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.

This reporting form is counting all of those milestones that are ***required*** for all DPHs in Categories 3-4 in DY7 currently. The reporting form will need to be revised accordingly for future DYs to also automatically count required milestones for those DYs.

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP

* **DPH SYSTEM:** Los Angeles County Department of Health Services
* **REPORTING YEAR:** DY 7
* **DATE OF SUBMISSION:** 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	$ 5,625,000.00
Introduce Telemedicine	
Enhance Coding and Documentation for Quality Data	$ 7,500,000.00
Develop Risk Stratification Capabilities/Functionalities	
Expand Specialty Care Capacity	
Enhance Performance Improvement and Reporting Capacity	$ -
TOTAL CATEGORY 1 INCENTIVE PAYMENT:	$ 13,125,000.00
Category 2 Projects	
Expand Medical Homes	$ -
Expand Chronic Care Management Models	$ 20,222,250.00
Redesign Primary Care	
Redesign to Improve Patient Experience	
Redesign for Cost Containment	
Integrate Physical and Behavioral Health Care	$ 26,963,000.00
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:	$ 47,185,250.00
Category 3 Domains	
Patient/Care Giver Experience *(required)*	$ 12,601,875.00
Care Coordination *(required)*	$ 12,601,875.00
Preventive Health *(required)*	$ 12,601,875.00
At-Risk Populations *(required)*	$ 12,601,875.00
TOTAL CATEGORY 3 INCENTIVE PAYMENT:	$ 50,407,500.00
Category 4 Interventions	
Severe Sepsis Detection and Management *(required)*	$ 5,213,083.33
Central Line Associated Blood Stream Infection Prevention *(required)*	$ -
Surgical Site Infection Prevention	$ -
Hospital-Acquired Pressure Ulcer Prevention	
Stroke Management	
Venous Thromboembolism (VTE) Prevention and Treatment	$ 1,827,964.29
Falls with Injury Prevention	
TOTAL CATEGORY 4 INCENTIVE PAYMENT:	$ 7,041,047.62
TOTAL INCENTIVE PAYMENT	$ 117,758,797.62

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Annual Report Narrative

This narrative summarizes the DSRIP activities performed in the reporting demonstration year.
* Instructions for DPH systems: Please complete the narrative for annual reports. The narrative must include a description of the degree to which each project contributed to the advancement of the broad delivery system reform relevant to the patient population that was included in the DPHs DSRIP Plan. The narrative must also include a detailed description of participation in shared learning.

Summary of Demonstration Year Activities

Summary of DPH System's Participation in Shared Learning

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 1 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.
* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*
The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 1 Projects

Expand Primary Care Capacity

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 1 Summary Page

Increase Training of Primary Care Workforce

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 1 Summary Page

Implement and Utilize Disease Management Registry Functionality

Process Milestone:	Expand registry functionality to at least one Primary Care clinic in at least 8 DHS	11.00
Achievement Value		*1.00*
Process Milestone:	At least 55% of patients with diabetes, heart failure or asthma seen in the clinics	0.98
Achievement Value		*1.00*
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		

DY Total Computable Incentive Amount:	$ 45,000,000.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 45,000,000.00
Incentive Funding Already Received in DY:	$ 45,000,000.00
Incentive Payment Amount:	$ -

Category 1 Summary Page

Enhance Interpretation Services and Culturally Competent Care

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 1 Summary Page

Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 1 Summary Page

Enhance Urgent Medical Advice

Process Milestone:	Expand access to Nurse Advice Line (NAL) by 10% over baseline.	3.04
Achievement Value		*1.00*
Process Milestone:	Increase by 10% over baseline the number of NAL patient contacts who reported	2.84
Achievement Value		*1.00*
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		

DY Total Computable Incentive Amount:	$ 45,000,000.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 45,000,000.00
Incentive Funding Already Received in DY:	$ 39,375,000.00
Incentive Payment Amount:	$ 5,625,000.00

Category 1 Summary Page

Introduce Telemedicine

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 1 Summary Page

Enhance Coding and Documentation for Quality Data

Process Milestone:	Implement HIPAA 5010 transaction sets to be able to communicate with institutions	Yes
Achievement Value		*1.00*
Process Milestone:	Train staff on changes in work flow.	Yes
Achievement Value		*1.00*
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		

DY Total Computable Incentive Amount:	$ 15,000,000.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 15,000,000.00
Incentive Funding Already Received in DY:	$ 7,500,000.00
Incentive Payment Amount:	$ 7,500,000.00

Category 1 Summary Page

Develop Risk Stratification Capabilities/Functionalities

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 1 Summary Page

Expand Specialty Care Capacity

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 1 Summary Page

Enhance Performance Improvement and Reporting Capacity

Process Milestone:	Participate in CHART or other statewide, public hospital or national clinical	Yes
Achievement Value		*1.00*
Process Milestone:	Quality dashboard or scorecard to be shared with organizational leadership on a	Yes
Achievement Value		*1.00*
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ 45,000,000.00
Total Sum of Achievement Values:		2.00
Total Number of Milestones:		2.00
Achievement Value Percentage:		100%
Eligible Incentive Funding Amount:		$ 45,000,000.00
Incentive Funding Already Received in DY:		$ 45,000,000.00
Incentive Payment Amount:		$ -

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 2 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.
* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*
The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 2 Projects

Expand Medical Homes

Process Milestone:	Implement the medical home model in primary care clinics, with at least 20	100.00
Achievement Value		*1.00*
Process Milestone:	Assign at least 10,000 patients to provider-led medical home teams.	240,253.00
Achievement Value		*1.00*
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		

DY Total Computable Incentive Amount:	$ 26,963,000.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 26,963,000.00
Incentive Funding Already Received in DY:	$ 26,963,000.00
Incentive Payment Amount:	$ -

Category 2 Summary Page

Expand Chronic Care Management Models

Process Milestone:	Determine baseline percentage of patients with diabetes, heart failure, or asthma	Yes
Achievement Value		*1.00*
Process Milestone:	Implement a comprehensive risk-reduction program for patients with diabetes	Yes
Achievement Value		*1.00*
Process Milestone:	Expand and document interaction types between patient and health care team	Yes
Achievement Value		*1.00*
Process Milestone:	Implement Stroke Medical Home (blood pressure control)	Yes
Achievement Value		*1.00*
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		

DY Total Computable Incentive Amount:	$ 53,926,000.00
Total Sum of Achievement Values:	4.00
Total Number of Milestones:	4.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 53,926,000.00
Incentive Funding Already Received in DY:	$ 33,703,750.00
Incentive Payment Amount:	$ 20,222,250.00

Category 2 Summary Page

Redesign Primary Care

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Redesign to Improve Patient Experience

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Redesign for Cost Containment

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Integrate Physical and Behavioral Health Care

Process Milestone:	Co-locate mental health services with primary care in two additional LAC DHS	6.00
Achievement Value		*1.00*
Process Milestone:	Track the number of referrals from primary care providers to on-site mental health	Yes
Achievement Value		*1.00*
Process Milestone:	Use joint consultations and treatment planning at co-locations sites, and coordinate	Yes
Achievement Value		*1.00*
Process Milestone:	Integrate depression screening to 15% of enrolled patients with diabetes assigned	0.61
Achievement Value		*1.00*
Process Milestone:	At least 70% of initial behavioral health visit appointment waiting times among	0.94
Achievement Value		*1.00*
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		

DY Total Computable Incentive Amount:	$ 53,926,000.00
Total Sum of Achievement Values:	5.00
Total Number of Milestones:	5.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 53,926,000.00
Incentive Funding Already Received in DY:	$ 26,963,000.00
Incentive Payment Amount:	$ 26,963,000.00

Category 2 Summary Page

Increase Specialty Care Access/Redesign Referral Process

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Establish/Expand a Patient Care Navigation Program

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Apply Process Improvement Methodology to Improve Quality/Efficiency

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Use Palliative Care Programs

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Conduct Medication Management

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Implement/Expand Care Transitions Programs

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 2 Summary Page

Implement Real-Time Hospital-Acquired Infections (HAIs) System

Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 3 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.
* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*
The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 3 Domains	
Patient/Care Giver Experience (required)	
Undertake the necessary planning, redesign, translation, training and contrac negotiations in order to implement CG-CAHPS in DY8 (DY7 only)	Yes
Achievement Value	1.00
Report results of CG CAHPS questions for "Getting Timely Appointments, Care, and Information" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "How Well Doctors Communicate With Patients" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "Helpful, Courteous, and Respectful Office Staff" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "Patients' Rating of the Doctor" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "Shared Decisionmaking" theme to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 25,203,750.00
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 25,203,750.00
Incentive Funding Already Received in DY:	$ 12,601,875.00
Incentive Payment Amount:	$ 12,601,875.00

Category 3 Summary Page

Care Coordination (required)

Report results of the Diabetes, short-term complications measure to the State (DY 7-10)	Yes
Achievement Value	1.00
Report results of the Uncontrolled Diabetes measure to the State (DY 7-10)	Yes
Achievement Value	1.00
Report results of the Congestive Heart Failure measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Chronic Obstructive Pulmonary Disease measure to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 25,203,750.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 25,203,750.00
Incentive Funding Already Received in DY:	$ 12,601,875.00
Incentive Payment Amount:	$ 12,601,875.00

Preventive Health (required)

Report results of the Mammography Screening for Breast Cancer measure to the State (DY 7-10)	Yes
Achievement Value	1.00
Reports results of the Influenza Immunization measure to the State (DY 7-10)	Yes
Achievement Value	*1.00*
Report results of the Child Weight Screening measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Pediatrics Body Mass Index (BMI) measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Tobacco Cessation measure to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 25,203,750.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 25,203,750.00
Incentive Funding Already Received in DY:	$ 12,601,875.00
Incentive Payment Amount:	$ 12,601,875.00

Category 3 Summary Page

At-Risk Populations (required)

Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State (DY7-10)	Yes
Achievement Value	1.00
Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<8%) measure to the State (DY7-10)	Yes
Achievement Value	*1.00*
Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Pediatrics Asthma Care measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Optimal Diabetes Care Composite to the State (DY8-10)	N/A
Achievement Value	
Report results of the Diabetes Composite to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 25,203,750.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 25,203,750.00
Incentive Funding Already Received in DY:	$ 12,601,875.00
Incentive Payment Amount:	$ 12,601,875.00

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.
* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*
The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 4 Interventions

Severe Sepsis Detection and Management *(required)*

Compliance with Sepsis Resuscitation bundle (%)		0.57
Achievement Value		*1.00*
Optional Milestone:	Continue implementation of Sepsis Resuscitation Bundle	Yes
Achievement Value		*1.00*
Optional Milestone:	Report at least 6 months of data collection on Sepsis Resuscitation Bundle	Yes
Achievement Value		*1.00*
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ 15,639,250.00
Total Sum of Achievement Values:		3.00
Total Number of Milestones:		3.00
Achievement Value Percentage:		100%
Eligible Incentive Funding Amount:		$ 15,639,250.00
Incentive Funding Already Received in DY:		$ 10,426,166.67
Incentive Payment Amount:		$ 5,213,083.33

Category 4 Summary Page

Central Line Associated Blood Stream Infection Prevention *(required)*

Compliance with Central Line Insertion Practices (CLIP) (%)		0.95
Achievement Value		1.00
Optional Milestone:	Continue implementation of the Central Line Insertion Practices (CLIP)	Yes
Achievement Value		*1.00*
Optional Milestone:	Report as least 6 months of data collection on CLIP to SNI for purposes of	Yes
Achievement Value		*1.00*
Optional Milestone:	Report at least 6 months of data collection on CLABSI to SNI for purposes of	Yes
Achievement Value		*1.00*
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ 15,639,250.00
Total Sum of Achievement Values:		4.00
Total Number of Milestones:		4.00
Achievement Value Percentage:		100%
Eligible Incentive Funding Amount:		$ 15,639,250.00
Incentive Funding Already Received in DY:		$ 15,639,250.00
Incentive Payment Amount:		$ -

Category 4 Summary Page

Surgical Site Infection Prevention

Rate of surgical site infection for Class 1 and 2 wounds (%)		0.01
Achievement Value		1.00
Optional Milestone:	Assess understanding of and compliance with 6 SCIP Core measures for identified	Yes
Achievement Value		*1.00*
Optional Milestone:	Address provider knowledge deficits using a variety of strategies e.g. team training	Yes
Achievement Value		*1.00*
Optional Milestone:	Develop dashboard to compare compliance with SCIP Core Measures using UHC	Yes
Achievement Value		*1.00*
Optional Milestone:	Report at least 6 months of data collection on SSI to SNI for purposes of	Yes
Achievement Value		*1.00*
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ 12,795,750.00
Total Sum of Achievement Values:		5.00
Total Number of Milestones:		5.00
Achievement Value Percentage:		100%
Eligible Incentive Funding Amount:		$ 12,795,750.00
Incentive Funding Already Received in DY:		$ 12,795,750.00
Incentive Payment Amount:		$ -

