

RHP Plan Update Provider Form

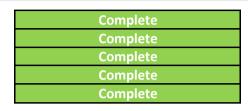
This page provides high-level information on the various inputs that a user will find within this template.

| 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. |
|----------------------------------|--|
|----------------------------------|--|

| 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. |
|----------------------|---|
|----------------------|---|

| 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. |
|--|---|
|--|---|

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 |
| No Mi-216 30-Day Readmission Rate Clinical Dutcome 3 0 No Decrease in mental health admissions and readmissions to criminal justice settings such as jails or pricons Clinical Outcome 3 0 No Mi-241 Operations Clinical Outcome 3 0 No Mi-241 Operations Clinical Outcome 3 0 No Mi-241 Operations Clinical Outcome 3 0 Yes MLU denominator with significant volume Mi-255 Initiation of Depression Treatment Process 1 0 Yes MUU denominator with significant volume Mi-256 Initiation of Depression Treatment Process 1 0 Yes MUU denominator with significant volume Mi-257 Care Planning for Dullagnosis Process 1 0 Yes MUU denominator with significant volume Mi-250 Illiness Process 1 1 Yes MUU denominator with significant volume Mi-261 Psychiatric Patients Process 1 1 Yes MUU denominator with significant volume Mi-262 Assessment | Na | MLIU denominator with | | Risk Adjusted Behavioral Health/ Substance Abuse | | |
| 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 |
| MLU denominator with significant volumeML-255Medication (ADD)Clinical Outcome30YesMLU denominator with significant volumeML-256Initiation of Depression TreatmentProcess10YesMLU denominator with significant volumeM1-257Care Planning for Dual DiagnosisProcess10YesMLU denominator with significant volumeM1-259with SchizophreniaProcess10YesMLU denominator with significant volumeM1-260IllnessProcess10YesMLU denominator with significant volumeM1-261Psychiatric Prosons with Mental Psychiatric PatientsProcess11YesMLU denominator with significant volumeM1-261Psychiatric PatientsProcess10YesMLU denominator with significant volumeM1-262Assessment for Substance Abuse Problems of PsychiatricProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLU denominator with significant volumeM1-266With SchizophreniaProcess10YesMLU denominator with significant volumeM1-266With SchizophreniaProcess10YesMLU denominator with significant volumeM1-266With SchizophreniaPro | Na | MLIU denominator with | | Follow-up Care for Children Prescribed ADHD | | |
| 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 |
| significant volumeM1-256Initiation of Depression (Perturnent)Process10YesMLU denominator with significant volumeM1-257Care Planning for Dual Diagnosis Assignment of Primary Care Physician to Individuals with SchizophreniaProcess10YesMLU denominator with significant volumeM1-259Assignment of Primary Care Physician to Individuals with SchizophreniaProcess10YesMLU denominator with significant volumeM1-260IllinessProcess111YesMLU denominator with significant volumeM1-261Psychiatric PatientsProcess111YesMLU denominator with significant volumeM1-262Assessment for Substance Abuse Problems of significant volume10YesMLU denominator with significant volumeM1-262Assessment for Risk to Self / OthersProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLU denominator with significant volumeM1-266With SchizophreniaProcess10YesMLU denominator with significant volumeM1-266SchizophreniaProcess10YesMLU denominator with significant volumeM1-266SchizophreniaProcess11YesMLU denom | N | MLIU denominator with | | | | |
| Yessignificant volumeM1-257Care Planning for Dual DiagnosisProcess10YesMLU denominator with significant volumeM1-259with SchizophreniaProcess10YesMLU denominator with significant volumeM1-260IllnessProcess11YesMLU denominator with significant volumeM1-261Pychiatric PatientsProcess11YesMLU denominator with significant volumeM1-261Pychiatric PatientsProcess11YesSignificant volumeM1-262Assessment for Substance Abuse Problems of significant volumeM1-262Assessment for Substance Abuse Problems of significant volume10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia Process10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess10YesMLU denominator with significant volumeM1-266Schizophrenia SchizophreniaProcess10YesMLU denominator with significant volumeM1-266Chizophrenia SchizophreniaProcess11YesMLU denominator with significant volumeM1-280Ch | Yes | significant volume | M1-256 | Initiation of Depression Treatment | Process | 1 0 |
