



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

**DSRIP Scoring Summary:**  
*CNY DSRIP Performing Provider System*

February 17 - 20, 2015



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## PPS Informational Page and Proposal Overview

**PPS Name:** CNY DSRIP Performing Provider System

**PPS Lead Organization:** University Hospital SUNY Upstate

**PPS Service Counties:** Cayuga, Lewis, Madison, Oneida, Onondaga, Oswego

**Total Attributed Population:** 167,136

### Goals of the PPS:

1. Build an integrated health care delivery system for Medicaid members and the low-income uninsured.
2. Build, improve, and integrate primary care and behavioral health access and coordination.
3. Ensure access and transform care, systems, coordination, and transitions of care across sectors.
4. Engage the workforce in understanding and accessing health care transformation opportunities.
5. Assure a sustainable network.
6. Implement a comprehensive population health management strategy.

### Network Composition:

Provider Types	Total Providers in Network
Primary Care Physicians	307
Non-PCP Practitioners	973
Hospitals	17
Clinics	56
Health Home / Care Management	16
Behavioral Health	106
Substance Abuse	18
Skilled Nursing Facilities / Nursing Homes	37
Pharmacy	7
Hospice	4
Community Based Organizations	29
All Other	723



### Projects Selected – Summary Table

Project Selection	Project Title	Index Score	Number of PPS' Pursuing Project	% of PPS' Selecting Project
2.a.i	Create Integrated Delivery Systems focused on Evidence-based Medicine/Population Health Management	56	22	88%
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	46	10	40%
2.b.iii	ED care triage for at-risk populations	43	13	52%
2.b.iv	Care transitions intervention model to reduce 30 day readmissions for chronic health conditions	43	17	68%
2.d.i	Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care	56	14	56%
3.a.i	Integration of primary care and behavioral health services	39	25	100%
3.a.ii	Behavioral health community crisis stabilization services	37	11	44%
3.b.i	Evidence-based strategies for disease management in high risk/affected populations (adult only)	30	15	60%
3.g.i	Integration of palliative care into the PCMH Model	22	9	36%
4.a.iii	Strengthen Mental Health and Substance Abuse Infrastructure across Systems	20	13	52%
4.d.i	Reduce premature births	24	2	8%
	<b>Cumulative Index Score</b>	<b>416</b>		
	<b>PPS Rank by Cumulative Index Score</b>	<b>6</b>		

## Organizational and Project Scoring Summary Tables

### Organizational Component Scores

Please note, the organizational component score is worth 30% of the final score with the Project score representing 70% of the overall score for each DSRIP project.

Section Points Possible		Reviewer Scores						Subjective Scores				Objective Score	Final Org Score <sup>2</sup>
Section	Points Possible	1	2	3	4	5	6	Median	Average	Trimmed Average	Selected Subjective Score <sup>1</sup>	Workforce Score	
Executive Summary	Pass/Fail	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	N/A	Pass
Governance	25	21.19	24.54	24.33	23.65	21.96	25.00	23.99	23.44	23.44	23.99	N/A	<b>23.99</b>
Community Needs Assessment	25	25.00	24.79	23.96	24.38	24.58	23.96	24.48	24.44	24.44	24.48	N/A	<b>24.48</b>
Workforce Strategy	20	16.00	16.00	16.00	15.63	15.07	16.00	16.00	15.78	15.93	16.00	3.33	<b>19.33</b>
Data Sharing, Confidentiality & Rapid Cycle Evaluation	5	4.17	5.00	5.00	5.00	4.83	5.00	5.00	4.83	4.97	5.00	N/A	<b>5.00</b>
PPS Cultural Competency/Health Literacy	15	7.50	14.17	15.00	15.00	13.33	15.00	14.58	13.33	14.50	14.58	N/A	<b>14.58</b>
DSRIP Budget & Flow of Funds	Pass/Fail	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	N/A	Pass
Financial Sustainability Plan	10	10.00	8.89	9.44	9.44	7.78	10.00	9.44	9.26	9.56	9.56	N/A	<b>9.56</b>
												<b>Total</b>	<b>96.94</b>

<sup>1</sup> **Selected Subjective Score** is the highest of the median, average, and trimmed average

<sup>2</sup> **Final Org Score** is the sum of the *Selected Subjective Score* and *Workforce Score*

### Project Scores

Please note, the project scores are worth 70% of the final score with the Organizational score representing 30% of the overall score for each DSRIP project.

