



RHP Plan Update Provider Form

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

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

DY7-8 Provider RHP Plan Update Template - Provider Entry

Progress Indicators

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

Section 1: Performing Provider Information

RHP: **3**

TPI and Performing Provider Name: **158771901 - Harris County Public Health & Environmental Services**

Performing Provider Type: **Local Health Department (LHD)**

Ownership: **Non-State Owned Public**

TIN: **17604545149159**

Physical Street Address: **2223 West Loop South Freeway**

City: **Houston**

Zip: **77027**

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:	Les Becker	Umair Shah	William Hudson
Street Address:	2223 W Loop S Ste 7000	2223 W Loop S Ste 7000	7457 Harwin Dr
City:	Houston	Houston	Houston
Zip:	77027	77027	77036
Email:	les.becker@phs.hctx.net	umair.shah@phs.hctx.net	william.hudson@phs.hctx.net
Phone Number:	713-439-6004	713-439-6016	713-274-8506
Phone Extension:			
Lead Contact or Both:	Both	Lead Contact	Both

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

Section 3: Optional Withdrawal From DSRIP

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

Do Not Withdraw from DSRIP

Section 4: Performing Provider Overview

Performing Provider Description:	<p>Harris County Public Health & Environmental Services (HCPHES) is a comprehensive local health department serving the third most populous county in the United States. It spans over 1700 square miles, and its land area is larger than the state of Rhode Island. The HCPHES jurisdiction includes approximately 2 million people within Harris County's unincorporated areas and over 30 small municipalities located in Harris County (not including the city of Houston). For certain public health services such as vector/mosquito control, Ryan White/Title I HIV funding, and refugee health screening, the HCPHES jurisdiction encompasses the entire county including the city of Houston, therefore providing services to over 4 million people in total. Since being chartered in 1942 by Harris County Commissioners Court, HCPHES has provided leadership in a wide range of public health activities and programming including but not limited to communicable disease control; veterinary and environmental public health; and clinical preventive services. These services include strong programming in immunizations, oral health, tuberculosis prevention & treatment, and nutrition/wellness through a variety of efforts including the HCPHES Women, Infants, & Children (WIC) program. Across this broad organizational framework, HCPHES has engaged in significant departmental strategic planning activities, including the development of the HCPHES Strategic Plan 2013-2018 which is grounded in the "Essential Public Health Services" model (e.g., assessment, policy development and education, and assurance activities). These categories allow HCPHES to engage within a variety of public health sectors including the services provided through its clinical programs.</p> <p>The mission statement of HCPHES is "Promoting a Healthy and Safe Community, Preventing Illness and Injury, Protecting You, HCPHES, Your Department for Life" while its clear vision is "Healthy People, Healthy Communities ... a Healthy Harris County." The HCPHES staff (over 700) are public health professionals in the truest sense of the word and have a broad range of expertise in various public health program areas. HCPHES staff pride themselves in upholding the organizational values which they helped to craft: Excellence, Compassion, Flexibility, Integrity, Accountability, Professionalism, and Equity. With a current annual operating budget of \$100 million, HCPHES is organized into three offices that apply specific skills broadly across all public health activities (Communication Education and Engagement, Policy and Planning, and Public Health Preparedness & Response); five divisions that focus on specific programmatic disciplines (Disease Control & Clinical Prevention, Environmental Public Health, Mosquito Control, Nutrition and Chronic Disease Prevention and Veterinary Public Health); and a state-of-the-art Operations & Finance Division that manages its business infrastructure (e.g. financial services, information technology, human resources, etc.). HCPHES is highly regarded both nationally and state-wide for its continued leadership in the field of public health and is well-positioned as a model agency for public health services in the local community.</p>
Overall DSRIP Goals:	<ul style="list-style-type: none"> • Increase access to primary and specialty care services, with a focus on underserved populations, to ensure patients receive the most appropriate care for their condition, regardless of where they live or their ability to pay. • Transform health care delivery from a disease-focused model of episodic care to a patient-centered, coordinated delivery model that improves patient satisfaction and health outcomes, reduces unnecessary or duplicative services, and builds on the accomplishments of our existing health care system • Develop a culture of ongoing transformation and innovation that maximizes the use of technology and best-practices, facilitates regional collaboration and sharing, and engages patients, providers, and other stakeholders in the planning, implementation, and evaluation processes.

Alignment with regional community needs assessment:

The HCPHES clinical care system has over 40 years of experience in providing quality, cost-effective preventive clinical services to the Harris County community. Thus, HCPHES has been considered a trusted leader in public health service provision in the community for several decades. HCPHES views its role similar to the Institute of Medicine definition of public health, "... to assure the conditions in which people can be healthy." HCPHES focuses on population-based approaches to meeting the public health needs of the Harris County community. HCPHES- similar to other local health departments across the country- often thus serves as the "safety net" provider to many community members who may not have any other way of receiving needed health services. Safety net issues are thus taken into consideration during HCPHES policy deliberations.

