



# **Regional Healthcare Partnerships**

## **Performing Provider DY2 Progress Reporting Template Instructions**

August 1, 2013

## DY 2 Progress Reporting Template

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- The purpose of this template is to provide performing providers with a means to report progress thus far on the projects being conducted in each of the following categories: Infrastructure Development (Category 1), Program Innovation and Redesign (Category 2), Quality Improvements (Category 3), and Population-Focused Improvements (Category 4).
- The completed template will serve as a basis for authorizing incentive payments to performing providers in an RHP for achievement of DSRIP milestones/metrics. There is no payment for partial achievement of a Category 1 or 2 metric or Category 3 process milestone.
- This template will capture progress attained in the second demonstration year. There will be two reporting periods within DY 2:
  - Reporting period 1 is achieved between October 1, 2012 and July 31, 2013, the reporting and request for payment is due August 31, 2013.
  - Reporting period 2 is achieved before September 30, 2013, the reporting and request for payment is due October 31, 2013.
- Once the performing provider has submitted their template and supporting documentation, HHSC and CMS will have 30 days to review and approve, or request additional information regarding the data reported for each milestone/metric measure. If approved, the project would be paid in the August report period with estimated payment in November 2013.
- If additional information is needed, the performing provider will have 15 days to respond. HHSC and CMS shall then have an additional 15 days to review and approve or deny the request for payment, based on the data provided. If approved, the project would be paid in the next reporting period of October 2013 with an estimated payment in January 2014.

## Who Should Complete the DY2 Progress Reporting Template

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- Performing Providers with the following:
  - Category 1 and 2 projects that were included in the *CMS Initial Review Findings* document under:
    - “Table 3 – Initially approved projects”
    - “Table 4 – Initially approved projects with priority technical corrections”
    - “Table 5 – Projects initially approved, with an adjustment to project value” that the provider is not revising but instead accepted the value indicated in the Phase 1 cover sheet as “Project value accepted, if revisions are not made” or non-hospital providers who changed patient satisfaction outcomes to TBD to keep their proposed value.
  - Category 3 improvement targets that were initially approved in the *CMS Initial Review Findings* document that have related Category 1 or 2 projects listed in Table 3, Table 4, or Table 5.
  - Category 4 status report on capability to report domains 1, 2, 4 and 5 using HHSC’s *Category 4 Status of Capability to Report Template*.
- August templates will only include projects that are eligible to report in that period.
- Performing Providers must report 100 percent completion of a metric on projects to be eligible for payment. Refer to the DY2 Reporting Companion Document for calculation examples.

## Provider Considerations

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- The template must be completed and submitted along with supporting documentation in order to be eligible for incentive payments.
- Do **NOT** change worksheet (“tab”) names in the template
- Do **NOT** change the template name
- The template calculates the estimated incentive payments based on the progress inputs and is **NOT** absolutely reflective of the final payments to be received. Final payment amounts will be calculated after HHSC and CMS review and final IGT allocations are determined.
- Refer to the Progress Tracker worksheet in the template to confirm all expected inputs have been completed per project before submitting the template.
- When saving the template at anytime, do **NOT** “up-convert” the workbook to Excel 2007/2010 format (e.g., .xlsx, .xlsm, .xlsb).
- Once the template and supporting documentation are complete, save and either 1) email the files to [DY2DSRIP@deloitte.com](mailto:DY2DSRIP@deloitte.com) (files may not exceed 5MB, please zip large files); 2) email a link to the files if you have access to an FTP site such as SharePoint or Dropbox; or 3) mail a CD with all files to: Tim Egan, 50 South 6th Street, Suite 2800, Minneapolis, MN 55402.
- The template, along with supporting documentation, is due by August 31, 2013.
- Several input cells require written/narrative responses in the template. In several instances, the input cell may be too small to see the entire written response due to the formatting of the template. Please provide your entire response, **do not** limit your response just because it does not all show up in the space provided. Utilize the Excel formula bar to view the entire response, if needed.

