

RHP 4
ADDITION OF 3-YEAR DSRIP PROJECTS

On October 22, 2013 the RHP 4 Anchor Entity conducted a conference call with RHP 4 Performing Providers who submitted proposed 3-year DSRIP projects and their related IGT entities to discuss the prioritization of the proposed projects. The approach for evaluating and prioritizing the proposed projects was based on a National Institutes of Health grant scoring tool modified for this purpose. The initial project prioritization list was developed by an Anchor Entity-selected independent clinician reviewer who was knowledgeable of the 1115 Waiver process, but not directly involved in RHP 4's DSRIP project activities. The independent reviewer scored each proposed DSRIP project using the following weighted criteria:

- Alignment with Community Needs (30%);
- Transformational Impact (25%);
- Integration with Other Projects/Partners (20%);
- Likelihood of Success (12.5%); and
- Sustainability (12.5%).

The proposed 3-year DSRIP projects were scored by the reviewer on a 9-point scale using the following scores and related descriptors:

- 9 = Exceptional;
- 8 = Outstanding;
- 7 = Excellent;
- 6 = Very Good;
- 5 = Good;
- 4 = Satisfactory;
- 3 = Fair;
- 2 = Marginal; and
- 1 = Poor.

The RHP 4 Providers agreed to structure the HHSC-required alternating IGT arrangement by allowing each IGT Entity to have its top project ranked before all other projects; Projects ranked after this would alternate by IGT Entity.

RHP 4 accepted public comments on the revised priority list both at a public meeting held on October 24, 2013 in Corpus Christi and via electronic mail, telephone, and facsimile through October 28, 2013. The order of the final 3-year projects priority list was determined by the Performing Providers and IGT Entities on October 29, 2013 after IGT commitments were verified

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