



## *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

## DY9-10 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: DY9-10 Total Valuation and Updated Minimum Point Threshold (MPT)	Complete

### Section 1: Performing Provider Information

RHP:	3			
TPI and Performing Provider Name:	081522701 - Texana Center			
Performing Provider Type:	Community Mental Health Center (CMHC)			
Ownership:	Non-State Owned Public			
TIN:	17602532875007			
Physical Street Address:	4910 Airport Avenue, Building D			
City:	Rosenberg			
Zip:	77471			
Primary County:	Fort Bend			
	Waller	Austin	Colorado	Matagorda
Additional counties being served (optional):	Wharton			

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

### Section 2: Lead Contact Information

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

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

### Section 3: Optional Withdrawal From DSRIP

Please select an option below. By selecting "Yes - Withdraw from DSRIP", this organization acknowledges it understands that any DY9-10 DSRIP funds will be redistributed within the RHP and it will no longer have access to those DSRIP funds.

Do Not Withdraw from DSRIP

### Section 4: Performing Provider Overview

Performing Provider Description:	Texana Center is a Community Mental Health Center serving six counties. Texana provides services to those with behavioral healthcare (BH) needs as well as those with intellectual and development disabilities (IDD). Texana Center provides outpatient services to those with mental illness including rehabilitative services, case management services along with psychiatric and counseling services in accordance with HHSC's Texas Resilience and Recovery model of service delivery. Texana Center as the Local Mental Health Authority is the safety net provider for mental health crisis services and is the gate keeper for admissions to the state hospital system. In addition to behavioral healthcare services, Texana is the Local Intellectual and Developmental Authority and provides service coordination and completes determination of intellectual and development designation for individuals who may be entitled to state funded services. Texana operates an IDD provider services division consisting of learning centers and IDD group homes for individuals in IDD waiver programs. Texana also operates several specialized programs including the Children's Center for Autism, Behavior Improvement Center, Social Skills Groups for adults with autism, the Behavior Training and Treatment Center, and Early Childhood Intervention.
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Overall DSRIP Goals:	Texana's overall DSRIP goals have been to meet the needs of those with mental illness by purchasing and opening a Crisis Center (extended observation unit and crisis residential unit) to serve those in crisis in the least restrictive setting rather than hospitalization. In addition, primary care integration provides primary care medical services to uninsured individuals in our six county service area. Prior to DSRIP, many of these individuals suffered with untreated and uncontrolled hypertension, diabetes, and other chronic but treatable diseases. These services have further reduced emergency room visits for these individuals. These individuals are uninsured and already in our behavioral healthcare services and are now able to receive primary healthcare services.
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Alignment with regional community needs assessment:	The 2017 Community Needs Assessment completed by the RHP 3 anchor continues to speak to the needs for behavioral healthcare services and primary care services in our catchment area and our DSRIP goals and core activities continue to address these needs. Texana Center continues to focus on crisis services for individuals with behavioral healthcare needs and diverting these individuals from jails and emergency rooms by providing an alternative setting to stabilize individuals. In addition, the primary care integration services focus on acute primary care issues as well as chronic primary care issues primarily uncontrolled hypertension and uncontrolled diabetes. By integrating primary care and behavioral healthcare, we are working on meeting our region's identified goals. Per Region 3's updated Community Health Needs Assessment, Texana Center is addressing "The lack of primary and specialty care Providers, particularly for uninsured individuals and people requiring behavioral health services, resulting in insufficient access to care and frequent long wait lists for services." In addition, Texana is addressing "Behavioral Health needs continue to grow throughout the Region, which lacks both the providers and facilities to adequately meet the demand for behavioral health care services." By providing a primary care service provider, we are meeting the needs of over 500 individuals with behavioral health needs and primary care needs that otherwise would not be addressed. With the Crisis Center, we are providing a facility for individuals to stabilize rather than referring to more costly inpatient psychiatric facilities.
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#### Section 5: DY9-10 Total Valuation and Updated Minimum Point Threshold (MPT)

Initial DY9 DSRIP Valuation	Initial DY10 DSRIP Valuation	Initial DY9-10 MPT
\$10,656,233.59	\$9,090,313.69	18

Would you like to decrease the total valuation?

No

If a provider withdraws in your RHP, would you be willing to increase the total valuation and MPT by the following?

