



## RHP Plan Update Provider Form

*This page provides high-level information on the various inputs that a user will find within this template.*

Cell Background	Description
Sample Text	Required user input cell, that is necessary for successful completion
Sample Text	Pre-populated cell that a user CANNOT edit
Sample Text	Pre-populated cell that a user CAN edit
Sample Text	Optional user input cell

**DY7-8 Provider RHP Plan Update Template - Provider Entry**

**Progress Indicators**

Section 1: Performing Provider Information	Complete
Section 2: Lead Contact Information	Complete
Section 3: Optional Withdrawal From DSRIP	Complete
Section 4: Performing Provider Overview	Complete
Section 5: DY7-8 DSRIP Total Valuation	Complete

**Section 1: Performing Provider Information**

RHP: **3**

TPI and Performing Provider Name: **081522701 - Texana Center**

Performing Provider Type: **Community Mental Health Center (CMHC)**

Ownership: **Non-State Owned Public**

TIN: **17602532875007**

Physical Street Address: **4910 Airport Avenue**

City: **Rosenberg**

Zip: **77471**

Primary County: **Fort Bend**

Additional counties being served (optional): **Waller, Austin, Colorado, Matagorda, Wharton**

Note: you cannot type county inputs; rather, please select your county from the dropdown menu.

**Section 2: Lead Contact Information**

	Lead Contact 1	Lead Contact 2	Lead Contact 3
Contact Name:	Amanda Darr	Shena Timberlake	Brian Gurbach
Street Address:	4910 Airport Avenue, Building D	4910 Airport Avenue, Building B	4910 Airport Avenue, Building B
City:	Rosenberg	Rosenberg	Rosenberg
Zip:	77471	77471	77471
Email:	amanda.darr@texanacenter.com	shena.timberlake@texanacenter.com	brian.gurbach@texanacenter.com
Phone Number:	281-239-1350	(281) 239-1384	(281) 239-1446
Phone Extension:			
Lead Contact or Both:	Both	Both	Both

Please note that a contact designated "Lead Contact" will be included in the RHP Plan and on the DSRIP Provider Distribution List. A contact designated as "Both" will be included in the RHP Plan, on the DSRIP Provider Distribution List, and will be given access to the DSRIP Online Reporting System.

**Section 3: Optional Withdrawal From DSRIP**

Please select an option below. By selecting "Yes - Withdraw from DSRIP," this organization acknowledges it understands that any DY6 DSRIP payments will be recouped as required by the DY6 Program Funding and Mechanics Protocol. This does not include recoupment of DY4-5 payments that may have occurred in DY6 due to allowable carryforward.

**Do Not Withdraw from DSRIP**

**Section 4: Performing Provider Overview**

Performing Provider Description: **Texana Center is a Community Mental Health Center serving six counties. Texana provides services to those with behavioral healthcare (BH) needs as well as those with intellectual and development disabilities (IDD). Texana Center provides outpatient services to those with mental illness including rehabilitative services, case management services along with psychiatric and counseling services in accordance with HHSC's Texas Resilience and Recovery model of service delivery. Texana Center as the Local Mental Health Authority is the safety net provider for mental health crisis services and is the gate keeper for admissions to the state hospital system. In addition to behavioral healthcare services, Texana is the Local Intellectual and Developmental Authority and provides service coordination and completes determination of intellectual and development designation for individuals who may be entitled to state funded services. Texana operates an IDD provider services division consisting of learning centers and IDD group homes for individuals in IDD waiver programs. Texana also operates several specialized programs including the Children's Center for Autism, Behavior Improvement Center, Social Skills Groups for adults with autism, the Behavior Training and Treatment Center, and Early Childhood Intervention.**

Overall DSRIP Goals: **Texana's overall DSRIP goals have been to meet the needs of those with mental illness by purchasing and opening a Crisis Center (extended observation unit and crisis residential unit) to serve those in the least restrictive setting rather than hospitalization. In addition, primary care integration provides primary care medical services to uninsured individuals in our six county service area. Prior to DSRIP, many of these individuals suffered with untreated and uncontrolled hypertension, diabetes, and other chronic but treatable diseases. These services have further reduced emergency room visits for these individuals. These individuals are uninsured and already in our behavioral healthcare services and are now able to receive primary healthcare services.**

Alignment with regional community needs assessment: **The 2017 Community Needs Assessment completed by the RHP 3 anchor continues to speak to the needs for behavioral healthcare services and primary care services in our catchment area and our DSRIP goals and core activities continue to address these needs. Texana Center continues to focus on crisis services for individuals with behavioral healthcare needs and diverting these individuals from jails and emergency rooms by providing an alternative setting to stabilize individuals. In addition, the primary care integration services focus on acute primary care issues as well as chronic primary care issues primarily uncontrolled hypertension and uncontrolled diabetes. By integrating primary care and behavioral healthcare, we are working on meeting our region's identified goals. Per Region 3's updated Community Health Needs Assessment, Texana Center is addressing "The lack of primary and specialty care Providers, particularly for uninsured individuals and people requiring behavioral health services, resulting in insufficient access to care and frequent long wait lists for services." In addition, Texana is addressing "Behavioral Health needs continue to grow throughout the Region, which lacks both the providers and facilities to adequately meet the demand for behavioral health care services." By providing a primary care service provider, we are meeting the needs of over 500 individuals with behavioral health needs and primary care needs that otherwise would not be addressed. With the Crisis Center, we are providing a facility for individuals to stabilize rather than referring to more costly inpatient psychiatric facilities.**

