

Achievement Value (AV) Scorecard Nassau Queens Performing Provider System, LLC

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

	Functionality	
Step	Description/Link	Image
1. Print	All tabs include a print button in the upper left hand corner. The AV Scorecard Overview tab also includes a "Print All" button which will print all relevany reports.	Print All
Access Detailed Project Reports and return to AV Scorecard Overview	The AV Scorecard Overview tab is the landing page from which detailed project reports can be viewed. From the AV Scorecard Overview" click the relevant project button to access the project tab. From the project tab click "Save and Return" to access the AV Scorecard Overview	Project Link (filix on the purple filix below to access each individual project report) Domain I: Organizational [All Projects] AV Adjustments (Column f) 2.31 2.41 2.41 2.41 2.47
3. Show or Hide reviewer comments	Each project tab includes a Show/Hide Reviewer Comments button on the left hand side of the screen. Click "Show Reviewer Comments" to show comments and "Hide Reviewer Comments" to hide comments.	Hide Reviewer Comments



Print Summary

Print All

Achievement Value (AV) Scorecard Nassau Queens Performing Provider System, LLC

PPS Information					
Quarter	DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)				
PPS	Nassau Queens Performing Provider System, LLC				
PPS Number	14				

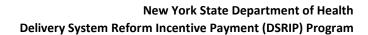
Achievement Value (AV) Scorecard Summary											
Project Link (click on the purple link below to access		AV [Data	Payme	Payment Data						
each individual project report)	AVs Available	AVs Awarded	AV Adjustment	Net AVs Awarded	DY4, Q4 Payment Available	DY4, Q4 Payment Earned					
Domain I Organizational (All Projects)	5.00	5.00	0.00	5.00	Organizational funds are embed within each project's paymen						
2.a.i	20.00	15.58	0.00	15.58	\$ 7,128,739	\$ 4,861,800					
2.b.ii	21.00	15.58	0.00	15.58	\$ 5,091,957	\$ 3,302,983					
2.b.iv	21.00	16.58	0.00	16.58	\$ 5,473,853	\$ 3,733,168					
2.b.vii	21.00	15.58	0.00	15.58	\$ 5,219,256	\$ 3,385,557					
2.d.i	14.00	12.50	0.00	12.50	\$ 5,462,680	\$ 3,987,757					
3.a.i	26.00	20.50	0.00	20.50	\$ 4,920,542	\$ 3,026,133					
3.a.ii	26.00	19.50	0.00	19.50	\$ 4,710,060	\$ 2,739,685					
3.b.i	20.00	15.50	0.00	15.50	\$ 6,313,722	\$ 3,590,155					
3.c.i	18.00	17.00	0.00	17.00	\$ 6,492,245	\$ 5,601,152					



Print Summary
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Achievement Value (AV) Scorecard Nassau Queens Performing Provider System, LLC

Total	225.00	186.33	0.00	186.33	\$ 56,286,907	\$ 39,702,244
AV Adjustments (Column F)						
4.b.i	22.00	22.00	0.00	22.00	\$ 2,927,875	\$ 2,927,875
4.a.iii	16.00	16.00	0.00	16.00	\$ 2,545,978	\$ 2,545,978





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

	Workforce Strategy									
	•									
Workforce Strategy Budget Updates	•	Workforce Strategy Spending (Baseline)	Ongoing	N/A	Completed					



' lanalysis covering impacts on both	_						
with DSRIP program's goals) 2. Create a workforce transition roadmap for achieving defined target workforce 3. Perform detailed gap analysis between current state assessment of workforce and projected future state 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							
dditional Vorkforce trategy udget pdates non AV-riving) 3. Perform detailed gap analysis between current state assessment of workforce and projected future state 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			, ,	N/A	N/A	In Process	Pass & Ongoing
for achieving defined target workforce 3. Perform detailed gap analysis between current state assessment of workforce and projected future state 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	_		2. Create a workforce transition roadman			I	
Current state assessment of workforce and projected future state 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 current state assessment of workforce 12/31/2016 N/A Completed Pass & Complete Pass & Complete				12/31/2016	N/A	Completed	Pass & Complete
Budget Updates (non AV-driving) 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	Workforce	•	current state assessment of workforce	12/31/2016	N/A	Completed	Pass & Complete
analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and	Budget		4. Produce a compensation and benefit			T	
partial placements	(non AV- driving)		analysis, covering impacts on both retrained and redeployed staff, as well as new hires, particularly focusing on full and	6/30/2016	N/A	Completed	Pass & Complete
			partial placements				
			Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing



	•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
Additional Workforce Strategy Topic Areas	•	Roles and Responsibilities	N/A	N/A	In Process	
		Key Stakeholders	N/A	N/A	In Process	N/A
	•	IT Expectations	N/A	N/A	In Process	
		Progress Reporting	N/A	N/A	In Process	

		Section 01 -	Budget		
	Module 1.1 - PPS Budget Report (Baseline)	Ongoing	N/A	Completed	



,					-
	Module 1.2 - PPS Budget Report (Quarterly	Ongoing	N/A	In Process	
Quarterly Project					
Reports, Project	Module 1.3 - PPS Flow of Funds (Baseline)	Ongoing	N/A	Completed	
Budget and Flow of					
ı					
	Quarterly Progress Reports	N/A	N/A	In Process	

	Section 02 - Governance								
		Finalize governance structure and sub- committee structure	9/30/2015	N/A	Completed				
Governance		Establish a clinical governance structure, including clinical quality	12/31/2015	N/A	Completed				
Structure		committees for each DSRIP project		,	•				



Updates						
-		3. Finalize bylaws and policies or Committee Guidelines where applicable	9/30/2015	N/A	Completed	Pass & Complete
Governance Process		4. Establish governance structure reporting and monitoring processes	12/31/2015	N/A	Completed	Pass & Complete
Update						
	•	5. Finalize community engagement plan, including communications with the public and non-provider organizations (e.g. schools, churches, homeless services,	3/31/2016	N/A	Completed	Pass & Complete
		6. Finalize partnership agreements or contracts with CBOs	N/A	N/A	Completed	Pass & Complete
Additional						
Additional Governance Milestones non AV-	•	7. Finalize agency coordination plan aimed at engaging appropriate public sector agencies at state and local levels (e.g. local departments of health and	N/A	N/A	Completed	Pass & Complete
driving)						
		8. Finalize workforce communication and engagement plan	6/30/2016	N/A	Completed	Pass & Complete

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		9. Inclusion of CBOs in PPS Implementation	N/A	N/A	Completed	Į.
	•	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	
-		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
-		Roles and Responsibilities	N/A	N/A	In Process	
Additional Governance - Topic Areas		Key Stakeholders	N/A	N/A	In Process	
·						
_		IT Expectations	N/A	N/A	In Process	
		Progress Reporting	N/A	N/A	In Process	



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Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status
		1. Finalize PPS finance structure, including reporting structure	12/31/2015	N/A	Completed	Pass & Complete
Financial Stability Update						
		2. Perform network financial health current state assessment and develop financial sustainability strategy to address key issues.	3/31/2016	N/A	Completed	Pass & Complete
		3. Finalize Compliance Plan consistent with New York State Social Services Law 363-d	12/31/2015	N/A	Completed	Pass & Complete
		4. Develop a Value Based Needs Assessment "VNA"	3/31/2017	N/A	Completed	Pass & Complete
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing



