

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

- * DPH SYSTEM:
- * REPORTING YEAR:
- * DATE OF SUBMISSION:

The University of California, Davis Medical Center DY 7 3/31/2012

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	7,972,500
Enhance Interpretation Services and Culturally Competent Care	
Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities	7,972,500
Enhance Urgent Medical Advice	
Introduce Telemedicine	
Enhance Coding and Documentation for Quality Data	
Develop Risk Stratification Capabilities/Functionalities	
Expand Capacity to Provide Specialty Care Access in the Primary Care Setting	
Expand Specialty Care Capacity	
Enhance Performance Improvement and Reporting Capacity	
TOTAL CATEGORY 1 INCENTIVE PAYMENT:	15,945,000
Category 2 Projects	
Expand Medical Homes	5,048,750
Expand Chronic Care Management Models	
Redesign Primary Care	
Redesign to Improve Patient Experience	
Redesign for Cost Containment	
Integrate Physical and Behavioral Health Care	
Increase Specialty Care Access/Redesign Referral Process	
Establish/Expand a Patient Care Navigation Program	
Apply Process Improvement Methodology to Improve Quality/Efficiency	5,048,750
Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation	
Use Palliative Care Programs	
Conduct Medication Management	4,543,875
Implement/Expand Care Transitions Programs	5,048,750
Implement Real-Time Hospital-Acquired Infections (HAIs) System	



Category 3 Domains	
Patient/Care Giver Experience (required)	3,378,375
Care Coordination (required)	1,689,188
Preventive Health (required)	1,689,188
At-Risk Populations (required)	1,689,188
TOTAL CATEGORY 3 INCENTIVE PAYMENT:	8,445,938
Category 4 Interventions	
Severe Sepsis Detection and Management (required)	1,941,042
Central Line Associated Blood Stream Infection Prevention (required)	1,588,125
Surgical Site Infection Prevention	1,588,125
Hospital-Acquired Pressure Ulcer Prevention	1,429,313
Stroke Management	
Venous Thromboembolism (VTE) Prevention and Treatment	
Falls with Injury Prevention	
TOTAL CATEGORY 4 INCENTIVE PAYMENT:	6,546,604
TOTAL INCENTIVE PAYMENT	50,627,667



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP) DPH SYSTEM: The University of California, Davis Medical Center REPORTING YEAR: DY 7 DATE OF SUBMISSION: 3/31/2012 Category 1 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics. * <u>Instructions for DPH systems: Do not complete, this tab will automatically populate.</u>

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		
	ease Management Registry Functionality	
Process Milestone:	Milestone 1.4: Implement a system to accommodate newly diagnosed	Yes
Achievement Value		1.00
Process Milestone:	Milestone 1.5: Plan development of tethered registry to capture patient	Yes
Achievement Value		1.00
Process Milestone:	Milestone 1.6: Design Patient Experience Report with PRC and paper-	Yes
Achievement Value		1.00
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:	<u> </u>	N/A
Achievement Value		
Improvement Milestone:	<u> </u>	N/A
Achievement Value		
DY Total Computable Incent	ive Amount:	\$ 7,972,500.00
Total Sum of Achievement V	alues:	3.00
Total Number of Milestones:		3.00
Achievement Value Percenta	age:	100%
Eligible Incentive Funding A	nount:	\$ 7,972,500.00
Incentive Funding Already R	eceived in DY:	\$ -
Incentive Payment Amount	<u>=</u>	\$ 7,972,500.00



Category 1 Summary Page Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities	
Process Milestone: Milestone 2.3: Develop a plan to stratify patient outcomes using REAL	Yes
Achievement Value	1.00
Process Milestone: Milestone 2.4: Patient Experience questionnaire to be designed and	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:	\$ 7,972,500.00
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	\$ 7,972,500.00
Incentive Funding Already Received in DY:	\$-
Incentive Payment Amount:	\$ 7,972,500.00



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP) DPH SYSTEM: The University of California, Davis Medical Center REPORTING YEAR: DY 7 DATE OF SUBMISSION: 3/31/2012 Category 2 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics. * <u>Instructions for DPH systems: Do not complete, this tab will automatically populate.</u>

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:	Milestone 5.4: Develop a timeline and plan for submission of PCMH	Yes
Achievement Value		1.00
Process Milestone:	Milestone 5.5: Development of Patient Experience survey using PCMH	Yes
Achievement Value		1.00
Process Milestone:	Milestone 5.6: Design a seasonal Influenza notification system using the	Yes
Achievement Value		1.00
Process Milestone:	Milestone 5.7: Design of MyChart [™] Influenza notification report for	Yes
Achievement Value		1.00
Process Milestone:	•_	N/A
Achievement Value		
Improvement Milestone:	<u> </u>	N/A
Achievement Value		
Improvement Milestone:	<u> </u>	N/A
Achievement Value		
Improvement Milestone:	<u>-</u>	N/A
Achievement Value		
Improvement Milestone:		N/A
Achievement Value		
Improvement Milestone:		N/A
Achievement Value		
DY Total Computable Incent	ive Amount:	\$ 5,048,750
Total Sum of Achievement V	alues:	4.00
Total Number of Milestones:		4.00
Achievement Value Percenta	age:	100%
Eligible Incentive Funding Ar	nount:	\$ 5,048,750
Incentive Funding Already R	eceived in DY:	\$ -
Incentive Payment Amount	<u></u>	\$ 5,048,750



