

DSRIP Application Summary

The following chart provides an overview of some significant aspects of the Delivery System Reform Incentive Payment (DSRIP) Performing Provider System (PPS) applications. These applications were submitted December 22, 2014 and posted for public comment ([here](#)) on January 16, 2015. Please note that estimated network composition and attribution figures are from the State’s summary speed and scale document. Network composition refers to the number of providers in Project 2.a.i., if the PPS is undertaking it, or else maximum figures from across all other projects.

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution
Adirondack Health Institute Cathy Homkey, chomkey@adkhi.org	Total: 10 <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.ii. Increase certification of PCPs with PCMH certification or Advanced Primary Care Models • 2.a.iv. Create a medical village using existing hospital infrastructure • 2.b.viii. Hospital-home care collaboration solutions • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.a.iv. Behavioral: Ambulatory detox • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.b.ii. Increase access to chronic disease preventive care and management 	Delegated Governance	The Leadership Board is the central governing body. The following committees will serve as advisors to the Leadership Board: <ul style="list-style-type: none"> • Executive • Governance • Audit, Compliance, and Finance • Clinical Governance and Quality • IT & Data Sharing • Workforce • Community and Beneficiary Engagement 			74,941
				Behavioral Health	126	
				Clinics	25	
				Community Based Organizations	23	
				Health Home/Care Management	15	
				Hospice	3	
				Hospitals	14	
				Non-PCP Practitioners	627	
				Pharmacy	2	
				Primary Care Physicians	253	
				SNFs/Nursing Homes	23	
				Substance Abuse	15	
All Other	342					

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Advocate Community Partners Hal Sadowy, halsadowy@yahoo.com</p>	<p>Total: 10</p> <ul style="list-style-type: none"> 2.a.i. Create integrated delivery systems 2.a.iii. Health home at-risk intervention program 2.b.iii. ED care triage for at-risk populations 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions 3.a.i. Behavioral: Integration of primary care and BH 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations 3.c.i. Diabetes: disease management in high-risk/affected adult populations 3.d.iii. Asthma: Evidence-based medicine guidelines for asthma management 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health. 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Delegated Governance</p>	<p>The Steering Committee is the central governing body. The following committees will serve as advisors to the Steering Committee:</p> <ul style="list-style-type: none"> Clinical HIT Communications Finance Compliance Audit 	<table border="1"> <tr> <td>Behavioral Health</td> <td>130</td> </tr> <tr> <td>Clinics</td> <td>43</td> </tr> <tr> <td>Community Based Organizations</td> <td>15</td> </tr> <tr> <td>Health Home/Care Management</td> <td>9</td> </tr> <tr> <td>Hospice</td> <td>4</td> </tr> <tr> <td>Hospitals</td> <td>13</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1428</td> </tr> <tr> <td>Pharmacy</td> <td>6</td> </tr> <tr> <td>Primary Care Physicians</td> <td>902</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>32</td> </tr> <tr> <td>Substance Abuse</td> <td>34</td> </tr> <tr> <td>All Other</td> <td>1418</td> </tr> </table>		Behavioral Health	130	Clinics	43	Community Based Organizations	15	Health Home/Care Management	9	Hospice	4	Hospitals	13	Non-PCP Practitioners	1428	Pharmacy	6	Primary Care Physicians	902	SNFs/Nursing Homes	32	Substance Abuse	34	All Other	1418	<p>769,089</p>
Behavioral Health	130																													
Clinics	43																													
Community Based Organizations	15																													
Health Home/Care Management	9																													
Hospice	4																													
Hospitals	13																													
Non-PCP Practitioners	1428																													
Pharmacy	6																													
Primary Care Physicians	902																													
SNFs/Nursing Homes	32																													
Substance Abuse	34																													
All Other	1418																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Albany Medical Center Hospital George Clifford, cliffog@mail.amc.edu</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.iii. Health home at-risk intervention program • 2.a.v. Create a medical village or alternative housing using existing nursing home • 2.b.iii. ED care triage for at-risk populations • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.d.iii. Asthma: Evidence-based medicine guidelines for asthma management • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health. • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Collaborative Contracting</p>	<p>The Executive Committee is the central governing body. The following committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> • Finance • Membership • Data Management • Workforce Development • Consumer Affairs • Clinical Affairs <p>Clinical sub-committees include:</p> <ul style="list-style-type: none"> • Long Term Care • Behavioral Health • Asthma • Cardiovascular • Tobacco & Cancer • Medication Management 	<table border="1"> <tr> <td>Behavioral Health</td> <td>156</td> </tr> <tr> <td>Clinics</td> <td>30</td> </tr> <tr> <td>Community Based Organizations</td> <td>35</td> </tr> <tr> <td>Health Home/Care Management</td> <td>14</td> </tr> <tr> <td>Hospice</td> <td>1</td> </tr> <tr> <td>Hospitals</td> <td>10</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1655</td> </tr> <tr> <td>Pharmacy</td> <td>76</td> </tr> <tr> <td>Primary Care Physicians</td> <td>494</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>41</td> </tr> <tr> <td>Substance Abuse</td> <td>15</td> </tr> <tr> <td>All Other</td> <td>1123</td> </tr> </table>		Behavioral Health	156	Clinics	30	Community Based Organizations	35	Health Home/Care Management	14	Hospice	1	Hospitals	10	Non-PCP Practitioners	1655	Pharmacy	76	Primary Care Physicians	494	SNFs/Nursing Homes	41	Substance Abuse	15	All Other	1123	<p>64,636</p>
Behavioral Health	156																													
Clinics	30																													
Community Based Organizations	35																													
Health Home/Care Management	14																													
Hospice	1																													
Hospitals	10																													
Non-PCP Practitioners	1655																													
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Primary Care Physicians	494																													
SNFs/Nursing Homes	41																													
Substance Abuse	15																													
All Other	1123																													

