

August 20, 2021

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

1. General Anchor Communication

- Thanks for your continued work!

2. DSRIP Implementation

April DY10 Reporting Timeline

- **August 24, 2021** – HHSC and CMS will approve or deny the additional information submitted in response to HHSC comments on April reported milestone/metric achievement. Approved reporting will be included for payment in the next DSRIP payment period, estimated for January 2022.

Category A: Cost & Savings

HHSC has notified providers that a draft version of the template for Cost and Savings DY10 reporting has been posted on the DSRIP online reporting system bulletin board for providers to download and explore. Providers should review the template and refer to the Cost and Savings guidance already posted to practice preparing their analysis. Please send questions and feedback to TXHealthcareTransformation@hhs.texas.gov as soon as possible so we can gauge what kinds of questions and level of detail to address in our user guide, or whether a Q and A type document would be more helpful.

Category A: Core Activities

HHSC posted a file of Core Activities that were approved during October DY9 reporting on the bulletin board and providers will need to review it to make sure they know which Core Activities they will be reporting on in October DY10.

Category B: DY10 Allowable Variation

HHSC is still in discussions with CMS regarding DY10 reporting flexibilities but is considering an allowable variation of 10-15% for the DY10 MLIU PPP Numeric Goal based on the average decrease in reported MLIU PPP between DY8 and DY9 and trends in national encounter data.

Category B: Plan Mods

Plan modifications that will impact the October DY10 reporting period are due on **Wednesday, September 1st**. Providers requesting a modification should complete the Category B Plan Modification Form that is posted under Category B Resources on the DSRIP Bulletin Board. Proposed changes to PPP goals should be based on historical data (e.g., MLIU PPP volume decrease between DY8 and DY9, etc.) and include a strong justification.

If providers are requesting a modification due to the continued significant impact of Covid-19 on their provider system that exceeds the reporting flexibilities (i.e., the broadened definition of patient encounter to include telephonic visits and adjusted allowable variation), then they should include the following additional information in their submission:

- detailed explanation about why the provider wouldn't meet their goal with an increased allowable variation accommodation,
- which system components, services, and/or departments are being impacted,
- an estimated impact on patient volume and duration of impact, and
- details about any operational changes and when these changes took place.

Please note if the provider updates their system definition to include clinics providing Covid-19 services (i.e., testing and vaccinations) then they should also ensure that they have been tracking patient payor information during DY10. Patients cannot be included in the MLIU PPP count without documented MLIU payor type.

Compliance Monitoring

- MSLC continues to review Category 1, Category 2, Category 3 open measures, as well as Category 3 measures that were newly selected for round 3. Please continue to encourage timely submission of documentation and have providers inform MSLC and HHSC of any issues as soon as possible.
- All compliance monitoring questions should be directed to the [HHSC compliance mailbox](#) and the [MSLC mailbox](#).
- HHSC is including the current compliance monitoring contact list for anchors' review. Anchors should update their region on one file and return it to the HHSC compliance mailbox by 9/3/21. Providers should e-mail the HHSC and MSLC mailboxes with future contact changes including those that happen in between rounds. HHSC will send the contact list out for review before each MSLC round.

COVID-19 Flexibility

- We are still in discussion with CMS on flexibilities for reporting and achievement for DY 10. Please note that the Category B allowable variation mentioned above is pending.

3. DSRIP Transition

DY11 Proposed Directed Payment Programs (DPPs)

- Please find [here](#) the August 13, 2021 CMS letter to HHSC regarding the proposed DPPs.
- Please find [here](#) the August 16, 2021 HHSC response to CMS.
- Attached please find the August 19, 2021 HHSC Gov Delivery notice regarding these letters and next steps.
- Reminder: sign up/update Gov Delivery Notices for the applicable DPP here: <https://service.govdelivery.com/accounts/TXHHSC/subscriber/new>.

- Continue sending questions related to DPP measures, performance requirements, specifications, and reporting: DPPQuality@hhs.texas.gov.
- If you have financial questions, including eligibility and estimated IGT, you can email the Provider Finance Department (PFD) at the following e-mail addresses:

CHIRP	PFD_Hospitals@hhsc.state.tx.us
TIPPS	PFDAcuteCare@hhs.texas.gov
RAPPS	PFD_Hospitals@hhsc.state.tx.us
DPP BHS	PFDAcuteCare@hhs.texas.gov

Upcoming Stakeholder Meeting

- The Partner Engagement and Executive Waiver Committee meetings are combined for this quarter and will be held on September 23, 2021 at 10:00 AM.
- Please use the following link to register for the webinar: <https://attendee.gotowebinar.com/register/7842250608919978000>. After registering, you will receive a confirmation e-mail containing information for joining the webinar.
- To be added to the Partner Engagement distribution list, e-mail TXHealthcareTransformation@hhsc.state.tx.us.

Reminder: DPP Webpages

HHSC has created a webpage for [Medicaid & CHIP Directed Payment Programs](#). Documents related to the proposed DY11 DPPs can be found on each program-specific site:

- [CHIRP](#)
- [DPP BHS](#)
- [RAPPS](#)
- [TIPPS](#)

4. Other Information for Anchors

RHP 12 Learning Collaborative, September 29, 2021 – register [here](#).