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Draft Delivery System Reform Incentive Payment (DSRIP) Transition Plan

Stephanie Stephens

August 5, 2019

Webinar Basics

- Attendees are muted by default.
- Ask questions via the question box on your webinar dashboard.
- HHSC will answer questions at the end of the presentation.



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Overview of Webinar



- DSRIP Transition Plan requirements
- Summary of the draft DSRIP Transition Plan
- Milestones proposed in the draft DSRIP Transition Plan
- Ongoing stakeholder engagement

Transition Plan Requirements



- The 1115 Waiver Special Terms and Conditions require the state to submit a Transition Plan for DSRIP by October 1, 2019 (STC #37) for review and approval by the Centers for Medicare & Medicaid Services (CMS).
- Portions of the overall Federal Financial Participation (FFP) for DSRIP will be at-risk if Texas fails to submit a plan by October 1, 2019, or fails to achieve milestones outlined in the plan for DY9-10.

STC #37

- The plan must describe how Texas will further develop delivery system reform efforts after DSRIP ends.
- The plan must include DY9-10 milestones (FFY 2020-2021) for HHSC/Texas.
- Texas milestones may relate to:
 - Use of alternative payment models
 - State's adoption of managed care payment models
 - Payment mechanisms to support delivery system reform efforts
 - Other opportunities



Summary of DSRIP Transition Plan



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- Milestones included in the plan lay the groundwork for further development of delivery system reform efforts without DSRIP funding.
- To provide context for the milestones, the draft plan:
 - Provides background information on the initial waiver period and current waiver renewal.
 - Describes efforts to improve health care quality in Texas Medicaid, including DSRIP.
 - Summarizes health care priorities in Texas.

Initial Waiver Period

- DSRIP 1.0 (10/01/12 – 09/30/17) initial key areas of transformation:
 - Behavioral Health;
 - Primary Care Expansion;
 - Patient Navigation, Care Coordination, Care Transitions;
 - Chronic Care Management; and
 - Health Promotion and Disease Prevention.
- Over a four-year period, DSRIP projects provided 29.4 million encounters and served 11.7 million people (cumulative totals from DY3-6 reporting, not unduplicated counts).



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Waiver Renewal

- DSRIP 2.0 (10/01/17 – 09/30/21) changed the focus from projects to provider systems and broadened the population for which providers are accountable to include all individuals in the provider's system.
- DSRIP 2.0 increased focus on health care quality measures over process measures, which has:
 - Shown how the health of the individuals in the provider's system has changed or improved.
 - Laid the foundation for value-based care.



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Quality Initiatives and Value-Based Care (Part 1)

Current Medicaid quality initiatives and value-based care activities include:

- Value-Based Purchasing (VBP) Roadmap
- Medical and Dental Pay-for-Quality (P4Q) Programs
- Managed Care Organization (MCO) VBP Targets
- Hospital Quality-based Potentially Preventable Readmissions and Complications Program
- MCO Performance Improvement Projects (PIPs)



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Quality Initiatives and Value-Based Care (Part 2)

- Texas Dual-Eligibles Integrated Care Demonstration Project
- Nursing Facility Quality Incentive Payment Program (QIPP)
- DSRIP
- Quality Improvement (QI) Costs
- Managed Care Capitation Rates
- VBP and Quality Improvement Advisory Committee



Key Health Issues during the 86th Texas Legislative Session

- MCO Oversight
- Behavioral Health
- Maternal and Newborn Health
- Telemedicine and Telehealth
- Effectiveness of DSRIP



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Proposed Milestones (Part 1)

Advance APMs to Promote Healthcare Quality

- HHSC updates the Texas VBP Roadmap to address strategies to sustain key DSRIP initiative areas. [September 30, 2020]



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Proposed Milestones (Part 2)

Advance APMs to Promote Healthcare Quality

- HHSC updates the Texas Medicaid quality strategy to address program and stakeholder goals. HHSC will do the following:
 - To advance potential APMs for Medicaid recipients with high needs and high costs, identify measurement approaches for services and populations that traditionally have been challenging to measure. Potential areas for refined measurement approaches: severe mental illness/severe emotional disturbance; pediatric populations; and community integration for people with disabilities.
 - Improve alignment and standardization of APMs in Medicaid managed care. Maternal and newborn health is an initial focus area. [December 31, 2020]



Proposed Milestones (Part 3)

Support Further Delivery System Reform

- HHSC identifies and submits to CMS any proposals for new programs, including state-directed payment programs, to sustain key DSRIP initiative areas. This would include programs that require an amendment to the Waiver to begin in DY 11. [September 30, 2020]



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Proposed Milestones (Part 4)

Support Further Delivery System Reform

- HHSC conducts a preliminary analysis of DY 7-8 (October 1, 2017 - September 30, 2019) DSRIP quality data and related core activities to outline lessons learned on health system performance measurement and improvement. This analysis will help inform HHSC strategies for quality improvement and proposals for new programs or policy changes. [December 31, 2020]



