Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
Methodist Willowbrook Hospital	2.17.1	Care Transition	• IT 9.4e Emergency Department visits for Behavioral Health/Subst ance Abuse	Individuals	Increase in # of patients receiving Follow-Up After Hospitalization for Mental Illness within 7 and 30 days	380	684	722	1786	\$4,939,422
process to ens	sure patient o need our	s transition into t	he ambulatory ca	are setting su	ccessfully, setting	up care	coordinat	ion proto	cols to make su	re we identify patient
St. Joseph Medical Center	2.17.1	Care Transition	• IT 3.15 Risk Adjusted Behavioral Health/Subst ance Abuse 30-day Readmission Rate	Individuals	Improvement in % of "High Risk" patients with customized care plans before discharge	196	261	333	790	\$ 8,205,536
Partial HospiTake voluntaAll patients a	talization P ary patients are seen by	and patients must a psychiatrist, ps	ychiatric residen	ts and a RN.	They attend four			day ran l	by a licensed th	erapist.
The Methodist Hospital	2.17.1	Care Transition	• IT 9.4e Emergency Department visits for Behavioral Health/Subst	Individuals	Increase in # of patients receiving Follow-Up After Hospitalization for Mental	2330	4194	4384	10908	\$ 13,443,521
	Methodist Willowbrook Hospital DESCRIPTIC process to ensaccurately whethis target pop St. Joseph Medical Center DESCRIPTIC • Partial Hospi • Take volunta • All patients a • The program The Methodist	Methodist Willowbrook Hospital DESCRIPTION: Recruit process to ensure patient accurately who need our this target population. St. Joseph Medical Center DESCRIPTION: Partial Hospitalization P Take voluntary patients All patients are seen by The program runs from The Methodist 2.17.1	Methodist Willowbrook Hospital DESCRIPTION: Recruit qualified people to process to ensure patients transition into to accurately who need our assistance and for this target population. St. Joseph Medical Center DESCRIPTION: Partial Hospitalization Program Take voluntary patients and patients must and patients are seen by a psychiatrist, pso The program runs from the hours of 9:00 The Methodist Care Transition	Methodist Villowbrook Hospital	Provider Option	Methodist Willowbrook Hospital Subcategory Cat 3 Measure Near or encounters Care Transition Peartment Visits for Behavioral Health/Subst ance Abuse Description Peartment Visits for Behavioral Health/Subst ance Abuse Description Peartment Visits for Behavioral Health/Subst ance Abuse Peartment Visits for Behavioral Health/Subst Adjusted Peartment Visits arget population. Peartment Visits arget population Peartment Visits for Peartment Visits or Peartment Visits for Peartment Visits or Peartment Visits for Peartment Visits for Peartment Visits or Peartment Visits for Peartment Visits or Peartment Visits for Peartment Visits or Pe	Methodist Willowbrook Hospital Care Transition Care Behavioral Health/Subst ance Abuse St. Joseph Medical Center St. Joseph Medical	Methodist 2.17.1 Care Transition Transition Care Tra	Provider Option Project Option Subcategory Subcategory Measure Individuals or encounters Project Option Project Option Subcategory Measure Provider Provider Project Option Project Op	Methodist Willowbrook Hospital 2.17.1 Care Transition Cat 3 Measure Cat 3 Cat 4 Cat 4

• Recruit qualified people to intervene and guide care, educate staff, identify community partners, re-engineer our discharge planning process to ensure

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
											ent accurately who need or this target population.
4	MHMRA- Harris County	2.17.1	Care Transition	• IT 3.15 Risk Adjusted Behavioral Health/Subst ance Abuse 30-day Readmission Rate • IT 11.25 Daily Living Activities	Individuals	Increase the use of warm handoffs (a clinician to clinician real time live communication) for adult inpatients being discharged to the community	1500	1575	1575	4650	\$2,212,418
		e transition licensed m	from HCPC hospi ental health profe				HCPC ar	nd assist v	with succe	essfully linking t	hem to community
5	MHMRA- Harris County	1.13.1	Care Transition	IT 1.18 Follow Up After Hospitalizatio n for Mental Illness IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals	Patient admissions to CRU program	0	321	321	642	\$ 19,441,205

[•] Expand the Crisis Residential Unit (CRU). This 24-bed unit is specifically designed as a step-down from hospitalization. • Reduce the # of bed days required for acute psychiatric hospitalization• Reduce hospitalization re-admission rates• Increase tenure in the community and utilization of outpatient treatment alternatives.

Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
Fort Bend County Clinical Health Services	1.13.1	Crisis Stabilization	• IT 9.4.e Emergency Department visits for Behavioral Health/Subst ance Abuse	Individuals	Decrease in preventable admissions and readmissions into Criminal Justice System	0	1600	1600	3200	\$ 8,840,021
Develop a cr level of care.Assess and eDevelop a sp	risis system enhance 91 pecialized c	1 dispatch system	n to identify and team (CIT) withi	respond to be n Fort Bend C	ehavioral health cr ounty Sheriff's Off	ises	ose need	s and link	s persons with	their most appropriate
Memorial Hermann Hospital	1.13.1	Crisis Stabilization	IT 9.4e Emergency Department (ED) visits for Behavioral Health	Individuals	Increase in utilization of appropriate crisis alternatives.	0	3100	5400	8500	\$ 16,559,854
Provide rapid	d access to					cessary u	se of eme	ergency c	lepartments, ho	spitalization or
Texana Center	2.13.1	Crisis Stabilization	• IT 11.26b Aberrant Behavior Checklist	Individuals	# of targeted individuals enrolled / served in the	150	200	250	600	\$5,574,005
	Fort Bend County Clinical Health Services DESCRIPTIO Develop a cr level of care. Assess and of the services Memorial Hermann Hospital DESCRIPTIO Provide rapid Identify continuarceration. Texana	Fort Bend County Clinical Health Services DESCRIPTION: Develop a crisis system level of care. Assess and enhance 91 Develop a specialized common level of care. Implement cross system	Fort Bend County Clinical Health Services DESCRIPTION: Develop a crisis system that better identified level of care. Assess and enhance 911 dispatch system Develop a specialized crisis intervention of the level of care. Implement cross systems training and ling Memorial Hermann Hospital DESCRIPTION: In provide rapid access to initial psychiatric of the level of care. I dentify consumers with behavioral healt incarceration. Texana 2.13.1 Crisis	Fort Bend County Clinical Health Services DESCRIPTION: - Develop a crisis system that better identifies people with level of care Assess and enhance 911 dispatch system to identify and - Develop a specialized crisis intervention team (CIT) withi - Implement cross systems training and linkages to appropriate thermann Hospital DESCRIPTION: - Provide rapid access to initial psychiatric treatment and of lidentify consumers with behavioral health needs that car incarceration. Texana Center Crisis Stabilization Neasure IT 9.4.e Emergency Department (CIT) withing and linkages to appropriate the provide the provided access to initial psychiatric treatment and of the lidentify consumers with behavioral health needs that car incarceration. Texana Center Crisis Stabilization IT 11.26b Aberrant	Provider Option Subcategory Cat 3 Measure Individuals or encounters Fort Bend County Clinical Health Services Cat 3 Measure Individuals Or encounters Individuals Or encounters Individuals Individuals	Provider Option Subcategory Cat 3 Measure Individuals or encounters	Provider Project Option Subcategory Cat 3 Measure Individuals or encounters Description Target Dy3	Provider Option Project Option Subcategory Cat 3 Measure Neasure Neasure	Provider Option Subcategory Option Subcategory Option Subcategory Option Subcategory Option Option Option Subcategory Option Opt	Provider Option Subcategory Reasure Option Subcategory Reasure Option Option Subcategory Reasure Option Opt

[•] Provide crisis stabilization intervention for the dually diagnosed population to prevent unnecessary use of services in State Supported Living Centers, emergency rooms, state mental hospitals and county jails.

