

Summary of the Transformational Extension Protocol (Menu) for Replacement Projects- HHSC Proposal¹

Highlights of the extension menu:

- Combines similar project options and removes selected project options with the aim to keep **the most transformative options** on the menu.
- The menu applies to the replacement projects only: 4-year projects from 2.4, 2.5, 2.8, and 1.10 project areas [except 1.10 for learning collaborative purposes]; providers of projects withdrawn after June 30, 2014; projects identified from high risk list based on HHSC review; and providers electing to discontinue a current project(s) and propose a replacement.
- Existing projects that are not identified from the high risk list can continue, regardless of the revised menu options. For existing projects, the only project options that are not planned for waiver extension are 2.4, 2.5, 2.8 and 1.10 [except 1.10 for learning collaborative purposes]. Other changes to the protocols may require "next steps" for existing projects.

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
1.1 Expand Primary Care Capacity				
1.1.1 Establish more primary care clinics			Yes	HHSC recommends not to include this project option in the extension menu because significant efforts were devoted in DY2-5 to the establishment of new primary care clinics and providers submitting replacement projects are now encouraged to concentrate more on the delivery of primary care (Medical Homes, Patient Centered Primary Care delivery, disease management/care management).
1.1.2 Expand existing primary care capacity			Yes	HHSC recommends not to include this project option in the extension menu because significant efforts were devoted in DY2-5 to the establishment of new primary care clinics and providers submitting replacement projects are now encouraged to concentrate more on the delivery of primary care (Medical Homes, Patient Centered Primary Care delivery, disease management/care management).
1.1.3 Expand mobile clinics	Yes			HHSC recommends keeping this project option since it is utilizing existing clinics and potentially recently opened clinics for reaching additional patients in the target population.
1.2 Increase Training of Primary Care Workforce				
1.2.1 Update primary care training programs to include training on the medical home and chronic care models, disease registry use for population health management, patient panel management, oral health, and other identified training needs and/or quality/ performance improvement			Yes	HHSC recommends not including this project option since training on these particular issues can be incorporated in any of the replacement projects proposed based on the extension menu.

¹ Extension/renewal and protocol changes are all subject to CMS approval.

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<p>Existing menu: 1.2.2 Increase the number of primary care providers (i.e., physicians, residents, nurse practitioners, physician assistants) and other clinicians/ staff (such as health coaches and community health workers/ promotoras).</p> <p>Proposed for extension menu: Increase capacity by providing training to Community Health Workers (CHWs)/promotoras, health coaches, peer specialists and other alternative clinical staff working in primary care.</p>	Yes			<p>HHSC recommends modifying this project option to reflect increase in capacity in alternate clinical staff working in the primary care setting. This approach will change the hiring of physicians and physician extenders as the primary goal of the project; however projects are still able to hire physicians and extenders in other project options to support the main goal of a project.</p>
<p>1.2.3 Increase the number of residency/training program for faculty/staff to support an expanded, more updated program</p>			Yes	<p>HHSC recommends not include this project option in the extension menu due to possible time constraints and not enough time for the new programs to get off the ground.</p>
<p>1.2.4 Establish/expand primary care training programs, with emphasis in communities designated as health care provider shortage areas (HPSAs)</p>			Yes	<p>HHSC recommends not keeping this project option but including in the menu additional options to increase capacity; e.g. increase capacity by providing training to CHW/promotoras, health coaches, peer specialists and other clinical staff working in primary and behavioral health care.</p>
<p>Proposed for extension menu: Increase capacity by providing training to CHW, health coaches, peer specialists and other alternative clinical staff working in behavioral health care.</p>				<p>This represents a new project option which corresponds to 1.14.1 and 2.18.1 in the existing menu.</p>
<p>Proposed for extension menu: Increase capacity by providing training to promote wellness, provide disease prevention and/or increase health literacy.</p>				<p>This represents a new project option which corresponds to 2.6.3 in the existing menu.</p>
<p>1.3 Implement a Chronic Disease Management Registry</p>				
<p>1.3.1 Implement/enhance and use chronic disease management registry functionalities</p>			Yes	<p>HHSC recommends not including this project option in the extension menu. Replacement projects can propose to establish a registry as a component of a project, but the overall project should be about managing the needs of the population in the registry, e.g. care management/disease management.</p>
<p>1.4 Enhance Interpretation Services and Culturally Competent Care</p>				

