Regional Healthcare Partnership (RHP) Plan

New 3-Year Projects Overview

Southeast Texas Regional Healthcare Partnership - Region 3

(As submitted on October 30, 2013 with the RHP 3 Prioritized List of New 3-Year Projects)

Process for Evaluating and Selecting Projects for New 3-year Projects
In order to guide the Region in selecting only the most transformative projects and to take full advantage of the opportunity to add new 3-year projects, the Anchor developed a project scoring process and template for regional stakeholders to use in scoring projects. Modified from a National Institutes of Health grant scoring tool, the scoring template assesses the strength of a project across four (4) domains, shown in the table below:

Domain	Weight
Alignment with Community Needs	30%
Transformational Impact	30%
Committed IGT	25%
Likelihood of Success	15%
Total	100%

Projects were scored on a scale of 1-9, using the guidelines in the table below:

Impact	Score	Descriptor	Additional Guidance on Strengths/Weaknesses
High	9	Exceptional	Exceptionally strong with essentially no weaknesses
	8	Outstanding	Extremely strong with negligible weaknesses.
	7	Excellent	Very strong with only minor weaknesses.
Medium	6	Very Good	Strong but with numerous minor weaknesses.
	5	Good	Strong but with at least one moderate weakness.
	4	Satisfactory	Some strengths but also some moderate weaknesses.
Low	3	Fair	Some strengths but with at least one major weakness.
	2	Marginal	A few strengths and a few major weaknesses.
	1	Poor	Very few strengths and numerous major weaknesses.

For the purposes of this scoring process and template, the Region used the following definitions from the Guidelines for Reviewers Including Scoring Descriptors from the Office of Extramural Research at the National Institutes of Health:

- Minor Weakness: Easily addressable weakness that does not substantially lessen impact.
- Moderate Weakness: Lessens impact
- Major Weakness: Severely limits impact.

<u>Scoring Guidance</u>
Alignment with Community Needs – Does the proposed project directly address one or more of the 25 identified community needs as outlined in the Regional Healthcare Partnership Plan? Projects that address a need directly and address multiple community needs should be considered for a higher score.

Transformational Impact – How likely and to what extent is this project going to positively impact the identified community needs? Ideally, the project would yield a significant transformation. Those projects with a wider reach and/or evidence-based should be considered for a higher score

Committed IGT – Has the organization demonstrated that the project is supported by a committed IGT source? If yes, then score a 9. If no, then score a 1.
Likelihood of Success – Is the goal achievable? A stretch goal is ideal but should be realistic.

Reviewers

Reviewers were comprised of IGT entity representatives. Project Proposals were redacted to exclude Performing Provider and IGT organizational names. Additionally, the RHP 3 Anchor ensured that no reviewer was responsible for reviewing their organization's submitted project(s).

Prioritization Process

All projects were prioritized based on the composite score as described above. Projects were then prioritized by rotating IGT entities to ensure that all IGT entities were represented within each rotation.

RHP Participants Engagement

RHP Participants were fully engaged throughout the development and implementation of this scoring process. Specifically, a call for projects was issued on August 16th. Once potential Performing Providers (new and existing) were identified, the full proposed scoring process and template was shared with them and their related IGT entities. Additionally, a summary of the agreed-upon process was shared with the whole Region during Monthly Regional Status and Information Calls and through the RHP3 website (www.setexasrhp.com). Throughout the development of this plan that incorporates the New 3-Year Projects, the Anchor has engaged the proposed Performing Providers and related IGT entities in discussions about the scoring process, the outcomes of the scoring process and funds distribution. Lastly, all of RHP3 was invited to participate in the required public hearing on September 20, 2013 where the scoring process was discussed.

Public Engagement

The Anchor for RHP3 has engaged Performing Providers, IGT Entities, community stakeholders and the general public, including consumers through the process of development, review and prioritization of the new 3-year projects.

On August 14, during the Region's Monthly Status Call, Regional stakeholders were informed of the required components of the process for adding New 3-Year Projects. Feedback on the prioritization process was requested at that time. Additionally, as follow up, an email was sent to the Region's full distribution list outlining the proposed process and requesting feedback by August 23rd. Documents shared include the proposed process, sample scoring template, and summary scoring process. Also discussed on this call was the timeline.