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Proposed Milestones (Part 5)

Support Further Delivery System Reform

- HHSC reviews DSRIP activities as possible Medicaid state plan benefits and policy changes, and submits to CMS review results or approval requests, as necessary. Potential examples include community health workers and Medicare benefits such as: chronic care management, comprehensive care codes for integration of behavioral and physical health, and the Diabetes Prevention Program. [December 31, 2020]



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Proposed Milestones (Part 6)

Support Further Delivery System Reform

- HHSC identifies and submits to CMS any proposals for new programs to sustain key DSRIP initiative areas that would start in the next Waiver renewal period.
[September 30, 2021]



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Proposed Milestones (Part 7)

Explore Innovative Financing Models

- HHSC assesses Texas' current financial incentives for Medicaid MCOs and providers to enter into meaningful quality-based alternative payment models and identifies potential opportunities to strengthen or align incentives. This work includes providing additional guidance to Medicaid MCOs and providers for allowable Quality Improvement costs to help sustain certain successful DSRIP strategies.
[March 31, 2021]



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Proposed Milestones (Part 8)

Cross-Focus Areas

- HHSC completes an assessment of which social factors are correlated with Texas Medicaid health outcomes, including pediatric health outcomes. This analysis will help inform HHSC strategies for quality improvement and proposals for new programs or policy changes. [March 31, 2021]



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Proposed Milestones (Part 9)

Strengthen Supporting Infrastructure to Improve Health

- HHSC assesses the current capacity and use of telemedicine and telehealth, particularly in rural areas of Texas, to inform next steps to address access gaps. [December 31, 2020]



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Proposed Milestones (Part 10)

Strengthen Supporting Infrastructure to Improve Health

- HHSC identifies options for the Regional Healthcare Partnership structure post-DSRIP. [March 31, 2021]



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Key Focus Areas for Post-DSRIP Programs

- Behavioral health;
- Primary care;
- Patient navigation, care coordination, and care transitions, especially for patients with high costs and high utilization;
- Chronic care management;
- Health promotion and disease prevention;
- Maternal health and birth outcomes, including in rural areas of the state;
- Pediatric care;
- Rural health care;
- Telemedicine and telehealth; and
- Social drivers of health.



Next Steps



- HHSC will review stakeholder feedback on the draft DSRIP Transition Plan and incorporate changes if needed before submission to CMS.
- HHSC will continue working with Texas stakeholders on programs, policies, and strategies to build on the success of DSRIP.
 - HHSC will be scheduling a kickoff meeting in August with groups that submitted post-DSRIP proposals to discuss possible next steps.

Stakeholder Feedback on Draft Transition Plan

- HHSC is interested in feedback on:
 - Current or new milestones
 - Additional key focus areas for post-DSRIP programs
 - Additional context for the milestones (e.g., provider highlights of quality initiatives)
- Submit feedback through the online survey by Thursday, August 15, 2019.
- Link to survey:
<https://www.surveymonkey.com/r/DSRIPTransitionPlan>
- HHSC will only accept feedback on the draft DSRIP Transition Plan through the survey.



Estimated Timeline (Part 1)



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Target Date	Task
August 15, 2019	Stakeholder comments due on the draft DSRIP Transition Plan
August 2019	HHSC holds a kickoff meeting with groups that submitted post-DSRIP proposals
September 4–5, 2019	DSRIP Statewide Learning Collaborative
September 2019	HHSC holds meetings with key stakeholder groups that submitted proposals
October 1, 2019	HHSC incorporates stakeholder feedback into the DSRIP Transition Plan as appropriate and submits it to CMS

Estimated Timeline (Part 2)



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Target Date	Task
October – November 2019	DSRIP provider reporting and completion of RHP Plan Update for DY9-10
October 2019 - June 2020	Planning for and holding ongoing stakeholder meetings on potential new programs to begin in DY 11
April 1, 2020	HHSC and CMS finalize the DSRIP Transition Plan
September 30, 2020	HHSC submits to CMS any post-DSRIP programs to begin in DY 11

Estimated Timeline (Part 3)



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Target Date	Task
April 1, 2020 – September 30, 2021	HHSC ensures that DY 9-10 milestones are achieved, including any requests to CMS for approval of proposed programs and services
December 2020 – June 2021	Ongoing stakeholder meetings on potential post-DSRIP programs to begin in the next waiver renewal period
October 1, 2021	DY 11 begins
January 2023	Final DSRIP payments



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Thank you

DSRIP Email:
TXHealthcareTransformation@hhsc.state.tx.us

DSRIP Website: <https://hhs.texas.gov/laws-regulations/policies-rules/waivers/medicaid-1115-waiver/waiver-renewal>