As a safety net provider and local health department for the unincorporated areas of Harris County and for certain public health services such as vector/mosquito control, Ryan White/Title I HIV funding, and refugee health screening, the HCPHES system encounters first hand core regional issues outlined in the most recent Regional Community Health Needs Assessment. Insufficient Access to Care and Inadequate Transportation options have long been an issue facing residence in unincorporated areas of Harris County. Lack of access to reliable and affordable transportation is a challenge that Harris County residents encounter while seeking healthcare services. Issues with transportation lead to missed or rescheduled appointments and lack of any future attempt to seek care. In order to mitigate this issue and address the goal of Increase access to primary and specialty care services, with a focus on underserved populations, to ensure patients receive the most appropriate care for their condition, regardless of where they live or their ability to pay. HCPHES plans to continue to leverage the expanded reach of the mobile health clinic to provide prescreen eligibility, insurance enrollment assistance, direct service, educational and clinical outreach activities to those residents without immediate access to care. Additional HCPHES will continue to forge its mission to "bring public health to the public" through the continuation and expansion of school and community based medical, dental, and health education services, as well as expansion of technological improvements such as tele-health interventions. Developing a culture of ongoing transformation and innovation that maximizes the use of technology and best-practices, will further address access to care issues, as well as make it easier for providers to address the diverse populations with varying culture and socio-economic backgrounds.

Moreover, for services not provided directly to clients, HCPHES partners with other governmental and community-based agencies to assist in bridging the gap for the provision of comprehensive health services to Harris County residents. However the scope of the challenge is great with approximately 28% of Harris County residents lacking adequate health insurance. These collaborations have been both deliberative and strategic in nature.

As a local health department, HCPHES focuses on population- based approaches to meet the public health needs of the community. Through an

Section 5: DY7-8 DSRIP Total Valuation

	DY7-8 DSRIP Valuation Distribution			
	Valuation if regional private hospital participation requirement is met		Valuation if regional private hospital participation requirement is <u>not</u> met	
	DY7	DY8	DY7	DY8
RHP Plan Update Submission	\$1,771,243.79	\$0.00	\$1,771,243.79	\$0.00
Category A	\$0.00	\$0.00	\$0.00	\$0.00
Category B	\$885,621.90	\$885,621.90	\$885,621.90	\$885,621.90
Category C	\$4,870,920.43	\$6,642,164.23	\$5,756,542.33	\$7,527,786.12
Category D	\$1,328,432.85	\$1,328,432.84	\$442,810.95	\$442,810.95
Total	\$8,856,218.97	\$8,856,218.97	\$8,856,218.97	\$8,856,218.97

Would you like to decrease the total valuation?

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

DY7-8 Provider RHP Plan Update Template - Category B

Progress Tracker

Section 1: System Definition

Complete

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

Complete

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	158771901 - Harris County Public Health & Environmental Services
Performing Provider Type:	Local Health Department (LHD)
Ownership:	Non-State Owned Public
Category B valuation in DY7:	\$885,621.90
Category B valuation in DY8:	\$885,621.90

Section 1: System Definition

Local Health Departments - Required Components

Required System Component	Business Component?
Clinics	Business Component of the Organization

Please enter a description of this System Component.

Harris County Public Health operates three grant based community clinics (Listed Below). Clinics are non-primary care, offering preventative wellness interventions, screenings, assessments, and education. Services include, DSHS Family planning, Title X reproductive health, and Title V dental services (Only provided at 1.5 clinics). In addition HCPH operates one refugee health screening, and one TB chest clinic (Listed below).

Community Clinics

Baytown Health Clinic
1000 Lee Drive
Baytown, Texas 77520

Humble Health Clinic
1730 Humble Place Drive
Humble, Texas 77338

Southeast Health Clinic
3737 Red Bluff
Pasadena, Texas 77503

Dental Clinics

Humble Dental Clinic
1730 Humble Place Drive
Humble, Texas 77338

Southeast Dental Clinic
3737 Red Bluff

Required System Component	Business Component?
Immunization Locations	Business Component of the Organization

Please enter a description of this System Component.

Immunizations are provided at the three Harris County community based clinics and Refugee Health Clinic

Community Clinics

Baytown Health Clinic
1000 Lee Drive
Baytown, Texas 77520

Humble Health Clinic
1730 Humble Place Drive
Humble, Texas 77338

Southeast Health Clinic
3737 Red Bluff
Pasadena, Texas 77503

Refugee Health

Refugee Outreach Center
7447 Harwin Drive
Houston, Texas 77036

Local Health Departments - Optional Components

Optional System Component	Would you like to select this component?
Mobile Outreach	Yes

Please enter a description of this System Component.

Waiver 1.0 made way for Harris County Public Health to break away from the fixed clinical establishment, and take essential wellness educations and screenings outside the fixed structure and into the community. The mobile outreach team is comprised of the following programs (Childhood Obesity Reduction, Tobacco Counseling, Mobile Health, Child school-based Dental Screenings, Lead poisoning education). HCPH made heavy investments in mobile outreach through the purchase of one medical speciality unit and one dental speciality unit. Both to allow for expansion of service offerings.

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

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

	DY5	DY6
MLIU PPP	38,138	35,412
Total PPP	38,948	36,878

Please indicate the population included in the MLIU PPP

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

MLIU PPP Goal for each DY (DY7 and DY8):	36,775
Average Total PPP	37,913
MLIU percentage of Total PPP	97.00%

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

Would you like the MLIU PPP Goal to be based on DY5 or DY6 only (as opposed to the average)?	No
--	----

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

Progress Tracker

Section 2: Selection Overview (CMHCs and LHDs only)
 Section 3: Selection of Measures for Local Health Departments
 Minimum Selection Requirements Met
 MPT Met

Complete
Complete
Yes
Yes

Note: you must confirm selections at the bottom of the page to finish.	MPT	18
	Points Selected	18
	Measures Selected	16
	Clinical Outcome Selected	Y
	At least 2 measures selected	Y

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	158771901 - Harris County Public Health & Environmental Services
Performing Provider Type:	Local Health Department (LHD)
Ownership:	Non-State Owned Public

If regional private hospital participation requirement is met	Category C valuation in DY7:	\$4,870,920.43
	Category C valuation in DY8:	\$6,642,164.23
If regional private hospital participation requirement is <u>not</u> met	Category C valuation in DY7:	\$5,756,542.33
	Category C valuation in DY8:	\$7,527,786.12

MINIMUM POINT THRESHOLD (MPT): 18
 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 Local Health Department (LHD)
 Individuals with one eligible encounter during the measurement period

Please describe any other attributed population (optional).