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		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Financial							N/A
Stability Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	NA
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				1

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



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process		
•	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process		
•	Roles and Responsibilities	N/A	N/A	In Process		
•	Key Stakeholders	N/A	N/A	In Process		IV/A
•	IT Expectations	N/A	N/A	In Process		
•	Progress Reporting	N/A	N/A	In Process		
_	•	Mitigation Strategies Major Dependencies on Organizational Workstreams Roles and Responsibilities Key Stakeholders IT Expectations	Mitigation Strategies Major Dependencies on Organizational N/A Workstreams Roles and Responsibilities N/A Key Stakeholders N/A IT Expectations N/A	Mitigation Strategies Major Dependencies on Organizational N/A N/A Roles and Responsibilities N/A N/A Roles Stakeholders N/A N/A IT Expectations N/A N/A	Mitigation Strategies Major Dependencies on Organizational Workstreams N/A N/A In Process Roles and Responsibilities N/A N/A In Process Key Stakeholders N/A N/A In Process IT Expectations N/A N/A In Process	Mitigation Strategies Major Dependencies on Organizational Workstreams N/A N/A In Process Roles and Responsibilities N/A N/A In Process Key Stakeholders N/A N/A In Process IT Expectations N/A N/A In Process

Section 05 - IT Systems and Processes



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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). 2. Develop an IT Change Management Strategy. 3/31/2016 N/A Complete Pass & Complete 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network 4. Develop a specific plan for engaging attributed members in Qualifying Entities 12/31/2017 N/A Complete Pass & Complete 4. Develop a specific plan for engaging attributed members in Qualifying Entities	capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of interoperable IT platform(s). 2. Develop an IT Change Management Strategy. 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network 4. Develop a specific plan for engaging 12/31/2017 N/A Complete Pass & Complete Pa								
Strategy. 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network 4. Develop a specific plan for engaging 12/31/2017 N/A Complete Pass & Complete	Strategy. 3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network 4. Develop a specific plan for engaging attributed members in Qualifying Entities 5. Develop a data security and 9/30/2016 N/A Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete		•	capabilities across network, identifying any critical gaps, including readiness for data sharing and the implementation of	3/31/2016	N/A	Complete	Pass & Complete	
3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network 4. Develop a specific plan for engaging 12/31/2017 N/A Complete Pass & Complete Pass & Complete	3. Develop roadmap to achieving clinical data sharing and interoperable systems across PPS network 4. Develop a specific plan for engaging attributed members in Qualifying Entities 5. Develop a data security and 9/30/2016 N/A Complete Pass & Complete Pass & Complete Pass & Complete Pass & Complete		•		9/30/2016	N/A	Complete	Pass & Complete	
1/31/701/ N/A Complete Pass & Complete	attributed members in Qualifying Entities 12/31/2017 N/A Complete 5. Develop a data security and 9/30/2016 N/A Complete Pass & Complete Pass & Complete	nd	•	data sharing and interoperable systems	3/31/2017	N/A	Complete	Pass & Complete	ľ
	9/30/2016 N/A COMPLETE PASS & COMPLETE				12/31/2017	N/A	Complete	Pass & Complete	
Major Risks to Implementation & Risk Mitigation Strategies N/A N/A N/A In Process Pass & Ongoing				Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	

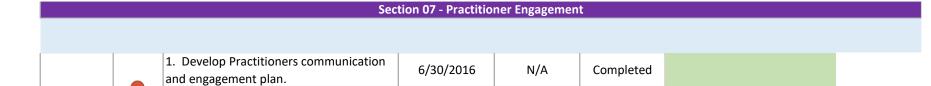


	Print		Na	ssau Queens Pe	rforming Provid	er System, LLC - Domain 1 Orga	inizationai AV:
Additional							
IT Systems		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	N/A
Processes Topic Areas							IN/A
Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0

		Sec	ction 06 - Perform	nance Reporting			
Process Measure	AV Driving	Milestone	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AV Awarded
		Establish reporting structure for PPS-wide performance reporting and communication.	12/31/2016	N/A	Completed	Pass & Complete	N/A
Performanc e Reporting		2. Develop training program for organizations and individuals throughout the network, focused on clinical quality and performance reporting.	12/31/2016	N/A	Completed	Pass & Complete	N/A



	Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	
	Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	
	Roles and Responsibilities	N/A	N/A	In Process	
Additional Performanc					19/75
e Reporting Topic Areas	Key Stakeholders	N/A	N/A	In Process	14/71
	IT Expectations	N/A	N/A	In Process	
	Progress Reporting	N/A	N/A	In Process	





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Practitioner Engagement	•	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.	3/31/2017	N/A	Completed	Pass & Complete	N/A
		Major Risks to Implementation & Risk Mitigation Strategies	N/A	N/A	In Process	Pass & Ongoing	
		Major Dependencies on Organizational Workstreams	N/A	N/A	In Process	Pass & Ongoing	
ا د د داناناد ۱		Roles and Responsibilities	N/A	N/A	In Process	Pass & Ongoing	
Additional Practitioner					T		13/75
Engagement Topic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	,
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	



Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Nassau Queens Performing Provider System, LLC - Domain 1 Organizational AVs

Section 08 - Population Health Management 1. Develop population health 3/31/2016 N/A Complete management roadmap. NI/A Population Health 2. Finalize PPS-wide bed reduction plan. N/A N/A In Process NI/A Major Risks to Implementation & Risk N/A N/A In Process Mitigation Strategies Major Dependencies on Organizational N/A N/A In Process Workstreams N/A Roles and Responsibilities N/A In Process Additional Population IN/M Health Topic Key Stakeholders N/A N/A In Process Areas



Print		Na	ssau Queens Pe	rforming Provid	er System, LLC - Domain 1 Orga	nizatio
	IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
	Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
		Total				C

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



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Additional Clinical							
ntegration Fopic Areas		Key Stakeholders	N/A	N/A	In Process	Pass & Ongoing	19/75
			I				
		IT Expectations	N/A	N/A	In Process	Pass & Ongoing	
			1				
		Progress Reporting	N/A	N/A	In Process	Pass & Ongoing	
			Total				0



Save & Return

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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC AV Adju

AV Adjustment Scoresheet									
	AVs Per	Total	Total AVs	Total AV	Awarded	Adjusted	Net A	NVs Awarded	
Adjustment	Project	Projects	Available	Net	Percentage		Net	Percentage AV	
		Selected	Available	Awarded	AV	Avs	Awarded	reiteiltage AV	
Organizational Adjustments (applied to all projects)	5.00	11.00	55.00	55.00	100%	0.00	55.00	100%	
Project Adjustments (applied to one project only)	Various	11.00	170.00	131.33	77%	0.00	131.33	77%	
Total			225.00	186.33	83%	0.00	186.33	83%	

☐ Organizational ☐ Project Adjustments

No AV Adjustments

Please note that there are no AV adjustments for Nassau Queens Performing Provider System, LLC in DY2, Q1



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 2.a.i

Project Snapshot						

Payment Snapshot	
DY4, Q4 Payment Available	\$ 7,128,739
DY4, Q4 Payment Earned	\$ 4,861,800

