



TIPPS, RAPPS & DPP BHS State Fiscal Year (SFY) 2025

Getting Ready for Quality Reporting

What's the same in SFY 2025?

- If you are enrolled in TIPPS, RAPPS or DPP BHS for SFY 2025 (the fourth program year), you must report specific quality measures as a condition of participation. There is no pay-for-performance in SFY 2025.
- You will complete reporting using an Excel-based reporting template and upload the completed template to the online reporting portal.
- HHSC will review each round of reporting to ensure that you are meeting the program's conditions of participation and to identify any issues with the quality or accuracy of your reported data.
- Directed payment programs must be [evaluated](#) to show that the payment arrangement is advancing one or more goals of the [Texas Managed Care Quality Strategy](#). Some measures have program-specific numeric targets that will be used to measure improvement over time. Your performance in 2024 will help determine if the program is advancing the quality goals and objectives cited in the [evaluation plan](#).

What's new in SFY 2025?

- Some measures were assigned to a different component. Some measure specifications were updated to align with measure steward changes. One TIPPS measure was removed. If you reported a measure for the SFY 2024 program, you may need to adjust your reporting logic to report that same measure in SFY 2025. The measure comparison tables in this document summarize the major changes. The measure specifications file for SFY 2025 lists all changes in the Change Log.
- In the first round of reporting (October 2024), you will only report progress on structure measures; you will no longer be reporting six months of data for process and outcome measures in the first round. You will report 12 months of data for process and outcome measures only in the second round of reporting (April 2025). There will be one corrections period (Summer 2025) to correct any previously reported data for structure, process, and outcomes measures.

SFY 2025 Timeline

Activity	Tentative Dates
Best Practices Learning Series	Spring – Fall 2024
Measure Spotlight Series	Year-round
Final structure measure reporting questions published	September 2024
Reporting Round 1 Structure measures Webinars or office hours may be used to help you prepare for reporting	October 2024
Preliminary evaluation data published	March 2025
Reporting Round 2 Process and outcome measures reporting for calendar year 2024 Webinars or office hours may be used to help you prepare for reporting	April 2025
Corrections Period Structure measures Process and outcome measures for calendar year 2024	June – July 2025
Final evaluation data published	March 2026

Provider Education Opportunities

Measure Spotlight Series

- HHSC will host a series of virtual meetings called Measure Spotlights. These meetings will focus on one or more DPP quality measures. HHSC staff will review quality measures in-depth, and you can ask questions about spotlighted measures. The slides from the sessions will be posted to the reporting portal bulletin board. Information regarding future sessions will be sent to the DPP Quality contact list.
- SFY 2024 spotlight presentations are available on the DPP Portal. However, be aware of specification changes for SFY 2025 measures.

Best Practices Learning Series

- The Best Practices Learning Series is a new webinar series hosted by HHSC. The objective of the series is to highlight, learn, and share best practices for quality improvement for certain quality measures and focus areas during the SFY 2025 performance period (calendar year 2024).
- In spring and summer 2024, HHSC held sessions focused on Non-Medical Drivers of Health Screening & Follow-up Plan, Hospital Readmissions, Health Information Exchange Participation, and Depression Screening and Follow-up. The slides for the sessions are posted on the reporting portal bulletin board. Information regarding future sessions will be sent to the DPP Quality contact list.

SFY 2025 Quality Resources

<ul style="list-style-type: none">• TIPPS Quality Requirements and Measure Specifications• RAPPS Quality Requirements and Measure Specifications• DPP BHS Quality Requirements and Measure Specifications	<ul style="list-style-type: none">• DPP Evaluation Resources• Reporting Portal and bulletin board (requires login credentials)• Reporting Portal User Guide
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Make sure you're getting the latest DPP quality news!

- Sign up for GovDelivery notices [TIPPS](#) [RAPPS](#) [DPP BHS](#)
- Sign up for the DPP Quality contact list by filling out a [Contact Change Form](#)
- For reporting portal access, make an account through [IAMOnline](#)

Need to Contact Us?

