



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:	140713201 - Methodist Willowbrook		
Performing Provider Type:	Hospital		
Ownership:	Private		
TIN:	17605451925001		
Physical Street Address:	6565 Fannin Street, Main 700		
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:	Heather Chung	Hailey Stein	Ekta Patel
Street Address:	6565 Fannin Street, Main 700	6565 Fannin Street, Main 700	6565 Fannin Street, Main 700
City:	Houston	Houston	Houston
Zip:	77030	77030	77030
Email:	hchung@houstonmethodist.org	hstein@houstonmethodist.org	epatel2@houstonmethodist.org
Phone Number:	(281) 755-5391	(321) 514-9804	346-238-0156
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:	Houston Methodist Willowbrook Hospital, a full-service, acute-care hospital serving Northwest Houston and surrounding communities. Our 312-bed regional hospital opened in 2000 with the goal of providing high-quality health care in a warm, inviting environment. We are proud to offer you a full spectrum of health and wellness services, including emergency care, cardiology, orthopedics and sports medicine, women’s services, neurology and more.
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Overall DSRIP Goals:	We have chosen to implement B2 for category C: Utilize patient navigators (community health workers, case managers, or other types of professionals) and/or develop other strategies to provide enhanced social support and culturally competent care to connect high risk patients to primary care or medical home sites, improve patient outcomes, and divert patients needing non-urgent care to appropriate settings. Overall we hope to improve our patient population's health and take steps to reduce unnecessary hospitalizations.
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Alignment with regional community needs assessment:	Our community needs assessment shows that there is a gap in mental health coverage in our area. We hope to fill this gap by focusing on the assignment of Primary Care Physician to Individuals with avoidable admissions to the Emergency department. We also will implement new procedures for Suicide Risk Assessment and Appraisal for alcohol or chemical substance use. We also will develop other strategies to enhance social support and culturally competent care for high risk patients.
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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
\$1,563,979.27	\$1,334,154.51	3

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:
No	\$1,749,999.99	3
No	\$2,249,999.99	4
No	\$2,749,999.99	5
No	\$3,249,999.99	6
No	\$3,749,999.99	7
No	\$4,249,999.99	8
No	\$4,749,999.99	9

<-- 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

	Category Percentage (%)	DY9-10 DSRIP Valuation Distribution	
		DY9	DY10
Category A	0%	\$0.00	\$0.00
Category B	10%	\$156,397.93	\$133,415.45

Category C	75%	\$1,172,984.45	\$1,000,615.88
Category D	15%	\$234,596.89	\$200,123.18
Total	100%	\$1,563,979.27	\$1,334,154.51

Original MPT:

3

Adjusted MPT based on updated valuation:

3

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:	140713201 - Methodist Willowbrook
Performing Provider Type:	Hospital
Ownership:	Private
Category B valuation in DY9:	\$156,397.93
Category B valuation in DY10:	\$133,415.45

Section 1: System Definition

Would you like to modify the System Definition?

No

Hospitals - Required Components

Required System Component	Business Component?
Inpatient Services	Business Component of the Organization

Please enter a description of this System Component.

Inpatient services are defined as units at Houston Methodist Willowbrook which require a doctor's order admitting you into the hospital for a variety of reasons. Methodist Willowbrook has 20 inpatient units (HMWB CF OP SURGERY, HMWB CF PREOP, HMWB ACUTE PT, HMWB CARDIO IMAGING, HMWB ENDOSCOPY, HMWB ICU – MICU, HMWB NSY NICU LEVEL II, HMWB NSY NICU LVL III, HMWB OBS UNIT, HMWB OR SURGERY, HMWB PHARMACY, HMWB RESP CARE, HMWB SICU M3NE, HMWB US, HMWB W3NW, HMWB WN5W, HMWB WN6E, HMWB WN6W, HMWB WN7E, and HMWB WN7W).

Required System Component	Business Component?
Emergency Department	Business Component of the Organization

Please enter a description of this System Component.

Emergency department is defined as medical treatment facility specializing in emergency medicine. It serves the acute care of patients who present without prior appointment who arrive either by their own means or by that of an ambulance. Within our system Emergency Departments are either located in a hospital or free standing. Methodist willowbrook has 3 Emergency departments: HMWB CYPRESS ED, HMWB HOSPITAL, and HMWB SPRING ED.