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
1.4.1 Expand access to written and oral interpretation services			Yes	HHSC recommends not including this project option in the extension menu. This option was available to help organizations to improve internal processes, which was one of the goals for the waiver; however, this should be a part of the organizational goals, and not the main focus of the replacement projects.
1.4.2 Enhance Organizational Cultural Competence			Yes	HHSC recommends not including this project option in the extension menu, because no providers selected this project option in the past.
1.4.3 Enhance Systemic Cultural Competence			Yes	HHSC recommends not including this project option in the extension menu, because no providers selected this project option in the past.
1.4.4 Clinical Cultural Competence: Develop cross-cultural training program that is a required, integrated component of the training and professional development of health care providers at all levels.			Yes	HHSC proposes to remove project option as this was viewed as an infrastructure/capacity type initiative. Based on the recommendations from Clinical champions, HHSC suggest adding this as an optional core component to other project options. (e.g. care navigation, medical home, etc.).
1.4.5 Implement Quality improvement efforts that include culturally and linguistically appropriate patient survey methods as well as process and outcome measures that reflect the needs of multicultural and minority populations			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
1.4.6 Clinical Cultural Competence: Develop programs to help patients navigate the health care system and become a more active partner in the clinical encounter.			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
1.5 Collect Valid and Reliable Race, Ethnicity, and Language (REAL) Data to Reduce Disparities				
1.5.1 Train patients and staff on the importance of collecting REAL data			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
1.5.2 Implement intervention that involves collaborating/partnering/ instituting data sharing agreements with Medicaid agencies, public health departments, academic research centers, other agencies, etc. to better assess patient populations and aid in the evaluation of health disparities			Yes	HHSC is considering a requirement to report on data collection and data sharing agreements as a required core component under the extension menu. It appears that this step should be included in majority of the projects and therefore is not needed as a separate project area in the extension menu.
1.5.3 Implement project to enhance collection, interpretation, and / or use of REAL data.			Yes	HHSC proposes to remove project option and integrate it as an optional core component for all project options included on the extension menu.
1.6 Enhance Urgent Medical Advice				
1.6.1 Expand urgent care services			Yes	HHSC recommends not including this project option in the extension menu due

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1.6.2 Establish/expand access to medical advice and direction to the appropriate level of care to reduce Emergency Department use for non-emergent conditions and increase patient access to health care.	Yes			to very low provider interest. HHSC recommends including this project option in the extension menu.
1.7 Introduce, Expand, or Enhance Telemedicine/Telehealth				
1.7.1 Implement telemedicine program to provide or expand specialist referral services in an area identified as needed to the region.	Yes			HHSC recommends including this project option in the extension menu.
1.7.2 Implement remote patient monitoring programs for diagnosis and/or management of care.	Yes			HHSC recommends including this project option in the extension menu.
1.7.3 Use telehealth to deliver specialty, psychosocial, and community-based nursing services	Yes			HHSC recommends including this project option in the extension menu.
1.7.4 Develop a teledentistry infrastructure and use telehealth to provide dental and oral health services		Yes		HHSC is combining this project option with other activities that can be carried out under project option 1.8.11.
1.7.5 Use telehealth services to provide medical education and specialized training for targeted professionals in remote locations.			Yes	HHSC recommends not including this project option in the extension menu, but including the activity as an optional core component for telehealth projects.
1.7.6 Implement an electronic consult or electronic referral processing system to increase efficiency of specialty referral process by enabling specialists to provide advice and guidance to primary care physicians that will address their questions without the need for face-to-face visits when medically appropriate.		Yes		HHSC recommends combining this project option with 1.7.1 option included in the extension menu.
1.8 Increase, Expand, and Enhance Oral Health Services				
1.8.1 The development of academic linkages with the three Texas dental schools, to establish a multi-week externship program for fourth year dental students to provide exposure and experience in			Yes	HHSC recommends not including this project option in the extension menu due to very low provider interest.

