Convening of the Texas Child Mental Health Care Consortium (TCMHCC)
September 28, 2020
10:00 AM – 3:00 PM
Agenda

Live Stream link: https://www.youtube.com/channel/UCSQqIc7NFQEGlSPQs6Ar7IA

Phone call in number: 1-346-248-7799
Webinar ID: 973 4018 9330
Passcode: 699807

I. **Call to order and roll call**

II. **Review and approve the following item:**

a. Minutes from August 31, 2020 Executive Committee meeting

III. **Updates on the following activities associated with implementation of the TCMHCC. The full Executive Committee may review, receive and/or provide information and/or make recommendations from the items discussed and take appropriate action.**

a. TCMHCC communications and marketing
b. Program Evaluation of TCMHCC by University of Texas at Austin
c. External Evaluation of TCMHCC
d. Community Psychiatry Workforce Expansion (CPWE)
e. Child and Adolescent Psychiatry (CAP)
f. Texas Child Health Access Through Telemedicine (TCHATT)
g. Child Psychiatry Access Network (CPAN)
h. Metrics for TCMHCC Initiatives
i. Research Initiative

IV. **If necessary, closed session for consultation with attorney regarding legal matters, related to posted items, pursuant to Section 551.071 of the Texas Government Code**

V. **Discuss, consider, and if appropriate, approve information and updates provided by the Baylor College of Medicine in the role of the Centralized Operations Support Hub (COSH) relating to implementation of the COSH, and/or information provided by HRIs relating to CPAN and TCHATT. The full Executive Committee may review, receive, and/or provide information and/or make recommendations from the items discussed and take appropriate action.**

a. COSH related items identified by the Baylor College of Medicine and members of the Executive Committee

VI. **Discuss, consider, and if appropriate, approve information and updates regarding TCMHCC planning and budgets. The full Executive Committee may review, receive, and/or provide**

information and/or make recommendations from the items discussed and take appropriate action.

a. Open discussion regarding TCMHCC FY 2021 planning and budgets
   i. Proposed HRI 2021 budgets
   ii. Review and discuss proposals submitted for any needed reallocation of FY 2021 funds between TCMHCC initiatives
   iii. Updates on FY 2020 and FY 2021 budgets and discussion of any outstanding issues that may need to be addressed by the Executive Committee.

VII. Adjournment

Next meeting date and time To Be Determined.

"THE COSH REPORT"
ARE WE THERE YET?

September 28, 2020

Laurel Williams & Jennifer Evans

SUMMARY:

- Telecommunications
- Data Management
- CPAN
- TCHATT
- State Wide Referral System

How awesome is the Texas team?

Accomplishment Overview Year One (in no particular order):

- ✓ CPAN work groups established to build processes
- ✓ TCHATT workgroup established to build processes
- ✓ COSH established
- ✓ CPAN go-live on phones
- ✓ Training for CPAN calls
- ✓ Training for Trayt
- ✓ Data Governance Committee Established
- ✓ CPAN build out Trayt
- ✓ Positions posted and filled
- ✓ Processes developed and implemented
- ✓ Website
- ✓ Facebook
- ✓ Webinars held to introduce CPAN
- ✓ The Box created for information sharing
- ✓ LMHA collaboration
- ✓ Monthly meetings held with each HRI
- ✓ Monthly state meetings held for TCHAT
- ✓ Monthly state meetings held for CPAN
- ✓ Safety plans developed for suicidal patients
- ✓ Outcome measures (screening tools) agreed upon for TCHATT
- ✓ Consent processes developed
- ✓ MOU's developed for schools
- ✓ Marketing strategies for CPAN and TCHATT engagement
- ✓ Surveys developed for measuring satisfaction
- ✓ Video produced for CPAN marketing
- ✓ BAA were executed
- ✓ Contracts executed
- ✓ Budget development
- ✓ ROI was developed between schools and TCHATT
- ✓ CPAN practices are enrolling
- ✓ TCHATT enrollment began
- ✓ Data migration from Redcap to Trayt
- ✓ LMHA regional partnerships
- ✓ TCHATT and PCP integration
- ✓ Statewide CME participation

These is just a high-level overview of the awesome accomplishments we have had during this challenging year. We been very successful in the middle of a pandemic! Congratulations Texas on meeting children's needs where they are.

The best thing about it? **Collaboration!** It has been great!

LANTANA SUMMARY

- *1 888 901 CPAN May 18, 2020*
- *Contract with Lantana 8/2020*
- *How the Call Directory will work needed adjustments*
- *See Report from Lantana on Project Summary to Date*
- *BCM will be trained October 6, 2020*
- *Anticipated training and roll out completed by October 31, 2020 for all 12 hubs*

TRAYT SUMMARY

- Trayt Contract 8/2020
  - Updating contract to include new builds
- Trayt Build for CPAN Phase 1, 2 complete
  - Phase 3 – in progress to send information to PCP and Patient Tracking through the App
- Trayt Training for CPAN- almost completed all 12 hubs
- Trayt TCHATT (plain version) **Available this week**
- Trayt TCHATT build- estimated 6 weeks
- Trayt TCHATT Student Screening TBD
- Trayt Federated Auth System TBD