## DY2 Reporting Template Overview

<b>Worksheet Name</b>	<b>Description</b>	<b>Purpose</b>
<b>Instructions</b>	User contact information and general instructions.	Input section for the performing provider to include contact information for the primary and secondary points of contact for the information reported in the template. Also includes general information and high-level instructions for each worksheet included in the template.
<b>Attachments</b>	Supporting documentation file names	Input section for the provider to enter the filenames of all supporting documentation files that will accompany the reporting template.
<b>DY 2 Summary Report</b>	Categories 1, 2, 3, and 4 incentive payment summary	Summarizes the DSRIP allocation, IGT needed, estimated incentive payments, and remaining DSRIP per project and in total for Categories 1 through 4 based on the progress reported in the template.
<b>Progress Tracker</b>	Categories 1, 2, 3, and 4 data input progress	Tracks whether or not all of the required inputs have been completed for each project by the performing provider.
<b>Project Worksheets (in red)</b>	Categories 1, 2, and 4 progress reporting	Captures the performing provider's progress for Category 1 or 2 projects, related Category 3 outcomes, and their Category 4 project. There are separate worksheets for each Category 1 or 2 project, the related Category 3 outcomes are included on each Category 1 or 2 project worksheet. Category 4 is included on its own worksheet.

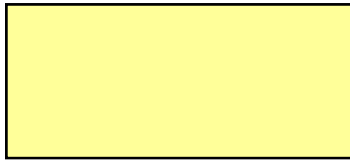
## Legend

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### Workbook Cell Formatting



**White Cells:** Calculation cells or pre-populated data cells. No provider input is allowed in these cells



**Yellow Cells:** Cells requiring data input, template will not pass validation checks if yellow cells are not completed (unless specified as optional)



**Yellow Cells with Shading:** Non-applicable input cells. Must be ignored



**White Cells with Shading:** Non-applicable calculation cells. Must be ignored

**Note:** If Excel prompts you for a password when you try to change a cell, you are trying to update a locked calculation or pre-populated cell. These cells cannot be altered.

### Instructions Formatting

### Format Description



**Black Circle/Blue Number:** Identifies some of the calculated or pre-populated areas of the template



**Red Circles/Red Number:** Identifies cells requiring data input from the provider

# **INSTRUCTIONS WORKSHEET**

# Instructions



## Performing Provider DY 2 Progress Reporting Template Instructions\*:

\*Detailed instructions for completing this template can be found in the accompanying PowerPoint document.

1

Please insert the name and contact information of the primary contact regarding information reported in this template:

First Name:	
Last Name:	
Phone Number:	
Email Address:	

Please insert the name and contact information of the secondary contact regarding information reported in this template:

First Name:	
Last Name:	
Phone Number:	
Email Address:	

This template contains the following worksheets:

2

### Attachments

General Notes:

- The Attachments worksheet tracks all of the documentation being submitted along with the progress reporting template.

1. **User name contact information: INPUT** - The yellow cells must be filled out by for the primary and secondary contacts regarding the information reported in the template.
2. **Worksheet Information/Instructions:** Includes general notes and high level instructions for each worksheet included in the workbook. More detailed instructions are included in this document.



## **ATTACHMENTS WORKSHEET**

# Attachments

## List of Electronic Attachments by File Name

1

### File Naming Conventions

All attachments shall be submitted electronically. Each attachment shall be saved as a separate file name according to the following rules:

#### Rules

1. Avoid using special characters in a file name. \ / : \* ? " < > [ ] & \$
2. Use underscores instead of periods or spaces.
3. Include the date of submission to HHSC in the file name. Use the format: YYYYMMDD, where YYYY is the year, MM is the month between 01 and 12 and DD is the day of the month between 01 and 31.
4. If you wish to reference the applicable demonstration year in the title, use DY2.
5. Do NOT include version numbers such as "v03" or "v2.3"
6. Be consistent with regard to how files are named.
7. HHSC recommends naming the file beginning with the same number as listed below.

