO/QE and develop plan on sharing health information as the State makes the information available.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 6 Obtain and understand DSRIP policies, procedures and processes with respect to RHIO/SHIN-NY requirements as the information becomes available.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 7 Develop final plan for sharing health information among clinical partners by DY3.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 8 Ensure compliance with data sharing and confidentiality rules are followed with every data sharing event. This includes appropriate securities and encryption methodologies are in place to comply with HIPAA and other state and federal guidelines regarding PHI.		Project		In Progress	10/01/2016	03/31/2018	10/01/2016	03/31/2018	03/31/2018	DY3 Q4
Milestone #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.	DY3 Q4	Project	N/A	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets Meaningful Use Stage 2 CMS requirements (Note:		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4



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any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).										
Task PPS has achieved NCQA 2014 Level 3 PCMH standards and/or APCM.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Survey and group all participating safety net providers into level of readiness.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop plan, timelines, and assign resources for each level of readiness. This includes PPS-defined readiness levels with strategies that will vary based the different levels (ie those who are technologically integrated will have a different approach than providers who are still utilizing paper medical records).		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Establish communications / marketing plan and outreach to all ACP safety net providers that also identifies support resources.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Start to implement plan to ensure safety net providers achieve MU/PCMH Level 3 by end of DY3. Implementation plan includes support from resources including PCMH CCEs. Support may include internal or external resources.		Project		In Progress	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4
Milestone #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.	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies targeted patients through patient registries and is able to track actively engaged patients for project milestone reporting.		Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Refine priority of clinical issues from CNAs to include specific priorities by geographic areas and ensure alignment between projects undertaken.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Create a database for program planning (expand on data collected as part of our CNA)		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Review adopted clinical protocols, care guidelines, established performance measures and metrics for each clinical area with participating safety net providers to monitor progress in managing		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2



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population health.										
Task 4 Develop a population health database that is able to drill down at all levels using data from various sources, such as EHRs (with bi-directionally capable HIE)		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 5 Perform data analyses to identify priority clinical issues and establish registries.		Project		Completed	07/01/2015	06/30/2016	07/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 6 Develop process to access individual provider EHRs and use registries to understand disease-specific drivers that will lead to population health initiatives.		Project		Completed	07/01/2015	06/30/2016	07/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 7 Complete workforce assessment for care management capabilities among all participating safety net providers, including staff skills and resources required to manage priority at risk populations in each geographic area.		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 8 Develop workforce training / re-training / support staff assignment to mitigate workforce gaps.		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 9 Deploy staff support at provider level to train providers and staff on how to use and apply information learned from registries; how to establish care guidelines, develop disease pathways and inform on metrics for monitoring progress in managing population health.		Project		In Progress	07/01/2016	03/31/2017	07/01/2016	03/31/2017	03/31/2017	DY2 Q4
Milestone #7 Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all eligible participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	DY3 Q4	Project	N/A	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Primary care capacity increases improved access for patients seeking services - particularly in high-need areas.		Project		In Progress	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task All eligible practices meet 2014 NCQA Level 3 PCMH and/or APCM standards.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4



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into the assessment criteria.)										
Task 1 Survey and group all participating providers (safety net and non safety net) into level of readiness.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop plan, timelines, and assign resources for each level of readiness.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Clinical governance committee approves partner assessment results and PCMH roadmap.		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Develop education program and schedule for each provider readiness category that includes support from PPS (internal) or with potential PCMH vendors (external).		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 5 Implement plan.		Project		In Progress	04/01/2017	03/31/2018	04/01/2017	03/31/2018	03/31/2018	DY3 Q4
Task 6 Monitor weekly, monthly, quarterly progress against PCMH / EHR-MU work plan goals.		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Milestone #8 Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	DY3 Q4	Project	N/A	In Progress	10/01/2015	06/30/2017	10/01/2015	06/30/2017	06/30/2017	DY3 Q1
Task Medicaid Managed Care contract(s) are in place that include value-based payments.		Project		In Progress	10/01/2015	06/30/2017	10/01/2015	06/30/2017	06/30/2017	DY3 Q1
Task 1 Complete value-based payment arrangement assessment at each IPA (each IPAs to review its respective list of existing contracts with MCOs and other payers and identify and explore opportunities for value-based payment arrangements). Leverage activities from Financial Sustainability workstream regarding contracting with MCOs regarding VBP. Lastly, assessment results will determine best options to take for establishing VBP contracts.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Establish ACP Financial Sustainability/VBP committee to explore ACP contracts with MCOs and other payers on value-based payment arrangements.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Develop ACP value-based payment roadmap. Roadmap,		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3



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similar to New York State Roadmap for Medicaid Payment Reform ('A Path toward Value Based Payment'), cohorts need to be established to understand which methodologies will be the most appropriate. All Care for Total Population Option may not be the optimal option initially, especially for high risk subpopulations or populations where bundling might be a better option, however it is expected to achieve level 3 VBP regardless VBP type. Currently, the IPAs are under a capitated/FFS with risk sharing (All Care for Total Population Level 2). The IPAs are familiar with this concept and with appropriate reporting (to emphasize focus on outcomes) and support, the groups can effectively transition into Level 3. For other providers, the other VBP options will be discussed directly and recommendations presented as to how each provider type (BH, SUD, SNF, Hospital, Health Home, CBOs, etc) will be compensated.										
Task 4 Approve ACP value-based payment roadmap.		Project		In Progress	10/01/2016	12/31/2016	10/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone #9 Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	DY2 Q4	Project	N/A	In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS holds monthly meetings with Medicaid Managed Care plans to evaluate utilization trends and performance issues and ensure payment reforms are instituted.		Project		In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 1 Identify MCOs.		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Establish committee.		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Develop committee charter, goals, meeting schedules, etc.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Conduct monthly meeting with MCOs to discuss utilization trends, performance issues, and payment reform issues.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 5 Initiate VBP transition plan including interim steps and complete by DSRIP timelines.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone #10 Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	DY3 Q4	Project	N/A	In Progress	10/01/2015	12/31/2017	10/01/2015	12/31/2017	12/31/2017	DY3 Q3
Task PPS submitted a growth plan outlining the strategy to evolve		Project		Completed	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2



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provider compensation model to incentive-based compensation										
Task Providers receive incentive-based compensation consistent with DSRIP goals and objectives.		Project		In Progress	07/01/2017	12/31/2017	07/01/2017	12/31/2017	12/31/2017	DY3 Q3
Task 1 Establish committee (committee will include expertise from other workstreams such as Clinical Programs (Lidia Virgil), Compliance (Tom Hoering), Finance (Wallace Lau), IT (John Dionisio). The IPA leadership (Ramon Tallaj, MD, Henry Chen, MD, Emilio Villegas, MD) will play a role with physician engagement. Other providers such as hospitals (NSLIJ and Medisys Hospital System) will also represent. The PAC will also be engaged as they represent the overall network (including post-acute care providers, CBOs, BH and SUD, etc). Lastly, the MCOs will need to be part of this committee or play an advisory role to ensure the VBP levels and options are operationally feasible and to establish appropriate timelines based on DSRIP commitments.		Project		Completed	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Task 2 Develop committee charter, goals, meeting schedules, work plan, deliverables and timelines.		Project		Completed	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Task 3 Approve a roadmap for transition towards value-based payment by aligning provider compensation to patient outcomes. Performance reporting is a major component to VBP. MCOs will need to provide adequate data and reporting to tie practitioner performance to patient outcomes.		Project		Completed	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2
Task 4 Conduct meeting(s) with safety net providers to obtain comments, ideas, suggestions, obstacles, issues, possible solutions. VBP approach is key with a large network with a wide spectrum of provider types. MCO contracting will need to ensure VBP approach is appropriate.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 5 Conduct meeting(s) with MCOs to ensure needs are addressed, such as appropriate contracting language, data exchange and benchmark info that will determine goals.		Project		Completed	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 6 Develop potential models that adhere to roadmap guidelines that are appropriate to cost categories (total population care vs sub-population care vs bundling, etc). The various physician		Project		In Progress	07/01/2016	12/31/2016	07/01/2016	12/31/2016	12/31/2016	DY2 Q3



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groups within ACP has familiarity with risk contracting and capitation models that could help facilitate the transition to VBP.										
Task 7 Present models to Board and acquire approval. Ensure stakeholder buy-in where appropriate and finalize contracting points and terms with MCOs.		Project		In Progress	10/01/2016	12/31/2016	10/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 8 Implement plan and establish monthly/quarterly meetings to ensure VBP models are successful and understand the drivers of success. If VBP models are unsuccessful, develop targeted initiatives that impact cost drivers, taking both unit cost and utilization metrics of the various cost categories into consideration.		Project		In Progress	01/01/2017	12/31/2017	01/01/2017	12/31/2017	12/31/2017	DY3 Q3
Milestone #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 appropriate.	DY3 Q4	Project	N/A	In Progress	10/01/2015	06/30/2017	10/01/2015	06/30/2017	06/30/2017	DY3 Q1
Task Community health workers and community-based organizations utilized in IDS for outreach and navigation activities.		Project		In Progress	10/01/2015	06/30/2017	10/01/2015	06/30/2017	06/30/2017	DY3 Q1
Task 1 Establish patient engagement committee.		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Establish committee charter, work plan, milestones, timelines.		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Develop an IDS patient engagement plan that is culturally appropriate. Plan should also include assessment of health literacy of patients so initiatives can be developed to address potential health literacy barriers. Socio-economic factors should be considered so that medical needs become a priority for patients. Use of community health workers, peers, advocacy groups, families and caregivers can supplement traditional outreach methods (such as mailers or telephonic outreach). These groups are typically from the same community, culturally competent and can be trained to have high levels of health literacy to convey messages effectively. In addition, community-based organizations have grassroots level reach to members and can assist with engagement with the providers within the PPS. Lastly, plan should include assessment of patient satisfaction. As previously mentioned, high levels of patient satisfaction can lead		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3



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to higher levels of patient engagement.										
Task 4 Develop potential models and design, including development of workforce requirements, such as training or re-training community health workers, peers, advocacy groups and CBOs. Because ACP is a physician-led, community-based PPS, it has wide array of provider types that it can leverage to engage patients in very culturally appropriate ways. Aligning these resources will assist with effective outreach and patient engagement.		Project		In Progress	01/01/2016	03/01/2017	01/01/2016	03/01/2017	03/31/2017	DY2 Q4
Task 5 Develop tracking and monitoring capabilities (audit function) to ensure that services are delivered timely and patients remain engaged. Processes and reporting will be developed to track progress, including providing feedback that allow for process improvement, referral close times and rates, monitor global outreach rates, general patient visit rates (ie reduce non-utilizing patient rates), quality care gap hit rates, patient satisfaction, etc.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task 6 Implement pilot programs that target high-risk neighborhoods or areas with high concentrations of attributed patients. High-risk areas would focus on the conditions related to ACP's selected projects. Culturally competent Community Health Workers and other staff as well as Community Based Organization partners would work in tandem to ensure use of resources are efficient and effective. Pilot programs would include education, patient engagement and navigation of healthcare delivery system.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task 7 Present models to Board and acquire approval. Ensure stakeholder buy-in where appropriate and deploy resources to target areas.		Project		In Progress	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1
Task 8 Develop tool to track activities and establish key performance indicators and success metrics that tie to overall goals of the projects.		Project		In Progress	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1



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Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	jd593813	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES10_OTH_ACP_(VBP)_Meeting_Template_7635.xlsx	ACP (VBP) Meeting Template	10/31/2016 02:52 PM
	jd593813	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES10_OTH_2ai_10.3_Board_Meeting_Approvals_7613.pdf	2ai 10.3 Board Meeting Approvals	10/31/2016 01:40 PM
	jd593813	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES10_OTH_2ai_10.3-10.5_ACP_VBP_Plan_7612.pdf	2ai 10.3-10.5 ACP VBP Plan	10/31/2016 01:38 PM
Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	ew593815	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES2_OTH_2ai_2.6_Care_Management_7480.docx	2ai 2.6 Care Management	10/30/2016 05:08 PM
Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	ew593815	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES3_OTH_2ai_3.6_IDS_Roadmap_Addressing_Care_Coordination_7486.docx	2ai 3.6 IDS Roadmap Addressing Care Coordination	10/30/2016 05:12 PM
	ew593815	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES3_OTH_2ai_3.6_Care_Management_7485.docx	2ai 3.6 Care Management	10/30/2016 05:12 PM
	ew593815	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES3_OTH_2ai_3.6_Care_Coordination_Strategy_7484.docx	2ai 3.6 Care Coordination Strategy	10/30/2016 05:11 PM
	ew593815	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES3_OTH_2ai_3.5_Care_Management_7483.docx	2ai 3.5 Care Management	10/30/2016 05:11 PM
	ew593815	Screenshots	25_DY2Q2_PROJ2ai_MDL2ai2_PRES3_SS_2ai_3.5_Patient_Portal_MDLand_1_of_1_7482.pdf	2ai 3.5 Patient Portal MDLand 1 of 1	10/30/2016 05:10 PM
	ew593815	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES3_OTH_2ai_3.5_ACP_Health_Plan_Patient_Engagement_Partnership_Plan_7481.pdf	2ai 3.5 ACP Health Plan Patient Engagement Partnership Plan	10/30/2016 05:10 PM
	ew593815	Screenshots	25_DY2Q2_PROJ2ai_MDL2ai2_PRES3_SS_2ai_3.5_Patient_Portal_eCW_1_of_1_7462.pdf	2ai_3.5_Patient_Portal_eCW_1_of_1	10/30/2016 02:39 PM
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.	ew593815	Contracts and Agreements	25_DY2Q2_PROJ2ai_MDL2ai2_PRES4_CONTR_2ai_4.1_eCW_EHR_Work_Plan_7492.pdf	2ai 4.1 eCW EHR Work Plan	10/30/2016 05:38 PM
	ew593815	Contracts and Agreements	25_DY2Q2_PROJ2ai_MDL2ai2_PRES4_CONTR_2ai_4.1_MDLand_EHR_Work_Plan_7491.pdf	2ai 4.1 MDLand EHR Work Plan	10/30/2016 05:37 PM
	ew593815	Other	25_DY2Q2_PROJ2ai_MDL2ai2_PRES4_OTH_2ai_4.1_IDS_Roadmap_EHR_Work_Plan_7487.docx	2ai 4.1 IDS Roadmap EHR Work Plan	10/30/2016 05:18 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
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;	



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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	
Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	
Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	
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.	
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.	
Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	
Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all eligible participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	
Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	
Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	
Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	
Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as appropriate.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Ongoing	
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	
Milestone #6	Pass & Ongoing	
Milestone #7	Pass & Ongoing	
Milestone #8	Pass & Ongoing	
Milestone #9	Pass & Ongoing	
Milestone #10	Pass & Ongoing	
Milestone #11	Pass & Ongoing	



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✓ IPQR Module 2.a.i.3 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 2.a.i.4 - IA Monitoring

Instructions :



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Project 2.a.iii – Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access to high quality primary care and support services

✓ IPQR Module 2.a.iii.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Major risks to this project revolve around patient compliance. Patient compliance with plan of care can be heavily compromised by the low health literacy rate of the population served by ACP. The majority of the patients served by the ACP providers are immigrants who either do not speak English or speak very little English. Many of these patients have a low educational level and their overall literacy rate is low. This issue creates a population who relies more on word of mouth than on written plans making it difficult to evaluate the patient's comprehension and follow through on the plan of care. ACP plans to mitigate this risk through its strength in having culturally aligned providers who are of the same community and speak the same language as the patients that it serves. ACP will provide to the patient plans of care in the language that they speak and moreover will have staff who are also of the same culture and language as the patients follow up with the patients to ensure their comprehension of the plan as well as compliance with it. ACP has also put together a team of community based providers that will provide outreach and follow up with the patient in the language and culture that the patient is comfortable with. These community based organizations include homecare, nursing, social work, and others.



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✔ IPQR Module 2.a.iii.2 - Patient Engagement Speed

Instructions :

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

Benchmarks	
Actively Engaged Speed	Actively Engaged Scale
DY2,Q4	92,291

	Year,Quarter	DY2,Q1	DY2,Q2	DY2,Q3	DY2,Q4
PPS Reported	Baseline Commitment	36,916	46,145	69,218	92,291
	Quarterly Update	61,164	46,145	0	0
	Percent(%) of Commitment	165.68%	100.00%	0.00%	0.00%
IA Approved	Quarterly Update	0	142,906	0	0
	Percent(%) of Commitment	0.00%	309.69%	0.00%	0.00%

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Rosters	25_DY2Q2_PROJ2aiii_MDL2aiii2_PES_ROST_DY2Q2_2aiii_7669.xlsx	DY2Q2 2aiii	10/31/2016 06:11 PM

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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✅ IPQR Module 2.a.iii.3 - Prescribed Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #1 Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	DY2 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task A clear strategic plan is in place which includes, at a minimum: - Definition of the Health Home At-Risk Intervention Program - Development of comprehensive care management plan, with definition of roles of PCMH/APC PCPs and HHs		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 1 Develop protocol for identification of Patients at risk for progressing to Health Home eligibility. Protocol shall contain definitions, and intervention through PCPs, Care Managers and Coordinators/Health Homes, and specialists		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Develop a health home at risk intervention model with prescribed implementation of Comprehensive Care plans for each patient with a chronic progressive disease. Care plans will be uniform and distributed throughout the PPS provider partners through the provider engagement teams. Short cuts and in-putting and monitoring of these within provider EMRs will be developed and trained by the team.		Project		Completed	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 3 Disseminate protocol to ACP PCPs to treat patients in accordance with evidence based protocols to include referrals to specialist and social services as necessary.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Develop Care Plan to include patient self-management techniques, disease specific education, how to recognize triggers, remove hazards and avoid complications.		Project		Completed	07/01/2015	09/30/2015	07/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 5 Ensure that Care Plans are created, printed and explained in the language of the patients being served and implemented in a culturally appropriate manner.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task 6 Develop ACP processes and procedures included in protocols to include more stringent care coordination emulating health homes at the Primary Care office with PCMH level standards of care.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 7 Creation of Central Care Management/Care coordination teams at the level of health Homes through ACP's intense back office/Care Coordination department to provide more centralized, efficient integrated care.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone #2 Ensure all eligible primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and Advanced Primary Care accreditation by Demonstration Year (DY) 3.	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task All eligible practices meet NCQA 2014 Level 3 PCMH and APCM standards		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Leverage ACP's strong PCP network to establish and enhance relationships between partner hospitals and primary care providers for open communication and accessibility.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Utilize physician engagement teams, IPA groups, and physician champions to engage all PCPs in ACP's network in the participation of DSRIP and educate on the importance of advanced primary care and achievement of NCQA 2014 PCMH certification.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Contract with PCMH certified professionals that will assist the practices in attaining 2014 NCQA PCMH accreditation by year 3.		Project		In Progress	10/01/2015	03/31/2018	10/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 4 Develop tracking tool linked to physician database to understand progress for each physician undergoing PCMH certification.		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 Develop remediation plan with steps for assisting physicians that require additional support in achieving 2014 PCMH level 3 accreditation.		Project		Completed	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Milestone #3	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.										
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Non-Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Case Management / Health Home	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task PPS uses alerts and secure messaging functionality.		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Work with eClinical Works, MDLand and other major EHR vendors to establish bi-directional EHX platform to share information among PPS safety net partners who use eClinical Works EHR. The strategy around this milestone will directly mimic what we have in place for project 2ai.		Project		Completed	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 2 Establish work plans with hospital partners to develop Admission / Discharge / Transfer (ADT) feeds into HIE.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Establish work plans with eClinical Works, MDLand and other major EHR vendors among ACP participating safety net providers for data feed into HIE platform.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task 4 Develop other interim solutions for sharing health information among clinical partners using direct exchange, alerts, and patient record lookup. Determine other needs or enhancements based on IT/integration gap analyses.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 Connect with RHIO/QE and develop plan on sharing health information as the State makes the information available.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 6 Obtain and understand DSRIP policies, procedures and processes with respect to RHIO/SHIN-NY requirements as the information becomes available.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task 7 Develop final plan for sharing health information among clinical partners by DY3.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 8 Ensure compliance with data sharing and confidentiality rules are followed with every data sharing event. This includes appropriate securities and encryption methodologies are in place to comply with HIPAA and other state and federal guidelines regarding PHI.		Project		In Progress	10/01/2016	03/31/2018	10/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 9 Develop tracking tool linked to physician database to understand physician data sharing activities on health information exchange/RHIO/SHIN-NY.		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 10 Periodically review physicians (more frequently at the beginning) to ensure data is being shared and that bi-directional activities are evident.		Project		Completed	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Milestone #4 Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	DY3 Q4	Project	N/A	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task PPS has achieved NCQA 2014 Level 3 PCMH standards and/or APCM.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Survey and group all participating safety net providers into level of readiness. The strategy around this milestone will directly mimic what we have in place for project 2ai.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop plan, timelines, and assign resources for each level of readiness. This includes PPS-defined readiness levels with strategies that will vary based the different levels (ie those who are technologically integrated will have a different approach than providers who are still utilizing paper medical records).		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Establish communications / marketing plan and outreach to all		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
ACP safety net providers that also identifies support resources.										
Task 4 Start to implement plan to ensure safety net providers achieve MU/PCMH Level 3 by end of DY3. Implementation plan includes support from resources including PCMH CCEs. Support may include internal or external resources.		Project		In Progress	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 5 Develop tracking tool linked to physician database to monitor EHR system use. Additionally, physician process adherence will be tracked (methodologies should follow developed protocols and how-to's).		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 6 Develop remediation plan with steps for assisting physicians that require additional support in appropriate use of EHR systems to support PCMH requirements.		Project		Completed	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Milestone #5 Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	DY3 Q4	Project	N/A	In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies targeted patients through patient registries and is able to track actively engaged patients for project milestone reporting.		Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Develop and implement algorithm to be used to stratify and identify target patients. Algorithm to include specific chronic disease codes to understand at-risk population.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop a strategy with timeline to be used to obtain significant data from EMR registries or from practice management systems. Data should include in all cases patient demographics in addition to the specified data used in the algorithm.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Identify data analytics staff or practice champion to perform the data pulls at the specified times.		Project		Completed	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Perform comparative analysis using data pulls from ACP central data repository and other platforms such as Salient and MCOs to validate and verify data and implement targeted and population health strategies.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #6	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4



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Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.										
Task Procedures to engage at-risk patients with care management plan instituted.		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Develop comprehensive care plans to distribute throughout the PPS with disease specific education and instruction on self-management, risk reduction, identification and elimination of triggers. The comprehensive care plans also include home assessments and family/caregiver intervention. The Care Plans will be presented to the patient with appropriate training at the point of care by the Primary Care Provider.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Create a back office protocol that consists of outreach staff, care coordinators that will remain in contact with the patients, establish a rapport with the patient and caregiver/family to ensure that communication gaps and patient discomfort levels are resolved. The number of calls and follow ups per week/month will vary depending on patient's health status and patient's health literacy rates. Care Coordinators will ensure that appointments are made and kept, transportation is made available whenever necessary, orders are fulfilled and the patient receives any needed care.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Hire and train Care Managers in the back office to also be readily available to the patients and reach out and be manage their care ie. Medications, counsel, etc. thus ensuring that the patient has what he/she needs for management of disease and increased quality of life.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #7 Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Each identified PCP establish partnerships with the local Health Home for care management services.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Each identified PCP establish partnerships with the local Health Home for care management services.		Provider	Case Management / Health Home	In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4



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Task 1 Develop protocols in which each entities roles are delineated. Protocol should clearly establish the primary care provider's responsibility, care plan implementation, as well as health home eligibility and the roles of the health home.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 ACP will leverage its partner Health Homes and establish clear partnerships with the HH and PCPs through its regional Care Teams. ACP's care Teams are comprised of partners within a given region and they include providers of all types including HHs. Health Homes will be linked and partnered with the PCPs within their regions. The HHs and PCPs will collaborate in accordance with the set protocols and processes.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 ACP has a vast number of patients, due to this, ACP will work with the HHs in the network to incorporate best practices and processes into a back office/care coordination team that will provide additional, enhanced care coordination and management.		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Primary Care Provider's role shall be as per the protocol to provide evidence based disease management, implementing a comprehensive care plan for specific disease management. PCP office will work with Care Coordination team in Health Home model care coordination		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 Health Homes' role shall be to provide guidance, assistance and support in the implementation of a Health Home model of Care Coordination as well as provide Health Home services as needed for patients eligible to receive care under the Medicaid Health Home eligibility criteria.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #8 Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS has established partnerships to medical, behavioral health, and social services.		Provider	<u>Practitioner - Primary Care Provider (PCP)</u>	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4

Providers Associated with Completion:



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<p>A T Adebayo Md Pc; Abdullah Ghazanfar Syed Md; Abedin Jahidul; Abraham Susan Philips; Acevedo Mabel Md; Acosta Dalisa J Md; Adam Muhammad Sanni Md; Adeyanju Olufunmilayo Olajumoke Md; Adeyemo Adenike; Adler Carl M Md; Aggarwal Om Parkash Md; Agrawal Jugal K Md; Aguilh-Figaro Toycina; Ahern Barbara Ann; Ahmad Laeeq Md; Ahmad Syed T Md; Ahmadi Ladan M Md; Ahmed Nayaz Md; Ahuja Anita I Md; Ahuja Kishore Kanayalal Md; Ahuja Rita K Md; Akhand Abdul; Alba Juan Andres Md; Albarran Marzan Julio E Md; Alberto Glendalyz; Alcindor Claudia; Alex Bernstein; Alfonso A Ortiz; Alla Vijayakumar Md; Alleyne Diahann Melvina; Alleyne Michael George Md; Almonte Maria Isabel Md; Alvarado-Rivera Jorge V Md; Alvaro Ramirez Physician Pc; Alwani Abdulla Md; Alwani Ayaz; Alwani Salima; Ambrose-Flaherty Stephanie; Amodio Stefano Md; Amr Nayel Md Pc; Andrade Gloria Floresca; Ani Samuel Onyemuwa; Anjum Naheed Md; Apoeso Taiye Olubunmi Md; Aponte Jose Md; Applewhaite Janelle M; Arce Samuel Md; Archbold Maritza Stella Md; Ares Luz Delia Md; Arumugam Thangamuthu R Md; Asters Dimitrios J Md; Auguste Jean K Md; Aung Kyawt Thandar; Avakian David Md; Avany Lucia Victor; Awan Khurram Shahzad; Babayeva Natela Md; Babubhai I Patel Physician Pc; Bagheri Farshad; Bahr Gerald S Md; Baik-Han Won Hee Md; Baldevbhai Vithaldas Patel Physician Pc; Banad Sheela Premanath Md; Bangug Samuel Pio Allado Md; Barbery Maria-Pilar; Barcia Rafael G Md; Barua Aruna Md; Basello Gina M Md; Batikov Aleksandr Md; Battle Jose E Md; Batoon Sherwin Bumanglag Md; Beekman Karen Press Md; Belding Michele Frances; Belliard Christian Arturo Estevez; Ben-Meir Amos David; Benchabbat Abraham A Md; Benjamin Wu Md Pc; Berezovskaya Sabina; Berkowitz Israel Steven Md; Bharel Virendra M Md; Bhavana R Japi Physician Pc; Bhuiyan Rafique Ahmed; Bilik Ilya V Md; Bizzaro Thomas A Md; Blum Isaac Facs Md; Boccardo Daniel A Md; Boccio John S Do; Bolon David Md; Borrero Melissa; Bouallali Hind; Boursiquot Jean Robert Md; Bowen Marc X Md; Bowers-Johnson Susan Md; Boxer William Paul; Boyd Jeremy; Braunstein Marc; Bregman Zachary; Brena M Desai Pediatrician Pc; Bressner Robert Stuart Md; Brief George Md; Bronfman Ida Md; Brown Tyrone Anthony Md; Bukhman Leonid Md; Bundoc Susana Dugang Md; Bunyavanich Sanga Md; Bunyavanich Sommai T Md; Burgos Javier P; Burris-Warmoth Patricia R Md; Butt Rahila Md; Buzinover Alla B; Byssainthe Paul Harold Md; Cabatic Thelma Ocampo Md; Cadet-Valeus Sergelyne; Cai Min; Caldera Aura Corina Md; Calliste-Scott Susan; Campusano Clarinelda; Cao Shimin; Cardona Erica; Caro Sixto R Md; Carreno Jacqueline Md; Carreno-Rijo Elizabeth; Carvajal Ruben U Md Pc Md; Castanos Dilia M Md; Castellanos Roman Dario Md; Castillo Alfredo Md; Catucci Candida; Cecilia Griselda Calderon Md; Cerri Ruben Walter; Chabla Juan Francisco Do; Chadda Veena Md; Chak Ada Md; Chakote Jyoti V Md; Chan Alfonso Y; Chan Angela Mei Md; Chan Bennett; Chan Chun-Kit; Chan Robin Y C Md; Chan Thomas Kin-Sim Md; Chang Nga Md; Chao Elaine Lynn; Charles Antoine V Md; Charlotten Kevin Alexander Md; Charnoff Judah Azriel Md; Chatterjee Partha P Md; Chattoo Premetesh Do; Chaughtai Khalid Akhtar Md; Chauhan Sudheer Singh Md; Chawla Satish K Pc Md; Checo Yuderqui Md; Cheema Manjit Singh Md; Chen Chao Do; Chen Charlie Chin-Song Do; Chen Haifan Md; Chen Henry S; Chen Xin Md; Chen Yanfeng Md; Chen Yuchun; Cheng Jennifer; Cheng Jenny Md; Cheng King Shek Eric Md; Chennareddy Swaminathan; Cheuk W Lau Md Pc; Cheung Helen; Cheung Ming Md; Cheung Sandy; Cheung William Md; Cheung Yiu Cheung Md; Chhipa Mohammad Haroon Md; Chiao Marie; Chien Kuo Chiang Md Pc; Chiu Karen Md; Chixin Fang Medical Pc; Cho Won Sup Md; Choi Mi Ja Md; Choi Sangil Md; Chopra Manju Rattan; Chopra Rajpal S Md; Chou Christina Lee Md; Chowdhury Utpal; Choy Lawrence T Md; Chua Betty A Md; Chung David Ingook Md; Chung Nakchin Md; Chung Wendy Wei Md; Clarke Fred C Md; Cohen Lourdes; Cohen Nadine; Cohen Nelly Md; Cohen Stanley Bart Md; Colasacco Joseph A Md; Colon Belkis Arelis Md; Comprehensive Community Pediatrics; Cordice-Ford Candida; Cordoba Vargas Sandra Edith; Cornielle Jorge Luis Md; Corpuz Elsa P Md; Correa Michael Md; Cortes Juan Do; Crespo-Gomez Efrain Md; Cristinoiu Lucia L Md; Cruz Alcedo Anselmo Md; Cruz Erlinda S Md; Cruz Philip M Md; Cuidado Medico Y Geriatrico Of Quee; D Oleo Vargas Maximo Jose; D'Augustine Jean Mars Md; Dahan Shayna; Dairo Oluwatoyos; Damineni Sailaja; Daniels Kathryn Elizabeth; Das Provat Md; Dave Devang Md; De La Cadena Flor S Md; De Lara Francisco Arturo; Decoo Ydelfonso A Md; Dejoie Marie Chantale; Delimon Joseph I Md; Dellatto Patricia; Delman Moisey Md; Demoz Abraham Md; Deng Juliang Md; Depaz Javier; Derek Sun; Desir Mergie X Md; Dhillon Lakhbir; Dholakia Kush Ravindra Md; Di Franco Fortunato Santi Md; Diaz Angel A; Diner Alan E Md; Ditchek Alan Md; Doctor Yio Medical Service Pc; Domond Jacques; Dontineni Nripen; Doshi Kaushik J; Dove Arthur Renner Md; Dovernarsky David Md; Dr Mario S Malonzo Md Pc; Dr Rosario H Reyes-Rigor Physician; Drepaull Loris Omesh; Duda Olha; Dudani Bharti Md; Duggirala Rudrama D Md; Dunganani Trushar; Edasery Beply J Md; Edwards Wendy S A Md; Eisenstein Howard Charles Md; Elbahloul Ossama Abdelkader; Elshoff Kathryn; Eric Zhou Medical Office Pc; Espinal Alberto Comas Md; Estevez Juan T Md; Fakioglu Esra; Falk Bryan M Md; Familia Carmen; Farhat Laila Ali Md; Farhat Samir Ali Md; Fashakin Emmanuel O Md; Fathallah-Mammo Aysar B Md; Featherstone Melvin T Md; Felix-Peralta Ingrid Ivanna; Feng Yun Md; Ferdous Razia Khan; Fernandez Oscar E Md; Figueroa-Martinez Silkia; First Step Medical Pc; First Step Pediatrics Pc; Flansbaum Bradley Evan Md; Florence P Golamco; Flores-Castillo Edgar A Md; Florimon Felix Md; Florimon-Delarosa Hector B Md; Fokas Anastasia Md; Francis Charles Jerome Md; Francisco Dalmacio H Md; Francisco Richard L Md; Freyle Hanna Bathia Md; Frousios Costas Anthony Md; Fukilman Ocas Jorge Md; Fulgencio-Delmonte Jose A; Fung Ngan; Fung Sandy M; Gad Medical Pllc; Galanis Tommy; Galibov Vyacheslav Md; Gamundi-Joaquin Rosa E Md; Gandhi Sneha J Md; Ganesh Lalitha Md; Gao Medical Pllc; Gao Pei; Garcia Quinones Saribel; Garcia-Albarran Carmen M Md; Gebrezgi Sebhatu Tewelde; Gega Renato Cantada Md; General Medical Services Of Queens; George Jacob V Md; Ghaffar Tahira Farooqi Md; Giannetti Cynthia; Gilani Tajammal H Md; Gillego Azucena Manucdoc Md; Ginebra Fernando Arturo Md; Glenn Christophe; Go Eddie Sim Md; Go Teresita Alo Md; Gold Richard Elliott Do; Goldman Adam Y Md; Goldman Jack Md; Golestaneh Nasser Md; Gonjon Cheng Antonio Md; Gonzales Aurora Laurel Md; Gonzalez Adrian Md; Gonzalez Astacio Gustavo J; Gonzalez Fausto A Md; Gonzalez Paul Edward; Goris Jose Armando Md; Gotlin Andrew D Md; Govind Prashil Md; Goyal Madhulika Md; Grageda Melissa R; Graham Robert; Grassi Armando E Md Pc; Green Debora; Griffith-Reece Wendy; Gu Kangxia; Gu Xi Freda Md; Guido Giancarlo R Md; Guillen-Santana Roselia; Gupta Indranil Md; Guseynov Luiza Md; Guttal Dakshayani R Md; Guzman Damiani Rodolfo W; Haider Qazi Kamal Md; Hailiu Zuo Physician Pc; Haimi Joseph Shayani Md; Hall George Clinton Md; Hana Mervat; Hanau Lawrence H Md; Hangjun Jang Md; Hanna Nader Ramses Md; Haque Muhammad Mazharul Md; Haque Muhammad Misbah-UI Md; Haroon Sameera N Md; Harvey Peter F; Hasan Muhammad A Md; Hassid Babak; He Fu Fu Md; He Lan Md Pc; He Yong Kang Md; Hecker Lawrence P Md; Hector Holson S Md; Henao Joseph; Henoah Avraham Md; Hermogenes Patricia W Md; Hernandez Abreu Andres R Md; Hidalgo Maria Del Carmen Md; Hill Mark A Md; Hill Tawana; Hiza Ashley Md; Hoffman Howard Md; Holalkere Rajagopal Md; Hon John Wingsun Md; Hon King Chen Md; Hu Jiong-Ming Md; Hu Xiaoxi; Huang Hua Md; Huang Le Kiong Md; Huang Qinghong Md; Huang Yanhan Md; Huang Zheng-Bo Md; Huey Howard E Do; Hughes Reginald D Md; Hung Stephanie; Hwu Charles Joseph; Hyndman Rhonald; Ilyaev Stella; Im Soyoun; Israel Igor Md; Israel Roza Md; Jacob Sunitha; Jaes Pablo Hector; Jafri Yumna Saeeda Md; Jamaica Family Practice &; Janny A Ozuna Md Pllc; Jayman-Aristide Razia; Jeon Eunjeong; Jerez Jose R Md; Jhaveri K Meenakshi; Jiang Bao En Md; Jiangping Gan; Jianlin Wu; Jiansheng Zhao Medical Pc; Jimenez Marcial; Jimenez Ramos Farrah Del C; Jin Yan Md; Jindal Michelle Anne Md; Jing Wuhua; Jo Jihyun; Johnson William G Md; Jordan Nicole E; Jothianandan Kanthimathi Md; Jovellanos Valentin Pardo Md; Julian Maximo Md; Jung Josephine O Md; Kairam Indira R Md; Kalepu Mallikharjanudu Md; Kamenschchikova Marina Md; Kan Sang Md; Kancherla Praksh Surya; Kang Jun; Kaplowitz David; Karayil Ajith; Karibandi Ramakrishna V Md; Karim Rukshana Omar Md; Karimi Mahmood M Md; Kazmann Luis Md; Kevin J Guo Medical Pc; Khaldarov Yevgeniy Md; Khan Naznin; Khan Rehana Iqbal Md; Khanijou Rita Md; Khorets Boris A Md; Khoriaty Florence Fares; Kim Hyoseong; Kim Jeongwon; Kim Ji Young; Kim Yong Jun Md; Kim Yoojin Md; Kimyagarova Irina; Kintzoglou Alexander Md; Kissin Esther Md; Klein Sherman M; Knickerbocker Medical Care Pc; Konecky Alan Md; Konig Michael P; Korneeva-Vladimirsky Irina Lvovna; Koshy George P Md; Krivitskaya Nataliya; Krumholz David Md; Kumar Manish; Kumar Yogesh Md; Kuo Josephine Y Md; Kuriyan Blessy George; Kutnick Richard; Kyaw Myint Physician Pc Md; Laks David Md; Lam Kin Yui Md; Lam Terry Md; Lao Wilfredo Sy Md; Laud Sheela G Md; Lazala Polanco Carmen Md; Le Jimmy Chung; Lederman Elliot Charles Md Pc; Lee Alice K Md; Lee Holly M; Lee Hung-Sam Do; Lee Karen Tin Md; Lee Norman N Md; Lee Shuk; Lee Sophia Y; Leers Ella Md; Lefevre Cluny P Do; Leung-Eng Lucy Md; Leviashuili Natela Md; Levitt Howard Lawrence Md; Lewis Kamica Lynn; Li Brian; Li Jim; Li Ka Md; Li Michael Yang Md; Li Paul; Li Xian Min Md; Li Xiao-Qing Md; Li-Hirashiki Vivian Md; Liao Kevin; Licht Warren Bret Md; Lim Vivien Md; Lin Kevin N T; Lin Sun Co; Lin Wei Guo Md Pc; Lin Ya Li; Lippman Sheldon Bruce Md; Liriano Octavio Antonio Jr Md; Liu Ho-Mau Md; Liu Shin-Hua; Liu Zova Zhuhua Md; Liverpool Steven Fitzroy Md; Lodha Ajay K Md; Long Ann Yongzhou Md; Loo Nelly T Md; Lopez Ernesto M Md; Losco Donna Marie Md; Lu Li; Lui Sheung Bun Md; Lyo Rosie Yen-Cho Md; Lyo Thomas; M & M Medical Pc; Macenat Jean R Md; Madhavi Madhurapantula Do; Mailian-</p>										



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<p>Oganova Lilia Md; Majeed Salamat Md; Mallapu Shravan K; Malonzo Mario Supan; Maltez Janet Miraldo; Mangla Arun Kumar Md; Marie-Nirva Blaise; Marone Freya Md; Marte Grecia A Md; Martinez De Pimentel Nadia Md; Martinez Sergio A Md; Martinez Virginia Md; Martone Rosanne; Masih Emmanuel B Md; Maslova Alla Md; Mastan Alina; Master Kalpana Rashmin; Mathur Jay Simlote; Mayard Jules; Mazza Michael Anthony Md; Mcdonald Annmarie C Md; Md Aticul Islam; Mederos Mariano Md; Medvedovsky Mihail Md; Mejia Enrique F; Mejia Manuel Eligio Md; Melamed Samuel L Md; Melamedoff Gustavo R Md; Mendez Jose Manuel Md; Meng Hsiang-Chi; Mercado Agueda Md; Mercedes Betty Md; Mesbah Reza; Messer Caroline Korsten; Metwally Ashraf Ahmed Md; Metzger Benjamin Lowell; Michael Armine Md; Miglino Christine Jane; Mikhaylov Artur Md; Mina Bushra Ayad Md; Minhas Seema Jalil; Minutillo John Md; Mitchell Harrison Md; Mo Shengjie; Moarefi Mehran-Reza Md; Modern East West Medical Pc; Mohammed Abdul Wahid; Mohan Santha Md; Mohd A Hossain; Mohr Christina Md; Mohseni Haleh G Md; Moise Wesner Md; Moiz A Hamdani; Molina Alveris Md; Molnar Thomas; Moran-Almonte Roberto A Md; Moreno Fernando; Mortazavi Shervin Md; Moussa Zobidatte Md; Mpi Catherine Alikor; Muhammad Sanni Adam M D P C; Mui Wingtat Md; Mun Sun Ok; Nahar Jebun Md; Nahar Most L; Nancy Han; Nassim Roland Md; Nazarian Habib; Nazir Azra Md; Nejati Golali Md; Nemazie Siamack Md; New York Cardiovascular Medicine; Ng Hung Fai Md; Ng Norland Md; Ngai Yi Md; Nguyen Dustin Triet Md; Nguyen Nina Thi; Nicoleau Aryel Md; Nicoleau Carl A Md; Nienaber Cameron; Nina Ortega Luis Cesar Md; Nolan Marc A Md; Norberto Candido Cesar Md; Nukalapati Prasuna R Md; Numann Sousan Munim Md; Nwaishienyi Silas E Md; Ny Hispanic Family Medical Pc; Octaviani-Reyes Melba E; Odnopozova Mariya Md; Odom Ebenezer Kofi Bentum Md; Olayo Alvaro A Md; Olivero Matos Ana Rita Md; Olivo-Mercedes Yohanna M; Oodal Ravichand Md; Ooi Yen Hoong; Orlovskiy Aleksandr Md; Ortiz Carlos A Jr Md; Ortiz Luis A Rpa; Ortiz Yvette A Md; Ottaviano Paul Gerard Md; Ozoude Sylvester A Md; Paddu Upadhyaya Padmanabh; Paik Woong Ki; Palencia David Jose Md; Panhani Ramkumar Md; Pantaleo Nicholas; Parekh Sejal; Park Yohan Md; Patel Anilkumar Sureshchandra; Patel Asvinkumar; Patel Babu A Md; Patel Baldevbhai V Md Pc; Patel Bhupendro R Md; Patel Ishvarbhai S Md; Patel Mayank Md; Patel Nayankumar A Md; Patel Nilesh R Md; Patel Prakashkumar Govindbhai Md; Patel Rajesh Jayantilal Md; Patel Ratilal T Md; Patel Reena J; Patel Sanjay Narottambhai Md; Patel Sunil C Md; Pathak Naveen Md; Patin Michael; Patron Maria Yolanda Piamonte Md; Peichev Mario Atanasov Md; Pena Clotilde B Md; Pena Jacobo; Pena Pena Yomaris Mercedes Md; Pena-Miches Cervantes Beethoven; Peralta Victor Emilio Md; Peralte Louis Ludovic Md; Perello Robert Md; Perez Andrea; Perez Emilio Ivan; Perez Jose Md; Perez Luisa Altagracia Md; Perez Manuel G Md; Perez Stephen Barnes Md; Perfetto-Tullo Maria; Perkins Arlene Md; Petrov Manana Md; Petrov Petya Md; Petryk Grzegorz Md; Piacente Dominick N Md; Pichardo Jesus Manuel Md; Pierre Joseph Md; Pignanelli Eduardo L Md; Pilarte Juan Jose Md; Pimentel Ramon R Md; Pin Mei Yao; Pinckney Isaiah Howard li Md; Pinero-Bernardo Shirley J Md; Ponieman Diego Andres Md; Price Hobart C Md; Priester William D Md; Priyeva Raisa; Procare Medical Services Pc; Pulle Dunston Md Pc; Punsalan Imelda Md; Puttaswamygowda Vishwanath; Qadri Syed S Md; Quijada Reucar Md; Qureshi Pervaiz Iqbal Md; Rafique Bhuiyan Medical Pc; Rahman Mohammad M Md; Rahman Mohammed Matiur Md; Rahman Rounak; Raince Gurmukh S Md; Ramaraju Thippa R Md; Ramirez Alvaro Md; Ramirez Julio Alberto Md; Ramirez-Baron Diana Maria; Ramzan Muhammad Masood; Rao Sudha; Raof Rebecca G Pc Md; Raof Suhail Md; Raport Miriam R Md; Rasheed Qaesar Md; Rashid Mohammed K Md; Ravi Venkata Ramana; Rawal Jagat M Md; Ray-Sen Piyali Md; Raza Nadeem Md; Rebecca Anne Mazurkiewicz; Reddy Kavitha Dadithota Md; Reddy Mallikarjuna D Md; Rella Vincent J Md; Ren Lili Md; Reyes Elsa Jacqueline; Reyes Nelton E Md; Reyes-Rigor Rosario H; Reynoso Elsa Sofia Md; Rezkalla Laurence L Md; Richter Michael; Rigaud Nathalie; Rim An Moo Md; Rishe Eric Md; Rivera Carmina Ramona N Md; Robinson Sandra A Md; Rodriguez Lilly M Md; Rodriguez Maria D Md; Rodriguez Rafael Md; Rodriguez Rhina Md; Rojas Ana Md; Rosario-Amaro Francisco Md; Roth Alan Robert Md; Rotkowitz Louis Philip Md; Roychoudhury Kanchana Md; Roza Alberto L Md; Rumana Alauddin Rahman; Rydzewski Mark Md; Sabogal Gonzalo Md; Sahgal Sumir P Md; Sahni Gunjeet Mandvi Md; Saint-Laurent Mario; Salim-Ortiz Jadiyi Md; Sam Mirela Md; Samuel Cho Md Pc; Sang Koky; Santana Domingo A Md; Santana Rita Md; Santangelo Luzviminda S Md; Sarkar Samir Kanti; Sauro Natalie Margaret; Saxena Amit K Md; Sayad Karim Md; Schwimmer Joshua Adam Md; Scott Stanley Md; Sencion Franklin Md; Sencion Sergio M; Setru Udayashankar K Md; Seung Hee Kang; Shah Sangita Tushar Md; Shah Tushar Laxmichand Md; Shan Zihe Md; Shani Dana Md; Sharma Hita Md; Shehigian Aline Ann; Shen Christine; Shen Jie; Shen Kuan Hung Md; Sheridan Bernadette Lizina Md; Shi Shelly Md; Shukla Mayank Arun Md; Shum Kee Yee Md Pc; Shusterman Arkadiy Md; Silva Lourdes G; Simons Stephan Md; Singh Amandeep; Singh Amarjit Md; Singh Amarjit Md Pc; Singh Kabul Md; Singh Sherry A Md; Singiri Archana; Sinha Ashok; Sionov Katie Md; Sitya Rosalynn H; Siu Singmay Md; Skeivys Saulius J Md Pc; Sms Medical Services Pllc; So Agnes Laiping Md; Solinas Alessandro Md; Soni Sharad; Soto Maria B; Soto-Alcantara Lilliam Md; Spadafina Sarah Marie; Spiotta Roseann T Md; Springfield Pediatric Pc; Spyropoulos Alex C; Stona Lurline P; Streete Sophia Md; Su Amy Md; Sudar Singh Prabahar Cynthia Md; Suleman Rana Javed Md; Sullivan Erinmarie Md; Sundaresh Mamatha Md; Sung John Hsiyang; Suprin Gregory Md; Syalee Jogesh Md; Syed Ahmad Physician Pc; Tafreshi-Oraee Parisa Md; Tahir Aamira; Tajian Rosa Md; Tallaj Ramon Modesto Md; Talwar Sumit; Tam Cynthia J Md; Tam Kenneth C Md; Tan Chyne C Md; Tan Reynaldo G Md; Tan Victoria H Md; Tapia-Mendoza Juan Md; Tardio Julio Alberto Md; Tarife Karen; Teng Rui Er Md; Tetrok Mikhail S Do; Thanjan Thresiamma George Md; Thomas Johnny Md; Tin Hui Hing Md; Tio Arsenio Miguel Md; Tokar Svetlana Md; Toronjadze Tamar Md; Torres Marino A Md; Trager Jonathan David K Md; Trinh Tuyen T Do Pllc; Tsoumpariotis Apostolis; Tu Joseph; Tullo Luigi Giovanni Md; Uduevbo Jerry Ainene Md; Urena Andres F Md; Uritskaya Faina Md; Uzor Jennyfer Paola; Vaccarino Robert A Md; Valdivia Martha Maria Md; Valencia Hector Antonio; Varghese Betsy; Vaz Geraldine Sandra Md; Vela Anthony T P J Md; Velasquez Luis; Verna Yves Georges Md; Vijaykumar Sudha Md; Villegas Emilio Md Pc; Vinas Sonia Miliza Md; Vladimir Osipov Md; Vladutiu Mihaela I Md; W Liangs Medical Office; Wagner Ira J Md; Walker-Adamson Sonia E Md; Wan Soo Lee Md Pc; Wang Fei Md; Wang John Tsihsian Md; Wang Jy Ming Md; Wang Yan Md; Wang Yaoming Md; Wang Yuancong Md; Waseem Faisal Md; Weeks Brandon Michael; West Denise; Williams Lorraine E Md; Wiltshire Veronica; Win Yin Yin; Wong Chun Tung Md; Wong Helen; Wong Irene; Wong Martha Shih Md; Wong Tina Md; Woods Kim Benjamin Md; Wou Margaret Lee Md; Wu Benjamin Zibin Md; Wu Shuyi; Xin Pang; Xinmei Li; Xu Min Md; Yacht Andrew Charles Md; Yahodaei Kamran Md; Yan Henry Jiann Md; Yang Hui Chih Md; Yang Nancy S L Md; Yanliang Sun; Yarramreddy Saroja; Yiu John; Yoon Chung Hee Md; Yu Ann Marie Md; Yusuf Fazlul Md; Zabarskiy Roman Md; Zaman Rehana A Md; Zambon Roberto; Zanger Daniel Md; Zayat Gabriel G Md; Zeng Lingling Md; Zhang Han Md; Zhang Jian Wei; Zhang Yuqing; Zhao Jiansheng; Zhao Jingbo; Zhao Mengjia; Zheng Dan Md; Zheng Hanbin Md; Zheng Jean Qingjun Md; Zheng Xiangsheng; Zheng Yi Xiu; Zhu Dening; Zhu Ming Md; Zilber Nora Md</p>											
Task			Provider	Case Management / Health Home	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
<p>Providers Associated with Completion:</p> <p>Aids Ctr Of Queens County Inc; Health First Phsp Inc; Help/Psi Aids Adhpc; Heritage Health And Housing, Inc; Medical Hlth Research Asc Nyc; Mental Hlth Prov/W Queens Mh; Metroplus Health Plan Inc; Montefiore Medical Ctr Ai; Narco Freedom Cn Ai; New Horizon Counseling Ctr Mh; Omrdd/Goodwill Industries Ny; Omrdd/Maranatha Human Svcs-Ny; Omrdd/Maranatha Human Svcs-Ta; Outreach Development Corp; Qsac Inc; Queens Coordinated Care Partners Ll; St Lukes Roosevelt Hsp Ctr; Transitional Ser For Ny Mh; Vnsny Community Health Services</p>											
Task			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
partnerships with needed services.										
Task 1 Establish relationships and partnership with Behavioral Health, OASAS, OMH entities and engage in a service agreement. Engage these entities in all regions and counties in which ACP serves.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Establish relationships with local government, social and specialty services such as SPOAs, agencies for the developmentally disabled to coordinate and provide needed services to patients.		Project		Completed	09/30/2015	03/31/2016	09/30/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Include identified entities in Care Teams, PAC, Clinical Quality Committees to help develop, coordinate and disseminate best practices, protocols, etc and provide higher quality service.		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 4 Liaise and form partnerships between these entities and the PCP especially in areas where these services have been lacking and patient are going without needed care and services.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 5 ACP will implement a referral process by which all referrals are entered and submitted via the EMR and go through an HIE. ACP partners' and associated providers' information shall be uploaded and prompted to the PCP or other referrer as a referral database so that referrals can be made to the needed service provider or agency that has made a commitment to tend to ACP patients in the specified timeframe and manner.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 6 All referrals shall go through to the ACP central data repository and shall be stored and documented for monitoring and adherence to procedure.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 7 Referrals going through ACP's HIE are picked up and are monitored by the ACP central care coordinators to ensure completeness and attainment of services in a timely and efficient manner and for further care coordination.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone #9 Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	DY2 Q4	Project	N/A	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4



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Task PPS has adopted evidence-based practice guidelines for management of chronic conditions. Chronic condition appropriate evidence-based practice guidelines developed and process implemented.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task Regularly scheduled formal meetings are held to develop collaborative evidence-based care practices.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task PPS has included social services agencies in development of risk reduction and care practice guidelines.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task Culturally-competent educational materials have been developed to promote management and prevention of chronic diseases.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 ACP will develop and implement best practices in care management and care coordination in conjunction with Health Home partners and develop evidence based protocols for disease management.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Develop uniform Comprehensive Care plans which will include disease self management techniques and will also include risk reduction activities, recognizing of warning signs and family education and support materials. The Care plans will be in different languages to be given to the patient's of ACP in their appropriate language. Furthermore, the Care plans will be consistent with the Cultural sensitivities of the population/patient being served.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Develop Evidence based protocols for chronic diseases with the help of Primary care physicians, specialists physicians and associations such as JNC-8, American Lung Association, etc.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 4 Disseminate protocols to all providers within the PPS through physician engagement meetings, physician engagement teams and IPAs.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 With the help of the IPAs, physician champions, the PAC, and other committees, obtain physician "buy-in" support and commitment on implementation of evidence based ACP protocols.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task 6 Draft partner agreements and obtain signatures from partners acknowledging participation and adherence to ACP protocols, processes and procedures.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 7 Establish partnerships and agreements with social services agencies to assist in the provision of needed services and implement risk reduction, +which can include protective services, shelter, housing, food, etc.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	ew593815	Other	25_DY2Q2_PROJ2aiii_MDL2aiii3_PRES3_OTH_2aiii_3_1_Bi-directional_Providers_7465.xlsx	2aiii 3.1 Bi-directional Providers	10/30/2016 03:38 PM
	ew593815	Other	25_DY2Q2_PROJ2aiii_MDL2aiii3_PRES3_OTH_2aiii_3_1_Bi-directional_Memo_7464.docx	2aiii 3.1 Bi-directional Memo	10/30/2016 03:38 PM
	ew593815	Other	25_DY2Q2_PROJ2aiii_MDL2aiii3_PRES3_OTH_2aiii_3_1_Bi-directional_EHX_Platform_Providers_Full_Healthix_List_7463.pdf	2aiii 3.1 Bi-directional EHX Platform Providers Full Healthix List	10/30/2016 03:37 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	
Ensure all eligible primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and Advanced Primary Care accreditation by Demonstration Year (DY) 3.	
Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	
Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	



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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	
Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	
Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	
Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	
Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Ongoing	
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Ongoing	
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	
Milestone #6	Pass & Ongoing	
Milestone #7	Pass & Ongoing	
Milestone #8	Pass & Ongoing	
Milestone #9	Pass & Complete	



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✓ IPQR Module 2.a.iii.4 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 2.a.iii.5 - IA Monitoring

Instructions :



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Project 2.b.iii – ED care triage for at-risk populations

✓ IPQR Module 2.b.iii.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Risk #1: Failing to close gap in the physician/patient relationship: Many cultures within our geographies are biased towards going to the ED for all care, as they see it as more convenient and immediately responsive than going to a PCP. Our PPS plans to provide population wide education and awareness campaigns to emphasize the importance of remaining connected to a Primary Care provider, working alongside our community organization partners to expand outreach into the many ethnic groups represented in the population. Additionally, the ED triage process that will be established will include a robust team of Patient Navigators available to every patient. They will connect the patient with their existing PCP, link those without a PCP to an ACP primary care provider, and schedule a timely appointment with a PCP before leaving the ED using ACP's integrated platform or the PCP's EHR portal.

