

# RHP Plan Update Provider Form

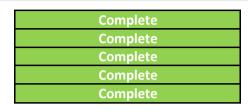
This page provides high-level information on the various inputs that a user will find within this template.

Sample Text Rec	quired user input cell, that is necessary for successful completion
Sample Text Pre	e-populated cell that a user CANNOT edit
Sample Text Pre	e-populated cell that a user CAN edit
Sample Text Op	otional user input cell

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

### **Progress Indicators**

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



### Section 1: Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	113180703 - The Harris Center for Mental Health and IDD
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public
TIN:	17416039505023
Physical Street Address:	9401 Southwest Freeway
City:	Houton
Zip:	77074
Primary County:	Harris
Additional counties being served (optional):	
	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:	Jeanne Wallace	Wayne Young	Alex Lim
Street Address:	9401 Southwest Freeway	9401 Southwest Freeway	9401 Southwest Freeway
City:	Houston	Houston	Houston
Zip:	77074	77074	77074
Email:	Jeanne.Wallace@TheHarrisCenter.org	Wayne.Young@TheHarrisCenter.org	Alex.Lim@TheHarrisCenter.org
Phone Number:	(713) 970-3971	(713) 970-7190	(713) 970-3375
Phone Extension:			
Lead Contact or Both:	Both	Both	Both

Dease note that a contact designated "Lead Contact" will be included in the RHD Dlan and on the DSRID Drovider 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:	The Harris Center for Mental Health and IDD, formerly known as "MHMRA of Harris County", is state-designated as the Local Mental Health Authority and Local Intellectual and Developmental Disability Authority for Harris County. The Harris Center provides the highest level of integrated mental health and intellectual & developmental disability (IDD) services to residents through four service divisions: Mental Health Outpatient Services, Mental Health Forensics, Intellectual Disability & Autism Services, and Comprehensive Psychiatric Emergency Programs. We serve over 51,000 individuals each year, about 4,500 of whom are children. It is estimated that of those we serve 40% are Low-Income Uninsured and 47% are Medicaid recipients. The Agency also served over 18,000 individuals at the Harris County Jail through its contract with the Harris County Sheriff's Office. While we can only count the number of individuals we serve, we know our impact extends to their entire community. As the largest behavioral and developmental disability care center in Texas, The Harris Center strives to provide high quality, efficient, and cost effective services so that persons with mental disabilities may live with dignity as fully functioning, participating, and contributing members of our community.
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Overall DSRIP Goals:	Our identified objective is to transform the current health care delivery system has the direct impact of improving individual functioning. In Waiver 2.0 we will be expanding the number of individuals who will be impacted by the additional services offered through implementation of the selected measures. In the past we served only individuals within projects, but the expansion will result in us serving all individuals with a mental illness in all or our Mental Health, Forensic, Crisis, and IDD services. We are beginning with looking at improving our processes to provide better tracking of physical health and social-related issues, which should impact the treatment of services. We will also be looking at two clinical outcome measures to improve the overall health of individuals being served at The Harris Center. The ultimate goal is to improve the overall care of individuals with a severe menta illness to increase their capacity for life and improvement in their daily living.
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Alignment with regional community needs assessment:	We were actively involved with the development of the Southeast Regional Healthcare Partnership Community Needs Assessment (CHNA). The updated CHNA presents the status of public health across nine counties and assesses how community needs have changed. According to data presented in both Assessments, many of the community's needs identified in 2012 continue to be the identified needs today. The Region continues to have a lack of primary and specialty care Providers, particularly for uninsured individuals and people requiring behavioral health services. There also continues to face a high prevalence of chronic disease and poor health, including diabetes, heart disease, asthma, cancer and cardiovascular disease. Behavioral health needs continues to grow throughout our region. The CHNA indicated that over 70% of respondents agreed that their organization had challenges navigating patients to necessary social resources, which could be due to Providers not understanding patient needs. As a part of DSRIP renewal, we are implementing a number of process measures that will assess an individual's need of risk; intervention for depression which could lead to suicide; substance use intervention; and physical health needs. Also as a part of the CHNA stable housing has been identified as a central challenge for patients with behavioral health conditions and their inability to make use of services (to connect them to healthcare, healthy food, or work opportunities) continues to be a challenge for individuals in the Region. We are implementing housing assessments; vocational assessments; and daily living assessments to assist in the treatment for the individuals we serve.
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### Section 5: DY7-8 DSRIP Total Valuation

		DY7-8 DSRIP Valu	ation Distribution	
	Valuation if regional private hospit	al participation requirement is met	Valuation if regional private hospital	participation requirement is <u>not</u> met
	DY7	DY8	DY7	DY8
RHP Plan Update Submission	\$16,784,675.55	\$0.00	\$16,784,675.55	\$0.00
Category A	\$0.00	\$0.00	\$0.00	\$0.00
Category B	\$8,392,337.78	\$8,392,337.78	\$8,392,337.78	\$8,392,337.78
Category C	\$46,157,857.77	\$62,942,533.32	\$54,550,195.54	\$71,334,871.10
Category D	\$12,588,506.66	\$12,588,506.66	\$4,196,168.89	\$4,196,168.88
Total	\$83,923,377.76	\$83,923,377.76	\$83,923,377.76	\$83,923,377.76

### 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 T	emplate - Category B		
Progress Tracker			
Section 1: System Definition Section 2: Medicaid Low-income Uninsur	ed (MLIU) Patient Population by Provider (PPP)	Complete Complete	
Performing Provider Information			
RHP: TPL and Performing Provider Name	3 113180703 - The Harris Center for Mental Health and IDD		

TPI and Performing Provider Name:	113180703 - The Harris Center for Mental Health and IDD
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public
Category B valuation in DY7:	\$8,392,337.78
Category B valuation in DY8:	\$8,392,337.78

### Section 1: System Definition

Community Mental Health Centers -	Required Components	
Required System Component	Business Component?	
Home-based Services	Business Component of the Organization	I
Please enter a description of this System Co	omponent.	
Services provided in the community to all in	ndividuals served at The Harris Center, which inc	udes those services provided in the home.
Required System Component	Business Component?	
Office/Clinic	Business Component of the Organization	I
Please enter a description of this System Co	omponent.	
Services provided either in the office or at a	a behavioral health psychiatric clinic for individua	Is served at The Harris Center.

Optional Components
<u>eprena components</u>
Would you like to select this component?
No
Would you like to select this component?
No
Would you like to select this component?
Yes
omponent.
p-location sites with a number of school districs
-location sites with a number of school districts
Would you like to select this component?
Yes
omponent.
local psychiatric hospitals for local inpatient be
iocui psychiatric nospitais for local inpatient be
Would you like to select this component?
Would you like to select this component? Yes
Yes
Yes proponent.
Yes
Yes proponent.
Yes proponent.
Yes proponent.
Yes omponent. Harris County Psychiatric Center.
Yes omponent. Harris County Psychiatric Center. Would you like to select this component?
Yes pmponent. Harris County Psychiatric Center. Would you like to select this component? No
Yes pmponent. Harris County Psychiatric Center. Would you like to select this component? No Would you like to select this component?
Yes pmponent. Harris County Psychiatric Center. Would you like to select this component? No
Yes pmponent. Harris County Psychiatric Center. Would you like to select this component? No Would you like to select this component?

State Mental Health Facility	Yes
· · · · · · · · · · · · · · · · · · ·	103
Please enter a description of this Syste	m Component.
Individuals who are being discharged fi	rom any State funded psychiatric hospital back to or
Optional System Component	Would you like to select this component?
Optional System Component State Mental Retardation Facility	Would you like to select this component?
State Mental Retardation Facility	No

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

	DY5	DY6
MLIU PPP	36,867	38,254
Total PPP	42.504	44.208

Please indicate the population included in the MLIU PPP

✓ Medicaid	✓Dual Eligible	СНІР	✓Local Coverage Option	Insured on the Exchange
✓ Low-Income	Self-Pay	✓Uninsured	Other (please explain below)	

MLIU PPP Goal for each DY (DY7 and DY8):	37,561					
Average Total PPP	43,356					
MLIU percentage of Total PPP	86.63%					
*The MUUL percentage is for informational purposes and will halp UUSC determine allowable						

\*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	No
average)?	

#### DY7-8 Provider RHP Plan Update Template - Category C Selection

Progress Tracker				
		Note: you must	МРТ	40
Section 2: Selection Overview (CMHCs and LHDs only)	Complete	confirm selections	Points Selected	40
Section 3: Selection of Measures for Community Mental Health Centers	Complete	at the bottom of the	Measures Selected	27
Minimum Selection Requirements Met	Yes	page to finish.	Clinical Outcome Selected	Y
MPT Met	Yes		At least 2 measures selected	Y

#### Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	113180703 - The Harris Center for Mental Health and IDD
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public

If regional private hospital participation	Category C valuation in DY7:	\$46,157,857.77
requirement is met	Category C valuation in DY8:	\$62,942,533.32
If regional private hospital participation	Category C valuation in DY7:	\$54,550,195.54
requirement is <u>not</u> met	Category C valuation in DY8:	\$71,334,871.10

#### MINIMUM POINT THRESHOLD (MPT):

40

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).