Section 2: Selection Overview

Please describe your rationale for the selected measures, and describe the primary system components (clinics, facilities) that will be used to report on and drive improvement in selected measures.

HCPHES focuses on population-based approaches to meeting the public health needs of the Harris County community. HCPHES- similar to other local health departments across the country- often thus serves as the "safety net" provider to many community members who may not have any other way of receiving needed health services. The selected measures are in strategic and mission driven alignment with the overarching goals and objectives of Harris County Public Health, as well as in alignment with regional and other national program goals. For example the measures selected align with core public health activities as outlined by the Center for Disease Control and Prevention (CDC), 10 essential public health services:

- Monitor health status to identify and solve community health problems
- Diagnose and investigate health problems and health hazards in the community
- Inform, educate, and empower people about health issues
- Mobilize community partnerships and action to identify and solve health problems
- Develop policies and plans that support individual and community health efforts
- Enforce laws and regulations that protect health and ensure safety
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable
- Assure competent public and personal health care workforce
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services
- Research for new insights and innovative solutions to health problems

Additionally, the measures selected address key challenges and community needs for the region as outlined in the most recent community health needs assessment such as:

- Insufficient access to care
- Inadequate transportation options
- High Prevalence of Chronic Disease and Poor Health

The HCPH fixed clinical site will act as anchors for community members to seek initial and follow up services. The mobile community outreach branch will focus on area of the county where lack of access to services is a barrier to care, and selected measure factors are prevalent (high obesity, high asthma, high STI/D)

L1-105: Preventive Care & Screening: Tobacco Use: Screening and Cessation Intervention
 System Components: Community Clinics, Refugee Outreach Center, Mobile Services, Outreach/ Education Services

L1-147: Preventive Care and Screening: Body Mass Index screening and follow up

Section 3: Selection of Measures for Local Health Departments

Standard LHD Menu Options

Select Measure (Yes/No)	Measure Volume Options for Goal Setting and Achievement	Bundle-Measure ID	Measure Name	Measure Category	Total Points
No		L1-103	Controlling High Blood Pressure	Clinical Outcome	3
Yes	MLIU denominator with significant volume	L1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	Process	1
No		L1-107	Colorectal Cancer Screening	Cancer Screening	2
No		L1-108	Childhood Immunization Status (CIS)	Immunization	1
No		L1-115	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	Clinical Outcome	3
Yes	MLIU denominator with significant volume	L1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	Process	1
No	MLIU denominator with significant volume	L1-160	Follow-Up After Hospitalization for Mental Illness	Clinical Outcome	3
No	MLIU denominator with significant volume	L1-186	Breast Cancer Screening	Cancer Screening	2
No		L1-205	Third next available appointment	Process	1
No		L1-207	Diabetes care: BP control (<140/90mm Hg)	Clinical Outcome	3
Yes	MLIU denominator with significant volume	L1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	Process	1
Yes	MLIU denominator with significant volume	L1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	Process	1

No	MLIU denominator with significant volume	L1-224	Dental Sealant: Children	Process	1
No	MLIU denominator with significant volume	L1-225	Dental Caries: Children	Clinical Outcome	3
No	MLIU denominator with significant volume	L1-227	Dental Caries: Adults	Clinical Outcome	3
Yes	MLIU denominator with significant volume	L1-231	Preventive Services for Children at Elevated Caries Risk	Process	1
No	MLIU denominator with significant volume	L1-235	Post-Partum Follow-Up and Care Coordination	Clinical Outcome	3
No	MLIU denominator with significant volume	L1-237	Well-Child Visits in the First 15 Months of Life (6 or more visits)	Process	1
No	MLIU denominator with significant volume	L1-241	Decrease in mental health admissions and readmissions to criminal justice settings such as jails or prisons	Clinical Outcome	3
No	MLIU denominator with significant volume	L1-242	Reduce Emergency Department visits for Chronic Ambulatory Care Sensitive Conditions (ACSC)	Clinical Outcome	3
No	MLIU denominator with significant volume	L1-268	Pneumonia vaccination status for older adults	Immunization	1
Yes	MLIU denominator with significant volume	L1-269	Preventive Care and Screening: Influenza Immunization	Immunization	1
Yes	MLIU denominator with significant volume	L1-271	Immunization for Adolescents	Immunization	1
Yes	MLIU denominator with significant volume	L1-272	Adults (18+ years) Immunization status	Immunization	1
Yes	MLIU denominator with significant volume	L1-280	Chlamydia Screening in Women (CHL)	Process	1
Yes	MLIU denominator with significant volume	L1-343	Syphilis positive screening rates	Process	1
No	MLIU denominator with significant volume	L1-344	Follow-up after Treatment for Primary or Secondary Syphilis	Clinical Outcome	3
Yes	MLIU denominator with significant volume	L1-345	Gonorrhea Positive Screening Rates	Process	1
No	MLIU denominator with significant volume	L1-346	Follow-up testing for N. gonorrhoeae among recently infected men and women	Clinical Outcome	3
Yes	MLIU denominator with significant volume	L1-347	Latent Tuberculosis Infection (LTBI) treatment rate	Clinical Outcome	3
No	MLIU denominator with significant volume	L1-387	Reduce Emergency Department visits for Behavioral Health and Substance Abuse (Reported as two rates)	Clinical Outcome	3
Yes	MLIU denominator with significant volume	L1-400	Tobacco Use and Help with Quitting Among Adolescents	Process	1

