	State Implementation Plan: Engaged Patient Tables																			
		Patient speed of implementation table																		
		DY1, Q1	DY1, Q2	DY1, Q3	DY1, Q4	DY2, Q1	DY2, Q2	DY2, Q3	DY2, Q4	DY3, Q1	DY3, Q2	DY3, Q3	DY3, Q4	DY4, Q1	DY4, Q2	DY4, Q3	DY4, Q4	DY5, Q1	DY5, Q2	DY5, Q3	DY5, Q4
		6/30/15	9/30/15	12/31/15	3/31/16	6/30/16	9/30/16	12/31/16	3/31/17	6/30/17	9/30/17	12/31/17	3/31/18	6/30/18	9/30/18	12/31/18	3/31/19	6/30/19	9/30/19	12/31/19	3/31/20
DSRIP Project	Actively Engaged Definition																			
2.a.iii Health Home At-Risk Intervention Program	The number of participating patients who completed a new or updated comprehensive care management plan.	0	0	0	0	3,174	**6,348**	9,522	**12,696**	6,348	**12,696**	19,039	**25,382**	15,870	**31,740**	47,610	**63,479**	15,870	**31,740**	47,610	**63,479**
2.b.iii ED Care Triage for At-Risk Populations	The number of participating patients presenting to the ED, who after medical screening examination were successfully redirected to a PCP as demonstrated by a scheduled appointment, or successfully redirected to a PCP en route to the ED.	0	0	0	0	8,159	**16,318**	24,477	**32,636**	13,599	**27,197**	40,796	**54,394**	13,599	**27,197**	40,796	**54,394**	13,599	**27,197**	40,796	**54,394**
2.b.iv Care Transitions Intervention Model to Reduce 30-day Readmissions for Chronic Health Conditions	The number of participating patients with a care transition plan developed prior to discharge.	0	0	0	0	2,814	**5,627**	8,441	**11,254**	4,690	**9,379**	14,068	**18,757**	4,690	**9,379**	14,068	**18,757**	4,690	**9,379**	14,068	**18,757**
2.d.i Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care	The number of individuals who completed PAM® or other patient engagement techniques.	0	0	0	**11,000**	13,750	**27,500**	41,250	**55,000**	13,750	**27,500**	41,250	**55,000**	13,750	**27,500**	41,250	**55,000**	13,750	**27,500**	41,250	**55,000**
3.a.i Integration of Primary Care and Behavioral Health Services	The total number of patients receiving appropriate preventive care screenings that include mental health/ substance abuse (Model 1); the total number of patients receiving primary care services at a participating mental health or substance abuse site (Model 2); the total number of patients screened using the PHQ-2 or 9/ SBIRT (Model 3)	0	0	0	**10,648**	15,972	**31,943**	47,915	**63,886**	26,620	**53,239**	79,858	**106,477**	26,620	**53,239**	79,858	**106,477**	26,620	**53,239**	79,858	**106,477**
3.b.i Evidence-Based Strategies for Disease Management in High Risk/Affected Populations (Adults Only)	The number of participating patients receiving services from participating providers with documented self-management goals in medical record (diet, exercise, medication management, nutrition, etc.)	0	0	0	0	7,100	**14,199**	21,299	**28,398**	11,833	**23,665**	35,497	**47,329**	11,833	**23,665**	35,497	**47,329**	11,833	**23,665**	35,497	**47,329**
3.d.ii Expansion of Asthma Home-Based Self-Management Program	The number of participating patients based on home assessment log, patient registry, or other IT platform.	0	0	0	**584**	1,169	**2,337**	3,506	**4,674**	2,337	**4,674**	7,011	**9,348**	2,921	**5,842**	8,764	**11,685**	2,921	**5,842**	8,764	**11,685**
3.g.i Integration of Palliative Care into the PCMH Model	The number of participating patients receiving palliative care services at participating PCMH sites, in accordance with the adopted clinical guidelines.	0	0	0	**491**	1,965	**3,930**	5,895	**7,859**	3,930	**7,859**	11,789	**15,718**	4,912	**9,824**	14,736	**19,648**	4,912	**9,824**	14,736	**19,648**