

Anchor Conference Call

AGENDA

May 15, 2015

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

1. General Anchor Communication

- Thank you for all of your continued work!

2. DSRIP Implementation

DY 4 April Reporting

- A reminder of upcoming dates related to DY4 April Reporting review and payments:
 - May 20, 2015, 5:00pm – Due date for IGT Entities to approve and comment on their affiliated providers' April reported progress on metrics using the "IGT Info" tab for each project. The tab is not an opportunity to identify technical errors entered in the reporting system. Examples of issues to include are reported progress that was not actually achieved, changes in project scope that were not reported by the provider, and risks to the project that were not reported by the provider. If there are no issues, comments do not need to be submitted and HHSC will assume the IGT Entity has approved the reported information.
 - June 10, 2015 – HHSC and CMS will complete their review and approval of April reports or request additional information (referred to as NMI) regarding the data reported. Note that HHSC completes multiple levels of review prior to determining that a milestone/metric requires additional information. If additional information is requested, the DSRIP payment related to the milestone/metric will not be included with July DSRIP payments.
 - July 2, 2015, 11:59pm – Due date for providers to submit responses to HHSC requests for additional information (NMI requests) on April reported Category 1-4 milestone/metric achievement and Semi-Annual Reporting requirements. Please include "NMI" in the file name when uploading documentation in response to NMI requests.
 - July 8, 2015 – IGT due for April reporting DSRIP payments, including DY4 Monitoring IGT.
 - July 21, 2015 – April reporting DY4 DSRIP payments processed for transferring hospitals and top 14 IGT Entities.
 - July 31, 2015 - April reporting DY2 and DY3 DSRIP payments processed for all providers and DY4 DSRIP payments processed for remaining providers that were not paid on July 21, 2015. Note that there are separate transactions for each payment for each DY.
 - August 7 2015 – HHSC and CMS will approve or deny the additional information submitted in response to HHSC comments on April reported milestone/metric achievement. Approved reports will be included for payment in the next DSRIP payment period, estimated for January 2016.
- Providers can let HHSC know if they see discrepancies in the payment estimates in the online reporting system. We are attaching the official payment summaries that HHSC uses to the anchor notes.

Category 3

- HHSC staff is continuing to work with providers to resolve outstanding October DY3 baseline TA flags. As all HHSC staff are currently focused on April DY4 reporting review, providers with outstanding baseline TA flags can expect to be contacted by HHSC in late May and June.

QPI

- HHSC staff is continuing to work with providers to resolve the remaining outstanding QPI issues. If

your project was flagged as having QPI metric issues, staff will reach out to you during May or June.

Change Request Process (Plan Modification Requests and Technical Change Requests)

- In June, HHSC will provide an opportunity for 3-year projects to submit change requests for DY5 only. This 3-year project change request process will be similar to the Summer 2014 change request process. Anchors/ providers will have about one month to submit change requests (sometime in July). Additional information will be forthcoming.

Anchor Administrative Costs

- Just a reminder that the next submission date for reporting administrative costs is today, May 15, 2015. This submission will also be the last opportunity to submit costs for DY2.

DSRIP Mid-Point Assessment

- RHPS are still in the process of hearing from HHSC on the results of 3 year projects reviews, as well as closing out the last questions on all other projects that were reviewed during the mid-point assessment.
 - Please note that three (3) replacement 3-year projects that were reviewed and approved by Myers and Stauffer LC (MSLC) instead of CMS in September of 2014 were not reviewed with all other 3-year projects since they were just recently approved. These projects are: two projects in RHP 3 (112672402.2.102 and 113180703.1.101) and one project in RHP 15 (065086301.2.100). These projects will be included in the subsequent reviews conducted by MSLC.
- The mid-point assessment report is being finalized and will be shared with RHPs soon.
- Based on the withdrawals submitted by May 1st during the midpoint assessment window, HHSC decreased the DY4 Monitoring IGT due for the affiliated IGT Entities. The revised Monitoring IGT file was sent to Anchors on May 8th.

