

November 2, 2018

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

### 1. General Anchor Communication

- Thanks for your continued work!
- We will attach the slides from the 11/1/18 webinar on DSRIP Transition Proposals and a link to the webinar recording with the final anchor notes.

### 2. DSRIP Implementation

#### October DY7 Reporting

- Key Dates:
  - November 21, 2018, 5:00 p.m. – Due date for IGT Entities to notify HHSC of any issues with their affiliated providers' October DY7 reports.
  - December 4, 2018, 5:00 p.m. – Deadline for changes in IGT entities or proportion of IGT among entities.
  - December 12, 2018 – HHSC and CMS will complete their review and approval of October DY7 reports or request additional information (referred to as NMI) regarding the data reported.
  - January 4, 2019 – IGT settlement date for October DY7 reporting DSRIP payments and Monitoring IGT.
  - January 15, 2019, 11:59 p.m. – Due date for providers to submit responses to HHSC requests for additional information on October DY7 reported milestone/metric achievement and incomplete semi-annual progress reports.
  - January 18, 2019 – October reporting DY7 DSRIP payments processed for transferring hospitals.
  - January 31, 2019 – October reporting DY6 and DY7 DSRIP payments processed for all providers that were not paid on January 18. Note that there are separate transactions for each payment for each DY.
  - February 22, 2019 – HHSC and CMS will approve or deny the additional information submitted in response to HHSC comments on October reported milestone/metric achievement and semi-annual progress reports.

#### Category A

- A Costs and Savings Frequently Asked Questions (FAQ) document has been posted to the DSRIP Online System Bulletin Board. Providers should review this FAQ document before submitting questions to HHSC regarding the Costs and Savings portion of Category A.

#### Anchor Admin Cost Claiming

- For DY 7 Round 2 Anchor Admin Cost Claiming that is due November 15, 2018, providers should only include costs that have not been submitted for reimbursement during previous cost claiming submissions. In other words, the cost claiming submission for DY7 Round 2, should not contain costs that provider submitted during the cost claiming submission for DY7 Round 1 back in May. Providers should ensure that the costs being claimed for reimbursement are not duplicated.
- Providers can claim costs for the first part of the Federal Fiscal Year, October 2017-March 2018, during this cost claiming round, but these costs must be new costs that were not previously submitted during provider's DY7 Round 1 cost claiming submission that was due back in May. Some providers may do this if invoices or accounting processes lag behind the Anchor Admin Cost Claiming submission due dates.

- When completing the percent-of-effort spreadsheet and the cost template spreadsheet, anchors should use job classifications, not functional titles, when referring to staff. For some anchors, there might not be a distinction between the functional title and the job classification. For example, anchors should refer to staff as Project Manager VI, not DSRIP Lead Project Manager. Anchors may also include both the functional title and the job classification when completing these spreadsheets — please just put the functional title in parenthesis. Instructions regarding this are unclear on the cost template spreadsheet.

**DSRIP Data Retention**

- We have gotten some questions from providers about how long they need to retain data associated with DSRIP, especially related to DY2-6 projects. HHSC recommends that providers follow the same data retention policies as they do for their Medicaid services. The Texas Medicaid Provider Procedures Manual requires all Medicaid providers to retain related documents and claims for a "minimum period of five years from the date of service or until all audit questions, appeal hearings, investigations, or court cases are resolved." However, freestanding RHCs must retain their records for a minimum of six years, and hospital-based RHCs must retain their records for a minimum of ten years.

**3. Other Information for Anchors**

**Save the Date - Looking Ahead: Maximizing Value-Based Health Care in Texas**

- Leaders from Dell Medical School will discuss their focus on person-centered, team-based care to maximize health outcomes for patients and value for payers. Additionally, hear about highlights and next steps in Dell Med’s work with the Texas Health and Human Services Commission and Episcopal Health Foundation to advance value-based payment in Texas Medicaid, including building on care innovation initiated through the DSRIP program.

**Tuesday, December 11**

10 a.m. to 3 p.m.

Texas State Capitol Building  
Extension Auditorium

**DSRIP Statewide Events Calendar**

November 2018			
RHP	Date	Topic	Contact
7	11/13/18	RHP 7 Stakeholder Meeting	<a href="#">Katie Coburn</a>
18	11/13/18	RHP 18 DY9-10 Planning	<a href="#">des Anges Cruser</a>
December 2018			
RHP	Date	Topic	Contact
3	12/6/18	RHP 3 Regionwide Learning Collaborative	<a href="#">Jessica Granger</a>
May 2019			
RHP	Date	Topic	Contact
9, 10 & 18	5/14-15/19	5 <sup>th</sup> Annual RHPs 9, 10, and 18 Collaborative Connections - Impacting Care: A Learning Collaborative Summit Register at <a href="#">2019 Learning Collaborative</a>	<a href="#">Margie Roche</a> <a href="#">Heather Beal</a>

## Anchor Conference Call

# AGENDA

*For waiver questions, email waiver staff: [TXHealthcareTransformation@hhsc.state.tx.us](mailto: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.*