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
9	Texana Center	1.13.1	Crisis Stabilization	• IT 1.18 Follow-Up After Hospitalizatio n for Mental Illness	Individuals	Increase in # of patients	600	624	648	1872	\$11,976,097
	providing crisi	8 bed 48-ho s interventi	on services.			sis residential unit					ssessed and stabilized by
10	MHMRA- Harris County	1.13.1	Crisis Stabilization	• IT 6.1.b.ii CG-CAHPS 12-month: Provider Communicati on • IT 11.25 Daily Living Activities	Individuals	Patients served at ICC program	1350	1100	1100	3550	\$12,561,090
		erim Care Cl	linic, which is desing hours and ava	igned to provide		tion and treatmen	t in a sing	gle visit.			
11	MHMRA- Harris County	2.13.1	Crisis Stabilization	• IT 6.1.b.ii CG-CAHPS 12-month: Provider Communicati on• IT 11.25 Daily Living Activities	Individuals	# of targeted individuals enrolled / served in the project	40	50	60	150	\$ 1,179,949

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
	 Provide inter Provide famile evidence-base 	Chronic Cornsive case rate of the case rate of the case rate of the case of th	management and munity education ealth awareness p	work directly wit about mental illo program for com	th individuals, ness, outreac munity memb	gency collaboratio family members, h and engagemen pers), navigation to er crisis diversion p	health p it, intensi o address	roviders, ve case n s physical	and/or st nanagem	aff at living faci ent, Mental Hea	lities.
12	MHMRA- Harris County	2.13.1	Crisis Stabilization	• IT 6.1.b.ii CG-CAHPS 12-month: Provider Communicati on • IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals		200	450	720	1370	\$ 11,939,410
	unwilling to ac • Respond to • Meet consur	current Mob ccess traditi the consum ners in a va	onal psychiatric s ers' needs with tw riety of settings in	ervices. wo trained MCOT ncluding in the ction, and linkage IT 3.15 Risk Adjusted Behavioral	staff when a	des mobile crisis of consumer initiate mmunity, home, consumer to address identification of the # of telemedicine visits	es an MCo or school	OT interv	·	dults and childre	en who are unable or \$ 14,178,531
13				Health/Subst ance Abuse 30-day Readmission Rate							

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
	telemedicine p EDs at its other the ED staff a Bayshore.	elemedicine program to er local hos t each hosp	include a 24/7 tel pitals. • Identify t vital to effectively	e-psychiatry pro he necessary tec use the new cap	gram in its Ba chnology to es abilities• Imp	stablish the progra lement protocols	y Depart am, reach for obtair	ment (ED n out to b ning tele- _l) • Imple ehavioral psychiatry	ment telemedic health provider y consults and r	ine capabilities in the s to participate, train eferrals to and from
14	MHMRA- Harris County	2.13.1	Crisis Stabilization	• IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals	# of targeted individuals enrolled / served in the project.	300	600	900	1800	\$ 7,215,482
	 Expand thre 	rises interv e additiona		sis Intervention I		m (CIRT), which is to respond to la				aw enforcemen	t officers who are
15	MHMRA- Harris County	1.12.2	Expand Behavioral Health	• IT 11.26.e.i Patient Health Questionnaire 9 (PHQ-9) • IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals	# of patients who utilize community behavioral healthcare services.	250	500	500	1250	\$13,168,403
	DESCRIPTION	ON:									

- Expand outpatient services for adults with severe psychiatric conditions (Southwest)
 Place one new treatment team which can serve about 500 consumers on an outpatient basis in the Southwest region of the city.

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#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
16	MHMRA- Harris County	1.12.2	Expand Behavioral Health	• IT 11.26.e.i Patient Health Questionnaire 9 (PHQ-9) • IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals	# of patients who utilize community behavioral healthcare services.	250	500	500	1250	\$13,168,403
		atient serv	ices for adults wit nt team which car	h severe psychia		s (Southeast) on an outpatient l	basis in tl	he Southe	east regio	n of the city.	
17	MHMRA- Harris County	1.12.2	Expand Behavioral Health	• IT 11.26.e.i Patient Health Questionnaire 9 (PHQ-9) • IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals	# of patients who utilize community behavioral healthcare services.	250	500	500	1250	
	DESCRIPTIO				•					6.11	
18	• Place one no MHMRA- Harris County	1.9.2	nt team which can Expand Behavioral Health	• IT 6.1.b.ii CG-CAHPS 12-month: Provider Communicati on • IT 11.26b Aberrant Behavior Checklist	O consumers Encounters	on an outpatient Documentation of increased # of visits.	asis in the	ne Northy 8500	yest regio	on of the city. 21250	\$6,690,813