Required System Component	Business Component?
Owned or Operated Outpatient Clinics	Not a Business Component of the Organization

Required System Component	Business Component?
Maternal Department	Business Component of the Organization

Please enter a description of this System Component.

The maternal department in our hospital is one that provides care for women during pregnancy and childbirth as well as for newborn infants. Methodist Willowbrook has 1 maternal department offering 5 areas of service: HMWB LABOR DLVRY M2NW, HMWB LD ANTE PARTUM, HMWB MOTHER BABY, HMWB NSY NICU LVL III and HMWB NURSERY.

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

Hospitals - 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?
School-based Clinics	No

Optional System Component	Would you like to select this component?
Contracted Palliative Care Programs	No

Optional System Component	Would you like to select this component?
Contracted Mobile Health Programs	No

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

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

	DY7	DY8
MLIU PPP	16,993	16,993
Total PPP	88,796	88,796

Please indicate the population included in the MLIU PPP

<input checked="" type="checkbox"/> Medicaid	<input checked="" type="checkbox"/> Dual Eligible	<input checked="" type="checkbox"/> CHIP	<input type="checkbox"/> Local Coverage Option	<input type="checkbox"/> Insured on the Exchange
<input type="checkbox"/> Low-Income (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	5,608
Estimated Low-income or Uninsured Individuals served in DY7	11,385
Estimated Medicaid individuals served in DY8	5,608
Estimated Low-income or Uninsured Individuals served in DY8	11,385
MLIU PPP Goal for each DY (DY9 and DY10):	16,993
Forecasted Medicaid individuals served in each DY for DY9-10	5,608
Forecasted Low-income or Uninsured individuals served in each DY for DY9-10	11,385
Average Total PPP in each DY	88,796
MLIU percentage of Total PPP	19.14%
Allowable Variation	1.11%

*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	3
Section 3: Measure Exemption Requests	Complete		Points Selected	6
Minimum Selection Requirements Met	Yes		Bundles Selected	1
MPT Met	Yes		Maximum Deletions Met	Y

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	140713201 - Methodist Willowbrook
Performing Provider Type:	Hospital
Ownership:	Private
Category C valuation in DY9:	\$1,172,984.45
Category C valuation in DY10:	\$1,000,615.88

MINIMUM POINT THRESHOLD (MPT):

3

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 Hospital

- 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
Yes - Continue	B2	Patient Navigation & ED Diversion	3	6
<i>This bundle was selected for DY7/8 and can be continued or can be dropped</i>				
*** Note: you must select one of the following measures to select this bundle: B2-242, B2-387, or B2-393.				

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
No		B2-242	Reduce Emergency Department visits for Chronic Ambulatory Care Sensitive Conditions (ACSC)	Optional	P4P	Clinical Outcome	3
Yes - Continue Measure	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	B2-387	Reduce Emergency Department visits for Behavioral Health and Substance Abuse (Reported as two rates)	Optional	P4P	Clinical Outcome	3
N/A - Required for Continuation	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	B2-392	Reduce Emergency Department visits for Acute Ambulatory Care Sensitive Conditions (ACSC)	Required	P4P	Clinical Outcome	N/A
No		B2-393	Reduce Emergency Department visits for Dental Conditions	Optional	P4P	Clinical Outcome	3

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
No	D1	Pediatric Primary Care	12	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:	6
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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

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:	140713201 - Methodist Willowbrook
Performing Provider Type:	Hospital
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	
			B1, B2	
			Hospital Readmissions and Emergency Department Utilization (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	DY1-6	Implemented throughout system
1.01	Night and/or weekend appointments in the outpatient setting	Access to Care	DY7-8	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	DY7-8	Implemented in small scale
1.11	Telehealth to provide virtual medical appointments and/or consultations with a primary care provider	Access to Care	DY7-8	Implemented in small scale
1.12	Telehealth to provide virtual medical appointments and/or consultations with a specialty care physician (physical health only)	Access to Care	DY7-8	Implemented in small scale
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	DY7-8	Implemented throughout system
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	Planned for DY9-10	Not yet implemented
1.40	Integration or co-location of primary care and dental services in the outpatient setting	Access to Care	Not applicable	Not applicable
1.41	Telehealth to provide virtual appointments and/or consultations with a dentist	Access to Care	Not applicable	Not applicable
2.00	Culturally and linguistically appropriate care planning for patients	Care Coordination	Before DSRIP	Implemented throughout system