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
providing dental services within a rural setting during their professional academic preparation.				
1.8.2 The establishment of a clinical rotation, continuing education within various community settings for dental residents to increase their exposure and experience providing dental services to special populations such as the elderly, pregnant women, young children, medically compromised, and/or special needs patients.			Yes	HHSC recommends not including this project option in the extension menu, because nobody picked this project option in the past.
1.8.3 The establishment of a loan repayment program or scholarships for advanced training/education in a dental specialty with written commitments to practice in underserved markets after graduation for fourth year dental students, new dental and dental hygiene graduates, and dental residents.			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
1.8.4 Grand rounds, in-service trainings, and other continuing education events that integrate information on oral health issues and implications as related to chronic diseases, such as diabetes and cardiovascular disease, and the importance of good oral health during pregnancy and perinatal period.			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
1.8.5 Establishing a referral system/network that provides medically complex patients with coordinated care between dental and medical providers such as cardiologists, pediatricians, OB/GYNs, endocrinologists, oncologists, etc.			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
1.8.6 The expansion of existing dental clinics, the establishment of additional dental clinics, or the expansion of dental clinic hours.	Yes			HHSC recommends including this project option in the extension menu.
1.8.7 The expansion or establishment of satellite mobile dental clinics with an affiliated fixed-site dental clinic location.			Yes	HHSC recommends not including this project option in the extension menu due to very low provider interest.
1.8.8 The development of a tele-dentistry infrastructure including Medicaid reimbursement to expand access to dental specialty consultation services in rural and other limited access areas.			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
1.8.9 The implementation or expansion of school-based sealant and/or fluoride varnish programs that provide sealant placement and/or fluoride varnish applications to otherwise unserved school-aged children by enhancing dental workforce capacity through collaborations and partnerships with dental and dental hygiene schools, local health departments (LHDs), federally qualified health centers (FQHCs), and/or local dental providers.	Yes			HHSC recommends including this project option in the extension menu.
1.8.10 The addition or establishment of school-based health centers that provide dental services for otherwise unserved children by enhancing dental workforce capacity through collaborations and partnerships with dental and dental hygiene schools, LDHs, FQHCs, and/or local dental providers.			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
<p>Existing menu 1.8.11 The implementation of dental services for individuals in long-term care facilities, intermediate care facilities, and nursing homes, and for the elderly, and/or those with special needs by enhancing dental workforce capacity through collaborations and partnerships with dental and dental hygiene schools, LHDs, FQHCs, and/or local dental providers.</p> <p>Proposed for the Extension Menu: Provide targeted dental intervention for vulnerable and underserved population in alternate setting (e.g. mobile clinics, teledentistry, FQHC, etc.)</p>	Yes			HHSC is keeping this project option with a modification to specify that the services provided under this project option are for vulnerable and underserved populations provided in alternate setting.
1.9 Expand Specialty Care Capacity				
1.9.1 Expand high impact specialty care capacity in most impacted medical specialties			Yes	HHSC recommends not including this project option in the extension menu, and allow replacement projects under project option 1.9.2.
1.9.2 Improve access to specialty care (in underserved areas)	Yes			HHSC recommends keeping 1.9.2 option for underserved areas only, so that providers can to continue increase in access to specialty care in these areas with limited access to services.
1.10 Enhance Performance Improvement and Reporting Capacity				

