CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

Reporting Form Instructions

Dates Reports are Due

DPH systems submit this report to the State three times a year:

| DY 6 (6-month) | March 2, 2011 | |
|------------------|--------------------|--|
| DY 6 (year-end) | May 15, 2011 | |
| DY 7 (6-month) | March 31, 2012 | |
| DY 7 (12-month) | September 30, 2012 | |
| DY 7 (year-end) | October 31, 2012 | |
| DY 8 (6-month) | March 31, 2013 | |
| DY 8 (12-month) | September 30, 2013 | |
| DY 8 (year-end) | October 31, 2013 | |
| DY 9 (6-month) | March 31, 2014 | |
| DY 9 (12-month) | September 30, 2014 | |
| DY 9 (year-end) | October 31, 2014 | |
| DY 10 (6-month) | March 31, 2015 | |
| DY 10 (12-month) | September 30, 2015 | |
| DY 10 (year-end) | October 31, 2015 | |

Use of This Reporting Form

All DPH systems must use this Reporting Form template for reports starting May 15, 2011. For the annual report, DPH systems will include the annual report narrative, the annual report, and reattach the previously submitted 6-month report. The State reserves its right to modify the Reporting Form as experience is gained with its use. The State is looking for DPHs to include as much detail as possible in their narrative responses throughout the Reporting Form. Given the timeframe the State has to review and make payment, the State will exercise its right to further review the submitted Reporting Forms even after payment is made and, if necessary, recoup payment if it is determined on further review that a milestone was not met.

DPH systems should follow the instructions at the top of each tab for completing the form. DPH systems must complete information for items marked "*" for every project and every milestone included in the DPH's plan for that DY. Regardless of whether there is any progress made on a particular milestone, DPH systems must include ALL of the milestones included in their plans for that DY in the Reporting Form and report progress or no progress so that the form appropriately calculates the total denominator of the achievement values for purposes of accurate payment. DPH systems should not include any milestones from any other DYs other than the DY for which the report is due.

For milestones that can receive partial payment (e.g, the milestone is "achieve 90% compliance with the bundle"), please complete the numerator and denominator information for that milestone, and include the targeted achievement under "DY Target" for calculation of a 0, 0.25, 0.5, 0.75, or 1 achievement value. For an "all-or-nothing" milestones (e.g., the milestone is "join a sepsis collaborative"), please use the "yes/no" drop-down menu and under "DY Target" enter "yes". For some milestones that are "yes/no," but are also the reporting of data (e.g., the milestone is "report baseline data"), it may make sense to use the "yes/no" drop-down menu, under "DY Target" enter "yes", and include the actual data in the numerator and denominator for reporting purposes only (the payment will be based on selecting "yes" or "no").

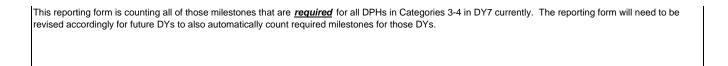
In the narrative summary box for each milestone, DPHs must include an assessment of overall project implementation, including brief but detailed narrative descriptions of:

- a. the results of any milestones achieved or milestone progress, as applicable
- b. barriers to meeting any milestones and how those barriers have been addressed
- c. the approaches taken to test, refine and improve upon specific interventions, including examples of "Plan Do Study Act" learning cycles
- d. how staff have used data to test implementation methods
- e. lessons learned and key changes implemented, as applicable
- f. how projects have informed the modification and scaling up of other projects, as applicable
- g. training programs, including outlines of curricula, the frequency of trainings, and a summary of the results of training evaluations as applicable
- h. the process to involve stakeholders in the project, as applicable
- i. system-level changes that have been made, if any, as a result of the project
- j. engagement by physicians, front line clinicians and patients in the projects and the degree to which this engagement is contributing to the success of the project
- k. plans for sustainability of the project, given staff turnover, and plans for ongoing staff training

In addition to providing an in-depth description of how the milestone was achieved, please also provide an in-depth description of why a milestone was not achieved or only partially achieved, for the purposes of understanding systemic issues/patterns. If DPH systems are reporting at the 6-month mark and a milestone is partially met or not achieved because it will be more fully achieved by the year-end of the DY, the DPH system may note that it is on track to meet the milestone within the DY. As stated above, the State is looking for DPHs to provide detailed descriptions of milestone progress in their narrative responses throughout the Reporting Form.

Payment amounts are in Total Computable (i.e., federal incentive and non-federal share provided by DPHs). Indicate all payment amounts as a whole number (i.e., do not round, do not show in millions with decimals). For the 6-month report (first semi-annual report of the DY), DPHs would not have received any prior funding for the DY and therefore should enter "0" for all of the DPH's projects under: "Incentive Funding Already Received in DY."

For the Annual Report, DPHs must report any updates, corrections or changes to the data for a given milestone, and must highlight the change in yellow. Additionally, DPHs must provide an explanation for the correction or change in the narrative summary box for that milestone. The narrative explanation should be additive, meaning that it should be added to the original narrative provided for that milestone.



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

- * REPORTING YEAR:
- * DPH SYSTEM: The University of California, San Francisco Medical Center
- * DATE OF SUBMISSION:
- DY 7 9/30/2012

Total Payment Amount

This table sums the eligible incentive funding amounts. Please see the following pages for the specifics.

* Instructions for DPH systems: Please input the DPH System Name, Reporting DY & Date. Everything else on this tab will automatically populate.

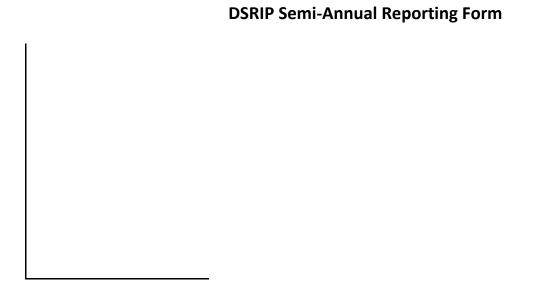
| Category 1 Projects - Incentive Funding Amounts | |
|--|-----------------|
| Expand Primary Care Capacity | \$ - |
| Increase Training of Primary Care Workforce | |
| Implement and Utilize Disease Management Registry Functionality | \$ - |
| Enhance Interpretation Services and Culturally Competent Care | |
| Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities | |
| Enhance Urgent Medical Advice | |
| Introduce Telemedicine | |
| Enhance Coding and Documentation for Quality Data | |
| Develop Risk Stratification Capabilities/Functionalities | |
| Expand Specialty Care Capacity | |
| Enhance Performance Improvement and Reporting Capacity | \$ - |
| TOTAL CATEGORY 1 INCENTIVE PAYMENT: | \$ - |
| Category 2 Projects | |
| Expand Medical Homes | \$ 1,364,160.00 |
| Expand Chronic Care Management Models | |
| Redesign Primary Care | |
| Redesign to Improve Patient Experience | |
| Redesign for Cost Containment | |
| Integrate Physical and Behavioral Health Care | |
| Increase Specialty Care Access/Redesign Referral Process | \$ - |
| Establish/Expand a Patient Care Navigation Program | |
| Apply Process Improvement Methodology to Improve Quality/Efficiency | |
| Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation | |
| Use Palliative Care Programs | |
| Conduct Medication Management | |
| Implement/Expand Care Transitions Programs | - |
| Implement Real-Time Hospital-Acquired Infections (HAIs) System | |
| TOTAL CATEGORY 2 INCENTIVE PAYMENT: | \$ 1,364,160.00 |
| Category 3 Domains | |
| Patient/Care Giver Experience (required) | \$ - |
| Care Coordination (required) | \$ 1,399,612.50 |
| Preventive Health (required) | \$ 1,399,612.50 |
| At-Risk Populations (required) | \$ 1,399,612.50 |
| TOTAL CATEGORY 3 INCENTIVE PAYMENT: | \$ 4,198,837.50 |
| Category 4 Interventions | |
| Severe Sepsis Detection and Management (required) | \$ 277,795.83 |
| Central Line Associated Blood Stream Infection Prevention (required) | \$ 241,243.50 |
| Surgical Site Infection Prevention | \$ 482,487.50 |
| Hospital-Acquired Pressure Ulcer Prevention | \$ 394,762.50 |
| Stroke Management | |
| Venous Thromboembolism (VTE) Prevention and Treatment | |
| Falls with Injury Prevention | |
| TOTAL CATEGORY 4 INCENTIVE PAYMENT: | \$ 1,396,289.33 |
| TOTAL INCENTIVE PAYMENT | \$ 6,959,286.83 |

CA 1115 Waiver - Delivery Syste DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Annual Report Narrative

This narrative summarizes t
* Instructions for DPH syste
a description of the degree t
to the patient population tha
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Summary of Demonstra



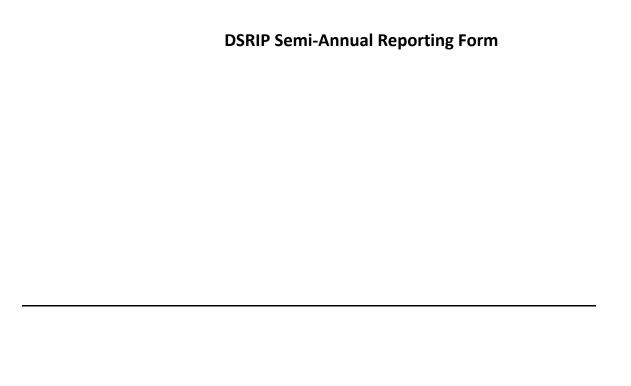
| Summary of DPH System | | |
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The University of California, San Francisco Medical Center DY 7
9/30/2012

he DSRIP activities performed in the reporting demonstration year.

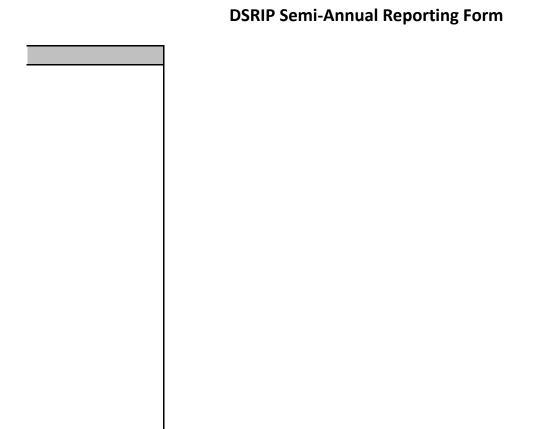
Ims: Please complete the narrative for annual reports. The narrative must include to which each project contributed to the advancement of the broad delivery system reform t was included in the DPHs DSRIP Plan. The narrative must also include a detailed descring.

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CA 1115 Waiver - Delivery Syste **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: Category 1 Summary Page This table is the summary of * Instructions for DPH syste The black boxes indicat The blue boxes show p The red boxes indicate Category 1 Projects **Expand Primary Care Cap** Process Milestone: Achievement Value Process Milestone: Achievement Value **Process Milestone:** Achievement Value Process Milestone: Achievement Value Process Milestone: Achievement Value Improvement Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones:

Achievement Value Percenta

Category 1 Summary Page Eligible Incentive Funding Ar

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Category 1 Summary Page

Increase Training of Prima

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Category 1 Summary Page Implement and Utilize Dise Process Milestone: Achievement Value Improvement Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones: Achievement Value Percenta Eligible Incentive Funding Ar

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Category 1 Summary Page

Enhance Interpretation Se Process Milestone:

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Category 1 Summary Page Collect Accurate Race, Eth Process Milestone: Achievement Value Improvement Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones: Achievement Value Percenta Eligible Incentive Funding Ar

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Category 1 Summary Page **Enhance Urgent Medical A** Process Milestone: Achievement Value Improvement Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones: Achievement Value Percenta Eligible Incentive Funding Ar

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Category 1 Summary Page Introduce Telemedicine Process Milestone: Achievement Value Improvement Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones: Achievement Value Percenta Eligible Incentive Funding Ar Incentive Funding Already R

Category 1 Summary Page Enhance Coding and Docu Process Milestone: Achievement Value Improvement Milestone: Achievement Value

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Category 1 Summary Page **Develop Risk Stratification** Process Milestone: Achievement Value Improvement Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones: Achievement Value Percenta

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Category 1 Summary Page

Expand Specialty Care Ca

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Category 1 Summary Page Enhance Performance Imp

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m Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

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f data reported for the DPH system. Please see the following pages for the specifics.
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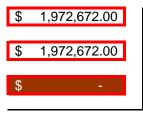
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| provement and Reporting Capacity |
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| Implement quality improvement (QI) data systems, collection and reporting |
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CA 1115 Waiver - Delivery Syste **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: Category 2 Summary Page This table is the summary of * Instructions for DPH syste The black boxes indicat The blue boxes show p The red boxes indicate Category 2 Projects **Expand Medical Homes** Process Milestone: Achievement Value Process Milestone: Achievement Value **Process Milestone:** Achievement Value Process Milestone: Achievement Value Process Milestone: Achievement Value Improvement Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones:

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f data reported for the DPH system. Please see the following pages for the specifics.
**ms: Do not complete, this tab will automatically populate.

**:e Milestone achievements, either "yes/no", or the actual achievement # or %.

**rogress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.

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| Train 1 RN case manager in case management of high risk patients and deploy in |
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| Link at least 50 SPD patients without UCSF primary care visits in FY2010 to |
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| Complete a planning process/submit plan to implement electronic referrals |
| Develop the technical capabilities to facilitate electronic referrals |
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| N/A | |
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| IV/A | |
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| Yes |
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| 1.00 |
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| 0.53 |
| 1.00 |
| N/A |
| N/A |
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| N/A |
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| |
| \$ 5,261,760.00 |
| 2.00 |
| 2.00 |
| 100% |
| \$ 5,261,760.00 |
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| \$ - |

| N/A | |
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| 1977 | |
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| N/A | |
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CA 1115 Waiver - Delivery Syste DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION: Category 3 Summary Page This table is the summary of * Instructions for DPH syste The black boxes indicat The blue boxes show p The red boxes indicate Category 3 Domains Patient/Care Giver Experie Undertake the necessary | negotiations in order to im Achievement Value Report results of CG CAH and Information" theme to Achievement Value Report results of CG CAH Patients" theme to the Sta Achievement Value Report results of CG CAH Staff" theme to the State (Achievement Value Report results of CG CAH theme to the State (DY8-1 Achievement Value Report results of CG CAH theme to the State (DY8-1 Achievement Value DY Total Computable Incent Total Sum of Achievement V Total Number of Milestones: Achievement Value Percenta Eligible Incentive Funding Ar Incentive Funding Already R

Incentive Payment Amount

Category 3 Summary Page

Category 3 Summary Page

Care Coordination (require

Report results of the Diabe (DY7-10)

Achievement Value

Report results of the Uncc

Achievement Value

Report results of the Conc

Achievement Value

Report results of the Chro to the State (DY8-10)

Achievement Value

DY Total Computable Incent

Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Incentive Payment Amount

Preventive Health (require

Report results of the Mam measure to the State (DY)

Achievement Value

Reports results of the Influ

Achievement Value

Report results of the Child

Achievement Value

Report results of the Pedia (DY8-10)

Achievement Value

Report results of the Toba

Achievement Value

DY Total Computable Incent

Total Sum of Achievement V

Category 3 Summary Page

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Incentive Payment Amount

Category 3 Summary Page

At-Risk Populations (requ

Report results of the Diabe (LDL-C) Control (<100 mg

Achievement Value

Report results of the Diaboneasure to the State (DY)

Achievement Value

Report results of the 30-D measure to the State (DY)

Achievement Value

Report results of the Hype (<140/90 mmHg) measure

Achievement Value

Report results of the Pedia

Achievement Value

Report results of the Optin

Achievement Value

Report results of the Diabe

Achievement Value

DY Total Computable Incent

Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Incentive Payment Amount

m Reform Incentive Payments (DSRIP) The University of California, San Francisco Medical Center DY 7 9/30/2012

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f data reported for the DPH system. Please see the following pages for the specifics.
**ms: Do not complete, this tab will automatically populate.

**te Milestone achievements, either "yes/no", or the actual achievement # or %.

**rogress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.

Total Sums.

ence (required)

planning, redesign, translation, training and contract plement CG-CAHPS in DY8 (DY7 only)

PS questions for "Getting Timely Appointments, Care, the State (DY8-10)

PS questions for "How Well Doctors Communicate With Ite (DY8-10)

PS questions for "Helpful, Courteous, and Respectful Office DY8-10)

PS questions for "Patients' Rating of the Doctor"

0)

PS questions for "Shared Decisionmaking"

0)

ive Amount:

'alues:

age:

nount:

eceived in DY:

<u>t:</u>

| etes, short-term complications measure to the State |
|---|
| ontrolled Diabetes measure to the State (DY7-10) |
| gestive Heart Failure measure to the State (DY8-10) |
| nic Obstructive Pulmonary Disease measure |
| ive Amount: |
| 'alues: |
| 200 |
| age: |
| nount: |
| eceived in DY: |
| <u>t</u> |
| mography Screening for Breast Cancer 7-10) |
| uenza Immunization measure to the State (DY7-10) |
| Weight Screening measure to the State (DY8-10) |
| atrics Body Mass Index (BMI) measure to the State |
| cco Cessation measure to the State (DY8-10) |
| ive Amount: |
| 'alues: |

| 9 | | |
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| age: | | |
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ired) etes Mellitus: Low Density Lipoprotein ı/dl) measure to the State (DY7-10) etes Mellitus: Hemoglobin A1c Control (<8%) 7-10) ay Congestive Heart Failure Readmission Rate 3-10) ertension (HTN): Blood Pressure Control to the State (DY8-10) atrics Asthma Care measure to the State (DY8-10) nal Diabetes Care Composite to the State (DY8-10) etes Composite to the State (DY8-10) ive Amount: 'alues: age: nount:

eceived in DY:

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| \$ 2,799,225.00 1.00 |
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| \$ 2,799,225.00 \$ 2,799,225.00 |
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5/31/2013 Category 3 Summary 105 of 834

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2.00 100% \$ 2,799,225.00 \$ 1,399,612.50 \$ 1,399,612.50

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| \$ 2,799,225.00 |
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| \$ 2,799,225.00 |
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| \$ 1,399,612.50 |
| \$ 1,399,612.50 |

CA 1115 Waiver - Delivery Syste **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: Category 4 Summary Page This table is the summary of * Instructions for DPH syste The black boxes indicat The blue boxes show p The red boxes indicate Category 4 Intervention Severe Sepsis Detection a Compliance with Sepsis R Achievement Value Optional Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V

Category 4 Summary Page Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Category 4 Summary Page **Central Line Associated B** Compliance with Central L Achievement Value Optional Milestone: Achievement Value Optional Milestone:

DY Total Computable Incent

Achievement Value

Optional Milestone:

Achievement Value

Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Category 4 Summary Page Surgical Site Infection Pre

Rate of surgical site infect

Achievement Value

Optional Milestone:

Achievement Value

DY Total Computable Incent

Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Category 4 Summary Page **Hospital-Acquired Pressu** Prevalence of Stage II, III, Achievement Value Optional Milestone: Achievement Value DY Total Computable Incent Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Category 4 Summary Page Eligible Incentive Funding Ar

Incentive Funding Already R

Category 4 Summary Page

Stroke Management

Optional Milestone:

Achievement Value

DY Total Computable Incent

Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Category 4 Summary Page

Venous Thromboembolisr

Optional Milestone:

Achievement Value

DY Total Computable Incent

Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

Category 4 Summary Page

Falls with Injury Preventio

Prevalence of patient falls wi

Achievement Value

Optional Milestone:

Achievement Value

DY Total Computable Incent

Total Sum of Achievement V

Total Number of Milestones:

Achievement Value Percenta

Eligible Incentive Funding Ar

Incentive Funding Already R

m Reform Incentive Payments (DSRIP) The University of California, San Francisco Medical Center DY 7 9/30/2012

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f data reported for the DPH system. Please see the following pages for the specifics.
**ms: Do not complete, this tab will automatically populate.

**:e Milestone achievements, either "yes/no", or the actual achievement # or %.

**rogress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.

Total Sums.

| s |
|---|
| ind Management (required) |
| lesuscitation bundle (%) |
| |
| Implement sepsis rescuscitation bundle |
| |
| Report at least 6 months of data collection on Sepsis Resuscitation Bundle to SNI |
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| eceived in DY: | | |
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| lood Stream Infection Prevention (required) ine Insertion Practices (CLIP) (%) |
| Implement Central line insertion practices |
| Report at least 6 months of data collection on CLIP to SNI for purposes of |
| Report at least 6 months of data collection on CLABSI to SNI for purposes of |
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| ive Amount: |
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| vention ion for Class 1 and 2 wounds (%) | |
| Report at least 6 months of data collection on the following SSI's to SNI for the | |
| Troport at loads o months of data concentent the following core to civil for the | _ |
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re Ulcer Prevention IV or unstagable pressure ulcers (%) Share data, promising practices and findings with California Health Care Safety Net ive Amount: 'alues: аge:

| enount: | |
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| n (VTE) Prevention and Treatment | |
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| ith injuries (Rate per 1,000 patient days) | |
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| ive Amount: | |
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| <u>t:</u> | |

0.39 1.00 Yes 1.00 0.42 1.00 N/A N/A N/A N/A N/A N/A N/A N/A \$ 1,666,775.00 3.00

3.00 100% \$ 1,666,775.00 \$ 1,388,979.17 \$ 277,795.83

| 0.97 |
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| 1.00 |
| Yes |
| 1.00 |
| 0.97 |
| 1.00 |
| 0.00 |
| |
| 1.00 |
| N/A |
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| N/A |
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| N/A |
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| N/A |
| 14/7 |
| N1/A |
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| |
| \$ 1,929,950.00 |
| 4.00 |
| 4.00 |
| 100% |
| \$ 1,929,950.00 |
| \$ 1,688,706.50 |
| \$ 241,243.50 |

| _ | 0.02 |
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| | 0.03 |
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| N/A | A |
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| | |
| \$ | 1,929,950.00 |
| | 2.00 |
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| \$ | 1,929,950.00 |
| \$ | 1,447,462.50 |
| Φ | 1,447,402.50 |
| \$ | 482,487.50 |
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| 0.01 |
| 1.00 |
| Yes |
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| N/A |
| 1977 |
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| 1977 |
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| ф. 4.570.050.00 |
| \$ 1,579,050.00 |
| 2.00 |
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| 2.00 |
| 100% |

\$ 1,579,050.00

\$ 1,184,287.50

\$ 394,762.50

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CA 1115 Waiver - Delivery System DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Expand Primary

* Instructions for DPH system please type in all of your DY m

* The yellow boxes indicate w
The black boxes indicate I
The blue boxes show prog populate and flow to sumr

Expand Primary Care Cap

DY Total Computable Incentive

Incentive Funding Already Rec

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

Milestone results/progress: The hired one family practice MD, N September 1, 2011. Both clinici Barriers and solutions: We have Francisco Bay area as the cost incentive package for new phys

DY Target (from the DPH syste

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the milestor description of progress towards mile

| C | ategory 1: Expand Primary |
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| | DY Target (from the DPH syste |
| | Achievement Value |

Category 1: Expand Primary Process Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto

description of progress towards mile

Category 1: Expand Primary

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

Milestone results/progress: The Our FY 2010 patient encounter for July 1, 2011-June 30, 2012 2010.

Barriers and solutions: There w Medical Center implemented th Consistent with the experience

DY Target (from the DPH syste

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

DY Target (from the DPH syste

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no'

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the milesto

| Category 1: Expand Primary |
|--------------------------------------|
| description of progress towards mile |
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| DY Target (from the DPH syste |
| Achievement Value |

Category 1: Expand Primary Improvement Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value

Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| | REPORTING ON THIS PROJECT: | * Yes |
|---|---|-------------------|
| Care Capacity | | |
| the DPH system. s: Please select above whether you are reporting nilestones for the project below and report data in here the DPH system should input data Milestones and will automatically populate and flogress made toward the Milestone ("Achievement nary sheets | the indicated boxes (*). ow to summary sheets | |
| acity | | |
| Amount: | | * \$ 3,945,344.00 |
| eived in DY: | | * \$ 1,972,672.00 |
| Recruit 2 additional primary care provider FTE (insert milestone) |) | |
| ' form below; if absolute number, enter here) | | * |
| er, enter "1") | | * |
| | | Yes |
| one has been achieved, select "yes" or "no" from the dropdow | n menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | | * Yes |
| e recruitment and hiring of two new full-time primary of the Martin on August 15, 2011 and one general intersians work in our newest (June 2010) primary care cling experienced significant barriers with attracting primass of living in San Francisco are quite high. We have usicians and this has helped us find talented and dedicated | nist MD, Dipesh Bhakta on ic, called UCSF Primary Care. ary care physicians to the San ised loan repayment as part of the | |
| m plan) or enter "yes" if "yes/no" type of milestone | | * Yes 1.00 |
| (insert milestone, |) | |
| ' form below; if absolute number, enter here) | | * |
| er, enter "1") | | * N/A |
| one has been achieved, select "ves" or "no" from the drondow | n menu, and provide an in-denth | TV/A |

estone achievement as stated in the instructions:

| Care Capacity | | |
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| em plan) or enter "yes" if "yes/no" type of milestone | * | |
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| Care Capacity | |
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| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
| | N/A |
| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | 1471 |
| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
| The planty of cities year in year to the cities of the cit | |
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| estone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
| | N/A |
| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * |

| Care Capacity | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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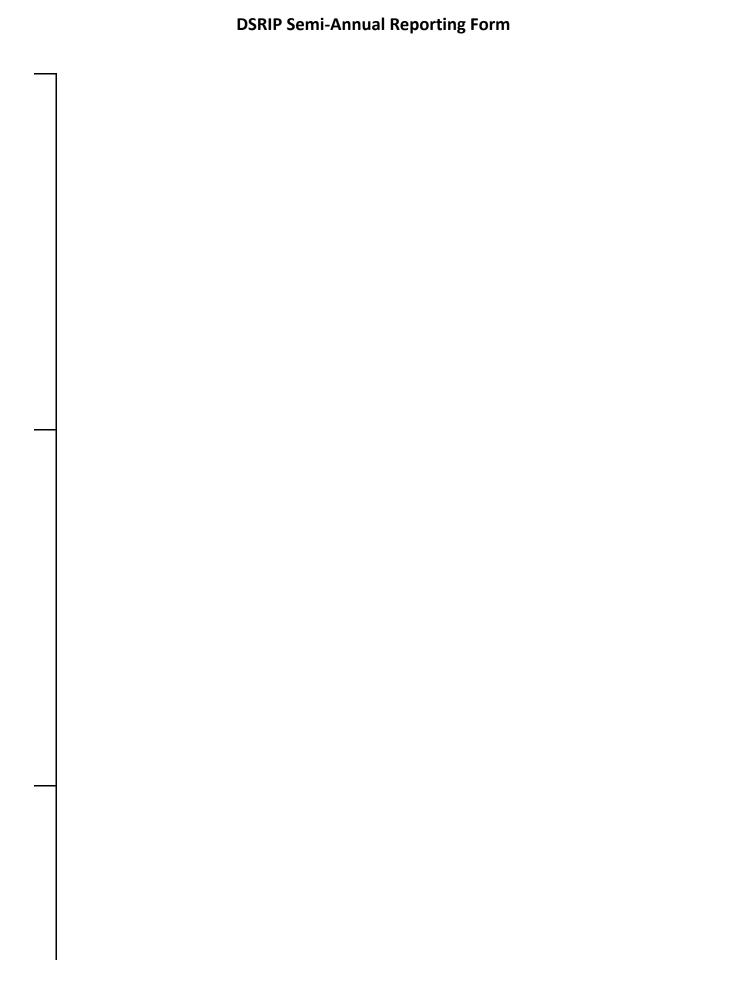
Care Capacity

| Increase patient encounters at UCSFMC Primary Care clinics by 2,500 encounters relative to FY10 encounters | |
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| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
| | No |
| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * No |
| increase in patient encounters by 2,500 relative to FY 2010 encounters was not achieved. baseline across our five primary care clinics was 96,010 in FY 2010. Our total visit volume was 90,493 visits which is approximately 6% fewer visits than the baseline period in FY vere two primary barriers we faced in meeting this DSRIP milestone. In April 2011, UCSF | |
| ne EPIC (UCSF branded Apex) electronic medical record [EMR] in our primary care clinics. of other health systems. UCSF experienced a significant reduction in provider | |
| m plan) or enter "yes" if "yes/no" type of milestone | * NO |
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| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
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| er, enter "1") | N/A |
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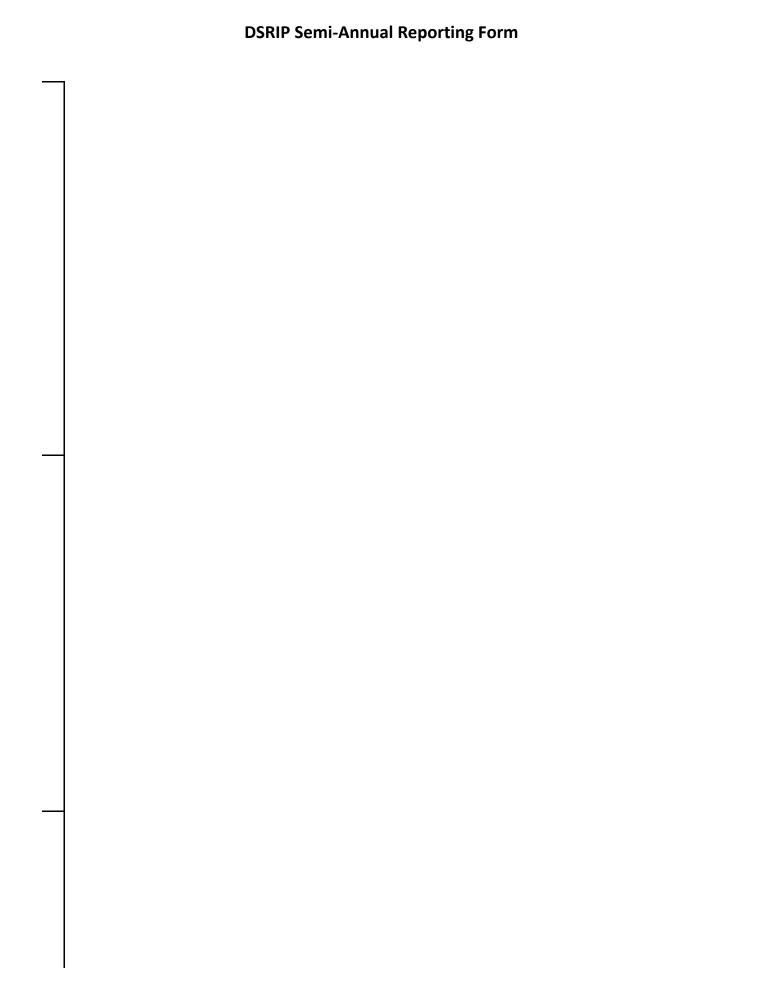
one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth

| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
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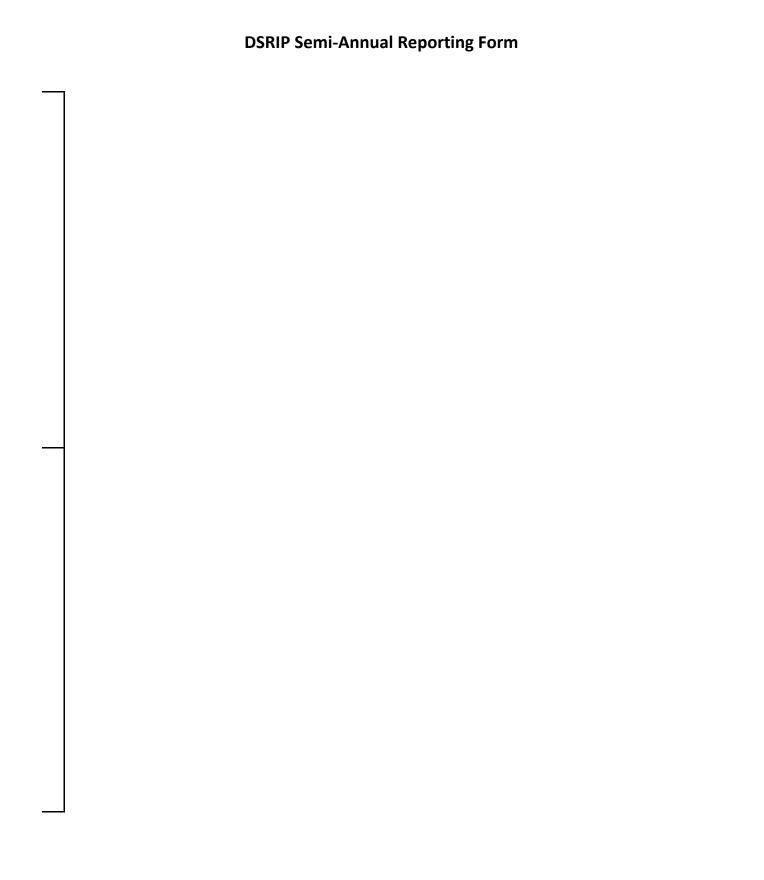
| (insert milestone) | _ |
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| ' form below; if absolute number, enter here) | * |
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| er, enter "1") | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
| an plant of effect yes in yes no type of fillestone | |
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| er, enter "1") | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | " |
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CA 1115 Waiver - Delivery System **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: **Category 1: Increase Trainin** Below is the data reported for * Instructions for DPH system. please type in all of your DY n The yellow boxes indicate w The black boxes indicate I The blue boxes show prog populate and flow to sumr Increase Training of Prima DY Total Computable Incentive Incentive Funding Already Rec **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile

| ategory 1: Increase Trainin |
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Category 1: Increase Trainin Process Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto

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| | Achievement Value |
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Category 1: Increase Trainin Improvement Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto

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Category 1: Increase Trainin Improvement Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value

Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| DY 7 9/30/2012 | REPORTING ON THIS PROJECT: | * No |
|---|--|------|
| g of Primary Care Workforce | REPORTING ON THIS PROJECT. | NO |
| the DPH system. s: Please select above whether you are reporting nilestones for the project below and report data in here the DPH system should input data Milestones and will automatically populate and flogress made toward the Milestone ("Achievement \nary sheets | the indicated boxes (*). w to summary sheets | |
| ary Care Workforce | | |
| Amount: | | * |
| eived in DY: | | * |
| (insert milestone) | | |
| ' form below; if absolute number, enter here) | | * |
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estone achievement as stated in the instructions:

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| g of Primary Care Workforce | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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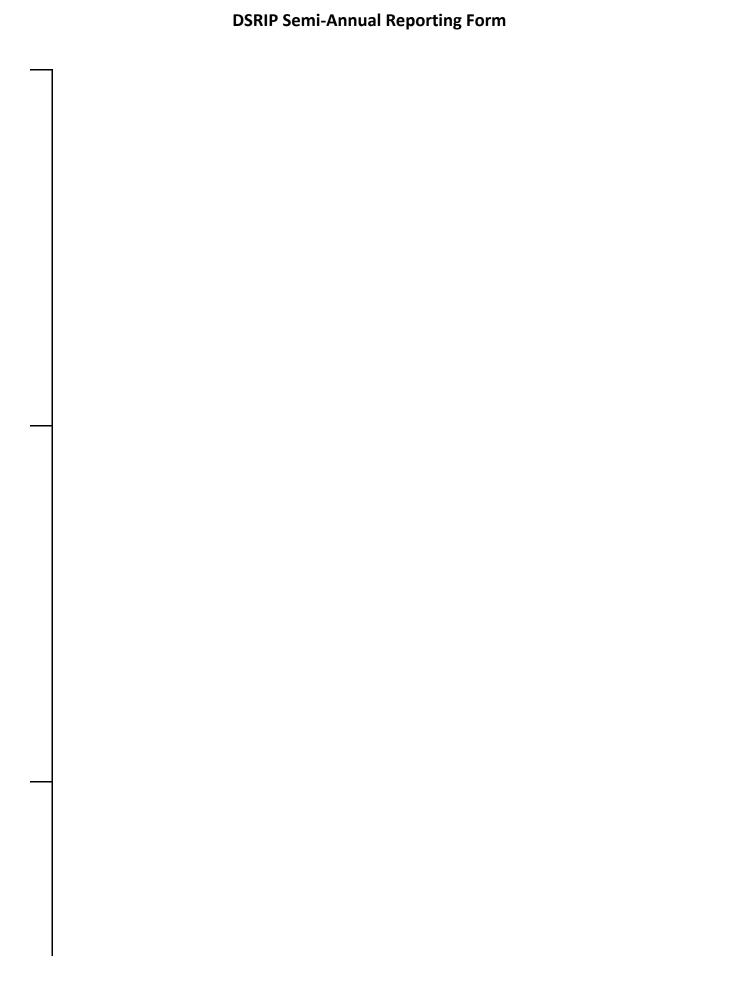
g of Primary Care Workforce (insert milestone) ' form below; if absolute number, enter here) er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: m plan) or enter "yes" if "yes/no" type of milestone (insert milestone) ' form below; if absolute number, enter here) er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: m plan) or enter "yes" if "yes/no" type of milestone (insert milestone) ' form below; if absolute number, enter here) er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions:

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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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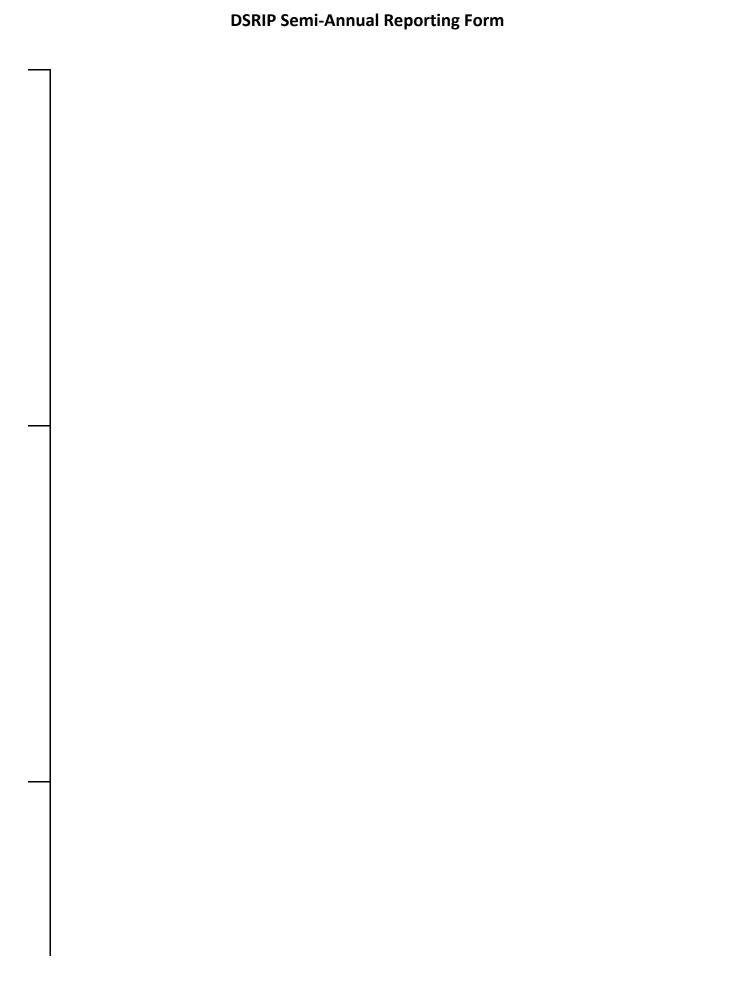
| g of Primary Care Workforce | |
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| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| er, enter "1") | * |
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| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
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| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * |

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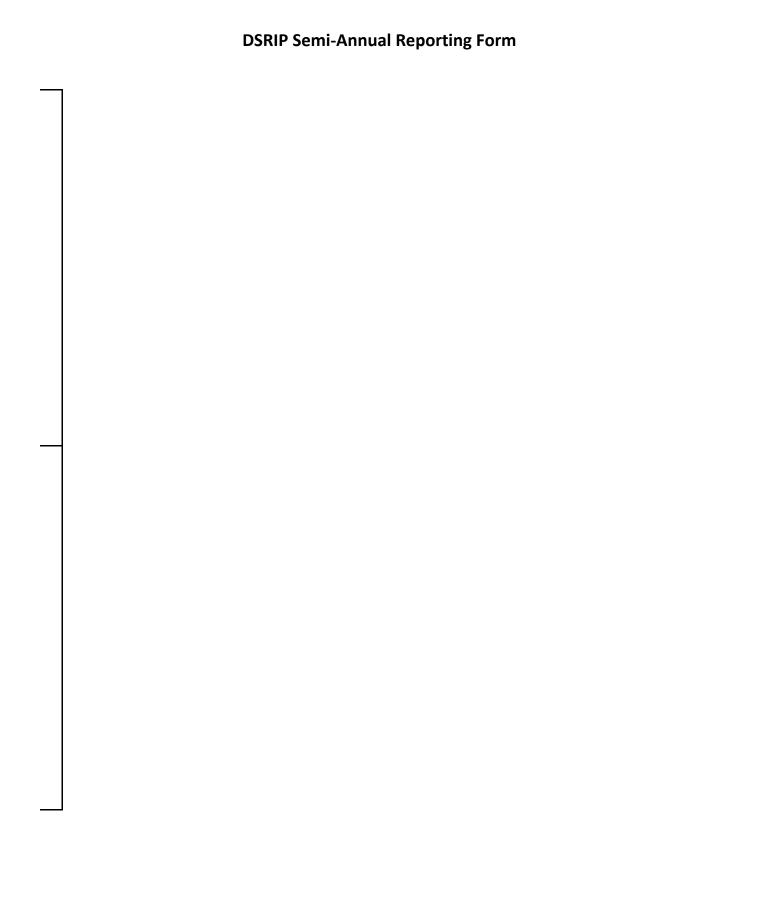
| g of Primary Care Workforce | |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
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CA 1115 Waiver - Delivery System **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: Category 1: Implement and I Below is the data reported for * Instructions for DPH system. please type in all of your DY n The yellow boxes indicate w The black boxes indicate I The blue boxes show prog populate and flow to sumr Implement and Utilize Dis DY Total Computable Incentive Incentive Funding Already Rec **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile

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| | DY Target (from the DPH syste |
| | Achievement Value |

Category 1: Implement and U **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement

If "yes/no" as to whether the mileston description of progress towards mile

| Category 1: Implement and I |
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| DY Target (from the DPH syste |
| Achievement Value |
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Category 1: Implement and I

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

Milestone results/progress: The where we have implemented by Lakeshore Family Medicine Pragrown" diabetes registry. They needed to make them productive other practice, The University Fundamental three patient registries as the N

DY Target (from the DPH syste

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no'

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

Milestone results/progress: 100 UPC and Lakeshore clinics was is shown below:

UPC Diabetes: 70/70 _UPC C Lakeshore Diabetes: 721/721_ The data on the CRC screening dates of: the last fecal occult bl

DY Target (from the DPH syste

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

| Category 1: Implement and C Achievement |
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| If "yes/no" as to whether the mileston description of progress towards mile |
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| DY Target (from the DPH syste |
| Achievement Value |

Category 1: Implement and I **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value

Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| REPORTING ON THIS PROJECT: | * | Yes |
|----------------------------|---|-----|
| | | |

Utilize Disease Management Registry Functionality

the DPH system.

s: Please select above whether you are reporting on this project. If 'yes', nilestones for the project below and report data in the indicated boxes (*). here the DPH system should input data
Milestones and will automatically populate and flow to summary sheets

Milestones and will automatically populate and flow to summary sheets gress made toward the Milestone ("Achievement Value") and will automatically nary sheets

| ease Management Registry Functionality | |
|---|-------------------|
| Amount: | * \$ 6,154,736.00 |
| eived in DY: | * \$ 6,154,736.00 |
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| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
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| estone achievement as stated in the instructions: | * |

| Utilize Disease Management Registry Functionality | | |
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| Utilize Disease Management Registry Functionality | |
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| ' form below; if absolute number, enter here) | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | 14/7 |
| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
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| estone achievement as stated in the instructions: | * |
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| estone achievement as stated in the instructions: | * |

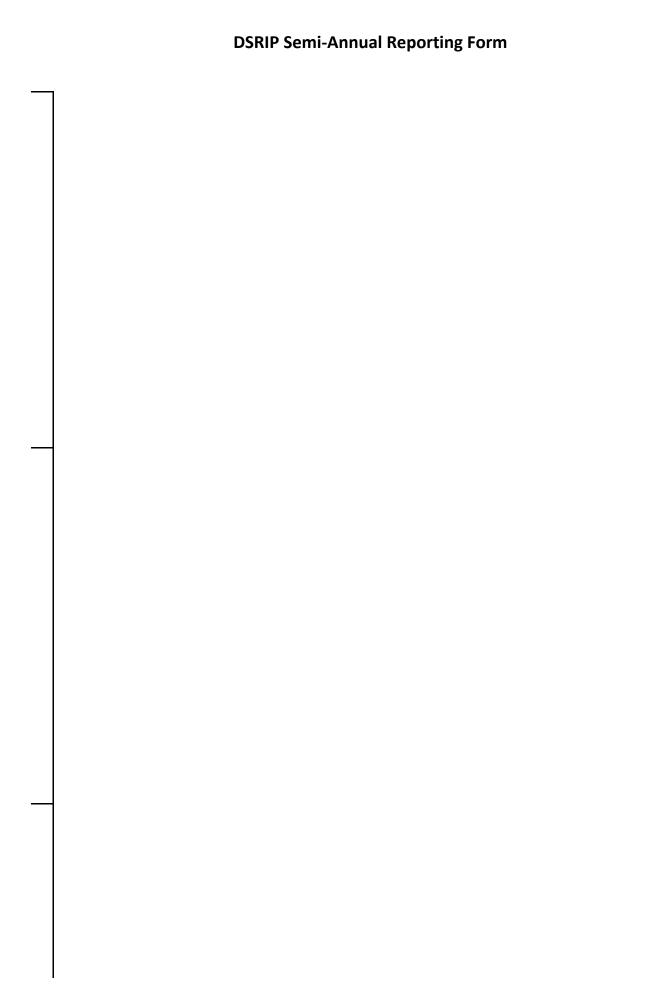
| Jtilize Disease Management Registry Functionality | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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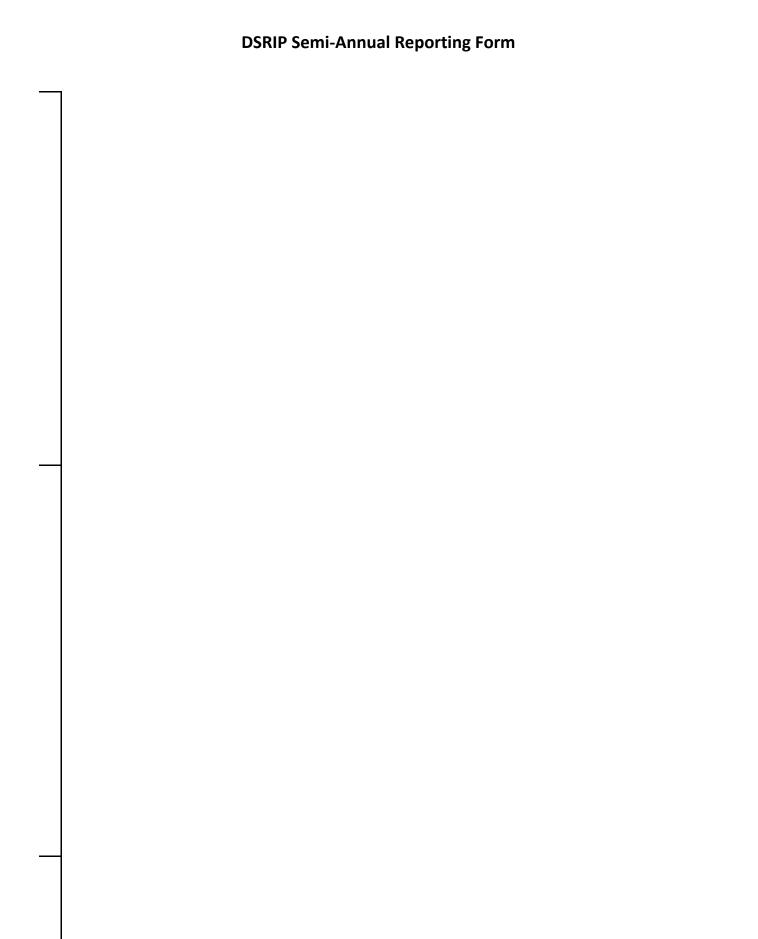
Utilize Disease Management Registry Functionality

| Populate registry with patient data at 2 of 5 (40%) primary care practices to create registry for patients enrolled in those practices | |
|--|------------|
| (insert milestone) | |
| ' form below; if absolute number, enter here) | * 2.00 |
| er, enter "1") | * 5.00 |
| | 0.40 |
| and has been achieved, coloct "yes" or "no" from the drondown many, and provide an in-denth | 3.13 |
| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depthestone achievement as stated in the instructions: | * Yes |
| e creation and population of registries in two of our primary care practices was achieved oth a diabetes and a colon cancer screening registry. One of these practices, the actice, was chosen because of their experience with their development and use of a "home-have shown an ability to be successful as early adopters of registries and the technology ve. Most importantly we wish to reinforce their ability to deliver optimal patient care. The rimary Care Practice (UCSF Primary Care), was chosen as the second site to implement Medical Director. Dr. David Buchholz, has extensive experience using registries and panel | |
| m plan) or enter "yes" if "yes/no" type of milestone | * Yes |
| | 1.00 |
| | 1100 |
| Enter patient data into registry at these 2 practices for at least 75% of patients at the practice with diabetes and 75% of patients eligible for colorectal cancer screening | |
| (insert milestone) | |
| | |
| ' form below; if absolute number, enter here) | * |
| ' form below; if absolute number, enter here) er, enter "1") | * |
| • | * Yes |
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| er, enter "1") | * Yes Yes |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depthestone achievement as stated in the instructions:)% of patient data entry into the diabetes and colorectal cancer screening registries at the | |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depthestone achievement as stated in the instructions:)% of patient data entry into the diabetes and colorectal cancer screening registries at the s achieved. The numerators and denominators for each registry by clinic as of July 1, 2012 RC: 386/386 Lakeshore CRC: 2998/2998 g registry includes, patient name and medical record number, date of birth, results and | |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depthestone achievement as stated in the instructions:)% of patient data entry into the diabetes and colorectal cancer screening registries at the sachieved. The numerators and denominators for each registry by clinic as of July 1, 2012 RC: 386/386 Lakeshore CRC: 2998/2998 g registry includes, patient name and medical record number, date of birth, results and ood test, and/or flexible sigmoidoscopy and/or colonoscopy as well as a flag for which | * Yes |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depthestone achievement as stated in the instructions:)% of patient data entry into the diabetes and colorectal cancer screening registries at the sachieved. The numerators and denominators for each registry by clinic as of July 1, 2012 RC: 386/386 Lakeshore CRC: 2998/2998 g registry includes, patient name and medical record number, date of birth, results and ood test, and/or flexible sigmoidoscopy and/or colonoscopy as well as a flag for which | * Yes |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depthestone achievement as stated in the instructions:)% of patient data entry into the diabetes and colorectal cancer screening registries at the sachieved. The numerators and denominators for each registry by clinic as of July 1, 2012 RC: 386/386 Lakeshore CRC: 2998/2998 g registry includes, patient name and medical record number, date of birth, results and ood test, and/or flexible sigmoidoscopy and/or colonoscopy as well as a flag for which | * Yes |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions:)% of patient data entry into the diabetes and colorectal cancer screening registries at the sachieved. The numerators and denominators for each registry by clinic as of July 1, 2012 RC: 386/386 Lakeshore CRC: 2998/2998 g registry includes, patient name and medical record number, date of birth, results and ood test, and/or flexible sigmoidoscopy and/or colonoscopy as well as a flag for which mplan) or enter "yes" if "yes/no" type of milestone (insert milestone) | * Yes |
| er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depthestone achievement as stated in the instructions:)% of patient data entry into the diabetes and colorectal cancer screening registries at the sachieved. The numerators and denominators for each registry by clinic as of July 1, 2012 RC: 386/386 Lakeshore CRC: 2998/2998 g registry includes, patient name and medical record number, date of birth, results and ood test, and/or flexible sigmoidoscopy and/or colonoscopy as well as a flag for which emplan) or enter "yes" if "yes/no" type of milestone | * Yes |

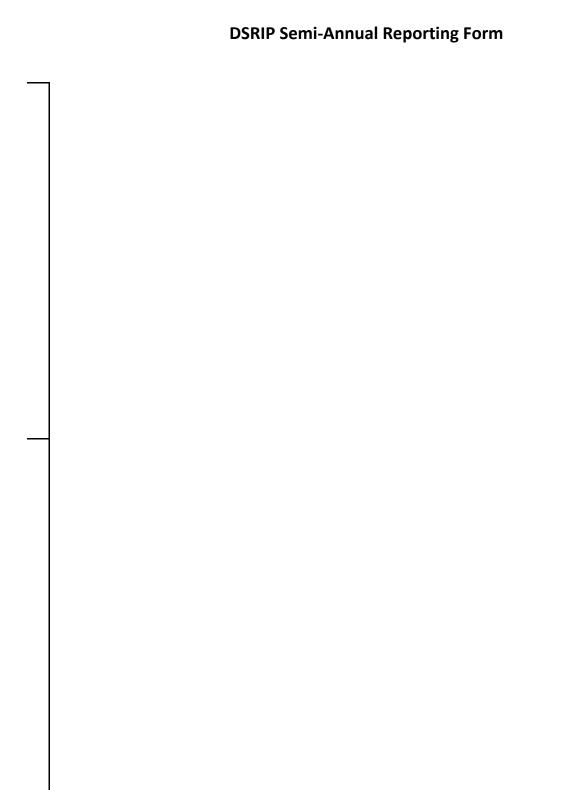
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CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Enhance Interpre

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| please type in all of your DY m | | | | |
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Enhance Interpretation Se

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Process Milestone:

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Process Milestone:

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Achievement

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| С | ategory 1: Enhance Interpre |
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Category 1: Enhance Interpre **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards mile: DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards mile: DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto

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Reform Incentive Payments (DSRIP) The University of California, San Francisco Medical Center

DY 7 9/30/2012 REPORTING ON THIS PROJECT: * No etation Services and Culturally Competent Care the DPH system. 3: Please select above whether you are reporting on this project. If 'yes', ilestones for the project below and report data in the indicated boxes (*). nere the DPH system should input data Villestones and will automatically populate and flow to summary sheets ress made toward the Milestone ("Achievement Value") and will automatically nary sheets rvices and Culturally Competent Care Amount: ived in DY: (insert milestone) form below; if absolute number, enter here) er, enter "1") ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: m plan) or enter "yes" if "yes/no" type of milestone (insert milestone) form below; if absolute number, enter here) er, enter "1")

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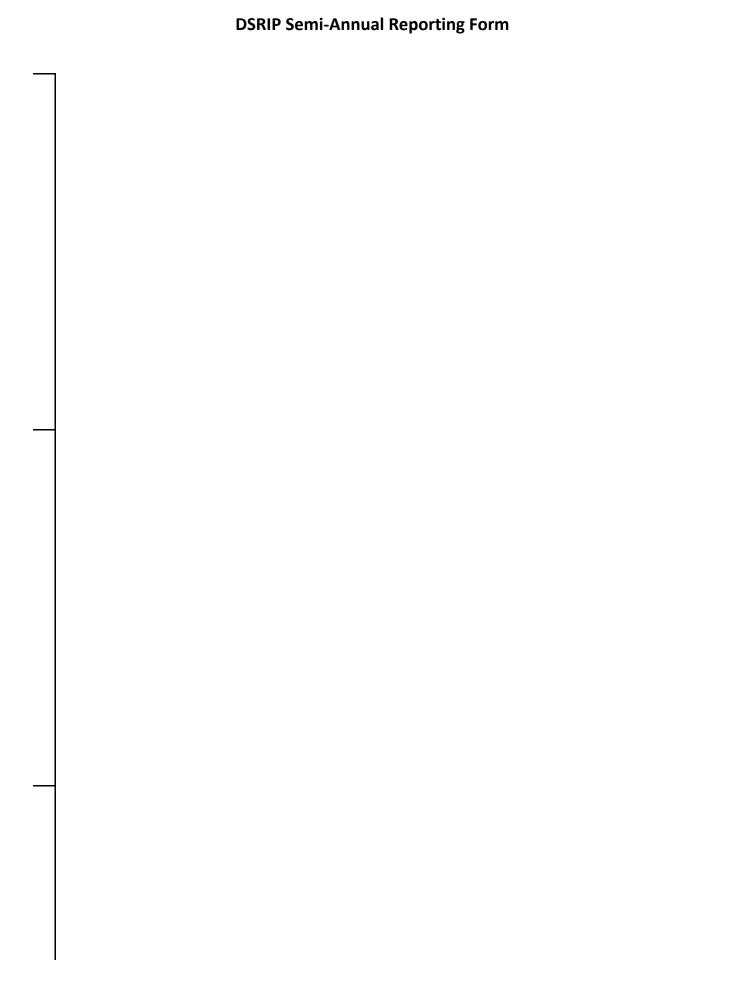
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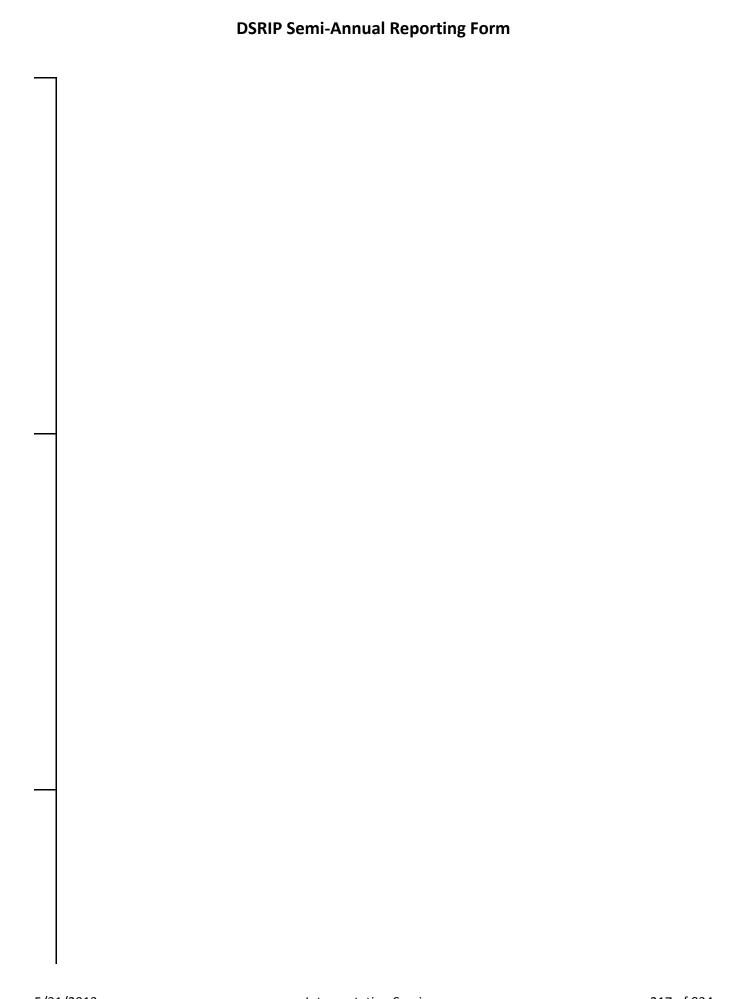
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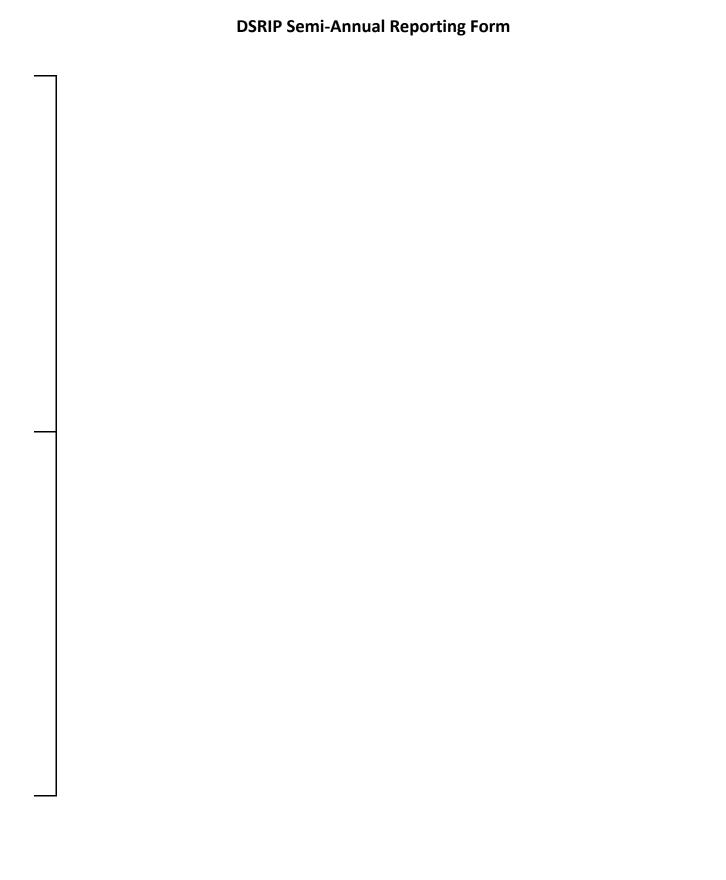
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CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Collect Accurate

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Process Milestone:

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If "yes/no" as to whether the milesto description of progress towards miles

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Reform Incentive Payments (DSRIP) The University of California, San Francisco Medical Center

stone achievement as stated in the instructions:

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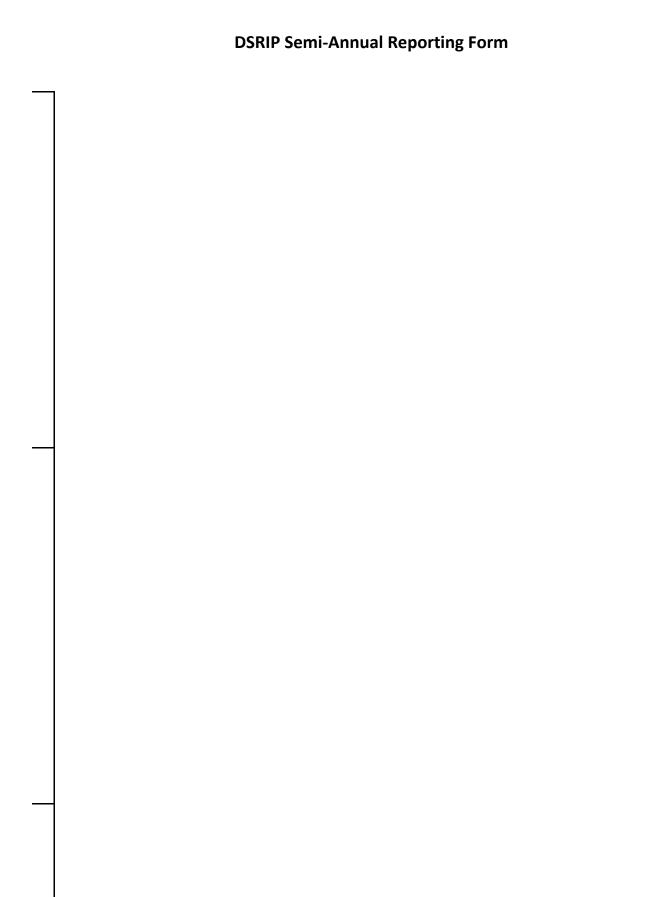
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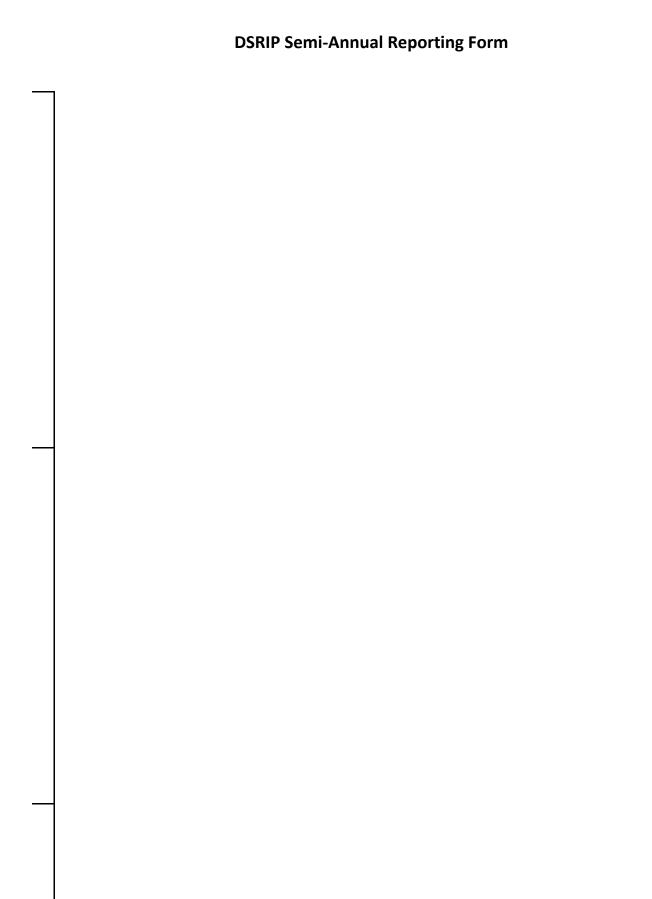
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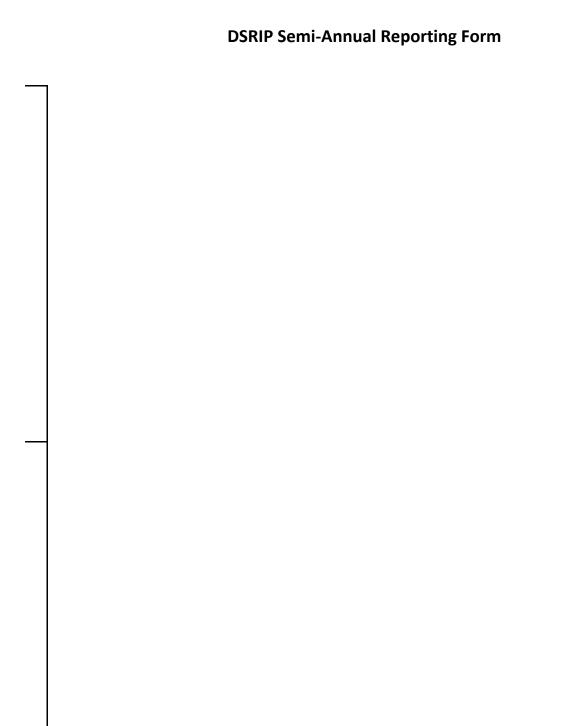
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5/31/2013 REAL Data 239 of 834



CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Enhance Urgent

* Instructions for DPH systems
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Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

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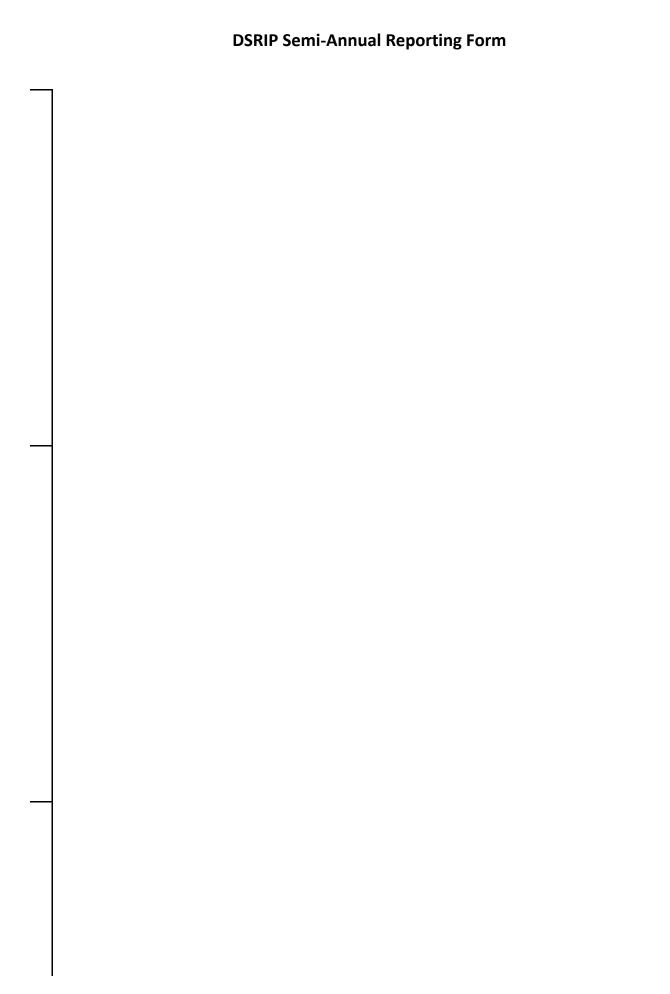
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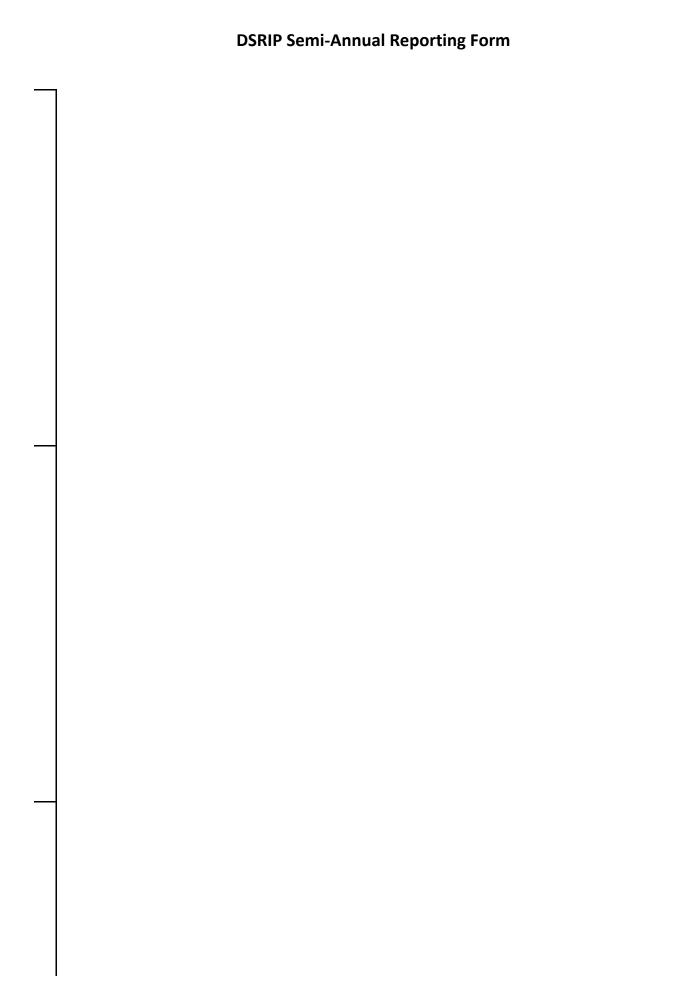
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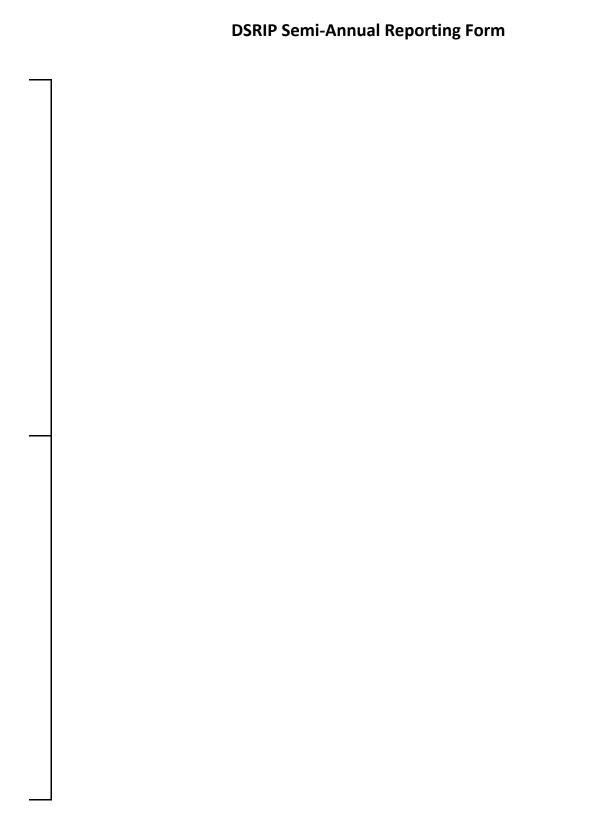












CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Introduce Telem

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Introduce Telemedicine

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Process Milestone:

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If "yes/no" as to whether the milesto description of progress towards miles

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Process Milestone:

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Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| edicine | REPORTING ON THIS PROJECT: | * No |
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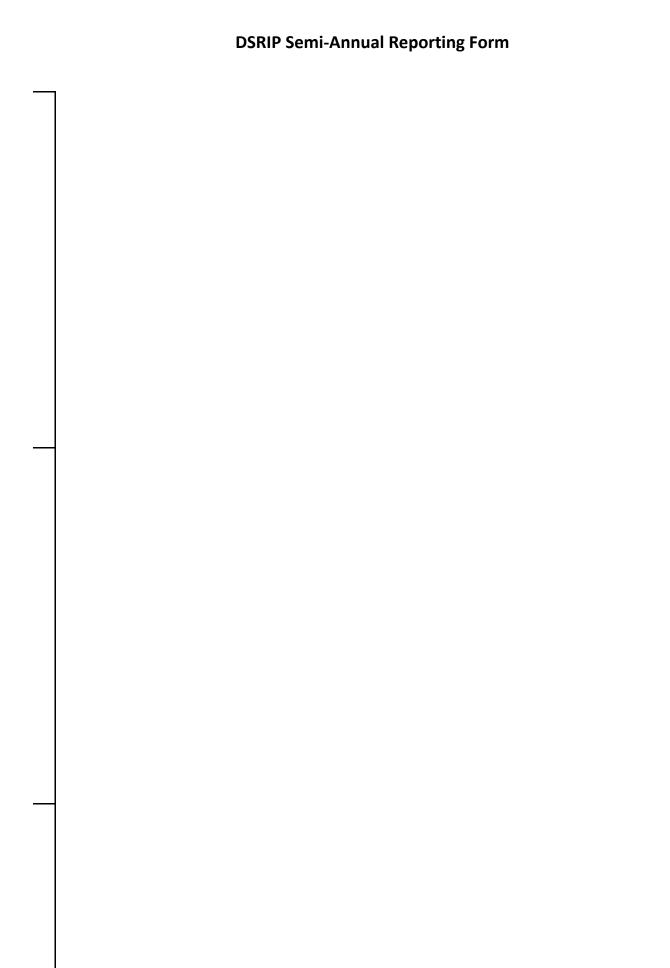
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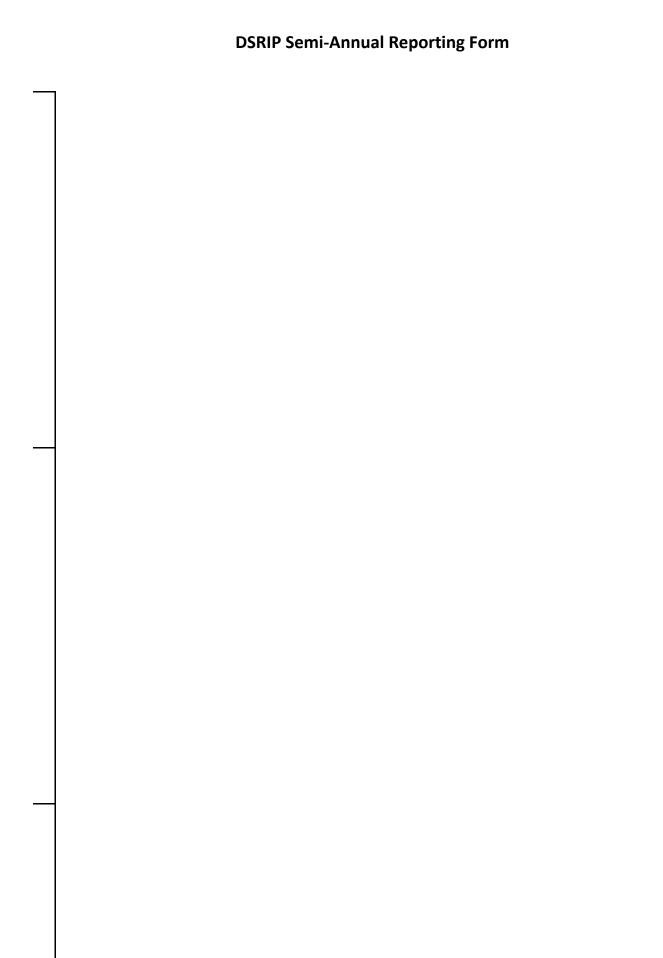
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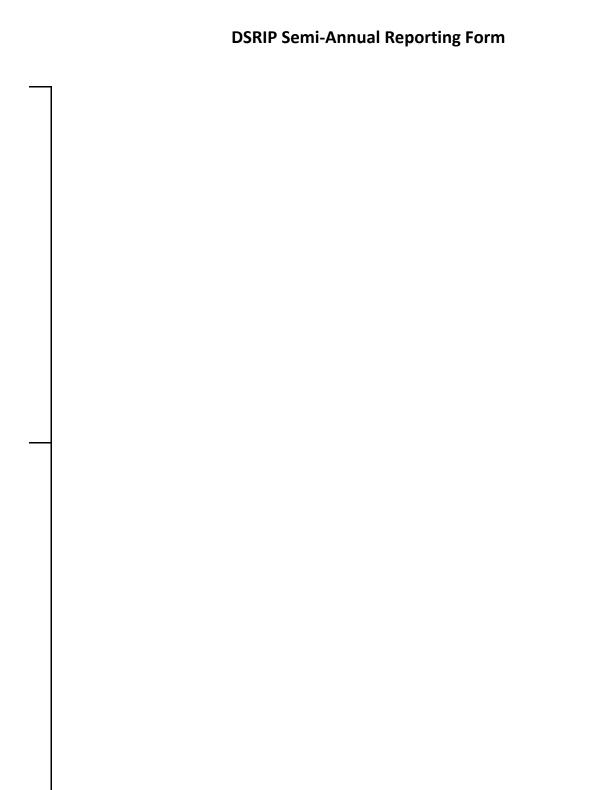
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CA 1115 Waiver - Delivery System I DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Enhance Coding

* Instructions for DPH systems
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Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| REPORTING ON THIS PROJECT: | * | No |
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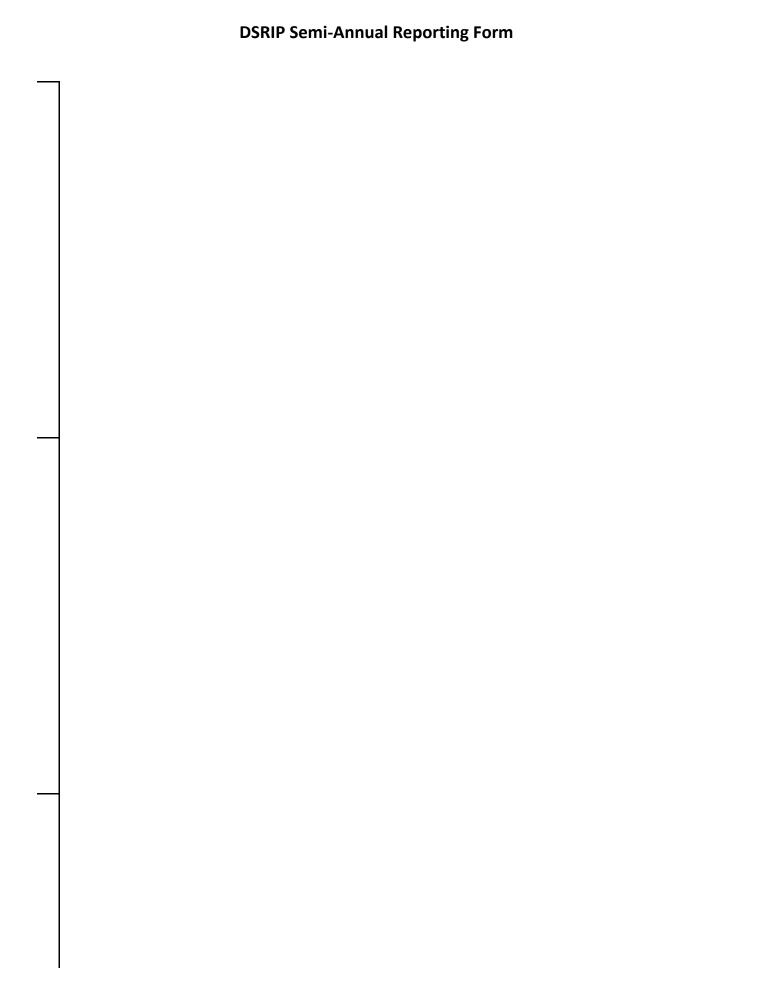
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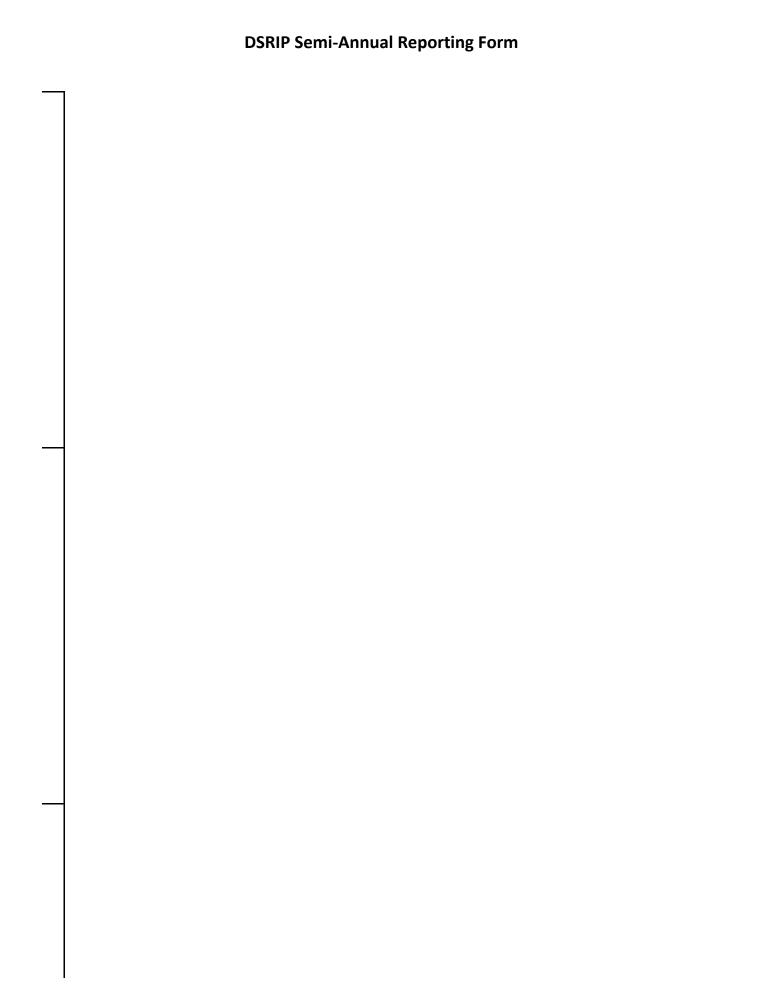
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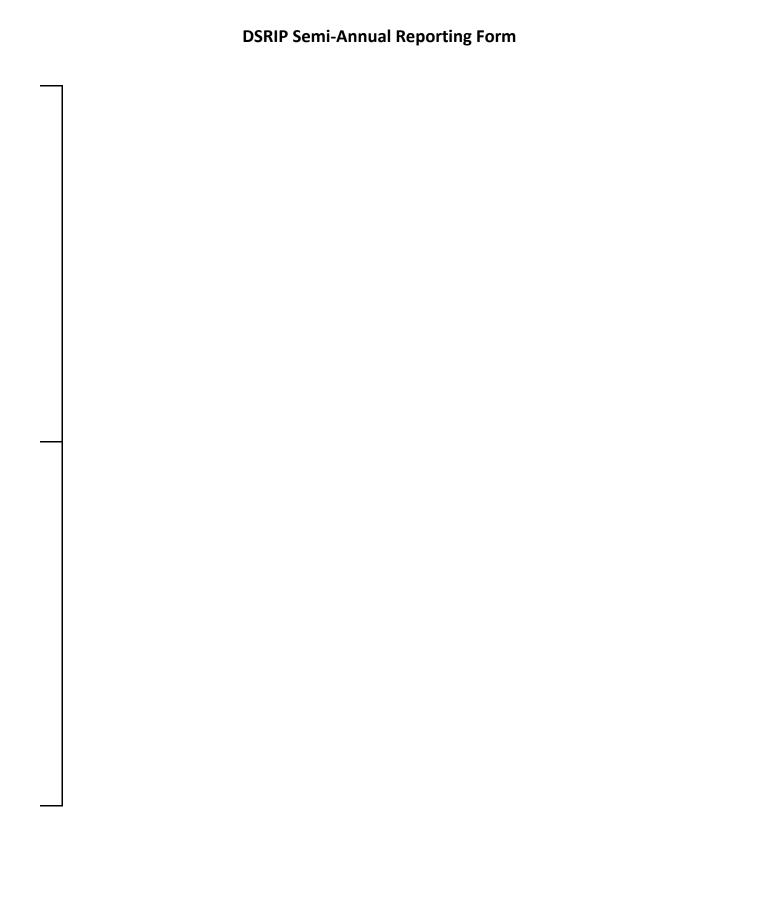












CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Develop Risk Str

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5/31/2013 Risk Stratification 308 of 834

| Category 1: Develop Risk Str |
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Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

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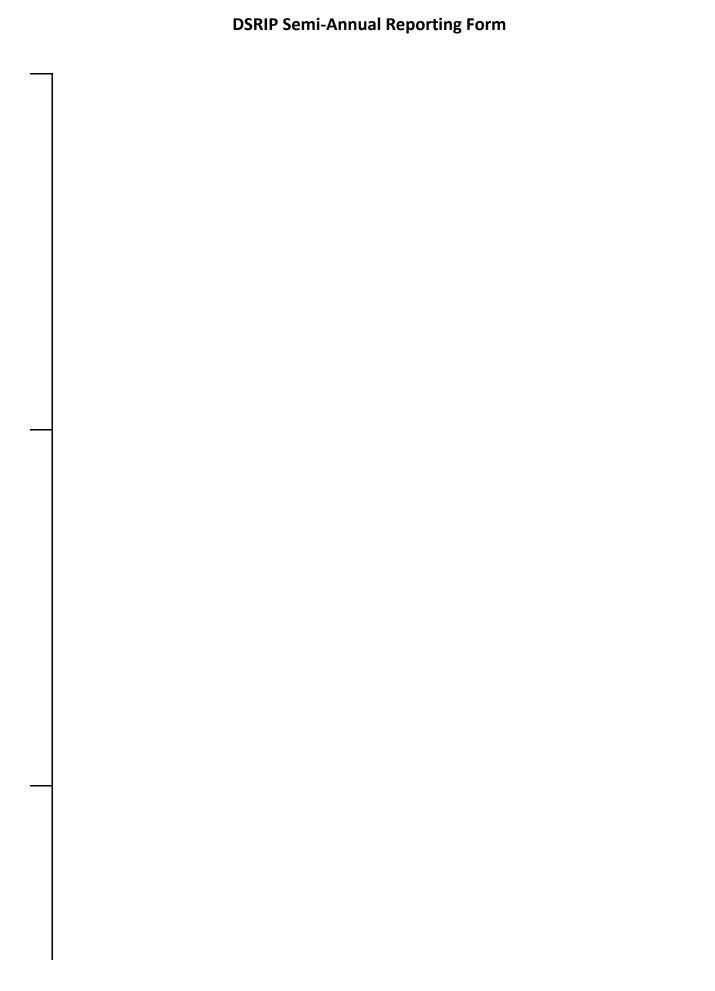
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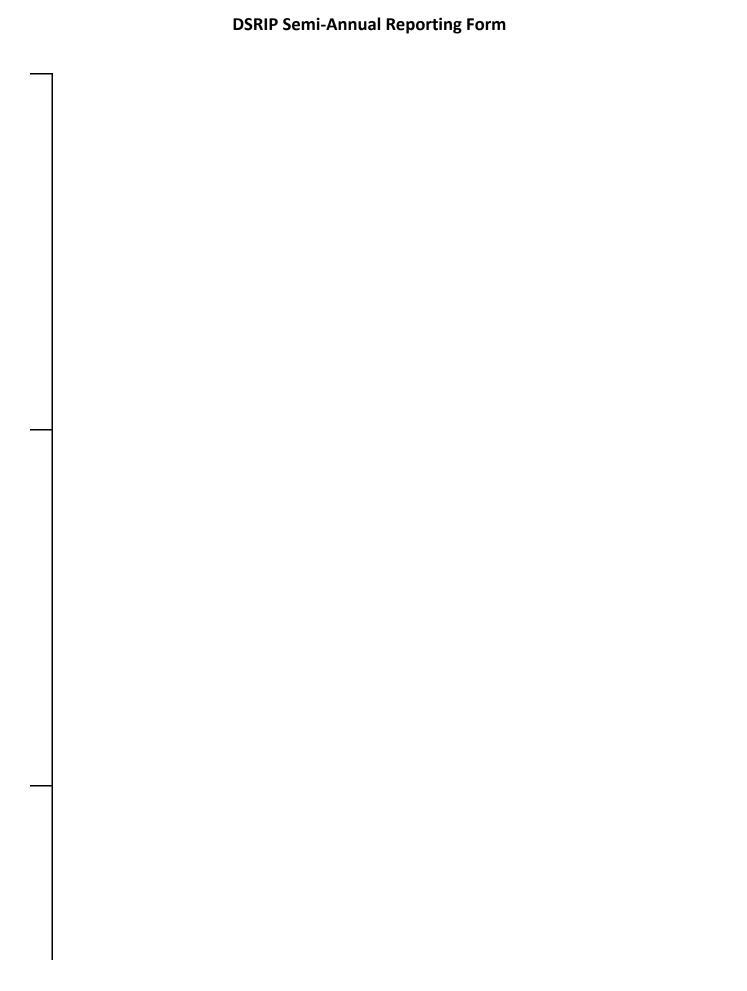
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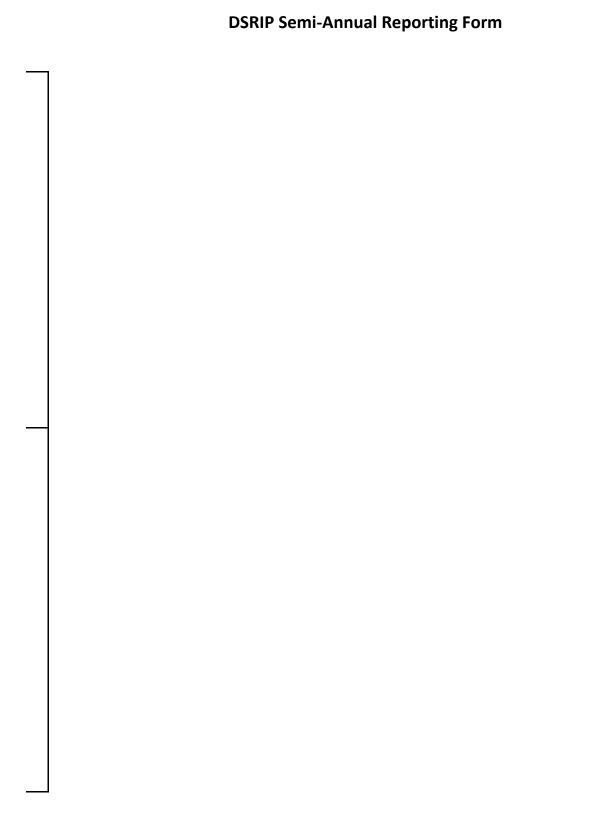




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CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Expand Specialty

* Instructions for DPH systems
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Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
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| ne has been achieved, select "yes" or "no" from the dropdown | n menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | | * |
| m plan) or enter "yes" if "yes/no" type of milestone | | * |
| (insert milestone) |) | |
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| er, enter "1") | | * N/A |
| ne has been achieved, select "yes" or "no" from the dropdowi | n menu, and provide an in-depth | |

stone achievement as stated in the instructions:

| y Care Capacity | | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * | |
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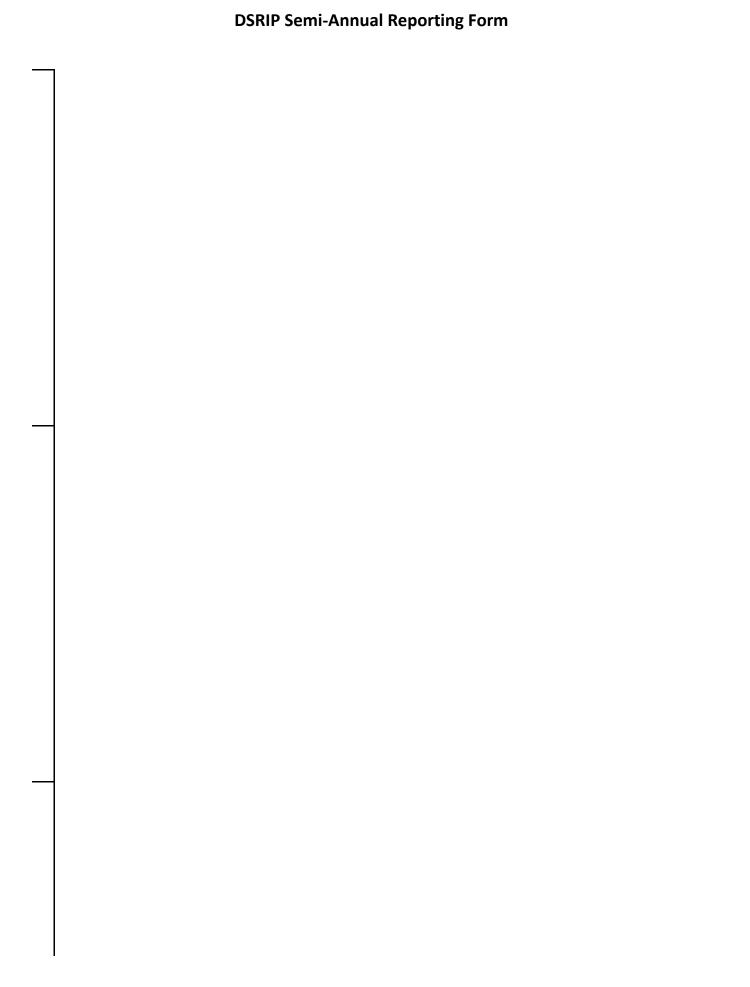
| y Care Capacity | |
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| (insert milestone) | |
| form below; if absolute number, enter here) | * |
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| stone achievement as stated in the instructions: | * |

| y Care Capacity | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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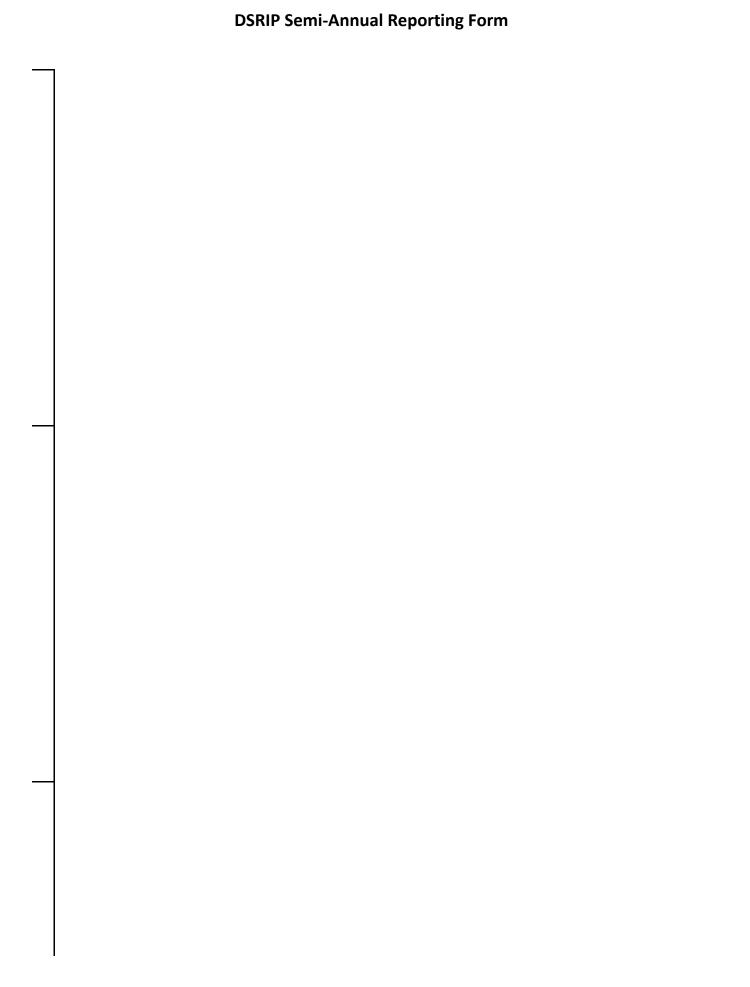
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| stone achievement as stated in the instructions: | * |

| y Care Capacity | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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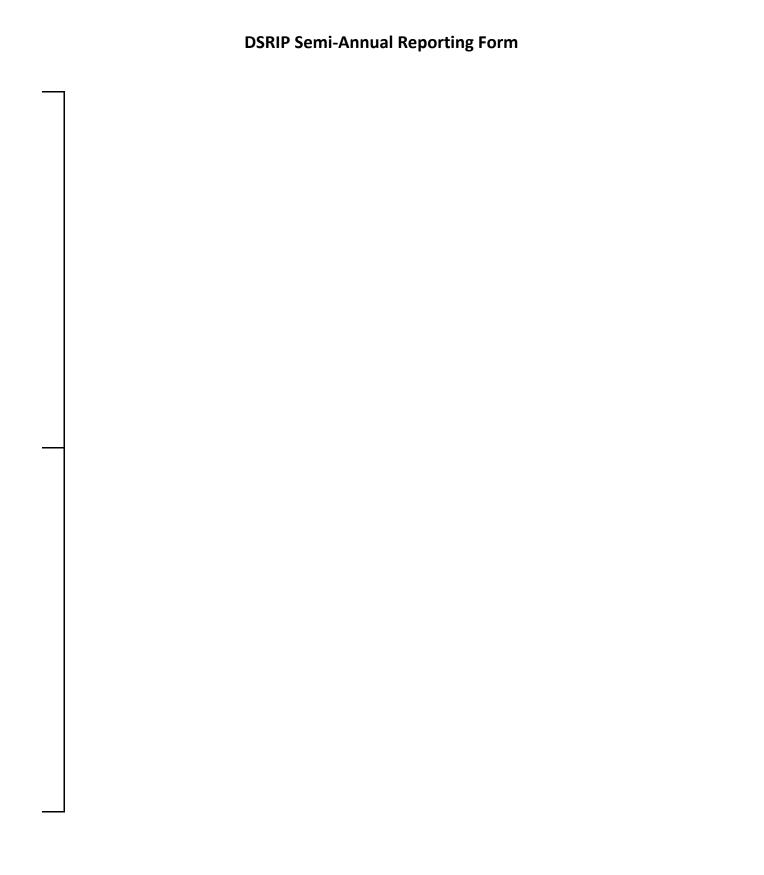
| y Care Capacity | |
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| (insert milestone) | |
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| stone achievement as stated in the instructions. | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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CA 1115 Waiver - Delivery System DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 1: Enhance Perfori