None

### 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.

We initially separted the measures into six groups and held meetings with key players for each group to review the measures to identify those we had no control over that we should eliminate, those that were clinically best practice that we should implement, and those that we should implement as measures that could provide overall health improvement for individuals we serve. The meetings were held from May 25, 2017 through June 15, 2017 with plans for implement new measures with a shortened baseline of six months from July 2017 to December 2017. We decided to implement more measures than our identified 40 points to see if there were any that we would not be able to make our final Measure calculation. We worked with a write description of the data for experting cauld be aptered into our electronic.

make improvements on and then eliminate them when we had to make our final ineasure selection. We worked with our () department and clinical staff to ensure that the data for reporting could be entered into our electronic health record to pull down the data for setting a baseline and monitoring for improvement. The system component for these measures will be primarily clinic based in our mental health and forensic outpatient programs, some in our crisis and IDD programs and some services provided in the community.

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

	Measure Volume Options for					Additional Points
Select Measure (Yes/No)	Goal Setting and Achievement	Bundle-Measure ID	Measure Name	Measure Category	Point Value	for State Priority Measure
	MLIU denominator with		Initiation and Engagement of Alcohol and Other			
No	significant volume	M1-100	Drug Dependence Treatment (IET)	Clinical Outcome		3 1
	MLIU denominator with					
No	significant volume	M1-103	Controlling High Blood Pressure	Clinical Outcome		3 1
Vec	MLIU denominator with		Preventive Care & Screening: Tobacco Use:			
Yes	significant volume	M1-105	Screening & Cessation Intervention	Process		1 1
No	MLIU denominator with		Comprehensive Diabetes Care: Hemoglobin A1c			
NO	significant volume	M1-115	(HbA1c) Poor Control (>9.0%)	Clinical Outcome		3 0
Yes	MLIU denominator with					
Tes	significant volume	M1-124	Medication Reconciliation Post-Discharge	Process		1 0
No	MLIU denominator with					
NO	significant volume	M1-125	Antidepressant Medication Management (AMM-AD)	Clinical Outcome		3 0
Yes	MLIU denominator with		Screening for Clinical Depression and Follow-Up Plan			
	significant volume	M1-146	(CDF-AD)	Process		1 0
Yes	MLIU denominator with		Preventive Care and Screening: Body Mass Index			
	significant volume	M1-147	(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		Adherence to Antipsychotics for Individuals with			
	significant volume	M1-180	Schizophrenia (SAA-AD)	Clinical Outcome		3 0
No	MLIU denominator with		Depression Response at Twelve Months- Progress			
	significant volume	M1-181	Towards Remission Diabetes Screening for People With Schizophrenia or	Clinical Outcome		3 1
	MLIU denominator with					
No	significant volume	N41 102	Bipolar Disorder Who Are Using Antipsychotic	Durana		
	MLIU denominator with	M1-182	Medications (SSD-AD) Hepatitis C: One-Time Screening for Hepatitis C Virus	Process		1 1
No		M1-203	(HCV) for Patients at Risk			1
	significant volume	111-203		Process		1
No	All-payer denominator with	M1-205	Third payt available appointment	Process		1
	significant volume MLIU denominator with	111-205	Third next available appointment	Process		1 U
No		M1-207	Disbotos caro: PR control (<140/00mm Hz)	Clinical Outcome		2
		IVI1-207	Diabetes care: BP control (<140/90mm Hg)	Clinical Outcome		3

