



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:	082006001 - Baylor College of Medicine Grants and Contracts De		
Performing Provider Type:	Physician Practice affiliated with an Academic Health Science Center (AHSC)		
Ownership:	Private		
TIN:	17416138786000		
Physical Street Address:	One Baylor Plaza MS BCM106A		
City:	Houston		
Zip:	77030		
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:	Robert Corrigan	Katie McAfee	Allyssa Abacan
Street Address:	One Baylor Plaza MS BCM106A	One Baylor Plaza MS BCM191A	Teen Health Clinic 1504 Taub Loop
City:	Houston	Houston	Houston
Zip:	77030	77030	77030
Email:	corrigan@bcm.edu	Catherine.McAfee@bcm.edu	abacan@bcm.edu
Phone Number:	713-798-6392	713-798-2557	713-873-7306
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:	The Baylor College of Medicine Teen Health Clinic (BTHC) provides primary and reproductive health care to adolescents 13-24 years old in the greater Houston area. BTHC currently operates in eleven locations. These clinics are located at two county hospitals (Ben Taub and Lyndon B. Johnson), five high school campuses (Wisdom High School in the Gulfport Area, Chavez and Austin High School in the East End, and Worthing High School and Sterling High School in South East Houston), one charter school (Tejano Center in South East Houston), and three community centers (Lawn in Acres Home, Cavalcade in Kashmere Gardens, and Cullen Health Center in Third Ward). The clinic focuses on both adolescent girls and boys, incorporating elements of prevention, intervention and education through meaningful collaboration between social-behavioral and medical services. The clinic's primary goal is to provide access to primary and preventive health care services to Medicaid, low-income and uninsured adolescents through delivery of medical and gynecological services. Services include primary care, family planning, screening and treatment for STI, mental health screening, immunizations, health risk reduction education, prenatal care, sports physicals, wellness exams, nutrition services,
Overall DSRIP Goals:	BTHC's overall mission is to (1) provide healthcare equal to or better in quality than the private sector; (2) establish collaborative relationships with the community and those organizations or individuals with common goals; (3) evaluate all our programs with academic excellence. The clinic's DSRIP goal is to provide access to primary and preventive health care services to low-income and uninsured adolescents through delivery of high quality medical and gynecological services in order to enhance the health of patients and families served. The second goal of BTHC is to learn from innovations and delivery system reforms within the BTHC system that increase access to health care services, improve quality of care, and enhance the health of patients and families served.
Alignment with regional community needs assessment:	BTHC's overall DSRIP goals try to address two specific regional community needs: (1) access to primary and specialty care and (2) disparities in health outcomes across a diverse population. BTHC seeks to increase access to primary care services among our 11-clinic network. The target population is low-income, Medicaid recipients and uninsured adolescents 13-24 years old living in the greater Houston area. A majority of BTHC clients are minorities, some of whom recently immigrated to the United States. The vulnerable target population faces a number of barriers to accessing quality primary care services whether it be due to lack of insurance, transportation or knowledge and education on how to access care. The clinic will increase access to primary and specialty care and decrease disparities in health outcomes across a diverse population by providing high quality comprehensive services to vulnerable adolescents in the Houston community.

Section 5: DY9-10 Total Valuation and Updated Minimum Point Threshold (MPT)

Initial DY9 DSRIP Valuation	Initial DY10 DSRIP Valuation	Initial DY9-10 MPT
\$742,000.00	\$742,000.00	1

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	\$749,999.99	1
Yes	\$1,249,999.99	2
Yes	\$1,749,999.99	3
Yes	\$2,249,999.99	4
Yes	\$2,749,999.99	5
Yes	\$3,249,999.99	6
Yes	\$3,749,999.99	7

-- Note: This is your current MPT

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%	\$74,200.00	\$74,200.00
Category C	75%	\$556,500.00	\$556,500.00
Category D	15%	\$111,300.00	\$111,300.00
Total	100%	\$742,000.00	\$742,000.00

Original MPT:

1

Adjusted MPT based on updated valuation:

1

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:

082006001 - Baylor College of Medicine Grants and Contracts De

Performing Provider Type:

Physician Practice affiliated with an Academic Health Science Center (AHSC)

Ownership:

Private

Category B valuation in DY9:

\$74,200.00

Category B valuation in DY10:

\$74,200.00

Section 1: System Definition

Would you like to modify the System Definition?