Participants in this call and on this distribution list include Performing Providers, Regional Advisory Committee Members, IGT Entities, Governmental representatives, and community stakeholders.

Also, on August 16, 2013, the Regional distribution list was used to make a Call for Projects. Projects were requested by September 3, 2013 and recipients were encouraged to share the Call

for Projects with other interested parties in the region. Recipients received HHSC guidance on adding new 3-year projects, at that time.

Once projects were received and collated, the initial list of projects was published on the Region's website (www.setexasrhp.org) on September 16, 2013 in advance of the required Public Hearing. This list was also shared through the aforementioned distribution list.

The required public hearing was held at Texas Children's Hospital - West Campus in Katy on September 20, 2013. The announcement for this event was shared with the Region's distribution list, on the Region's website and through One Voice Texas' distribution list to ensure broad participation. During the public hearing, the audience was provided an update on the status of the RHP Plan, as well as, a full description of the New 3-Year projects prioritization process and list of projects. Questions were also taken during this 2 hour event.

On October 25, 2013, the fully prioritized list (with IGT rotation included) with raw scoring rankings was published on the Region's website, through the Region's distribution list and through One Voice Texas' distribution list for final review and comment prior to submission to HHSC.

The prioritized list of New 3-Year Projects submitted to HHSC on October 30, 2013, consisted of 78 projects valued at approximately $779M. Three projects were not included – two for lack of IGT commitment and one withdrawn by the provider. Since formal submission, two other projects have been withdrawn by providers.

This plan consists of 27 priority projects, and 1 project with partial funding allocated and 6 contingency projects for consideration should additional allocation become available.

Other highlights from this plan include:
11 Performing Providers – 2 new participating organizations
- 5 Hospitals
- 2 Local Mental Health Authorities
- 2 County Health Departments

1 City Health Department
1 Academic Health Science Center
13 IGT Entities – 2 new participating organizations

Please see the Summary of Projects (below) for a prioritized list of projects submitted as of October 2013. Prioritized projects may have been withdrawn and project descriptions and project values altered through the review and approval process. Please refer to the HHSC Waiver Transformation website for up to date information.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
1	UTHSC-Houston	2.7.4	This project will provide targeted evidence-based full continuum of care services during preconception (risk assessment, a reproductive live plan, health promotion, and medical and psychosocial interventions for identified risks), inter-conception (well-woman examinations, routine family planning needs, risk assessment, and updating the reproductive life plan), prenatal (evidence-based care, counseling, education on nutrition, diet, exercise, and breast feeding, and antenatal steroids for labor at 24-34 weeks), and postpartum periods (evidence-based care during delivery and home visits throughout the first 6 weeks after delivery). Also, intensive interventions will be provided to women whose prior pregnancy ended in adverse outcome.	$17,250,498	Included in the attached plan.
2	Texana	2.15.1	Primary Care Integration into a Behavioral Healthcare Clinic by hiring a primary care practitioner and nurse to provide services directly in a Behavioral Healthcare Clinic where a “warm” hand off can be made the same day as the visit to the behavioral healthcare provider	$4,000,000	Included in the attached plan.
3	Oakbend	1.13.1	Implement Technology Assisted Behavioral Health Services in Emergency Department -implement a data exchange system between the hospital and mental health organizations in the community, in order to provide timely interventions that meet the needs of these patients.	$5,000,001	Included in the attached plan.
4	Chambers County	1.1.1	Expansion of primary health services for the residents through the creation of a new clinic in a rural setting.	$3,254,580	Included in the attached plan.
5	Harris County PHES	1.8.9	Youth Dental Health - expand current oral health outreach and treatment services in a focused effort to provide preventive dental screenings and fluoride varnishes, oral health education, and navigator-assisted referrals to community based dental providers	$4,968,666	Included in the attached plan.
6	Harris Health	1.7.3	Remote Patient Monitoring System - the project will create and implement a home monitoring program for patients with a chronic illness such as diabetes, hypertension, asthma, or heart failure. Patient data specific to their condition (i.e., blood glucose monitoring for diabetes, blood pressure for hypertension, pulse oximetry for asthma, or weight for heart	$17,003,859	Included in the attached plan.