Ves         spriftert volume         M1-210         Blood Pressure and Follow-Up Documented         Process         1         0           No         M1-211         Physical Activity for Children / Addiseconts         Process         1         1           No         M1-211         Physical Activity for Children / Addiseconts         Process         1         1           No         M1-216         3D-Day Additionation and         Children / Addiseconts         1         1           No         M1-216         3D-Day Additionation and         Children / Addiseconts         3         0           No         M1-216         3D-Day Additionation and         Children / Prescribed ADHO         Children / Decesson         3         0           No         M1UU denominator with significant Volume         M1-256         Initiation of Depression Treatment         Process         1         0           Ves         Sprificant Volume         M1-256         Initiation of Depression Treatment         Process         1         0           Ves         Sprificant Volume         M1-256         Initiation of Depression Treatment         Process         1         0           Ves         Sprificant Volume         M1-256         Initiation of Depression Treatment         Process         1 <td< th=""><th>Vez</th><th>MLIU denominator with</th><th></th><th>Preventive Care and Screening: Screening for High</th><th></th><th></th></td<>	Vez	MLIU denominator with		Preventive Care and Screening: Screening for High		
No     Megan Assessment and Quonseling for Nutlor and Process     1       No     M1-211     Physical Activity for Children / Adults for Nutly for Children / Adults for Shift and Missions and Process     Process     1       No     M1-216     30-Day Readingsion Rate     Clinical Outcome     3     0       No     M1-241     or prison     Clinical Outcome     3     0       No     M1-255     Medication (ADD)     Clinical Outcome     3     0       Ves     MUL denominator with significant volume     M1-256     Initiation of Depression Treatment     Process     1     0       Ves     MUL denominator with significant volume     M1-260     Inters     Process     1     1       Ves     Significant volume     M1-261     Assignment of Fishors with Mental Process     1     1       Ves     MUL denominator with significant volume     M1-261     Assignment for Subtance Abuse Problems of significant volume     1     1     0	fes	significant volume	M1-210	Blood Pressure and Follow-Up Documented	Process	1 0
No     Megan Assessment and Quonseling for Nutlor and Process     1       No     M1-211     Physical Activity for Children / Adults for Nutly for Children / Adults for Shift and Missions and Process     Process     1       No     M1-216     30-Day Readingsion Rate     Clinical Outcome     3     0       No     M1-241     or prison     Clinical Outcome     3     0       No     M1-255     Medication (ADD)     Clinical Outcome     3     0       Ves     MUL denominator with significant volume     M1-256     Initiation of Depression Treatment     Process     1     0       Ves     MUL denominator with significant volume     M1-260     Inters     Process     1     1       Ves     Significant volume     M1-261     Assignment of Fishors with Mental Process     1     1       Ves     MUL denominator with significant volume     M1-261     Assignment for Subtance Abuse Problems of significant volume     1     1     0		MUL descention to routh				
No     NI-211     Protein Address of Process     1     1       No     ML-211     Protein Address of Process     1     1       No     ML-211     BRA Adjusted Behavioral Health/ Substance Abuse     Clinical Outcome     3     0       No     ML-211     BRA Adjusted Behavioral Health/ Substance Abuse     Clinical Outcome     3     0       No     ML-241     Operase in mental health admissions and readmission to criminal justice settings such as jalls     Clinical Outcome     3     0       No     ML-241     Operase in mental health admissions and readmission such as jalls     Clinical Outcome     3     0       Ves     NUL denominator with significant volume     ML-255     Initiation of Depression Treatment     Process     1     0       Ves     MLU denominator with significant volume     ML-257     Care Planning for Dual Disposis     Process     1     0       Ves     MLU denominator with significant volume     ML-260     Infination of Depression Treatment     Process     1     1       Ves     MLU denominator with significant volume     ML-260     Infination Care Physician to Subtance Abuse Problems of significant volume     1     1       Ves     MLU denominator with significant volume     ML-261     Psychatric Patients     Process     1     1       Ves	No			Weight Assessment and Counseling for Nutrition and		
No     M1-216     3D-Day Readmission Rate     Clinical Outcome     3     0       No     M1-241     Operation Rate     Clinical Outcome     3     0       No     M100 denominator with significant volume     M1-255     Medication (ADD)     Clinical Outcome     3     0       Yes     M100 denominator with significant volume     M1-256     Initiation of Depression Treatment     Process     1     0       Yes     M100 denominator with significant volume     M1-257     Care Planning for Dulpionosi     Process     1     0       Yes     Significant volume     M1-259     with Schizophrenia     Process     1     0       Yes     Significant volume     M1-261     Annual Physical Exam for Substance Abuse Problems of significant volume     M1-261     Assessment for Substance Abuse Problems of significant volume     M1-261     Assessment for Substance Abuse Problems of significant volume     M1-261     Assessment for Phychosocial Issues of Phychiatric significant volume     M1-261     Assessment for Phychosocial Issue of Phychiatric significant volume     M1-261		Signing and volume	M1-211		Process	1 1
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No     and and set of the set	NO	significant volume	M1-216	30-Day Readmission Rate	Clinical Outcome	3 0
No         In-241         or prisons         Clinical Outcome         3         0           No         M1-261         or prisons         Clinical Outcome         3         0           Yes         MUU denominator with significant volume         M1-255         Medication (ADD)         Clinical Outcome         3         0           Yes         MUU denominator with significant volume         M1-257         Care Planning for Dual Diagnosis         Process         1         0           Yes         MUU denominator with significant volume         M1-259         with Schizophrenia         Process         1         0           Yes         MUU denominator with significant volume         M1-250         Care Planning for Dual Diagnosis         Process         1         0           Yes         MUU denominator with significant volume         M1-260         Illness         Process         1         0           Yes         significant volume         M1-261         Psychiatric Patients         Process         1         1           Yes         Significant volume         M1-262         Assessment for Subsace Abuse Problems of significant volume         Process         1         0           Yes         MUU denominator with significant volume         M1-262         Assessment for Psychosocial Is				Decrease in mental health admissions and		
No     Follow-up Care for Children Prescribed ADHD     Clinical Outcome     S     0       No     M1-255     Medication (ADD)     Clinical Outcome     3     0       Yes     MLU denominator with significant volume     M1-256     Initiation of Depression Treatment     Process     1     0       Yes     MLU denominator with significant volume     M1-257     Care Planning for Dual Diagnosis     Process     1     0       Yes     MLU denominator with significant volume     M1-257     Care Planning for Dual Diagnosis     Process     1     0       Yes     MLU denominator with significant volume     M1-257     Care Planning for Dual Diagnosis     Process     1     0       Yes     MLU denominator with significant volume     M1-250     Care Planning for Dual Diagnosis     Process     1     0       Yes     MLU denominator with significant volume     M1-260     Ullumes     Process     1     1       Yes     significant volume     M1-261     Psychiatric Patients     Process     1     0       Yes     MLU denominator with significant volume     M1-262     Assessment for Psychosocial Issue of Psychiatric     Process     1     0       Yes     MLU denominator with significant volume     M1-264     Vocational Rehabilitation for Schizophrenia     Process	No			readmissions to criminal justice settings such as jails		
NoMILU denominator with significant volumeMedication (ADD)Clinical Outcome30YesMLU denominator with significant volumeM1-256initiation of Depression TreatmentProcess10YesMLU denominator with significant volumeM1-257Care Planning for Dual Diagnosis ProcessProcess10YesMLU denominator with significant volumeM1-257Care Planning for Dual Diagnosis ProcessProcess10YesMLU denominator with significant volumeM1-260Innexe Process100YesMLU denominator with significant volumeM1-261Process111YesMLU denominator with significant volumeM1-262Assessment for Substance Abuse Problems of significant volume100YesMLU denominator with significant volumeM1-262Assessment of Risk to Self/ OthersProcess10YesMLU denominator with significant volumeM1-262Assessment of Risk to Self / OthersProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLU denominator with significant volumeM1-266With SchizophreniaProcess11YesMLU denominator with significant volumeM1-266With SchizophreniaProcess11YesMLU denominator with significant volumeM1-266Wit		Significant volume	M1-241	or prisons	Clinical Outcome	3 0
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Yes     significant volume     M1-256     Initiation of Depression Treatment     process     1     0       Yes     significant volume     M1-257     Care Planning for Dual Diagnosis     Process     1     0       Yes     MUU denominator with significant volume     M1-259     Assignment of Primary Care Physician to Individuals with Schkophrenia     Process     1     0       Yes     MUU denominator with significant volume     M1-259     M1-259     Assignment of Primary Care Physician to Individuals with Schkophrenia     Process     1     0       Yes     MUU denominator with significant volume     M1-260     Illness     Process     1     1       Yes     MUU denominator with significant volume     M1-261     Psychiatric Patients     Process     1     1       Yes     MUU denominator with significant volume     M1-262     Assessment for Substance Abuse Problems of significant volume     Process     1     0       Yes     MUU denominator with significant volume     M1-263     Process     1     0       Yes     MUU denominator with significant volume     M1-264     Vocational Rehabilitation for Schizophrenia     Process     1     0       Yes     MUU denominator with significant volume     M1-265     Schizophrenia     Process     1     0       Yes	NO	significant volume	M1-255	Medication (ADD)	Clinical Outcome	3 0
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Significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLIU denominator with significant volumeM1-265SchizophreniaProcess11YesMLIU denominator with significant volumeIndependent Living Skills Assessment for IndividualsProcess11NoMLIU denominator with significant volumeM1-266with SchizophreniaProcess10NoMLIU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLIU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeM1-287Documentation of Current Medications in the Medical RecordProcess11YesMLIU denominator with significant volumeM1-305Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11	Vaa	MLIU denominator with				
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Significant volumeM1-265SchizophreniaProcess11YesMLIU denominator with significant volumeM1-266Independent Living Skills Assessment for Individuals with SchizophreniaProcess10NoMLIU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLIU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLIU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeM1-287Documentation of Current Medications in the Medical RecordProcess11YesMLIU denominator with significant volumeM1-305Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11	Vaa	MLIU denominator with		Housing Assessment for Individuals with		
Yessignificant volumeM1-266with SchizophreniaProcess10NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLIU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeM1-287Documentation of Current Medications in the Medical RecordProcess11YesMLIU denominator with significant volumeM1-287Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11	res		M1-265		Process	1 1
Significant volumeM1-266with SchizophreniaProcess10NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-305Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11	Vec	MLIU denominator with		Independent Living Skills Assessment for Individuals		
Nosignificant volumeM1-280Chlamydia Screening in Women (CHL)Process1NoMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-286Decumentation of Current Medications in the Medical RecordProcess1YesMLU denominator with significant volumeM1-287Documentation of Current Medications in the Medical RecordProcess1YesMLU denominator with significant volumeM1-287Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process1	fes	significant volume	M1-266	with Schizophrenia	Process	1 0
Significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeM1-287Documentation of Current Medications in the Medical RecordProcess11YesMLIU denominator with significant volumeM1-287Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11	No	MLIU denominator with				
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Significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeM1-287Documentation of Current Medications in the Medical RecordProcess11YesMLIU denominator with significant volumeM1-287Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11	No	MLIU denominator with				
Yes     significant volume     M1-287     Medical Record     Process     1       Yes     MLIU denominator with significant volume     M1-305     Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)     Process     1	NO	significant volume	M1-286	Depression Remission at Six Months	Clinical Outcome	3 1
Significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeChild and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11	No-	MLIU denominator with		Documentation of Current Medications in the		
Yessignificant volumeM1-305(MDD): Suicide Risk Assessment (SRA-CH)Process11	Yes	significant volume	M1-287		Process	1 1
significant volume M1-305 (MDD): Suicide Risk Assessment (SRA-CH) Process 1 1 1	N	MLIU denominator with		Child and Adolescent Major Depressive Disorder		
	Yes	significant volume	M1-305	(MDD): Suicide Risk Assessment (SRA-CH)	Process	1 1
Will u denominator with Use of First-Line Psychosocial Care for Children and		MLIU denominator with		Use of First-Line Psychosocial Care for Children and		
No significant volume M1-306 Adolescents on Antipsychotics (APP-CH)* Process 1 0	No		M1-306		Process	1 0

N	MLIU denominator with		Preventive Care and Screening: Unhealthy Alcohol		
Yes	significant volume	M1-317	Use: Screening & Brief Counseling	Process	1 1
Vec	MLIU denominator with		Adult Major Depressive Disorder (MDD): Suicide Risk		
Yes	significant volume	M1-319	Assessment (eMeasure)	Process	1 1
			Alcohol & Other Drug Use Disorder Treatment		
No	MLIU denominator with		Provided or Offered at Discharge SUB-3 / Alcohol		
	significant volume		and Other Drug Use Disorder Treatment at		
		M1-339	Discharge SUB-3a	Process	1 1
			Substance use disorders: Percentage of patients		
			aged 18 years and older with a diagnosis of current		
Vac	MLIU denominator with		opioid addiction who were counseled regarding		
Yes	significant volume		psychosocial AND pharmacologic treatment options		
			for opioid addiction within the 12 month reporting		
		M1-340	period	Process	1 1
			Substance use disorders: Percentage of patients		
			aged 18 years and older with a diagnosis of current		
Yes	MLIU denominator with		alcohol dependence who were counseled regarding		
res	significant volume		psychosocial AND pharmacologic treatment options		
			for alcohol dependence within the 12 month		
		M1-341	reporting period	Process	1 1
Yes	MLIU denominator with		Time to Initial Evaluation: Evaluation within 10		
Tes	significant volume	M1-342	Business Days	Process	1 0
Yes	MLIU denominator with		Assessment of Functional Status or QoL (Modified		
Tes	significant volume	M1-385	from NQF# 0260/2624)	Quality of Life	1 0
Yes	MLIU denominator with		Improvement in Functional Status or QoL (Modified		
	significant volume	M1-386	from PQRS #435)	Quality of Life	1 0
	MLIU denominator with				
No			Reduce Emergency Department visits for Behavioral		
		M1-387	Health and Substance Abuse (Reported as two rates)	Clinical Outcome	3 1
Yes	MLIU denominator with				
	significant volume	M1-390	Time to Initial Evaluation: Mean Days to Evaluation	Process	1 0
No	MLIU denominator with		Tobacco Use and Help with Quitting Among		
	significant volume	M1-400	Adolescents	Process	1 1
Yes	MLIU denominator with		Bipolar Disorder and Major Depression: Appraisal for		
Tes	significant volume	M1-405	alcohol or chemical substance use	Process	1 1

Total overall selected points:

40

Are you finished making your selections?