Risk #2: Capacity of PCPs/Alternative Sites of Care: Our PPS is serves an underserved area with low capacity for new appointments; throughout our communities, appointment wait times of 4+ days are not uncommon. Success will require PCPs to create greater capacity and possibly extend their work hours. ACP plans to address this challenge by providing support and training to the PCPs and staff to help make their practices more efficient and patient care more satisfying. ACP will also make available Care Managers that may be able to lighten the load for the PCP through participation in patient care. Additionally, this project may create the need for additional alternative sites of care such as urgent care which ACP will be building out and staffing.

Risk #3: Lack of communications among providers: Given the unique structure of our PPS that spans more than 2,000 physicians and community based providers, communication and information sharing could pose a potential challenge. We will address this through a robust, integrated technology platform that will be accessible across all of our providers. Additionally, this initiative will rely heavily on our capability to communicate with other PPS' in our area that are also participating in the initiative. We are currently building capabilities alongside our IT vendor, eCW, and will also leverage the SHIN-NY and RHIO platforms to assist in this task.

Risk #4: Need for capital funding grant and construction: Some triage protocols can be done in existing space, but to achieve the goals we defined, there will be a need for newly constructed space.



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✔ IPQR Module 2.b.iii.2 - Patient Engagement Speed

Instructions :

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

Benchmarks	
Actively Engaged Speed	Actively Engaged Scale
DY3,Q4	32,500

	Year,Quarter	DY2,Q1	DY2,Q2	DY2,Q3	DY2,Q4
PPS Reported	Baseline Commitment	13,813	16,250	20,312	24,375
	Quarterly Update	3,094	8,179	0	0
	Percent(%) of Commitment	22.40%	50.33%	0.00%	0.00%
IA Approved	Quarterly Update	0	4,979	0	0
	Percent(%) of Commitment	0.00%	30.64%	0.00%	0.00%

⚠ Warning: PPS Reported - Please note that your patients engaged to date (8,179) does not meet your committed amount (16,250) for 'DY2,Q2'

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Rosters	25_DY2Q2_PROJ2biii_MDL2biii2_PES_ROST_DY2Q2_2biii_7678.xlsx	DY2Q2 2biii	10/31/2016 09:29 PM

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Fail	The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2 Q2



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✅ IPQR Module 2.b.iii.3 - Prescribed Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #1 Establish ED care triage program for at-risk populations	DY3 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task Stand up program based on project requirements		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Developed processes and procedures to be implemented by partner hospitals in a uniform manner that will allow for efficient ED triage, treat and release.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop and implement algorithm for stratifying and identifying at risk populations for early intervention. Algorithm to include those with ICDs with high HCC scores, hospital utilization, high utilizers with negative workups, SUD, high PHQ9 and GAD scores, among other criteria.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Develop patient education materials to provide patients upon release to increase health literacy and orient patients as to proper use of ER resources.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Employ and utilize patient navigators which will educate patients and coordinate care so that the patient will leave the hospital ED with a prearranged appointment to his/her PCP, if patient has no connection to a PCP then an introduction and connection shall be made with a PCMH provider within the ACP network.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #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	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4



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providers. c. Ensure real time notification to a Health Home care manager as applicable										
Task All eligible practices meet NCQA 2014 Level 3 PCMH and/or APCM standards.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria.)		Project		In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Encounter Notification Service (ENS) is installed in all PCP offices and EDs		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Encounter Notification Service (ENS) is installed in all PCP offices and EDs		Provider	Safety Net Hospital	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Leverage ACP's strong PCP network to establish and enhance relationships between partner hospitals and primary care providers for open communication and accessibility.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Utilize physician engagement teams, IPA groups, and physician champions to engage all PCPs in ACP's network in the participation of DSRIP and educate on the importance of advanced primary care and achievement of NCQA 2014 PCMH certification.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Leverage partnerships with Health Homes and establish connectivity to these to ensure that patient information is sent in real time to Health Homes as needed due to patient's condition so patient is connected to health home for further care.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Perform IT surveys to identify provider EMR readiness, transition from paper and specific EMRs with specific detail to whether MU2 ready and MU2 status.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 5 Negotiate with EMR vendors to provide implementation and support assistance to all providers as needed in attainment of MU2 certification.		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 6 Establish ACP IT support team in conjunction with physician		Project		In Progress	10/01/2015	03/31/2018	10/01/2015	03/31/2018	03/31/2018	DY3 Q4



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engagement team to provide support and assistance to providers in MU and PCMH certification.										
Task 7 Create IDS to provide timely and efficient communication and scheduling amongst all of ACP's partners, (hospitals and PCPs) as well as provide notifications to PCPs and Health Homes as appropriate.		Project		In Progress	10/01/2015	03/31/2018	10/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 8 As the ramp up and build out of the IDS occurs, ACP will use hospital EHRs, FTP site, and PCP's EMR to exchange information on patients that are received and treated in the ER.		Project		In Progress	10/01/2015	03/31/2018	10/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 9 Interim step: Set up relationships and connections within hospital EHRs such as EPIC et al. that provide ADT feeds to ACP's central care coordination/back office team who accept the information and process appointment follow up		Project		In Progress	07/01/2015	12/31/2017	07/01/2015	12/31/2017	12/31/2017	DY3 Q3
Task 10 The hospital feeds will be sent/received into the PCP's EMR, ACP's FTP site and as well as ACP's central care coordination/back office.		Project		In Progress	10/01/2015	03/31/2018	10/01/2015	03/31/2018	03/31/2018	DY3 Q4
Milestone #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 provider).	DY3 Q4	Project	N/A	Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task A defined process for triage of patients from patient navigators to non-emergency PCP and needed community support resources is in place.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 ACP will employ Patient navigators in the ED that will assist the patients in the emergency room.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Train the patient navigators to educate the patient once treated		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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and ensure that the patient receives information on and receives and appointment to a 2014 PCMH Primary Care provider.										
Task 3 Patient navigator will provide the patient with the appointment before the patient is discharged and will work with care coordinator in ensuring that the patient has and is able to access necessary support in the community.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #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.)	DY2 Q4	Project	N/A	On Hold	04/01/2015	03/31/2020	04/01/2015	03/31/2020	03/31/2020	DY5 Q4
Task PPS has protocols and operations in place to transport non-acute patients to appropriate care site. (Optional).		Provider	Safety Net Hospital	On Hold	04/01/2015	03/31/2020	04/01/2015	03/31/2020	03/31/2020	DY5 Q4
Milestone #5 Use EHRs and other technical platforms to track all patients engaged in the project.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 ACP will track all patients identified by the developed algorithm and continuously analyze the data which will be housed and maintained at ACP's central servers through the established feeds and interfaces between the hospital EDs and the Primary Care provider's EMR and ACP's care Coordination/Care Management system.		Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 2 Data held and analyzed will include hospital encounter to PCP follow up visits, number of follow up visits, lag time between ER encounter, date and time appointment made and date of appointment.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 ACP will Gather utilization data from within hospital EMR, PCP EMR and even partner EMRs. Hospital ER use and monitor and stratify based on patient condition, frequency of utilization, etc. as per algorithm which will then be fed to Care Managers and Care Coordinators and CHWs to reach out to patients, provide education, self-management techniques, medication		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4



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reconciliations including refills, will connect the patient with needed social and community services, and other needed services.										

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Establish ED care triage program for at-risk populations	
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. c. Ensure real time notification to a Health Home care manager as applicable	
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 provider).	
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.)	
Use EHRs and other technical platforms to track all patients engaged in the project.	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Complete	
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	



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✔ IPQR Module 2.b.iii.4 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 2.b.iii.5 - IA Monitoring

Instructions :



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Project 2.b.iv – Care transitions intervention model to reduce 30 day readmissions for chronic health conditions

✅ IPQR Module 2.b.iv.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

The major risks for this project revolve around being granted access to those hospitals who are leads in other PPS' in order to obtain patient information and patient access. Patient engagement consists of performing pre-discharge planning and the performance itself is based on providing transitional care visits to ensure stable transition and eliminate/prevent 30 day re-admissions. Without proper, timely access to the patient information and to the patient, this process is hindered. A comprehensive, effective transitional care visit which includes comprehensive medication reconciliation and effective implementation of a comprehensive plan of care are heavily reliant on having accurate information regarding both the hospital stay and the discharge plan, without access to discharge information and discharge papers, this process is impeded. To mitigate this issue, ACP is avidly reaching out to and negotiating with all of the hospitals in ACP's catchment area and to which any patient attributed to ACP may receive services from without regard to the PPS that they participate in. ACP will use MCO feeds, patient notices and other resources to reach patients as early as possible while the negotiations are going on and while the connection to RHIOs is being worked out.



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✔ IPQR Module 2.b.iv.2 - Patient Engagement Speed

Instructions :

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

Benchmarks	
Actively Engaged Speed	Actively Engaged Scale
DY2,Q4	49,193

	Year,Quarter	DY2,Q1	DY2,Q2	DY2,Q3	DY2,Q4
PPS Reported	Baseline Commitment	22,137	24,596	36,895	49,193
	Quarterly Update	7,493	24,596	0	0
	Percent(%) of Commitment	33.85%	100.00%	0.00%	0.00%
IA Approved	Quarterly Update	0	20,752	0	0
	Percent(%) of Commitment	0.00%	84.37%	0.00%	0.00%

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Rosters	25_DY2Q2_PROJ2biv_MDL2biv2_PES_ROST_DY2Q2_2biv_7679.xlsx	DY2Q2 2biv	10/31/2016 10:42 PM

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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✔ IPQR Module 2.b.iv.3 - Prescribed Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #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.	DY2 Q4	Project	N/A	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task Standardized protocols are in place to manage overall population health and perform as an integrated clinical team are in place.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Develop Care transitions intervention model to include pre-discharge and post discharge patient contact, assessment and intervention.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Develop pre-discharge plan template using evidence based standards in accordance with national standards		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Review pre-discharge plan requirements with partner hospitals and ensure that pre-discharge plans are standard and meet ACP's standards both in components and timing.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Develop reporting methods for monitoring pre-discharge plans performed in the inpatient hospital setting.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 Convene Transitional Care project physician leads to draft, review and approve evidence based protocol for care transitions post discharge visit.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 6 Develop and implement standardized protocol for transitional care visits which include comprehensive medication reconciliation, assessments and interventions for conditions that have the highest incidence of hospital readmissions and the performance of which have proven to reduce re-hospitalizations such as fall risk assessments and implementing fall risk reduction plans amongst others. The protocol also calls for assessing patient's overall needs including social support referrals, DMEs,		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
specialty services, home care, etc. for providing care for the patient in a team approach.										
Task 7 Engage home care service agencies, social service agencies, home delivery services, and others as partners of the PPS to provide needed services to ACP patients. These agencies will serve on ACP's care Teams, PAC, Clinical Quality committees to assist the PPS in providing a team approach to patient care.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 8 Disseminate post discharge standardized protocol to ACP providers using ACP's provider engagement teams, PAC, Care Teams, etc.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #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.	DY2 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task A payment strategy for the transition of care services is developed in concert with Medicaid Managed Care Plans and Health Homes.		Project		In Progress	10/01/2016	12/31/2016	10/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task Coordination of care strategies focused on care transition are in place, in concert with Medicaid Managed Care groups and Health Homes.		Project		In Progress	10/01/2016	12/31/2016	10/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task PPS has protocol and process in place to identify Health-Home eligible patients and link them to services as required under ACA.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Disseminate care transitions protocols to MCOs and health homes working with ACP for the implementation.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Liaise and Coordinate between MCOs and Health Homes in the provision and coverage for services needed during the post discharge period.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Forge relationships with upper management at MCOs and Health Homes to bring appropriate level individuals to the negotiations table.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Elaborate and Negotiate and a payment strategy for transitional care visits including those done at PCP's office and those done at		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4



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the patient's home as needed.										
Task 5 Elaborate and negotiate a payment for services rendered in the Care Management and care coordination of transitional care services in coordination with the Health homes.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 6 Establish care coordination/back office team to receive feeds/reports from inpatient hospitals, MCOs and implement care coordination immediately to facilitate and ensure higher compliance rate and higher patient engagement rates.		Project		In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 7 Establish Care Coordination processes and procedures indicating receipt of feed and processing of the information in a timely manner, attainment of pre-discharge plans, coordinating of care through social supports, specialty, home care, delivery and transitional care post discharge visits.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 8 Establish care Coordination platform, EMR, by which all data, patient information will be tracked.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 9 Establish clear lines of communication between ACP central care coordination and outreach and the Health Homes within the network.		Project		In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 10 Develop and Implement Health Home protocol that includes a clear definition of Health Home eligible and a clear process by which patient shall be linked to the Health Home.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 11 Train all care managers and care coordinators on Health Home eligibility and process for referring.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 12 Train all ACP providers on Health Home eligibility and process for referring.		Project		In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Milestone #3 Ensure required social services participate in the project.	DY2 Q4	Project	N/A	Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task Required network social services, including medically tailored home food services, are provided in care transitions.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Engage social service and social support entities in ACP's network.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Task 2 Incorporate social service and social support entities in ACP Care Teams and PAC. Social support services such as meal delivery services, God's Love we Deliver; Interim housing/shelters such as VIP are a part of ACP's network, Care Teams and PAC.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #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.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Policies and procedures are in place for early notification of planned discharges.		Provider	<u>Practitioner - Primary Care Provider (PCP)</u>	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4

Providers Associated with Completion:

A T Adebayo Md Pc; Abdullah Ghazanfar Syed Md; Abedin Jahidul; Abraham Susan Philips; Acevedo Mabel Md; Acosta Dalisa J Md; Adam Muhammad Sanni Md; Adeyanju Olufunmilayo Olajumoke Md; Adeyemo Adenike; Adler Carl M Md; Aggarwal Om Parkash Md; Agrawal Jugal K Md; Aguilh-Figaro Toycina; Ahern Barbara Ann; Ahmad Laeeq Md; Ahmad Syed T Md; Ahmadi Ladan M Md; Ahmed Nayaz Md; Ahuja Anita I Md; Ahuja Kishore Kanayalal Md; Ahuja Rita K Md; Akhand Abdul; Alba Juan Andres Md; Albarran Marzan Julio E Md; Alberto Glendalyz; Alcindor Claudia; Alex Bernstein; Alfonso A Ortiz; Alla Vijayakumar Md; Alleyne Diahann Melvina; Alleyne Michael George Md; Almonte Maria Isabel Md; Alvarado-Rivera Jorge V Md; Alvaro Ramirez Physician Pc; Alwani Abdulla Md; Alwani Ayaz; Alwani Salima; Ambrose-Flaherty Stephanie; Amodio Stefano Md; Amr Nayel Md Pc; Andrade Gloria Floresca; Ani Samuel Onyemuwa; Anjum Naheed Md; Apoeso Taiye Olubunmi Md; Aponte Jose Md; Applewhaite Janelle M; Arce Samuel Md; Archbold Maritza Stella Md; Ares Luz Delia Md; Arumugam Thangamuthu R Md; Asters Dimitrios J Md; Auguste Jean K Md; Aung Kyawt Thandar; Avakian David Md; Avany Lucia Victor; Awan Khurram Shahzad; Babayeva Natela Md; Babubhai I Patel Physician Pc; Bagheri Farshad; Bahr Gerald S Md; Baik-Han Won Hee Md; Baldevbhai Vithaldas Patel Physician Pc; Banad Sheela Premanath Md; Bangug Samuel Pio Allado Md; Barbery Maria-Pilar; Barcia Rafael G Md; Barua Aruna Md; Basello Gina M Md; Batikov Aleksandr Md; Battle Jose E Md; Batoon Sherwin Bumanglag Md; Beekman Karen Press Md; Belding Michele Frances; Belliard Christian Arturo Estevez; Ben-Meir Amos David; Benchabbat Abraham A Md; Benjamin Wu Md Pc; Berezovskaya Sabina; Berkowitz Israel Steven Md; Bharel Virendra M Md; Bhavana R Japi Physician Pc; Bhuiyan Rafique Ahmed; Bilik Ilya V Md; Bizzaro Thomas A Md; Blum Isaac Facs Md; Boccardo Daniel A Md; Boccio John S Do; Bolon David Md; Borrero Melissa; Bouallali Hind; Boursiquot Jean Robert Md; Bowen Marc X Md; Bowers-Johnson Susan Md; Boxer William Paul; Boyd Jeremy; Braunstein Marc; Bregman Zachary; Brena M Desai Pediatrician Pc; Bressner Robert Stuart Md; Brief George Md; Bronfman Ida Md; Brown Tyrone Anthony Md; Bukhman Leonid Md; Bundoc Susana Dugang Md; Bunyavanich Sanga Md; Bunyavanich Sommai T Md; Burgos Javier P; Burris-Warmoth Patricia R Md; Butt Rahila Md; Buzinover Alla B; Byssainthe Paul Harold Md; Cabatic Thelma Ocampo Md; Cadet-Valeus Sergelyne; Cai Min; Caldera Aura Corina Md; Calliste-Scott Susan; Campusano Clarinelda; Cao Shimin; Cardona Erica; Caro Sixto R Md; Carreno Jacqueline Md; Carreno-Rijo Elizabeth; Carvajal Ruben U Md Pc Md; Castanos Dilia M Md; Castellanos Roman Dario Md; Castillo Alfredo Md; Catucci Candida; Cecilia Griselda Calderon Md; Cerri Ruben Walter; Chabla Juan Francisco Do; Chadda Veena Md; Chak Ada Md; Chakote Jyoti V Md; Chan Alfonso Y; Chan Angela Mei Md; Chan Bennett; Chan Chun-Kit; Chan Robin Y C Md; Chan Thomas Kin-Sim Md; Chang Nga Md; Chao Elaine Lynn; Charles Antoine V Md; Charlotten Kevin Alexander Md; Charnoff Judah Azriel Md; Chatterjee Partha P Md; Chattoo Premetesh Do; Chaughtai Khalid Akhtar Md; Chauhan Sudheer Singh Md; Chawla Satish K Pc Md; Checo Yuderqui Md; Cheema Manjit Singh Md; Chen Chao Do; Chen Charlie Chin-Song Do; Chen Haifan Md; Chen Henry S; Chen Xin Md; Chen Yanfeng Md; Chen Yuchun; Cheng Jennifer; Cheng Jenny Md; Cheng King Shek Eric Md; Chennareddy Swaminathan; Cheuk W Lau Md Pc; Cheung Helen; Cheung Ming Md; Cheung Sandy; Cheung William Md; Cheung Yiu Cheung Md; Chhipa Mohammad Haroon Md; Chiao Marie; Chien Kuo Chiang Md Pc; Chiu Karen Md; Chixin Fang Medical Pc; Cho Won Sup Md; Choi Mi Ja Md; Choi Sangil Md; Chopra Manju Rattan; Chopra Rajpal S Md; Chou Christina Lee Md; Chowdhury Utpal; Choy Lawrence T Md; Chua Betty A Md; Chung David Ingoon Md; Chung Nakchin Md; Chung Wendy Wei Md; Clarke Fred C Md; Cohen Lourdes; Cohen Nadine; Cohen Nelly Md; Cohen Stanley Bart Md; Colasacco Joseph A Md; Colon Belkis Arelis Md; Comprehensive Community Pediatrics; Cordice-Ford Candida; Cordoba Vargas Sandra Edith; Cornielle Jorge Luis Md; Corpuz Elsa P Md; Correa Michael Md; Cortes Juan Do; Crespo-Gomez Efrain Md; Cristinoiu Lucia L Md; Cruz Alcedo Anselmo Md; Cruz Erlinda S Md; Cruz Philip M Md; Cuidado Medico Y Geriatrico Of Quee; D Oleo Vargas Maximo Jose; D'Augustine Jean Mars Md; Dahan Shayna; Dairo Oluwatoyos; Damineni Sailaja; Daniels Kathryn Elizabeth; Das Provat Md; Dave Devang Md; De La Cadena Flor S Md; De Lara Francisco Arturo; Decoo Ydelfonso A Md; Dejoie Marie Chantale; Delimont Joseph I Md; Dellatto Patricia; Delman Moisey Md; Demoz Abraham Md; Deng Juliang Md; Depaz Javier; Derek Sun; Desir Mergie X Md; Dhillon Lakhbir; Dholakia Kush Ravindra Md; Di Franco Fortunato Santi Md; Diaz Angel A; Diner Alan E Md; Ditchek Alan Md; Doctor Yio Medical Service Pc; Domond Jacques; Dontineni Nripen; Doshi Kaushik J; Dove Arthur Renner Md; Downarsky David Md; Dr Mario S Malonzo Md Pc; Dr Rosario H Reyes-Rigor Physician; Drepaul Loris Omesh; Duda Olha; Dudani Bharti Md; Duggirala Rudrama D Md; Dungarani Trushar; Edasery Beppy J Md; Edwards Wendy S A Md; Eisenstein Howard Charles Md; Elbahloul Ossama Abdelkader; Elshoff Kathryn; Eric Zhou Medical Office Pc; Espinal Alberto Comas Md; Estevez Juan T Md; Fakioglu Esra; Falk Bryan M Md; Familia Carmen; Farhat Laila Ali Md; Farhat Samir Ali Md; Fashakin Emmanuel O Md; Fathallah-Mammo Aysar B Md; Featherstone Melvin T Md; Felix-Peralta Ingrid Ivanna; Feng Yun Md; Ferdous Razia Khan; Fernandez Oscar E Md; Figueroa-Martinez Silkia; First Step Medical Pc; First Step Pediatrics Pc; Flansbaum Bradley Evan Md; Florence P Golamco; Flores-Castillo Edgar A Md; Florimon Felix Md; Florimon-Delarosa Hector B Md; Fokas Anastasia Md; Francis Charles Jerome Md; Francisco Dalmacio H Md; Francisco Richard L Md; Freyle Hanna Bathia Md; Frousios Costas Anthony Md; Fukilman Ocas Jorge Md; Fulgencio-Delmonte Jose A; Fung Ngan; Fung Sandy M; Gad Medical Pllc; Galanis Tommy; Galibov Vyacheslav Md; Gamundi-Joaquin Rosa E Md; Gandhi Sneha J Md; Ganesh Lalitha Md; Gao Medical Pllc; Gao Pei; Garcia Quinones Saribel; Garcia-Albarran Carmen M Md; Gebrezgi Sebhatu Tewolde; Gega Renato Cantada Md; General Medical Services Of Queens; George Jacob V Md; Ghaffar Tahira Farooqi Md; Giannetti Cynthia; Gilani Tajammal H Md;



New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Gillego Azucena Manucdoc Md; Ginebra Fernando Arturo Md; Glenn Christophe; Go Eddie Sim Md; Go Teresita Alo Md; Gold Richard Elliott Do; Goldman Adam Y Md; Goldman Jack Md; Golestaneh Nasser Md; Gonjon Cheng Antonio Md; Gonzales Aurora Laurel Md; Gonzalez Adrian Md; Gonzalez Astacio Gustavo J; Gonzalez Fausto A Md; Gonzalez Paul Edward; Goris Jose Armando Md; Gotlin Andrew D Md; Govind Prashil Md; Goyal Madhulika Md; Grageda Melissa R; Graham Robert; Grassi Armando E Md Pc; Green Debora; Griffith-Reece Wendy; Gu Kangxia; Gu Xi Freda Md; Guido Giancarlo R Md; Guillen-Santana Roselia; Gupta Indranil Md; Guseynov Luiza Md; Guttal Dakshayani R Md; Guzman Damiani Rodolfo W; Haider Qazi Kamal Md; Hailiu Zuo Physician Pc; Haimi Joseph Shayani Md; Hall George Clinton Md; Hana Mervat; Hanau Lawrence H Md; Hangjun Jang Md; Hanna Nader Ramses Md; Haque Muhammad Mazharul Md; Haque Muhammad Misbah-UI Md; Haroon Sameera N Md; Harvey Peter F; Hasan Muhammad A Md; Hassid Babak; He Fu Fu Md; He Lan Md Pc; He Yong Kang Md; Hecker Lawrence P Md; Hector Holson S Md; Henao Joseph; Henoah Abraham Md; Hermogenes Patricia W Md; Hernandez Abreu Andres R Md; Hidalgo Maria Del Carmen Md; Hill Mark A Md; Hill Tawana; Hiza Ashley Md; Hoffman Howard Md; Holalkere Rajagopal Md; Hon John Wingsun Md; Hon King Chen Md; Hu Jiong-Ming Md; Hu Xiaoxi; Huang Hua Md; Huang Le Kiong Md; Huang Qinghong Md; Huang Yanhan Md; Huang Zheng-Bo Md; Huey Howard E Do; Hughes Reginald D Md; Hung Stephanie; Hwu Charles Joseph; Hyndman Rhonald; Ilyaev Stella; Im Soyoun; Israel Igor Md; Israel Roza Md; Jacob Sunitha; Jaes Pablo Hector; Jafri Yumna Saeeda Md; Jamaica Family Practice &; Janny A Ozuna Md Pllc; Jayman-Aristide Razia; Jerez Eunjeong; Jerez Jose R Md; Jhaveri K Meenakshi; Jiang Bao En Md; Jiangping Gan; Jianlin Wu; Jiansheng Zhao Medical Pc; Jimenez Marcial; Jimenez Ramos Farrah Del C; Jin Yan Md; Jindal Michelle Anne Md; Jing Wuhua; Jo Jihyun; Johnson William G Md; Jordan Nicole E; Jothianandan Kanthimathi Md; Jovellanos Valentin Pardo Md; Julian Maximo Md; Jung Josephine O Md; Kairam Indira R Md; Kalepu Mallikharjanudu Md; Kamenshchikova Marina Md; Kan Sang Md; Kancherla Prakash Surya; Kang Jun; Kaplowitz David; Karayil Ajith; Karibandi Ramakrishna V Md; Karim Rukshana Omar Md; Karimi Mahmood M Md; Kazmann Luis Md; Kevin J Guo Medical Pc; Khaldarov Yevgeniy Md; Khan Naznin; Khan Rehana Iqbal Md; Khanijou Rita Md; Khorets Boris A Md; Khoriaty Florence Fares; Kim Hyoseong; Kim Jeongwon; Kim Ji Young; Kim Yong Jun Md; Kim Yoojin Md; Kimyagarova Irina; Kintzoglou Alexander Md; Kissin Esther Md; Klein Sherman M; Knickerbocker Medical Care Pc; Konecky Alan Md; Konig Michael P; Korneeva-Vladimirsky Irina Lvovna; Koshy George P Md; Krivitskaya Nataliya; Krumholz David Md; Kumar Manish; Kumar Yogesh Md; Kuo Josephine Y Md; Kuriyan Blessy George; Kutnick Richard; Kyaw Myint Physician Pc Md; Laks David Md; Lam Kin Yui Md; Lam Terry Md; Lao Wilfredo Sy Md; Laud Sheela G Md; Lazala Polanco Carmen Md; Le Jimmy Chung; Lederman Elliot Charles Md Pc; Lee Alice K Md; Lee Holly M; Lee Hung-Sam Do; Lee Karen Tin Md; Lee Norman N Md; Lee Shuk; Lee Sophia Y; Leers Ella Md; Lefevre Cluny P Do; Leung-Eng Lucy Md; Leviashuili Natela Md; Levitt Howard Lawrence Md; Lewis Kamica Lynn; Li Brian; Li Jim; Li Ka Md; Li Michael Yang Md; Li Paul; Li Xian Min Md; Li Xiao-Qing Md; Li-Hirashiki Vivian Md; Liao Kevin; Licht Warren Bret Md; Lim Vivien Md; Lin Kevin N T; Lin Sun Co; Lin Wei Guo Md Pc; Lin Ya Li; Lippman Sheldon Bruce Md; Liriano Octavio Antonio Jr Md; Liu Ho-Mau Md; Liu Shin-Hua; Liu Zova Zhuohua Md; Liverpool Steven Fitzroy Md; Lodha Ajay K Md; Long Ann Yongzhou Md; Loo Nelly T Md; Lopez Ernesto M Md; Losco Donna Marie Md; Lu Li; Lui Sheung Bun Md; Lyo Rosie Yen-Cho Md; Lyo Thomas; M & M Medical Pc; Macenat Jean R Md; Madhavi Madhurapantula Do; Mailian-Oganova Lilia Md; Majeed Salamat Md; Mallapu Shraavan K; Malonzo Mario Supan; Maltez Janet Miraldo; Mangla Arun Kumar Md; Marie-Nirva Blaise; Marone Freya Md; Marte Grecia A Md; Martinez De Pimentel Nadia Md; Martinez Sergio A Md; Martinez Virginia Md; Martone Rosanne; Masih Emmanuel B Md; Maslova Alla Md; Mastan Alina; Master Kalpana Rashmin; Mathur Jay Simlote; Mayard Jules; Mazza Michael Anthony Md; Mcdonald Annmarie C Md; Md Aticul Islam; Mederos Mariano Md; Medvedovsky Mihail Md; Mejia Enrique F; Mejia Manuel Eligio Md; Melamed Samuel L Md; Melamedoff Gustavo R Md; Mendez Jose Manuel Md; Meng Hsiang-Chi; Mercado Agueda Md; Mercedes Betty Md; Mesbah Reza; Messer Caroline Korsten; Metwally Ashraf Ahmed Md; Metzger Benjamin Lowell; Michael Armine Md; Miglino Christine Jane; Mikhaylov Artur Md; Mina Bushra Ayad Md; Minhas Seema Jalil; Minutillo John Md; Mitchell Harrison Md; Mo Shengjie; Moarefi Mehran-Reza Md; Modern East West Medical Pc; Mohammed Abdul Wahid; Mohan Santha Md; Mohd A Hossain; Mohr Christina Md; Mohseni Haleh G Md; Moise Wesner Md; Moiz A Hamdani; Molina Alveris Md; Molnar Thomas; Moran-Almonte Roberto A Md; Moreno Fernando; Mortazavi Shervin Md; Moussa Zobidatte Md; Mpi Catherine Alikor; Muhammad Sanni Adam M D P C; Mui Wingtat Md; Mun Sun Ok; Nahar Jebun Md; Nahar Most L; Nancy Han; Nassim Roland Md; Nazarian Habib; Nazir Azra Md; Nejati Golali Md; Nemazie Siamack Md; New York Cardiovascular Medicine; Ng Hung Fai Md; Ng Norland Md; Ngai Yi Md; Nguyen Dustin Triet Md; Nguyen Nina Thi; Nicoleau Aryel Md; Nicoleau Carl A Md; Nienaber Cameron; Nina Ortega Luis Cesar Md; Nolan Marc A Md; Norberto Candido Cesar Md; Nukalapati Prasuna R Md; Numann Sousan Munim Md; Nwaishienyi Silas E Md; Ny Hispanic Family Medical Pc; Octaviani-Reyes Melba E; Odnopozova Mariya Md; Odoom Ebenezer Kofi Bentum Md; Olayo Alvaro A Md; Olivero Matos Ana Rita Md; Olivo-Mercedes Yohanna M; Oodal Ravichand Md; Ooi Yen Hoong; Orlovskiy Aleksandr Md; Ortiz Carlos A Jr Md; Ortiz Luis A Rpa; Ortiz Yvette A Md; Ottaviano Paul Gerard Md; Ozoude Sylvester A Md; Paddu Upadhyaya Padmanabh; Paik Woong Ki; Palencia David Jose Md; Panhani Ramkumar Md; Pantaleo Nicholas; Parekh Sejal; Park Yohan Md; Patel Anilkumar Sureshchandra; Patel Asvinkumar; Patel Babu A Md; Patel Baldevbhai V Md Pc; Patel Bhupendro R Md; Patel Ishvarbhai S Md; Patel Mayank Md; Patel Nayankumar A Md; Patel Niles R Md; Patel Prakashkumar Govindbhai Md; Patel Rajesh Jayantilal Md; Patel Ratilal T Md; Patel Reena J; Patel Sanjay Narottambhai Md; Patel Sunil C Md; Pathak Naveen Md; Patin Michael; Patron Maria Yolanda Piamonte Md; Peichev Mario Atanasov Md; Pena Clotilde B Md; Pena Jacobo; Pena Pena Yomaris Mercedes Md; Pena-Miches Cervantes Beethoven; Peralta Victor Emilio Md; Peralte Louis Ludovic Md; Perello Robert Md; Perez Andrea; Perez Emilio Ivan; Perez Jose Md; Perez Luisa Altigracia Md; Perez Manuel G Md; Perez Stephen Barnes Md; Perfetto-Tullo Maria; Perkins Arlene Md; Petrov Manana Md; Petrov Petya Md; Petryk Grzegorz Md; Piacente Dominick N Md; Pichardo Jesus Manuel Md; Pierre Joseph Md; Pignanelli Eduardo L Md; Pilarte Juan Jose Md; Pimentel Ramon R Md; Pin Mei Yao; Pinckney Isaiah Howard II Md; Pinerio-Bernardo Shirley J Md; Ponieman Diego Andres Md; Price Hobart C Md; Priester William D Md; Priyeva Raisa; Procare Medical Services Pc; Pulle Dunston Md Pc; Punsalan Imelda Md; Puttaswamygowda Vishwawanath; Qadri Syed S Md; Quijada Reucar Md; Qureshi Pervaiz Iqbal Md; Rafique Bhuiyan Medical Pc; Rahman Mohammad M Md; Rahman Mohammed Matiur Md; Rahman Rounak; Raince Gurmukh S Md; Ramaraju Thippa R Md; Ramirez Alvaro Md; Ramirez Julio Alberto Md; Ramirez-Baron Diana Maria; Ramzan Muhammad Masood; Rao Sudha; Raoof Rebecca G Pc Md; Raoof Suhail Md; Raport Miriam R Md; Rasheed Qaesar Md; Rashid Mohammed K Md; Ravi Venkata Ramana; Rawal Jagat M Md; Ray-Sen Piyali Md; Raza Nadeem Md; Rebecca Anne Mazurkiewicz; Reddy Kavitha Dadithota Md; Reddy Mallikarjuna D Md; Rella Vincent J Md; Ren Lili Md; Reyes Elsa Jacqueline; Reyes Nelton E Md; Reyes-Rigor Rosario H; Reynoso Elsa Sofia Md; Rezkalla Laurence L Md; Richter Michael; Rigaud Nathalie; Rim An Moo Md; Rishe Eric Md; Rivera Carmina Ramona N Md; Robinson Sandra A Md; Rodriguez Lilly M Md; Rodriguez Maria D Md; Rodriguez Rafael Md; Rodriguez Rhina Md; Rojas Ana Md; Rosario-Amaro Francisco Md; Roth Alan Robert Md; Rotkowitz Louis Philip Md; Roychoudhury Kanchana Md; Roza Alberto L Md; Rumana Alauddin Rahman; Rydzewski Mark Md; Sabogal Gonzalo Md; Sahgal Sumir P Md; Sahni Gunjeet Mandvi Md; Saint-Laurent Mario; Salim-Ortiz Jadyi Md; Sam Mirela Md; Samuel Cho Md Pc; Sang Koky; Santana Domingo A Md; Santana Rita Md; Santangelo Luzviminda S Md; Sarkar Samir Kanti; Sauro Natalie Margaret; Saxena Amit K Md; Sayad Karim Md; Schwimmer Joshua Adam Md; Scott Stanley Md; Sencion Sergio M; Setru Udayashankar K Md; Seung Hee Kang; Shah Sangita Tushar Md; Shah Tushar Laxmichand Md; Shan Zihe Md; Shani Dana Md; Sharma Hita Md; Shehigian Aline Ann; Shen Christine; Shen Jie; Shen Kuan Hung Md; Sheridan Bernadette Lizina Md; Shi Shelly Md; Shukla Mayank Arun Md; Shum Kee Yee Md Pc; Shusterman Arkadiy Md; Silva Lourdes G; Simons Stephan Md; Singh Amandeep; Singh Amarjit Md; Singh Amarjit Md Pc; Singh Kabul Md; Singh Sherry A Md; Singiri Archana; Sinha Ashok; Sionov Katie Md; Sirya Rosalynn H; Siu Singmay Md; Skeivys Saulius J Md Pc; Sms Medical Services Pllc; So Agnes Laiping Md; Solinas Alessandro Md; Soni Sharad; Soto Maria B; Soto-Alcantara Lilliam Md; Spadafina Sarah Marie; Spiotta Roseann T Md; Springfield Pediatric Pc; Spyropoulos Alex C; Stona Lurline P; Streete Sophia Md; Su Amy Md; Sudar Singh Prabahar Cynthia Md; Suleman Rana Javed Md; Sullivan Erinmarie Md; Sundaresh Mamatha Md; Sung John Hsiyang; Suprin Gregory Md; Syalee Jogesh Md; Syed Ahmad Physician Pc; Tafreshi-Orae Parisa Md; Tahir Aamira; Tajian Rosa Md; Tallaj Ramon Modesto Md; Talwar Sumit; Tam Cynthia J Md; Tam Kenneth C Md; Tan Chyne C Md; Tan Reynaldo G Md; Tan Victoria H Md; Tapia-Mendoza Juan Md; Tardio Julio Alberto Md; Tarife Karen; Teng Rui Er Md; Tetrok Mikhail S Do; Thanjan Thresiamma George Md; Thomas Johnny Md; Tin Hui Hing Md; Tio Arsenio Miguel Md; Tokar Svetlana Md; Toronjadze Tamar Md; Torres Marino A Md; Trager Jonathan David K Md; Trinh Tuyen T Do Pllc; Tsoumpariotis Apostolis; Tu Joseph; Tullo Luigi Giovanni Md; Uduebo Jerry Ainene Md; Urena Andres F Md; Uritskaya Faina Md; Uzor Jennyfer Paola; Vaccarino Robert A Md; Valdivia Martha Maria Md; Valencia Hector Antonio; Varghese Betsy;										



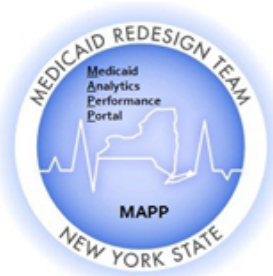
New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Vaz Geraldine Sandra Md; Vela Anthony T P J Md; Velasquez Luis; Verna Yves Georges Md; Vijaykumar Sudha Md; Villegas Emilio Md Pc; Vinas Sonia Miliza Md; Vladimir Osipov Md; Vladutiu Mihaela I Md; W Liangs Medical Office; Wagner Ira J Md; Walker-Adamson Sonia E Md; Wan Soo Lee Md Pc; Wang Fei Md; Wang John Tsihsian Md; Wang Jy Ming Md; Wang Yan Md; Wang Yaoming Md; Wang Yuancong Md; Waseem Faisal Md; Weeks Brandon Michael; West Denise; Williams Lorraine E Md; Wiltshire Veronica; Win Yin Yin; Wong Chun Tung Md; Wong Helen; Wong Irene; Wong Martha Shih Md; Wong Tina Md; Woods Kim Benjamin Md; Wou Margaret Lee Md; Wu Benjamin Zibin Md; Wu Shuyi; Xin Pang; Xinmei Li; Xu Min Md; Yacht Andrew Charles Md; Yahodaei Kamran Md; Yan Henry Jiann Md; Yang Hui Chih Md; Yang Nancy S L Md; Yanliang Sun; Yarramreddy Saroja; Yiu John; Yoon Chung Hee Md; Yu Ann Marie Md; Yusuf Fazlul Md; Zabarskiy Roman Md; Zaman Rehana A Md; Zambon Roberto; Zanger Daniel Md; Zayat Gabriel G Md; Zeng Lingling Md; Zhang Han Md; Zhang Jian Wei; Zhang Yuqing; Zhao Jiansheng; Zhao Jingbo; Zhao Mengjia; Zheng Dan Md; Zheng Hanbin Md; Zheng Jean Qingjun Md; Zheng Xiangsheng; Zheng Yi Xiu; Zhu Dening; Zhu Ming Md; Zilber Nora Md										
Task		Provider	<u>Practitioner - Non-Primary Care Provider (PCP)</u>	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Policies and procedures are in place for early notification of planned discharges.										

Providers Associated with Completion:

Abakporo Theophine O Md; Abraham Cynthia; Acevedo Jose A Md; Addonizio Devon Kimberly Md; Adebisi Adelowo Kayode Md; Adlersberg Jay B Md; Agarwal Chhavi Md; Ahmadzadeh Syed Ali; Ahmed Mohamed; Ahn Myung Cha; Ahsan Mohammad Md; Airiani Suzanna; Akhter Pervez Md; Alapati Prameela; Alatassi Shaza Md; Alcaide Alejandro Md; Aldana-Bernier Lilian; Alessandra Pacino; Alex Santhosh Madathil Md; Alexander Anita; Alexander Julie; Alizadeh Bajgiran Ahmadreza; Allan Sean Thomas; Allen Theodore Elias Pc Md; Altman Daryl Renee Md; Altobell Eva; Amato Peter; Amsalem Yoram; Anam Sadrul M Md; Anderson Darlene S Rpa; Anderson Todd; Andrews Robert Anthony; Ann Prokofieva Md; Ansari Parswa Md; Antoine T Christina Md; Antonacci Anthony C Md; Appleman Warren Md; Applewhite Liat E; Aranow Cynthia Beth Md; Arikupurathu Nisha; Astiz Mark E Md; Atluri Subha Md; Attaie Ali Dds; Attoti Chandana; Auricchio John Steven Dpm; Averescu Marie Jeanne; Azamy Taufiq; Azar Sasan Md; Aziz Tasnia; Babayev Dina; Babury Mohammad A Md; Bachan Moses; Badalov Isak Y Dpm; Badhey Vasanth Md; Bai Chun; Bajaj Deepika Md; Baker Daniel James Md; Bamji Dinshaw D Md; Bangaru Babu S Md; Bannerman Alfred C Md; Barclay Emanuel J; Barile Gaetano R Md; Barman Trina Md; Barnes Heather; Barone Kellie Lynn; Barragan Juan Carlos Dpm; Basharian, Omar; Basit Mohammad Md; Bass Sherry J Od; Baxi Ami S; Becher Rodney A Md; Becker Linda; Beckford Betina; Begum Farhana; Behfarin Parviz Md; Beinart Clifford Md; Benedicto Maria Theresa Dds; Bengeloun Nor Sabah; Benoit Vladimir Lusys Md; Bernik Stephanie Falcone Md; Bernstein Chaim J Md; Berookhim Boback; Best Tasby Lugene; Bhalla Roopam; Bharati Anjali; Bhasin Kabir; Bhatti Tandeep Kaur Do; Bhayani Rajendra Damodar Md; Bhojani Shabnamzehra; Bisangwa Alexis Md; Bittle Stephanie; Blanco Grisco; Blokh Ilya; Bloom Allison Robyn Md; Blum Corinne E; Blyumberg Yelena; Bogart Sydney David Md; Boockvar John A Md; Borawski Dorota Md; Bornstein Eran; Borowski Allison Marie; Bortolussi Mario E Md; Bouchard Nicole Colette Md; Bover Elina Dpm; Bovienzo James D Md; Braunstein Edward Allen; Braunstein Richard Evan Md; Bregman Alvin M; Briley James; Brinster Derek Ralph; Briskin Klara; Brodsky Ella Md; Bromley Gary Steven Md; Brown Elaine Lucille Rn; Brown Elaine P Md; Bruder Jack Md; Brunckhorst Keith Robert Md; Buchanan Mosaes M; Buka Robert Md; Bulsara Girish M Md; Bustos Emmanuel; Butt Ahmar Mannan; Butters Marva Dpm; Byrne Kristin Colleen; C & W Medical Llc; Cadet Normil Richard Jean Md; Cahill Kevin Dr.; Cai Steven; Calabria Diego Gennaro; Canellos Harriette; Cantu Roberto Jr Md; Carpati Charles Md; Carpo Michele; Carpo Minda S Dds; Carroccio Alfio Md; Carter Casimiro Cambi; Carter Doreen; Carty Harriet; Castillo Nicole; Cervantes Lober Guillermo Md; Chacko Jeffrey K; Chakrabarti Chhaya Md Pc; Chan Alice Man Ccc-Audiology; Chan Collier K Dpm; Chan Doris; Chan Edwin Kenneth Md; Chan Jeffrey Chi Keung Md; Chan Meghan P Md; Chan Richard Md; Chan Yuen; Chang Keith C Md; Chang Robert C Md; Chang Thomas T M Md; Chang Ya Ju Md; Chapalamadugu Rajeev Md; Charles Eric Lukas Md; Charles-Gonsalves Shurla A; Chaudhry Khyzar; Chawla Kiran Md; Chee Benjamin Anted; Chen Chun Ming Md; Chen Daniel Chin Md; Chen Jianping Md; Chen Jimmy Md; Chen Stanley; Chen Szu-Yu; Chen Wei Ku Md; Cheng Andrew T; Cheng Ling Ouyang Md; Cheng Nancy Md; Cherenfant Lucot; Chester Adam R Md; Cheung Joyce; Cheung Wellman Wai-Man Md; Chime Chudi G Md; Chirayil John J Md; Chiu Sungkin Md; Chiu Sungwai Md; Chiu William Md; Choi Jai Huyk Md; Choi Mark Md; Chopra Jatinder K Rpa; Chou Yeh Ping Do; Chow Philbert; Chowdhry Mohammed Idris; Christina Mannino; Christopher Chow; Chu Chien-Jung J Md; Chu Mark Md; Chu Peter Md; Chun Hajoon Md; Chung Chin Woo Md; Chusid Boris Gregory Md; Cinquegrana Marco; Clerisme Joseph Roosevelt Md; Cohen Allen H Od; Cohen David L Md; Cohen Jay; Cohen Neil M Dds; Cohen Oksana Md; Concepcion Elizabeth Md; Condon Maureen Kathryn; Confident Marie M Lpn; Conti Christopher Anthony Md; Cooke David; Cooper Joanna Md; Coplan Neil L Md; Correa Nereida Md; Cortijo Grace; Corujo Omar; Costantino Peter David Md; Cox Anika Jonnelle; Coye Beverly; Crapotta Joseph A Md; Crevecoeur Evans Md; Crupi Robert S Md; Cruz Elizabeth Dpm; Cuevas Asima; Cui Jian Md; Cutler Alex Jay; Dabovich Ivonne Cnm; Dai Guorong Md; Damian Jeanne; Damiano Elena; Danielov Mikhail; Date Pravin; Dauhajre Jacqueline Md; David Marian Md; Davila Nixa ; Davuluri Vijayalakshmi Phanipriyamv; Dayan Alan R Md; Dayani Farsima; De Castro Carlyle Md; De Los Santos Cynthia; Deblois Magdalena Q Rn; Dec Wojciech Dr.; Defreitas Michelle; Degannes Rhonda Ruth; Degoy Ana; Del Pin Christina A Md Facs I; Deleon Jose L Dpm; Deleon Renato A; Delman Alex Md; Demko Monika; Dennis Lester; Depasquale Eugene Md; Des Jean Ryan; Desai Ojas Jasubhai Md; Desai Savitri J Md; Deucher Richard S Md; Dhar Vinod K Md; Dheeraj Khurana Mbbs; Dholakia Shashikant Vrajlal; Dillon Evan H Md; Dinabel Peralta-Reich; Ding Cheng Yang; Disanto Gregory; Doctor Dilip Shikharchand Md; Doctor Dipika Dilip Md; Dolen Suleyman E Md; Dolin Natalia Md; Dolmaian Gigliola Maria Md; Dominguez-Echevarria Alvaro; Donadt Robert B Md; Donath Lisa; Dorsky Joshua I Md; Doughlin Kenneth G Md; Drew Michael S Md; Dubos Sheba; Duchnowski Eva; Dul Mitch; Dumitru Marian Md; Dupree Shashonna; Duran-Soriano Maria E Md; Duvalsaint Fregens G Md; Duviella Carole; Dye Colleen; Dyrszka Herbert Md; Daniel Mathews, Dpm; Earle Bridget Ilka; Edelman Martha J Md; Edmondson Patricia V Md; Edward V Chan Md Pllc; Eisenberg Rachel; El-Khawam Rania; Ellington Marty Jr Md; Ellis Rachel Fremder Md; Elsheryie Ahmed A Md; Elstein Irwin D Md; Empire Joint And Spine P C; Engel Harry Mark; Epstein Marc C Od; Epstein Neal F Md; Escovar Ida Maria; Espeut Nicole; Espino Rodriguez Gagarini Md; Estefan Bebsy C; Estrada Roberto; Etienne Stephanie; Fabunan Maria; Fajardo Manuel Abrantes; Falagario-Wasserman June; Fallahi Pouneh Md; Farag Ayman Roushdy Md; Fein Alan Marc Md; Feuerstein Michael A; Fils-Aime Marsha; Fischer Maureen; Fishman Allen J Md Pc; Fishman Nancy Lynn Np; Fitzsimmons Sean; Flaminiano Lourdes M Md; Flores-Freeth Ingrid E; Fok Eric Chi-Cheung Md; Fong Jason Md; Fontana Gregory Paul; Foong Anthony Md; Foster Sharon Md; Fox Patricia A; Frances G Perez-Hernandez; Francois Pierre L Md; Frank Paul Md; Frankel Phoebe; Fraser Errol; Freedman Todd W Rpa; Freeley Douglas A Md; Fretwell Kenneth R Md; Fried Ethan D Md; Friedrich Douglas Bennett Md; Fu Chenzhong Md; Fung-Nicholson Sonia; Galperin Mark Md; Gamboa Pilar Sia Mariano Dds; Garcia Sandra Patricia Dpm; Gardenswartz Mark H Md; Garratt Kirk Noel Md; Garrido-Valencia Fanny Md; Gavrilova Svetlana Md; Gaweda Oskar Adam; Gazi Farhad M; Georges Joseph L Md; Gerber Marilyn Csw; Gerlach Kecia; Gheewala Parul A Md; Gialvsakis John Peter; Giaquinto Beth; Glass David Md; Glass Jessica; Glatler Robert David Md; Godbout Brandon J; Goebel Jennifer; Goenka Anuj; Goldshteyn Vadim Md; Golio Dominick Md; Golyapina Natalya; Golub Ashley D; Gomez De Vargas Mencia M; Goncharov Dimitry; Gondal Nasir Mahmood Md; Gonzales Antonio M; Gonzales Ma Lourdes Castillo; Gonzalez Fermin Pablo Md; Goodman Allen Md; Gorbacz Sheldon Md; Gorodnitskiy Alexander; Gorski Matthew Gabriel; Gottlieb Marc D Md; Gould Jennifer Ann; Grasso Cono M Md; Green Young Sam; Greenbaum Robert C Md; Greenblatt Benjamin Md; Grinman Lev; Grossmann Rami R Md; Gu Yeon Sook; Guan Nicholas Ning-Guang Md; Gulati Gagan Jagdish Md; Gundel Ralph; Guniss Gladstone L; Guo Yujin; Gupta Meenu Md; Gupta Rakesh Md; Gutnik Zhanna Valerievna Md; Guttenberg Michael Gary Md; Guy-Rodriguez Eva; Guzman Eliscer Md; Haber Gregory; Habib Salma; Hadda Ceri Elizabeth Md; Haines Christine Md; Hakshouri Shimon R