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<p>Bronx-Lebanon Hospital Center Sam Shutman, sshutman@bronxleb.org</p>	<p>Total: 10</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.iii. Health home at-risk intervention program • 2.b.i. Ambulatory ICUs • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 3.a.i. Behavioral: Integration of primary care and BH • 3.c.i. Diabetes: disease management in high-risk/affected adult populations • 3.d.ii. Asthma: Expansion of home-based self-management program • 3.f.i. Perinatal: Increase support programs for maternal and child health (including high-risk pregnancies) • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.c.ii. Increase early access to and retention in HIV care 	<p>Collaborative Contracting transitioning into Delegated Governance</p>	<p>The Steering Committee is the central governing body. The following committees will serve as advisors to the Steering Committee:</p> <ul style="list-style-type: none"> • Finance • Information Technology Project Design and Implementation • Workforce • Community Needs Assessment • Quality 	<table border="1"> <tr> <td>Behavioral Health</td> <td>189</td> </tr> <tr> <td>Clinics</td> <td>60</td> </tr> <tr> <td>Community Based Organizations</td> <td>13</td> </tr> <tr> <td>Health Home/Care Management</td> <td>21</td> </tr> <tr> <td>Hospice</td> <td>3</td> </tr> <tr> <td>Hospitals</td> <td>8</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1171</td> </tr> <tr> <td>Pharmacy</td> <td>4</td> </tr> <tr> <td>Primary Care Physicians</td> <td>409</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>27</td> </tr> <tr> <td>Substance Abuse</td> <td>33</td> </tr> <tr> <td>All Other</td> <td>752</td> </tr> </table>		Behavioral Health	189	Clinics	60	Community Based Organizations	13	Health Home/Care Management	21	Hospice	3	Hospitals	8	Non-PCP Practitioners	1171	Pharmacy	4	Primary Care Physicians	409	SNFs/Nursing Homes	27	Substance Abuse	33	All Other	752	<p>133,117</p>
Behavioral Health	189																													
Clinics	60																													
Community Based Organizations	13																													
Health Home/Care Management	21																													
Hospice	3																													
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Substance Abuse	33																													
All Other	752																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																										
<p>Catholic Medical Partners Accountable Care IPA Dennis Horrigan, dhorriga@chsbuffalo.org</p>	<p>Total: 10</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.iii. ED care triage for at-risk populations • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.c.ii. Expand usage of telemedicine in underserved areas • 3.a.i. Behavioral: Integration of primary care and BH • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.f.i. Perinatal: Increase support programs for maternal and child health (including high-risk pregnancies) • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.a.i. Promote mental, emotional, and behavioral well-being in communities • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health 	<p>Collaborative Contracting</p>	<p>The Executive Governance Body is the central governing body. The following committees will serve as advisors to the Executive Governance Body:</p> <ul style="list-style-type: none"> • Finance • Clinical • Data/ Information Technology 	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td>Behavioral Health</td> <td>73</td> </tr> <tr> <td>Clinics</td> <td>25</td> </tr> <tr> <td>Community Based Organizations</td> <td>26</td> </tr> <tr> <td>Health Home/Care Management</td> <td>13</td> </tr> <tr> <td>Hospice</td> <td>2</td> </tr> <tr> <td>Hospitals</td> <td>15</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1173</td> </tr> <tr> <td>Pharmacy</td> <td>5</td> </tr> <tr> <td>Primary Care Physicians</td> <td>399</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>31</td> </tr> <tr> <td>Substance Abuse</td> <td>16</td> </tr> <tr> <td>All Other</td> <td>971</td> </tr> </table>				Behavioral Health	73	Clinics	25	Community Based Organizations	26	Health Home/Care Management	13	Hospice	2	Hospitals	15	Non-PCP Practitioners	1173	Pharmacy	5	Primary Care Physicians	399	SNFs/Nursing Homes	31	Substance Abuse	16	All Other	971	<p>80,618</p>
Behavioral Health	73																															
Clinics	25																															
Community Based Organizations	26																															
Health Home/Care Management	13																															
Hospice	2																															
Hospitals	15																															
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Pharmacy	5																															
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SNFs/Nursing Homes	31																															
Substance Abuse	16																															
All Other	971																															

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution
<p>Central New York PPS Thomas P. Quinn, quinnt@upstate.edu</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.iii. Health home at-risk intervention program • 2.b.iii. ED care triage for at-risk populations • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services. • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.d.i. Reduce premature births 	<p>Delegated Governance</p>	<p>The Board is the central governing body. The following committees will serve as advisors to the Board:</p> <ul style="list-style-type: none"> • Executive • Clinical • Information Technology and Data • Corporate Compliance • Finance 			<p>167,136</p>
				Behavioral Health	106	
				Clinics	56	
				Community Based Organizations	29	
				Health Home/Care Management	16	
				Hospice	4	
				Hospitals	17	
				Non-PCP Practitioners	973	
				Pharmacy	7	
				Primary Care Physicians	307	
				SNFs/Nursing Homes	37	
				Substance Abuse	18	
All Other	723					

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																										
<p>Erie County Medical Center Corporation Richard Cleland, RCleland@ecmc.edu</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.iii. ED care triage for at-risk populations • 2.b.vii. Implementing the INTERACT project (inpatient transfer avoidance program for SNF) • 2.b.viii. Hospital-home care collaboration solutions • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.f.i. Perinatal: Increase support programs for maternal and child health (including high-risk pregnancies) • 4.a.i. Promote mental, emotional, and behavioral well-being in communities • 4.d.i. Reduce premature births 	<p>Delegated Governance /Collaborative Contracting Hybrid</p>	<p>The Board of Managers is the central governing body. The following committees will serve as advisors to the Board:</p> <ul style="list-style-type: none"> • Finance • Clinical/Quality • Information Technology /Data • Compliance • Governance 	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td>Behavioral Health</td> <td>165</td> </tr> <tr> <td>Clinics</td> <td>51</td> </tr> <tr> <td>Community Based Organizations</td> <td>19</td> </tr> <tr> <td>Health Home/Care Management</td> <td>28</td> </tr> <tr> <td>Hospice</td> <td>5</td> </tr> <tr> <td>Hospitals</td> <td>14</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>2396</td> </tr> <tr> <td>Pharmacy</td> <td>5</td> </tr> <tr> <td>Primary Care Physicians</td> <td>653</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>53</td> </tr> <tr> <td>Substance Abuse</td> <td>14</td> </tr> <tr> <td>All Other</td> <td>1814</td> </tr> </table>				Behavioral Health	165	Clinics	51	Community Based Organizations	19	Health Home/Care Management	28	Hospice	5	Hospitals	14	Non-PCP Practitioners	2396	Pharmacy	5	Primary Care Physicians	653	SNFs/Nursing Homes	53	Substance Abuse	14	All Other	1814	<p>230,975</p>