2

File Name	Related Project ID
1 [Insert File Name]	[Insert related Project ID]
2 [Insert File Name]	[Insert related Project ID]
3 [Insert File Name]	[Insert related Project ID]
4 [Insert File Name]	[Insert related Project ID]
5 [Insert File Name]	[Insert related Project ID]
6 [Insert File Name]	[Insert related Project ID]
7 [Insert File Name]	[Insert related Project ID]

1. **Instructions:** Follow the naming convention instructions when inputting the supporting documentation file names.
2. **Action Required: INPUT - ALL** supporting documentation submitted with the template needs to be documented in this worksheet.
  - Each file gets its own line, do not include more than one file per line.
  - Include only the name of the document in the 'File Name' column. Be sure to type the full name as it appears.
  - Include the related Project ID for the attachment in the 'Related Project ID' column.

**DY 2 SUMMARY REPORT WORKSHEET**

# DY 2 Summary Report Worksheet



5 Delivery System Reform Initiative (DSRI) Semi Annual Report Table Metric Achievement Summary for DY 2															
Provider Name: <input type="text" value="Provider Name"/>		TPI: <input type="text" value="111111111"/>		Category 1-3 DSRIP Allocation: <input type="text" value="\$10,726,366"/>		Category 1-3 Estimated Payment: <input type="text" value="\$0"/>		Category 1-3 Remaining DSRIP: <input type="text" value="\$10,726,366"/>		Category 4 DSRIP Allocation: <input type="text" value="\$564,546"/>		Category 4 Estimated Payment: <input type="text" value="\$0"/>		Category 4 Remaining DSRIP: <input type="text" value="\$564,546"/>	
1 Category 1 Projects					2 Category 2 Projects					3 Category 3 Projects					
Totals:	\$5,449,300	\$2,217,865	\$0	\$5,449,300	Totals:	\$4,147,975	\$1,688,226	\$0	\$4,147,975	Totals:	\$1,129,091	\$459,540	\$0	\$1,129,091	
Project ID	DY 2 DSRIP Allocation	DY 2 IGT Needed	Estimated Payment in Aug	Remaining DY2 DSRIP after Aug Reporting	Project ID	DY 2 DSRIP Allocation	DY 2 IGT Needed	Estimated Payment in Aug	Remaining DY2 DSRIP after Aug Reporting	Project ID	DY 2 DSRIP Allocation	DY 2 IGT Needed	Estimated Payment in Aug	Remaining DY2 DSRIP after Aug Reporting	
111111111.1.1	\$1,626,657	\$662,049	\$0	\$1,626,657	111111111.2.1	\$650,663	\$264,820	\$0	\$650,663	111111111.3.1	\$191,371	\$77,888	\$0	\$191,371	
111111111.1.2	\$894,661	\$364,127	\$0	\$894,661	111111111.2.2	\$1,626,657	\$662,049	\$0	\$1,626,657	111111111.3.2	\$105,254	\$42,838	\$0	\$105,254	
111111111.1.3	\$975,994	\$397,230	\$0	\$975,994	111111111.2.3	\$894,661	\$364,127	\$0	\$894,661	111111111.3.3	\$114,823	\$46,733	\$0	\$114,823	
111111111.1.4	\$894,661	\$364,127	\$0	\$894,661	111111111.2.4	\$975,994	\$397,230	\$0	\$975,994	111111111.3.4	\$105,254	\$42,838	\$0	\$105,254	
111111111.1.5	\$1,057,327	\$430,332	\$0	\$1,057,327						111111111.3.5	\$124,391	\$50,627	\$0	\$124,391	
										111111111.3.6	\$76,549	\$31,155	\$0	\$76,549	
										111111111.3.7	\$95,686	\$38,944	\$0	\$95,686	
										111111111.3.8	\$95,686	\$38,944	\$0	\$95,686	
										111111111.3.9	\$35,085	\$14,279	\$0	\$35,085	
										111111111.3.10	\$35,085	\$14,279	\$0	\$35,085	

- Category 1 Projects:** Summarizes DSRIP allocation, IGT needed, estimated incentive payment, and remaining DSRIP available based on the progress reported for Category 1 projects in the template.
- Category 2 Projects:** Summarizes DSRIP allocation, IGT needed, estimated incentive payment, and remaining DSRIP available based on the progress reported for Category 2 projects in the template.
- Category 3 Projects:** Summarizes DSRIP allocation, IGT needed, estimated incentive payment, and remaining DSRIP available based on the progress reported for Category 3 outcomes in the template.
- Category 4:** Summarizes Category 4 DSRIP allocation, estimated incentive payment, and remaining DSRIP available.
- Category 1-3:** Summarizes total DSRIP allocation, estimated incentive payments, and remaining DSRIP after reporting.
- Estimated incentive payments:** Automatically calculated based on the progress inputs on each project worksheet.