			2.a.i Scores	heet					
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%			
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	1,425,748	1,425,748
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	1,425,748	1,425,748
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	570,299	570,299
Domain 2	Domain 2 Pay for Performance (P4P	Complete	10.00	5.58	56%	72%	72%	5,132,692	2,865,753
	Domain 2 Subtotal			10.58	71%	80%	80%	5,702,991	3,436,052
	Total Complete			15.58	78%	100%	100%	7,128,739	4,861,800

Total Project 2.a.i AVs Awarded: 15.58 out of 20

Hide Reviewer Comments

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



	Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00
	Enter Revie	wer Commen	nt			
Total						

	Domain 1 Project Prescribed M	lilestones P	roject 2.a.i						
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
•	1. All PPS providers must be included in the Integrated Delivery System. The IDS should include all medical, behavioral, post-acute, long-term care, and community-based service providers within the PPS network; additionally, the IDS structure must include payers and social service organizations, as necessary to support its strategy.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	2. Utilize partnering HH and ACO population health management systems and capabilities to implement the PPS' strategy towards evolving into an IDS.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	3. Ensure patients receive appropriate health care and community support, including medical and behavioral health, post-acute care, long term care and public health services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment								
	4. Ensure that all PPS safety net providers are actively sharing EHR systems with local health information exchange/RHIO/SHIN-NY and sharing health information among clinical partners, including directed exchange (secure messaging), alerts and patient record look up, by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Fail				



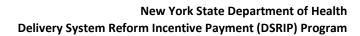
	Enter Revie	wer Commer	nt					
	5. Ensure that EHR systems used by participating safety net providers meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3.	3/31/2018	3/31/2018	Completed	Fail	N/A		
	Enter Revie	wer Commer	nt					
	6. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, for all participating safety net providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
•	7. Achieve 2014 Level 3 PCMH primary care certification and/or meet state-determined criteria for Advanced Primary Care Models for all participating PCPs, expand access to primary care providers, and meet EHR Meaningful Use standards by the end of DY 3.	3/31/2018	3/31/2018	Completed	Fail	N/A		
	Enter Reviewer Comment							
	8. Contract with Medicaid Managed Care Organizations and other payers, as appropriate, as an integrated system and establish value-based payment arrangements.			In Process	Pass & Ongoing	N/A		
	Enter Revie	wer Commer	rt					
	9. Establish monthly meetings with Medicaid MCOs to discuss utilization trends, performance issues, and payment reform.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	10. Re-enforce the transition towards value-based payment reform by aligning provider compensation to patient outcomes.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							



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11. Engage patients in the integrated delivery system through outreach and navigation activities, leveraging community health workers, peers, and culturally competent community-based organizations, as	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A

	Domain 2 Pay for Reporting - Project 2.a.i							
AV Driving	Measure	Reviewer Status	AVs Awarded					
	Medicaid Spending on ER and Inpatient Services ±		1					
			1					
	Enter Reviewer Comment							
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange		1					
			1					
			1					





Domain 2 Pay for Performance - Project 2.a.i	
Adult Access to Preventive or Ambulatory Care - 20 to 44 years	0
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Primary Care - Length of Relationship - Q3		0.5
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		5.58



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 2.b.ii

	Project Snapshot					
Project Domain System Transformation Projects (Domain 2)						
Project ID 2.b.ii						
Project Title	Development of Co-Located Primary Care Services in the Emergency Department					

Payment Snapshot	
DY4, Q4 Payment Available	\$ 5,091,957
DY4, Q4 Payment Earned	\$ 3,302,983

	2.b.ii Scoresheet											
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)			
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%						
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20%	1,018,391	848,659			
	Patient Engagement Speed	Complete	1.00	0.00	0%							
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	1,018,391	848,659			
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	407,357	407,357			
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	5.58	56%	72%	72%	3,666,209	2,046,967			
Domain 2 Subtotal			15.00	10.58	71%	80%	80%	4,073,565	2,454,323			
	Total	Complete	21.00	15.58	74%	100%	100%	5,091,957	3,302,983			

Total Project 2.b.ii AVs Awarded: 15.58 out of 21

Hide Reviewer Comments

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

0.00



Save & Return

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 2.b.ii

Enter Reviewer Comment

Pass & Ongoing 0.00

Enter Reviewer Comment

Fail 0

Enter Reviewer Comment

Total

	Domain 1 Project Prescribed M	lilestones - Pi	oject 2.b.ii					
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	1. Ensure appropriate location of the co-located primary care services in the ED to be located on the same campus of the hospital. All relocated PCMH practices will meet NCQA 2014 Level 3 PCMH standards and/or APCM within 2 years after relocation.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
•	2. Ensure that new participating PCPs will meet NCQA 2014 Level 3 Medical Home standards or NYS Advanced Primary Care Model standards by the end of DSRIP Year 3. At start up, the participating PCPs must have open access scheduling extended hours, and have EHR capability that is interoperable with the ED.	3/31/2018	3/31/2018	Completed	Fail	N/A		
	Enter Reviewer Comment							
	3. Develop care management protocols for medical screening and PCP referral in compliance with EMTALA standards.	3/31/2017	3/31/2017	Completed	Pass & Complete			



Print		Nassau Quee	ens Performin	ng Provider System, LLC - F	Project 2.b.ii		
Enter Reviewer Comment							
4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, and to promote self-management and knowledge on appropriate care.		3/31/2017	Completed	Pass & Complete	N/A		
Enter Revie	wer Commen	t					
6. Implement a comprehensive payment and billing strategy. (The PCP may only bill usual primary care billing codes and not emergency billing codes.)	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager as applicable.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment							
				Pass & Complete	N/A		
Enter Reviewer Comment							
				Fail	N/A		
Enter Revie	wer Commen	t					
				Pass & Complete			
	4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements. Enter Revie 5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, and to promote self-management and knowledge on appropriate care. Enter Revie 6. Implement a comprehensive payment and billing strategy. (The PCP may only bill usual primary care billing codes and not emergency billing codes.) Enter Revie 7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager as applicable. Enter Revie	4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements. Enter Reviewer Comment 3/31/2018	## Enter Reviewer Comment 4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements. ### Enter Reviewer Comment 5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, and to promote selfmanagement and knowledge on appropriate care. #### Enter Reviewer Comment 6. Implement a comprehensive payment and billing strategy. (The PCP may only bill usual primary care billing codes and not emergency billing codes.) #### Enter Reviewer Comment 7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager as applicable. ###################################	Enter Reviewer Comment 4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements. Enter Reviewer Comment 5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, and to promote selfmanagement and knowledge on appropriate care. Enter Reviewer Comment 6. Implement a comprehensive payment and billing strategy. (The PCP may only bill usual primary care billing codes and not emergency billing a)/31/2018 Completed codes.) Enter Reviewer Comment 7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager as applicable. Enter Reviewer Comment Enter Reviewer Comment Enter Reviewer Comment Enter Reviewer Comment	Enter Reviewer Comment 4. Ensure utilization of EHR that supports secure notification/messaging and sharing of medical records between participating local health providers, and meets Meaningful Use Stage 2 CMS requirements. Enter Reviewer Comment 5. Establish protocols and training for care coordinators to assist patients in understanding use of the health system, and to promote self-management and knowledge on appropriate care. Enter Reviewer Comment 6. Implement a comprehensive payment and billing strategy. (The PCP may only bill usual primary care billing codes and not emergency billing codes.) Enter Reviewer Comment 7. Develop protocols for connectivity to the assigned health plan PCP and real-time notification to the Health Home care manager as applicable. Enter Reviewer Comment Enter Reviewer Comment Fail Enter Reviewer Comment		