Points Possible		Reviewer Scores						Subjective Scores				Objective Scores		Total Project Score <sup>2</sup>
Project #	Subjective Points Possible	1	2	3	4	5	6	Median	Average	Trimmed Average	Selected Subjective Score <sup>1</sup>	Scale Score	Speed Score	
2.a.i	40	40.00	36.67	36.67	38.33	40.00	36.67	37.50	38.06	38.06	38.06	13.98	30.00	<b>82.03</b>
2.a.iii	20	20.00	20.00	18.33	18.33	20.00	20.00	20.00	19.44	19.44	20.00	27.18	33.50	<b>80.68</b>
2.b.iii	20	17.33	20.00	17.33	20.00	16.00	20.00	18.67	18.44	18.44	18.67	29.52	33.75	<b>81.93</b>
2.b.iv	20	17.33	20.00	18.67	20.00	14.67	20.00	19.33	18.44	19.20	19.33	27.91	32.25	<b>79.49</b>
2.d.i	20	20.00	20.00	18.33	18.33	13.33	20.00	19.17	18.33	19.33	19.33	30.00	35.00	<b>84.33</b>
3.a.i	20	17.33	18.67	17.33	17.33	16.00	20.00	17.33	17.78	17.33	17.78	29.31	33.50	<b>80.59</b>
3.a.ii	20	17.33	20.00	20.00	20.00	16.00	20.00	20.00	18.89	19.47	20.00	36.17	33.50	<b>89.67</b>
3.b.i	20	16.00	16.00	16.00	14.67	13.33	16.00	16.00	15.33	15.73	16.00	26.02	31.25	<b>73.27</b>
3.g.i	20	17.33	20.00	20.00	18.67	16.00	20.00	19.33	18.67	19.20	19.33	28.62	35.50	<b>83.45</b>
4.a.iii	100	88.89	100.00	77.78	88.89	83.33	100.00	88.89	89.81	89.81	89.81	0.00	0.00	<b>89.81</b>
4.d.i	100	100.00	100.00	100.00	100.00	86.67	100.00	100.00	97.78	100.00	100.00	0.00	0.00	<b>100.00</b>

<sup>1</sup> **Selected Subjective Score** is the highest of the median, average, and trimmed average

<sup>2</sup> **Total Project Score** is the sum of *Selected Subjective Score*, *Scale Score*, and *Speed Score*



### Final Application Score Calculation

30% Organizational Score, 70% Project Score + Bonuses

Project #	Organizational Score	Weighted Organizational Score (0.3)	Project Score	Weighted Project Score (0.7)	Bonus (2.a.i IDS)	Bonus (Workforce)	Bonus (2.d.i Project)	Final Application Score
2.a.i	96.94	29.08	82.03	57.42	3.00	3.00	TBD	<b>92.51</b>
2.a.iii	96.94	29.08	80.68	56.47	N/A	3.00	TBD	<b>88.56</b>
2.b.iii	96.94	29.08	81.93	57.35	N/A	3.00	TBD	<b>89.44</b>
2.b.iv	96.94	29.08	79.49	55.64	N/A	3.00	TBD	<b>87.72</b>
2.d.i	96.94	29.08	84.33	59.03	N/A	3.00	TBD	<b>91.12</b>
3.a.i	96.94	29.08	80.59	56.41	N/A	3.00	TBD	<b>88.49</b>
3.a.ii	96.94	29.08	89.67	62.77	N/A	3.00	TBD	<b>94.85</b>
3.b.i	96.94	29.08	73.27	51.29	N/A	3.00	TBD	<b>83.37</b>
3.g.i	96.94	29.08	83.45	58.42	N/A	3.00	TBD	<b>90.50</b>
4.a.iii	96.94	29.08	89.81	62.87	N/A	3.00	TBD	<b>94.95</b>
4.d.i	96.94	29.08	100.00	70.00	N/A	3.00	TBD	<b>100.00</b>

## Organizational Component – Narrative Summary

Section	Subjective Points	Points Possible	Strengths	Comments
Executive Summary	Pass	Pass/Fail	<ul style="list-style-type: none"> <li>PPS' Executive Summary received passing evaluation from all scorers</li> </ul>	
Governance	23.99	25	<ul style="list-style-type: none"> <li>Response adequately identifies the organizational structure and explains why the selected structure will contribute to the PPS' success</li> <li>Description of clinical governance fully describes leadership, membership and responsibilities.</li> <li>Response contains sufficient detail describing the decision making/voting process that will be implemented and adhered to by the governing team</li> <li>Process by which the PPS will monitor and report performance indicates a sufficient level of support for lower performing members. Response comprehensively describes processes that will be implemented to support the financial success of the organization and the decision making of the PPS' governance structure</li> </ul>	<ul style="list-style-type: none"> <li>Strategy for contracting with CBOs not described</li> <li>Description of how members were selected to governing body unclear</li> <li>Explanation of how governing members are representative across the PPS insufficiently described</li> <li>Response does not clearly describe how conflicts among governing members will be resolved</li> <li>Response limits Medicaid members' engagement on governing topics to solely electronic mediums</li> <li>Response should have included examples of which CBOs, unions, or other community organizations are part of the Project Advisory Committee</li> <li>Official responsible for PPS compliance activities is not identified, nor is the organizational relationship between compliance and governing team established</li> <li>Response does not explain how members will be made aware when a provider is removed, nor does the PPS assist in finding effected members a new provider</li> </ul>