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			failure) will be collected and relayed to a clinician, who will respond to the patient directly and intervene as necessary to treat, advise, and or refer the patient.		
7	MHMRA	2.13.1	Expand the Critical Time Intervention Program (CTI), a well-researched, evidence based practice that assists homeless individuals with severe and persistent mental illness through a comprehensive psychosocial assessment and intensive case management services	$3,128,580	Included in the attached plan.
8	MD Anderson	2.9.1	The project will provide clinical trial education, clinical trial coordination and navigation to improve clinical trial participation rates among Low-income, Uninsured, Medicaid eligible Latinos with lung cancer who receive services	$515,767	Included in the attached plan.
9	Memorial Medical	1.12.2	Expand access to psychiatric behavioral care for older adults (55 years and older) by implementing an Intensive Outpatient Program (IOP) utilizing a group psychotherapy clinical model.	$1,300,000	Included in the attached plan.
10	MHMRA	2.13.1	Preventative mental health care for foster youth - will serve adolescents within the foster care system with severe mental illness who are expected to experience the greatest difficulty transitioning into a healthy adulthood.	$4,130,580	Included in the attached plan.
11	City of Houston	2.9.1	A front end outreach and navigation service to link the uninsured, the insured who are disconnected from care and high end users of the Texas Children's Health Plan to appropriate levels of primary care and ancillary services.	$7,200,000	Included in the attached plan.
12	Ft. Bend County	2.15.1	Enhancement of integrated primary and behavioral health care services by adding a Screening, Brief Intervention and Referral to Treatment model (SBIRT) in an FQHC clinic.	$540,000	Included in the attached plan.
13	UTHSC-Houston	1.12.2	This project is an evidence-based trauma-focused behavioral intervention for children and youth, which will provide screening and general counseling or Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) at wellness centers located in medically underserved areas and will provide access to other services such as parenting education, family counseling, and navigation to additional resources.	$13,249,950	Included in the attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
14	MHMRA	1.13.1	Expand the current co-occurring (mental health and substance abuse) disorders program from a 30 bed to an ultimate 60 bed capacity. In this program, the provider will work with licensed chemical dependency residential treatment providers to offer up to 90 days of integrated co-occurring disorders care.	$7,974,233	Included in the attached plan.
15	Harris Health	2.12.2	Rothman Index - utilize evidence-based interventions in transition of care, education, coaching and home monitoring, focusing on patients diagnosed with heart failure, diabetes type 2 and hypertension. This includes a formal transition-of-care process that addresses the bio-psychosocial factors that are barriers or risks that are known to promote emergency-center use or readmission	$14,881,524	Included in the attached plan.
16	MD Anderson	2.7.5	Reducing Childhood Obesity Through the Implementation of Evidence-Based Obesity Programs in pediatric clinics	$3,864,300	Included in the attached plan.
17	Oakbend	2.11.1	Expand Use of Computer Physician Order Entry to Improve Patient Health Outcomes - implement a dedicated medication management team, consisting of physicians and pharmacist to have an ongoing medication reconciliation process that monitors and educates the patient from admission into the hospital through discharge	$4,000,002	Included in the attached plan.
18	Harris County PHES	2.7.5	Implement, from mobile clinical sites and fixed clinical sites, an evidence based program similar to the MEND program (a healthy lifestyle program) to address overweight children and adolescents. This is accomplished by educating families and encouraging them to change unhealthy attitudes about food, engaging in physical active on a regular basis, choosing foods that are healthy, tasty and nutritious, and taking action to sustain a healthy lifestyle.	$5,634,297	Included in the attached plan.
19	City of Houston	2.19.1	Expanded Community Re-Entry Network Program (CRNP) will provide access to primary care and behavioral health case management and services to newly released ex-offenders	$5,700,000	Included in the attached plan.
20	Ft. Bend County	2.13.1	Provide an intervention for a targeted behavioral population to prevent unnecessary use of services in criminal justice setting.	$1,080,000	Included in the attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
21	MHMRA	2.13.1	Implement an electronic system that will enable juvenile service providers to work together in a coordinated approach guided by mutually identified goals, shared access to information, and a collaborative treatment and service plan.	$4,740,000	Included in the attached plan.
22	UTHSC-Houston	1.1.1	Wellness Center #7- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$0	Withdrawn by the provider.
23	MHMRA	2.13.1	Expand the Chronic Consumer Stabilization Initiative (CCSI), an interagency collaboration with local police to provide intensive case management and work directly with individuals, family members, health providers, and/or staff at living facilities.	$875,580	Included in the attached plan.
24	Harris Health	1.7.6	eVisits via a web-based patient portal as an additional approach to manage primary care related conditions will provide more timely access to treatment instead of utilizing the traditional face-to-face visit allowing the primary care physician to review the patient's clinical question and communicate to the patient remotely to manage the patient's condition.	$12,698,886	Included in the attached plan.
25	Harris County PHES	2.7.2	Adopt and implement a 2A's and R (Ask, Advice, and Refer) tobacco intervention and deliver an evidence based group tobacco cessation program for patients not ready to make a quit attempt and to promote the motivation to quit.	$5,993,698	Included in the attached plan.