DATA MANAGEMENT: GOVERNANCE TEAM

- ~~Step One: Collecting Data Points~~ - Complete
  - Trayt (CPAN and TCHATT)
  - UT Austin Internal Review Team
  - CPWE
- Step Two: Start Reviewing Data Definitions as a team
- Step Three: Working on a Data Library

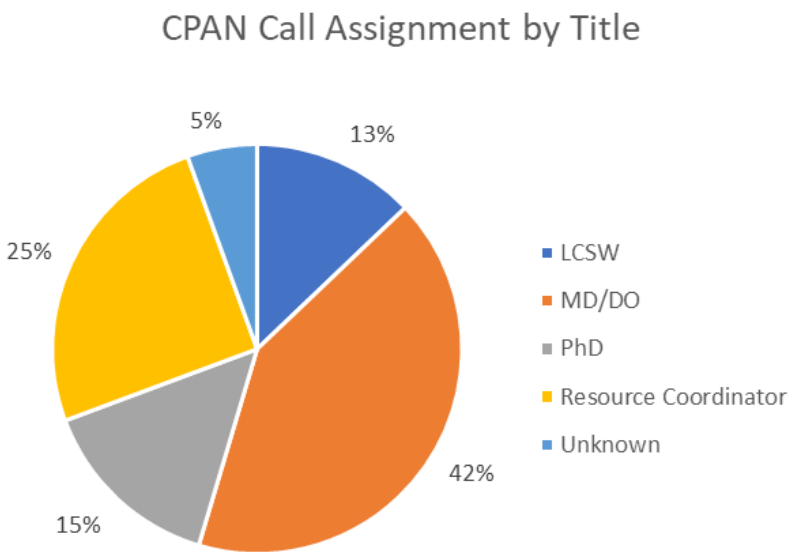
CPAN SUMMARY

- Contract with Texas Pediatric Society
- Contract with Dr. N. Tran as PCP consultant
- Order for state-wide educational materials completed (estimated arrival of order mid-October)
- Short Video on CPAN completed- View now
  - Will be added to CPAN Website
- Comprehensive Communication and Marketing Strategies finalized (see attachment)

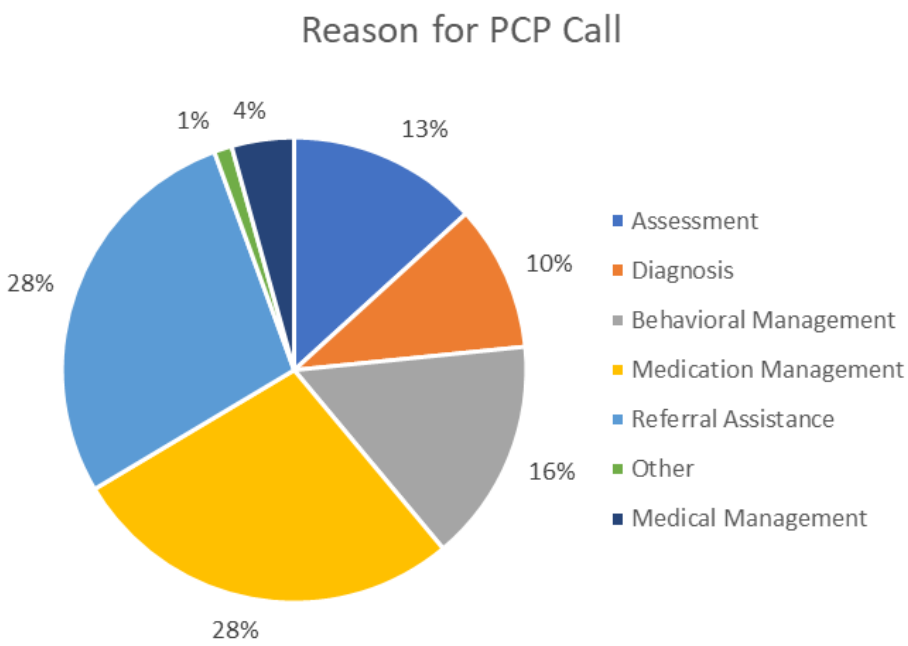
CPAN: SUMMARY

- Providers Registered in CPAN = 1939
- Clinics Registered in CPAN = 273
- Total # of calls for CPAN = 326 (new average 7-8 calls per day picking up!)