Total points from Standard Menu:	15
---	----

LHD "Grandfathered" DY6 P4P Measures

These measures are specific to your organization and are different from the standard LHD menu shown above.
--

Select Measure (Yes/No)	TPI	Performing Provider Name	DY6 RHP/Cat 3 ID	DY6 Title	DY7-8 Point Value
Yes	158771901	Harris County Public Health & Environmental Services	3_158771901.3.100	Utilization of Services: Children	1
No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.101	Influenza Immunization -- Ambulatory	1
No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.102	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	1
No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.103	Tobacco Use: Screening & Cessation	1
No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.104	Latent Tuberculosis Infection (LTBI) treatment rate	3
No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.200	Prevention: Topical Fluoride Intensity for Children at Elevated Caries Risk	1
No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.201	Preventive Services for Children at Elevated Caries Risk	1
No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.202	Immunization for Adolescents- Tdap/TD and MCV	1
Yes	158771901	Harris County Public Health & Environmental Services	3_158771901.3.203	HPV vaccine for adolescents	1

No	158771901	Harris County Public Health & Environmental Services	3_158771901.3.204	Adult Body Mass Index (BMI) Assessment	1
Yes	158771901	Harris County Public Health & Environmental Services	3_158771901.3.205	Children and Adolescents' Access to Primary Care Practitioners (CAP)	1

Total points from "grandfathered" menu:	3
---	---

Total overall selected points:	18
--------------------------------	----

Are you finished making your selections?

Yes

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

Progress Tracker

Complete

Section 1: Measure Exemption Requests and Measure Setting System Components

Section 1: Measure Exemption Requests and Measure Setting System Components

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

Bundle-Measure ID	Measure Name	Baseline Measurement Period	Requesting a shorter or delayed measurement period?	Requesting a reporting milestone exemption?	Requesting a baseline numerator of zero?
LI-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-231	Preventive Services for Children at Elevated Caries Risk	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-269	Preventive Care and Screening: Influenza Immunization	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-271	Immunization for Adolescents	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-272	Adults (18+ years) Immunization status	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-280	Chlamydia Screening in Women (CHL)	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-343	Syphilis positive screening rates	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-345	Gonorrhea Positive Screening Rates	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-347	Latent Tuberculosis Infection (LTBI) treatment rate	CY2017: January 1, 2017 - December 31, 2017	No	No	No
LI-400	Tobacco Use and Help with Quitting Among Adolescents	CY2017: January 1, 2017 - December 31, 2017	No	No	No
3_158771901.3.100	Utilization of Services: Children	CY2017: January 1, 2017 - December 31, 2017	No	No	No
3_158771901.3.203	HPV vaccine for adolescents	CY2017: January 1, 2017 - December 31, 2017	No	No	No
3_158771901.3.205	Children and Adolescents' Access to Primary Care Practitioners (CAP)	CY2017: January 1, 2017 - December 31, 2017	No	No	No

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

Progress Tracker

Section 1: Measure Bundle/Measure Valuation

Complete

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	158771901 - Harris County Public Health & Environmental Services
Performing Provider Type:	Local Health Department (LHD)
Ownership:	Non-State Owned Public

If regional hospital participation requirement is met	Category C valuation in DY7:	\$4,870,920.43
	Category C valuation in DY8:	\$6,642,164.23
If regional hospital participation requirement is not met	Category C valuation in DY7:	\$5,756,542.33
	Category C valuation in DY8:	\$7,527,786.12

Section 4: Measure Bundle/Measure Valuation

Valuation for Selected Measures - Local Health Departments

Measure ID or Cat 3 ID	Denominator Volume	Points	Desired Valuation %	Minimum Valuation % of Total	Maximum Valuation % of Total	If private regional hospital participation requirement is met		If private regional hospital participation requirement is not met	
						Category C Valuation in DY7	Category C Valuation in DY8	Category C Valuation in DY7	Category C Valuation in DY8
L1-105	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-147	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-210	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-211	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-231	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-269	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-271	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-272	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-280	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-343	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-345	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-347	MLIU denominator with significant volume	3	6.25%	4.68%	7.82%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-400	MLIU denominator with significant volume	1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
3_158771901.3.100		1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
3_158771901.3.203		1	6.25%	4.68%	6.25%	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
3_158771901.3.205		1	6.25%	4.68%	6.25%	\$304,432.48	\$415,135.33	\$359,783.83	\$470,486.67
Total	N/A	18	100.00%	N/A	N/A	\$4,870,920.43	\$6,642,164.23	\$5,756,542.33	\$7,527,786.12
	Difference between selected percent and 100%:		0.00%						

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

Complete
Complete
Complete

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	158771901 - Harris County Public Health & Environmental Services
Performing Provider Type:	Local Health Department (LHD)
Ownership:	Non-State Owned Public