Provider Selection:	Increase DY10 Valuation up to:	Updated MPT:
Yes	\$9,249,999.99	18
Yes	\$9,749,999.99	19
Yes	\$10,249,999.99	20

<-- Note: This is your current MPT

Yes	\$10,749,999.99	21
Yes	\$11,249,999.99	22
Yes	\$11,749,999.99	23
No	\$12,249,999.99	24

**At this point, please stop and submit your RHP Plan Update to your RHP's Anchor Entity for calculating available funds for redistribution. Once you receive information from your Anchor regarding additional funds available, you may continue.**

Have you received information from your Anchor regarding additional funds available?

Yes

	DY9	DY10
Additional DSRIP Funds from Withdrawn Providers	\$0.00	\$0.00

	Category Percentage (%)	DY9-10 DSRIP Valuation Distribution	
		DY9	DY10
Category A	0%	\$0.00	\$0.00
Category B	10%	\$1,065,623.36	\$909,031.37
Category C	75%	\$7,992,175.19	\$6,817,735.27
Category D	15%	\$1,598,435.04	\$1,363,547.05
Total	100%	\$10,656,233.59	\$9,090,313.69

Original MPT:

Adjusted MPT based on updated valuation:

18
18

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

Yes

Generate Worksheets

## DY9-10 Provider RHP Plan Update Template - Category B

### Progress Tracker

Section 1: System Definition

Complete

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

Complete

### Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public
Category B valuation in DY9:	\$1,065,623.36
Category B valuation in DY10:	\$909,031.37

### Section 1: System Definition

Would you like to modify the System Definition?

No

### Community Mental Health Centers - Required Components

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

Please enter a description of this System Component.

Services provided in the six county area served by Texana Center to people with behavioral health issues and intellectual and developmental disabilities.

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

Please enter a description of this System Component.

Services provided in the six county area served by Texana Center to people with behavioral health issues and intellectual and development disabilities. Included in this component are the following clinics: Behavioral Healthcare Clinic at Rosenberg, Behavioral Healthcare Clinic at Sugar Land, Behavioral Healthcare Clinic at Bay City, Behavioral Healthcare Clinic at Wharton, Behavioral Healthcare Clinic at Columbus, and the Behavioral Healthcare Clinic at Brookshire

### Community Mental Health Centers - Optional Components

Optional System Component	Would you like to select this component?
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Hospital	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
Contracted Clinic	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
School-based Clinic	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
Contracted Inpatient Beds	Yes
Please enter a description of this System Component.	
Texana Center receives funding from HHSC to purchase beds in local (primarily Houston) psychiatric hospitals for individuals who meet inpatient criteria during a crisis screening. Currently, these hospitals include West Park Springs in Richmond, West Oaks Hospital, Behavioral Hospital of Bellaire, Sun Behavioral Houston, Intracare North, Houston Behavioral Healthcare Hospital and St. Joseph's Hospital all in Houston.	
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
State-funded Community Hospital	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
Community Institution for Mental Disease (IMD)	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
General Medical Hospital	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
State Mental Health Facility	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
State Mental Retardation Facility	No
<b>Optional System Component</b>	<b>Would you like to select this component?</b>
Other	No

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

	DY7	DY8
MLIU PPP	6,818	6,818
Total PPP	10,223	10,223

Please indicate the population included in the MLIU PPP

<input checked="" type="checkbox"/> Medicaid	<input checked="" type="checkbox"/> Dual Eligible (Medicaid and Medicare)	<input checked="" type="checkbox"/> CHIP	<input type="checkbox"/> Local Coverage Option (Below 200% FPL)	<input type="checkbox"/> Insured on the Exchange (Below 200% FPL)
<input checked="" type="checkbox"/> Low-Income (Below 200% FPL)	<input type="checkbox"/> Self-Pay	<input checked="" type="checkbox"/> Uninsured	<input type="checkbox"/> Other (please explain below)	

Would you like to modify the MLIU PPP goal and/or Total PPP?

No

Please fill out the applicable fields below:

Estimated Medicaid individuals served in DY7	4,940
Estimated Low-income or Uninsured Individuals served in DY7	1,878
Estimated Medicaid individuals served in DY8	4,968
Estimated Low-income or Uninsured Individuals served in DY8	1,850
MLIU PPP Goal for each DY (DY9 and DY10):	6,818
Forecasted Medicaid individuals served in each DY for DY9-10	4,968
Forecasted Low-income or Uninsured individuals served in each DY for DY9-10	1,850
Average Total PPP in each DY	10,223
MLIU percentage of Total PPP	66.69%
Allowable Variation	2.22%

\*The MLIU percentage and forecasted Medicaid and LIU counts are for informational purposes only.