Behavioral Health	165																															
Clinics	51																															
Community Based Organizations	19																															
Health Home/Care Management	28																															
Hospice	5																															
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Non-PCP Practitioners	2396																															
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Primary Care Physicians	653																															
SNFs/Nursing Homes	53																															
Substance Abuse	14																															
All Other	1814																															

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Finger Lakes PPS Carol Fisher, carol.fisher@rochestergeneral.org</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.iii. ED care triage for at-risk populations • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.b.vi. Transitional supportive housing services • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.a.v. Behavioral: BH interventions paradigm in nursing homes • 3.f.i. Perinatal: Increase support programs for maternal and child health (including high-risk pregnancies) • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Hub Model with Delegated Governance at the local level</p>	<p>The Board of Directors is the central governing body, which guides the work of the Nominating Committee, Governance Committee and Executive Oversight Committee. The Executive Oversight Committee is responsible for the:</p> <ul style="list-style-type: none"> • PPS Operations Committees: <ul style="list-style-type: none"> ○ Finance ○ Information Technology ○ Clinical Quality • Naturally Occurring Care Network (NOCN) • Operations Workgroups <ul style="list-style-type: none"> ○ Housing ○ Workforce ○ Transportation ○ Cultural Competency 	<table border="1"> <tr> <td>Behavioral Health</td> <td>69</td> </tr> <tr> <td>Clinics</td> <td>56</td> </tr> <tr> <td>Community Based Organizations</td> <td>110</td> </tr> <tr> <td>Health Home/Care Management</td> <td>33</td> </tr> <tr> <td>Hospice</td> <td>1</td> </tr> <tr> <td>Hospitals</td> <td>26</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>2186</td> </tr> <tr> <td>Pharmacy</td> <td>7</td> </tr> <tr> <td>Primary Care Physicians</td> <td>607</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>65</td> </tr> <tr> <td>Substance Abuse</td> <td>27</td> </tr> <tr> <td>All Other</td> <td>535</td> </tr> </table>		Behavioral Health	69	Clinics	56	Community Based Organizations	110	Health Home/Care Management	33	Hospice	1	Hospitals	26	Non-PCP Practitioners	2186	Pharmacy	7	Primary Care Physicians	607	SNFs/Nursing Homes	65	Substance Abuse	27	All Other	535	<p>279,678</p>
Behavioral Health	69																													
Clinics	56																													
Community Based Organizations	110																													
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Hospice	1																													
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Pharmacy	7																													
Primary Care Physicians	607																													
SNFs/Nursing Homes	65																													
Substance Abuse	27																													
All Other	535																													

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<p>iHANY David Smingler, david.smingler@ihany.org</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.iii. ED care triage for at-risk populations • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.b.viii. Hospital-home care collaboration solutions • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.iv. Behavioral: Ambulatory detox • 3.d.ii. Asthma: Expansion of home-based self-management program • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health 	<p>Delegated Governance</p>	<p>The governing board will be served by several committees including:</p> <ul style="list-style-type: none"> • Finance and Audit • Clinical • Data/Information Technology 	<table border="1"> <tr> <td>Behavioral Health</td> <td>95</td> </tr> <tr> <td>Clinics</td> <td>29</td> </tr> <tr> <td>Community Based Organizations</td> <td>48</td> </tr> <tr> <td>Health Home/Care Management</td> <td>14</td> </tr> <tr> <td>Hospice</td> <td>2</td> </tr> <tr> <td>Hospitals</td> <td>13</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>381</td> </tr> <tr> <td>Pharmacy</td> <td>22</td> </tr> <tr> <td>Primary Care Physicians</td> <td>506</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>27</td> </tr> <tr> <td>Substance Abuse</td> <td>18</td> </tr> <tr> <td>All Other</td> <td>466</td> </tr> </table>		Behavioral Health	95	Clinics	29	Community Based Organizations	48	Health Home/Care Management	14	Hospice	2	Hospitals	13	Non-PCP Practitioners	381	Pharmacy	22	Primary Care Physicians	506	SNFs/Nursing Homes	27	Substance Abuse	18	All Other	466	<p>116,624</p>
Behavioral Health	95																													
Clinics	29																													
Community Based Organizations	48																													
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Substance Abuse	18																													
All Other	466																													

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<p>Lutheran Medical Center Claudia Caine, ccaine@lmcmc.com</p>	<p>Total: 9</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.iii. ED care triage for at-risk populations • 2.b.ix. Implementation of observational programs in hospitals • 2.c.i. Development of community-based health navigation services • 3.a.i. Behavioral: Integration of primary care and BH • 3.c.i. Diabetes: disease management in high-risk/affected adult populations • 3.d.ii. Asthma: Expansion of home-based self-management program • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health • 4.c.ii. Increase early access to and retention in HIV care 	<p>Collaborative Contracting</p>	<p>The Executive Committee is the central governing body. The following sub-committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> • Finance • Information Technology • Clinical 	<table border="1"> <tr> <td colspan="2"></td> </tr> <tr> <td>Behavioral Health</td> <td>188</td> </tr> <tr> <td>Clinics</td> <td>38</td> </tr> <tr> <td>Community Based Organizations</td> <td>18</td> </tr> <tr> <td>Health Home/Care Management</td> <td>8</td> </tr> <tr> <td>Hospice</td> <td>3</td> </tr> <tr> <td>Hospitals</td> <td>6</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1262</td> </tr> <tr> <td>Pharmacy</td> <td>0</td> </tr> <tr> <td>Primary Care Physicians</td> <td>392</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>34</td> </tr> <tr> <td>Substance Abuse</td> <td>22</td> </tr> <tr> <td>All Other</td> <td>894</td> </tr> </table>				Behavioral Health	188	Clinics	38	Community Based Organizations	18	Health Home/Care Management	8	Hospice	3	Hospitals	6	Non-PCP Practitioners	1262	Pharmacy	0	Primary Care Physicians	392	SNFs/Nursing Homes	34	Substance Abuse	22	All Other	894	<p>104,415</p>
Behavioral Health	188																															
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All Other	894																															