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

DY6 Project ID	Project Option	Project Summary	Completed/ Continuing	Enter a description for continuation (optional)
RHP_3_158771901.1.100	1.8.9	The proposed project will seek to improve the oral health of indigent school-aged children through collaborations with targeted schools, school districts, Head Start Centers, and communities within Harris County to provide preventive dental screenings and fluoride varnish applications, oral health education, and navigator-assisted referrals to community dental providers, including HCPHES dental services.	Continuing as Core Activity in DY7-8	
RHP_3_158771901.1.101	1.1.3	The proposed project will improve access to appropriate/affordable prevention screening and wellness visits for target populations through the provision of community-based mobile health services and will include immunizations, health screenings, health promotion/education, and other established HCPHES public health programming. The project will also feature a robust education/referral program to navigate participants, as appropriate, to additional services such as integrated care programs, primary care providers and treatment programs.	Continuing as Core Activity in DY7-8	
RHP_3_158771901.2.100	2.7.5	Harris County Public Health and Environmental Services (HCPHES) proposes to expand its operations and leverage mobile clinic units alongside existing fixed clinics to meet the health needs of low income, indigent and special needs populations, that lack the resources and/or physical mobility to commute to fixed site locations to receive the vital and preventative services necessary to combat and address childhood and adolescent obesity. This expansion will allow for increased accessibility to services, health education programs, and the dissemination of critical health education information to the target communities.	Continuing as Core Activity in DY7-8	
RHP_3_158771901.2.101	2.7.2	Harris County Public Health and Environmental Services (HCPHES) proposes to expand its operations and leverage mobile clinic units alongside existing fixed clinics to meet the health needs of low income, indigent and special needs populations, that lack the resources and/or physical mobility to commute to fixed site locations to receive the vital and preventative services necessary to reduce tobacco use. This expansion will allow for increased accessibility to services, health education programs, and the dissemination of critical health education information to the target communities.	Continuing as Core Activity in DY7-8	
RHP_3_158771901.2.102	2.7.1	The performing provider will improve adherence with treatment in the target population by implementing video-based directly observed therapy (VDOT) for qualified tuberculosis (TB) patients. The project will also offer a shortened therapy regimen to qualified patients being treated for latent TB infection (LTBI) by changing the course of medication prescribed. This project will thereby increase the number of patients who are adequately treated for active TB disease and TB infection and ultimately decrease potentially preventable hospitalizations for tuberculosis as well as costs for treating drug-resistant TB.	Continuing as Core Activity in DY7-8	

Section 2: Core Activities

Please enter your organization's number of Core Activities:

1) Please select the grouping for this Core Activity.

a) Please select the name of this Core Activity.

b) Please enter a description of this Core Activity

impacts will be most beneficial. The oral health prevention team will be staffed by dental hygienists, dental assistants, community health workers, and program administrators. The proposed project will endeavor to deliver oral health assessments and fluoride treatments twice per school year, reinforced by educational activities and client follow-up. Oral health screenings will consist of inspections for tooth decay, assessment of early periodontal disease (gingivitis), and physical and visual oral cancer screenings. During the summer months, when schools are not in session, project staff will evaluate findings, coordinate future school-based programming, and coordinate community events to larger audiences. HCPHES has seen year over year growth with the expansion and depth of the school based oral health program. It is expected that by the end of 2018, HCPHES will have the program established in 25-30 low income schools through out the HCPHES jurisdiction, in addition to expanding to low-income after school programs and daycare centers. As the program enlarges the expectation is to add additional dental clinicians to meet the need. Currently the activities utilizes one supervising licensed dentist, four hygentist, and a host of community health workers and project assistants across 15 school based sites and various low income daycare center sites.

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

The utilization of Community Health Workers to aid in partnership development and case management.

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

Community Health Workers (CHW) will be an integral component of the project and will be utilized to strengthen relationships with schools and communities, assist in event planning logistics, and most importantly, provide navigation and referral services to participants to guide them to additional preventive and treatment options. CHW will follow-up with clients following each assessment to evaluate their progress and offer guidance and navigation to the next level of care, as applicable. CHW will have a demonstrated presence in this project and are well suited to interact with community partners and project participants to ensure the project is administered in a way that is culturally and linguistically appropriate to the targeted population.

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).

HCPHES will utilize a stage gate approach in applying project management best practices in implementing the youth dental program specifically utilizing a phased release process over the lifecycle of the program.

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

In each stage gate we will focus on continuous stakeholder feedback from various data collection points including iterative reviews of lessons learned captured from project deliverables in remediating any future challenges and/or risks. In addition, given the majority of the population we serve are Medicaid/low income uninsured individuals, our program will be tailored to overcome the unique challenges/barriers that may exist such as transportation, communication, availability, and location.

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

iii) Please describe the third 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.

L1-231

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

Through the expansion and continuation of this core activity HCPHES will be able to provide essential preventative oral health services to MLIU students with in the HCPHES jurisdiction and ensure they are provided with a first line of defense against tooth decay and childhood carries, in addition to navigating the MLIU students to an appropriate dental home.

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

No

2) Please select the grouping for this Core Activity.

Other

i) Please enter the name of this "Other" grouping.

Expansion of preventative health screenings and vaccinations to underserved population

a) Please select the name of this Core Activity.

Other

i) Please enter the name of this "Other" Core Activity.