Category 2 Summary Page Apply Process Improvement Methodology to Improve Quality/Efficiency	
Process Milestone: Milestone 6.3: Develop early-warning systems within the UCDMC EHR	Yes
Achievement Value	1.00
Process Milestone: Milestone 6.4: LSS Just-in-Time (JIT) training to at least 2	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:	\$ 5,048,750
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	\$ 5,048,750
Incentive Funding Already Received in DY:	\$ -
Incentive Payment Amount:	\$ 5,048,750



Category 2 Summary Page Conduct Medication Management

	agement	
Process Milestone:	Milestone 4.3: Implement services to improve continuity of medication	Yes
Achievement Value		1.00
Process Milestone:	Milestone 4.4: Provide services to improve continuity of medication use	0.5
Achievement Value		0.5
Process Milestone:	Milestone 4.5: Implement safeguards in EHR to ensure compliance with	Yes
Achievement Value		1.00
Process Milestone:	Milestone 4.6: Smart infusion pumps are implemented for remaining	Yes
Achievement Value		1.00
Process Milestone:	Milestone 4.7: Planning is completed for full implementation of bedside	Yes
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 Incen	tive Amount:	\$ 5,048,750
Total Sum of Achievement	Values:	4.50
Total Number of Milestones	:	5.00
Achievement Value Percent	tage:	90%
Eligible Incentive Funding A	mount:	\$ 4,543,875
Incentive Funding Already F	Received in DY:	\$-
Incentive Payment Amoun	<u>it:</u>	\$ 4,543,875



Implement/Expand Care T			Vaa	_
Process Milestone:	Milestone 3.2: Expand ED case management to seven days per week		Yes	
Achievement Value				00
Process Milestone:	Milestone 3.3: Plan the construction of tethered registry to EHR to		Yes	
Achievement Value				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 Incent	ive Amount:		\$ 5,048,75	50
Total Sum of Achievement V	/alues:		2.0	00
Total Number of Milestones:			2.0	00
Achievement Value Percent	age:		100	0%
Eligible Incentive Funding A	mount:		\$ 5,048,75	50
Incentive Funding Already R	eceived in DY:		\$-	
Incentive Payment Amoun	<u>t.</u>		\$ 5,048,75	50

Category 2 Summary Page



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)DPH SYSTEM:The University of California, Davis Medical CenterREPORTING YEAR:DY 7DATE OF SUBMISSION:3/31/2012Category 3 Summary Page	
 This table is the summary of data reported for the DPH system. Please see the following pages for the <i>Instructions for DPH systems: Do not complete, this tab will automatically populate.</i> The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or 9 The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, The red boxes indicate Total Sums. 	%.
Category 3 Domains	
Patient/Care Giver Experience (required) Undertake the necessary planning, redesign, translation, training and contract 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:	\$ 3,378,375
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	\$ 3,378,375
Incentive Funding Already Received in DY:	\$-
Incentive Payment Amount:	\$ 3,378,375



Category 3 Summary Page Care Coordination (required)	
Report results of the Diabetes, short-term complications measure to the State (DY7-10)	Yes
Achievement Value	0.50
Report results of the Uncontrolled Diabetes measure to the State (DY7-10)	Yes
Achievement Value	0.50
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:	\$ 3,378,375
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	50%
Eligible Incentive Funding Amount:	\$ 1,689,188
Incentive Funding Already Received in DY:	\$ -
Incentive Payment Amount:	\$ 1,689,188

DSRIP Semi-Annual Reporting Form



Category 3 Summary Page Preventive Health (required) Report results of the Mammography Screening for Breast Cancer	
measure to the State (DY7-10)	Yes
Achievement Value	0.50
Reports results of the Influenza Immunization measure to the State (DY7-10)	Yes
Achievement Value	0.50
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:	\$ 3,378,375
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	50%
Eligible Incentive Funding Amount:	\$ 1,689,188
Incentive Funding Already Received in DY:	\$ -
Incentive Payment Amount:	\$ 1,689,188



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	0.50
Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10)	Yes
Achievement Value	0.50
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:	\$ 3,378,375
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	50%
Eligible Incentive Funding Amount:	\$ 1,689,188
Incentive Funding Already Received in DY:	\$-
Incentive Payment Amount:	\$ 1,689,188



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

 DPH SYSTEM:
 The University of California, Davis Medical Center

 REPORTING YEAR:
 DY 7

 DATE OF SUBMISSION:
 3/31/2012

 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.*

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Category 4 Interventions Severe Sepsis Detection and Management (required) Compliance with Sepsis Resuscitation bundle (%) 0.28 0.50 Achievement Value N/A Sepis Mortality (%) Achievement Value **Optional Milestone:** 7.4. Develop and implement Best Practice Alerts within the UCDMC Yes Achievement Value 1.00 7.5: Report at least 6 months of data collection on Sepsis Resuscitation **Optional Milestone:** Yes Achievement Value 1.00 **Optional Milestone:** N/A Achievement Value DY Total Computable Incentive Amount: \$ 2,329,250 2.50 Total Sum of Achievement Values: Total Number of Milestones: 3.00 Achievement Value Percentage: 83% **Eligible Incentive Funding Amount:** \$ 1,941,042 Incentive Funding Already Received in DY: \$ **Incentive Payment Amount:** 1,941,042