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	DY1-6	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	DY1-6	Implemented throughout system
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	DY7-8	Implemented in small scale
2.30	Formal closed loop process for scheduling referral visits as needed	Care Coordination	DY7-8	Implemented in small scale
2.40	Data sharing connectivity or arrangement with Medicaid Managed Care Organization(s) for patient claims data	Care Coordination	Planned for DY9-10	Not yet implemented
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	DY1-6	Implemented in small scale
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	DY7-8	Implemented in small scale
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	Planned for DY9-10	Not yet implemented
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	DY1-6	Implemented throughout system
3.10	Database or registry to track quality and clinical outcomes data on patients	Data Analytics	DY7-8	Implemented in small scale
3.20	Analysis of appointment "no-show" rates	Data Analytics	Not applicable	Not applicable
3.30	Formal partnership or arrangement with post-acute care facilities (e.g. skilled nursing facility, inpatient rehabilitation facility, long-term acute care hospital, home health agency, hospice, etc.) to track/share quality measures such as length of stay and readmission rates, etc.	Data Analytics	DY1-6	Implemented in small scale
5.00	Screening patients for food insecurity	Social Determinants of Health	DY7-8	Implemented throughout system
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	DY1-6	Implemented in small scale
5.10	Screening patients for housing needs	Social Determinants of Health	DY7-8	Implemented throughout system

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	Planned for DY9-10	Not yet implemented
5.12	Screening patients for housing quality needs	Social Determinants of Health	Planned for DY9-10	Not yet implemented
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	Planned for DY9-10	Not yet implemented
5.20	Screening patients for transportation needs	Social Determinants of Health	Planned for DY9-10	Not yet implemented
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 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
140713201 - Methodist Willowbrook
Hospital
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.

Expansion of Patient Care Navigation and Transition Services

a) Please select the name of this Core Activity.

Identification of frequent ED users and use of care navigators as part of a preventable ED reduction program, which includes a connection of ED patients to primary and preventive care.

b) Please enter a description of this Core Activity

We will carefully monitor the number of patients in the HMWB CYPRESS ED, HMWB HOSPITAL, and HMWB SPRING ED. The two social workers will create a super utilizer report as well as do a root cause analysis for the readmitted patients. Because of higher volume in the HMWB hospital ED, the social workers will connect ED patients to primary and preventive care through a DSRIP social worker designated to improve care transition by assessing for social determinants and strategize the patient navigation. They will analyze the mobile assessment team report of ED patients.

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

Social workers will identify super utilizers, assess social determinants, and strategize patient navigation

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

Social workers will schedule follow-up appointments for patients and include EPIC documentation through social workers in "discharge summary" flowsheet

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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

[Empty text box]

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.

B2			
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i) Please describe how this Core Activity impacts the selected Measure Bundles or measures.

This will help the overall mission to reduce unnecessary hospitalization and improve health of PPP by increasing the services offered and introducing new projects we will be able to reduce the gap in health.

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

New Core Activities

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

DY9-10 Provider RHP Plan Update Template - DSRIP Valuation Summary

Performing Provider Information

RHP:	3
TPI and Performing Provider Name:	140713201 - Methodist Willowbrook
Performing Provider Type:	Hospital
Ownership:	Private

Section 1: Valuation by Category and Measure

Category / Measure / Measure Bundle Item:	DY9	DY10
Category B - MLIU PPP	\$156,397.93	\$133,415.45
B2-387	\$586,492.23	\$500,307.94
B2-392	\$586,492.22	\$500,307.94
B2 Total	\$1,172,984.45	\$1,000,615.88
Category C Total:	\$1,172,984.45	\$1,000,615.88
Potentially preventable admissions (PPAs)	\$46,919.38	\$40,024.64
Potentially preventable 30-day readmissions	\$46,919.38	\$40,024.64
Potentially preventable complications (PPCs)	\$46,919.38	\$40,024.64
Potentially preventable ED visits (PPVs)	\$46,919.38	\$40,024.64
Patient satisfaction	\$46,919.37	\$40,024.62
Category D Total:	\$234,596.89	\$200,123.18
DSRIP Total	\$1,563,979.27	\$1,334,154.51