Yes

Physician Practices - Required Components

Required System Component

Business Component?

Owned or Operated Primary Care Clinics

Business Component of the Organization

Please enter a description of this System Component.

BTHC currently operates a network of NINE health clinics. These clinics are located in two county hospitals (Ben Taub and Lyndon B. Johnson), three high school campuses (Wisdom High School in the Gulfton Area, Milby High School in the East End, and Worthing High School in South East Houston), one charter school (Tejano Center in South East Houston) and three community centers (Lawn in Acres Home, Cavalcade in Kashmere Gardens, and Cullen Health Center in Third Ward). The clinics all still provide both primary and reproductive health care services.

Required System Component

Business Component?

Owned or Operated Specialty Care Clinics

Business Component of the Organization

Please enter a description of this System Component.

BTHC currently operates a network of NINE health clinics. These clinics are located in two county hospitals (Ben Taub and Lyndon B. Johnson), three high school campuses (Wisdom High School in the Gulfton Area, Milby High School in the East End, and Worthing High School in South East Houston), one charter school (Tejano Center in South East Houston) and three community centers (Lawn in Acres Home, Cavalcade in Kashmere Gardens, and Cullen Health Center in Third Ward). The clinics all still provide both primary and reproductive health care services.

Required System Component

Business Component?

Owned or Operated Hospital

Not a Business Component of the

Required System Component	Business Component?
Owned or Operated Urgent Care Clinics	Not a Business Component of the

Physician Practices - Optional Components

Optional System Component	Would you like to select this component?
Contracted Specialty Clinics	No
Optional System Component	Would you like to select this component?
Contracted Primary Care Clinics	No
Optional System Component	Would you like to select this component?
Contracted Community-based Programs	No
Optional System Component	Would you like to select this component?
Other	No

Please summarize and explain the changes to your system definition

BTHC currently operates a network of NINE health clinics. These clinics are located in two county hospitals (Ben Taub and Lyndon B. Johnson), three high school campuses (Wisdom High School in the Gulfton Area, Milby High School in the East End, and Worthing High School in South East Houston), one charter school (Tejano Center in South East Houston) and three community centers (Lawn in Acres Home, Cavalcade in Kashmere Gardens, and Cullen Health Center in Third Ward). The clinics all still provide both primary and reproductive health care services. -- The changes from the system as it is stated in this box: 1) we are no longer located in Austin High School as of summer 2019, and 2) we are now located at a new school based site, Milby High School as of summer 2019.

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

	DY7	DY8
MLIU PPP	9,107	9,107
Total PPP	9,259	9,259

Please indicate the population included in the MLIU PPP

<input checked="" type="checkbox"/> Medicaid	<input type="checkbox"/> Dual Eligible (Medicaid and Medicare)	<input 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 checked="" 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	4,196
Estimated Low-income or Uninsured Individuals served in DY7	4,911
Estimated Medicaid individuals served in DY8	4,196
Estimated Low-income or Uninsured Individuals served in DY8	4,911
MLIU PPP Goal for each DY (DY9 and DY10):	9,107
Forecasted Medicaid individuals served in each DY for DY9-10	4,196
Forecasted Low-income or Uninsured individuals served in each DY for DY9-10	4,911
Average Total PPP in each DY	9,259
MLIU percentage of Total PPP	98.36%
Allowable Variation	5.00%

*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 Measure Bundles for Hospitals and Physician Practices	Complete	Note: you must confirm selections at the bottom of the page to finish.	MPT	1
Section 3: Measure Exemption Requests	Complete		Points Selected	13
			Bundles Selected	1
			Maximum Deletions Met	Y
Minimum Selection Requirements Met	Yes			
MPT Met	Yes			

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	082006001 - Baylor College of Medicine Grants and Contracts De
Performing Provider Type:	Physician Practice affiliated with an Academic Health Science Center (AHSC)
Ownership:	Private
Category C valuation in DY9:	\$556,500.00
Category C valuation in DY10:	\$556,500.00