Yes

#### DY7-8 Provider RHP Plan Update Template - Category C Additional Details

Progress Tracker

Section 1: Measure Exemption Requests and Measure Setting System Components

Complete

#### 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, 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.

				Baseline Measurement	Requesting a shorter or delayed		Requesting a baseline numerator of
Bundle-Measure ID	Measure Name			Period	measurement period?	Requesting a reporting milestone exemption?	zero?
M1-105 Requested Baseline	Cessation Intervention 2017 - 31, 20			CY2017: January 1, 2017 - December 31, 2017 Please enter an	Requesting a shorter baseline measurement period We had to work with our clinical staff and IT to	No o create a way to create a way to document this activity into our E.H.R. and th	No en had to work
Measurement Period Start Date	7/1/2017	Measurement Period End Date	12/31/2017	explanation for this request	this with our IT department to pull the entered data from our E.H.R. into a data-warehouse for reporting baseline and tracking of		
M1-124	Medication Reconcil	iation Post-Discharge		CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline		
Requested Baseline Measurement Period Start Date	10/1/2017	Requested Baseline Measurement Period End Date	3/31/2018	Please enter an explanation for this request	department to pull the entered data from our E H P, into a data-warehouse for reporting baseline and tracking of performance		
M1-146	Screening for Clinica	l Depression and Follow-	Up Plan (CDF-AD)	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	9/1/2017	Requested Baseline Measurement Period End Date	2/28/2018	Please enter an explanation for this request	department to pull the entered data from our	o create a way to document this activity into our E.H.R. and then had to work E.H.R. into a data-warehouse for reporting baseline and tracking of performa Clinical Depression and the COLUMBIA as our follow-up requirement for this n	nce. We
M1-147	Preventive Care and Screening and Follov		ndex (BMI)	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	3/31/2018	Please enter an explanation for this request	department to pull the entered data from our	o create a way to document this activity into our E.H.R. and then had to work E.H.R. into a data-warehouse for reporting baseline and tracking of performa ntation and training to make sure the follow-up documentation was adequate	nce. This also
M1-160	Follow-Up After Hos	pitalization for Mental III	Iness	CY2017: January 1, 2017 - December 31, 2017	No	No	No

Bundle-Measure ID	Measure Name			Period	Requesting a shorter or delayed measurement period?	Requesting a reporting milestone exemption?	Requesting a baseline numerator of zero?
M1-210	Preventive Care an Pressure and Follov	d Screening: Screening for w-Up Documented	r High Blood	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	Νο	No
Requested Baseline Measurement Period Start Date	10/1/2017	Requested Baseline Measurement Period End Date	3/31/2018	Please enter an explanation for this request	We had to work with our clinical staff and IT to create a way to document this activity into our E.H.R. and then had to work with our department to pull the entered data from our E.H.R. into a data-warehouse for reporting baseline and tracking of performance. The required our changing the physicians documentation and training to make sure the follow-up documentation was adequately added to the physicians document to be added to the physicians document to be added to the physicians document.		
M1-256	Initiation of Depres	ssion Treatment		CY2017: January 1, 2017 - December 31, 2017	No	No	No
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	Requested Baseline         Please enter an           7/1/2017         Measurement Period         12/31/2017         explanation for					o create a way to document this activity into our E.H.R. and then had t E.H.R. into a data-warehouse for reporting baseline and tracking of pe	
Date	End Date request				department to pair the entered data from our	E.m.n. into a data-warehouse for reporting baseline and tracking of pe	chormanee.
M1-259	Assignment of Prim Schizophrenia	nary Care Physician to Indi	ividuals with	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	9/1/2017	Requested Baseline Measurement Period End Date	2/28/2018	Please enter an explanation for this request		o create a way to document this activity into our E.H.R. and then had t E.H.R. into a data-warehouse for reporting baseline and tracking of pe	
M1-260	Annual Physical Exa	am for Persons with Ment	al Illness	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	8/1/2017	Requested Baseline Measurement Period End Date	1/31/2018	Please enter an explanation for this request		o create a way to document this activity into our E.H.R. and then had t E.H.R. into a data-warehouse for reporting baseline and tracking of pe	
M1-261	Patients 2017 - December			CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	9/1/2017	Requested Baseline Measurement Period End Date	2/28/2018	Please enter an explanation for this request		o create a way to document this activity into our E.H.R. and then had t E.H.R. into a data-warehouse for reporting baseline and tracking of pe	
M1-262	Assessment of Risk	to Self/ Others		CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	9/1/2017	Requested Baseline Measurement Period End Date	2/28/2018	Please enter an explanation for this request		o create a way to document this activity into our E.H.R. and then had t E.H.R. into a data-warehouse for reporting baseline and tracking of pe	

							Requesting a
				Baseline			baseline
				Measurement	Requesting a shorter or delayed		numerator of
Bundle-Measure ID	Measure Name			Period	measurement period?	Requesting a reporting milestone exemption?	zero?
M1-263	Assessment for Psy	chosocial Issues of Psychi	atric Patients	CY2017: January 1,			
	,	,		2017 - December	Requesting a shorter and delayed baseline	No	No
				31, 2017	measurement period		
Requested Baseline		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	create a way to document this activity into our E.H.R. and then had to	work with our IT
Measurement Period Start	9/1/2017	Measurement Period	2/28/2018	explanation for this		E.H.R. into a data-warehouse for reporting baseline and tracking of per	
Date		End Date		request			
M1-264	Vocational Rehabil	itation for Schizophrenia		CY2017: January 1,			
				2017 - December	No	No	No
				31, 2017			
M1-265	Housing Assessmer	nt for Individuals with Sch	izophrenia	CY2017: January 1,			
	0			2017 - December	Requesting a shorter baseline measurement	No	No
				31, 2017	period		
Requested Baseline		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	create a way to document this activity into our E.H.R. and then had to	work with our IT
Measurement Period Start	7/1/2017	Measurement Period	12/31/2017	explanation for this		E.H.R. into a data-warehouse for reporting baseline and tracking of per	
Date		End Date	,,	request			
M1-266	Independent Living	g Skills Assessment for Ind	ividuals with	CY2017: January 1,			
	Schizophrenia	,		2017 - December	No	No	No
	o on 20 pm on a			31, 2017			
M1-287	Documentation of	Current Medications in th	e Medical Record	CY2017: January 1,			
				2017 - December	Requesting a shorter and delayed baseline	No	No
				31, 2017	measurement period		
Requested Baseline		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	create a way to document this activity into our E.H.R. and then had to	work with our IT
Measurement Period Start	10/1/2017	Measurement Period	3/31/2018	explanation for this		E.H.R. into a data-warehouse for reporting baseline and tracking of per	
Date		End Date		request	work with nursing staff on their documentatio		
M1-305	Child and Adolesce	ent Major Depressive Diso	rder (MDD):	CY2017: January 1,			
	Suicide Risk Assess			2017 - December	Requesting a shorter and delayed baseline	No	No
				31. 2017	measurement period		
Requested Baseline		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	create a way to document this activity into our E.H.R. and then had to	work with our IT
Measurement Period Start	9/1/2017	Measurement Period	2/28/2018	explanation for this		E.H.R. into a data-warehouse for reporting baseline and tracking of per	
Date		End Date		request	using the COLUMBIA for the assessment of for		
M1-317	Preventive Care an	d Screening: Unhealthy A	Icohol Use:	CY2017: January 1,			
	Screening & Brief C	· · ·		2017 - December	Requesting a shorter baseline measurement	No	No
	0	0		31, 2017	period		
Requested Baseline		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	create a way to document this activity into our E.H.R. and then had to	work with our IT
Measurement Period Start	7/1/2017	Measurement Period	12/31/2017	explanation for this		E.H.R. into a data-warehouse for reporting baseline and tracking of per	
Date		End Date		request	using the AUDIT-C as our screening for this me		
M1-319	Adult Major Depre	ssive Disorder (MDD): Sui	cide Risk	CY2017: January 1,			
	Assessment (eMea			2017 - December	Requesting a shorter and delayed baseline	No	No
		,		31. 2017	measurement period		
		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	o create a way to document this activity into our E.H.R. and then had to	work with our IT
Requested Baseline							
Requested Baseline Measurement Period Start	9/1/2017	Measurement Period	2/28/2018	explanation for this		E.H.R. into a data-warehouse for reporting baseline and tracking of per	