26	MD Anderson	2.6.3	Engaging Community Health Workers to Provide evidence-based Health Education about Melanoma/Skin Cancer to Underserved Populations	$2,429,301	Included in the attached plan.
27	UTHSC-Houston	1.1.1	Wellness Center #1- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Included in the attached plan. Partially funded.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
28	MHMRA	2.13.1	Expand the current Mobile Crisis Outreach Team (MCOT), which provides mobile crisis outreach and follow-up to adults and children who are unable or unwilling to access traditional psychiatric services	$13,225,692	Contingency Project.
29	Harris Health	1.9.2	Expand Wound Care Services - An initiative to ensure patients have access to specialty wound care services that are geographically convenient, and provide comprehensive services to include debridement, treatment, dressing changes, assessment and placement of wound vacutainers and ostomy care	$0	Withdrawn by the provider.
30	Harris County PHES	2.7.1	Implement video-based directly observed 3HP TB therapy through specially adapted cell phones that record patients taking medication that allow outreach workers to confirm medication adherence.	$3,376,380	Contingency Project.
31	UTHSC-Houston	2.1.2	The project will facilitate access to a medical home for youth leaving a juvenile justice center by assisting youths and their guardians in arranging for clinic visits, transportation, overcoming language barriers, and other challenges that can interfere with clinic visits; and establish a medical home that will meet this population's physical and psycho-social needs and assist older youths until they secure a medical home as adults.	$3,961,014	Contingency Project.
32	Harris Health	2.2.1	Transitional Diabetes Care - The transitional program will identify patients who are within six months of their 18th birthday and with type 1 diabetes, and commence a care plan of transition.	$0	Withdrawn by the provider.
33	MHMRA	2.13.1	Expansion of substance abuse detoxification services for women with co-occurring disorders and children.	$11,380,500	Contingency Project.
34	Harris County PHES	1.1.3	Implement mobile health services to targeted communities by providing immunizations, health and wellness screenings, health promotion/education activities, while also enrolling individuals and their families into private and public health insurance programs, and guide participants to additional care, as appropriate	$4,389,760	Contingency Project.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
35	UTHSC-Houston	2.2.2	Create a partial hospital program (PHP) for children with complex diseases complicated by poor adherence to treatment plans and/or inadequately met psychosocial needs. As an evidence-based approach to improving care and reducing costs, this program consists of an individualized multi-disciplinary care plan that provides daily medical assessments, treatment, educational instruction, individual and peer support therapy, family therapy, and nutritional/occupational/speech therapy.	$9,999,999	Not included in attached plan.
36	MHMRA	2.13.1	Expansion of short-term residential treatment for women with co-occurring disorders and their children	$7,587,000	Not included in attached plan.
37	Harris Health	1.7.6	Integrate eConsults as an additional approach within the referral process from primary care physicians to specialists to provide more timely access to treatment instead of utilizing the traditional face-to-face visit allowing the specialist to provide a plan of care that the primary care physician can utilize to manage the condition.	$12,267,741	Not included in attached plan.
38	Harris County PHES	2.7.3	Through the utilization of trained community health workers, and clinical professionals the provider will implement evidence based education and training addressing fall prevention and safety to elderly adults (55+), and to those individuals providing in-home care to elderly adults	$5,914,096	Not included in attached plan.
39	UTHSC-Houston	1.1.1	Location #1 – Chronic disease care and care coordination will be provided in a medically underserved area at a stand-alone chronic disease care clinic by advanced-care practitioners with special training in managing targeted chronic diseases under the direction of specialist physicians making the initial evaluation of the patient and decisions on the treatment plan.	$20,604,075	Not included in attached plan.
40	MHMRA	2.13.1	Expand the Crisis Residential Unit (CRU) a free-standing program focused on the needs of individuals who access hospital services and other emergency and criminal justice services, including a strong, integrated chemical dependency education and treatment track.	$22,313,200	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
41	Harris Health	2.5.2	Implementation of a Predictive Modeling System - Prediction will promote optimal use of primary care interventions and disease and case management services tailored to specific individuals based on disease process and access to care patterns. Electronic information sharing will promote a continuum of awareness of adherence to treatment plans, pharmacy, and primary and secondary care utilization	$15,846,654	Not included in attached plan.
42	UTHSC-Houston	1.1.1	Location #2 - Chronic disease care and care coordination will be provided in a medically underserved area at a stand-alone chronic disease care clinic by advanced-care practitioners with special training in managing targeted chronic diseases under the direction of specialist physicians making the initial evaluation of the patient and decisions on the treatment plan.	$20,604,075	Not included in attached plan.
43	MHMRA	2.13.1	The project proposes to provide young adults recently discharged from public psychiatric hospitals with intensive rehabilitative services. It augments already available supportive housing with intensive mental health services modeled on a modified Assertive Community Treatment (ACT) model. These youth-oriented services will include high-intensity/low caseload case management offered on-site.	$2,850,000	Not included in attached plan.