CPAN: IN PROGRESS

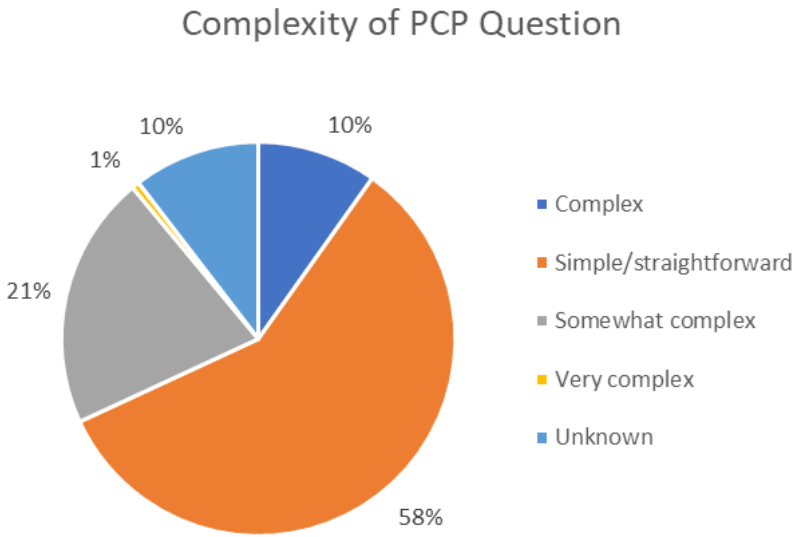


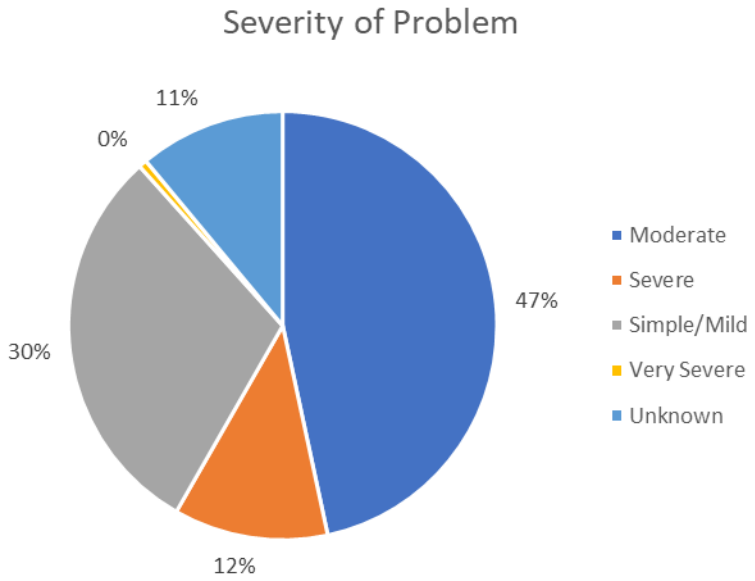
Data based on 163 calls



Data based on 277 calls

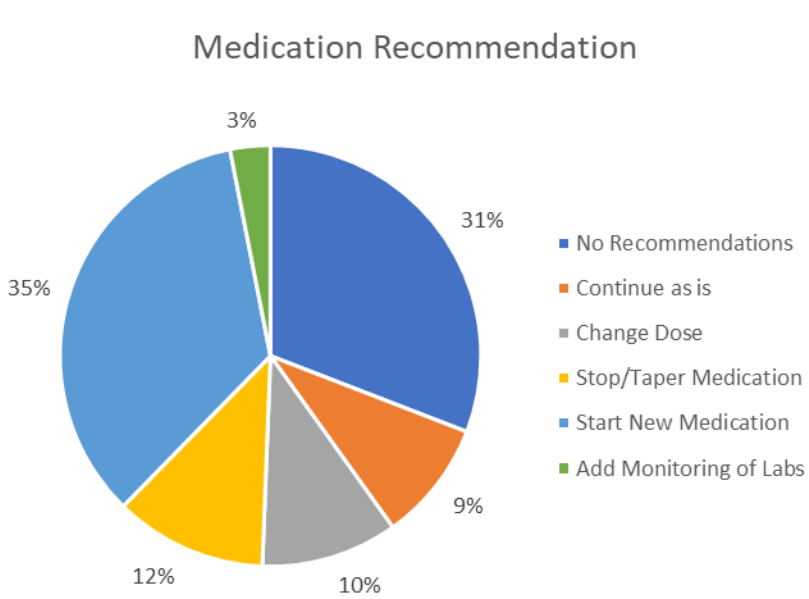
CPAN: IN PROGRESS

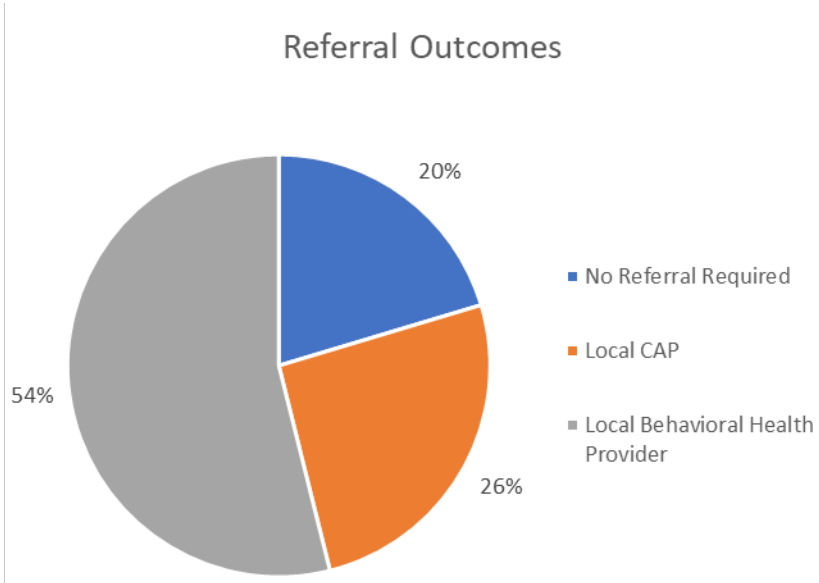




Data based on 163 calls

CPAN: IN PROGRESS





Data based on 163 calls

TCHATT SUMMARY:

- State-wide agreement on Trayt utilization
- Standardization of outcomes measures
- All teams:
  - Adjusting to process for telehealth at families homes in addition to schools
  - May help expand out services
  - Partnering with local LMHA and TEA Regional Teams
- Dr. Pliszka assisting in first draft of TCHATT State-Wide Manual

WELNITY SUMMARY:

- COSH developing Welnity Contract
- Welnity and COSH will partner with:
  - State referral system
  - LMHA
  - FQHCs
  - Insurance Carriers
  - Hospital and Care Systems
  - Private Providers

CPWE:

- COSH working with each HRI to
  - Understand Rotation Structure
  - Develop an interim plan for data collection
    - State level plan to pull data from LMHA EMR system
      - possibly will take time and
      - Not completely portray defined goals per HRI
      - Collaborate with Molly and Tracey on this aspect
  - Work with Trayt on roll out for patient outcome collection within LMHA teams

COSH QUESTIONS?