				Baseline Measurement	Requesting a shorter or delayed		Requesting a baseline numerator of
Bundle-Measure ID	Measure Name			Period	measurement period?	Requesting a reporting milestone exemption?	zero?
M1-340	and older with a dia were counseled reg	rders: Percentage of patie agnosis of current opioid arding psychosocial AND for opioid addiction withi	addiction who pharmacologic	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	Νο	No
Requested Baseline		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	create a way to document this activity into our E.H.R. and then had to work	with our IT
Measurement Period Start	8/1/2017	Measurement Period	1/31/2018	explanation for this	department to pull the entered data from our	E.H.R. into a data-warehouse for reporting baseline and tracking of performa	nce. This
Date		End Date		request	measure required development of an education	onal handout on treatement options approved by our Medical Director to pro	vide to
M1-341	and older with a dia were counseled reg	rders: Percentage of patie agnosis of current alcoho garding psychosocial AND for alcohol dependence w eriod	l dependence who pharmacologic	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	department to pull the entered data from our	o create a way to document this activity into our E.H.R. and then had to work E.H.R. into a data-warehouse for reporting baseline and tracking of perform onal handout on treatement options approved by our Medical Director to pro	ance. This
M1-342	Time to Initial Evalu	uation: Evaluation within	10 Business Days	CY2017: January 1, 2017 - December 31, 2017	No	No	No
M1-385	Assessment of Fund 0260/2624)	ctional Status or QoL (Mo	dified from NQF#	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	3/31/2018	Please enter an explanation for this request	department to pull the entered data from our	o create a way to document this activity into our E.H.R. and then had to work E.H.R. into a data-warehouse for reporting baseline and tracking of performa 0, which was obtained and secure additional training from The National Cou	ance. We also had
M1-386	Improvement in Fu #435)	nctional Status or QoL (M	lodified from PQRS	CY2017: January 1, 2017 - December 31, 2017	Requesting a shorter and delayed baseline measurement period	No	No
Requested Baseline Measurement Period Start Date	4/1/2018	Requested Baseline Measurement Period End Date	9/30/2018	Please enter an explanation for this request	department to pull the entered data from our to get approval from HHSC to utilize the DLA-2	o create a way to document this activity into our E.H.R. and then had to work E.H.R. into a data-warehouse for reporting baseline and tracking of performa 0, which was obtained and secure additional training from The National Cou re requires atleast 2 DLA-20's to compare for improvement, so since M1-385 implemented effective April 2018.	ance. We also had ncil on the DLA-

							Requesting a		
				Baseline			baseline		
				Measurement	Requesting a shorter or delayed		numerator of		
Bundle-Measure ID	Measure Name			Period	measurement period?	Requesting a reporting milestone exemption?	zero?		
M1-390	Time to Initial Evalua	ation: Mean Days to Eval	uation	CY2017: January 1,					
				2017 - December					
			31, 2017			No			
					No	No			
M1-405	Bipolar Disorder and	l Major Depression: Appr	raisal for alcohol or	CY2017: January 1,	Requesting a shorter baseline measurement				
	chemical substance	use		2017 - December		No	No		
				31, 2017	period				
Requested Baseline		Requested Baseline		Please enter an	We had to work with our clinical staff and IT to	create a way to document this activity into our E.H.R. and then had to work	with our IT		
Measurement Period Start	7/1/2017	Measurement Period	12/31/2017	explanation for this	is department to pull the entered data from our E.H.R. into a data-warehouse for reporting baseline and tracking of performance. We are				
Date		End Date		request	using the AUDIT-C as the alcohol screening for this measure.				

Progress Tracker		
Section 1: Measure Bundle/Measure Valuation	on Complete	]
Performing Provider Information		
RHP:	3	
TPI and Performing Provider Name:	113180703 - The Harris Center for Mental Health and IDI	)
Performing Provider Type:	Community Mental Health Center (CMHC)	
Ownership:	Non-State Owned Public	
If regional hospital participation requirement	Category C valuation in DY7:	\$46,157,857.77
is met	Category C valuation in DY8:	\$62,942,533.32
If regional hospital participation requirement	Category C valuation in DY7:	\$54,550,195.54
is <u>not</u> met	Category C valuation in DY8:	\$71,334,871.10

#### Section 1: Measure Bundle/Measure Valuation

#### Valuation for Selected Measures - Community Mental Health Centers

						If regional private hospital pa	rticipation requirement is met	If regional private hospital partic	ipation requirement is <u>not</u> met
Bundle- Measure ID	Denominator Volume	Points	Desired Valuation %	Minimum Valuation % of Total	Maximum Valuation % of Total	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	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-124	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-146	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-147	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-160	MLIU denominator with significant volume	3	4.63%	2.77%	4.63%	\$2,137,108.81	\$2,914,239.29	\$2,525,674.05	\$3,302,804.53
M1-210	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-256	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-257	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72

M1-259	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-260	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-261	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-262	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-263	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-264	MLIU denominator with significant volume	1	3.56%	2.77%	3.71%	\$1,643,219.74	\$2,240,754.19	\$1,941,986.96	\$2,539,521.41
M1-265	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-266	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-287	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-305	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-317	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-319	MLIU denominator with significant volume	2	2.77%	2.77%	3.71%	\$1,278,572.66	\$1,743,508.17	\$1,511,040.42	\$1,975,975.93
M1-340	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-341	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-342	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-385	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-386	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72

M1-390	MLIU denominator with significant volume	1	3.71%	2.77%	3.71%	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-405	MLIU denominator with significant volume	2	3.71%	2.77%	3.71%	\$1,712,456.60	\$2,335,167.90	\$2,023,812.36	\$2,646,523.67
Total	N/A	40	100.00%	N/A	N/A	\$46,157,857.77	\$62,942,533.32	\$54,550,195.54	\$71,334,871.10
	Difference between selected percent and 100%:								

Your valuation allocations add to 100%.

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

Yes

# 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

### **Performing Provider Information**

### RHP:

TPI and Performing Provider Name: Performing Provider Type: Ownership: 113180703 - The Harris Center for Mental Health and IDD Community Mental Health Center (CMHC) 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/	Enter a description for continuation
Differiojectio	Project Option	Froject Summary	Continuing	(optional)
RHP 3_113180703.1.1	1.12.2	Place one new treatment team which can serve about 500 consumers on an	Completed in DY2-	
		outpatient basis in the Northwest region of the city.	6	
RHP 3_113180703.1.10	1.9.2	Establish behavioral healthcare clinic with the Lighthouse facility in order to		
		provide mental health treatment capacity for persons with visual impairment.	Completed in DV2	
		Project will develop a specialized behavioral health team consisting of mental	Completed in DY2- 6	
		health, physical health, case management services, wraparound supports, and	U	
		adaptive technology		
RHP 3_113180703.1.11	1.13.1	Develop a 24-bed behavioral health crisis stabilization service as an alternative to	Completed in DY2-	
		Hospitalization.	6	
RHP 3_113180703.1.12	1.12.2	Increase outpatient capacity by approximately 400 children and adolescents by		
		implementing 1.5 treatment teams to provide cognitive-behavioral therapy,	Completed in DY2-	
		psychosocial skills training, consultation for school staff and pediatric staff, family	6	
		interventions, psychiatric assessment, medication management and case-	0	
		management as needed.		

Complete Complete Complete

RHP 3_113180703.1.3	1.9.2	Expand capacity for the current specialized behavioral health services provided to		
		people with Intellectual and Developmental Disabilities (IDD) and/or Autism	Completed in DY2	
		Spectrum Disorders (ASD) and co-occurring mental illness by adding additional	6	
		staff.		
RHP 3_113180703.1.4	1.12.2	Place one new treatment team which can serve about 500 consumers on an	Completed in DY2-	
		outpatient basis in the Northeast region of the city.	6	
RHP 3_113180703.1.5	1.12.2	Place one new treatment team which can serve about 500 consumers on an	Completed in DY2	
		outpatient basis in the Southwest region of the city.	6	
RHP 3_113180703.1.6	1.12.2	Place one new treatment team which can serve about 500 consumers on an	Completed in DY2	
		outpatient basis in the Southeast region of the city.	6	
RHP 3_113180703.1.7	1.12.2	Place one new treatment team in the region of the city in the most need of	Completed in DY2	
		additional services. Each treatment team can serve roughly 500 consumers.	6	
RHP 3_113180703.1.8	1.13.1	The Interim Care Clinic (ICC) is designed to provide initial evaluation and treatment	Completed in DY2	
		in a single visit. The clinic will include extended evening hours and availability 7	completed in D12	
		days a week.	0	
RHP 3_113180703.1.9	1.12.2	Implement the ICCD Clubhouse Model, which is a day treatment program for		
		psychosocial rehabilitation of adults diagnosed with a serious and persistent,	Completed in DY2	
		chronically disabling mental health problem. We will be contracting St. Joseph's	completed in D12	
		House to provide psychosocial rehabilitative services.	O	
RHP 3_113180703.2.1	2.15.1	Design, implement and evaluate a care management program that integrates	Completed in DY2-	
		primary and behavioral health care services.	6	
RHP 3_113180703.2.2	2.13.1	Substance abuse treatment services will be integrated and embedded into existing	Completed in DY2-	
		MHMRA mental health treatment services.	6	
RHP 3_113180703.2.3	2.17.1	The HCPC transition program will hire licensed MH professionals to engage pts pre-	Completed in DY2	
		discharge from HCPC and assist with successfully linking them to community MH		
		treatment	6	