**Section 5: DY7-8 DSRIP Total Valuation**

	DY7-8 DSRIP Valuation Distribution			
	Valuation if regional private hospital participation requirement is met		Valuation if regional private hospital participation requirement is <u>not</u> met	
	DY7	DY8	DY7	DY8
RHP Plan Update Submission	\$2,266,323.40	\$0.00	\$2,266,323.40	\$0.00
Category A	\$0.00	\$0.00	\$0.00	\$0.00
Category B	\$1,133,161.70	\$1,133,161.70	\$1,133,161.70	\$1,133,161.70
Category C	\$6,232,389.35	\$8,498,712.75	\$7,365,551.05	\$9,631,874.45
Category D	\$1,699,742.55	\$1,699,742.55	\$566,580.85	\$566,580.85
Total	\$11,331,617.00	\$11,331,617.00	\$11,331,617.00	\$11,331,617.00

Would you like to decrease the total valuation?  
**No**

Have you reviewed and confirmed the valuations listed in the table above and identified available IGT to fund these DSRIP amounts?  
**Yes**

Generate Worksheets

**DY7-8 Provider RHP Plan Update Template - Category B**

**Progress Tracker**

Section 1: System Definition	Complete
Section 2: Medicaid Low-income Uninsured (MLIU) Patient Population by Provider (PPP)	Complete

**Performing Provider Information**

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public
Category B valuation in DY7:	\$1,133,161.70
Category B valuation in DY8:	\$1,133,161.70

**Section 1: System Definition**

**Community Mental Health Centers - Required Components**

Required System Component	Business Component?
Home-based Services	Business Component of the Organization

Please enter a description of this System Component.  
 Services provided in the six county area served by Texana Center to people with behavioral health issues and intellectual and developmental disabilities. This excludes services where the Center is acting in the role of the Local Intellectual Developmental Disability Authority (LIDDA).

Required System Component	Business Component?
Office/Clinic	Business Component of the Organization

Please enter a description of this System Component.  
 Services provided in the six county area served by Texana Center to people with behavioral health issues and intellectual and development disabilities. This excludes services where the Center is acting in the role of the Local Intellectual Developmental Disability Authority (LIDDA). Included in this component are the following clinics: Behavioral Healthcare Clinic at Rosenberg, Behavioral Healthcare Clinic at Sugar Land, Behavioral Healthcare Clinic at Bay City, Behavioral Healthcare Clinic at Wharton, Behavioral

**Community Mental Health Centers - Optional Components**

Optional System Component	Would you like to select this component?
Hospital	No

Optional System Component	Would you like to select this component?
Contracted Clinic	No

Optional System Component	Would you like to select this component?
School-based Clinic	No

Optional System Component	Would you like to select this component?
Contracted Inpatient Beds	Yes

Please enter a description of this System Component.  
 Texana Center receives funding from HHSC to purchase beds in local (primarily Houston) psychiatric hospitals for individuals who meet inpatient criteria during a crisis screening. Currently, these hospitals include West Park Springs in Richmond, West Oaks Hospital, Behavioral Hospital of Bellaire, Sun Behavioral Houston, Intracare North, Houston Behavioral Healthcare Hospital and St. Joseph's Hospital all in Houston.

Optional System Component	Would you like to select this component?
State-funded Community Hospital	No

Optional System Component	Would you like to select this component?
Community Institution for Mental Disease (IMD)	No

Optional System Component	Would you like to select this component?
General Medical Hospital	No

Optional System Component	Would you like to select this component?
State Mental Health Facility	No

Optional System Component	Would you like to select this component?
State Mental Retardation Facility	No

Optional System Component	Would you like to select this component?
Other	No

**Section 2: Medicaid Low-income Uninsured (MLIU) Patient Population by Provider (PPP)**

	DY5	DY6
MLIU PPP	6,871	6,765
Total PPP	10,252	10,194

Please indicate the population included in the MLIU PPP

<input checked="" type="checkbox"/> Medicaid	<input checked="" type="checkbox"/> Dual Eligible (Medicaid and	<input checked="" type="checkbox"/> CHIP	<input type="checkbox"/> Local Coverage Option (Below	<input type="checkbox"/> Insured on the Exchange
<input checked="" type="checkbox"/> Low-Income (Below	<input type="checkbox"/> Self-Pay	<input checked="" type="checkbox"/> Uninsured	<input type="checkbox"/> Other (please explain below)	

MLIU PPP Goal for each DY (DY7 and DY8):	6,818
Average Total PPP	10,223
MLIU percentage of Total PPP	66.69%

\*The MLIU percentage is for informational purposes and will help HHSC determine allowable MLIU PPP variation.