CPAN
Child Psychiatry Access Network

Statewide CPAN Communication Strategy

The work of CPAN is building teams. Now that all hubs have their teams, the goal is to engage with the providers in your region. PCPS will call us when they get to know YOU and TRUST. This takes time and being consistent with messaging.

We strongly recommend that all CPAN hubs do the following. Certainly doing more is great! We are learning from each other. As we get new strategies that show results, we will update this list.

No job is too small – meaning that ALL hands are on deck as we work to enroll and engage. Enlist the coordinators, psychiatrists, psychologists, therapists and referral team members in all of the below. It will take the village.

NO Cost Strategies:

1. Use your total PCP list- break that list down by provider
    a. Send an individual FAX and EMAIL to each provider weekly
        i. Pictures with a short bio about your CPAN team members
        ii. A clinical "pearl" about a topic a PCP would be interested in
2. Up your game each time you call a PCP office if they have not enrolled.
    a. If the first time you called you left a message, see if you can get an email
    b. Ask to speak to the referral coordinator and get their direct email and number
    c. Track what your last communication was and change your strategy each time until you get a positive result
3. Schedule zoom meetings for 15 minutes with practices during a time of their choice- usually a weekly or monthly staff meeting
4. If you have a waitlist for psychiatry at your HRI and receive referrals from PCPs, reach out to them to tell them about CPAN and TCHATT processes, as appropriate. I.e. (straightforward ADHD –CPAN; more complicated query wish for an "in person consultation" TCHATT)

5. Review at your HRI current patients in clinics. For patients that are straightforward and stable, have the provider contact the PCP to discuss transition of care with CPAN support. Discuss how this will help open up the HRI clinic for more new referrals from that PCP.
6. Engage your local LMHAs- again this process can be mutually beneficial in helping more stable cases routed to PCP giving them room for
7. TCHATT absolutely should be a conduit to CPAN. Discuss that up front with families and work to include the PCP in the TCHATT processes.
8. Grand Rounds at your HRI for Pediatrics and Family Medicine
9. Develop regular meetings with Pediatrics and Family Medicine Residency Programs/Departments
    a. See if those departments will allow for CPAN information to sit on their websites in somewhat plan view
10. Develop your own Facebook, twitter or other social media accounts
    a. Remember at the COSH level we are only allowed Facebook and LinkedIn
    b. Make sure to share with COSH so that the state Facebook and LinkedIn can share your team's information

COST Strategies:

1. Work with your internal marketing teams to develop more refined informatics to be sent out. As long as you use the state CPAN logo- certainly move forward
2. If your internal team has the ability to do marketing that could include other topics and will be able to PROVIDE food- join forces and make sure to get them to include CPAN information
3. Offer CMEs for talks for PCPs- we will hear from Sarah Martin, MD about how to join forces on a statewide CME process that may help lower costs and headache of developing CME. CME is not just for PCPS, but consider for psychologist, social workers, NP/PAs and possibly nursing.
    a. Consider shorter talks- 30 minutes
    b. Focus on ethics talks- more likely to get providers to sign up
4. In the work with residency teams, consider ways to help motivate residents to utilize CPAN. They can be our early adopters so to speak. Offer an educational tool/product for the first resident who calls 5 times (maybe a psychopharmacology book)
5. Driving to practices, as you are able to make the social and physical connection. As you are in office- zoom and/or call the providers for CPAN that day- walk a team through making that first call to get them familiar with the concept

CPAN
Child Psychiatry Access Network

COSH Strategies:

1. We are organizing the webpage- this obviously will take time
2. Considering a vendor for Podcasts
    a. We need a stable "host" – might be a good strategy for this person to be a PCP not a mental health provider
    b. Need regular schedule with content in bite sized amounts
3. Purchasing educational tools at bulk- will resupply and decide on new tools as we move through the products
4. What other COSH level activities would hubs like us to embark on?