Category 4 Summary Page	
Central Line Associated Blood Stream Infection Prevention (required) Compliance with Central Line Insertion Practices (CLIP) (%)	0.78
Achievement Value	0.50
Central Line Bloodstream Infection (Rate per 1,000 patient days)	N/A
Achievement Value	
Optional Milestone: 8.2 - SNI Collaborative Participation (CLIP)	Yes
Achievement Value	1.00
Optional Milestone: 8.3 - SNI Collaborative Participation (CLABSI)	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	
DY Total Computable Incentive Amount:	\$ 1,905,750
Total Sum of Achievement Values:	2.50
Total Number of Milestones:	3.00
Achievement Value Percentage:	83%
Eligible Incentive Funding Amount:	\$ 1,588,125
Incentive Funding Already Received in DY:	\$-
Incentive Payment Amount:	\$ 1,588,125



Category 4 Summary Pag			
Surgical Site Infection Pr Rate of surgical site infection	evention ction for Class 1 and 2 wounds (%)		0.03
Achievement Value			0.50
Optional Milestone:	9.3 - TheraDoc Software		Yes
Achievement Value			1.00
Optional Milestone:	9.4 - SNI Collaborative Participation		Yes
Achievement Value	i		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			
DY Total Computable Incen	tive Amount:		\$ 1,905,750
Total Sum of Achievement	Values:		2.50
Total Number of Milestones	X		3.00
Achievement Value Percen	tage:		83%
Eligible Incentive Funding A	Amount:		\$ 1,588,125
Incentive Funding Already Received in DY:			\$-
Incentive Payment Amour	<u>nt:</u>		\$ 1,588,125



Category 4 Summary Page	
Hospital-Acquired Pressure Ulcer Prevention Prevalence of Stage II, III, IV or unstagable pressure ulcers (9	6) 0.96
Achievement Value	0.50
Optional Milestone: <u>10.3 - SNI Collaborative Participati</u>	
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	
DY Total Computable Incentive Amount:	\$ 1,905,750
Total Sum of Achievement Values:	1.50
Total Number of Milestones:	2.00
Achievement Value Percentage:	75%
Eligible Incentive Funding Amount:	\$ 1,429,313
Incentive Funding Already Received in DY:	\$ -
Incentive Payment Amount:	\$ 1,429,313



DPH SYSTEM: REPORTING YEAR:	Reform Incentive Payments (DSRIP) The University of California, Davis Medical Center DY 7	
DATE OF SUBMISSION:	3/31/2012 REPORTING ON THIS PROJECT:	* Yes
Category 1: Implement and	Utilize Disease Management Registry Functionality	165
please type in all of your DY i The yellow boxes indicate w The black boxes indicate	ns: Please select above whether you are reporting on this project. If 'yes', milestones for the project below and report data in the indicated boxes (*). there the DPH system should input data Milestones and will automatically populate and flow to summary sheets ogress made toward the Milestone ("Achievement Value") and will automatic	cally
Implement and Utilize Dis	ease Management Registry Functionality	
DY Total Computable Incentive	e Amount:	* \$ 7,972,500
Incentive Funding Already Rec	eived in DY:	* \$ -
Process Milestone:	Milestone 1.4: Implement a system to accommodate newly diagnosed chronic disease management patients within at least 1 primary care clinic.	
	(insert milestone)	-
Numerator (if N/A, use "yes/no	" form below; if absolute number, enter here)	*
Denominator (if absolute numb	per, enter "1")	*
Achievement		Yes
	ilestone has been achieved, select "yes" or "no" from the dropdown n in-depth description of how the milestone was achieved:	* Yes
	ed to accommodate patients completed.	
DY Target (from the DPH syste	em plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value		1.00
Process Milestone:	Milestone 1.5: Plan development of tethered registry to capture patient enrollment in Chronic Disease Management program. (insert milestone)	_
Numerator (if N/A, use "yes/no	" form below; if absolute number, enter here)	*
Denominator (if absolute numb	per, enter "1")	*
Achievement		Yes
	ilestone has been achieved, select "yes" or "no" from the dropdown in-depth description of how the milestone was achieved:	* Yes
Metric 1.5: Plan of tethered rec	jistry completed.	
DY Target (from the DPH syste Achievement Value	em plan) or enter "yes" if "yes/no" type of milestone	* Yes 1.00



Category 1: Implement and Utilize Disease Management Registry Functionality

Process Milestone:	Milestone 1.6: Design Patient Experience Report with PRC and paper-based companion survey outcomes to be completed. (insert milestone)	_
Numerator (if N/A, use "yes/ne	o" form below; if absolute number, enter here)	*
Denominator (if absolute num	ber, enter "1")	*
Achievement		Yes
If "yes/no" as to whether the n menu, and (if "yes") provide a	* Yes	
Metric 1.6: Patient Experience	e Report developed using PRC in comparison with paper-based survey results.	
DY Target (from the DPH syst	tem plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value		1.00