# **PROGRESS TRACKER WORKSHEET**

# Progress Tracker Worksheet



Provider Input Progress	
Provider Name:	Provider Name
TPI:	111111111

Category 1 Projects		Category 2 Projects		Category 3 Projects		Category 4
Project ID	Progress for Aug Reporting Inputs	Project ID	Progress for Aug Reporting Inputs	Project ID	Progress for Aug Reporting Inputs	Progress for Aug Reporting Inputs
111111111.1.1	Complete	111111111.2.1	Incomplete	111111111.3.1	Incomplete	Incomplete
111111111.1.2	Incomplete	111111111.2.2	Complete	111111111.3.2	Complete	
111111111.1.3	Incomplete	111111111.2.3	Incomplete	111111111.3.3	Complete	
111111111.1.4	Complete	111111111.2.4	Incomplete	111111111.3.4	Incomplete	
111111111.1.5	Incomplete			111111111.3.5	Complete	
				111111111.3.6	Complete	
				111111111.3.7	Complete	
				111111111.3.8	Complete	
				111111111.3.9	Complete	
				111111111.3.10	Complete	
				111111111.3.11	Complete	
				111111111.3.12	Complete	
				111111111.3.13	Complete	

- The user does not need to input any data on this worksheet.
- Providers can use this worksheet to determine if all required input fields have been completed properly within the reporting template. It does not include whether the DY2 – Project Summary section has been completed, so please double-check your inputs prior to submitting the template.
- The progress will update based on whether or not all of the required inputs have been populated for each project.
  - All of the light yellow cells (that aren't shaded out) in the project worksheets need to have data entered in them, unless specified as optional. For Category 1 and 2, this includes Metric Baseline and Baseline Measurement Period, Achieved in Aug Reporting?, Progress Update, and Supporting Attachments. For Category 3, this includes Achieved in Aug Reporting?, Progress Update, and Supporting Attachments.
  - **Note:** "Complete" means you have populated the required cells on each template, it is not a reference to the progress on a project (i.e. it will show as Complete regardless of your selection for Achieved in Aug Reporting? of Yes-Completed, No-Partially Complete, or No-Not Started)

## **OVERALL PROVIDER SUMMARY WORKSHEET**

# Overall Provider Summary Worksheet



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## Overall Provider Executive Summary

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1

Please provide an executive summary describing the overall provider experience for October 1, 2012 to July 31, 2013. This may highlight accomplishments, challenges, lessons learned, and ongoing implementation. Also include a brief paragraph for each project's progress regardless of whether the project is eligible for August reporting.

**1. Overall Provider Summary: INPUT**– Enter responses for an executive summary of the overall provider experience in the period of October 1, 2012 to July 31, 2013. This may highlight accomplishments, challenges, lessons learned, and ongoing implementation. Also include a brief paragraph for each project's progress regardless of whether the project is eligible for August reporting.



**CATEGORY 1 AND CATEGORY 2 PROJECT  
WORKSHEETS**

# Category 1 and Category 2 Project Worksheets

**1** **CATEGORY 1 PROJECT INFO**

Provider Name: Provider 1  
 TPI: 11111111  
 Category 1 Project ID: 11111111.1.1  
 Category 1 Project Area: 1.1 - Expand Primary Care Capacity  
 Category 1 Project Option: 1.1.2 - Expand existing primary care capacity  
 Number of DY2 Milestones: 1  
 Number of Category 3 Outcomes: 1  
 Number of IGT Entities: 1

**2** **DY2 - CATEGORY 1 IGT ENTITY NAME**      **IGT TPI**      **IGT TIN**      **IGT AFFILIATION NUMBER**

IGT 1	222222222	111111111 0 000	111-10-0000-00001
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**3** **DY2 - PROJECT SUMMARY**

*Project Specific Questions (Aug reporting optional)*

Project Overview: Accomplishments [Insert summary of project status of accomplishments.]