Expansion of mobile community/school based preventative health screening services and vaccination services to underserved, under insured, low-income, medicaid eligible populations through partnerships with LHD's, immunization coalitions, and public/private community partnerships.

b) Please enter a description of this Core Activity

HCPHES plans to continue mobile health services to targeted Harris County communities by providing immunizations, health and wellness screenings, health promotion/education activities, while also enrolling individuals and their families into private and public health insurance programs, and guide participants to additional care, as appropriate. The project will capitalize on relationships with community partners, old and new, to plan and implement community events that draw in residents that may not have access to basic health screenings and prevention. HCPHES has

expanded the clinical provider base with the addition of one full-time chronic disease physician, and one part time family nurse practitioner, supported by a knowledgeable clinical support staff (RN, LVN, MA, and registration specialist). IN the last demonstration year the mobile health team conducted over 140 unique screening and wellness events through out the HCPHES jurisdiction, in addition to maintaining immunization and screening activities in three community fixed sites and a refugee health program. With provisions and incentive payments captured through waiver 1.0 HCPHES has been able to purchase a two opertory medical coach to provide direct service in underserved communities to mitigate access to care issues caused by transportation and resource limitations.

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

Optimize the use and accessibility of mobile screening and vaccination clinics

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

A significant proportion of Harris County residents are uninsured and many lack the resources or face geographic and logistical barriers in accessing primary health care and basic health screenings. The project seeks to intervene within the HCPHES jurisdiction by delivering high quality screenings, immunizations for eligible children and adults, and track referral services offered to communities and residents directly. HCPHES plans to continue to collect and capture data related to the number of unique community/ mobile events conducted each quarter, number of unique individual impacted, and school based immunization compliance rates within targeted MLIU schools.

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

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

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

L1-269	3 158771901.3.203	L1-271	L1-272
L1-280	L1-343	L1-345	

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

This core activity impacts the measures selected by removing the barriers to care identified in the most recent CHNA caused by transportation and resource deficits. This approach makes it easier for the target population to access wellness services, immunizations, STI/D screening services, preventative health education and navigation to essential resources.

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.

Prevention and Wellness

a) Please select the name of this Core Activity.

Implementation of evidence-based strategies to reduce and prevent obesity in children and adolescents (e.g., Technology Supported Multi Component Coaching or Counseling Interventions to Reduce Weight and Maintain Weight Loss; Coordinated Approach to Child Health - CATCH; and SPARK among others)

b) Please enter a description of this Core Activity

HCPHES, through the utilization of mobile and fixed clinics, will increase access to the vital services necessary to reduce childhood and adolescent obesity rates in the target communities by providing screenings, health promotion education, and a robust referral program into applicable services such as integrated care programs, primary care providers and treatment programs, as applicable. HCPHES aims to reduce childhood and adolescent obesity, which has been identified by the American Heart Association, Centers for Disease Control and Prevention, American College of Cardiology, and the National Institutes of Health along with many other health and research agencies nationally and internationally, as an elevated risk factor associated with and causing cardiovascular disease and disorders, including but not limited to, coronary heart disease, heart failure, and sudden death. Participants will be recruited through current clinical services, community-based events, and other HCPHES community-based programs. Physical locations for the proposed evidence based program sessions will be identified that best meets the needs of the participants and their families. HCPHES proposes to partner with local agencies that may also offer physical space for this initiative.

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

Optimize the use and enrollment of "at-risk" age appropriate children into the evidence based intervention.

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

Increase the number of school based intervention sites within MLIU communities to increase enrollment and program completion.

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

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

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

L1-147	3_158771901.3.100	L1-211	L1-210
3_158771901.3.205			

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

This project is an ever evolving innovative step for HCPHES as an expansion of community-focused intervention aimed at reducing childhood and adolescent obesity. Prior to the launch of this intervention in waiver 1.0, previous outreach efforts consisted of the dissemination of information and program administration from fixed clinical establishments, that did not interface with a large populous of the targeted community. This project has expand services to include mobile clinical operations to meet accessibility needs, and offers additional services to the targeted population, including community based group programs, individualized exercise programs and individualized follow-up by community health workers and registered dietitians.

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

No

4) Please select the grouping for this Core Activity.

Prevention and Wellness

a) Please select the name of this Core Activity.

Implementation of strategies to reduce tobacco use (Example of evidence based models: 5R's (Relevance, Risks, Rewards, Roadblocks, Repetition) for patients not ready to quit; Ottawa Model; Freedom From Smoking Curriculum- American Lung Association among others)

b) Please enter a description of this Core Activity

HCPHES will adopt and implement a 2A's and R (Ask, Advice, and Refer) tobacco intervention and deliver an evidence based group tobacco cessation program.
Modified from the evidence based 5A's model (Ask, Advice, Assess, Assist, Arrange), the 2A's and R is a more practical program approach for clinical settings. The 2A's and R is a brief tobacco intervention delivered by providers (designated clinical staff across all clinical programs) that has been shown to significantly increase the likelihood that a client will make an attempt to quit smoking/ tobacco use. The intervention will also be delivered in community settings by community health workers and trained program facilitators (approx. 15 trained resources).
HCPHES will continue to utilize the Freshstart program as a reference framework due to the programs notable outcomes. The Freshstart evidence-based approach is geared to help participants increase their motivation to quit, learn effective approaches for quitting and guide them in making a successful quit attempt.

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

Enhance the provision of tobacco prevention efforts to current/former/and would be smokers

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

Monitor the number of individuals receiving the 2A's and R intervention and enrolling into fresh start

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

Increase the number of trained fresh start facilitators.