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 2.b.ii

Print

Enter Reviewer Comment

Domain 2 Pay for Reporting Project 2.b.ii								
V Driving	Measure	Reviewer Status	AVs Awarded					
	Medicaid Spending on ER and Inpatient Services ±		1					
			1					
	Enter Reviewer Comment							
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1					
	Enter Reviewer Comment							
			1					
	Enter Reviewer Comment							
	Percent of total Medicaid provider reimbursement received through sub-capitation or other forms of non-FFS reimbursement		1					
	Enter Reviewer Comment							

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

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	Domain 2 Pay for Performance Project 2.b.ii	
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Primary Care - Length of Relationship - Q3		0.5
	Enter Reviewer Comment	
	Pass & Ongoing	0.5
	Enter Reviewer Comment	
Т	otal	5.58



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Vassau Queens Performing Provider System, LLC - Project 2.b.iv

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

Payment Snapshot					
DY4, Q4 Payment Available	\$	5,473,853			
DY4, Q4 Payment Earned	\$	3,733,168			

2.b.iv Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	1,094,771	1,094,771
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	1,094,771	1,094,771
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	437,908	437,908
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	10.00	5.58	56%	72%	72%	3,941,174	2,200,489
Domain 2 Subtotal			15.00	10.58	71%	80%	80%	4,379,083	2,638,397
Total Complete			21.00	16.58	79%	100%	100%	5,473,853	3,733,168

Total Project 2.b.iv AVs Awarded: 16.58 out of 21

Hide Reviewer Comments

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



Save & Return

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Vassau Queens Performing Provider System, LLC - Project 2.b.iv

Enter Reviewer Comment

Pass & Complete

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Enter Reviewer Comment

Pass & Ongoing

1

Enter Reviewer Comment

Total

1.00

	Domain 1 Project Prescribed Milestones - Project 2.b.iv							
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	 Develop standardized protocols for a Care Transitions Intervention Model with all participating hospitals, partnering with a home care service or other appropriate community agency. 	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	 Engage with the Medicaid Managed Care Organizations and Health Homes to develop transition of care protocols that will ensure appropriate post-discharge protocols are followed. 	3/31/2018	3/31/2018	Completed	Fail	N/A		
Enter Reviewer Comment								
					Pass & Complete	N/A		
	Enter Revie	wer Commen	t					



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	4. Transition of care protocols will include early notification of planned discharges and the ability of the transition care manager to visit the patient in the hospital to develop the transition of care services.	3/31/2017	3/31/2017	Completed	Fail	N/A
	Enter Revi	ewer Commer	nt			
	5. Protocols will include care record transitions with timely updates provided to the members' providers, particularly primary care provider.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
						N/A
	Enter Revi	ewer Commer	nt			
	7. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed		N/A
Enter Reviewer Comment						

	Domain 2 Pay for Reporting Project 2.b.iv					
AV Driving	Measure	Reviewer Status	AVs Awarded			
			1			
	Enter Reviewer Comment					
	Medicaid spending on Primary Care and community based behavioral health care		1			

	Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payl Vassau Queens Performing Provider System, LLC	-
•	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	1
		1
	Enter Reviewer Comment	1
	Enter Reviewer Comment	

	Domain 2 Pay for Performance Project 2.b.iv		
AV Driving	Measure	Reviewer Status	Avardad
			0
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			1
	Enter Reviewer Comment		
			0.25
	Enter Reviewer Comment		
			0

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

Print		
Children's Access to Primary Care- 7 to 11 years	Fail	0
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
	Pass & Ongoing	0.5
Enter Reviewer Comment		
Total		5.58



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

lassau Queens Performing Provider System, LLC - Project 2.b.vii

Payment Snapshot

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

	2.b.vii Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20%	1,043,851	869,876
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%				
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal			5.00	83%	20%	20%	1,043,851	869,876
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	5.00	5.00	100%	8%	8%	417,540	417,540
	Domain 2 Pay for Performance (P4P)	Complete	10.00	5.58	56%	72%	72%	3,757,864	2,098,141

Total Project 2.b.vii AVs Awarded: 15.58 out of 21

Hide Reviewer Comments

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



Enter Reviewer Comment		
	Pass & Ongoing	0.00
Enter Reviewer Comment		
	Fail	0
Enter Reviewer Comment		
Total		0.00

	Domain 1 Project Prescribed M	ilestones - Pr	oject 2.b.vii				
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	1. Implement INTERACT at each participating SNF, demonstrated by active use of the INTERACT 3.0 toolkit and other resources available at http://interact2.net.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A	
	Enter Reviewer Comment						
	2. Identify a facility champion who will engage other staff and serve as a coach and leader of INTERACT program.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
_	3. Implement care pathways and other clinical tools for monitoring chronically ill patients, with the goal of early identification of potential instability and intervention to avoid hospital transfer.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
					Pass & Ongoing		

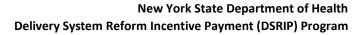


Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

lassau Queens Performing Provider System, LLC - Project 2.b.vii

Print		iassau Queei	ns Perjorming	j Provider System, LLC - Pi	oject 2.b.vii
Enter Reviewer Comment					
5. Implement Advance Care Planning tools to assist residents and familie in expressing and documenting their wishes for near end of life and end of life care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Revi	ewer Commer	nt			
6. Create coaching program to facilitate and support implementation.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Revi	ewer Commer	nt			
7. Educate patient and family/caretakers, to facilitate participation in planning of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment					
8. Establish enhanced communication with acute care hospitals, preferably with EHR and HIE connectivity.	3/31/2018	3/31/2018	Completed	Fail	N/A
Enter Revi	ewer Commer	nt			
9. Measure outcomes (including quality assessment/root cause analysis of transfer) in order to identify additional interventions.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A
Enter Reviewer Comment					
10. Use EHRs and other technical platforms to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment					
Total					0.00

Domain 2 Pay for Reporting Project 2.b.vii





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AV Driving	Measure	Reviewer Status	AVs Awarded
			1
	Enter Reviewer Comment		
	Medicaid spending on Primary Care and community based behavioral health care	Pass & Ongoing	1
	Enter Reviewer Comment		
	Percent of eligible providers with participating agreements with RHIOs, meeting Meaningful Use criteria and able to participate in bidirectional exchange	Pass & Ongoing	1
			1
	Enter Reviewer Comment		
			1
	Enter Reviewer Comment		

Domain 2 Pay for Performance Project 2.b.vii						
AV Driving	Measure	Reviewer Status	AVS Awardad			
	Adult Access to Preventive or Ambulatory Care - 20 to 44 years		0			
	Enter Reviewer Comment					