Statewide CPAN Communication Strategy

Strategies	ASSIGNED TO:	DATE:
No Cost Strategies		
1. Individual Weekly FAX and EMAIL to each provider (ideas inlcude short bios about CPAN team members, a clinical "pearl" about a topic they would be interested in		
2. Up your game each time you call an unenrolled PCP office.		
3. Schedule zoom meetings for 15 minutes with practices		
4. Reach out to waitlists in psychiatry departments		
5. Review your HRI's current patients in clinics.		
6. Engage your local LMHAs		
7. Use TCHATT as a conduit to CPAN		
8. Grand Rounds at your HRI for Pediatrics and Family Medicine		
9. Develop regular meetings Residency Programs/Departments		
10. Develop your own social media accounts		
Cost Strategies		
1. Send out more refined informatics by working with your marketing teams		
2. Join forces on marketing, including other topics and especially when able to provide food		
3. Offer CMEs for talks with PCPs		
4. Consider ways to help motivate residents to utilize CPAN		
5. Driving to practices, as you are able to make the social and physical connection		

CPAN
Child Psychiatry
Access Network

NOTES:

tcmhcc
Texas Child Mental Health Care Consortium

FY21 Budget Review

Lashelle Inman
TCMHCC Program Coordinator

Budget Highlights

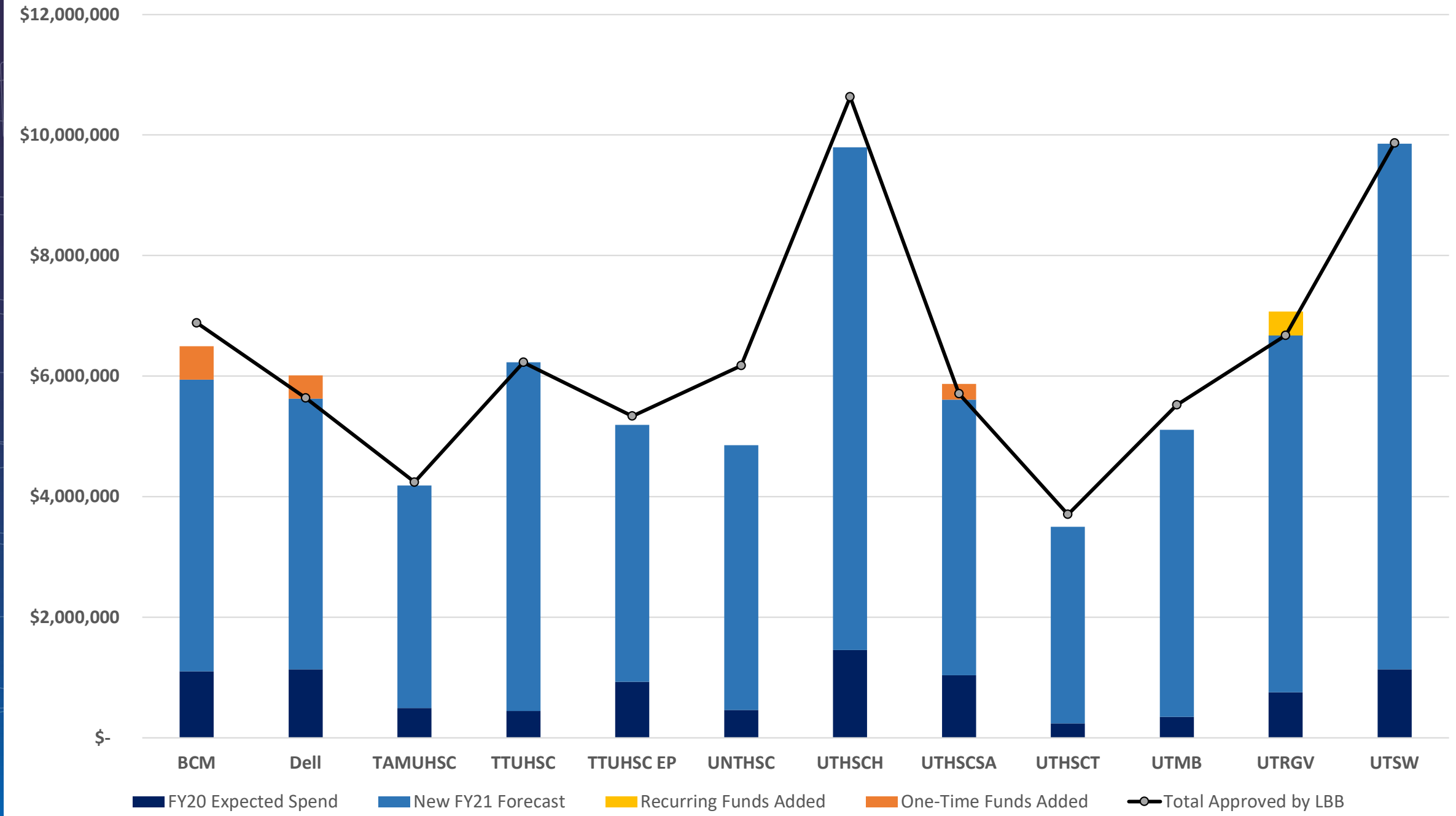
- **$3,643,384 of one-time funds available** for reallocation based on revised forecasts
- **$393,672 of recurring funds** (supporting ongoing operational costs) **available** for reallocation based on revised forecasts
- Total value of all proposals submitted = $2,541,160
- Assuming all proposals are approved, $1,495,896 of these funds would be left unallocated

Budget Highlights

Assuming all Proposals are Approved:

- **CPAN** budget will decrease by **6%** to $25,316,980
- **TCHATT** budget will decrease by **4%** to $35,663,531
- **CPWE** budget will increase by **9%** to $8,704,624
- **CAP Fellowships** budget will decrease by **4%** to $4,468,755