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).

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.

L1-105	L1-400		
--------	--------	--	--

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

The selected core activity impacts the selected measures by providing access to evidence based interventions, which have been proven to deter smoking activities and lead to positive quit attempts.

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

No

5) Please select the grouping for this Core Activity.

Access to Specialty Care Services

a) Please select the name of this Core Activity.

Use telemedicine/telehealth to deliver specialty services.

b) Please enter a description of this Core Activity

Patients will be given specially adapted cell phones and will record themselves taking each dose of medication. The video will upload automatically through a secure server and will then be downloaded and viewed at the performing provider's office by an outreach worker, nurse, or mid level provider (approx. 10 dedicated resources) who can confirm the dose was taken. This process will enhance adherence by allowing the patient to take the medication at a time and in a location convenient to him/her, based on mealtime, commute schedule and work schedule. This will make it easier for the patient to complete treatment on time, with fewer missed doses, and prevent the development of drug resistance as well as hospitalization for relapse due to inadequate treatment. Service area will cover HCPH jurisdiction.

[Redacted]

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

Provide education to patients on proper utilization of VDOT system and tools.

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

VDOT program will be evaluated for medication adherence

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

[Redacted]

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

[Redacted]

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.

L1-347

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

The performing provider will improve adherence with treatment in the target population by implementing video-based directly observed therapy (VDOT) for qualified tuberculosis (TB) patients. This project will thereby increase the number of patients who are adequately treated for active TB disease and TB infection and ultimately decrease potentially preventable hospitalizations for tuberculosis as well as costs for treating drug-resistant TB. VDOT will be reserved for patients who have been diagnosed with TB and can spread the bacteria to others. Factoring in travel and personnel cost, patient cost is estimated at \$27K to treat TB, and \$130K to treat Multidrug resistant TB. According to the Verizon Foundation, the VDOT program will reduce cost by 30% to health departments using this program. The use of this program will also increase the number of patients who stick with the proper medication treatment by nearly 50%.

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

No

DY7-8 Provider RHP Plan Update Template - Category D

Progress Tracker

Section 2: Verification

Complete

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	158771901 - Harris County Public Health & Environmental Services
Performing Provider Type:	Local Health Department (LHD)
Ownership:	Non-State Owned Public

If regional hospital participation requirement is met	Category D valuation in DY7	\$1,328,432.85
	Category D valuation in DY8	\$1,328,432.84
If regional hospital participation requirement is <u>not</u> met	Category D valuation in DY7	\$442,810.95
	Category D valuation in DY8	\$442,810.95

Section 1: Statewide Reporting Measure Bundle for Local Health Departments (LHDs)

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)
Time Since Routine Checkup	\$189,776.12	\$63,258.71
High Blood Pressure Status	\$189,776.12	\$63,258.71
Diabetes Status	\$189,776.12	\$63,258.71
Overweight or Obese	\$189,776.12	\$63,258.71
Smoker Status	\$189,776.12	\$63,258.71
Selected Immunizations	\$189,776.12	\$63,258.71
Prevention of Sexually Transmitted Diseases	\$189,776.13	\$63,258.69

Section 2: Verification

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

I understand

DY7-8 Provider RHP Plan Update Template - IGT Entry

Progress Tracker

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

Performing Provider Information

RHP:	1
TPA and Performing Provider Name:	158771901 - Harris County Public Health & Environmental Services
Performing Provider Type:	Local Health Department (LHD)
Ownership:	Non-State Owned Public

Section 1: IGT Entities

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

IGT RHP	Harris County	IGT Name	IGT TPI (if available)	IGT TIN	Affiliation Number
			N/A	17604545149159	100-14-0000-00010

Contact #	Contact Name	Street Address	City	Zip	Email	Phone Number	Phone Extension	Lead Contact or Both
1	Harold Dutton	2223 West Loop South	Houston	77027	hdutton@hcpbes.org	713-439-6011		Both
2	William Hudson	2223 West Loop South	Houston	77027	whudson@hcpbes.org	713-439-6160		Both

IGT RHP	IGT Name	IGT TPI (if available)	IGT TIN	Affiliation Number

Contact #	Contact Name	Street Address	City	Zip	Email	Phone Number	Phone Extension	Lead Contact or Both
1								
2								
3								

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

Section 2: IGT Funding

RHP Plan Update Submission Category #	IGT Name	IGT TIN	IGT Affiliation #	DY7 % IGT Allocated	DY8 % IGT Allocated	If regional private hospital participation requirement is met		If regional private hospital participation requirement is not met	
						Total Estimated DY7 Allocation (FMAP 56.88)/IGT	Total Estimated DY8 Allocation (FMAP 57.32)/IGT	Total Estimated DY7 Allocation (FMAP 56.88)/IGT	Total Estimated DY8 Allocation (FMAP 57.32)/IGT
						\$3,742	\$2,681	\$3,742	\$2,681
1	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$793,740.32	\$581,880.16	\$793,740.32	\$581,880.16
1L-105	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-147	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-210	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-212	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-231	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-269	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-271	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-272	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-280	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-343	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-345	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-347	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
1L-460	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
3 158771901_3_200	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
3 158771901_3_203	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
3 158771901_3_205	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$113,271.31	\$117,179.73	\$113,271.31	\$117,179.73
Category D	Harris County	17604545149159	100-14-0000-00010	100.00%	100.00%	\$572,820.24	\$566,978.14	\$190,940.08	\$188,991.71
Total						\$3,818,801.62	\$3,779,834.26	\$3,818,801.62	\$3,779,834.26