## DY9-10 Provider RHP Plan Update Template - Category C Selection

Progress Tracker				
Section 2: Selection of Measures for Community Mental Health Centers	Complete	Note: you must confirm selections at the bottom of the page to finish.	MPT	18
Section 3: Selection Overview	Complete		Points Selected	23
Section 4: Measure Exemption Requests	Complete		Measures Selected	13
Minimum Selection Requirements Met	Yes		Maximum Deletions Met	Y
MPT Met	Yes		Clinical Outcome Selected	Y
			At least 2 measures selected	Y

## Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public
Category C valuation in DY9:	\$7,992,175.19
Category C valuation in DY10:	\$6,817,735.27

### MINIMUM POINT THRESHOLD (MPT):

18

Each Performing Provider must maintain or select Measure Bundles/measures to meet or exceed their MPT to maintain their valuation that was confirmed on the Provider Entry tab. A maximum of 20 points from DY7-8 to DY9-10 may be deleted with good cause. There is no limit on the number of added bundles or measures.

## Section 1: Attributed Population

### Attributed Population for Community Mental Health Center (CMHC)

- a. All individuals 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 OR
  - iii. Other populations defined by the CMHC in the RHP Plan Submission and approved by HHSC

## Section 2: Selection of Measures for Community Mental Health Centers

### Standard CMHC Menu Options

Select Measure (Yes/No)	Measure Volume Options for Goal Setting and Achievement	Bundle-Measure ID	Measure Name	Measure Category	Point Value	Additional Points for State Priority Measure
No	MLIU denominator with significant volume	M1-100	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-103	Controlling High Blood Pressure	Clinical Outcome	3	1
Yes - Continue Measure	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	Process	1	1
No	MLIU denominator with significant volume	M1-115	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-124	Medication Reconciliation Post-Discharge	Process	1	0
No	MLIU denominator with significant volume	M1-125	Antidepressant Medication Management (AMM-AD)	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-146	Screening for Clinical Depression and Follow-Up Plan (CDF-AD)	Process	1	0



Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	Process	1	0
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-160	Follow-Up After Hospitalization for Mental Illness	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-165	Depression Remission at Twelve Months	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-180	Adherence to Antipsychotics for Individuals with Schizophrenia (SAA-AD)	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-181	Depression Response at Twelve Months- Progress Towards Remission	Clinical Outcome	3	1
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-182	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	Process	1	1
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-203	Hepatitis C: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk	Process	1	1
No	MLIU denominator with significant volume	M1-205	Third next available appointment	Process	1	0
No	MLIU denominator with significant volume	M1-207	Diabetes care: BP control (<140/90mm Hg)	Clinical Outcome	3	0
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	Process	1	0
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	Process	1	1
No	MLIU denominator with significant volume	M1-216	Risk Adjusted Behavioral Health/ Substance Abuse 30-Day Readmission Rate	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-241	Decrease in mental health admissions and readmissions to criminal justice settings such as jails or prisons	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-255	Follow-up Care for Children Prescribed ADHD Medication (ADD)	Clinical Outcome	3	0
No	MLIU denominator with significant volume	M1-256	Initiation of Depression Treatment	Process	1	0
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-257	Care Planning for Dual Diagnosis	Process	1	0
No	MLIU denominator with significant volume	M1-259	Assignment of Primary Care Physician to Individuals with Schizophrenia	Process	1	0
No	MLIU denominator with significant volume	M1-260	Annual Physical Exam for Persons with Mental Illness	Process	1	1
No	MLIU denominator with significant volume	M1-261	Assessment for Substance Abuse Problems of Psychiatric Patients	Process	1	1
No	MLIU denominator with significant volume	M1-262	Assessment of Risk to Self/ Others	Process	1	0
No	MLIU denominator with significant volume	M1-263	Assessment for Psychosocial Issues of Psychiatric Patients	Process	1	0
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-264	Vocational Rehabilitation for Schizophrenia	Process	1	0
No	MLIU denominator with significant volume	M1-265	Housing Assessment for Individuals with Schizophrenia	Process	1	1