44	UTHSC-Houston	2.7.1	This program will mobilize existing community resources in partnership with several agencies and care providers to establish a sustainable continuum of evidence-based breast cancer care to reduce disparities in underserved populations in Houston using: 1) participatory systems development of service provision, including mobile mammography screening; navigation to diagnostic services for women with positive mammography; and navigation to treatment for women with breast cancer, and 2) implementation of health promotion programs to increase use of breast health services in communities of underserved women.	$13,249,950	Not included in attached plan.
45	MHMRA	2.13.1	Additional units of the Crisis Intervention Response Team (CIRT), which is a program that partners law enforcement officers who are certified in crisis	$10,556,988	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
			intervention training with licensed master-level clinicians to respond to law enforcement calls.		
46	UTHSC-Houston	1.1.1	Wellness Center #9- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Not included in attached plan.
47	MHMRA	2.13.1	Telephonic Case Management and Follow-Up Call Program - making follow-up calls to clients who have been released from emergency, residential and mobile services/facilities to ensure they are following through on their discharge plans and getting connected to the next level of care	$1,747,500	Not included in attached plan.
48	UTHSC-Houston	1.1.1	Wellness Center #3- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Not included in attached plan.
49	MHMRA	2.13.1	The provider will partner with a community-based organization to implement an evidence-based parent education program, the Positive Parenting Program (Triple P) at mental health clinics	$3,307,689	Not included in attached plan.
50	UTHSC-Houston	2.7.1	The evidence-based automated My Own Health Report (MOHR) tool will be integrated into the patient portal and Electronic Health Record (EHR) at wellness centers and clinics to allow primary care practices to systematically collect patient-reported data on health behaviors (e.g., eating patterns, physical activity, tobacco use, risky drinking) and psycho-social issues (e.g., anxiety, depression, and stress) that are important determinants of chronic disease. CHWs will assist patients in using the MOHR tool and providers will receive training on behavior change counseling and referral to appropriate services.	$8,499,999	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
51	MHMRA	1.11.1	Clients who are unwilling to access crisis services over the phone or in person will reach out through chat/text modalities so that services can be provided and explored before the client needs emergency services or hospitalization.	$2,790,000	Not included in attached plan.
52	UTHSC-Houston	2.7.1	At wellness centers and clinics, a program will be implemented that includes conduct opt-out HIV/STI testing and behavioral risk assessment; a referral system for persons diagnosed with HIV/STI; provider and patient education about routine testing and risk reduction strategies; and collaboration with community based organizations to develop a community education programs that will attract at-risk persons for testing for HIV/STIs.	$9,750,939	Not included in attached plan.
53	MHMRA	2.13.1	Expand existing staff to create a dedicated assessment intake team for the emergency back-dock law enforcement intakes.	$5,956,782	Not included in attached plan.
54	UTHSC-Houston	2.2.2	The provider will implement a Sickle Cell Crisis Prevention Program (SCCPP) that will establish trust relationships between patients and clinicians as patients are met in their home for both chronic preventive and acute impending crisis interventions. Patients may also be transported by SCCPP staff to an accessible outpatient setting, as appropriate. Providing SCD clients with an option for home care instead of ED visits will enhance their quality of life by limiting the intensity of the painful crisis, improve patient and clinician satisfaction, and greatly reduce costs due to ED visits and hospital admissions.	$15,000,000	Not included in attached plan.
55	UTHSC-Houston	2.6.2	Implement an internet-accessible portal within clinics to evidence-based disease management, disease prevention, and health promotion interventions for youth and adults with additional access from community locations (e.g. homes, schools, and organizations). The portal will be accessible to patients prior to their visits to provide a patient profile on important self-management issues for discussion with the provider and to provide self-management skills training as part of a self-management action plan following the clinic visit. (Focus: Asthma, Epilepsy, and HIV)	$5,353,500	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
56	UTHSC-Houston	1.1.1	Wellness Center #5- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Not included in attached plan.
57	UTHSC-Houston	1.1.1	Wellness Center #4- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Not included in attached plan.
58	UTHSC-Houston	1.1.1	Wellness Center #8- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Not included in attached plan.
59	UTHSC-Houston	1.1.1	Wellness Center #2- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Not included in attached plan.
60	UTHSC-Houston	1.1.1	Wellness Center #10- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic disease self-management skills development.	$20,604,075	Not included in attached plan.
61	UTHSC-Houston	1.1.1	Wellness Center #6- The newly established center, targeting a medically underserved area and/or medically underserved population, will provide primary and preventive clinical services, health screenings, referral services, health education and promotion, and chronic	$20,604,075	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
			disease self-management skills development.		