Category 4 Summary Page

Hospital-Acquired Pressure Ulcer Prevention

Prevalence of Stage II, III, IV or unstagable pressure ulcers (%)		N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 4 Summary Page

Stroke Management

Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

Category 4 Summary Page

Venous Thromboembolism (VTE) Prevention and Treatment

Optional Milestone:	Form LAC-DHS VTE prevention collaborative as evidenced by LAC-DHS	Yes
Achievement Value		*1.00*
Optional Milestone:	VTE team wll set general goals and a timeline for construction of and	Yes
Achievement Value		*1.00*
Optional Milestone:	Allocate resources to provide expert support as evidenced by DHS Performance	Yes
Achievement Value		*1.00*
Optional Milestone:	Allocate resources to develop VTE data collection methodology as evidenced by	Yes
Achievement Value		*1.00*
Optional Milestone:	Allocate resources to collect data on VTE measures as evidenced by DHS	Yes
Achievement Value		*1.00*
Optional Milestone:	Report at least 6 months of data collection of VTE management process measures	Yes
Achievement Value		*1.00*
Optional Milestone:	Report the 5 VTE process measures data to the State.	Yes
Achievement Value		*100.00%*
DY Total Computable Incentive Amount:		$ 12,795,750.00
Total Sum of Achievement Values:		7.00
Total Number of Milestones:		7.00
Achievement Value Percentage:		100%
Eligible Incentive Funding Amount:		$ 12,795,750.00
Incentive Funding Already Received in DY:		$ 10,967,785.71
Incentive Payment Amount:		$ 1,827,964.29

Category 4 Summary Page

Falls with Injury Prevention

Prevalence of patient falls with injuries (Rate per 1,000 patient days)		N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
Optional Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		$ -
Incentive Payment Amount:		

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 1: Expand Primary Care Capacity

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Expand Primary Care Capacity

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Primary Care Capacity

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Primary Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Primary Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 1: Increase Training of Primary Care Workforce

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Increase Training of Primary Care Workforce

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Increase Training of Primary Care Workforce

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Increase Training of Primary Care Workforce

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Increase Training of Primary Care Workforce

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * Yes

Category 1: Implement and Utilize Disease Management Registry Functionality

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Implement and Utilize Disease Management Registry Functionality

DY Total Computable Incentive Amount:	*	$ 45,000,000.00
Incentive Funding Already Received in DY:	*	$ 45,000,000.00

Process Milestone: Expand registry functionality to at least one Primary Care clinic in at least 8 DHS facilities.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	11.00
Denominator (if absolute number, enter "1")	*	1.00
Achievement		11.00
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

LAC-DHS designed and built a web-based Disease Management Registry which had previously been in use for several years. This registry includes patients with specific clinical conditions who were seen in select clinics. The conditions include Heart Failure, Diabetes, Asthma and Stroke. Registry functionality includes association of patient with clinical program and provider, clinical decision support (Boolean logic based on any variable in the Registry) and clinical messaging. The DHS facilities that had clinics using this homegrown Registry included LAC+USC Medical Center, High Desert Multi-specialty Ambulatory Care Center (MACC), Rancho Los Amigos National Rehabilitation Center, El Monte Comprehensive Health Center (CHC), Long Beach CHC, Hudson CHC, San Fernando HC, Roybal CHC & Martin Luther King, Jr. MACC. Since the mid-cycle report, LAC-DHS has made the strategic decision to shift from using its homegrown, disease-specific Registry to adopt a commercial Patient Centered Medical Home (PCMH) Registry (i2i - Tracks). We will be entering every empaneled patient seen in a PCMH, not just focusing on those with select chronic conditions. In addition to the sites above, the i2i Registry has been implemented at La Puente and Glendale Health Centers, for a total of eleven DHS facilities that currently have clinics that are actively using the Registry. Since each empanelled patient is automatically loaded into the i2i Registry, we have far exceeded the threshold of 55% of patients with diabetes, heart failure or asthma seen in the clinics with registry access being entered into the registry. See additional information on this issue in the narrative for this particular milestone below. Switching approaches has not been without challenges. Data mapping from the six disparate health information systems currently in use in LAC-DHS including mapping of patient identity, laboratory values, and medications has been difficult. As such, the initial implementation sites have had to manually enter a significant amount of data into i2i. However, we have dedicated significant resources to data flow, including several clinicians and database and interface experts who meet as a group weekly and have dedicated project management time. There has been significant progress, and each month more and more data is flowing correctly from these six systems into i2i. Currently demographics, primary care lab, and select medication information is automatically communicated. The electronic data communication is increasing usability and ease of use. Each data element transmitted from one system to another undergoes a formal validation process.The plan is to expand the decision support capabilities to reach the functionality of the former disease-specific Registry in a broadly applicable PCMH Registry. Formal training sessions have been held for both “train-the-trainer” and “analytics” staff on the use of i2i. Each of the trainers will be active users as well as a continued local resource for staff in each PCMH. This is paired with a training guide available to all users. It is anticipated that the i2i Registry will be at the center of workflow in the PCMH, including schedule scrubbing, day-of-care checklists and alerts for preventive health measures. Given how central the Registry is to the full functionality of our PCMHs, we fully expect that each of DHS’ PCMH sites, across all facilities, will begin using i2i over the next Demonstration Year (DY8).

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	8.00
Achievement Value		1.00

Category 1: Implement and Utilize Disease Management Registry Functionality

Process Milestone: At least 55% of patients with diabetes, heart failure or asthma seen in the clinics with registry access are entered into the registry.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	5389.00
Denominator (if absolute number, enter "1")	*	5,510.00
Achievement		0.98
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

As we move forward with the establishment of medical home panels, DHS has made a policy decision to enroll all empaneled patients into its disease management registry to facilitate panel management. Therefore, in DY 7, a total of 5,389 of 5,510 (97.8%) empaneled patients with diabetes, heart failure or asthma seen in clinics with registry access were entered in the registry. Although we are transitioning Registry infrastructure to the commercial PCMH Registry (i2i), the policy of entering all empaneled patients continues. As such, the vast majority of patients (>90%) with the target conditions continue to be entered into the registry automatically, often even prior to the patient visit as a by-product of the empanelment and data flow process. We made this decision from the understanding that the major barrier to achieving the benefits of Registry functionality was duplicate data entry. As such, by eliminating the barrier of selecting and entering individual patients, all empaneled patients seen in a PCMH with Registry access would benefit. This approach facilitates scaling the use of the Registry across all of LAC-DHS PCMH sites. Given that we have definitely exceeded the DY 7 (and subsequent year) goal for this particular milestone, LAC-DHS will be submitting a plan modification, substituting in another Registry-related milestone that will help to re-focus resources and attention on new projects to help support continuous improvement system-wide.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	0.55
Achievement Value		1.00

Category 1: Implement and Utilize Disease Management Registry Functionality

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Implement and Utilize Disease Management Registry Functionality

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement — N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement — N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement — N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Implement and Utilize Disease Management Registry Functionality

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

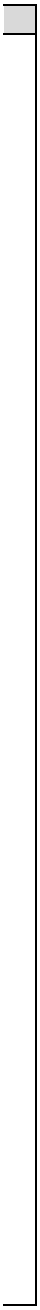
Denominator (if absolute number, enter "1") *

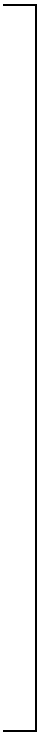
Achievement N/A

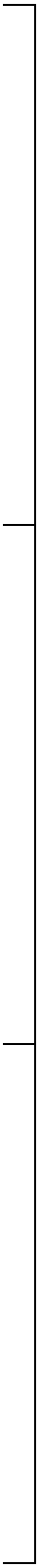
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

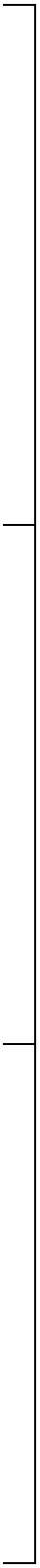
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

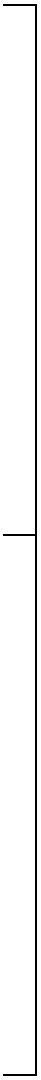
Achievement Value











DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 1: Enhance Interpretation Services and Culturally Competent Care

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Enhance Interpretation Services and Culturally Competent Care

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Interpretation Services and Culturally Competent Care

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Interpretation Services and Culturally Competent Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Interpretation Services and Culturally Competent Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 1: Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * Yes

Category 1: Enhance Urgent Medical Advice

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Enhance Urgent Medical Advice

DY Total Computable Incentive Amount: * $ 45,000,000.00

Incentive Funding Already Received in DY: * $ 39,375,000.00

Process Milestone: Expand access to Nurse Advice Line (NAL) by 10% over baseline.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * 5,961.00

Denominator (if absolute number, enter "1") * 1,964.00

Achievement 3.04

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

LAC-DHS contracts with a vendor (McKesson) for its NAL services. The baseline number of patient contacts made to the NAL as evidenced by NAL Call Center reports was 1,964 (in CY 2010). During DY 7, NAL Call Center reports indicate that a total of 5,961 calls were made to the NAL. This is a 204% increase over the baseline year. The increase in calls can be attributed to increased enrollment in Healthy Way LA (Los Angeles County's Low Income Health Program) and marketing to increase awareness of the NAL among Healthy Way LA members, through flyers, brochures and refrigerator magnets sent with membership materials. This increase also affects the next milestone; as the number of calls increases, the number of patients redirected to lower levels of care will also increase. Given that we have more than exceeded our DY8 goal of a 20% increase, we will be submitting a plan modification to substitute in a different project and milestone in place of further efforts on expanding NAL usage.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * 1.10

Achievement Value 1.00

Process Milestone: Increase by 10% over baseline the number of NAL patient contacts who reported intent to go to the ED for non-emergent conditions but were redirected to non-ED resources.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * 1,030.00

Denominator (if absolute number, enter "1") * 363.00

Achievement 2.84

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

LAC-DHS contracts with a vendor (McKesson) for its NAL services. The baseline number of NAL patient contacts who reported intent to go to the ED for non-emergent conditions but were redirected to non-ED resources was 363 (in CY 2010). During DY 7, the NAL call center reports indicate that a total of 1,030 patient contacts who reported intent to go to the ED for non-emergent conditions were redirected to non-ED resources. This is a 184% increase over the baseline year, most likely due to the increase in NAL utilization noted in the previous milestone. Reducing unnecessary ED visits will help DHS achieve its goal to provide care at the most appropriate place and time. Given that we have more than exceeded our DY9 goal of a 30% increase, we will be submitting a plan modification to substitute in a different project and milestone in place of further efforts on expanding NAL usage.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * 1.10

Achievement Value 1.00

Category 1: Enhance Urgent Medical Advice

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Urgent Medical Advice

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Urgent Medical Advice

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

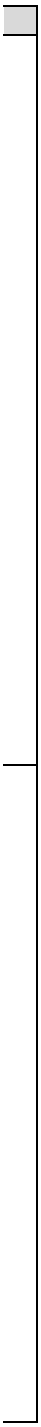
Denominator (if absolute number, enter "1") *

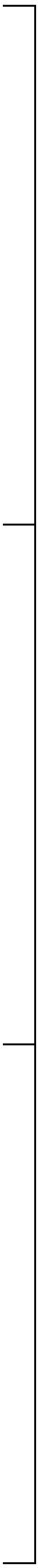
Achievement N/A

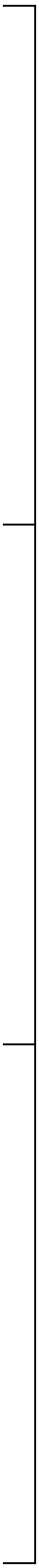
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

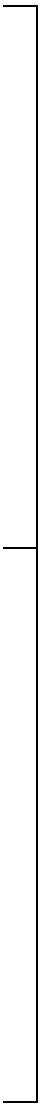
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value









DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 1: Introduce Telemedicine

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Introduce Telemedicine

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Introduce Telemedicine

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Introduce Telemedicine

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Introduce Telemedicine

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * Yes

Category 1: Enhance Coding and Documentation for Quality Data

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Enhance Coding and Documentation for Quality Data

DY Total Computable Incentive Amount: * $ 15,000,000.00

Incentive Funding Already Received in DY: * $ 7,500,000.00

Process Milestone: Implement HIPAA 5010 transaction sets to be able to communicate with institutions that are able to receive and send such transactions.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

As of December 31, 2011, all LAC-DHS facilities were capable of sending and receiving 5010 transaction sets and were live with such transactions to the extent feasible by payer. This was after we worked with our vendors [Quadramed and Apollo Health Street (our billing clearinghouse)] to ensure they upgraded their sytems to be 5150 compliant. There were no major difficulties encountered in achieving this milestone from the LAC-DHS perspective. However, the State Medi-Cal Fiscal Intermediary was not ready for testing until mid June, 2012. Other payers however, were ready and are actively exchanging 5010 transactions with DHS as of December 31, 2011.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: Train staff on changes in work flow.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

DHS has trained targeted staff on the changes that will occur with the transition to HIPAA 5010 and ICD-10 and associated work flow.