Would you like the MLIU PPP Goal to be based on DY5 or DY6 only (as opposed to the average)?	No
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**DY7-8 Provider RHP Plan Update Template - Category C Selection**

Progress Tracker			
Section 2: Selection Overview (CMHCs and LHDs only)	Complete	Note: you must confirm selections at the bottom of the page to finish.	MPT
Section 3: Selection of Measures for Community Mental Health Centers	Complete		Points Selected
Minimum Selection Requirements Met	Yes		Measures Selected
MPT Met	Yes		Clinical Outcome Selected
			At least 2 measures selected
			<b>23</b>
			<b>13</b>
			<b>Y</b>
			<b>Y</b>

**Performing Provider Information**

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public

If regional private hospital participation requirement is met	Category C valuation in DY7:	\$6,232,389.35
	Category C valuation in DY8:	\$8,498,712.75
If regional private hospital participation requirement is <u>not</u> met	Category C valuation in DY7:	\$7,365,551.05
	Category C valuation in DY8:	\$9,631,874.45

**MINIMUM POINT THRESHOLD (MPT):** 23  
 Each Performing Provider must select Measure Bundles/measures to meet or exceed their MPT to maintain their valuation that was confirmed on the Provider Entry tab

**Section 1: Attributed Population**

**Attributed Population for Community Mental Health Center (CMHC)**  
 All individuals from the DSRIP system defined in Category B that meet one of the following criteria during the measurement period:  
 i. One encounter with the performing providers system during the measurement year and one encounter during the year prior to the measurement year OR  
 ii. Two encounters with the performing providers system during the measurement year

Please describe any other attributed population (optional).

**Section 2: Selection Overview**

Please describe your rationale for the selected measures, and describe the primary system components (clinics, facilities) that will be used to report on and drive improvement in selected measures.  
 These measures were selected based on the needs of the population that we serve and where we felt we could have the greatest impact in changing the health (behavioral and primary) of those we serve. The measures chosen align with our core activities and with the RHP 3 Community Needs Health Assessment. The Behavioral Healthcare Clinics located in each of the six counties will be the primary source of the denominators used to report on and drive improvement in the selected measures. The primary denominator locations of these clinics are the Behavioral Healthcare Clinic at Rosenberg, Behavioral Healthcare Clinic at Sugar Land, Behavioral Healthcare Clinic at Bay City, Behavioral Healthcare Clinic at Wharton, Behavioral Healthcare Clinic at Columbus, and the Behavioral Healthcare Clinic at Brookshire. Many of the individuals served in these locations have co-occurring substance abuse disorders, are at high risk for suicide, are at high risk of untreated primary care diseases and the measures chosen drive improvement in these areas for needs that have already been identified by simply serving this population.

**Section 3: Selection of Measure Bundles for Community Mental Health Centers**

Select Measure (Yes/No)	Measure Volume Options for Goal Setting and Achievement	Bundle-Measure ID	Measure Name	Measure Category	Point Value	Additional Points for State Priority Measure
No	MLIU denominator with significant volume	M1-100	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-103	Controlling High Blood Pressure	Clinical Outcome	3	1
Yes	MLIU denominator with significant volume	M1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	Process	1	1
No	MLIU denominator with significant volume	M1-115	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-124	Medication Reconciliation Post-Discharge	Process	1	0
No	MLIU denominator with significant volume	M1-125	Antidepressant Medication Management (AMM-AD)	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-146	Screening for Clinical Depression and Follow-Up Plan (CDF-AD)	Process	1	0
Yes	MLIU denominator with significant volume	M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	Process	1	0
Yes	MLIU denominator with significant volume	M1-160	Follow-Up After Hospitalization for Mental Illness	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-165	Depression Remission at Twelve Months	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-180	Adherence to Antipsychotics for Individuals with Schizophrenia (SAA-AD)	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-181	Depression Response at Twelve Months- Progress Towards Remission	Clinical Outcome	3	1
Yes	MLIU denominator with significant volume	M1-182	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	Process	1	1
Yes	MLIU denominator with significant volume	M1-203	Hepatitis C: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk	Process	1	1
No	MLIU denominator with significant volume	M1-205	Third next available appointment	Process	1	0
No	MLIU denominator with significant volume	M1-207	Diabetes care: BP control (<140/90mm Hg)	Clinical Outcome	3	0
Yes	MLIU denominator with significant volume	M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	Process	1	0
Yes	MLIU denominator with significant volume	M1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	Process	1	1
No	MLIU denominator with significant volume	M1-216	Risk Adjusted Behavioral Health/ Substance Abuse 30-Day Readmission Rate	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-241	Decrease in mental health admissions and readmissions to criminal justice settings such as jails or prisons	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-255	Follow-up Care for Children Prescribed ADHD Medication (ADD)	Clinical Outcome	3	0