* Instructions for DPH system please type in all of your DY n

* The yellow boxes indicate w
The black boxes indicate I
The blue boxes show prog populate and flow to sumr

Enhance Performance Imp

DY Total Computable Incentive

Incentive Funding Already Rec

Process Milestone:

Numerator (if N/A, use "yes/no' Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

Milestone results/progress: The tool and processes was achieve and systems programming for t support ongoing quality work. V has been trained in in utilizing FAct (PDSA) cycle is shorthand learned. This is the scientific m

DY Target (from the DPH syste

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

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Achievement

If "yes/no" as to whether the mileston description of progress towards mile

| C | ategory 1: Enhance Perfori |
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| | DY Target (from the DPH syste |
| | Achievement Value |
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Category 1: Enhance Perfori Process Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto

description of progress towards mile

| C | ategory 1: Enhance Perfori |
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| | DY Target (from the DPH syste |
| | Achievement Value |
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Category 1: Enhance Perfori

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

Milestone results/progress: The processing of clinical data was program. We have developed a rates, adherence to discharge a reports are presented in our mas an aggregate at our monthly the ongoing work in our early re

DY Target (from the DPH syste

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the mileston description of progress towards mile

DY Target (from the DPH syste

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numb

Achievement

If "yes/no" as to whether the milesto

| Category 1: Enhance Perion |
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| description of progress towards mile |
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| DY Target (from the DPH syste |
| Achievement Value |

Category 1: Enhance Perfori Improvement Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numb Achievement If "yes/no" as to whether the milesto description of progress towards mile DY Target (from the DPH syste Achievement Value

Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| 9/30/2012 | | |
|--|----------------------------|-------|
| | REPORTING ON THIS PROJECT: | * Yes |
| mance Improvement and Reporting Capacity | | |
| | | |

the DPH system.

s: Please select above whether you are reporting on this project. If 'yes', nilestones for the project below and report data in the indicated boxes (*). here the DPH system should input data

Milestones and will automatically populate and flow to summary sheets

Milestones and will automatically populate and flow to summary sheets gress made toward the Milestone ("Achievement Value") and will automatically nary sheets

| nary sheets | |
|---|-------------------|
| provement and Reporting Capacity | |
| Amount: | * \$ 5,681,295.00 |
| eived in DY: | * \$ 5,681,295.00 |
| Hire/train 2 staff in well proven quality and efficiency improvement principles, tools and processes | |
| (insert milestone) | |
| ' form below; if absolute number, enter here) | * 2.00 |
| er, enter "1") | * 2.00 |
| | 1.00 |
| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * Yes |
| hiring and training of two staff in well proven quality and efficiency improvement principles ed. To that end, we have trained one of our existing senior quality analysts, in report writing the new EPIC/Apex system. Her training allows us to build expertise into the new system to Ve have also hired and trained a clinical nurse specialist as the sepsis project manager. He PDSA cycles of rapid change for our early sepsis recognition campaign. The Plan-Do-Studyfor testing a change — by planning it, trying it, observing the results, and acting on what is ethod, used for action-oriented learning. The training involves both the technical | |
| m plan) or enter "yes" if "yes/no" type of milestone | * Yes |
| | 1.00 |
| | |
| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
| | N/A |
| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| estone achievement as stated in the instructions: | * |

| mance Improvement and Reporting Capacity | |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
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| mance Improvement and Reporting Capacity | |
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| (insert milestone) | |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| estone achievement as stated in the instructions: | * |
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| em plan) or enter "yes" if "yes/no" type of milestone | * |
| The planty of cities year in year to type of this could be | |
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| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
| er, enter "1") | * |
| 5., 5.1.5. | NI/Λ |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: | * |
| storie demarament do stated in the mondatorial | |

| mance Improvement and Reporting Capacity | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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mance Improvement and Reporting Capacity Implement quality improvement (QI) data systems, collection and reporting capabilities (insert milestone) ' form below; if absolute number, enter here) er, enter "1") Yes one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: Yes 3 implementation of quality improvement data systems that can enable, the collection and achieved. The reports we have created reflect the new work that we have for the DSRIP a dashboard that reflects the transitions of care metrics which encompasses readmission processes and follow-up phone calls as well as teach-back training for nurses. These onthly meetings with each of our population specific care transition task force members and readmission steering committee. We have also developed reports that reflect and support ecognition of sepsis work which includes, case reviews, adherences to bundle processes m plan) or enter "yes" if "yes/no" type of milestone Yes 1.00 (insert milestone) ' form below; if absolute number, enter here) er, enter "1") one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: m plan) or enter "yes" if "yes/no" type of milestone (insert milestone) ' form below; if absolute number, enter here) er, enter "1") N/A

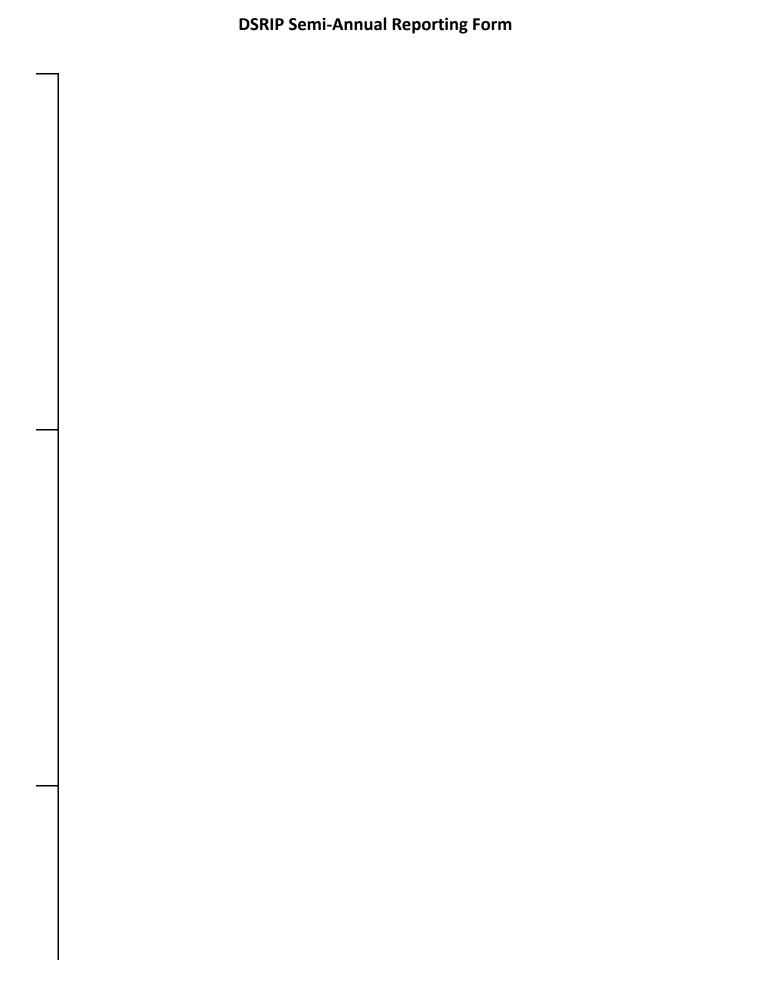
5/31/2013

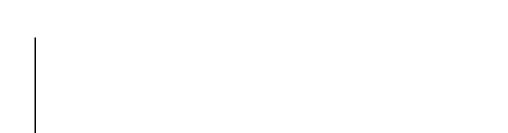
one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth

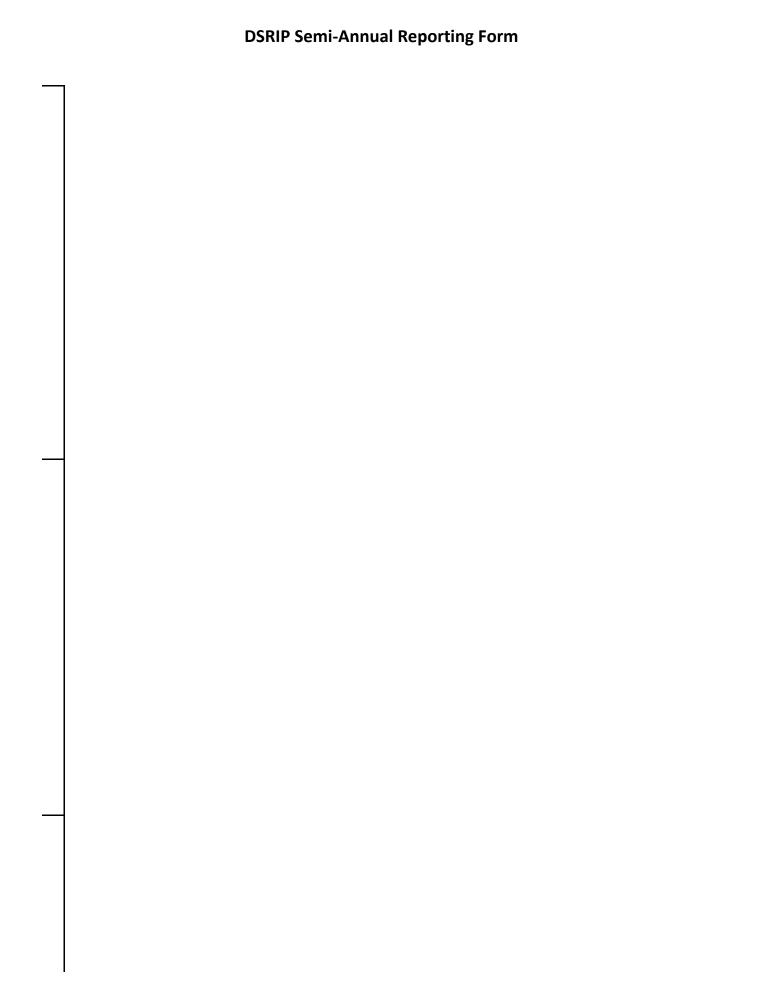
| mance Improvement and Reporting Capacity stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| mance Improvement and Reporting Capacity | |
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| | |
| (insert milestone) | |
| ' form below; if absolute number, enter here) | * |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
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| one has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth estone achievement as stated in the instructions: | * |
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| m plan) or enter "yea" if "yea/as" type of milesters | * |
| m plan) or enter "yes" if "yes/no" type of milestone | |
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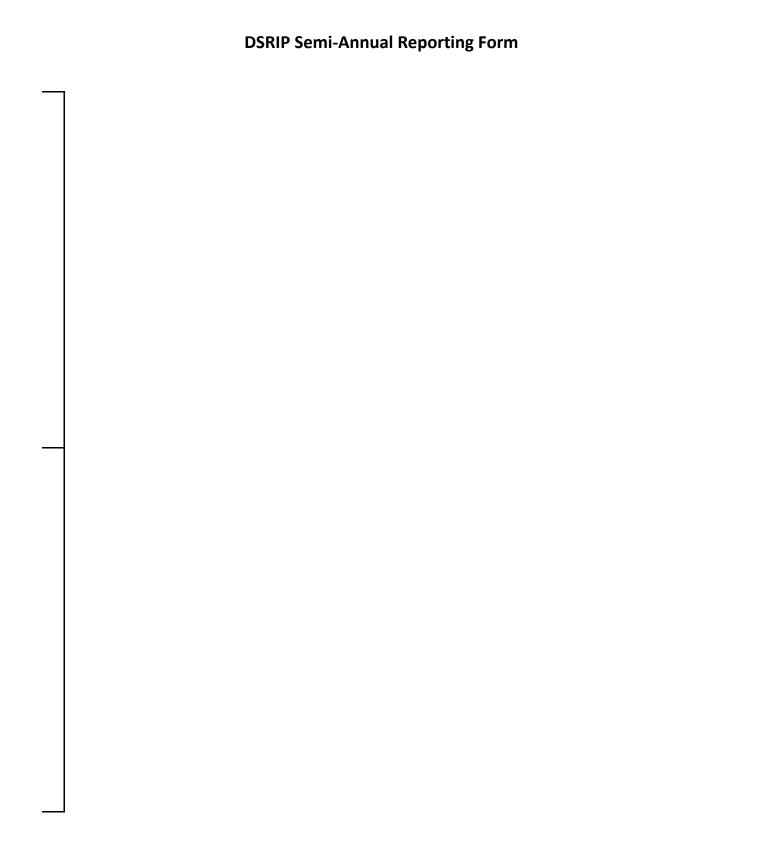












CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Expand Medical

* Instructions for DPH systems
please type in all of your DY m

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The black boxes indicate N
The blue boxes show prog
populate and flow to sumn

Expand Medical Homes

DY Total Computable Incentive

Incentive Funding Already Rece

Process Milestone:

Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milesto description of progress towards mile:

Milestone results/progress: The coaching has been achieved. W Primary Care Clinic (UPC) due organization. We also chose UF physicians and all of the staff (to outreach training. This has work screening registries. In addition

DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milesto

Category 2: Expand Medical

description of progress towards mile

Milestone results/progress: The high risk patients has been achi Barriers and solutions: For the t position should be an advanced practice nurse for the role, but v by an NP or an RN with a Mastenecessary in later years of the r

DY Target (from the DPH syster

Achievement Value

Category 2: Expand Medical Process Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards mile: DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards mile: DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milesto description of progress towards mile:

| Category 2: Expand Medical | | |
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| ı | DY Target (from the DPH syste | |
| | Achievement Value | |
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Category 2: Expand Medical

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the milesto description of progress towards mile:

Milestone results/progress: The care medical homes at UCSF w moved into Medi-Cal managed UCSF has assumed care of 189 Homes project, UCSF aims to b costs out of the healthcare deliv

DY Target (from the DPH syster

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the milesto description of progress towards mile:

DY Target (from the DPH system Achievement Value

Improvement Milestone:

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| description of progress towards mile: |
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| description of progress towards fille. |
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| DY Target (from the DPH system |
| Achievement Value |

Category 2: Expand Medical Improvement Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards mile: DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards mile: DY Target (from the DPH syster Achievement Value

Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

REPORTING ON THIS PROJECT: * Yes

Homes

he DPH system.

nary sheets

s: Please select above whether you are reporting on this project. If 'yes', ilestones for the project below and report data in the indicated boxes (*). nere the DPH system should input data dilestones and will automatically populate and flow to summary sheets press made toward the Milestone ("Achievement Value") and will automatically

| Amount: | * \$ 4,092,480.00 |
|---|-------------------|
| ∍ived in DY: | * \$ 2,728,320.00 |
| Train 3 MA's/health workers in panel management and health coaching and deploy UCSF primary care clinics | |
| (insert milestone) | |
| form below; if absolute number, enter here) | * 3.00 |
| er, enter "1") | * 3.00 |
| | 1.00 |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: | * Yes |
| training of three medical assistants/healthcare workers in panel management and health /e decided to begin our project with patient-centered medical home (PCMH), in our UCSF to the experience that our Medical Director, Dr. David Buchholz, had with PCMH at another ³ C because it serves both pediatric and adult patients. To that end, we have trained the wo medical assistants and an LVN), at UPC on panel management, for both in-reach and ced out well as it has coincided with the implementation of the diabetes and colon cancer to the registries, we have also begun to utilize the Health Care Maintenance Modules that | |
| m plan) or enter "yes" if "yes/no" type of milestone | * Yes |
| | 1.00 |
| Train 1 RN case manager in case management of high risk patients and deploy in UCSF primary care clinics | |
| (insert milestone) | |
| form below; if absolute number, enter here) | * 1.00 |
| ∍r, enter "1") | * 1.00 |
| | 1.00 |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |

Homes

stone achievement as stated in the instructions:

hiring, training and deployment of 1 RN complex care manager in case management of ieved. We hired our first complex care manager, a Masters' prepared nurse, in March 2012. ime period between July-December 2011, there was ongoing discussion as to whether this I practice RN or a nurse practitioner. After much discussion, we chose an advanced vere able to classify the role as a Clinical Nurse V, which ostensibly can either be staffed er's degree. This gives us the flexibility to incorporate NP's into this role if we find it program. Another barrier we are currently grappling with is how and what to document in

m plan) or enter "yes" if "yes/no" type of milestone

* Yes

* Yes

1.00

| Homes | |
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| (insert milestone) | <u> </u> |
| form below; if absolute number, enter here) | * |
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * |
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| m plan) or optor "voc" if "voc/po" type of milectone | * |
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| stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
| in plany of once. You in yourse type of inmostorie | |
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| (insert milestone) | |
| form below; if absolute number, enter here) | * |
| ∍r, enter "1") | * |
| | N/A |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | * |
| stone achievement as stated in the instructions: | " |

| Homes | |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
| | |

Homes Link at least 50 SPD patients without UCSF primary care visits in FY2010 to primary care medical homes at UCSF (insert milestone) form below; if absolute number, enter here) er, enter "1") Yes ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: Yes linkage of at least 50 SPD patients without UCSF primary care visits in FY2010 to primary as achieved. In 2011 in San Francisco, many patients who had fee-for-service Medi-Cal care under the auspices of the San Francisco Health Plan. From July-December 2011, 3 of these patients in Primary Care Medical Homes. In conjunction with our DSRIP Medical uild a delivery model that improves quality through better coordination of care while taking ery system. m plan) or enter "yes" if "yes/no" type of milestone Yes 1.00 (insert milestone) form below; if absolute number, enter here) er, enter "1") me has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: m plan) or enter "yes" if "yes/no" type of milestone (insert milestone)

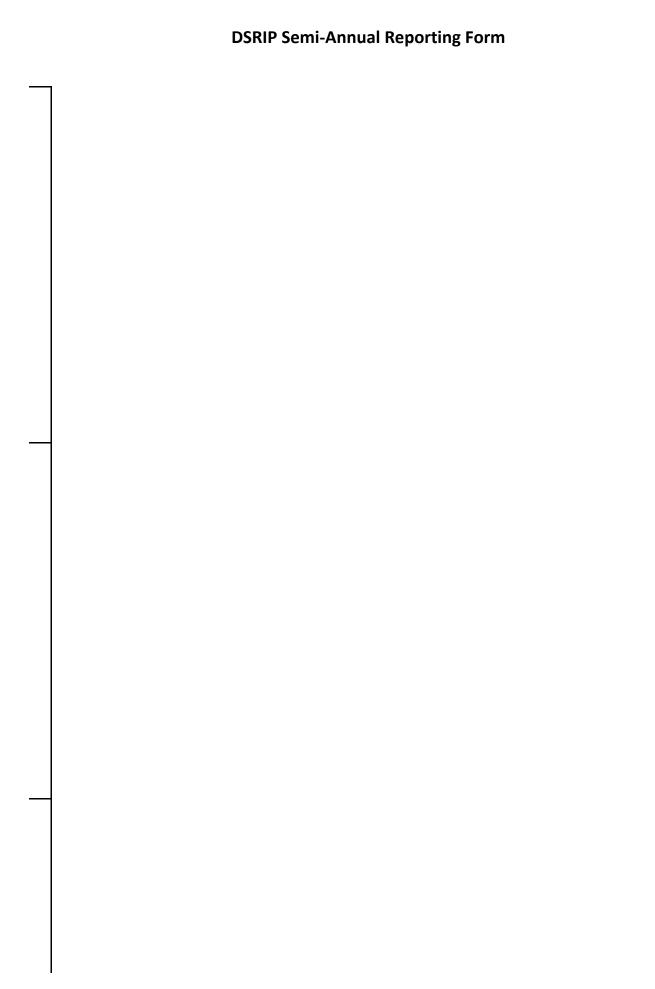
ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth

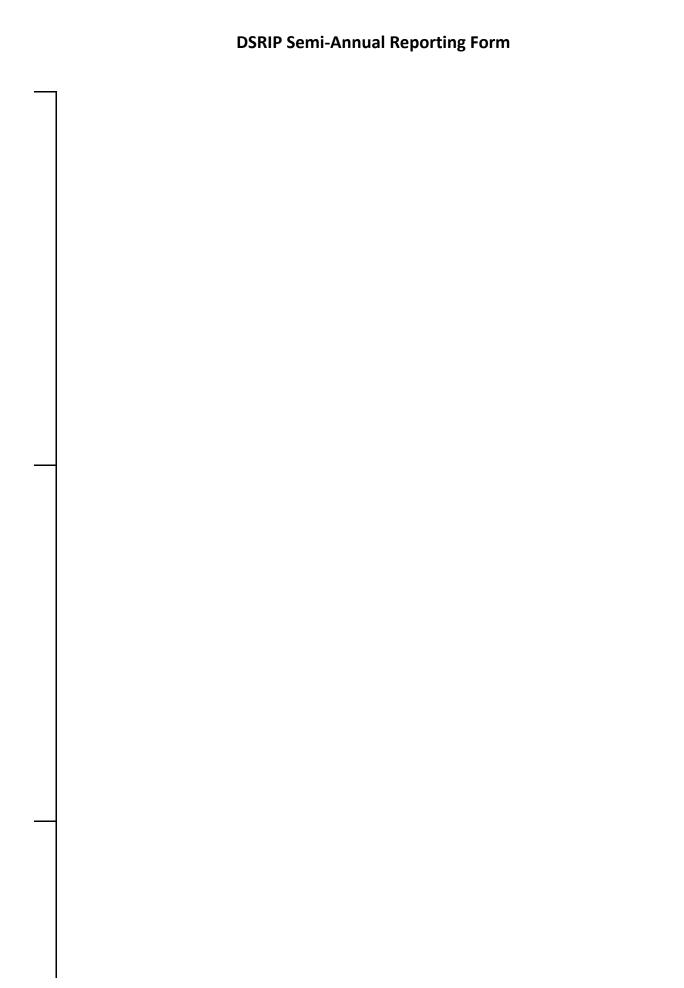
form below; if absolute number, enter here)

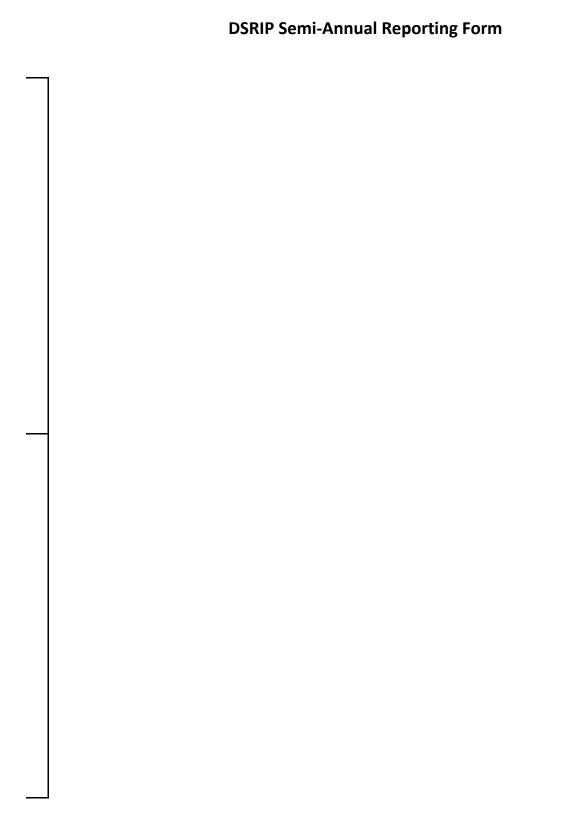
er, enter "1")

| Homes stone achievement as stated in the instructions: | * |
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| m plan) or enter "yes" if "yes/no" type of milestone | * |
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| Homes | |
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| (insert milestone) | |
| form below; if absolute number, enter here) | * |
| ∍r, enter "1") | * |
| | N/A |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * |
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CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Expand Chronic

* Instructions for DPH systems
please type in all of your DY m.

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Expand Chronic Care Man

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Process Milestone:

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Achievement

If "yes/no" as to whether the milesto description of progress towards miles

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Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

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Achievement

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Category 2: Expand Chronic **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe

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Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| REPORTING ON THIS PROJECT: | * No | |
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Care Management Models

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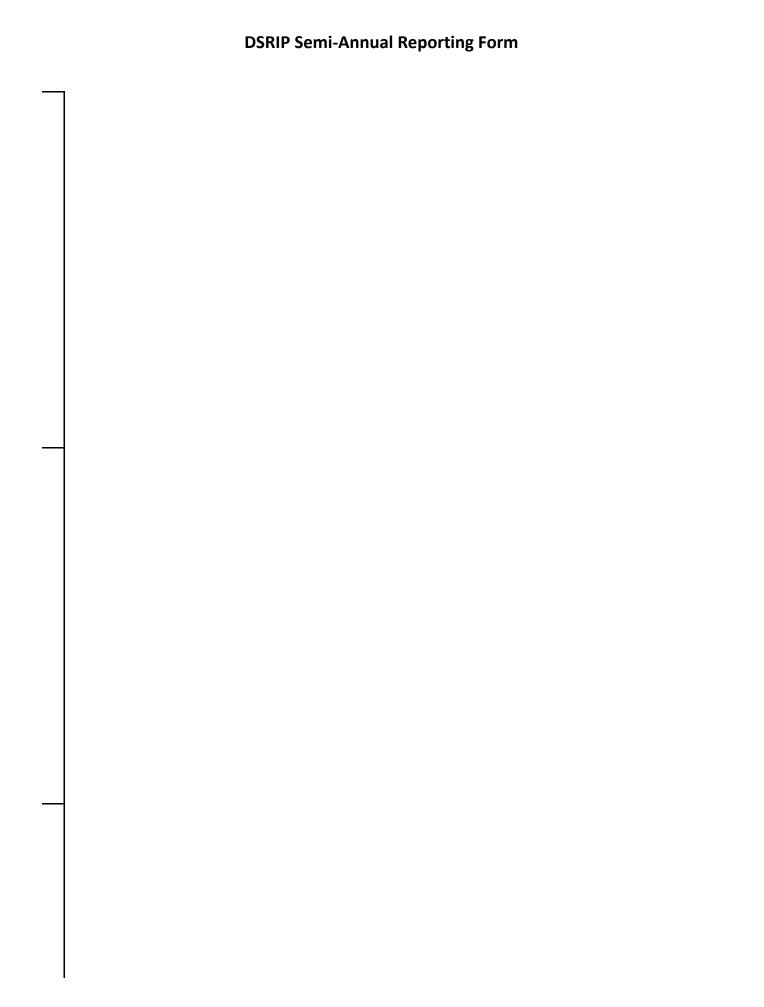
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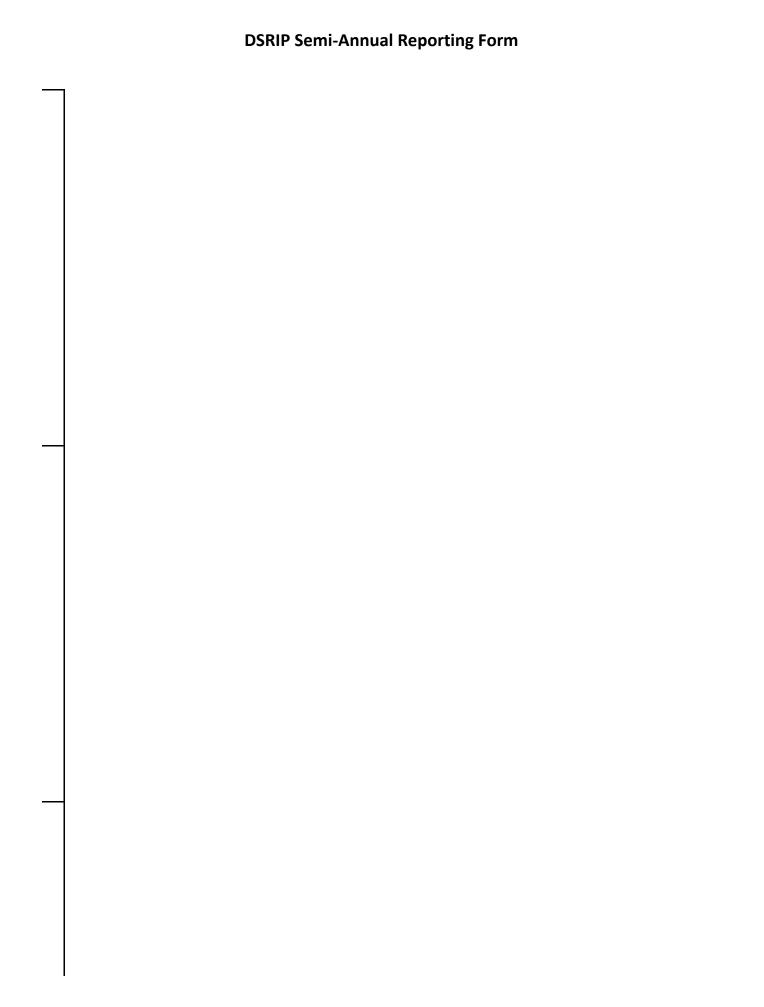
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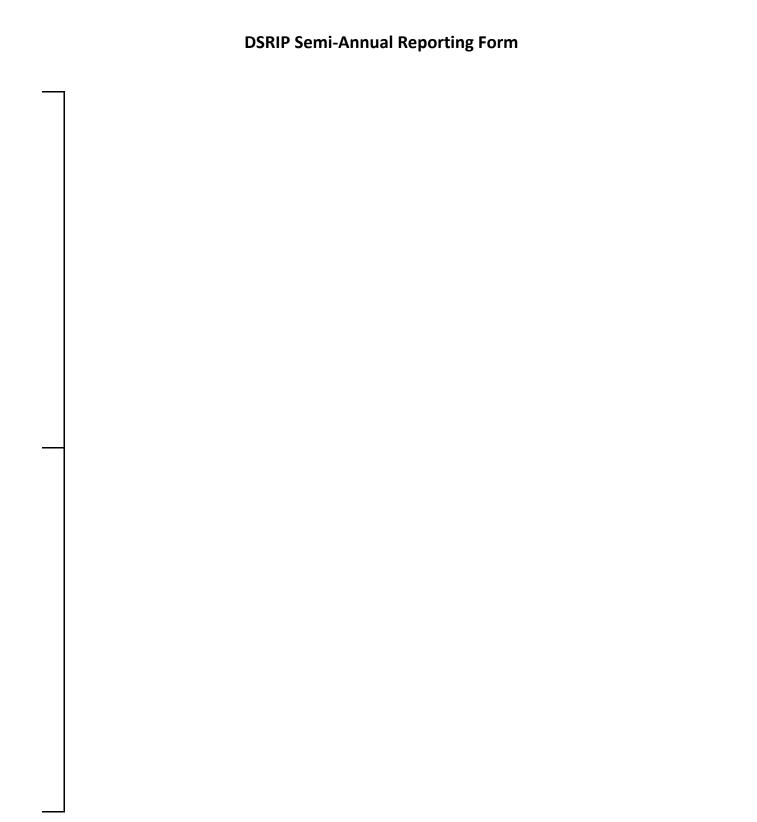
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CA 1115 Waiver - Delivery System F DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Redesign Primar

* Instructions for DPH systems please type in all of your DY m

* The yellow boxes indicate where the black boxes indicate in the blue boxes show program populate and flow to summer the systems.