DHS Revenue Management Division performed HIPAA 5010 training to the following DHS staff: the revenue management group that is involved with claims (outgoing and reimbursement); a provider financial services group that is involved with eligibility inquires/responses; and the Health Information Technology Committee, whose participants include DHS facility Chief Information Officers, Chief Medical Information Officers and Information Technology managers.

In addition, DHS created an "ICD-10 Program of Projects" steering committee and charter for ICD-10 migration. The IT Project Director for ICD-10 Migration (Billa Dahaby) has attended webinar trainings (Get Ready 5010) for Large Practices, Medicare Fee for Service, and Clearinghouses.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Category 1: Enhance Coding and Documentation for Quality Data

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Coding and Documentation for Quality Data

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Coding and Documentation for Quality Data

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 1: Develop Risk Stratification Capabilities/Functionalities

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Develop Risk Stratification Capabilities/Functionalities

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Develop Risk Stratification Capabilities/Functionalities

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Develop Risk Stratification Capabilities/Functionalities

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Develop Risk Stratification Capabilities/Functionalities

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 1: Expand Specialty Care Capacity

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Expand Specialty Care Capacity

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Specialty Care Capacity

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Specialty Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Specialty Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * Yes

Category 1: Enhance Performance Improvement and Reporting Capacity

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Enhance Performance Improvement and Reporting Capacity

DY Total Computable Incentive Amount: * $ 45,000,000.00

Incentive Funding Already Received in DY: * $ 45,000,000.00

Process Milestone: Participate in CHART or other statewide, public hospital or national clinical database for standardized data sharing.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

LAC-DHS participated in CHART through December 2011 when CHART announced that the CHART board determined they would no longer collect, analyze or report on measures as they had since their inception. CHART announced that the last refresh of the public website would be February 2012. During DY 6 and DY 7 LAC-DHS also participated in the University Healthsystem Collaborative (UHC). UHC is an alliance of the nation's leading non- profit academic medical centers that focus on delivering world-class patient care. UHC fosters collaboration with and amoung more than 110 academic medical centers and 250 affiliated hospitals including 37 public hospitals. UHC collects and compares data to help participating members achieve excellance in quality, safety and cost effectiveness. UHC not only provides quarterly reports on quality and safety performance that permit LAC-DHS facilities to compare their performance to other members of the collaborative, but UHC also sponsors collaboratives on particular issues such as VTE prevention or Falls prevention. LAC-DHS hospitals continue to participate in these collaboratives which permits further sharing of best practices.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: Quality dashboard or scorecard to be shared with organizational leadership on a regular basis that includes patient satisfaction measures.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

LAC-DHS publishes a quality dashboard or scorecard to be shared with leadership. The metrics on the dashboard include clinical process and outcome measures such as Core Measures, Patient Satisfaction measures, and outpatient clinic measures. The dashboard is designed to give a comprehensive overview of the system. The dashboard is shared in two ways. The comprehensive document is shared with facility leaders via paper and email and provides a comparison of our facilities. Facility leaders are able to share effective practices for achieving performance with sister facilities. A limited number of the metrics are available to the public via the internet. The public data is presented as an aggregate of

Category 1: Enhance Performance Improvement and Reporting Capacity

LAC-DHS performance and web links to the individual hospital data are also provided. The public data dashboard was the product of LAC-DHS quality leaders and community representatives that provided input on what is of value to our patients. The public dashboard is accessed via our DHS homepage. To date LAC-DHS has not received immediate feedback from public end users. To date the number of "hits" on the dashboard has not been tracked. However, beginning with July 2012 quarterly access counts will be tracked and reported to the Performance Measure Committee. As of the beginning of DY8, DHS is also in the process of evaluating the effectiveness of the existing dashboard in guiding management priorities and tracking performance. We anticipate a major overhaul of the dashboard during DY8; further detail to be reported on this at the mid-year DY8 report.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value	1.00

Category 1: Enhance Performance Improvement and Reporting Capacity

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Performance Improvement and Reporting Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Performance Improvement and Reporting Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * Yes

Category 2: Expand Medical Homes

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Expand Medical Homes

DY Total Computable Incentive Amount: * $ 26,963,000.00

Incentive Funding Already Received in DY: * $ 26,963,000.00

Process Milestone: Implement the medical home model in primary care clinics, with at least 20 providers using the medical home model.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * 100.00

Denominator (if absolute number, enter "1") * 1.00

Achievement 100.00

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

Empanelment, the process of assigning a patient to a specific medical home, is one of the cornerstones of a successful Patient-Centered Medical Home (PCMH). In LAC-DHS, the over 100 provider led medical home teams will serve as the principle source of care delivery and assume responsibility for care coordination for their defined, finite panel of patients. To date, more than 240,000 patients have been assigned to specific provider-led teams.
Empanelment goals include: defining a clear group of patients for which each care team will be responsible, clear identification of whom patients can turn to for their health care, continuity of care from both patient and provider perspective, clear metrics of how each PCMH care team is doing in meeting proactive patient-centered goals, and balance between maximizing capacity and access. Patient mix (age, gender and clinical complexity) and metrics are known and reported by provider and facility. There are four core elements that influence the empanelment process: 1) member information (clinical, demographic, geographic, and linguistic); 2) provider information (clinical, demographic, geographic, and linguistic); 3) coverage information (LA Care, HWLA, MediCal, Medicare, Uninsured, other); and 4) visit history. In order to accomplish our goal of empaneling as many patients as possible within available resources, panels will be sized appropriately based on the amount of time the provider is devoted to continuity care and the disease burden of their patients. Empanelment priority is based on coverage, established continuity relationship with a PCP, use of scheduled resources, use of unscheduled resources in DHS (Walk in clinics/Urgent care/Emergency Department) and the presence of ambulatory care sensitive conditions and other conditions where continuity outpatient care is critical. Primary care in DHS is fundamentally transforming from a visit-based focus to one that values population management. The provider workday will no longer be determined solely by who on the schedule arrived for care. Rather, the quality of care of all those on the provider panel, including care delivered without face-to-face encounters, will be the primary driver. The process of empaneling nearly a quarter of a million patients has not been easy. Combining data from health plan assignment with visit data to determine the right provider, ensuring those with special needs (e.g. HIV/AIDS) are matched with specially qualified providers, geocoding each patient address and linguistic preference to match with the most appropriate provider are all new activities to LAC-DHS. The empanelment process is well defined for non-teaching clinics. There remains significant work in defining and implementing how to best empanel patients for teaching clinics where health plan assignment must be to a staff attending physician, yet continuity relationships should be shared between housestaff and full time staff. One key process is the development and distribution of provider profiles for their empaneled population. These profiles include total patients assigned to them, a calculation of member-equivalents, a disease-burden adjusted measure of workload, and active patients. In addition, there is a demographic profile of gender and age distribution and measures of continuity of care. Most importantly, the provider profile includes key clinical quality measures including glycemic and lipid control for the empaneled population, not just the patients who see the provider. We believe this near real-time feedback is one key to clinical care improvement. The next year will focus on teaching clinic empanelment, further sophistication of the matching algorithm and understanding use patterns of the homeless General Relief population who have not historically used services in LAC-DHS. We also will benefit from seeing the results of the CG-CAHPS outpatient satisfaction survey results at the clinic-level. Using these results, we will be able to make clinic-level changes in staffing and policies/protocols to better enable a positive experience for all empaneled patients. Though DHS recognizes the importance of continuing to work on the effectiveness and impact of the existing medical home teams, given that we have exceeded our DY10 goal of having over 90 providers use the medical home model of care, we will be submitting a plan modification to substitute other medical home-related milestones for DY8-10.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value 1.00

Category 2: Expand Medical Homes

Process Milestone: Assign at least 10,000 patients to provider-led medical home teams.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	240,253.00
Denominator (if absolute number, enter "1")	*	1.00
Achievement		240,253.00
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

To date, more than 240,000 patients have been assigned to specific provider-led teams. In order to accomplish our goal of empaneling as many patients as possible within available resources, panels will be sized appropriately based on the amount of time the provider is devoted to continuity care and the disease burden of their patients. Empanelment priority is based on coverage, established continuity relationship with a PCP, use of scheduled resources, use of unscheduled resources in DHS (Walk in clinics/Urgent care/Emergency Department) and the presence of ambulatory sensitive conditions and other conditions where continuity outpatient care is critical. Primary care in DHS is fundamentally transforming from a visit-based focus to one that values population management. The provider workday will no longer be determined solely by who on the schedule arrived for care. Rather, the quality of care of all those on the provider panel, including care delivered without face-to-face encounters, will be the primary driver. The process of empaneling nearly a quarter of a million patients have not been easy. Combining data from health plan assignment with visit data to determine the right provider, ensuring those with special needs (e.g. HIV/AIDS) are matched with specially qualified providers, geocoding each patient address and linguistic preference to match with the most appropriate provider are all new activities to LAC-DHS. The empanelment process is well defined for non-teaching clinics. There remains significant work in defining and implementing how to best empanel patients for teaching clinics.

Given that DHS has exceeded our DY10 milestone of empaneling 100,000 patients, we will be submitting a plan modification to substitute in another milestone related to medical home expansion.

	*	10,000.00
Achievement Value		1.00

Category 2: Expand Medical Homes

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Expand Medical Homes

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Expand Medical Homes

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

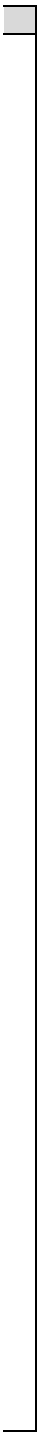
Denominator (if absolute number, enter "1") *

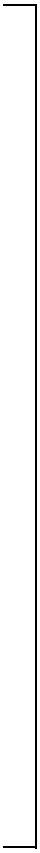
Achievement N/A

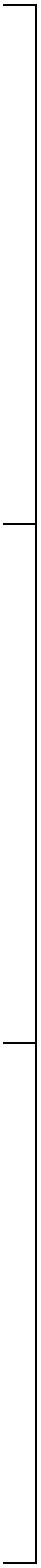
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

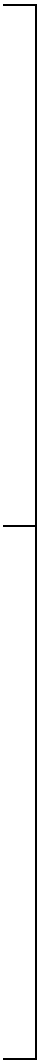
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value









DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * Yes

Category 2: Expand Chronic Care Management Models

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Expand Chronic Care Management Models

DY Total Computable Incentive Amount:	*	$ 53,926,000.00
Incentive Funding Already Received in DY:	*	$ 33,703,750.00
Process Milestone: Determine baseline percentage of patients with diabetes, heart failure, or asthma with at least one recorded self-management goal. *(insert milestone)*		
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

Since the mid-cycle report, LAC-DHS has made the strategic decision to expand from a disease-specific Registry to a commercial Patient Centered Medical Home (PCMH) Registry (i2i - Tracks). This registry will account for every empaneled patient seen in a PCMH, not just those with select chronic conditions. Consequently, the denominator and data source for reporting are changed from previous reporting. For this year-end report, the baseline denominator is 57,210 (Empaneled patients with Diabetes, Asthma, or CHF). The numerator is only 503 (Empaneled patients – with Diabetes, Asthma, or CHF - with registry-documented Self Management Goals addressed). This gives a baseline of 0.9% (which is lower than the baseline reported on the mid-year report due to the transition to a new registry.) Training of nursing care managers was initiated in October 2011 and on-going training continues concurrently with hiring and appointment of new staff. PCMH staff is trained on the didactics and practicality of working with patients to set Self Management goals. Additionally, documentation on the medical records and into the electronic patient registry is vital for the purposes of reporting and tracking. The low reporting numbers for this report likely reflects suboptimal usage and adoption of the new electronic registry at this early point in its implementation. As more data elements are interfaced from our electronic medical records sources to the registry, there will be improvement to the reporting numbers. Additionally, as staff training on the registry increases, as well as conceptual training on setting self management goals with patients, we plan on working with frontline staff on integrating documentation into clinical workflow.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Category 2: Expand Chronic Care Management Models

Process Milestone: Implement a comprehensive risk-reduction program for patients with diabetes mellitus that includes gylcemic, blood pressure and lipid control in primary care.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*
Denominator (if absolute number, enter "1")	*
Achievement	Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	* Yes

Kaiser Permanente developed a program to dramatically reduce cardiovascular complications for patients with Diabetes. They found that a combination of three inexpensive medications: an aspirin, an ACE-I/ARB and a statin resulted in a 60-80% cardiovascular risk reduction among patients 50 years and older with Type 2 Diabetes.