No	MLIU denominator with significant volume	M1-256	Initiation of Depression Treatment	Process	1	0
Yes	MLIU denominator with significant volume	M1-257	Care Planning for Dual Diagnosis	Process	1	0
No	MLIU denominator with significant volume	M1-259	Assignment of Primary Care Physician to Individuals with Schizophrenia	Process	1	0
No	MLIU denominator with significant volume	M1-260	Annual Physical Exam for Persons with Mental Illness	Process	1	1
No	MLIU denominator with significant volume	M1-261	Assessment for Substance Abuse Problems of Psychiatric Patients	Process	1	1
No	MLIU denominator with significant volume	M1-262	Assessment of Risk to Self/ Others	Process	1	0
No	MLIU denominator with significant volume	M1-263	Assessment for Psychosocial Issues of Psychiatric Patients	Process	1	0
Yes	MLIU denominator with significant volume	M1-264	Vocational Rehabilitation for Schizophrenia	Process	1	0
No	MLIU denominator with significant volume	M1-265	Housing Assessment for Individuals with Schizophrenia	Process	1	1
No	MLIU denominator with significant volume	M1-266	Independent Living Skills Assessment for Individuals with Schizophrenia	Process	1	0
No	MLIU denominator with significant volume	M1-280	Chlamydia Screening in Women (CHL)	Process	1	1
No	MLIU denominator with significant volume	M1-286	Depression Remission at Six Months	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-287	Documentation of Current Medications in the Medical Record	Process	1	1
Yes	MLIU denominator with significant volume	M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	Process	1	1
No	MLIU denominator with significant volume	M1-306	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH)*	Process	1	0
Yes	MLIU denominator with significant volume	M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	Process	1	1
Yes	MLIU denominator with significant volume	M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	Process	1	1
No	MLIU denominator with significant volume	M1-339	Alcohol & Other Drug Use Disorder Treatment Provided or Offered at Discharge SUB-3 / Alcohol and Other Drug Use Disorder Treatment at Discharge SUB-3a	Process	1	1
No	MLIU denominator with significant volume	M1-340	Substance use disorders: Percentage of patients aged 18 years and older with a diagnosis of current opioid addiction who were counseled regarding	Process	1	1
No	MLIU denominator with significant volume	M1-341	Substance use disorders: Percentage of patients aged 18 years and older with a diagnosis of current alcohol dependence who were counseled regarding psychosocial AND pharmacologic treatment options for alcohol dependence within the 12 month reporting period	Process	1	1
No	MLIU denominator with significant volume	M1-342	Time to Initial Evaluation: Evaluation within 10 Business Days	Process	1	0
No	MLIU denominator with significant volume	M1-385	Assessment of Functional Status or QoL (Modified from NQF# 0260/2624)	Quality of Life	1	0
No	MLIU denominator with significant volume	M1-386	Improvement in Functional Status or QoL (Modified from PQRS #435)	Quality of Life	1	0
No	MLIU denominator with significant volume	M1-387	Reduce Emergency Department visits for Behavioral Health and Substance Abuse (Reported as two rates)	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-390	Time to Initial Evaluation: Mean Days to Evaluation	Process	1	0
Yes	MLIU denominator with significant volume	M1-400	Tobacco Use and Help with Quitting Among Adolescents	Process	1	1
No	MLIU denominator with significant volume	M1-405	Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use	Process	1	1

<b>Total overall selected points:</b>	23
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Are you finished making your selections?  
 Yes

**BY7-8 Provider RHP Plan Update Template - Category C Additional Details**

Progress Tracker

Complete

Section 1: Measure Exemption Requests and Measure Setting System Components

**Section 1: Measure Exemption Requests and Measure Setting System Components**

In order to be eligible for payment for a measure's **reporting milestone**, the Performing Provider must report its performance on the all-payer, Medicaid-only, and LIU-only payer types. Performing Providers may request to be exempted from reporting a measure's performance on the Medicaid-only payer type or the LIU-only payer type with good cause, such as data limitations. Note that reporting a measure's all-payer performance is still required to be eligible for payment for a measure's reporting milestone.

Bundle-Measure ID	Measure Name	Baseline Measurement Period	Requesting a shorter or delayed measurement period?	Requesting a reporting milestone exemption?	Requesting a baseline numerator of zero?
M1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	10/1/2017	Requested Baseline Measurement Period End Date	9/30/2018	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year. Provider is requesting the use of an approximate baseline.	
M1-160	Follow-Up After Hospitalization for Mental Illness	CY2017: January 1, 2017 - December 31, 2017	No	No	No
M1-182	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-203	Hepatitis C: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year. Provider is requesting the use of an approximate baseline.	
M1-257	Care Planning for Dual Diagnosis	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-264	Vocational Rehabilitation for Schizophrenia	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	10/1/2017	Requested Baseline Measurement Period End Date	9/30/2018	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	7/1/2017	Requested Baseline Measurement Period End Date	12/31/2017	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	
M1-400	Tobacco Use and Help with Quitting Among Adolescents	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	10/1/2017	Requested Baseline Measurement Period End Date	9/30/2018	Please enter an explanation for this request	
				Processes were not implemented to collect this data until the second half of the calendar year.	



DY7-8 Provider RHP Plan Update Template - Category C Valuation

Progress Tracker

Section 1: Measure Bundle/Measure Valuation

Complete

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public

If regional hospital participation requirement is met	Category C valuation in DY7:	\$6,232,389.35
	Category C valuation in DY8:	\$8,498,712.75
If regional hospital participation requirement is not met	Category C valuation in DY7:	\$7,365,551.05
	Category C valuation in DY8:	\$9,631,874.45

Section 4: Measure Bundle/Measure Valuation

Valuation for Selected Measures - Community Mental Health Centers

Bundle-Measure ID	Denominator Volume	Points	Desired Valuation %	Minimum Valuation % of Total	Maximum Valuation % of Total	If regional private hospital participation requirement is met		If regional private hospital participation requirement is not met	
						Category C Valuation in DY7	Category C Valuation in DY8	Category C Valuation in DY7	Category C Valuation in DY8
M1-105	MLIU denominator with significant volume	2	7.20%	5.76%	7.70%	\$448,732.03	\$611,907.32	\$530,319.68	\$693,494.96
M1-147	MLIU denominator with significant volume	1	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-160	MLIU denominator with significant volume	3	9.62%	5.76%	9.62%	\$599,555.86	\$817,576.17	\$708,566.01	\$926,586.32
M1-182	MLIU denominator with significant volume	2	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-203	MLIU denominator with significant volume	2	7.20%	5.76%	7.70%	\$448,732.03	\$611,907.32	\$530,319.68	\$693,494.96
M1-210	MLIU denominator with significant volume	1	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-211	MLIU denominator with significant volume	2	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-257	MLIU denominator with significant volume	1	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-264	MLIU denominator with significant volume	1	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-305	MLIU denominator with significant volume	2	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-317	MLIU denominator with significant volume	2	7.20%	5.76%	7.70%	\$448,732.03	\$611,907.32	\$530,319.68	\$693,494.96
M1-319	MLIU denominator with significant volume	2	7.70%	5.76%	7.70%	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-400	MLIU denominator with significant volume	2	7.18%	5.76%	7.70%	\$447,485.56	\$610,207.58	\$528,846.56	\$691,568.61
Total	N/A	23	100.00%	N/A	N/A	\$6,232,389.35	\$8,498,712.75	\$7,365,551.05	\$9,631,874.45
	Difference between selected percent and 100%:		9.80%						