Save & Return	Achievement Value (AV) Scorecard DY4, Q4 Januar	-	-
Print	lassau Queens Po	erforming Provider System, LLC -	Project 2.b.vii
	Enter Reviewer Comment		
		Pass & Ongoing	0.3333333
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	Enter Reviewer Comment		
	Total		5.58



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 2.d.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 5,462,680
DY4, Q4 Payment Earned	\$ 3,987,757

	2.d.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%	20% 1,09		
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%			1,092,536	1,092,536
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	1,092,536	1,092,536
Domain 2	Domain 2 Pay for Reporting (P4R)	Complete	4.00	4.00	100%	8%	8%	437,014	437,014
Domain 2	Domain 2 Pay for Performance (P4P)	Complete	4.00	2.50	63%	72%	72%	3,933,130	2,458,206
	Domain 2 Subtotal			6.50	81%	80%	80%	4,370,144	2,895,221
	Total	Complete	14.00	12.50	89%	100%	100%	5,462,680	3,987,757

Total Project 2.d.i AVs Awarded: 12.5 out of 14

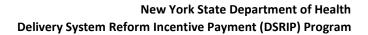
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	Domain 1 Project Milestones Project 2.d.i						
AV Drivii	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded	
	Module 1 - Major risks to implementation and mitigation strategies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



Print	Nassau Queens Performing Provider System, LLC -	Project 2.d.i
	Enter Reviewer Comment	
	Pass & Ongoing	0.00
	Pass & Ongoing	1
	Enter Reviewer Comment	
	Total	1.00

	Domain 1 Project Prescribed M	lilestones - P	roject 2.d.i			
AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded
	1. Contract or partner with community-based organizations (CBOs) to engage target populations using PAM® and other patient activation techniques. The PPS must provide oversight and ensure that engagement is sufficient and appropriate.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A
Enter Reviewer Comment						
	2. Establish a PPS-wide training team, comprised of members with training in PAM® and expertise in patient activation and engagement.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
	Enter Reviewer Comment					
	3. Identify UI, NU, and LU "hot spot" areas (e.g., emergency rooms). Contract or partner with CBOs to perform outreach within the identified "hot spot" areas.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A
Enter Reviewer Comment						





	Print		Mussuu Que	cns i cijoiini	ng r rovider System, LLC -	rroject z.u.		
	4. Survey the targeted population about healthcare needs in the PPS' region.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment								
	5. Train providers located within "hot spots" on patient activation techniques, such as shared decision-making, measurements of health literacy, and cultural competency.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Rev	iewer Commer	nt					
	6. Obtain list of PCPs assigned to NU and LU enrollees from MCOs. Alon with the member's MCO and assigned PCP, reconnect beneficiaries to his/her designated PCP (see outcome measurements in #10).	g 3/31/2017	3/31/2017	Completed	Pass & Complete	N/A		
	Enter Rev	iewer Commer	nt					
	7. Baseline each beneficiary cohort (per method developed by state) to appropriately identify cohorts using PAM® during the first year of the project and again, at set intervals. Baselines, as well as intervals towards improvement, must be set for each cohort at the beginning of each performance period.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
					Pass & Complete	N/A		
	Enter Rev	iewer Commer	nt					
	9. Measure PAM® components	3/31/2018	3/31/2018	Completed	Fail	N/A		
	Enter Reviewer Comment							
	10. Increase the volume of non-emergent (primary, behavioral, dental) care provided to UI, NU, and LU persons.	3/31/2018	3/31/2018	Completed	Fail			
				-				



	Print Nassau Queens Performing Provider System, LLC - Project 2.d.i						
	Enter Revie	ewer Commer	t				
•	11. Contract or partner with CBOs to develop a group of community navigators who are trained in connectivity to healthcare coverage, community healthcare resources (including for primary and preventive services) and patient education.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	t				
	12. Develop a process for Medicaid recipients and project participants to report complaints and receive customer service.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Revie	wer Commer	t				
	13. Train community navigators in patient activation and education, including how to appropriately assist project beneficiaries using the PAM®.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
•	14. Ensure direct hand-offs to navigators who are prominently placed at "hot spots," partnered CBOs, emergency departments, or community events, so as to facilitate education regarding health insurance coverage, age-appropriate primary and preventive healthcare services and	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	15. Inform and educate navigators about insurance options and healthcare resources available to UI, NU, and LU populations.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						
	16. Ensure appropriate and timely access for navigators when attempting to establish primary and preventive services for a community member.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A	
	Enter Reviewer Comment						



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	Print		Nassau Que	ens Performi	ng Provider System, LLC -	Project 2.d.
	17. Perform population health management by actively using EHRs and other IT platforms, including use of targeted patient registries, to track all patients engaged in the project.	3/31/2017	3/31/2017	Completed		N/A
	Domain 2 Pay for Report	ting Project	2.d.i			
	C&G CAHPS by PPS for uninsured- Getting timely appointments, care, and	information				0.25
						0.25
_						0.25
						0.25
						1



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Print Nassau Queens Performi	ing Provider System, LLC -	Project 2.a.i		
PAM Level	Pass & Ongoing	1		
Enter Reviewer Comment				
Use of primary and preventive care services Percent of attributed Medicaid members with no claims history for primary care and preventive services in measurement year compared to same in baseline year	Pass & Ongoing	1		
Enter Reviewer Comment				
Total		4.00		

	Domain 2 Pay for Performance Project 2.d.i		
AV Driving	Measure	Reviewer Status	Avs
		Fail	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
		Fail	
	Enter Reviewer Comment		
		Pass & Ongoing	
	Enter Reviewer Comment		
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		Pass & Ongoing	
	Enter Reviewer Comment		
	Total		2.50



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 3.a.i

Project Snapshot				
Project Domain	Clinical Improvement Projects (Domain 3)			
Project ID	3.a.i			
Project Title	Integration of primary care and behavioral health services			

Payment Snapshot	
DY4, Q4 Payment Available	\$ 4,920,542
DY4, Q4 Payment Earned	\$ 3,026,133

	3.a.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%			984,108	984,108
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%		
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	20%	984,108	984,108
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	492,054	492,054
Domain 5	Domain 3 Pay for Performance	Complete	10.00	4.50	45%	70%	70%	3,444,379	1,549,971
	Domain 3 Subtotal			14.50	73%	80%	80%	3,936,433	2,042,025
Total Complete			26.00	20.50	79%	100%	100%	4,920,542	3,026,133

Total Project 3.a.i AVs Awarded: 20.5 out of 26

Hide Reviewer Comments

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



Save & Return	Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Qu				
Print	Nassau Queens Performing Provider System, LLC - Project 3.0				
			0.00		
			1		

		Domain 1 Project Prescribed Milestones - Project 3.a.i Models 1, 2 and 3							
	✓ 3.a.i Model 1 ✓ 3.a.i Model 2 ☐ 3.a.i Model 3								
Model	AV Driving	Project Requirement and Metric/Deliverable	Required Due Date	Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded		
	•	1. Co-locate behavioral health services at primary care practice sites. All participating primary care practices must meet 2014 NCQA level 3 PCMH or Advance Primary Care Model standards by DY 3.	3/31/2018	3/31/2018	Completed		N/A		
		Enter Reviewer Comment							
		2. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed		N/A		
3.a.i Model 1									



