

Additional Operational Details for Cat 3 in DY6

- **Measurement Periods:**

- **DY6 goals can be achieved in either the standard 12 month Performance Year (PY) 3 that follows your PY2 measurement period used for achievement of DY5 goals, or the 12 month DY6 measurement period**, with Carryforward available in the 12 months following the reported PY3 for achievement of DY6 milestone.
- Providers opting to use a non-consecutive PY3 measurement period for DY6 achievement will still need to use the standard PY3 measurement period that follows their PY2 measurement period for achievement of any carryforward from DY5 milestones (DY5 AM-2.x or DY5 PFPM's AM-3.x)

- **Goal Calculation Details:**

- HHSC will have DY6 goals (following the current proposal) for most outcomes in the next update of the Category 3 Summary Workbook.
- **IOS - Survey goals (survey based outcomes in ODs 10 and 11) are still TBD.** Certain reporting scenarios have been a challenge for providers, and we will reevaluate goal setting methodologies for DY6.
- **HHSC will be implementing an improvement floor for DY6 goals for QISMC outcomes** to clear up grey areas for outcomes with baselines close to the High Performance Level (HPL), and to create some equity in goals for outcomes above the HPL.
  - For outcomes with a baseline between the Minimum Performance Level (MPL) and HPL, DY6 goals are the greater absolute value of improvement of either a 25% gap closure towards the HPL, or baseline + 10% of the difference between the HPL and MPL.
  - For outcomes with a baseline above the HPL, goals are the lesser absolute value of improvement of either a 12.5% gap closure towards perfect, or baseline + 10% of the difference between the HPL and MPL.

Direction	Baseline	PY3 Goal
Positive (higher rates indicate improvement)	Below the MPL	baseline + .15*(HPL - MPL)
	Between MPL & HPL	the greater of: baseline + .25*(HPL - baseline) or baseline + .10*(HPL - MPL)
	Above the HPL	the lesser of: baseline + .10*(HPL - MPL) baseline +.10*(1- baseline)
Negative (lower rates indicate improvement)	Above the MPL	baseline -.15*(MPL - HPL)
	Between MPL & HPL	the lesser of: baseline - .25*(Baseline - HPL) or baseline - .10*(MPL - HPL)
	Below the HPL	the greater of: baseline - .10*(MPL - HPL) baseline -.10*(baseline)

- This will result in lower DY6 goals for some outcomes with a baseline above the HPL, and slightly higher goals for outcomes with a baseline just below the HPL.

This will eliminate the current "notch effect" where providers with a baseline above the HPL are sometimes asked for a greater absolute value of improvement compared to a baseline below the HPL.

- **Providers with a currently approved alternate achievement request will submit a new request for DY6.** Goals should build on previously approved goals and take into consideration achievement reported to date. HHSC does not currently have a planned timeline for submission and review, and will provide more details this summer.
  - **HHSC will allow new alternate achievement request for QISMC outcomes with a baseline well below the MPL** - specifically targeting outcomes with baselines below the MPL and are not achieving DY4 and DY5 goals. This is in line with initial DY3-5 policies where providers could request at baseline submission an alternate achievement level for a QISMC outcome if the population measured is disparate compared to the population used to establish benchmarks. Benchmark sources are identified in the Category 3 compendium for a given outcome. HHSC does not currently have a planned timeline for submission and review, and will provide more details this summer.
  - **PFPM goals will be calculated the same as Cat 3 outcomes**, with the same rules for DY6 achievement milestone measurement periods.
- **Stretch Activities**
- Stretch activities are for P4R outcomes with a SA in DY5 only. Providers that do not wish to complete one of the three SAs on the menu may select a PFPM for DY6.
- **Other**
- HHSC does not intend to update the reporting companion at this time, but can issue additional guidance on specific measures if widely requested. Our guidance on the ICD-9 to ICD-10 transition is the same as in the past (copied below).
    - HHSC will not be updating the compendium with new ICD-10 codes and we do not plan to issue a code crosswalk specific to DSRIP Category 3. We ask providers (and Myers and Stauffer when relevant) to treat this as an instance where providers are using their best clinical judgment and then maintaining documentation of those clinical judgments and consistency throughout reporting periods. In this case, we would allow providers to use whatever guidance/crosswalks they are applying system-wide for the transition (for example, CMS GEMs 2016). Please notify HHSC if you identify a specific instance where the transition may make comparison between measurement periods invalid.