Inspired by the dramatic results of the Kaiser A-L-L program described above, LAC-DHS created an electronic prompt integrated into the Disease Management Registry to promote the use of these three drug classes in all patients with Diabetes over age 50, unless contraindicated. The initial implementation of the A-L-L prompt was incorporated into the Disease-Specific Registry. We continue to achieve strong results from the comprehensive risk reduction for patients with Diabetes in the disease-focused intervention. Of the 3,551 patients screened, 2,931 (83%) patients are on the full complement of 3 drug classes. Four hundred and four patients (11%) are on two of the three A-L-L drugs, 129 patients (4%) are on one A-L-L drug and 87 patients (2%) received prompts but were not placed on A-L-L drugs.

The compelling data from Kaiser, combined with the success of the disease-focused Registry pilot to ensure targeted patients were on the risk-reduction medication combination, made expansion to the broader PCMH population using i2i a compelling goal. All the lessons learned from the pilot will be applied to the far greater number of patients who will be positively impacted by this important preventive measure among the more than 25,000 patients with Diabetes empaneled to a LAC-DHS PCMH.

This intervention in the broad PCMH is starting with a paper-based preventive care protocol for patients with Diabetes. This protocol was designed and tested in conjunction with nurses and doctors from LAC-DHS. After several rapid PDSA review cycles, the protocol was reviewed and approved by the interdisciplinary practices committee, comprised of nurse and doctor representation from across the Ambulatory Care Network.

As with all paper-based protocols, there is an implementation spread challenge. As such, our strategy is to program the protocol into the i2i Registry to automate the prompting of clinicians to ensure all eligible patients without contraindication will be offered this inexpensive and life-saving triad of medications. We anticipate reporting a far greater number of patients impacted by this intervention in the upcoming reporting cycles.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value	1.00

Category 2: Expand Chronic Care Management Models

Process Milestone: Expand and document interaction types between patient and health care team beyond one-to-one visits to include group visits, telephone visits, and other interaction types.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

LAC-DHS has made significant progress in further expanding use of non-traditional (i.e., non-face-to-face) provider visits over the past six months. Several of our clinics (e.g., Long Beach Comprehensive Health Center (CHC), Hudson CHC, Humphrey CHC) have initiated use of telephone visits to answer questions, provide results of diagnostic studies, etc Also, several clinics have expanded their use of non-physician visits for issues previously performed by physicians (e.g., PPD readings, completion of paperwork, new patient intake, med refills, etc.) as well as increased the use of RNs to perform specialty services (e.g., RN dermatology phototherapy clinic at Roybal CHC). Finally, clinics have expanded their use of group visits for select patient populations (e.g., medical high utilizer group visits at Roybal CHC and diabetic group visits and nutrition education visits at El Monte CHC). As illustrations of the work in specific clinics, following are select detailed examples:

1. Mid-Valley CHC (MVCHC): MVCHC has been able to substantially expand use of non-traditional visits over the past fiscal year. They initiated efforts to provide limited nontraditional visits in January 2011. In comparing Jan - June 2011 vs. Jan - June 2012, MVCHC provided approximately 55% more lab follow-up phone calls and 375% more case management calls in the current fiscal year. (Data: 4699 lab follow up calls Jan-June 2012 vs. 3031 in Jan-June 2011; 2101 case management calls Jan-June 2012 vs. 443 Jan - June 2011).

2. Olive View Medical Center (OVMC): OVMC has added telephone visits at each of their primary care clinics and has also most recently added group visits for diabetic patients (foot exams and diabetic teaching); at the beginning of FY11-12, OVMC provided only traditional face-to-face provider visits. As of the end of DY 7, OVMC was providing more than 100 phone visits every two weeks for such issues as med refills, nurse triage, and lab follow-up. They also started performing nurse visits for paperwork completion (e.g., DMV forms, school forms), TB readings, triage appointments, immunizations, etc. The additional visits has helped to expand capacity and improve staff satisfaction in clinic.

3. Martin Luther King Jr Multi-specialty Ambulatory Care Center (MLK MACC): As reported at the semi-annual period, MLK MACC initiated group visits for diabetic patients at the beginning of FY11-12 as a means of improving clinic efficiency, patients' access to care, and overall patient outcomes as well as reduce potentially unnecessary visits to urgent care and EDs. They were recently nominated for an LA County Quality and Productivity award for their accomplishments in clinic. Group visits were designed to incorporate aspects of a face to face visit such as education, goal setting, vaccination, review and discussion of laboratory data, medication adjustments, and referrals to specialty care. In the group visit model up to 20 pts are scheduled for care at the same time in a group setting. The medical home teams are given standardized tools to prepare for each patient and preliminary care plans are completed prior to patient arrival. The first group visit was implemented on June 24, 2011; over 250 unique patients have attended a group visit as of the end of DY 7. Care for diabetic patients in a group visit allows more face to face time between the patients and medical team members. As evidence of the group visit effectiveness, patients attending group visits have shown an improvement in achieving optimal LDL (<100) and HgbA1C levels (<9). Further, 94-100% of surveyed patients rated the group experience with a 4 or 5 out of 5 rating.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Category 2: Expand Chronic Care Management Models

Process Milestone: Implement Stroke Medical Home (blood pressure control)

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

There is a two-pronged effort to reduce secondary stroke after hospitalization for ischemic brain infarction. The strategies include specialized medical homes and Primary Care - Patient Centered Medical Homes (PC-PCMH). The specialized medical homes are limited in geographic reach and scope and are designed for patients with severe residual disability after a stroke and as part of a time-limited research study to determine the most effective post-stroke interventions. The PC-PCMH is where LAC-DHS will be providing most of the post-stroke continuity care. One key metric for prevention of secondary stroke is Blood Pressure control. While important for all patients, it is critical for those who have already suffered a stroke, as they are the highest risk group for recurrence of stoke, often with associated long-term disability and high cost. The specialized stroke medical homes, as part of the American Heart Association “get with the guidelines” initiative, is the basis for development of the PC-PCMH rule sets for post-stroke BP control. These rules are currently being transitioned from the disease-specific Registry to the PCMH Registry. All Registry rule sets undergo review and approval by the Ambulatory Care Network Interdisciplinary Practices Committee that includes broad clinician representation.

The data collection method for baseline determination of BP control in post stroke patients in the PC-PCMH was as follows:

• Determine if the patient had a new ischemic stroke by electronic review of ICD-9 codes.
• Cross-tabulate the post-stroke population with the population of patients empaneled in a LAC-DHS PC-PCMH with Registry access.
• Review the charts of a representative sample (146 patients) across all sites of care using the Registry
• Analysis of the data

Using the methodology above, 146 patients were in the random sample (includes over 75% of the total cohort), of which 137 underwent chart review with BP documented. Thirty-five of the 137 (26%) had a blood pressure less than or equal to a systolic of 120mmHg and a Diastolic less than or equal to 80mmHg, which establishes the baseline for future improvement. The infrastructure for sustainability is the use of technology in real-time at the point-of-care. Specifically, we will be using the i2i Registry as an automated monitoring and prompting system for BP control in patients who have already suffered an ischemic stroke. Hence, what now requires individual clinician diligence, will, in the future, be automatically monitored. There will be specific provider education on this, and all clinical rule sets in the Registry. We anticipate that as the rule sets are programmed into the i2i Registry, the automated prompts when a patient is not “in control” will increase the percentage of patients under good BP control, and hence decrease the rate of re-infarction.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Category 2: Expand Chronic Care Management Models

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

Category 2: Expand Chronic Care Management Models

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Expand Chronic Care Management Models

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

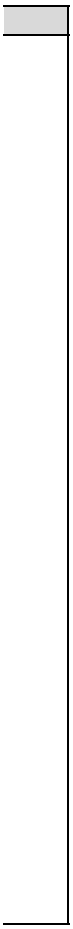
Denominator (if absolute number, enter "1") *

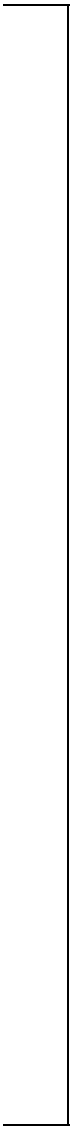
Achievement N/A

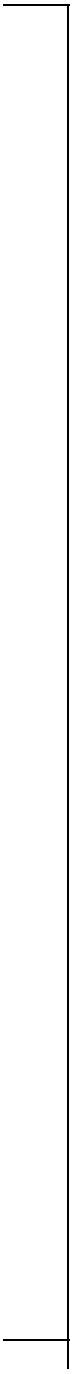
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

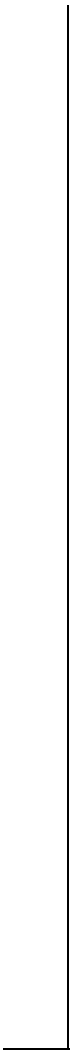
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

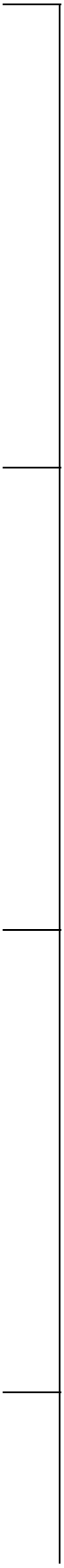
Achievement Value

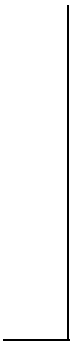


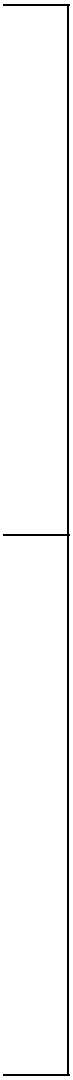












DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Redesign Primary Care

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Redesign Primary Care

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign Primary Care

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign Primary Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign Primary Care

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Redesign to Improve Patient Experience

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Redesign to Improve Patient Experience

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign to Improve Patient Experience

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign to Improve Patient Experience

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign to Improve Patient Experience

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Redesign for Cost Containment

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Redesign for Cost Containment

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign for Cost Containment

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign for Cost Containment

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Redesign for Cost Containment

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * Yes

Category 2: Integrate Physical and Behavioral Health Care

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
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Integrate Physical and Behavioral Health Care

DY Total Computable Incentive Amount: * $ 53,926,000.00

Incentive Funding Already Received in DY: * $ 26,963,000.00

Process Milestone: Co-locate mental health services with primary care in two additional LAC DHS directly operated or contract facilities for a total of four co-location sites.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * 6.00

Denominator (if absolute number, enter "1") * 1.00

Achievement 6.00

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

There are currently six co-location programs operating at LAC-DHS facilities. Three co-location operations were implemented in DY 6. They were at El Monte Comprehensive Health Center (CHC) in December 2010; Roybal CHC in February 2011; and Long Beach CHC in September 2011. Three additional co-location projects were implemented during DY 7 at Humphrey (CHC) in South Los Angeles in July 2011; High Desert Multi-Service Ambulatory Care Center (MACC) in the Antelope Valley in July 2011; and Mid-Valley CHC in the San Fernando Valley in January 2012. Plans are also being developed for an additional two sites to be implemented during the next fiscal year. The co-location sites have proved to be an effective means to improve services for patients as staff members from DMH and DHS now have more opportunities for communication and collaboration. The Department of Mental Health (DMH) Staff have joined the DHS staff in team meetings and case consultations; mental health experts have provided in-service lectures to primary care providers at the various co-location sites; DMH experts are available for consultation with the primary care staff; and the on-site DMH staff has an opportunity to interact with the primary care medical home team via 'Joint Consultations.'

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * 4.00

Achievement Value 1.00

Process Milestone: Track the number of referrals from primary care providers to on-site mental health professionals at the co-location sites.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

As a result of the co-location planning and implementation communications, DHS and DMH have continued working together to enhance the referral process. As a result of this collaboration, DHS has changed the way referrals are made to DMH by establishing a standardized referral process for all DHS locations. This has helped DMH respond to referrals more effectively and provided DHS a means to track the referrals that are made to DMH. The tracking system uses the Referral Processing System (RPS). RPS allows the primary care team to track referrals to DMH. The co-location arrangement provides a further opportunity for physical and mental health teams to collaborate on patient care to enhance clinical outcomes. In DY 7, a total of 1,895 referrals were submitted to DMH from the primary care services at the co-location sites. The DMH staff at these co-location sites provided 3,576 visits to 1,754 unique clients. Tracking sheets are available for review by DHCS and CMS if desired; unfortunately documents are not able to be attached to the reporting template excel spreadsheet.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value 1.00

Category 2: Integrate Physical and Behavioral Health Care

Process Milestone: Use joint consultations and treatment planning at co-locations sites, and coordinate resources to improve patient education, support, and compliance with the medication regimen.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*
Denominator (if absolute number, enter "1")	*
Achievement	Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	* Yes

In an effort to improve collaboration between primary care and the mental health providers, DMH and DHS developed the process to track Joint Consultations. A Joint Consultation is defined as the interactive discussion between DHS Primary Care Team members and a DMH team member regarding a mutual patient and their care. Joint Consultations will take place in those cases in which collaboration between the teams will increase the likelihood of an enhanced clinic outcome.

