

**Project
Number**

Proposed Projects

2.a.i	Create Integrated Delivery Systems –focused on evidence-based medicine / pop health mgmt
2.b.iv	Care transitions intervention to reduce 30-day readmissions for chronic disease
2.b.vii	Implementing the INTERACT project
2.b.ix	Implementation of observational programs in hospitals
2.d.i	Implementation of patient activation activities to engage, educate and integrate the uninsured and low-utilizing Medicaid populations into community based care
3.a.i.	Integration of primary care services and behavioral health
3.b.i	Cardiovascular Health - Evidence-based strategies for disease management in high risk/affected populations (adults only)
3.c.i	Diabetes Care - Evidence-based strategies for disease management in high risk/affected populations (adults only)
3.d.i.i	Expansion of asthma home-based self-management program
4.a.ii	Prevent substance abuse and other Mental Emotional Behavioral Disorders (MEB)
4.b.ii	Population-based health chronic disease prevention and management.