Section	Subjective Points	Points Possible	Strengths	Comments
Community Needs Assessment	24.48	25	<ul style="list-style-type: none"> <li>Response sufficiently describes the existing healthcare infrastructure and environment, including the number and types of healthcare providers available to the PPS</li> <li>Response effectively explains how community resources will be modified to meet the needs of the community, for example food banks and community gardens</li> <li>Stakeholder feedback on CNA process, focus groups representative of beneficiaries and geography, clearly described.</li> <li>CNA used a broad set of data sources to derive assessment and findings</li> </ul>	<ul style="list-style-type: none"> <li>Response does clearly identify excess capacity of institutional beds that may be modified or reduced over the term of DSRIP</li> <li>Response addresses leading causes of hospitalization but does not address leading causes of preventable hospitalizations</li> </ul>
Workforce Strategy	16.00	20	<ul style="list-style-type: none"> <li>Response successfully summarizes the redeployment, retraining, and reductions to workforce the PPS is considering</li> <li>Response sufficiently describes the role of labor (intra/inter-entity) representatives with 8,000 employees represented by unions</li> <li>Response successfully describes how workforce strategy may intersect with existing state program efforts</li> <li>PPS' commitment to minimizing disruption to workforce clearly described</li> </ul>	<ul style="list-style-type: none"> <li>Response does not indicate whether the retraining will be voluntary</li> <li>Process for dealing with existing employees who refuse retraining is not adequately described in the response.</li> <li>Process in determining whether the benefits and wages of affected employees will be impacted is not adequately described</li> <li>Response does not clearly address how the PPS will engage frontline workers in the implementation of system change</li> </ul>
Data Sharing, Confidentiality, and Rapid Cycle Evaluation	5.00	5	<ul style="list-style-type: none"> <li>Response adequately explains how PPS partners will ensure privacy and security of data</li> <li>Response successfully identifies the unit that will be accountable for reporting results and making recommendations on actions requiring further investigation into PPS performance</li> <li>Response clearly describes the organizational relationship of the RCE unit to the PPS' governing team</li> <li>Patient privacy standards and process will be built upon existing consent policies</li> </ul>	<ul style="list-style-type: none"> <li>Response does not provide enough details on which data sources or measures the PPS intends to use to evaluate performance</li> </ul>

Section	Subjective Points	Points Possible	Strengths	Comments
Cultural Competency/Health Literacy	14.58	15	<ul style="list-style-type: none"> <li>Response describes a successful plan to educate and access staff and other frontline workers on the attitudes, knowledge and skills necessary for culturally competency</li> <li>Response sufficiently explains initiatives the PPS will pursue to promote health literacy; particularly using national “best practices”</li> <li>PPS will contract with health literacy CBOs to test the readability of patient materials with beneficiaries</li> </ul>	<ul style="list-style-type: none"> <li>Response does not provide a sufficient plan or describe ongoing processes for developing a culturally competent, culturally responsive system of care</li> <li>Response does not address whether the PPS will contract with CBOs for cultural competency</li> </ul>
DSRIP Budget & Flow of Funds	Pass	Pass/Fail	<ul style="list-style-type: none"> <li>PPS received passing evaluations in all five Budget &amp; Flow of Funds categories from all scorers</li> </ul>	
Financial Sustainability Plan	9.56	10	<ul style="list-style-type: none"> <li>Solid plan for supporting the financial sustainability of fragile providers through the use of provider peer support to provide technical assistance</li> <li>Response clearly explains how the PPS will sustain outcomes after the conclusion of the program for example pairing a fragile provider with a stronger partner</li> <li>Response articulates the PPS role in assisting partners through leadership and technical support, for example, assisting providers implementing value-based contracting</li> </ul>	<ul style="list-style-type: none"> <li>Response describes a voluntary survey conducted that does not obtain enough detail to reliably assess the financial stability of PPS partners</li> <li>Response does not describe any current financial restructuring efforts underway with PPS providers</li> </ul>
<b>Final Organizational Score</b>	<b>96.94</b>	<b>100</b>		

### Bonus Component – Narrative Summary

Section	Subjective Points	Points Possible	Strengths	Comments
Bonus Points – Population Health Management	3.00	3	<ul style="list-style-type: none"> <li>Response clearly identifies how the PPS has engaged key partners with proven population health management skill sets</li> </ul>	
Bonus Points - Workforce	3.00	3	<ul style="list-style-type: none"> <li>PPS has contracted with a proven healthcare workforce vendor</li> </ul>	
Bonus Points – 2.d.i	TBD	TBD	<ul style="list-style-type: none"> <li>PPS is pursuing project 2.d.i</li> </ul>	



## Project Scoring Narrative Summaries

### Project 2.a.i

**PPS Name:** CNY DSRIP Performing Provider System

**DSRIP Project Number:** 2.a.i

**DSRIP Project Title:** Create Integrated Delivery Systems focused on Evidence-based Medicine/Population Health Management