Your valuation allocations add to 100%.

Are you finished allocating your Category C valuations across your selected measures?  
Yes

Explanation of Valuation Percent Changes

Overall justification for change in Category C valuation distribution.

Valuation was reduced for measures requiring delayed baselines for cash flow reasons.

Please address the amount of improvement required for the Measure Bundle(s) with increased valuation including estimated baseline and goals for key measures that may require high amounts of improvement within the bundle.

Provider has processes implemented to track 7 day aftercare with non-licensed professionals per our performance contract with BHSC. This measure requires changing the provider type and adding a 30 day follow up measure. Provider has made these modifications and does not expect difficulty showing improvement in this measure. In addition, this is an outcome measure which has considerable greater impact in overall behavioral health improvement of those served.

Please address the level of effort required for improvement for the Measure Bundle(s) with increased valuation.

The process is already in place and required additional cost for licensed staff to complete measure to specifications.

Please describe the size of the population impacted as compared to the size of other selected Measure Bundle(s) for the Measure Bundle(s) with increased valuation.

The denominator for this population is estimated at 450 will be similar in size to some measures and less than others.

**DY7-8 Provider RHP Plan Update Template - Category A Core Activities**

**Progress Tracker**

Section 1: Transition from DY2-6 Projects to DY7-8 Provider-Level Outcomes and Core Activities  
 Section 2: Core Activities  
 All Selected Measure Bundles/Measures Associated with at Least One Core Activity

Complete
Complete
Complete

**Performing Provider Information**

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public

**Section 1: Transition from DY2-6 Projects to DY7-8 Provider-Level Outcomes and Core Activities**

DY6 Project ID	Project Option	Project Summary	Completed/ Continuing	Enter a description for continuation (optional)
RHP 3_081522701.1.1	1.12.2	Enhance service availability of appropriate levels of behavioral health care (applied behavior analysis, ABA, and speech-language pathology for children diagnosed with autism spectrum disorders, ASD) to expand the number of community based settings where behavioral health services may be delivered in underserved areas.	Completed in DY2 6	
RHP 3_081522701.1.2	1.13.1	Develop an 8 bed 48-hour extended observation unit and a 14 bed crisis residential unit where individuals in crisis may go to be assessed and stabilized by providing crisis intervention services.	Continuing as Core Activity in DY7-8	
RHP 3_081522701.1.3	1.9.2	Implement a system of early identification and delivery of therapeutic services for children with developmental delays that blends the best aspect of private therapy and a natural environment based model and includes social work and/or monitoring by a child development specialist to support parental involvement and supplement the number of clinical hours recommended.	Completed in DY2 6	
RHP 3_081522701.2.1	2.13.1	Create a crisis behavioral health care team to intervene to keep individuals in crisis out of the State Support Living Centers, emergency rooms, state mental health hospitals or jail. Individuals dually diagnosed (intellectual and developmental disability, pervasive developmental disorder or mental retardation who have a co-occurring serious and persistent mental illness.	Completed in DY2 6	
RHP 3_081522701.2.100	2.15.1	This project will hire a primary care physician and other appropriate staff to provide primary care services to the Medicaid and uninsured population currently being served by Texana Center for their mental illness. By providing both services in the same building, by the same performing provider, a "warm" hand off can be made the same day as the visit to the behavioral healthcare provider. The interventions will include screenings, treatment, medication services, education services including disease management and nutrition, exercise and wellness.	Continuing as Core Activity in DY7-8	

**Section 2: Core Activities**

Please enter your organization's number of Core Activities:

1) Please select the grouping for this Core Activity.

a) Please select the name of this Core Activity.

b) Please enter a description of this Core Activity

i) Please describe the first Secondary Driver for the above Core Activity (required).

A) Please list the first Change Idea for the above Secondary Driver (required).

B) Please list the second Change Idea for the above Secondary Driver (optional).

ii) Please describe the second Secondary Driver for the above Core Activity (optional).

B) Please list the second Change Idea for the above Secondary Driver (optional).

c) Please select the Measure Bundles or measures impacted by this Core Activity. If this core activity is not associated with any measure bundles or measures, please select "None" in the first dropdown.

M1-105	M1-147	M1-160	M1-210
M1-257	M1-264	M1-305	M1-317
M1-319			

i) Please describe how this Core Activity impacts the selected Measure Bundles or measures.