Project Overview: Challenges [Insert summary of project status of challenges.]

Project Overview: Lessons Learned [Insert summary of project status of lessons learned.]

Patient Impact for Medicaid/low income uninsured Population: [Identify Medicaid and/or low income uninsured patient impact from the year with brief description. Indicate NA if there was no impact in DY2.]

Progress on Core Components: [Identify progress on core components from the year.]

Continuous Quality Improvement Activities: [Identify continuous quality improvement activities from the year.]

Does your project include other federal funding sources?  
 If yes, provider assures that no duplication of activities from federal funds is included in [Assures no duplication. Please explain any interaction below]

Explanation of interaction of federal funds [Insert explanation of interaction of federal funds]

- Category 1 (or 2) Project Info:** Each worksheet is automatically populated with the performing provider’s information and general project information.
- IGT Entity Info:** Each worksheet is automatically populated with the information of the IGT entities associated with the project.
- Category 1 (or 2) Project Summary (Optional for August Reporting):** **INPUT**– Enter responses for the project-specific questions related to the project from October 1, 2012 through July 31, 2013. Enter as much information as needed, do not limit the response based on the size of the input cells. If a question is not applicable, enter NA.

# Category 1 and Category 2 Project Worksheets (Continued)



1

DY2 - ESTIMATED CATEGORY 1 PROJECT PAYMENT		DY2 - ESTIMATED CATEGORY 3 OUTCOMES PAYMENT		DY2 - ESTIMATED CATEGORY + OUTCOME PAYMENT	
Estimated DSRIP:	\$1,240,876	Estimated DSRIP:	\$145,985	Estimated DSRIP:	\$1,386,861
IGT Needed:	\$505,036	IGT Needed:	\$59,416	IGT Needed:	\$564,452
Estimated Aug Reporting Payment:	\$1,240,876	Estimated Aug Reporting Payment:	\$0	Estimated Aug Reporting Payment:	\$1,240,876
Remaining After Aug Reporting:	\$0	Remaining After Aug Reporting:	\$145,985	Remaining After Aug Reporting:	\$145,985

- 1. Estimated Project Payments:** This section summarizes the estimated DSRIP, IGT needed, estimated incentive payments, and remaining DSRIP after reporting for the Category 1 (or 2) project, and all related Category 3 outcomes.
- 2. Estimated Incentive Payments:** These values are automatically calculated based on the progress inputs later in the worksheet. Note: these are estimates only, final payments will be calculated after HHSC and CMS review and final IGT allocations are determined.

# Category 1 and Category 2 Project Worksheets (Continued)

**1**

**DY2 - PROJECT MILESTONE:5 PROGRESS REPORTING**

Milestone 1: P-5  
 Description: Train/hire additional primary care providers and staff and/or increase the number of primary care clinics for existing providers  
 DY 2 DSRIP Allocation: \$1,626,657  
 Number of Metrics: 1  
 Milestone 1 Progress Input

Metric	Metric 3	Metric 4	Metric 5	Metric 6
Metric #: P-5.1				
Metric Description: Documentation of increased number of providers and staff and/or clinic sites				
Goal/Baseline: two (2) primary care providers will have been recruited to the County increasing the additional number of available annual patient encounters by 1,600 over base year				
Data Source: Documentation of completion of a items described by the RHP plan for this measure. Hospital or other Performing Provider report, policy, contracts or other documentation				
Metric Baseline and Baseline Measurement Period: <b>INPUT</b>				
Goal Type: Yes/No				
Numeric Goal: NA	NA	NA	NA	NA
Achieved in Aug Reporting?				
Aug Reporting Progress:				
Aug Reporting Achievement Value: 0%	0%	0%	0%	0%
Aug Reporting HHSC Signoff:				