**Number of PPS' Pursuing This Project:** 22

### Final Application Score

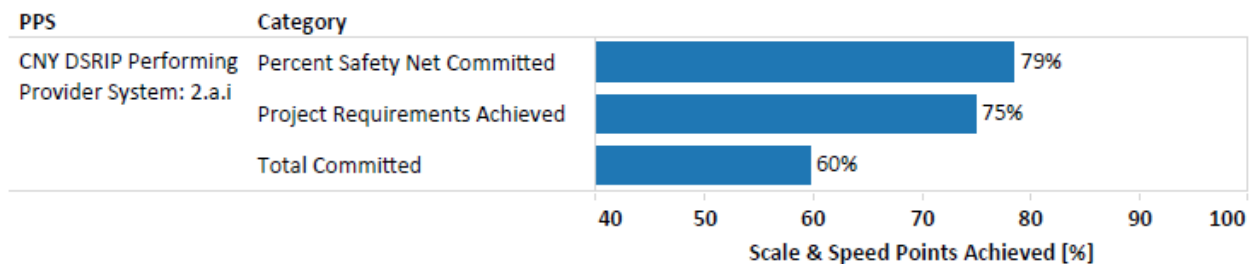
**92.51**

#### Individual Project Score:

Subjective Points	Points Possible	Strengths	Comments
38.06	40	<ul style="list-style-type: none"> <li>Response provides a sufficient summary of the current assets/resources to be mobilized to help this project meet the needs of the community</li> <li>PPS exhibits strong commitment to invest in IT infrastructure for care management activities</li> <li>IDS governance strategy clearly identifies IT needs of PPS</li> <li>Response clearly describes PPS governance strategy with specific governance milestones</li> </ul>	<ul style="list-style-type: none"> <li>Description does not link the findings from the Community Needs Assessment with the project design and sites selected</li> </ul>

#### Project Scale and Speed:

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 2.a.i	Percent Safety Net Committed	59.68%	7.85	10
	Project Requirements Achieved	DY4 Q3/Q4	30.00	40
	Total Committed	2293	5.97	10





Project 2.a.iii

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 2.a.iii

DSRIP Project Title: 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

Number of PPS' Pursuing This Project: 10

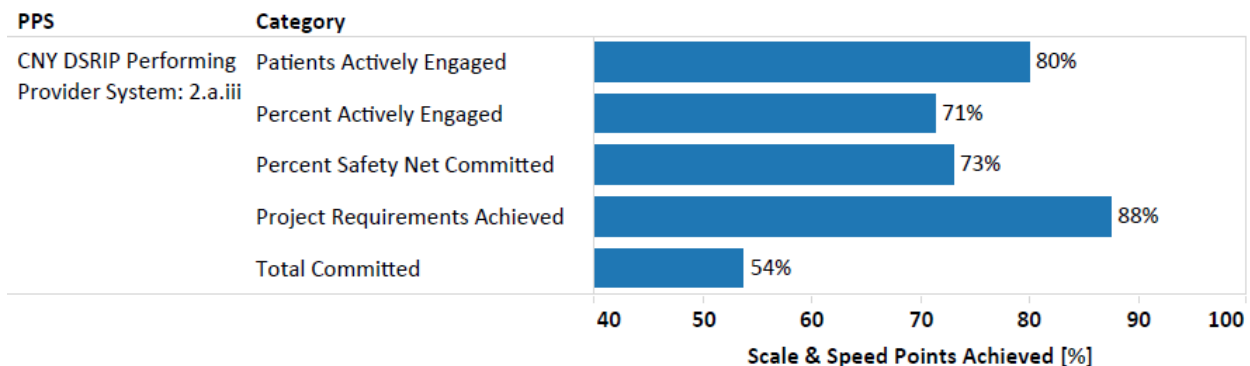
Final Application Score 88.56

Individual Project Score:

Table with 4 columns: Subjective Points, Points Possible, Strengths, and Comments. It details the scoring for the project, showing 20.00 subjective points out of 20 possible points, with specific strengths and a comment regarding the response's link to findings.

Project Scale and Speed:

Table with 5 columns: PPS, Category, PPS Submission, Points Achieved, and Possible Points. It lists various project categories and their corresponding submission dates, points achieved, and total possible points.