RHP 3_113180703.2.4	2.13.1	Expand the Chronic Consumer Stabilization Initiative (CSSI), an interagency collaboration with the Houston Police Department (HPD). Staff members provide intensive case management and work directly with individuals, family members, health providers, and/or staff at living facilities. MHMRA provides family and community education about mental illness, outreach and engagement, intensive case management, Mental Health First Aid (an evidence-based mental health awareness program for community members), navigation to address physical health, housing and other social needs, crisis intervention and advocacy typically for several months, which is longer than other crisis diversion programs.	Completed in DY2- 6	
RHP 3_113180703.2.5	2.13.1	Expand the current Mobile Crisis Outreach Team, which provides mobile crisis outreach and follow-up to adults and children who are unable or unwilling to access traditional psychiatric services. When a consumer initiates an MCOT intervention, two trained MOCT staff responds to the consumers' needs, meeting them in a variety of settings.	Completed in DY2- 6	
RHP 3_113180703.2.7	2.13.1	Expansion of three additional team of the Crisis Intervention Response Team, which is a program that partners law enforcement officers who are certified in crisis intervention training with licensed master-level clinicians to respond to law enforcement calls.	Completed in DY2- 6	
RHP 3_113180703.2.8	2.13.1	Develop wrap-around and in-home services for high risk consumers with Intellectual and Developmental Disabilities and Autism Spectrum Disorders and their families to avoid utilization of intensive, costlier services.	Completed in DY2- 6	
RHP 3_113180703.2.9	2.17.1	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.	Completed in DY2- 6	
RHP 3_113180703.1.100	1.13.1	MHMRA will expand its current co-occurring disorders program from a 30 bed to an ultimate 60 bed capacity. In this program, MHMRA partners with licensed chemical dependency residential treatment providers to offer up to 90 days of integrated co-occurring disorders care. Current research indicates this is a best practice and requires a wide range of collaboration between substance-use and mental health arenas. Integrated treatment providers have a broad knowledge base and are equipped to treat individuals with co-occurring disorders.	Completed in DY2- 6	

RHP 3_113180703.1.101	1.11.2	MHMRA proposes to develop a behavioral health crisis stabilization service as an alternative to hospitalization. The MHMRA HelpLine will make follow-up calls and texts to clients who have been released from Psychiatric Emergency Services (PES), Mobile Crisis Outreach Team (MCOT), HCPC and Chronic Consumer Stabilization Initiative (CCSI) to ensure they are following through on their discharge plans, taking medications and getting connected to the next level of care.	Completed in DY2- 6	
RHP 3_113180703.2.101	2.13.1	MHMRA proposes to expand the current Mobile Crisis Outreach Team (MCOT), which provides mobile crisis outreach and follow-up to adults and children who are unable or unwilling to access traditional psychiatric services. When a consumer initiates an MCOT intervention, two trained MCOT staff responds to the consumers' needs, meeting them in a variety of settings including in the consumer's community, home, or school and provide assessment, intervention, education, and linkage to other services to address identified needs.	Completed in DY2- 6	
RHP 3_113180703.2.102	2.13.1	The Critical Time Intervention Program (CTI) is a nine-month case management model emphasizing developing community linkages and enhancing treatment engagement for mentally ill individuals undergoing transition.	Completed in DY2- 6	
RHP 3_113180703.2.103	2.13.1	Provide an intervention for a targeted behavioral health population to prevent unnecessary use of services in a specified setting: Preventative mental health care for foster youth.	Completed in DY2- 6	
RHP 3_113180703.2.104	2.13.1	Implementation of an electronic system that will enable juvenile service providers to work together in a coordinated approach guided by mutually identified goals, shared access to information, and a collaborative treatment and service plan.	Completed in DY2- 6	
RHP 3_113180703.2.105	2.13.1	The proposed project will increase local treatment capacity by adding 8 new residential detoxification beds, with 4 of those beds available to women accompanied by their children. Average length of stay will range from 5-14 days depending on type of substance used and duration of use, severity of co-occurring mental health issues, and pregnancy/health status.	Completed in DY2- 6	

# Section 2: Core Activities

Please enter your organization's number of Core Activities:

1) Please select the grouping for this Core Activity.



Availability of Appropriate Levels of Behavioral Health Care Services

a) Please select the name of this Core Activity.

Provision of care aligned with Certified Community Behavioral Health Clinic (CCBHC) model

### b) Please enter a description of this Core Activity

The Harris Center has selected this quality measure core activity to better align the agency with the Certified Community Behavioral Health Clinic (CCBHC) model for the development of an integrated service delivery framework providing a comprehensive range of mental health and substance use disorder services. These integrated services are to be provided in a person-centered, trauma-informed and recovery-oriented approach which serves the whole person with an emphasis on quality, access, and a holistic service approach. The Harris Center will review the standards required to achieve this certification, which expand beyond measures outlined in Waiver 1.0.

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

Review of CCBHC Measures to identify which measures need to be implemented at the Harris Center for certification.

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

Post and hire a Director of CCBHC certification to lead our organization through certification preparation and the certification process.

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

Determine DSRIP measures that have been implemented that meet the CCBHC requirements.

C) Please list the third Change Idea for the above Secondary Driver (optional).

Identify the additional CCBHC measure that will need to be implemented.

D) Please list the fourth Change Idea for the above Secondary Driver (optional).

Work with program staff and IT to implement the additional measures to track performance.

E) Please list the fifth Change Idea for the above Secondary Driver (optional).

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

Make changes to clinical workflow and staffing patterns to implement additional screenings, assessments, or documentation to collect data for CCBHC certification.

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

Determine where in the clinical process data should be collected for each of the new CCBHC measures.

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

Work with IT to pull the collected data for tracking and reporting.

C) Please list the third Change Idea for the above Secondary Driver (optional).

iii) Please describe the third Secondary Driver for the above Core Activity (optional).

Submit an application for the CCBHC certification.

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

Complete a mock certification audit to determine any deficiencies that could impact certification approval.

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

Make identified changes or modifications as a result of the mock audit for any measures that did not pass the audit.

C) Please list the third Change Idea for the above Secondary Driver (optional).

iv) Please describe the fourth Secondary Driver for the above Core Activity (optional).

<sup>9</sup> 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.

M1-147	M1-160	M1-305	M1-319
M1-342	M1-105	M1-146	M1-287
M1-317			

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

This particular measure bundle is essential to this core activity, as CCBHCs are required to increase access to care and ensure an integrated approach to treating substance, mental and primary healthcare needs through care coordination, screenings, referrals and collection of key health indicators. As well as ensuring a initial evaluation within 10-days and a 7 and 30 day post hospital follow-up by a licensed practitioner. There were 3 measures identified for this Core Activity that the spreadsheet failed to show for me to select which were M1-340, M1-341, and M1-390. The following Waiver 1.0 projects will participate in this Core Activity: 113180703.1.1; 113180703.1.4; 113180703.1.5; 113180703.1.6; 113180703.1.7; 113180703.1.12; 113180703.2.1; 113180703.2.2; 113180703.2.3; 113180703.1.8; 113180703.1.1; 113180703.2.4; 113180703.2.6; 113180703.2.10; 113180703.2.10; 113180703.1.3; 113180703.2.8; 113180703.2.5; 113180703.2.7; 113180703.1.100; 113180703.2.101; 113180703.1.3; 113180703.2.8; 113180703.2.2 a p

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

#### 2) Please select the grouping for this Core Activity.

Availability of Appropriate Levels of Behavioral Health Care Services

a) Please select the name of this Core Activity.

Utilization of telehealth/telemedicine in delivering behavioral services

b) Please enter a description of this Core Activity

Due to the shortage of psychiatrists in Texas and the high number of Medicaid and Low-Income Uninsured individuals seeking mental health treatment, we will be looking at utilizing telemedicine as a resource to utilize. For many psychiatrists the Medicaid reimbursement rate for psychiatric services is so low and they set a limit of how many individuals on Medicaid that they will treat making The Harris Center the only option for individuals to choose for their psychiatric treatment. Access to telemedicine in our 24/7 crisis services programs is an optimal use of this type of

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

Secure telemedicine psychiatric services potentially for both our outpatient and some of our crisis service programs.