Compliance Monitoring

- HHSC and MSLC are starting a new component of the waiver review - validation of the reported information (Component 2). The primary purpose of DY4 and DY5 monitoring performed by the Independent Assessor is to validate the data submitted by performing providers that serves as the basis for their DSRIP payments.
 - This validation also includes a review of Category 3 outcome measures to ensure that they are being implemented as required by the approved project plan. All projects which have reported metrics are eligible for review.
 - The following is included in this component: Validation of reporting for Category 1 and 2; Validation of the reported Cat 3 information - baselines and achievement; and Category 4 measures required to be reviewed by CMS.
 - For Category 4, Providers reporting an alternate medication reconciliation rate for RD4 component 2 (not reporting NQF 0646 to specifications) will be subject to compliance monitoring as stated in the October DY3 and April DY4 reporting companions. Providers who reported few rates in RD6 will be included in compliance monitoring. At this time, Myers and Stauffer will only be looking at the specific Cat 4 domain and component flagged for compliance monitoring.
 - As we communicated last week in our update, MSLC is beginning the first round of Category 3 baseline validation. During the month of May, Myers and Stauffer will be looking at approved baselines from IT-1.10 HbA1c poor control and IT-3.22 Risk Adjusted All Cause Readmission. Validation of other outcomes with approved baselines will begin in June and continue through August. Inclusion in Category 3 baseline validation review will be at random. Outcomes where providers are still working with HHSC on a baseline correction or clarification will not be included
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in this round of baseline validation, but will be eligible for inclusion in future rounds (likely to occur during the summer of 2016). Providers should be prepared to submit documentation supporting the determination of their baseline numerator, denominator and measurement periods.

- We will communicate additional information about the compliance monitoring process as it is developed.
- HHSC will communicate to anchors when MSLC starts the review of the Cat 1 and 2 reported information.
- Just like with mid-point assessment communications, emails about compliance monitoring will come from the DSRIP Compliance mailbox:
TXHealthcareTransformationDSRIP_Compliance@hhsc.state.tx.us. Anchors and providers can send any questions about compliance monitoring to this mailbox as well.

3. Other Information for Anchors

Waiver Renewal Planning

- At the Executive Waiver Committee (EWC) on May 14th, HHSC provided information on waiver renewal key DSRIP issues for discussion. The information builds on the Transition Plan submitted to CMS in March to include the following key areas:
 - The majority of current active projects will be eligible to continue in the extension period for more time to demonstrate outcomes.
 - Project requirements for extension period
 - What to do with funds from the DSRIP pool not allocated to continuing projects
 - Work to streamline the DSRIP program to lessen the administrative burden on providers while focusing on collecting the most important types of information.
 - Further integrate efforts with Texas Medicaid managed care quality strategy and other value-based payment efforts.
- HHSC plans to have a draft of the Waiver Extension/Renewal for public review in June 2015 and plans for public meetings in July 2015. We also plan to schedule a webinar for those not able to attend the public meetings in person. We will communicate dates and locations as soon as available. (Tentatively, HHSC is looking at July 13 - 24, 2015 in the following locations: Dallas/Fort Worth metroplex, Tyler, Amarillo, El Paso, Austin, Houston, McAllen, and San Antonio.)
- The waiver renewal packet will be relatively high level, with programmatic details worked out through revisions to the protocols. HHSC plans to make changes to the two key DSRIP protocols. The protocols are not required to be submitted to CMS by September 2015, so HHSC will have more time to work with stakeholders on detailed programmatic changes.
 - We tentatively plan to hold a DSRIP protocol webinar in August and also will discuss protocol changes at the August 27-28 Statewide Learning Collaborative Summit tailored to the summit audience.
- HHSC also is working on a process for comments to be able to be posted through an on-line form. We know that many stakeholders already have given broad renewal input through the previous survey, so HHSC is not requiring stakeholders to submit comments using the on-line form unless you have comments you didn't previously provide or new comments. HHSC plans to continue to work closely with stakeholders on both the renewal packet and protocols, and is establishing the on-line form to organize input in case folks want to provide input on either the renewal concepts or protocol-level details prior to the July public meetings and August protocol discussions.

Update on Private Hospital Deferral Financing Issue

- HHSC held a call with THA this week to provide a status update on discussions with CMS around private hospital IGT financing arrangements in the waiver. HHSC plans to hold a number of calls

with CMS financial staff this summer to discuss the issues raised in the March binder from CMS in more detail.

- CMS staff indicated that CMS may be willing to allow HHSC until September 2017 to come into compliance with whatever CMS and HHSC agree upon as acceptable to address CMS concerns after the series of calls this summer. While this date is not yet a formal commitment from CMS, HHSC is encouraged to have the opportunity to clarify how things work in Texas for CMS and that CMS appears to be willing to work with us around legislative timeframes if State leadership decisions are needed.