Project 2.b.iii

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 2.b.iii

DSRIP Project Title: ED care triage for at-risk populations

Number of PPS' Pursuing This Project: 13

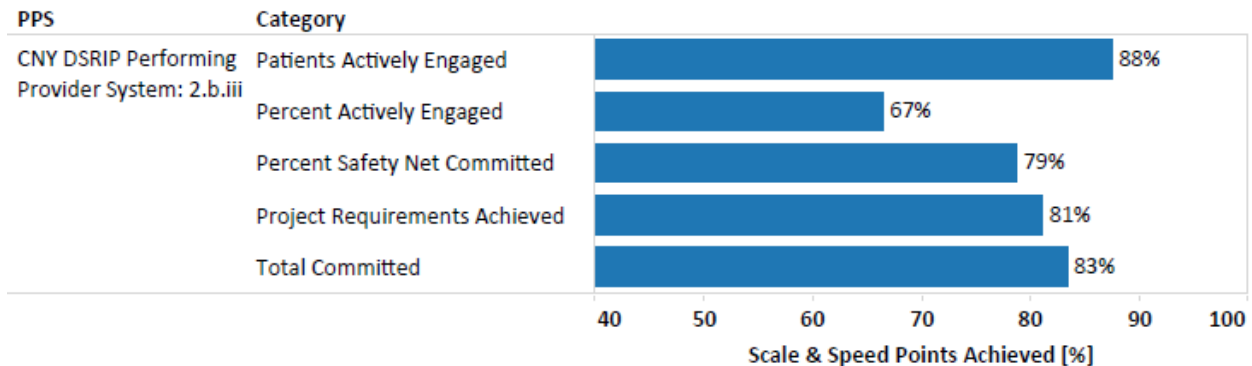
**Final Application Score**  
**89.44**

Individual Project Score:

Subjective Points	Points Possible	Strengths	Comments
18.67	20	<ul style="list-style-type: none"> <li>Response provides a sufficient summary of the current assets/resources to be mobilized to meet the needs of the community</li> <li>Response indicates linkages with other PPS projects to maximize effectiveness</li> <li>Response sufficiently identifies project challenges or anticipated issues the PPS will encounter in implementing this project and describes how these challenges will be appropriately addressed</li> </ul>	<ul style="list-style-type: none"> <li>Response describes intent to collaborate, however unclear how this plan fits with other PPS coordination plans</li> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> </ul>

Project Scale and Speed:

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 2.b.iii	Patients Actively Engaged	DY3 Q3/Q4	17.50	20
	Percent Actively Engaged	9.63%	13.31	20
	Percent Safety Net Committed	39.84%	7.88	10
	Project Requirements Achieved	DY3 Q3/Q4	16.25	20
	Total Committed	11	8.33	10





Project 2.b.iv

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 2.b.iv

DSRIP Project Title: Care transitions intervention model to reduce 30 day readmissions for chronic health conditions

Number of PPS' Pursuing This Project: 17

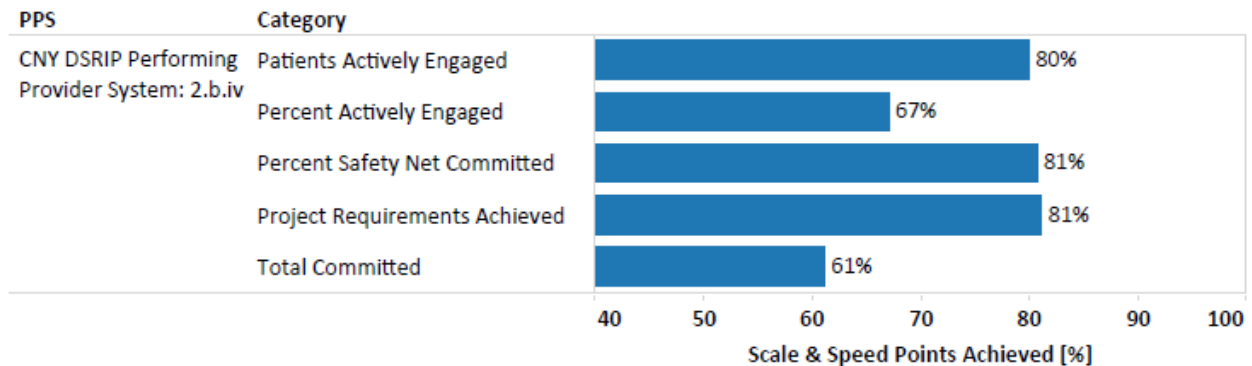
**Final Application Score**  
**87.72**

Individual Project Score:

Subjective Points	Points Possible	Strengths	Comments
19.33	20	<ul style="list-style-type: none"> <li>Response sufficiently identifies project challenges or anticipated issues the PPS will encounter in implementing this project and describes how these challenges will be appropriately addressed</li> <li>PPS will build upon current staff with experience in transition programs</li> <li>Challenge of rural care coordination will be overcome with new telehealth models</li> </ul>	<ul style="list-style-type: none"> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> <li>Response does not contain enough detail regarding the existing readmission programs that will be repurposed</li> <li>Response describes intent to collaborate, however unclear how this plan fits with other PPS coordination plans</li> </ul>

Project Scale and Speed:

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 2.b.iv	Patients Actively Engaged	DY4 Q3/Q4	16.00	20
	Percent Actively Engaged	7.90%	13.41	20
	Percent Safety Net Committed	37.99%	8.08	10
	Project Requirements Achieved	DY3 Q3/Q4	16.25	20
	Total Committed	1235	6.11	10





Project 2.d.i

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 2.d.i

DSRIP Project Title: Implementation of Patient Activation Activities to Engage, Educate and integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care