| Significant volumeM1-257Care Planning for Dual DiagnosisProcess10YesMLU denominator withAssignment of Primary Care Physicial to IndividualsProcess10YesMLU denominator withAnnal Physical Exam for Persons with MentalProcess10YesMLU denominator withAnnal Physical Exam for Persons with MentalProcess11YesMLU denominator withAssessment for Substance Abuse Problems ofProcess11YesMLU denominator withAssessment for Substance Abuse Problems ofProcess11YesMLU denominator withAssessment for Substance Abuse Problems ofProcess10YesMLU denominator withAssessment for Substance Abuse Problems ofProcess10YesMLU denominator withAssessment for Risk to Self/ OthersProcess10YesMLU denominator withAssessment for Risk to Self / OthersProcess10YesMLU denominator withH1-262Assessment for Psychosocial Issues of PsychiatricProcess10YesMLU denominator withH1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLU denominator withH1-265SchizophreniaProcess11YesMLU denominator withIndependent Living Skills Assessment for IndividualsProcess11YesMLU denominator withIndependent Living Skills Assessment for Individ | Ver | MLIU denominator with | | | | |
| YesMUU denominator with significant volumeM1-259Assignment of Primary Care Physician to Individuals with SchizophreniaProcess10YesMUU denominator with significant volumeAnnual Physical Exam for Persons with Mental illnessProcess11YesMUU denominator with significant volumeM1-260IllnessProcess11YesMUU denominator with significant volumeM1-261Psychiatric PatientsProcess11YesMUU denominator with significant volumeM1-262Assessment of Risk to Self/ Others PatientsProcess10YesMUU denominator with significant volumeM1-263PatientsProcess10YesMUU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMUU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMUU denominator with significant volumeM1-266with SchizophreniaProcess10YesMUU denominator with significant volumeM1-266with SchizophreniaProcess10YesMUU denominator with significant volumeM1-266with SchizophreniaProcess10YesMUU denominator with significant volumeM1-266with SchizophreniaProcess10YesMUU denominator with significant volume | Yes | significant volume | M1-257 | | Process | 1 0 |
| Significant volumeM1-259With SchuzophreniaProcess10YesMLU denominator with significant volumeM1-260IllnessProcess11YesMLU denominator with significant volumeM1-261Psychiatric PatientsProcess11YesMLU denominator with significant volumeM1-262Assessment for Substance Abuse Problems of significant volume10YesMLU denominator with significant volumeM1-262Assessment for Psychosocial Issues of Psychiatric10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMLU denominator with significant volumeM1-265Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess11YesMLU denominator with significant volumeIndependent Living Skills Assessment for Individuals with Process10NoMLU denominator with significant volumeM1-266with SchizophreniaProcess11YesMLU denominator with significant volumeM1-266with SchizophreniaProcess10NoMLU denominator with significant volumeM1-266with SchizophreniaProcess1 | N | MLIU denominator with | | Assignment of Primary Care Physician to Individuals | | |
| Yessignificant volumeM1-260llnessProcess11YesMLIU denominator with significant volumeAssessment for Substance Abuse Problems of molection of Substance Abuse Process< | Yes | significant volume | M1-259 | | Process | 1 0 |
| significant volumeM1-260IllnessProcess11YesMLU denominator with significant volumeM1-261Psychiatric PatientsProcess11YesMLU denominator with significant volumeM1-262Assessment for Substance Abuse Problems of Psychiatric PatientsProcess10YesMLU denominator with significant volumeM1-262Assessment of Risk to Self/ OthersProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess11YesMLU denominator with significant volumeM1-266With Schizophrenia Vick SchizophreniaProcess11YesMLU denominator with significant volumeM1-266With Schizophrenia SchizophreniaProcess11NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11YesMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Med | | MLIU denominator with | | Annual Physical Exam for Persons with Mental | | |
| Yessignificant volumeM1-261Psychiatric PatientsProcess11YesMLU denominator with significant volumeM1-262Assessment of Risk to Self/ OthersProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess11YesMLU denominator with significant volumeM1-265Schizophrenia Vocational Rehabilitation for SchizophreniaProcess11YesMLU denominator with significant volumeM1-266with Schizophrenia Vocational RehabilitationProcess11NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical Reco | | significant volume | M1-260 | | Process | 1 1 |
| Significant volumeM1-261Psychiatric PatientsProcess11YesMLU denominator with significant volumeM1-262Assessment of Risk to Self / OthersProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess10YesMLU denominator with significant volumeM1-266with Schizophrenia ProcessProcess10NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process10NoMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11Yes | Yes | MLIU denominator with | | Assessment for Substance Abuse Problems of | | |