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
1.10.1 Learning Collaboratives to support enhanced improvement capacity within people (3 year project option)	Yes			HHSC recommends keeping this project option as a placeholder for anchors to work on learning collaboratives. HHSC also recommends combining three project options into one.
1.10.2 Learning Collaboratives to support enhanced improvement capacity through technology (3 year project option)	Yes			HHSC recommends keeping this project option as a placeholder for anchors to work on learning collaboratives. HHSC also recommends combining three project options into one.
1.10.3 Learning Collaboratives to support enhanced improvement capacity within systems (3 year project option)	Yes			HHSC recommends keeping this project option as a placeholder for anchors to work on learning collaboratives. HHSC also recommends combining three project options into one.
1.11 Implement technology-assisted services to support, coordinate, or deliver behavioral health services				
1.11.1 Procure and build the infrastructure needed to pilot or bring to scale a successful pilot of the selected forms of service in underserved areas of the state			Yes	HHSC is recommending not including this project option in the extension menu since the replacement projects can be proposed under the project option that is currently described under 1.11.2
1.11.2 Implement technology-assisted behavioral health services from psychologists, psychiatrists, substance abuse counselors, peers and other qualified providers		Yes		HHSC is recommending combine this project option with 1.7 Introduce, Expand, or Enhance Telemedicine/Telehealth , and create its own project option for BH under 1.7
1.12 Enhance service availability of appropriate levels of behavioral health care				
1.12.1 Establish extended operating hours at a select number of Local Mental Health Center clinics or other community-based settings in areas of the State where access to care is likely to be limited			Yes	HHSC is recommending not including this project option in the extension menu but adding this option as a core component that providers can implement in other project options.
1.12.2 Expand the number of community based settings where behavioral health services may be delivered in underserved areas			Yes	HHSC is recommending not including this project option in the extension menu but adding this option as a core component that providers can implement in other project options.
1.12.3 Develop and staff a number of mobile clinics that can provide access to BH care in very remote, inaccessible, or impoverished areas of Texas.	Yes			HHSC is recommending keeping this project option in the extension menu.
1.13 Development of behavioral health crisis stabilization services				
1.13.1 Develop and implement crisis stabilization services to address the identified gaps in the current community crisis system				HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this category.

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1.14 Develop Workforce enhancement initiatives to support access to behavioral health providers in underserved markets and areas				
1.14.1 Implement strategies defined in the plan to encourage behavioral health practitioners to serve medically indigent public health consumers in HPSA areas or in localities within non-HPSA counties which do not have access equal to the rest of the county.		Yes		HHSC is recommending to combine this project with other project options under project area 1.2.
2.1 Enhance/Expand Medical Homes				
Existing protocol: 2.1.1 Develop, implement, and evaluate action plans to enhance/ eliminate gaps in the development of various aspects of PCMH standards. Proposed for the extension menu: <i>Implement PCMH</i>	Yes			HHSC proposes to retain and redefine this as Implement PCMH , removing the planning component.
2.1.2 Collaborate with an affiliated Patient-Centered Medical Home to integrate care management and coordination for shared, high-risk patients.	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this category.
2.1.3 Implement medical homes in HPSA and other rural and impoverished areas using evidence-approached change concepts for practice transformation developed by the Commonwealth Fund’s Safety Net Medical Home Initiative	Yes			HHSC recommends keeping this project option in the extension menu.
2.2 Expand Chronic Care Management Models				
2.2.1 Redesign the outpatient delivery system to coordinate care for patients with chronic diseases			Yes	HHSC recommends eliminating this project option, and allowing replacement projects under 2.2.2.
2.2.2 Apply evidence-based care management model to patients identified as having high-risk health care needs	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this category.
2.2.3 Redesign rehabilitation delivery models for persons with disabilities			Yes	HHSC recommends not including this project option in the extension menu, because no provider selected this project option in the past.
2.2.4 Develop a continuum of care in the			Yes	HHSC recommends not including this project option in the extension menu,