Redesign Primary Care

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Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

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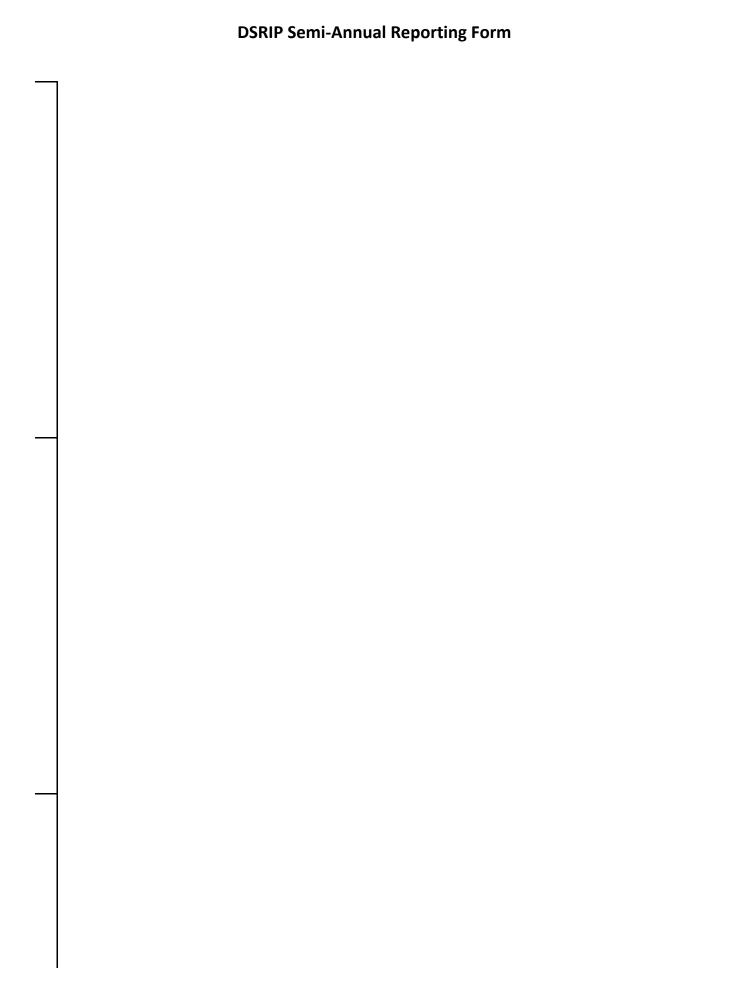
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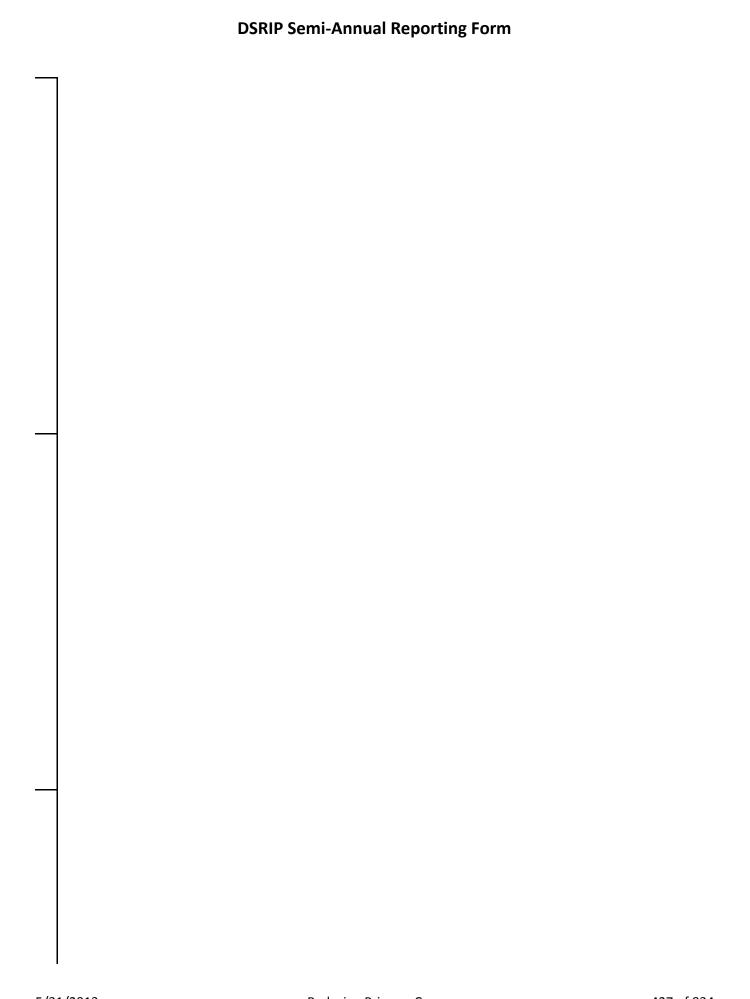
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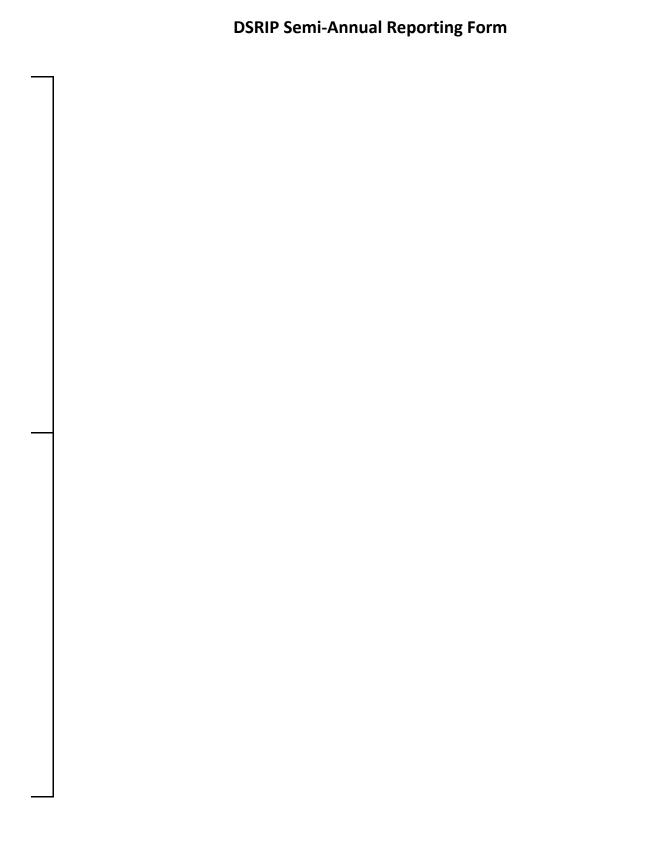












CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Redesign to Impl

* Instructions for DPH systems
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Process Milestone:

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teform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

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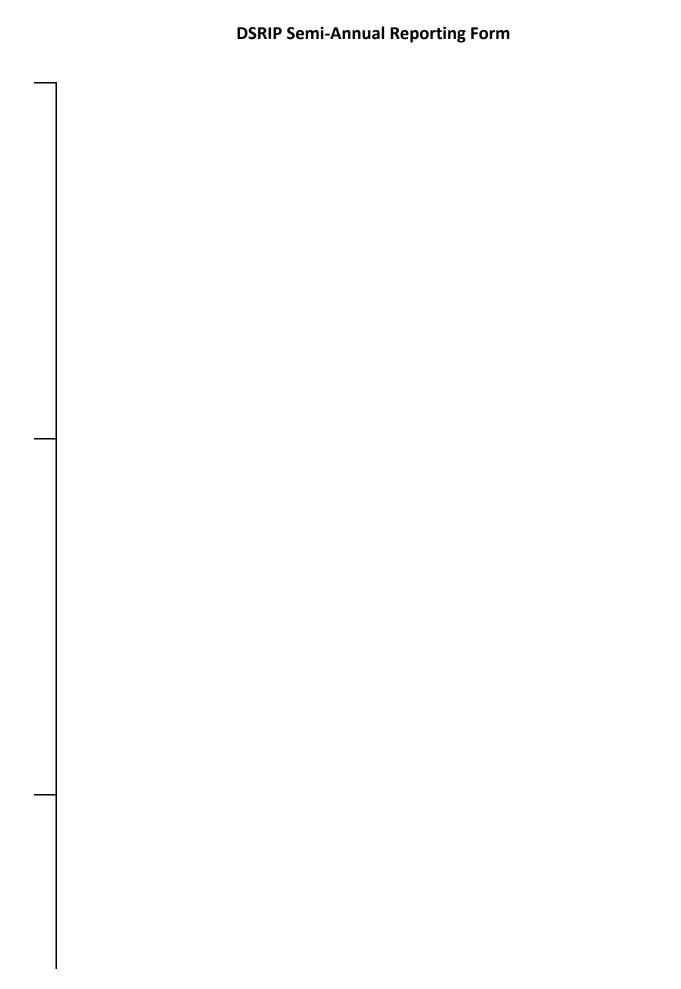
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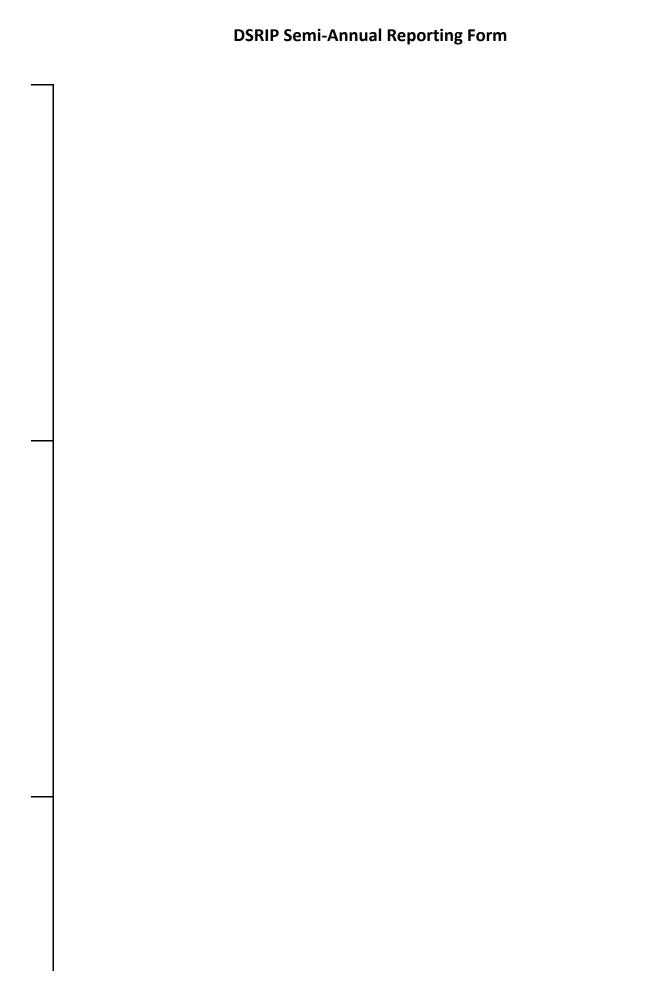
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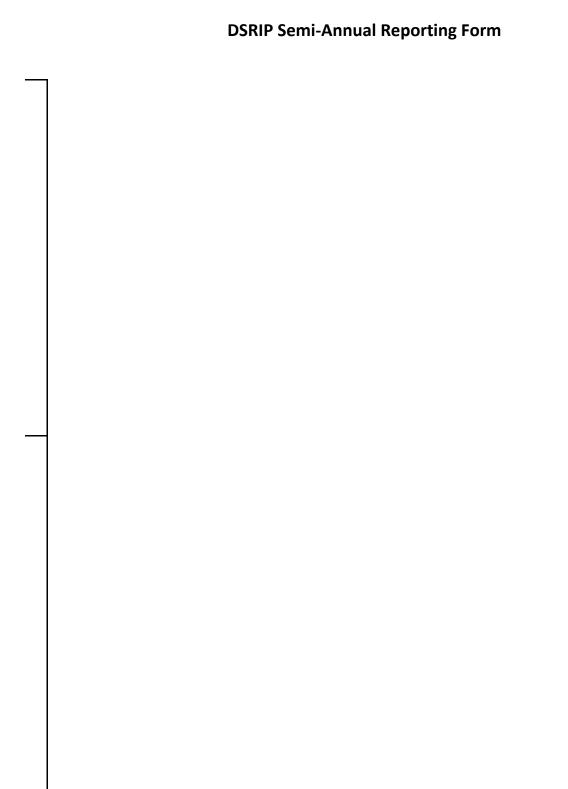
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5/31/2013 Patient Experience 447 of 834



5/31/2013 Patient Experience 449 of 834



CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Redesign for Cos

* Instructions for DPH systems
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Process Milestone:

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Process Milestone:

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Category 2: Redesign for Cos **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

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Category 2: Redesign for Cos **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto

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Category 2: Redesign for Cos **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value

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The University of California, San Francisco Medical Center DY 7
9/30/2012

| DY 7 9/30/2012 | REPORTING ON THIS PROJECT: | * No |
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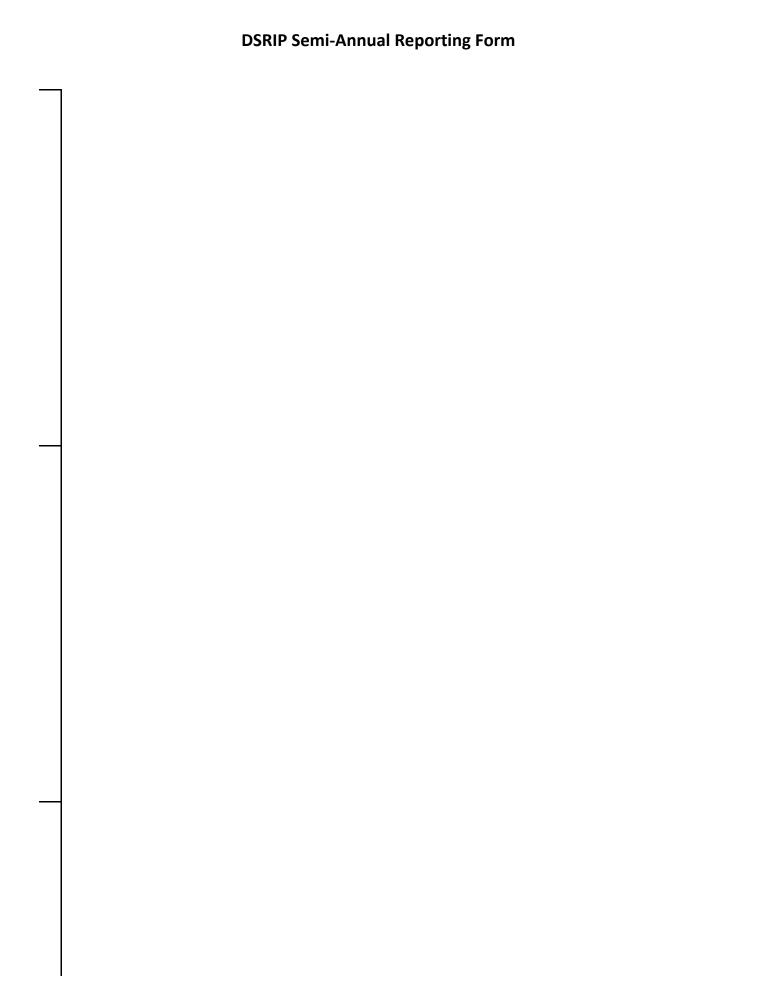
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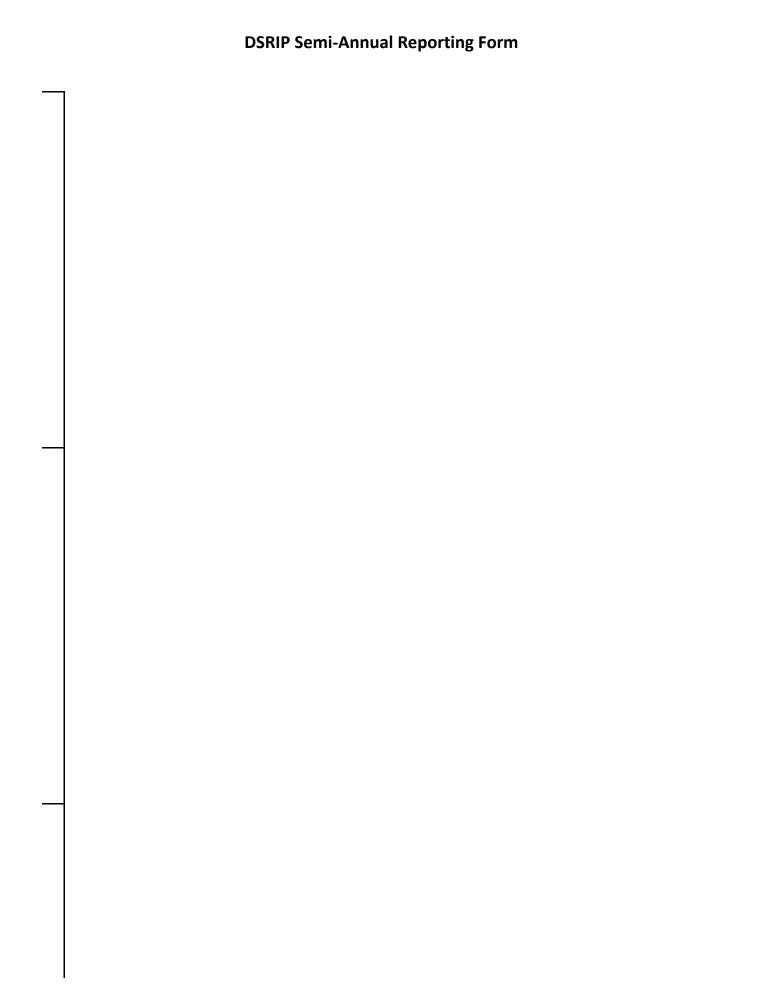
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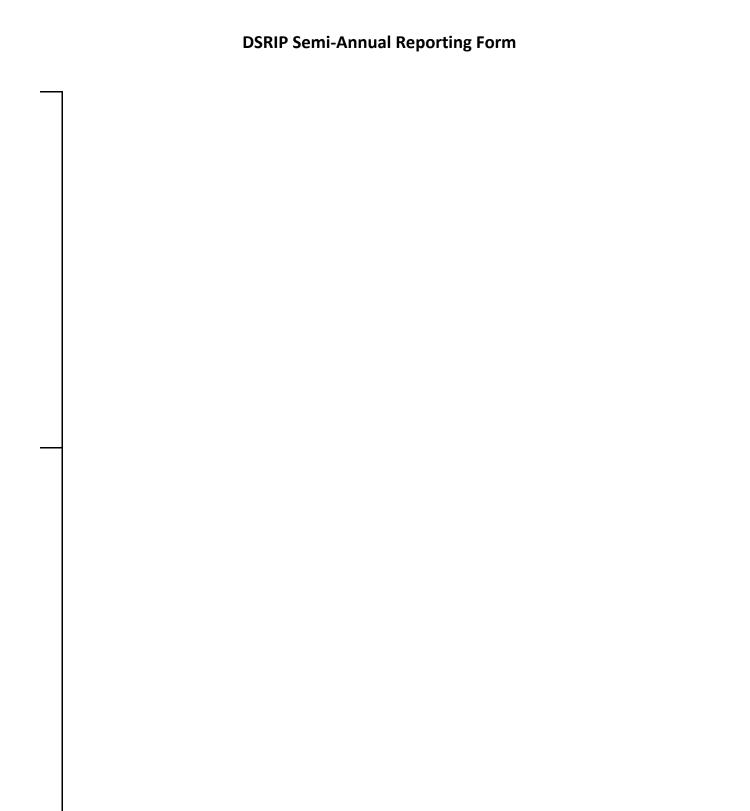
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CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Integrate Physica

* Instructions for DPH systems
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Process Milestone:

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DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the mileston description of progress towards miles

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Category 2: Integrate Physica **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto

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| Category 2: Integrate Physica | | |
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Category 2: Integrate Physica **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles

| Category 2: Integrate Physica | | |
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Category 2: Integrate Physica **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value

teform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| REPORTING ON THIS PROJECT: | * | No |
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he DPH system.

:: Please select above whether you are reporting on this project. If 'yes', ilestones for the project below and report data in the indicated boxes (*). It is the DPH system should input data the project below and report data in the indicated boxes (*). It is the project below and report data in the indicated boxes (*). It is the project below and the project below and report data in the indicated boxes (*).

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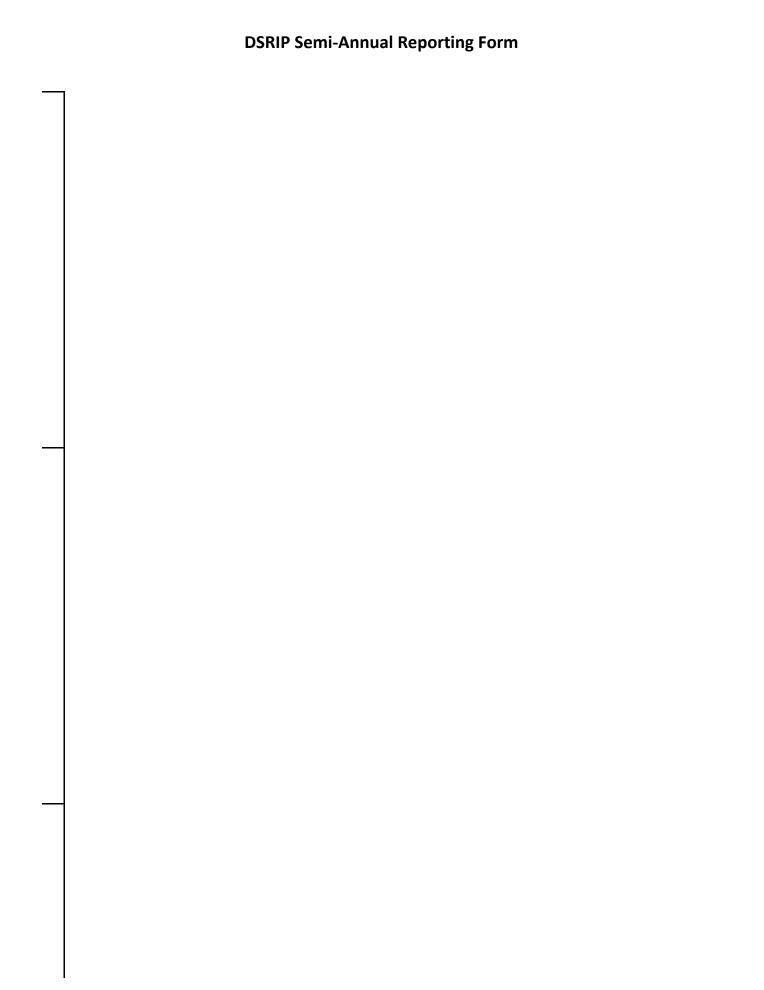
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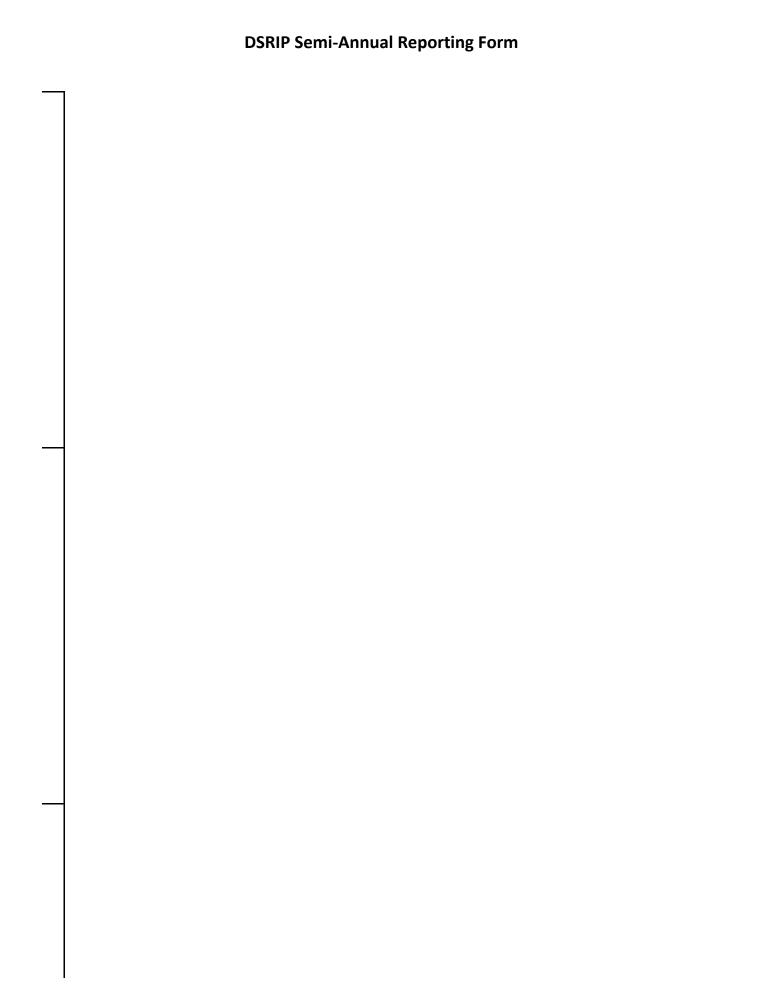
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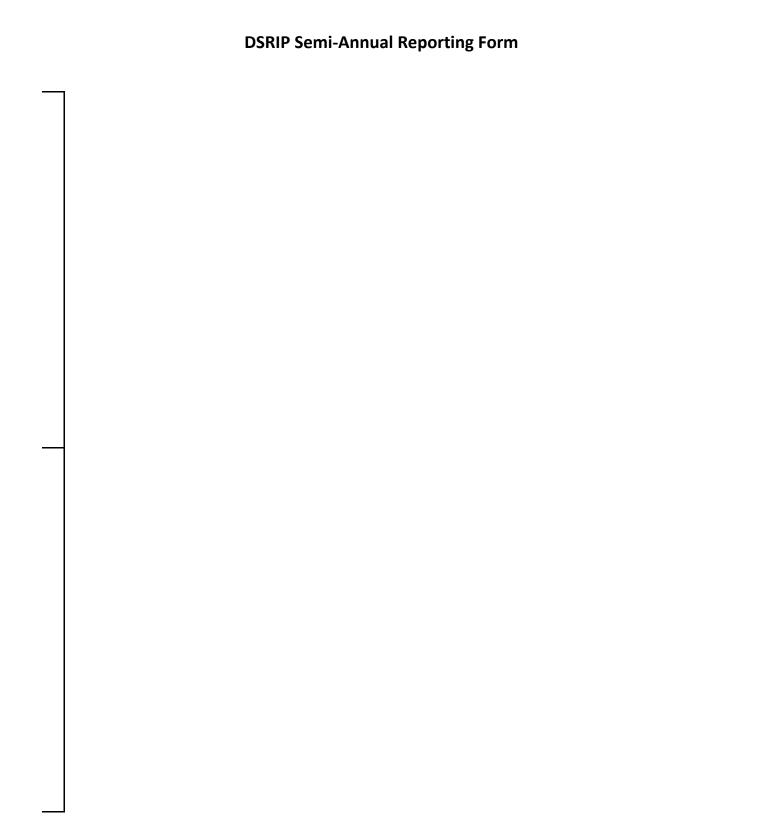
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CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Increase Special

* Instructions for DPH systems
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Process Milestone:

Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

Milestone results/progress: The guidelines for four specialty clini leadership from the medical cen guidelines and procedures for rearthoplasty, and cardiology). T care patients.

Barriers and solutions: We work

DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

Category 2: Increase Special

Milestone results/progress: A pla with our new electronic medical started piloting electronic referra developed in conjunction with out cardiology, endocrinology, nephareferral language that ensures the diagnostic test and patient data

DY Target (from the DPH syster

Achievement Value

Category 2: Increase Special

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

Milestone results/progress: The With the implementation of our r capabilities to implement e-cons electronic referrals and went cor as per our DY 8 DSRIP milestor Barriers and solutions: A major I start-up communication that mu-

DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

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Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

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Process Milestone:

Numerator (if N/A, use "yes/no"

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Category 2: Increase Special **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe

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teform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| REPORTING ON THIS PROJECT: | * | Yes |
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ty Care Access/Redesign Referral Process

he DPH system.

:: Please select above whether you are reporting on this project. If 'yes', ilestones for the project below and report data in the indicated boxes (*). Itere the DPH system should input data

filestones and will automatically populate and flow to summary sheets ress made toward the Milestone ("Achievement Value") and will automatically nary sheets

| nary sheets | |
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| ccess/Redesign Referral Process | |
| Amount: | * \$ 5,261,760.00 |
| ived in DY: | * \$ 5,261,760.00 |
| Develop and implement standardized referral evaluation and processing guidelines for four specialty clinics | |
| (insert milestone) | |
| form below; if absolute number, enter here) | * |
| er, enter "1") | * |
| | Yes |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * Yes |
| development and implementation of standardized referral evaluation and processing cs was achieved. Working with a multidisciplinary team of clinicians, administrators, and iter and physician practices we were able to develop and implement a standardized set of eferrals from primary care to four of our specialty clinics (neurology, dermatology, ortho-hese four clinics were chosen because they represent the greatest need for our primary | |
| ked closely with these specialty clinics to identify barriers to appointments and increase | |
| n plan) or enter "yes" if "yes/no" type of milestone | * Yes |
| | 1.00 |
| Complete a planning process/submit plan to implement electronic referrals (insert milestone) | |
| form below; if absolute number, enter here) | * |
| r, enter "1") | * |
| , 55. | Yes |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: | * Yes |

ty Care Access/Redesign Referral Process

anning process to implement electronic referrals/consults was achieved. In conjunction record we have completed a plan for electronic referrals. In fact, early March 2011, we als using smart phrase technology. The "smart phrase" technology and language was ur specialty practice colleagues and our Apex team. Our initial pilot clinics will be rology, and rheumatology. The "smart phrase" is a lexicon of templates that consist of ne primary care provider clearly articulates the need for the referral and that the relevant is available and displayed so that the specialty provider has the information needed for a

n plan) or enter "yes" if "yes/no" type of milestone

| * | Yes | |
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ty Care Access/Redesign Referral Process

| Develop the technical capabilities to facilitate electronic referrals (insert milestone) | |
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| form below; if absolute number, enter here) | * |
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * Yes |
| development of technical abilities to facilitate electronic referrals/consults was achieved. new EMR, Epic/Apex in the ambulatory setting in April 2011, we have the technical sults. Currently, (as described above) we are piloting our smart phrase technology for mpletely paperless in March 2012. We began a pilot the e-consult program in June 2012, ne goal. barrier in the development of technical capabilities of e-Consult across all specialties is the st occur to gather interest in building smart-phrases and e-Consults. It is a time-consuming | |
| n plan) or enter "yes" if "yes/no" type of milestone | * Yes |
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| (insert milestone) | |
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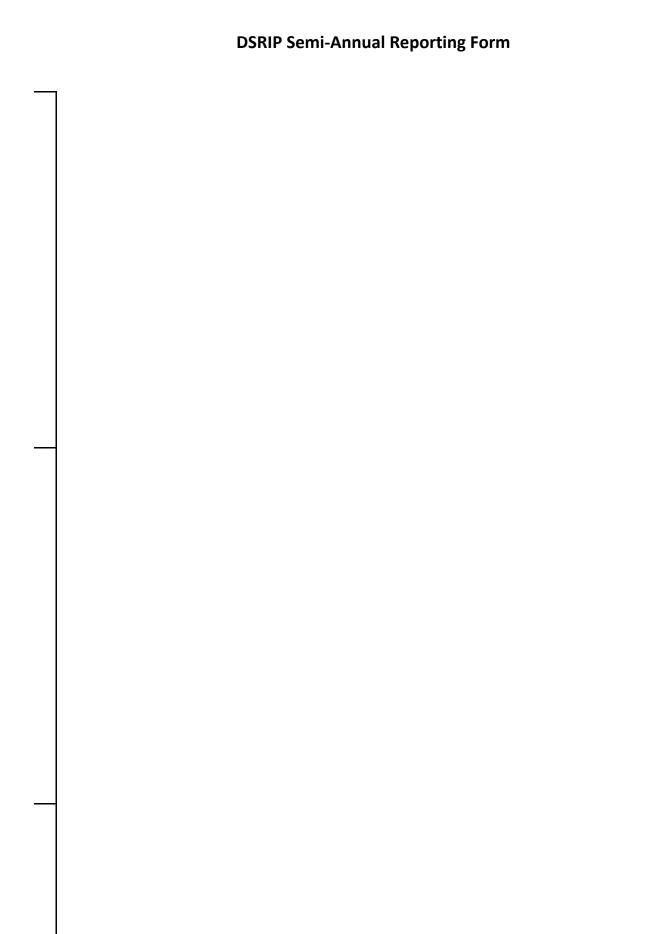
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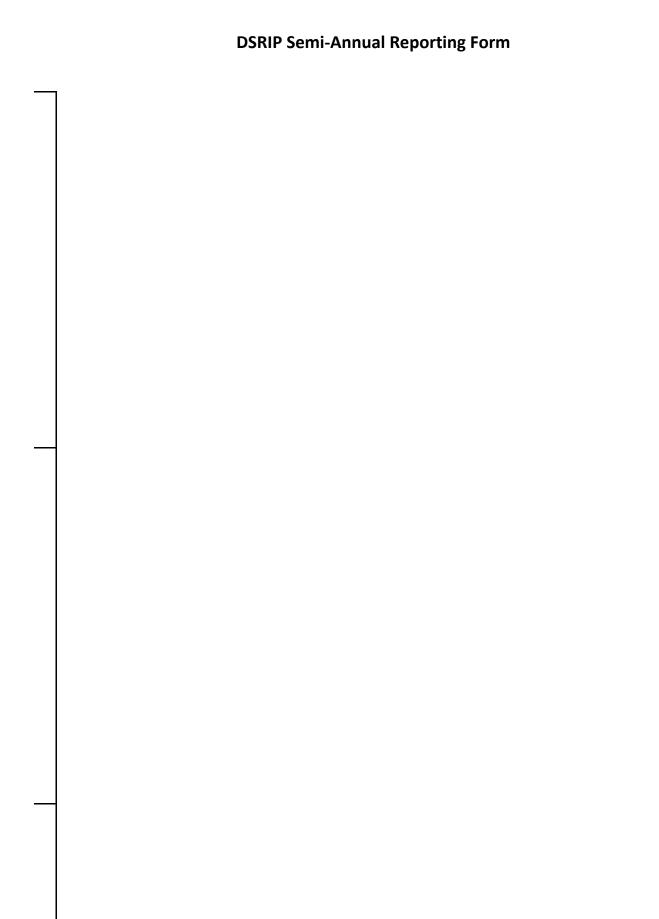


5/31/2013 Specialty Care Access 507 of 834

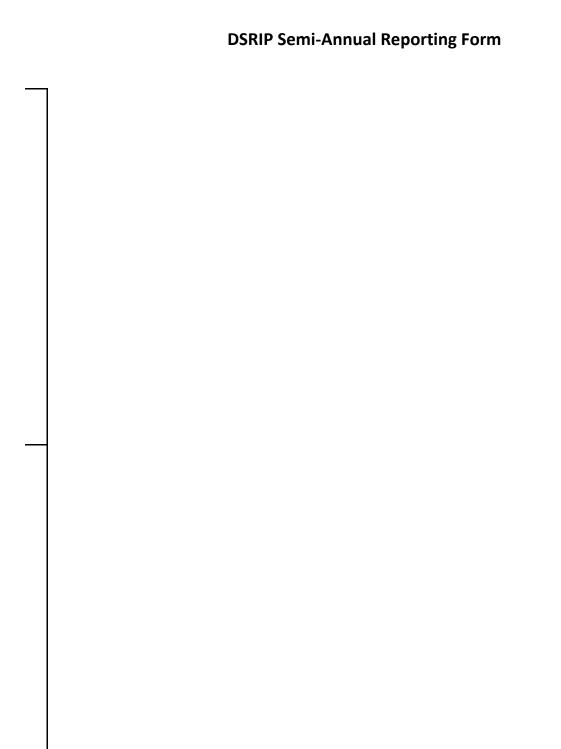
5/31/2013 Specialty Care Access 508 of 834



5/31/2013 Specialty Care Access 510 of 834



5/31/2013 Specialty Care Access 512 of 834



CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Establish/Expand

* Instructions for DPH systems
please type in all of your DY m.