MINIMUM POINT THRESHOLD (MPT):

1

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 Physician Practice affiliated with an Academic Health Science Center (AHSC)**

a. Medicaid beneficiary attributed to the Performing Provider during the measurement period as determined by assignment to a primary care provider (PCP), medical home, or clinic in the performing providers DSRIP defined system OR
b. Individuals enrolled in a local coverage program (for example, a county-based indigent care program) assigned to a PCP, medical home, or clinic in the performing providers DSRIP defined system OR
c. One preventive service provided during the measurement period (value sets of visit type codes for annual wellness visit, preventive care services - initial office visit, preventive care services - established office visit, preventive care individual counseling) OR
d. One ambulatory encounter during the measurement year and one ambulatory encounter during the year prior to the measurement year OR
e. Two ambulatory encounters during the measurement year OR
f. Other populations managed with chronic disease in specialty care clinics in the performing providers DSRIP defined system
g. One emergency department visit during the measurement year OR
h. One admission for inpatient or observation status during the measurement year OR
i. One prenatal or postnatal visit during the measurement year OR
j. One delivery during the measurement year OR
k. One dental encounter during the measurement year OR
l. Enrolled in a palliative care or hospice program during the measurement year OR
m. Other populations not included above that should be included in a measure bundle target population included in the RHP plan submission and approved by HHSC (for example, individuals enrolled in community based education programs)

Section 2: Selection of Measure Bundles for Hospitals and Physician Practices**Measure Bundles for Hospitals & Physician Practices**

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	A1	Improved Chronic Disease Management: Diabetes Care	11	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	A2	Improved Chronic Disease Management: Heart Disease	8	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	B1	Care Transitions & Hospital Readmissions	11	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	B2	Patient Navigation & ED Diversion	3	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	C1	Primary Care Prevention - Healthy Texans	12	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	C2	Primary Care Prevention - Cancer Screening	6	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	C3	Hepatitis C	4	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
Yes - Continue	D1	Pediatric Primary Care	12	13

This bundle was selected for DY7/8 and can be continued or can be dropped

Select Optional Measure (Yes/No)	Measure Volume Options for Goal Setting and Achievement	Bundle-Measure ID	Measure Name	Required vs. Optional	P4P vs. P4R	Measure Category	Additional Points
N/A - Required	HHSC approved measure as having no volume for denominator.	D1-108	Childhood Immunization Status (CIS)	Required	P4P	Immunization	N/A
N/A - Required for Continuation	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	D1-211	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	Required	P4P	Process	N/A
N/A - Required for Continuation	HHSC has approved as Delayed P4R (All Payer, Medicaid, LIU)	D1-212	Appropriate Testing for Children With Pharyngitis	Required	P4R	Clinical Outcome	N/A
N/A - Required	HHSC approved measure as having no volume for denominator.	D1-271	Immunization for Adolescents	Required	P4P	Immunization	N/A
N/A - Required for Continuation	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	D1-284	Appropriate Treatment for Children with Upper Respiratory Infection (URI)	Required	P4P	Process	N/A
No		D1-301	Maternal Depression Screening	Optional	P4P	Process	1

Yes - Continue Measure	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	D1-389	Human Papillomavirus Vaccine (age 15-18)	Optional	P4P	Immunization	1
N/A - Required for Continuation	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	D1-400	Tobacco Use and Help with Quitting Among Adolescents	Required	P4P	Process	N/A
N/A - Required for Continuation	HHSC has approved as Delayed P4R (All Payer, Medicaid, LIU)	D1-503	PDI 91 Acute Composite (Gastroenteritis, Urinary Tract Infection Admission Rate)	Required	P4R	Population Based Clinical Outcome	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	D3	Pediatric Hospital Safety	10	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	D4	Pediatric Chronic Disease Management: Asthma	9	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	D5	Pediatric Chronic Disease Management: Diabetes	8	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	E1	Improved Maternal Care	10	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	E2	Maternal Safety	12	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	F1	Improved Access to Adult Dental Care	7	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	F2	Preventive Pediatric Dental	2	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	G1	Palliative Care	6	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	H1	Integration of Behavioral Health in a Primary or Specialty Care Setting	12	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	H2	Behavioral Health and Appropriate Utilization	8	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	H3	Chronic Non-Malignant Pain Management	10	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	H4	Integrated Care for People with Serious Mental Illness	5	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	I1	Specialty Care	2	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	J1	Hospital Safety	10	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	K1	Rural Preventive Care	3	0

Select Measure Bundle? (Yes/No)	Measure Bundle ID	Measure Bundle Name	Measure Bundle Base Points	Points Selected in Bundle
No	K2	Rural Emergency Care	3	0

Total overall selected points:	13
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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 3: 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.