CA 1115 Waiver - Delivery Syste OPH SYSTEM:	m Reform Incentive Payments (DSRIP) The University of California, Davis Medical Center	
REPORTING YEAR:	DY 7	
DATE OF SUBMISSION:	3/31/2012	+)/
Category 1: Collect Accur	REPORTING ON THIS PROJECT: ate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities	* Yes
Below is the data reported Instructions for DPH syst please type in all of your D The yellow boxes indicate The black boxes indicate The blue boxes show p populate and flow to su Collect Accurate Race, DY Total Computable Incen Incentive Funding Already F Process Milestone: Numerator (if N/A, use "yes/ Denominator (if absolute nu Achievement If "yes/no" as to whether the	ate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities for the DPH system. ems: Please select above whether you are reporting on this project. If 'yes', Y milestones for the project below and report data in the indicated boxes (*). e where the DPH system should input data the Milestones and will automatically populate and flow to summary sheets progress made toward the Milestone ("Achievement Value") and will automatic ummary sheets Ethnicity, and Language (REAL) Data to Reduce Disparities tive Amount: teceived in DY: Milestone 2.3: Develop a plan to stratify patient outcomes using REAL data and strategy to link to quality data. (insert milestone) no" form below; if absolute number, enter here)	
menu, and (if "yes") provide Metric 2.3: Strategic plan de	an in-depth description of how the milestone was achieved: veloped.	
Achievement Value	stem plan) or enter "yes" if "yes/no" type of milestone	* Yes 1.00
		1.00
Process Milestone:	Milestone 2.4: Patient Experience questionnaire to be designed and tested using a sample set of patients across demographics in all clinical areas where data is collected.	
	(insert milestone)	
Numerator (if N/A, use "yes/	no" form below; if absolute number, enter here)	*
Denominator (if absolute nu	mber, enter "1")	*
Achievement		Yes
-	milestone has been achieved, select "yes" or "no" from the dropdown an in-depth description of how the milestone was achieved:	* Yes
Metric 2.4: Patient experience	ce questionnaires designed and test implemented.	
DY Target (from the DPH sy Achievement Value	stem plan) or enter "yes" if "yes/no" type of milestone	* Yes 1.00



	DSRIP Semi-	Annual Reporting Form	
CA 1115 Waiver - Delivery Syste DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:	em Reform Incentive Payments (DSRI The University of California, Dav DY 7 3/31/2012		* Yes
Category 2: Expand Medi	ical Homes		100
please type in all of your D * The yellow boxes indicat The black boxes indicat	tems: Please select above whet Y milestones for the project below e where the DPH system should in ate Milestones and will automation progress made toward the Miles	her you are reporting on this project. If 'yes', ow and report data in the indicated boxes (*). but data cally populate and flow to summary sheets stone ("Achievement Value") and will automatic	ally
Expand Medical Homes	3		
DY Total Computable Incen	tive Amount:		* \$ 5,048,750
Incentive Funding Already F	Received in DY:		* \$ -
Process Milestone:	Milestone 5.4: Develop a time for Primary Care Network sites	line and plan for submission of PCMH application S. (insert milestone)	
Numerator (if N/A_use "ves	/no" form below; if absolute numbe		*
Denominator (if absolute nu			*
Achievement			Yes
2	e milestone has been achieved, sel e an in-depth description of how the	ect "yes" or "no" from the dropdown milestone was achieved:	* Yes
Metric 5.4: Timeline and pla	In for PCMH NCQA application sub	mission completed.	
DY Target (from the DPH sy	ystem plan) or enter "yes" if "yes/nc	" type of milestone	* Yes
Achievement Value			1.00
Process Milestone:	Milestone 5.5: Development o be designed and tested.	f Patient Experience survey using PCMH criteria to	
		(insert milestone)	
Numerator (if N/A, use "yes	/no" form below; if absolute numbe	r, enter here)	*
Denominator (if absolute nu	ımber, enter "1")		*
Achievement			Yes
	e milestone has been achieved, sel e an in-depth description of how the	ect "yes" or "no" from the dropdown milestone was achieved:	* Yes
Metric 5.5: Patient Experien	ce survey using PCMH criteria con	npleted.	

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

1.00

* Yes



Category 2: Expand Medical Homes

Process Milestone:	Milestone 5.6: Design a seasonal Influenza notification system using the EHR MyChart [™] functionality to send messages to all MyChart [™] enrolled patients on the importance of Immunizations. (insert milestone)	-
Numerator (if N/A, use "ves/no	" form below; if absolute number, enter here)	*
Denominator (if absolute numl		*
Achievement		Yes
If "yes/no" as to whether the m	ilestone has been achieved, select "yes" or "no" from the dropdown n in-depth description of how the milestone was achieved:	* Yes
Metric 5.6: MyChart [™] Influenz	a notification plan implemented.	
DY Target (from the DPH syste	em plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value		1.00
Process Milestone:	Milestone 5.7: Design of MyChart [™] Influenza notification report for provider/staff use. (insert milestone)	-
Numerator (if N/A, use "yes/nc	" form below; if absolute number, enter here)	*
Denominator (if absolute numl	per, enter "1")	*
Achievement		Yes
If "yes/no" as to whether the m menu, and (if "yes") provide ar	* Yes	
Metric 5.7: Design of MyChart	™ Influenza notification completed.	Ţ
DY Target (from the DPH syste	* Yes	
Achievement Value	1.00	