				INIII J DE	THE TOTAL TIL	ALIH PROJECT 30	SITIL TIME				
#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
								tual and I	Developm	ental Disabilitie	s and Autism Spectrum
19	MHMRA- Harris County	1.12.2	Expand Behavioral Health	• IT 11.26.e.i Patient Health Questionnaire 9 (PHQ-9) • IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals	we, costlier service # of patients who utilize community behavioral healthcare services.	250	500	750	1500	\$13,168,403
			ices for adults wit nt team which car Expand Behavioral Health			s (Northeast) on an outpatient be willization of community behavioral	pasis in t	he Northe	east regio 4371	n of the city. 9330	\$18,446,459
20	System		rieatti	Children Prescribed ADHD Medication (ADD)		healthcare services.					
	• Implement and expand pediatric and adolescent behavioral health services across nine facilities within the system. • Expand psychiatry by adding 3.7 FTE's of psychiatry and 7.6 FTE's of behavioral therapy.										
21	Memorial Hermann Northwest Hospital	1.12.2	Expand Behavioral Health	• IT 9.4e Emergency Department (ED) visits for Behavioral Health	Individuals	% utilization of community behavioral healthcare services.	none	880	920	1800	\$16,752,576

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
	Include specProvide suppBetter mana	e health se cialized train port of thos ge their can	ervice to include partificate patients with mare in the home an emergency dep	ions for nurses a ental health issu d community	and the addition						nity care programs.
22	Harris County		Behavioral Health	Patient Health Questionnaire 9 (PHQ-9) • IT 11.26c Adult Needs and Strength Assessment (ANSA)		who utilize community behavioral healthcare services.					
	(Region deteri	atient servi mined acco	ices for adults wit rding to need) nt team which car	h severe psychia			oasis in s	pecified r	egion of	the city.	
23	MHMRA- Harris County	1.12.2	Expand Behavioral Health	• IT 9.1 Mental health admissions and readmissions to criminal justice settings such as jails or prison • IT 11.25 Daily Living Activities	Individuals	# of patients who utilize community behavioral healthcare services	20	80	209	309	\$6,586,745
	• Clubhouse E		The intervention		house Model,	which is a day tre	eatment p	orogram f	or psycho	osocial rehabilita	ation of adults

				1 0 22.			1	1			
#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
	diagnosed wit	h a serious	and persistent, cl	ronically disabli	ng mental he	alth problem.		•			
24	MHMRA- Harris County	1.9.2	Expand Behavioral Health	• IT 6.1.b.ii CG-CAHPS 12-month: Provider Communicati on• IT 11.16 Assessment for Substance Abuse Problems of Psychiatric Patients• IT 11.19 Assessment of Psychiatric Patients• IT 11.21 Assessment of Major Depressive Symptoms	Individuals	Documentation of increased # of unique patients, or size of patient panels. Demonstrate improvement over prior reporting period (baseline for DY2).	25	125	150	300	\$2,616,615
	 Include iden 	havioral heatification of vices to add	behavioral health Iress the specializ	n needs, interver	ntions, case m	nanagement, patie	nt and fa	amily edu	cation an	d coordination \	s with visual impairment with primary care. ness and independent
25	Texana Center	1.9.2	Expand Behavioral Health	• IT 10.3d Battelle Development Inventory-2 (BDI-2)	Encounter s	Documentation of increased # of visits. Demonstrate improvement over prior reporting period	3600	4800	6000	14400	\$4,220,390

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
						(baseline for DY2).					
	based model	al work and	,	•	•	services that blend at to support pare		·	•		a natural environment clinical hours
26	Texana Center	1.12.2	Expand Behavioral Health	• IT 10.4.a Development al Profile 3 (DP-3) • IT 10.4b Vineland Adaptive Behavior Scales, 2nd Edition (VABS II)	Individuals	# of individuals receiving community behavioral healthcare services.	34	36	40	110	\$ 9,105,687

- Enhance Service Availability of appropriate levels of behavioral health care (i.e., applied behavior analysis and speech-language pathology for children diagnosed with autism)
- Develop and implement evidence-based interventions of ABA and SLP in an additional location for children with a diagnosis of ASD. Interventions include assessment, treatment development, and intervention overseen by Board Certified Behavior Analyst, BCBA, and Speech Language Pathologists, SLP, as well as training care givers using ABA.