Bundle-Measure ID	Measure Name		Baseline Measurement Period
D1-108	Childhood Immunization Status (CIS)		CY2019: January 1, 2019 - December 31, 2019
Requesting a reporting milestone exemption?	No	Requesting a shorter or delayed measurement period?	No

Bundle-Measure ID	Measure Name		Baseline Measurement Period
D1-271	Immunization for Adolescents		CY2019: January 1, 2019 - December 31, 2019
Requesting a reporting milestone exemption?	No	Requesting a shorter or delayed measurement period?	No

DY9-10 Provider RHP Plan Update Template - Category C Related Strategies

Progress Tracker

Section 1: Related Strategies

Complete

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	082006001 - Baylor College of Medicine Grants and Contracts De
Performing Provider Type:	Physician Practice affiliated with an Academic Health Science Center (AHSC)
Ownership:	Private

Section 1: Related Strategies

Instructions: The following Related Strategies Lists are associated with the DY9-10 Measure Bundle/measure selections you made in the “Category C Selection” tab. To complete this section, two reporting indications regarding the strategy’s implementation (e.g., Implementation Date and Implementation Status) must be made for all of the individual Related Strategies within each of the required Lists.

Of note, if “Before DSRIP; DY1-6; or DY7-8” 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 DY9-10” 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	
			D1, D4, D5	
			Pediatric Primary Care and Chronic Disease Management (H/PP)	
Related Strategies ID	Related Strategies Description	Related Strategies Theme	Implementation Date	Implementation Status
1.00	Same-day and/or walk-in appointments in the outpatient setting	Access to Care	Before DSRIP	Implemented throughout system
1.01	Night and/or weekend appointments in the outpatient setting	Access to Care	Before DSRIP	Implemented in small scale
1.10	Integration or co-location of primary care and specialty care (physical health only) services in the outpatient setting	Access to Care	Before DSRIP	Implemented throughout system
1.11	Telehealth to provide virtual medical appointments and/or consultations with a primary care provider	Access to Care	Not applicable	Not applicable
1.12	Telehealth to provide virtual medical appointments and/or consultations with a specialty care physician (physical health only)	Access to Care	Not applicable	Not applicable
1.20	Integration or co-location of primary care and psychiatric services in the outpatient setting	Access to Care	Planned for DY9-10	Not yet implemented
1.21	Telehealth to provide virtual medical appointments and/or consultations with a psychiatrist	Access to Care	Planned for DY9-10	Not yet implemented
1.30	Mobile clinic or other community-based delivery model to provide care outside of the traditional office (excludes home-based care)	Access to Care	Not applicable	Not applicable
2.00	Culturally and linguistically appropriate care planning for patients	Care Coordination	Before DSRIP	Implemented then discontinued
2.01	Pre-visit planning and/or standing order protocols (e.g. for screenings/assessments, immunization status, tests/results, prescription changes/refills, scheduling follow-up visits, evidence-based practices, etc.)	Care Coordination	Before DSRIP	Implemented throughout system

