

Anchor Update 10/12/18

Good Afternoon Region 10 Providers,

HHSC has a few updates for you this week:

October DY7 Reporting

- HHSC has hit a snag with uploading the webinar recordings to the waiver website, but links to the recordings were added to the DSRIP Online Reporting System bulletin board under "Reporting - October DY7."
- For providers who need to report an error in the DSRIP Online Reporting System, please remember to include details about what the provider was doing when the error occurred in the email. For example: What reporting page was the provider were on? What data fields was the provider entering data in? Did the provider click a button before the error occurred? etc.
- HHSC is aware that there are some saving issues on the **Category A tab** and has contacted their contractor to help resolve these issues.
- The **Category 3 template** is not displaying the correct PY4 measurement period for certain measures that have previously reported PY3B. HHSC sent a notice to impacted providers (and forwarded to anchors) this afternoon with additional detail and is requesting a response from providers to confirm they received the email and understand their correct PY4 measurement period.

Category D

- Physician Practices Reporting: Data that was posted for Physician Practices to report on Category D does not include regional information for several measures, including Perforated Appendix Admission Rate, Low Birth Weight Rate, Dehydration Admission Rate, Bacterial Pneumonia Admission Rate, Urinary Tract Infection Admission Rate , Uncontrolled Diabetes Admission Rate and Lower-Extremity Amputation among Patients with Diabetes Rate. Although the regional rates are not available for those measures for this reporting period, providers should respond to the qualitative questions for these measures describing their own activities that impact these areas. Data for regional rates for all measures will be available in DY8, prior to April reporting.
- Hospital Reporting - PPVs (Metric M-7.4): HHSC received several questions related to the new area of reporting - Potentially Preventable ED visits or PPVs. Providers are asking if there are additional reports that would allow comparison across the years. HHSC is not providing additional PPV reports for prior years. Providers should note that they need to compare the rates to **any** recent data on potentially preventable ED visits for the broader population. If providers have data for the overall PPVs they can compare it to Medicaid rates provided by HHSC. In addition, the question (see below)

asks providers to describe PPV trends using **internal** data if a provider uses **internal** data for PPV analysis. In this case, providers would most likely have several years of data that would allow for a comparison.

Average/High Volume Providers:

1. How is this information used to inform any changes to your current processes and procedures?
2. Describe any established processes/policies/procedures in place to identify and address PPVs in your facility.
3. How does this Medicaid only rate compare to any recent data on potentially preventable ED visits rates for your broader population?
4. If you are using your internal data to analyze PPVs, please use your internal data to describe your PPV trends.
Please tell us how PPVs during this reporting period compare to PPV rates when your hospital reported last time.
5. Do you have any Core Activities that can potentially impact your PPV rates? If yes, please list which ones.

Category A - Costs & Savings

- HHSC is aware that the Recommended Forecasting Tool developed by the Center for Healthcare Strategies, Inc. (CHCS) and recommended by HHSC for the Costs and Savings analysis is not accepting any new user registrations. CHCS is in the process of addressing the issue and hopes to have the issue resolved sometime next week. HHSC will share any updates next week once it hears from CHCS on the resolution.

Anchor Admin Cost Claiming

- Providers must submit their DY7 Round 2 Anchor Admin Cost Claiming to HHSC by November 15, 2018. The cost template and the percent-of-effort template must be submitted to TXHealthcareTransformation@hhsc.state.tx.us by this time. These templates are available on the waiver website under Anchor Administrative Cost Claiming: <https://hhs.texas.gov/laws-regulations/policies-rules/waivers/medicaid-1115-waiver/1115-medicare-waiver-tools-guidelines-regional-healthcare-partnership-participants>.