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Process Milestone:

Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

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Category 2: Establish/Expand **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto

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The University of California, San Francisco Medical Center DY 7
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5/31/2013 Patient Care Navigation 521 of 834

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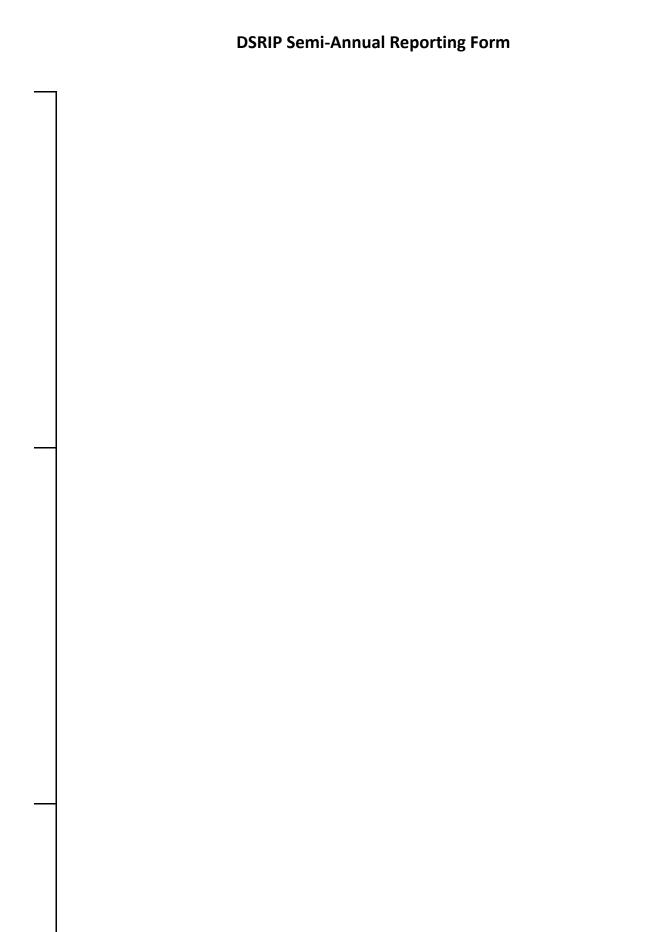
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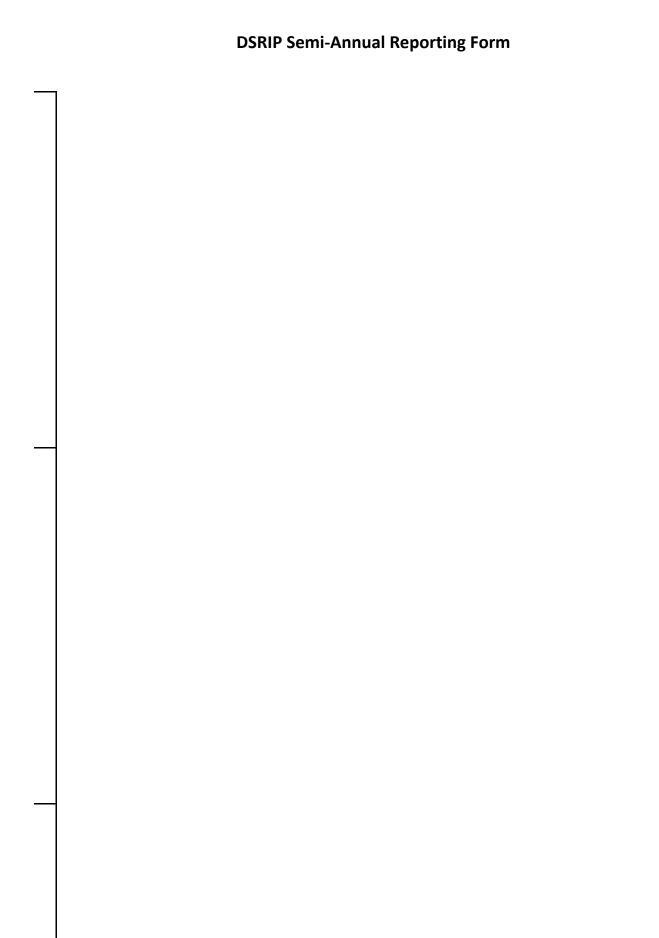
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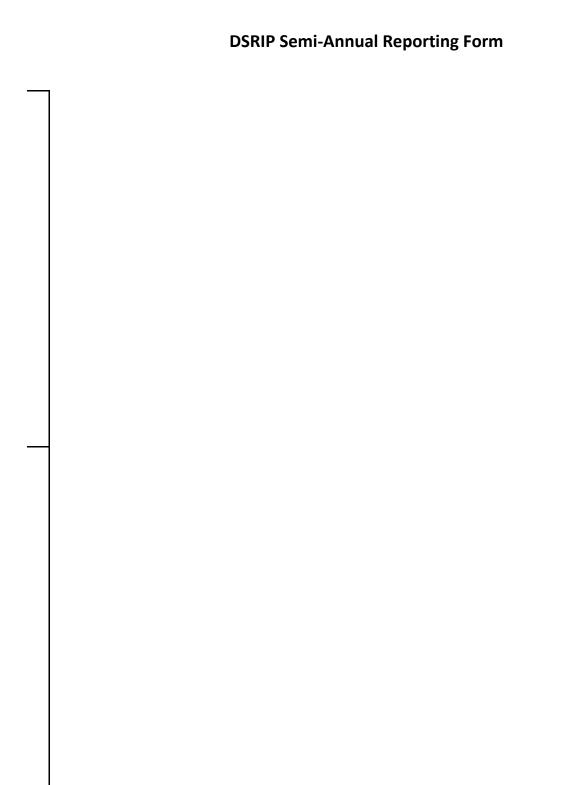
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5/31/2013 Patient Care Navigation 533 of 834



CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Apply Process In

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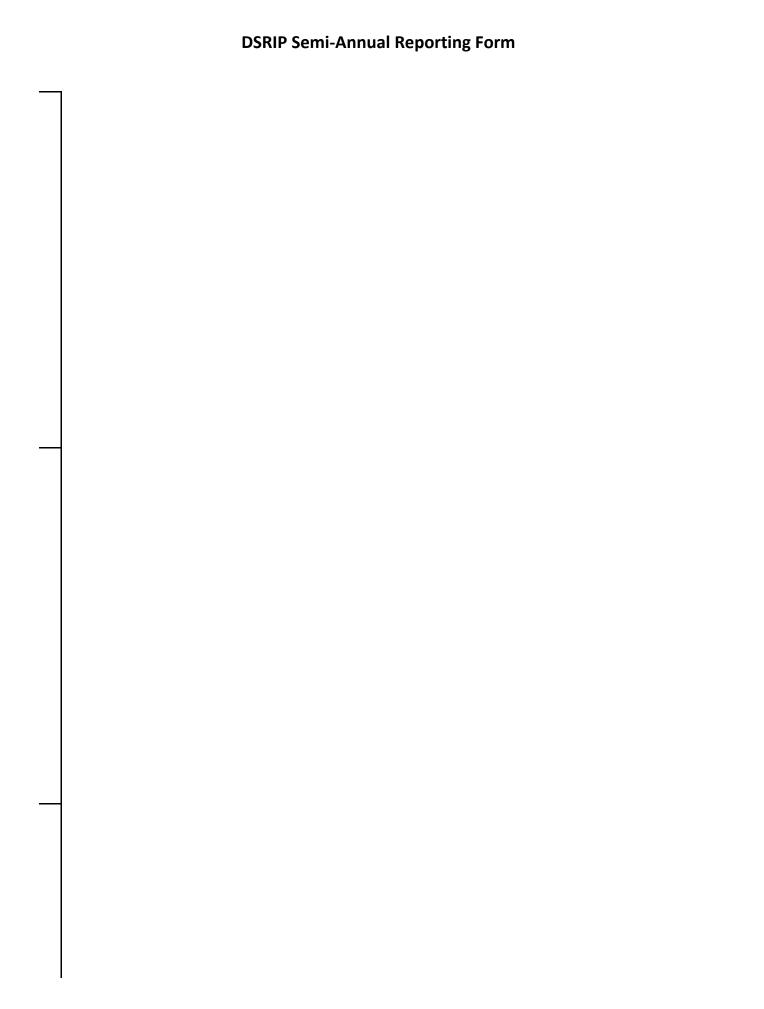
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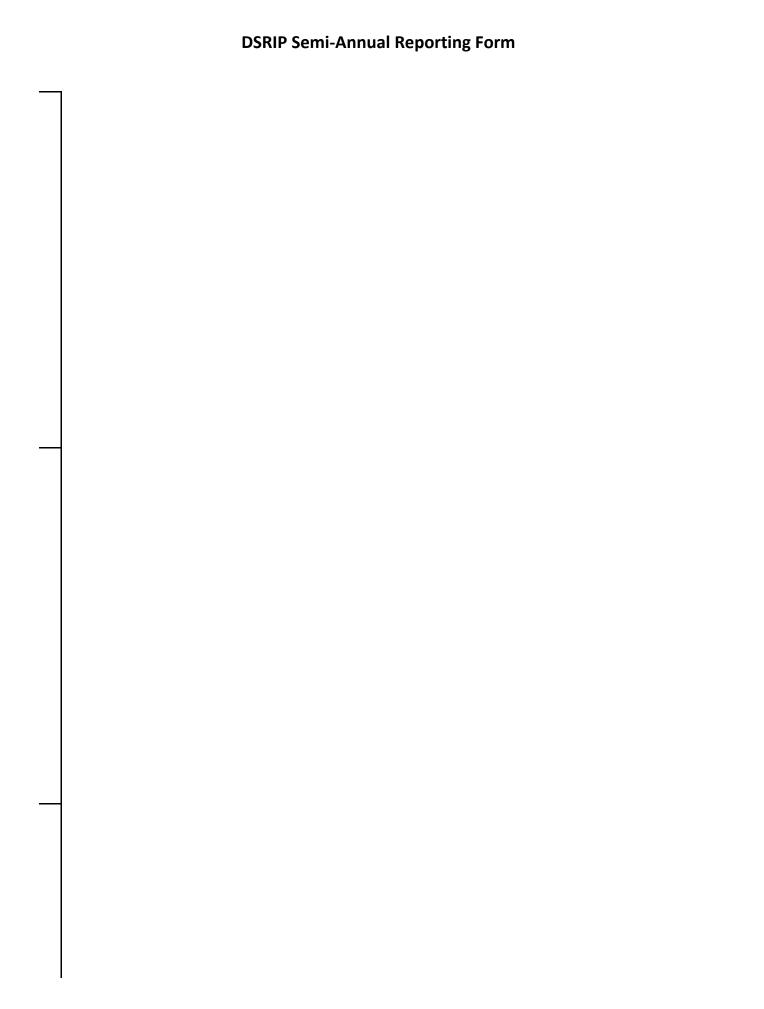
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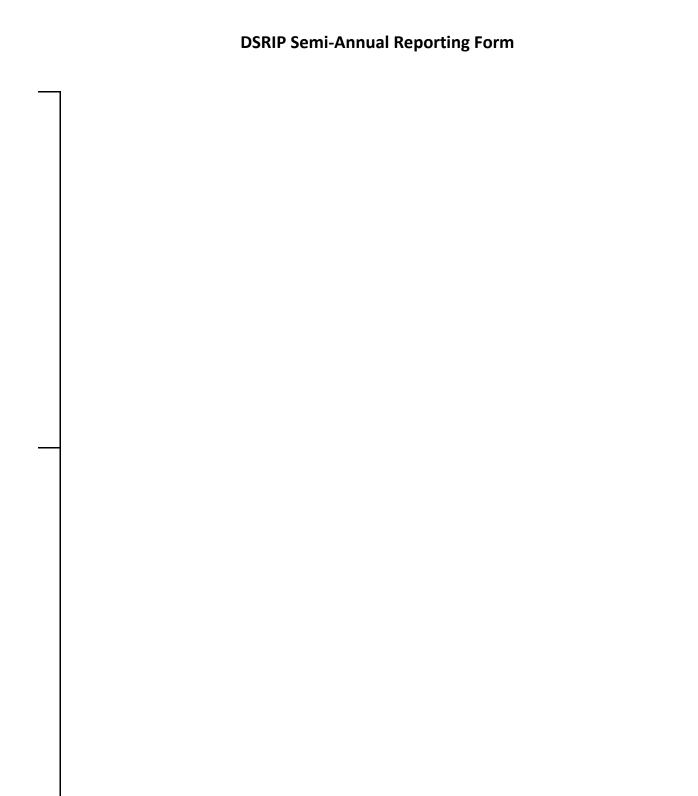
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CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Improve Patient |

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The University of California, San Francisco Medical Center DY 7
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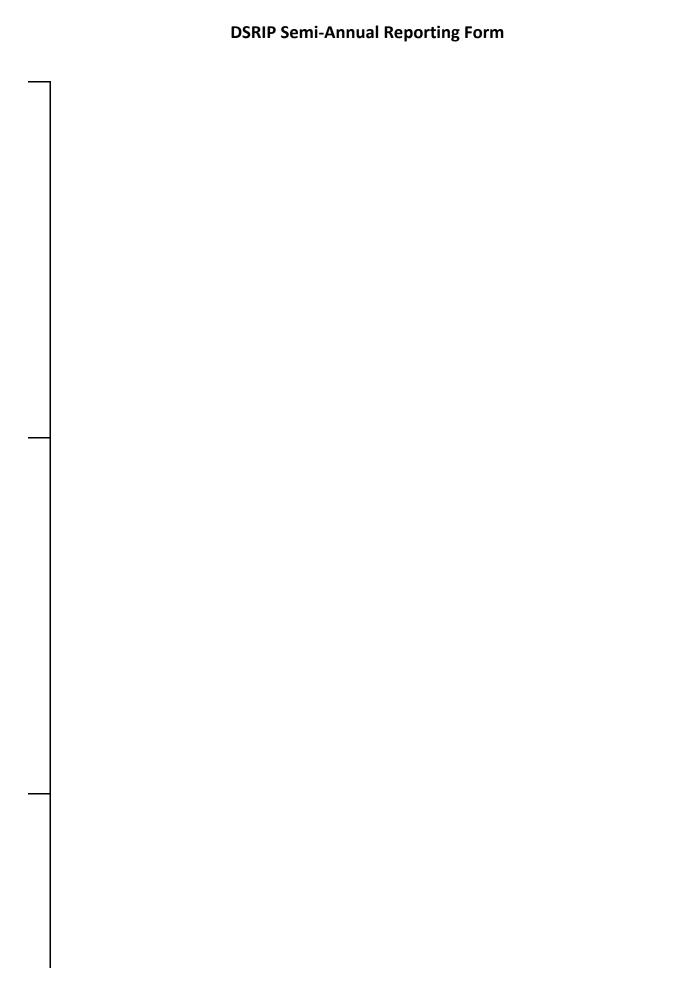
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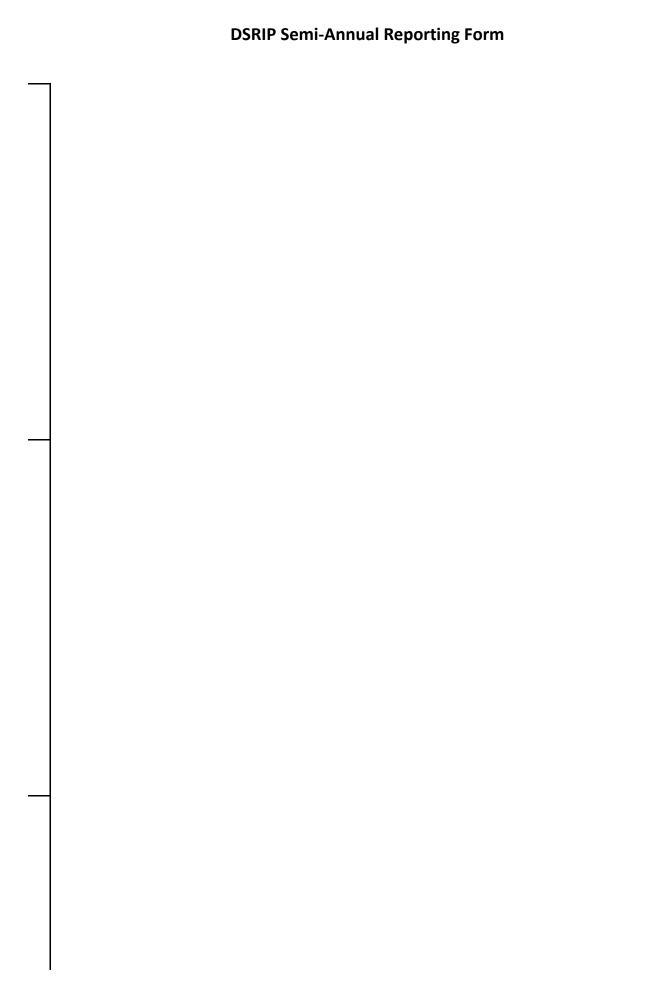
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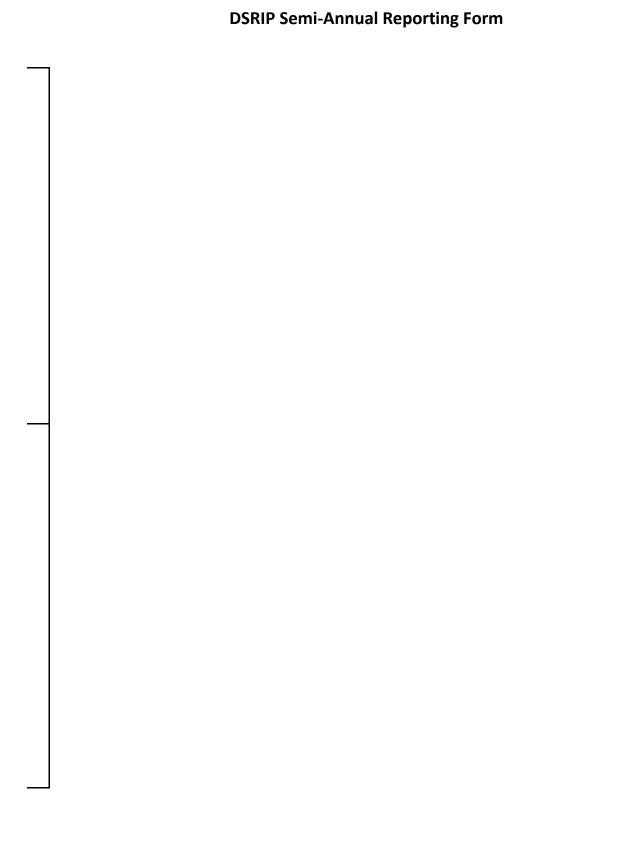
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CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Use Palliative Ca

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The University of California, San Francisco Medical Center DY 7
9/30/2012

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| m plan) or enter "yes" if "yes/no" type of milestone | * | |
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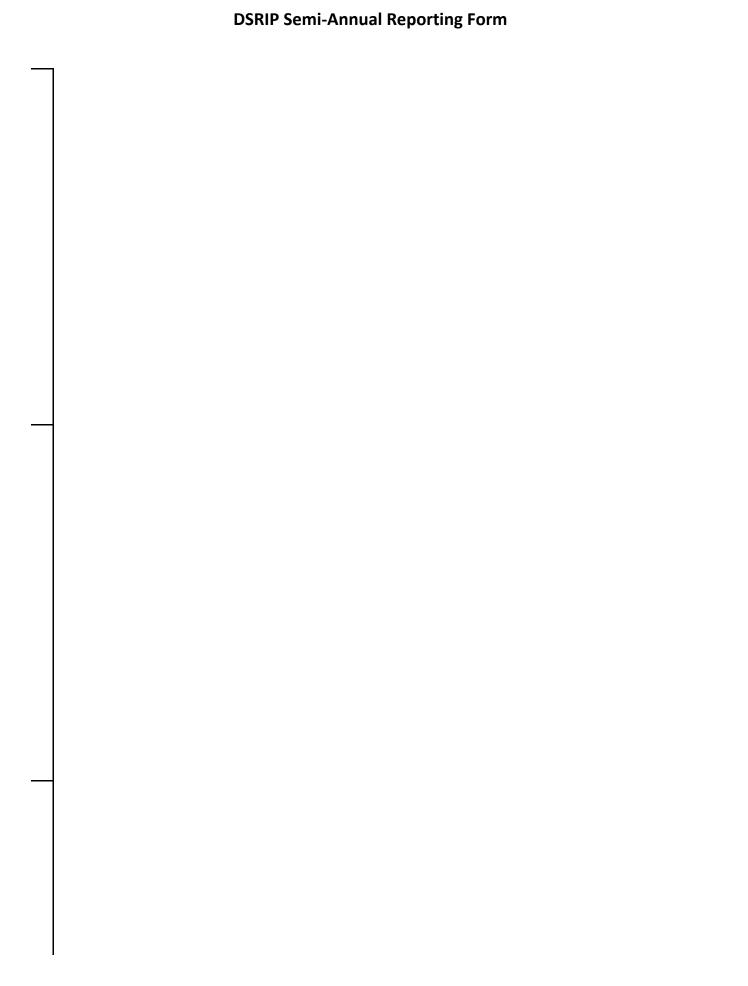
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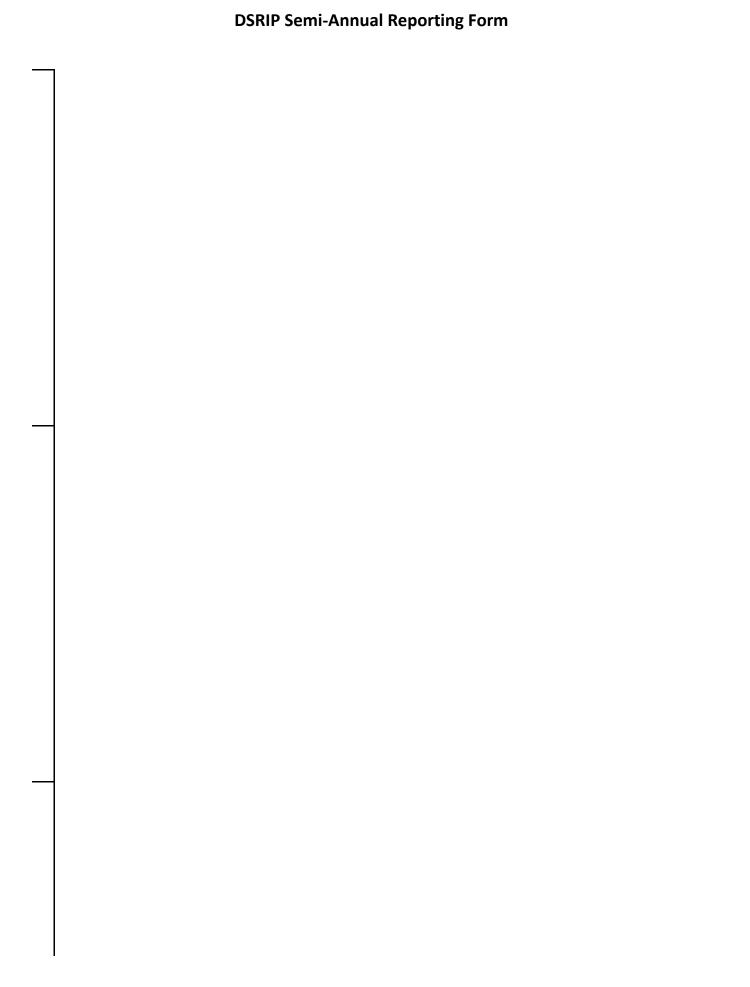
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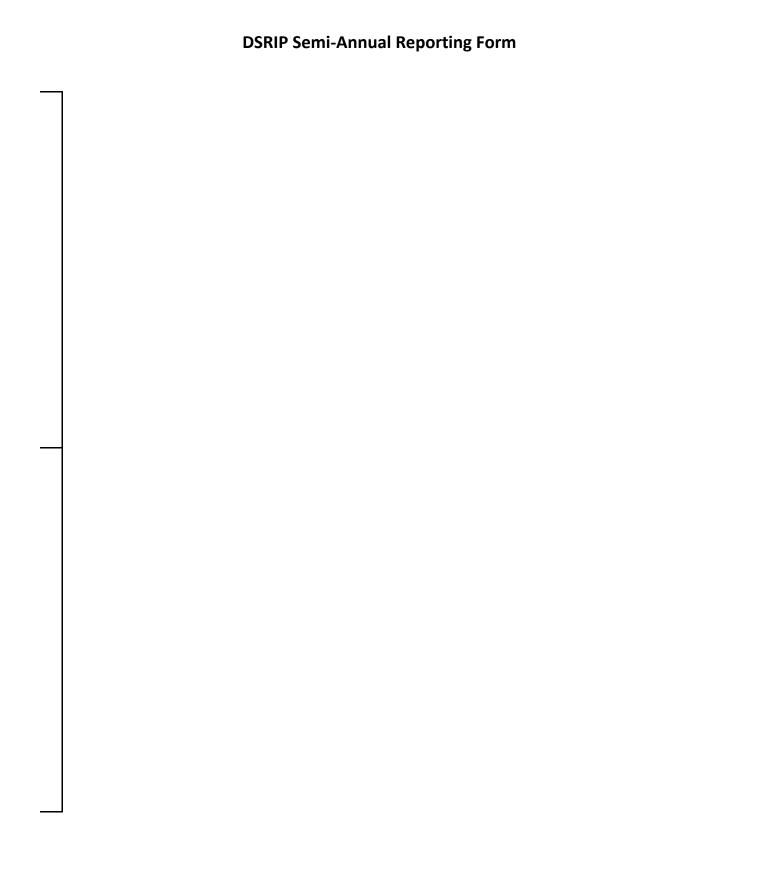
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CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Conduct Medicat

* Instructions for DPH systems
please type in all of your DY m

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The blue boxes indicate N
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populate and flow to summ

Conduct Medication Manage

DY Total Computable Incentive

Incentive Funding Already Rece

Process Milestone:

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If "yes/no" as to whether the milestonescription of progress towards miles

DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the mileston description of progress towards miles

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Category 2: Conduct Medicat Process Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

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Category 2: Conduct Medicat Improvement Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

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| Category 2: Conduct Medicat |
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Category 2: Conduct Medicat Improvement Milestone: Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value

leform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| DY 7 9/30/2012 | REPORTING ON THIS PROJECT: | * No |
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| tion Management | NET ONT IN OUT THE THOUSE OF | |
| he DPH system. :: Please select above whether you are reporting ilestones for the project below and report data in the the DPH system should input data. //ilestones and will automatically populate and flooress made toward the Milestone ("Achievement vary sheets | the indicated boxes (*). w to summary sheets | |
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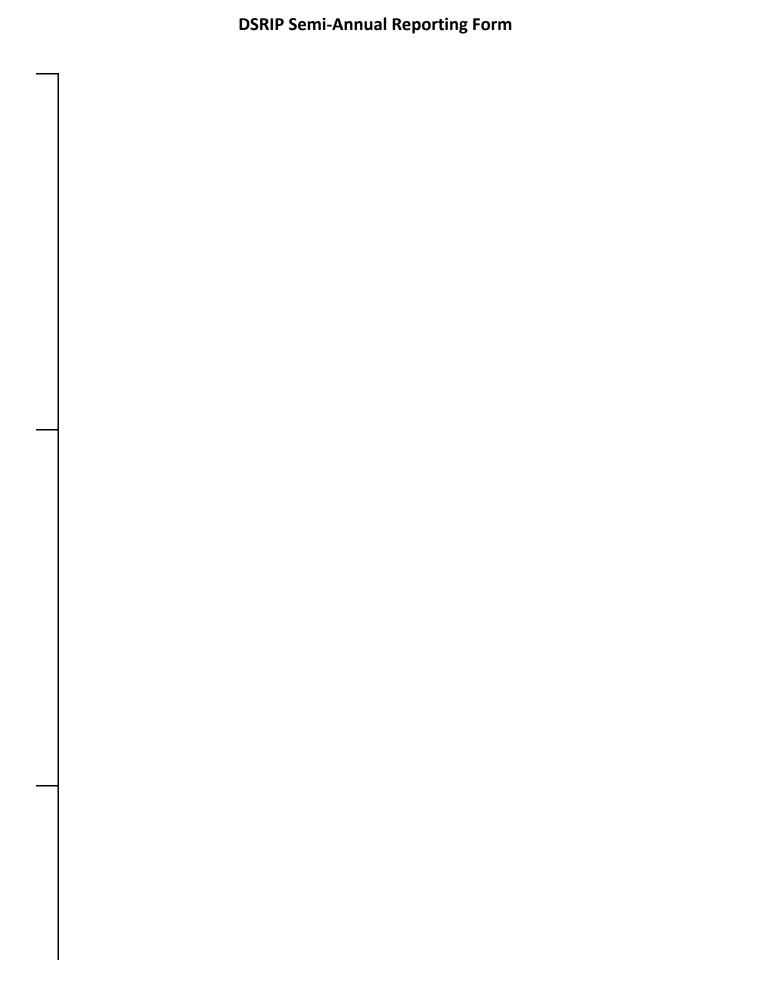
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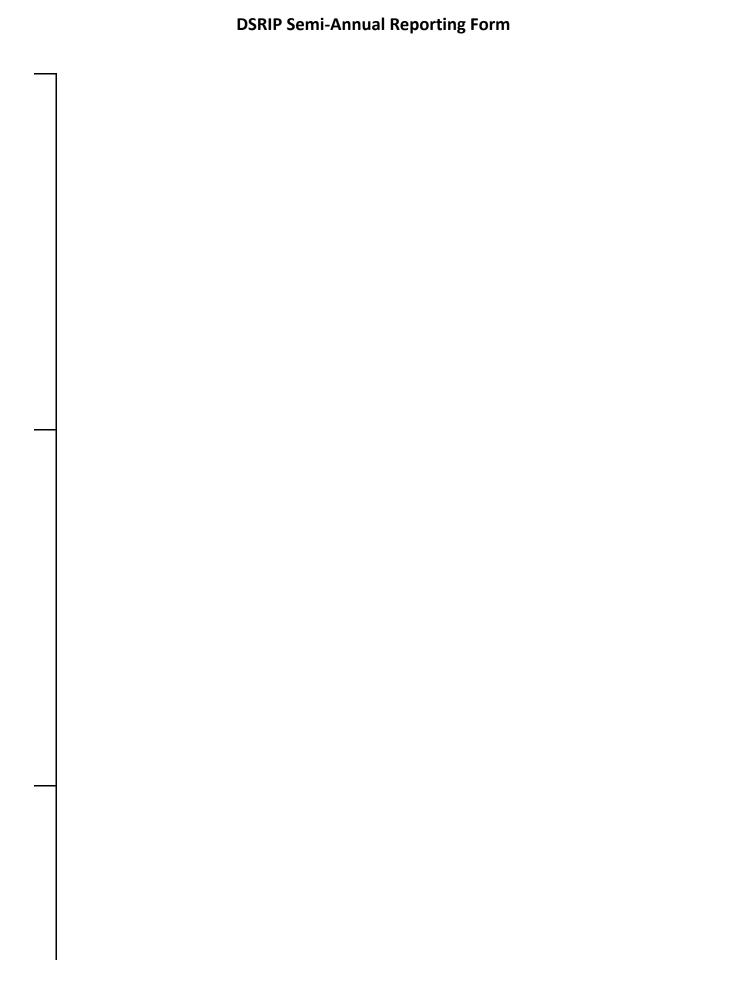
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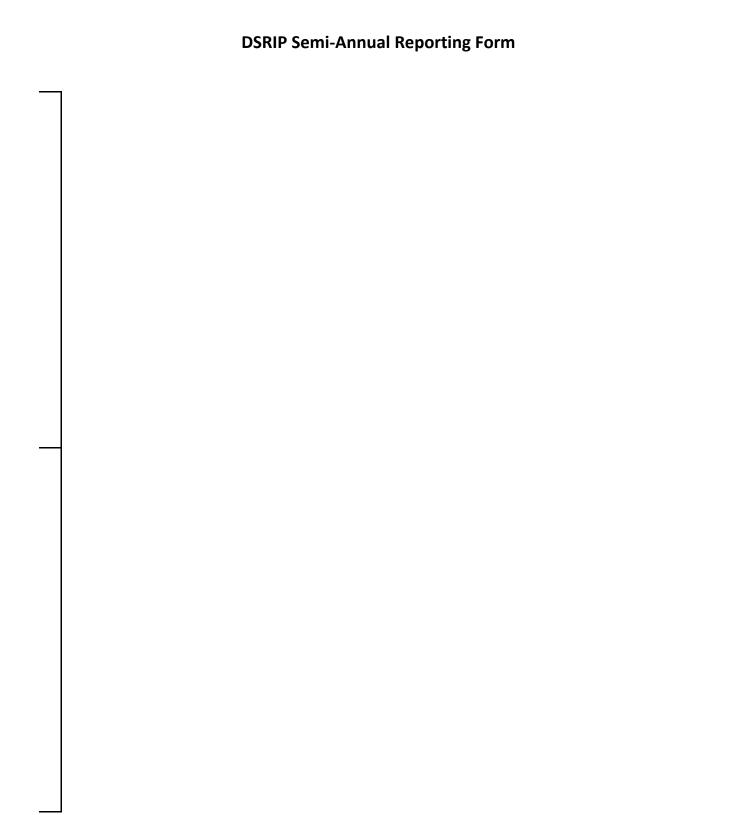
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| n plan) or enter "yes" if "yes/no" type of milestone | * |
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CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Implement/Expar

* Instructions for DPH systems
please type in all of your DY m

* The yellow boxes indicate wh
The black boxes indicate N
The blue boxes show prog
populate and flow to summ

Implement/Expand Care Ti

DY Total Computable Incentive

Incentive Funding Already Rece

Process Milestone:

Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

Milestone results/progress: The of the care transitions program the transitions work. For all Med Monday-through Friday. In this rup and makes all of the follow-u (cardiology is just beginning this work above their regular percent

DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the milestone description of progress towards miles

| C | Category 2: implement/Expar | | |
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| | DY Target (from the DPH syster | | |
| | Achievement Value | | |

Category 2: Implement/Expar **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Process Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

5/31/2013 Care Transitions 621 of 834

Category 2: Implement/Expar

Improvement Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

Milestone results/progress: The was achieved. In October 2011, neurovascular patient population documented medication reconci metrics that are shared with the where we also look at readmissi receive both documented medic

DY Target (from the DPH syster

Achievement Value

Improvement Milestone:

Numerator (if N/A, use "yes/no"

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Achievement

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DY Target (from the DPH syster

Achievement Value

Improvement Milestone:

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Category 2: Implement/Expar **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value **Improvement Milestone:** Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement If "yes/no" as to whether the milesto description of progress towards miles DY Target (from the DPH syster Achievement Value

teform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

nd Care Transitions Programs

he DPH system.

