

Anchor Conference Call

AGENDA

August 21, 2020

1:30-3:00 p.m. CST

1. General Anchor Communication

- Thanks for your continued work!

2. DSRIP Implementation

COVID-19 Updates: Thank you for the feedback on the PFM changes due to COVID-19. On August 7, 2020, CMS approved the PFM with the following options for Category C achievement.

For measures selected for DY7-10, the PY3 achievement value for DY9 achievement milestones and DY8 carryforward achievement milestones will be based on the greater of:

- Provider's approved DY8 achievement value for the measure;
- Average approved DY8 achievement value for the measure if 10 or more providers selected the P4P measure for DY7-8, rounded down to the quartile;
- Average approved DY8 achievement value for the Measure Bundle if less than 10 providers selected the P4P measure for DY7-8, rounded down to the quartile; or
- Percent of DY9 goal achieved in CY2020 for DY9 achievement milestones, and Percent of DY8 goal achieved in CY2020 for DY8 carryforward achievement milestones.

For measures newly-selected for DY9-10, the PY3 achievement value for DY9 achievement milestones will be based on the greater of:

- Average approved DY8 achievement value for the measure if 10 or more providers selected the P4P measure for DY7-8, rounded down to the quartile;
- Average approved DY8 achievement value for the Measure Bundle if less than 10 providers selected the P4P measure for DY7-8, rounded down to the quartile; or
- Percent of DY9 goal achieved in CY2020.

The posted, estimated average achievement values by measure or bundle are provided for informational purposes. The actual average achievement value for an AM-9 milestone will be determined by all PY2 reporting as of the October DY9 Needs More Information (NMI) reporting period (February 2021)

Category B:

- DY9 Allowable Variation will be updated to **a flat percentage of 35% for all providers**. This final value took into consideration: the duration of the Texas COVID-19 Disaster Declaration during DY9, DSRIP provider estimated impact on patient volume submitted through stakeholder feedback, and a study by the Commonwealth Fund on the impact of COVID-19 on patient visits. Providers participating in the study saw an average decrease of 58% in in-person visits from March 16 to May 10. HHSC applied the reduction in volume to the months of March – September 2020 to determine an average of 33.83% for the full DY9. The final value was rounded up to 35%.
- Plan modifications for Category B are due September 1, 2020. If the request is related to the impact of COVID-19 on the provider's patient volume or system (e.g., provider's main source of qualifying Category B encounters are dental visits because dental offices were closed due to COVID-19 AND because dental

visits cannot be conducted via telemedicine), then the provider should include the following information in their request.

- Proposed updated DY9 PPP baselines/goals (i.e., Total PPP, MLIU PPP, Estimated Medicaid PPP, Estimated LIU PPP)
- Detailed explanation about why the provider wouldn't meet their goal with 35% allowable variation.
- Which system components, services, and/or departments are being impacted.
- An estimated impact on patient volume and duration of impact.
- Details about any operational changes (e.g., if staff was reassigned, changes to hours of operation, etc.) and when these changes took place.

DY9 Round 1 (April) Reporting:

- HHSC plans to distribute NMI Reporting Results early next week to providers who received an NMI request during the April DY9 Reporting Period. This is a change from the originally scheduled date of August 21, 2020.
- In addition to milestones flagged as NMI, Category C milestones that requested provisional approval and submitted data during the April DY9 Additional Reporting Period will be included in the NMI Reporting Results.

DSRIP DY9-10 Rule Amendment:

- The rule amendment was published as proposed in the July 17, 2020 issue of the [Texas Register](#) for public comment. The public comment period ended August 17, 2020. No public comments were received.
- Staff is working to prepare the rule amendment for adoption as proposed.

Category A Costs and Savings:

- In October DY9 (2020), providers who have a total valuation of \$1 million or more per DY are required to submit an update on progress made towards the final report of costs and savings that is due in October DY10 (2021) by responding to questions in the online reporting system on the Category A tab.
- The questions in the online reporting system will be geared towards ensuring providers can identify an intervention associated with a Core Activity that can be analyzed for the final report of costs and savings and to make sure providers can identify data sources needed to complete the analysis (i.e., program costs attributable to the intervention and savings/benefits attributable to the intervention). Unlike October DY7, the October DY9 update will not ask providers which tools they plan on using. The purpose of the October DY9 update is to ensure providers are headed in the right direction towards the goal of completing the final report of costs and savings that is due October DY10.
- HHSC is sharing the October DY9 online reporting system questions early before providers can see these questions in the system. A Word document containing these questions will be posted to the online reporting system's bulletin board by the end of the day today. Additional information regarding these questions will be available in the October DY9 reporting companion document, which is expected to be available around October 1st, at the latest. Information in this document will include where to find the Core Activity Unique ID, explanation of a different aspect of the same Core Activity, etc.

Category A Core Activities: Next week HHSC will post on the bulletin board a file with Core Activities that were approved during the RHP plan update. Please note that this file will include a Core Activity unique ID which will be necessary for the reporting of the Costs and Savings.

Compliance Monitoring Update: HHSC has completed the review of the round 1a results that were received from MSLC. HHSC will be sending out notifications next week to providers with additional instructions on how to proceed during next reporting period depending on MSLC findings. All providers that had revised baseline and PY1 data as part of their monitoring review will need to resubmit their PY2 data in October to ensure consistent reporting methodology across baseline and performance years.

MSLC continues to work through round 1b reviews and HHSC expects to have results in September.

3. DSRIP Transition

Best Practices Workgroup: *Survey 3: Stratifying MLIU Population Data and Exploring Organizational Factors* was distributed to Workgroup members on August 13, 2020. The goals of Survey 3 are 1) to understand whether Medicaid and Low Income/Uninsured data on previously identified key measures and practices may be stratified by additional characteristics and 2) to explore various factors influencing an organization’s decision to adopt the previously identified key measures and practices. Survey 3 will be open until September 2, 2020.

Partner Engagement: HHSC will be holding its next quarterly DSRIP Partner Engagement meeting via webinar on Wednesday, August 26, 2020 at 2:00 PM. HHSC will provide updates on the DSRIP Transition progress, additional upcoming opportunities for partner engagement, and will give partners the opportunity to ask questions. Please register for the webinar using this link: <https://register.gotowebinar.com/register/3382285091964590604>.

New Transition Webpage: HHSC has created a separate page under the 1115 Waiver website for [DSRIP Transition](#). Transition resources that were previously under Waiver Renewal have now been moved to the new page.

4. Other Information for Anchors

DSRIP Statewide Events Calendar

September 2020			
RHP	Date	Topic	Contact
06	9/2/2020	RHP 6 Learning Collaborative &	Carol Huber
	9/9/2020	Stakeholder Forum (virtual	
	9/16/2020	webinar series)	
	9/23/2020	Register here	