No	MLIU denominator with significant volume	M1-266	Independent Living Skills Assessment for Individuals with Schizophrenia	Process	1	0
No	MLIU denominator with significant volume	M1-280	Chlamydia Screening in Women (CHL)	Process	1	1
No	MLIU denominator with significant volume	M1-286	Depression Remission at Six Months	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-287	Documentation of Current Medications in the Medical Record	Process	1	1
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	Process	1	1
No	MLIU denominator with significant volume	M1-306	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH)*	Process	1	0
Yes - Continue Measure	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	Process	1	1
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	Process	1	1
No	MLIU denominator with significant volume	M1-339	Alcohol & Other Drug Use Disorder Treatment Provided or Offered at Discharge SUB-3 / Alcohol and Other Drug Use Disorder Treatment at Discharge SUB-3a	Process	1	1
No	MLIU denominator with significant volume	M1-340	Substance use disorders: Percentage of patients aged 18 years and older with a diagnosis of current opioid addiction who were counseled regarding psychosocial AND pharmacologic treatment options for opioid addiction within the 12 month reporting period	Process	1	1
No	MLIU denominator with significant volume	M1-341	Substance use disorders: Percentage of patients aged 18 years and older with a diagnosis of current alcohol dependence who were counseled regarding psychosocial AND pharmacologic treatment options for alcohol dependence within the 12 month reporting period	Process	1	1
No	MLIU denominator with significant volume	M1-342	Time to Initial Evaluation: Evaluation within 10 Business Days	Process	1	0
No	MLIU denominator with significant volume	M1-385	Assessment of Functional Status or QoL (Modified from NQF# 0260/2624)	Quality of Life	1	0
No	MLIU denominator with significant volume	M1-386	Improvement in Functional Status or QoL (Modified from PQRS #435)	Quality of Life	1	0
No	MLIU denominator with significant volume	M1-387	Reduce Emergency Department visits for Behavioral Health and Substance Abuse (Reported as two rates)	Clinical Outcome	3	1
No	MLIU denominator with significant volume	M1-390	Time to Initial Evaluation: Mean Days to Evaluation	Process	1	0
Yes - Continue Measure	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	M1-400	Tobacco Use and Help with Quitting Among Adolescents	Process	1	1
No	MLIU denominator with significant volume	M1-405	Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use	Process	1	1

Total overall selected points:	22
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Total Overall Selected Points:	43
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You have met the minimum selection requirements.

You have selected enough measures to meet or exceed your organization's MPT.

Are you finished making your selections?

Yes

#### Section 4: Measure Exemption Requests

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.

***No new bundles/measures were selected for DY9-DY10, therefore this section is not applicable***

Of note, if "Before DSIR: DYS-6" or "DYS-7-8" is selected for "Implementation Date", then the options for "Implementation Status" will automatically be restricted to "Implemented in small scale; Implemented throughout system; or Implemented then discontinued". If instead, "Planned for DYS-10" is selected for "Implementation Date", then the option for "Implementation Status" will automatically select "Not yet implemented". If instead, "Not applicable" is selected for "Implementation Date", then the option for "Implementation Status" will automatically select "Not applicable".