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community for persons with serious and persistent mental illness and co-occurring disorders				because no provider selected this project option in the past.
2.2.5 Develop care management functions that integrate the primary and behavioral health needs of individuals		Yes		HHSC will combine this project option with 2.15.1 and create a single option related to integrated care.
2.3 Redesign Primary Care				
2.3.1 Redesign primary care in order to achieve improvements in efficiency, access, continuity of care, and patient experience			Yes	HHSC recommends not to include this project option in the extension menu because significant efforts were devoted in DY2-5 to the establishment of new primary care clinics and redesign of the existing ones. Providers submitting replacement projects are now encouraged to concentrate more on the delivery of primary care (Medical Homes, Patient Centered Primary Care delivery, disease management/care management).
2.4 Redesign to Improve Patient Experience (Note: these are the project options from the 4 year menu. This project area is not available in 3 year menu)				
2.4.1 Implement processes to measure and improve patient experience			Yes	HHSC recommends not including this project option in in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.4.2 Implement other evidence based project to improve patient experience in an innovative manner			Yes	HHSC recommends not including this project option in in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.4.3 Increased patient satisfaction			Yes	HHSC recommends not including this project option in in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.5 Redesign for Cost Containment (Note: these are the project options from the 4 year menu. This project area is not available in 3 year menu)				
2.5.1 Develop an integrated care model with outcome-based payments			Yes	HHSC recommends not including this project option in in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.5.2 Implement other evidence based project to redesign for cost containment in an innovative manner			Yes	HHSC recommends not including this project option in in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.5.3 Cost saving			Yes	HHSC recommends not including this project option in in the extension menu. This project option was already eliminated from a menu available for 3-year projects.

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2.6 Implement Evidence-based Health Promotion Programs				
2.6.1 Engage in population-based campaigns or programs to promote healthy lifestyles using evidence-based methodologies including social media and text messaging in an identified population.	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.6.2 Establish self-management programs and wellness using evidence-based designs.	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.6.3 Engage community health workers in an evidence-based program to increase health literacy of a targeted population		Yes		HHSC recommends not keeping this project option, but combining it under project area 1.2 with other project options reflecting primary and behavioral health services limited to community health workers and peer specialists staff types.
2.7 Implement Evidence-based Disease Prevention Programs				
2.7.1 Implement innovative evidence-based strategies to increase appropriate use of technology and testing for targeted populations (e.g., mammography screens, colonoscopies, prenatal alcohol use, etc.) and <u>provide follow up interventions (e.g. treatment, etc.) for tests with positive results</u>	Yes			HHSC recommends keeping this project option and modifying it to reflect that follow up is required as part of the project when issues are identified during the testing.
2.7.2 Implement innovative evidence-based strategies to reduce tobacco use.	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.7.3 Implement innovative evidence-based strategies to increase early enrollment in prenatal care.			Yes	HHSC recommends removing this as a project option and including as a core component for 2.7.4.
2.7.4 Implement innovative evidence-based strategies to reduce low birth weight and preterm birth.	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.7.5 Implement innovative evidence-based strategies to reduce and prevent obesity in children	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
and adolescents.				specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.8 Apply Process Improvement Methodology to Improve Quality/Efficiency (Note: these are the project options from the 4 year menu. This project area is not available in 3 year menu)				
2.8.1 Design, develop, and implement a program of continuous, rapid process improvement that will address issues of safety, quality, and efficiency.			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.2 "Other" project option: Implement other evidence-based project to apply process improvement methodology to improve quality/efficiency in an innovative manner not described in the project options above.			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.3 Project Option: Reduction in Potentially Preventable Admission Rates (PPAs)			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.4 Project Option: Reduction in 30-Day Hospital Readmission Rates (Potentially Preventable Readmissions)			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.5 Project Option: Reduction in Potentially Preventable Complications (PPC)			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.6 Project Option: Reduce Inappropriate ED Use			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.7 Project Option: Improved Clinical Outcome for Identified Disparity Group			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.8 Project Option: Improved Access to Care			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.9 Project Option: Improvement in Perinatal Health Indicator(s)			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.10 Project Option: Improve Clinical Indicator/Functional Status for Target Population			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.11 Project Option: Sepsis			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.8.12 Project Option: Other			Yes	HHSC recommends not including this project option in the extension menu. This project option was already eliminated from a menu available for 3-year projects.
2.9 Establish/Expand a Patient Care Navigation Program				
2.9.1 Provide navigation services to targeted	Yes			HHSC recommends keeping this project option and will solicit suggestions from