New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Md; Hallenbeck Richard D; Halley Kathleen; Hamid Faisal; Hammer Arthur W Md; Hammond Stephen Bemigho; Haque Moinul Md; Har-El Gady Md; Harris-Cobbina Deborah Np; Hasanovic Adnan; Hasfal Sharon Yolanda; Haskes Lloyd Partman; Hasnayan Shahed Mahfuz Md; Hayes James ; Hayes Richard M Md; Hazelwood Arthur; He Cong Md; He Tina Q Md; He Zili; Hemli Jonathan Mishali; Henderson Tina; Henry Donna Marie Md; Hernandez Hilda; Hernandez Lincoln Md; Hernandez Maria L; Hernandez Miguel Rafael Md; Herschitz Izak Md; Hershman Elliott B; Herskovits Mark Saul Do; Hill Jennifer; Hill Michelle S; Hirshfield Gary S Md; Ho Garman T Md; Ho Vanessa; Hobeika Paul Bowlos Elias; Holman Anita; Holtzman Dvorah G; Hom David; Hong Sungsil; Hovanesian Shusha; Howard Siegel; Hoyek Wissam Md; Hsieh Helen Md; Hu Lisa Palen Md; Hu Mary Xiao-Jiang Md; Huang Albert Md; Huang Carol L; Huang Chien-Jen Md; Huang Xianchun; Hubbard Natalie; Hue Jennifer E; Hughes Joan Marie Cnm; Hung Fai Od; Huo Jerry Md; Hwang Yongkyu Md; Hyojeong Lee; Iacono Danielle; Igor Zilberman Dc; Ilan Hana Md; Ilkhanizadeh Rahman Md; Ilyas Nazish; Inglis Steven Ralph Md; Iommazzo Silvestro Dds; Ionescu Adina; Iordache Mihai M; Isak Isakov Medical Pc; Isakova Marina Md; Isanova Zarrina; Itzhak Petr Md; Jacinto Francisco Gertrude Md; Jackson-Hodges Chandia; Jacobs Allan Joel Md; Jagroop Sophia Mita; Jain Suresh P Md; Jainarain Ravella; Jalwan Ajay; Jamieson Lorraine Rpa; Janczuk Peter P Md; Javit Daniel Joel Md; Jean Carl; Jean-Baptiste Samuel; Jean-Bart Robert Y Md; Jean-Jacques Trevor Md; Jeanmichel Marieange ; Jen Albert Sun Md; Jeng Ing-Yann Md; Jerome Roseline Marie Md; Jhaveri Krishna K Md; Jiang Ming Md; John Geevarghese Md; Johnson Mark R Md; Jormark Susan Md; Jose Giselle Ann P; Joseph Cohen; Joseph Pierre L Md; Joseph Y Freidman; Josephine Huang Md Pllc; Joyner Narissa; Jung Jesse J; Kabala Muana Mbuyi Rpa; Kabrawala Pratibha Balvant Md; Kahlon Samrina; Kahn David I Md; Kalasapudi Vasundhara Devi; Kalash Glenn Richard Md; Kalman Jill Md; Kaman Ghong; Kambo Varinder; Kang Josephine; Kang Miyoung; Kaphan Mitchell L Md Pc; Kaplan Donald ; Kaplan Evan; Kapoor Anil Kany Md; Kapoor Mariela; Kapoor Vinay Md; Karantoni Olga; Karcnik Gregory Francis; Karen Clemente; Karibandi Karthik; Karkus Harvey D Md; Kartachov Carmen M; Kasat Kavita Md; Katari Nagendra Sagar Md; Katcher Oleg Md; Kathpalia Kusum Md; Kattlene Amedee; Kayaalp Emre; Ken C Wong Md; Kennedy Morgan; Kermani Sadi; Kern Jeffrey Howard Md; Kezerashvili Anna; Khaimov Daniel Md; Khalil Ahmed; Khalil Susan S; Khan Bitni Md; Khan Munibur; Khan Nasrin Akter Md; Khan Saqiba Md; Khanna Suresh Md; Khasak Dmitry Y Md; Khelemsky Igor Md; Khodabakhsh Kashyar; Khrom Tatiana Md; Kilshtok Sofya S; Kim Back K Md; Kim Seung Kwan Md; Kim So Young; Kim Su A; Kim Susan Sunjung; Kim Woo Sup Md Pc; Kindo-Diouf Azetta; King Donovan Anthony Rpa; Kiouranakis Nikolaos; Kirmani Yasmeen Md; Kirschenbaum Linda A Md; Kitton Stuart E Dpm; Klein Devin A; Klein Pamela; Klurfeld Alex; Knight-Debrady Alicia P Md; Ko Steve Y; Ko Wilson Md; Kogan Irina; Kolodny James R Md; Komisar Arnold Md; Kong Xiang B Md; Kopelowitz Wally Md; Kosmas Constantine Elias Md; Kowacz Tomasz Wojciech Md; Kowalski Rebecca; Kowalsky Marc Stephen Md; Kraus Dennis H; Krespi Yosef P Md; Kronzon Itzhak Md; Kruh Jonathan Nicholas; Krumholtz Ira; Krumholz David; Kuan Jackson Hsun Md; Kuang Barbara Hwa Md; Kuang Liren Md; Kuitinen Tamara Raquel Md; Kukar Atul Do; Kukar Narinder M Md; Kung Elaine F; Kuriakose Binu Rpa; Kurland Etah Md; Kuznetsov Valery Md; Kwauk Sam Tsung-Ming Md; Kymissis Carisa Maureen Md; Kyriannis Charles Md; Lai Amy Y Md; Lam Henry Md; Larisa Koifman Md; Larosliere Sabine Edeline Dpm; Lasic Zoran Md; Lata Vivian; Lau Christine Y-K Md; Lau David Hai-Pong; Laura Prince; Laura Amram; Lautin Robert Frederic; Law Anna Md; Laysa Nestor Amon; Lazo Dante Md; Lazzaro Richard Stephen Md; Lechuga Maria Teresa Md; Ledwith Allison Patricia; Lee Frances; Lee Jane A Md; Lee Kenneth W Md; Lee Michael Jerry; Lee Paul Chun-Kit Md; Lee Paul K; Lee Rachel; Lee Sangwoo Md; Lee Shi-Wen Do; Lee Simon X Md; Lee Wah Sang Md; Lehman Jennifer C; Leifer Gerald Dds; Leon Jayleen; Leriche Rose-Marie P Rpa; Lerman Oren Zvi Md; Letafat Kimia C; Leung Albert Cheuk Md; Leung Ching Sum Md; Levine Randy L Md; Levine Sander Mark; Lew Lily Quon Md; Lewis Rachel; Leybel Boris Md; Li Angie; Li Jianjun; Li Wensong; Li Yali Md; Liang Lawrence Md; Libassi David; Lidoshore Karen; Lillis Jr Thomas E; Lim Jessica Wong Md; Lim Pearl Md; Lin Pi Tang Md; Linares Alvarenga Francisco; Lindsay N Price; Liotta Dara R; Lippman Marie Abarientos Md; Lisann Neal Michael Md; Liu Lisen Md; Lk Better Health Medical Pc; Lo Calvin Md; Lo Kim Sing Do; Lochard Jean Joseph Md; Long Michele; Long Minhui; Lopez Juan S Md; Lopez Manuel D Md; Lopez Margarita; Losier Robert J; Louis Martha Md; Louis Martine A; Lowe Teresa Ann Od; Lu Fong Md; Lu Irene; Lu Xaiochum; Lubin Aviva; Lugo Joanelle; Lui Kin W; Luma Gregory Buyanow Md; Lumicao Lorna B Md; Lus Medical Associates Pllc; Lustbader Edward Seymour Dds; Luther Charles William; Ma Keyan Md; Machnicki Stephen Craig Md; Macri Mirtha J; Madama Sukanya Dpm; Maganov Igor Anatolyevich Md; Magloire Tamara Md; Mahadevan Pooja; Makkawi Abed H; Maksumova Zoya Md; Malhotra Gulshan Kaur Md; Malhotra Madhu B Md; Malhotra Shilpa Md; Malhotra Surinder Singh Md; Malieckal Giles; Malik Sajid Md; Mallik Amara; Mallin David Md; Mallios Jenelle L; Maloratsky Anna; Mamdani Yusufali Md; Mandalaywala Jasodaben C Md; Maniar Rajen P Md; Mao Yongming Md; Marcelonis Debra A Dpm; Marcu Mariana Md; Marcus Sergiu Md; Marinbakh Alexander Y Md; Marino Nino D Md; Mariya Aranbayeva; Markowitz Mindy; Marmer Tracy Seth Rpa-C; Marrero-Figarella Arturo L Md; Marshall Elizabeth; Martinez Adriana; Mashinic Elisabeth; Mashkabova Lyubov Dds; Mason Benjamin F Md; Mathews Daniel D Dpm; Matthew S Hepinstall Md; Matthew William Lorber; Mazur Justin David Md; Mcfarlene Kirk O; Mcgee Colleen Marie Rpa-C; Mcginty Geraldine Md; Mcinerney James V Dpm; Mcintosh James; Mclean James E; Mcpherson Christina; Mediavillo Rene S Md; Mehra Sonita; Mehta Ankit; Mehta Asit; Mehta Nilesh; Mehta Rekha; Meikle Angela Vanessa Md; Meltzer Robert M Md; Mendelson Robert I Md; Mensah Bridget; Mensah Stacey; Mercado Arthur M Md; Merriam Zachary; Merritt-Morrison Laverne ; Micalef Joseph; Michael Rose; Mick Thomas Dr.; Mikheyeva Irina; Milford Eugene Paul Dds; Milillo Ralph Anthony; Miller Andrew Robert Md; Miller Ricardo Anthony; Milosevic Milivoje Md; Minaeian Artin; Minior Victoria K; Mintzer Susan H; Mitchell Kathleen Genevieve; Mlynarczyk Ewa Monika; Mo Lihua Md; Modica Patricia; Mohamad Erfani; Mohseni Hossain; Moideen Ahamed S Md; Mok Victor Md; Montalbano Christin Md; Montelus Pierre Newton Md; Mora Maximo Md; Morales Gustavo Adolfo; Morales Romeo E Md; Morano Mark; Morisco Antonietta I Md; Morris Rachel Emily; Moses Danielle Monique; Moshiri Kourosh; Moskowitz Leo; Mosu Nicolae Md; Motazed Jody Lynn; Motola Jay A Md; Moulin Louise-Nicole Md; Mucelli Louis Alexander; Murphy-Cassidy Delores; Mutyala Manikyam Md; Myint Win Md; N'Gouamba Rashida B Md; Nagpaul Ravinder S Md; Nandakumar Thambiraja Md; Narasimhan Gopal; Narcisse Joseph Rpa-C; Narula Tara K Md; Navedo-Rivera Maria S Md; Naves-Ruiz Esperanza; Nemes Petru Codrin Md; Nett Michael Patrick; Newman Ransford C Md; Ney Gershon C Md; Ng John Paul Tracy Md; Ngo Tammy Phuong; Nguyen Tracy Thuy; Nicolaou Nicos; Niederland Marta Md; Nimmagadda Nagabhushanam Md; Ninan Philip Mohan Md; Nisimova Meri Md; Norman Steven Yale Dpm; Norris Tracy M; Novogrodsky Raphael Md; Nunez Giovanni M Md; Nyein Roland Md; O'Connor Dennis; O'Leary Xiaoqing Lin; O'Reilly James; O'Young Bryan J Md; Obstbaum Stephen Allan; Oconnell William F Od; Olanescu Andrea Despina; Oliver Neville; Opam Osafradu Md; Opher-Iosifescu Elana; Ortiz Grace; Ortiz Rafael A; Osahan Deepinder; Osborne Heather L; Ostrovsky Yakov Pt; Ozersky Norman; Pachas Yvanka; Paley Deana Edwards; Palma James Md; Pamoukian Vicken Nichan Md; Pamulapati Vidyasagar; Pandit Ashwini; Pandya Sapna K Dpm; Paoli Gloria Rosario Md; Papaevagelon Nikolas; Parellada Alejo; Parikh Shobhana Mitesh Md; Park Jinhee; Park Sharon J; Parraga-Marquez Monica; Paschal Gehres Megan; Pasquale Deborah; Passmore Craig J Md; Pastori Luciano Juan; Patel Alkesh Navin; Patel Avani A Md; Patel Chetankumar P Md; Patel Chirag; Patel Jagruti Md; Patel Mahendra Chaturbhai Md; Patel Nirav Chandrakant Md; Patel Rajesh Kanubhai Md; Patel Sonia; Patel Yogita; Patterson Bentley Lorene Md; Patterson Stacey Ann Md; Pattett Kathreen; Paul Evelyne M Md; Paul Franck Emmanuel Md; Paul-Basil Wayne; Paya Shagupta Md; Pazur Beverly Ann Md; Pearce Katherine; Pearson Barry J; Pelczar Joseph Vincent Md; Percelay Jack Martin Md; Perez Margarita De Los Angeles Md; Perk Gila Md; Perone Robert W Md; Persaud Narendralall; Persaud Yudhistira K Md; Pertsovsky Yuri; Peters Laiza; Peteru Sachidanan; Pethani Ashish; Pfefferblit Susanna Md; Phelan Jane; Phokela Sarabjit Singh Md; Pierre Modeline; Pili Manuel R Md; Pineda Diana; Pinkhas Alex; Pinsker Richard W Md; Pinter David Michael; Pinto Rohit Ivor Agnel Md; Piotrowski-Philipp Joan; Pirelli Luigi; Platsman Ninel Rpt; Ponieman Barbara L Md; Poretzky Leonid Md; Portello Joan K; Posner David H Md; Pou Ricardo E Md Pc; Prachi Sunil Dharia; Pramanik Bidyut Kumar Md; Prasanth Kaninghat; Premkumar Angel Grace Md; Preventive Diagnostics Inc; Prince Jose Md; Prince Steven Leonard Dpm; Puma Joseph Anthony Md; Punsal Reynaldo M Md; Punzalan Betty N Md; Qiu William Weiguang Md; Quarcoo Stephen T Dds; Rahman Mohammad Mazibur Md; Rajanna Madhu Gundigere Md; Rajee Nirmala K; Rajput Ashok Kumar Md; Ramdas Mardai Mariapen Pa; Ramessar Daniel Nathaniel Pa; Rampersaud Rajendra Mark; Rana Thakor C Md; Rand Stephen P; Rao Nagaraj Dharmavaram Md; Raoof Sabiha Md; Rassekhi Hamid Dds; Rathinapandian Francis X Md; Ravelo Ramon E Md; Rayappa Premalatha; Raymond L Yung Md Pc; Raza Seyed Mohamed Jaffar Ali Md; Recon-Bucevic Myra; Reddy Sarath Md; Reddy Thulasi; Ree June Hisu Md; Reichert James Michael; Reimers Carl Dietrich Md; Ren Lisa Siqin Md; Ren Sicong; Rhee Jai-Jeen; Rhee Michael Sangwook Md; Richard Leno; Rimarachin Julio A Md; Ritter Steven; Rivera Gregory A Dpm; Rizvi Syedal Haroon; Rizzo Attilio; Rizzo Mariano; Roayaie Sasan Md; Robbins David Herbert Md; Robert Pick Md Mph; Rodrigues Lucan T; Rogers Mark I Md; Romanello Paul P; Romelus Keshia ; Romsaitong Diane P Md; Romsaitong										



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
<p>Panus Md; Rosen Robert J Md; Rosenbaum-Roller Shira; Roshee Tarethia Maitland; Roslin Mitchell S Md; Roth Ira Md; Rousseau Monique J Md; Royes Patrina; Rubin Andrew Richard; Rudden Frances; Ruiz Carlos E Md; Ruiz Peter R; Ruiz Teresita Dumo Md; Rutner Daniella; Ryndin Igor Md; Ryu Jae Shin Md; Sabzanov Elionora Dds; Sachdev Karina; Sacklow Fred; Sacks Harry G Dds; Safri Tabassum; Sahai Anuraag; Saint-Hilaire Marlene; Saint-John Susan; Saintcyrus Evens; Salcedo Osiris; Saleem Sabrina; Sales Maria; Salvacion Ray Macasil; Samad Rubina Md; Samadi David Md; Samboy Jazlen Rocio; Sanchez Jose Rafael De Leon; Sandel Sherri Lynn Do; Sangeorzan Adrian Md; Sanikam Sreenivasa Reddy Md; Sankholkar Deepak M Md; Santamaria Grace M; Santandreu Orlando; Saravia Melissa Marie; Sauer Sandra; Sawhney Sabrina; Sayeed Majeed Ahmed Md; Schabes George A Dds; Schaefer Mark; Schaefer Steven David Md; Scharf Stephen Charles Md; Schiesel Elaine Leddomado Md; Schiff William M Md; Schiffer Mark Benjamin Md; Schleimer Helen Lilli; Schneider Fran Iris; Schreiner Roberta H Dds; Schrier Amelia Md; Schron Deborah S Md; Schubl Sebastian; Schulman Erica; Schultz Anita Ellieen; Schwartz David L Md; Schwartz Evan G Md; Schwartz Glenn Eliot Md; Sebolsky Paul; Seidman David A Md; Sekar Surya Md; Sen Kamalendra; Sengupta Trina ; Sergeyeve Igor Md; Serruya Jose Md Pc; Severe Ernst Gerard Marie Md; Shabto Uri R Md Pc; Shalnov Artur Md; Shamalov Gennadiy; Shankar Adurthy Ananth; Shapsis Alexander Md; Sharafkhah Martin Md; Sharma Jayendra R Md; Sharma Josefine Dr.; Sharma Mickey Pradeep Md; Sharma Shruti; Sharov Yakov; Shatzkes Deborah R Md; Sheflin Marla Sue Do; Sheldon Schwartz; Shen Ivy Md Pc; Sheth Sandip Pranlal Md; Shi Zhengzhan; Shieh Wei Yuan Md; Shif Mark Md; Shim Richard; Shin Dong-In; Shmukler Dov Md; Shridharani Sachin Dr.; Shugar Julia Ann; Shukla Hemangi; Shulman Julia Paula; Silberman Emil Md; Silver Joyce; Silver Larry Mark Dpm; Simon Gladys; Singh Binoy Kumar Md; Singh Prabhjyot; Singh Varinder P Md; Skipitaris Nicholas; Skolnick Blair; Slade Stella; Slitzan Lynn Logan; Smith Clive Nicholas; Smith Miriam Ann Md; Smith Robert H Md; Smith William; Soberano Consolacio; Sobol Norman J Md; Soden Richard M Od; Sohn Bret K; Solomon Robert D Md; Solomon Robert W Md; Solomowitz Benjamin H Dmd; Somrov Serge Md; Sood Minisha Md; Soohoo Stephanie; Sorokina-Ruffini Yelena; Sotelo-Garza Danilo; Soto Ana Berenice Md Mph; Spaccavento Colette M Md; Spencer Trudy I; Srivastava Malaya Md; St Felix Raymond Md; Stamm Joseph Martin Od; Stasiuk Laura; Stearns Alan; Stein Marjorie Michelle Md; Steinbaum Suzanne Md; Steiner Audra; Stepensky Leon Dpm; Stephens Nikeisha Anastacia Rpa; Stern Harvey Md; Stewart Amanda Patrice; Stickles Scott Michael Do; Stiller Catherine A; Stillwell Christina Rpa; Storper Ian Sam; Stroe Angela; Strouthides Effie; Stybel Elena B Do; Subotin Inna; Sukhraj Gopal Rpa; Sulh Muhammadsamir Abedrahman; Sullivan Kevin M Md; Sultana Sharmeen Md; Sun Deqing Md; Sun Diana K Md; Swaminath Arun C Md; Sy Manuel C Md; Sylvestre Georges Md; Talmatch Bernice; Tambar Balvir Krishan; Tan Edwin C Md; Tang Karen; Tartell Jay D Md; Taveras Fernando T; Taylor Kevia; Taylor Stuart William Md; Teixeira Julio A Md; Teller Katerina Md; Tenembaum Moises Marcos Md; Teresa Min Jung O Md; Terry Peter G Md; Teyibo Thomas O Md; Thakore Hasit R Md; Thanneer Latha; Thau Andrea; Thaw Emerald M; Thierman David H; Thompson Sunil Y; Thurm Craig Alan Md; Tian Wenping; Tierney Patrick; Tiu Aurora Tompar Md; Tocco Michael Anthony; Tom Winston Chet Ying Md; Tomanelli Toni Ann; Tomback David Adam; Torres Diana; Tovbina Inna Md; Townner Robert A Md; Trasi Sunil S Md; Trepeta Scott S Md; Tsai Nancy M.D.; Tseng Tiffany; Tsinis Mariya F Md; Tsoumpariotis Spyros N Dpm; Tsounias Emmanouil; Tubens Frances Marilou; Tuccillo Nicole; Tun Kan; Turan Naciye; Turner Carol Lolita; Turner-Booth Linda; Udeh Ngozi Julia; Udom Izuka P Md; Udyawar Aparna P; Ulyana Khaldarov Md; Ung Jannet Jungmin-Shin; Unger Pamela Md; Useda Claudia A Md; Vaisman Alex Md; Van Orsouw Jillian Suzanne; Vanessa C. Altube; Vasquez Luis A Rpa; Vaval Jean Lionnel Md; Vaynkadler Mark; Vele Oana; Veloudios Alice Md; Verceles Caroline; Verrone Anthony Md Pc; Viray Jose F; Vivek Seetharaman Md; Vo Tracy T Md; Voli Joseph Fred Md; Voloshin Mario; Voskoboynik Irina Lcsw; Vuong Chinh Minh Md; Wadia Saloni; Waghela Rachana; Wahl Samuel Joseph; Waite Rulon Jan Li Md; Wakim Wakim Victor; Walker Jennifer; Walters Edline V; Wanda Rodriguez Md; Waner Milton Md; Wang Chuansheng; Wang Da; Wang Hai Po Md; Wang Mei; Wang Mingke; Wang William Cheng Md Phd; Wang Xiao Hui; Ward Andrea Maria Dpm; Watson Catherin Pace; Watts Rakiya; Wee Julie Dds; Wei Alex; Wei Huachen Md; Weimin Qu; Weinberg Jeffrey Mitchell Md; Weinman Elizabeth; Weiss Reuven Phd; Weissman Laurence Roy Md; Weseley Peter Eric Md; Westcott Mark A Md; Widmer Jessica Lynn; Wiedershine Donn Jay Md; Williams Alan; Williams Ayesha Audene; Winter David Md; Wisch Nathaniel Md; Wolbeck Steven; Wolfson Yan Md; Wolintz Robyn Joy Md; Wong Alexander C; Wong Alfredo Sicut Md; Wong Jay Anthony; Wong Peter; Wong Samuel C Md; Wong Steven Md; Wong Thomas; Wong Timothy; Wong Yoke Hlen Md; Wood Edward T Md; Woolward Andrew; Wu Henry Dinh-Khon Md; Wu Jennifer; Wu Richard Kar; Wu Zhenqing Brett Md; Xavier Christopher Paul; Xiao Hui Fang; Xiao Yong Hong Md; Xing-Jie Wang Md; Xu Richard Li-Cheng; Xu Z Chan Psychiatrist Lic; Yaggy Amanda; Yan Richard X; Yan Weihong; Yan-Rosenberg Linli Md; Yang Andrea; Yang Fan; Yang Hyosol Dds; Yang Ian Yeng Md; Yang Wen C Md; Yap Laurel Win; Yaryin Llc; Yatco Edward John Md; Yazdan Ari; Yazdanbakhsh Khashayar; Ye Hao Md; Yee Lily Fong Cho Md; Yee Vivian See Ki Md; Yel Zinaida Md; Yeung Chung Kiang; Yeung Vincent Wah-Sang Md; Yim Ho Dpm; Yimen Mekeleya; Yin June; Yin Xiaoqin S; Yin Xuebin Md; Yoeli Gideon C Md; Yoon Sei-Oung Richard; Youner Craig J Md; Young Chainllie; Young George P H Md; Youngewirth Elizabeth Dpm; Yukelis Igor Md; Yun Jean Shim Md; Yunov Arthur Md; Yurovitsky Alyssa; Yushuvayev Eduard; Yves Duroseau Md; Zabar Benjamin; Zambrana Christian B; Zapata Sheena M; Zaric Maja Md; Zasyayko Sergey; Zeitoun Khaled Mohamed Md; Zelmanovich Anat; Zhan Frank Lei; Zhang David; Zhang Ting Ting; Zhang Victoria Do; Zhao Peng; Zhao Xinyu; Zheng Peter Shuangwu Md; Zheng Ronglan Md; Zhou Huan-Sue; Zhou Sumei Md; Zilberstein Olga Md; Zimmerman Jason Simon; Zimmermann Mark; Zonenashvili Merabi; Zong Pu</p>										
Task Policies and procedures are in place for early notification of planned discharges.		Provider	<u>Hospital</u>	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Providers Associated with Completion:										
Flushing Hsp Med Cnt; Jamaica Hospital Med Ctr; Lenox Hill Hospital; Montefiore Medical Ctr Ai; New York Methodist Hosp; North Shore Un Hsp Forest Hil; St Barnabas Hospital										
Task PPS has program in place that allows care managers access to visit patients in the hospital and provide care transition services and advisement.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task ACP has worked with and negotiated with hospital partners and hospitals in other PPS', the hospitals will provide transition care managers and/or pre-discharge planners to develop and review discharge planning while the patient is still inpatient. The		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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discharge plan and summary will be made available to the TC partner and to the PCP for more accurate and efficient treatment. The pre-discharge plan will also be used to coordinate needed services such as social support, home care, DME, etc. and the Transitional Care visit.										
Task 1 Establish processes with partner hospitals in which a care transitions/pre-discharge plan nurse or care manager establishes the link with the patient and provides the pre-discharge plan at the patient's side, while the patient is still inpatient in accordance with the established transitional care protocol and standardized pre-discharge plan.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Partner hospital will allow access to the patient to the care transition pre-discharge pan manager/nurse and in most cases the care manager/nurse will be a hospital staff member since ACP's partner hospitals have care transitions staff already on hand..		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Processes are in place to receive feeds from hospitals and MCOs on a daily basis of all admissions allowing for early notification of hospitalizations and thereby early access to patients for the provision of discharge planning.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 4 Processes and procedures are in place for prompt action upon receipt of the inpatient data feeds to begin the process of accessing the patient and implementing the plan.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #5 Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Policies and procedures are in place for including care transition plans in patient medical record and ensuring medical record is updated in interoperable EHR or updated in primary care provider record.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Develop processes as mandated by protocol for transmission of Care transitions records to member's provider/PCP within 48 hours of Transitional Care visit.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
2 Utilizing guidelines from the National Transition of Care Coalition and working with the expertise of ACP partners who specialize in Care Transitions, ACP will bring together a standardized protocol/standard of care and processes for providing quality Care Transitions services. Protocol/Standard of Care to include comprehensive medication reconciliation, comprehensive evaluation, HEDIS assessments, ADL assessments, Fall risk, etc.										
Task 3 Implement process as mandated by protocol by which member's provider/PCP receives Transitional Care visit records within 48hours.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Utilize EMR to transmit records to member's provider via P2P portal, FTP, HIE, RHIO or ACP platform to be created.		Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #6 Ensure that a 30-day transition of care period is established.	DY2 Q4	Project	N/A	Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task Policies and procedures reflect the requirement that 30 day transition of care period is implemented and utilized.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 1 Implement care transition protocol mandate calculation of 30 day period to start on the date of discharge as day 0 and the day following discharge as day 1 up to 30 calendar days.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Milestone #7 Use EHRs and other technical platforms to track all patients engaged in the project.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Processes are in place in which upon receipt of inpatient feeds, Care Transitions team ensures that all relevant patient data including diagnoses, demographics, etc. are entered into EMR.		Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 2 Utilizing Care transitions team's EMR structured fields all patient data is entered, gathered and filtered for evaluation of engagement efforts, successes and improvements.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Data mining from Care Transitions team's EMR and additional electronic systems are used to provide stratification, target		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4



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identification and outreach population wide, patient specific and overall tracking and reporting.										
Task 4 Additional data filters and repositories are created within hospital EMR, ACP central Care Coordination systems for redundancy, data verification and comparison analytics.		Project		Completed	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Use EHRs and other technical platforms to track all patients engaged in the project.	ew593815	Other	25_DY2Q2_PROJ2biv_MDL2biv3_PRES7_OTH_2biv_7.4_ACP_IDS_Roadmap_Data_Warehouse_and_Analytics_7466.docx	2biv 7.4 ACP IDS Roadmap Data Warehouse and Analytics	10/30/2016 03:47 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency.	
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.	
Ensure required social services participate in the project.	
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.	
Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	
Ensure that a 30-day transition of care period is established.	
Use EHRs and other technical platforms to track all patients engaged in the project.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Complete	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Complete	
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	
Milestone #6	Pass & Complete	
Milestone #7	Pass & Ongoing	



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✔ IPQR Module 2.b.iv.4 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 2.b.iv.5 - IA Monitoring

Instructions :



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Project 3.a.i – Integration of primary care and behavioral health services

✔ IPQR Module 3.a.i.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Major risks for this project revolve around patient compliance as well as the stigma/taboo associated with mental illness. Patient engagement is predicated on PHQ9 scores; however, PHQ9 relies on patient's subjective responses to questions regarding their feeling depressed. It is hard in many cultures and specifically the cultures serviced by ACP PPS to admit to any form of mental issue as it is seen as a sign of weakness, a lack of faith or a make believe, self made up condition. The PPS plans to mitigate this through its fostering of a strong PCP/Patient relationship. The more that the patient trusts and believes in his/her PCP, the more prone the patient is to confide in the PCP. Because ACP's providers speak the same language and are of the same culture as the patients it is well positioned to have a strong, lasting relationship with its patients. ACP expects that all PHQ2's and PHQ9's will be faithfully and honestly completed by the patients.



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✔ IPQR Module 3.a.i.2 - Patient Engagement Speed

Instructions :

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

Benchmarks	
Actively Engaged Speed	Actively Engaged Scale
DY3,Q4	129,206

	Year,Quarter	DY2,Q1	DY2,Q2	DY2,Q3	DY2,Q4
PPS Reported	Baseline Commitment	24,927	71,063	87,214	103,365
	Quarterly Update	168,094	71,063	0	0
	Percent(%) of Commitment	674.35%	100.00%	0.00%	0.00%
IA Approved	Quarterly Update	0	88,797	0	0
	Percent(%) of Commitment	0.00%	124.96%	0.00%	0.00%

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Rosters	25_DY2Q2_PROJ3ai_MDL3ai2_PES_ROST_DY2Q2_3ai_7670.xlsx	DY2Q2 3ai	10/31/2016 06:38 PM

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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✔ IPQR Module 3.a.i.3 - Prescribed Milestones

Models Selected		
Model 1	Model 2	Model 3

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Project Model Name	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #1 Co-locate behavioral health services at primary care practice sites. All participating eligible primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	DY2 Q4	Model 1	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task All eligible practices meet NCQA 2014 Level 3 PCMH and/or APCM standards by the end of DY3.			Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Behavioral health services are co-located within PCMH/APC practices and are available.			Provider	Mental Health	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Survey and group all participating providers (safety net and non safety net) into level of readiness.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop plan, timelines, and assign resources for each level of readiness.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Clinical governance committee approves partner assessment results and PCMH roadmap.			Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Develop education program and schedule for each provider readiness category that includes support from PPS (internal) or with potential PCMH vendors (external).			Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 5 Implement plan.			Project		In Progress	04/01/2017	03/31/2018	04/01/2017	03/31/2018	03/31/2018	DY3 Q4
Task 6 Monitor weekly, monthly, quarterly progress against			Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Project Model Name	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
PCMH / EHR-MU work plan goals.											
Milestone #2 Develop collaborative evidence-based standards of care including medication management and care engagement process.	DY2 Q4	Model 1	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Regularly scheduled formal meetings are held to develop collaborative care practices.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task Coordinated evidence-based care protocols are in place, including medication management and care engagement processes.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 1 In conjunction with physician leads, Develop evidence based protocols in accordance with SAHMSA guidelines which include assessment tools to be implemented, medication management, and care coordination.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Establish formal meeting schedules amongst collaborating partners to establish collaborative care and best practices.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Determine who needs to attend formal meetings - BH specialists, Primary Care, Substance Use Disorder, Developmentally Disabled providers, etc.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Develop procedures to implement evidence based protocols with prescribed assessment tools including PHQ2/9, GAD, DAST, Audit C and SBIRT, stepped care, care team meetings, number of prescribers, etc.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 5 Develop monitoring parameters to evaluate adherence to evidence based protocols. These will include metrics showing use of assessment tools, medications prescribed, referrals made and number of prescribers.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 6 Establish Care teams within the practice to include care coordination to follow patients and provide "warm			Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2



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handoffs"											
Task 7 Establish procedure for "warm handoffs"			Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 8 In accordance with evidence based care protocols, implement process for medication prescribing and management. The process will delineate one prescriber process.			Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 9 Develop processes and procedures for care coordinators and care managers to engage in patient treatment as per protocols.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #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.	DY2 Q4	Model 1	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Policies and procedures are in place to facilitate and document completion of screenings.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task Screenings are documented in Electronic Health Record.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task At least 90% of patients receive screenings at the established project sites (Screenings are defined as industry standard questionnaires such as PHQ-2 or 9 for those screening positive, SBIRT).			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Positive screenings result in "warm transfer" to behavioral health provider as measured by documentation in Electronic Health Record.			Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Integrate assessment tools, PHQ2/9, DAST, Audit C and GAD into EMR for ease of access, and tracking and, monitoring			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Create automation within EMR to prompt completion of assessments, PHQ2/9, GAD, Audit C, DAST for all patients. Set as mandatory fields within EMR			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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whenever possible.											
Task 3 Implement SBIRT as per established, implemented protocols.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 4 Create processes for referral and "warm handoffs". Process to include availability of BH provider at time service is needed and referred by PCP. BH provider will allow for add -ins to schedule as necessary for "warm handoffs" from PCP			Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 5 Integrated, single EMR will serve as repository of information and scheduler for both PCP and BH provider. Access to schedules shall be shared amongst staff for ease of encounter creation and facilitation of "warm handoff" as well as monitoring the hand off.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 6 Allow creation within EMR of separate encounter for each provider, PCP and BH, on the same day within single patient record and single billing claim record.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #4 Use EHRs or other technical platforms to track all patients engaged in this project.	DY2 Q4	Model 1	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task EHR demonstrates integration of medical and behavioral health record within individual patient records.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Partner with EMR vendors to ensure that assessments are available in structured format within EMR and all patient data and assessments are documented and trackable in EHR.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Utilize meaningful use dashboards and platforms as well as PCMH level capabilities to allow and provide			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4



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tracking of assessments and assessment results.											
Task 3 Ensure that EHR has ability to create encounters for two different providers on the same day within the same patient record. Patient encounter data must be integrated and accessible to treating providers to increase efficiency and decrease duplication and error.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Create processes to pull reports from patient registry, PCMH capabilities, MU dashboards to identify target patients based on assessment tools implemented and assessment tool results.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 5 Develop processes to generate reports showing assessment results to compare and track actively engaged patient outcomes and compliance. Reports may be obtained using MU dashboards, patient registries, PCMH capabilities, ACP platforms, interfaces, and others.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #5 Co-locate primary care services at behavioral health sites.	DY2 Q4	Model 2	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Primary care services are co-located within behavioral Health practices and are available.			Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Primary care services are co-located within behavioral Health practices and are available.			Provider	<u>Mental Health</u>	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4

Providers Associated with Completion:

Advanced Ctr For Psychotherap; Aids Ctr Of Queens County Inc; Akhter Pervez Md; Aldana-Bernier Lilian; Alexander Anita; Allan Sean Thomas; Altobell Eva; Amato Peter; Arista Ctr For Psychotherapy; Badhey Vasantha Md; Bamji Dinshaw D Md; Baxi Ami S; Bhojani Shabnamzehra; Bisangwa Alexis Md; Blanco Grisco; Bleuler Psychotherapy Ctr; Brodsky Ella Md; Butt Ahmar Mannan; Calabria Diego Gennaro; Canarsie Aware Inc; Catholic Charities Comm Svcs Arch; Catholic Charities Neighbhd Svcs; Cervantes Lober Guillermo Md; Chan Meghan P Md; Chen Daniel Chin Md; Chen Jianping Md; Chen Jimmy Md; Chester Adam R Md; Chu Peter Md; Cinquegrana Marco; Clerisme Joseph Roosevelt Md; Cohen Oksana Md; Comunilife Mental Health Cl; Conti Christopher Anthony Md; Cortijo Grace; Creedmoor Pc; Cutler Alex Jay; Danielov Mikhail; Defreitas Michelle; Deucher Richard S Md; Dhar Vinod K Md; Duviella Carole; Edelman Martha J Md; Estrada Roberto; Fernando Taveras Md Pc; Flushing Hsp Med Cnt; Fortune Society Inc, The; Francois Pierre L Md; Georges Joseph L Md; Gerber Marilyn Csw; Glass Jessica; Gonzales Ma Lourdes Castillo; Goodwill Industries Act Rc; Govind Prashil Md; Hadda Ceri Elizabeth Md; Halley Kathleen; Harlem East Life Plan; Help/Project Samaritan Svcs Corp; Henderson Tina; Hernandez Hilda; Hovanesian Shusha; Isak Isakov Medical Pc; Jamaica Hospital Med Ctr; Jean-Bart Robert Y Md; Jewish Bd Of Fam Child Svc; Joseph P Addabbo Family Hlth; Joseph Pierre L Md; Kalasapudi Vasundhara Devi; Kalash Glenn Richard Md; Khaimov Daniel Md; Khaldarov Yevgeniy Md; Khan Munibur; Kirmani Yasmeen Md; Kowacz Tomasz Wojciech Md; Lee Frances; Lenox Hill Hospital; Linares Alvarenga Francisco; Long Island Consultation Ctr; Lu Xaiochum; Luther Charles William; Malhotra Madhu B Md; Mallik Amara; Maloratsky Anna; Mashinic Elisabeth; Matthew William Lorber; Mcintosh James; Mehta Rekha; Metropolitan Ctr For Mntl Hlt; Michael Rose; Miller Ricardo Anthony; Mintzer Susan H; Narco Freedom Inc; New Horizon Counseling Ctr; Ninan Philip Mohan Md; Nisimova Meri Md; Paul Franck Emmanuel Md; Paya Shagupta Md; Perez Margarita De Los Angeles Md; Peteru Sachidanam; Phelan Jane; Rajanna Madhu Gundigere Md; Rajput Ashok Kumar Md; Rathinapandian Francis X Md; Ravelo Ramon E Md; Reddy Thulasi; Riverdale Mental Hlth Cl; Rousseau Monique J Md; Roychoudhury Kanchana Md; Rtf Childrens Village; Ruiz Teresita Dumo Md; Sankholkar Deepak M Md; Sen Kamalendra; Sheth Sandip Pranlal Md; Silver Joyce; Sultana Sharmeen Md; Taveras Fernando T; Tiu Aurora Tompar Md; Transitional



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Services For Ny; Transitional Services/Ny; Udyawar Aparna P; Vivek Seetharaman Md; Vocational Inst Proj Comm Svc; Wadia Saloni; Wiedershine Donn Jay Md; Yel Zinaida Md; Young Chainllie											
Task 1 Provide office space and staff for provision of full primary care services			Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 2 Contract with EMR to ensure functionality provides for scheduling for both provider types within the same EMR where patient has a single record.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Contract with EMR to add PCP licenses and templates for full documentation capabilities within the EMR and ensure a single repository of health information and data sharing amongst providers.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 4 Partner with EMR vendor to ensure that security features are activated to ensure patient privacy and confidentiality of secure notes.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 5 Ensure that confidentiality agreements are in place between providers for data use and exchange of information.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 6 Develop and implement processes for physical medicine assessments within the BH workflow to identify potential health problems and provide early intervention, disease prevention and higher quality of care for BH patients			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #6 Develop collaborative evidence-based standards of care including medication management and care engagement process.	DY2 Q4	Model 2	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Regularly scheduled formal meetings are held to develop collaborative care practices.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task Coordinated evidence-based care protocols are in place, including a medication management and care engagement process.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 1 In conjunction with physician leads, Develop			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1



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evidence based protocols in accordance with SAHMSA guidelines which include assessment tools to be implemented, medication management, and care coordination.											
Task 2 Establish formal meeting schedules amongst collaborating partners to establish collaborative care and best practices.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Determine who needs to attend formal meetings - BH specialists, Primary Care, Substance Use Disorder, Developmentally Disabled providers, etc.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Implement evidence based protocols with prescribed assessment tools, SBRIT, stepped care, care team meetings, number of prescribers, etc.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 5 Develop monitoring parameters to evaluate adherence to evidence based protocols. These will include metrics showing use of assessment tools, medications prescribed, referrals made and number of prescribers.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 6 Establish Care teams within the practice to include care coordination to follow patients and provide "warm handoffs"			Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 7 Establish procedure for "warm handoffs".			Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #7 Conduct preventive care screenings, including physical and behavioral health screenings.	DY2 Q4	Model 2	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Screenings are conducted for all patients. Process workflows and operational protocols are in place to implement and document screenings.			Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task Screenings are documented in Electronic Health Record.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task At least 90% of patients receive primary care services,			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4



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as defined by preventive care screenings at the established project sites (Screenings are defined as physical health screenings for primary care services and industry standard questionnaires such as PHQ-2 or 9 for those screening positive, SBIRT for behavioral health).											
Task Positive screenings result in "warm transfer" to behavioral health or primary care provider as indicated by screening as measured by documentation in Electronic Health Record (EHR).			Provider	Practitioner - Primary Care Provider (PCP)	In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task Positive screenings result in "warm transfer" to behavioral health or primary care provider as indicated by screening as measured by documentation in Electronic Health Record (EHR).			Provider	Mental Health	In Progress			07/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 Integrate assessment tools, PHQ2/9, DAST and GAD into EMR for ease of access and tracking, monitoring.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Create automation within EMR to prompt completion of assessments, PHQ2/9, GAD, DAST for all patients. Set mandatory fields within EMR whenever possible.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Implement SBRIT as per established, implemented protocols			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 4 Define protocols for screening for physical illness. Screenings to include illnesses such as Diabetes, Cardiovascular disease, Cancer screenings, etc. as well as implement other illness preventions such as immunizations.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 5 Create processes for "warm handoffs". Process to include availability of BH provider at time service is needed and referred by PCP. BH provider will allow for ad ins to schedule as necessary for PCP "warm handoffs"			Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4



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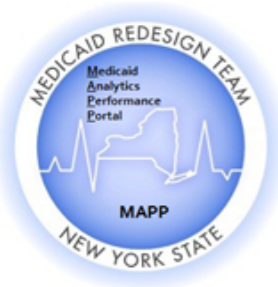
Project Requirements (Milestone/Task Name)	Prescribed Due Date	Project Model Name	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
6 Integrated, single EMR will serve as repository of information and scheduler for both PCP and BH provider. Access to schedules shall be shared amongst staff for ease of encounter creation and facilitation of "warm handoff" as well as monitoring the hand off.											
Task 7 Allow creation within EMR of separate encounter for each provider, PCP and BH, on the same day within single patient record and single billing claim record.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #8 Use EHRs or other technical platforms to track all patients engaged in this project.	DY2 Q4	Model 2	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task EHR demonstrates integration of medical and behavioral health record within individual patient records.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Partner with EMR vendors to ensure that assessments are available in structured format within EMR and all patient data and assessments are documented and trackable in EHR			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Utilize meaningful use dashboards and platforms as well as PCMH level capabilities to allow and provide tracking of assessments and assessment results.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Ensure that EHR has ability to create encounters for two different providers on the same day within the same patient record. Patient encounter data must be integrated and accessible to treating providers to increase efficiency and decrease duplication and error.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Create processes to pull reports from patient registry, PCMH capabilities, MU dashboards to identify target patients based on assessment tools			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4



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implemented and assessment tool results.											
Task 5 Develop processes to generate reports showing assessment results to compare and track actively engaged patient outcomes and compliance. Reports may be obtained using MU dashboards, patient registries, PCMH capabilities, ACP platforms, interfaces, and others			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #9 Implement IMPACT Model at Primary Care Sites.	DY2 Q4	Model 3	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS has implemented IMPACT Model at Primary Care Sites.			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 In conjunction with physician leads and in accordance with SAHMSA guidelines develop evidence based protocols for the evaluation and treatment of Behavioral health conditions by the Primary cAre Provider consistent with IMPACT model of integrated care. Protocol also includes GAD, DAST, Audit C assessments and includes SBIRT, stepped care and quadrant clinical care.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Deploy physician engagement team to PCP practices to engage PCPs, distribute and train on evidence based protocol and secure commitment of PCP in the implementation of IMPACT.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Through Physician engagement meetings provide a forum for PCPs to learn about IMPACT, receive protocols and review processes.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 4 Incorporate assessment tools, PHQ2/9, GAD, Audit C and DAST into practice EMR.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 5 Employ assessment tools in EMR on all patients at PCP visits and SBIRT to identify patients in need of care early and provide intervention.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 6 Hire and train Depression care managers to provide			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4



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services consistent with IMPACT model of care at PCP sites.											
Task 7 Develop and implement process and procedures for assigning Care managers.			Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 8 Develop and implement processes and timelines by which Depression care manager will engage, evaluate and implement treatment plan with patient			Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 9 Develop communications process between Depression care Manager and PCP.			Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 10 Develop communications process between Depression Care manager and supervising psychiatrist.			Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 11 Develop and implement process by which Depression care manager will document follow ups and patient encounters, treatment adjustments and/or compliance within the PCP's EMR.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 12 Develop processes to connect with the different provider types within the ACP Care Teams to provide complete care to patients for all aspects of care. These processes shall include Integrated Delivery System and the use of the ACP care managers and care coordinators to monitor referrals, services and ensure timely delivery of services to patients.			Project		Completed	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Milestone #10 Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	DY2 Q4	Model 3	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Coordinated evidence-based care protocols are in place, including a medication management and care engagement process to facilitate collaboration between primary care physician and care manager.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task			Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2



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Policies and procedures include process for consulting with Psychiatrist.											
Task 1 Develop processes to implement collaborative care standards as required in ACP evidence based protocols.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Create policies and procedures for engaging patients and assigning care team member, depression Care manager.			Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Create processes per evidence based protocols for implementation of care including single prescriber, stepped care consistent with IMPACT model.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 4 Hire, train and deploy Depression care managers to provide care for engaged patients in collaboration with PCP and IMPACT model			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 5 Develop processes for creating a secure data repository to be accessed by supervising psychiatrist for monitoring and evaluation of the efficacy of care in accordance with IMPACT model.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 6 Develop process for assigning supervising psychiatrist.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 7 Establish care team meeting schedules for review of treatment plans with Care managers and PCPs as well as care coordinators as needed.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 8 Establish processes for continuous open lines of communication between PCP and care manager.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 9 Establish clear process per evidence based protocol for consulting with Psychiatrist. When consult from psychiatrist is required and completed, psychiatrist will provide treatment recommendations and the single prescriber will remain the PCP in order to maintain the integrity of the IMPACT model.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1



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Milestone #11 Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	DY2 Q4	Model 3	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies qualified Depression Care Manager (can be a nurse, social worker, or psychologist) as identified in Electronic Health Records.			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Depression care manager meets requirements of IMPACT model, including coaching patients in behavioral activation, offering course in counseling, monitoring depression symptoms for treatment response, and completing a relapse prevention plan.			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 ACP will hire and deploy depression care managers in accordance with the IMPACT model. The Depression Care manager will assist the PCP in implementing treatment plans, counseling and will monitor progress, medication refills and adjustment as adjusted by the prescribing provider.			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 2 Develop process and procedures for Depression care manager to access and work with Care coordinators to coordinate services for patients including social supports, home care, specialty services, etc.			Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Develop ACP Care Manager training materials to Educate and train depression Care managers on ACP's referral processes and network Regional Care team providers, level of services available and accessibility to ensure that Care managers are familiar with ACP partners and their services in order to provide patients timely and efficient access to care.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Develop programs for continuing education for depression care managers to assist in providing and maintaining high standards of care to patients in implementation of care and treatment plans.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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5 Develop training manuals for depression care manager on EMRs used at PCP practices for documentation of all services and assessments within the single EMR. Training will be concise and focused on documenting all encounters, assessments and treatment plans in a format amenable to extracting data for metrics and performance reporting.											
Task 6 Develop depression care manager roles and responsibilities to include all services to be provided to patient in accordance with IMPACT model care guidelines.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #12 Designate a Psychiatrist meeting requirements of the IMPACT Model.	DY2 Q4	Model 3	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task All IMPACT participants in PPS have a designated Psychiatrist.			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Engage psychiatrists and establish service agreements with ACP network psychiatrists to provide supervision of treatment plans and assessments consistent with the IMPACT model such as with Dr. Fernando Taveras and Dr. Rodney Campos, amongst others.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Create a secure site for repository of information to be accessed by psychiatrists. Site will hold treatment and assessment note on patients engaged in the IMPACT model which will be evaluated by supervising psychiatrist assigned to the patient.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Develop a process for assigning patients to designated psychiatrist. Designations will be based primarily on patient's language, culture and relationship with the PCP and the community being served. This criteria will allow for a greater understanding of the patient's social conditions as well as a greater chance of compliance if psychiatrist face to face consult is required at a later time.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Task 4 Develop process by which Depression Care manager uploads patient information into Psychiatrist's secure site.			Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #13 Measure outcomes as required in the IMPACT Model.	DY2 Q4	Model 3	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task At least 90% of patients receive screenings at the established project sites (Screenings are defined as industry standard questionnaires such as PHQ-2 or 9 for those screening positive, SBIRT).			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Incorporate assessment tools, ie. PHQ9 into PCP's EMR			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Implement procedures for periodic repeat assessments in accordance with stepped care prescribed in evidence based protocol performed by the Depression care manager within the PCP's EMR.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Work with EMR vendors to Create filters and reportable fields that will allow the extrapolating of assessment data. ACP will rely on reportable data from MU dashboards, PCMH data fields, patient registries and others.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 4 Use PCP's EMR to extrapolate comparison data, flow sheets to establish trends in symptoms based on assessment responses and measure outcomes.			Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #14 Provide "stepped care" as required by the IMPACT Model.	DY2 Q4	Model 3	Project	N/A	Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task In alignment with the IMPACT model, treatment is adjusted based on evidence-based algorithm that includes evaluation of patient after 10-12 weeks after start of treatment plan.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Implement Stepped care in accordance with ACP evidence based protocol, patients with positive PHQ9			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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values requiring treatment shall be treated as per specified treatment options and in stepped care by the PCP											
Task 2 Process is created for assignment of patient to Depression care manager for continuity of care and monitoring.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Process is created for continuous open lines of communication between Depression care manager and PCP, and on site care team as necessary.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 In line with stepped care, Depression Care manager performs follow up PHQ9 assessment in intervals to ascertain effectiveness of treatment and make appropriate adjustments after consulting with PCP.			Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #15 Use EHRs or other technical platforms to track all patients engaged in this project.	DY2 Q4	Model 3	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task EHR demonstrates integration of medical and behavioral health record within individual patient records.			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Working with EMR vendors, assessment tools are incorporated within EMRs in a format that is reportable in which data is ascertainable.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Develop process for extrapolating and reporting data to track and monitor all engaged patients.			Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Create FTP secure site and or other IDS platform for providing data to supervising psychiatrist and exchanging information.			Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 4 Create connection and interfaces with other			Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Project Model Name	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
platforms including Care coordination/management platform, ACP IDS for open efficient exchange of information and more effective patient care.											

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Implement IMPACT Model at Primary Care Sites.	ew593815	Other	25_DY2Q2_PROJ3ai_MDL3ai3_PRES9_OTH_3ai_9.12_IDS_Roadmap_Addressing_Care_Coordination_7469.docx	3ai 9.12 IDS Roadmap Addressing Care Coordination	10/30/2016 03:58 PM
	ew593815	Other	25_DY2Q2_PROJ3ai_MDL3ai3_PRES9_OTH_3ai_9.12_Care_Coordination_Strategy_7468.docx	3ai 9.12 Care Coordination Strategy	10/30/2016 03:56 PM
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.	ew593815	Screenshots	25_DY2Q2_PROJ3ai_MDL3ai3_PRES3_SS_3ai_3.0_Warm_Transfer_in_EHR_7467.pdf	3ai 3.0 Warm Transfer in EHR	10/30/2016 03:53 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Co-locate behavioral health services at primary care practice sites. All participating eligible primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	
Develop collaborative evidence-based standards of care including medication management and care engagement process.	
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.	
Use EHRs or other technical platforms to track all patients engaged in this project.	
Co-locate primary care services at behavioral health sites.	
Develop collaborative evidence-based standards of care including medication management and care engagement process.	
Conduct preventive care screenings, including physical and behavioral health screenings.	
Use EHRs or other technical platforms to track all patients engaged in	



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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
this project.	
Implement IMPACT Model at Primary Care Sites.	
Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	
Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	
Designate a Psychiatrist meeting requirements of the IMPACT Model.	
Measure outcomes as required in the IMPACT Model.	
Provide "stepped care" as required by the IMPACT Model.	
Use EHRs or other technical platforms to track all patients engaged in this project.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Ongoing	
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Ongoing	
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	
Milestone #6	Pass & Ongoing	
Milestone #7	Pass & Ongoing	
Milestone #8	Pass & Ongoing	
Milestone #9	Pass & Ongoing	
Milestone #10	Pass & Ongoing	
Milestone #11	Pass & Ongoing	
Milestone #12	Pass & Ongoing	
Milestone #13	Pass & Ongoing	
Milestone #14	Pass & Complete	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #15	Pass & Ongoing	



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✓ IPQR Module 3.a.i.4 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 3.a.i.5 - IA Monitoring

Instructions :



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Project 3.b.i – Evidence-based strategies for disease management in high risk/affected populations (adult only)

✓ IPQR Module 3.b.i.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Major risks to the implementation of this project revolve around ACP PPS serving a community that has low health literacy rates and who is of a culture that uses high sodium diets. Lifestyle modification in itself presents a high risk and a challenge since Culture is important in these communities and maintaining a connection to those cultures is of utmost importance. Changing the culture of these patients and encouraging a culture foreseen as foreign is a great challenge. ACP PPS is suited and up to the task. It plans to mitigate this risk with its vast infrastructure of culturally aligned and linguistically competent providers who share the patient's concerns and can relate to the patient in a natural way through its community inbred primary care providers and community based organizations which are also culturally aligned with the patients. Our PCPs and CBOs will reach out to and follow up with the patients and promote health literacy and regimen compliance. Patients will receive care and education in a language and culture that they are comfortable with and will therefore be expected to be receptive to this intervention. Another risk to implementation is the socio-economic status of these patients which generally is a population below poverty level. These patients cannot afford exclusive diets and gymnasium membership. ACP plans to mitigate this risk by negotiating prime rates for its patients at fitness centers as well as educating the patient on physical exercise routines and diet that are affordable and effective.



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✔ IPQR Module 3.b.i.2 - Patient Engagement Speed

Instructions :

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

Benchmarks	
Actively Engaged Speed	Actively Engaged Scale
DY2,Q4	191,503

	Year,Quarter	DY2,Q1	DY2,Q2	DY2,Q3	DY2,Q4
PPS Reported	Baseline Commitment	43,567	124,477	157,990	191,503
	Quarterly Update	80,524	124,477	0	0
	Percent(%) of Commitment	184.83%	100.00%	0.00%	0.00%
IA Approved	Quarterly Update	0	65,801	0	0
	Percent(%) of Commitment	0.00%	52.86%	0.00%	0.00%

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Other	25_DY2Q2_PROJ3bi_MDL3bi2_PES_OTH_DY2Q2_3bi_7676.xlsx	DY2Q2 3bi	10/31/2016 08:07 PM

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Fail	The PPS failed to meet at least 80% of its actively engaged commitments for DY2 Q2. The documentation does not support the reported actively engaged numbers.