- Email DPPQuality@hhs.texas.gov with quality reporting questions
- Email PFD_TIPPS@hhs.texas.gov with TIPPS eligibility and financial questions
- Email PFD_Hospitals@hhsc.state.tx.us with RAPPS eligibility and financial questions
- Email pdf_dppbhs@hhs.texas.gov with DPP BHS eligibility and financial questions

TIPPS Measure Changes for SFY 2025

TIPPS Component 1

Measure	Changes in SFY 2025
T1-103: Influenza Immunization	Removed denominator exclusion for patients who ever had an anaphylaxis due to the influenza vaccine.
T1-104: Tobacco Use: Screening & Cessation Intervention	Denominator population changed from patients aged 18 and older to patients aged 12 and older.
T1-102: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	Moved to Component 1 from Component 2.
T1-113: Childhood Immunization Status	Moved to Component 1 from Component 2.
T1-114: Immunization for Adolescents	Moved to Component 1 from Component 2. Previous denominator exclusions were removed. Added denominator exceptions for anaphylaxis due to specific vaccines (see specifications for full details).
T1-119: Controlling High Blood Pressure	Moved to Component 1 from Component 2.
T1-117: Tobacco Use and Help with Quitting Among Adolescents	Measure Retired—will not be reported in SFY 2025.

TIPPS Component 3

Measure	Changes in SFY 2025
T3-105: Health Information Exchange (HIE) Participation	Updates to qualitative questions.
T3-115: Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Removed denominator exclusion for patients previously diagnosed with depression. Denominator exception updated to remove patients who do not complete the screening.
T3-124: Depression Response at Twelve Months	Denominator exclusion updated to remove permanent nursing home residents during the denominator period and measure assessment period.

Measure	Changes in SFY 2025
T3-161: Food Insecurity Screening and Follow-up Plan	Denominator Exclusions now include patient refusal, patient unable to complete screening and patient death.
T3-162: Prenatal Depression Screening and Follow-up	No specifications changes.

RAPPS Measure Changes for SFY 2025

RAPPS Component 1

Measure	Changes in SFY 2025
R1-105: Health Information Exchange (HIE) Participation	Updates to qualitative questions.
R1-163: Non-Medical Drivers of Health (NMDOH) Screening and Follow-up Plan Best Practices	Updates to qualitative questions.
R1-166: Depression Screening and Follow-up Best Practices	Updates to qualitative questions.
R1-103: Preventive Care and Screening: Influenza Immunization	Moved to Component 1 from Component 2. Removed denominator exclusion for patients who ever had an anaphylaxis due to the influenza vaccine.
R1-119: Controlling High Blood Pressure	Moved to Component 1 from Component 2.

DPP BHS Measure Changes for SFY 2025

DPP BHS Component 1

Measure	Changes in SFY25
B1-105: Health Information Exchange (HIE) Participation	Updates to qualitative questions.
B1-145: Certified Community Behavioral Health Clinic (CCBHC) Certification Status	Updates to qualitative questions.
B1-147: Provide integrated physical and behavioral health care services to children and adults with serious mental illness	Updates to qualitative questions.
B1-163: Non-Medical Drivers of Health (NMDOH) Screening and Follow-up Plan Best Practices	Updates to qualitative questions.
B1-149: Unhealthy Alcohol Use: Screening & Brief Counseling	<p>SFY24 exception removed: documentation of medical reasons for not screening or providing brief counseling (e.g., limited life expectancy, other medical reasons).</p> <p>SFY25 exclusions added: patients with dementia or who use hospice. Audit screening score changed from ≥ 4 to ≥ 8. Audit-C scoring stayed the same.</p>
B1-167: Depression Remission at Six Months	<p>Moved to Component 1 from Component 2.</p> <p>SFY24 used measure steward's method of Nov-Oct, but in SFY25, the measurement period will align with SAMHSA's method of using a calendar year.</p> <p>SFY25 specs allow Major Depression or Dysthymia in any diagnostic field and not just as primary diagnosis.</p>
B1-150: Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	Moved to Component 1 from Component 2.
B1-151: Adult Major Depressive Disorder (MDD): Suicide Risk Assessment	Moved to Component 1 from Component 2.
B1-152: Follow-Up After Hospitalization for Mental Illness 7-Day (state hospital)	Moved to Component 1 from Component 2.
B1-153: Follow-Up after Hospitalization for Mental Illness 30-Day (state hospital)	Moved to Component 1 from Component 2.