Actual and Forecast Spend against LBB Approved Funding by HRI



Budget Recommendations

- **Recommend all HRI Budget Changes are Approved**

Baseline Budget Changes Before Proposals Have Been Allocated

	FY20			FY21			Biennium Total	
Institution	FY20 LBB Approved	Expected Spend	Expected Remaining (To be validated after year end financials reported)	FY21 LBB Approved	New Forecast (One-off costs + recurring costs)	Remaining	Total Approved by LBB	FY20 & FY21 Projection
BCM	$ 2,397,083	$ 1,100,799	$ 1,296,284	$ 4,486,607	$ 4,841,607	$ (355,000.00)	$ 6,883,690	$ 5,942,406
Dell	$ 1,725,220	$ 1,134,686	$ 590,534	$ 3,911,884	$ 4,490,185	$ (578,301)	$ 5,637,104	$ 5,624,871
TAMUHSC	$ 1,447,396	$ 495,044	$ 952,352	$ 2,792,148	$ 3,688,236	$ (896,088)	$ 4,239,544	$ 4,183,280
TTUHSC	$ 2,501,344	$ 441,720	$ 2,059,624	$ 3,724,915	$ 5,784,539	$ (2,059,624)	$ 6,226,259	$ 6,226,259
TTUHSC EP	$ 2,243,080	$ 929,465	$ 1,313,615	$ 3,093,678	$ 4,261,927	$ (1,168,249)	$ 5,336,758	$ 5,191,392
UNTHSC	$ 2,310,135	$ 461,486	$ 1,848,649	$ 3,863,849	$ 4,389,823	$ (525,974)	$ 6,173,984	$ 4,851,309
UTHSCH	$ 3,031,516	$ 1,456,549	$ 1,574,967	$ 7,598,551	$ 8,341,020	$ (742,469)	$ 10,630,067	$ 9,797,569
UTHSCSA	$ 1,366,989	$ 1,036,792	$ 330,197	$ 4,341,213	$ 4,571,773	$ (230,560)	$ 5,708,202	$ 5,608,565
UTHSCT	$ 918,713	$ 239,941	$ 678,772	$ 2,786,175	$ 3,260,794	$ (474,619)	$ 3,704,888	$ 3,500,735
UTMB	$ 1,925,894	$ 344,815	$ 1,581,079	$ 3,594,427	$ 4,766,351	$ (1,171,924)	$ 5,520,321	$ 5,111,166
UTRGV	$ 1,726,172	$ 752,434	$ 973,738	$ 4,950,306	$ 5,924,044	$ (973,738)	$ 6,676,478	$ 6,676,478
UTSW	$ 3,848,139	$ 1,134,328	$ 2,713,811	$ 6,018,350	$ 8,718,372	$ (2,700,022)	$ 9,866,489	$ 9,852,700
TOTALS	$ 26,580,877	$ 9,856,675	$ 16,724,202	$ 52,298,078	$ 64,985,225	$ (12,687,147)	$ 78,878,955	$ 74,841,900

Budget Recommendations

- Recommend all HRI Budget Changes are Approved
- **Recommend Allocation of Recurring Funds for All Three of UTRGV's Requests**

Proposals for Recurring Funds

UTRGV CPWE	• Additional .5 Faculty FTE ($189,000) • Allows faculty supervision at additional LMHAs
UTRGV CPWE	• 1 additional Resident FTE ($75,000) • Enables more patients to be seen at additional LMHAs
UTRGV CPAN	• .35 FTE Child Psychiatrist ($123,480) • Can serve around 15% more children

Budget Recommendations

- Recommend all HRI Budget Changes are Approved
- Recommend Allocation of Recurring Funds for All Three of UTRGV's Requests
- **Recommend COSH Proposals are Accepted:**
  - **Funds earmarked for technology that were in individual HRI budgets ($811,672 in total) + additional unallocated funds are being transferred to the COSH to support centralization and expansion of services.**
  - **New COSH budget is $3,229,171 assuming all proposals approved.**

Proposals Related to COSH

Total $954,000

Trayt	• TCHATT Student Screening Tool • $52,000
Trayt	• Additional Storage Costs Related to Additional Scope of Services • $415,000
Trayt	• Federated Authentication Development & Bundled Annual Costs • $270,000
Welnity	• Buildout of a Referral Database and Bundled Annual Costs • $175,000
Marketing	• Texas Pediatric Society Advertising Costs • $7,000
Marketing	• Education & Outreach tools for CPAN • $20,000
Training	• Development of CPAN Podcasts • $15,000

Budget Recommendations

- Recommend all HRI Budget Changes are Approved
- Recommend Allocation of Recurring Funds for All Three of UTRGV's Requests
- Recommend COSH Proposals are Accepted:
  - Funds earmarked for technology that were in individual HRI budgets ($811,672 in total) + additional unallocated funds are being transferred to the **COSH** to support centralization and expansion of services.
  - New COSH budget is $3,229,171 assuming all proposals approved.
- **Recommend All Other Proposals for One-Time Funds are Accepted**

Other Proposals

BCM – Stepped Care	• CBT Pilot. Estimate around 7 HRIs would participate • $550,316
UTHSCSA – Learning Collaborative	• Development of training models for residents & fellows in EBTs • $262,114
Dell CAP Fellow	• Addition of 1 CAP Fellow to Dell Program • $187,250
Dell – Outreach & Engagement	• Subcontract for outreach & engagement consultation (TCHATT & CPAN) • $200,000

Summary of Final Budgets by HRI with % Change, Assuming all Proposals are Accepted