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
27	MHMRA- Harris County	2.17.2	Expand Inpatient Behavioral Health	• IT 1.18 Follow Up After Hospitalizatio n for Mental Illness • IT 3.14 Behavioral Health/Subst ance Abuse 30-day Readmission Rate	Individuals	Increase in High Risk Patients who are discharged with customized care plans.	40	140	140	320	\$ 7,093,560

DESCRIPTION:

- Expand and further develop the Inpatient Consultation and Liaison (C&L) team that provides consultation and services to patients suspected of Intellectual and Developmental Disabilities and Autism Spectrum Disorders (IDD and ASD) referred by attending physicians at the Harris County Psychiatric Center (HCPC)
- Provide similar services to other inpatient settings in Harris County.

Spindletop	2.14.1	Health	• IT 6.1c.ii	Individuals	% of	none	10	12	22	\$186,649
Center		Education	CG-CAHPS		participants					
			12-month:		successfully					
			Health		managing their					
			Information		health					
			Technology							
			Supplement							

- Develop a web-based portal where secure client-focused health information can be accessed by our mental health clients and will implement a phone tree system to send reminders and alerts to clients via phone and/or email.
- Train our mental health clients in the use of this technology and the information provided to help them manage their behavioral and physical health care.
- Use a focus group of selected clients, peer specialists, and staff to determine the health and other information to include on the portal and the communication devices that would be most useful to clients based on their level of need. These devices could include the phones that CMS provides for Medicaid clients and computers at kiosks in Spindletop's outpatient clinics, supportive housing units, and our peer-run support center.
- May also test lending Wi-Fi enabled tablets or smartphones to select clients.

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#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
29	MHMRA- Harris County	2.15.1	Integrated Care	• IT 1.7 High blood pressure, IT 1.10 Diabetes Care: HbA1c poor control (>9.0%)	Individuals	# of Individuals receiving both physical and behavioral health care at the established locations.	800	1000	1400	3200	\$19,142,532
	DESCRIPTION	N: Design,	implement, and	evaluate a care r	management	program that integ	grates pr	imary and	d behavio	ral health care	services.
30	MHMRA- Harris County	2.13.1	Integrated Care	• IT 11.8 Initiation and Engagement of Alcohol and Other Drug Dependence Treatment • IT 11.26c Adult Needs and Strength Assessment (ANSA)	Individuals	# of targeted individuals enrolled / served in the project	300	800	800	1900	\$ 18,419,173
31	City of Houston Department of Health and Human Services	2.19.2	Integrated Care	• IT 10.1.B.iii RAND Short Form 36[1] (SF-36) Health Survey	Individuals	# of targeted individuals enrolled / served in the project.	150	180	200	530	\$ 10,911,392

RHD 3 REHAVIORAL HEALTH DROJECT SLIMMARIES

/	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Paymen DY2-5 Cat 1 and 2	
	 DESCRIPTION: Serve 200 individuals who are chronically homeless and offer comprehensive service integration intervention. Implement its comprehensive five step intervention for the homeless involving permanent housing supportive model program service linkages physical and behavioral health needs financial support 											
	5) other service Gulf Bend	2.15.1	Integrated Care	• IT 2.7 Behavioral Health/Subst ance Abuse (BH/SA) Admission Rate	Individuals	Individuals with a treatment plan developed and implemented with primary care and behavioral health	125	150	200	475	\$3,550,000	

- Target at risk populations with co-morbid diseases of mental illness and chronic disease who currently go untreated or under treated and who routinely access more intensive and costly services such as emergency departments or jails.
- Offer the following services in the same location:
- o Behavioral Health Services
- o Primary care services
- o Health behavior education and training programs
- o Long and short term care for those with mental illness and co-occurring chronic disease
- o Case Management services to help patient navigate the services provided in the community.