In the Crisis Center, individuals experiencing a mental health crisis are stabilized and assessed for additional medical concerns. These measures touch on important physical health components as well as managing symptoms of mental illness. The Crisis Center provides a place for all of these things to be assessed, education provided to the individual and plans made for required follow up once discharged from the Crisis Center.

d) Is this Core Activity provided by a provider that is not included in the Category B System Definition?

No

2) Please select the grouping for this Core Activity.

Access to Primary Care Services

a) Please select the name of this Core Activity.

Integrated physical and behavioral health care services

b) Please enter a description of this Core Activity

This core activity involves establishing a primary care clinic inside of a behavioral healthcare clinic. A Nurse Practitioner is utilized to diagnose acute and chronic disease conditions. Individuals are diagnosed, treated and medications provided. Health education including chronic disease management through medications, nutrition and exercise is provided by a Chronic Care RN. This clinic is located in the Behavioral Healthcare Clinic at Rosenberg but is open for others being served in behavioral healthcare services in the following clinics: Behavioral Healthcare Clinic at Wharton, Behavioral Healthcare Clinic at Bay City, Behavioral Healthcare Clinic at Brookshire, Behavioral Healthcare Clinic at Sugar Land. If these individuals are willing to drive or ride on our van to the Rosenberg Clinic, they can receive these primary care services. The clinic includes one Nurse Practitioner, one Chronic Care RN and one LVN.

i) Please describe the first Secondary Driver for the above Core Activity (required).

Implement a medication adherence process for chronic conditions (i.e., uncontrolled hypertension or diabetes).

A) Please list the first Change Idea for the above Secondary Driver (required).

Implement processes in clinic workflow that incorporates patient education delivery.

B) Please list the second Change Idea for the above Secondary Driver (optional).

ii) Please describe the second Secondary Driver for the above Core Activity (optional).

c) Please select the Measure Bundles or measures impacted by this Core Activity. If this core activity is not associated with any measure bundles or measures, please select "None" in the first dropdown.

M1-105	M1-147	M1-210	M1-317
M1-211	M1-257	M1-203	M1-400
M1-182			

i) Please describe how this Core Activity impacts the selected Measure Bundles or measures.

As individuals are identified in the behavioral healthcare clinic, they are referred to the Nurse Practitioner and Chronic Care RN for treatment and education including medications. For most individuals, they simply have not had the means to receive these services and pay for the medications. It is an opportunity for education regarding how substance abuse issues effect not only mental health but physical health as well. This core activity focuses on educating individuals the regarding tobacco and alcohol use and obesity and the role these habits play in maintaining good physical health primarily with respect to uncontrolled hypertension and diabetes care. A large number of those we serve are at risk of Hepatitis C and this core activity focuses on testing and referral for follow up for this disease as well.

d) Is this Core Activity provided by a provider that is not included in the Category B System Definition?

No

**DY7-8 Provider RHP Plan Update Template - Category D**

**Progress Tracker**

Section 2: Verification

Complete

**Performing Provider Information**

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public

If regional hospital participation requirement is met	Category D valuation in DY7	\$1,699,742.55
	Category D valuation in DY8	\$1,699,742.55
If regional hospital participation requirement is not met	Category D valuation in DY7	\$566,580.85
	Category D valuation in DY8	\$566,580.85

**Section 1: Statewide Reporting Measure Bundle for Community Mental Health Clinics (CMHCs)**

Measure	Category D valuation per DY distributed across measures (if regional hospital participation requirement is met)	Category D valuation per DY distributed across measures (if regional hospital participation requirement is not met)
Effective Crisis Response	\$339,948.51	\$113,316.17
Crisis Follow up	\$339,948.51	\$113,316.17
Community Tenure (Adult and Child/Youth)	\$339,948.51	\$113,316.17
Reduction in Juvenile Justice Involvement	\$339,948.51	\$113,316.17
Adult Jail Diversion	\$339,948.51	\$113,316.17

**Section 2: Verification**

Please indicate below that you understand that Category D reporting requires qualitative reporting and data will be provided by HHSC as indicated in the Measure Bundle Protocol.

I understand

DY7-8 Provider RHP Plan Update Template - IGT Entry

Progress Tracker

Section 1: IGT Entities	Complete
Section 2: IGT Funding	Complete
Section 3: Certification	Complete

Performing Provider Information

RHP: 081522703 - Texas Center  
 TPI and Performing Provider Name: Community Mental Health Center (CMHC)  
 Performing Provider Type: Non-State Owned Public  
 Ownership:

Section 1: IGT Entities

In order to delete an existing IGT, delete the name of the IGT from cell G21, G29, etc.

IGT RHP	Texas Center	IGT Name	IGT TPI (if available)	IGT TIN	Affiliation Number
1			N/A	17602532875007	100-13-0000-00135

  

Contact #	Contact Name	Street Address	City	Zip	Email	Phone Number	Phone Extension	Lead Contact or Both
1	Amanda Darr	4810 Airport Avenue, Building D	Rosenberg	77471	amanda.darr@texascenter.com	281-293-1950		Both
2								
3								

  

IGT RHP	IGT Name	IGT TPI (if available)	IGT TIN	Affiliation Number
1				
2				
3				

Please note that a contact designated "Lead Contact" will be included in the RHP Plan and on the DSRIP-IGT Distribution List. A contact designated as "Both" will be included in the RHP Plan, on the DSRIP-IGT Distribution List, and will be given access to the DSRIP Online Reporting System.