Est. DY2 Aug Reporting Payment: 50

**2**

**3**

- 1. Project Milestone Information:** Each milestone within a project has its own section (starting with the light blue line), the milestone information is automatically populated.
- 2. Metric Information:** Each metric has its own column within a milestone section, the metric information is automatically populated.
- 3. Metric Baseline and Baseline Measurement Period: INPUT** – Enter explanation of metric baseline and baseline measurement period before activities for specific metric started (e.g. For a strategic plan/needs assessment/business case, no existing documentation when the waiver began; for hiring/training, 10 physicians were available as of the start date of the project of January 1, 2013; for quantifiable patient impact (a one-year measurement period), 50 patients were served in DY1 (October 1, 2011 – September 30, 2012))

# Category 1 and Category 2 Project Worksheets (Continued)



## DY2 - PROJECT MILESTONE PROGRESS REPORTING

Milestone 1:	P-5					
Description:	Train/hire additional primary care providers and staff and/or increase the number of primary care clinics for existing providers					
DY 2 DSRIP Allocation:	\$1,626,657					
Number of Metrics:	1					
Milestone 1 Progress Input						
Metric #:	Metric 1	Metric 2	Metric 3	Metric 4	Metric 5	Metric 6
Metric Description:	P-5.1					
Goal/Baseline:	Documentation of increased number of providers and staff and/or clinic sites					
Data Source:	two (2) primary care providers will have been recruited to the County increasing the additional number of available annual patient encounters by 1,600 over base year					
Metric Baseline and Baseline Measurement Period:	Documentation of completion of all items described by the RHP plan for this measure. Hospital or other Performing Provider report, policy, contract or other documentation					
Goal Type:	Yes/No					
Numeric Goal:	NA	NA	NA	NA	NA	NA
Achieved in Aug Reporting?						
Aug Reporting Progress:	0%	0%	0%	0%	0%	0%
Aug Reporting Achievement Value:						
Aug Reporting HHSC Signoff:						
Est. DY2 Aug Reporting Payment:	\$0					

**4. Achievement: INPUT** – Enter whether or not the metric was fully achieved, partially achieved, or not started yet. If left blank, HHSC will assume the metric was not started yet and the Progress Tracker will show the project as Incomplete. If reporting partial achievement of a metric, the metric is not eligible for payment.

**NOTE: For the August reporting period, this pertains to progress between October 1, 2012 and July 31, 2013.**

**5. Reporting Progress: INPUT IF APPLICABLE** – If the metric Goal Type is a number or percentage, input your numeric progress thus far (e.g., 2, 25%, etc.); if the Goal Type is yes/no then the cell will be shaded and no input is needed here. Goal Type may be Yes/No, Number, or Percentage (e.g. completion of a strategic plan requires a Yes/No response; increased patients served by 10 requires a Number response).

**NOTE: For Category 1 or 2, the metric achievement value will only be 100% if the goal is met or exceeded, otherwise the metric achievement value will be 0%.**

**6. Estimated Incentive Payment:** Automatically calculated based on the progress of all the metrics within a milestone.

# Category 1 and Category 2 Project Worksheets (Continued)



Metric Specific Questions (Aug reporting only)	P-5.1				
Goal Calculation (if applicable):	[Insert a narrative description of progress. If achievement of your metric varies from your plan, explanation is needed. If the metric is not achieved, report on how the provider will achieve metric before the end of the year.]	1			
Progress Update:	[Insert the title of any attachment included to demonstrate achievement of each metric for which the provider is seeking an incentive payment and provide an explanation of supporting	2			
Supporting Attachments:		3			

- 1. Goal Calculation: INPUT IF APPLICABLE**– If the metric goal type is a percentage, input how the goal was calculated, be sure to specify the numerator and denominator. If the metric goal included several numbers and percentages, input how each was achieved and calculated. If the metric goal is to establish the baseline, input the baseline, a description of the baseline, and how the baseline was calculated. Be sure to specify the numerator and denominator if a percentage.
- 2. Progress Update: INPUT** – Describe the progress on the metric thus far. If achievement of your metric varies from your plan, explanation is needed for HHSC consideration of eligibility for payment. Optional to complete this field if metric was not achieved.
- 3. Supporting Attachments: INPUT**– Insert the filenames of all supporting documentation that will be submitted for each metric. At least one supporting documentation is required for each metric if the metric was achieved.