Related Strategies			Related Strategies Lists																	
			M1-100, 105, 115, 147, 182, 207, 210, 259, 260, 280		M1-124, 160, 216, 287, 287		M1-211, 215, 305, 306, 400		M1-125, 146, 165, 181, 256, 262, 286, 319		M1-180, 263, 264, 265, 266		M1-100, 237, 261, 317, 339, 340, 341, 405							
			Physical Health Comorbidities (CMHC)		Mental Health and Emergency Department Utilization (CMHC)		Children and Adolescents (CMHC)		Serious Mental Illness: Depression (CMHC)		Serious Mental Illness: Schizophrenia (CMHC)		Dual Diagnosis and Substance Use Disorder (SUD) Treatment (CMHC)							
Related Strategies ID	Related Strategies Description	Related Strategies Theme	Implementation Date	Implementation Status	Implementation Date	Implementation Status	Implementation Date	Implementation Status	Implementation Date	Implementation Status	Implementation Date	Implementation Status	Implementation Date	Implementation Status						
1.00	One day and/or one week appointments in the outpatient setting	Access to Care	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
1.01	Eight-hour weekend appointments in the outpatient setting	Access to Care	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
1.10	Integration or co-location of primary care and specialty care (physical health) with services in the outpatient setting	Access to Care	2019-20	Implemented throughout system	2019-20	Implemented throughout system	2019-20	Implemented throughout system	2019-20	Implemented throughout system	2019-20	Implemented throughout system	2019-20	Implemented throughout system						
1.11	Integration to provide virtual medical appointments and/or consultations with a primary care provider	Access to Care	2019-20	Implemented throughout system	Not applicable	Not applicable	Not applicable	Not applicable	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale						
1.12	Integration to provide virtual medical appointments and/or consultations with a specialty care physician (physical health only)	Access to Care	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale						
1.20	Integration or co-location of primary care and psychiatric services in the outpatient setting	Access to Care	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
1.21	Integration to provide virtual medical appointments and/or consultations with a psychiatric provider	Access to Care	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
1.22	Integration or co-location of psychiatry and substance use disorder services in the outpatient setting	Access to Care	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
1.30	Mobile clinic or other community-based delivery model to provide care to areas of the community (not just food pantries)	Access to Care	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
2.00	Culturally and linguistically appropriate care planning for patients	Care Coordination	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
2.01	Pre-visit planning and/or standing order protocols (e.g. for screenings/assessments, immunization status, tests/labs, prescription changes/labs), scheduling before or after, evidence-based practices, etc.)	Care Coordination	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
2.02	Integrated care planning with the S.M.I. or other relevant care platform (e.g. for screenings/assessments, immunization status, tests/labs, prescription changes/labs), scheduling before or after, evidence-based practices, etc.)	Care Coordination	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
2.30	Care team includes personnel in a care coordination role not requiring clinical licensure (e.g. non-clinical social worker, community health worker, medical assistant, etc.)	Care Coordination	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
2.31	Care team includes personnel in a care coordination role requiring clinical licensure (e.g. registered nurse, licensed clinical social worker, etc.)	Care Coordination	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
2.11	Positive, calm, or other similar programming staffed by personnel with clinical licensure to answer questions for patients (and their families) related to medications, clinical trials, care coordination, etc.	Care Coordination	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
2.20	Formal closed-loop process for scheduling a follow-up visit with a primary care provider and/or assigned a primary care provider when none is identified	Care Coordination	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
2.30	Formal closed-loop process for scheduling referral visits as needed	Care Coordination	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
2.40	Care sharing connectivity or arrangement with Medicaid Managed Care Organization(s) for patient claims data	Care Coordination	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
2.50	Care sharing connectivity across care settings within provider's integrated delivery system (includes hospital, outpatient, post-acute, urgent care, pharmacy, etc.) for patient medical records	Care Coordination	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
2.51	Care sharing connectivity or Health Information Exchange (HIE) arrangement across care settings within provider's affiliated/integrated delivery system (includes hospital, outpatient, post-acute, urgent care, pharmacy, etc.) for patient medical records	Care Coordination	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
2.60	Formal closed-loop process for coordinating the transition from hospital to adult care	Care Coordination	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
3.01	Formal assessment and/or practice selection of patients using a risk stratification method (i.e. strategically targeting patients with missing or incomplete screenings, immunizations, assessments, lab work, etc.)	Data Analytics	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
3.02	Formal assessment and/or practice selection of patients using a risk stratification method (i.e. strategically targeting patients based on 16 factors associated with worsening disease state)	Data Analytics	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
3.40	Timeline or registry to track quality and clinical decision data on patients	Data Analytics	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale						
3.50	Model of assessment "feedback" rates	Data Analytics	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
3.60	Formal partnership or arrangement with post-acute care facilities (e.g. skilled nursing facility, long-term rehabilitation facility, long-term acute care hospital, mental health agency, hospice, etc.) to track/track quality measures such as length of stay and readmission rates, etc.	Data Analytics	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
3.60	Formal partnership or arrangement with school/college districts to track/share data such as absenteeism, classroom behaviors, etc.	Data Analytics	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
4.00	Care team includes a clinical pharmacist(s)	Disease Management	Before 2009	Implemented in small scale	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented in small scale	Before 2009	Implemented in small scale	Before 2009	Implemented in small scale						
4.01	Care team includes a behavioral health professional such as a psychologist, licensed clinical social worker, licensed counselor (LPC), etc.	Disease Management	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
4.02	Care team includes a registered dietitian(s)	Disease Management	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
4.10	Care team includes at least one traditional appointment format that includes at least one provider and a group of patients with shared clinical and/or social experiences	Disease Management	Before 2009	Implemented in small scale	Before 2009	Implemented in small scale	Before 2009	Implemented in small scale	Before 2009	Implemented in small scale	Before 2009	Implemented in small scale	Before 2009	Implemented in small scale						
4.20	Formal visit model of providing clinical services at a patient's residence (one for medication for specific patient subpopulations)	Disease Management	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
4.30	Formal care for patients focused on disease self-management (e.g. lifestyle changes, symptom recognition, clinical trigger protocols, etc.)	Disease Management	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
4.40	Formal care for patients focused on diet, nutrition counseling, and/or cooking	Disease Management	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale						
4.50	Formal care for patients focused on physical activity	Disease Management	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale						
4.60	Formal care for patients focused on social determinants of health (e.g. food insecurity, housing, etc.)	Disease Management	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale						
4.70	Formal care for patients focused on social determinants of health (e.g. food insecurity, housing, etc.)	Disease Management	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale	2019-20	Implemented in small scale						
5.00	Formal partnership or arrangement with food resources to support patient health (e.g. food bank, grocery store, etc.)	Social Determinants of Health	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
5.10	Formal partnership or arrangement with food resources to support patient health (e.g. food bank, grocery store, etc.)	Social Determinants of Health	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
5.11	Formal partnership or arrangement with housing resources to support patient health (e.g. affordable housing units, transitional housing, rental assistance, etc.)	Social Determinants of Health	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented	Planned for 2019-20	Not yet implemented						
5.12	Formal partnership or arrangement with housing resources to support patient health (e.g. affordable housing units, transitional housing, rental assistance, etc.)	Social Determinants of Health	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
5.13	Formal partnership or arrangement with housing resources to support patient health (e.g. affordable housing units, transitional housing, rental assistance, etc.)	Social Determinants of Health	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
5.20	Formal partnership or arrangement with transportation resources to support patient health (e.g. affordable housing units, transitional housing, rental assistance, etc.)	Social Determinants of Health	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system	Before 2009	Implemented throughout system						
5.21	Formal partnership or arrangement with transportation resources to support patient health (e.g. affordable housing units, transitional housing, rental assistance, etc.)	Social Determinants of Health	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						
5.30	Formal partnership or arrangement with school/college districts to collaborate on health-promoting initiatives (e.g. addressing environmental triggers, healthy lunch options, field day activities, etc.)	Social Determinants of Health	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable						