2.02	Automated reminders/flags within the E.H.R. or other electronic care platform (e.g. for screenings/assessments, immunization status, tests/results, prescription changes/refills, scheduling follow-up visits, evidence-based practices, etc.)	Care Coordination	DY1-6	Implemented throughout system
2.10	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 DSRIP	Implemented throughout system
2.11	Care team includes personnel in a care coordination role requiring clinical licensure (e.g. registered nurse, licensed clinical social worker, etc.)	Care Coordination	Before DSRIP	Implemented throughout system
2.12	Hotline, call center, or other similar programming staffed by personnel with clinical licensure to answer questions for patients (and their families) related to medications, clinical triage, care transitions, etc.	Care Coordination	Not applicable	Not applicable
2.20	Formal closed loop process for scheduling a follow-up visit with a primary care provider and/or assigning a primary care provider when none is identified	Care Coordination	Not applicable	Not applicable
2.30	Formal closed loop process for scheduling referral visits as needed	Care Coordination	Before DSRIP	Implemented throughout system
2.40	Data sharing connectivity or arrangement with Medicaid Managed Care Organization(s) for patient claims data	Care Coordination	Not applicable	Not applicable
2.50	Data sharing connectivity across care settings within provider's integrated delivery system (includes inpatient, outpatient, post-acute, urgent care, pharmacy, etc.) for patient medical records	Care Coordination	Not applicable	Not applicable
2.51	Data sharing connectivity or Health Information Exchange (HIE) arrangement across care settings external to provider's office/integrated delivery system (includes inpatient, outpatient, post-acute, urgent care, pharmacy, etc.) for patient medical records	Care Coordination	Not applicable	Not applicable
2.60	Formal closed loop process for coordinating the transition from pediatric to adult care	Care Coordination	Before DSRIP	Implemented throughout system
3.00	Panel management and/or proactive outreach of patients using a gap analysis method (i.e. strategically targeting patients with missing or overdue screenings, immunizations, assessments, lab work, etc.)	Data Analytics	DY7-8	Implemented in small scale
3.01	Panel management and/or proactive outreach of patients using a risk-stratification method (i.e. strategically targeting patients based on risk factors associated with worsening disease states)	Data Analytics	Before DSRIP	Implemented throughout system
3.10	Database or registry to track quality and clinical outcomes data on patients	Data Analytics	DY1-6	Implemented throughout system
3.20	Analysis of appointment "no-show" rates	Data Analytics	DY7-8	Implemented throughout system
3.40	Formal partnership or arrangement with schools/school districts to track/share data such as absenteeism, classroom behaviors, etc.	Data Analytics	DY7-8	Implemented in small scale
4.00	Care team includes a clinical pharmacist(s)	Disease Management	DY7-8	Implemented in small scale
4.01	Care team includes a behavioral health professional such as a psychologist, licensed clinical social worker, licensed counselor (LPC, LMHC), etc.	Disease Management	Before DSRIP	Implemented throughout system
4.02	Care team includes a registered dietician(s)	Disease Management	Not applicable	Not applicable
4.10	Group visit model or similar non-traditional appointment format that includes at least one provider and a group of patients with shared clinical and/or social experiences	Disease Management	DY7-8	Implemented in small scale
4.20	Home visit model of providing clinical services at a patient's residence (may be restricted to specific patient subpopulations)	Disease Management	Not applicable	Not applicable

4.30	Classes for patients focused on disease self-management (e.g. lifestyle changes, symptom recognition, clinical triage guidance, etc.)	Disease Management	Not applicable	Not applicable
4.31	Classes for patients focused on diet, nutrition counseling, and/or cooking	Disease Management	Not applicable	Not applicable
4.32	Classes for patients focused on physical activity	Disease Management	Not applicable	Not applicable
4.40	Peer-based programming (includes support groups, peer coaching/mentoring, etc.)	Disease Management	Not applicable	Not applicable
4.50	Telehealth to provide remote monitoring of patient biometric data (e.g. HbA1c levels, blood pressure, etc.) and/or medication adherence	Disease Management	Not applicable	Not applicable
4.60	Patient educational materials or campaigns about preventive care (e.g. immunizations, preventive screenings, etc.)	Disease Management	DY1-6	Implemented throughout system
5.00	Screening patients for food insecurity	Social Determinants of Health	DY7-8	Implemented in small scale
5.01	Formal partnership or arrangement with food resources to support patient health status (e.g. local food banks, grocery stores, etc.)	Social Determinants of Health	Not applicable	Not applicable
5.10	Screening patients for housing needs	Social Determinants of Health	DY7-8	Implemented in small scale
5.11	Formal partnership or arrangement with housing resources to support patient health status (e.g. affordable housing units, transitional housing, rental assistance, etc.)	Social Determinants of Health	Not applicable	Not applicable
5.12	Screening patients for housing quality needs	Social Determinants of Health	Not applicable	Not applicable
5.13	Formal partnership or arrangement with housing quality resources to support patient health status (e.g. housing inspections, pest control management, heating and other utility services, etc.)	Social Determinants of Health	Not applicable	Not applicable
5.20	Screening patients for transportation needs	Social Determinants of Health	Before DSRIP	Implemented throughout system
5.21	Formal partnership or arrangement with transportation resources to support patient access to care (e.g. public or private transit, etc.)	Social Determinants of Health	Before DSRIP	Implemented throughout system
5.30	Formal partnership or arrangement with schools/school districts to collaborate on health-promoting initiatives (e.g. addressing environmental triggers, healthy lunch options, field day activities, etc.)	Social Determinants of Health	Before DSRIP	Implemented in small scale