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✔ IPQR Module 3.b.i.3 - Prescribed Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #1 Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	DY3 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS has implemented program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 1 Working with physician leads and in accordance to American Heart Association and the JNC-8 recommendations and incorporating the guidelines of the US Preventive Services Task Force (USPSTF), develop evidence based protocol for the identification and management of cardiovascular disease and hyperlipidemia in the ambulatory practice.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Based on protocol guidelines for evaluation, create a reporting system using EMR registries to identify target patients, ie. Blood Pressure readings, Cholesterol levels.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Develop processes and procedures to comply with the protocols for identifying needed referrals, specialty needs and promoting referral for behavioral health and social and educational services as needed.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Disseminate evidence based protocols for implementation by ACP partners via physician engagement meetings as well as one on one by the physician engagement team members. Protocols is also be made distributed electronically to every provider.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 Develop a process and procedure manual for the implementation of the protocols in a consistent way throughout the PPS, including the incorporation of processes within the EMR.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4



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Task 6 User friendly materials are created on how to implement the protocol and how to enter searchable information into EMR for ease of reporting and performance and engagement monitoring.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 7 Implement Million hearts campaign		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 8 Care Teams are created regionally and information distributed to all PPS partners in order to better coordinate care and provide efficient services.		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 9 Create Care Coordination/Care Management back office to assist in managing referrals, treatment plan adherence and coordinating social services as appropriate		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone #2 Ensure that all PPS safety net providers are actively connected to 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 DY 3.	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Non-Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Mental Health	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task PPS uses alerts and secure messaging functionality.		Project		In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Partner with eClinical Works, MDLand and other major EHR vendors to establish bi-directional EHX platform to share information among PPS safety net partners who use eClinical Works EHR. The strategy around this milestone will directly mimic what we have in place for project 2ai.		Project		Completed	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 2 Establish work plans with hospital partners to develop Admission / Discharge / Transfer (ADT) feeds into HIE.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
3 Establish work plans with eClinical Works, MDLand and other major EHR vendors among ACP participating safety net providers for data feed into HIE platform.										
Task 4 Develop other interim solutions for sharing health information among clinical partners using direct outpatient record lookup. Determine other needs or enhancements based on IT/integration gap analyses. 04/01/2015-12/31/2015		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 5 Connect with RHIO/QE and develop plan on sharing health information as the State makes the information available.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 6 Obtain and understand DSRIP policies, procedures and processes with respect to RHIO/SHIN-NY requirements as the information becomes available.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 7 Develop final plan for sharing health information among clinical partners by DY3.		Project		In Progress	07/01/2016	03/31/2018	07/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 8 Ensure compliance with data sharing and confidentiality rules are followed with every data sharing event. This includes appropriate securities and encryption methodologies are in place to comply with HIPAA and other state and federal guidelines regarding PHI.		Project		In Progress	10/01/2016	03/31/2018	10/01/2016	03/31/2018	03/31/2018	DY3 Q4
Milestone #3 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.	DY3 Q4	Project	N/A	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).		Project		In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task PPS has achieved NCQA 2014 Level 3 PCMH standards and/or APCM.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	07/01/2015	03/31/2018	07/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Survey and group all participating safety net providers into level of readiness. The strategy around this milestone will directly mimic what we have in place for project 2ai.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop plan, timelines, and assign resources for each level of		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3



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readiness. This includes PPS-defined readiness levels with strategies that will vary based the different levels (ie those who are technologically integrated will have a different approach than providers who are still utilizing paper medical records).										
Task 3 Establish communications / marketing plan and outreach to all ACP safety net providers that also identifies support resources.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Start to implement plan to ensure safety net providers achieve MU/PCMH Level 3 by end of DY3. Implementation plan includes support from resources including PCMH CCEs. Support may include internal or external resources.		Project		In Progress	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4
Milestone #4 Use EHRs or other technical platforms to track all patients engaged in this project.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Create and instruct practices on input of information in structured format into EMR to be able to mine data for engagement and performance. Metric data will include use of home grown and CPT codes to monitor and extrapolate several levels of care provided from lifestyle modification training to patients, to use of nutritional counseling CPT codes, EMR MU data dashboards that provide analysis of tobacco use assessment tools and counseling, among others.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Create "how to" training tools to be provided at the practice level for simplified physician and staff training in order to increase compliance and correct collection of data for monitoring engagement and performance.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Develop EMR reports using EMR reporting tools for practice management, MU dashboards, registries to pull data relevant to project implementation, find target patients, monitor patient engagement, and attainment of goals. These data pulls will be analyzed based on data collected such as BP levels, cholesterol levels, Medications and medication dosages, lifestyle modification techniques in place, counseling, number of encounters, referrals and completion of these, as well as other		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1



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data as determined necessary by the PPS.										
Milestone #5 Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	DY2 Q4	Project	N/A	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS has implemented an automated scheduling system to facilitate tobacco control protocols.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS provides periodic training to staff to incorporate the use of EHR to prompt the use of 5 A's of tobacco control.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Organize tobacco assessment tools within the EMR and create mandatory fields where the provider is prompted and obligated to record tobacco use assessment and counseling for users. Leverage meaningful use requirements and systems to assist in these prompts.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Create evidence based protocols for tobacco use cessation incorporating the 5 A's.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Distribute protocols and train practices on documentation and process within the protocols and how to use the assessment tools. Protocol shall be distributed in physician engagement meetings, by provider engagement tem, and in electronic forms. Provider engagement teams will provide training on processes and implementation to these at onsite visits and trainings. The provider engagement team visits will be ongoing and used to provide periodic trainings and updates on protocols, processes and updates.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #6 Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	DY2 Q4	Project	N/A	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task Practice has adopted treatment protocols aligned with national guidelines, such as the National Cholesterol Education Program (NCEP) or US Preventive Services Task Force (USPSTF).		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 1 Develop/create evidence based protocols for Cardio vascular disease to include evaluation and treatment of hyperlipidemia as approved by ACP physician leads in accordance with JNC-8, American Heart Association, and USPSTF.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task 2 Leverage existing physician groups to reach and obtain "buy in" of physician partners in ACP protocols and processes.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Use provider engagement teams, physician engagement meetings, Care Teams to establish rapport with providers and distribute and train in the adoption of the evidence based protocols and standards of care.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 ACP has provider participation agreements in place with its providers in which there is an acceptance as to following ACP processes including standards of care and metric reporting.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #7 Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task Clinically Interoperable System is in place for all participating providers.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task Care coordination teams are in place and include nursing staff, pharmacists, dieticians, community health workers, and Health Home care managers where applicable.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task Care coordination processes are in place.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 1 Establish ACP PMO back office central hub which includes team of care coordinators, care managers, community health workers, outreach staff.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 2 Create training materials for patient education and self - management in different languages taking into consideration the language and culture of the target population.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Create Care Coordination processes and procedures		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Train back office staff in ACP care coordination processes in accordance with project requirements and project specific protocol implementation.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1



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5 Train back office staff, care managers, care coordinators in patient self -management techniques as per the ACP created and disseminated patient self -management training materials. Staff will learn what the coordination requirements are as per the established protocols and ACP processes. They will learn Implementation of protocol specific techniques in language and culturally appropriate manner.										
Task 6 Establish Care Teams ensuring inclusion of pharmacists, nutritional counselors, and other ancillary providers including DME vendors, diagnostic entities, etc. that back office will coordinate		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 7 Train back office staff care managers and care coordinators in lifestyle coaching and providing educational materials in language appropriate and culturally sensitive manner		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 8 Train and utilize Community health workers to approach and educate target populations to increase health literacy, self awareness and disease management and prevention.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 9 Utilize community health workers to liaise with CBOs to hold Stanford Model educational seminars within the communities in a culturally sensitive and language appropriate forum.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 10 Implement IDS consistent with project 2.a.i to have a integration of information centralized and accessible for more efficient and effective care. The IDS will utilize interfaces and connections for two way interchange of information between physician EMRs, hospital EMRs, CBOs and other entities all of which the central Care coordination teams will be able to access for follow up and follow through.		Project		In Progress	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #8 Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	DY3 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task All primary care practices in the PPS provide follow-up blood pressure checks without copayment or advanced appointments.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 As required in ACP's protocol and processes, agreements are made with all PCPs that provide for the opportunity for patients to		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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have BP monitored as walk ins, without appointments and without copay.										
Task 2 PPS negotiates with MCOs to assure that no copays are deemed necessary for BP checks.		Project		In Progress	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 3 Process and procedure manual and agreement with PCPs to also stipulate need to fit patient into schedule to be seen by provider if BP values are at unacceptable levels.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #9 Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	DY2 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task PPS has protocols in place to ensure blood pressure measurements are taken correctly with the correct equipment.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 1 Develop training manuals for training of office staff at all levels on proper technique and equipment use for accurate BP measurement. Training manual also to include acceptable and non-acceptable values, to prompt staff to seek physician intervention upon attainment of unacceptable values.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 2 Implement training to all staff regarding BP measurement. Provider engagement teams provide on-site training to practice staff on BP measurement manual and obtain staff training certifications to be provided to Workforce office for monitoring and reporting.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone #10 Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	DY3 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task PPS uses a patient stratification system to identify patients who have repeated elevated blood pressure but no diagnosis of hypertension.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS has implemented an automated scheduling system to facilitate scheduling of targeted hypertension patients.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS provides periodic training to staff to ensure effective patient		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4



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identification and hypertension visit scheduling.										
Task 1 Develop data pull frequencies to utilize EMR patient registries to identify blood-pressure values.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Create analytics tool to cross analyze BP values against those with Cardiovascular diagnosis, ie diagnosis of Hypertension and number of encounters with elevated blood-pressure values.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Create process for reporting to Central hub and to PCP findings of analytics report.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Create process for receiving patient data for those identified via the data analysis and providing outreach to these patients to schedule for PCP visit and early intervention. Outreach may be provided at the central level via community health workers if needed or at the local level by the PCP office when patient is reachable and known to them.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 5 Processes for identification and periodicity of visits to be updated periodically, and minimally yearly by Clinical Quality Committee and staff retraining to be repeated as necessary, minimally yearly to keep up to date on process updates.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #11 Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	DY2 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task PPS has protocols in place for determining preferential drugs based on ease of medication adherence where there are no other significant non-differentiating factors.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 1 Implement ACP evidence based CV protocol created in accordance with JNC recommendations, which calls for once daily regimens and includes preferential drugs as appropriate in a format that is user friendly and understandable.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Train physicians on implementation of evidence based protocols treatment plans and provide assistance and follow up.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Clinical Quality Committee Review CV evidence based protocols periodically and minimally yearly to revise and update		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1



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as per latest advances and recommendations.										
Milestone #12 Document patient driven self-management goals in the medical record and review with patients at each visit.	DY3 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task Self-management goals are documented in the clinical record.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS provides periodic training to staff on person-centered methods that include documentation of self-management goals.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 As per evidence based protocols, train providers on setting self-management goals for the individual patient. Self-management goals may be updated as per updated protocols upon review by the Clinical Quality Committee.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Provide training to staff on monitoring the patient's progress on self-management goal as per set goals according to protocols. Re-Training will be periodic and minimally yearly, though may be sooner if protocol needs updating.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Work with EMR vendors to Create and Provide structured data fields within the EMRs where self-management goals can be easily identified and progress on such can be reportable.		Project		Completed	07/01/2015	03/31/2016	07/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 4 Train providers and staff on entering self-management goals data entering and monitoring.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #13 Follow up with referrals to community based programs to document participation and behavioral and health status changes.	DY3 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS has developed referral and follow-up process and adheres to process.		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task PPS provides periodic training to staff on warm referral and follow-up process.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task Agreements are in place with community-based organizations and process is in place to facilitate feedback to and from community organizations.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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1 Engage PCPs and train on and implement cardiovascular (CV) evidence based protocols ensuring attention to identification of behavioral health status and referral criteria.										
Task 2 Create protocol and processes for realization of "warm handoffs" when patients identified as needing behavioral health services. Utilize physician engagement team to implement and train staff at PCP office on "warm handoffs" of patients needing behavioral health services.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Provide PCPs with care teams' information and referral processes for providing referrals to and receiving information from CBOs, Behavioral and Mental health partners.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Establish central back office inclusive of care coordinators, care managers, community health workers and outreach staff with interfaces and two way connections that allow for upload of referrals as they are created by partners and as they are processed.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 5 Establish and implement processes by which care coordinators receive and follow referrals as they are uploaded into Care management system electronically.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 6 Establish and implement process and procedures by which care coordinators intervene in assisting patients in coordinating needed services from the full range of ACP partner providers and community based organizations, local government and specialty agencies.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 7 Establish process by which care coordinator central or at the practice site ensures receipt of services by patient and marks to send back to referring provider the result and outcome of services received by patient using.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 8 Develop and implement procedures for warm handoffs as in previous tasks.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 9 Establish periodicity of staff retraining to ensure comprehension and adherence to processes. Retraining to be minimally yearly but optimally twice yearly.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1



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Task 10 Perform analysis of CNA to determine community resources available.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 11 Perform network analysis to determine size and scope of necessary resources		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 12 Draft CBO agreements and present to Board for approval. The CBO agreements will include services to be provided, timeliness of provision of services, ability and commitment to timely information exchange.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 13 Utilize Community Engagement teams to Distribute RFP to CBOs to evaluate services, timeliness of services and CBO's capacity.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 14 Utilize Community Engagement team to establish rapport, present formal agreements and obtain signed formal agreements.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone #14 Develop and implement protocols for home blood pressure monitoring with follow up support.	DY2 Q4	Project	N/A	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS has developed and implemented protocols for home blood pressure monitoring.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task PPS provides follow up to support to patients with ongoing blood pressure monitoring, including equipment evaluation and follow-up if blood pressure results are abnormal.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task PPS provides periodic training to staff on warm referral and follow-up process.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 1 Develop training manual for patients on how to measure BP. The manual includes proper technique and equipment use. The manual also contains guidance on values and goals with instruction on alert values and how to document the values.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Distribute BP manual to all practices for implementation and release to patients.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Engage physicians and their staff in implementation of manual		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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and training the patient. The physician engagement team shall provide in-house training to physicians and all practice staff on how to use the training manual and how to train the patient on proper BP measuring.										
Task 4 Processes are put in place at PCP offices for staff to accept and evaluate patient's BP logs which the patient shall bring to every visit.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 5 Staff is trained as per BP manual on evaluating equipment. BP levels measured at PCP office with patient equipment may be compared to readings at PCP office using office equipment.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #15 Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	DY2 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task PPS has implemented an automated scheduling system to facilitate scheduling of targeted hypertension patients.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Establish process for monthly data pulls from EMR registries for all patients with Hypertensive Cardiovascular disease by ICD code		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Create filters for cross reference of reports pulled from EMR registries with parameters for all patients with hypertensive CV disease by ICD code/ date of last encounter/ and date of next visit. Identify all patients without a follow up appointment or who skipped a scheduled encounter.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Establish process for outreach to target patients and schedule a prompt appointment. PCPs allow for timely scheduling of the appointments.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Establish process for staff to communicate to CHWs patient lists/rosters who miss more than one appointment or are not reachable. CHW will provide services within the community and work to find the patient and connect the patient back to the PCP.		Project		Completed	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Milestone #16 Facilitate referrals to NYS Smoker's Quitline.	DY2 Q4	Project	N/A	Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task PPS has developed referral and follow-up process and adheres		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2



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to process.										
Task 1 Establish procedures in accordance with evidence based protocols for referrals of tobacco users to NYS Smoker's Quitline.		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 2 Implement process for care coordinators and CHWs to receive and access referrals and follow up to ensure compliance and assist in care plan.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #17 Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk population, group visits, and implementation of the Stanford Model for chronic diseases.	DY3 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task If applicable, PPS has Implemented collection of valid and reliable REAL (Race, Ethnicity, and Language) data and uses the data to target high risk populations, develop improvement plans, and address top health disparities.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task If applicable, PPS has established linkages to health homes for targeted patient populations.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task If applicable, PPS has implemented Stanford Model through partnerships with community-based organizations.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 Perform CNA analysis to determine "hot spots". Determine neighborhoods with highest risk.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Utilize Community engagement teams to prepare Stanford Model meetings and educational materials in the hot spot neighborhoods. The implementation of the Stanford model shall be conducted in the language and culture of the target audience taking into account any and all cultural sensitivities.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 3 Utilize EMR technology to gather pertinent information. Activate features within EMR to capture REAL information and make this capture mandatory within EMR to ensure compliance.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Implement process to ensure that partner health homes and those that are members of the Care Teams are linked with patients meeting criteria and eligibility as per ACA.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Task 5 As in previous tasks, Utilize community health workers to identify and establish agreements with CBOs that will then serve for implementation of Stanford model.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Milestone #18 Adopt strategies from the Million Hearts Campaign.	DY2 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task Provider can demonstrate implementation of policies and procedures which reflect principles and initiatives of Million Hearts Campaign.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task Provider can demonstrate implementation of policies and procedures which reflect principles and initiatives of Million Hearts Campaign.		Provider	<u>Practitioner - Non-Primary Care Provider (PCP)</u>	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4

Providers Associated with Completion:

Abakporo Theophine O Md; Abraham Cynthia; Acevedo Jose A Md; Addonizio Devon Kimberly Md; Adebisi Adelowo Kayode Md; Adlersberg Jay B Md; Agarwal Chhavi Md; Ahmadzadeh Syed Ali; Ahmed Mohamed; Ahn Myung Cha; Ahsan Mohammad Md; Airiani Suzanna; Akhter Pervez Md; Alapati Prameela; Alatassi Shaza Md; Alcaide Alejandro Md; Aldana-Bernier Lilian; Alessandra Pacino; Alex Santhosh Madathil Md; Alexander Anita; Alexander Julie; Alizadeh Bajgiran Ahmadreza; Allan Sean Thomas; Allen Theodore Elias Pc Md; Altman Daryl Renee Md; Altobell Eva; Amato Peter; Amsalem Yoram; Anam Sadrul M Md; Anderson Darlene S Rpa; Anderson Todd; Andrews Robert Anthony; Ann Prokofieva Md; Ansari Parswa Md; Antoine T Christina Md; Antonacci Anthony C Md; Appleman Warren Md; Applewhite Liat E; Aranow Cynthia Beth Md; Arikupurathu Nisha; Astiz Mark E Md; Atluri Subha Md; Attaie Ali Dds; Attoti Chandana; Auricchio John Steven Dpm; Averescu Marie Jeanne; Azamy Taufiq; Azar Sasan Md; Aziz Tasnia; Babayev Dina; Babury Mohammad A Md; Bachan Moses; Badalov Isak Y Dpm; Badhey Vasantha Md; Bai Chun; Bajaj Deepika Md; Baker Daniel James Md; Bamji Dinshaw D Md; Bangaru Babu S Md; Bannerman Alfred C Md; Barclay Emanuel J; Barile Gaetano R Md; Barman Trina Md; Barnes Heather; Barone Kellie Lynn; Barragan Juan Carlos Dpm; Basharian, Omar; Basit Mohammad Md; Bass Sherry J Od; Baxi Ami S; Becher Rodney A Md; Becker Linda; Beckford Betina; Begum Farhana; Behfarin Parviz Md; Beinart Clifford Md; Benedicto Maria Theresa Dds; Bengeloun Nor Sabah; Benoit Vladimir Lusys Md; Bernik Stephanie Falcone Md; Bernstein Chaim J Md; Berookhim Boback; Best Tasby Lugene; Bhalla Roopam; Bharati Anjali; Bhasin Kabir; Bhatti Tandeep Kaur Do; Bhayani Rajendra Damodar Md; Bhojani Shabnamzehra; Bisangwa Alexis Md; Bittle Stephanie; Blanco Grisco; Blokh Ilya; Bloom Allison Robyn Md; Blum Corinne E; Blyumberg Yelena; Bogart Sydney David Md; Boockvar John A Md; Borawski Dorota Md; Bornstein Eran; Borowski Allison Marie; Bortolussi Mario E Md; Bouchard Nicole Colette Md; Bover Elina Dpm; Bovienzo James D Md; Braunstein Edward Allen; Braunstein Richard Evan Md; Bregman Alvin M; Briley James; Brinster Derek Ralph; Briskin Klara; Brodsky Ella Md; Bromley Gary Steven Md; Brown Elaine Lucille Rn; Brown Elaine P Md; Bruder Jack Md; Brunckhorst Keith Robert Md; Buchanan Mosaes M; Buka Robert Md; Bulsara Girish M Md; Bustos Emmanuel; Butt Ahmar Mannan; Butters Marva Dpm; Byrne Kristin Colleen; C & W Medical Llc; Cadet Normil Richard Jean Md; Cahill Kevin Dr.; Cai Steven; Calabria Diego Gennaro; Canellos Harriette; Cantu Roberto Jr Md; Carpati Charles Md; Carpo Michele; Carpo Minda S Dds; Carroccio Alfio Md; Carter Casimiro Cambi; Carter Doreen; Carty Harriet; Castillo Nicole; Cervantes Lober Guillermo Md; Chacko Jeffrey K; Chakrabarti Chhaya Md Pc; Chan Alice Man Ccc-Audiology; Chan Collier K Dpm; Chan Doris; Chan Edwin Kenneth Md; Chan Jeffrey Chi Keung Md; Chan Meghan P Md; Chan Richard Md; Chan Yuen; Chang Keith C Md; Chang Robert C Md; Chang Thomas T M Md; Chang Ya Ju Md; Chapalamadugu Rajeev Md; Charles Eric Lukas Md; Charles-Gonsalves Shurla A; Chaudhry Khyzar; Chawla Kiran Md; Chee Benjamin Anted; Chen Chun Ming Md; Chen Daniel Chin Md; Chen Jianping Md; Chen Jimmy Md; Chen Stanley; Chen Szu-Yu; Chen Wei Ku Md; Cheng Andrew T; Cheng Ling Ouyang Md; Cheng Nancy Md; Cherenfant Lucot; Chester Adam R Md; Cheung Joyce; Cheung Wellman Wai-Man Md; Chime Chudi G Md; Chirayil John J Md; Chiu Sungkin Md; Chiu Sungwai Md; Chiu William Md; Choi Jai Huyk Md; Choi Mark Md; Chopra Jatinder K Rpa; Chou Yeh Ping Do; Chow Philbert; Chowdhry Mohammed Idris; Christina Mannino; Christopher Chow; Chu Chien-Jung J Md; Chu Mark Md; Chu Peter Md; Chun Hajoon Md; Chung Chin Woo Md; Chusid Boris Gregory Md; Cinquegrana Marco; Clerisme Joseph Roosevelt Md; Cohen Allen H Od; Cohen David L Md; Cohen Jay; Cohen Neil M Dds; Cohen Oksana Md; Concepcion Elizabeth Md; Condon Maureen Kathryn; Confident Marie M Lpn; Conti Christopher Anthony Md; Cooke David; Cooper Joanna Md; Coplan Neil L Md; Correa Nereida Md; Cortijo Grace; Corujo Omar; Costantino Peter David Md; Cox Anika Jonnelle; Coye Beverly; Crapotta Joseph A Md; Crevecoeur Evans Md; Crupi Robert S Md; Cruz Elizabeth Dpm; Cuevas Asima; Cui Jian Md; Cutler Alex Jay; Dabovich Ivonne Cnm; Dai Guorong Md; Damian Jeanne; Damiano Elena; Danielov Mikhail; Date Pravin; Dauhajre Jacqueline Md; David Marian Md; Davila Nixa; Davuluri Vijayalakshmi Phanipriyamv; Dayan Alan R Md; Dayani Farsima; De Castro Carlyle Md; De Los Santos Cynthia; Deblois Magdalena Q Rn; Dec Wojciech Dr.; Defreitas Michelle; Degannes Rhonda Ruth; Degoy Ana; Del Pin Christina A Md Facs I; Deleon Jose L Dpm; Deleon Renato A; Delman Alex Md; Demko Monika; Dennis Lester; Depasquale Eugene Md; Des Jean Ryan; Desai Ojas Jasubhai Md; Desai Savitri J Md; Deucher Richard S Md; Dhar Vinod K Md; Dheeraj Khurana Mbbs; Dholakia Shashikant Vrajilal; Dillon Evan H Md; Dinabel Peralta-Reich; Ding Cheng Yang; Disanto Gregory; Doctor Dilip Shikharchand Md; Doctor Dipika Dilip Md; Dolen Suleyman E Md; Dolin Natalia Md; Dolmaian Gigliola Maria Md; Dominguez-Echevarria Alvaro; Donadt Robert B Md; Donath Lisa; Dorsky Joshua I Md; Doughlin Kenneth G Md; Drew Michael S Md; Dubos Sheba; Duchnowski Eva; Dul Mitch; Dumitru Marian Md; Dupree Shashonna; Duran-Soriano Maria E Md; Duvalsaint Fregens G Md; Duviella Carole; Dye Colleen; Dyrszka Herbert Md; Daniel Mathews, Dpm; Earle Bridget Ilka; Edelman Martha J Md; Edmondson Patricia V Md; Edward V Chan Md Pllc; Eisenberg Rachel; El-Khawam Rania; Ellington Marty Jr Md; Ellis Rachel Fremder Md; Elsheryie Ahmed A Md; Elstein Irwin D Md; Empire Joint And Spine P C; Engel Harry Mark; Epstein Marc C Od; Epstein Neal F Md; Escovar Ida Maria; Espeut Nicole; Espino Rodriguez Gagarini Md; Estefan Bebsy C; Estrada Roberto; Etienne Stephanie; Fabunan Maria; Fajardo Manuel Abrantes; Falagario-Wasserman June; Fallahi Pouneh Md; Farag Ayman Roushdy Md; Fein Alan Marc Md; Feuerstein Michael A; Fils-Aime Marsha; Fischer Maureen; Fishman Allen J Md Pc; Fishman Nancy Lynn Np; Fitzsimmons Sean; Flaminiano Lourdes M Md; Flores-Freeth Ingrid E; Fok Eric Chi-Cheung Md; Fong Jason Md; Fontana Gregory Paul; Foong Anthony Md; Foster Sharon Md; Fox Patricia A; Frances G Perez-Hernandez; Francois Pierre L Md; Frank Paul Md; Frankel Phoebe; Fraser Errol; Freedman Todd W



**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Rpa; Freeley Douglas A Md; Fretwell Kenneth R Md; Fried Ethan D Md; Friedrich Douglas Bennett Md; Fu Chenzhong Md; Fung-Nicholson Sonia; Galperin Mark Md; Gamboa Pilar Sia Mariano Dds; Garcia Sandra Patricia Dpm; Gardenswartz Mark H Md; Garratt Kirk Noel Md; Garrido-Valencia Fanny Md; Gavrilova Svetlana Md; Gaweda Oskar Adam; Gazi Farhad M; Georges Joseph L Md; Gerber Marilyn Csw; Gerlach Kecia; Gheewala Parul A Md; Gialvsakis John Peter; Giaquinto Beth; Glass David Md; Glass Jessica; Glatter Robert David Md; Godbout Brandon J; Goebel Jennifer; Goenka Anuj; Goldshteyn Vadim Md; Golio Dominick Md; Golyapina Natalya; Golub Ashley D; Gomez De Vargas Mencia M; Goncharov Dimitry; Gondal Nasir Mahmood Md; Gonzales Antonio M; Gonzales Ma Lourdes Castillo; Gonzalez Fermin Pablo Md; Goodman Allen Md; Gorbacz Sheldon Md; Gorodnitskiy Alexander; Gorski Matthew Gabriel; Gottlieb Marc D Md; Gould Jennifer Ann; Grasso Cono M Md; Green Young Sam; Greenbaum Robert C Md; Greenblatt Benjamin Md; Grinman Lev; Grossmann Rami R Md; Gu Yeon Sook; Guan Nicholas Ning-Guang Md; Gulati Gagan Jagdish Md; Gundel Ralph; Guniss Gladstone L; Guo Yujin; Gupta Meenu Md; Gupta Rakesh Md; Gutnik Zhanna Valerievna Md; Guttenberg Michael Gary Md; Guy-Rodriguez Eva; Guzman Eliscer Md; Haber Gregory; Habib Salma; Hadda Ceri Elizabeth Md; Haines Christine Md; Hakshouri Shimon R Md; Hallenbeck Richard D; Halley Kathleen; Hamid Faisal; Hammer Arthur W Md; Hammond Stephen Bemigho; Haque Moinul Md; Har-El Gady Md; Harris-Cobbinah Deborah Np; Hasanovic Adnan; Hasfal Sharon Yolanda; Haskes Lloyd Partman; Hasnayan Shahed Mahfuz Md; Hayes James ; Hayes Richard M Md; Hazelwood Arthur; He Cong Md; He Tina Q Md; He Zili; Hemli Jonathan Mishali; Henderson Tina; Henry Donna Marie Md; Hernandez Hilda; Hernandez Lincoln Md; Hernandez Maria L; Hernandez Miguel Rafael Md; Herschitz Izak Md; Hershman Elliott B; Herskovits Mark Saul Do; Hill Jennifer; Hill Michelle S; Hirshfield Gary S Md; Ho Garman T Md; Ho Vanessa; Hobeika Paul Bowlos Elias; Holman Anita; Holtzman Dvorah G; Hom David; Hong Sungsil; Hovanesian Shusha; Howard Siegel; Hoyek Wissam Md; Hsieh Helen Md; Hu Lisa Palen Md; Hu Mary Xiao-Jiang Md; Huang Albert Md; Huang Carol L; Huang Chien-Jen Md; Huang Xianchun; Hubbard Natalie; Hue Jennifer E; Hughes Joan Marie Cnm; Hung Fai Od; Huo Jerry Md; Hwang Yongkyu Md; Hyojeong Lee; Iacono Danielle; Igor Zilberman Dc; Ilan Hana Md; Ilkhanizadeh Rahman Md; Ilyas Nazish; Inglis Steven Ralph Md; Iommazzo Silvestro Dds; Ionescu Adina; Iordache Mihai M; Isak Isakov Medical Pc; Isakova Marina Md; Isanova Zarrina; Itzhak Petr Md; Jacinto Francisco Gertrude Md; Jackson-Hodges Chandia; Jacobs Allan Joel Md; Jagroop Sophia Mita; Jain Suresh P Md; Jainarain Ravella; Jalwan Ajay; Jamieson Lorraine Rpa; Janczuk Peter P Md; Javit Daniel Joel Md; Jean Carl; Jean-Baptiste Samuel; Jean-Bart Robert Y Md; Jean-Jacques Trevor Md; Jeanmichel Marieange ; Jen Albert Sun Md; Jeng Ing-Yann Md; Jerome Roseline Marie Md; Jhaveri Krishna K Md; Jiang Ming Md; John Geevarghese Md; Johnston Mark R Md; Jormark Susan Md; Jose Giselle Ann P; Joseph Cohen; Joseph Pierre L Md; Joseph Y Freidman; Josephine Huang Md Pllc; Joyner Narissa; Jung Jesse J; Kabala Muana Mbuyi Rpa; Kabrawala Pratibha Balvant Md; Kahlon Samrina; Kahn David I Md; Kalasapudi Vasundhara Devi; Kalash Glenn Richard Md; Kalman Jill Md; Kaman Ghong; Kambo Varinder; Kang Josephine; Kang Miyoung; Kaphan Mitchell L Md Pc; Kaplan Donald ; Kaplan Evan; Kapoor Anil Kany Md; Kapoor Mariela; Kapoor Vinay Md; Karantoni Olga; Karcnik Gregory Francis; Karen Clemente; Karibandi Karthik; Karkus Harvey D Md; Kartachov Carmen M; Kasat Kavita Md; Katari Nagendra Sagar Md; Katcher Oleg Md; Kathpalia Kusum Md; Kattlene Amedee; Kayaalp Emre; Ken C Wong Md; Kennedy Morgan; Kermani Sadi; Kern Jeffrey Howard Md; Kezerashvili Anna; Khaimov Daniel Md; Khalil Ahmed; Khalil Susan S; Khan Bitni Md; Khan Munibur; Khan Nasrin Akter Md; Khan Saqiba Md; Khanna Suresh Md; Khasak Dmitry Y Md; Khelemsky Igor Md; Khodabakhsh Kashyar; Khrom Tatiana Md; Kilshtok Sofya S; Kim Back K Md; Kim Seung Kwan Md; Kim So Young; Kim Su A; Kim Susan Sunjung; Kim Woo Sup Md Pc; Kindo-Diouf Azetta; King Donovan Anthony Rpa; Kiouranakis Nikolaos; Kirmani Yasmeen Md; Kirschenbaum Linda A Md; Kitton Stuart E Dpm; Klein Devin A; Klein Pamela; Klurfeld Alex; Knight-Debrady Alicia P Md; Ko Steve Y; Ko Wilson Md; Kogan Irina; Kolodny James R Md; Komisar Arnold Md; Kong Xiang B Md; Kopelowitz Wally Md; Kosmas Constantine Elias Md; Kowacz Tomasz Wojciech Md; Kowalski Rebecca; Kowalsky Marc Stephen Md; Kraus Dennis H; Krespi Yosef P Md; Kronzon Itzhak Md; Kruh Jonathan Nicholas; Krumholtz Ira; Krumholz David; Kuan Jackson Hsun Md; Kuang Barbara Hwa Md; Kuang Liren Md; Kuitinen Tamara Raquel Md; Kukar Atul Do; Kukar Narinder M Md; Kung Elaine F; Kuriakose Binu Rpa; Kurland Etah Md; Kuznetsov Valery Md; Kwauk Sam Tsung-Ming Md; Kymissis Carisa Maureen Md; Kyriannis Charles Md; Lai Amy Y Md; Lam Henry Md; Larisa Koifman Md; Larosiliere Sabine Edeline Dpm; Lasic Zoran Md; Lata Vivian; Lau Christine Y-K Md; Lau David Hai-Pong; Laura Prince; Laura Amram; Lautin Robert Frederic; Law Anna Md; Laysa Nestor Amon; Lazo Dante Md; Lazzaro Richard Stephen Md; Lechuga Maria Teresa Md; Ledwith Allison Patricia; Lee Frances; Lee Jane A Md; Lee Kenneth W Md; Lee Michael Jerry; Lee Paul Chun-Kit Md; Lee Paul K; Lee Rachel; Lee Sangwoo Md; Lee Shi-Wen Do; Lee Simon X Md; Lee Wah Sang Md; Lehman Jennifer C; Leifer Gerald Dds; Leon Jayleen; Leriche Rose-Marie P Rpa; Lerman Oren Zvi Md; Letafat Kimia C; Leung Albert Cheuk Md; Leung Ching Sum Md; Levine Randy L Md; Levine Sander Mark; Lew Lily Quon Md; Lewis Rachel; Leybel Boris Md; Li Angie; Li Jianjun; Li Wensong; Li Yali Md; Liang Lawrence Md; Libassi David; Lidoshore Karen; Lillis Jr Thomas E; Lim Jessica Wong Md; Lim Pearl Md; Lin Pi Tang Md; Linares Alvarenga Francisco; Lindsay Y Price; Liotta Dara R; Lippman Marie Abarientos Md; Lisann Neal Michael Md; Liu Lisen Md; Lk Better Health Medical Pc; Lo Calvin Md; Lo Kim Sing Do; Lochard Jean Joseph Md; Long Michele; Long Minhui; Lopez Juan S Md; Lopez Manuel D Md; Lopez Margarita; Losier Robert J; Louis Martha Md; Louis Martine A; Lowe Teresa Ann Od; Lu Fong Md; Lu Irene; Lu Xiaochun; Lubin Aviva; Lugo Joanelle; Lui Kin W; Luma Gregory Buyanow Md; Lumicao Lorna B Md; Lus Medical Associates Pllc; Lustbader Edward Seymour Dds; Luther Charles William; Ma Keyan Md; Machnicki Stephen Craig Md; Macri Mirtha J; Madama Sukanya Dpm; Maganov Igor Anatolyevich Md; Magloire Tamara Md; Mahadevan Pooja; Makkawi Abed H; Maksumova Zoya Md; Malhotra Gulshan Kaur Md; Malhotra Madhu B Md; Malhotra Shilpa Md; Malhotra Surinder Singh Md; Malieckal Giles; Malik Sajid Md; Mallik Amara; Mallin David Md; Mallios Jenelle L; Maloratsky Anna; Mamdani Yusufali Md; Mandalaywala Jasodaben C Md; Maniar Rajen P Md; Mao Yongming Md; Marcelonis Debra A Dpm; Marcu Mariana Md; Marcus Sergiu Md; Marinbakh Alexander Y Md; Marino Nino D Md; Mariya Aranbayeva; Markowitz Mindy; Marmer Tracy Seth Rpa-C; Marrero-Figarella Arturo L Md; Marshall Elizabeth; Martinez Adriana; Mashinic Elisabeth; Mashkabova Lyubov Dds; Mason Benjamin F Md; Mathews Daniel D Dpm; Matthew S Hepinstall Md; Matthew William Lorber; Mazur Justin David Md; Mcfarlene Kirk O; Mcgee Colleen Marie Rpa-C; Mcginty Geraldine Md; Mcinerney James V Dpm; Mcintosh James; Mclean James E; Mcpherson Christina; Mediavillo Rene S Md; Mehra Sonita; Mehta Ankit; Mehta Asit; Mehta Nilesh; Mehta Rekha; Meikle Angela Vanessa Md; Meltzer Robert M Md; Mendelson Robert I Md; Mensah Bridget; Mensah Stacey; Mercado Arthur M Md; Merriam Zachary; Merritt-Morrison Laverne ; Micallef Joseph; Michael Rose; Mick Thomas Dr.; Mikheyeva Irina; Milford Eugene Paul Dds; Miliillo Ralph Anthony; Miller Andrew Robert Md; Miller Ricardo Anthony; Milosevic Miliwoje Md; Minaeian Artin; Minior Victoria K; Mintzer Susan H; Mitchell Kathleen Genevieve; Mlynarczyk Ewa Monika; Mo Lihua Md; Modica Patricia; Mohamad Erfani; Mohseni Hossain; Moideen Ahamed S Md; Mok Victor Md; Montalbano Christin Md; Montelus Pierre Newton Md; Mora Maximo Md; Morales Gustavo Adolfo; Morales Romeo E Md; Morano Mark; Morisco Antonietta I Md; Morris Rachel Emily; Moses Danielle Monique; Moshiri Kouros; Moskowitz Leo; Mosu Nicolae Md; Motazedi Jody Lynn; Motola Jay A Md; Moulin Louise-Nicole Md; Mucelli Louis Alexander; Murphy-Cassidy Delores; Mutyala Manikyam Md; Myint Win Md; N'Gouamba Rashida B Md; Nagpaul Ravinder S Md; Nandakumar Thambiraja Md; Narasimhan Gopal; Narcisse Joseph Rpa-C; Narula Tara K Md; Navedo-Rivera Maria S Md; Naves-Ruiz Esperanza; Nemes Petru Codrin Md; Nett Michael Patrick; Newman Ransford C Md; Ney Gershon C Md; Ng John Paul Tracy Md; Ngo Tammy Phuong; Nguyen Tracy Thuy; Nicolaou Nicos; Niederland Marta Md; Nimmagadda Nagabhushanam Md; Ninan Philip Mohan Md; Nisimova Meri Md; Norman Steven Yale Dpm; Norris Tracy M; Novogrodsky Raphael Md; Nunez Giovanni M Md; Nyein Roland Md; O'Connor Dennis; O'Leary Xiaqing Lin; O'Reilly James; O'Young Bryan J Md; Obstbaum Stephen Allan; Oconnell William F Od; Olanescu Andrea Despina; Oliver Neville; Opam Osafradu Md; Opher-Iosifescu Elana; Ortiz Grace; Ortiz Rafael A; Osahan Deepinder; Osborne Heather L; Ostrovsky Yakov Pt; Ozersky Norman; Pachas Yvanka; Paley Deana Edwards; Palma James Md; Pamoukian Vicken Nichan Md; Pamulapati Vidyasagar; Pandit Ashwini; Pandya Sapna K Dpm; Paoli Gloria Rosario Md; Papaevagelon Nikolas; Parellada Alejo; Parikh Shobhana Mitesh Md; Park Jinhee; Park Sharon J; Parraga-Marquez Monica; Paschal Gehres Megan; Pasquale Deborah; Passmore Craig J Md; Pastori Luciano Juan; Patel Alkesh Navin; Patel Avani A Md; Patel Chetankumar P Md; Patel Chirag; Patel Jagruti Md; Patel Mahendra Chaturbhai Md; Patel Nirav Chandrakant Md; Patel Rajesh Kanubhai Md; Patel Sonia; Patel Yogita; Patterson Bentley Lorene Md; Patterson Stacey Ann Md; Pattett Kathreen; Paul Evelyne M Md; Paul Franck Emmanuel Md; Paul-Basil Wayne; Paya Shagupta Md; Pazur Beverly Ann Md; Pearce Katherine; Pearson Barry J; Pelczar Joseph Vincent Md; Percelay Jack Martin Md; Perez Margarita De Los Angeles Md; Perk Gila Md; Perone Robert W Md; Persaud Narendralall; Persaud Yudhistira K Md; Pertsovsky Yuriy; Peters Laiza; Peteru Sachidanan; Pethani Ashish; Pfefferblit Susanna Md; Phelan Jane; Phokela Sarabjit Singh Md; Pierre Modeline; Pili Manuel R Md; Pineda Diana; Pinkhas Alex; Pinsker Richard W Md; Pinter David Michael;										



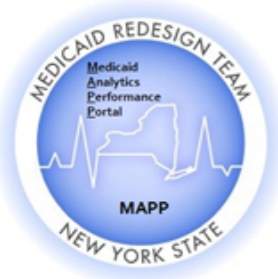
**New York State Department Of Health
Delivery System Reform Incentive Payment Project
DSRIP Implementation Plan Project**

Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
<p>Pinto Rohit Ivor Agnel Md; Piotrowski-Philipp Joan; Pirelli Luigi; Platsman Ninel Rpt; Ponieman Barbara L Md; Poretsky Leonid Md; Portello Joan K; Posner David H Md; Pou Ricardo E Md Pc; Prachi Sunil Dharia; Pramanik Bidyut Kumar Md; Prasanth Kaninghat; Premkumar Angel Grace Md; Preventive Diagnostics Inc; Prince Jose Md; Prince Steven Leonard Dpm; Puma Joseph Anthony Md; Punsal Reynaldo M Md; Punzalan Betty N Md; Qiu William Weiguang Md; Quarcoo Stephen T Dds; Rahman Mohammad Mazibur Md; Rajanna Madhu Gundigere Md; Rajee Nirmala K; Rajput Ashok Kumar Md; Ramdas Mardai Mariapen Pa; Ramessar Daniel Nathaniel Pa; Rampersaud Rajendra Mark; Rana Thakor C Md; Rand Stephen P; Rao Nagaraj Dharmavaram Md; Raof Sabiha Md; Rassekhi Hamid Dds; Rathinapandian Francis X Md; Ravelo Ramon E Md; Rayappa Premalatha; Raymond L Yung Md Pc; Raza Seyed Mohamed Jaffar Ali Md; Recon-Bucevic Myra; Reddy Sarath Md; Reddy Thulasi; Ree June Hisu Md; Reichert James Michael; Reimers Carl Dietrich Md; Ren Lisa Siqin Md; Ren Sicong; Rhee Jai-Jeen; Rhee Michael Sangwook Md; Richard Leno; Rimarachin Julio A Md; Ritter Steven; Rivera Gregory A Dpm; Rizvi Syedali Haroon; Rizzo Attilio; Rizzo Mariano; Roayaie Sasan Md; Robbins David Herbert Md; Robert Pick Md Mph; Rodrigues Lucan T; Rogers Mark I Md; Romanello Paul P; Romelus Keshia ; Romsaitong Diane P Md; Romsaitong Panus Md; Rosen Robert J Md; Rosenbaum-Roller Shira; Roshee Tarethia Maitland; Roslin Mitchell S Md; Roth Ira Md; Rousseau Monique J Md; Royes Patrina; Rubin Andrew Richard; Rudden Frances; Ruiz Carlos E Md; Ruiz Peter R; Ruiz Teresita Dumo Md; Rutner Daniella; Ryndin Igor Md; Ryu Jae Shin Md; Sabzanov Elionora Dds; Sachdev Karina; Sacklow Fred; Sacks Harry G Dds; Safri Tabassum; Sahai Anuraag; Saint-Hilaire Marlene; Saint-John Susan; Saintcyrus Evens; Salcedo Osiris; Saleem Sabrina; Sales Maria; Salvacion Ray Macasil; Samad Rubina Md; Samadi David Md; Samboy Jazlen Rocio; Sanchez Jose Rafael De Leon; Sandel Sherri Lynn Do; Sangeorzan Adrian Md; Sanikam Sreenivasa Reddy Md; Sankholkar Deepak M Md; Santamaria Grace M; Santandreu Orlando; Saravia Melissa Marie; Sauer Sandra; Sawhney Sabrina; Sayeed Majeed Ahmed Md; Schabes George A Dds; Schaefer Mark; Schaefer Steven David Md; Scharf Stephen Charles Md; Schiesel Elaine Leddomado Md; Schiff William M Md; Schiffer Mark Benjamin Md; Schleimer Helen Lilli; Schneider Fran Iris; Schreiner Roberta H Dds; Schrier Amilia Md; Schron Deborah S Md; Schubl Sebastian; Schulman Erica; Schultz Anita Ellieen; Schwartz David L Md; Schwartz Evan G Md; Schwartz Glenn Eliot Md; Seboldsky Paul; Seidman David A Md; Sekar Surya Md; Sen Kamalendra; Sengupta Trina ; Sergeyeve Igor Md; Serruya Jose Md Pc; Severe Ernst Gerard Marie Md; Shabto Uri R Md Pc; Shalov Artur Md; Shamalov Gennadiy; Shankar Adurthy Ananth; Shapsis Alexander Md; Sharafkhan Martin Md; Sharma Jayendra R Md; Sharma Josefina Dr.; Sharma Mickey Pradeep Md; Sharma Shruti; Sharov Yakov; Shatzkes Deborah R Md; Sheflin Marla Sue Do; Sheldon Schwartz; Shen Ivy Md Pc; Sheth Sandip Pranlal Md; Shi Zhengzhuan; Shieh Wei Yuan Md; Shif Mark Md; Shim Ruth; Shin Dong-In; Shmukler Dov Md; Shridharani Sachin Dr.; Shugar Julia Ann; Shukla Hemangi; Shulman Julia Paula; Silberman Emil Md; Silver Joyce; Silver Larry Mark Dpm; Simon Gladys; Singh Binoy Kumar Md; Singh Prabhjyot; Singh Varinder P Md; Skipitaris Nicholas; Skolnick Blair; Slade Stella; Sliuzar Lynn Logan; Smith Clive Nicholas; Smith Miriam Ann Md; Smith Robert H Md; Smith William; Soberano Consolacio; Sobol Norman J Md; Soden Richard M Od; Sohn Bret K; Solomon Robert D Md; Solomon Robert W Md; Solomowitz Benjamin H Dmd; Somrov Serge Md; Sood Minisha Md; Soohoo Stephanie; Sorokina-Ruffini Yelena; Sotelo-Garza Danilo; Soto Ana Berenice Md Mph; Spaccavento Colette M Md; Spencer Trudy I; Srivastava Malaya Md; St Felix Raymond Md; Stamm Joseph Martin Od; Stasiuk Laura; Stearns Alan; Stein Marjorie Michelle Md; Steinbaum Suzanne Md; Steiner Audra; Stepensky Leon Dpm; Stephens Nikeisha Anastacia Rpa; Stern Harvey Md; Stewart Amanda Patrice; Stickles Scott Michael Do; Stiller Catherine A; Stillwell Christina Rpa; Storper Ian Sam; Stroe Angela; Strouthides Effie; Stybel Elena B Do; Subotin Inna; Sukhraj Gopal Rpa; Sulh Muhammadsamir Abedrahman; Sullivan Kevin M Md; Sultana Sharmeen Md; Sun Deqing Md; Sun Diana K Md; Swaminath Arun C Md; Sy Manuel C Md; Sylvestre Georges Md; Talmatch Bernice; Tambar Balvir Krishan; Tan Edwin C Md; Tang Karen; Tartell Jay D Md; Taveras Fernando T; Taylor Kevia; Taylor Stuart William Md; Teixeira Julio A Md; Teller Katerina Md; Tenenbaum Moises Marcos Md; Teresa Min Jung O Md; Terry Peter G Md; Teyibo Thomas O Md; Thakore Hasit R Md; Thanneer Latha; Thau Andrea; Thaw Emerald M; Thierman David H; Thompson Sharon Y; Thurm Craig Alan Md; Tian Wenping; Tierney Patrick; Tiu Aurora Tompar Md; Tocco Michael Anthony; Tom Winston Chet Ying Md; Tomanelli Toni Ann; Tomback David Adam; Torres Diana; Tovbina Inna Md; Towner Robert A Md; Trasi Sunil S Md; Trepeta Scott S Md; Tsai Nancy M.D.; Tseng Tiffany; Tsinis Mariya F Md; Tsoumpariotis Spyros N Dpm; Tsounias Emmanouil; Tubens Frances Marilou; Tuccillo Nicole; Tun Kan; Turan Naciye; Turner Carol Lolita; Turner-Booth Linda; Udeh Ngozi Julia; Udom Izuka P Md; Udyawar Aparna P; Ulyana Khaldarov Md; Ung Jannet Jungmin-Shin; Unger Pamela Md; Useda Claudia A Md; Vaisman Alex Md; Van Orsouw Jillian Suzanne; Vanessa C. Altube; Vasquez Luis A Rpa; Vaval Jean Lionnel Md; Vaynkadler Mark; Vele Oana; Veloudios Alice Md; Verceles Caroline; Verrone Anthony Md Pc; Viray Jose F; Vivek Seetharaman Md; Vo Tracy T Md; Voli Joseph Fred Md; Voloshin Mario; Voskoboynik Irina Lcsw; Vuong Chinh Minh Md; Wadia Saloni; Waghela Rachana; Wahl Samuel Joseph; Waite Rulon Jan li Md; Wakim Wakim Victor; Walker Jennifer; Walters Edline V; Wanda Rodriguez Md; Waner Milton Md; Wang Chuansheng; Wang Da; Wang Hai Po Md; Wang Mei; Wang Mingke; Wang William Cheng Md Phd; Wang Xiao Hui; Ward Andrea Maria Dpm; Watson Catherin Pace; Watts Rakiya; Wee Julie Dds; Wei Alex; Wei Huachen Md; Weimin Qu; Weinberg Jeffrey Mitchell Md; Weinman Elizabeth; Weiss Reuven Phd; Weissman Laurence Roy Md; Weseley Peter Eric Md; Westcott Mark A Md; Widmer Jessica Lynn; Wiedershine Donn Jay Md; Williams Alan; Williams Ayesha Audene; Winter David Md; Wisch Nathaniel Md; Wolbeck Steven; Wolfson Yan Md; Wolintz Robyn Joy Md; Wong Alexander C; Wong Alfredo Sicut Md; Wong Jay Anthony; Wong Peter; Wong Samuel C Md; Wong Steven Md; Wong Thomas; Wong Timothy; Wong Yoke Hlen Md; Wood Edward T Md; Woodward Andrew; Wu Henry Dinh-Khon Md; Wu Jennifer; Wu Richard Kar; Wu Zhenqing Brett Md; Xavier Christopher Paul; Xiao Hui Fang; Xiao Yong Hong Md; Xing-Jie Wang Md; Xu Richard Li-Cheng; Xu Z Chan Psychiatrist Llc; Yaggy Amanda; Yan Richard X; Yan Weihong; Yan-Rosenberg Linli Md; Yang Andrea; Yang Fan; Yang Hyosol Dds; Yang Ian Yeng Md; Yang Wen C Md; Yap Laurel Win; Yaryin Llc; Yatco Edward John Md; Yazdan Ari; Yazdanbakhsh Khashayar; Ye Hao Md; Yee Lily Fong Cho Md; Yee Vivian See Ki Md; Yel Zinaida Md; Yeung Chung Kiang; Yeung Vincent Wah-Sang Md; Yim Ho Dpm; Yimen Mekeleya; Yin June; Yin Xiaoqin S; Yin Xuebin Md; Yoeli Gideon C Md; Yoon Sei-Oung Richard; Youner Craig J Md; Young Chainllie; Young George P H Md; Youngewirth Elizabeth Dpm; Yukelis Igor Md; Yun Jean Shim Md; Yunov Arthur Md; Yurovitsky Alyssa; Yushuvayev Eduard; Yves Duroseau Md; Zabar Benjamin; Zambrana Christian B; Zapata Sheena M; Zaric Maja Md; Zasyayko Sergey; Zeitoun Khaled Mohamed Md; Zelmanovich Anat; Zhan Frank Lei; Zhang David; Zhang Ting Ting; Zhang Victoria Do; Zhao Peng; Zhao Xinyu; Zheng Peter Shuangwu Md; Zheng Ronglan Md; Zhou Huan-Sue; Zhou Sumei Md; Zilberstein Olga Md; Zimmerman Jason Simon; Zimmermann Mark; Zonenashvili Merabi; Zong Pu</p>										
Task										
Provider can demonstrate implementation of policies and procedures which reflect principles and initiatives of Million Hearts Campaign.		Provider	Mental Health	Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4

Providers Associated with Completion:

Advanced Ctr For Psychotherap; Aids Ctr Of Queens County Inc; Akhter Pervez Md; Aldana-Bernier Lilian; Alexander Anita; Alexander Julie; Allan Sean Thomas; Altobell Eva; Amato Peter; Arista Ctr For Psychotherapy; Badhey Vasantha Md; Bamji Dinshaw D Md; Barnes Heather; Baxi Ami S; Beckford Betina; Begum Farhana; Bhojani Shabnamzehra; Bisangwa Alexis Md; Blanco Grisco; Bleuler Psychotherapy Ctr; Bridgeview Neuromed Care Pc; Brmc Medical Pllc; Brodsky Ella Md; Butt Ahmar Mannan; Calabria Diego Gennaro; Canarsie Aware Inc; Catholic Charities Comm Svcs Arch; Catholic Charities Neighbhd Svcs; Cervantes Lober Guillermo Md; Chan Meghan P Md; Chen Daniel Chin Md; Chen Jianping Md; Chen Jimmy Md; Chester Adam R Md; Child Center Of Ny; Child Center Of Ny, The; Chu Peter Md; Cinquegrana Marco; Clerisme Joseph Roosevelt Md; Cohen Oksana Md; Comunilife Mental Health Cl; Conti Christopher Anthony Md; Cortijo Grace; Creedmoor Pc;



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Cutler Alex Jay; Danielov Mikhail; Defreitas Michelle; Deucher Richard S Md; Dhar Vinod K Md; Duran-Soriano Maria E Md; Duviella Carole; Edelman Martha J Md; Espeut Nicole; Estefan Bebsy C; Estrada Roberto; Fernando Taveras Md Pc; Flushing Hsp Med Cnt; Fortune Society Inc, The; Francois Pierre L Md; Frankel Phoebe; Georges Joseph L Md; Gerber Marilyn Csw; Glass Jessica; Gomez De Vargas Mencia M; Gonzales Ma Lourdes Castillo; Gonzalez Fermin Pablo Md; Goodwill Industries Act Rc; Govind Prashil Md; Guan Nicholas Ning-Guang Md; Hadda Ceri Elizabeth Md; Halley Kathleen; Hamilton-Madison House,Inc; Harlem East Life Plan; Help/Project Samaritan Svcs Corp; Henderson Tina; Hernandez Hilda; Hernandez Miguel Rafael Md; Hovanesian Shusha; Isak Isakov Medical Pc; Jamaica Hospital Med Ctr; Jamaica Psychiatric Serv Pc; Jean-Bart Robert Y Md; Jewish Bd Of Fam Child Svc; Joseph Cohen; Joseph P Addabbo Family Hlth; Joseph Pierre L Md; Kalasapudi Vasundhara Devi; Kalash Glenn Richard Md; Kennedy Morgan; Khaimov Daniel Md; Khaldarov Yevgeniy Md; Khan Munibur; Kirmani Yasmeen Md; Kowacz Tomasz Wojciech Md; Laura Amram; Lawrence Y Liang Medical Pc; Lee Frances; Lenox Hill Hospital; Liang Lawrence Md; Linares Alvarenga Francisco; Lippman Marie Abarientos Md; Long Island Consultation Ctr; Lu Xiaochum; Luther Charles William; Malhotra Madhu B Md; Malieckal Giles; Mallik Amara; Maloratsky Anna; Marrero-Figarella Arturo L Md; Mashinic Elisabeth; Matthew William Lorber; Mcintosh James; Mehta Rekha; Mental Hlth Prov/W Queens Mh; Metropolitan Ctr For Mntl Hlt; Michael Rose; Miguel R Hernandez Md Pc; Miller Ricardo Anthony; Mintzer Susan H; Montefiore Medical Ctr Ai; Mount Sinai Hospital; Murphy-Cassidy Delores; Narco Freedom Inc; New Horizon Counseling Ctr; New York Foundling Hospital, The; New York Methodist Hosp; Ninan Philip Mohan Md; Nisimova Meri Md; Norris Tracy M; Nunez Giovanni M Md; O'Connor Dennis; O'Reilly James; Oliver Neville; Pachas Yvanka; Paul Franck Emmanuel Md; Paya Shagupta Md; Perez Margarita De Los Angeles Md; Peteru Sachidanan; Phelan Jane; Pinkhas Alex; Piotrowski-Philipp Joan; Ponieman Barbara L Md; Rajanna Madhu Gundigere Md; Rajput Ashok Kumar Md; Rathinapandian Francis X Md; Ravelo Ramon E Md; Reddy Thulasi; Riverdale Mental Hlth Cl; Rizzo Attilio; Rousseau Monique J Md; Roychoudhury Kanchana Md; Rtf Childrens Village; Ruiz Peter R; Ruiz Teresita Dumo Md; Sacklow Fred; Sanikam Sreenivasa Reddy Md; Sankholkar Deepak M Md; Sauer Sandra; Sebolsky Paul; Sen Kamalendra; Sheldon Schwartz; Sheth Sandip Pranal Md; Shif Mark Md; Silver Joyce; Skolnick Blair; St Barnabas Hospital; St Lukes Roosevelt Hsp Ctr; Sultana Sharmeen Md; Talmatch Bernice; Taveras Fernando T; Tiu Aurora Tompar Md; Transitional Services For Ny; Transitional Services/Ny; Turner-Booth Linda; Udyawar Aparna P; Vivek Seetharaman Md; Vnsny Community Health Services; Vocational Inst Proj Comm Svc; Voskoboynik Irina Lcsw; Wadia Saloni; Wang Da; Weiss Reuven Phd; Wiedershine Donn Jay Md; Xu Z Chan Psychiatrist Llc; Xu Z Chen Psychiatrist Llc; Yaggy Amanda; Yel Zinaida Md; Young Chainllie; Zimmermann Mark										
Task 1 With physician leads, Create ACP Million Hearts Campaign implementation and training materials.		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 2 Distribute Million Hearts Campaign implementation materials to all PCPs at physician engagement meetings, in person by Physician engagement team member, electronically.		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 3 Physician engagement team to provide PCPs training on million hearts campaign implementation to include BP checks without appointments, without copays, staff training and re-training and identifying a designated BP check area.		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 4 Working with community enterprises, organizations, MCOs and Physicians; ACP's Community Engagement team will negotiate and create patient compliance incentives to assist in motivating patients to adhere to treatment plans		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 5 Develop processes in accordance with million hearts campaign including patient self-management educational materials to be distributed to target patients and training provided at point of care in provider office.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 6 Develop patient training and educational materials for patient disease self-management techniques including how to monitor and record blood pressure levels at home.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 7 Develop Lifestyle modification teaching and training materials including nutritional counseling.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4



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Task 8 In accordance with Million Hearts Campaign, Develop staff retraining tools and manuals and use provider engagement team to provide individual practice's staff members retraining on how to monitor blood pressures to ensure that patients can walk in to the practice and have their BP checked by any staff member at any time. The process will ensure that each staff member knows the correct technique and value assessment at the time that the patient comes in and is trained on the process to bring out of range values to the immediate attention of the provider.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone #19 Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	DY3 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS has agreement in place with MCO related to coordination of services for high risk populations, including smoking cessation services, hypertension screening, cholesterol screening, and other preventive services relevant to this project.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Leverage existing relationships with MCOs to negotiate extended coverage for target and affected population. The negotiating to include coverage for items such as BP machines for every patient with Hypertension, Nutritional counseling, smoking cessation medications and counseling as well as others.		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 2 Utilize existing relationships to negotiate and form agreements with MCOs by which copays are waived for BP check exams.		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Milestone #20 Engage a majority (at least 80%) of primary care providers in this project.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS has engaged at least 80% of their PCPs in this activity.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Leverage relationships within physician groups, IPAs, etc to engage physicians in ACP values.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Working with the finance department, formulate incentives for PCP participation.		Project		In Progress	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Through physician engagement meetings, physician		Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4



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engagement teams, physician champions and other relationships; foster tight relationships with physicians and obtain agreements of participation with at least 80% of PCPs in ACP's network.										

