Anchor Conference Call



January 8, 2021 1:30-3:00 p.m. CST

1. General Anchor Communication

- Thanks for your continued work!
- We hope you all had a wonderful holiday and wish you a happy new year!
- HHS offices will be closed on Monday, January 18th for the Martin Luther King, Jr. holiday.

2. DSRIP Implementation

DY9R2 (October) Reporting Timeline:

- **January 15, 2021, 11:59** Due date for providers to submit responses to HHSC requests for additional information
- January 20, 2021 October reporting DY9 DSRIP payments processed for transferring hospitals.
- January 29, 2021 October reporting DY8 DSRIP payments for all providers and DY9 DSRIP payments processed for providers that were not paid on January 20, 2021. There are separate transactions for each payment for each DY.
- **February 24, 2021** HHSC and CMS will approve or deny the additional information submitted in response to HHSC comments on October reported milestone/metric achievement.

Category C:

- October DY9 Technical Assistance: HHSC has sent e-mails to providers flagged for technical assistance during the October DY9 reporting period. HHSC aims to clear all flags by March in time for April DY10 reporting. Provider responses are due by 1/15/21.
- Proposed Telehealth Changes to Category C Specifications: Thank you to all who provided survey feedback on Category C measures and the impact of COVID-19 on meeting PY3 goals associated with these measures. HHSC will provide guidance to providers for PY3 reporting in the coming weeks.

Anchor Admin Cost Claiming:

- The HHSC Provider Finance Division will contact Anchors who submitted cost claiming in DY9 Round 2 regarding IGT amounts and due dates in mid-January.
- In January 2019, CMS confirmed that DSRIP anchors can claim administrative costs incurred in DY11, if the
 costs are attributable to DY10 activities. All Anchor contracts were amended to extend the contract to the
 end of DY11, 9/30/2022.

Compliance Monitoring Update: MSLC sent regional updates to anchors on December 16 and 17. If there are any questions, please contact MSLC directly and copy the HHSC compliance mailbox.

3. DSRIP Transition

There are no new updates on the DSRIP extension request.

Milestone Updates: The Provider Performance in the Delivery System Reform Incentive Payment Program, Demonstration Years 7 and 8 report required by House Bill 1, 86th Legislature, Regular Session, 2019 (Article II, Health and Human Services Commission, Rider 38) has been posted to the HHS Reports and Presentations webpage. This report provides an overview of data and performance by DSRIP providers. HHSC submitted this report to the Centers for Medicare & Medicaid Services (CMS) as the deliverable for the DSRIP Transition Plan milestone requiring an analysis of demonstration year (DY) 7-8 quality data on December 22.

The DY11 program options (milestone 3 deliverable) were submitted to CMS on December 29 and are included with the final anchor notes.

DY11 Directed Payment Program Rules:

Comprehensive Hospital Increased Reimbursement Program (CHIRP)

- Proposed rules §353.1305 353.1307 posted in the January 1, 2021 issue of the Texas Register
- Public hearing Monday, January 11, 2021 at 10:30am CST. See information here:
 https://hhs.texas.gov/about-hhs/communications-events/meetings-events/2021/01/11/notice-public-hearing-proposed-rules-comprehensive-hospital-increase-reimbursement-program

Texas Incentives for Physicians and Professional Services (TIPPS)

- Proposed rules §353.1309, §353.1311 posted in the December 25, 2021 issue of the Texas Register
- Public hearing Monday, January 11, 2021 at 11:30am CST. See information here:
 https://hhs.texas.gov/about-hhs/communications-events/meetings-events/2021/01/11/notice-public-hearing-proposed-rules-texas-incentives-physicians-professional-services-program