Number of PPS' Pursuing This Project: 14

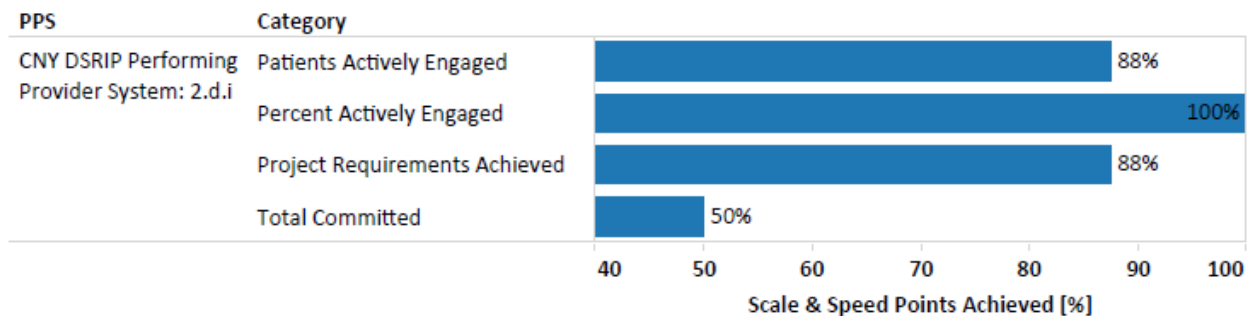
**Final Application Score**  
**91.12**

Individual Project Score:

Subjective Points	Points Possible	Strengths	Comments
19.33	20	<ul style="list-style-type: none"> <li>Response sufficiently identifies the project challenge of identifying and tracking patients in the project.</li> <li>PPS lays out plan to recruit and train laypeople in the communities to assist providing project outreach</li> </ul>	<ul style="list-style-type: none"> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> <li>Response does not sufficiently describe the PPS' capacity to handle an 11th project</li> <li>Response does not contain details about CBOS, HHs or other partners that will be repurposed for this project</li> <li>Response describes intent to collaborate, however unclear how this plan fits with other PPS coordination plans</li> </ul>

Project Scale and Speed:

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 2.d.i	Patients Actively Engaged	DY3 Q3/Q4	17.50	20
	Percent Actively Engaged	100.00%	20.00	20
	Project Requirements Achieved	DY3 Q3/Q4	17.50	20
	Total Committed	200	10.00	20







Project 3.a.i

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 3.a.i

DSRIP Project Title: Integration of primary care and behavioral health services

Number of PPS' Pursuing This Project: 25

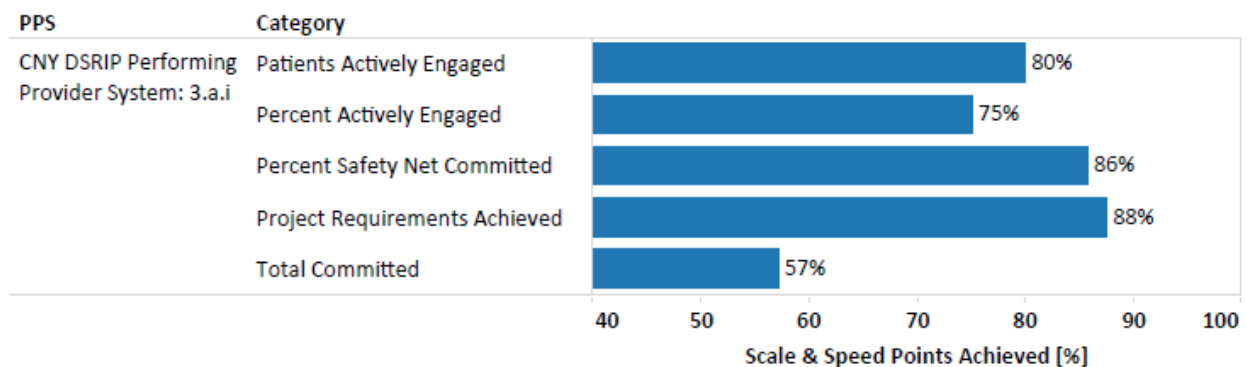
**Final Application Score**  
**88.49**

Individual Project Score:

Subjective Points	Points Possible	Strengths	Comments
17.78	20	<ul style="list-style-type: none"> <li>Response provides a sufficient summary of the current assets/resources to be mobilized to help this project meet the needs of the community</li> <li>CNA date provided supports the need for this project within the community</li> <li>Response describes the use of experienced BH providers as resources for PCP site, offering technical support and training</li> </ul>	<ul style="list-style-type: none"> <li>Response describes need, but lacks discussion of project design, sites, and resources</li> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> <li>Discussion of how challenges will be addressed lacks sufficient detail</li> <li>Response describes intent to collaborate, however unclear how this plan fits with other PPS coordination plans</li> </ul>

Project Scale and Speed:

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 3.a.i	Patients Actively Engaged	DY4 Q3/Q4	16.00	20
	Percent Actively Engaged	40.09%	15.01	20
	Percent Safety Net Committed	41.07%	8.58	10
	Project Requirements Achieved	DY3 Q3/Q4	17.50	20
	Total Committed	1560	5.71	10