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Ensure that all PPS safety net providers are actively connected to 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 DY 3.	ew593815	Other	25_DY2Q2_PROJ3bi_MDL3bi3_PRES2_OTH_3bi_3.1_Bi-directional_Providers_7472.xlsx	3bi 3.1 Bi-directional Providers	10/30/2016 04:24 PM
	ew593815	Other	25_DY2Q2_PROJ3bi_MDL3bi3_PRES2_OTH_3bi_2.1_Bi-directional_Memo_7471.docx	3bi 2.1 Bi-directional Memo	10/30/2016 04:23 PM
	ew593815	Other	25_DY2Q2_PROJ3bi_MDL3bi3_PRES2_OTH_3bi_2.1_Bi-directional_EHX_Platform_Providers_Full_Healthix_List_7470.pdf	3bi 2.1 Bi-directional EHX Platform Providers Full Healthix List	10/30/2016 04:22 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	
Ensure that all PPS safety net providers are actively connected to 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 DY 3.	
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.	
Use EHRs or other technical platforms to track all patients engaged in this project.	
Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	
Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	
Develop care coordination teams including use of nursing staff,	



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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	
Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	
Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	
Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	
Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	
Document patient driven self-management goals in the medical record and review with patients at each visit.	
Follow up with referrals to community based programs to document participation and behavioral and health status changes.	
Develop and implement protocols for home blood pressure monitoring with follow up support.	
Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	
Facilitate referrals to NYS Smoker's Quitline.	
Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk population, group visits, and implementation of the Stanford Model for chronic diseases.	
Adopt strategies from the Million Hearts Campaign.	
Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	
Engage a majority (at least 80%) of primary care providers in this project.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Ongoing	
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Ongoing	



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Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Complete	
Milestone #6	Pass & Complete	
Milestone #7	Pass & Ongoing	
Milestone #8	Pass & Ongoing	
Milestone #9	Pass & Complete	
Milestone #10	Pass & Complete	
Milestone #11	Pass & Complete	
Milestone #12	Pass & Complete	
Milestone #13	Pass & Ongoing	
Milestone #14	Pass & Complete	
Milestone #15	Pass & Complete	
Milestone #16	Pass & Complete	
Milestone #17	Pass & Ongoing	
Milestone #18	Pass & Ongoing	
Milestone #19	Pass & Ongoing	
Milestone #20	Pass & Ongoing	



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✔ IPQR Module 3.b.i.4 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 3.b.i.5 - IA Monitoring

Instructions :



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Project 3.c.i – Evidence-based strategies for disease management in high risk/affected populations (adults only)

✓ IPQR Module 3.c.i.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

ACP sees the following two major risks:

1. Based on customs and culture. The ACP PPS providers serve ethnic populations that are accustomed to high carbohydrate diets, and have low education and health literacy rates. Changing eating patterns that are passed from generation to generation will represent a great challenge for the PPS. To meet this challenge the PPS plans to leverage its cultural diversity and the integration of its culturally aligned providers to reach not only the patient in a language and tone that they can understand and accept, but also to reach the families and caregivers of these patients who are many times responsible for providing for the needs of the patient. The PPS will also provide education at the Primary Care level with regard to disease, disease prevention and disease management, directly one on one, and through educational materials/handouts and via the website and population wide campaigns.

2. Changing the mechanics of a primary care office which is already stressed and overworked and will now have to incorporate more teaching time. The PPS plans to meet this challenge by providing strong support and training to all staff so that there is not just one or two people available, but rather any available staff member may provide the needed service. ACP will create the educational materials and have a communications and outreach team put together patient incentives. The PPS will also negotiate with MCOs to cover the full cost of blood pressure for all patients with hypertension in any of its forms.



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✔ IPQR Module 3.c.i.2 - Patient Engagement Speed

Instructions :

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

Benchmarks	
Actively Engaged Speed	Actively Engaged Scale
DY2,Q4	133,821

	Year,Quarter	DY2,Q1	DY2,Q2	DY2,Q3	DY2,Q4
PPS Reported	Baseline Commitment	30,444	86,983	110,401	133,821
	Quarterly Update	48,347	86,983	0	0
	Percent(%) of Commitment	158.81%	100.00%	0.00%	0.00%
IA Approved	Quarterly Update	0	86,323	0	0
	Percent(%) of Commitment	0.00%	99.24%	0.00%	0.00%

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Rosters	25_DY2Q2_PROJ3ci_MDL3ci2_PES_ROST_DY2Q2_3ci_7677.xlsx	DY2Q2 3ci	10/31/2016 08:34 PM

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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✅ IPQR Module 3.c.i.3 - Prescribed Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #1 Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Evidence-based strategies for the management and control of diabetes in the PPS designated area are developed and implemented for all participating providers. Protocols for disease management are developed and training of staff is completed.		Project		In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 In conjunction with physician leads who are endocrinologists and internists Develop evidence based protocols in accordance with ADA guidelines for evaluation and treatment of patients with Diabetes.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Disseminate and Implement protocols and procedures to physicians via physician engagement meetings, on site trainings and electronic format.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Based on protocol guidelines for evaluation, create a reporting system for using EMR registries to identify target patients, ie. HgbA1C, Kidney Function, Cholesterol levels.		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 4 Develop processes and procedures to comply with the protocols for identifying needed referrals, specialty needs and promoting referral for behavioral health and social and educational services as needed		Project		Completed	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 5 Disseminate evidence based protocols for implementation by ACP partners via physician engagement meetings as well as one on one by the physician engagement team members. Protocols are also be made distributed electronically to every provider.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 6 Develop a process and procedure manual for the		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1



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implementation of the protocols in a consistent way throughout the PPS, including the incorporation of processes within the EMR.										
Task 7 User friendly materials are created on how to implement the protocol and how to enter searchable information into EMR for ease of reporting and performance and engagement monitoring.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 8 Employ physician engagement teams to hand deliver protocols and process and procedure manuals to providers and office staff and provide training on implementation processes.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #2 Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS has engaged at least 80% of their PCPs in this activity.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Leverage physician groups such as IPAs, physician champions, Hospital partners, etc. in to engage PCPs in the implementation of the project.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Physician engagement team members to visit all PCPs provide assistance and training. Through onsite visits and their one on one interactions foster relationships, provide assistance and training and obtain further commitments from PCPs toward the achievement of the 80% participation.		Project		In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Milestone #3 Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	DY2 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task Clinically Interoperable System is in place for all participating providers.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task Care coordination teams are in place and include nursing staff, pharmacists, dieticians, community health workers, and Health Home care managers where applicable.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Advocate Community Providers, Inc. (PPS ID:25)

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Care coordination processes are established and implemented.										
Task 1 Create IDS with two way information exchange between all ACP partners including physicians, hospitals, diagnostic entities, CBOs, homecare agencies, and others.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Develop a central care coordination/care management system platform that will interface with ACP providers and be able to receive referral data for timely care coordination and processing of services and will allow for referral data to be updated back to referring provider noting completion of task.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 3 Develop ACP central back office consisting of Care coordinators, Care managers, Community Health Workers, diabetic educators, pharmacists and others to provide additional and enhanced care including patient education on disease self-management.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Develop processes for back office/care coordination and care management teams to provide intervention as needed based on information received at ACP's central back office. The care coordination team will be responsible for monitoring and following up on referrals and assisting the patient in receiving needed services including social services, transportation, etc.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone #4 Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	DY2 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task If applicable, PPS has Implemented collection of valid and reliable REAL (Race, Ethnicity, and Language) data and uses the data to target high risk populations, develop improvement plans, and address top health disparities.		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task If applicable, PPS has established linkages to health homes for targeted patient populations.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task If applicable, PPS has implemented Stanford Model through partnerships with community-based organizations.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 Perform CNA analysis to determine "hot spots". Determine		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
neighborhoods with highest risk.										
Task 2 Utilize Community engagement teams to prepare Stanford Model meetings and educational materials in the hot spot neighborhoods. The implementation of the Stanford model shall be conducted in the language and culture of the target audience taking into account any and all cultural sensitivities.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 3 Utilize EMR technology to gather pertinent information. Activate features within EMR to capture REAL information and make this capture mandatory within EMR to ensure compliance.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Utilize REAL data provided in EMR to arrange Stanford Model activities in location, language and culture of the population to be addressed.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 5 Implement process to ensure that partner health homes and those that are members of the Care Teams are linked with patients meeting criteria and eligibility as per ACA.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone #5 Ensure coordination with the Medicaid Managed Care organizations serving the target population.	DY3 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS has agreement in place with MCO related to coordination of services for high risk populations, including smoking cessation services, hypertension screening, cholesterol screening, and other preventive services relevant to this project.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 Leverage existing relationships between physician groups and MCOs to bring to the table MCO executives for contract negotiations with ACP.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Produce reports with comparison analytic data on healthcare costs for complicated Diabetes patients versus ROI when preventative care is provided from onset of diabetes and throughout.		Project		Completed	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Task 3 Leverage analytic data to negotiate on behalf of ACP patients to obtain extension of coverage for evidence based prescribed preventive services. Service to include eye and vision screening, smoking cessation therapy, Cardiovascular disease evaluation,		Project		Completed	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
periodic preventive Renal function testing, and several others.										
Milestone #6 Use EHRs or other technical platforms to track all patients engaged in this project.	DY2 Q4	Project	N/A	Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task PPS uses a recall system that allows staff to report which patients are overdue for which preventive services and to track when and how patients were notified of needed services.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Create and instruct practices on input of information in structured format into EMR to be able to mine data for engagement and performance. Metric data will include use of home grown and CPT codes to monitor and extrapolate several levels of care provided from lifestyle modification training to patients, to use of nutritional counseling CPT codes, EMR MU data dashboards that provide analysis of tobacco use assessment tools and counseling, among others.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Create "how to" training tools to be provided at the practice level for simplified physician and staff training in order to increase compliance and correct collection of data for monitoring engagement and performance.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Develop EMR reports using EMR reporting tools for practice management, MU dashboards, registries to pull data relevant to project implementation, find target patients, monitor patient engagement, and attainment of goals. These data pulls will be analyzed based on data collected such as HgbA1C levels, cholesterol levels, Medications and medication dosages, lifestyle modification techniques in place, counseling, number of encounters, referrals and completion of these, as well as other data as determined necessary by the PPS.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 ACP will leverage existing EMR systems and create recall criteria to ensure that all patients are tracked and receive services timely. The criteria will include laboratory data such as last HgbA1c, visit data such as last visit, last comprehensive preventive physical, last eye exam and other criteria. Periodicity		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
will vary depending on service.										
Milestone #7 Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	DY3 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets Meaningful Use Stage 2 CMS requirements (Note: any/all MU requirements adjusted by CMS will be incorporated into the assessment criteria).		Project		In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task PPS has achieved NCQA 2014 Level 3 PCMH standards and/or APCM.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO/SHIN-NY requirements.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO/SHIN-NY requirements.		Provider	Safety Net Practitioner - Non-Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task EHR meets connectivity to RHIO/SHIN-NY requirements.		Provider	Safety Net Mental Health	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Survey and group all participating safety net providers into level of readiness. The strategy around this milestone will directly mimic what we have in place for project 2ai.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Develop plan, timelines, and assign resources for each level of readiness. This includes PPS-defined readiness levels with strategies that will vary based the different levels (ie those who are technologically integrated will have a different approach than providers who are still utilizing paper medical records).		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Establish communications / marketing plan and outreach to all ACP safety net providers that also identifies support resources.		Project		Completed	07/01/2015	12/31/2015	07/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Start to implement plan to ensure safety net providers achieve MU/PCMH Level 3 by end of DY3. Implementation plan includes support from resources including PCMH CCEs. Support may include internal or external resources.		Project		In Progress	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4



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Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	
Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	
Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	
Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	
Ensure coordination with the Medicaid Managed Care organizations serving the target population.	
Use EHRs or other technical platforms to track all patients engaged in this project.	
Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Ongoing	
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Complete	
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	
Milestone #6	Pass & Complete	
Milestone #7	Pass & Ongoing	



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✓ IPQR Module 3.c.i.4 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 3.c.i.5 - IA Monitoring

Instructions :



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Advocate Community Providers, Inc. (PPS ID:25)

Project 3.d.iii – Implementation of evidence-based medicine guidelines for asthma management

✓ IPQR Module 3.d.iii.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Major risks to implementation revolve around ascertaining environmental risk factor and trigger information and taking action to reduce or eliminate these. Many of the patients served by ACP are of Low Socio-economic status and have low health literacy rates. They may be accustomed to living conditions and environmental conditions that they believe to be normal or non-changeable and thus fail to report these. Asthma is a disease with high sensitivity to environmental factors. ACP plans to mitigate this risk by fostering tight bonds between the patient and the PCP so as to create and maintain open honest lines of communication. ACP will also provide the patients with health education both at the primary care setting as well as via the inclusion of CBOs to work with the patients and make them aware of disease management and prevention tools. ACP will also work closely with state and local departments to provide assistance with environmental hazards. ACP will also work closely with the Asthma coalition on patient education and attainment of services.

2. Another risk factor also related to health literacy but also involving other persons in contact with the patient revolves around schools, caregivers, and family members not knowing the appropriate action to take to help the asthmatic patient. ACP is implementing evidence based protocols and school/work and home/family Asthma action plans to better allow for the asthmatic patients to receive proper care in their current setting.



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✔ IPQR Module 3.d.iii.2 - Patient Engagement Speed

Instructions :

Enter the number of patients actively engaged through the current quarter. The number entered into the "Quarterly Update" area needs to reflect the cumulative method of counting within a DSRIP year. For example, the number reported in this field for Q4 should include patients previously reported in Q3 plus new patients engaged in Q4. Any explanations regarding altered or missed patient commitments must be included within the narrative box, not as text within uploaded documentation.

Benchmarks	
Actively Engaged Speed	Actively Engaged Scale
DY2,Q4	169,199

	Year,Quarter	DY2,Q1	DY2,Q2	DY2,Q3	DY2,Q4
PPS Reported	Baseline Commitment	29,610	84,599	126,899	169,199
	Quarterly Update	21,528	48,503	0	0
	Percent(%) of Commitment	72.71%	57.33%	0.00%	0.00%
IA Approved	Quarterly Update	0	22,089	0	0
	Percent(%) of Commitment	0.00%	26.11%	0.00%	0.00%

⚠ Warning: PPS Reported - Please note that your patients engaged to date (48,503) does not meet your committed amount (84,599) for 'DY2,Q2'

Current File Uploads

User ID	File Type	File Name	File Description	Upload Date
jd593813	Other	25_DY2Q2_PROJ3diii_MDL3diii2_PES_OTH_DY2Q2_3diii_7675.xlsx	DY2Q2 3diii	10/31/2016 07:27 PM

Narrative Text :

For PPS to provide additional context regarding progress and/or updates to IA.

Module Review Status

Review Status	IA Formal Comments
Fail	The PPS failed to meet at least 80% of its Actively Engaged commitments for DY2 Q2



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✅ IPQR Module 3.d.iii.3 - Prescribed Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for prescribed milestones. For milestones that are due and completed within the reporting period, documentation is required to provide evidence of project requirement achievement. Any explanations regarding altered or missed provider commitments should be included within the narrative box, not as text within uploaded documentation.

Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone #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.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task PPS has agreements from participating providers and community programs to support a evidence-based asthma management guidelines.		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task All participating practices have a Clinical Interoperability System in place for all participating providers.		Provider	Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task All participating practices have a Clinical Interoperability System in place for all participating providers.		Provider	Practitioner - Non-Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Working with physician leads who are internists, pediatricians, pulmonologist and in accordance with NIH guidelines, develop evidence based protocols for evaluation and management of Asthma in adults and children.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Implement Evidence based protocol throughout the PPS providers via provider engagement meetings, provider engagement team member outreach to providers, PMO distribution of electronic versions of protocols.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Develop processes for referrals as prescribed by evidence based protocol for referring patients to specialists and specialty services including community based organizations and programs. Process shall include care coordination by ACP's central back office care coordinator team.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 4 Obtain signed service agreements between ACP and		Project		Completed	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
participating providers.										
Task 5 Establish relationships and agreements with schools and other community based organizations and programs that can be a part of the ACP Care Teams, provide necessary services to patients and assist/support in implementation of evidence based asthma management action plans.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 6 Create IDS with two way information exchange between all ACP partners including physicians, hospitals, diagnostic entities, CBOs, homecare agencies, and others.		Project		In Progress	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 7 Develop a central care coordination/care management system platform that will interface with ACP providers and be able to receive referral data for timely care coordination and processing of services and will allow for referral data to be updated back to referring provider noting completion of task.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 8 Utilize EMR interfaces, data feeds, interconnectivity capabilities to connect all providers within the PPS to be able to have more immediate information exchange between partners.		Project		In Progress	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4
Task 9 Develop processes for back office/care coordination and care management teams to provide intervention as needed based on information received at ACP's central back office. The care coordination team will be responsible for monitoring and following up on referrals and assisting the patient in receiving needed services including social services, transportation, etc.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone #2 Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task Agreements with asthma specialists and asthma educators are established.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task EHR meets connectivity to RHIO's HIE and SHIN-NY requirements.		Provider	Safety Net Practitioner - Non-Primary Care Provider (PCP)	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task Telemedicine service implemented, based on evaluation of impact to underserved areas including, but not limited to: - analysis of the availability of broadband access in the geographic area being served - gaps in services - geographic areas where PPS lacks resources and telemedicine will be used to increase the reach of these patients - why telemedicine is the best alternative to provide these services - challenges expected and plan to pro-actively resolve - plan for long term sustainability		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 Develop ACP participating provider service agreements. The agreement shall include provider commitment to adhering to ACP developed evidence based protocols and processes and obtain Board approval.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Distribute agreement and obtain signed commitment from all providers of all provoder types to adhere to ACP evidence based protocols and processes. Obtaining signed agreements shall be a concerted effort on behalf of ACP and will leverage physician groups such as IPAs, as well as Hospital partner's relationships with providers in their area and physician engagement team.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Develop ACP central back office consisting of Care coordinators, Care managers, Community Health Workers, asthma educators, pharmacists and others to provide additional and enhanced care including patient education on disease self-management.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Develop processes for back office/care coordination and care management teams to provide intervention as needed based on information received at ACP's central back office. The care coordination team will be responsible for monitoring and following up on referrals and assisting the patient in receiving needed services including social services, transportation, etc.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 5 Develop telemedicine capabilities within the ACP central back office Care Coordination/ Care management.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
6 Review "hot spotting" results and CNA resource analysis, ACP network analysis and REAL data to target patients meeting those criteria for telemedicine and in the language and culturally sensitive manner as appropriate										
Task 7 Perform analysis of accessibility of broadband services in areas where CNA analysis reveals the need to implement telemedicine to augment services and bridge gaps.		Project		Completed	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 8 PPS to leverage Community Engagement team to negotiate with broadband service providers in areas where this service is necessary for population wide reach of care for reduced rates and incentives.		Project		Completed	01/01/2016	09/30/2016	01/01/2016	09/30/2016	09/30/2016	DY2 Q2
Milestone #3 Deliver educational activities addressing asthma management to participating primary care providers.	DY2 Q4	Project	N/A	Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task Participating providers receive training in evidence-based asthma management.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Implement Evidence based protocol throughout the PPS providers via provider engagement meetings, provider engagement team member outreach to providers, PMO distribution of electronic versions of protocols.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Develop user friendly versions of the protocol and processes.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Develop Asthma action plans for home work and school that can be incorporated into EMR for ease of access, efficient implementation for patient and tracking within the EMR system for tracking engagement and performance within the EMR.		Project		Completed	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 4 Utilize physician engagement team to distribute process and procedure materials and provide on-site training on implementation of protocol and protocol processes at the providers office to providers and staff.		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone #4 Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	DY2 Q4	Project	N/A	In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task PPS has established agreements with MCOs that address the		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
coverage of patients with asthma health issues. PPS has established agreements with participating health home care managers, PCPs, and specialty providers.										
Task 1 ACP will maintain close communications and information exchange with MCOs and Health Homes through direct feeds, referrals, data analysis and most over through these agency participation in the ACP Care Teams and PAC to ensure smooth coordination of care and creation of processes as necessary.		Project		In Progress	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 2 Develop processes for identification of HH eligible patients, referral of these patients to HH and coordinating transition and care through HH.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Establish ACP back office processes and procedures for coordinating care with MCOs obtaining necessary authorizations and fulfilling patient needs for services.		Project		Completed	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Leverage existing relationships with MCOs to negotiate extended coverage for target and affected population. The negotiating to include coverage for items such as nebulizers for every patient with asthma, smoking cessation medications and counseling as well as others.		Project		In Progress	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone #5 Use EHRs or other technical platforms to track all patients engaged in this project.	DY2 Q4	Project	N/A	In Progress	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task PPS identifies targeted patients and is able to track actively engaged patients for project milestone reporting.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 1 Incorporate Asthma action plans into the provider's EMR for ease of access, avoidance of duplication and tracking control.		Project		Completed	04/01/2015	03/31/2016	04/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 2 Work with EMR vendors and IT departments to structure fields in which data is entered when patient is engaged and then extrapolated for tracking		Project		Completed	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 3 Utilize EMR's patient registries, MU dashboards, PCMH capabilities to obtain reports on patients engaged and those needing to be reached. Process will include filters by ICD and appointment date as well as other data useful in ascertaining		Project		Completed	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Project Requirements (Milestone/Task Name)	Prescribed Due Date	Reporting Level	Provider Type	Status	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
patient compliance and health risk stratification and to identify target patients..										
Task 4 Create processes and parameters within the EMRs that will also serve in the purpose of performance and compliance monitoring through flow sheets, interfaces with diagnostic entities to track disease progression efficacy of treatment, medication and dosing tracking, episode frequency and service utilization.		Project		Completed	04/01/2015	09/30/2016	04/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 5 Create interconnectivity between provider EMRs the ACP platform, ACP will track Medication management, counseling, referrals and their completion.		Project		In Progress	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4

Prescribed Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	ew593815	Other	25_DY2Q2_PROJ3diii_MDL3diii3_PRES2_OTH_3diii_2.8_List_CBOs_-Asthma_7475.xlsx	3diii 2.8 List CBOs -Asthma	10/30/2016 04:49 PM
	ew593815	Other	25_DY2Q2_PROJ3diii_MDL3diii3_PRES2_OTH_3diii_2.8_EHR-HIE_Data_and_Telemedicine_7474.docx	3diii 2.8 EHR-HIE Data and Telemedicine	10/30/2016 04:48 PM
	ew593815	Other	25_DY2Q2_PROJ3diii_MDL3diii3_PRES2_OTH_3diii_2.1_EHR-HIE_Data_and_Telemedicine_7473.docx	3diii 2.1 EHR-HIE Data and Telemedicine	10/30/2016 04:47 PM
Use EHRs or other technical platforms to track all patients engaged in this project.	ew593815	Screenshots	25_DY2Q2_PROJ3diii_MDL3diii3_PRES5_SS_3diii_5.4_Medical_summary_screenshots_7479.pdf	3diii 5.4 Medical summary screenshots	10/30/2016 05:02 PM
	ew593815	Other	25_DY2Q2_PROJ3diii_MDL3diii3_PRES5_OTH_3diii_5.4_EHR-HIE_Data_and_Telemedicine_7478.docx	3diii 5.4 EHR-HIE Data and Telemedicine	10/30/2016 05:00 PM
	ew593815	Screenshots	25_DY2Q2_PROJ3diii_MDL3diii3_PRES5_SS_3diii_5.2_Registry_screenshots_7477.pdf	3diii 5.2 Registry screenshots	10/30/2016 04:59 PM
	ew593815	Other	25_DY2Q2_PROJ3diii_MDL3diii3_PRES5_OTH_3diii_5.2_EHR-HIE_Data_and_Telemedicine_7476.docx	3diii 5.2 EHR-HIE Data and Telemedicine	10/30/2016 04:57 PM

Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
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.	



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Prescribed Milestones Narrative Text

Milestone Name	Narrative Text
Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	
Deliver educational activities addressing asthma management to participating primary care providers.	
Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	
Use EHRs or other technical platforms to track all patients engaged in this project.	

Milestone Review Status

Milestone #	Review Status	IA Formal Comments
Milestone #1	Pass & Ongoing	
Milestone #2	Pass & Ongoing	
Milestone #3	Pass & Complete	
Milestone #4	Pass & Ongoing	
Milestone #5	Pass & Ongoing	



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✓ IPQR Module 3.d.iii.4 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Mid-Point Assessment	



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IPQR Module 3.d.iii.5 - IA Monitoring

Instructions :



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Project 4.b.i – Promote tobacco use cessation, especially among low SES populations and those with poor mental health.

✓ IPQR Module 4.b.i.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

Success with tobacco cessation has not been great historically. ACP anticipates that achieving success in this project will be difficult. ACP recognizes that addictions many times have multifactorial causes including:

1. Culture. Smoking is perceived as "cool" in many cultures and considered acceptable as a recreational tool. Therefore, patients are resistant to quitting for fear of alienation from peers. ACP will overcome this challenge by speaking to patients in a language and culturally relevant manner that the patient can understand and relate to. This will be overcome since ACP has over 2000 physicians who themselves are of the same minority as the patient.
2. Patient Adherence. Patient's acceptance and adherence to treatment plans and follow through will be a challenge. ACP will face this challenge by providing "warm" handoffs of the patient to one of our partners or to an employed counselor. The PPS will address this with increased, culturally sensitive educational efforts, ongoing monitoring and consistent implementation of the tobacco use cessation protocol across providers.
3. Cost. Currently, cessation programs may be expensive and the patient will not follow through for lack of sufficient income. ACP plans to address this challenge by negotiating with relevant MCOs to provide coverage for services and supplies needed in the treatment of tobacco addiction.
4. Monitoring. Another key challenge will be monitoring the metrics with such a large network of providers who have a variety of EHRs or paper documentation processes. We will establish a data warehouse to collect, store, and analyze data across these provider sources, and are planning a concentrated effort to expand EHR use across all providers.



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✅ IPQR Module 4.b.i.2 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone Data Analysis	In Progress	Analyze CNA results to understand prevalence of tobacco use in specific areas.	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 1 Identification of Hotspots	Completed	1 Analyze CNA data to determine "hotspots" (areas of highest incidence of tobacco use)	04/01/2015	09/30/2015	04/01/2015	09/30/2015	09/30/2015	DY1 Q2
Task 2 Complete Analysis	Completed	2 Complete analysis of CNA to identify resources within the "hot spot"	10/01/2015	12/31/2015	10/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Community Health Workers	In Progress	3 Hire and train community health workers of the language and culture of the hot spot population served to provide outreach and promotion to populations underserved by most mass outlets and provide various degrees of engagement (large events, small group, etc).	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone Develop and Implement Tobacco Use Cessation Protocol	In Progress	Develop tobacco use cessation protocol and deploy to providers within PPS.	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Develop Evidence Based Protocols	Completed	1 Develop and implement evidence based protocols for assessing tobacco use and implementing tobacco use cessation therapies working in conjunction with physician leads and in accordance with NIH guidelines.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Disseminate Protocols with Providers	In Progress	2 Distribute protocols and procedures at physician engagement meetings, Care team meetings, electronically and utilizing provider engagement teams.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone Educational Campaign	In Progress	Develop and implement educational campaign and protocols for ACP providers	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Protocol Implementation	Completed	1 Utilize provider engagement team to provide on-site training and education at individual practices on implementing of protocols and procedures for assessing and treating tobacco use.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 2 Promote Use of EHR	In Progress	2 Promote amongst ACP's partners a workflow that includes the use of tobacco use assessment tools specifically the 5 A's incorporating the assessment tool into the EMR	04/01/2015	03/31/2017	04/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 3 Implement Treatment Plan	Completed	3 Providers implement treatment plans in accordance with evidence based protocols for tobacco use cessation intervention	09/30/2015	12/31/2015	09/30/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone Engage MCOs Regarding Benefit Package	In Progress	Initiate tobacco reimbursement and benefit negotiations with MCO.	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task	In Progress	1 Analyze tobacco use costs to healthcare, including costs associated with	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
1 Data Analysis		all secondary effects of tobacco, precipitation of disease, aggravation of disease.						
Task 2 Engage MCOs	Completed	2 Leverage relationships and partnerships between MCOs and physicians and physician groups to bring to the table high level administrators to negotiate coverage of evidence based treatments at no cost to the patient.	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Task 3 Present Cost Analysis	In Progress	3 Present cost analysis and ROI for early intervention and cost of tobacco cessation treatment including treatment that is pharmaceutical and /or cessation counseling. Utilize analysis results to determine initiatives from incentives to outreach support.	07/01/2016	12/31/2016	07/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 4 Partnership Strategies	In Progress	4 Use community health workers and community resources, pharmaceutical companies, MCOs and others to negotiate patient incentives for adherence to tobacco cessation programs and treatment plans and for successful attainment of goals.	07/01/2016	12/31/2016	07/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone CBO Support and Resources	In Progress	Seek out and establish a network of community-based support resources.	04/01/2015	12/31/2016	04/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 1 Identify Key Providers and Support Agencies	Completed	1 Identify key contacts at and establish partnerships with local government and community based organizations that have established, proven track record in promoting tobacco use cessation. Such entities include NYQUITS, local community daycare and social centers, churches, schools. etc. to promote healthy lifestyle and tobacco free zones.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 2 Educational Materials	In Progress	2 In conjunction with physician leads, tobacco cessation champions, clinical quality committees develop educational materials in several languages and culturally appropriate manner educating patients on tobacco use and its effects and detriment to health at primary and secondary exposure. Educational materials will be shared with key providers and other support agencies.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone Screening and Treatment Campaign	In Progress	Implement population wide screening and treatment of patients with Media campaign with key partners, providers and other support agencies.	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 1 Media Campaign	In Progress	1 With communications team develop "Talk to your doctor about Tobacco" media campaign highlighting tobacco use effects, through primary and secondary exposure, Quit techniques and resources	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 2 Educational Materials	Completed	2 In conjunction with tobacco cessation champion partners such as Jamaica Hospital; Develop educational materials on the effects and consequences of tobacco use.	10/01/2015	03/31/2016	10/01/2015	03/31/2016	03/31/2016	DY1 Q4
Task 3 Disseminate Educational Materials	In Progress	3 Disseminate educational materials via print , visual, audio and electronic media. Utilize community health workers and CBOs to disseminate materials within the communities.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 4 Engage Media Outlets to Increase Effectiveness	In Progress	4 Leverage established relationships with key providers and stakeholders. Partner with New York City organizations which are already providing	04/01/2016	12/31/2016	04/01/2016	12/31/2016	12/31/2016	DY2 Q3



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
of Existing Campaigns		tobacco use cessation through the media to increase outreach to communities that may not be attentive to them as of now.						
Task 5 Culturally Sensitive Educational Materials	In Progress	5 Ensure that all materials are made available and distributed in the communities in a language and culture that is appropriate and sensitive.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone Care Coordination Plans	In Progress	Develop Care Coordination Plans Using Evidence-Based Protocols As Part of the Integrated Delivery System	04/01/2015	03/31/2018	04/01/2015	03/31/2018	03/31/2018	DY3 Q4
Task 1 Evidence Based Protocols and Assessments	Completed	1 In conjunction with physician leads and in accordance with NCBI and CDC guidelines, Develop Evidence based tobacco cessation protocols which include assessments incorporated into EMR, treatment plans both pharmaceutical treatments as well as cessation counseling.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 2 Disseminate Evidence Based Protocols	Completed	2 Disseminate and Implement evidence based protocols for tobacco use cessation. Physician engagement teams shall deliver and train practices on the use of the protocols and process and procedures contained within.	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 3 Care Coordination Processes	Completed	3 As mandated within protocol, develop processes for care coordination processes for referral and follow up and follow through of services. Develop Back Office/Care Coordination, Care Management teams to receive and follow through in the integrated model of care with completion of referrals/services and link to community resources and social services to assist and provide care for patients as requested by providers.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 Care Team Support	In Progress	4 Structure Care teams to support tobacco use cessation intervention and provide Care Coordinators with appropriate information through ACP's IT platform to support the IDS	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task 5 Determine Success Factors	In Progress	5 Measure effectiveness of care coordination and support. Success of programs will need to incorporate culture of population, ACP will establish processes and educational materials to ensure cultural definitions and images of tobacco use are addressed and corrected. ACP will use whenever possible warm handoffs to specialty services and programs, will prioritize needs and provide ongoing monitoring via the Care Coordination teams and Community Health Workers.	07/01/2015	03/31/2017	07/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 6 Connect to HIE with Provider Network	In Progress	6 Connect via EMR, RHIO, SHINY, ACP IT Platform; all network providers to provide efficient information exchange and expedite services. IT platform will include secure login for information exchange between PPS and community partners without EMRs.	01/01/2016	03/31/2018	01/01/2016	03/31/2018	03/31/2018	DY3 Q4
Milestone Success Factors	In Progress	Include Key Success Factors Within Plan Including Analytics to Determine Effectiveness of Programs	07/01/2016	12/31/2016	07/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 Utilize EMR Data Capabilities Specific to Tobacco Use Cessation Initiative	In Progress	1 Leverage existing EMR meaningful use data mining capabilities to identify, gather information on and target all tobacco users to develop reporting metrics	07/01/2016	12/31/2016	07/01/2016	12/31/2016	12/31/2016	DY2 Q3



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task 2 Establish Reporting Metrics	In Progress	2 Develop algorithm and trending for evaluating success rates based on initial and follow up assessment tool responses. These include number of packs per day, number of cigarettes a day, how long after waking up in the morning, etc. Trending will show increases and decreases that can be used to evaluate care plan effectiveness.	07/01/2016	12/31/2016	07/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 3 Comparative Analytics and Application	In Progress	3 Develop comparison data analytics between data mined from assessment tool responses/by zones (hot spots)/amount of created and disseminated educational resources/ACP partner to establish more population wide effectiveness of programs.	10/01/2016	12/31/2016	10/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone Partnerships with Other PPSs	In Progress	Partner with Other PPSs for Comprehensive Population Health Initiatives	07/01/2015	12/31/2016	07/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 1 PPS Partnerships	In Progress	1 Foster relationships with other PPS leads to discuss efforts being provided in tobacco use cessation.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 2 Shared Campaigns and Initiatives	In Progress	2 Meet with and provide other PPS' assistance and join resources for the creation and dissemination of population wide campaigns and initiatives.	04/01/2016	12/31/2016	04/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 3 Partnerships with City Agencies	In Progress	3 Leverage existing relationship with New York City Department of Health to meet with other PPS' and establish collaborative efforts for city wide campaigns.	07/01/2015	12/31/2016	07/01/2015	12/31/2016	12/31/2016	DY2 Q3
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1

PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
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No Records Found

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Data Analysis	
Develop and Implement Tobacco Use Cessation Protocol	
Educational Campaign	
Engage MCOs Regarding Benefit Package	
CBO Support and Resources	



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PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Screening and Treatment Campaign	
Care Coordination Plans	
Success Factors	
Partnerships with Other PPSs	
Mid-Point Assessment	

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	



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IPQR Module 4.b.i.3 - IA Monitoring

Instructions :



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Project 4.b.ii – Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings (Note: This project targets chronic diseases that are not included in domain 3, such as cancer)

✓ IPQR Module 4.b.ii.1 - Major Risks to Implementation and Mitigation Strategies

Instructions :

Please describe what the major risks are for this project, as well as the actions you plan to take to mitigate them.

ACP recognizes the following risks to this project:

1. Health Literacy. Many PPS patients are of low socio-economic status (SES) and have English as a second language. This leads to gaps in care, since they may not be familiar prevention strategies and lack the economic stability to cover costs. ACP is ready to overcome this challenge in its educational plan to hold population wide campaigns on disease prevention and early detection. Besides the population wide initiatives, ACP providers will follow written protocols for how, when and on whom to perform screening exams as well as whom to provide with preventive care and education. ACP will establish CDSS alerts, run registry reports to send reminders, to provide providers with the tools that they need to engage patients effectively and timely.
2. Provider Culture. Changing the provider internal workflow and culture will be a challenge since new workflows may require more work and more documentation. ACP is prepared to address this using the Support Center to provide on-going training and guidance. Care coordinators and care managers will be available to help facilitate communication and connection between the patient and the providers.
3. Pediatric Patient Engagement. Engaging the parents and educating them in the benefits of vaccination and children about safe sex will be challenging in cultures where there is much taboo around these topics. ACP is prepared to face this challenge by providing education to parents through media, print and engaging the assistance of pharmaceutical companies' expertise in mass education campaigns.
4. Reimbursement. ACP anticipates challenges in patient compliance due to cost. The PPS serves a low income population that cannot absorb the cost of preventive services. ACP will negotiate with MCOs to provide coverage for all preventive services at no cost to the patient as well as with its partners to provide more timely lower cost services. ACP will also establish compliance based incentives for patients such as pink ribbon items, etc.



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✔ IPQR Module 4.b.ii.2 - PPS Defined Milestones

Instructions :

Please provide updates to baseline reporting on status, target dates, and work breakdown tasks for PPS-defined milestones.

Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Milestone CNA Analysis	Completed	<p>ACP analyzed CNA data to understand prevalence of diseases in particular areas. It is developed to achieve primary goal of chronic disease prevention, early detection of chronic disease and early intervention. ACP has the following protocol targets:</p> <ul style="list-style-type: none"> - Colon Cancer: Colorectal cancer screenings through fecal occult blood yearly, colonoscopy for both sexes at and after 50, every 5 years if negative, and yearly if positive findings are encountered - Breast Cancer: Promote and educate on periodic breast self-exams, provide Mammogram after age 40, every year - Prostate Cancer: Rectal prostate exam at and after age 50, yearly and/or PSA levels - Cervical Cancer: Pap Smears yearly - Lung Cancer: CT scan yearly for smokers - Hepatitis B and C: Safe Sex education and vaccination - HPV: Vaccination promotion for females ages 11 to 26 and males 11-21 -Promote other vaccinations in both children and adults as prescribed by CDC such as Pneumonia, Measles, etc. <p>CNA data indicates an opportunity for optimal cancer management, preventative care and screening protocols. ACP will expand current programs and leverage strengths to respond to these challenges and to meet the project requirements. ACP created a funds model to provide PPS partners with funding to implement high-quality protocols to address gaps in screening and disease management. ACP will use the broad network of providers to provide more education and assist the patient to gain access to preventive services available within their community. This will include collaboration with community-based organizations (CBOs) to identify locations and resources to best meet the needs of patients. MCO discussions will be broadened to include identification of additional reimbursement models for disease management.</p>	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Task 1 Identify Hotspots	Completed	1 Complete analysis of CNA results to identify "hot spots" of high prevalence of diseases such as Cancer and Hepatitis	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task 2 Resources Within Hotspots	Completed	2 Complete analysis of CNA to identify resources within the "hot spot"	04/01/2015	12/31/2015	04/01/2015	12/31/2015	12/31/2015	DY1 Q3
Milestone Evidence Based Protocols	Completed	Create and implement evidence based protocols for prevention and screening for Chronic diseases.	04/01/2015	06/30/2016	04/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 1 Develop Protocol	Completed	1 In conjunction with physician leads and in accordance with national standards develop protocol for screening, educating and providing preventive care to target population.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 2 Protocol Criteria	Completed	2 Protocols will stipulate criteria on how, when and on whom to perform screening exams as well as whom to provide with preventive care and education.	04/01/2015	06/30/2015	04/01/2015	06/30/2015	06/30/2015	DY1 Q1
Task 3 Achievement of Goals	Completed	3 Care Teams and Clinical Quality Committees will review protocol and for compliance with specified ACP project goals in accordance with American Cancer Society and CDC Recommendations: -Colon Cancer: Colorectal cancer screenings through fecal occult blood yearly, colonoscopy for both sexes at and after age 50, every 10 years if negative -Breast Cancer: Promote and educate patient on periodic Breast self exams, and provide Mammogram after age 40, every year and every 2-3 years for women in their 20's and 30's -Prostate Cancer: Starting at age 50, providers should talk to the patient about the pros and cons of testing so they can decide if testing is the right choice for them. For African American men or those who have a father or brother who had prostate cancer before age 65, this talk should start at age 45. If patient agrees to testing, then PSA test and/or Rectal prostate exam shall be performed. -Cervical Cancer: Pap Smears every 3 years -Lung Cancer: CT scan for those who are at high risk of lung cancer due to cigarette smoking. If all of the following: 55 to 74 years of age, In fairly good health, has at least a 30 pack-year smoking history AND is either still smoking or has quit smoking within the last 15 years -Hepatitis B and C: Safe Sex education and Hep B vaccination -HPV: Vaccination promotion for females ages 11 to 26 and males 11-21 -Promote other vaccinations in both children and adults as prescribed by CDC such as Pneumonia, Measles, etc	07/01/2015	06/30/2016	07/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone Target Population	In Progress	Understand Target Population for Engagement	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 1 CNA Population Trends	Completed	1 Drill down CNA results to identify patterns and trends amongst populations. CNA data will be analyzed on algorithms matching neighborhood, culture, ages, immigrant status, primary language, ethnic	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
		background to the receipt of preventive services and to disease prevalence.						
Task 2 Employ Community Health Workers (CHW)	In Progress	2 Employ Community Health Workers from the communities identified that understand the language and culture. CHWs will be used by ACP to outreach to the population for general outreach and promotion of preventive care.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 3 Community Based Organizations	Completed	3 Identify specific areas of concern and need and utilize community organizations to assist in outreach and development of culturally sensitive educational materials.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 CBO Agreements	Completed	4 Establish service agreements with CBOs within the target communities to provide care, services and bridge gaps in care.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 5 Registries to Target Non-Compliant Population	In Progress	5 Utilize physician EMR registries to target patients who have not had or missed preventive services such as Mammograms, vaccinations, colorectal screenings, etc. This data will be used by ACP, CHWs, CBOs and other outreach staff to ensure patients are connected with their physicians for preventive services.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone Leverage Existing Resources	In Progress	Leverage Existing Resources to Promote Preventive Health	10/01/2015	09/30/2017	10/01/2015	09/30/2017	09/30/2017	DY3 Q2
Task 1 Engage Medical Societies and Other Community Stakeholders	Completed	1 Establish relationships and work with American Cancer Society, NYC DOH, American Academy of Pediatrics, Community Stakeholders, and Pharmacology Companies on enhancing care and providing population wide educational campaigns on chronic disease prevention.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 2 Care Coordinator and CHW Patient Outreach	In Progress	2 Employ care coordinators and community health workers to reach out to patients identified through registries and connect them with PCP and preventive care providers and services.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 3 Engage With CBOs	Completed	3 Identify and establish agreements with community-based organizations (CBOs) to access locations and resources to best meet the needs of patients in providing services and educational campaigns and bridge gaps in care and resources.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 4 CBO Education and Outreach	Completed	4 Leverage agreement with CBOs to provide language and culture appropriate information and service to target patients.	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 5 MCO Engagement for Incentive Models	In Progress	5 Establish or enhance reimbursement and incentive models with partners and MCOs to increase delivery of high-quality chronic disease prevention and management services. For those services not covered by MCO benefit package, review options regarding 'Services Not Covered' portion of DSRIP budget.	10/01/2016	09/30/2017	10/01/2016	09/30/2017	09/30/2017	DY3 Q2
Milestone Establish Formal Preventive Care Model	Completed	Negotiate and establish processes in which PPS partners offer recommended clinical preventive services at PPS network sites and connect patients to community-based preventive service resources.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Task 1 Outreach via Community Service Events	Completed	1 Establish agreements with and assist PPS partners in incorporating prevention agendas into hospital community service plans and events within each physician specialty which will in turn work in an integrated fashion with community based preventive services.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 2 Deploy Outreach via Community Service Events	Completed	2 Incorporate Prevention Agenda goals and objectives into hospital Community Service Plans, and coordinate implementation with local health departments and other community partners.	01/01/2016	06/30/2016	01/01/2016	06/30/2016	06/30/2016	DY2 Q1
Milestone Use of EHRs for Clinical Decision Support	In Progress	Adopt and use certified electronic health records, especially those with clinical decision supports and registry functionality.	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Clinical Decision Support System (CDSS) and Patient Registries to Identify and Target Patients	Completed	1 Utilize EMRs to establish CDSS alerts, run registry reports to send reminders, to provide providers with the tools that they need to engage patients effectively and timely.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 2 Establish Workflow Steps on Patient Engagement	Completed	2 Set periodicity for sending recalls and reminders to patients for preventive and follow-up care, and identify community resources available to patients to support disease self-management	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Milestone Medical Home or Team Based Care Models	Completed	Adopt medical home or team-based care models.	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 1 Care Team Based Model	Completed	1 Create a care team based model to ensure whole-person preventive care to patient. Care teams are regional providers who will clinically integrate to deliver care. The PPS will provide administrative support such as care coordination and care management to ensure care teams, physicians and patients are engaged.	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Task 2 Deploy Care Team Based Model	Completed	2 Build on care team structure, and work through community and provider engagement teams to strengthen and expand our existing network of medical homes.	10/01/2015	09/30/2016	10/01/2015	09/30/2016	09/30/2016	DY2 Q2
Milestone Clinical Benchmarks	In Progress	Establish and provide feedback to clinicians around clinical benchmarks.	01/01/2016	12/31/2017	01/01/2016	12/31/2017	12/31/2017	DY3 Q3
Task 1 Align Incentives	In Progress	1 Align incentives with delivery of preventive care as well as outcomes.	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1
Task 2 Establish Performance Metrics	In Progress	2 Establish performance metrics to be used for monitoring adherence to protocols and procedures as well as performance. Metric shall include CPT codes obtained from claims data sources such as salient, MCOs denoting procedures performed and billed for comparison data analytics, and data pulls from EMR patient registry data and PCMH and MU level data regarding resulted screenings and vaccinations.	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1
Task 3 Establish Monthly Meetings to Understand Performance	In Progress	3 As per ACP governance structure, establish monthly monitoring on all performance measures for project-specific goals. Create reports to distribute to providers to tie performance to desired outcomes.	03/01/2016	06/30/2017	03/01/2016	06/30/2017	06/30/2017	DY3 Q1
Milestone	In Progress	Reduce or eliminate out-of-pocket costs for clinical and community	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1



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Milestone/Task Name	Status	Description	Original Start Date	Original End Date	Start Date	End Date	Quarter End Date	DSRIP Reporting Year and Quarter
Address Out of Pocket Costs for Patients for Preventive Services		preventive services. The PPS is already working with MCOs in enhancing coverage for preventive services						
Task 1 Engage with MCOs	In Progress	1 PPS will negotiate with partner MCOs in enhancing coverage for preventive services. Leverage existing relationships with MCOs to open discussions regarding broadening the scope of services covered to include additional preventive care services such as vaccines at no cost to patient.	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1
Task 2 Engage with Pharmaceuticals	In Progress	2 PPS to negotiate with pharmaceutical companies to provide incentives to patients for compliance, for example providing cost reduction, copay and/or coinsurance assistance for vaccinations.	01/01/2016	06/30/2017	01/01/2016	06/30/2017	06/30/2017	DY3 Q1
Milestone Care Coordination Plans	In Progress	Develop Care Coordination Plans Using Evidence-Based Protocols As Part of the Integrated Delivery System	10/01/2015	03/31/2017	10/01/2015	03/31/2017	03/31/2017	DY2 Q4
Task 1 Establish Centralized Care Management System	In Progress	1 Establish a centralized Care Management system that will have Care Managers, Care Coordinators, Educators and Social Workers and incorporate many aspects of the Medical Home/Team-Based Models.	10/01/2015	12/31/2016	10/01/2015	12/31/2016	12/31/2016	DY2 Q3
Task 2 Use Centralized CM System for Care Coordination	Completed	2 Utilize the centralized Care management system to coordinate care across the expansive integrated network of specialty, social services providers, and community stakeholders to ensure all stakeholders participate in the care and compliance of the patients. ACP will also leverage MediSys experienced network of PCMH clinics and expand that model to other areas of the PPS.	10/01/2015	06/30/2016	10/01/2015	06/30/2016	06/30/2016	DY2 Q1
Task 3 Centralized System IT	In Progress	3 Integrate Care management as part of IT solution which includes centralized functions, workflows that incorporate the protocols and effective communication channels between partners.	01/01/2016	03/31/2017	01/01/2016	03/31/2017	03/31/2017	DY2 Q4
Task 4 System Training	In Progress	4 Provide proper training and education to the workforce to ensure processes are followed and included within partner organizations' workflows.	07/01/2016	03/31/2017	07/01/2016	03/31/2017	03/31/2017	DY2 Q4
Milestone Partnerships with Other PPSs	In Progress	Partner with Other PPSs for Comprehensive Population Health Initiatives	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 1 Establish PPS Partnerships	In Progress	1 Identify key personnel in surrounding PPS' and set up negotiations and collaboration/partnerships structure with all PPS' in ACP's geographical area.	01/01/2016	12/31/2016	01/01/2016	12/31/2016	12/31/2016	DY2 Q3
Task 2 Develop Shared Initiatives	In Progress	2 Develop and deploy shared initiatives for each PPS that focus on preventive services.	04/01/2016	12/31/2016	04/01/2016	12/31/2016	12/31/2016	DY2 Q3
Milestone Mid-Point Assessment	Completed	Project narrative	04/01/2016	06/30/2016	04/01/2016	06/30/2016	06/30/2016	DY2 Q1



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PPS Defined Milestones Current File Uploads

Milestone Name	User ID	File Type	File Name	Description	Upload Date
Leverage Existing Resources	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1365_OTH_4bii_4.4_ACP_Chronic_Disease_Prevention_CBO_List_7671.xlsx	4bii 4.4 ACP Chronic Disease Prevention CBO List	10/31/2016 07:10 PM
Medical Home or Team Based Care Models	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_Population_Health_1.13_ACP_Population_Health_Roadmap_7884.docx	Population Health 1.13 ACP Population Health Roadmap.docx - Remediation File	12/15/2016 11:36 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_Clinical_Integration_M2_-_CQC_Meeting_Template_7883.xlsx	Clinical Integration M2 - [CQC] Meeting Template.xlsx - Remediation File	12/15/2016 11:35 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_Physician_Engagement_and_Care_Coordination_Training_and_Meeting_Schedule_7882.xlsx	Physician Engagement and Care Coordination Training and Meeting Schedule.xlsx - Remediation File	12/15/2016 11:35 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_PCMH_Roadmap_2016_03_26_v1.1_7881.docx	PCMH Roadmap 2016 03 26 v1.1.docx - Remediation File	12/15/2016 11:34 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_IT_Reporting_Roadmap_2016_02_06_v1.2_7880.docx	IT Reporting Roadmap 2016 02 06 v1.2.docx - Remediation File	12/15/2016 11:34 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_4bii_IDS_Roadmap_Addressing_Care_Coordination_7879.docx	4bii IDS Roadmap Addressing Care Coordination.docx - Remediation File	12/15/2016 11:33 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_4bii_Care_Coordination_Strategy_7878.docx	4bii Care Coordination Strategy.docx - Remediation File	12/15/2016 11:33 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_4bii_7.1-7.2_ACP_Care_Team_Meeting_Sign_In_Sheet_7674.pdf	4bii 7.1-7.2 ACP Care Team Meeting Sign In Sheet	10/31/2016 07:17 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_4bii_7.1-7.2_ACP_Care_Team_Meeting_Referral_Sign_In_Sheet_7673.pdf	4bii 7.1-7.2 ACP Care Team Meeting Referral Sign In Sheet	10/31/2016 07:15 PM
	jd593813	Other	25_DY2Q2_PROJ4bii_MDL4bii2_PPS1368_OTH_4bii_7.0-7.2_ACP_Chronic_Disease_Prevention_PCMH_Memo_7672.docx	4bii 7.0-7.2 ACP Chronic Disease Prevention PCMH Memo	10/31/2016 07:14 PM

PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
CNA Analysis	



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PPS Defined Milestones Narrative Text

Milestone Name	Narrative Text
Evidence Based Protocols	
Target Population	
Leverage Existing Resources	
Establish Formal Preventive Care Model	
Use of EHRs for Clinical Decision Support	
Medical Home or Team Based Care Models	
Clinical Benchmarks	
Address Out of Pocket Costs for Patients for Preventive Services	
Care Coordination Plans	
Partnerships with Other PPSs	
Mid-Point Assessment	

Module Review Status

Review Status	IA Formal Comments
Pass & Ongoing	The IA recognizes the completion of the Milestone: Medical Home or Team Based Care Models



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IPQR Module 4.b.ii.3 - IA Monitoring

Instructions :



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Attestation

The Lead Representative has been designated by the Primary Lead PPS Provider (PPS Lead Entity) as the signing officiate for the DSRIP Quarterly Report. The Lead Representative has the authority to complete this attestation on behalf of the PPS network. The Lead Representative and PPS Lead Entity are responsible for the authenticity and accuracy of the material submitted in this report.