62	UTHSC-Houston	1.12.2	Create a network of parent support services across a variety of organizations within the local community, including wellness centers, surrounding schools, child care centers, and community-based organizations to implement a comprehensive parent and child behavior intervention that will link with a systematic process for screening families of young children for home violence and dysfunction. Interventions include the evidence-based tiered Positive Parenting Program (Triple P, TP), and the Safe Environment for Every Kid (SEEK) program.	$14,900,784	Not included in attached plan.
63	UTHSC-Houston	2.7.5	The provider will implement a coordinated approach to reduce obesity and prevent obesity-related comorbidities in adolescents (14-18y) and their families. Adolescents identified as overweight, or obese by clinicians will be referred into a program developed by the National Initiative for Children's Healthcare Quality that includes brief motivational interviewing techniques training for providers and staff, decision supports for clinical care & integrated guidelines into day-to-day practice for identification, screening, use of EHR to identify children at risk for obesity, and supportive education for the family.	$6,151,158	Not included in attached plan.
64	UTHSC-Houston	2.7.5	The project aims to prevent obesity and promote weight maintenance in children (2-13y) and their families by promoting healthy diet and physical activity behaviors and environments. The project uses the Obesity Chronic Care Model to integrate primary care clinics, community resources, schools and preschools in a systems-level approach to reinforce and sustain behavior change. The project will build upon current health promotion efforts in diet and physical activity with children and their families in the Houston community.	$7,051,158	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
65	UTHSC-Houston	2.7.1	The program will increase and standardize the use of Screening, Brief Intervention, and Referral to Treatment (SBIRT) for alcohol and drug misuse in wellness centers and clinics targeting patients who are not yet alcohol dependent but are drinking at risk levels and those with severe alcohol dependence and in need of inpatient detoxification and treatment. The project will also target those who report any illicit drug use, or who report taking prescription medication in excess of what is prescribed.	$10,500,000	Not included in attached plan.
66	UTHSC-Houston	2.7.1	The project aims to decrease Second Hand Smoke Exposure (SHSe) and reduce related mortality and morbidity, particularly among children (under 18 years of age) with Pediatric Asthma by implementing a comprehensive stepped-care approach that seeks to protect non-smoking children (and adults who live with smokers) from SHSe and offer resources for quitting to patients who smoke.	$9,999,999	Not included in attached plan.
67	UTHSC-Houston	2.71	The provider will implement Ask-Advise-Connect (AAC), an evidence-based program that links tobacco users to Quitline treatment support by screening and proactively contacting these patients for follow-up within 48 hours.	$8,449,998	Not included in attached plan.
68	UTHSC-Houston	2.6.2	This project is an evidence-based, multidisciplinary weight management program for adults based on the LookAHEAD intervention, which produces clinically significant weight loss, improves chronic disease parameters, reduces medication requirements, and enhances functional status. The intervention also has a ripple effect on spouses and has been shown to be effective in all ethnic/racial groups.	$8,450,700	Not included in attached plan.
69	UTHSC-Houston	2.6.3	Integrate community health workers into pediatric and family practice centers to improve chronic disease management of asthma using Healthy Homes, an evidenced based environmental intervention through health education, home assessments, and by monitoring outcomes.	$9,750,939	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
70	UTHSC-Houston	2.1.2	Establish pediatric medical homes for children and youth with special health care needs (CYSHCN) in extended care clinics in medically underserved areas to provide multidisciplinary services, improve care coordination, and facilitate transitions.	$13,891,326	Not included in attached plan.
71	UTHSC-Houston	1.12.2	The proposed project will provide three levels of services to community colleges: 1. faculty and staff training on student mental health issues, and suicide prevention; 2. crisis intervention, assessment and brief therapy; 3. peer-to-peer support; and 4. Psychiatric assessments and treatment.	$11,791,440	Not included in attached plan.
72	UTHSC-Houston	2.15.1	Using Health Families America (HFA), and evidence-based, home visitation program which utilizes trained and supervised local, community-based lay home visitors, and is one of the home visitation models utilized by the USDHHS Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV), the project aims to improve infant medical and developmental outcomes and maternal pregnancy related outcomes (including postpartum depression) by implementing a comprehensive program of home visitation in conjunction with regular clinic-based maternal screening for post-partum depression (PPD).	$12,499,998	Not included in attached plan.
73	UTHSC-Houston	2.7.2	Implement an Internet-accessible portal to deliver direct access, or linkage to health promotion interventions for youth within clinics and wellness centers with additional access by patients from Internet-accessible community locations (e.g. homes, schools, and organizations). (Focus: Smoking Cessation)	$5,353,500	Not included in attached plan.
74	UTHSC-Houston	2.6.2	The project will provide an evidence-based program of pre-conception counseling to women at risk of alcohol and/or tobacco-exposed pregnancies, women who are obese, and women with other pregnancy risk factors to reduce risks of poor pregnancy outcomes, which will include alcohol/tobacco cessation services, immunization services (e.g., Hep B and rubella, if seronegative), folic acid and/or iron supplementation, STI testing, and referrals to clinics to discuss medications and chronic conditions.	$7,500,000	Not included in attached plan.