Project 3.a.ii

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 3.a.ii

DSRIP Project Title: Behavioral health community crisis stabilization services

Number of PPS' Pursuing This Project: 11

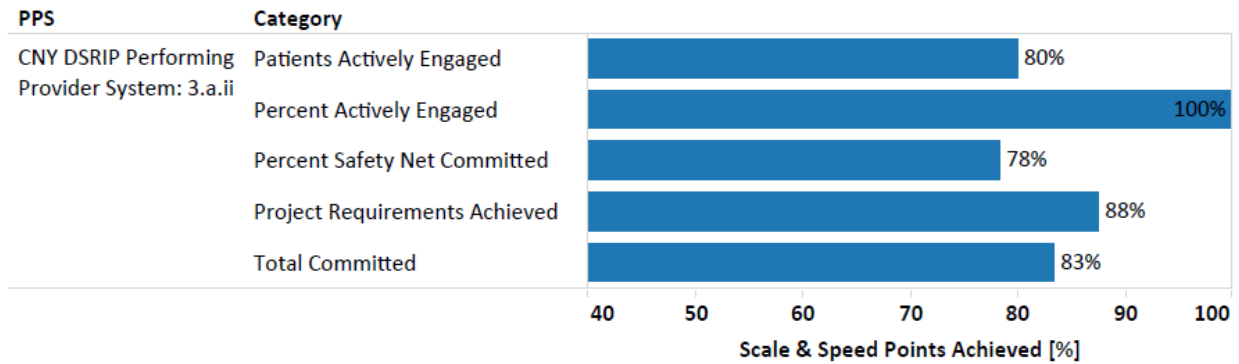
**Final Application Score**  
**94.85**

**Individual Project Score:**

Subjective Points	Points Possible	Strengths	Comments
20.00	20	<ul style="list-style-type: none"> <li>Response clearly describes existing mobile outreach crisis teams in the project design</li> <li>Response describes new resources that will be developed. For example, telepsychiatry will be developed for rural communities</li> <li>Response sufficiently identifies project challenges or anticipated issues the PPS will encounter in implementing this project and describes how these challenges will be appropriately addressed</li> </ul>	<ul style="list-style-type: none"> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> </ul>

**Project Scale and Speed:**

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 3.a.ii	Patients Actively Engaged	DY4 Q3/Q4	16.00	20
	Percent Actively Engaged	21.72%	20.00	20
	Percent Safety Net Committed	28.89%	7.83	10
	Project Requirements Achieved	DY3 Q3/Q4	17.50	20
	Total Committed	6	8.33	10





Project 3.b.i

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 3.b.i

DSRIP Project Title: Evidence-based strategies for disease management in high risk/affected populations (adult only)

Number of PPS' Pursuing This Project: 15

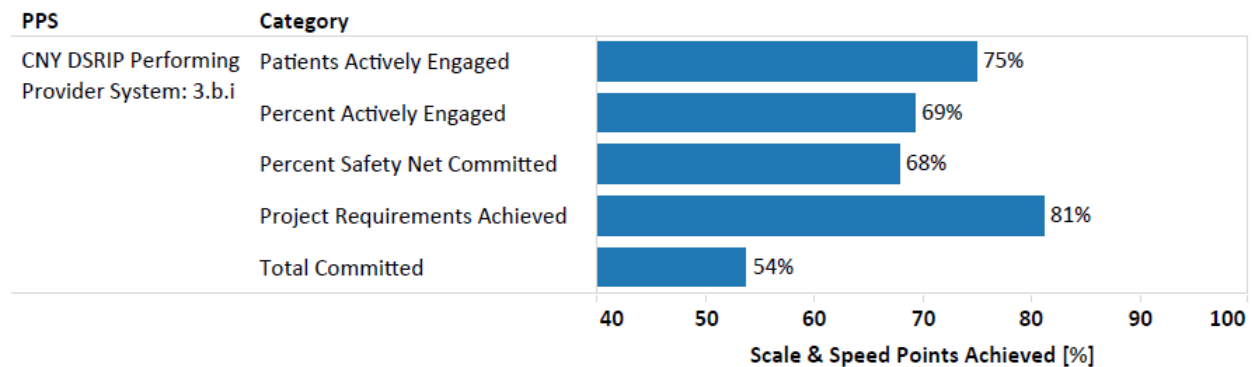
**Final Application Score**  
**83.37**

Individual Project Score:

Subjective Points	Points Possible	Strengths	Comments
16.00	20	<ul style="list-style-type: none"> <li>Response identifies project challenge of transportation barriers with a plan to utilize home blood pressure monitoring to overcome this challenge</li> <li>Response exhibits commitment of PPS to leverage partnerships with CBOs</li> </ul>	<ul style="list-style-type: none"> <li>Response describes need extensively, but is lacking discussion of project design, sites, and resources</li> <li>PPS does not indicate an awareness the other PPS within the service area also pursuing this project</li> <li>Response does not provide sufficient detail in terms of community assets that will be mobilized</li> </ul>