The Lead Representative of the Performing Provider System (PPS) must complete this attestation form in order for the project application to be accepted by the NYS Department of Health. Once the attestation is complete, the Quarterly Report will be locked down from any further editing. Do not complete this section until the entire Quarterly Report is complete.

If the Quarterly Report becomes locked in error and additional changes are necessary, please use the contact information on the Home Page to request that the Quarterly Report be unlocked.

To electronically sign this Quarterly Report, please enter the required information and check the box below:

I here by attest, as the Lead Representative of the 'Advocate Community Providers, Inc. ', that all information provided on this Quarterly report is true and accurate to the best of my knowledge, and that, following initial submission in the current quarterly reporting period as defined by NY DOH, changes made to this report were pursuant only to documented instructions or documented approval of changes from DOH or DSRIP Independent Assessor.

Primary Lead PPS Provider:	TALLAJ RAMON MODESTO MD
Secondary Lead PPS Provider:	
Lead Representative:	Mario Paredes
Submission Date:	12/28/2016 02:20 PM

Comments:



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Status Log				
Quarterly Report (DY,Q)	Status	Lead Representative Name	User ID	Date Timestamp
DY2, Q2	Adjudicated	Mario Paredes	mrurak	12/30/2016 11:51 AM



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Comments Log			
Status	Comments	User ID	Date Timestamp
Adjudicated	The PPS DY2, Q2 Quarterly Report has been adjudicated by the Independent Assessor.	mrurak	12/30/2016 11:51 AM
Adjudicated	The PPS DY2, Q2 Quarterly Report has been adjudicated by the Independent Assessor.	mrurak	12/30/2016 11:51 AM
Returned	The DY2, Q2 Quarterly Report has been returned for remediation.	mrurak	12/01/2016 04:34 PM



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Section	Module Name	Status
Section 01	IPQR Module 1.1 - PPS Budget - Waiver Revenue (Baseline) - READ ONLY	✔ Completed
	IPQR Module 1.2 - PPS Budget - Waiver Revenue (Quarterly)	✔ Completed
	IPQR Module 1.3 - PPS Flow of Funds - Waiver Revenue (Baseline) - READ ONLY	✔ Completed
	IPQR Module 1.4 - PPS Flow of Funds - Waiver Revenue (Quarterly)	✔ Completed
	IPQR Module 1.5 - Prescribed Milestones	✔ Completed
	IPQR Module 1.6 - PPS Defined Milestones	✔ Completed
	IPQR Module 1.7 - PPS Budget - Non-Waiver Revenue (Baseline)	✔ Completed
	IPQR Module 1.8 - PPS Budget - Non-Waiver Revenue (Quarterly)	✔ Completed
	IPQR Module 1.9 - PPS Flow of Funds - Non-Waiver Revenue (Baseline)	✔ Completed
	IPQR Module 1.10 - PPS Flow of Funds - Non-Waiver Revenue (Quarterly)	✔ Completed
	IPQR Module 1.11 - IA Monitoring	
Section 02	IPQR Module 2.1 - Prescribed Milestones	✔ Completed
	IPQR Module 2.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 2.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 2.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 2.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 2.6 - Key Stakeholders	✔ Completed
	IPQR Module 2.7 - IT Expectations	✔ Completed
	IPQR Module 2.8 - Progress Reporting	✔ Completed
	IPQR Module 2.9 - IA Monitoring	
Section 03	IPQR Module 3.1 - Prescribed Milestones	✔ Completed
	IPQR Module 3.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 3.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 3.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 3.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 3.6 - Key Stakeholders	✔ Completed
	IPQR Module 3.7 - IT Expectations	✔ Completed



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Section	Module Name	Status
	IPQR Module 3.8 - Progress Reporting	✔ Completed
	IPQR Module 3.9 - IA Monitoring	
Section 04	IPQR Module 4.1 - Prescribed Milestones	✔ Completed
	IPQR Module 4.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 4.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 4.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 4.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 4.6 - Key Stakeholders	✔ Completed
	IPQR Module 4.7 - IT Expectations	✔ Completed
	IPQR Module 4.8 - Progress Reporting	✔ Completed
	IPQR Module 4.9 - IA Monitoring	
Section 05	IPQR Module 5.1 - Prescribed Milestones	✔ Completed
	IPQR Module 5.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 5.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 5.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 5.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 5.6 - Key Stakeholders	✔ Completed
	IPQR Module 5.7 - Progress Reporting	✔ Completed
		IPQR Module 5.8 - IA Monitoring
Section 06	IPQR Module 6.1 - Prescribed Milestones	✔ Completed
	IPQR Module 6.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 6.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 6.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 6.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 6.6 - Key Stakeholders	✔ Completed
	IPQR Module 6.7 - IT Expectations	✔ Completed
	IPQR Module 6.8 - Progress Reporting	✔ Completed
		IPQR Module 6.9 - IA Monitoring
Section 07	IPQR Module 7.1 - Prescribed Milestones	✔ Completed



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Section	Module Name	Status
	IPQR Module 7.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 7.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 7.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 7.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 7.6 - Key Stakeholders	✔ Completed
	IPQR Module 7.7 - IT Expectations	✔ Completed
	IPQR Module 7.8 - Progress Reporting	✔ Completed
	IPQR Module 7.9 - IA Monitoring	
Section 08	IPQR Module 8.1 - Prescribed Milestones	✔ Completed
	IPQR Module 8.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 8.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 8.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 8.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 8.6 - Key Stakeholders	✔ Completed
	IPQR Module 8.7 - IT Expectations	✔ Completed
	IPQR Module 8.8 - Progress Reporting	✔ Completed
IPQR Module 8.9 - IA Monitoring		
Section 09	IPQR Module 9.1 - Prescribed Milestones	✔ Completed
	IPQR Module 9.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 9.3 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 9.4 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 9.5 - Roles and Responsibilities	✔ Completed
	IPQR Module 9.6 - Key Stakeholders	✔ Completed
	IPQR Module 9.7 - IT Expectations	✔ Completed
	IPQR Module 9.8 - Progress Reporting	✔ Completed
IPQR Module 9.9 - IA Monitoring		
Section 10	IPQR Module 10.1 - Overall approach to implementation	✔ Completed
	IPQR Module 10.2 - Major dependencies between work streams and coordination of projects	✔ Completed
	IPQR Module 10.3 - Project Roles and Responsibilities	✔ Completed



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Section	Module Name	Status
	IPQR Module 10.4 - Overview of key stakeholders and how influenced by your DSRIP projects	✔ Completed
	IPQR Module 10.5 - IT Requirements	✔ Completed
	IPQR Module 10.6 - Performance Monitoring	✔ Completed
	IPQR Module 10.7 - Community Engagement	✔ Completed
	IPQR Module 10.8 - IA Monitoring	
Section 11	IPQR Module 11.1 - Workforce Strategy Spending (Baseline)	✔ Completed
	IPQR Module 11.2 - Prescribed Milestones	✔ Completed
	IPQR Module 11.3 - PPS Defined Milestones	✔ Completed
	IPQR Module 11.4 - Major Risks to Implementation & Risk Mitigation Strategies	✔ Completed
	IPQR Module 11.5 - Major Dependencies on Organizational Workstreams	✔ Completed
	IPQR Module 11.6 - Roles and Responsibilities	✔ Completed
	IPQR Module 11.7 - Key Stakeholders	✔ Completed
	IPQR Module 11.8 - IT Expectations	✔ Completed
	IPQR Module 11.9 - Progress Reporting	✔ Completed
	IPQR Module 11.10 - Staff Impact	✔ Completed
	IPQR Module 11.11 - Workforce Strategy Spending (Quarterly)	✔ Completed
	IPQR Module 11.12 - IA Monitoring	



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2.a.i	IPQR Module 2.a.i.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 2.a.i.2 - Prescribed Milestones	✔ Completed
	IPQR Module 2.a.i.3 - PPS Defined Milestones	✔ Completed
	IPQR Module 2.a.i.4 - IA Monitoring	
2.a.iii	IPQR Module 2.a.iii.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 2.a.iii.2 - Patient Engagement Speed	✔ Completed
	IPQR Module 2.a.iii.3 - Prescribed Milestones	✔ Completed
	IPQR Module 2.a.iii.4 - PPS Defined Milestones	✔ Completed
	IPQR Module 2.a.iii.5 - IA Monitoring	
2.b.iii	IPQR Module 2.b.iii.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 2.b.iii.2 - Patient Engagement Speed	✔ Completed
	IPQR Module 2.b.iii.3 - Prescribed Milestones	✔ Completed
	IPQR Module 2.b.iii.4 - PPS Defined Milestones	✔ Completed
	IPQR Module 2.b.iii.5 - IA Monitoring	
2.b.iv	IPQR Module 2.b.iv.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 2.b.iv.2 - Patient Engagement Speed	✔ Completed
	IPQR Module 2.b.iv.3 - Prescribed Milestones	✔ Completed
	IPQR Module 2.b.iv.4 - PPS Defined Milestones	✔ Completed
	IPQR Module 2.b.iv.5 - IA Monitoring	
3.a.i	IPQR Module 3.a.i.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 3.a.i.2 - Patient Engagement Speed	✔ Completed
	IPQR Module 3.a.i.3 - Prescribed Milestones	✔ Completed
	IPQR Module 3.a.i.4 - PPS Defined Milestones	✔ Completed
	IPQR Module 3.a.i.5 - IA Monitoring	
3.b.i	IPQR Module 3.b.i.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 3.b.i.2 - Patient Engagement Speed	✔ Completed
	IPQR Module 3.b.i.3 - Prescribed Milestones	✔ Completed



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	IPQR Module 3.b.i.4 - PPS Defined Milestones	✔ Completed
	IPQR Module 3.b.i.5 - IA Monitoring	
3.c.i	IPQR Module 3.c.i.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 3.c.i.2 - Patient Engagement Speed	✔ Completed
	IPQR Module 3.c.i.3 - Prescribed Milestones	✔ Completed
	IPQR Module 3.c.i.4 - PPS Defined Milestones	✔ Completed
	IPQR Module 3.c.i.5 - IA Monitoring	
3.d.iii	IPQR Module 3.d.iii.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 3.d.iii.2 - Patient Engagement Speed	✔ Completed
	IPQR Module 3.d.iii.3 - Prescribed Milestones	✔ Completed
	IPQR Module 3.d.iii.4 - PPS Defined Milestones	✔ Completed
	IPQR Module 3.d.iii.5 - IA Monitoring	
4.b.i	IPQR Module 4.b.i.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 4.b.i.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 4.b.i.3 - IA Monitoring	
4.b.ii	IPQR Module 4.b.ii.1 - Major Risks to Implementation and Mitigation Strategies	✔ Completed
	IPQR Module 4.b.ii.2 - PPS Defined Milestones	✔ Completed
	IPQR Module 4.b.ii.3 - IA Monitoring	



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Section	Module Name / Milestone #	Review Status	
Section 01	Module 1.1 - PPS Budget - Waiver Revenue (Baseline) - READ ONLY	Pass & Ongoing	
	Module 1.2 - PPS Budget - Waiver Revenue (Quarterly)	Pass & Ongoing	
	Module 1.3 - PPS Flow of Funds - Waiver Revenue (Baseline) - READ ONLY	Pass & Ongoing	
	Module 1.4 - PPS Flow of Funds - Waiver Revenue (Quarterly)	Pass & Ongoing	
	Module 1.5 - Prescribed Milestones		
	Milestone #1 Complete funds flow budget and distribution plan and communicate with network	Pass & Complete	
	Module 1.7 - PPS Budget - Non-Waiver Revenue (Baseline)	Pass & Ongoing	
	Module 1.8 - PPS Budget - Non-Waiver Revenue (Quarterly)	Pass & Ongoing	
	Module 1.9 - PPS Flow of Funds - Non-Waiver Revenue (Baseline)	Pass & Ongoing	
	Module 1.10 - PPS Flow of Funds - Non-Waiver Revenue (Quarterly)	Pass & Ongoing	
Section 02	Module 2.1 - Prescribed Milestones		
	Milestone #1 Finalize governance structure and sub-committee structure	Pass & Complete	
	Milestone #2 Establish a clinical governance structure, including clinical quality committees for each DSRIP project	Pass & Complete	
	Milestone #3 Finalize bylaws and policies or Committee Guidelines where applicable	Pass & Complete	
	Milestone #4 Establish governance structure reporting and monitoring processes	Pass & Complete	
	Milestone #5 Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services, housing providers, law enforcement)	Pass & Complete	
	Milestone #6 Finalize partnership agreements or contracts with CBOs	Pass & Ongoing	
	Milestone #7 Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and mental hygiene, Social Services, Corrections, etc.)	Pass & Ongoing	
	Milestone #8 Finalize workforce communication and engagement plan	Pass & Complete	
Milestone #9 Inclusion of CBOs in PPS Implementation.	Pass & Ongoing		
Section 03	Module 3.1 - Prescribed Milestones		
	Milestone #1 Finalize PPS finance structure, including reporting structure	Pass & Complete	
	Milestone #2 Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	Pass & Complete	



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Section	Module Name / Milestone #	Review Status	
	Milestone #3 Finalize Compliance Plan consistent with New York State Social Services Law 363-d	Pass & Complete	
	Milestone #4 Develop detailed baseline assessment of revenue linked to value based payment, preferred compensation modalities for different provider types and functions, and MCO strategy for the PPS and for facilitating network partner engagement with the MCOs.	Pass & Ongoing	
	Milestone #5 Finalize a plan towards achieving 80% value-based payments across network by year 5 of the waiver at the latest, including efforts to educate PPS network partners on VBP, organizational models to support VBP contracting such as ACOs and IPAs, and to facilitate network partner engagement with MCOs.	Pass & Ongoing	
	Milestone #6 ≥10% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs	Pass & Ongoing	
	Milestone #7 ≥50% of total MCO-PPS payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 8%* (blended for 15% target for fully capitated plans (MLTC and SNPS) and 5% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher	Pass & Ongoing	
	Milestone #8 ≥80% of total MCO payments (in terms of total dollars) captured in at least Level 1 VBPs, and ≥ 20%* (blended for 35% target for fully capitated plans (MLTC and SNPS) and 15% target for not fully capitated plans) of total MCO payments captured in VBPs has to be in Level 2 VBPs or higher	Pass & Ongoing	
Section 04	Module 4.1 - Prescribed Milestones		
	Milestone #1 Finalize cultural competency / health literacy strategy.	Pass & Complete	
	Milestone #2 Develop a training strategy focused on addressing the drivers of health disparities (beyond the availability of language-appropriate material).	Pass & Complete	
Section 05	Module 5.1 - Prescribed Milestones		
	Milestone #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).	Pass & Complete	
	Milestone #2 Develop an IT Change Management Strategy.	Pass & Complete	
	Milestone #3 Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network	Pass & Complete	
	Milestone #4 Develop a specific plan for engaging attributed members in Qualifying Entities	Pass & Complete	
Milestone #5 Develop a data security and confidentiality plan.	Pass & Ongoing		
Section 06	Module 6.1 - Prescribed Milestones		
	Milestone #1 Establish reporting structure for PPS-wide performance reporting and communication.	Pass & Complete	
	Milestone #2 Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	Pass & Complete	
Section 07	Module 7.1 - Prescribed Milestones		
	Milestone #1 Develop Practitioners communication and engagement plan.	Pass & Complete	



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Section	Module Name / Milestone #	Review Status	
	Milestone #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.	Pass & Complete	
Section 08	Module 8.1 - Prescribed Milestones		
	Milestone #1 Develop population health management roadmap.	Pass & Complete	
	Milestone #2 Finalize PPS-wide bed reduction plan.	Pass & Ongoing	
Section 09	Module 9.1 - Prescribed Milestones		
	Milestone #1 Perform a clinical integration 'needs assessment'.	Pass & Complete	
	Milestone #2 Develop a Clinical Integration strategy.	Pass (with Exception) & Ongoing	
Section 11	Module 11.1 - Workforce Strategy Spending (Baseline)	Pass & Complete	
	Module 11.2 - Prescribed Milestones		
	Milestone #1 Define target workforce state (in line with DSRIP program's goals).	Pass & Complete	
	Milestone #2 Create a workforce transition roadmap for achieving defined target workforce state.	Pass & Complete	
	Milestone #3 Perform detailed gap analysis between current state assessment of workforce and projected future state.	Pass & Complete	
	Milestone #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.	Pass & Complete	
	Milestone #5 Develop training strategy.	Pass & Complete	
	Module 11.10 - Staff Impact	Pass & Ongoing	
	Module 11.11 - Workforce Strategy Spending (Quarterly)	Pass & Ongoing	



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Project ID	Module Name / Milestone #	Review Status	
2.a.i	Module 2.a.i.2 - Prescribed Milestones		
	Milestone #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.	Pass & Complete	
	Milestone #2 Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	Pass & Ongoing	
	Milestone #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.	Pass & Ongoing	
	Milestone #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.	Pass & Ongoing	
	Milestone #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.	Pass & Ongoing	
	Milestone #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.	Pass & Ongoing	
	Milestone #7 Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all eligible participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	Pass & Ongoing	
	Milestone #8 Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.	Pass & Ongoing	
	Milestone #9 Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	Pass & Ongoing	
	Milestone #10 Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	Pass & Ongoing	
Milestone #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 appropriate.	Pass & Ongoing		
2.a.iii	Module 2.a.iii.2 - Patient Engagement Speed	Pass & Ongoing	
	Module 2.a.iii.3 - Prescribed Milestones		
	Milestone #1 Develop a Health Home At-Risk Intervention Program, utilizing participating HHs as well as PCMH/APC PCPs in care coordination within the program.	Pass & Ongoing	
	Milestone #2 Ensure all eligible primary care providers participating in the project meet NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH and Advanced Primary Care accreditation by Demonstration Year (DY) 3.	Pass & Ongoing	



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Project ID	Module Name / Milestone #	Review Status	
	Milestone #3 Ensure that all participating safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up.	Pass & Ongoing	
	Milestone #4 Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM.	Pass & Ongoing	
	Milestone #5 Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	Pass & Ongoing	
	Milestone #6 Develop a comprehensive care management plan for each patient to engage him/her in care and to reduce patient risk factors.	Pass & Ongoing	
	Milestone #7 Establish partnerships between primary care providers and the local Health Home for care management services. This plan should clearly delineate roles and responsibilities for both parties.	Pass & Ongoing	
	Milestone #8 Establish partnerships between the primary care providers, in concert with the Health Home, with network resources for needed services. Where necessary, the provider will work with local government units (such as SPOAs and public health departments).	Pass & Ongoing	
	Milestone #9 Implement evidence-based practice guidelines to address risk factor reduction as well as to ensure appropriate management of chronic diseases. Develop educational materials consistent with cultural and linguistic needs of the population.	Pass & Complete	
	Module 2.b.iii.2 - Patient Engagement Speed	Fail	
	Module 2.b.iii.3 - Prescribed Milestones		
2.b.iii	Milestone #1 Establish ED care triage program for at-risk populations	Pass & Complete	
	Milestone #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. c. Ensure real time notification to a Health Home care manager as applicable	Pass & Ongoing	
	Milestone #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 provider).	Pass & Complete	
	Milestone #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.)	Pass & Ongoing	
	Milestone #5 Use EHRs and other technical platforms to track all patients engaged in the project.	Pass & Ongoing	



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2.b.iv	Module 2.b.iv.2 - Patient Engagement Speed	Pass & Ongoing	
	Module 2.b.iv.3 - Prescribed Milestones		
	Milestone #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.	Pass & Complete	
	Milestone #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.	Pass & Ongoing	
	Milestone #3 Ensure required social services participate in the project.	Pass & Complete	
	Milestone #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.	Pass & Ongoing	
	Milestone #5 Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	Pass & Ongoing	
	Milestone #6 Ensure that a 30-day transition of care period is established.	Pass & Complete	
	Milestone #7 Use EHRs and other technical platforms to track all patients engaged in the project.	Pass & Ongoing	
3.a.i	Module 3.a.i.2 - Patient Engagement Speed	Pass & Ongoing	
	Module 3.a.i.3 - Prescribed Milestones		
	Milestone #1 Co-locate behavioral health services at primary care practice sites. All participating eligible primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	Pass & Ongoing	
	Milestone #2 Develop collaborative evidence-based standards of care including medication management and care engagement process.	Pass & Ongoing	
	Milestone #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.	Pass & Ongoing	
	Milestone #4 Use EHRs or other technical platforms to track all patients engaged in this project.	Pass & Ongoing	
	Milestone #5 Co-locate primary care services at behavioral health sites.	Pass & Ongoing	
	Milestone #6 Develop collaborative evidence-based standards of care including medication management and care engagement process.	Pass & Ongoing	
	Milestone #7 Conduct preventive care screenings, including physical and behavioral health screenings.	Pass & Ongoing	
	Milestone #8 Use EHRs or other technical platforms to track all patients engaged in this project.	Pass & Ongoing	
	Milestone #9 Implement IMPACT Model at Primary Care Sites.	Pass & Ongoing	
	Milestone #10 Utilize IMPACT Model collaborative care standards, including developing coordinated evidence-based care standards and policies and procedures for care engagement.	Pass & Ongoing	
	Milestone #11 Employ a trained Depression Care Manager meeting requirements of the IMPACT model.	Pass & Ongoing	
Milestone #12 Designate a Psychiatrist meeting requirements of the IMPACT Model.	Pass & Ongoing		



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Project ID	Module Name / Milestone #	Review Status	
	Milestone #13 Measure outcomes as required in the IMPACT Model.	Pass & Ongoing	
	Milestone #14 Provide "stepped care" as required by the IMPACT Model.	Pass & Complete	
	Milestone #15 Use EHRs or other technical platforms to track all patients engaged in this project.	Pass & Ongoing	
3.b.i	Module 3.b.i.2 - Patient Engagement Speed	Fail	
	Module 3.b.i.3 - Prescribed Milestones		
	Milestone #1 Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	Pass & Ongoing	
	Milestone #2 Ensure that all PPS safety net providers are actively connected to 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 DY 3.	Pass & Ongoing	
	Milestone #3 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.	Pass & Ongoing	
	Milestone #4 Use EHRs or other technical platforms to track all patients engaged in this project.	Pass & Ongoing	
	Milestone #5 Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	Pass & Complete	
	Milestone #6 Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	Pass & Complete	
	Milestone #7 Develop care coordination teams including use of nursing staff, pharmacists, dieticians and community health workers to address lifestyle changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management.	Pass & Ongoing	
	Milestone #8 Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	Pass & Ongoing	
	Milestone #9 Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	Pass & Complete	
	Milestone #10 Identify patients who have repeated elevated blood pressure readings in the medical record but do not have a diagnosis of hypertension and schedule them for a hypertension visit.	Pass & Complete	
	Milestone #11 Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	Pass & Complete	
	Milestone #12 Document patient driven self-management goals in the medical record and review with patients at each visit.	Pass & Complete	
	Milestone #13 Follow up with referrals to community based programs to document participation and behavioral and health status changes.	Pass & Ongoing	
	Milestone #14 Develop and implement protocols for home blood pressure monitoring with follow up support.	Pass & Complete	
	Milestone #15 Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	Pass & Complete	
Milestone #16 Facilitate referrals to NYS Smoker's Quitline.	Pass & Complete		
Milestone #17 Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health	Pass & Ongoing		



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Project ID	Module Name / Milestone #	Review Status	
	Homes for the highest risk population, group visits, and implementation of the Stanford Model for chronic diseases.		
	Milestone #18 Adopt strategies from the Million Hearts Campaign.	Pass & Ongoing	
	Milestone #19 Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	Pass & Ongoing	
	Milestone #20 Engage a majority (at least 80%) of primary care providers in this project.	Pass & Ongoing	
3.c.i	Module 3.c.i.2 - Patient Engagement Speed	Pass & Ongoing	
	Module 3.c.i.3 - Prescribed Milestones		
	Milestone #1 Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	Pass & Ongoing	
	Milestone #2 Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	Pass & Ongoing	
	Milestone #3 Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	Pass & Complete	
	Milestone #4 Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	Pass & Ongoing	
	Milestone #5 Ensure coordination with the Medicaid Managed Care organizations serving the target population.	Pass & Ongoing	
	Milestone #6 Use EHRs or other technical platforms to track all patients engaged in this project.	Pass & Complete	
	Milestone #7 Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	Pass & Ongoing	
3.d.iii	Module 3.d.iii.2 - Patient Engagement Speed	Fail	 
	Module 3.d.iii.3 - Prescribed Milestones		
	Milestone #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.	Pass & Ongoing	
	Milestone #2 Establish agreements to adhere to national guidelines for asthma management and protocols for access to asthma specialists, including EHR-HIE connectivity and telemedicine.	Pass & Ongoing	
	Milestone #3 Deliver educational activities addressing asthma management to participating primary care providers.	Pass & Complete	
	Milestone #4 Ensure coordination with the Medicaid Managed Care organizations and Health Homes serving the affected population.	Pass & Ongoing	
4.b.i	Milestone #5 Use EHRs or other technical platforms to track all patients engaged in this project.	Pass & Ongoing	
	Module 4.b.i.2 - PPS Defined Milestones	Pass & Ongoing	



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Project ID	Module Name / Milestone #	Review Status	
4.b.ii	Module 4.b.ii.2 - PPS Defined Milestones	Pass & Ongoing	IA



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

Providers Participating in Projects

	Selected Projects										
	Project 2.a.i	Project 2.a.iii	Project 2.b.iii	Project 2.b.iv	Project 3.a.i	Project 3.b.i	Project 3.c.i	Project 3.d.iii	Project 4.b.i	Project 4.b.ii	Project
Provider Speed Commitments	DY3 Q4	DY3 Q4	DY3 Q4	DY2 Q4	DY2 Q4	DY3 Q4	DY3 Q4	DY2 Q4			

Provider Category		Project 2.a.i	Project 2.a.iii	Project 2.b.iii	Project 2.b.iv	Project 3.a.i	Project 3.b.i	Project 3.c.i	Project 3.d.iii	Project 4.b.i	Project 4.b.ii	Project											
		Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed	Selected / Committed											
Practitioner - Primary Care Provider (PCP)	Total	936	828	936	828	936	0	936	828	936	828	936	521	936	521	936	828	936	0	936	0	0	0
	Safety Net	622	577	622	577	622	577	622	577	622	577	622	409	622	409	622	577	622	0	622	0	0	0
Practitioner - Non-Primary Care Provider (PCP)	Total	1,321	941	1,321	941	1,321	0	1,321	941	1,321	941	1,321	941	1,321	941	1,321	941	1,321	0	1,321	0	0	0
	Safety Net	435	398	435	398	435	0	435	398	435	398	435	398	435	398	435	398	435	0	435	0	0	0
Hospital	Total	11	7	11	0	11	0	11	7	11	0	11	0	11	0	11	0	11	0	11	0	0	0
	Safety Net	10	10	10	0	10	2	10	10	10	0	10	0	10	0	10	0	10	0	10	0	0	0
Clinic	Total	29	19	29	19	29	0	29	0	29	19	29	19	29	19	29	19	29	0	29	0	0	0
	Safety Net	24	23	24	23	24	23	24	0	24	23	24	23	24	23	24	23	24	0	24	0	0	0
Case Management / Health Home	Total	20	8	20	8	20	0	20	8	20	0	20	8	20	8	20	8	20	0	20	0	0	0
	Safety Net	11	7	11	7	11	7	11	7	11	0	11	7	11	7	11	7	11	0	11	0	0	0
Mental Health	Total	196	123	196	123	196	0	196	0	196	123	196	123	196	123	196	0	196	0	196	0	0	0
	Safety Net	88	85	88	85	88	0	88	0	88	85	88	85	88	85	88	0	88	0	88	0	0	0
Substance Abuse	Total	44	32	44	32	44	0	44	0	44	32	44	32	44	32	44	0	44	0	44	0	0	0
	Safety Net	43	32	43	32	43	0	43	0	43	32	43	32	43	32	43	0	43	0	43	0	0	0
Nursing Home	Total	43	27	43	0	43	0	43	0	43	0	43	0	43	0	43	0	0	0	0	0	0	0
	Safety Net	42	27	42	0	42	0	42	0	42	0	42	0	42	0	42	0	0	0	0	0	0	0
Pharmacy	Total	16	5	16	5	16	0	16	0	16	0	16	5	16	5	16	5	16	0	16	0	0	0
	Safety Net	13	6	13	5	13	0	13	0	13	0	13	5	13	5	13	5	13	0	13	0	0	0
Hospice	Total	6	3	6	0	6	0	6	0	6	0	6	0	6	0	6	0	0	0	0	0	0	0



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Provider Category		Project 2.a.i		Project 2.a.iii		Project 2.b.iii		Project 2.b.iv		Project 3.a.i		Project 3.b.i		Project 3.c.i		Project 3.d.iii		Project 4.b.i		Project 4.b.ii		Project	
		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed		Selected / Committed	
	Safety Net	3	1	3	0	3	0	3	0	3	0	3	0	3	0	3	0	0	0	0	0	0	0
Community Based Organizations	Total	66	15	66	15	66	0	66	15	66	15	66	15	66	15	66	15	66	0	66	0	0	0
	Safety Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
All Other	Total	2,040	1,347	2,040	1,347	2,040	0	2,040	1,347	2,040	1,347	2,040	1,347	2,040	1,347	2,040	1,347	2,034	0	2,034	0	0	0
	Safety Net	1,018	900	1,018	900	1,018	0	1,018	900	1,018	900	1,018	900	1,018	900	1,018	900	1,014	0	1,014	0	0	0
Uncategorized	Total	228	0	228	0	228	0	228	0	228	0	228	0	228	0	228	0	222	0	222	0	0	0
	Safety Net	14	0	14	0	14	0	14	0	14	0	14	0	14	0	14	0	14	0	14	0	0	0
Additional Providers	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Safety Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Additional Project Scale Commitments

Instructions:

Please indicate the scale of the categories below that meet all of the project requirements committed to in the Project Plan Application. Documentation must be submitted in Excel format in the quarter when the PPS provider speed commitments for a particular project are due. This documentation should include the target category(e.g. Medical Villages, Emergency Departments with Care Triage, Community-based navigators, etc.), the project ID(e.g. 2.a.iv,2.a.v,3.a.ii, etc.), and the name of the providers/entities/individuals associated with this project, if applicable.

Project Scale Category	Project	Selected	Committed
Emergency Departments with Care Triage	2.b.iii	0	4

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Price Hobart C Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rella Vincent J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldman Jack Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
De Lara Francisco Arturo	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sencion Sergio M	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Melamed Samuel L Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fernandez Oscar E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Chawla Satish K Pc Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Le Kiong Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Ho-Mau Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pulle Dunston Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chadda Veena Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Agrawal Jugal K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fukilman Ocas Jorge Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karimi Mahmood M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Ishvarbhai S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Amarjit Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chennareddy Swaminathan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Manuel G Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Martha Shih Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bahr Gerald S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brief George Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Bhupendro R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Golestaneh Nasser Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chua Betty A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moise Wesner Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haque Muhammad Mazharul Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kyaw Myint Physician Pc Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lopez Ernesto M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delimon Joseph I Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nukalapati Prasuna R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chung Nakchin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raooof Rebecca G Pc Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Urena Andres F Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Masih Emmanuel B Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kancherla Prakash Surya	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Julian Maximo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Caro Sixto R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lui Sheung Bun Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barcia Rafael G Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
De La Cadena Flor S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bharel Virendra M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
George Jacob V Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



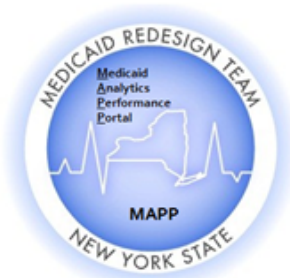
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Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Charles Antoine V Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Maria D Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Yiu Cheung Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thanjan Thresiamma George Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Castanos Dilia M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cho Won Sup Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Castellanos Roman Dario Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hoffman Howard Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yoon Chung Hee Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Priester William D Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz Erlinda S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bunyanich Sommai T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kairam Indira R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jhaveri K Meenakshi	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Scott Stanley Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahuja Rita K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rim An Moo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nicoleau Aryel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choi Sangil Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bizzaro Thomas A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wagner Ira J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahuja Kishore Kanayalal Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grassi Armando E Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hon John Wingsun Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahuja Anita I Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blum Isaac Facs Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aggarwal Om Parkash Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paddu Upadhyaya Padmanabh	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Syalee Jogesh Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohan Santha Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zayat Gabriel G Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laud Sheela G Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramaraju Thippa R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nazarian Habib	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gega Renato Cantada Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mejia Enrique F	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Jothianandan Kanthimathi Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Caldera Aura Corina Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng King Shek Eric Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Melamedoff Gustavo R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheridan Bernadette Lizina Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saint-Laurent Mario	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chung David Ingook Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Go Teresita Alo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Falk Bryan M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Anilkumar Sureshchandra	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carvajal Ruben U Md Pc Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bunyanich Sanga Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ganesh Lalitha Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santana Rita Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karim Rukshana Omar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Jy Ming Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arce Samuel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gillego Azucena Manucdoc Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hwu Charles Joseph	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jerez Jose R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Corpuz Elsa P Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Stanley Bart Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babubhai I Patel Physician Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Norberto Candido Cesar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Baldevbhai V Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boursiquot Jean Robert Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Auguste Jean K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krumholz David Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Nga Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rao Sudha	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mangla Arun Kumar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khanijou Rita Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Rajesh Jayantilal Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malonzo Mario Supan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Syed Ahmad Physician Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choy Lawrence T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Marone Freya Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Griffith-Reece Wendy	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kissin Esther Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinckney Isaiah Howard li Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raince Gurmukh S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ditcheck Alan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Florimon Felix Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mederos Mariano Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reyes-Rigor Rosario H	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lederman Elliot Charles Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berkowitz Israel Steven Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tardio Julio Alberto Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choi Mi Ja Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kintzoglou Alexander Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Rhina Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Espinal Alberto Comas Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alwani Abdulla Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Di Franco Fortunato Santi Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jaes Pablo Hector	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tio Arsenio Miguel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Klein Sherman M	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Woods Kim Benjamin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ng Hung Fai Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Master Kalpana Rashmin	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Featherstone Melvin T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Henoch Avraham Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzales Aurora Laurel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sayad Karim Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Asvinkumar	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Sun Co	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shani Dana Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Decoo Ydelfonso A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alleyne Michael George Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shum Kee Yee Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Konecky Alan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peralta Victor Emilio Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Hernandez Abreu Andres R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hecker Lawrence P Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hon King Chen Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boccardo Daniel A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edwards Wendy S A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Johnson William G Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Villegas Emilio Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haimi Joseph Shayani Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zaman Rehana A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Archbold Maritza Stella Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charnoff Judah Azriel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medvedovsky Mihail Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Sunil C Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nassim Roland Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Baik-Han Won Hee Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roth Alan Robert Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheema Manjit Singh Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edasery Beppy J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vinas Sonia Miliza Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Kabul Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ares Luz Delia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Felix-Peralta Ingrid Ivanna	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Alice K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raof Suhail Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barbery Maria-Pilar	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mpi Catherine Alikor	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gilani Tajammal H Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mazza Michael Anthony Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karibandi Ramakrishna V Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chopra Rajpal S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Sergio A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tapia-Mendoza Juan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Crespo-Gomez Efrain Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perello Robert Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reddy Mallikarjuna D Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cristinoiu Lucia L Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



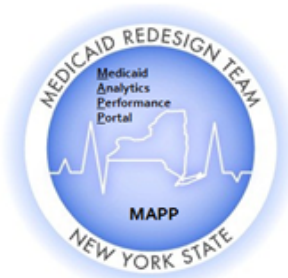
**New York State Department Of Health
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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Valencia Hector Antonio	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garcia-Albarran Carmen M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Benchabbat Abraham A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Carlos A Jr Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lam Kin Yui Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Florimon-Delarosa Hector B Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santangelo Luzviminda S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guzman Damiani Rodolfo W	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chien Kuo Chiang Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nina Ortega Luis Cesar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Modern East West Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Nayankumar A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Lilly M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huey Howard E Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zanger Daniel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lippman Sheldon Bruce Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Norman N Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Albarran Marzan Julio E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hanau Lawrence H Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liriano Octavio Antonio Jr Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moran-Almonte Roberto A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Simons Stephan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Victoria H Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Hispanic Family Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eisenstein Howard Charles Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adler Carl M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lodha Ajay K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gandhi Sneha J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Amarjit Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dave Devang Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nicoleau Carl A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pichardo Jesus Manuel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pignanelli Eduardo L Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Solinas Alessandro Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Thomas Kin-Sim Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soni Sharad	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Rydzewski Mark Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sundaresh Mamatha Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Jenny Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Jose Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chaughtai Khalid Akhtar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tam Kenneth C Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yusuf Fazlul Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Loo Nelly T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haider Qazi Kamal Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmad Laeeq Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Knickerbocker Medical Care Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mitchell Harrison Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Catucci Candida	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ottaviano Paul Gerard Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ozoude Sylvester A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peralte Louis Ludovic Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Williams Lorraine E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rashid Mohammed K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qureshi Pervaiz Iqbal Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Skeivys Saulius J Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Acevedo Mabel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duggirala Rudrama D Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bowen Marc X Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Nilesh R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gebrezgi Sebhatu Tewelde	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Colasacco Joseph A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Chyne C Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Procure Medical Services Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Lourdes	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Estevez Juan T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Yvette A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Siu Singmay Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cabatic Thelma Ocampo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Walker-Adamson Sonia E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronfman Ida Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rozo Alberto L Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Patin Michael	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Panhani Ramkumar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhu Ming Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Kevin N T	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Hung-Sam Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sam Mirela Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mina Bushra Ayad Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adam Muhammad Sanni Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bressner Robert Stuart Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delman Moisey Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pilarte Juan Jose Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samuel Cho Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Losco Donna Marie Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Torres Marino A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ginebra Fernando Arturo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
D'Augustine Jean Mars Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Verna Yves Georges Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldman Adam Y Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Reynaldo G Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Majeed Salamat Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francisco Dalmacio H Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Diner Alan E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nguyen Dustin Triet Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pierre Joseph Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arumugam Thangamuthu R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Byssainthe Paul Harold Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francis Charles Jerome Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung William Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lyo Rosie Yen-Cho Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chung Wendy Wei Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vela Anthony T P J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmad Syed T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fashakin Emmanuel O Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Licht Warren Bret Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frousios Costas Anthony Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Yanfeng Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Gonjon Cheng Antonio Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fulgencio-Delmonte Jose A	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gotlin Andrew D Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Mengjia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gu Xi Freda Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dove Arthur Renner Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Mayank Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
A T Adebayo Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Henry S	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Setru Udayashankar K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liverpool Steven Fitzroy Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Jiansheng	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Oodal Ravichand Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Punsalan Imelda Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Zova Zhuohua Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Alfonso Y	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bilik Ilya V Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Hui Chih Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minutillo John Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khoriaty Florence Fares	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hermogenes Patricia W Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Demoz Abraham Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Banad Sheela Premanath Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Yaoming Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tallaj Ramon Modesto Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zambon Roberto	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jung Josephine O Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hailiu Zuo Physician Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harvey Peter F	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goyal Madhulika Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Angela Mei Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khorets Boris A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flansbaum Bradley Evan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trager Jonathan David K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gold Richard Elliott Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goris Jose Armando Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Reddy Kavitha Dadithota Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alba Juan Andres Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chauhan Sudheer Singh Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hall George Clinton Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gupta Indranil Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Han Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Fu Fu Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trinh Tuyen T Do Pllc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez De Pimentel Nadia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kumar Yogesh Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Burris-Warmoth Patricia R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chakote Jyoti V Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Drepaul Loris Omesh	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Salim-Ortiz Jadiyi Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Petrov Manana Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Charlie Chin-Song Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Uritskaya Faina Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vaccarino Robert A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boccio John S Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Waseem Faisal Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bowers-Johnson Susan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Jian Wei	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Go Eddie Sim Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Castillo Alfredo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fathallah-Mammo Aysar B Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Petryk Grzegorz Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramirez Alvaro Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Nancy S L Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alwani Ayaz	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deng Juliang Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abraham Susan Philips	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hyndman Rhonald	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xu Min Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peichev Mario Atanasov Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Richter Michael	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
W Liangs Medical Office	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Belding Michele Frances	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fung Ngan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Wei Guo Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lao Wilfredo Sy Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Clarke Fred C Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lefevre Cluny P Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reyes Nelton E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Robinson Sandra A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flores-Castillo Edgar A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Zheng-Bo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Battle Jose E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Macenat Jean R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chak Ada Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Lan Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bregman Zachary	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rojas Ana Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spiotta Roseann T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Molnar Thomas	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Jie	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalepu Mallikharjanudu Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shan Zihe Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Hanbin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pimentel Ramon R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rezkalla Laurence L Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moussa Zobidatte Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alla Vijayakumar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sahgal Sumir P Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuo Josephine Y Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Comprehensive Community Pediatrics	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kutnick Richard	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Farhat Samir Ali Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lazala Polanco Carmen Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sabogal Gonzalo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dejoie Marie Chantale	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung-Eng Lucy Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmadi Ladan M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Ravi Venkata Ramana	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Molina Alveris Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amr Nayel Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alcindor Claudia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcdonald Annmarie C Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vladutiu Mihaela I Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nolan Marc A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
First Step Pediatrics Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rosario-Amaro Francisco Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soto-Alcantara Lilliam Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kazmann Luis Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Babu A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
So Agnes Laiping Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olivero Matos Ana Rita Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tu Joseph	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Calliste-Scott Susan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cordice-Ford Candida	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gad Medical Pllc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Israel Roza Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiang Bao En Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tafreshi-Orae Parisa Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Ka Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Xiao-Qing Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Ratilal T Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Yong Kang Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Batoon Sherwin Bumanglag Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qadri Syed S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jing Wuhua	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Almonte Maria Isabel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Rehana Iqbal Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long Ann Yongzhou Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nazir Azra Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Stephen Barnes Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuriyan Blessy George	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cornielle Jorge Luis Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Quijada Reucar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Yu Ann Marie Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Ming Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bundoc Susana Dugang Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sarkar Samir Kanti	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Hita Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Xin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cortes Juan Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lyo Thomas	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Holalkere Rajagopal Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz Alcedo Anselmo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rawal Jagat M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mailian-Oganova Lilia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vijaykumar Sudha Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Benjamin Zibin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abdullah Ghazanfar Syed Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Beekman Karen Press Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Yoojin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Apoeso Taiye Olubunmi Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tetrok Mikhail S Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhavana R Japi Physician Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brown Tyrone Anthony Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Jiong-Ming Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Chun-Kit	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ray-Sen Piyali Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Israel Igor Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shah Sangita Tushar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zilber Nora Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jovellanos Valentin Pardo Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kan Sang Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lam Terry Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Streete Sophia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kevin J Guo Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Farhat Laila Ali Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raza Nadeem Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aguilh-Figaro Toycina	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shusterman Arkadiy Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Huang Qinghong Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Numann Sousan Munim Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bangug Samuel Pio Allado Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Galibov Vyacheslav Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Odnopozova Mariya Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Yan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Chao Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zeng Lingling Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vaz Geraldine Sandra Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metwally Ashraf Ahmed Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Michael Yang Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jimenez Marcial	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiao Marie	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charlotten Kevin Alexander Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Jennifer	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fung Sandy M	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Xiaoxi	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Holly M	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roychoudhury Kanchana Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Petrov Petya Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pena Clotilde B Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shah Tushar Laxmichand Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mo Shengjie	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adeyemo Adenike	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Colon Belkis Arelis Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bolon David Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yacht Andrew Charles Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hughes Reginald D Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zabarskiy Roman Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Asters Dimitrios J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amodio Stefano Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brena M Desai Pediatrician Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khaldarov Yevgeniy Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shi Shelly Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francisco Richard L Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Suleman Rana Javed Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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West Denise	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leers Ella Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramirez-Baron Diana Maria	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Basello Gina M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maslova Alla Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mui Wingtat Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mikhaylov Artur Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mendez Jose Manuel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hana Mervat	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laks David Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Batikov Aleksandr Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wan Soo Lee Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Fei Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hanna Nader Ramses Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Koshy George P Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ilyaev Stella	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raport Miriam R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carreno Jacqueline Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Govind Prashil Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Anjum Naheed Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dhillon Lakhbir	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Avakian David Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dairo Oluwatoyos	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mercedes Betty Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Piacente Dominick N Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiu Karen Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yahodaei Kamran Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Rafael Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hiza Ashley Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Correa Michael Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Hyoseong	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guttal Dakshayani R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shukla Mayank Arun Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aponte Jose Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leviashuili Natela Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Yio Medical Service Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Rahman Mohammad M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reynoso Elsa Sofia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Odoom Ebenezer Kofi Bentum Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rasheed Qaesar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Depaz Javier	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Jean Qingjun Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sung John Hsiyang	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Christine	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jindal Michelle Anne Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mortazavi Shervin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kamenshchikova Marina Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Fausto A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pathak Naveen Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hill Mark A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhu Dening	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Suprin Gregory Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chatterjee Partha P Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Cardiovascular Medicine	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Nelly Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwimmer Joshua Adam Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Haifan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ngai Yi Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Sherry A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sencion Franklin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiangping Gan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chixin Fang Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sahni Gunjeet Mandvi Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chattoo Premetesh Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mercado Agueda Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cai Min	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gamundi-Joaquin Rosa E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soto Maria B	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moarefi Mehran-Reza Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rishe Eric Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tullo Luigi Giovanni Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Family Practice &	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



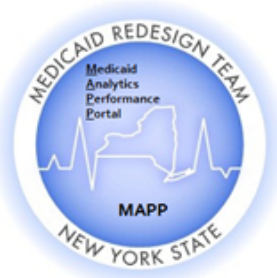
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Participating in Projects												
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Dovnarsky David Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramirez Julio Alberto Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Sanjay Narottambhai Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guseynov Luiza Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bukhman Leonid Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Yuancong Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jafri Yumna Saeeda Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li-Hirashiki Vivian Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bagheri Farshad	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Shuyi	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Jim	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fokas Anastasia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramzan Muhammad Masood	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ponieman Diego Andres Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Adrian Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Checo Yuderqui Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmed Nayaz Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsoumpariotis Apostolis	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minhas Seema Jalil	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thomas Johnny Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Su Amy Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Luisa Altagracia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Yong Jun Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eric Zhou Medical Office Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lim Vivien Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Desir Mergie X Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wou Margaret Lee Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guido Giancarlo R Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Helen	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Yanhan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tokar Svetlana Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz Philip M Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Butt Rahila Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Park Yohan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chabla Juan Francisco Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haque Muhammad Misbah-UI Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Wong Chun Tung Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alvarado-Rivera Jorge V Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hector Holson S Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dudani Bharti Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohseni Haleh G Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Valdivia Martha Maria Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tajian Rosa Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Robin Y C Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patron Maria Yolanda Piamonte Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Freyle Hanna Bathia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohr Christina Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babayeva Natela Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Madhavi Madhurapantula Do	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santana Domingo A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Janny A Ozuna Md Pllc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marte Grecia A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Michael Armine Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dholakia Kush Ravindra Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sinha Ashok	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Henao Joseph	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Damineni Sailaja	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mejia Manuel Eligio Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adeyanju Olufunmilayo Olajumoke Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olayo Alvaro A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marie-Nirva Blaise	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Hua Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perkins Arlene Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Dan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Luis A Rpa	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nemazie Siamack Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinero-Bernardo Shirley J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Virginia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Tina Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rigaud Nathalie	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Jeongwon	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chhipa Mohammad Haroon Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Sudar Singh Prabahar Cynthia Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Palencia David Jose Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hasan Muhammad A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guillen-Santana Roselia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang John Tsihsian Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hidalgo Maria Del Carmen Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Acosta Dalisa J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nwaishienyi Silas E Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dellatto Patricia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haroon Sameera N Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shehigian Aline Ann	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Karen Tin Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Kuan Hung Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tam Cynthia J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teng Rui Er Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barua Aruna Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Das Provat Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Prakashkumar Govindbhai Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Toronjadze Tamar Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jin Yan Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ng Norland Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vladimir Osipov Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fakioglu Esra	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moiz A Hamdani	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Yuchun	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kimyagarova Irina	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yarramreddy Saroja	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cecilia Griselda Calderon Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ferdous Razia Khan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nahar Jebun Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perfetto-Tullo Maria	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaplowitz David	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metzger Benjamin Lowell	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singiri Archana	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Paul	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Md Aticul Islam	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Cheung Helen	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sang Koky	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nancy Han	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Andrea	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rumana Alauddin Rahman	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Domond Jacques	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Uduevbo Jerry Ainene Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aung Kyawt Thandar	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahman Mohammed Matiur Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahern Barbara Ann	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rivera Carmina Ramona N Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cardona Erica	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Graham Robert	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Orlovskiy Aleksandr Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xinmei Li	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saxena Amit K Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
D Oleo Vargas Maximo Jose	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Xian Min Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tin Hui Hing Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cerri Ruben Walter	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ghaffar Tahira Farooqi Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Florence P Golamco	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yan Henry Jiann Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hangjun Jang Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reyes Elsa Jacqueline	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chou Christina Lee Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Levitt Howard Lawrence Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xin Pang	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Emilio Ivan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silva Lourdes G	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Derek Sun	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Korneeva-Vladimirsky Irina Lvovna	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bouallali Hind	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Belliard Christian Arturo Estevez	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pena Pena Yomaris Mercedes Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Springfield Pediatric Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Cheung Sandy	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pin Mei Yao	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Naznin	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jianlin Wu	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paik Woong Ki	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berezovskaya Sabina	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ren Lili Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doshi Kaushik J	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
M & M Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nejati Golali Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rotkowitz Louis Philip Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karayil Ajith	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elbahloul Ossama Abdelkader	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Avany Lucia Victor	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Messer Caroline Korsten	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alfonso A Ortiz	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abedin Jahidul	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacob Sunitha	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Benjamin Wu Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Green Debora	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Akhand Abdul	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rebecca Anne Mazurkiewicz	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Shuk	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohd A Hossain	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alex Bernstein	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Win Yin Yin	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Puttaswamygowda Vishwawanath	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cuidado Medico Y Geriatrico Of Quee	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Velasquez Luis	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Le Jimmy Chung	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chopra Manju Rattan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Seung Hee Kang	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohammed Abdul Wahid	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
General Medical Services Of Queens	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sullivan Erinmarie Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Brian	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Figuroa-Martinez Silkia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhuiyan Rafique Ahmed	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mastan Alina	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elshoff Kathryn	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rafique Bhuiyan Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nguyen Nina Thi	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Burgos Javier P	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sms Medical Services Pllc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Jingbo	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nahar Most L	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Familia Carmen	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tarife Karen	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kang Jun	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dahan Shayna	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ambrose-Flaherty Stephanie	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pantaleo Nicholas	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moreno Fernando	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Borrero Melissa	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Yi Xiu	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mayard Jules	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mesbah Reza	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Awan Khurram Shahzad	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lu Li	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Buzinover Alla B	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Nadine	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wiltshire Veronica	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alwani Salima	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cadet-Valeus Sergelyne	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mallapu Shravan K	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hassid Babak	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Reena J	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jayman-Aristide Razia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spyropoulos Alex C	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yiu John	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hill Tawana	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glenn Christophe	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Dungarani Trushar	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ooi Yen Hoong	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Varghese Betsy	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carreno-Rijo Elizabeth	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jordan Nicole E	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Diaz Angel A	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahman Rounak	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sionov Katie Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jimenez Ramos Farrah Del C	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Feng Yun Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stona Lurline P	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Rosario H Reyes-Rigor Physician	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Mario S Malonzo Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chao Elaine Lynn	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sirya Rosalynn H	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alberto Glendalyz	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Irene	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Sophia Y	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Campusano Clarinelda	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ani Samuel Onyemuwa	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Im Soyoun	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Galanis Tommy	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Meng Hsiang-Chi	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martone Rosanne	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maltez Janet Miraldo	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cao Shimin	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pena-Miches Cervantes Beethoven	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kumar Manish	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiansheng Zhao Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Xiangsheng	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Konig Michael P	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Giannetti Cynthia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Octaviani-Reyes Melba E	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Ji Young	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yanliang Sun	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grageda Melissa R	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Ben-Meir Amos David	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garcia Quinones Saribel	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Talwar Sumit	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sauro Natalie Margaret	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Ya Li	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gao Pei	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jeon Eunjeong	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liao Kevin	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lewis Kamica Lynn	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mathur Jay Simlote	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nienaber Cameron	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olivo-Mercedes Yohanna M	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Shin-Hua	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duda Olha	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boyd Jeremy	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Priyeva Raisa	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tahir Aamira	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gu Kangxia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alleyne Diahann Melvina	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miglino Christine Jane	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krivitskaya Nataliya	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Yuqing	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jo Jihyun	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Paul Edward	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mun Sun Ok	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boxer William Paul	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Muhammad Sanni Adam M D P C	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spadafina Sarah Marie	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Astacio Gustavo J	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Amandeep	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheuk W Lau Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chowdhury Utpal	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
First Step Medical Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cordoba Vargas Sandra Edith	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dontineni Nripen	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Uzor Jennyfer Paola	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Daniels Kathryn Elizabeth	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Andrade Gloria Floresca	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parekh Sejal	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pena Jacobo	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weeks Brandon Michael	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hung Stephanie	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Bennett	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Braunstein Marc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Applewhaite Janelle M	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grace Family Medical Practice Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grand Cornell Cardiology Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raof Nabil Pc Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ashkar John Antonios	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kreuze Jeanette	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Su Yeon	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Francisco Antonio Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vilnits Anatoliy Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Yuqing Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Akbani Mohammed Adnan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Osmani Mohammed Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malamud Enrique Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khandker Ferdous Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kevin N T Lin Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Jack	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hispaniola Medical Care, Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Azra Wiqas Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gao Medical Pllc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Manhattan Pediatric Associates Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Austin Lu Medical Pllc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Beltran Kathleen Gamido	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Herrera-Acevedo Luis O Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Carlos Manuel Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Drukman Liliya Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Yanlun	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chaudhry Muhammad Rafiq Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nazir Ahsan	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Wu Tao	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alvaro Ramirez Physician Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Lei Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Persaud Indrani	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Methodist Hosp	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shah Vinay J Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Byfield Celecia	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Katherine F Zeng Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ghumman Chaudhry Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Yuhe	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Baldevbhai Vithaldas Patel Physician Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Starosta Elena Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Angie Lorena	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jones Shauntay	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Akinboboye Olakunle O	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
139 Medical P.C.	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Remy Prospere Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Armington Kevin John Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aslam Mohammad Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ann Young Medical P.C	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stanley Ng Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harris Michael Eli	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Badin Shadi	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Linetskaya Yelena Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Juan T. Estevez Md Pc	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Himanshu A Md	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sanchez Janet I	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ablan Danilo Nagtalon	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Liwen	Practitioner - Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Hyosol Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karkus Harvey D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wisch Nathaniel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wood Edward T Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Obstbaum Stephen Allan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lopez Juan S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bannerman Alfred C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Kukar Narinder M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pili Manuel R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rana Thakor C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kronzon Itzhak Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deucher Richard S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Chien-Jen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinsker Richard W Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung Ching Sum Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chakrabarti Chhaya Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hammer Arthur W Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Behfarin Parviz Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Dilip Shikharchand Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chirayil John J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Newman Ransford C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allen Theodore Elias Pc Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sy Manuel C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yoon Sei-Oung Richard	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thakore Hasit R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adlersberg Jay B Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Becher Rodney A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stern Harvey Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Quarcoo Stephen T Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grasso Cono M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Epstein Marc C Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen David L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Appleman Warren Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Verrone Anthony Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malhotra Surinder Singh Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bernstein Chaim J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Edwin C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kyriannis Charles Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Komisar Arnold Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sobol Norman J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Allen H Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schabes George A Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Wen C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