Priority #	Performing Provider Name	Project Option	Descriptive Project Title	3-Year Project Value	Notes
75	UTHSC-Houston	2.6.2	The provider will implement two evidence-based bilingual healthcare programs to promote diet and physical activity in pregnant women and mothers with infants (0-2y). One program is a CHW-led nutrition education program specifically for pregnant women and women with infants and the other program is a nationally-recognized cooking program led by CHWs and RDs and works in collaboration with several community organizations such as food banks, WIC clinics, etc.	$8,551,158	Not included in attached plan.
76	UTHSC-Houston	2.2.2	Targeting elderly patients, disabled patients, patients with incurable/advanced diseases and/or painful physical conditions, and postpartum women up to 2 weeks after delivery, this project will provide home health care focused on palliative care needs – to improve/maintain quality of life and optimize functional health status.	$13,986,000	Not included in attached plan.
77	UTHSC-Houston	2.7.1	This project will implement an evidence-based teen sexual health and dating violence prevention program among 6th-12th graders in clinics and wellness centers; train healthcare providers in implementing this program and in recognizing the signs and symptoms of dating violence and in administering effective adolescent DV screening practices for their adolescent patients ages 10-19; and replicate an evidence-based contraception project that has been shown to decrease teen birth rates by 59%.	$8,499,999	Not included in attached plan.
78	UTHSC-Houston	2.6.1	This project will improve the quality and availability of chronic disease management by using mobile health tools (mHealth) to enhance communication between clinicians and patients through cell phones and sensors that send data (e.g. blood glucose, blood pressure, weight, oxygen saturation) to clinicians.	$9,639,039	Not included in attached plan.