Project Scale and Speed:

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 3.b.i	Patients Actively Engaged	DY4 Q3/Q4	15.00	20
	Percent Actively Engaged	16.03%	13.86	20
	Percent Safety Net Committed	30.52%	6.78	10
	Project Requirements Achieved	DY3 Q3/Q4	16.25	20
	Total Committed	1292	5.37	10





Project 3.g.i

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 3.g.i

DSRIP Project Title: Integration of palliative care into the PCMH Model

Number of PPS' Pursuing This Project: 9

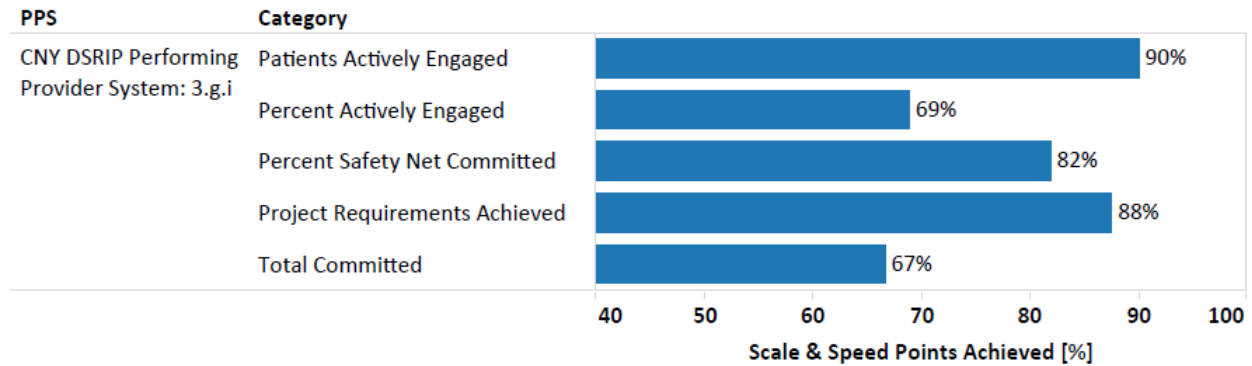
**Final Application Score**  
**90.50**

**Individual Project Score:**

Subjective Points	Points Possible	Strengths	Comments
19.33	20	<ul style="list-style-type: none"> <li>Response provides a sufficient summary of the current assets which will be mobilized. For example, the Central New York Hospice program will be employed for support</li> <li>Project will utilize existing provider expertise in project implementation. For example, deploying trained physicians as part of palliative care consulting to provide PCMHs with expert palliative care support</li> </ul>	<ul style="list-style-type: none"> <li>Response contains short description of palliative care needs, but is lacking discussion of project design, sites, and resources</li> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> <li>Response describes intent to collaborate, however unclear how this plan fits with other PPS coordination plans</li> </ul>

**Project Scale and Speed:**

PPS	Category	PPS Submission	Points Achieved	Possible Points
CNY DSRIP Performing Provider System: 3.g.i	Patients Actively Engaged	DY4 Q3/Q4	18.00	20
	Percent Actively Engaged	5.27%	13.77	20
	Percent Safety Net Committed	32.77%	8.19	10
	Project Requirements Achieved	DY3 Q3/Q4	17.50	20
	Total Committed	1195	6.67	10





Project 4.a.iii

**PPS Name:** CNY DSRIP Performing Provider System

**DSRIP Project Number:** 4.a.iii

**DSRIP Project Title:** Strengthen Mental Health and Substance Abuse Infrastructure across Systems

**Number of PPS' Pursuing This Project:** 13

**Final Application Score**  
**94.95**

**Individual Project Score:**

Subjective Points	Points Possible	Strengths	Comments
89.81	100	<ul style="list-style-type: none"> <li>Response identifies and describes the project's implementation milestones and provides an anticipated timeline for achieving them</li> <li>Response describes use of hotspotting to identify and solve transportation challenges</li> </ul>	<ul style="list-style-type: none"> <li>Response identifies gaps but does not link the findings with project design and site planning</li> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> <li>Response describes a plan for coordination but does not indicate if communications among PPS's has occurred in the planning stages</li> </ul>



Project 4.d.i

PPS Name: CNY DSRIP Performing Provider System

DSRIP Project Number: 4.d.i

DSRIP Project Title: Reduce premature births

Number of PPS' Pursuing This Project: 2

**Final Application Score**  
**100.00**

Individual Project Score:

Subjective Points	Points Possible	Strengths	Comments
100.00	100	<ul style="list-style-type: none"> <li>Response effectively addresses gaps identified by the CNA and links these findings with the project design and sites included</li> <li>Response identifies existing assets to be mobilized. For instance, the Regional Perinatal Center and the Maternal and Infant Community Health Collaborative will be mobilized</li> <li>Peer support for prenatal services will be used in the region to expand provider capacity</li> </ul>	<ul style="list-style-type: none"> <li>Response does not identify the target patient cohort's social needs, demographics or geography</li> </ul>