Institution		Total Approved by LBB	Recurring Funds Added	One-Time Funds Added	Details on recurring and one-time funds added	Expected Ongoing Costs for Program	% Change	New Total Forecast (FY20 & FY21)	% Change
BCM	COSH	$ 2,275,171	$ -	$ 954,000	Trayt TCHATT buildout costs, Student Screening, Federated Authentication, Referral database	$ 1,135,975	0%	$ 3,229,171	42%
	CPAN	$ 2,490,162	$ -	$ -	$ -	$ 1,542,305	0%	$ 2,008,614	-19%
	CPWE	$ 173,688	$ -	$ -	$ -	$ 148,875	0%	$ 173,437	0%
	TCHATT	$ 3,426,333	$ -	$ 550,316	Stepped Care Proposal	$ 2,398,673	0%	$ 3,543,285	3%
	CAP Fellowships	$ 793,507	$ -	$ -	$ -	$ 396,754	0%	$ 767,386	-3%
BCM		**$ 6,883,690**	**$ -**	**$ 550,316**	$ -	**$ 4,486,607**	**0%**	**$ 6,492,722**	**-6%**
	CPAN	$ 1,803,887	$ -	$ 100,000	Proposal to Subcontract for Outreach & Engagement	$ 1,329,657	48%	$ 2,696,418	49%
	TCHATT	$ 3,833,217	$ -	$ 100,000	Proposal to Subcontract for Outreach & Engagement	$ 2,582,227	-14%	$ 3,128,453	-18%
	CAP Fellowships	$ -	$ -	$ 187,250	Proposal for 1 CAP Fellow	$ -		$ 187,250	100%
Dell		**$ 5,637,104**	**$ -**	**$ 387,250**	$ -	**$ 3,911,884**	**0%**	**$ 6,012,121**	**7%**
	CPAN	$ 1,580,340	$ -	$ -	$ -	$ 793,560	-13%	$ 1,574,409	0%
	CPWE	$ 816,200	$ -	$ -	$ -	$ 396,900	-27%	$ 469,500	-42%
	TCHATT	$ 1,692,816	$ -	$ -	$ -	$ 1,451,500	23%	$ 1,989,183	18%
	CAP Fellowships	$ 150,188	$ -	$ -	$ -	$ 150,188	0%	$ 150,188	0%
TAMUHSC		**$ 4,239,544**	**$ -**	**$ -**	$ -	**$ 2,792,148**	**0%**	**$ 4,183,280**	**-1%**
	CPAN	$ 1,919,530	$ -	$ -	$ -	$ 1,158,504	-2%	$ 2,177,615	13%
	CPWE	$ 328,322	$ -	$ -	$ -	$ 249,375	7%	$ 349,935	7%
	TCHATT	$ 3,222,359	$ -	$ -	$ -	$ 1,694,864	-2%	$ 2,921,927	-9%
	CAP Fellowships	$ 756,048	$ -	$ -	$ -	$ 622,172	6%	$ 776,782	3%
TTUHSC		**$ 6,226,259**	**$ -**	**$ -**	$ -	**$ 3,724,915**	**0%**	**$ 6,226,259**	**0%**
	CPAN	$ 2,022,950	$ -	$ -	$ -	$ 1,081,772	-6%	$ 1,826,829	-10%
	CPWE	$ 497,398	$ -	$ -	$ -	$ 428,082	39%	$ 701,731	41%
	TCHATT	$ 2,294,686	$ -	$ -	$ -	$ 1,309,429	-5%	$ 2,095,142	-9%
	CAP Fellowships	$ 521,725	$ -	$ -	$ -	$ 274,395	5%	$ 567,690	9%
TTUHSC EP		**$ 5,336,758**	**$ -**	**$ -**	$ -	**$ 3,093,678**	**0%**	**$ 5,191,392**	**-3%**
	CPAN	$ 2,126,815	$ -	$ -	$ -	$ 1,140,644	-6%	$ 1,649,734	-22%
	CPWE	$ 575,229	$ -	$ -	$ -	$ 505,530	0%	$ 555,368	-3%
	TCHATT	$ 3,471,940	$ -	$ -	$ -	$ 1,987,333	-7%	$ 2,646,207	-24%
UNTHSC		**$ 6,173,984**	**$ -**	**$ -**	$ -	**$ 3,633,507**	**-6%**	**$ 4,851,309**	**-21%**

Summary of Final Budgets by HRI with % Change, Assuming all Proposals are Accepted