**NOTE: All attachments included on the project worksheets need to also be included in the Attachments worksheet.**

# Category 1 and Category 2 Project Worksheets (Continued) – Category 3



**1**

Category 3 Outcome ID: 11111111.3.1  
 Outcome Measure: IT-1.7  
 Outcome Title: Controlling high blood pressure (NCQA-HEDIS 2012, NQF 0018) (Standalone measure)  
 Estimated DY2 DSRIP: \$131,371  
 Number of Milestones: 2  
 Category 3 Outcome Progress Input

	Milestone 1	Milestone 2	Milestone 3	Milestone 4	Milestone 5	Milestone 6
Milestone #:	P-1	2				
Milestone Description:	Project planning - engage stakeholders, identify current capacity and needed resources, determine timelines and document implementation plans	Establish base				
Data Source:	0	0				
Target:	NA	Develop and test data systems to establish baseline measurements of patients 18 to 35 years of age with a diagnosis of hypertension, test system for measurement of reductions in readings for follow-up appointments, and establish frequency of reporting required				
Numerator:	NA	NA				
Denominator:	NA	NA				
Target Type:	NA	Yes/No				
Numeric Goal:	NA	NA				
Milestone Incentive Payment:	\$95,686	\$95,686				
Achieved in Aug Reporting?						
Established Baseline in DY 2 (if applicable):						
Aug Reporting Progress:						
Aug Reporting HHSC Signoff:						
Aug Reporting Achievement Value:	0%	0%	0%	0%	0%	0%
Achievement Value in Aug Reporting:	0%	0%	0%	0%	0%	0%
Estimated Payment in Aug Reporting:	\$0	\$0	\$0	\$0	\$0	\$0
Total Estimated Aug Reporting Payment:	\$0					

**2**

**3**

- 1. Related Category 3 Outcome:** All related Category 3 outcomes within a project have their own section (starting with the light blue line), the Category 3 information is automatically populated.
- 2. Milestone Information:** Each Category 3 outcome milestone has its own column within a Category 3 outcome section, the milestone information is automatically populated.
- 3. Established Baseline in DY 2: INPUT IF APPLICABLE**– If the Category 3 milestone goal was to establish a baseline in DY 2, the established baseline needs to be entered here.

**NOTE: Only input a percentage or number (depending on goal), do not use any words here.**

# Category 1 and Category 2 Project Worksheets (Continued) - Category 3



Category 3 Outcome ID:	11111111.3.1					
Outcome Measure:	IT-1.7					
Outcome Title:	Controlling high blood pressure (NCQA-HEDIS 2012, NQF 0018) (Standalone measure)					
Estimated DY2 DSRIP:	\$131,371					
Number of Milestones:	2					
Category 3 Outcome Progress Input						
Milestone #:	Milestone 1	Milestone 2	Milestone 3	Milestone 4	Milestone 5	Milestone 6
Milestone Description:	P-1 Project planning - engage stakeholders, identify current capacity and needed resources, determine timelines and document implementation plans	P-2 Establish baseline rates				
Data Source:	0	0				
Target:	NA	Develop and test data systems to establish baseline measurements of patients 18 to 85 years of age with a diagnosis of hypertension, test system for measurement of reductions in readings for follow-up appointments, and establish frequency of reporting required				
Numerator:	NA	NA				
Denominator:	NA	NA				
Target Type:	NA	Yes/No				
Numeric Goal:	NA	NA				
Milestone Incentive Payment:	\$95,686	\$95,686				
Achieved in Aug Reporting?						
Established Baseline in DY 2 (if applicable):						
Aug Reporting Progress:						
Aug Reporting HHSC Signoff:						
Aug Reporting Achievement Value:	0%	0%	0%	0%	0%	0%
Achievement Value in Aug Reporting:	0%	0%	0%	0%	0%	0%
Estimated Payment in Aug Reporting:	\$0	\$0	\$0	\$0	\$0	\$0
Total Estimated Aug Reporting Payment:	\$0					

4. **Achievement: INPUT** – Enter whether or not the milestone was fully achieved, partially achieved, or not started yet.

NOTE: For the August reporting period, this pertains to progress between October 1, 2012 and July 31, 2013.