Section 2: IGT Funding

RHP Plan Update Submission	IGT Name	IGT TIN	IGT Affiliation #	DY7 % IGT Allocated	DY8 % IGT Allocated	If regional private hospital participation requirement is met		If regional private hospital participation requirement is not met	
						Total Estimated DY7 Allocation (FMAP 56.88)/IGT	Total Estimated DY8 Allocation (FMAP 57.32)/IGT	Total Estimated DY7 Allocation (FMAP 56.88)/IGT	Total Estimated DY8 Allocation (FMAP 57.32)/IGT
Category B	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$977,238.65	\$977,238.65	\$977,238.65	\$977,238.65
MI-105	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$488,619.33	\$488,619.33	\$488,619.33	\$488,619.33
MI-147	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$193,459.25	\$193,459.25	\$193,459.25	\$193,459.25
MI-180	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$275,298.30	\$275,298.30	\$275,298.30	\$275,298.30
MI-182	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$248,528.49	\$248,528.49	\$248,528.49	\$248,528.49
MI-202	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$285,930.28	\$285,930.28	\$285,930.28	\$285,930.28
MI-210	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$193,459.25	\$193,459.25	\$193,459.25	\$193,459.25
MI-211	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$205,930.28	\$205,930.28	\$205,930.28	\$205,930.28
MI-257	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$275,298.30	\$275,298.30	\$275,298.30	\$275,298.30
MI-264	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$205,930.28	\$205,930.28	\$205,930.28	\$205,930.28
MI-295	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$275,298.30	\$275,298.30	\$275,298.30	\$275,298.30
MI-317	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$193,459.25	\$193,459.25	\$193,459.25	\$193,459.25
MI-319	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$205,930.28	\$205,930.28	\$205,930.28	\$205,930.28
MI-400	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$193,459.25	\$193,459.25	\$193,459.25	\$193,459.25
Category D	Texas Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$732,928.99	\$732,928.99	\$732,928.99	\$732,928.99
<b>Total</b>						\$4,886,193.25	\$4,886,193.25	\$4,886,193.25	\$4,886,193.25

Your funding allocations sum to 100%.

Have the IGT Entities and funding percentages been updated? **Yes**

Section 3: Certification

By my signature below, I certify the following facts:  
 • I am legally authorized to sign this document on behalf of my organization;  
 • I have read and understand this document;

Name: Amanda Darr  
 IGT Organization: Texas Center  
 Date: 6/9/2018

**DY7-8 Provider RHP Plan Update Template -Summary and Certification**

**Progress Tracker**

Section 1: DY7-8 DSRIP Valuation  
 Section 2: Category B Medicaid Low-income Uninsured (MLIU) Patient Population by Provider (PPP)  
 Section 3: Category C Measure Bundles/Measures Selection and Valuation  
 Section 4: Category A Core Activities Associated with Category C Measure Bundles/Measures  
 Section 5: Category D Valuations  
 Section 6: Certification

Complete
Complete
Complete
Complete
Complete
Complete

**Performing Provider Information**

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public

**Section 1: DY7-8 DSRIP Valuation**

	DY7-8 DSRIP Valuation Distribution			
	Valuation if regional private hospital participation requirement is met		Valuation if regional private hospital participation requirement is not met	
	DY7	DY8	DY7	DY8
RHP Plan Update Submission	\$2,266,323.40	\$0.00	\$2,266,323.40	\$0.00
Category A	\$0.00	\$0.00	\$0.00	\$0.00
Category B	\$1,133,161.70	\$1,133,161.70	\$1,133,161.70	\$1,133,161.70
Category C	\$6,232,389.35	\$8,498,712.75	\$7,365,551.05	\$9,631,874.45
Category D	\$1,699,742.55	\$1,699,742.55	\$566,580.85	\$566,580.85
Total	\$11,331,617.00	\$11,331,617.00	\$11,331,617.00	\$11,331,617.00

Do you confirm the information in this section and acknowledge the understanding of limited allowed changes as described in the Program Funding and Mechanics Protocol and Measure Bundle Protocol?

Yes

**Section 2: Category B Medicaid Low-income Uninsured (MLIU) Patient Population by Provider (PPP)**

	MLIU PPP	Total PPP	MLIU Percentage of Total PPP
DY5	6,871	10,252	67.02%
DY6	6,765	10,194	66.36%
DY7 Estimated	6,818	10,223	66.69%
DY8 Estimated	6,818	10,223	66.69%

Were DY7-8 maintenance goals based on DY5 or DY6 only? No

Do you confirm the information in this section and acknowledge the understanding of limited allowed changes as described in the Program Funding and Mechanics Protocol and Measure Bundle Protocol?

Yes

**Section 3: Category C Measure Bundles/Measures Selection and Valuation**

Bundle-Measure ID	Measure Bundle/Measure Name	# of Measures with Requested Achievement of Alternative Denominators	# of Measures with Requested Shorter or Delayed Measurement Periods	# of Measures with Requested Reporting Milestone Exemptions	Points	Valuation if regional private hospital participation requirement is met		Valuation if regional private hospital participation requirement is not met	
						DY7 Valuation	DY8 Valuation	DY7 Valuation	DY8 Valuation
M1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	0	1	0	2	\$448,732.03	\$611,907.32	\$530,319.68	\$693,494.96
M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	0	1	0	1	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-160	Follow-Up After Hospitalization for Mental Illness	0	0	0	3	\$599,555.86	\$817,576.17	\$708,566.01	\$926,586.32
M1-182	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	0	1	0	2	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-203	Hepatitis C: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk	0	1	0	2	\$448,732.03	\$611,907.32	\$530,319.68	\$693,494.96
M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	0	1	0	1	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	0	1	0	2	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-257	Care Planning for Dual Diagnosis	0	1	0	1	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33