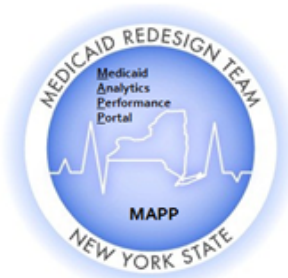
**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Vivek Seetharaman Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lautin Robert Frederic	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Herschitz Izak Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dyrszka Herbert Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dennis Lester	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kitton Stuart E Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Mahendra Chaturbhai Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rand Stephen P	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fishman Allen J Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kopelowitz Wally Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jhaveri Krishna K Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Scharf Stephen Charles Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tenenbaum Moises Marcos Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Ivy Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Milosevic Miliwoje Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Pi Tang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Greenbaum Robert C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cadet Normil Richard Jean Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bogart Sydney David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Oconnell William F Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bangaru Babu S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moulin Louise-Nicole Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mediavillo Rene S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rhee Jai-Jeen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rosen Robert J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sayeed Majeed Ahmed Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bass Sherry J Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Drew Michael S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trasi Sunil S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moideen Ahamed S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bortolussi Mario E Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carpo Minda S Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Depasquale Eugene Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Kenneth W Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shieh Wei Yuan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fajardo Manuel Abrantes	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects													
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii		
Bajaj Deepika Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Malhotra Gulshan Kaur Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Chang Thomas T M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Bamji Dinshaw D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Chowdhry Mohammed Idris	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Kathpalia Kusum Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Hwang Yongkyu Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Gardenswartz Mark H Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Wong Steven Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Stamm Joseph Martin Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Lochard Jean Joseph Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Soden Richard M Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Sekar Surya Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Hobeika Paul Bowlos Elias	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Kahn David I Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Hung Fai Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Schiffer Mark Benjamin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Nimmagadda Nagabhushanam Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Kaphan Mitchell L Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Chung Chin Woo Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Ilkhanizadeh Rahman Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Clerisme Joseph Roosevelt Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Lew Lily Quon Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Fein Alan Marc Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Braunstein Edward Allen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Lustbader Edward Seymour Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Brunckhorst Keith Robert Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Norman Steven Yale Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Dholakia Shashikant Vrajlal	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Chime Chudi G Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Jormark Susan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Tambar Balvir Krishan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Youner Craig J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Useda Claudia A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Sankholkar Deepak M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
Paoli Gloria Rosario Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		



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Antonacci Anthony C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weissman Laurence Roy Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patterson Bentley Lorene Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Levine Randy L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bromley Gary Steven Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gamboa Pilar Sia Mariano Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kabrawala Pratibha Balvant Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwartz Glenn Eliot Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krespi Yosef P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Meltzer Robert M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jeng Ing-Yann Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Solomowitz Benjamin H Dmd	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yoeli Gideon C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Poretsky Leonid Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schreiner Roberta H Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sacks Harry G Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vaval Jean Lionnel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Milford Eugene Paul Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glass David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajput Ashok Kumar Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lisann Neal Michael Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ninan Philip Mohan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Andrew T	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Smith Miriam Ann Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guzman Eliscer Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lk Better Health Medical Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doughlin Kenneth G Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Acevedo Jose A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goodman Allen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Foong Anthony Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bregman Alvin M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Collier K Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Coplan Neil L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Butters Marva Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marcus Sergiu Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spaccavento Colette M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Desai Savitri J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Dipika Dilip Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Disanto Gregory	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Udom Izuka P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kurland Etah Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lechuga Maria Teresa Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roth Ira Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parikh Shobhana Mitesh Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacinto Francisco Gertrude Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cantu Roberto Jr Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Watson Catherin Pace	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Portello Joan K	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwartz Evan G Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzales Antonio M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ko Wilson Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Puma Joseph Anthony Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcinerney James V Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dillon Evan H Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tom Winston Chet Ying Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Seung Kwan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bruder Jack Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schron Deborah S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ilan Hana Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Engel Harry Mark	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perone Robert W Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morisco Antonietta I Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Posner David H Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kapoor Vinay Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuan Jackson Hsun Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Auricchio John Steven Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ward Andrea Maria Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prince Steven Leonard Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barragan Juan Carlos Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Donadt Robert B Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mathews Daniel D Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khanna Suresh Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Crupi Robert S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Altman Daryl Renee Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paul Franck Emmanuel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hirshfield Gary S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carpati Charles Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Inglis Steven Ralph Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malik Sajid Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacobs Allan Joel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mendelson Robert I Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frank Paul Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dominguez-Echevarria Alvaro	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elstein Irwin D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wiedershine Donn Jay Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Hai Po Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Har-El Gady Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shabto Uri R Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ney Gershon C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Seidman David A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grossmann Rami R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Niederland Marta Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Punsal Reynaldo M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fraser Errol	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guniss Gladstone L	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yaryin Llc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schaefer Steven David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lazo Dante Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Palma James Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aranow Cynthia Beth Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saintcyrus Evens	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tartell Jay D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Astiz Mark E Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thaw Emerald M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vuong Chinh Minh Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Avani A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Robert C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Motola Jay A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Escovar Ida Maria	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Asit	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dauhajre Jacqueline Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Taylor Stuart William Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mamdani Yusufali Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Crevecoeur Evans Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Woo Sup Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thurm Craig Alan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hayes Richard M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lowe Teresa Ann Od	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Solomon Robert D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chawla Kiran Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yee Lily Fong Cho Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Smith Robert H Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edmondson Patricia V Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babury Mohammad A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwartz David L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Levine Sander Mark	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rogers Mark I Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ng John Paul Tracy Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lippman Marie Abarientos Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schrier Amilia Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mora Maximo Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz Elizabeth Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Severe Ernst Gerard Marie Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Javit Daniel Joel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Novogrodsky Raphael Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Navedo-Rivera Maria S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
McGinty Geraldine Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roslin Mitchell S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Katari Nagendra Sagar Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Young George P H Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yan Richard X	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Crapotta Joseph A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pou Ricardo E Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shatzkes Deborah R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Micallef Joseph	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Veloudios Alice Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Richard Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalman Jill Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aldana-Bernier Lilian	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Iommazzo Silvestro Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiu William Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edward V Chan Md Pllc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dorsky Joshua I Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paul Evelyne M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Srivastava Malaya Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Storper Ian Sam	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kolodny James R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sanchez Jose Rafael De Leon	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weinman Elizabeth	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parraga-Marquez Monica	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rousseau Monique J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khelemsky Igor Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reimers Carl Dietrich Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Applewhite Liat E	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Westcott Mark A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gondal Nasir Mahmood Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Espino Rodriguez Gagarini Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Freeley Douglas A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Ling Ouyang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean-Bart Robert Y Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schiesel Elaine Leddomado Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maksumova Zoya Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheth Sandip Pranlal Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yukelis Igor Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fretwell Kenneth R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Keith C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Braunstein Richard Evan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lau Christine Y-K Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weseley Peter Eric Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silberman Emil Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Pfefferblit Susanna Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chun Hajoan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Chetankumar P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kartachov Carmen M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abakporo Theophine O Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Varinder P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kwauk Sam Tsung-Ming Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teller Katerina Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pelczar Joseph Vincent Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wolfson Yan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsai Nancy M.D.	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sangeorzan Adrian Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dhar Vinod K Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kern Jeffrey Howard Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Alice Man Ccc-Audiology	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leybel Boris Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chu Peter Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lui Kin W	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marcelonis Debra A Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shif Mark Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Costantino Peter David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marino Nino D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Fermin Pablo Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gerber Marilyn Csw	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alcaide Alejandro Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Knight-Debrady Alicia P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Henry Donna Marie Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Johnston Mark R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kirschenbaum Linda A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Henry Dinh-Khon Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pazur Beverly Ann Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Youngewirth Elizabeth Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reddy Sarath Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wolintz Robyn Joy Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elsberryie Ahmed A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lazzaro Richard Stephen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Kim Back K Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Jeffrey Chi Keung Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Jianping Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalash Glenn Richard Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miller Andrew Robert Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raof Sabiha Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Yoke Hlen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weinberg Jeffrey Mitchell Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Cong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malhotra Shilpa Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teixeira Julio A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lumicao Lorna B Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsoumparriotis Spyros N Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Confident Marie M Lpn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bulsara Girish M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Correa Nereida Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huo Jerry Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sun Deqing Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schiff William M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Klurfeld Alex	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soto Ana Berenice Md Mph	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barile Gaetano R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Young Bryan J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Rajesh Kanubhai Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Towner Robert A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silver Larry Mark Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pachas Yvanka	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ruiz Peter R	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Beinart Clifford Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duvalsaint Fregens G Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Jayendra R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Solomon Robert W Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weiss Reuven Phd	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rubin Andrew Richard	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
De Castro Carlyle Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duran-Soriano Maria E Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Passmore Craig J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Basit Mohammad Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Jimmy Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
De Los Santos Cynthia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiu Sungwai Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Skolnick Blair	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mucelli Louis Alexander	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blanco Grisco	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Meghan P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Winter David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yeung Chung Kiang	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santandreu Orlando	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcintosh James	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kapoor Anil Kany Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haskes Lloyd Partman	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lim Jessica Wong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mercado Arthur M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ho Garman T Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hughes Joan Marie Cnm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Waner Milton Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hsieh Helen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khasak Dmitry Y Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nunez Giovanni M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stearns Alan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
David Marian Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Opam Osafradu Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kong Xiang B Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Felix Raymond Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raymond L Yung Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gottlieb Marc D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fried Ethan D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Azamy Taufiq	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Georges Joseph L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Simon X Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Ian Yeng Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fok Eric Chi-Cheung Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Chester Adam R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Percelay Jack Martin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Romsaitong Panus Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cui Jian Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trepeta Scott S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francois Pierre L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Canellos Harriette	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carter Doreen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Libassi David	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thau Andrea	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marrero-Figarella Arturo L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Del Pin Christina A Md Facs I	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tubens Frances Marilou	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Foster Sharon Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Azar Sasan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Ya Ju Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Machnicki Stephen Craig Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Voli Joseph Fred Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vo Tracy T Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ostrovsky Yakov Pt	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Law Anna Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Opher-Iosifescu Elana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rao Nagaraj Dharmavaram Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ellington Marty Jr Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garcia Sandra Patricia Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Taveras Fernando T	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saint-John Susan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nagpaul Ravinder S Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chu Mark Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parellada Alejo	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zeitoun Khaled Mohamed Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bisangwa Alexis Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brodsky Ella Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Freedman Todd W Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frankel Phoebe	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Samuel C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Tovbina Inna Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bloom Allison Robyn Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Albert Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lu Fong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sylvestre Georges Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nandakumar Thambiraja Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zonenashvili Merabi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharaftkhah Martin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deblois Magdalena Q Rn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ruiz Teresita Dumo Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sultana Sharmeen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tiu Aurora Tompar Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Lisa Palen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pertsovsky Yuriy	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sanikam Sreenivasa Reddy Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuznetsov Valery Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moskowitz Leo	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheflin Marla Sue Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Romsaitong Diane P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xu Richard Li-Cheng	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adebiyi Adelowo Kayode Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jerome Roseline Marie Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Binoy Kumar Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Shi-Wen Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuittinen Tamara Raquel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Mickey Pradeep Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kosmas Constantine Elias Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roayaie Sasan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lam Henry Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wei Huachen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gutnik Zhanna Valerievna Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yeung Vincent Wah-Sang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Serruya Jose Md Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hom David	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsinis Mariya F Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Benoit Vladimir Lusysus Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Zilberstein Olga Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Jay	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dul Mitch	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gundel Ralph	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krumholz David	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Modica Patricia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ritter Steven	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gulati Gagan Jagdish Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lopez Margarita	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stepensky Leon Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deleon Jose L Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang William Cheng Md Phd	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marinbakh Alexander Y Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gorbacz Sheldon Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramessar Daniel Nathaniel Pa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dolin Natalia Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Galperin Mark Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Victoria Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lim Pearl Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teyibo Thomas O Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Peter Shuangwu Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Anam Sadrul M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rathinapandian Francis X Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dayan Alan R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khaimov Daniel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xing-Jie Wang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Josephine Huang Md Pllc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bernik Stephanie Falcone Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Greenblatt Benjamin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nyein Roland Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pramanik Bidyut Kumar Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chusid Boris Gregory Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xu Z Chan Psychiatrist Lic	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gavrilova Svetlana Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Isak Isakov Medical Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhan Frank Lei	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



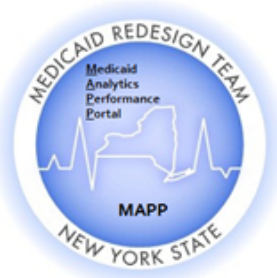
**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

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Participating in Projects												
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Guttenberg Michael Gary Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Alfredo Sicat Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Herskovits Mark Saul Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lo Kim Sing Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flores-Freeth Ingrid E	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamieson Lorraine Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dolen Suleyman E Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dumitru Marian Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carroccio Alfio Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sabzanov Elionora Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Empire Joint And Spine P C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Daniel Chin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Terry Peter G Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edelman Martha J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mashkabova Lyubov Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gheewala Parul A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hershman Elliott B	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mo Lihua Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Romanello Paul P	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Viray Jose F	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Benedicto Maria Theresa Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcgee Colleen Marie Rpa-C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narcisse Joseph Rpa-C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marmer Tracy Seth Rpa-C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schneider Fran Iris	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stein Marjorie Michelle Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hasfal Sharon Yolanda	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bovienzo James D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mintzer Susan H	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delman Alex Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xiao Yong Hong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kowacz Tomasz Wojciech Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charles Eric Lukas Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leifer Gerald Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marcu Mariana Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mallin David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Lopez Manuel D Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramdas Mardai Mariapen Pa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morales Romeo E Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chu Chien-Jung J Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ryu Jae Shin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soberano Consolacio	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maniar Rajen P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olanescu Andrea Despina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malhotra Madhu B Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samadi David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Slade Stella	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hadda Ceri Elizabeth Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ozersky Norman	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Louis Martha Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Chun Ming Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lai Amy Y Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dabovich Ivonne Cnm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Anderson Darlene S Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haque Moinul Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weimin Qu	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glatter Robert David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Beckford Betina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Concepcion Elizabeth Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kirmani Yasmeen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lus Medical Associates Pllc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Saqiba Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alex Santhosh Madathil Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ma Keyan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minior Victoria K	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bover Elina Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hakshouri Shimon R Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fishman Nancy Lynn Np	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pandya Sapna K Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Sangwoo Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Friedrich Douglas Bennett Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Voskoboynik Irina Lcsw	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Liang Lawrence Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Timothy	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Wellman Wai-Man Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Yali Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Simon Gladys	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
C & W Medical Llc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ree June Hisu Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Joyce	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Steinbaum Suzanne Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang David	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Jane A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhou Huan-Sue	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Mary Xiao-Jiang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Nirav Chandrakant Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bai Chun	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalasapudi Vasundhara Devi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ngo Tammy Phuong	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Margarita De Los Angeles Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Ronglan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pamoukian Vicken Nichan Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Steiner Audra	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Andrea	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krumholtz Ira	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montelus Pierre Newton Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lerliche Rose-Marie P Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Katcher Oleg Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rutner Daniella	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yatco Edward John Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yel Zinaida Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ren Sicong	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rivera Gregory A Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Talmatch Bernice	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Luma Gregory Buyanow Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sun Diana K Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montalbano Christin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cuevas Asima	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Mlynarczyk Ewa Monika	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karcnik Gregory Francis	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mashinic Elisabeth	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Jagruti Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long Minhui	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schaefer Mark	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Nancy Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mutyala Manikyam Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Nasrin Akter Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choi Jai Huyk Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Jianjun	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stybel Elena B Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fu Chenzhong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ye Hao Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boockvar John A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Janczuk Peter P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gupta Meenu Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lasic Zoran Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Tina Q Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vaisman Alex Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brown Elaine P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhayani Rajendra Damodar Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Paul Chun-Kit Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yim Ho Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Unger Pamela Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Verceles Caroline	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuang Liren Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Akhter Pervez Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patterson Stacey Ann Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rampersaud Rajendra Mark	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dolmaian Gigliola Maria Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thierman David H	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Zhenqing Brett Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cervantes Lober Guillermo Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allan Sean Thomas	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Wensong	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Stroe Angela	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahman Mohammad Mazibur Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuang Barbara Hwa Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Edwin Kenneth Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhou Sumei Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hoyek Wissam Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Robbins David Herbert Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Estrada Roberto	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Iordache Mihai M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Losier Robert J	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Klein Devin A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chou Yeh Ping Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Badhey Vasantha Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ponieman Barbara L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rimarachin Julio A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Itzhak Petr Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flaminiano Lourdes M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Byrne Kristin Colleen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nisimova Meri Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Bitni Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jen Albert Sun Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Persaud Narendralall	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cooper Joanna Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Larosiliere Sabine Edeline Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Magloire Tamara Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mosu Nicolae Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Carol L	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung Albert Cheuk Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garratt Kirk Noel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stillwell Christina Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Zili	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chopra Jatinder K Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tuccillo Nicole	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bouchard Nicole Colette Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Attaie Ali Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mandalaywala Jasodaben C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Walters Edline V	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brown Elaine Lucille Rn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alatassi Shaza Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ryndin Igor Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Punzalan Betty N Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Neil M Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Wei Ku Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reddy Thulasi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harris-Cobbinah Deborah Np	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mok Victor Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Wah Sang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Myint Win Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yin Xuebin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shmukler Dov Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Premkumar Angel Grace Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Phokela Sarabjit Singh Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Isakova Marina Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Recon-Bucevic Myra	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahsan Mohammad Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Meikle Angela Vanessa Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choi Mark Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ruiz Carlos E Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mao Yongming Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sergeyev Igor Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Turner-Booth Linda	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Lincoln Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sukhraj Gopal Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dai Guorong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Jennifer	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Waite Rulon Jan Li Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhatti Tandeep Kaur Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yunov Arthur Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
John Geevarghese Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Reilly James	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thanneer Latha	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pasquale Deborah	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Persaud Yudhistira K Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Golio Dominick Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Farag Ayman Roushdy Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mason Benjamin F Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajanna Madhu Gundigere Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khrom Tatiana Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kabala Muana Mbuyi Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rhee Michael Sangwook Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jain Suresh P Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barman Trina Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Lisen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
N'Gouamba Rashida B Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rassekhi Hamid Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Danielov Mikhail	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paya Shagupta Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Baker Daniel James Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wee Julie Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chapalamadugu Rajeev Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Atluri Subha Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sulh Muhammadsamir Abedrahman	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Oksana Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shapsis Alexander Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Briley James	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Madama Sukanya Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perk Gila Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Osborne Heather L	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Badalov Isak Y Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sandel Sherri Lynn Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miller Ricardo Anthony	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garrido-Valencia Fanny Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ren Lisa Siqin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gerlach Kecia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Somrov Serge Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ansari Parswa Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gupta Rakesh Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fallahi Pouneh Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Vasquez Luis A Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mazur Justin David Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Addonizio Devon Kimberly Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glass Jessica	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kymissis Carisa Maureen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaman Ghong	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shalonov Artur Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Munibur	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Agarwal Chhavi Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yan-Rosenberg Linli Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Buka Robert Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiu Sungkin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean-Jacques Trevor Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zaric Maja Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Larisa Koifman Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean Carl	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ravelo Ramon E Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sauer Sandra	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Torres Diana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yves Duroseau Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Christopher Chow	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haber Gregory	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yun Jean Shim Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohseni Hossain	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maloratsky Anna	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blokh Ilya	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinkhas Alex	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karantoni Olga	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schleimer Helen Lilli	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
King Donovan Anthony Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laura Amram	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kogan Irina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Skipitaris Nicholas	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Igor Zilberman Dc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Mingke	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sacklow Fred	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Kasat Kavita Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hovanesian Shusha	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ellis Rachel Fremder Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bornstein Eran	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaplan Evan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Swaminath Arun C Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raza Seyed Mohamed Jaffar Ali Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Richard Leno	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lu Xiaochum	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cherenfant Lucot	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bharati Anjali	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khalil Ahmed	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Miguel Rafael Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kukar Atul Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vaynkadler Mark	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Yogita	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Platsman Ninel Rpt	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Desai Ojas Jasubhai Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiang Ming Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sullivan Kevin M Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goltyapina Natalya	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duviella Carole	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yurovitsky Alyssa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Hilda	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zasypayko Sergey	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narasimhan Gopal	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ulyana Khaldarov Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morano Mark	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ken C Wong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dheeraj Khurana Mbbs	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dinabel Peralta-Reich	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nett Michael Patrick	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pearce Katherine	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ding Cheng Yang	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mahadevan Pooja	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yee Vivian See Ki Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Lo Calvin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qiu William Weiguang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Epstein Neal F Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guan Nicholas Ning-Guang Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Antoine T Christina Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reichert James Michael	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samad Rubina Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vele Oana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Matthew William Lorber	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Rekha	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peteru Sachidan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Defreitas Michelle	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tun Kan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stickles Scott Michael Do	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alexander Julie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Peng	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alapati Prameela	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hill Jennifer	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cox Anika Jonnelle	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuriakose Binu Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinto Rohit Ivor Agnel Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sahai Anuraag	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chaudhry Khyzar	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maganov Igor Anatolyevich Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Borawski Dorota Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Grace	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Walker Jennifer	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Nilesh	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Altobell Eva	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Oliver Neville	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldshiteyn Vadim Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Airiani Suzanna	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Matthew S Hepinstall Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Robert Pick Md Mph	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Yuen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shi Zhengzhuan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Saravia Melissa Marie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Averescu Marie Jeanne	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Ting Ting	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stephens Nikeisha Anastacia Rpa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharov Yakov	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laysa Nestor Amon	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pattett Kathreen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mikheyeva Irina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kayaalp Emre	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Udeh Ngozi Julia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xiao Hui Fang	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wahl Samuel Joseph	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Naves-Ruiz Esperanza	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wei Alex	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prachi Sunil Dharia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alizadeh Bajgiran Ahmadreza	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sales Maria	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Susan Sunjung	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lu Irene	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Begum Farhana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lidoshore Karen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hubbard Natalie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xavier Christopher Paul	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lerman Oren Zvi Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grinman Lev	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haines Christine Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Luther Charles William	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohamad Erfani	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmadzadeh Syed Ali	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roshee Tarethia Maitland	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Christina Mannino	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babayev Dina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nemes Petru Codrin Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ann Prokofieva Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carpo Michele	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ung Jannet Jungmin-Shin	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Kennedy Morgan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Degannes Rhonda Ruth	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Xinyu	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Halley Kathleen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph Y Freidman	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Connor Dennis	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Peter	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Louis Martine A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kowalsky Marc Stephen Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Condon Maureen Kathryn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mallik Amara	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narula Tara K Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karen Clemente	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prince Jose Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Rafael A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Jay Anthony	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Mei	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amsalem Yoram	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teresa Min Jung O Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Su A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hazelwood Arthur	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph Cohen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Alkesh Navin	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chacko Jeffrey K	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schulman Erica	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wadia Saloni	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Damian Jeanne	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Holman Anita	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Da	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kapoor Mariela	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean-Baptiste Samuel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kung Elaine F	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehra Sonita	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sood Minisha Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yin June	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shukla Hemangi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Castillo Nicole	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gorodnitskiy Alexander	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wolbeck Steven	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Etienne Stephanie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sotelo-Garza Danilo	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khodabakhsh Kashyar	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lau David Hai-Pong	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guo Yujin	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Klein Pamela	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Udyawar Aparna P	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Doris	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tocco Michael Anthony	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frances G Perez-Hernandez	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morris Rachel Emily	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Waghela Rachana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rizzo Attilio	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcperson Christina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Watts Rakiya	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soohee Stephanie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zimmermann Mark	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Turan Naciye	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schubl Sebastian	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Alexander C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Godbout Brandon J	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fils-Aime Marsha	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Holtzman Dvorah G	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzales Ma Lourdes Castillo	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Preventive Diagnostics Inc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Green Young Sam	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hemli Jonathan Mishali	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cinquegrana Marco	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Michael Rose	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Espeut Nicole	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kezerashvili Anna	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kiouranakis Nikolaos	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Conti Christopher Anthony Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Lata Vivian	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mclean James E	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barnes Heather	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Phelan Jane	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ko Steve Y	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Demko Monika	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kattlene Amedee	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Earle Bridget Ilka	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lubin Aviva	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fontana Gregory Paul	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wakim Wakim Victor	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lindsay N Price	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Motazedi Jody Lynn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Chirag	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Degoy Ana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liotta Dara R	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Taylor Kevia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Attoti Chandana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morales Gustavo Adolfo	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Safri Tabassum	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Thomas	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hasnayan Shahed Mahfuz Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph Pierre L Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Papaevagelon Nikolas	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinter David Michael	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kraus Dennis H	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fong Jason Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blyumberg Yelena	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Park Jinhee	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hamid Faisal	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saint-Hilaire Marlene	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Widmer Jessica Lynn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Howard Siegel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gazi Farhad M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pearson Barry J	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nicolaou Nicos	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Mensah Stacey	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dubos Sheba	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stewart Amanda Patrice	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carter Casimiro Cambi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hasanovic Adnan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Corujo Omar	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abraham Cynthia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mariya Aranbayeva	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahn Myung Cha	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Paul K	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lehman Jennifer C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Markowitz Mindy	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arikupurathu Nisha	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Salvacion Ray Macasil	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheldon Schwartz	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kang Josephine	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paley Deana Edwards	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Leary Xiaoqing Lin	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Iacono Danielle	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yimen Mekeleya	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Voloshin Mario	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Xiao Hui	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sawhney Sabrina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yan Weihong	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mensah Bridget	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gaweda Oskar Adam	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmed Mohamed	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Slitzan Lynn Logan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
El-Khawam Rania	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bachan Moses	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Estefan Bebsy C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cai Steven	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Merriam Zachary	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aziz Tasnia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sebolsky Paul	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Henderson Tina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Berookhim Boback	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stiller Catherine A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kindo-Diouf Azetta	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhojani Shabnamzehra	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malieckal Giles	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amato Peter	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pethani Ashish	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rudden Frances	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Damiano Elena	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nguyen Tracy Thuy	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Briskin Klara	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Frances	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Best Tasby Lugene	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Isanova Zarrina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stasiuk Laura	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kruh Jonathan Nicholas	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Makkawi Abed H	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duchnowski Eva	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silver Joyce	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim So Young	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shin Dong-In	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Maria L	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jung Jesse J	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jainarain Ravela	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jackson-Hodges Chandia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shamalov Gennadiy	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charles-Gonsalves Shurla A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spencer Trudy I	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Davuluri Vijayalakshmi Phanipriyamv	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gomez De Vargas Mencia M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Smith Clive Nicholas	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shankar Adurthy Ananth	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lugo Joanelle	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Osahan Deepinder	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barone Kellie Lynn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ho Vanessa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Yazdanbakhsh Khashayar	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fung-Nicholson Sonia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Golub Ashley D	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tomanelli Toni Ann	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Feuerstein Michael A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pirelli Luigi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Williams Alan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rizvi Syedali Haroon	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Baxi Ami S	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Park Sharon J	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Letafat Kimia C	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gould Jennifer Ann	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hue Jennifer E	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Young Chainllie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jalwan Ajay	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barclay Emanuel J	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rayappa Premalatha	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rosenbaum-Roller Shira	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Ankit	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guy-Rodriguez Eva	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Giaquinto Beth	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Milillo Ralph Anthony	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cutler Alex Jay	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Turner Carol Lolita	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Butt Ahmar Mannan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kahlon Samrina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alexander Anita	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Piotrowski-Philipp Joan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Andrews Robert Anthony	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Linares Alvarenga Francisco	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tierney Patrick	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bustos Emmanuel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kambo Varinder	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shulman Julia Paula	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shugar Julia Ann	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bengeloun Nor Sabah	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Huang Xianchun	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dayani Farsima	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Rachel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Prabhjot	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pandit Ashwini	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hyojeong Lee	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goenka Anuj	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Szu-Yu	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Angie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yushuvayev Eduard	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kilshok Sofya S	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zelmanovich Anat	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zambrana Christian B	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khalil Susan S	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhasin Kabir	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajee Nirmala K	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jagroop Sophia Mita	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pierre Modeline	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hammond Stephen Bemigho	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ionescu Adina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karibandi Karthik	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deleon Renato A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goncharov Dimitry	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ilyas Nazish	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fitzsimmons Sean	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sachdev Karina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Woolward Andrew	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tomback David Adam	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cortijo Grace	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Murphy-Cassidy Delores	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fabunan Maria	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Williams Ayesha Audene	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chee Benjamin Anted	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Michael Jerry	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kermani Sadi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thompson Sharon Y	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Tian Wenping	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Des Jean Ryan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Calabria Diego Gennaro	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chow Philbert	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcfarlene Kirk O	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pamulapati Vidyasagar	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Chuansheng	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jose Giselle Ann P	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yazdan Ari	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dupree Shashonna	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samboy Jazlen Rocio	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lillis Jr Thomas E	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long Michele	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peters Laiza	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cooke David	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Buchanan Mosaes M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yaggy Amanda	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gu Yeon Sook	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Van Orsouw Jillian Suzanne	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brinster Derek Ralph	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moshiri Kourosh	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minaeian Artin	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Richard Kar	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mallios Jenelle L	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blum Corinne E	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dye Colleen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gialvsakis John Peter	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hong Sungsil	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Donath Lisa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prasanth Kaninghat	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bittle Stephanie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rizzo Mariano	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mitchell Kathleen Genevieve	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lewis Rachel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marshall Elizabeth	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sen Kamalendra	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Zimmerman Jason Simon	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zabar Benjamin	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Anderson Todd	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Shruti	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhalla Roopam	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ledwith Allison Patricia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kang Miyoung	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Macri Mirtha J	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schultz Anita Ellieen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paul-Basil Wayne	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joyner Narissa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Stanley	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shim Ruth	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saleem Sabrina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Habib Salma	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eisenberg Rachel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kowalski Rebecca	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tseng Tiffany	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fox Patricia A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pastori Luciano Juan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Salcedo Osiris	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zong Pu	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodrigues Lucan T	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tang Karen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Norris Tracy M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paschal Gehres Megan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goebel Jennifer	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sorokina-Ruffini Yelena	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Date Pravin	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yap Laurel Win	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wanda Rodriguez Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hallenbeck Richard D	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Borowski Allison Marie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moses Danielle Monique	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Sonia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santamaria Grace M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Yin Xiaoqin S	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zapata Sheena M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sohn Bret K	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gorski Matthew Gabriel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsounias Emmanouil	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Fan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jeanmichel Marieange	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Falagarario-Wasserman June	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pineda Diana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Josefina Dr.	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tam Anthony	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Steinway Amy B	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mota Martinez Mercedes	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shankey Katelyn	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Strawn Lauren M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Basharian, Omar	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Balmaceda Casilda Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kam Yi Sheng	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boyd-Mckoy Aleen Marie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Estrella Gerard A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wilson-Bennett Renee	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fischer Maureen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Royes Patrina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arnouk Madhat A	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hayes James	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Smith William	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shridharani Sachin Dr.	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Subotin Inna	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alessandra Pacino	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Daniel Mathews, Dpm	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaplan Donald	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sengupta Trina	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roa Jose Aristides Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cai James	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patrice R Powell	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hamian Kimberly Susan	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Thompson Michael Joel	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Merritt-Morrison Laverne	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leon Jayleen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Becker Linda	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marble Hill Dental Office Pc	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Margarita Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaur Manpreet	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cahill Kevin Dr.	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zuckerman Sarah Danielle	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ulerio Bonilla Ysabel Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deleon Stephen L	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bulnes Victor M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Strouthides Effie	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lim Mi Mi	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chopra Jaideep	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raziyev Jacob	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung Ho Ning	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Esperanza A Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jang Boyoung	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Belliard Greycy Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gomez Ronald H	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Adriana	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
You Lu	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carty Harriet	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tang Abby S	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morales-Diaz Mirza Enid Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laura Prince	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charles Michel-Jose Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kong Jason Szepok Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hill Michelle S	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gupta Rahul M	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Franklin L Dds	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mick Thomas Dr.	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Jinghua Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiang Xiao-Hong	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Davila Nixa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Halkias John Bill Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bakhru Rima Gopal	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rima Ivelisse Mejia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vanessa C. Altube	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Romelus Keshia	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Diaz- Valdez Ariam	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Au Chun Shuen	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pichardo Federico Antonio Pa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Coye Beverly	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ben-Abdallah Sakienah	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wei Lihong Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parikh Manish A Md	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dec Wojciech Dr.	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zeng Liling	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liza Brown-Joseph	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dina Perepelyuk Pa	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Simon Justine R	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haroon Omer Ahmad	Practitioner - Non-Primary Care Provider (PCP)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montefiore Medical Ctr Ai	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Lukes Roosevelt Hsp Ctr	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Calvary Hospital Inc	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldwater Memorial Hosp	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
North Shore Un Hsp Forest Hil	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Med Ctr	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Hsp Med Cnt	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Methodist Hosp	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mount Sinai Hospital	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lenox Hill Hospital	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Barnabas Hospital	Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Help/Project Samaritan Svcs Corp	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Manor Dialysis Ctr Llc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cliffside Renal Dialysis	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perry Ave Family Medical Ctr	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harlem East Life Plan	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medisys Family Care	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harlem Dialysis Ctr	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Montefiore Medical Ctr Ai	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph P Addabbo Family Hlth	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charles B Wang Comm Hth Ctr I	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Lukes Roosevelt Hsp Ctr	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Calvary Hospital Inc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Ctr For Psychotherap	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medical Hlth Research Asc Nyc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samaritan Village Inc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narco Freedom Inc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
University Optometric Ctr	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
North Shore Un Hsp Forest Hil	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Med Ctr	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Hsp Med Cnt	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Methodist Hosp	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mount Sinai Hospital	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lenox Hill Hospital	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Barnabas Hospital	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Heritage Health And Housing, Inc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Dialysis Svcs/Morris Park	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hillside Polymedic D Ant T Ctr	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qsac Inc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vocational Inst Proj Comm Svc	Clinic	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vnsny Community Health Services	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New Horizon Counseling Ctr Mh	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mental Hlth Prov/W Queens Mh	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Omrdd/Goodwill Industries Ny	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Transitional Ser For Ny Mh	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Omrdd/Maranatha Human Svcs-Ta	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Omrdd/Maranatha Human Svcs-Ny	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Help/Psi Aids Adhcp	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aids Ctr Of Queens County Inc	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Health First Phsp Inc	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montefiore Medical Ctr Ai	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narco Freedom Cn Ai	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Outreach Development Corp	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metroplus Health Plan Inc	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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St Lukes Roosevelt Hsp Ctr	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medical Hlth Research Asc Nyc	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Heritage Health And Housing, Inc	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Coordinated Care Partners LI	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qsac Inc	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narco Freedom Cn Ai	Case Management / Health Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sauer Sandra	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maloratsky Anna	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Help/Project Samaritan Svcs Corp	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinkhas Alex	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vnsny Community Health Services	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laura Amram	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sacklow Fred	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hovanesian Shusha	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ravelo Ramon E Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Munibur	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glass Jessica	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Child Center Of Ny	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miller Ricardo Anthony	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Oksana Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paya Shagupta Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Danielov Mikhail	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajanna Madhu Gundigere Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Foundling Hospital, The	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Reilly James	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goodwill Industries Act Rc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Turner-Booth Linda	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fortune Society Inc, The	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reddy Thulasi	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nisimova Meri Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ponieman Barbara L Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Badhey Vasantha Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Estrada Roberto	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allan Sean Thomas	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cervantes Lober Guillermo Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Akhter Pervez Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Mashinic Elisabeth	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Talmatch Bernice	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yel Zinaida Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Margarita De Los Angeles Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalaspudi Vasundhara Devi	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liang Lawrence Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Voskoboynik Irina Lcsw	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Govind Prashil Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kirmani Yasmeen Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Beckford Betina	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hadda Ceri Elizabeth Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malhotra Madhu B Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khaldarov Yevgeniy Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kowacz Tomasz Wojciech Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mintzer Susan H	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roychoudhury Kanchana Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edelman Martha J Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Daniel Chin Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mental Hlth Prov/W Queens Mh	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Isak Isakov Medical Pc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xu Z Chan Psychiatrist Llc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khaimov Daniel Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rathinapandian Francis X Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sanikam Sreenivasa Reddy Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tiu Aurora Tompar Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sultana Sharmeen Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ruiz Teresita Dumo Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frankel Phoebe	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brodsky Ella Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bisangwa Alexis Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harlem East Life Plan	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Taveras Fernando T	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marrero-Figarella Arturo L Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francois Pierre L Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chester Adam R Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Georges Joseph L Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Nunez Giovanni M Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcintosh James	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Meghan P Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blanco Grisco	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Skolnick Blair	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Jimmy Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duran-Soriano Maria E Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weiss Reuven Phd	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ruiz Peter R	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pachas Yvanka	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalash Glenn Richard Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Jianping Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gerber Marilyn Csw	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Fermin Pablo Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shif Mark Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chu Peter Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dhar Vinod K Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Psychiatric Serv Pc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheth Sandip Pranlal Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean-Bart Robert Y Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rousseau Monique J Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aldana-Bernier Lilian	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aids Ctr Of Queens County Inc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Canarsie Aware Inc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Comunilife Mental Health Cl	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lippman Marie Abarientos Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jewish Bd Of Fam Child Svc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Transitional Services/Ny	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wiedershine Donn Jay Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montefiore Medical Ctr Ai	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Halkias John Bill Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paul Franck Emmanuel Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph P Addabbo Family Hlth	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ninan Philip Mohan Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajput Ashok Kumar Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sankholkar Deepak M Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Rtf Childrens Village	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Clerisme Joseph Roosevelt Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Transitional Services For Ny	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bamji Dinshaw D Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New Horizon Counseling Ctr	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Creedmoor Pc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vivek Seetharaman Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Lukes Roosevelt Hsp Ctr	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Ctr For Psychotherap	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hamilton-Madison House,Inc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narco Freedom Inc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arista Ctr For Psychotherapy	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Catholic Charities Neighbhd Svcs	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Child Center Of Ny, The	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metropolitan Ctr For Mntl Hlt	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bleuler Psychotherapy Ctr	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karen Horney Clinic,Inc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long Island Consultation Ctr	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Riverdale Mental Hlth Cl	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Med Ctr	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Hsp Med Cnt	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Methodist Hosp	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mount Sinai Hospital	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lenox Hill Hospital	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Barnabas Hospital	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deucher Richard S Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karkus Harvey D Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lu Xiaochum	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Miguel Rafael Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duviella Carole	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Hilda	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guan Nicholas Ning-Guang Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Matthew William Lorber	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Rekha	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peteru Sachidanan	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Defreitas Michelle	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Alexander Julie	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Walker Jennifer	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Altobell Eva	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Oliver Neville	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Begum Farhana	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Luther Charles William	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kennedy Morgan	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Halley Kathleen	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Connor Dennis	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mallik Amara	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph Cohen	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wadia Saloni	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Da	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xu Z Chen Psychiatrist Llc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fernando Taveras Md Pc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wolbeck Steven	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Udyawar Aparna P	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rizzo Attilio	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zimmermann Mark	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzales Ma Lourdes Castillo	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cinquegrana Marco	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Michael Rose	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miguel R Hernandez Md Pc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brmc Medical Pllc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Espeut Nicole	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Conti Christopher Anthony Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barnes Heather	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Phelan Jane	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bridgeview Neuromed Care Pc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph Pierre L Md	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lawrence Y Liang Medical Pc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheldon Schwartz	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Estefan Bebsy C	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sebolsky Paul	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Henderson Tina	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhojani Shabnamzehra	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



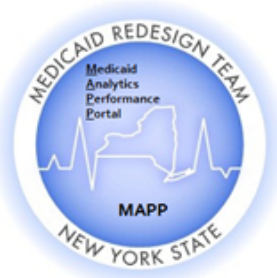
**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Malieckal Giles	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amato Peter	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Frances	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silver Joyce	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gomez De Vargas Mencia M	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Baxi Ami S	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Young Chainllie	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cutler Alex Jay	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Butt Ahmar Mannan	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alexander Anita	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Piotrowski-Philipp Joan	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Linares Alvarenga Francisco	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cortijo Grace	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Murphy-Cassidy Delores	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Calabria Diego Gennaro	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Catholic Charities Comm Svcs Arch	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yaggy Amanda	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sen Kamalendra	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shim Ruth	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Norris Tracy M	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vocational Inst Proj Comm Svc	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haroon Omer Ahmad	Mental Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Help/Project Samaritan Svcs Corp	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jns Counseling Services Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Foundling Hospital, The	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elmcor Youth Adult Act Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fortune Society Inc, The	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Veritas Therapeutic Communit	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bgr Service Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qsa Services Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Therapeutic Communities	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mental Hlth Prov/W Queens Mh	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carnegie Hill Institute Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harlem East Life Plan	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Exponents Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berkshire Farm Center	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Canarsie Aware Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Counseling Srv Of E D N Y Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bridge Back To Life Ctr Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Creedmoor Addiction Trt Ctr	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronx Addiction Trt Ctr	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
South Beach Addiction Trt Ctr	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Conifer Park	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arms Acres	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Areba Casriel Institute	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
T R I Center Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montefiore Medical Ctr Ai	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
820 River Street Inc.	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Realization Center Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Outreach Development Corp	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New Horizon Counseling Ctr	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Lukes Roosevelt Hsp Ctr	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medical Arts Sanitarium	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samaritan Village Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hamilton-Madison House, Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narco Freedom Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Child Center Of Ny, The	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metropolitan Ctr For Mntl Hlt	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bleuler Psychotherapy Ctr	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long Island Consultation Ctr	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Riverdale Mental Hlth Cl	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Hsp Med Cnt	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Barnabas Hospital	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karkus Harvey D Md	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
The Pac Program Of The Bronx Inc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vocational Inst Proj Comm Svc	Substance Abuse	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cobble Hill Hlth Ctr Inc Lthhpc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Center Reh Care Snf	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Buena Vida Cont Care & Reh Ct	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dry Harbor Nursing Home Adhc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronx Center Rehab & Hlth Car	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haym Salomon Hm For Age Adhc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Union Plaza Care Center	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Four Seasons Nrs & Reh Ctr Ad	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Wartburg Lutheran Hm Aging	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Highland Care Center Inc Snf	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Schnurmacher Center Reh & Nrs	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Terence Cardinal Cooke Hcc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Menorah Home & Hosp Aged Inf	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Hillside Manor Rehab/Ext Care	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Parker Jewish Inst Hlth Cr Re	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Glengariff Health Care Center	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Center For Nursing & Rehab In	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Brooklyn Ctr Rehab & Residential Cr	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Williamsbridge Manor Nh	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Mary Manning Walsh Nursing Ho	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
University Nursing Home Snf	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Atlantis Reh & Res Hlth Cr Fac	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
St Marys Hospital For Childre	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Beth Abraham Health Services	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Flushing Manor Care Ctr Snf	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Hebrew H For Aged Riverdale	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Kings Harbor Multicare Center	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Woodcrest Nursing Home	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Queens Ctr Reh & Res Hlth Cr	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Margaret Tietz Center For Nur	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Crown Nursing And Rehab Cente	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Ny Congregational Nrs Ctr Inc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Waterview Nursing Cc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Palisade Nh Co Inc Snf	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Jamaica Hospital Nursing Home	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Forest View Ctr For Reh & Nrs	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Terrace Health Care Center	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Boro Park Ctr Rehab & Hlth Cr	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Holliswood Operating Co Llc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Doj Operations Associates Llc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Parkview Operating Co Llc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Kennedy Pavilion Rh I Llc	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			



New York State Department Of Health
 Delivery System Reform Incentive Payment Project

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
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Sapphire Ctr Rehab & Nrsng C Queens	Nursing Home	✓	✓	✓	✓	✓	✓	✓	✓			
Jamaicarx Inc	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Crossbay Chemist Corp	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Caremark Srx Inc	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sreepathi Pharmacy Inc	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Confucius Pharmacy Inc	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Confident Marie M Lpn	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montefiore Medical Ctr Ai	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brothers Drug Corp	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Second Century Services Corp	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Lukes Roosevelt Hsp Ctr	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldwater Memorial Hosp	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Med Ctr	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Hsp Med Cnt	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Barnabas Hospital	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medicine Center Rx Llc	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pharmacy World Inc	Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vnsny Community Health Services	Hospice	✓	✓	✓	✓	✓	✓	✓	✓			
Calvary Hha & Hospice Care	Hospice	✓	✓	✓	✓	✓	✓	✓	✓			
Hospice Of New York Llc	Hospice	✓	✓	✓	✓	✓	✓	✓	✓			
Jacob Perlow Hospice	Hospice	✓	✓	✓	✓	✓	✓	✓	✓			
Vns Of Ny Hospice Care	Hospice	✓	✓	✓	✓	✓	✓	✓	✓			
Calvary Hospital Inc	Hospice	✓	✓	✓	✓	✓	✓	✓	✓			
1199seiu Training And Employment Funds	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abundant Life Agency	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alphacare	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amber Court At Home	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
American Lung Association Of The Northeast - Asthma Coalition Of Queens	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Americhoice	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amerigroup Mltc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amerigroup/Healthplus	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Balance Medical Aco	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Balance Medical Ipa, Inc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bernadette L. Sheridan Md	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Breukelen Community Network Ipa	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Brooklyn Perinatal Network	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carnegie Hill Institute	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Centerlight Certified Home Health Agency	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chinese Community Accountable Care Organization	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Christopher Rose Empowerment Campaign	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
CI Healthcare Inc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Colombo'S Pharmacy	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Concern For Independent Living	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Corinthian Medical Ipa, Inc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Creedmoor Addiction Treatment Center	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cuatro Llc DbA Access Medicare Ny	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Danielle Duret	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eastern Chinese American Physicians Ipa	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elderplan	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elm Drugs	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Empire City Laboratories	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Excelsior Medical Ipa, Llc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fidelis Care	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fort Greene Strategic Neighborhood Action Partnership	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Friends And Family	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Healthfirst	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Healthix	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Healthy Corner Pharmacy	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Homecrest Community Services, Inc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ici Consolidated Apartment Program Cap	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Integra Managed Care	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jaffe, Alan	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kathleen Lynch-Gaffney	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lada Alexeenko	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marcelo, Gemma	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metroplus Health Plan	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Midwood Development Corporation	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mih Experience Ltd	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Molst Statewide Implementation Team And Emolst Program	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mvp Housing Development Fund Company Inc.	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nature Cure Pharmacy	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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New Diemensions In Care Inc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York City Department For The Aging	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York City Department Of Health & Mental Hygiene	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Park Housing Development Fund Company Inc.	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Comprehensive Perinatal Council, Inc.	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens County Ipa	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rita Williams	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Scheuer Gardens Limited Partnership	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Scheuer Plaza Limited Partnership	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Senior Health Partners	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Senior Whole Health	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shiel Medical Laboratory	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
United Rx Buying Group	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Variety Drugs	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Venture House	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vns Choice	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wellcare Health Plan	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wellcare Mltc	Community Based Organizations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cobble Hill Hlth Ctr Inc Lthhcp	All Other	✓	✓	✓	✓	✓	✓	✓	✓			
Vladimir Osipov Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zaric Maja Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung Jonathan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Larisa Koifman Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moiz A Hamdani	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean Carl	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cecilia Griselda Calderon Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Yuchun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kimyagarova Irina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yarramreddy Saroja	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Torres Diana	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
George Hall Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sop Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yves Duroseau Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jianjun Li Gi Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ferdous Razia Khan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Christopher Chow	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Nahar Jebun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haber Gregory	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yun Jean Shim Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohseni Hossain	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perfetto-Tullo Maria	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Foundling	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xiaoxia Zhang Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weimin Qu Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Help/Project Samaritan Svcs Corp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaplowitz David	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metzger Benjamin Lowell	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jns Counseling Services Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blokh Ilya	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singiri Archana	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Md Aticul Islam	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vnsny Community Health Services	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laura Amram	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cs Leung Rehabilitation Medicine PI	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kogan Irina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
K S Prakash Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
All Metro Aids Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amsterdam Pediatrics Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Paul	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Skipitaris Nicholas	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Mingke	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Helen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sang Koky	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nancy Han	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ellis Rachel Fremder Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metro True Care Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Andrea	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Manor Dialysis Ctr Llc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kong Jason Szepok Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rumana Alauddin Rahman	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean-Jacques Trevor Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ng Norland Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Chiu Sungkin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jin Yan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Buka Robert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Toronjadze Tamar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Prakashkumar Govindbhai Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Das Provat Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yan-Rosenberg Linli Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teng Rui Er Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tam Cynthia J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Agarwal Chhavi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Kuan Hung Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Karen Tin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shalnov Artur Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaman Ghong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shehigian Aline Ann	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mazur Justin David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haroon Sameera N Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dellatto Patricia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nwaishienyi Silas E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fallahi Pouneh Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gupta Rakesh Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Essen Medical Associates Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Acosta Dalisa J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hidalgo Maria Del Carmen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ansari Parswa Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Somrov Serge Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guillen-Santana Roselia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gerlach Kecia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hasan Muhammad A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garrido-Valencia Fanny Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
First Care Medical Group Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jennan Comprehensive Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miller Ricardo Anthony	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sandel Sherri Lynn Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Badalov Isak Y Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Palencia David Jose Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
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Osborne Heather L	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Briley James	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sudar Singh Prabahar Cynthia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chhipa Mohammad Haroon Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shapsis Alexander Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Jeongwon	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sulh Muhammadsamir Abedrahman	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rigaud Nathalie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Medical Office Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Tina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Baker Daniel James Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Virginia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
N'Gouamba Rashida B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Briggs Family Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinero-Bernardo Shirley J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mb Medical Associates Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Lisen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nemazie Siamack Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Luis A Rpa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Dan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barman Trina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perkins Arlene Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Hua Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marie-Nirva Blaise	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jain Suresh P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rhee Michael Sangwook Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khrom Tatiana Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olayo Alvaro A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mason Benjamin F Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Farag Ayman Roushdy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Foundling Hospital, The	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adeyanju Olufunmilayo Olajumoke Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mejia Manuel Eligio Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Damineni Sailaja	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Golio Dominick Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Persaud Yudhistira K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Thanneer Latha	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sinha Ashok	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhatti Tandeep Kaur Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dholakia Kush Ravindra Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Waite Rulon Jan li Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Michael Armine Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Osmani Mohammed Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Jennifer	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marte Grecia A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dai Guorong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
1211 Wpr Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Lincoln Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Janny A Ozuna Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sergeyev Igor Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
America Medical Group Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Janlian Medical Group Llc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santana Domingo A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Madhavi Madhurapantula Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ruiz Carlos E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choi Mark Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babayeva Natela Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pediatrics 2000 At 207 Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Meikle Angela Vanessa Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohr Christina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Isakova Marina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mercy Medical Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patron Maria Yolanda Piamonte Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Robin Y C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pediatrics 2000 Iii Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tajian Rosa Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Phokela Sarabjit Singh Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fortune Society Inc, The	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cliffside Renal Dialysis	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Premkumar Angel Grace Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shmukler Dov Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Valdivia Martha Maria Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yin Xuebin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohseni Haleh G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dudani Bharti Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Wah Sang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hector Holson S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alvarado-Rivera Jorge V Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mok Victor Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Wei Ku Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Chun Tung Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haque Muhammad Misbah-UI Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chabla Juan Francisco Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
All Metro Home Care Services Of New	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Park Yohan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Veritas Therapeutic Communit	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Butt Rahila Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz Philip M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tokar Svetlana Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Yanhan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Helen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Punzalan Betty N Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Canal Radiology Associates Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ryndin Igor Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alatassi Shaza Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
All Neurological Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brown Elaine Lucille Rn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guido Giancarlo R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cath Char Nghbhd Svcs Inc Day	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wou Margaret Lee Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goodwill Ind Gr Ny/Nj Day	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Desir Mergie X Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Walters Edline V	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lim Vivien Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eric Zhou Medical Office Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bouchard Nicole Colette Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tuccillo Nicole	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