## DY9-10 Provider RHP Plan Update Template - Category A Core Activities

### Progress Tracker

Section 1: Core Activities

All Selected Measure Bundles/Measures Associated with at Least One Core Activity

Complete

Complete

### Performing Provider Information

RHP:

3

TPI and Performing Provider Name:

081522701 - Texana Center

Performing Provider Type:

Community Mental Health Center (CMHC)

Ownership:

Non-State Owned Public

### Section 1: Core Activities

#### Previous Core Activities

#### Core Activity #1

Do you want to edit or delete this Core Activity?

No

1) Please select the grouping for this Core Activity.

Behavioral Health Crisis Stabilization Services

a) Please select the name of this Core Activity.

Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.

b) Please enter a description of this Core Activity

This core activity is the continuation of the Crisis Center. The Crisis Center is an 8 bed extended observation unit and a 14 bed crisis residential unit where individuals experiencing a mental health crisis or on the verge a mental health crisis go in lieu of an admission in a psychiatric hospital. This activity involves over 50 providers (telemedicine psychiatrists, "warm body" psychiatrists, LPHA's and QMHP's). In addition to these providers, the Crisis Center is staffed with RN's, LVN's and rounded by a primary care Nurse Practitioner.

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

Through crisis screenings, identify patients in need of crisis stabilization services and appropriate for the Crisis Center to reduce hospital recidivism and increase jail diversion.

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

Utilize a crisis screening tool including medical exclusionary criteria to determine appropriateness for the Crisis Center.

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

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

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

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).

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

v) Please describe the fifth Secondary Driver for the above Core Activity (optional).

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

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

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

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

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

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

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

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

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

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

No

## Core Activity #2

Do you want to edit or delete this Core Activity?

No

2) Please select the grouping for this Core Activity.

Access to Primary Care Services

a) Please select the name of this Core Activity.

Integrated physical and behavioral health care services

b) Please enter a description of this Core Activity

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

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

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

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

Implement processes in clinic workflow that incorporates patient education delivery.

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

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

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

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).

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

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

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

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

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

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

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



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

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

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

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

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

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

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

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

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

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

v) Please describe the fifth Secondary Driver for the above Core Activity (optional).

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

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

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

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

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

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

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

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

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

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

No

### **New Core Activities**

Please enter your organization's number of new Core Activities to add:

0

**DY9-10 Provider RHP Plan Update Template - DSRIP Valuation Summary****Performing Provider Information**

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

**Section 1: Valuation by Category and Measure**

Category / Measure / Measure Bundle Item:	DY9	DY10
<b>Category B - MLIU PPP</b>	<b>\$1,065,623.36</b>	<b>\$909,031.37</b>
M1-105	\$614,782.71	\$524,441.17
M1-147	\$614,782.71	\$524,441.17
M1-160	\$614,782.71	\$524,441.17
M1-182	\$614,782.71	\$524,441.17
M1-203	\$614,782.71	\$524,441.17
M1-210	\$614,782.71	\$524,441.17
M1-211	\$614,782.71	\$524,441.17
M1-257	\$614,782.71	\$524,441.17
M1-264	\$614,782.71	\$524,441.17
M1-305	\$614,782.71	\$524,441.17
M1-317	\$614,782.71	\$524,441.17
M1-319	\$614,782.71	\$524,441.17
M1-400	\$614,782.67	\$524,441.23
<b>M1 Total</b>	<b>\$7,992,175.19</b>	<b>\$6,817,735.27</b>
<b>Category C Total:</b>	<b>\$7,992,175.19</b>	<b>\$6,817,735.27</b>
Effective Crisis Response	\$319,687.01	\$272,709.41
Crisis Follow up	\$319,687.01	\$272,709.41
Community Tenure (Adult and Child/Youth)	\$319,687.01	\$272,709.41
Reduction in Juvenile Justice Involvement	\$319,687.01	\$272,709.41
Adult Jail Diversion	\$319,687.00	\$272,709.41
<b>Category D Total:</b>	<b>\$1,598,435.04</b>	<b>\$1,363,547.05</b>
<b>DSRIP Total</b>	<b>\$10,656,233.59</b>	<b>\$9,090,313.69</b>

**Section 2: Category C Milestone Valuation**

Bundle-Measure ID	Denominator Volume	DY9 Category C Valuation: \$7,992,175.19							DY10 Category C Valuation: \$6,817,735.27					
		DY9 Measure Total	DY9 Milestone IDs						DY10 Measure Total	DY10 Milestone IDs				
			RM-1.B	RM-4	AM-9.1	AM-9.2	AM-9.3	IM-3		RM-5	AM-10.1	AM-10.2	AM-10.3	IM-4
M1-105	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-147	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-160	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$230,543.52	\$230,543.51	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$196,665.44	\$196,665.44	\$0.00	\$0.00
M1-182	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-203	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-210	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-211	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$153,695.68	\$153,695.68	\$153,695.67	\$0.00	\$524,441.17	\$131,110.29	\$131,110.29	\$131,110.29	\$131,110.30	\$0.00
M1-257	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-264	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-305	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-317	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00

M1-319	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.71	\$0.00	\$153,695.68	\$461,087.03	\$0.00	\$0.00	\$0.00	\$524,441.17	\$131,110.29	\$393,330.88	\$0.00	\$0.00	\$0.00
M1-400	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$614,782.67	\$0.00	\$153,695.68	\$461,086.99	\$0.00	\$0.00	\$0.00	\$524,441.23	\$131,110.29	\$393,330.94	\$0.00	\$0.00	\$0.00

DY9-10 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:	3
TPI and Performing Provider Name:	081522701 - Texana Center
Performing Provider Type:	Community Mental Health Center (CMHC)
Ownership:	Non-State Owned Public

Section 1: IGT Entities

In order to delete an existing IGT, delete the name of the IGT from cell F21, F29, etc.

IGT RHP	IGT Name	IGT TPI (if available)	IGT TIN	Affiliation Number
3	Texana Center	081522701	17602532875007	100-13-0000-00135

Contact #	Contact Name	Street Address	City	Zip	Email	Phone Number	Phone Extension	Lead Contact or Both
1	Amanda Darr	4910 Airport Avenue, Building D	Rosenberg	77471	amanda.darr@texanacenter.com	281-239-1350		Both
2								
3								

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

Funding Category	IGT Name	IGT TIN	IGT Affiliation #	DY9 % IGT Allocated	DY10 % IGT Allocated	Total Estimated DY9 Allocation (FMAP 60.89/IGT 39.11)	Total Estimated DY10 Allocation (FMAP 60.89/IGT 39.11)
Category B	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$416,765.30	\$355,522.17
M1-105	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-147	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-160	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-182	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-203	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-210	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-211	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-257	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-264	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-305	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-317	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-319	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.52	\$205,108.94
M1-400	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$240,441.50	\$205,108.97
Category D	Texana Center	17602532875007	100-13-0000-00135	100.00%	100.00%	\$625,147.94	\$533,283.25
Total						\$4,167,652.96	\$3,555,221.68

Your funding allocations sum to 100%.

Have the IGT Entities and funding percentages been reviewed and updated as needed?	Yes
--	-----

Section 3: Certification

By my signature below, I certify the following facts:

- I am legally authorized to sign this document on behalf of my organization;
- I have read and understand this document.