				KIII J DE	I A VIONAL III	ALIH PROJECT S						
#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2	
33	Harris Health System	1.12.4	Integrated Care	• IT 11.26.e.i Patient Health Questionnaire 9 (PHQ-9)	Individuals	# of unique individuals receiving BH services through expansion of services	1200	3200	4,800	9200	\$21,641,667	
	DESCRIPTION: • Enhance service availability of appropriate levels of behavioral health care to adults by expanding mental health services in the ambulatory care setting. • Add therapists and psychiatrists (13.4 Psychiatry and Behavioral Health FTEs) to existing Harris Health System health centers across Harris County.											
34	MHMRA- Harris County	2.13.1	Integrated Care	• IT 6.1.b.ii CG-CAHPS 12-month: Provider Communicati on• IT 10.2.a Supports Intensity Scale (SIS)	Individuals	# of targeted individuals enrolled / served in the project	80	92	100	272	\$ 6,679,087	
	 DESCRIPTION: Provide community based interventions for individuals to prevent them from cycling through multiple systems, by providing community-based, wraparound services that help stabilize behavioral problems in the natural home Link the patient and family to other supports, such as a medical home, transition services to help individuals establish a stable living environment, peer support, employment, specialized therapies, respite, personal assistance, and linkage to short or long term residential options. 											
35	Spindletop Center	2.15.2	Integrated Care	• IT 1.10 Diabetes Care: HbA1c poor control (>9.0%)	Individuals	Individuals receiving both physical and behavioral health care at the established locations	10	15	20	45	\$1,178,561	

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
	providers. • Purchase a r • Supplement	imary care mobile clinic the benefit	c and equip to pro	ovide physical an rimary care with	d behavioral hebehavioral he	nealth services for ealth services by ir	our clier	nts in loca	ations oth	er than existing	n among healthcare Spindletop clinics. Son Plan for \$12,623,903
36						developed and implemented with primary care and behavioral health expertise					
	the same time	cal Psychiat e.		· ·							needs of the clients at
37	Texas Children's Hospital	1.9.2	Integrated Care	• IT 10.1.a.v Pediatric Quality of Life Inventory (PedsQL) • IT 1.1 Third next available appointment	Encounter s	Documentation of increased # of visits.		175	250	475	\$ 2,196,500