DHS experienced challenges implementing the Joint Consultation tracking procedure because of the need to develop a uniform system that is minimally disruptive to the primary care provider team. DMH and DHS representatives met to jointly assess and problem-solve. A tracking system was developed and piloted at Roybal CHC on April 1, 2012. After adjustments were made with feedback from staff, the system was implemented at the El Monte CHC in May 2012, and then at the Mid-Valley CHC in June 2012.

Thirty one Joint Consultations have been tracked at Roybal during April, May, and June 2012; six Joint Consultations have been tracked at El Monte during May and June 2012; and two Joint Consultations were tracked at Mid-Valley during this period.

In reviewing the tracking system and the data that we have received, we have concluded that we are under-reporting the actual number of Joint Consultations that take place in our facilities. The most likely reason for this is that a medical provider who is involved in Joint Consultation with DMH staff is frequently unable to immediately chart the discussion. Frequently, these Joint Consultations take place in the hallways, the clinic areas between seeing patients, or at some other inopportune time. Plans are currently being finalized to revise the Joint Consultation process to take place at a planned time in which staff can focus and information can be recorded appropriately, rather than occurring in an unplanned, incidental manner which is disruptive to the team members.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value	1.00

Category 2: Integrate Physical and Behavioral Health Care

Process Milestone: Integrate depression screening to 15% of enrolled patients with diabetes assigned to co-location sites.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	226.00
Denominator (if absolute number, enter "1")	*	369.00
Achievement		0.61
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

As DHS continued its implementation of patient centered medical homes throughout each of our primary care clinic sites, one of the preventive measures included in the care management component is depression screening. Some depression screenings had been done in the past, but over the last several months, we have set clear standards in depression screenings for all our empaneled patients. We first focused on diabetic patients in our six co-location sites, as 1) these sites now had in-house behavioral health staff ready to serve patients that need timely intervention for positive screenings, and 2) diabetic patients, as all patients with chronic conditions have a higher risk for developing depression. Several notifications were provided to the clinic leadership, as well as face-to-face discussions at the monthly medical directors meetings in order to stress the goal of depression screening in these patients. Each site began to initiate or further refine interventions to achieve this goal. The six sites developed varying methodologies for collecting the information; most now have incorporated a trigger/reminder into their electronic charting templates, or in their paper-based preprinted visit records. The sites that showed a stronger achievement in this reporting period were those with automatic triggers embedded in their flow of care. As a result of this effort, clinics dramatically improved their overall depression screening rates, from ~16% at the mid-year point to 61% by the end of the DY 7 reporting period. Clinic-level performance did vary, from 42% in the lowest performing clinic to 86% in the highest performing clinic. DHS will use this information as it continues to refine its depression screening reminder mechanisms and triggers. Our next steps will be to configure our population management registry application to contain depression screening for all empaneled patients. Using the task lists created by the registry, our patient centered medical home care coordinators and care managers will be able to easily identify patients that need to be screened, and if positive, ensure that they receive appropriate care accordingly. While current performance is just at the level of the DY10 target, we recognize that strong efforts will have to be made to ensure screening rates remain this high over the next year. This will require education of providers as to the need to re-screen patients at appropriate intervals. If performance is maintained, we will submit a plan modification for this milestone in DY8.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	15%
Achievement Value		1.00

Category 2: Integrate Physical and Behavioral Health Care

Process Milestone: At least 70% of initial behavioral health visit appointment waiting times among patients enrolled in DHS medical homes who meet medical necessity criteria will be less than 30 business days.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	961.00
Denominator (if absolute number, enter "1")	*	1,025.00
Achievement		0.94
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

During DY 7, 94% HWLA patients seeking an initial behavioral health visit received one in less than 30 business days (of 1025 total referrals, 961 received a referral in less than 30 days). Patients were excluded from this analysis if they declined mental health services, did not meet program criteria for referral after review by a mental health specialist, were unable to be contacted after multiple attempts by the Department of Mental Health (DMH), or other rare reasons (e.g., specific language barriers requiring referral to a provider other than DMH, etc.). These visits may have occurred at a co-located site or another DMH venue, the latter being facilitated by a DMH navigator.

Staff worked diligently during DY 6 to establish a smooth referral process and the means by which to track this information. Physician/staff input has been a key element of this process. A physician from one of our DHS facilities (Olive View-UCLA Medical Center) suggested revisions of the DHS-DMH referral form in January 2012. These modifications facilitated specific, necessary patient medical history being transmitted to DMH at the time of referral, thereby improving the referral process even more. A DHS policy and procedure has been written to outline and guide DHS providers in submitting referrals for mental health services. The Department of Mental Health continuously meets with primary care providers to ensure there are no issues related to providers referring to DMH.

Now that staff are familiar and well-versed with the referral process itself, focus has turned to the referral response (or feedback) element, to monitor the effectiveness of services from the provider and patient perspective. In addition to Joint Consultation efforts (described elsewhere), basic information, including the patient declining services or not being eligible, is being shared electronically with referring providers, affording them with the opportunity to decide next steps in their patient's care plan. Patient satisfaction data is also being systematically gathered on a clinic-by-clinic basis with the recent launch of CG-CAHPS standardized outpatient satisfaction surveys.

Prior to this project being implemented, DHS providers did not have a formal mechanism for referring patients for mental health services. Patients were often sent out, with a DMH facility sheet, to find their own mental health provider. The implementation of this new (joint) referral process has virtually guaranteed that a patient needing mental health services would be guided from DHS to DMH, with visit outcome being shared between the two service providers. As a result, the improvements in the referral process represent a major step forward in providing integrated mental and physical health services for our patients.

While the achievements to date are well-above the goal set for DHS for DY 7, LAC-DHS is currently not anticipating submitting a plan modification for this milestone due to the fact that DHS anticipates that maintaining an access standard rate of >90% may prove to be difficult over the coming year. As more and more patients join HWLA (enrollment currently exceeds 200,000) and they present to their primary care provider for care, DHS and DMH must work diligently to both correctly triage referrals and, if needed, expand capacity of mental health services in order to maintain the target rate of >90%. If DHCS or CMS would prefer that LAC-DHS submits a plan modification for this particular milestone, we would be happy to do so.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	70%
Achievement Value		1.00

Category 2: Integrate Physical and Behavioral Health Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Integrate Physical and Behavioral Health Care

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Increase Specialty Care Access/Redesign Referral Process

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
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Increase Specialty Care Access/Redesign Referral Process

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Increase Specialty Care Access/Redesign Referral Process

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Increase Specialty Care Access/Redesign Referral Process

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Increase Specialty Care Access/Redesign Referral Process

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Establish/Expand a Patient Care Navigation Program

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Establish/Expand a Patient Care Navigation Program

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Establish/Expand a Patient Care Navigation Program

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Establish/Expand a Patient Care Navigation Program

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Establish/Expand a Patient Care Navigation Program

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Apply Process Improvement Methodology to Improve Quality/Efficiency

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Apply Process Improvement Methodology to Improve Quality/Efficiency

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Apply Process Improvement Methodology to Improve Quality/Efficiency

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Apply Process Improvement Methodology to Improve Quality/Efficiency

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Apply Process Improvement Methodology to Improve Quality/Efficiency

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Use Palliative Care Programs

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Use Palliative Care Programs

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Use Palliative Care Programs

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Use Palliative Care Programs

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Use Palliative Care Programs

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Conduct Medication Management

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Conduct Medication Management

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Conduct Medication Management

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Conduct Medication Management

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Conduct Medication Management

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Implement/Expand Care Transitions Programs

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Implement/Expand Care Transitions Programs

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement/Expand Care Transitions Programs

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement/Expand Care Transitions Programs

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement/Expand Care Transitions Programs

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

REPORTING ON THIS PROJECT: * No

Category 2: Implement Real-Time Hospital-Acquired Infections (HAIs) System

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Implement Real-Time Hospital-Acquired Infections (HAIs) System

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement Real-Time Hospital-Acquired Infections (HAIs) System

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement Real-Time Hospital-Acquired Infections (HAIs) System

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement Real-Time Hospital-Acquired Infections (HAIs) System

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 3: Patient/Care Giver Experience *(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 data in the indicated boxes (*). Note: for DY8, data from the last 2 quarters shall suffice.*
* 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 automatically populate and flow to summary sheets

Patient/Care Giver Experience (required)

DY Total Computable Incentive Amount: * $ 25,203,750.00

Incentive Funding Already Received in DY: * $ 12,601,875.00

Undertake the necessary planning, redesign, translation, training and contract negotiations in order to implement CG-CAHPS in DY8 *(DY7 only)*

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): * Yes

LAC-DHS accomplished this milestone in DY 7 by involving clinic leadership in deciding the sampling methodology and additional survey questions to be added to the CG-CAHPS. We then identified funds with which to contract an external survey vendor and chose Press Ganey (PG) as the chosen vendor for this project. After obtaining required Board approval, we contracted with PG and asked for the survey to be translated into Spanish. During the Spring of the demonstration year, we worked with PG IT staff to receive and analyze test files. They set up our access and trained us on how to use the PG data web portal so survey mailings and responses could be tracked and survey contents analyzed both individually and in the aggregate. Monthly survey mailings were initiated with sampling of the April, 2012, outpatient primary care visits. Monthly visit files for May and June were then uploaded to the PG FTP site. Challenges included: 1) developing three custom questions to the statewide standardized CA-CG-CAHPS to assess nurse communication, clinic cleanliness and likelihood of patient return to clinic should he/she become insured; 2) working with PG to create a separate non-DSRIP sample of pediatric patient visits as well as a modified survey for the parents of the pediatric patients; and 3) learning how to analyze the survey responses on the PG web portal, given minimal instructions and partial web portal functionality.

Achievement: Yes

Achievement Value: 1.00

Report results of CG CAHPS questions for "Getting Timely Appointments, Care, and Information" theme to the State *(DY8-10)*

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the most positive response category *

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: N/A

Achievement Value:

Category 3: Patient/Care Giver Experience *(required)*

Report results of CG CAHPS questions for "How Well Doctors Communicate With Patients" theme to the State *(DY8-10)*

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the most positive response category *

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: N/A

Achievement Value

Report results of CG CAHPS questions for "Helpful, Courteous, and Respectful Office Staff" theme to the State *(DY8-10)*

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the most positive response category *

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: N/A

Achievement Value

Report results of CG CAHPS questions for "Patients' Rating of the Doctor" theme to the State *(DY8-10)*

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the response categories 9 and 10 *

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: N/A

Achievement Value

Category 3: Patient/Care Giver Experience *(required)*

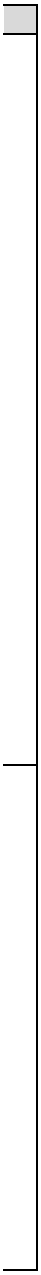
Report results of CG CAHPS questions for "Shared Decisionmaking" theme to the State *(DY8-10)*

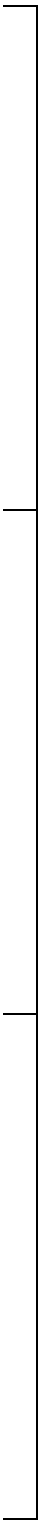
Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the most positive response category *

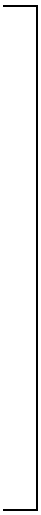
Provide an in-depth description of milestone progress as stated in the instructions. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement: N/A

Achievement Value







DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
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 data 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 automatically populate and flow to summary sheets

Care Coordination (required)

DY Total Computable Incentive Amount:	*	$ 25,203,750.00
Incentive Funding Already Received in DY:	*	$ 12,601,875.00

Report results of the Diabetes, short-term complications measure to the State *(DY 7-10)*

Data Collection Source	*	Data warehouse
Numerator	*	67.0
Denominator	*	34,279.0
Rate		0.2

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):

Analysis was performed on data in the LAC-DHS Enterprise Data Repository (EDR), which contains data from each hospital's information system and is updated on a daily basis. The number of diabetics (ages 18-75) with 2+ primary care visits in FY 2010/2011 was 34,279 (denominator). The number of DHS inpatient discharges with primary ICD-9 codes indicating diabetes with short-term complications among denominator population during July, 2011 to June, 2012 was 67. The numerator did not double since the first semi-annual report, when it was 41 patients. This may be due to improved diabetes inpatient care in the last half of the demonstration year. As the i2i registry is rolled out, this number may drop even lower. However it is also possible that, due to ongoing efforts to improve our coding accuracy and quality within LAC-DHS, that additional cases will be identified that may push the rate to a higher, more accurate value. We will comment on this issue as needed in future reports.