Section 2: Category C Milestone Valuation

Bundle-Measure ID	Denominator Volume	DY9 Category C Valuation: \$1,172,984.45							DY10 Category C Valuation: \$1,000,615.88					
		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
B2-387	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$586,492.23	\$0.00	\$146,623.06	\$219,934.59	\$219,934.58	\$0.00	\$0.00	\$500,307.94	\$125,076.99	\$187,615.48	\$187,615.47	\$0.00	\$0.00
B2-392	HHSC has approved as Standard P4P (A: MLIU; R: All Payer, Medicaid, LIU)	\$586,492.22	\$0.00	\$146,623.06	\$439,869.16	\$0.00	\$0.00	\$0.00	\$500,307.94	\$125,076.99	\$375,230.95	\$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:	140713201 - Methodist Willowbrook
Performing Provider Type:	Hospital
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	Harris County Hospital District	133355104	17415369366324	529-12-0049-00011

Contact #	Contact Name	Street Address	City	Zip	Email	Phone Number	Phone Extension	Lead Contact or Both
1	Jessica Granger	2525 Holly Hall Drive	Houston	77054	Jessica.Granger@harrishealth.org	713-566-6047		Both
2	Michael Norby	2525 Holly Hall Drive	Houston	77054	michael.norby@harrishealth.org	713-566-6790		Both
3	Victoria Nikitin	2525 Holly Hall Drive	Houston	77054	Victoria.Nikitin@harrishealth.org	713-566-6939		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)
Category B	Harris County Hospital District	17415369366324	529-12-0049-00011	100.00%	100.00%	\$61,167.23	\$52,178.78
B2-387	Harris County Hospital District	17415369366324	529-12-0049-00011	100.00%	100.00%	\$229,377.11	\$195,670.44
B2-392	Harris County Hospital District	17415369366324	529-12-0049-00011	100.00%	100.00%	\$229,377.11	\$195,670.44
Category D	Harris County Hospital District	17415369366324	529-12-0049-00011	100.00%	100.00%	\$91,750.84	\$78,268.18
Total						\$611,672.29	\$521,787.83

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:	Heather Chung
IGT Organization:	Harris County Hospital District
Date:	11/5/2019

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:	140713201 - Methodist Willowbrook
Performing Provider Type:	Hospital
Ownership:	Private

Section 1: DY9-10 DSRIP Valuation

	DY9-10 DSRIP Valuation Distribution	
	DY9	DY10
Category A	\$0.00	\$0.00
Category B	\$156,397.93	\$133,415.45
Category C	\$1,172,984.45	\$1,000,615.88
Category D	\$234,596.89	\$200,123.18
Total	\$1,563,979.27	\$1,334,154.51

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	5,608	11,385	16,993	88,796	19.14%	1.11%
DY10 Estimated	5,608	11,385	16,993	88,796	19.14%	1.11%

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
B2	Patient Navigation & ED Diversion	0	0	0	6	\$1,172,984.45	\$1,000,615.88
Total	N/A	0	0	0	6	\$1,172,984.45	\$1,000,615.88

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
B2	Patient Navigation & ED Diversion	Identification of frequent ED users and use of care navigators as part of a preventable ED reduction program, which includes a connection of ED patients to primary and preventive care.

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 Hospitals

Measure	Category D DY9 Valuation	Category D DY10 Valuation
Potentially preventable admissions (PPAs)	\$46,919.38	\$40,024.64
Potentially preventable 30-day readmissions (PPRs)	\$46,919.38	\$40,024.64
Potentially preventable complications (PPCs)	\$46,919.38	\$40,024.64
Potentially preventable ED visits (PDVs)	\$46,919.38	\$40,024.64
Patient satisfaction	\$46,919.38	\$40,024.64

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:

Heather Chung

Performing Provider:

Houston Methodist Willowbrook

Date:

11/4/2019

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
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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