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: William G Hudson
 IGT Organization: Harris County
 Date: 3/9/2018

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

Progress Tracker

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

Complete
Complete
Complete
Complete
Complete
Complete

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	158771901 - Harris County Public Health & Environmental Services
Performing Provider Type:	Local Health Department (LHD)
Ownership:	Non-State Owned Public

Section 1: DY7-8 DSRIP Valuation

	DY7-8 DSRIP Valuation Distribution			
	Valuation if regional private hospital participation requirement is met		Valuation if regional private hospital participation requirement is not met	
	DY7	DY8	DY7	DY8
RHP Plan Update Submission	\$1,771,243.79	\$0.00	\$1,771,243.79	\$0.00
Category A	\$0.00	\$0.00	\$0.00	\$0.00
Category B	\$885,621.90	\$885,621.90	\$885,621.90	\$885,621.90
Category C	\$4,870,920.43	\$6,642,164.23	\$5,756,542.33	\$7,527,786.12
Category D	\$1,328,432.85	\$1,328,432.84	\$442,810.95	\$442,810.95
Total	\$8,856,218.97	\$8,856,218.97	\$8,856,218.97	\$8,856,218.97

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	38,138	38,948	97.92%
DY6	35,412	36,878	96.02%
DY7 Estimated	36,775	37,913	97.00%
DY8 Estimated	36,775	37,913	97.00%

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

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

Yes

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

Bundle-Measure ID	Measure Bundle/Measure Name	# of Measures with Requested Achievement of Alternative Denominators	# of Measures with Requested Shorter or Delayed Measurement Periods	# of Measures with Requested Reporting Milestone Exemptions	Points	Valuation if regional private hospital participation requirement is met		Valuation if regional private hospital participation requirement is not met	
						DY7 Valuation	DY8 Valuation	DY7 Valuation	DY8 Valuation
L1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-231	Preventive Services for Children at Elevated Caries Risk	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-269	Preventive Care and Screening: Influenza Immunization	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-271	Immunization for Adolescents	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-272	Adults (18+ years) Immunization status	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-280	Chlamydia Screening in Women (CHL)	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-343	Syphilis positive screening rates	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-345	Gonorrhea Positive Screening Rates	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63

L1-347	Latent Tuberculosis Infection (LTBI) treatment rate	0	0	0	3	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
L1-400	Tobacco Use and Help with Quitting Among Adolescents	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
3_158771901.3.100	Utilization of Services: Children	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
3_158771901.3.203	HPV vaccine for adolescents	0	0	0	1	\$304,432.53	\$415,135.26	\$359,783.90	\$470,486.63
3_158771901.3.205	Children and Adolescents' Access to Primary Care Practitioners (CAP)	0	0	0	1	\$304,432.48	\$415,135.33	\$359,783.83	\$470,486.67
Total	N/A	0	0	0	18	\$4,870,920.43	\$6,642,164.23	\$5,756,542.33	\$7,527,786.12

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
L1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	
L1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	
L1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	
L1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	
L1-231	Preventive Services for Children at Elevated Caries Risk	
L1-269	Preventive Care and Screening: Influenza Immunization	
L1-271	Immunization for Adolescents	
L1-272	Adults (18+ years) Immunization status	
L1-280	Chlamydia Screening in Women (CHL)	
L1-343	Syphilis positive screening rates	
L1-345	Gonorrhea Positive Screening Rates	
L1-347	Latent Tuberculosis Infection (LTBI) treatment rate	
L1-400	Tobacco Use and Help with Quitting Among Adolescents	
3_158771901.3.100	Utilization of Services: Children	
3_158771901.3.203	HPV vaccine for adolescents	
3_158771901.3.205	Children and Adolescents' Access to Primary Care Practitioners (CAP)	
L1-272	Adults (18+ years) Immunization status	
L1-280	Chlamydia Screening in Women (CHL)	

L1-343	Syphilis positive screening rates	
L1-345	Gonorrhea Positive Screening Rates	
L1-347	Latent Tuberculosis Infection (LTBI) treatment rate	
L1-400	Tobacco Use and Help with Quitting Among Adolescents	
3_158771901.3.100	Utilization of Services: Children	
3_158771901.3.203	HPV vaccine for adolescents	
3_158771901.3.205	Children and Adolescents' Access to Primary Care Practitioners (CAP)	

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 LHDs

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)
Time Since Routine Checkup	\$189,776.12	\$63,258.71
High Blood Pressure Status	\$189,776.12	\$63,258.71
Diabetes Status	\$189,776.12	\$63,258.71
Overweight or Obese	\$189,776.12	\$63,258.71
Smoker Status	\$189,776.12	\$63,258.71
Selected Immunizations	\$189,776.12	\$63,258.71
Prevention of Sexually Transmitted Diseases	\$189,776.13	\$63,258.69

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: William G Hudson
Performing Provider: Harris County Public Health and Environmental Services
Date: 3/9/2018

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

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

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

Provider Entry

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

Category B

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

Category C Selection

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

Category C Additional Details

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

Category C Valuation

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

Category A Core Activities

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

Category D

Section 1: Statewide Reporting Measure Bundle for Local Health Departments (LHDs)	Complete
Section 2: Verification	Complete

IGT Entry

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

Summary and Certification

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