CA 1115 Waiver - Delivery Systen DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:	1 Reform Incentive Payments (DSRIP) The University of California, Davis Medical Center DY 7 3/31/2012	
DATE OF SODIMISSION.	REPORTING ON THIS PROJECT:	* Yes
Category 2: Apply Process	Improvement Methodology to Improve Quality/Efficiency	
 please type in all of your DY The yellow boxes indicate The black boxes indicate 	ms: Please select above whether you are reporting on this project. If 'yes', milestones for the project below and report data in the indicated boxes (*). where the DPH system should input data e Milestones and will automatically populate and flow to summary sheets ogress made toward the Milestone ("Achievement Value") and will automatic	ally
Apply Process Improven	nent Methodology to Improve Quality/Efficiency	
DY Total Computable Incentiv	ve Amount:	* \$ 5,048,750
Incentive Funding Already Re	eceived in DY:	* \$ -
Process Milestone:	Milestone 6.3: Develop early-warning systems within the UCDMC EHR to act upon identified problems. (insert milestone)	-
Numerator (if N/A, use "yes/n	o" form below; if absolute number, enter here)	*
Denominator (if absolute num		*
Achievement		Yes
	nilestone has been achieved, select "yes" or "no" from the dropdown In in-depth description of how the milestone was achieved:	* Yes
	respective early-warning systems through dashboard reports.	
DY Target (from the DPH sys Achievement Value	tem plan) or enter "yes" if "yes/no" type of milestone	* Yes
Process Milestone:	Milestone 6.4: LSS Just-in-Time (JIT) training to at least 2 multidisciplinary teams for specific projects.	
	(insert milestone)	
Numerator (if N/A, use "yes/n	o" form below; if absolute number, enter here)	*
Denominator (if absolute num	iber, enter "1")	*
Achievement		Yes
	nilestone has been achieved, select "yes" or "no" from the dropdown in in-depth description of how the milestone was achieved:	* Yes
	the training that includes the number or relevant providers/staff trained and/or progress/result of the respective projects.	
DY Target (from the DPH sys Achievement Value	tem plan) or enter "yes" if "yes/no" type of milestone	* Yes 1.00



	DSRIP Semi-	Annual Reporting Fo	rm	
CA 1115 Waiver - Delivery System R DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:	eform Incentive Payments (DSRIP) The University of California, Davis DY 7 3/31/2012			
Category 2: Conduct Medicat	ion Management	REPORTING	ON THIS PROJECT:	* Yes
The black boxes indicate N	: Please select above whether lestones for the project below here the DPH system should inpu filestones and will automatical ress made toward the Milestor	and report data in the ind data y populate and flow to su	icated boxes (*). Immary sheets	
Conduct Medication Manag	gement			
DY Total Computable Incentive	Amount:			* \$ 5,048,750
Incentive Funding Already Rece	ived in DY:			* \$ -
Process Milestone:	Milestone 4.3: Implement servic medication optimization, discha follow-up and education) for pat warfarin.	ge medication reconciliation	n, after-discharge	
	wanami.	(insert milestone)		
Numerator (if N/A, use "yes/no"	form below; if absolute number,	enter here)		*
Denominator (if absolute numbe	er, enter "1")			*
Achievement				Yes
	estone has been achieved, select in-depth description of how the m	<i>,</i> ,	pdown	* Yes
Metric 4.3: Pharmacist and nurs one patient	e are hired and begin providing o	ontinuity of medication use	services to at least	
DY Target (from the DPH syster	n plan) or enter "yes" if "yes/no"	ype of milestone		* Yes
Achievement Value				1.00
Process Milestone:	Milestone 4.4: Provide services least 50% of patients with heart	. ,		
		(insert milestone)		
	form below; if absolute number,	enter here)		* 91
Denominator (if absolute numbe	er, enter "1")			* 184
Achievement				0.5
menu, and (if "yes") provide an i	estone has been achieved, select in-depth description of how the m	•	pdown	*
Metric 4.4: Numerator: patients Denominator: total number of ta	who receive services. rgeted patients who are discharc	ed during time frame.		

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

0.5

0.50



Category 2: Conduct Medi	cation Management	
Process Milestone:	Milestone 4.5: Implement safeguards in EHR to ensure compliance with criteria for safe use of Black Box Warning medications. (insert milestone)	
Numerator (if N/A, use "yes/r	o" form below; if absolute number, enter here)	*
Denominator (if absolute nur	nber, enter "1")	*
Achievement		Yes
-	milestone has been achieved, select "yes" or "no" from the dropdown an in-depth description of how the milestone was achieved:	* Yes
Metric 4.5: Safeguards are ir	place for all outpatient prescriptions for Black Box Warning medications.	
DY Target (from the DPH sys	stem plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value		1.00
Process Milestone:	Milestone 4.6: Smart infusion pumps are implemented for remaining 25% of infusions (PCA, epidural and syringe pumps) (insert milestone)	
Numerator (if N/A, use "yes/r	o" form below; if absolute number, enter here)	*
Denominator (if absolute nur	nber, enter "1")	*
Achievement		Yes
If "yes/no" as to whether the menu, and (if "yes") provide a	* Yes	
Metric 4.6: 98% of all intrave	nous infusions are administered via smart pumps.	
DY Target (from the DPH sys	stem plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value		1.00
Process Milestone:	Milestone 4.7: Planning is completed for full implementation of bedside bar-code scanning (insert milestone)	e
Numerator (if N/A, use "yes/r	o" form below; if absolute number, enter here)	*
Denominator (if absolute nur	nber, enter "1")	*
Achievement		Yes
If "yes/no" as to whether the menu, and (if "yes") provide a	* Yes	
	leted and resources are secured for full implementation.	
	stem plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value		1.00