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:

TPI and Performing Provider Name:

Performing Provider Type:

Ownership:

3

082006001 - Baylor College of Medicine Grants and Contracts De

Physician Practice affiliated with an Academic Health Science Center (AHSC)

Private

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.

Prevention and Wellness

a) Please select the name of this Core Activity.

Utilization of whole health peer support, which could include conducting health risk assessments, setting SMART goals, providing educational and supportive services to targeted individuals with specific disorders (e.g., hypertension, diabetes, and health risks such as obesity, tobacco use, and physical inactivity)

b) Please enter a description of this Core Activity

With the help of BTHC physicians and social workers, the clinic will develop, implement and train providers to use a health behavior intervention protocol based on evidence-based strategies to reduce and prevent obesity in adolescents. Clinical providers, particularly nurse practitioners and licensed medical social workers, are being trained on how to provide quality counseling using motivational interviewing techniques around nutrition and physical activity to all patients, but especially to patients who are overweight or obese. Health behavior intervention will include medically and non-medically related issues. For example, use of electronic devices, evidence-based interventions for obesity management (including utilizing motivational interviewing for assessing readiness for change and increasing motivation for change), provision of lifestyle modification guidance, assistance with generation of SMART goals for weight management, problem solving and addressing barriers to achievement of weight loss goals, frequent follow-up visits, involving peers and family, and targeting the community at large by conducting healthy lifestyle classes during the summer. The objective is to reduce and prevent obesity in adolescents, and to help

adolescents with obesity move closer to a healthier BMI and reduce risk for related morbidities. For this activity there are 5 licensed medical social workers available to provide counseling to patients. Two physicians and 8 nurse practitioners are able to provide health behavior counseling interventions. All 11 clinic sites will be implementing core activities mentioned in the drivers below.

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

Screening patients for BMI and tobacco use during visits.

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

Record BMI and tobacco use in EMR system and implement alerts to flag patients out of normal range

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).

Develop and implement a health behavior intervention protocol based on evidence-based strategies to reduce and prevent obesity in adolescents.

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

Incorporate smart phrases from evidence-based research to best support providers' comfort and quality in providing nutrition, physical activity and tobacco counseling and education.

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).

Train social workers and medical staff in obesity counseling

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

Improve current training materials to meet patient needs

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.

D1			
----	--	--	--

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

These Drivers will help clinicians identify those who smoke and those who are at or above the 95th percentile for BMI. Social workers and medical staff will address smoking cessation and health behavior intervention around childhood obesity. With the social workers' help, the patients will have longer and more detailed interventions beyond the medical visit. With the help of BTHC physicians and social workers, the clinic will develop and implement a health behavior intervention protocol based on evidence-based strategies to

develop and implement a health behavior intervention protocol based on evidence-based strategies to reduce and prevent obesity in adolescents--to meet the innovative metric.