5. **Reporting Progress: INPUT IF APPLICABLE** – If the metric Target Type is a number or percentage, input your numeric progress thus far (e.g., 2, 25%, etc.) ; if the Target Type is yes/no then the cell will be shaded and no input is needed here.

NOTE: For Category 3, the achievement value can be between 0% and 100% for Improvement Targets.

6. **Estimated Incentive Payment:** Automatically calculated based on the achievement value of each milestone.

NOTE: The first achievement value measure is calculated based on the progress input, the second achievement value measure converts the first to a percentage based on the completion range it falls into (i.e., 27% -> 25%).



# Category 1 and Category 2 Project Worksheets (Continued) – Category 3



Milestone Specific Questions (Aug reporting only)	Y-1	Yes/No				
Progress Update:	[Insert a narrative description of progress and how it was calculated. If the metric is not achieved, report on how the provider will achieve metric before the end of the year.]	[Insert a narrative description of progress and how it was calculated. If the metric is not achieved, report on how the provider will achieve metric before the end of the year.]	1			
Supporting Attachments:	[Insert the title of any attachment included to demonstrate achievement of each metric for which the provider is seeking an incentive payment and provide an explanation of supporting documents.]	[Insert the title of any attachment included to demonstrate achievement of each metric for which the provider is seeking an incentive payment and provide an explanation of supporting documents.]	2			

- 1. Progress Update: INPUT** – Describe the progress on the milestone thus far, including how the progress was calculated, be sure to specify the numerator and denominator used. If the milestone is to establish the baseline, input a description of the baseline and how the baseline was calculated. Be sure to specify the numerator and denominator if a percentage. Optional to complete this field if metric was not achieved.
- 2. Supporting Attachments: INPUT**– Insert the filenames of all supporting documentation that will be submitted for each milestone . At least one supporting documentation is required for each process milestone if the milestone was achieved.  
**NOTE: All attachments included on the project worksheets need to also be included in the Attachments worksheet**

## **CATEGORY 4 WORKSHEET**

# Category 4 Worksheet



## 1 CATEGORY 4 PROJECT INFO

Provider Name: Provider Name  
 TPI: 111111111  
 Number of IGT Entities: 1

## 2 CATEGORY 4 IGT ENTITY NAME IGT TPI IGT TIN IGT AFFILIATION NUMBER

CATEGORY 4 IGT ENTITY NAME	IGT TPI	IGT TIN	IGT AFFILIATION NUMBER
IGT Name	222222222	3333333333 6 000	000-00-0000-00000

## 3 DY2 - ESTIMATED PROJECT PAYMENT

Estimated DSRIP:	\$500,000
IGT Needed:	\$203,500
Achievement Value Aug Reporting:	0%
Estimated Aug Reporting Payment:	\$0
Remaining After Aug Reporting:	\$500,000

- Category 4 Project Info:** The Category 4 worksheet is automatically populated with the performing provider name and TPI.
- IGT Entity Info:** Section is automatically populated with the information of the IGT entities associated with the project.
- Estimated Incentive Payment:** Automatically calculated based on whether or not there was a progress report submitted.

# Category 4 Worksheet (Continued)



**DY2 - PROJECT MILESTONE PROGRESS REPORTING**

Milestone Description: Status report submitted to HHSC confirming system capability to report Domains 1, 2, 4, and 5.

1

Submission to HHSC of status report that describes the system changes the hospital is putting in place to prepare to successfully report:

2

Achieved in Aug Reporting?	Supporting Documentation (Category 4 Status of Capability to Report template file name)	[Insert File Name]
Aug Reporting HHSC Signoff:		

- Achievement: INPUT** – Yes or no for whether or not there was a status report submitted confirming the performing provider’s capability to report on Domains 1, 2, 4, AND 5 (must include Domain 6 if provider selected to report on the optional domain) (all must be included in status report).
- Supporting Documentation: INPUT** – Insert the filename of the supporting documentation (i.e. Category 4 Status of Capability to Report template) that will be submitted.

**NOTE: All attachments included on the Category 4 worksheet need to also be included in the Attachments worksheet.**

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