Save & Return

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

3440	Print	Achievement value (2	AV) Scorecure		•	ng Provider System, LLC -		
		3. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A	
		En	ter Reviewer	Comment				
						Pass & Complete	N/A	
		En	ter Reviewer	Comment				
		Pass & Complete						
		En	ter Reviewer	Comment				
	•	6. Develop collaborative evidence-based standards of care including medication management and care engagement process.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A	
		Enter Reviewer Comment						
3.a.i Model 2		7. Conduct preventive care screenings, including behavioral health screenings (PHQ-2 or 9 for those screening positive, SBIRT) implemented for all patients to identify unmet needs.	3/31/2018	3/31/2018	Completed	Fail	N/A	
		En	ter Reviewer	Comment				
						Pass & Complete	N/A	
	Enter Reviewer Comment							
	•	Total					0	



Save & Return

	Print	Nassau Queens Performing Provider System, LLC - Project 3.a.i
	Domain 3 Pay for Reporti	ing
	Adherence to Antipsychotic Medications for People with Schizophrenia	1
		0.5
		0.5
		1
_		1
		1
		0.5



Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 Nassau Queens Performi	- March 31, 2019 (Payment Quarter) ing Provider System, LLC - Project 3.a.i
Follow-up after hospitalization for Mental Illness - within 7 days	0.5
	0.5
	0.5
	0.5
	0.5
	1
	1

Domain 3 Pay for Performance



AV Driving	Measure	Reviewer Status	Avardad
	Adherence to Antipsychotic Medications for People with Schizophrenia	Fail	0
		Pass & Ongoing	0.5
_		Pass & Ongoing	0.5
		Fail	0
		Dans ^Q Outrains	1
		Pass & Ongoing	1
		Fail	0
		Fail	0
		Fail	0
		Pass & Ongoing	0.5
		Fail	0
		Dace ^Q Ongoing	٥٢
		Pass & Ongoing	0.5
		Pass & Ongoing	0.5
		. 233 & 27/50/11/5	0.5
		Fail	0
		Pass & Ongoing	1
	Total		4.50



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 3.a.ii

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 4,710,060
DY4, Q4 Payment Earned	\$ 2,739,685

			3.a.ii Scoresheet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%			942,012	785,010
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	20%		
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	20%	20%	942,012	785,010
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	10.00	10.00	100%	10%	10%	471,006	471,006
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	10.00	4.50	45%	70%	70%	3,297,042	1,483,669
	Domain 2 Subtotal			14.50	73%	80%	80%	3,768,048	1,954,675
Total Complete			26.00	19.50	75%	100%	100%	4,710,060	2,739,685

Total Project 3.a.ii AVs Awarded: 19.5 out of 26

Hide Reviewer Comments

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



Save & Return	Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)					
Print	Nassau Queens Performin	ng Provider System, LLC - I	Project 3.a.ii			
	Enter Reviewer Comment					
		Pass & Ongoing	0.00			
	Enter Reviewer Comment					
		Fail	0			
	Enter Reviewer Comment					
	Total		0.00			

Domain 1 Project Prescribed Milestones - Project 3.a.ii								
AV Driving	Project Requirement and Metric/Deliverable	Project Requirement and Metric/Deliverable		Milestone Status	Reviewer Status	AVs Awarded		
	1. Implement a crisis intervention program that, at a minimum, includes outreach, mobile crisis, and intensive crisis services.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Reviewer Comment							
	2. Establish clear linkages with Health Homes, ER and hospital services to develop and implement protocols for diversion of patients from emergency room and inpatient services. 3/31/2018 3/31/2018				Pass & Complete	N/A		
	Enter Reviewer Comment							
	3. Establish agreements with the Medicaid Managed Care organizations serving the affected population to provide coverage for the service array under this project.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A		
	Enter Revie	wer Commer	nt					
					Pass & Complete			



Print									
Enter Revie	wer Commen	nt							
5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A				
Enter Reviewer Comment									
6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours).	3/31/2018	3/31/2018	Completed	Fail	N/A				
Enter Revie	wer Commen	rt			ass & Complete N/A				
7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A				
Enter Reviewer Comment									
8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3.	3/31/2018	3/31/2018	Completed	Fail	N/A				
Enter Reviewer Comment									
9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers.	3/31/2018	3/31/2018	Completed	Pass & Complete	N/A				
Enter Reviewer Comment									
10. Ensure quality committee is established for oversight and surveillance of compliance with protocols and quality of care.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A				
	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services. Enter Revie 6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours). Enter Revie 7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff. Enter Revie 8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3. Enter Revie 9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers. Enter Revie 10. Ensure quality committee is established for oversight and	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services. Enter Reviewer Comment	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services. Enter Reviewer Comment	5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services. Senter Reviewer Comment 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2017 3/31/2018 3/31/20	Enter Reviewer Comment 5. Include at least one hospital with specialty psychiatric services and crisis-oriented psychiatric services; expansion of access to specialty psychiatric and crisis-oriented services. Enter Reviewer Comment 6. Expand access to observation unit within hospital outpatient or at an off campus crisis residence for stabilization monitoring services (up to 48 hours). Enter Reviewer Comment 7. Deploy mobile crisis team(s) to provide crisis stabilization services using evidence-based protocols developed by medical staff. Enter Reviewer Comment 8. Ensure that all PPS safety net providers have actively connected EHR systems with local health information exchange/RHIO/SHIN-NY and share health information among clinical partners, including direct exchange (secure messaging), alerts and patient record look up by the end of Demonstration Year (DY) 3. Enter Reviewer Comment 9. Establish central triage service with agreements among participating psychiatrists, mental health, behavioral health, and substance abuse providers. Enter Reviewer Comment 10. Ensure quality committee is established for oversight and 2/31/2017, 3/31/2017, Completed Pass & Complete Pass				



Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 Nassau Queens Performing) - March 31, 2019 (Paymei ng Provider System, LLC - P	
		N/A
Domain 3 Pay for Reporting		
Adherence to Antipsychotic Medications for People with Schizophrenia		1
		0.5
		0.5
		1
		1



Save & Return

100000	Print Print				
	Diabetes Screening for People with Schizophrenia or Bipolar Disease who are Using Antipsychotic Medication	Pass & Ongoing	1		
		Pass & Ongoing	0.5		
		Pass & Ongoing	0.5		
		_			
		Pass & Ongoing	0.5		
		_			
		Pass & Ongoing	0.5		
		_			
		Pass & Ongoing	0.5		
		Pass & Ongoing	0.5		
		Pass & Ongoing			



Save & Return	Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment C Nassau Queens Performing Provider System, LLC - Proje				
Print					
		2 00 :	_		
		Pass & Ongoing	1		
	Total		10.00		

	Domain 3 Pay for Performance						
AV Driving	Measure	Reviewer Status	AVs Awarded				
		Fail					
		Pass & Ongoing					
		Pass & Ongoing					
		Fail					



Save & Return

Print Print	ng i rovider system, LLC	roject s.u.n
Diabetes Monitoring for People with Diabetes and Schizophrenia	Pass & Ongoing	1
	Fail	0
	Fail	0
	Fail	0
	Pass & Ongoing	0.5
	Fail	0
	Pass & Ongoing	0.5
	Pass & Ongoing	0.5
	Fail	