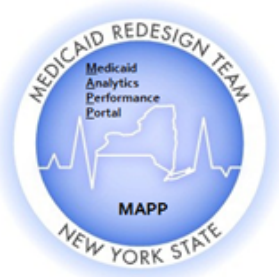
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Chopra Jatinder K Rpa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Zili	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stillwell Christina Rpa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garratt Kirk Noel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Eye Physician Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Yong Jun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mosu Nicolae Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Magloire Tamara Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Luisa Altagracia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shiel Medical Laboratory Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Su Amy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thomas Johnny Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bgr Service Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Persaud Narendralall	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jen Albert Sun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Bitni Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nisimova Meri Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Byrne Kristin Colleen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minhas Seema Jalil	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flaminiano Lourdes M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Itzhak Petr Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rimarachin Julio A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsoumpariotis Apostolis	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmed Nayaz Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Checo Yuderqui Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Adrian Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chou Yeh Ping Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ponieman Diego Andres Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ashkar John Antonios	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medisys Ambulance Service Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Klein Devin A	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Losier Robert J	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Robbins David Herbert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramzan Muhammad Masood	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hoyek Wissam Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Edwin Kenneth Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Kuang Barbara Hwa Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahman Mohammad Mazibur Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Jim	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Shuyi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Wensong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bagheri Farshad	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allan Sean Thomas	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Zhenqing Brett Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li-Hirashiki Vivian Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jafri Yumna Saeeda Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thierman David H	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Yuancong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rampersaud Rajendra Mark	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qsa Services Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bukhman Leonid Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patterson Stacey Ann Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guseynov Luiza Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Sanjay Narottambhai Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramirez Julio Alberto Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuang Liren Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Downarsky David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Family Practice &	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tullo Luigi Giovanni Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rishe Eric Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Unger Pamela Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yim Ho Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moarefi Mehran-Reza Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Paul Chun-Kit Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhayani Rajendra Damodar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cath Char Nghbhd Svcs Inc Spv	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soto Maria B	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brown Elaine P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gamundi-Joaquin Rosa E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cai Min	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mercado Agueda Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Therapeutic Communities	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



New York State Department Of Health
 Delivery System Reform Incentive Payment Project

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* Safety Net Providers in Green

Participating in Projects												
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Chattoo Premetesh Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sahni Gunjeet Mandvi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Tina Q Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lasic Zoran Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chixin Fang Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiangping Gan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sencion Franklin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gupta Meenu Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Janczuk Peter P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Sherry A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ngai Yi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Haifan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwimmer Joshua Adam Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Nelly Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Cardiovascular Medicine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chatterjee Partha P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boockvar John A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Suprin Gregory Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fu Chenzhong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhu Dening	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stybel Elena B Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hill Mark A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pathak Naveen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Jianjun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choi Jai Huyk Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Fausto A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kamenshchikova Marina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mutyala Manikyam Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Nancy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mortazavi Shervin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jindal Michelle Anne Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Christine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sung John Hsiyang	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Jean Qingjun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Jagruti Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cuevas Asima	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Rasheed Qaesar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Odoom Ebenezer Kofi Bentum Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reynoso Elsa Sofia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahman Mohammad M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Yio Medical Service Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leviashuili Natela Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aponte Jose Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shukla Mayank Arun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guttal Dakshayani R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Neopeds Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sun Diana K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Hyoseong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rivera Gregory A Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ren Sicong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Correa Michael Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rutner Daniella	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hiza Ashley Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Katcher Oleg Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Rafael Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yahodaei Kamran Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perry Ave Family Medical Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krumholtz Ira	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Andrea	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pamoukian Vicken Nichan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Ronglan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiu Karen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ngo Tammy Phuong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bai Chun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Nirav Chandrakant Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Mary Xiao-Jiang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhou Huan-Sue	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edward V Chan Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Jane A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang David	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Steinbaum Suzanne Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Joyce	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Ree June Hisu Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mercedes Betty Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Millennium Medical Group Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metropolitan Jewish Hm Care	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Yali Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Wellman Wai-Man Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Timothy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dairo Oluwatoyos	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Friedrich Douglas Bennett Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Sangwoo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Epstein Neal F Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dhillon Lakhbir	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Anjum Naheed Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fishman Nancy Lynn Np	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaplan Evan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Woodlawn Medical Assoc Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jack Simon Goldman Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bover Elina Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carreno Jacqueline Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raport Miriam R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minior Victoria K	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alex Santhosh Madathil Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
IlyaeV Stella	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Saqiba Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Koshy George P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hanna Nader Ramses Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Fei Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lus Medical Associates Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wan Soo Lee Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Concepcion Elizabeth Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glatter Robert David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weimin Qu	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dabovich Ivonne Cnm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lai Amy Y Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Chun Ming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Louis Martha Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Hana Mervat	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Slade Stella	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mendez Jose Manuel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samadi David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Empire St Hm Care Ser Lthhcp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Armington Kevin John Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mikhaylov Artur Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mui Wingtat Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maslova Alla Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Basello Gina M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramirez-Baron Diana Maria	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leers Ella Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khandker Ferdous Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malhotra Madhu B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olanescu Andrea Despina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maniar Rajen P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
West Denise	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Suleman Rana Javed Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francisco Richard L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shi Shelly Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ryu Jae Shin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khaldarov Yevgeniy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chu Chien-Jung J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brena M Desai Pediatrician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morales Romeo E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramdas Mardai Mariapen Pa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lopez Manuel D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amodio Stefano Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Asters Dimitrios J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wei Lihong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Center Reh Care Snf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mallin David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hughes Reginald D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marcu Mariana Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bolon David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Colon Belkis Arelis Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Charles Eric Lukas Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adeyemo Adenike	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kowacz Tomasz Wojciech Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xiao Yong Hong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mo Shengjie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delman Alex Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shah Tushar Laxmichand Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vilnits Anatoliy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pena Clotilde B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Founding Hosp Spv	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morales-Diaz Mirza Enid Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bovienzo James D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Worca Inc Spv	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stein Marjorie Michelle Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schneider Fran Iris	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narcisse Joseph Rpa-C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Petrov Petya Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Romanello Paul P	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mo Lihua Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Holly M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Xiaoxi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fung Sandy M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Jennifer	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charlotten Kevin Alexander Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gheewala Parul A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiao Marie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Linetskaya Yelena Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jimenez Marcial	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mental Hlth Prov/W Queens Mh	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Empire Joint And Spine P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Michael Yang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metwally Ashraf Ahmed Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carroccio Alfio Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dolen Suleyman E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vaz Geraldine Sandra Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zeng Lingling Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Chen Chao Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carnegie Hill Institute Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Yan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Odnopozova Mariya Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Galibov Vyacheslav Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flores-Freeth Ingrid E	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Herskovits Mark Saul Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bangug Samuel Pio Allado Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Numann Sousan Munim Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Qinghong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Alfredo Sicat Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shusterman Arkadiy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aguilh-Figaro Toycina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raza Nadeem Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Farhat Laila Ali Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kevin J Guo Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Streete Sophia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lam Terry Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chusid Boris Gregory Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kan Sang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jovellanos Valentin Pardo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pramanik Bidyut Kumar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nyein Roland Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zilber Nora Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Greenblatt Benjamin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shah Sangita Tushar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bernik Stephanie Falcone Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Israel Igor Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xing-Jie Wang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ray-Sen Piyali Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Chun-Kit	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dayan Alan R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Peter Shuangwu Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hu Jiong-Ming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brown Tyrone Anthony Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mihail Medvedovsky Phys Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Queens Medical Services Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lim Pearl Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhavana R Japi Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Victoria Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tetrok Mikhail S Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Apoeso Taiye Olubunmi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Galperin Mark Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Yoojin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dolin Natalia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Buena Vida Cont Care & Reh Ct	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abdullah Ghazanfar Syed Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gorbacz Sheldon Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marinbakh Alexander Y Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Astoria Pediatric Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Benjamin Zibin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vijaykumar Sudha Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mailian-Oganova Lilia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rawal Jagat M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz Alcedo Anselmo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deleon Jose L Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Holalkere Rajagopal Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stepensky Leon Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lopez Margarita	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bestcare Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lyo Thomas	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krumholz David	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dul Mitch	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zilberstein Olga Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cortes Juan Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Xin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Hita Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sarkar Samir Kanti	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bundoc Susana Dugang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsinis Mariya F Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hom David	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Serruya Jose Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Cheung Ming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yeung Vincent Wah-Sang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gutnik Zhanna Valerievna Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yu Ann Marie Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wei Huachen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lam Henry Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Quijada Reucar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roayaie Sasan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kosmas Constantine Elias Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuittinen Tamara Raquel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Shi-Wen Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cornielle Jorge Luis Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Binoy Kumar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xu Richard Li-Cheng	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Romsaitong Diane P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sinog Medical Assoc Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuznetsov Valery Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hillside Manor R & Ecc Adhc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Stephen Barnes Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pertsovsky Yuriy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sultana Sharmeen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nazir Azra Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long Ann Yongzhou Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deblois Magdalena Q Rn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khan Rehana Iqbal Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharafkhah Martin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zonenashvili Merabi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nandakumar Thambiraja Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Almonte Maria Isabel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jing Wuhua	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pediatrics 2000 li P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sylvestre Georges Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qadri Syed S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lu Fong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Albert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Batoon Sherwin Bumanglag Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Calvary Hha & Hospice Care	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Yong Kang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tovbina Inna Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Samuel C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Ratilal T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Xiao-Qing Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Ka Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tafreshi-Oraee Parisa Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
International Peds Plus Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Freedman Todd W Rpa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiang Bao En Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Israel Roza Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gad Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bisangwa Alexis Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zeitoun Khaled Mohamed Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cordice-Ford Candida	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Calliste-Scott Susan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tu Joseph	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olivero Matos Ana Rita Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
So Agnes Laiping Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chu Mark Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Babu A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kazmann Luis Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nagpaul Ravinder S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saint-John Susan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harlem East Life Plan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garcia Sandra Patricia Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rao Nagaraj Dharmavaram Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rosario-Amaro Francisco Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Opher-Iosifescu Elana	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Law Anna Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vo Tracy T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
First Step Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chopra Jaideep	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Machnicki Stephen Craig Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nolan Marc A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Vladutiu Mihaela I Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcdonald Anmarie C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Ya Ju Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Confucius Pharmacy Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Azar Sasan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Foster Sharon Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alcindor Claudia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amr Nayel Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tubens Frances Marilou	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Molina Alveris Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ravi Venkata Ramana	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmadi Ladan M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thau Andrea	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Canellos Harriette	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung-Eng Lucy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dejoie Marie Chantale	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sabogal Gonzalo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lazala Polanco Carmen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trepeta Scott S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cui Jian Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kutnick Richard	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Comprehensive Community Pediatrics	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuo Josephine Y Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sahgal Sumir P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Romsaitong Panus Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Drukman Liliya Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alla Vijayakumar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Percelay Jack Martin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moussa Zobidatte Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fok Eric Chi-Cheung Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Ian Yeng Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rezkalla Laurence L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pimentel Ramon R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dry Harbor Nursing Home Adhc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Hanbin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Simon X Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



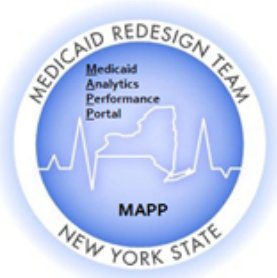
**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

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* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Azamy Taufiq	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronx Center Rehab & Hlth Car	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shan Zihe Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalepu Mallikharjanudu Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Jie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gottlieb Marc D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raymond L Yung Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Molnar Thomas	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rojas Ana Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aslam Mohammad Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bregman Zachary	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Lan Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kong Xiang B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Yuqing Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chak Ada Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Exponents Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Macenat Jean R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
David Marian Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Battle Jose E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Zheng-Bo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khasak Dmitry Y Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hsieh Helen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flores-Castillo Edgar A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medisys Family Care	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Robinson Sandra A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reyes Nelton E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lefevre Cluny P Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Clarke Fred C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lao Wilfredo Sy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Wei Guo Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haskes Lloyd Partman	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Forest View Ctr Reh Nrs Adhc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fung Ngan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Belding Michele Frances	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santandreu Orlando	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
W Liangs Medical Office	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
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Richter Michael	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yeung Chung Kiang	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Winter David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peichev Mario Atanasov Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parikh Manish A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xu Min Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Meghan P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mucelli Louis Alexander	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiu Sungwai Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abraham Susan Philips	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deng Juliang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alwani Ayaz	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Basit Mohammad Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Nancy S L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ramirez Alvaro Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fathallah-Mammo Aysar B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duran-Soriano Maria E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
De Castro Carlyle Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Castillo Alfredo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rubin Andrew Richard	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Go Eddie Sim Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haym Salomon Hm For Age Adhc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Solomon Robert W Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Jian Wei	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Jayendra R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duvalsaint Fregens G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Beinart Clifford Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bowers-Johnson Susan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silver Larry Mark Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Waseem Faisal Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Towner Robert A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Francisco Antonio Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doshi Diagnostic Imaging Srv	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boccio John S Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Katherine F Zeng Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Rajesh Kanubhai Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Vaccarino Robert A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Uritskaya Faina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Young Bryan J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barile Gaetano R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Charlie Chin-Song Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Petrov Manana Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Mary'S Comm Care Prof Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Salim-Ortiz Jadiyi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Drepaul Loris Omesh	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chakote Jyoti V Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Hospital & Med Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fatima Pediatric Med Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kumar Yogesh Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez De Pimentel Nadia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jesus Pichardo Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trinh Tuyen T Do Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schiff William M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sun Deqing Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huo Jerry Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Fu Fu Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Correa Nereida Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bulsara Girish M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Han Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsoumpariotis Spyros N Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gupta Indranil Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teixeira Julio A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malhotra Shilpa Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hall George Clinton Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
He Cong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chauhan Sudheer Singh Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weinberg Jeffrey Mitchell Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Yoke Hlen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raof Sabiha Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miller Andrew Robert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Jianping Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Jeffrey Chi Keung Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Alba Juan Andres Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Back K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pioneer Homecare Corp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wolintz Robyn Joy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reddy Kavitha Dadithota Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reddy Sarath Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goris Jose Armando Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gold Richard Elliott Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Youngewirth Elizabeth Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harlem Dialysis Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Henry Dinh-Khon Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trager Jonathan David K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kirschenbaum Linda A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Johnston Mark R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flansbaum Bradley Evan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khorets Boris A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Angela Mei Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goyal Madhulika Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Henry Donna Marie Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harvey Peter F	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hailiu Zuo Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jung Josephine O Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Knight-Debrady Alicia P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alcaide Alejandro Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zambon Roberto	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tallaj Ramon Modesto Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Yaoming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Banad Sheela Premanath Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Demoz Abraham Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hermogenes Patricia W Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khoriaty Florence Fares	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minutillo John Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Union Plaza Care Center	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marino Nino D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Hui Chih Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marcelonis Debra A Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Bilik Ilya V Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Alfonso Y	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Zova Zhuohua Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lui Kin W	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Oodal Ravichand Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Jiansheng	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Four Seasons Nrs & Reh Ctr Ad	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liverpool Steven Fitzroy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leybel Boris Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Alice Man Ccc-Audiology	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Setru Udayashankar K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kern Jeffrey Howard Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Henry S	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
A T Adebayo Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Mayank Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sangeorzan Adrian Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dove Arthur Renner Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gu Xi Freda Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Mengjia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gotlin Andrew D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Help/Psi Aids Adhcp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fulgencio-Delmonte Jose A	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonjon Cheng Antonio Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tsai Nancy M.D.	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Yanfeng Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wolfson Yan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frousios Costas Anthony Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pelczar Joseph Vincent Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Teller Katerina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Licht Warren Bret Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kwauk Sam Tsung-Ming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Varinder P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fashakin Emmanuel O Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abakporo Theophine O Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmad Syed T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Chetankumar P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Chung Wendy Wei Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chun Hajoon Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bestcare Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Psychiatric Serv Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lyo Rosie Yen-Cho Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pfefferblit Susanna Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silberman Emil Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weseley Peter Eric Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lau Christine Y-K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Manhattan Eye Ear & Throat Hs	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Braunstein Richard Evan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung William Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marble Hill Dental Office Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francis Charles Jerome Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Byssainthe Paul Harold Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Keith C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arumugam Thangamuthu R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Lei Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pierre Joseph Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Broadway Pediatrics Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fretwell Kenneth R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nguyen Dustin Triet Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Francisco Dalmacio H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Makumova Zoya Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Majeed Salamat Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Reynaldo G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldman Adam Y Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Verna Yves Georges Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
D'Augustine Jean Mars Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ginebra Fernando Arturo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Torres Marino A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Freeley Douglas A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Espino Rodriguez Gagarini Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Losco Donna Marie Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samuel Cho Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gondal Nasir Mahmood Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Pilarte Juan Jose Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delman Moisey Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bressner Robert Stuart Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Westcott Mark A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Applewhite Liat E	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adam Muhammad Sanni Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reimers Carl Dietrich Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khelemsky Igor Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parraga-Marquez Monica	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mina Bushra Ayad Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sam Mirela Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Hung-Sam Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Kevin N T	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhu Ming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Panhani Ramkumar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patin Michael	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rozo Alberto L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronfman Ida Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Walker-Adamson Sonia E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Srivastava Malaya Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cabatic Thelma Ocampo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paul Evelyne M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Siu Singmay Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Yvette A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edward V Chan Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Estevez Juan T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chiu William Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Procure Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Chyne C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Selfhelp Special Fam Hc Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aids Ctr Of Queens County Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kalman Jill Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Colasacco Joseph A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Veloudios Alice Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charles Michel-Jose Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gotham Per Diem Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Gebrezgi Sebhatsu Tewelde	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Micallef Joseph	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shatzkes Deborah R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Nilesh R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pou Ricardo E Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bowen Marc X Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duggirala Rudrama D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Acevedo Mabel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Akinboboye Olakunle O	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Crapotta Joseph A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berkshire Farm Center	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Canarsie Aware Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Skeivys Saulius J Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Comunilife Mental Health Cl	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Qureshi Pervaiz Iqbal Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rashid Mohammed K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Williams Lorraine E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peralte Louis Ludovic Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yan Richard X	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Young George P H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Herrera-Acevedo Luis O Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ozoude Sylvester A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ottaviano Paul Gerard Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Catucci Candida	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mitchell Harrison Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sanchez Janet I	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Knickerbocker Medical Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmad Laeeq Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haider Qazi Kamal Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
McGinty Geraldine Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Loo Nelly T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yusuf Fazlul Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Novogrodsky Raphael Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Javit Daniel Joel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Severe Ernst Gerard Marie Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tam Kenneth C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Chaughtai Khalid Akhtar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Jose Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng Jenny Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sundaresh Mamatha Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mora Maximo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Soni Sharad	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Thomas Kin-Sim Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Solinas Alessandro Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schrier Amilia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pignanelli Eduardo L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ng John Paul Tracy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pichardo Jesus Manuel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rogers Mark I Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
National Pediatrics Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nicoleau Carl A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dave Devang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwartz David L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Amarjit Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babury Mohammad A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Smith Robert H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gandhi Sneha J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lodha Ajay K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yee Lily Fong Cho Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Counseling Srv Of E D N Y Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chawla Kiran Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bridge Back To Life Ctr Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tjh Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Solomon Robert D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lowe Teresa Ann Od	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hayes Richard M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adler Carl M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eisenstein Howard Charles Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thurm Craig Alan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Hispanic Family Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Victoria H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Woo Sup Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Crevecoeur Evans Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Simons Stephan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moran-Almonte Roberto A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mamdani Yusufali Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Conifer Park	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arms Acres	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Areba Casriel Institute	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liriano Octavio Antonio Jr Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hanau Lawrence H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dauhajre Jacqueline Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Albarran Marzan Julio E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Asit	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Norman N Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lippman Sheldon Bruce Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ghumman Chaudhry Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zanger Daniel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Americare Certified Ss Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Motola Jay A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huey Howard E Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Robert C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Avani A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Lilly M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Nayankumar A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Modern East West Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nina Ortega Luis Cesar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chien Kuo Chiang Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Remy Prospere Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guzman Damiani Rodolfo W	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tartell Jay D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aranow Cynthia Beth Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Palma James Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lazo Dante Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Comprehensive Care Mgt D&T Ct	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Florimon-Delarosa Hector B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lam Kin Yui Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Carlos A Jr Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Benchabbat Abraham A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garcia-Albarran Carmen M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Valencia Hector Antonio	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cristinoiu Lucia L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
T R I Center Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Punsal Reynaldo M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reddy Mallikarjuna D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perello Robert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Niederland Marta Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grossmann Rami R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Crespo-Gomez Efrain Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tapia-Mendoza Juan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ney Gershon C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martinez Sergio A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ganesh Karim Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shabto Uri R Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Hai Po Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chopra Rajpal S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Montefiore Medical Ctr Ai	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karibandi Ramakrishna V Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mazza Michael Anthony Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gilani Tajammal H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dominguez-Echevarria Alvaro	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mpi Catherine Alikor	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barbery Maria-Pilar	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raof Suhail Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Alice K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Felix-Peralta Ingrid Ivanna	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pediatric Spec Of Queens P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ares Luz Delia Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frank Paul Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mendelson Robert I Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Kabul Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vinas Sonia Miliza Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacobs Allan Joel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malik Sajid Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Inglis Steven Ralph Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edasery Beppy J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheema Manjit Singh Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hirshfield Gary S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Altman Daryl Renee Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roth Alan Robert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Baik-Han Won Hee Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nassim Roland Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mathews Daniel D Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Donadt Robert B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Sunil C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medvedovsky Mihail Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charnoff Judah Azriel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cah Skip Of New York Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Archbold Maritza Stella Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Starosta Elena Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zaman Rehana A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barragan Juan Carlos Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prince Steven Leonard Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ward Andrea Maria Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Auricchio John Steven Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
820 River Street Inc.	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haimi Joseph Shayani Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kuan Jackson Hsun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cath Char Nghbhd Svcs Caldwell Icf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cath Char Nghbhd Svcs Adessa Icf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Villegas Emilio Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kapoor Vinay Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Posner David H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Johnson William G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perone Robert W Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wartburg Lutheran Hm Aging	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Realization Center Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Highland Care Center Inc Snf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hillside Manor Nursing Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boccardo Daniel A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Ilan Hana Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schron Deborah S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hon King Chen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bruder Jack Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Seung Kwan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hecker Lawrence P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schnurmacher Center Reh & Nrs	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacob Perlow Hospice	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Abreu Andres R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tom Winston Chet Ying Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Peralta Victor Emilio Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dillon Evan H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Puma Joseph Anthony Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Konecky Alan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ko Wilson Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shum Kee Yee Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzales Antonio M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alleyne Michael George Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Decoo Ydelfonso A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shani Dana Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwartz Evan G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Portello Joan K	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vns Of Ny Hospice Care	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Watson Catherin Pace	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cantu Roberto Jr Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacinto Francisco Gertrude Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roth Ira Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kurland Etah Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Sun Co	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Udom Izuka P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sayad Karim Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Dipika Dilip Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzales Aurora Laurel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Henoch Avraham Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elmhurst Podiatry Group Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Featherstone Melvin T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Spaccavento Colette M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Outreach Development Corp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marcus Sergiu Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Butters Marva Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph P Addabbo Family Hlth	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Master Kalpana Rashmin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ng Hung Fai Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Himanshu A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Coplan Neil L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Woods Kim Benjamin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Klein Sherman M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Collier K Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jaes Pablo Hector	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bregman Alvin M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Foong Anthony Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Anesthesia Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goodman Allen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Di Franco Fortunato Santi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alwani Abdulla Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Espinal Alberto Comas Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Rhina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kintzoglou Alexander Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choi Mi Ja Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tardio Julio Alberto Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shah Vinay J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berkowitz Israel Steven Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lederman Elliot Charles Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reyes-Rigor Rosario H	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lk Better Health Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guzman Eliscer Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mederos Mariano Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Smith Miriam Ann Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Florimon Felix Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ditchek Alan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lisann Neal Michael Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chaudhry Muhammad Rafiq Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Glass David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rain Home Attendant Ser Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bio-Reference Laboratories Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raince Gurmukh S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinckney Isaiah Howard li Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kissin Esther Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Griffith-Reece Wendy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marone Freya Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sacks Harry G Dds	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Choy Lawrence T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Syed Ahmad Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Poretzky Leonid Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malonzo Mario Supan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Rajesh Jayantilal Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khanijou Rita Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mangla Arun Kumar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yoeli Gideon C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rao Sudha	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Nga Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jeng Ing-Yann Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krumholz David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Meltzer Robert M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krespi Yosef P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schwartz Glenn Eliot Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boursiquot Jean Robert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Baldevbhai V Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Agathas 11 Hayden Circle	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Levine Randy L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babubhai I Patel Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Stanley Bart Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patterson Bentley Lorene Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Corpuz Elsa P Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weissman Laurence Roy Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jerez Jose R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hwu Charles Joseph	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gillego Azucena Manucdoc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Paoli Gloria Rosario Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arce Samuel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Carlos Manuel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Jy Ming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Useda Claudia A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karim Rukshana Omar Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Youner Craig J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santana Rita Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ganesh Lalitha Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bunyavanich Sanga Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jormark Susan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chime Chudi G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carvajal Ruben U Md Pc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Norman Steven Yale Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Anilkumar Sureshchandra	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Terence Cardinal Cooke Hcc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Braunstein Edward Allen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Falk Bryan M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bestcare Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Go Teresita Alo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chung David Ingook Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fein Alan Marc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saint-Laurent Mario	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheridan Bernadette Lizina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ilkhanizadeh Rahman Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chung Chin Woo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kaphan Mitchell L Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Melamedoff Gustavo R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheng King Shek Eric Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nimmagadda Nagabushanam Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schiffer Mark Benjamin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jothianandan Kanthimathi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mejia Enrique F	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kahn David I Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sekar Surya Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gega Renato Cantada Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Transitional Services For Ny	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lochard Jean Joseph Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nazarian Habib	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Laud Sheela G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zayat Gabriel G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stamm Joseph Martin Od	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Steven Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gardenswartz Mark H Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohan Santha Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hwang Yongkyu Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Syalee Jogesh Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Menorah Home & Hosp Aged Inf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chowdhry Mohammed Idris	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paddu Upadhyaya Padmanabh	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chang Thomas T M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Agathas Depaul Icf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Agathas 13 Hayden Circle	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bajaj Deepika Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blum Isaac Facs Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fajardo Manuel Abrantes	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New Horizon Counseling Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shieh Wei Yuan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahuja Anita I Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Kenneth W Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Depasquale Eugene Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hon John Wingsun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malamud Enrique Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahuja Kishore Kanayalal Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Trasi Sunil S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Drew Michael S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bass Sherry J Od	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wagner Ira J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sayeed Majeed Ahmed Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rosen Robert J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rhee Jai-Jeen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bizzaro Thomas A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Choi Sangil Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mediavillo Rene S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nicoleau Aryel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rim An Moo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bangaru Babu S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahuja Rita K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bogart Sydney David Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cadet Normil Richard Jean Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Greenbaum Robert C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Scott Stanley Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jhaveri K Meenakshi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Milosevic Milivoje Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shen Ivy Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bunyavanich Sommai T Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Agathas Pelham Manor Icf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Agathas Ardsley Icf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz Erlinda S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tenembaum Moises Marcos Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Priester William D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Scharf Stephen Charles Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jhaveri Krishna K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kopelowitz Wally Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yoon Chung Hee Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hoffman Howard Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Castellanos Roman Dario Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fishman Allen J Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cho Won Sup Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rand Stephen P	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Mahendra Chaturbhai Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kitton Stuart E Dpm	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dennis Lester	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dyrszka Herbert Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lautin Robert Frederic	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Castanos Dilia M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yang Wen C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thanjan Thresiamma George Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



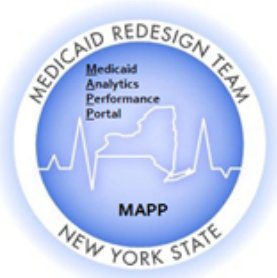
**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Schabes George A Dds	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Yiu Cheung Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sobol Norman J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rodriguez Maria D Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tan Edwin C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bernstein Chaim J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charles Antoine V Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
George Jacob V Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bharel Virendra M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
De La Cadena Flor S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Charles B Wang Comm Hth Ctr I	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Lukes Roosevelt Hsp Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Appleman Warren Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen David L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Barcia Rafael G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lui Sheung Bun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Caro Sixto R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hillside Manor Rehab/Ext Care	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parker Jewish Inst Hlth Cr Re	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glengariff Health Care Center	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Center For Nursing & Rehab In	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brooklyn Ctr Rehab & Residential Cr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Williamsbridge Manor Nh	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
University Nursing Home Snf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Atlantis Reh & Res Hlth Cr Fac	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Marys Hospital For Childre	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Beth Abraham Health Services	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Manor Care Ctr Snf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hebrew H For Aged Riverdale	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kings Harbor Multicare Center	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Woodcrest Nursing Home	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Ctr Reh & Res Hlth Cr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Margaret Tietz Center For Nur	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Crown Nursing And Rehab Cente	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Congregational Nrs Ctr Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Waterview Nursing Cc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
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Palisade Nh Co Inc Snf	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Nursing Home	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Forest View Ctr For Reh & Nrs	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Terrace Health Care Center	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grasso Cono M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stern Harvey Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Becher Rodney A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Julian Maximo Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Calvary Hospital Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medical Arts Sanitarium	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldwater Memorial Hosp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kancherla Prakash Surya	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Adlersberg Jay B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Masih Emmanuel B Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thakore Hasit R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yoon Sei-Oung Richard	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sy Manuel C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Ctr For Psychotherap	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medical Hlth Research Asc Nyc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samaritan Village Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hamilton-Madison House,Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narco Freedom Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arista Ctr For Psychotherapy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Catholic Charities Neighbhd Svcs	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
University Optometric Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Child Center Of Ny, The	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metropolitan Ctr For Mntl Hlt	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bleuler Psychotherapy Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karen Horney Clinic,Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long Island Consultation Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Riverdale Mental Hlth Cl	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
North Shore Un Hsp Forest Hil	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Med Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Hsp Med Cnt	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Methodist Hosp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mount Sinai Hospital	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Lenox Hill Hospital	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Barnabas Hospital	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allen Theodore Elias Pc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Urena Andres F Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raof Rebecca G Pc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chung Nakchin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raof Nabil Pc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nukalapati Prasuna R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Newman Ransford C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delimon Joseph I Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lopez Ernesto M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kyaw Myint Physician Pc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Dilip Shikharchand Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haque Muhammad Mazharul Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moise Wesner Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chua Betty A Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Behfarin Parviz Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hammer Arthur W Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chakrabarti Chhaya Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung Ching Sum Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Golestaneh Nasser Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinsker Richard W Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Bhupendro R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Chien-Jen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brief George Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bahr Gerald S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kronzon Itzhak Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rana Thakor C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Martha Shih Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Manuel G Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chennareddy Swaminathan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Amarjit Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pili Manuel R Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Ishvarbhai S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kukar Narinder M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karimi Mahmood M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Fukilman Ocas Jorge Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Agrawal Jugal K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chadda Veena Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pulle Dunston Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Ho-Mau Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Huang Le Kiong Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lopez Juan S Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chawla Satish K Pc Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fernandez Oscar E Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Melamed Samuel L Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Obstbaum Stephen Allan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sencion Sergio M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
De Lara Francisco Arturo	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldman Jack Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rella Vincent J Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Price Hobart C Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wisch Nathaniel Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raza Seyed Mohamed Jaffar Ali Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Global Medical Associates Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Uduevbo Jerry Ainene Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Richard Leno	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Domond Jacques	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cherenfant Lucot	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bharati Anjali	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khalil Ahmed	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kukar Atul Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vaynkadler Mark	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chinatown Gen Surg/Steven Wong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Yogita	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aung Kyawt Thandar	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Desai Ojas Jasubhai Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiang Ming Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahman Mohammed Matiur Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahern Barbara Ann	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rivera Carmina Ramona N Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sullivan Kevin M Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Golyapina Natalya	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cardona Erica	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yurovitsky Alyssa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Graham Robert	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Foundling Hospital St Agathas Da	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Knickerbocker Medical Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Orlovskiy Aleksandr Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kevin N T Lin Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xinmei Li	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bay Ridge Family Medical Doctor Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pancare Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saxena Amit K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narasimhan Gopal	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Global Medical Care Associates Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
D Oleo Vargas Maximo Jose	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alpine Home Health Care Llc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chinatown Medical Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morano Mark	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
One Hanson Place Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Xian Min Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tin Hui Hing Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cerri Ruben Walter	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nett Michael Patrick	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ghaffar Tahira Farooqi Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Sandra Patricia Garcia Dpm Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Integrative Internal Med & Geriatri	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Florence P Golamco	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ding Cheng Yang	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Koa & Keoni Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mergie Desir Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Best Ophthalmology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yee Vivian See Ki Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yan Henry Jiann Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hangjun Jang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reyes Elsa Jacqueline	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lo Calvin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Qiu William Weiguang Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chou Christina Lee Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New Star Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dong-Hong Shong Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Reichert James Michael	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Levitt Howard Lawrence Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samad Rubina Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vele Oana	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Linli Yan-Rosenberg Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tun Kan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grand Cornell Cardiology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stickles Scott Michael Do	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jerome Medical Office Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xin Pang	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Quality Medical Provider Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Perez Emilio Ivan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Korneeva-Vladimirsky Irina Lvovna	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Silva Lourdes G	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alapati Prameela	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Derek Sun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minsheng Pain Management	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
139 Medical Facility Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hill Jennifer	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bouallali Hind	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Belliard Christian Arturo Estevez	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ilya Blokh Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pena Pena Yomaris Mercedes Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Springfield Pediatric Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sahai Anuraag	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheung Sandy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cambridge Nephrology Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maganov Igor Anatolyevich Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Atlantic Gastroenterology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
The Pac Program Of The Bronx Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pin Mei Yao	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Borawski Dorota Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



New York State Department Of Health
 Delivery System Reform Incentive Payment Project

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Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Khan Naznin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lower Manhattan Gastroenterology Gr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Academy Medical Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jianlin Wu	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paik Woong Ki	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gates Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kings Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Grace	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berezovskaya Sabina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Niles	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronx Heart Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goldshiteyn Vadim Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ren Lili Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doshi Kaushik J	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
M & M Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Airiani Suzanna	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Matthew S Hepinstall Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nejati Golali Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Marian David Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gary S Hirshfield Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ear Nose & Throat Associates Of Ny	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rotkowitz Louis Philip Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Rehabilitation Medicine Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Robert Pick Md Mph	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chan Yuen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karayil Ajith	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shi Zhengzhuan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saravia Melissa Marie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Total Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Avany Lucia Victor	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Ting Ting	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tatiana Khrom Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Groupo Medico Dominicano Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Radiation Oncology Service	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Messer Caroline Korsten	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Avraham Y Henoah Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Walter A Besser Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alfonso A Ortiz	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Washington Heights Pediatrics	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ng Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abedin Jahidul	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacob Sunitha	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pattett Kathreen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mikheyeva Irina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Selfhelp Community Ser Inc Nhtd	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babu Patel Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jason Szepok Kong Do Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Victoria Physical Medicine Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ccn General Medicine Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Benjamin Wu Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kayaalp Emre	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Green Debora	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ivy Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Udeh Ngozi Julia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xiao Hui Fang	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wahl Samuel Joseph	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Woodside Medical Practice Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nazir Ahsan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Anesthesia Pain Management	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wei Alex	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Akhand Abdul	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prachi Sunil Dharia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Best Care Ever Medgroup Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saulius J Skeivys M D P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sound Health Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Org Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alizadeh Bajgiran Ahmadreza	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lnw Medical Office Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Susan Sunjung	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Premium Medical Care P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Keith C Chang Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eastchester Medical Associates Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Lu Irene	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hubbard Natalie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xavier Christopher Paul	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Haines Christine Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Tuyen T Trinh D O Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Hematology Oncology Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohamad Erfani	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rebecca Anne Mazurkiewicz	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roshee Tarethia Maitland	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmadzadeh Syed Ali	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Christina Mannino	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babayev Dina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nemes Petru Codrin Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Shuk	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohd A Hossain	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ann Prokofieva Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
R Guillen Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alex Bernstein	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ung Jannet Jungmin-Shin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Michael Correa Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Win Yin Yin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Degannes Rhonda Ruth	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Xinyu	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joseph Y Freidman	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Night And Day Medical Associates Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Condon Maureen Kathryn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kowalsky Marc Stephen Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aw Medical Office P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Narula Tara K Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Oncology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Puttaswamygowda Vishwawanath	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karen Clemente	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prince Jose Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yin Yin Win Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cuidado Medico Y Geriatrico Of Quee	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ortiz Rafael A	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Velasquez Luis	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Mei	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jean Joseph Lochard Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amsalem Yoram	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Le Jimmy Chung	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grand Concourse Medical Practice Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nyein Roland Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Prem Chattoo Do Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tribeca Internal Med & Acupuncture	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chopra Manju Rattan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Seung Hee Kang	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Edwin K Chan Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Thomas Lyo Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohammed Abdul Wahid	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jerome Pediatric Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
General Medical Services Of Queens	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chacko Jeffrey K	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schulman Erica	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Holman Anita	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fort Washington Medical Office Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Heritage Health And Housing, Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sullivan Erinmarie Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Luiza Guseynov Physician Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tribeca Radiation Oncology	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Washington Heights Gi Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Brian	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Children Of Zion Pediatrics	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Manhattan Advanced Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Figuroa-Martinez Silkia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhuiyan Rafique Ahmed	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hylan Boulevard Physical Medicine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Empire Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Procure Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kung Elaine F	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mastan Alina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Greater New York Ophthalmology Care	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Harlem Firstaid Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elshoff Kathryn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rafique Bhuiyan Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mjg Nursing Home Co Inc Lthhcp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spingsea Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Manhattan Pulmonary & Internal Me	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nguyen Nina Thi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehra Sonita	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sood Minisha Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shukla Hemangi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raymond L Yung Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Dermatology & Dermatologic	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Northern Urgent Medical Care	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Castillo Nicole	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cardiology Unlimited Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jerome Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medinova Physicians Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Burgos Javier P	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dqs Cardiac & Vascular Services P	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jonathann C Kuo Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sms Medical Services Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gorodnitskiy Alexander	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Etienne Stephanie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Jingbo	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sotelo-Garza Danilo	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khodabakhsh Kashyar	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Avany Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medical Arts Of New York	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nahar Most L	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sandy Cheung Do Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lau David Hai-Pong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guo Yujin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Familia Carmen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tarife Karen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Klein Pamela	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kang Jun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Quality Medical Oncology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Yio Medical Service Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ridgewood Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Gastroenterology Practice	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tocco Michael Anthony	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lili Ren Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Frances G Perez-Hernandez	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morris Rachel Emily	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mcperson Christina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dahan Shayna	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Watts Rakiya	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sohoo Stephanie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ambrose-Flaherty Stephanie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pantaleo Nicholas	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Turan Naciye	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moreno Fernando	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Schubl Sebastian	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Alexander C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Borrero Melissa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Godbout Brandon J	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dycman Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boro Park Ctr Rehab & Hlth Cr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Yi Xiu	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mayard Jules	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fils-Aime Marsha	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mesbah Reza	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Holtzman Dvora G	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xincon Home-Healthcare Services In	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eastern Park Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Central Radiology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ig Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Preventive Diagnostics Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Badin Shadi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hemli Jonathan Mishali	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wakim Wakim Victor	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yiu John	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



New York State Department Of Health
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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Flushing Family & Medical Practic	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wuhua Jing M D Ph D P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spinal Pain & Rehab Medical P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Best Care Medicine Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Awan Khurram Shahzad	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brmc Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lu Li	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Buzinover Alla B	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prestige Pediatric Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cohen Nadine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wiltshire Veronica	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kezerashvili Anna	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Azra Wiqas Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhenqing Brett Wu Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Reena J	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kiouranakis Nikolaos	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alwani Salima	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cadet-Valeus Sergelyne	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Neurology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abbydek Family Medical Practice Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Optimum Family Medicine Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mallapu Shravan K	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hassid Babak	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boston Pediatrics Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jayman-Aristide Razia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spyropoulos Alex C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacqueline Dauhajre Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yanfeng Chen Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hill Tawana	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Glenn Christophe	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dungarani Trushar	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fontana Gregory Paul	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Future Bright Dermatolog Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Amy S Chu-Wong Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ooi Yen Hoong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Westchester Avenue Family Medicine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Varghese Betsy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lindsay N Price	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Motazedi Jody Lynn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sheldon Medical Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Carreno-Rijo Elizabeth	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patel Chirag	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
First Health Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
All Time Care Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chinatown Gastroenterology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liotta Dara R	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Diaz Angel A	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Howard E Huey Do Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Taylor Kevia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Attoti Chandana	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stanley Ng Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Urological Care At Flushing Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nova Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Morales Gustavo Adolfo	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jordan Nicole E	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pearson Barry J	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Howard Siegel	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Safri Tabassum	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Thomas	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahman Rounak	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hasnayan Shahed Mahfuz Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jian Q Liang Dpm Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sionov Katie Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pinter David Michael	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Mario S Malonzo Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aaa Gastrointestinal Associates Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Health Point Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blyumberg Yelena	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Dialysis Svcs/Morris Park	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Park Jinhee	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jimenez Ramos Farrah Del C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Feng Yun Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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He Jinghua Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hamid Faisal	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Saint-Hilaire Marlene	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amazing Medical Services Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Comprehensive Womens Health Of Ny P	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Rosario H Reyes-Rigor Physician	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Manhattan Family Medicine Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Foundling Hospital	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Widmer Jessica Lynn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Corujo Omar	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fong Lu Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ckc Medical Office Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gazi Farhad M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prime Medical Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chao Elaine Lynn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Siryia Rosalynn H	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ruben U Carvajal M D P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nicolaou Nicos	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alberto Glendalyz	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mensah Stacey	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stewart Amanda Patrice	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Campusano Clarinelda	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hasanovic Adnan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Evergreen Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Abraham Cynthia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rahila Butt Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Paul K	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wong Irene	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Sophia Y	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Manhattan Pediatric Associates Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ani Samuel Onyemuwa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Byfield Celecia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Markowitz Mindy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Im Soyoun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arikupurathu Nisha	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medikids-Pediatric Medicine Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Kang Josephine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Galanis Tommy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
O'Leary Xiaoqing Lin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Iacono Danielle	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Voloshin Mario	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Xiao Hui	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sawhney Sabrina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Ob Gyn Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Enterprise Radiology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mensah Bridget	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gaweda Oskar Adam	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Diagnostic Imaging Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ahmed Mohamed	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lim H Tse Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maltez Janet Miraldo	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cao Shimin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Urban Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bachan Moses	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pena-Miches Cervantes Beethoven	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cai Steven	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Merriam Zachary	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aziz Tasnia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kings Pulmonary Associates P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kumar Manish	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yong Kang Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiansheng Zhao Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hispaniola Medical Care P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
The Heights Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhengzhuan Shi Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharad Soni Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zheng Xiangsheng	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Konig Michael P	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sebolsky Paul	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berookhim Boback	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Giannetti Cynthia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Octaviani-Reyes Melba E	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Broadway I Medicine Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kim Ji Young	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yanliang Sun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Doctor Mark Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ben-Meir Amos David	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Garcia Quinones Saribel	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
A H Jung & C S Lee Medicales Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
House Call Medical Services Of New	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nguyen Tracy Thuy	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ola Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Briskin Klara	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Talwar Sumit	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Frances	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Good Care Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Foot Care Of Flushing P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Godwin Medical P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Healthy Living David Ben Meir Md Mp	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Womens Health Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wei Guo Lin Physician Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kruh Jonathan Nicholas	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amsterdam Medical Practice Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lin Ya Li	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gao Pei	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Carl M Jean Dpm Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duchnowski Eva	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
181st Street Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liao Kevin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shin Dong-In	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Maria L	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lewis Kamica Lynn	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wilson Ko Md Facs Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mathur Jay Simlote	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spencer Trudy I	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ypp New Modern Medicine Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shankar Adurthy Ananth	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lugo Joanelle	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Ho Vanessa	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhupendra R Patel Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Olivo-Mercedes Yohanna M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liu Shin-Hua	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Duda Olha	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Feuerstein Michael A	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pirelli Luigi	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bukhman Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gould Jennifer Ann	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hue Jennifer E	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Young Chainllie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rosenbaum-Roller Shira	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mehta Ankit	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Guy-Rodriguez Eva	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gu Kangxia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hillside Polymedic D Ant T Ctr	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Giaquinto Beth	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Milillo Ralph Anthony	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Holliswood Operating Co Llc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alleyne Diahann Melvina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Michael Li Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Internal Medicine & Geriat	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kahlon Samrina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bustos Emmanuel	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Miglino Christine Jane	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Shulman Julia Paula	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krivitskaya Nataliya	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Excelsior Integrated Medical Group	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Yanlun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhang Yuqing	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jo Jihyun	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gonzalez Paul Edward	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dayani Farsima	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Rachel	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mun Sun Ok	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boxer William Paul	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Pandit Ashwini	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grace Family Medical Practice Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yun Feng Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goenka Anuj	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Szu-Yu	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Angie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Muhammad Sanni Adam M D P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Phoenix Medical Office Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ritecare Medical Office Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Premier Renal Care Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zelmanovich Anat	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kilshok Sofya S	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Khalil Susan S	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Spadafina Sarah Marie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajee Nirmala K	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ionescu Adina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hammond Stephen Bemigho	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Karibandi Karthik	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Goncharov Dimitry	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sachdev Karina	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tomback David Adam	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wilson-Bennett Renee	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Singh Amandeep	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee Michael Jerry	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jiang Xiao-Hong	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Des Jean Ryan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
David Krumholz Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chow Philbert	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cheuk W Lau Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wang Chuansheng	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chowdhury Utpal	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rs Nuclear Medicine Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
East Sunrise Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allcity Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ablan Danilo Nagtalon	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Evergreen Medical Clinic Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Qsac Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
First Step Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yoon Mo Myung Ophthalmology Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Physicians Of The Future Medgroup P	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cordoba Vargas Sandra Edith	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dupree Shashonna	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samboy Jazlen Rocio	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lydig Pediatrics Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dontineni Nripen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Safe Medical Care Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parkview Operating Co Llc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Uzor Jennyfer Paola	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wensong Li	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Heart & Vascular Medicine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
C & Y Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Daniels Kathryn Elizabeth	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santha Mohan Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fit Feet Podiatry Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Van Orsouw Jillian Suzanne	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Brinster Derek Ralph	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moshiri Kourosh	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Richard Kar	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Minaeian Artin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Austin Lu Medical Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronx Community Medicine Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blum Corinne E	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gialvsakis John Peter	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kang Miyoung	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rizzo Mariano	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zimmerman Jason Simon	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parekh Sejal	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zabar Benjamin	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Anderson Todd	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sharma Shruti	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Weeks Brandon Michael	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hung Stephanie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Chan Bennett	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ledwith Allison Patricia	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Macri Mirtha J	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chen Stanley	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Habib Salma	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eisenberg Rachel	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tseng Tiffany	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fox Patricia A	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Pastori Luciano Juan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Salcedo Osiris	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tang Karen	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paschal Gehres Megan	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yap Laurel Win	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wanda Rodriguez Md	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tian Wenping	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Borowski Allison Marie	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Moses Danielle Monique	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Applewhaite Janelle M	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yin Xiaoqin S	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sohn Bret K	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Yuancong Wang Do Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
You Lu	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gorski Matthew Gabriel	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Maranatha Human Svcs Inc Day	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Girling Health Care Of New York Inc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Vocational Inst Proj Comm Svc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Samuel Cho Md Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wingtat Mui Md Pllc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Broadway Internal Medicine Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kam Yi Sheng	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bronx Heart Medical Pc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kennedy Pavilion Rh I Llc	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sapphire Ctr Rehab & Nrsng C Queens	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Li Jack	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Persaud Indrani	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wu Tao	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Harris Michael Eli	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hernandez Angie Lorena	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Leung Ho Ning	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tam Anthony	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Healthy Children Pediatric Medicine	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jose A Goris M D P C	All Other	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mercedes Mota-Martinez, Dentist, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Juan Collado, Dds Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Douglas B. Friedrich, Md, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Liberty Dental Care P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajesh Patel	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Arthur R Dove Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Heights Surgicare	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Candida Catucci Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sapna Pandya	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krishna K. Jhaveri Physician Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Patrick Kolwaite	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
June Yin, Md	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Williamsburg Physical Therapy	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mammen Anish Dr.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Parihar, Karanjit	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rain (Regional Aid For Interim Needs)	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sincere Medical Care Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nottage Edith	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rajendra Mark Rampersaud Md Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zhao Gastroenterology & Hepatology Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
General Medical Services Of Queens	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chatham Medical Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kew Gardens Family Physicians, Llp	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Primary Care Medicine Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Concourse Village Primary Care Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jp Gastroenterology Medical Practice, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advantage Health Medical Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amber Court Of Westbury	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Babubhai I Patel Physician Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ho Mau Liu Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Fdlc Pediatrics Medicine.Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aljud Licensed Home Care Agency DbA Amber Court At Home	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delong Liu,M.D.& Min Xu,M.D.,P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hermano, Lourdes	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Casida Nenita	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hobeika Paul Dr.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Village Primary Medical Care	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Deen, Ryan	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Junction Blvd Pediatrics	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Longevious Medical Health Care Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chixin Fang Medical P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
A T Adebayo, Md, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jung A Han, Md, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Clason Point Medical Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allcity Medical, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mesbah Medical Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Fw Comprehensive Medical Care Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Uptown Medical Llp	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bhavana R. Japi Physician P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ig Medical P.C	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Resource Medical Services Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Raphael Novogrodsky Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohammad Basit, Mdpc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sterling Podiatry & Medical Office	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Atlantis Reh & Res Hlth Cr Fac	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Salcare Home Health Services, Inc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Winston C. Tom Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tandon, Pooja	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Berkshire Farm Center And Services For Youth	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Gordon Claudia	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jose Goris Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mohammed K Rashid Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allcity Medical, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Episcopal Social Services	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ling O. Cheng, M.D., P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Merriderm Dermatology Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Dominick K. Bioh Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Le Kiong Huang Mdpc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Katherine F. Zeng,M.D.P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Medina E. Barone	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mrs. Mary'S Place Hcs, Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Michelle J. Jones	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Truong, Ann	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr. William O. Benenson Rehab Pavilion	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Manor Dialysis Center, Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Health Development & Restorative Medicine, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Diagnostic Imaging Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Won Sohn, Md	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Catherine Alikor Mpi, Physician Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
New York Vein Center	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aol Medical Services P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Kimchuck, Elaina	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xeron Clinical Lab Inc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Manor Care Center	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Flushing Manor Nursing Home	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Queens Cardiovascular Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Allcity Medical, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Otolaryngology Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jana Health Care Physician P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Inwood Medical Diagnostic, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jacqueline Deleon	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Medical Center - Brady Msc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jana Health Care Corp	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Universal Health Care, Llc D/B/A At Your Side Home Care Services	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ckc Medical Inc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
St Johns Home For Boys	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Madison York Rego Park, Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lutheran Social Services Of Metropolitan New York	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
John, Anish	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Williamsburg Internal Medicine Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blumenkrantz, Ingrid	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Brogan Gerard	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tapper Michael Dr.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
South Queens Pediatric Assoc, Llp	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chung Lap Pang Benny	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Optimal Physical Medicine And Ehabilitation Of Nyc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Medical Center - Brady Ira	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
God'S Love We Deliver, Inc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elm York, Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amber Court Of Pelham Gardens	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chdfs, Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sawhne, Jasmine	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Empire Joint And Spine Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ny Hispanic Family Medical Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Essen Medical Associates,Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Ww Dermatology Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hui Chih Yung Physician Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Community Home Care Referral Service, Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
The First Chinese Presbyterian Community Affairs Home Attendant Corp.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grossman, Lisa	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Krishna K Jhaveri Physician Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Renato Yu M.D. F.A.A.P., P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alejandro Williams Dental Office Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr. Ma'S Medical Rehab., P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Mararaja, Binal	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dhillon, Swapna	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Granditroiano, Caterina	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sorensen, Mark	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Christopher Chow Dpm Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Womens Health Practice Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Paul Frank Md Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr. Rudrama Duggirala Medical Services,Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hanna Z Adult Daycare Inc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Zambon Primary Healthcare Medecine	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stages Pediatrics P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Life Adjustment Center, Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



**New York State Department Of Health
Delivery System Reform Incentive Payment Project**

DSRIP Implementation Plan Project

Advocate Community Providers, Inc. (PPS ID:25)

* Safety Net Providers in Green

Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Junction Medical, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Long'S Medical Rehab, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Curtis Tennyson	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Harrison F. Mitchell, M.D.,P.C	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wadsworth Medical, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jyming Wang Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sherman Pediatrics Care Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
York Home Care, Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hamilton, Robin	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alternate Staffing Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Madison York Assisted Living Community Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Susan Sachs	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Eric Rishe Md	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Heights Physician Medical Care P.C	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dr Fu Rehabilitation Medical P C	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Summit Home Health Care	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Caipa Social Day Care Center	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
David Hom, Md	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Martin De Porres Group Homes	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hao Ye, Md	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Venkata Ravi, Md	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hailiu Zuo, Physician,Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Best Care Ever I Inc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Future Bright Management, Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
P.R. Medical Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Malaspina, Dolores	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Andrea Ward Dpm Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Chorowski, Jason	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Dmitry Khasak Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amber Court Of Brooklyn	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Metropolitan Medical Care P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sauln Ashley	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Evergreen Physical Therapy Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Good Sheperd Services	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Isabella Nursing Home	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elizabeth Yougewirth Dpm Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
Provider Name	Provider Category	2.a.i	2.a.iii	2.b.iii	2.b.iv	3.a.i	3.b.i	3.c.i	3.d.iii	4.b.i	4.b.ii	
Best Care Medical Services Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Aronoff Matthew	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Homefirst Lhcsa, Inc D/B/A Mjhs License Home Care Service Agency	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bethel Medical Practice P.C	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Anthony Verrone, M.D., P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Best Choice Home Health Care, Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Rrg Medical Practice, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Douglas B. Friedrich, Md, P. C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Josephine Huang Md, PLLC	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
University Medical Office, PLLC	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Little Ones Pediatrics	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Faith Mission Alcohol Crisis Center	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Jamaica Hospital Medical Center - Brady Gr Day Hab	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Greenblatt Michael Dr.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Luis F Stiller Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
P & P Pediatric, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hispaniola Pediatrics Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Grace J. Geevarghese	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
David Mun Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Nae Edison Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ola Pediatrics	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Elderplan Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cindy Chen Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Forestdale, Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Santillan Yadira	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Loring Medical Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
The Grand Pavilion At Rockville Ctr	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Clerisme Marie	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Boyce Rosalind	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stiebel Troy	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Lee & Kong, Llp	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Virk Amrit	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Amazing Home Care	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Advanced Cardiovascular Imaging, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cleaver John	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	



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Participating in Projects												
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Wisdom Medical P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
East Shore Women'S Care, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Joshi, Sagar	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alex Wei, M.D. Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Janny A. Ozuna Mendez, Md, Pllc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Roosevelt Cardiology Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
All Neurological Services Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Imperial Medical, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Ming Zhu M.D.P.C	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Sunrise Medical Care, Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Xiao Huifang Ob/Gyn,Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Tien Cardiology Associate, P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Endocrine Medical Care Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Centerlight Healthcare Inc.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alina Mastan Physician P.C.	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Linfield, Louis	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Neda Khoobyar, Dpm	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Cruz & Herrera Mds Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Bobbitt Theresa	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Hands On Health Associates, Llc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Julio E Albarran Marzan Md Pc	Uncategorized	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	

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