				1		ALITI PROJECT 3	1				
#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
	DESCRIPTION	N:									
			s which will allow	us to diagnosis	women guicke	er and enhance th	eir qualit	y of life.			
						ing in post-partun			nderstand	the challenges	of psychiatric
	medications d	uring pregr	nancy and breastf	eeding, and to u	nderstand the	e mental health ne	eds of m	nenopausa	al women		. ,
	The	2.15.1	Integrated	IT 1.9	Individuals	Individuals	500	1000	1,250	2750	\$ 13,134,966
	University of		Care	Depression		receiving both					
	Texas			management		physical and					
	Health			: Depression		behavioral					
	Science			Remission at		health care at					
	Center -			Twelve		the established					
38	Houston			Months		locations					
	DECODIDEIO	- N.I.									
	• Design, implement and evaluate a project that will integrate primary and behavioral healthcare services within UT Physicians' clinics to achieve a close collaboration in a partly integrated system of care (Level IV).										
											and the state of t
	 Place a behavioral health provider in the primary care setting to provide patients with behavioral health services at their usual source of health care. Facilitate care coordination between primary and behavioral healthcare. 										
		2.15.1		• IT 10.1.a.v		Individuals	500	1000	1257	2757	¢16 410 710
	The	2.15.1	Integrated Care	Pediatric	Individuals		500	1000	1257	2/5/	\$16,418,710
	University of		Care			receiving both					
	Texas Health			Quality of Life		physical and behavioral					
	Science					health care at					
	Center -			Inventory		the established					
				(PedsQL)		locations					
39	Houston					locations					
	DESCRIPTION	N:							I		
											ollahoration in a partly
	• Integrate primary and behavioral healthcare services for children and adolescents within UT Physicians' clinics to achieve a close collaboration in a partly integrated system of care (Level IV).										
				are services for	criliarerr aria a	adolosoomo wiim	i Oi i iiy				masoration in a partiy
	integrated sys	tem of care	e (Level IV).				_				
	integrated sys	tem of care	e (Level IV).				_				at their usual source of
	integrated sys • Place a pedi- health care.	tem of care atric behav	e (Level IV). ioral health provid	der in the primar	y care setting	to children and a	_				
	integrated sys • Place a pedi- health care.	tem of care atric behav	e (Level IV).	der in the primar	y care setting	to children and a	_				
	integrated sys • Place a pedi- health care. • Facilitate car Fort Bend	tem of care atric behave e coordina	e (Level IV). ioral health provid tion between prim	der in the primar	y care setting oral healthcare	to children and a	dolescen	ts with be	ehavioral	health services	at their usual source of
40	integrated sys • Place a pedi- health care. • Facilitate car	tem of care atric behave e coordina	e (Level IV). ioral health provid tion between prin Juvenile	der in the primar nary and behavio	y care setting oral healthcare	to children and a a. # of targeted	dolescen	ts with be	ehavioral	health services	at their usual source of
40	integrated sys • Place a pedi- health care. • Facilitate car Fort Bend County	tem of care atric behave e coordina	e (Level IV). ioral health provic tion between prim Juvenile Detention	der in the primar nary and behavio • IT 9.1 Mental health	y care setting oral healthcare	to children and a a. # of targeted individuals	dolescen	ts with be	ehavioral	health services	at their usual source of

#	Provider	Project Option	Subcategory	Cat 3 Measure	QPI - Individuals or encounters	QPI Metric Description	QPI Target DY3	QPI Target Y4	QPI Target DY5	CUMULATIVE DY5 QPI	Total Incentive Payment DY2-5 Cat 1 and 2
				to criminal justice settings such as jails or prisons							
	 Design, implement and evaluate a program that diverts youth with complex behavioral health needs such as serious mental illness or a combination of mental illness and intellectual developmental disabilities, substance abuse and physical health issues from initial or further involvement with juvenile. Individualize services Include assessment, multidisciplinary treatment planning, crisis stabilization services, family supports, respite, specialized therapies (trauma focused interventions, cognitive behavioral interventions), medication management, case management and wraparound supports. 										
41	City of Houston Department of Health and Human Services	2.13.2	Sobering Center	• IT 9.1 Decrease in mental health admissions and readmissions to criminal justice settings such	Individuals	# of individuals served	6000	6000	6000	18000	\$7,710,357

• Conduct monitoring, screening, assessment, service plan development and linking participants to care (if willing) for a maximum of individuals (N=8000/year) and a minimum of N=6000/year, who frequently display a range of mental and physical symptoms that indicate alcohol or other substance abuse in DY4-5

abuse in D14-5.		
	Total Incentive Payment Amount for Behavioral Health	\$396,907,770

Behavioral Health Project sub-categories	Total Projects in the Sub- category		Fotal Project subcategory Incentive yment Amount
Health Education	1	\$	186,649
Care Transistion	5	\$	48,242,102
Crisis Stabilization	7	\$	90,024,439
Expand Behavioral Health	14	\$	117,092,899
Expand Inpatient Behavioral Health	1	\$	7,093,560
Integrated Care	11	\$	125,896,491
Juvenile Detention Diversion	1	\$	661,274
Sobering Center	1	\$	7,710,357
TOTAL	41	,	396,907,770

	Total	Total	Total	Cumulative
QPI Grouping Type	QPI Target per	QPI Target per	QPI Target per	total for QPI
	HHSC: DY3	HHSC: DY4	HHSC: DY5	measures
Encounters	9360	15995	18330	43685
Individuals	20208	35538	43105	98851
Grand Total	29568	51533	61435	142536

BEHAVIORAL HEALTH 7