CA 1115 Waiver - Delivery Syster DPH SYSTEM: REPORTING YEAR: DATE OF SUBMISSION:	n Reform Incentive Payments (DSRIP) The University of California, Davis Medical Center DY 7 3/31/2012	
Category 2: Implement/Ex	REPORTING ON THIS PROJECT: band Care Transitions Programs	* Yes
	-	
please type in all of your DY The yellow boxes indicate The black boxes indicate	ms: Please select above whether you are reporting on this project. If 'yes', ' milestones for the project below and report data in the indicated boxes (*). where the DPH system should input data e Milestones and will automatically populate and flow to summary sheets rogress made toward the Milestone ("Achievement Value") and will automatic	ally
Implement/Expand Care	Transitions Programs	
DY Total Computable Incenti	ve Amount:	* \$ 5,048,750
Incentive Funding Already Re	eceived in DY:	* \$
Process Milestone:	Milestone 3.2: Expand ED case management to seven days per week (infrastructure-process measure) (insert milestone)	-
Numerator (if N/A use "ves/n	o" form below; if absolute number, enter here)	*
Denominator (if absolute nun		*
Achievement		Yes
If "yes/no" as to whether the i	nilestone has been achieved, select "yes" or "no" from the dropdown an in-depth description of how the milestone was achieved:	* Yes
Metric 3.2: Coverage of case coverage weekends and holio	management staff to 4 full time FTE assigned to ED, at least 10 hours per day, and days.	
DY Target (from the DPH sys	tem plan) or enter "yes" if "yes/no" type of milestone	* Yes
Achievement Value		1.00
Process Milestone:	Milestone 3.3: Plan the construction of tethered registry to EHR to identify and managed high risk patients. (innovation and redesign-Process measure)	
	(insert milestone)	
Numerator (if N/A, use "yes/n	o" form below; if absolute number, enter here)	*
Denominator (if absolute nun	nber, enter "1")	*
Achievement		Yes
-	milestone has been achieved, select "yes" or "no" from the dropdown an in-depth description of how the milestone was achieved:	* Yes
Metric 3.3: Plan completed w	ith IS and EHR.	
DY Target (from the DPH sys	tem plan) or enter "yes" if "yes/no" type of milestone	* Yes 1.00



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP) DPH SYSTEM: The University of California, Davis Medical Center **REPORTING YEAR:** DY 7 DATE OF SUBMISSION: 3/31/2012 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:	* \$ 3,378,375.00
Incentive Funding Already Received in DY:	* \$ -
Undertake the necessary planning, redesign, translation, training and contract negotiations in order to implement CG-CAHPS in DY8 <i>(DY7 only)</i>	
Provide an in-depth description of milestone progress. (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
Complete	
Achievement	Yes
Achievement Value	1.00



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP) DPH SYSTEM: The University of California, Davis Medical Center **REPORTING YEAR:** DY 7 DATE OF SUBMISSION: 3/31/2012 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:	* \$ 3,378,375.00
Incentive Funding Already Received in DY:	* \$ -
Report results of the Diabetes, short-term complications measure to the State (DY7-10)	
Data Collection Source	* Electronic medical record (EM
Numerator	* 8.0
Denominator	* 8,589.0
Rate	0.09
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
Report results of the Diabetes, short-term complications measure to the State.	
Achievement	Yes
Achievement Value	0.50
Report results of the Uncontrolled Diabetes measure to the State (DY7-10)	
Data Collection Source	* Electronic medical record (EN
Numerator	* 1.0
Denominator	* 8,589.0
Rate	0.01
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
Report results of the Uncontrolled Diabetes measure to the State.	
Achievement	Yes
Achievement Value	0.50



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP) DPH SYSTEM: The University of California, Davis Medical Center **REPORTING YEAR:** DY 7 DATE OF SUBMISSION: 3/31/2012 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:	* \$ 3,378,375
Incentive Funding Already Received in DY:	* \$ -
Report results of the Mammography Screening for Breast Cancer measure to the State (DY7-10)	
Data Collection Source	* Electronic medical record (EM
Numerator	* 9,569
Denominator	* 16,242
Rate	58.9
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
Report results of the Mammography Screening for Breast Cancer measure to the State.	
Achievement	Yes
Achievement Value	0.50
Reports results of the Influenza Immunization measure to the State (DY7-10)	
Data Collection Source	* Electronic medical record (EM
Numerator	* 15,638
Denominator	* 36,514
Rate	42.8
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
Reports results of the Influenza Immunization measure to the State.	
Achievement	Yes
Achievement Value	0.50



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)DPH SYSTEM:The University of California, Davis Medical CenterREPORTING YEAR:DY 7DATE OF SUBMISSION:3/31/2012Category 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