	Save & Return	Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Qu Nassau Queens Performing Provider System, LLC - Projec			
	Time				
•			Pass & Ongoing	1	
		Total		4.50	



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Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 3.b.i

Project Snapshot					
Project Domain Clinical Improvement Projects (Domain 3)					
Project ID 3.b.i					
Project Title	Evidence-based strategies for disease management in high risk/affected populations. (adult only)				

Payment Snapshot	
DY4, Q4 Payment Available	\$ 6,313,722
DY4, Q4 Payment Earned	\$ 3,590,155

	3.b.i Scoresheet								
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%		12%	742,791	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%			618,992
	Patient Engagement Speed	Complete	1.00	0.00	0%				
	Domain 1 Subtotal		6.00	5.00	83%	20%	12%	742,791	618,992
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	7.00	7.00	100%	10%	6%	371,395	371,395
Domain 5	Domain 3 Pay for Performance (P4P)		7.00	3.50	50%	70%	82%	5,199,535	2,599,768
	Domain 2 Subtotal			10.50	75%	80%	88%	5,570,931	2,971,163
	Total	Complete	20.00	15.50	78%	100%	100%	6,313,722	3,590,155

Total Project 3.b.i AVs Awarded: 15.5 out of 20

Hide Reviewer Comments

	Domain 1 Project Milestones Project 3.b.i									
AV Dri	iving	Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	М	Nodule 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A			

0.00



Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter) Nassau Queens Performing Provider System, LLC - Project 3.b.i Print Enter Reviewer Comment Pass & Ongoing Enter Reviewer Comment

> Fail 0 Enter Reviewer Comment Total 0.00

	Domain 1 Project Prescribed Milestones - Project 3.b.i								
AV Driving	ing Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
	Implement program to improve management of cardiovascular disease using evidence-based strategies in the ambulatory and community care setting.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A			
	Enter Reviewer Comment								
	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.	3/31/2018	3/31/2018	Completed	Fail	N/A			
	Enter Reviewer Comment								
	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.	3/31/2018	3/31/2018	Completed	Fail	N/A			
	Enter Reviewer Comment								



Print			-		•			
4. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Revie	ewer Commen	rt						
5. Use the EHR to prompt providers to complete the 5 A's of tobacco control (Ask, Assess, Advise, Assist, and Arrange).	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A			
Enter Revie	ewer Commen	nt						
6. Adopt and follow standardized treatment protocols for hypertension and elevated cholesterol.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Revie	ewer Commer	nt						
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.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
8. Provide opportunities for follow-up blood pressure checks without a copayment or advanced appointment.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A			
Enter Reviewer Comment								
9. Ensure that all staff involved in measuring and recording blood pressure are using correct measurement techniques and equipment.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
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.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A			
Enter Reviewer Comment								



Print			•	, ,	.,			
11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Revie								
12. Document patient driven self-management goals in the medical record and review with patients at each visit.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A			
Enter Revie	ewer Commer	nt						
13. Follow up with referrals to community based programs to document participation and behavioral and health status changes.	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A			
Enter Revie	ewer Commer	nt						
14. Develop and implement protocols for home blood pressure monitoring with follow up support.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
16. Facilitate referrals to NYS Smoker's Quitline.	3/31/2017	3/31/2017	Completed	Pass & Complete	N/A			
Enter Reviewer Comment								
17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	3/31/2018	3/31/2018	Completed	Pass & Ongoing	N/A			
Enter Reviewer Comment								
				Fail				
	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate. Enter Revie 12. Document patient driven self-management goals in the medical record and review with patients at each visit. Enter Revie 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes. Enter Revie 14. Develop and implement protocols for home blood pressure monitoring with follow up support. Enter Revie 15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit. Enter Revie 16. Facilitate referrals to NYS Smoker's Quitline. Enter Revie 17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate. 2. Document patient driven self-management goals in the medical record and review with patients at each visit. 3/31/2018	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate. Enter Reviewer Comment	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate. Enter Reviewer Comment	11. 'Prescribe once-daily regimens or fixed-dose combination pills when appropriate. Enter Reviewer Comment 12. Document patient driven self-management goals in the medical record and review with patients at each visit. Enter Reviewer Comment 13. Follow up with referrals to community based programs to document participation and behavioral and health status changes. Enter Reviewer Comment 14. Develop and implement protocols for home blood pressure monitoring with follow up support. Enter Reviewer Comment 15. Generate lists of patients with hypertension who have not had a recent visit and schedule a follow up visit. Enter Reviewer Comment 16. Facilitate referrals to NYS Smoker's Quitline. 27. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk Enter Reviewer Comment 17. Perform additional actions including "hot spotting" strategies in high risk neighborhoods, linkages to Health Homes for the highest risk Enter Reviewer Comment			



	(AV) Scorecard			- March 31, 2019 (Payr ing Provider System, LLC	
Print			•		-
Enter Revi	ewer Commer	nt			
19. Form agreements with the Medicaid Managed Care organizations serving the affected population to coordinate services under this project.	3/31/2018	3/31/2018	Completed		N/A
					N/A
					1,471
Domain 3 Pay fo	r Reporting				
Controlling High Blood Pressure					1
					1
					0.333333
					0.333333



Pass & Ongoing

Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1,		
Print Nassau Queens Per	forming Provider System, LLC -	Project 3.b.i
Health Literacy - Explained What to do if Illness Got Worse	Pass & Ongoing	0.3333333
	Pass & Ongoing	0.3333333
	Pass & Ongoing	0.3333333
	Pass & Ongoing	0.3333333
	Pass & Ongoing	0.5
	Pass & Ongoing	0.5
	Pass & Ongoing	1

Save & Return	Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)
Print	Nassau Queens Performing Provider System, LLC - Project 3.b.i

Domain 3 Pay for Performance	
Domain 3 Lay for Ferformance	
Controlling High Blood Pressure	1
	0
	0.3333333
	0.000000
	0.3333333
	0.3333333
	0.000000
	0.3333333
	0.3333333
	0.222222
	0.3333333
	0.5
	0.0
	0
	0
	0



Save & Return

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 3.b.i

Print

Total 3.50



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 3.c.i

Project Snapshot							
Project Domain	Clinical Improvement Projects (Domain 3)						
Project ID	3.c.i						
Project Title	Evidence-based strategies for disease management in high risk/affected populations. (adult only)						

Payment Snapshot	
DY4, Q4 Payment Available	\$ 6,492,245
DY4, Q4 Payment Earned	\$ 5,601,152

		3.c.i Scoresl	neet						
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%				763,793
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%	12%	763,793	
	Patient Engagement Speed	Complete	1.00	1.00	100%				
	Domain 1 Subtotal		6.00	6.00	100%	20%	12%	763,793	763,793
Domain 3	Domain 3 Pay for Reporting (P4R)	Complete	6.00	6.00	100%	10%	6%	381,897	381,897
Domain 5	Domain 3 Pay for Performance (P4P)	Complete	6.00	5.00	83%	70%	82%	5,346,554	4,455,462
	Domain 2 Subtotal			11.00	92%	80%	88%	5,728,451	4,837,359
Total Complete		18.00	17.00	94%	100%	100%	6,492,245	5,601,152	