M1-264	Vocational Rehabilitation for Schizophrenia	0	1	0	1	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	0	1	0	2	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	0	1	0	2	\$448,732.03	\$611,907.32	\$530,319.68	\$693,494.96
M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	0	1	0	2	\$479,893.98	\$654,400.88	\$567,147.43	\$741,654.33
M1-400	Tobacco Use and Help with Quitting Among Adolescents	0	1	0	2	\$447,485.56	\$610,207.58	\$528,846.56	\$691,568.61
Total	N/A	0	12	0	23	\$6,232,389.35	\$8,498,712.75	\$7,365,551.05	\$9,631,874.45

Do you confirm the information in this section and acknowledge the understanding of limited allowed changes as described in the Program Funding and Mechanics Protocol and Measure Bundle Protocol?

Yes

**Section 4: Category A Core Activities Associated with Category C Measure Bundles/Measures**

Bundle-Measure ID	Measure Bundle/Measure Name	Associated Core Activities
M1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	
M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	
M1-160	Follow-Up After Hospitalization for Mental Illness	
M1-182	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	
M1-203	Hepatitis C: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk	
M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	
M1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	
M1-257	Care Planning for Dual Diagnosis	
M1-264	Vocational Rehabilitation for Schizophrenia	
M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	
M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	
M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	
M1-400	Tobacco Use and Help with Quitting Among Adolescents	
M1-257	Care Planning for Dual Diagnosis	
M1-264	Vocational Rehabilitation for Schizophrenia	
M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	
M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	
M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	
M1-400	Tobacco Use and Help with Quitting Among Adolescents	

Do you confirm the information in this section and acknowledge the understanding of limited allowed changes as described in the Program Funding and Mechanics Protocol and Measure Bundle Protocol?

Yes

**Section 5: Category D Valuations**

**Statewide Reporting for CMHCs**

Measure	Category D valuation per DY distributed across measures ( if regional hospital participation requirement is met)	Category D valuation per DY distributed across measures (if regional hospital participation requirement is not met)
Effective Crisis Response	\$339,948.51	\$113,316.17
Crisis Follow up	\$339,948.51	\$113,316.17
Community Tenure (Adult and Child/Youth)	\$339,948.51	\$113,316.17
Reduction in Juvenile Justice Involvement	\$339,948.51	\$113,316.17
Adult Jail Diversion	\$339,948.51	\$113,316.17

Do you confirm the information in this section and acknowledge the understanding of limited allowed changes as described in the Program Funding and Mechanics Protocol and Measure Bundle Protocol?

Yes

Section 6: Certification

By my signature below, I certify the following facts:

- I am legally authorized to sign this document on behalf of my organization;
- I have read and understand this document;
- The statements on this form regarding my organization are true, correct, and complete to the best of my knowledge and belief.

Name:

Shena Timberlake

Performing Provider:

Texana Center

Date:

3/9/2018



## DY7-8 Provider RHP Plan Update Template - Overall Template Progress

### PROVIDER RHP PLAN UPDATE TEMPLATE PROGRESS: **Template is COMPLETE!**

Please confirm that the Provider RHP Plan Update template progress shows complete above. If it shows that the template is not ready for submission, please complete any missing steps and correct any outstanding issues before submitting to HHS.

#### Provider Entry

Section 1: Performing Provider Information	Complete
Section 2: Lead Contact Information	Complete
Section 3: Optional Withdrawal From DSRIP	Complete
Section 4: Performing Provider Overview	Complete
Section 5: DY7-8 DSRIP Total Valuation	Complete

#### Category B

Section 1: System Definition	Complete
Section 2: Medicaid Low-income Uninsured (MLIU) Patient Population by Provider (PPP)	Complete

#### Category C Selection

Section 1: Selection Overview (CMHCs and LHDs only)	Complete
Section 3: Selection of Measures for Community Mental Health Centers	Complete
Minimum Selection Requirements Met	Yes
MPT Met	Yes

#### Category C Additional Details

Section 1: Measure Exemption Requests and Measure Setting System Components	Complete
---	----------

#### Category C Valuation

Section 1: Measure Bundle/Measure Valuation	Complete
---	----------

#### Category A Core Activities

Section 1: Transition from DY2-6 Projects to DY7-8 Provider-Level Outcomes and Core Activities	Complete
Section 2: Core Activities	Complete
All Selected Measure Bundles/Measures Associated with at Least One Core Activity	Complete

#### Category D

Section 1: Statewide Reporting Measure Bundle for Community Mental Health Clinics (CMHCs)	Complete
Section 2: Verification	Complete

#### IGT Entry

Section 1: IGT Entities	Complete
Section 2: IGT Funding	Complete
Section 3: Certification	Complete

#### Summary and Certification

Section 1: DY7-8 DSRIP Valuation	Complete
Section 2: Category B Medicaid Low-income Uninsured (MLIU) Patient Population by Provider (PPP)	Complete
Section 3: Category C Measure Bundles/Measures Selection and Valuation	Complete
Section 4: Category A Core Activities Associated with Category C Measure Bundles/Measures	Complete
Section 5: Category D Valuations	Complete
Section 6: Certification	Complete