Numerator * 2,987 Denominator * 8,589 Rate 34.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): 34.8 Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State. Yes Achievement Yes 0.50 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10) Image: Control (<9%)	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)	DY Total Computable Incentive Amount:	* \$ 3,378,375
(LD-C) Control (<100 mg/dl) measure to the State (<i>DY7-10</i>) * Electronic medical record (EMR Numerator * 2.997 Denominator * 3.6589 Rate 34.8 34.8 Provide an in-depth description of milestone progress. (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 Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State (<i>DY7-10</i>) 0.50 Achievement Value 0.50 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (<i>DY7-10</i>) * 4.878 Denominator * 4.878 56.8 Numerator * 4.878 56.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): * 6.8589 Rate 56.8 56.8 56.8 56.8 Provide an in-depth description of milestone progress. (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 56.8 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the Stat	Incentive Funding Already Received in DY:	* \$
Numerator * 2.987 Denominator * 8.589 Rate 34.3 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement 34.3 Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State.		
Denominator 9,859 Rate 34.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): 34.8 Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State. Yes Achievement Ves 0.50 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10) • Electronic medical record (EMR • 4.878 Data Collection Source • Electronic medical record (EMR • 4.878 Numerator • 6.589 Rate 56.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): • 6.589 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State.	Data Collection Source	* Electronic medical record (EMR
Rate 34.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): 34.8 Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State.	Numerator	* 2,987
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State.	Denominator	* 8,589
Value is assumed for applicable DY. If so, please explain why data is not available): Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State.	Rate	34.8
Achievement Yes Achievement Value 0.50 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%)		
Achievement Value 0.50 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10)		
Achievement Value 0.50 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10)	Achievement	Yes
Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10) * Electronic medical record (EMF * 4,878 Data Collection Source * 4,878 Numerator * 4,878 Denominator * 8,589 Rate 56.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State.		
Numerator * 4,878 Denominator * 8,589 Rate 56.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): 56.8 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State. Achievement Yes		
Denominator * 8,589 Rate 56.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): 56.8 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State.	Data Collection Source	* Electronic medical record (EMR
Rate 56.8 Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): 56.8 Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State.	Numerator	* 4,878
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State.	Denominator	* 8,589
Value is assumed for applicable DY. If so, please explain why data is not available): Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State.	Rate	56.8
Achievement		
		Yes



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP) DPH SYSTEM: The University of California, Davis Medical Center **REPORTING YEAR:** DATE OF SUBMISSION: 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:	* \$ 2,329,250
Incentive Funding Already Received in DY:	* \$ -
Compliance with Sepsis Resuscitation bundle (%)	
Numerator	* 81
Denominator	* 287
% Compliance	0.28
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
Report the Sepsis Resuscitation Bundle results to the State.	
DY Target (from the DPH system plan, if appropriate)	*
% Achievement of Target	N/A
Achievement Value	0.50
Sepis Mortality (%)	
Numerator	*
Denominator	*
% Mortality	N/A
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
	7
Achievement Value	

Category 4: Severe Sepsis Detection and Management (required)



alegory 4. Severe Seps		
Optional Milestone:	7.4. Develop and implement Best Practice Alerts within the UCDMC EHR for early Sepsis recognition (targeting all adult patients in our emergency department, acute care and critical care units)	_
	(insert milestone)	
Numerator (if N/A, use "yes	s/no" form below; if absolute number, enter here)	*
Denominator (if absolute n	umber, enter "1")	*
Achievement		Yes
	e milestone has been achieved, select "yes" or "no" from the dropdown e an in-depth description of how the milestone was achieved:	* Yes
	est Practice Alerts within the UCDMC EHR for early Sepsis recognition (targeting all ency department, acute care and critical care units)	
DY Target (from the DPH s	system plan) or enter "yes" if "yes/no" type of milestone	*
Achievement Value		1.00
Achievement Value Optional Milestone:	7.5: Report at least 6 months of data collection on Sepsis Resuscitation Bundle to SNI for purposes of establishing the baseline and setting benchmarks.	1.00
Optional Milestone:	to SNI for purposes of establishing the baseline and setting benchmarks. <i>(insert milestone)</i>	*
Optional Milestone: Numerator (if N/A, use "yes	to SNI for purposes of establishing the baseline and setting benchmarks. (insert milestone) s/no" form below; if absolute number, enter here)	1.00
Optional Milestone: Numerator (if N/A, use "yes Denominator (if absolute n	to SNI for purposes of establishing the baseline and setting benchmarks. (insert milestone) s/no" form below; if absolute number, enter here)	·
Optional Milestone: Numerator (if N/A, use "yes Denominator (if absolute n Achievement If "yes/no" as to whether th	to SNI for purposes of establishing the baseline and setting benchmarks. (insert milestone) s/no" form below; if absolute number, enter here)	1.00 * * Yes *
Optional Milestone: Numerator (if N/A, use "yes Denominator (if absolute n Achievement If "yes/no" as to whether th menu, and (if "yes") provide	to SNI for purposes of establishing the baseline and setting benchmarks. (insert milestone) s/no" form below; if absolute number, enter here) umber, enter "1") e milestone has been achieved, select "yes" or "no" from the dropdown e an in-depth description of how the milestone was achieved: f data collection on Sepsis Resuscitation Bundle to SNI for purposes of establishing	* * Yes
Optional Milestone: Numerator (if N/A, use "yes Denominator (if absolute n Achievement If "yes/no" as to whether th menu, and (if "yes") provide Report at least 6 months of the baseline and setting be	to SNI for purposes of establishing the baseline and setting benchmarks. (insert milestone) s/no" form below; if absolute number, enter here) umber, enter "1") e milestone has been achieved, select "yes" or "no" from the dropdown e an in-depth description of how the milestone was achieved: f data collection on Sepsis Resuscitation Bundle to SNI for purposes of establishing	* * Yes



CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP) DPH SYSTEM: The University of California, Davis Medical Center REPORTING YEAR: DY 7 DATE OF SUBMISSION: 3/31/2012 Category 4: Central Line Associated Blood Stream Infection (CLA	
 Below is the data reported for the DPH system. * Instructions for DPH systems: Please type in all of your DY mileston in the indicated boxes (*). * The yellow boxes indicate where the DPH system should input data The black boxes indicate Milestones and will automatically popula The blue boxes show progress made toward the Milestone ("Achin populate and flow to summary sheets 	te and flow to summary sheets
Central Line Associated Blood Stream Infection	
DY Total Computable Incentive Amount:	* \$ 1,905,750
Incentive Funding Already Received in DY:	* \$ -
Compliance with Central Line Insertion Practices (CLIP) (%)	
Numerator	* 1,074
Denominator	* 1,377
% Compliance	0.78
Provide an in-depth description of milestone progress. (If no data is entered Value is assumed for applicable DY. If so, please explain why data is not av	
Report CLIP results to the State.	
DY Target (from the DPH system plan)	*
% Achievement of Target	N/A
Achievement Value	0.50
Central Line Bloodstream Infection (Rate per 1,000 patient days)
Numerator	•
Denominator	*
Infection Rate	N/A
Provide an in-depth description of milestone progress. (If no data is entered Value is assumed for applicable DY. If so, please explain why data is not av	, then a 0 Achievement railable):
DY Target (from the DPH system plan)	*
% Achievement of Target	N/A
Achievement Value	



Category 4: Central Line Associated Blood Stream Infection (CLABSI) (required)

Optional Milestone: 8.2 - SNI Collaborative Participation (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 (if "yes") provide an in-depth description of how the milestone was achieved:	* Yes
Report at least 6 months of data collection on CLIP to SNI for purposes of establishing the baseline and setting benchmarks.	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*
Achievement Value	1.00
Optional Milestone: 8.3 - SNI Collaborative Participation (CLABSI) (insert milestone)	_
	*
(insert milestone)	- * *
<i>(insert milestone)</i> Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* * Yes
<i>(insert milestone)</i> Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) Denominator (if absolute number, enter "1")	- * * Yes * Yes
(insert milestone) Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) Denominator (if absolute number, enter "1") Achievement If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: Report at least 6 months of data collection on CLABSI to SNI for purposes of establishing the baseline and setting benchmarks.	
<i>(insert milestone)</i> Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) Denominator (if absolute number, enter "1") Achievement If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: Report at least 6 months of data collection on CLABSI to SNI for purposes of establishing the baseline and	



	stem Reform Incentive Payments (
DPH SYSTEM: REPORTING YEAR:	The University of California, D DY 7	Javis Medical Center	
DATE OF SUBMISSION:	3/31/2012		
		REPORTING ON THIS PROJE	CT: *
Category 4: Surgical Si	te Infection Prevention		
please type in all of your	stems: Please select above	whether you are reporting on this project. If t below and report data in the indicated boxe	-
	-	pmatically populate and flow to summary she	ets
		Milestone ("Achievement Value") and will aut	
populate and flow to	summary sheets		
Surgical Site Infection	n Prevention		
DY Total Computable Inc	entive Amount:		* \$ 1,905,750
Incentive Funding Already	y Received in DY:		* \$ -
Rate of surgical site i	nfection for Class 1 and 2 v	vounds (%)	
Numerator			* 44
Denominator			* 1,618
% Infection Rate			0.03
•	ription of milestone progress. (If licable DY. If so, please explain	no data is entered, then a 0 Achievement why data is not available):	
9.5: Report results to the			
DY Target (from the DPH	system plan)		*
% Achievement of Target	:		N/A
Achievement Value			0.50
Optional Milestone:	9.3 - TheraDoc Software	(insert milestone)	
Numerator (if N/A use "ve	es/no" form below; if absolute nu		*
Denominator (if absolute			*
Achievement	number, enter 1 y		Yes
	he milestone has been achieved	d, select "yes" or "no" from the dropdown	163
	de an in-depth description of ho		* Yes
Install TheraDoc software	e and train staff to streamline sur	rgical site infection surveillance.	
DY Target (from the DPH	system plan) or enter "yes" if "y	es/no" type of milestone	*
Achievement Value			1.00



Category 4: Surgical Site Infection Prevention

Optional Milestone: 9.4 - SNI Collaborative Participation (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 (if "yes") provide an in-depth description of how the milestone was achieved:	* Yes
Report at least 6 months of data collection on SSI to SNI for purposes of establishing the baseline and setting benchmarks.	
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: The University of California, Davis Medical Center REPORTING YEAR: DY 7 DATE OF SUBMISSION: 3/31/2012 REPORTING ON THIS PROJECT: Category 4: Hospital-Acquired Pressure Ulcer Prevention 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	* Yes
Hospital-Acquired Pressure Ulcer Prevention	
DY Total Computable Incentive Amount:	* \$ 1,905,750
Incentive Funding Already Received in DY:	* \$ -
Prevalence of Stage II, III, IV or unstagable pressure ulcers (%)	
Numerator	* 7.00
Denominator	* 732.00
Prevalence (%)	0.96
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
10.4: Report hospital-acquired pressure ulcer prevalence results to the State.	
DY Target (from the DPH system plan)	*
% Achievement of Target	N/A
Achievement Value	0.50
Optional Milestone: 10.3 - SNI Collaborative Participation (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 (if "yes") provide an in-depth description of how the milestone was achieved:	* Yes
Share data, promising practices, and findings with SNI to foster shared learning and benchmarking across the California public hospitals.	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone Achievement Value	*1.00