Name:	Amanda Darr
IGT Organization:	Texana Center
Date:	10/31/2019

## DY9-10 Provider RHP Plan Update Template -Summary and Certification

### Progress Tracker

Section 1: DY9-10 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

Section 6: Certification

Complete

Complete

Complete

Complete

Complete

Complete

### Performing Provider Information

RHP:

3

TPI and Performing Provider Name:

081522701 - Texana Center

Performing Provider Type:

Community Mental Health Center (CMHC)

Ownership:

Non-State Owned Public

### Section 1: DY9-10 DSRIP Valuation

	DY9-10 DSRIP Valuation Distribution	
	DY9	DY10
Category A	\$0.00	\$0.00
Category B	\$1,065,623.36	\$909,031.37
Category C	\$7,992,175.19	\$6,817,735.27
Category D	\$1,598,435.04	\$1,363,547.05
Total	\$10,656,233.59	\$9,090,313.69

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

Did provider request a modification to the System Definition for DY9-10?

No

	Forecasted Medicaid	Forecasted LIU	MLIU PPP	Total PPP	MLIU Percentage of Total PPP	Allowable Variation %
DY9 Estimated	4,968	1,850	6,818	10,223	66.69%	2.22%
DY10 Estimated	4,968	1,850	6,818	10,223	66.69%	2.22%

Did provider request a modification to MLIU PPP for DY9-10?

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	DY9 Valuation	DY10 Valuation
M1-105	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	0	0	0	2	\$614,782.71	\$524,441.17
M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	0	0	0	1	\$614,782.71	\$524,441.17
M1-160	Follow-Up After Hospitalization for Mental Illness	0	0	0	3	\$614,782.71	\$524,441.17
M1-182	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	0	0	0	2	\$614,782.71	\$524,441.17
M1-203	Hepatitis C: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk	0	0	0	2	\$614,782.71	\$524,441.17
M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	0	0	0	1	\$614,782.71	\$524,441.17
M1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	0	0	0	2	\$614,782.71	\$524,441.17
M1-257	Care Planning for Dual Diagnosis	0	0	0	1	\$614,782.71	\$524,441.17
M1-264	Vocational Rehabilitation for Schizophrenia	0	0	0	1	\$614,782.71	\$524,441.17
M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	0	0	0	2	\$614,782.71	\$524,441.17

M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	0	0	0	2	\$614,782.71	\$524,441.17
M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	0	0	0	2	\$614,782.71	\$524,441.17
M1-400	Tobacco Use and Help with Quitting Among Adolescents	0	0	0	2	\$614,782.67	\$524,441.23
Total	N/A	0	0	0	23	\$7,992,175.19	\$6,817,735.27

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	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.; Integrated physical and behavioral health care services
M1-147	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.; Integrated physical and behavioral health care services
M1-160	Follow-Up After Hospitalization for Mental Illness	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.
M1-182	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	Integrated physical and behavioral health care services
M1-203	Hepatitis C: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk	Integrated physical and behavioral health care services
M1-210	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.; Integrated physical and behavioral health care services
M1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	Integrated physical and behavioral health care services
M1-257	Care Planning for Dual Diagnosis	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.; Integrated physical and behavioral health care services
M1-264	Vocational Rehabilitation for Schizophrenia	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.
M1-305	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-CH)	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.
M1-317	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.; Integrated physical and behavioral health care services
M1-319	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (eMeasure)	Implementation of community-based crisis stabilization alternatives that meet the behavioral health needs of the patients.
M1-400	Tobacco Use and Help with Quitting Among Adolescents	Integrated physical and behavioral health care services

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

##### Statewide Reporting for CMHCs

Measure	Category D DY9 Valuation	Category D DY10 Valuation
Effective Crisis Response	\$319,687.01	\$272,709.41
Crisis Follow up	\$319,687.01	\$272,709.41
Community Tenure (Adult and Child/Youth)	\$319,687.01	\$272,709.41
Reduction in Juvenile Justice Involvement	\$319,687.01	\$272,709.41
Adult Jail Diversion	\$319,687.01	\$272,709.41

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.

Yes

#### Section 6: Certification

By my signature below, I certify the following facts:

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

Name:

Shena Ureste

Performing Provider:

Texana Center

Date:

10/31/2019

## DY9-10 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: DY9-10 Total Valuation and Updated Minimum Point Threshold (MPT)	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 2: Selection of Measures for Community Mental Health Centers	Complete
Section 3: Selection Overview	Complete
Section 4: Measure Exemption Requests	Complete
Minimum Selection Requirements Met	Yes
MPT Met	Yes

#### Category C Related Strategies

Section 1: Related Strategies	Complete
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#### Category A Core Activities

Section 1: Core Activities	Complete
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All Selected Measure Bundles/Measures Associated with at Least One Core Activity

Complete

### IGT Entry

Section 1: IGT Entities

Complete

Section 2: IGT Funding

Complete

Section 3: Certification

Complete

### Summary and Certification

Section 1: DY9-10 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

Complete

Section 6: Certification

Complete