| Yessignificant volumeM1-262Assessment of Risk to Self/ OthersProcess10YesMLU denominator with significant volumeM1-263Assessment for Psychosocial Issues of Psychiatric ProcessProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for Schizophrenia ProcessProcess10YesMLU denominator with significant volumeM1-265Schizophrenia SchizophreniaProcess10YesMLU denominator with significant volumeM1-266Schizophrenia with SchizophreniaProcess11YesMLU denominator with significant volumeM1-266Independent Living Skills Assessment for Individuals with SchizophreniaProcess10NoMLU denominator with significant volumeM1-266Chlamydia Screening in Women (CHL)Process10NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11YesMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Documentation of Current Medications in the significant volumeProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess </th <th>res</th> <th>significant volume</th> <th>M1-261</th> <th>Psychiatric Patients</th> <th>Process</th> <th>1 1</th> | res | significant volume | M1-261 | Psychiatric Patients | Process | 1 1 |
| Significant volumeM1-262Assessment of Nisk to Self/ UthersProcess10YesMLU denominator with significant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLU denominator with significant volumeM1-265SchizophreniaProcess10YesMLU denominator with significant volumeM1-265SchizophreniaProcess10YesMLU denominator with significant volumeM1-266with SchizophreniaProcess10NoMLU denominator with significant volumeM1-266with SchizophreniaProcess10NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process10NoMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volume< | Voc | MLIU denominator with | | | | |
| Yessignificant volumeM1-263PatientsProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLU denominator with significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLU denominator with significant volumeM1-265SchizophreniaProcess11YesMLU denominator with significant volumeIndependent Living Skills Assessment for Individuals with with SchizophreniaProcess10NoMLU denominator with 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 volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11MultureM1-285Child and Adolescent Major Depressive Disorder significant volumeM111 <th>res</th> <th>significant volume</th> <td>M1-262</td> <td></td> <td>Process</td> <td>1 0</td> | res | significant volume | M1-262 | | Process | 1 0 |
| Significant volumeM1-263PatientsProcess10YesMLIU denominator with significant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLIU denominator with significant volumeM1-265SchizophreniaProcess10YesMLIU denominator with 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 volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeM1-287Medical RecordProcess11YesMLIU denominator with significant volumeM1-287Medical RecordProcess11YesMLI | N | | | Assessment for Psychosocial Issues of Psychiatric | | |
| Yessignificant volumeM1-264Vocational Rehabilitation for SchizophreniaProcess10YesMLIU denominator with significant volumeM1-265SchizophreniaProcess11YesMLIU denominator with significant volumeM1-266SchizophreniaProcess11NoMLU denominator with significant volumeM1-266with SchizophreniaProcess10NoMLU denominator with significant volumeM1-280chlamydia Screening in Women (CHL)Process10NoMLU denominator with significant volumeM1-280chlamydia Screening in Women (CHL)Process11NoMLU denominator with significant volumeM1-280Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-287Medical RecordProcess11YesMLU denominator with significant volumeM1-305Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11 | res | significant volume | M1-263 | Patients | Process | 1 0 |
| 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 | | | | |
| Yessignificant volumeM1-265SchizophreniaProcess11YesMLU denominator with significant volumeM1-266Independent Living Skills Assessment for Individuals with SchizophreniaProcess10NoMLU denominator with significant volumeM1-266Chlamydia Screening in Women (CHL)Process11NoMLU denominator with significant volumeM1-280Chlamydia Screening in Women (CHL)Process11NoMLU denominator with significant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLU denominator with significant volumeM1-287Documentation of Current Medications in the Medical RecordProcess11YesMLU denominator with significant volumeM1-287Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)Process11 | res | significant volume | M1-264 | Vocational Rehabilitation for Schizophrenia | Process | 1 0 |
| 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 | | | | |
| Nosignificant volumeM1-286Depression Remission at Six MonthsClinical Outcome31YesMLIU denominator with significant volumeDocumentation of Current Medications in the M1-287Documentation 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 | significant volume | M1-280 | Chlamydia Screening in Women (CHL) | Process | 1 1 |
| 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).

⁹ 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 | | | |
| | | | | | | | | | |
| | A N | | 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 |