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

3
082006001 - Baylor College of Medicine Grants and Contracts De
Physician Practice affiliated with an Academic Health Science Center (AHSC)
Private

Section 1: Valuation by Category and Measure

Category / Measure / Measure Bundle Item:	DY9	DY10
Category B - MLIU PPP	\$74,200.00	\$74,200.00
D1-108	\$0.00	\$0.00
D1-211	\$127,531.25	\$127,531.25
D1-212	\$23,187.50	\$23,187.50
D1-271	\$0.00	\$0.00
D1-284	\$127,531.25	\$127,531.25
D1-389	\$127,531.25	\$127,531.25
D1-400	\$127,531.25	\$127,531.25
D1-503	\$23,187.50	\$23,187.50
D1 Total	\$556,500.00	\$556,500.00
Category C Total:	\$556,500.00	\$556,500.00
Diabetes Short-term Complications	\$8,561.54	\$8,561.54
Perforated Appendix Admission Rate	\$8,561.54	\$8,561.54
Diabetes Long-term Complications	\$8,561.54	\$8,561.54
Chronic Obstructive Pulmonary Disease	\$8,561.54	\$8,561.54
Hypertension Admission Rate	\$8,561.54	\$8,561.54
Heart Failure Admission Rate	\$8,561.54	\$8,561.54
Low Birth Weight Rate	\$8,561.54	\$8,561.54
Dehydration Admission Rate	\$8,561.54	\$8,561.54
Bacterial Pneumonia Admission Rate	\$8,561.54	\$8,561.54
Urinary Tract Infection Admission Rate	\$8,561.54	\$8,561.54
Uncontrolled Diabetes Admission Rate	\$8,561.54	\$8,561.54
Asthma in Younger Adults Admission Rate	\$8,561.54	\$8,561.54
Lower-Extremity Amputation among	\$8,561.52	\$8,561.52
Category D Total:	\$111,300.00	\$111,300.00
DSRIP Total	\$742,000.00	\$742,000.00

Section 2: Category C Milestone Valuation

Bundle-Measure ID	Denominator Volume	DY9 Category C Valuation: \$556,500.00							DY10 Category C Valuation: \$556,500.00					
		DY9 Measure Total	DY9 Milestone IDs						DY10 Measure Total	DY10 Milestone IDs				
			RM-1.8	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
D1-108	HHSC approved measure as having no volume for denominator.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
D1-211	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$127,531.25	\$0.00	\$23,187.50	\$34,781.25	\$34,781.25	\$34,781.25	\$0.00	\$127,531.25	\$23,187.50	\$34,781.25	\$34,781.25	\$34,781.25	\$0.00
D1-212	HHSC has approved as Delayed P4R (All Payer, Medicaid, LIU)	\$23,187.50	\$0.00	\$23,187.50	\$0.00	\$0.00	\$0.00	\$0.00	\$23,187.50	\$23,187.50	\$0.00	\$0.00	\$0.00	\$0.00
D1-271	HHSC approved measure as having no volume for denominator.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
D1-284	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$127,531.25	\$0.00	\$23,187.50	\$104,343.75	\$0.00	\$0.00	\$0.00	\$127,531.25	\$23,187.50	\$104,343.75	\$0.00	\$0.00	\$0.00
D1-389	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$127,531.25	\$0.00	\$23,187.50	\$104,343.75	\$0.00	\$0.00	\$0.00	\$127,531.25	\$23,187.50	\$104,343.75	\$0.00	\$0.00	\$0.00
D1-400	HHSC has approved as Delayed P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$127,531.25	\$0.00	\$23,187.50	\$104,343.75	\$0.00	\$0.00	\$0.00	\$127,531.25	\$23,187.50	\$104,343.75	\$0.00	\$0.00	\$0.00
D1-503	HHSC has approved as Delayed P4R (All Payer, Medicaid, LIU)	\$23,187.50	\$0.00	\$23,187.50	\$0.00	\$0.00	\$0.00	\$0.00	\$23,187.50	\$23,187.50	\$0.00	\$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:	082006001 - Baylor College of Medicine Grants and Contracts De
Performing Provider Type:	Physician Practice affiliated with an Academic Health Science Center (AHSC)
Ownership:	Private

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	Texas Higher Education Board	082006001	17460167665004	350-13-0000-00010

Contact #	Contact Name	Street Address	City	Zip	Email	Phone Number	Phone Extension	Lead Contact or Both
1	Andrew Au	One Baylor Plaza MS BCM191A	Houston	77030	andrew.au@bcm.edu	(713) 798-8300		Both
2	David Maxwell	One Baylor Plaza MS BCM191A	Houston	77030	david.maxwell@bcm.edu	(713) 798-3422		Both
3	Robert Corrigan	One Baylor Plaza MS BCM106A	Houston	77030	corrigan@bcm.edu	713-798-6392		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