Clinical Champions

- Anchors received a Transformational Impact Summary template for each active project in your region this week. In the same email you also received recommended language to message this process to providers and two examples of populated templates. As detailed in the email, we are asking that providers submit completed templates directly to Anchors no later than June 15th, 2015. Anchors will send these templates to HHSC in two batches, the first scheduled for May 31st, 2015.
- Some Anchors are planning to host TA sessions to guide providers through this process and have indicated that other regions are welcome to join. RHP 2 has offered to host the following two sessions (same call-in information for both):
 - Tuesday May 19th 3:00-4:00 CT
 - Thursday May 21st 9:00-10:00 CTDial-in number: 877.226.9790
Access: 3020674
Login: <https://www.webmeeting.att.com>
Meeting number: 8772269790
Code: 3020674
- The peer assessment process is intended to: a.) identify and share promising practices with like projects around the state, b.) inform the transformative impact of DSRIP projects and the development of content for the Statewide Learning Collaborative, c.) support Waiver extension/renewal efforts with CMS, and d.) help inform ways to better evaluate projects in the next phase of the Waiver.
- Providers should review all projects and please submit a template for the projects that providers have the best evidence that care is transforming and have supporting data. We have heard from many providers that Category 3 outcomes are not the best indicator of project success. This is an opportunity to provide the information that you think demonstrates the early success of projects. This process is **not** intended to be a formal peer-review or determine which projects are eligible for continuation beyond DY5.
- The work of the Clinical Champions will continue through the summer and fall to continue to assist with the evolution of DSRIP for both the Medicaid and Low Income Uninsured populations.

Submission of updated RHP Plans

- A reminder that the matrix for categorizing RHP projects by project types and the RHP certification forms are due to HHSC by today, May 15th. Please let us know if you have any questions or need an extension, if you have not already.
- HHSC has posted the following information on the [Regional Healthcare Partnership \(RHP\) Plans](#) page on the waiver website:
 - QPI summary (all RHPs)
 - Category 3 Outcome Selections
 - CY2013 RHP level PPE (PPA, PPR and PPC) data
- We are also working on posting updated Category 1 & 2 workbooks for 4 year and 3 year projects.

We will post the statewide summary of projects categorized by project types as soon as possible after receiving all of the regional project type templates.

DSRIP Statewide Events Calendar

May 2015			
RHP	Date	Topic	Contact
4	5/19	RHP 4 Learning Collaborative Event	Jonny Hipp (jonny.hipp@nchdcc.org)
9 & 10	5/27-28	Learning Collaborative Event: Collaborative Connections - Impacting Care	RHP 9: Margie Roche margaret.roche@phhs.org RHP 10: Meredith Oney RHP_Region_10@jpshealth.org
June 2015			
RHP	Date	Topic	Contact
9	6/10	PDSA Raise the Floor Webinar #2 Register Here	Margie Roche Margaret.roche@phhs.org
10	6/11	Webinar - Behavioral Health: Developing an Information Infrastructure that Supports Integrated Care Tasks	Meredith Oney (RHP_Region_10@jpshealth.org)
10	6/11	Webinar - Care Transitions: Care Coordination (Part 2)	
3	6/17	RHP 3 Learning Collaborative	Nicole Lievsay Nicole.Lievsay@harrishealth.org
July 2015			
RHP	Date	Topic	Contact
10	7/9	Webinar - Care Transitions: HIE Integration	Meredith Oney (RHP_Region_10@jpshealth.org)
10	7/16	Webinar - Behavioral Health: Documentation and Information Sharing	
2	7/17	Category 3 Work Session	Susan Seidensticker (smseiden@utmb.edu)
6	7/20	RHP 6 Learning Collaborative	Carol Huber (carol.huber@uhs-sa.com)
August 2015			
RHP	Date	Topic	Contact
9	8/5	PDSA Raise the Floor Webinar #3 Register Here	Margie Roche Margaret.roche@phhs.org
10	8/13	Webinar - Care Transitions: Overuse of ED	Meredith Oney
10	8/20	Webinar - Behavioral Health: Integrative Medicine	(RHP_Region_10@jpshealth.org)
HHSC	8/27-28	Statewide Learning Collaborative	txhealthcaretransformation@hhsc.state.tx.us
September 2015			
RHP	Date	Topic	Contact

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9	9/24	RHP 9 Biannual Learning Collaborative Event	Margie Roche Margaret.roke@phhs.org
2	9/25	RHP 2 Learning Collaborative	Susan Seidensticker (smseiden@utmb.edu)
10	9/29	RHP 10 Learning Collaborative Event	Meredith Oney (RHP_Region_10@jpshealth.org)

For waiver questions, email waiver staff: TXHealthcareTransformation@hhsc.state.tx.us.

Include "Anchor (RHP#):" followed by the subject in the subject line of your email so staff can identify your request.