:: Please select above whether you are reporting on this project. If 'yes', ilestones for the project below and report data in the indicated boxes (*). Here the DPH system should input data

filestones and will automatically populate and flow to summary sheets ress made toward the Milestone ("Achievement Value") and will automatically nary sheets

| nary sheets | |
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| ransitions Programs | |
| Amount: | * \$ 5,261,760.00 |
| ived in DY: | * \$ 5,261,760.00 |
| Develop a staffing and implementation plan to accomplish the goals/objectives of the care transitions program | |
| (insert milestone) | |
| form below; if absolute number, enter here) | * |
| r, enter "1") | * |
| | Yes |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth | |
| stone achievement as stated in the instructions: | * Yes |
| development of a staffing and implementation plan to accomplish the goals and objectives was achieved. Currently, we are trying two different staffing models at UCSF to perform licine patients, regardless of location, we have 1.0 full-time RN discharge coordinator role she is able to meet with high risk patients prior to discharge, perform pro-active follow-p phone calls to all medicine patients. On the neurology and the cardiology services work) we tried a different model, which was to identify bedside nurses willing to do this tage and to provide them with time (0.25FTE/10 hours per week) to perform follow-up | |
| n plan) or enter "yes" if "yes/no" type of milestone | * Yes |
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| | |
| (insert milestone) | |
| form below; if absolute number, enter here) | * |
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: | * |

| 1d Care Transitions Programs | | |
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nd Care Transitions Programs (insert milestone) form below; if absolute number, enter here) er, enter "1") ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: n plan) or enter "yes" if "yes/no" type of milestone (insert milestone) form below; if absolute number, enter here) er, enter "1") ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: n plan) or enter "yes" if "yes/no" type of milestone (insert milestone) form below; if absolute number, enter here) r, enter "1") ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions:

| nd Care Transitions Programs | |
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nd Care Transitions Programs

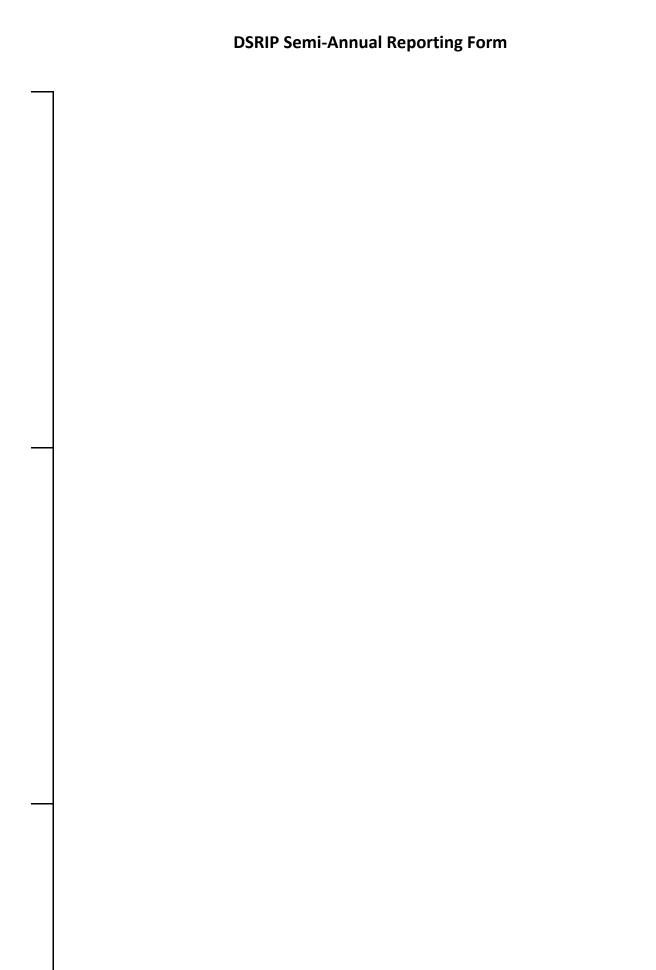
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| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: | * Yes |
| implementation of standard care transitions processes in one additional patient population we implemented our standard care transitions processes with the neurology and ns. We have implemented a follow-up phone call program, ensuring patients have liation and have timely appointments. We have developed a dashboard of performance staff on a monthly basis and also shared at a larger readmissions steering committee, ions in this patient population. Our current metric reveals that about 53% of patients ation teaching and a follow-up phone call within 72 hours. The Medical center supports .25 | - |
| n plan) or enter "yes" if "yes/no" type of milestone | * Yes |
| | 1.00 |
| | |
| (insert milestone) | - |
| form below; if absolute number, enter here) | * |
| er, enter "1") | * |
| n, onto 1) | N/A |
| | N/A |
| ne has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth stone achievement as stated in the instructions: | * |
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| n plan) or enter "yes" if "yes/no" type of milestone | * |
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| form below; if absolute number, enter here) | |
| r, enter "1") | * |
| | N/A |

5/31/2013 Care Transitions 630 of 834

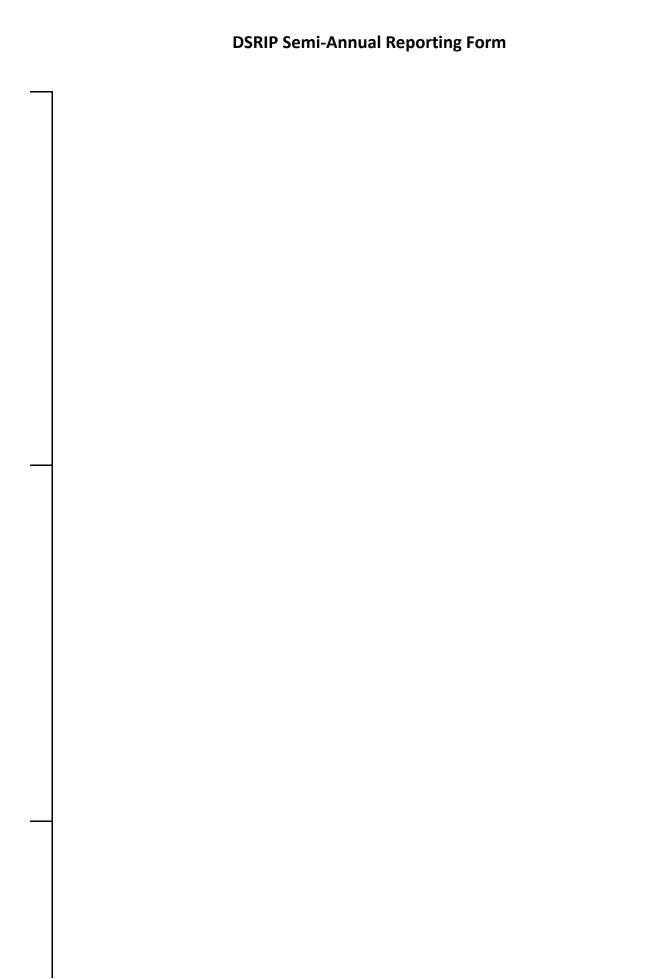
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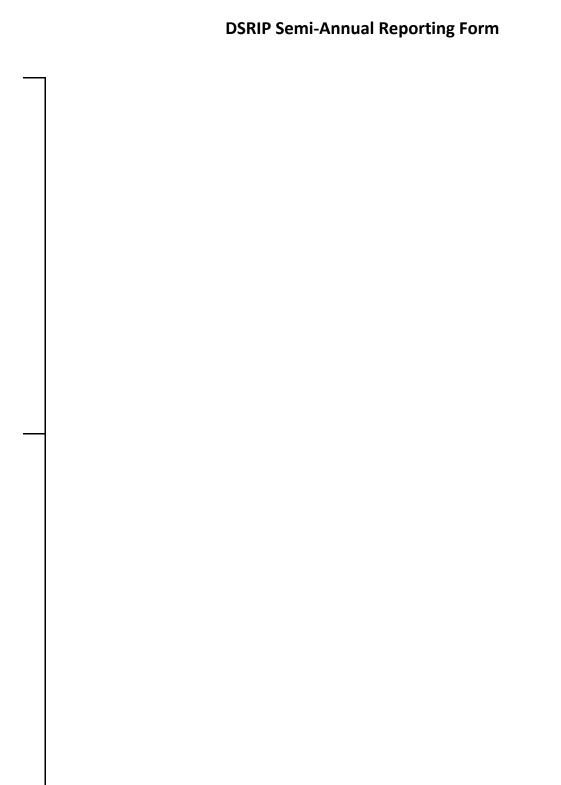
| 1d Care Transitions Programs | |
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5/31/2013 Care Transitions 636 of 834



5/31/2013 Care Transitions 638 of 834



CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 2: Implement Real-

* Instructions for DPH systems
please type in all of your DY mi

* The yellow boxes indicate wh
The black boxes indicate N
The blue boxes show prog
populate and flow to summ

Implement Real-Time Hosp

DY Total Computable Incentive

Incentive Funding Already Rece

Process Milestone:

Numerator (if N/A, use "yes/no" Denominator (if absolute numbe Achievement

If "yes/no" as to whether the milestonescription of progress towards miles

DY Target (from the DPH syster

Achievement Value

Process Milestone:

Numerator (if N/A, use "yes/no"

Denominator (if absolute numbe

Achievement

If "yes/no" as to whether the mileston description of progress towards miles

| С | ategory 2: Implement Real- |
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| | DY Target (from the DPH syster |
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| Category 2: Implement Real- | |
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| | Achievement Value |
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645 of 834

| Category 2: Implement Real- | | |
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teform Incentive Payments (DSRIP) The University of California, San Francisco Medical Center

stone achievement as stated in the instructions:

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| REPORTING ON THIS PROJECT: | * No |
| Time Hospital-Acquired Infections (HAIs) System | |
| he DPH system. :: Please select above whether you are reporting on this project. If 'yes', ilestones for the project below and report data in the indicated boxes (*). iere the DPH system should input data // illestones and will automatically populate and flow to summary sheets ress made toward the Milestone ("Achievement Value") and will automatically nary sheets | |
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5/31/2013 Real-Time HAIs System 647 of 834

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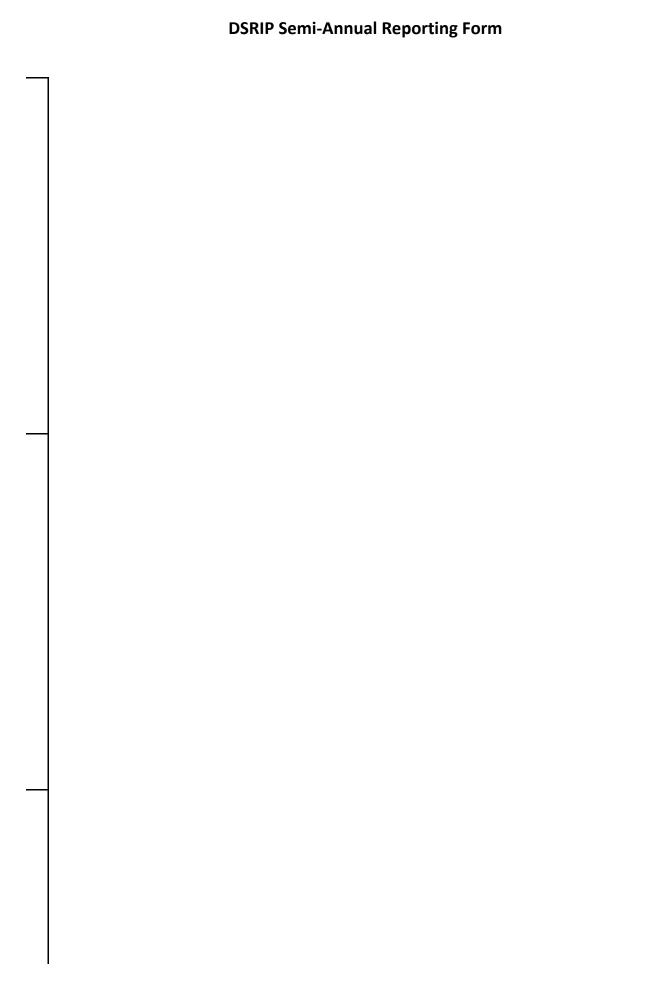
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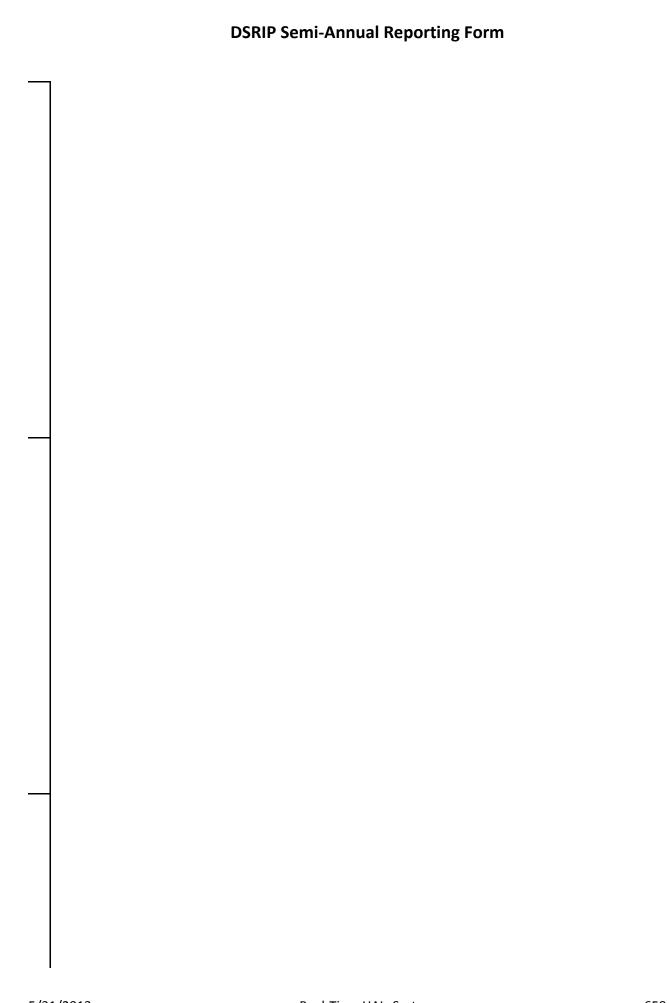
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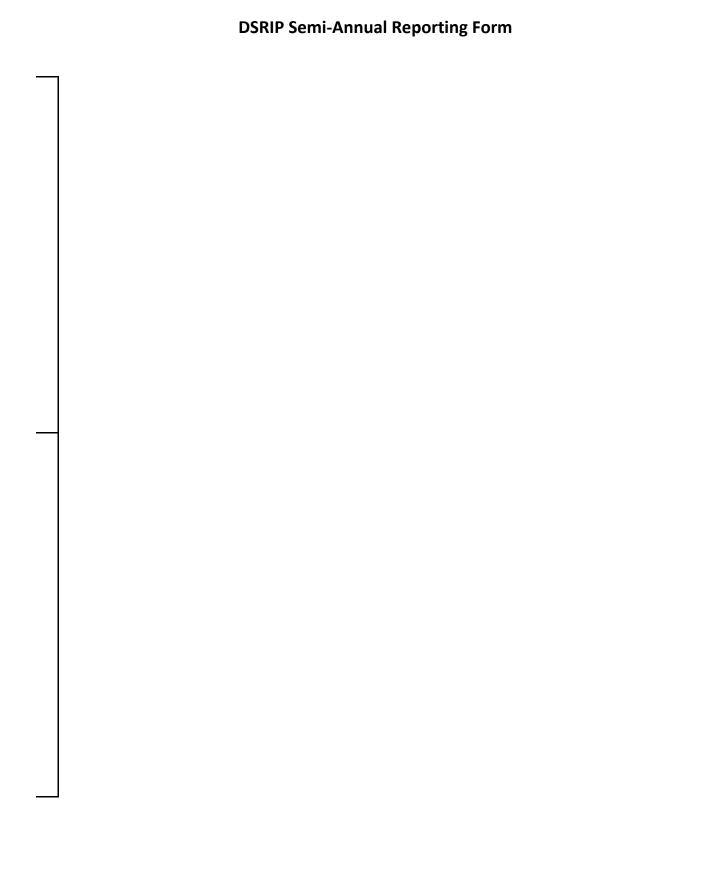












CA 1115 Waiver - Delivery Syste **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: Category 3: Patient/Care 6 Below is the data reported for * Instructions for DPH syste in the indicated boxes (*). N The yellow boxes indicate The black boxes indicat The blue boxes show p populate and flow to sur Patient/Care Giver Expe DY Total Computable Incent Incentive Funding Already R **Undertake the necessary** negotiations in order to Provide an in-depth description o assumed for applicable DY. If so, I Milestone results/progress: 1 implement CG-CAHPS in DY Ganey Associates Inc. to cor primary care practices. In co all required DSRIP questions has been developed in Engli UCSF has chosen to sample Achievement Achievement Value Report results of CG CA and Information" theme Top-box score composite of Enter the percentage of resp Provide an in-depth description o assumed for applicable DY. If so, J

Category 3: Patient/Care 6

Achievement

Achievement Value

Category 3: Patient/Care 6 Report results of CG CA Patients" theme to the S Top-box score composite of Enter the percentage of resp Provide an in-depth description o assumed for applicable DY. If so, J Achievement Achievement Value Report results of CG CA Staff" theme to the State Top-box score composite of Enter the percentage of resp Provide an in-depth description o assumed for applicable DY. If so, I Achievement Achievement Value Report results of CG CA theme to the State (DY8-Top-box score composite of Enter the percentage of resp Provide an in-depth description o assumed for applicable DY. If so, J

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Report results of CG CA theme to the State (DY8-Top-box score composite of Enter the percentage of resp Provide an in-depth description of assumed for applicable DY. If so, J

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m Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

Siver Experience (required)

or the DPH system.

ms: Please type in all of your DY milestones for the project below and report data lote: for DY8, data from the last 2 quarters shall suffice.

- where the DPH system should input data
- :e Milestones and will automatically populate and flow to summary sheets rogress made toward the Milestone ("Achievement Value") and will automatically mmary sheets

| rience (required) |
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| ive Amount: |
| eceived in DY: |
| y planning, redesign, translation, training and contract implement CG-CAHPS in DY8 (DY7 only) |
| <u>f</u> milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is please explain why data is not available): |
| The necessary planning, redesign, translation, training and contract negotiations in order to /8 have been achieved. UCSF Medical Center has contracted with the survey firm Pressnduct weekly surveying of a random sample of patients in all of the medical center's adult llaboration with Press Ganey, UCSF has created an integrated patient survey that includes and components, along with additional survey questions and comment areas. The survey sh and Spanish. We began mailing the survey to patients beginning with April 2, 2012 visits. Patients at the individual clinic level, so that we can identify specific strengths and areas for |
| HPS questions for "Getting Timely Appointments, Care, to the State (DY8-10) all questions within this theme from all returned surveys: |
| onses that fell in the most positive response category |
| f milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is please explain why data is not available): |
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| Giver Experience (required) | | |
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| HPS questions for "How Well Doctors Communicate With Itate (DY8-10) | |
| all questions within this theme from all returned surveys: onses that fell in the most positive response category | * |
| of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is please explain why data is not available): | |
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| HPS questions for "Helpful, Courteous, and Respectful Office (DY8-10) | |
| all questions within this theme from all returned surveys: onses that fell in the most positive response category | * |
| of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is please explain why data is not available): | |
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| HPS questions for "Patients' Rating of the Doctor" -10) | |
| all questions within this theme from all returned surveys: onses that fell in the response categories 9 and 10 | * |
| f milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is please explain why data is not available): | |
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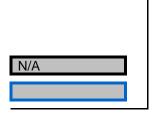
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| Siver Experience (required) |
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| HPS questions for "Shared Decisionmaking" -10) |
| all questions within this theme from all returned surveys: onses that fell in the most positive response category |
| of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is please explain why data is not available): |
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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: The University of California, San Francisco Medical Center

REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 3: Care Coordination (required)

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please type in all of your DY milestones for the project below and report in the indicated boxes (*).

The yellow boxes indicate where the DPH system should input data

The black boxes indicate Milestones and will automatically populate and flow to summary sheets
The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatic

populate and flow to summary sheets

| Care Coordination (required |
|-----------------------------|
|-----------------------------|

DY Total Computable Incentive Amount:

Incentive Funding Already Received in DY:

Report results of the Diabetes, short-term complications measure to the State (DY7-10)

Data Collection Source *

Numerator *

Denominator *

Rate

<u>Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):</u>

Milestone results/progress: Between July 1, 2011-June 30, 2012 there were only 4 patients admitted out of 2290 patients in our primary care panel denominator (rate 0.2%) who were admitted to UCSF with a primary diagnosis of a short term complication from diabetes, as specified by the ICD 9 codes for this measure.

Barriers and solutions: The feedback we received from our DY-7 1st semi-annual report suggested that this number was extremely low. To that end, we expanded our search to look for patients with any diagnosis for a short term diabetes complication, not just the primary diagnosis, and this increased our rate only by one

Achievement

Achievement Value

Report results of the Uncontrolled Diabetes measure to the State (DY7-10)

Data Collection Source *

Numerator *

Denominator *

Rate

Provide an in-depth description of milectone progress as stated in the instructions. (If no data is entered, then a 0

Category 3: Care Coordination (required) Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Milestone results/progress: Between July 1, 2011-June 30, 2012 there were 0/2290 patients (rate 0.0%) who were admitted to UCSF with a primary diagnosis of uncontrolled diabetes, as specified by the ICD 9 codes for this measure.

Barriers and solutions: The feedback we received from our first DY-7 1st semi-annual report suggested that this number was extremely low. To that end, we expanded our search to look for patients with any diagnosis of uncontrolled diabetes, not just the primary diagnosis, and this increased our rate to 2/2290 patients (rate 0.2%). Again, we think this number is suggestive of the quality of diabetes care patients are

Achievement

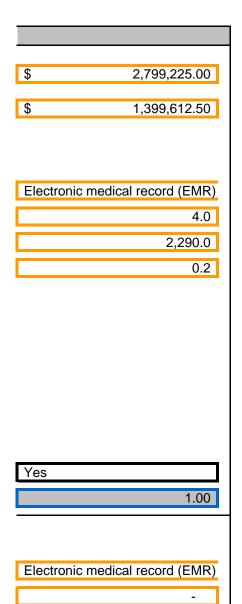
Achievement Value

Category 3: Care Coordination (required)

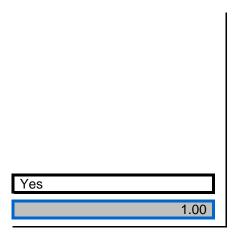
| Report results of the Congestive Heart Failure measure to the State (DY8-10) |
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| Data Collection Source |
| Numerator |
| Denominator |
| Rate |
| Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): |
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| Achievement Value |
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| Report results of the Chronic Obstructive Pulmonary Disease measure to the State (DY8-10) Data Collection Source |
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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: The University of California, San Francisco Medical Center

REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 3: Preventive Health (required)

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please type in all of your DY milestones for the project below and report in the indicated boxes (*).

The yellow boxes indicate where the DPH system should input data

The black boxes indicate Milestones and will automatically populate and flow to summary sheets The blue boxes show progress made toward the Milestone ("Achievement Value") and will automati

populate and flow to summary sheets

DY Total Computable Incentive Amount:

Incentive Funding Already Received in DY:

Report results of the Mammography Screening for Breast Cancer measure to the State (DY7-10)

Data Collection Source *

Numerator *

Denominator *

Rate

Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Milestone results/progress: Between July 1, 2011-June 30, 2012 there were 3101/4,654 patients (66.63%) screened for breast cancer.

Barriers and solutions: Due to the transition from paper and other electronic systems to our new Epic EMR, we found that much of the mammography screening data existed in this hybrid of medical records. We have hired data abstractors to identify mammography screening data in the paper charts at each clinic and to populate the data fields for mammography screening in the new EMR, but this work is slow-going.

Description and evaluation of training programs: Mammography screening is one of the areas covered and

Achievement

Achievement Value

Reports results of the Influenza Immunization measure to the State (DY7-10)

Data Collection Source *

Numerator *

Denominator *

Rate

Provide an in-denth description of milestone progress as stated in the instructions. (If no data is entered, then a 0

Category 3: Preventive Health (required)

The second of th Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Milestone results/progress: Between July 1, 2011-June 30, 2012 there were 3567/11,149 patients (32%) were immunized for influenza. This influenza immunization rate is mostly reflective of the flu shots that patients received in our clinics.

Barriers and solutions: As yet, we do not have a good process or experienced culture in place to ensure that flu shots that are received at other venues, like a pharmacy or external clinic, are documented in the patient record. In addition, within UCSF's clinics, the recently installed EMR system only allowed for vaccination tracking in a free form data field collection. This has had a negative effect on accurately

Achievement

Achievement Value

Category 3: Preventive Health (required)

| Report results of the Child Weight Screening measure to the State (DY8-10) |
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| Data Collection Source * |
| Numerator * |
| Denominator * |
| Rate |
| Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): |
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| Report results of the Pediatrics Body Mass Index (BMI) measure to the State (DY8-10) |
| Data Collection Source * |
| Numerator * |
| Denominator * |
| Rate |
| Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): |
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| Achievement |
| Achievement Value |
| Report results of the Tobacco Cessation measure to the State (DY8-10) Data Collection Source * |
| Numerator * |

Category 3: Preventive Health (required) Denominator Rate Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): Achievement Achievement Value

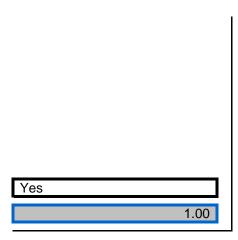
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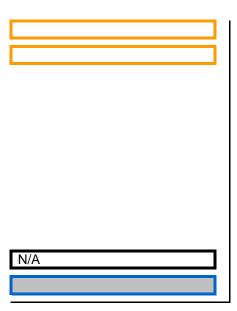
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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: The University of California, San Francisco Medical Center

REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 3: At-Risk Populations (required)

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please type in all of your DY milestones for the project below and report in the indicated boxes (*). For the last two measures, which are both diabetes composite measures, ple follow the instructions on specifically how to calculate the composite measures (available based on NQF endorsement).

The yellow boxes indicate where the DPH system should input data

The black boxes indicate Milestones and will automatically populate and flow to summary sheets

The blue boxes show progress made toward the Milestone ("Achievement Value") and will automati populate and flow to summary sheets

| At-Risk Po | pulations (| (required) |
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DY Total Computable Incentive Amount:

Incentive Funding Already Received in DY:

Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State (DY7-10)

Data Collection Source

Numerator *

Denominator *

Rate

Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Milestone results/progress: Between July 1, 2011-June 30, 2012 there were 1114/2290 patients (48.6%) with diabetes that had LDL control <100mg/dl.

Approaches to test or refine interventions: In conjunction with our registry utilization for diabetic patients, we have begun active in-reach and outreach with our diabetic patients to ensure that LDL levels are drawn in a timely fashion and that these results are reported to the providers. Registries are currently in use in our UPC and Lakeshore clinics and panel manager are actively working with their diabetic populations.

Achievement

Achievement Value

Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<8%) measure to the State (DY7-10)

Data Collection Source *

Numerator *

Denominator *

Category 3: At-Risk Populations (required)

Rate

<u>Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):</u>

Milestone results/progress: Between July 1, 2011-June 30, 2012 there were 1421/2290 patients (62.1%) with diabetes that had a Hemoglobin A1C level <8%.

Approaches to test or refine interventions: In conjunction with our registry utilization for diabetic patients, we have begun active in-reach and outreach with our diabetic patients to ensure that HbgA1C levels are drawn in a timely fashion and that these results are reported to the providers. Registries are currently in use in our UPC and Lakeshore clinics and panel manager are actively working with their diabetic populations.