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)
<i>Category B</i>	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$29,019.62	\$29,019.62
D1-108	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$0.00	\$0.00
D1-211	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$49,877.47	\$49,877.47
D1-212	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$9,068.63	\$9,068.63
D1-271	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$0.00	\$0.00
D1-284	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$49,877.47	\$49,877.47
D1-389	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$49,877.47	\$49,877.47
D1-400	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$49,877.47	\$49,877.47
D1-503	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$9,068.63	\$9,068.63
<i>Category D</i>	Texas Higher Education Board	17460167665004	350-13-0000-00010	100.00%	100.00%	\$43,529.43	\$43,529.43
Total						\$290,196.20	\$290,196.20

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:	Andrew Au
IGT Organization:	Texas Higher Education Board
Date:	10/28/2019

DY9-10 Provider RHP Plan Update Template -Summary and Certification**Progress Tracker**

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

Performing Provider Information

RHP:

3

TPI and Performing Provider Name:

082006001 - Baylor College of Medicine Grants and Contracts De

Performing Provider Type:

Physician Practice affiliated with an Academic Health Science Center (AHSC)

Ownership:

Private

Section 1: DY9-10 DSRIP Valuation

	DY9-10 DSRIP Valuation Distribution	
	DY9	DY10
Category A	\$0.00	\$0.00
Category B	\$74,200.00	\$74,200.00
Category C	\$556,500.00	\$556,500.00
Category D	\$111,300.00	\$111,300.00
Total	\$742,000.00	\$742,000.00

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

Yes

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

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

Yes

	Forecasted Medicaid	Forecasted LIU	MLIU PPP	Total PPP	MLIU Percentage of Total PPP	Allowable Variation %
DY9 Estimated	4,196	4,911	9,107	9,259	98.36%	5.00%
DY10 Estimated	4,196	4,911	9,107	9,259	98.36%	5.00%

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
D1	Pediatric Primary Care	0	0	0	13	\$556,500.00	\$556,500.00
Total	N/A	0	0	0	13	\$556,500.00	\$556,500.00

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

Yes

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

Bundle-Measure ID	Measure Bundle/Measure Name	Associated Core Activities
D1	Pediatric Primary Care	Utilization of whole health peer support, which could include conducting health risk assessments, setting SMART goals, providing educational and supportive services to targeted individuals with specific disorders (e.g., hypertension, diabetes, and health risks such as obesity, tobacco use, and physical inactivity)

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 Physicians Practices

Measure	Category D DY9 Valuation	Category D DY10 Valuation
Diabetes Short-term Complications Admission Rate	\$8,561.54	\$8,561.54
Perforated Appendix Admission Rate	\$8,561.54	\$8,561.54
Diabetes Long-term Complications Admission Rate	\$8,561.54	\$8,561.54
Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate	\$8,561.54	\$8,561.54
Hypertension Admission Rate	\$8,561.54	\$8,561.54
Heart Failure Admission Rate	\$8,561.54	\$8,561.54
Low Birth Weight Rate	\$8,561.54	\$8,561.54
Dehydration Admission Rate	\$8,561.54	\$8,561.54
Bacterial Pneumonia Admission Rate	\$8,561.54	\$8,561.54
Urinary Tract Infection Admission Rate	\$8,561.54	\$8,561.54
Uncontrolled Diabetes Admission Rate	\$8,561.54	\$8,561.54
Asthma in Younger Adults Admission Rate	\$8,561.54	\$8,561.54
Lower-Extremity Amputation among Patients with Diabetes Rate	\$8,561.54	\$8,561.54

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:

Thomas Sinclair

Performing Provider:

Baylor College of Medicine Grants and
Contracts

Date:

10/28/2019

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 Measure Bundles for Hospitals and Physician Practices	Complete
Section 3: Measure Exemption Requests	Complete
Minimum Selection Requirements Met	Yes
MPT Met	Yes

Category C Related Strategies

Section 1: Related Strategies	Complete
-------------------------------	----------

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