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

Response for Proposal (RFP) posted to seek telemedicine psychiatry providers interested in contracting to provide the identified services.

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).

Set-up a system internally to accommodate telemedicine services per the Medicaid guidelines.

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

Modify our current billing codes to support billing Medicaid and insurances for providing the telemedicine services.

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

Modify our current staffing workflow to accommodate Medicaid telemedicine requirements.

C) Please list the third Change Idea for the above Secondary Driver (optional).

Identify which clinics and/or crisis services the telemedicine services will be expanded to.

D) Please list the fourth Change Idea for the above Secondary Driver (optional).

iii) Please describe the third Secondary Driver for the above Core Activity (optional).

Set-up telemedicine equipment in the clinics and/or crisis services for the telemedicine services.

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

Identify which site location and offices will be used for telemedicine services.

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

Purchase and install the necessary telemedicine equipment to activate the service.

C) Please list the third Change Idea for the above Secondary Driver (optional).

iv) Please describe the fourth 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.

M1-124	M1-147	M1-160	M1-210
M1-256	M1-261	M1-262	M1-263
M1-264	M1-265	M1-305	M1-319
M1-342	M1-405	M1-105	M1-146
M1-266	M1-287	M1-317	M1-340
M1-341	M1-385	M1-386	M1-390

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

Access to telemedicine psychiatric time will allow us to assure that individuals receive an initial diagnosis within 10 days of contact. All new patients will receive an initial diagnostic evaluation from a licensed clinician. This initial evaluation will include assessments for risk of harm; substance and tobacco use; a psychosocial, vocational, housing, and independent living skills assessments. These assessments will be used to drive treatment. Additional access to psychiatrics via telemedicine will allow for follow-up contact with a prescriber within 7 days of discharge from a psychiatric hospital. Prior to seeing the doctor an individual will be evaluated by nursing staff for their BMI, high blood pressure, any medications post hospital discharge, as well as any over-

the-counter medications they are taking and entered this information in our Electronic Health Record for a physician to access. In addition the availability of telemedicine psychiatric services can ensure individuals whom otherwise would be on a waiting list for services would receive treatment and receive any services attributed to the measures. The following Waiver 1.0 projects will participate in this Core Activity: 113180703.1.1; 113180703.1.4; 113180703.1.5; 113180703.1.6; 113180703.1.7; 113180703.2.1; 113180703.1.1; 113180703.2.4; 113180703.2.5; 113180703.2.7; 113180703.1.100; 113180703.2.101; 113180703.1.3; 113180703.2.8; 113180703.2.9.

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

No

### 3) Please select the grouping for this Core Activity.

Availability of Appropriate Levels of Behavioral Health Care Services

a) Please select the name of this Core Activity.

Utilization of Care Management function that integrates primary and behavioral health needs of individuals

### b) Please enter a description of this Core Activity

Substantial research exists to support the benefits of co-locating or the integration of physical and behavioral health care services. According to the SAMHSA-HRSA Center for Integrated Care, benefits of integration include improving an individual's experience of care, improving the health of the general population, and reducing per capita healthcare costs. Significant gaps exist for individuals with severe mental illness, which contribute to higher rates of physical health conditions, shorter life expectancies and higher health care costs (SAMHSA). For these reasons, The Harris Center operates with two FQHC's in two of our Behavioral Health clinics to provide physical health services alongside our psychiatric services for individuals that we serve. We seek to strengthen this relationship and broaden primary healthcare partnerships at 2 additional clinics.

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

Expand primary care clinic services within two additional behavioral health clinics.

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

Facilitate primary care integration in the two additional clinics utilizing either an FQHC or hiring of a Primary Care Physician.

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

Identify space in two projected clinics to create an office for primary care services.

C) Please list the third Change Idea for the above Secondary Driver (optional).

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

Step up to the next SAMHSA Integration Model Level of Integrated Care.

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

Identify current SAMHSA Integration Model Level of Integrated Care in our current collaborative care project.

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

Work on the elements needed to move to the next Level of Integrated Care.

C) Please list the third Change Idea for the above Secondary Driver (optional).

iii) Please describe the third Secondary Driver for the above Core Activity (optional).

Promote a culture that values integrated physical and behavioral health care for the treatment of individuals with a mental illness.

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

Action plan to create and deploy a integrated physical health & behavioral health training to be completed at new employee orientation and annually for mental health providers.

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

iv) Please describe the fourth 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.

M1-147	M1-210	M1-259	M1-260
M1-287			

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

The integration of primary care and behavioral health services impacts many of the measures we have selected through providing preventative care and screenings and the coordination of needed follow-up care for

individuals we serve. The expansion of this measure beyond previous individuals served in the projects, means more individuals will benefit from this added service. The following Waiver 1.0 projects will participate in this Core Activity: 113180703.1.1; 113180703.1.4; 113180703.1.5; 113180703.1.6; 113180703.1.7; 113180703.2.1.

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



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

### **Progress Tracker**

Section 2: Verification

**Performing Provider Information** 

RHP:

TPI and Performing Provider Name: Performing Provider Type: Ownership: 113180703 - The Harris Center for Mental Health and IDD Community Mental Health Center (CMHC) Non-State Owned Public

If regional hospital participation	Category D valuation in DY7	\$12,588,506.66
requirement is met	Category D valuation in DY8	\$12,588,506.66
If regional hospital participation	Category D valuation in DY7	\$4,196,168.89
requirement is <u>not</u> met	Category D valuation in DY8	\$4,196,168.88

### 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	\$2,517,701.33	\$839,233.78
Crisis Follow up	\$2,517,701.33	\$839,233.78
Community Tenure (Adult and Child/Youth)	\$2,517,701.33	\$839,233.78
Reduction in Juvenile Justice Involvement	\$2,517,701.33	\$839,233.78
Adult Jail Diversion	\$2,517,701.34	\$839,233.77

# 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.

Complete

I understand

DV7-8 Provide	er RHP Plan Update Template - IGT Entry								
Progress T	acker								
Section 1: IGT			Complete Complete						
Section 2: IGT Section 3: Cer				-					
	Provider Information								
RHP:		3							
TPI and Perfor Performing Pr	ming Provider Name:	113180703 - The Harris Center for Community Mental Health Center							
Ownership:	ovider Type:	Non-State Owned Public	(CMHC)						
ownership.									
Section 1:	GT Entities								
In order to de	lete an <u>existing</u> IGT, delete the name of the IGT	from cell G21, G29, etc.							
IGT RHP	IGT Name		IGT TPI (if available)		IGT TIN Affiliation Number				
3	The Harris Center for Mental Health and IDD		113180703	17416039505023		100-13-0000-00127			
			0						
Contact #	Contact Name Jeanne Wallace	9401 Southwest Freeway	Street Address	City	Zip 77074	Email jeanne.wallace@theharriscenter.org	Phone Number 713-970-3971	Phone Extension	Lead Contact or Both Both
2	Alex Lim	9401 Southwest Freeway 9401 Southwest Freeway		Houston	77074	alex.lim@theharriscenter.org	(713) 970-3375		Both
3	Wayne Young	9401 Southwest Freeway		Houston	77074	wayne.young@theharriscenter.org	(713) 970-7160	1	Both
							(		
IGT RHP	IGT Name		IGT TPI (if available)		IGT TIN	Affiliation Number			
	<b>A N</b>		01 1 4 1 I	-		Email			<u> </u>
Contact #	Contact Name		Street Address	City	Zip	Email	Phone Number	Phone Extension	Lead Contact or Both
2									-
3									
	5	included in the RHP Plan and on the	DSRIP IGT Distribution List. A contact designated as "Both	" will be included in the RH	IP Plan, on the DSRIP IGT Dist	ribution List, and will be given access to the DSRIP Online	ne		
Reporting Syst	tem.								