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patients who are at high risk of disconnect from institutionalized health care (for example, patients with multiple chronic conditions, cognitive impairments and disabilities, Limited English Proficient patients, recent immigrants, the uninsured, those with low health literacy, frequent visitors to the ED, and others)				Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.10 Use of Palliative Care Programs				
2.10.1 Implement a Palliative Care Program to address patients with end-of-life decisions and care needs	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.11 Conduct Medication Management				
2.11.1 Implement interventions that put in place the teams, technology, and processes to avoid medication errors			Yes	HHSC recommends not including this project option in the extension menu. Medication management can be a component of a transformational project.
2.11.2 Evidence-based interventions that put in place the teams, technology and processes to avoid medication errors.			Yes	HHSC recommends not including this project option in the extension menu. Medication management can be a component of a transformational project.
2.12 Implement/Expand Care Transitions Programs				
2.12.1 Develop, implement, and evaluate standardized clinical protocols and evidence-based care delivery model to improve care transitions			Yes	HHSC recommends not including this project option in the extension menu. HHSC will ask Clinical Champions submitted in the Transformational Impact Summaries to highlight best protocols that can be shared with providers that will implement replacement projects under project option 2.12.2.
2.12.2 Implement one or more pilot intervention(s) in care transitions targeting one or more patient care units or a defined patient population.	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.
2.13 Provide an intervention for a targeted behavioral health population to prevent unnecessary use of services				
2.13.1 Design, implement, and evaluate research-supported and evidence-based interventions tailored towards individuals in the target population	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area.

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
2.14 Implement person-centered wellness self-management strategies and self-directed financing models				
2.14.1 Establish interventions to promote person-centered wellness self-management strategies and train staff / contractors to empower consumers to take charge of their own health care.			Yes	HHSC recommends not including this project option in the extension menu. Providers who want to propose replacement projects to address this issue can include it as part of 2.9 or 2.6 project areas.
2.14.2 Implement self-directing financing models including wellness accounts. Note: If selected, this must be implemented as part of a person-centered wellness project as described in 2.14.1.			Yes	HHSC recommends not including this project option in the extension menu. Providers who want to propose replacement projects to address this issue can include it as part of 2.9 or 2.6 project areas.
2.15 Integrate Primary and Behavioral Health Care Services				
2.15.1 Design, implement, and evaluate projects that provide integrated primary and behavioral health care services	Yes			HHSC recommends keeping this project option and will solicit suggestions from Clinical Champions submitted in the Transformational Impact Summaries for specific models/best practices that can be recommended to providers who want to propose replacement projects in this area. HHSC intent is to provide more direction for projects in this area to describe specific levels of integration in order for replacement projects to select level of integration they are proposing to achieve.
2.16 Provide virtual psychiatric and clinical guidance to primary care providers delivering services to behavioral patients				
2.16.1 Design, implement, and evaluate a program to provide remote psychiatric consultative services to all participating primary care providers delivering services to patients with mental illness or substance abuse disorders		Yes		HHSC recommends to combine this project option with telemedicine option under project area 1.7.
2.17 Establish improvements in care transition from inpatient setting for individuals with BH/SA disorders.				
2.17.1 Design, implement, and evaluate interventions to improve care transitions from the inpatient setting for individuals with mental health and/or substance abuse disorders.	Yes			HHSC recommends keeping this project option but moving this project option to project area 2.12 as a BH specific project option.
2.18 Recruit, train, and support consumers of mental health services to provide peer support services				

Project Option	Stays on the menu?	Combined with other areas?	Removed from the menu?	Notes
2.18.1 Design, implement, and evaluate whole health peer support for individuals with mental health and /or substance use disorders.		Yes		HHSC recommends not keeping this project option by itself, but combining under project area 1.2 with other project options reflecting primary and behavioral health services limited to community health workers and peer specialists staff types.
2.19 Develop Care Management Function that integrates primary and behavioral health needs of individuals				
2.19.1 Design, implement, and evaluate care management programs and that integrate primary and behavioral health needs of individual patients		Yes		HHSC recommends not keeping this project option by itself, but combining under project area 2.15 - Integrate Primary and Behavioral Health Care Services.