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Maimonides Medical Center David Cohen, dcohen@ maimonidesmed.org</p>	<p>Total: 10</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.iii. Health home at-risk intervention program • 2.b.iii. ED care triage for at-risk populations • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 3.a.i. Behavioral: Integration of primary care and BH • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.d.ii. Asthma: Expansion of home-based self-management program • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.a.i. Promote mental, emotional, and behavioral well-being in communities • 4.c.ii. Increase early access to and retention in HIV care 	<p>Collaborative Contracting</p>	<p>The Executive Committee is the central governing body. The following sub-committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> • Business and Operations Sub-Committee • Information Technology Sub-Committee • Care Delivery and Quality Sub-Committee <p>The PPS will organize into 3-5 "Hubs" comprised of participants located within defined geographic areas and responsible for project implementation at the local level.</p>	<table border="1"> <tr> <td>Behavioral Health</td> <td>290</td> </tr> <tr> <td>Clinics</td> <td>94</td> </tr> <tr> <td>Community Based Organizations</td> <td>70</td> </tr> <tr> <td>Health Home/Care Management</td> <td>34</td> </tr> <tr> <td>Hospice</td> <td>5</td> </tr> <tr> <td>Hospitals</td> <td>23</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>2069</td> </tr> <tr> <td>Pharmacy</td> <td>3</td> </tr> <tr> <td>Primary Care Physicians</td> <td>1046</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>52</td> </tr> <tr> <td>Substance Abuse</td> <td>50</td> </tr> <tr> <td>All Other</td> <td>2049</td> </tr> </table>		Behavioral Health	290	Clinics	94	Community Based Organizations	70	Health Home/Care Management	34	Hospice	5	Hospitals	23	Non-PCP Practitioners	2069	Pharmacy	3	Primary Care Physicians	1046	SNFs/Nursing Homes	52	Substance Abuse	50	All Other	2049	<p>477,612</p>
Behavioral Health	290																													
Clinics	94																													
Community Based Organizations	70																													
Health Home/Care Management	34																													
Hospice	5																													
Hospitals	23																													
Non-PCP Practitioners	2069																													
Pharmacy	3																													
Primary Care Physicians	1046																													
SNFs/Nursing Homes	52																													
Substance Abuse	50																													
All Other	2049																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Mary Imogene Bassett Hospital Gerold Groff, gerold.groff@bassett.org</p>	<p>Total: 11</p> <ul style="list-style-type: none"> 2.a.ii. Increase certification of PCPs with PCMH certification or Advanced Primary Care Models 2.b.vii. Implementing the INTERACT project (inpatient transfer avoidance program for SNF) 2.b.viii. Hospital-home care collaboration solutions 2.c.i. Development of community-based health navigation services 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members 3.a.i. Behavioral: Integration of primary care and BH 3.a.iv. Behavioral: Ambulatory detox 3.d.iii. Asthma: Evidence-based medicine guidelines for asthma management 3.g.i. Palliative: Integration of palliative care into medical homes 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health 	<p>Collaborative Contracting</p>	<p>The Executive Committee is the central governing body. The following standing committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> Finance Information Technology/ Data Analytics Clinical Performance Compliance 	<table border="1"> <tr> <td>Behavioral Health</td> <td>26</td> </tr> <tr> <td>Clinics</td> <td>4</td> </tr> <tr> <td>Community Based Organizations</td> <td>4</td> </tr> <tr> <td>Health Home/Care Management</td> <td>3</td> </tr> <tr> <td>Hospice</td> <td>3</td> </tr> <tr> <td>Hospitals</td> <td>7</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>537</td> </tr> <tr> <td>Pharmacy</td> <td>1</td> </tr> <tr> <td>Primary Care Physicians</td> <td>174</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>9</td> </tr> <tr> <td>Substance Abuse</td> <td>4</td> </tr> <tr> <td>All Other</td> <td>174</td> </tr> </table>		Behavioral Health	26	Clinics	4	Community Based Organizations	4	Health Home/Care Management	3	Hospice	3	Hospitals	7	Non-PCP Practitioners	537	Pharmacy	1	Primary Care Physicians	174	SNFs/Nursing Homes	9	Substance Abuse	4	All Other	174	<p>38,406</p>
Behavioral Health	26																													
Clinics	4																													
Community Based Organizations	4																													
Health Home/Care Management	3																													
Hospice	3																													
Hospitals	7																													
Non-PCP Practitioners	537																													
Pharmacy	1																													
Primary Care Physicians	174																													
SNFs/Nursing Homes	9																													
Substance Abuse	4																													
All Other	174																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Montefiore Medical Center (Hudson Valley) Ben Wade, bwade@montefiore.org</p>	<p>Total: 10</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.iii. Health home at-risk intervention program • 2.a.iv. Create a medical village using existing hospital infrastructure • 2.b.iii. ED care triage for at-risk populations • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.d.iii. Asthma: Evidence-based medicine guidelines for asthma management • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Collaborating Contracting</p>	<p>The Leadership Steering Committee is the central governing body. The following Transformation Teams will serve as advisors to the Leadership Steering Committee:</p> <ul style="list-style-type: none"> • Finance & Sustainability • Information Technology Infrastructure • Care Management & Coordination • System & Practice Transformation 	<table border="1"> <tr> <td>Behavioral Health</td> <td>482</td> </tr> <tr> <td>Clinics</td> <td>57</td> </tr> <tr> <td>Community Based Organizations</td> <td>105</td> </tr> <tr> <td>Health Home/Care Management</td> <td>30</td> </tr> <tr> <td>Hospice</td> <td>10</td> </tr> <tr> <td>Hospitals</td> <td>30</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>4970</td> </tr> <tr> <td>Pharmacy</td> <td>12</td> </tr> <tr> <td>Primary Care Physicians</td> <td>1242</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>79</td> </tr> <tr> <td>Substance Abuse</td> <td>33</td> </tr> <tr> <td>All Other</td> <td>2514</td> </tr> </table>		Behavioral Health	482	Clinics	57	Community Based Organizations	105	Health Home/Care Management	30	Hospice	10	Hospitals	30	Non-PCP Practitioners	4970	Pharmacy	12	Primary Care Physicians	1242	SNFs/Nursing Homes	79	Substance Abuse	33	All Other	2514	<p>213,505</p>
Behavioral Health	482																													
Clinics	57																													
Community Based Organizations	105																													
Health Home/Care Management	30																													
Hospice	10																													