#### Section 2: IGT Funding

						If regional private hospital	participation requirement is	If regional private hospital p	
						m	et	not	met
						Total Estimated DY7	Total Estimated DY8	Total Estimated DY7	Total Estimated DY8
	IGT Name	IGT TIN	IGT Affiliation #	DY7 % IGT Allocated	DY8 % IGT Allocated	Allocation (FMAP 56.88/IGT	Allocation (FMAP 57.32/IGT	Allocation (FMAP 56.88/IGT	Allocation (FMAP 57.32/IGT
						43.12)	42.68)	43.12)	42.68)
RHP Plan Update Submission	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%		\$7,237,552.10		\$7,237,552.10	
Category B	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$3,618,776.05	\$3,581,849.76	\$3,618,776.05	\$3,581,849.76
M1-105	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-124	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-146	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-147	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-160	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$921,521.32	\$1,243,797.33	\$1,089,070.65	\$1,409,636.97
M1-210	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-256	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-257	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-259	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-260	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-261	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-262	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-263	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-264	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$708,556.35	\$956,353.89	\$837,384.78	\$1,083,867.74
M1-265	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-266	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-287	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-305	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-317	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-319	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$551,320.53	\$744,129.29	\$651,560.63	\$843,346.53
M1-340	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-341	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32

M1-342	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-385	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-386	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-390	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.25	\$996,649.70	\$872,667.84	\$1,129,536.32
M1-405	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$738,411.29	\$996,649.66	\$872,667.89	\$1,129,536.30
Category D	The Harris Center for Mental Health and IDD	17416039505023	100-13-0000-00127	100.00%	100.00%	\$5,428,164.07	\$5,372,774.64	\$1,809,388.03	\$1,790,924.88
Total						\$36,187,760.49	\$35,818,497.63	\$36,187,760.49	\$35,818,497.63

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:	Alex Lim, CFO
IGT Organization:	The Harris Center for Mental Health and IDD
Date:	3/22/2018

### 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

#### **Performing Provider Information**

#### RHP:

TPI and Performing Provider Name:
Performing Provider Type:
Ownership:

3 113180703 - The Harris Center for Mental Health and IDD Community Mental Health Center (CMHC) Non-State Owned Public

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

	DY7-8 DSRIP Valuation Distribution						
	Valuation if regional private hos is n		/aluation if regional private hospital participation requirement is <u>no</u> met				
	DY7	DY8	DY7	DY8			
RHP Plan Update Submission	\$16,784,675.55	\$0.00	\$16,784,675.55	\$0.00			
Category A	\$0.00	\$0.00	\$0.00	\$0.00			
Category B	\$8,392,337.78	\$8,392,337.78	\$8,392,337.78	\$8,392,337.78			
Category C	\$46,157,857.77	\$62,942,533.32	\$54,550,195.54	\$71,334,871.10			
Category D	\$12,588,506.66	\$12,588,506.66	\$4,196,168.89	\$4,196,168.88			
Total	\$83,923,377.76	\$83,923,377.76	\$83,923,377.76	\$83,923,377.76			

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	36,867	42,504	86.74%
DY6	38,254	44,208	86.53%
DY7 Estimated	37,561	43,356	86.63%
DY8 Estimated	37,561	43,356	86.63%

No

Were DY7-8 maintenance goals based on DY5 or DY6 only?

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

						Valuation if region participation req		Valuation if region participation requi	
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	DY7 Valuation	DY8 Valuation	DY7 Valuation	DY8 Valuation
M1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-124	Medication Reconciliation Post-Discharge	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-146	Screening for Clinical Depression and Follow-Up Plan (CDF-AD)	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72

M1-160	Follow-Up After Hospitalization for Mental Illness	0	0	0	3	\$2,137,108.81	\$2,914,239.29	\$2,525,674.05	\$3,302,804.53
M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-256	Initiation of Depression Treatment	0	0	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-257	Care Planning for Dual Diagnosis	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-259	Assignment of Primary Care Physician to Individuals with Schizophrenia	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-260	Annual Physical Exam for Persons with Mental Illness	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-261	Assessment for Substance Abuse Problems of Psychiatric Patients	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-262	Assessment of Risk to Self/ Others	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-263	Assessment for Psychosocial Issues of Psychiatric Patients	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-264	Vocational Rehabilitation for Schizophrenia	0	0	0	1	\$1,643,219.74	\$2,240,754.19	\$1,941,986.96	\$2,539,521.41
M1-265	Housing Assessment for Individuals with Schizophrenia	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-266	Independent Living Skills Assessment for Individuals with Schizophrenia	0	0	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72

M1-287	Documentation of Current Medications in the Medical Record	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	0	1	0	2	\$1,278,572.66	\$1,743,508.17	\$1,511,040.42	\$1,975,975.93
M1-340	Substance use disorders: Percentage of patients aged 18 years and older with a diagnosis of current opioid addiction who were counseled regarding psychosocial AND pharmacologic treatment options for opioid addiction within the 12 month reporting period		1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72

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	0	1	0	2	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-342	Time to Initial Evaluation: Evaluation within 10 Business Days	0	0	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-385	Assessment of Functional Status or QoL (Modified from NQF# 0260/2624)	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-386	Improvement in Functional Status or QoL (Modified from PQRS #435)	0	1	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-390	Time to Initial Evaluation: Mean Days to Evaluation	0	0	0	1	\$1,712,456.52	\$2,335,167.99	\$2,023,812.25	\$2,646,523.72
M1-405	Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use	0	1	0	2	\$1,712,456.60	\$2,335,167.90	\$2,023,812.36	\$2,646,523.67
Total	N/A	0	21	0	40	\$46,157,857.77	\$62,942,533.32	\$54,550,195.54	\$71,334,871.10

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	
M1-124	Medication Reconciliation Post-Discharge	
M1-146	Screening for Clinical Depression and Follow-Up Plan (CDF-AD)	
M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	
M1-160	Follow-Up After Hospitalization for Mental Illness	
M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	
M1-256	Initiation of Depression Treatment	
M1-257	Care Planning for Dual Diagnosis	
M1-259	Assignment of Primary Care Physician to Individuals with Schizophrenia	
M1-260	Annual Physical Exam for Persons with Mental Illness	
M1-261	Assessment for Substance Abuse Problems of Psychiatric Patients	
M1-262	Assessment of Risk to Self/ Others	
M1-263	Assessment for Psychosocial Issues of Psychiatric Patients	
M1-264	Vocational Rehabilitation for Schizophrenia	
M1-265	Housing Assessment for Individuals with Schizophrenia	
M1-266	Independent Living Skills Assessment for Individuals with Schizophrenia	
M1-287	Documentation of Current Medications in the Medical Record	
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)	

M1-340	Substance use disorders: Percentage of patients aged 18 years and older with a diagnosis of current opioid addiction who were counseled regarding psychosocial AND pharmacologic treatment options for opioid addiction within the 12 month reporting period	
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	
M1-342	Time to Initial Evaluation: Evaluation within 10 Business Days	
M1-385	Assessment of Functional Status or QoL (Modified from NQF# 0260/2624)	
M1-386	Improvement in Functional Status or QoL (Modified from PQRS #435)	
M1-390	Time to Initial Evaluation: Mean Days to Evaluation	
M1-405	Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use	
M1-257	Care Planning for Dual Diagnosis	
M1-259	Assignment of Primary Care Physician to Individuals with Schizophrenia	
M1-260	Annual Physical Exam for Persons with Mental Illness	
M1-261	Assessment for Substance Abuse Problems of Psychiatric Patients	
M1-262	Assessment of Risk to Self/ Others	
M1-263	Assessment for Psychosocial Issues of Psychiatric Patients	
M1-264	Vocational Rehabilitation for Schizophrenia	
M1-265	Housing Assessment for Individuals with Schizophrenia	
M1-266	Independent Living Skills Assessment for Individuals with Schizophrenia	
M1-287	Documentation of Current Medications in the Medical Record	
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)	

M1-340	Substance use disorders: Percentage of patients aged 18 years and older with a diagnosis of current opioid addiction who were counseled regarding psychosocial AND pharmacologic treatment options for opioid addiction within the 12 month reporting period	
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	
M1-342	Time to Initial Evaluation: Evaluation within 10 Business Days	
M1-385	Assessment of Functional Status or QoL (Modified from NQF# 0260/2624)	
M1-386	Improvement in Functional Status or QoL (Modified from PQRS #435)	
M1-390	Time to Initial Evaluation: Mean Days to Evaluation	
M1-405	Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use	

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 <u>not</u> met)
Effective Crisis Response	\$2,517,701.33	\$839,233.78
Crisis Follow up	\$2,517,701.33	\$839,233.78
Community Tenure (Adult and Child/Youth)	\$2,517,701.33	\$839,233.78

Reduction in Juvenile Justice Involvement	\$2,517,701.33	\$839,233.78
Adult Jail Diversion	\$2,517,701.34	\$839,233.77

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:	Wayne Young
Performing Provider: Date:	The Harris Center for Mental Health and IDD 3/26/2018

### 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	
	Ormalata
Section 1: Performing Provider Information Section 2: Lead Contact Information	Complete 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
Section 1. Medsure Exemption nequests and medsure secting system components	compiete
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
Section 3: Certification Summary and Certification	
Summary and Certification	Complete
Summary and Certification Section 1: DY7-8 DSRIP Valuation	Complete Complete
Summary and Certification Section 1: DY7-8 DSRIP Valuation Section 2: Category B Medicaid Low-income Uninsured (MLIU) Patient Population by Provider (PPP)	Complete Complete Complete
Summary and Certification 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	Complete Complete Complete Complete
Summary and Certification 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	Complete Complete Complete Complete Complete
Summary and Certification 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	Complete Complete Complete Complete Complete Complete
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	Complete Complete Complete Complete Complete