Total Project 3.c.i AVs Awarded: 17 out of 18

Hide Reviewer Comments

	Domain 1 Project Milestones Project 3.c.i									
AV D	Priving	Project Requirement and Metric/Deliverable		Committed Due Date	Milestone Status	Reviewer Status	AVs Awarded			
		Module 1 - Major risks to implementation and mitigation strategies	Ongoing	N/A	In Process	Pass & Ongoing	N/A			



Print Nassau Queens Performing Provider System, LLC - Project 3.c.i							
Enter Reviewer Comment							
Module 2 - Project Implementation Speed	Ongoing	N/A	In Process	Pass & Ongoing	0.00		
Enter Reviewer Comment							
Module 3 - Patient Engagement Speed	Ongoing	N/A	In Process	Pass & Ongoing	1		
Enter Reviewer Comment							
Total					1.00		

	Domain 1 Project Prescribed Milestones - Project 3.c.i							
AV Driving	Project Requirement and Metric/Deliverable	Project Requirement and Metric/Deliverable Committed Due Date Status Reviewer Status		AVs Awarded				
	1. Implement evidence-based best practices for disease management, specific to diabetes, in community and ambulatory care settings.	3/31/2018	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment							
	2. Engage at least 80% of primary care providers within the PPS in the implementation of disease management evidence-based best practices.	3/31/2017	Completed	Fail	N/A			
	Enter Reviewer Comment							
	3. Develop care coordination teams (including diabetes educators, nursing staff, behavioral health providers, pharmacy, community health workers, and Health Home care managers) to improve health literacy, patient self-efficacy, and patient self-management.	3/31/2017	Completed	Pass & Complete	N/A			
	Enter Reviewer Comment							
	4. Develop "hot spotting" strategies, in concert with Health Homes, to implement programs such as the Stanford Model for chronic diseases in high risk neighborhoods.	3/31/2017	Completed	Pass & Complete	N/A			



Print	Nussuu Que	ens reijoini	ng Provider System, LLC -	rroject 3.c.		
Enter Reviewer Comment						
				N/A		
Enter Reviewer Comment						
6. Use EHRs or other technical platforms to track all patients engaged in this project.	3/31/2017	Completed	Pass & Complete	N/A		
Enter Reviewer Comment						
7. Meet Meaningful Use and PCMH Level 3 standards and/or APCM by the end of Demonstration Year 3 for EHR systems used by participating safety net providers.	3/31/2018	Completed		N/A		

Domain 3 Pay for Performance and Pay for Reporting					
Measure	Reviewer Status	AVs Awarded			
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±		1			
Comprehensive Diabetes screening – All Three Tests		1			
(HbA1c, dilated eye exam, nephropathy monitor)		1			
		1			
	Measure Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ± Comprehensive Diabetes screening – All Three Tests	Measure Reviewer Status Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ± Comprehensive Diabetes screening – All Three Tests			



Save & Return

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 3.c.i

Print		•
Health Literacy - Instructions Easy to Understand	Pass & Ongoing	0.3333333
	Pass & Ongoing	0.3333333
	Pass & Ongoing	0.3333333
	Pass & Ongoing	0.3333333
	Pass & Ongoing	
	Pass & Ongoing	
	Pass & Ongoing	1
Total		6.00

Domain 3 Pay for Performance



Save & Return

	Print		•
AV Driving	Measure	Reviewer Status	Avorded
	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) ±	Pass & Ongoing	1
		Pass & Ongoing	1
		Fail	0
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	0.3333333
		Pass & Ongoing	
		Pass & Ongoing	
		Pass & Ongoing	1
	Total		5.00



Print

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 2,545,978
DY4, Q4 Payment Earned	\$ 2,545,978

Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%	20%			509,196
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%		20% 20%	509,196	
	Patient Engagement Speed	N/A	0.00	0.00	0%				
	Domain 1 Subtotal		5.00	5.00	100%	20%	20%	509,196	509,196
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	11.00	11.00	100%	80%	80%	2,036,783	2,036,783
Domain 4	Domain 4 Pay for Performance (P4P)	N/A	N/A	N/A	N/A	0%	0%	-	-

Domain 4 Pay for Performance and Pay for Reporting - Project 4.a.iii (all Milestones are P4R in DY2)				
AV Driving	Measure	Measure Reviewer Status		
	Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years – Ratio of Hispanics to White non-Hispanics	Pass & Ongoing	1	



Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 Vassau Queens Performin		
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		



Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 Vassau Queens Performing		
Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month		1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
	Pass & Ongoing	1
Enter Reviewer Comment		
Total		11.00



Print

Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter)

Nassau Queens Performing Provider System, LLC - Project 4.b.i

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

Payment Snapshot	
DY4, Q4 Payment Available	\$ 2,927,875
DY4, Q4 Payment Earned	\$ 2,927,875

4.b.i Scoresheet									
Domain	Component	Review Status	AVs Available	Net AVs Awarded	Percentage AV	Domain Funding % (DY4)	Domain Funding % (DY4, Q4)	Payment Available (\$)	Net Payment Earned (\$)
	Domain 1 Organizational	Complete	5.00	5.00	100%		20%	585,575	
Domain 1	Project Implementation Speed	N/A	0.00	0.00	0%	20%			585,575
	Patient Engagement Speed	N/A	0.00	0.00	0%				
Domain 1 Subtotal			5.00	5.00	100%	20%	20%	585,575	585,575
Domain 4	Domain 4 Pay for Reporting (P4R)	Complete	17.00	17.00	100%	80%	80%	2,342,300	2,342,300
	Domain 4 Pay for Performance (P4P) N/A		N/A	N/A	N/A	0%	0%	-	-
Domain 4 Subtotal			17.00	17.00	100%	80%	80%	2,342,300	2,342,300
Total Complete			22.00	22.00	100%	100%	100%	2,927,875	2,927,875

Total Project 4.b.i AVs Awarded: 22 out of 22

Hide Reviewer Comments

Domain 4 Pay for Performance and Pay for Reporting - Project 4.b.i (all Milestones are P4R in DY2)					
AV Driving	Measure	Reviewer Status	AVs Awarded		
	Percentage of premature death (before age 65 years)	Pass & Ongoing	1		



<i>F</i>	Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter) Nassau Queens Performing Provider System, LLC - Project 4.b.i				
		Enter Reviewer Comment			
			Pass & Ongoing	1	
		Enter Reviewer Comment			
			Pass & Ongoing	1	
		Enter Reviewer Comment			
			Pass & Ongoing	1	
		Enter Reviewer Comment			
			Pass & Ongoing	1	
		Enter Reviewer Comment			
			Pass & Ongoing	1	
		Enter Reviewer Comment			
			Pass & Ongoing	1	
		Enter Reviewer Comment			
			Pass & Ongoing	1	
		Enter Reviewer Comment			



Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Quarter) Nassau Queens Performing Provider System, LLC - Project 4.b.i Print Percentage of adults who are obese Pass & Ongoing 1 Enter Reviewer Comment Pass & Ongoing



Save & Return Achievement Value (AV) Scorecard DY4, Q4 January 1, 2019 - March 31, 2019 (Payment Q Nassau Queens Performing Provider System, LLC - Proje				
	Enter Reviewer Comment			
		Pass & Ongoing	1	
	Enter Reviewer Comment			
	Total		17.00	