Hospitals	30																													
Non-PCP Practitioners	4970																													
Pharmacy	12																													
Primary Care Physicians	1242																													
SNFs/Nursing Homes	79																													
Substance Abuse	33																													
All Other	2514																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Mount Sinai Hospitals Group Arthur Gianelli, arthur.gianelli@mountsinai.org</p>	<p>Total: 10</p> <ul style="list-style-type: none"> 2.a.i. Create integrated delivery systems 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions 2.b.viii. Hospital-home care collaboration solutions 2.c.i. Development of community-based health navigation services 3.a.i. Behavioral: Integration of primary care and BH 3.a.iii. Behavioral: Implementing evidence-based medication adherence program in community based sites 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations 3.c.i. Diabetes: disease management in high-risk/affected adult populations 4.b.ii. Increase access to chronic disease preventive care and management 4.c.ii. Increase early access to and retention in HIV care 	<p>Delegated Governance</p>	<p>The Leadership Committee is the central governing body. The following Technical Committees will serve as advisors to the Leadership Committee:</p> <ul style="list-style-type: none"> Finance Clinical Workforce Information Technology 	<table border="1"> <tr> <td>Behavioral Health</td> <td>354</td> </tr> <tr> <td>Clinics</td> <td>67</td> </tr> <tr> <td>Community Based Organizations</td> <td>30</td> </tr> <tr> <td>Health Home/Care Management</td> <td>38</td> </tr> <tr> <td>Hospice</td> <td>4</td> </tr> <tr> <td>Hospitals</td> <td>13</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>5639</td> </tr> <tr> <td>Pharmacy</td> <td>28</td> </tr> <tr> <td>Primary Care Physicians</td> <td>1540</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>43</td> </tr> <tr> <td>Substance Abuse</td> <td>36</td> </tr> <tr> <td>All Other</td> <td>3470</td> </tr> </table>		Behavioral Health	354	Clinics	67	Community Based Organizations	30	Health Home/Care Management	38	Hospice	4	Hospitals	13	Non-PCP Practitioners	5639	Pharmacy	28	Primary Care Physicians	1540	SNFs/Nursing Homes	43	Substance Abuse	36	All Other	3470	<p>279,751</p>
Behavioral Health	354																													
Clinics	67																													
Community Based Organizations	30																													
Health Home/Care Management	38																													
Hospice	4																													
Hospitals	13																													
Non-PCP Practitioners	5639																													
Pharmacy	28																													
Primary Care Physicians	1540																													
SNFs/Nursing Homes	43																													
Substance Abuse	36																													
All Other	3470																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Nassau Queens PPS Terence M. O'Brien, terence.o'brien@chsli.org Jerrold E. Hirsch, jhirsch@nshs.edu Victor F. Politi, M.D., vpoliti@numc.edu</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.ii. Development of co-located primary care services in the ED • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.b.vii. Implementing the INTERACT project (inpatient transfer avoidance program for SNF) • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.c.i. Diabetes: disease management in high-risk/affected adult populations • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health 	<p>Delegated Governance</p>	<p>The Executive Committee is the central governing body. There is a Project Advisory Committee and Project and Clinical Oversight committees. The Executive Committee will appoint the following committees:</p> <ul style="list-style-type: none"> • Clinical Oversight • Information Technology • Workforce • Finance <p>There will be a “hub” model, in which each hub leader will manage its participating sites. Hubs will be responsible for project implementation at the local level.</p>	<table border="1"> <tr> <td>Behavioral Health</td> <td>354</td> </tr> <tr> <td>Clinics</td> <td>66</td> </tr> <tr> <td>Community Based Organizations</td> <td>7</td> </tr> <tr> <td>Health Home/Care Management</td> <td>23</td> </tr> <tr> <td>Hospice</td> <td>6</td> </tr> <tr> <td>Hospitals</td> <td>22</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>3648</td> </tr> <tr> <td>Pharmacy</td> <td>43</td> </tr> <tr> <td>Primary Care Physicians</td> <td>1526</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>77</td> </tr> <tr> <td>Substance Abuse</td> <td>51</td> </tr> <tr> <td>All Other</td> <td>2639</td> </tr> </table>		Behavioral Health	354	Clinics	66	Community Based Organizations	7	Health Home/Care Management	23	Hospice	6	Hospitals	22	Non-PCP Practitioners	3648	Pharmacy	43	Primary Care Physicians	1526	SNFs/Nursing Homes	77	Substance Abuse	51	All Other	2639	<p>354,665</p>
Behavioral Health	354																													
Clinics	66																													
Community Based Organizations	7																													
Health Home/Care Management	23																													
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Primary Care Physicians	1526																													
SNFs/Nursing Homes	77																													
Substance Abuse	51																													
All Other	2639																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>New York City HHC Dr. Christina Jenkins, christina.jenkins@nychhc.org</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.iii. Health home at-risk intervention program • 2.b.iii. ED care triage for at-risk populations • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.d.ii. Asthma: Expansion of home-based self-management program • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.c.ii. Increase early access to and retention in HIV care 	<p>Collaborative Contracting/ Master Hub Services Agreement</p>	<p>The Executive Committee is the central governing body. The following sub-committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> • Care Models • Business Operations and Information Technology • Stakeholder and Patient Engagement • Patient Advisory Committee <p>Four “hubs” (Brooklyn, Bronx, Queens, and Manhattan) will be organized to consider local needs. Each hub will have a Hub Steering Committee.</p>	<table border="1"> <tr> <td>Behavioral Health</td> <td>567</td> </tr> <tr> <td>Clinics</td> <td>120</td> </tr> <tr> <td>Community Based Organizations</td> <td>88</td> </tr> <tr> <td>Health Home/Care Management</td> <td>49</td> </tr> <tr> <td>Hospice</td> <td>8</td> </tr> <tr> <td>Hospitals</td> <td>25</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>4878</td> </tr> <tr> <td>Pharmacy</td> <td>27</td> </tr> <tr> <td>Primary Care Physicians</td> <td>1263</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>71</td> </tr> <tr> <td>Substance Abuse</td> <td>47</td> </tr> <tr> <td>All Other</td> <td>2654</td> </tr> </table>		Behavioral Health	567	Clinics	120	Community Based Organizations	88	Health Home/Care Management	49	Hospice	8	Hospitals	25	Non-PCP Practitioners	4878	Pharmacy	27	Primary Care Physicians	1263	SNFs/Nursing Homes	71	Substance Abuse	47	All Other	2654	<p>634,789</p>
Behavioral Health	567																													
