

February 18, 2022
1:30 - 3:00 PM CST

1. General Anchor Communication

- Thanks for your continued work!
- HHSC offices will be closed on Monday, February 21 for President's Day and will be operating on a skeleton crew on Wednesday, March 2 for Texas Independence Day.

2. DSRIP Implementation

DSRIP October DY10 Reporting

- **Timeline**
 - **February 25, 2022** - HHSC and CMS will approve or deny the additional information submitted in response to HHSC comments on October reported milestone/metric achievement.

DY10 Round 2 (October) Reporting Payments

- DY10 Round 2 payment summaries are posted by Category and Measure and Category C Milestone on the waiver website. Total payments to date have also been updated to include DY10 Round 2 payments.
 - [Category and Measure Payment Summary](#)
 - [Category C Milestone Summary](#)
 - [DY1-10 Total Payments to Date](#)

Category B Plan Modifications

- Plan modifications that will impact the April DY11 reporting period are due on **Wednesday, March 2, 2022**. Providers requesting a modification should complete the Category B Plan Modification Form that is posted under Category B Resources on the DSRIP Bulletin Board and submit it to the waiver mailbox at TXHealthcareTransformation@hhsc.state.tx.us.
- 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 a documented MLIU payor type.

Category D EQRO Reports

- HHSC received several questions about Category D PPE EQRO reports and the timing of reports distribution.
- HHSC will distribute EQRO reports mid-March, as in previous years.
- Since the decision on the DSRIP extension request is still on hold, we do not yet know if Cat D reporting will occur in April. If the DSRIP extension is submitted and approved by CMS at a later time, we would propose an option to report Category D in October.

Compliance Monitoring

- Just a reminder that the Category C Round 5 is starting today, and providers will be receiving notification from MSLC if they have been selected for the review round.
- No provider will have more than 3 measures selected for the review.
- Providers will submit data to MSLC prior to the start of April reporting. More specific deadlines will be included in MSLC emails.
- Providers should direct any audit-specific questions to [MSLC](#) and copy the [HHSC Compliance Mailbox](#).

3. DSRIP Transition

Waiver Updates Meeting

HHSC has scheduled Waiver update meetings with DSRIP Anchors every two weeks with the next meeting scheduled for 2/25/22 at 1:30 p.m. The meetings will only be held on weeks that HHSC has updates to share.

Proposed Directed Payment Programs (DPPs)

- We do not have any final or formal decisions on Comprehensive Hospital Increased Reimbursement Program (CHIRP), Rural Access to Primary and Preventive Services (RAPPS) or Texas Incentives for Physicians and Professional Services (TIPPS).
- HHSC has posted the recent CMS feedback at [HHSC and CMS Discussions: CMS Response on Feb. 16, 2022](#). All communication between HHSC and CMS is posted at <https://www.hhs.texas.gov/providers/medicaid-supplemental-payment-directed-payment-programs/directed-payment-programs> (scroll to the bottom of the page).
- Thanks to all providers who filled out a survey about the impact of the delay in DPP approvals. HHSC is reviewing the feedback from over 200 respondents.
- CMS has indicated the primary concern is regarding financing of the non-federal share – specifically regarding LPPFs.
- As a reminder, any DPP quality reporting for pending programs (CHIRP, TIPPS, RAPPS) would commence 35 calendar days after a CMS approval of the program.

- The application/enrollment period for year 2 of the DPPs (State Fiscal Year 2023) will begin February 23, 2022. The application period will close March 15, 2022.
- Reminder: sign up/update GovDelivery Notices for the applicable DPP here: <https://service.govdelivery.com/accounts/TXHHSC/subscriber/new>.

HHSC Contacts

- 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@hhs.state.tx.us
TIPPS	PFD_TIPPS@hhs.texas.gov
RAPPS	PFD_Hospitals@hhs.state.tx.us
DPP BHS	PFD_DPPBHS@hhs.texas.gov

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](#)

HHSC has also created a general webpage for the [Directed Payment Programs](#). This webpage includes operational information for each DPP as well as CMS and HHSC correspondence related to the DPPs in 2021.