Achievement

Achievement Value

Category 3: At-Risk Populations (required)

| Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State (DY8-10) |
|---|
| Data Collection Source * |
| Numerator * |
| Denominator * |
| Rate |
| Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): |
| |
| Achievement |
| Achievement Value |
| Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State (DY8-10) Data Collection Source |
| Numerator * |
| Denominator * |
| Rate |
| Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): |
| |
| Achievement |
| Achievement Value |
| Report results of the Pediatrics Asthma Care measure to the State (DY8-10) Data Collection Source * Numerator |

Category 3: At-Risk Populations (required)

| Denominator |
|---|
| Rate |
| Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): |
| |
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| |
| Achievement |
| Achievement Value |

Category 3: At-Risk Populations (required)

| Report results of the Optimal Diabetes Care Composite to the State (DY8-10) | |
|---|-------|
| Data Collection Source | * |
| Numerator | * |
| Denominator | * |
| Rate | |
| Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): | |
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| Achievement | _ |
| | |
| Achievement Value | |
| | |
| Report results of the Diabetes Composite to the State (DY8-10) | |
| Report results of the Diabetes Composite to the State (DY8-10) Data Collection Source | * |
| | * |
| Data Collection Source | * * |
| Data Collection Source Numerator | * * |
| Data Collection Source Numerator Denominator | * * |
| Data Collection Source Numerator Denominator Rate Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 | * * |
| Data Collection Source Numerator Denominator Rate Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 | * * * |
| Data Collection Source Numerator Denominator Rate Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 | * * |
| Data Collection Source Numerator Denominator Rate Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 | * * |
| Data Collection Source Numerator Denominator Rate Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 | * * * |
| Data Collection Source Numerator Denominator Rate Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): | * * * |

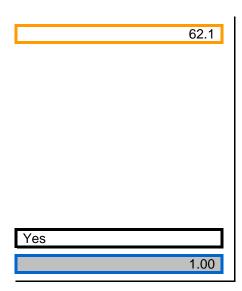
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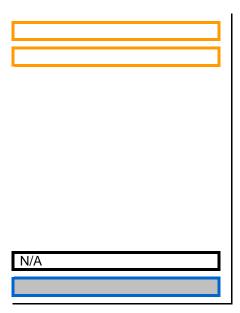
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|-------------------|----------------|
| _ | |
| \$ | 1,399,612.50 |
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| Electronic medica | l record (EMR) |
| | 1,114.0 |
| | 2,290.0 |
| | 48.6 |
| | |

Yes 1.00

Electronic medical record (EMR)
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2,290.0



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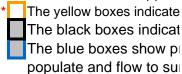


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CA 1115 Waiver - Delivery Syste DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 4: Severe Sepsis

Below is the data reported for Instructions for DPH syste in the indicated boxes (*).



Severe Sepsis Detection

DY Total Computable Incent

Incentive Funding Already R

Compliance with Sepsis

Numerator

Denominator

% Compliance

Provide an in-depth description Value is assumed for applicable

Milestone results/progress: E 113/290, (38.97%). Please s

DY Target (from the DPH sy:

% Achievement of Target

Achievement Value

Optional Milestone:

Numerator (if N/A, use "yes/r

Denominator (if absolute nur

Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

Milestone results/progress: 1

Category 4: Severe Sepsis

Initiative with the formation o Group/Julie Kliger) to develo management of sepsis, seve be in patients admitted throu of physicians, nurses and ph pilot and test ways to impler

DY Target (from the DPH sy:

Achievement Value

Category 4: Severe Sepsis

Optional Milestone:

Numerator (if N/A, use "yes/r

Denominator (if absolute nur

Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

Milestone results/progress: 1 purposes of establishing a badate range between June-Nadefinition of bundle implemed Our amended sepsis resusci compliance is 54/128 (42.19)

DY Target (from the DPH sys

Achievement Value

Optional Milestone:

Numerator (if N/A, use "yes/r

Denominator (if absolute nur

Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

DY Target (from the DPH sy:

Achievement Value

Optional Milestone:

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Denominator (if absolute nur

Achievement

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| of progress towards milestone ac |
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| or progress towards fillestone ac |
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| DY Target (from the DPH sy: |
| Achievement Value |

Category 4: Severe Sepsis Optional Milestone: Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile

| Category 4: Severe Sepsis |
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| of progress towards milestone ac |
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| DV Torget (from the DDH av |
| DY Target (from the DPH sy |
| Achievement Value |
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Category 4: Severe Sepsis Optional Milestone: Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement

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| Category 4: Severe Sepsis |
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| DY Target (from the DPH sys |
| Achievement Value |
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m Reform Incentive Payments (DSRIP) The University of California, San Francisco Medical Center

3 Detection and Management (required)

or the DPH system.

ms: Please type in all of your DY milestones for the project below and report data

where the DPH system should input data

:e Milestones and will automatically populate and flow to summary sheets rogress made toward the Milestone ("Achievement Value") and will automatically mmary sheets

| n and Management |
|---|
| ive Amount: |
| TVC Allound. |
| eceived in DY: |
| Resuscitation bundle (%) |
| * |
| * |
| |
| of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement e DY. If so, please explain why data is not available): |
| Between July 1, 2011-June 30, 2012 the UCSF sepsis resuscitation bundle compliance was |
| ee details about bundle implementation below |
| |
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| |
| stem plan, if appropriate) * |
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| |
| |
| Implement sepsis rescuscitation bundle (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
| mon, onto |
| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description |
| hievement as stated in the instructions: |
| The implementation of the sepsis resuscitation bundle was achieved. We launched our Sepsis |

5/31/2013 Sepsis 708 of 834

3 Detection and Management (required)

of a multidisciplinary team, as well as retaining the services of a consultant group (The Altos p organization wide sepsis screening tools and protocols for early identification and sepsis and septic shock. Our greatest opportunities for improvement were determined to ghost the Emergency Department and on 14 Moffitt, 14 Long, 9 and 13 ICU's. Unit based teams armacists as well as the members of the Rapid Response Team are using PDSA cycles, to tent and sustain these new protocols.

stem plan) or enter "yes" if "yes/no" type of milestone

Detection and Management (required)

| Report at least 6 months of data collection on Sepsis Resuscitation Bundle to SNI for purposes of establishing the baseline and setting benchmarks |
|---|
| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: |
| The reporting of 6 months of baseline data on the Sepsis Resuscitation Bundle to SNI for the aseline and setting benchmarks was achieved. Our initial baseline data was gathered for the ovember 2011. Our initial baseline data was erroneous, as we reported a much narrower ntation using the INLP definitions through the SNI collaborative, that rate was 39/128 (30%). itation bundle baseline for June-November 2011, using the DSRIP definitions of bundle %) |
| stem plan) or enter "yes" if "yes/no" type of milestone |
| |
| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: |
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| stem plan) or enter "yes" if "yes/no" type of milestone |
| stem plan) of enter yes in yes/no type of milestone |
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| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
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estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description

| bievement as stated in the instructions: | * |
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| stem plan) or enter "yes" if "yes/no" type of milestone | * |
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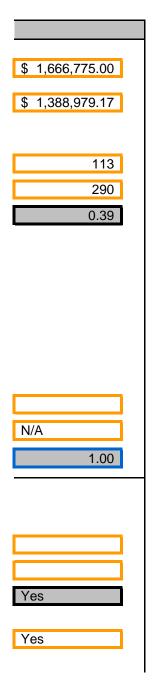
| Detection and Management (required) |
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| |
| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description |
| hievement as stated in the instructions: |
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| stem plan) or enter "yes" if "yes/no" type of milestone |
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| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description |
| hievement as stated in the instructions: |
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| stem plan) or enter "yes" if "yes/no" type of milestone |
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| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
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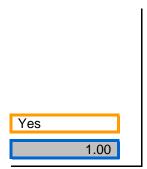
estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description

| bievement as stated in the instructions: | * |
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| stem plan) or enter "yes" if "yes/no" type of milestone | * |
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| Detection and Management (required) |
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| |
| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description |
| hievement as stated in the instructions: |
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| stem plan) or enter "yes" if "yes/no" type of milestone |
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| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
| |
| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description |
| hievement as stated in the instructions: |
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| stem plan) or enter "yes" if "yes/no" type of milestone |
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| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") |
| |
| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: |

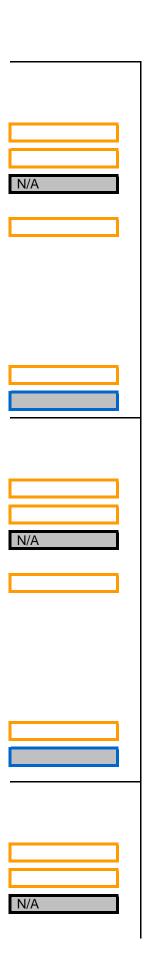
| Detection and Management (required) | |
|---|---|
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| stem plan) or enter "yes" if "yes/no" type of milestone | * |
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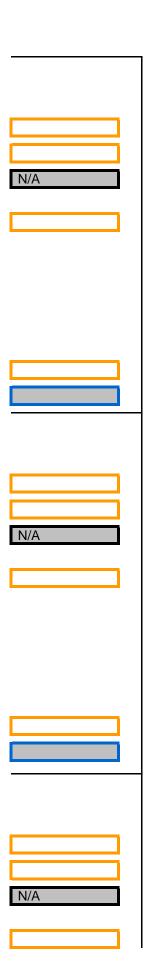


54.00 128.00 0.42 Yes Yes 1.00 N/A







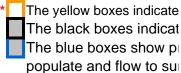




CA 1115 Waiver - Delivery Syste DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 4: Central Line A

Below is the data reported for Instructions for DPH syste in the indicated boxes (*).



Central Line Associated

DY Total Computable Incent

Incentive Funding Already R

Compliance with Centra

Numerator

Denominator

% Compliance

Provide an in-depth descriptior Value is assumed for applicabl

Report CLIP Results to the \$\int \text{Milestone results/progress: E} (97.0%).Please see descript

DY Target (from the DPH sy:

% Achievement of Target

Achievement Value

Optional Milestone:

Numerator (if N/A, use "yes/r

Denominator (if absolute nur

Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

Milestone results/progress: I

Category 4: Central Line A

with every central line inserti sterile barriers is used. Every completing a "CLIP note" wh procedure note and therefore necessity and condition of th At UCSF. a medical staff pol

DY Target (from the DPH sy:

Achievement Value

Category 4: Central Line A

Optional Milestone:

Numerator (if N/A, use "yes/r

Denominator (if absolute nur

Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

Milestone results/progress: 1 of establishing a baseline an baseline rate for 6 months of misinterpretation of the CLIP As requested by SNI and the include a 12 consecutive mo for October 2010-September

DY Target (from the DPH sy:

Achievement Value

Optional Milestone:

Numerator (if N/A, use "yes/r

Denominator (if absolute nur

Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

Milestone results/progress: 1 establishing a baseline and s rate for 6 months of data (De device days, (1.8 CLABSI/10 As requested by SNI and the reported) and the amended I CLABSI/1000 device days).

DY Target (from the DPH sy:

Achievement Value

Optional Milestone:

Numerator (if N/A, use "yes/r

Denominator (if absolute nur

Achievement

| If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH system) | Category 4: Central Line A |
|--|-----------------------------|
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| Achievement Value | DY Target (from the DPH sys |
| Homevernent value | Achievement Value |

Category 4: Central Line A **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement

If "yes/no" as to whether the mile

| Category 4. Central Line P |
|----------------------------------|
| of progress towards milestone ac |
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| DY Target (from the DPH sy: |
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| Achievement Value |

Category 4: Central Line A Optional Milestone: Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value

m Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

Associated Blood Stream Infection (CLABSI) (required)

or the DPH system.

ms: Please type in all of your DY milestones for the project below and report data

where the DPH system should input data

e Milestones and will automatically populate and flow to summary sheets rogress made toward the Milestone ("Achievement Value") and will automatically mmary sheets

| Blood Stream Infection |
|--|
| ive Amount: |
| eceived in DY: |
| I Line Insertion Practices (CLIP) (%) |
| * |
| * |
| of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement le DY. If so, please explain why data is not available): |
| State 3etween July 1, 2011-June 30, 2012 the UCSF CLIP compliance was 1286/1324, ion of implementation of CLIP below for details. |
| |
| stem plan) * |
| |
| |
| Implement Central line insertion practices |
| (insert milestone) |
| no" form below; if absolute number, enter here) |
| nber, enter "1") * |
| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description |
| hievement as stated in the instructions: |
| mplementation of central line insertion practices was achieved. It is our policy at UCSF that |

5/31/2013 CLABSI 731 of 834

Associated Blood Stream Infection (CLABSI) (required)

on, best practices in the form of hand hygiene, appropriate skin prep, and the use of maximal / provider who places a line, documents adherence to the central line insertion bundle by ich is incorporated into our current electronic medical record. This note also serves as the e we have found significant provider compliance. In addition, the nursing staff assess the e central line every day and they discuss the ongoing need for the line with the physician staff. icv committee accorded the responsibility for daily assessment of necessity of a central line to

stem plan) or enter "yes" if "yes/no" type of milestone

ssociated Blood Stream Infection (CLABSI) (required)

| Report at least 6 months of data collection on CLIP to SNI for purposes of establishing the baseline and setting benchmarks | |
|---|---|
| (insert milestone) | |
| no" form below; if absolute number, enter here) | * |
| nber, enter "1") | * |
| | |
| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: The reporting of at least 6 consecutive months of baseline data on CLIP to SNI for the purpose d setting benchmarks was achieved. Our report On March 30, 2012 reflected our initial | * |
| data and that baseline rate for CLIP at UCSF was 319/431 (74%); these data reflected a | |
| data definitions. State, we amended our baseline to use the NHSN definition and expanded our data to nths of data (including the 6 months initially reported) and the amended aggregate baseline : 2011 for CLIP compliance is 1310/1350 (97.04%). | |
| stem plan) or enter "yes" if "yes/no" type of milestone | * |
| | |
| Report at least 6 months of data collection on CLABSI to SNI for purposes of establishing the baseline and setting benchmarks (insert milestone) | |
| · | |
| no" form below; if absolute number, enter here) | |
| nber, enter "1") | * |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description | |
| hievement as stated in the instructions: | * |
| The reporting of at least 6 months of baseline data on CLABSI to SNI for the purpose of setting benchmarks was achieved. Our report on March 30, 2012 reflected our initial baseline scember 2010-May 2011) and that baseline rate for CLABSI at UCSF was 62 CLABSI/34391 1000 device days). | |
| State, we expanded our data to include 12 months of data (including the 6 months initially | |
| paseline for the date range October 2010-September 2011, is 108/67938 device days (1.6 | |
| stem plan) or enter "yes" if "yes/no" type of milestone | * |
| | |
| · | |
| (insert milestone) | |
| no" form below; if absolute number, enter here) | * |
| nber, enter "1") | * |

Associated Blood Stream Infection (CLABSI) (required)

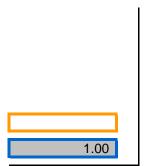
| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth de | escription |
|---|------------|
| hievement as stated in the instructions: | • |
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| stem plan) or enter "yes" if "yes/no" type of milestone | , |
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Associated Blood Stream Infection (CLABSI) (required) (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1")

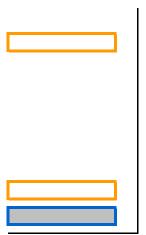
estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description

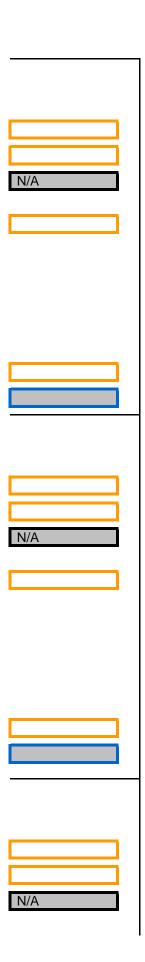
| | (insert milestone) |
|--|---|
| no" form below; if absolute number, ente | er here) |
| nber, enter "1") | |
| | from the dropdown menu, and provide an in-depth description |
| hievement as stated in the instructions: | |
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| stem plan) or enter "yes" if "yes/no" type | e of milestone |
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| nber, enter "1") | |
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\$ 1,929,950.00 \$ 1,688,706.50 1,286.00 1,324.00 0.97 N/A 1.00 Yes Yes

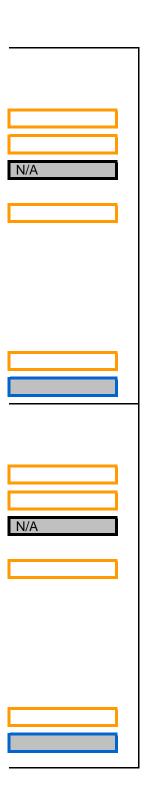


1,310.00 1,350.00 0.97 Yes 1.00 108.00 67,938.00 0.00 Yes 1.00 N/A









CA 1115 Waiver - Delivery Syste DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 4: Surgical Site I

* Instructions for DPH syste
please type in all of your DY

* The yellow boxes indicate
The black boxes indicat
The blue boxes show populate and flow to sur

Surgical Site Infection F

DY Total Computable Incent

Incentive Funding Already R

Rate of surgical site infe

Numerator

Denominator

% Infection Rate

Provide an in-depth description Value is assumed for applicable

Milestone results/progress: E Category Wound Class 1-2 Time Period # Surgeries # S Appendectomy Jul-11 Jun-1: Colon Surgery Jul-11 Jun-12 C-section Jul-11 Jun-12 413 Knee Arthroplasty Jul-11 Jur

DY Target (from the DPH sy:

% Achievement of Target

Achievement Value

Optional Milestone:

Numerator (if N/A, use "yes/t Denominator (if absolute nur

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Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

Category 4: Surgical Site I

Milestone results/progress: 1 (appendectomy, colon, C-sebaseline and setting benchm months of data and our base As requested by SNI and the (including the 6 month period For our baseline data, the interpretation)

DY Target (from the DPH sys

Achievement Value

Category 4: Surgical Site I

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| Optional Milestone: |
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| Achievement Value |
| Optional Milestone: |
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| Category 4: Surgical Site I |
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Category 4: Surgical Site I **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sys Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value

m Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

nfection Prevention

REPORTING ON THIS PROJECT:

or the DPH system.

ms: Please select above whether you are reporting on this project. If 'yes',

'milestones for the project below and report data in the indicated boxes (*).

where the DPH system should input data

ie Milestones and will automatically populate and flow to summary sheets
rogress made toward the Milestone ("Achievement Value") and will automatically mmary sheets

Prevention

ive Amount:

ction for Class 1 and 2 wounds (%)

<u>of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement le DY. If so, please explain why data is not available):</u>

Between July 1, 2011-June 30, 2012 the UCSF SSI rate was 52/1613 (3.22%).

SSIs SSI Rate 2 200 2 1.00% 1 207 8 3.86% 15 3.63% 1-12 406 7 1.72%

eceived in DY:

stem plan)

Report at least 6 months of data collection on the following SSI's to SNI for the purpose of establishing the baseline and setting benchmarks: appendix, colon, csection, knee prothesis, rectal and small bowel

(insert milestone)

no" form below; if absolute number, enter here)

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estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions:

5/31/2013 SSI 750 of 834

nfection Prevention

The reporting at least 6 months of data for the baseline data on the following SSI ction, knee prosthesis, rectal and small bowel) to SNI for the purposes of establishing a larks was achieved. Our report on March 30, 2012, reflected our initial baseline rate for 6 line rate for SSI at UCSF was 6.8%.

• State we amended our baseline and expanded our data to include 12 months of data distinitially reported) and the amended aggregate baseline rate was 5.1%. Section control team and our infection control epidemiologists performed an in-depth analysis

stem plan) or enter "yes" if "yes/no" type of milestone

nfection Prevention

| (insert milestone) | |
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5/31/2013 SSI 752 of 834

| nfection Prevention | |
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nfection Prevention

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5/31/2013 SSI 754 of 834 Yes

\$ 1,929,950.00

\$ 1,447,462.50

52.00

1,613.00

0.03

N/A

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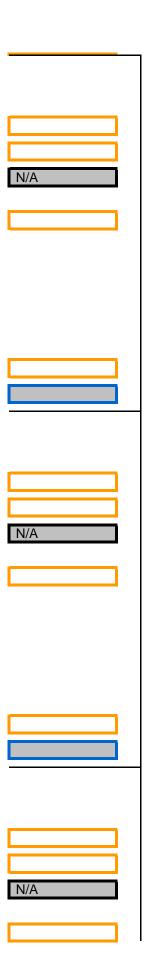
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1,648.00

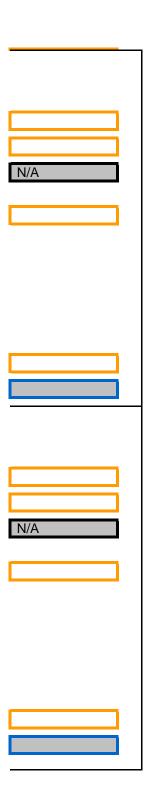
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Yes









CA 1115 Waiver - Delivery Syster DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:

Category 4: Hospital-Acqu

Below is the data reported for * Instructions for DPH syste please type in all of your DY * The yellow boxes indicate The black boxes indicate The blue boxes show propulate and flow to sur

Hospital-Acquired Press

DY Total Computable Incenting

Incentive Funding Already Re

Prevalence of Stage II, III

Numerator

Denominator

Prevalence (%)

Provide an in-depth description is assumed for applicable DY. I

Milestone results/progress: B stage II, III, IV or unstageable hospital acquired pressure ul Barriers and solutions: Air be air bed were required have a temporal barrier and often it veliminate this requirement, so

DY Target (from the DPH sys

% Achievement of Target

Achievement Value

Optional Milestone:

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Achievement

If "yes/no" as to whether the mile

Category 4: Hospital-Acqu

progress towards milestone achie

Milestone results/progress: C other organizations in the Sal with Stanford we have a Cent clinical practice innovations, i coordinate and facilitate research

DY Target (from the DPH sys

Achievement Value

Category 4: Hospital-Acqu **Optional Milestone:** Numerator (if N/A, use "yes/n Denominator (if absolute nur Achievement If "yes/no" as to whether the mile progress towards milestone achie DY Target (from the DPH sys Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/n Denominator (if absolute nur Achievement If "yes/no" as to whether the mile progress towards milestone achie DY Target (from the DPH sys Achievement Value

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Category 4: Hospital-Acqu **Optional Milestone:** Numerator (if N/A, use "yes/n Denominator (if absolute nur Achievement If "yes/no" as to whether the mile progress towards milestone achie DY Target (from the DPH sys Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/n Denominator (if absolute nur Achievement If "yes/no" as to whether the mile progress towards milestone achie

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Category 4: Hospital-Acqu If "yes/no" as to whether the mile progress towards milestone achie DY Target (from the DPH sys Achievement Value

Category 4: Hospital-Acqu **Optional Milestone:** Numerator (if N/A, use "yes/n Denominator (if absolute nur Achievement If "yes/no" as to whether the mile progress towards milestone achie DY Target (from the DPH sys Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/n Denominator (if absolute nur Achievement If "yes/no" as to whether the mile progress towards milestone achie DY Target (from the DPH sys Achievement Value

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n Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

ired Pressure Ulcer Prevention

REPORTING ON THIS PROJECT:

or the DPH system.

rms: Please select above whether you are reporting on this project. If 'yes', 'milestones for the project below and report data in the indicated boxes (*). where the DPH system should input data

e Milestones and will automatically populate and flow to summary sheets ogress made toward the Milestone ("Achievement Value") and will automatically mary sheets

sure Ulcer Prevention

ve Amount:

eceived in DY:

I, IV or unstagable pressure ulcers (%)

of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value fso, please explain why data is not available):

etween July 1, 2011-June 30, 2012 there were 13/1475 patients (0.88% prevalence rate) with pressure ulcers. UCSF Medical Center continues to move forward towards our goal of reducing cers. As our rates have steadily improved, our strategies have become more finely-tuned. ds are expensive. One policy barrier we had in place was that patients who potentially needed an skin assessment and the bed ordered by a clinical nurse specialist. This policy created a would be more than 24 hours before a patient received the bed. We changed our policy to that the bedside nurse can order an air bed directly, based on the patient's Braden score. This

stem plan)

Share data, promising practices and findings with California Health Care Safety Net Institute to foster shared learning and benchmarking across the California public hospitals

(insert milestone)

10" form below; if absolute number, enter here)

nber, enter "1")

stone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of

ired Pressure Ulcer Prevention

vement as stated in the instructions:

Dur pressure ulcer team is active in sharing our learning and best practices both with SNI and n Francisco Bay area. We participate on the SNI/HAPU list-serve and webinars. In collaboration ter for Nursing Research and Innovation, were we introduce and evaluate evidence-based n collaboration with clinical and administrative leaders in patient care. We also review, arch in patient care settings.

stem plan) or enter "yes" if "yes/no" type of milestone

ired Pressure Ulcer Prevention

| (insert milestone) | |
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ired Pressure Ulcer Prevention

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ired Pressure Ulcer Prevention Istone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of vement as stated in the instructions: Stem plan) or enter "yes" if "yes/no" type of milestone

ired Pressure Ulcer Prevention

| (insert milestone) | |
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\$ 1,184,287.50

13.00

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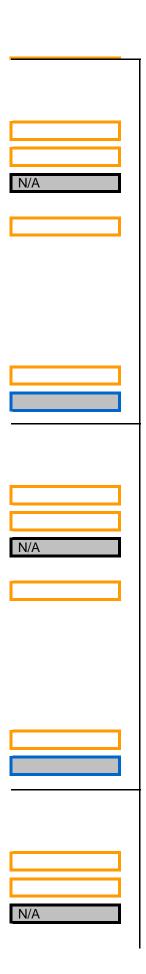
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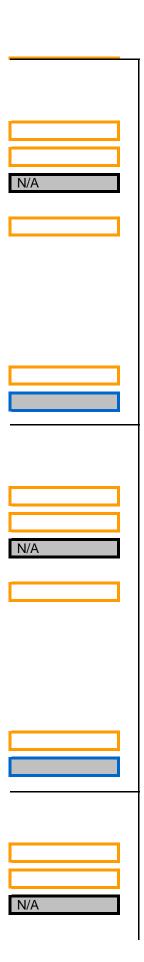
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Yes

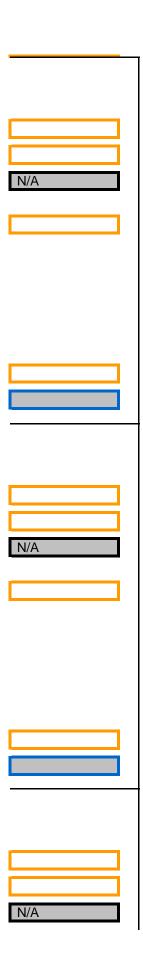


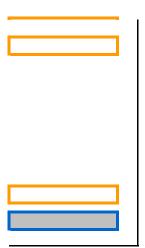


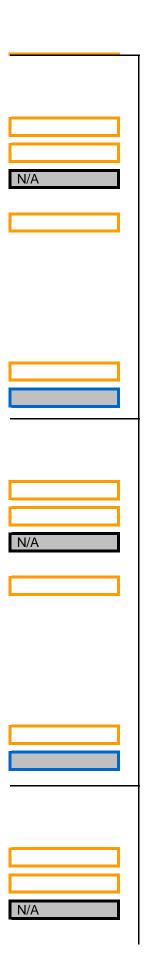














CA 1115 Waiver - Delivery Syste **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: **Category 4: Stroke Manag** Below is the data reported for * Instructions for DPH syste please type in all of your DY The yellow boxes indicate The black boxes indicat The blue boxes show pi populate and flow to sur Stroke Management DY Total Computable Incent Incentive Funding Already R **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac

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Category 4: Stroke Manag Optional Milestone: Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value

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| Category 4: Stroke Manag |
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Category 4: Stroke Manag

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Achievement Value

m Reform Incentive Payments (DSRIP) The University of California, San Francisco Medical Center DY 7 9/30/2012

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| | REPORTING ON THIS PROJECT: * |
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ement (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description

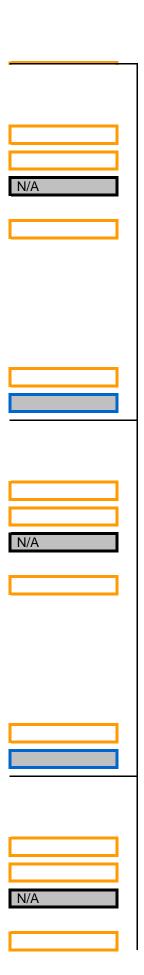
hievement as stated in the instructions:

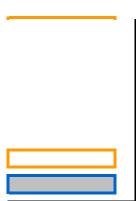
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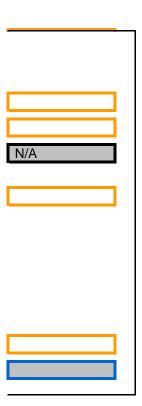
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CA 1115 Waiver - Delivery Syste **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: **Category 4: Venous Thron** Below is the data reported for * Instructions for DPH syste please type in all of your DY The yellow boxes indicate The black boxes indicat The blue boxes show pi populate and flow to sur Venous Thromboembol DY Total Computable Incent Incentive Funding Already R **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac

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Category 4: Venous Thron Optional Milestone: Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value

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| Category 4: Venous Thron of progress towards milestone ac |
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Category 4: Venous Thron Optional Milestone: Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sys Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value

m Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

nboembolism (VTE) Prevention and Treatment

REPORTING ON THIS PROJECT: *

or the DPH system.

ms: Please select above whether you are reporting on this project. If 'yes',

' milestones for the project below and report data in the indicated boxes (*).

- where the DPH system should input data
- te Milestones and will automatically populate and flow to summary sheets rogress made toward the Milestone ("Achievement Value") and will automatically mmary sheets

| ism (VTE) Prevention and Treatment | |
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| ive Amount: | * |
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| stem plan) or enter "yes" if "yes/no" type of milestone | * |
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nboembolism (VTE) Prevention and Treatment

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| no" form below; if absolute number, enter here) | |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: | <u>)11 </u> |
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| hievement as stated in the instructions: | <u></u> |
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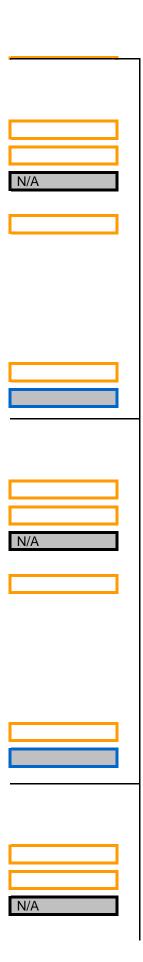
| hievement as stated in the instructions: | |
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nboembolism (VTE) Prevention and Treatment (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone

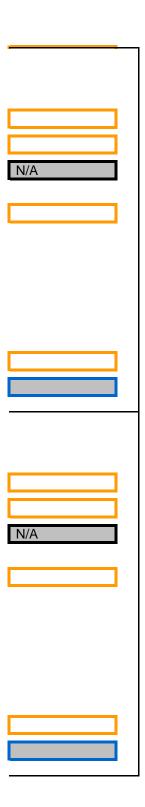
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CA 1115 Waiver - Delivery Syste **DPH SYSTEM:** REPORTING YEAR: DATE OF SUBMISSION: Category 4: Falls with Inju Below is the data reported for * Instructions for DPH syste please type in all of your DY The yellow boxes indicate The black boxes indicat The blue boxes show p populate and flow to sur Falls with Injury Preven DY Total Computable Incent Incentive Funding Already R Prevalence of patient fal Numerator Denominator Prevalence Rate Provide an in-depth description Value is assumed for applicabl DY Target (from the DPH sy: % Achievement of Target Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac

| C | ategory 4: Falls with Inju |
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| | DY Target (from the DPH sy |
| | Achievement Value |
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Category 4: Falls with Inju

| Optional Milestone: |
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| Optional Milestone: |
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| DY Target (from the DPH sy: Achievement Value |
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| Achievement Value |

Achievement

If "yes/no" as to whether the mile of progress towards milestone ac

| Category 4: Falls with Inju |
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| DY Target (from the DPH sy: |
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Category 4: Falls with Inju **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sys Achievement Value **Optional Milestone:** Numerator (if N/A, use "yes/r Denominator (if absolute nur Achievement If "yes/no" as to whether the mile of progress towards milestone ac DY Target (from the DPH sy: Achievement Value

m Reform Incentive Payments (DSRIP)
The University of California, San Francisco Medical Center DY 7
9/30/2012

| ry Prevention REPORTING ON THIS PROJECT: | * |
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| or the DPH system. Sems: Please select above whether you are reporting on this project. If 'yes', '' milestones for the project below and report data in the indicated boxes (*). So where the DPH system should input data See Milestones and will automatically populate and flow to summary sheets rogress made toward the Milestone ("Achievement Value") and will automatically mmary sheets | |
| tion | |
| ive Amount: | * |
| eceived in DY: | * |
| Is with injuries (Rate per 1,000 patient days) | |
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| of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement DY. If so, please explain why data is not available): | |
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| stem plan) | |
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| no" form below; if absolute number, enter here) | * |
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| estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: | * |

5/31/2013 Falls with Injury 825 of 834

| ry Prevention | |
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| stem plan) or enter "yes" if "yes/no" type of milestone | * |

ry Prevention (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description

hievement as stated in the instructions:

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ry Prevention (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone (insert milestone) no" form below; if absolute number, enter here) nber, enter "1") estone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description hievement as stated in the instructions: stem plan) or enter "yes" if "yes/no" type of milestone

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