Clinics	120																													
Community Based Organizations	88																													
Health Home/Care Management	49																													
Hospice	8																													
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Non-PCP Practitioners	4878																													
Pharmacy	27																													
Primary Care Physicians	1263																													
SNFs/Nursing Homes	71																													
Substance Abuse	47																													
All Other	2654																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Refuah Health Center Chanie Sternberg, Csternberg@ RefuahHealthCenter.com</p>	<p>Total: 7</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.ii. Increase certification of PCPs with PCMH certification or Advanced Primary Care • 2.c.i. Development of community-based health navigation services • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.a.iii. Behavioral: Implementing evidence-based medication adherence program in community based sites • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health 	<p>Collaborative Contracting</p>	<p>The Executive Governing Body is the central governing body. The Operations Committee will oversee daily operations. The following committees will provide information to the Operations Committee and report directly to the Executive Governing Body:</p> <ul style="list-style-type: none"> • Financial • Clinical • Data/ Information Technology • Compliance 	<table border="1"> <tr> <td>Behavioral Health</td> <td>70</td> </tr> <tr> <td>Clinics</td> <td>7</td> </tr> <tr> <td>Community Based Organizations</td> <td>17</td> </tr> <tr> <td>Health Home/Care Management</td> <td>9</td> </tr> <tr> <td>Hospice</td> <td>1</td> </tr> <tr> <td>Hospitals</td> <td>8</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>387</td> </tr> <tr> <td>Pharmacy</td> <td>12</td> </tr> <tr> <td>Primary Care Physicians</td> <td>112</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>7</td> </tr> <tr> <td>Substance Abuse</td> <td>12</td> </tr> <tr> <td>All Other</td> <td>383</td> </tr> </table>		Behavioral Health	70	Clinics	7	Community Based Organizations	17	Health Home/Care Management	9	Hospice	1	Hospitals	8	Non-PCP Practitioners	387	Pharmacy	12	Primary Care Physicians	112	SNFs/Nursing Homes	7	Substance Abuse	12	All Other	383	<p>39,443</p>
Behavioral Health	70																													
Clinics	7																													
Community Based Organizations	17																													
Health Home/Care Management	9																													
Hospice	1																													
Hospitals	8																													
Non-PCP Practitioners	387																													
Pharmacy	12																													
Primary Care Physicians	112																													
SNFs/Nursing Homes	7																													
Substance Abuse	12																													
All Other	383																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>RUMC and SIUH (Staten Island PPS) Joseph Conte, jconte@rumsci.org</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.iii. Health home at-risk intervention program • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.b.vii. Implementing the INTERACT project (inpatient transfer avoidance program for SNF) • 2.b.viii. Hospital-home care collaboration solutions • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.iv. Behavioral: Ambulatory detox • 3.c.i. Diabetes: disease management in high-risk/affected adult populations • 3.g.ii. Palliative: Integration of palliative care into nursing homes • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Delegated Governance</p>	<p>A newly formed company, SI PPS, LLC, will be the central governing body. The Board of Managers of this company will oversee daily operations. It will be advised by the following committees:</p> <ul style="list-style-type: none"> • Steering • Finance • Clinical • Data/IT • Workforce/HR • Compliance • Communication and Marketing • Diversity and Inclusion 	<table border="1"> <tr> <td>Behavioral Health</td> <td>54</td> </tr> <tr> <td>Clinics</td> <td>9</td> </tr> <tr> <td>Community Based Organizations</td> <td>2</td> </tr> <tr> <td>Health Home/Care Management</td> <td>8</td> </tr> <tr> <td>Hospice</td> <td>2</td> </tr> <tr> <td>Hospitals</td> <td>4</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>294</td> </tr> <tr> <td>Pharmacy</td> <td>2</td> </tr> <tr> <td>Primary Care Physicians</td> <td>84</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>10</td> </tr> <tr> <td>Substance Abuse</td> <td>11</td> </tr> <tr> <td>All Other</td> <td>2</td> </tr> </table>		Behavioral Health	54	Clinics	9	Community Based Organizations	2	Health Home/Care Management	8	Hospice	2	Hospitals	4	Non-PCP Practitioners	294	Pharmacy	2	Primary Care Physicians	84	SNFs/Nursing Homes	10	Substance Abuse	11	All Other	2	<p>68,693</p>
Behavioral Health	54																													
Clinics	9																													
Community Based Organizations	2																													
Health Home/Care Management	8																													
Hospice	2																													
Hospitals	4																													
Non-PCP Practitioners	294																													
Pharmacy	2																													
Primary Care Physicians	84																													
SNFs/Nursing Homes	10																													
Substance Abuse	11																													
All Other	2																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Samaritan Medical Center Thomas Carman, tcarman@shsny.com</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.ii. Increase certification of PCPs with PCMH certification or Advanced Primary Care Models • 2.a.iv. Create a medical village using existing hospital infrastructure • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.c.i. Diabetes: disease management in high-risk/affected adult populations • 3.c.ii. Diabetes: community-based strategies for primary/secondary prevention • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Delegated Governance</p>	<p>The Board of Managers of the North Country Initiative, LLC is the central governing body. The Board is advised by the following committees:</p> <ul style="list-style-type: none"> • Project Advisory Committee • IT Governance • Medical Management <ul style="list-style-type: none"> ○ BH Integration ○ Population Health Initiative ○ Care Coordination • Finance/Contracting • Compliance <ul style="list-style-type: none"> ○ Cultural Competence and Health Literacy 	<table border="1"> <tr> <td>Behavioral Health</td> <td>43</td> </tr> <tr> <td>Clinics</td> <td>18</td> </tr> <tr> <td>Community Based Organizations</td> <td>17</td> </tr> <tr> <td>Health Home/Care Management</td> <td>6</td> </tr> <tr> <td>Hospice</td> <td>0</td> </tr> <tr> <td>Hospitals</td> <td>8</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>264</td> </tr> <tr> <td>Pharmacy</td> <td>2</td> </tr> <tr> <td>Primary Care Physicians</td> <td>78</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>11</td> </tr> <tr> <td>Substance Abuse</td> <td>4</td> </tr> <tr> <td>All Other</td> <td>126</td> </tr> </table>		Behavioral Health	43	Clinics	18	Community Based Organizations	17	Health Home/Care Management	6	Hospice	0	Hospitals	8	Non-PCP Practitioners	264	Pharmacy	2	Primary Care Physicians	78	SNFs/Nursing Homes	11	Substance Abuse	4	All Other	126	<p>39,049</p>