Achievement	Yes
Achievement Value	1.00

Report results of the Uncontrolled Diabetes measure to the State (DY 7-10)

Data Collection Source	*	Data warehouse
Numerator	*	14.0
Denominator	*	34,279.0
Rate		0.0

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):

Analysis was performed on data in the LAC-DHS Enterprise Data Repository, which contains data from each hospital's information system and is updated on a daily basis. The number of diabetics (ages 18-75) with 2+ primary care visits in FY 2010/2011 was 34,279 (denominator). The number of DHS inpatient discharges with primary ICD-9 codes indicating uncontrolled diabetes among denominator population during July, 2011 to June, 2012 was 14. As estimated, the numerator doubled since the first semi-annual report, when it was 7 patients. Although this inpatient prevalence of uncontrolled diabetes is somwhat low (0.04%), it remains a challenge for LAC-DHS to better manage the health of our diabetics overall, and especially in primary care. It should be noted that this does not include diabetics who were hospitalized in private hospitals. As noted above, ongoing efforts to improve coding quality may affect the rate reported in the future.

Achievement	Yes
Achievement Value	1.00

Category 3: Care Coordination *(required)*

Category 3: Care Coordination *(required)*

Report results of the Congestive Heart Failure 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	N/A
Achievement Value	

Report results of the Chronic Obstructive Pulmonary Disease 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	N/A
Achievement Value	

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
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 data 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 automatically populate and flow to summary sheets

Preventive Health (required)

DY Total Computable Incentive Amount:	*	$ 25,203,750.00
Incentive Funding Already Received in DY:	*	$ 12,601,875.00

Report results of the Mammography Screening for Breast Cancer *measure to the State (DY 7-10)*

Data Collection Source	*	Data warehouse
Numerator	*	11,707.0
Denominator	*	38,463.0
Rate		30.4

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):

Analysis was performed on data in the LAC-DHS Enterprise Data Repository, which contains data from each hospital's information system and is updated on a daily basis. The number of female patients (ages 50-74) with 2+ primary care visits in FY 2010/2011 was 38,463 (denominator). The number of patients with CPT codes recorded indicating mammography screening among denominator population during a 24-month period ending in June 2012 was 11,707, for a screening rate of 30.4%. It is a challenge to capture 100% of the mammograms in the EDR, as completeness of coding continues to be a challenge. Patients also frequently obtain free mammograms in the community via mobile mammogram vans; this information was not previously able to be systematically collected in the past; however with the roll-out of our new Disease Management Registry, i2i, providers may enter this information and we hope to have more complete and accurate mammogram reporting. Implementation of the registry will improve mammography coding as well as serve as an auto-reminder for providers when patients are due. As part of our quality improvement efforts, all Category 3 data is shared routinely with facility leadership, outpatient medical directors, and quality directors. This is to both encourage providers to increase compliance with needed preventive care as well as identify opportunities for system-level improvements. As one specific lesson learned so far, we have learned of the challenges that one of our facilities (Rancho Los Amigos) has in accessing mammogram services due to the processes through which patients are referred for the test. We are currently correcting this issue and expect this to contribute to improved performance in the future.

Achievement	Yes
Achievement Value	1.00

Category 3: Preventive Health *(required)*

Reports results of the Influenza Immunization measure to the State (DY 7-10)

Data Collection Source	*	Data warehouse
Numerator	*	18,344.0
Denominator	*	65,754.0
Rate		27.9

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):

Analysis was performed on data in the LAC-DHS Enterprise Data Repository, which contains data from each hospital's information system and is updated on a daily basis. The number of patients (ages 50+) with 2+ primary care visits in FY 2010/2011 was 65,754 (denominator). The number of encounters with CPT codes indicating influenza immunization among denominator population during September, 2011 to February, 2012 was 18,344. Since the last semi-annual report, the numerator increased by 23%. Even more so than mammograms, it is a challenge capturing influenza vaccinations in the EDR as they are easily obtainable from non-DHS entities (e.g., drug stores, health fairs). We could improve influenza immunization rates in the future if we linked existing information systems to the state-wide immunization registry, CAIR. As our new Registry, i2i, rolls out, we also expect it to be easier for providers to enter that a patient received a flu shot at an outside facility and thus improve our overall rate as reported here.

Achievement	Yes
Achievement Value	1.00

Category 3: Preventive Health *(required)*

Report results of the Child Weight Screening 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: N/A

Achievement Value

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):

Achievement: N/A

Achievement Value

Report results of the Tobacco Cessation 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: N/A

Achievement Value

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
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 data in the indicated boxes (*). For the last two measures, which are both diabetes composite measures, please 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 automatically populate and flow to summary sheets

At-Risk Populations (required)

DY Total Computable Incentive Amount:	*	$ 25,203,750.00
Incentive Funding Already Received in DY:	*	$ 12,601,875.00

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

Data Collection Source	*	Data warehouse
Numerator	*	13,771.0
Denominator	*	34,279.0
Rate		40.2

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):

Analysis was performed on data submitted to LAC-DHS Office of Planning & Data Analytics by the LAC-DHS facilities. The denominator is the number of diabetics (ages 18-75) with 2+ primary care visits in FY 2010/2011: 34,279. The numerator is the number of diabetics with an LDL-C result of less than 100 mg/dl during July, 2011 to June, 2012: 13,771. As expected, the numerator doubled since the previous semi-annual report. The largest challenge with obtaining this measure was that lab data, although recently added to the Enterprise Data Repository (EDR), has not yet been successfully validated. In the coming demontration year, we will focus on validating the lab data that is entered into the EDR through the facilities' cluster-based Affinity systems. We will use the current rate of 40.2% as our baseline measure of LDL control and seek to improve this outcome in the coming demonstration years by sharing facility-specific results with each facility's Quality Improvement Team.

Achievement	Yes
Achievement Value	1.00

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

Data Collection Source	*	Data warehouse
Numerator	*	15,476.0
Denominator	*	34,279.0
Rate		45.1

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):

Analysis was performed on data submitted to LAC-DHS Office of Planning & Data Analytics by the DHS facilities. The denominator is the number of diabetics (ages 18-75) with 2+ primary care visits in FY 2010/2011: 34,279. The numerator is number of diabetics with a Hemoglobin A1c result of less than 8% during July, 2011 to June, 2012: 15,476. The numerator could not be comapared to the previous semi-annual report because the HbA1c cut off in that report was 9%. Going forward, we will use the less than 8% as our measure and seek to improve the rate of HbA1c control among our diabetics so that it exceeds the current baseline of 45.1%. Sharing facility-specific results with the Quality Improvement Teams from each faciltiy will assist us in this goal.

Achievement	Yes
Achievement Value	1.00

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: N/A

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: N/A

Achievement Value

Report results of the Pediatrics Asthma Care 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: N/A

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):

Achievement	N/A
Achievement Value	

Report results of the Diabetes 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):

Achievement	N/A
Achievement Value	

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4: Severe Sepsis Detection and Management *(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 data 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 automatically populate and flow to summary sheets

Severe Sepsis Detection and Management

DY Total Computable Incentive Amount:	*	$ 15,639,250.00
Incentive Funding Already Received in DY:	*	$ 10,426,166.67

Compliance with Sepsis Resuscitation bundle (%)

Numerator	*	748
Denominator	*	1,314
% Compliance		0.57

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):

Time Period	Numerator	Denominator	Percent
July 2011 to September 2011	169	302	56.0
October 2011 to December 2011	178	326	54.6
January 2012 to March 2012	197	349	56.4
April 2012 to June 2012	204	337	60.5

Due to the fact that Los Angeles County Department of Health Services (LAC-DHS) operates four hospitals, including three medical centers and a rehabilitation hospital, we faced geographical challenges with establishing a methodology to measure sepsis bundle compliance. The data collection for sepsis bundle compliance is an ongoing process. Due to data lags, reviewers are not able to obtain lists of applicable medical records for review until at least 45 days post discharge. Once the list of records is obtained for each of the four facilities, they are requested from the archive and reviewed on site at three facilities and centrally for the fourth. Each record is reviewed using a sepsis worksheet, which generally requires a minimum of 30 minutes. Data is placed onto a 59-point Excel spread sheet; each Sepsis worksheet is “reconciled” with the Excel spread sheet and “adjudicated” by clinicians, resulting in establishment of a numerator and a denominator. LAC-DHS reported an aggregate Sepsis Bundle Compliance rate of 36% to SNI in December 2011. The baseline data period was the six-month period of July 2009 through December 2009. A comparison compliance rate was obtained for the time period of July 2011 through December 2011, showing an improvement in aggregate compliance of 55%. Our current compliance reflects an aggregate compliance of 57%. This reflects a data period of July 2011 to June 2012.
Challenges/Barriers:
• Delays: Obtaining list of appropriate records, travelling to geographical sites to review records, labor intensive manual review of records and completion of Sepsis worksheet, manual reconciliation of Sepsis worksheets to Excel spreadsheets, and timely returns of adjudications. Reconciliation and adjudications then resulted in changes to the database.
• Changes resulting in re-working data: Lactate 4 hours before and 6 hours after declare time and use of blood products (300 to 500 cc) counted as met fluid administration, which led to recalculations of data worksheets and changes to the database.
• Clinicians: Lack of appreciation of how meeting the sepsis bundle is tied to decrease in mortality, unwillingness to change practice, failure to get all stakeholders involved early (phlebotomy, pharmacy, nursing attendants/assistants, etc.), and the initial belief that compliance could be acheived without embracing process changes.
• Ambiguity: Since time of declaration is a moving target, it is sometimes difficult to determine when T0 began.

DY Target (from the DPH system plan, if appropriate)	*	
% Achievement of Target		N/A
Achievement Value		1.00

Category 4: Severe Sepsis Detection and Management *(required)*

Optional Milestone: Continue implementation of Sepsis Resuscitation Bundle
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*
Denominator (if absolute number, enter "1")	*
Achievement	Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	* Yes

Continue implementation of Sepsis Resuscitation Bundle as evidenced by: Form DHS wide Sepsis Collaborative as evidenced by DHS Performance Measure and DHS Sepsis Meeting Minutes : LAC-DHS created a centralized Sepsis Collaborative Team, which meets monthly. Collaborative members include representatives from all of the four LAC-DHS hospitals. Members include physicians and nurses from the Intensive Care Units, the ED, and LAC-DHS Quality Improvement and Patient Safety (QIPS) staff. All agendas include bundle elements and yearly milestones which serve as a reminder and road map. At each collaborative meeting homework is assigned, collected and reflected in the minutes. Members are expected to communicate and get the homework done in collaboration with their local sepsis teams, which consist of MDs, nurses, pharmacy, ED registration, and lab personnel. Resulted System Changes: 1. Development of Triggers to support Early Identification of Sepsis and timely triage to appropriate area of care; 2. Development of Sepsis Resuscitation Order Set; 3. Provided Phlebotomy Services in the ED and designated responding Phlebotomy Services in-patient; 4. Antibiotics placed in Pyxis for timely access. 5. Designated “Name Stickiness” to alert clinicians, exp. Fever Work-Up (FWU) or Possible Early Sepsis Evaluation (PESE); 6. Clinician feedback; 7. Establishing automatic electronic triggers. **Continue implementation of Sepsis Resuscitation Bundle as evidenced by:** Revise CME approved curriculum used to train ED nurses and physicians in the detection and treatment of severe sepsis and septic shock patients as evidenced by curriculum sample: The LAC-DHS Sepsis Collaborative formulated the mandatory content for the Sepsis CME curriculum. Individual LAC facilities were able to tailor their Sepsis educational program based on the regional process differences as long as the formulated mandatory content was a part of the educational program. The mandatory content was distributed in the form of slides. Area-specific attention was given to barriers that had been identified by staff. **Continue implementation of Sepsis Resuscitation Bundle as evidenced by:** Train 30% ED nurses and physicians on severe sepsis and septic shock detection and treatment as evidenced by course log and CME records; educational duties are a shared responsibility between LAC-DHS Quality Improvement, Patient Safety (QIPS) staff, and local nursing and physician leadership. LAC-DHS QIPS staff collected ED staff rosters in September 2011 in order to formulate denominator values to meet this milestone. Only ED staff was included in the numerator, although additional staff attended the training. Training venues included physician faculty meetings, small groups of ED nurses, lectures and grand rounds. LAC-DHS exceeded the 30% goal and training remains ongoing. Sepsis training has been incorporated into all new clinical staff orientation and yearly review. We educated 67% (532 of 785) of the ED staff (MDs and RNs) by December 2011. ALL working LAC-DHS nursing staff received training during the 2012 Yearly Clinical Competency. **Continue implementation of Sepsis Resuscitation Bundle as evidenced by:** Create Sepsis Resuscitation Order Set that includes the resuscitation bundle elements as evidenced by order set sample. Each LAC-DHS facility created Sepsis Resuscitation Order Sets or revised existing order sets where they existed. The Sepsis Resuscitation Order Sets embeded all elements of the Sepsis Resuscitation Bundle. An expanded feature of the order sets was the creation of a laboratory option titled "Sepsis Panel". The Sepsis Collaborative aided in reaching consensus across system laboratories. The "Sepsis Panel" tests include, at a minimum, blood cultures, lactate, electrolyte panel, and coagulation tests. The identification of this label allows the clinician to order tests essential to detecting and treating sepsis with one keystroke. **Continue implementation of Sepsis Resuscitation Bundle as evidenced by:** Allocation of resources for data collection methodology development as evidenced by DHS Performance Measure Committee minutes. The Sepsis Worksheets identify patients that meet severe Sepsis criteria, the denominator criteria, and measure if included patients were treated with all elements of the Sepsis Bundle within the time frames required. Data collection tools were vetted by Sepsis teams. The methodology requires monthly downloads of medical records for each facility. Medical records are reviewed using the worksheet, which is then used to reconcile and adjudicate the data.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value	1.00