Institution	Total Approved by LBB	Recurring Funds Added	One-Time Funds Added	Details on recurring and one-time funds added	Expected Ongoing Costs for Program	% Change	New Total Forecast (FY20 & FY21)	% Change
CPAN	$ 2,513,150	$ -	$ -	$ -	$ 1,489,324	-8%	$ 2,512,216	0%
CPWE	$ 1,666,386	$ -	$ -	$ -	$ 1,227,383	-1%	$ 1,505,688	-10%
TCHATT	$ 5,859,766	$ -	$ -	$ -	$ 4,483,303	3%	$ 5,385,822	-8%
CAP Fellowships	$ 590,765	$ -	$ -	$ -	$ 393,843	0%	$ 393,843	-33%
UTHSCH	**$ 10,630,067**	**$ -**	**$ -**	$ -	**$ 7,593,853**	**0%**	**$ 9,797,569**	**-8%**
CPAN	$ 2,038,000	$ -	$ -	$ -	$ 1,115,330	-15%	$ 1,677,584	-18%
CPWE	$ 1,118,413	$ -	$ 262,114	Learning Collaborative Proposal	$ 1,027,276	7%	$ 1,604,220	43%
TCHATT	$ 2,123,314	$ -	$ -	$ -	$ 1,984,370	7%	$ 2,167,026	2%
CAP Fellowships	$ 428,475	$ -	$ -	$ -	$ 214,238	0%	$ 421,850	-2%
UTHSCSA	**$ 5,708,202**	**$ -**	**$ 262,114**	$ -	**$ 4,341,213**	**0%**	**$ 5,870,679**	**3%**
CPAN	$ 1,190,571	$ -	$ -	$ -	$ 943,020	25%	$ 1,261,806	6%
CPWE	$ 457,417	$ -	$ -	$ -	$ 420,975	7%	$ 486,722	6%
TCHATT	$ 1,956,900	$ -	$ -	$ -	$ 1,338,524	-14%	$ 1,651,051	-16%
CAP Fellowships	$ 100,000	$ -	$ -	$ -	$ 83,656	5%	$ 101,156	1%
UTHSCT	**$ 3,704,888**	**$ -**	**$ -**	$ -	**$ 2,786,175**	**0%**	**$ 3,500,735**	**-6%**
CPAN	$ 1,902,450	$ -	$ -	$ -	$ 1,222,650	0%	$ 1,715,960	-10%
CPWE	$ 267,690	$ -	$ -	$ -	$ 230,748	0%	$ 238,681	-11%
TCHATT	$ 3,031,526	$ -	$ -	$ -	$ 1,982,397	0%	$ 3,156,525	4%
CAP Fellowships	$ 318,655	$ -	$ -	$ -	$ -	-100%	$ -	-100%
UTMB	**$ 5,520,321**	**$ -**	**$ -**	$ -	**$ 3,435,795**	**-4%**	**$ 5,111,166**	**-7%**
CPAN	$ 2,396,197	$ 123,480	$ -	Additional Child Psychiatrist (additional .35% FTE)	$ 1,491,276	5%	$ 2,271,330	-5%
CPWE	$ 1,339,800	$ 264,000	$ -	Additional .5 Faculty FTE, 1 Resident FTE	$ 1,363,216	19%	$ 1,605,376	20%
TCHATT	$ 2,177,816	$ -	$ -	$ -	$ 1,708,056	1%	$ 2,297,142	5%
CAP Fellowships	$ 762,665	$ -	$ -	$ -	$ 775,238	14%	$ 890,110	17%
UTRGV	**$ 6,676,478**	**$ 387,480**	**$ -**	$ -	**$ 5,337,786**	**8%**	**$ 7,063,958**	**6%**
CPAN	$ 4,833,185	$ -	$ -	$ -	$ 2,488,995	-21%	$ 3,944,465	-18%
CPWE	$ 744,642	$ -	$ -	$ -	$ 963,966	60%	$ 1,013,966	36%
TCHATT	$ 4,076,162	$ -	$ -	$ -	$ 2,352,889	14%	$ 4,681,769	15%
CAP Fellowships	$ 212,500	$ -	$ -	$ -	$ 212,500	0%	$ 212,500	0%
UTSW	**$ 9,866,489**	**$ -**	**$ -**	$ -	**$ 6,018,350**	**0%**	**$ 9,852,700**	**0%**
TOTALS	**$ 78,878,955**	**$ 387,480**	**$ 2,153,680**	$ -	**$ 52,291,886**	**0%**	**$ 77,383,060**	**-2%**

Summary of Final Budget by Program (Assuming all Proposals are Accepted)

Institution	LBB Approved	New Forecast	Total % Change	Additional Reccurring Funds Approved	Additional One-Time Funds Approved	Final Recurring Costs	Final Total Forecast	Final Total % Change	Expected Unspent Funds
CPAN	$ 26,817,237	$ 25,093,500	-6%	$ 123,480	$ 100,000	$ 15,797,037	$ 25,316,980	-6%	$ 1,500,257
TCHATT	$ 37,166,835	$ 35,013,215	-6%	$ -	$ 650,316	$ 25,273,565	$ 35,663,531	-4%	$ 1,503,304
CPWE	$ 7,985,185	$ 8,178,510	2%	$ 264,000	$ 262,114	$ 6,962,325	$ 8,704,624	9%	$ (719,439)
CAP Fellowships	$ 4,634,528	$ 4,281,505	-8%	$ -	$ 187,250	$ 3,122,984	$ 4,468,755	-4%	$ 165,773
COSH (BCM)	$ 2,275,171	$ 2,275,171	0%	$ -	$ 954,000	$ 1,135,975	$ 3,229,171	42%	$ (954,000)
External Evaluation	$ 750,000	$ 750,000	0%	$ -	$ -	$ 500,000	$ 750,000	0%	$ -
RESEARCH	$ 10,000,000	$ 10,000,000	0%	$ -	$ -	$ 5,000,000	$ 10,000,000	0%	$ -
TOTALS	$ 89,628,955	$ 85,591,900	-5%	$ 387,480	$ 2,153,680	$ 57,791,886	$ 88,133,060	-2%	$ 1,495,895