Behavioral Health	43																													
Clinics	18																													
Community Based Organizations	17																													
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SNFs/Nursing Homes	11																													
Substance Abuse	4																													
All Other	126																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution
St. Barnabas Hospital Leonard Walsh, lwalsh@sbhny.org	Total: 10 <ul style="list-style-type: none"> 2.a.i. Create integrated delivery systems 2.a.iii. Health home at-risk intervention program 2.b.iii. ED care triage for at-risk populations 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions 3.a.i. Behavioral: Integration of primary care and BH 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations 3.c.i. Diabetes: disease management in high-risk/affected adult populations 3.d.ii. Asthma: Expansion of home-based self-management program 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems 4.c.ii. Increase early access to and retention in HIV care 	Collaborative Contracting	The Executive Committee is the central governing body. The following committees will serve as advisors to the Executive Committee: <ul style="list-style-type: none"> Finance and Sustainability Quality and Care Innovation IT Workforce Nominating 			344,479
				Behavioral Health	325	
				Clinics	58	
				Community Based Organizations	46	
				Health Home/Care Management	17	
				Hospice	7	
				Hospitals	12	
				Non-PCP Practitioners	3295	
				Pharmacy	8	
				Primary Care Physicians	936	
				SNFs/Nursing Homes	44	
Substance Abuse	32					
All Other	1867					

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Stony Brook University Hospital Jennifer Jamilkowski, Jennifer.Jamilkowski@stonybrookmedicine.edu</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.b.vii. Implementing the INTERACT project (inpatient transfer avoidance program for SNF) • 2.b.ix. Implementation of observational programs in hospitals • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.c.i. Diabetes: disease management in high-risk/affected adult populations • 3.d.ii. Asthma: Expansion of home-based self-management program • 4.a.ii. Prevent substance abuse and other mental emotional behavioral disorders • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Delegated Governance</p>	<p>The Board of Directors of SB Clinical Network IPA, LLC will be the central governing body. The Board will be advised by the Project Advisory Committee and a PAC Executive Committee; 11 project workgroups (one for each project); and the following functional committees:</p> <ul style="list-style-type: none"> • Clinical • Finance • Community Needs Assessment and Outreach • HIT and Biomedical Informatics • Workforce • Compliance • Audit 	<table border="1"> <tr> <td>Behavioral Health</td> <td>144</td> </tr> <tr> <td>Clinics</td> <td>20</td> </tr> <tr> <td>Community Based Organizations</td> <td>38</td> </tr> <tr> <td>Health Home/Care Management</td> <td>11</td> </tr> <tr> <td>Hospice</td> <td>2</td> </tr> <tr> <td>Hospitals</td> <td>16</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1862</td> </tr> <tr> <td>Pharmacy</td> <td>101</td> </tr> <tr> <td>Primary Care Physicians</td> <td>538</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>46</td> </tr> <tr> <td>Substance Abuse</td> <td>21</td> </tr> <tr> <td>All Other</td> <td>1136</td> </tr> </table>		Behavioral Health	144	Clinics	20	Community Based Organizations	38	Health Home/Care Management	11	Hospice	2	Hospitals	16	Non-PCP Practitioners	1862	Pharmacy	101	Primary Care Physicians	538	SNFs/Nursing Homes	46	Substance Abuse	21	All Other	1136	<p>148,118</p>
Behavioral Health	144																													
Clinics	20																													
Community Based Organizations	38																													
Health Home/Care Management	11																													
Hospice	2																													
Hospitals	16																													
Non-PCP Practitioners	1862																													
Pharmacy	101																													
Primary Care Physicians	538																													
SNFs/Nursing Homes	46																													
Substance Abuse	21																													
All Other	1136																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>The New York and Presbyterian Hospital Phyllis Lantos, phl9002@nyp.org</p>	<p>Total: 10</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.i. Ambulatory ICUs • 2.b.iii. ED care triage for at-risk populations • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.e.i. HIV: Comprehensive strategy to reduce HIV/AIDS transmission - development of Center of Excellence • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health • 4.c.i. Decrease HIV morbidity 	<p>Collaborative Contracting</p>	<p>The Executive Committee is the central governing body. The following committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> • Finance • IT/Data Governance • Clinical/Operations • Audit/Corporate Compliance 	<table border="1"> <tr> <td>Behavioral Health</td> <td>144</td> </tr> <tr> <td>Clinics</td> <td>20</td> </tr> <tr> <td>Community Based Organizations</td> <td>38</td> </tr> <tr> <td>Health Home/Care Management</td> <td>11</td> </tr> <tr> <td>Hospice</td> <td>2</td> </tr> <tr> <td>Hospitals</td> <td>16</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1862</td> </tr> <tr> <td>Pharmacy</td> <td>101</td> </tr> <tr> <td>Primary Care Physicians</td> <td>538</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>46</td> </tr> <tr> <td>Substance Abuse</td> <td>21</td> </tr> <tr> <td>All Other</td> <td>1136</td> </tr> </table>		Behavioral Health	144	Clinics	20	Community Based Organizations	38	Health Home/Care Management	11	Hospice	2	Hospitals	16	Non-PCP Practitioners	1862	Pharmacy	101	Primary Care Physicians	538	SNFs/Nursing Homes	46	Substance Abuse	21	All Other	1136	<p>80,902</p>
Behavioral Health	144																													
Clinics	20																													
Community Based Organizations	38																													
Health Home/Care Management	11																													
Hospice	2																													
Hospitals	16																													
Non-PCP Practitioners	1862																													
Pharmacy	101																													
Primary Care Physicians	538																													
SNFs/Nursing Homes	46																													
Substance Abuse	21																													