Category 4: Severe Sepsis Detection and Management *(required)*

Optional Milestone: Report at least 6 months of data collection on Sepsis Resuscitation Bundle Compliance to SNI for purposes of establishing the baseline and setting benchmarks.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *	
Denominator (if absolute number, enter "1") *	
Achievement	Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *	Yes

LAC-DHS submitted data to SNI on Sepsis Resuscitation Bundle compliance in December 2011. The baseline data period was the six months between July 2009 to December 2009. Findings demonstrated that 157 of 438 patients received all elements of the Sepsis Resuscitation Bundle within permitted timeframes of "Sepsis declaration". Baseline compliance rate is 36%.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *	Yes
Achievement Value	1.00

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *	
Denominator (if absolute number, enter "1") *	
Achievement	N/A
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *	

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *	
Achievement Value	

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *	
Denominator (if absolute number, enter "1") *	
Achievement	N/A
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *	

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *	
Achievement Value	

Category 4: Severe Sepsis Detection and Management *(required)*

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Severe Sepsis Detection and Management *(required)*

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

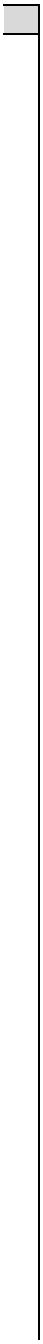
Denominator (if absolute number, enter "1") *

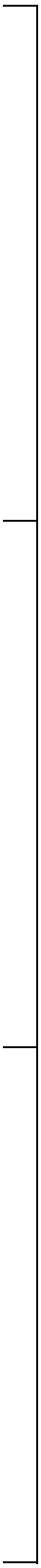
Achievement N/A

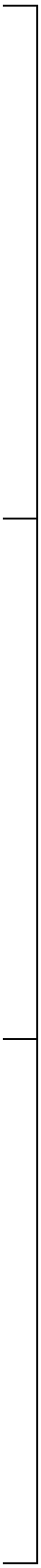
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value







CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(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 data 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 automatically populate and flow to summary sheets

Central Line Associated Blood Stream Infection

DY Total Computable Incentive Amount:	*	$ 15,639,250.00
Incentive Funding Already Received in DY:	*	$ 15,639,250.00

Compliance with Central Line Insertion Practices (CLIP) (%)

Numerator	*	2,346.00
Denominator	*	2,460.00
% Compliance		0.95

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):

CLIP Months/period	Numerator	Denominator	Compliance (%)
Annual July 2011 – June 2012	2,346	2,460	95%
(Please see CLIP detailed description under the next milestone below.)			

DY Target (from the DPH system plan)	*	
% Achievement of Target		N/A
Achievement Value		1.00

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(required)*

Optional Milestone: Continue implementation of the Central Line Insertion Practices (CLIP)
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

2a) Develop mandatory curriculum for physicians in the insertion of central lines; The LAC-DHS Healthcare Infection Prevention Best Practices group developed a central line curriculum to be used system-wide. To determine compliance, each facility submitted the list of staff to be included in the denominator to DHS QIPS, which, with its CME program, tracks module completion. In July 2012, the results were tabulated by the CME program. The goal of 100% was met and actually exceeded as staff not included in the original denominator completed the module. EVALUATION OF MODULE: The module was approved for CME and was designed to address both the knowledge gap and competency gap. The module has separate self-assessment post-tests. To address the competency gap, the module contains six skills expectations and staff self-report whether they can perform these skills after reading the module. Staff indicated in the evaluation form that they can perform the expected skills set (99%-100%/skill) after reading the module. The CME Office received approximately 2500 evaluation forms for final evaluation. CHALLENGES: (1) Some facilities administered the module early while others delayed, resulting in a slow review process. (2)The number of staff to be included in the denominator varied monthly with resident assignments. Facility CLABSI champions are to be credited as compliance was met. (3) The QIPS CME program created a database to track completion, yet some facilities created their own databases which resulted in conflicting compliance data. The conflict was resolved using QIPS/CME database as the source of compliance. 4) Due to process issues, multiple/duplicate forms were submitted; and (6) As previously stated, the evaluation forms must to be manually tabulated. (2b) Provide ongoing education to ICU staff on care of central lines; QIPS staff developed a monthly calendar for "ongoing classes". The class calendar was distributed to facilities for completion. Results are reported during the LAC-DHS Performance Measure Waiver Committee meetings. (2c) Allocate resources to provide expert support; QIPS staff coordinated a team training course and offered it to the members of facility CLABSI teams. BARRIERS AND CHALLENGES: (1) Performing small test of change, to some staff, is a new concept, or, it goes against the usual mechanisms of project implementation within the system. Further reiteration or process integration is still required; (2) Most of LAC facilities are currently in “paper to electronic documentation transition.” These have contributed to the delays or barriers on some of the projects being tested by the facilities. For example, some units have electronic documentation of “daily evaluation of line necessity (DELN)”- one of the central line bundles, while some are on paper. Staff go back and forth between paper and electronic documentation and also have created a burden in data gathering for auditors; (3) Relatedly, some staff are so uncomfortable typing in computers that there is resistance in the implementation of electronic documentation projects; (4) As some of the CLABSIs are associated to the maintenance of the catheter, some facilities wanted to implement products that can assist in decreasing catheter infections. Unfortunately, due to system wide budget issues, CLABSI champions expressed the need to keep following up with products approval committees or abandon the project. (2d) Allocate resources to develop data collection methodology. One of the challenges of gathering data is in the lack of direction from DSRIP. Requirements have changed throughout DY7. Each change required repulling and recalculating of data from NHSN. The original instructions were to include all units, including special care units (SCAs); this data was reported as baseline and semi-annual data (submitted in February 2012) for CLABSI. However, the new requirement is for all ICUs, NICUs, and ward areas – excluding SCAs. For the baseline, semi-annual, and annual report, the data is required to be aggregated. In the future, these data will be de-aggregated. Pulling these data from NHSN takes significant resources.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(required)*

Optional Milestone: Report as least 6 months of data collection on CLIP to SNI for purposes of establishing the baseline and setting benchmarks.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

CLIP Months/period	Numerator	Denominator	Compliance (%)
Baseline January 2011 – June 2011	1,155	1,235	94%
Semiannual January 2011- December 2011	2,337	2,487	94%
Annual July 2011 – June 2012	2,346	2,460	95%

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Optional Milestone: Report at least 6 months of data collection on CLABSI to SNI for purposes of establishing the baseline and setting benchmarks.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

CLABSI Months/period	Numerator(# of Infection)	Denominator (Central Line days)	Infection Rate	SIR
01/2011 – 06/2011	45	31,592	1.42	0.76
01/2011 – 12/2011	76	63,564	1.20	0.64
07/11 – 06/12	62	62,253	1.00	0.5

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Optional Milestone:
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(required)*

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(required)*

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

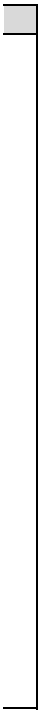
Denominator (if absolute number, enter "1") *

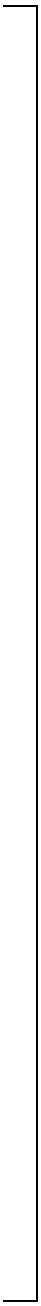
Achievement N/A

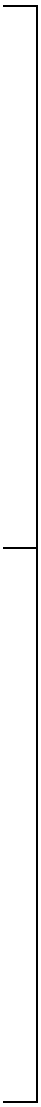
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value







DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4: Surgical Site Infection Prevention

REPORTING ON THIS PROJECT: * Yes

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Surgical Site Infection Prevention

DY Total Computable Incentive Amount: * $ 12,795,750.00

Incentive Funding Already Received in DY: * $ 12,795,750.00

Rate of surgical site infection for Class 1 and 2 wounds (%)

Numerator * 17.00

Denominator * 1,329.00

% Infection Rate 0.01

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):

SSI Months/period	Numerator(# of Infection)	Denominator (# procedures)	Infection Rate	SIR
07/11 – 06/12	17	1,329	1.28	0.69

DY Target (from the DPH system plan) *

% Achievement of Target N/A

Achievement Value 1.00

Optional Milestone: Assess understanding of and compliance with 6 SCIP Core measures for identified procedures using UHC Core Measure Data set as evidenced by DHS Performance Measure Committee minutes.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

Each LAC-DHS facility submits its SCIP data as part of its core measure set to University Healthsystem Consortium (UHC), which is the system's third party vendor. For each identified procedure, where applicable, performance on the 6 SCIP measures was downloaded using the UHC database and was tabulated. LAC/QIPS presented the data to facility SSI Teams to identify opportunities for process improvement. Opportunities for improvement included temperature control and documentation of appropriate hair removal.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value 1.00

Category 4: Surgical Site Infection Prevention

Optional Milestone: Address provider knowledge deficits using a variety of strategies e.g. team training as manifested by DHS Performance Measure Committee minutes.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

DHS/QIPS staff met with individual facility representatives to assess understanding of SSI process and outcome measures. At the facility meetings facility staff developed an "Issues" list. DHS QIPS found that our facilities did not have an accountability structure across the disciplines to address SSI issues. Multiple disciplines were involved in looking at SSI: MDs, Operating Room Nurse Managers, Clinic Nurse Managers, Infection Control, Quality Improvement, Data Analysts, etc. DHS/QIPS staff identified a variety of deficits that needed to be addressed, they included: (1) The lack of a mechanism to collect SSI of discharged postsurgical patients, (2) the inconsistent definition of SSI by different staff in the clinic areas, (3) incomplete data entry of postsurgical information in operating room information systems leading to delayed submission of data; (4) incomplete representation on SSI Teams; (5) Lack of documentation of interventions; (6) Miscoding of procedures which lead to delayed data gathering; (7) Inappropriate timing of the administration and discontinuation of surgical prophylaxis; (8) Inconsistent surgical data between surgical departments and Infection Control, etc. To address these deficits, DHS/QIPS coordinated team training for the facility SSI Teams. Speakers from Pascal Metrics provided the basics of team functioning and spoke on (a) performing "small test of change" for effective SSI interventions, (b) development of goals to achieve desired SSI outcomes, (c) mobilization of teams to improve SSI process and outcomes, etc. The SSI Team Training class was offered in January 24, 2012. Monthly follow-ups with Pascal Metrics were held starting March 2012 with the intent of discussing the projects of each SSI Team (i.e., identifying barriers, reporting small test of change, etc.) The major projects that were undertaken by the facility SSI teams included: (1) Inclusion of documentation triggers like text box (for SSI identification) in the Outpatient clinics (e.g., Wound Clinics, Surgical clinics), (2) Use of an algorithm to identify SSI in an outpatient clinic; (3) Education of SSI using photographs in a cardiothoracic surgical clinic; (4) Establishment of a “post-surgical one-screen in an operating room system” where, after each surgery, all surgical team (surgeons, nurses, anesthesiologist) member convene in front of the screen to be guided in their “post-surgical debriefing” with emphasis of ensuring that all SSI preventive measures were implemented during surgery; and (5) establishment of a “Learning Board” in a Cardiothoracic Unit and the Operating Room for the team’s pre-surgical and post-surgical debriefing.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Optional Milestone: Develop dashboard to compare compliance with SCIP Core Measures using UHC Core Measure Data targeted procedures as evidenced by DHS Performance Measure Committee minutes.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

LAC/QIPS staff created a dashboard using the UHC SCIP measure data. The dashboard was presented to the facility SSI teams at meetings and to the DHS Waiver group, which includes quality representatives from each facility. The dashboard provides graphic representation of each facility's compliance with the SCIP measures for the targeted procedures and also provides benchmarks. The dashboard can be updated on a quarterly basis to reflect progress on SCIP process measures.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Category 4: Surgical Site Infection Prevention

Optional Milestone: Report at least 6 months of data collection on SSI to SNI for purposes of establishing the baseline and setting benchmarks.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

SSI Months/period	Numerator(# of Infection)	Denominator (# procedures)	Infection Rate	SIR
04/11 – 09/11	5	674	0.74	0.43
04/11 – 03/12	15	1,302	1.15	0.63
07/11 – 06/12	17	1,329	1.28	0.69

LAC-DHS submitted data to SNI for the aggregate of the targeted procedures for all facilities. Each individual LAC-DHS facility selected two high risk procedures; LAC+USC is targeting Coronary Artery By-Pass Graft Surgery and Cardiac Surgery, Harbor/UCLA Medical Center is targeting Coronary Artery By-Pass Graft surgery and Hip Prosthesis Surgery, Olive View/UCLA Medical Center is targeting Gallbladder Surgery and Colon Surgery, Rancho Los Amigos National Rehabilitation Center is targeting Hip Prosthesis Surgery and Knee Prosthesis Surgery. The baseline data period was the six months between April 2011 to September 2011. The aggregate rate was 5 infections for 674 procedures for a rate of 0.74. One of the challenges of collecting SSI data is that the data is dynamic in NHSN (meaning the data keeps changing). Some of the reasons include, but are not limited to: (1) The inconsistent methods that facilities are using to collect denominator data: some are collecting it electronically and some are basing it on discharged information (after the medical records are coded); (2) Although there is an Operating Room System (ORSOS) that can be used to collect SSI denominator data, each facility had configured ORSOS differently so that information can be easily extrapolated in some facilities while it can be incomplete in other facilities; (3) There is a one-year open window to enter implant infection data (applicable to coronary artery bypass graft, hip prosthesis surgery and knee prosthesis surgery)- so the numbers of infection event (numerator) will continue to change (possibly also on denominator data if not caught initially); (4) Lack of methods to accurately collect post-discharge SSI; and (5) Changing State and/or NHSN reporting requirements. With each change in the number of procedures or criteria to report for the State or NHSN, there is an increase in required manpower to collect and enter data.

