



DSRIP Update

1115 Waiver Update

- HHSC received CMS approval for a 10-year 1115 waiver extension on January 15, 2021.
- The waiver extension also includes a new Public Health Providers Charity Care Pool (PHP CCP). This program will provide reimbursements for costs meeting charity care policy definitions to Local Health Departments, Public Health Districts, Community Mental Health Centers, Local Mental Health Authorities and Local Behavioral Health Authorities. In the first year of the program, reimbursements will cover eligible charity care costs and Medicaid shortfall. In subsequent years, the reimbursements will only be authorized for eligible charity care costs.

DSRIP Program Update

- The Special Terms and Conditions of the extended 1115 waiver explicitly included the end date for DSRIP: September 30, 2021. Therefore, it is not expected that CMS will provide a separate response to the request for the DSRIP extension.

Partner Engagement

- The next Partnership Engagement Meeting will be held via webinar on the afternoon of Friday, March 26, 2021. Registration information will be provided once details are finalized.

DSRIP Transition Milestone Progress

- Milestone: Analysis of Health System Performance in DSRIP – HHSC completed and submitted to CMS the [Provider Performance in the DSRIP Program](#) report in December 2020. The report identifies interventions for DSRIP Demonstration Years (DY) 7-8 (October 1, 2017 - September 30, 2019) associated with improvement in key health outcomes, lessons learned, and best practices in health system performance measurement and improvement. The report was also submitted to the Office of the Governor and the Legislative Budget Board.

- Milestone: Identify Proposals for New Programs for DY 11 – HHSC completed and submitted the milestone [deliverable](#) to CMS by December 31. Stakeholders may review additional detail and provide feedback on the proposed rules for these programs as follows:
 - ▶ **Comprehensive Hospital Increased Reimbursement Program (CHIRP)**
 - Proposed program rules [§353.1305 – 353.1307](#) were posted in the January 1, 2021 issue of the Texas Register. Stakeholders were asked to submit comments on rules through January 31, 2021.
 - CHIRP [Requirements](#) and [Measure Specifications](#) are posted on the DSRIP Transition webpage, under Transition Milestone Updates. Stakeholder feedback is due on or by February 2, 2021.
 - ▶ **Texas Incentives for Physicians and Professional Services (TIPPS)**
 - Proposed program rules [§353.1309 and §353.1311](#) were posted in the December 25, 2021 issue of the Texas Register. The stakeholder deadline to submit comments was on January 25, 2021. HHSC Provider Finance Department is reviewing comments.
 - TIPPS [Requirements](#) and [Measure Specifications](#) are posted on the DSRIP Transition webpage, under Transition Milestone Updates. Stakeholder feedback is due on or by February 2, 2021.
 - ▶ **Directed Payment Program for Behavioral Health Services (DPP BHS)**
 - Proposed program rules [§353.1320 and §353.1322](#) will be posted in the January 29, 2021 issue of the Texas Register. Stakeholders can submit comments on rules through February 13th.
 - DPP BHS [Requirements](#) and [Measure Specifications](#) are posted on the DSRIP Transition webpage, under Transition Milestone Updates. Stakeholders feedback is due on or by February 17, 2021.
 - ▶ **Rural Access to Primary and Preventive Services Program (RAPPS)**
 - Proposed program rules [§353.1315 and §353.1317](#) will be posted in the January 29, 2021 issue of the Texas Register. Stakeholders can submit comments on rules through February 13th.
 - RAPPS [Requirements](#) and [Measure Specifications](#) are posted on the DSRIP Transition webpage, under Transition Milestone Updates. Stakeholder feedback is due on or by February 17, 2021.

- Milestone: Assess the Social Factors correlated with Texas Medicaid Health Outcomes – the milestone team is synthesizing analyses, survey results, and expert panel recommendations and finalizing the deliverable for HHSC leadership approval before submission to CMS by March 31, 2021.
- Milestone: Assess the Tele-health Capacity of Rural Health Providers – the findings of the rural hospital and rural health clinic survey will be presented at the [Statewide Medicaid Managed Care Advisory Committee](#) meeting on February 25. The milestone team will draft an issue brief analyzing the survey results and select Medicaid utilization data to support completion of this deliverable.