All Other	1136																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>The New York Hospital of Queens Maureen Buglino, mabuglin@nyp.org</p>	<p>Total: 9</p> <ul style="list-style-type: none"> 2.a.ii. Increase certification of PCPs with PCMH certification or Advanced Primary Care Models 2.b.v. Care transitions intervention for skilled nursing facility residents 2.b.vii. Implementing the INTERACT project (inpatient transfer avoidance program for SNF) 2.b.viii. Hospital-home care collaboration solutions 3.a.i. Behavioral: Integration of primary care and BH 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations 3.d.iii. Asthma: Evidence-based medicine guidelines for asthma management 3.g.ii. Palliative: Integration of palliative care into nursing homes 4.c.ii. Increase early access to and retention in HIV care 	<p>Collaborative Contracting</p>	<p>The Executive Committee is the central governing body. The following committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> IT/Data Finance Clinical/Operations 	<table border="1"> <tr> <td>Behavioral Health</td> <td>53</td> </tr> <tr> <td>Clinics</td> <td>9</td> </tr> <tr> <td>Community Based Organizations</td> <td>1</td> </tr> <tr> <td>Health Home/Care Management</td> <td>0</td> </tr> <tr> <td>Hospice</td> <td>6</td> </tr> <tr> <td>Hospitals</td> <td>1</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>142</td> </tr> <tr> <td>Pharmacy</td> <td>2</td> </tr> <tr> <td>Primary Care Physicians</td> <td>131</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>27</td> </tr> <tr> <td>Substance Abuse</td> <td>7</td> </tr> <tr> <td>All Other</td> <td>102</td> </tr> </table>		Behavioral Health	53	Clinics	9	Community Based Organizations	1	Health Home/Care Management	0	Hospice	6	Hospitals	1	Non-PCP Practitioners	142	Pharmacy	2	Primary Care Physicians	131	SNFs/Nursing Homes	27	Substance Abuse	7	All Other	102	<p>25,406</p>
Behavioral Health	53																													
Clinics	9																													
Community Based Organizations	1																													
Health Home/Care Management	0																													
Hospice	6																													
Hospitals	1																													
Non-PCP Practitioners	142																													
Pharmacy	2																													
Primary Care Physicians	131																													
SNFs/Nursing Homes	27																													
Substance Abuse	7																													
All Other	102																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>United Health Services Hospitals Robin Kinslow-Evans, robin_kinslow-evans@uhs.org</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.b.vii. Implementing the INTERACT project (inpatient transfer avoidance program for SNF) • 2.c.i. Development of community-based health navigation services • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.b.i. Cardiovascular: disease management in high-risk/affected adult populations • 3.g.i. Palliative: Integration of palliative care into medical homes • 4.a.iii. Strengthen mental health and substance abuse infrastructure across systems • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Delegated Governance</p>	<p>The Board of Southern Tier Rural Integrated PPS (STRIPPS) is the central governing board. It will be advised by the following committees:</p> <ul style="list-style-type: none"> • Finance • IT/Data Governance • Clinical Performance • Corporate Compliance and Audit <p>The structure also includes three “Regional Performance Units” for performance management.</p>	<table border="1"> <tr> <td>Behavioral Health</td> <td>67</td> </tr> <tr> <td>Clinics</td> <td>38</td> </tr> <tr> <td>Community Based Organizations</td> <td>26</td> </tr> <tr> <td>Health Home/Care Management</td> <td>13</td> </tr> <tr> <td>Hospice</td> <td>5</td> </tr> <tr> <td>Hospitals</td> <td>12</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>584</td> </tr> <tr> <td>Pharmacy</td> <td>1</td> </tr> <tr> <td>Primary Care Physicians</td> <td>301</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>22</td> </tr> <tr> <td>Substance Abuse</td> <td>15</td> </tr> <tr> <td>All Other</td> <td>395</td> </tr> </table>		Behavioral Health	67	Clinics	38	Community Based Organizations	26	Health Home/Care Management	13	Hospice	5	Hospitals	12	Non-PCP Practitioners	584	Pharmacy	1	Primary Care Physicians	301	SNFs/Nursing Homes	22	Substance Abuse	15	All Other	395	<p>95,489</p>
Behavioral Health	67																													
Clinics	38																													
Community Based Organizations	26																													
Health Home/Care Management	13																													
Hospice	5																													
Hospitals	12																													
Non-PCP Practitioners	584																													
Pharmacy	1																													
Primary Care Physicians	301																													
SNFs/Nursing Homes	22																													
Substance Abuse	15																													
All Other	395																													

PPS Name and Contact	Project Selections	Governance Model	Committee Structure	Estimated Network Composition		Estimated Attribution																								
<p>Westchester Medical Center June Keenan, keenanj@wmc.com</p>	<p>Total: 11</p> <ul style="list-style-type: none"> • 2.a.i. Create integrated delivery systems • 2.a.iii. Health home at-risk intervention program • 2.a.iv. Create a medical village using existing hospital infrastructure • 2.b.iv. Care transitions intervention model to reduce 30-day readmissions for chronic health conditions • 2.d.i. Patient and community activation for uninsured and low/non-utilizing Medicaid members • 3.a.i. Behavioral: Integration of primary care and BH • 3.a.ii. Behavioral: BH community crisis stabilization services • 3.c.i. Diabetes: disease management in high-risk/affected adult populations • 3.d.iii. Asthma: Evidence-based medicine guidelines for asthma management • 4.b.i. Promote tobacco cessation, especially among low SES population and those with poor mental health • 4.b.ii. Increase access to chronic disease preventive care and management 	<p>Collaborative Contracting</p>	<p>The Executive Committee is the central governing body. The following committees will serve as advisors to the Executive Committee:</p> <ul style="list-style-type: none"> • Finance • IT • Quality • Nominating <p>Other committees will be established on an ad hoc basis.</p> <p>Additionally, the PPS will be organized into four geographic hubs, each with its own Hub Board.</p>	<table border="1"> <tr> <td>Behavioral Health</td> <td>324</td> </tr> <tr> <td>Clinics</td> <td>50</td> </tr> <tr> <td>Community Based Organizations</td> <td>148</td> </tr> <tr> <td>Health Home/Care Management</td> <td>27</td> </tr> <tr> <td>Hospice</td> <td>7</td> </tr> <tr> <td>Hospitals</td> <td>20</td> </tr> <tr> <td>Non-PCP Practitioners</td> <td>1878</td> </tr> <tr> <td>Pharmacy</td> <td>4</td> </tr> <tr> <td>Primary Care Physicians</td> <td>609</td> </tr> <tr> <td>SNFs/Nursing Homes</td> <td>43</td> </tr> <tr> <td>Substance Abuse</td> <td>28</td> </tr> <tr> <td>All Other</td> <td>1152</td> </tr> </table>		Behavioral Health	324	Clinics	50	Community Based Organizations	148	Health Home/Care Management	27	Hospice	7	Hospitals	20	Non-PCP Practitioners	1878	Pharmacy	4	Primary Care Physicians	609	SNFs/Nursing Homes	43	Substance Abuse	28	All Other	1152	<p>120,232</p>
Behavioral Health	324																													
Clinics	50																													
Community Based Organizations	148																													
Health Home/Care Management	27																													
Hospice	7																													
Hospitals	20																													
Non-PCP Practitioners	1878																													
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Substance Abuse	28																													
All Other	1152																													