Efforts are being made to automate the process using existing ORSOS. To date, marrying the old with the new has produced limited success.

Furthermore, as facilities are trying to improve or establish processes to accurately collect post-discharge SSI, more SSIs are being realized. As previously stated, collection of all SSI for surveillance is problematic and facilities are continually finding methodologies to collect accurate SSI data. As a result, there may be a trend of increasing SSI.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Category 4: Surgical Site Infection Prevention

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

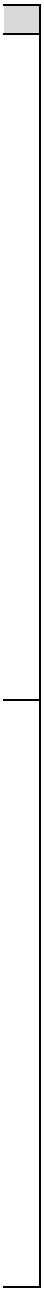
Denominator (if absolute number, enter "1") *

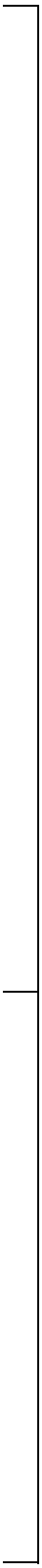
Achievement N/A

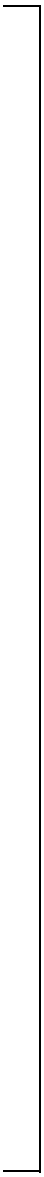
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

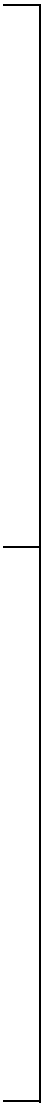
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value









DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4: Hospital-Acquired Pressure Ulcer Prevention

REPORTING ON THIS PROJECT: * No

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Hospital-Acquired Pressure Ulcer Prevention

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Prevalence of Stage II, III, IV or unstagable pressure ulcers (%)

Numerator *

Denominator *

Prevalence (%) N/A

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):

DY Target (from the DPH system plan) *

% Achievement of Target N/A

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4: Stroke Management

REPORTING ON THIS PROJECT: * No

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Stroke Management

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Stroke Management

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Stroke Management

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*
Denominator (if absolute number, enter "1")	*
Achievement	N/A
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*
Achievement Value	

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4: Venous Thromboembolism (VTE) Prevention and Treatment

REPORTING ON THIS PROJECT: * Yes

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*

* The yellow boxes indicate where the DPH system should input data
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Venous Thromboembolism (VTE) Prevention and Treatment

DY Total Computable Incentive Amount: * $ 12,795,750.00

Incentive Funding Already Received in DY: * $ 10,967,785.71

Optional Milestone: Form LAC-DHS VTE prevention collaborative as evidenced by LAC-DHS Performance Measure Committee minutes
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

LAC-DHS formed a system-wide VTE collaborative which included VTE team champions from each LAC-DHS facility and a representative from LAC-DHS pharmacy. The collaborative is facilitated by LAC-DHS Quality Improvement and Patient Safety Program (QIP) Staff. The Collaborative held its first face-to-face meeting in April 2011 during DY 6. The goal of the collaboative is to share best practices for VTE prevention and treatment across the system. A survey conducted in DY 6 demonstrated that individual facilities have done considerable work to prevent and treat VTE and that there is significant variation in compliance with recognized prevention and treatment practices. During DY 7 the collaborative met either face-to-face or via conference call. Participation in the LAC-DHS Collaborative has been enthusiastic, as each facility was represented at each meeting. Challenges to participation include Physician schedules and travel distance; challenges have been addressed by changing the meeting format to conference call sessions. LAC-DHS QIPS staff particpated in the UHC VTE prevention and treatment collaborative as well. Findings from the UHC collaborative were shared with LAC-DHS collaborative members. Collaborative activities are reported to the LAC-DHS Performance Measure/Waiver Committee.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Category 4: Venous Thromboembolism (VTE) Prevention and Treatment

Optional Milestone: VTE team wll set general goals and a timeline for construction of and implementation of VTE protocol as evendenced by DHS Performance Measure Committee minutes

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

The LAC-DHS collaborative delayed setting goals and timelines until the findings of baseline data collection were available. The six months baseline data (July 2009 to December 2009) was complete and available for review by collaborative representatives in November 2011. In December 2011, the collaborative met and used the baseline data to establish an action plan through 2013. The baseline data reflected higher compliance with best practices for ICU patients, but low prophylaxis compliance for non-ICU admitted patients. Additionally the data reflected that indicators VTE 1 (prophylaxis for non-ICU admits) and VTE 2 (prophylaxis for ICU admits) provided the greatest opportunity for improvement as these indicators effect large cohorts; VTE indicators 3,4, and 5 represent treatment practices for small cohorts.

The LAC-DHS collaborative action plan targeted four areas: Assessment of existing protocols or order sets used throughout the system, assessment of the effectiveness of the protocols or order sets in addressing recognized VTE prevention and treatment practices encapsulated in The Joint Commission Indications VTE 1 through VTE 5, creation or revision of existing protocols or order sets as needed, and embedment of order sets in existing and future systems.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Optional Milestone: Allocate resources to provide expert support as evidenced by DHS Performance Measure Committee minutes.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: * Yes

The LAC-DHS collaborative members determined that several collaborative participants constituted expertise on VTE prevention and treatment. The expert representatives include a pharmacist who manages his facility's anti-coagulation program, a physician who is the chief of his facility's Department of Internal Medicine, and a board-certified Hematologist that also directs her facility's anti-coagulation program. Both physician experts have been and are currently involved in ongoing research around anti-coagulation. The studies in which they have participated include "Utilization of VTE prophylaxis in the hospitalized medical patient" (2005), and " ENDORSE an epidemiological evaluation of venous thrombosis in the hospital setting" (2006-2007); the goal of these studies were to evaluate compliance with nationally accepted guidelines for prophylaxis of VTE in the inpatient setting. These experts provide ongoing support and input for colloaborative and system-wide VTE prophylaxis activities.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Category 4: Venous Thromboembolism (VTE) Prevention and Treatment

Optional Milestone: Allocate resources to develop VTE data collection methodology as evidenced by DHS Performance Measure Commmittee minutes.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *	
Denominator (if absolute number, enter "1") *	
Achievement	Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *	Yes

LAC-DHS QIPS staff created data collection tools for each of the 5 VTE indicators using The Joint Commission (TJC) Specifications Manual for Discharges 4-1-11 to 12-31-11. The draft collection tools were vetted with facility representatives of VTE teams. The tools were tested by QIPS staff users. Once the tools were finalized, a computerized database was created and loaded on lap tops to be used by LAC-DHS QIPS staff for data collection. The methodology requires monthly downloads of medical records that meet TJC specifications. Using TJC sampling guidelines, a sample of closed medical records was reviewed for inclusion and if included compliance was assessed. Once in the database, staff analyzed findings. The findings were sent to facility representatives for review. One of the challenges to meeting this milestone was creating new tools without benefit of our third party administrator's analysis and input. Historically, when collecting data for other indicators such as core measures, the third party vendors create the abstraction tool and makes it available via the web. Additionally, we participate in web meetings where any questions can be vetted. As the VTE measures were intended for the "Meaningful Use" platform, this modality was not available to us. An example of the challenges created is that after over a year of data collection we assessed the VTE prophylaxis measure compliance for the period of "the day after admission", whereas the VTE measures under the SCIP Core Measure set assesses compliance by looking at the period of "24 hours" after admission.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *	Yes
Achievement Value	1.00

Optional Milestone: Allocate resources to collect data on VTE measures as evidenced by DHS Performance Measure Committee Minutes.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *	
Denominator (if absolute number, enter "1") *	
Achievement	Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *	Yes

The LAC-DHS Performance Measure Committee members, in conjunction with LAC-DHS Quality Improvement and Patient Safety (QIPS) staff, elected to collect VTE data for our four participating hospitals using LAC-DHS QIPS staff. The basis for this decision was to maximize resources through consolidation and to maximize consistency in collection methodology. LAC/QIPS use their data warehouse to identify medical records that meet the VTE indicator criteria. LAC/QIPS staff either request paper medical records, or review patient files electronically depending on the facility. Resources were a challenge for this milestone. The VTE indicators required review of a minimum of 400 records a month. LAC-DHS hired additional staff to meet this demand.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *	Yes
Achievement Value	1.00

Category 4: Venous Thromboembolism (VTE) Prevention and Treatment

Optional Milestone: Report at least 6 months of data collection of VTE management process measures to SNI for the purposes of establishing the baseline and setting benchmarks.

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

LAC-DHS submitted data to SNI on 5 VTE process measures in December 2011. The baseline data period was the six months between July 2009 and December 2009. The findings for LAC-DHS are as follows: VTE1- Prophylaxis for all admits: sample compliance 746/1339 for a 55.7% compliance rate; VTE2- Prophylaxis for ICU population: sample demonstrated compliance 227/280 for a 81.1% compliance rate; VTE3 - Bridge Therapy for Warfarin: demonstrated compliance was 50/60 for a 83.3% compliance rate; VTE4- Monitoring for patients on Unfractionated Heparin: demonstrated compliance was 24/25 for a compliance rate of 96%; VTE5-Discharge instructions for patients on Warfarin: demonstrated compliance was 41/55 for a compliance rate of 74.5%.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

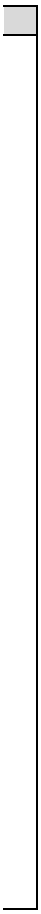
Optional Milestone: Report the 5 VTE process measures data to the State.

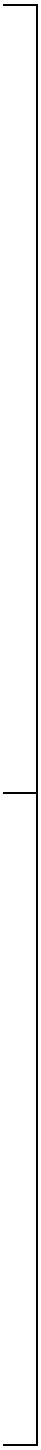
(insert milestone)

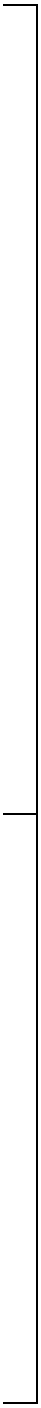
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	5.00
Denominator (if absolute number, enter "1")	*	1.00
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions:	*	Yes

Using the method outlined in VTE optional milestone 4, LAC/DHS collected data on 5 VTE process measures for the period July 2011 to June 2012. The findings for LAC/DHS are as follows: VTE1- Prophylaxis for all admits: sample compliance 2299/3098 for 74% compliance rate ; VTE2- Prophylaxis for ICU population; sample demonstrated compliance 661/748 for 88% compliance rate; VTE3 - Bridge Therapy for Warfarin: demonstrated compliance was 133/162 for 82% compliance rate; VTE4- Monitoring for patients on Unfractionated Heparin: demonstrated compliance was 130/131 for a compliance rate of 99%; VTE5- Discharge instructions for patients on Warfarin: demonstrated compliance 41/55 for a compliance rate of 74.5%.
Although, interventions effecting compliance will all milestones were in the early stages during this period, the data for the July 2011 to June 2012 period demonstrates increased compliance over baseline for most measures.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	5.00
Achievement Value		1.00







DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: Los Angeles County Department of Health Services
REPORTING YEAR: DY 7
DATE OF SUBMISSION: 9/30/2012

Category 4: Falls with Injury Prevention

REPORTING ON THIS PROJECT: * No

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data 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 automatically populate and flow to summary sheets

Falls with Injury Prevention

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Prevalence of patient falls with injuries (Rate per 1,000 patient days)

Numerator *

Denominator *

Prevalence Rate N/A

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):

DY Target (from the DPH system plan) *

% Achievement of Target N/A

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Falls with Injury Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Falls with Injury Prevention

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and provide an in-depth description of progress towards milestone achievement as stated in the instructions: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value