



DY4 Round 2 (October) DSRIP Reporting

John Scott

Transformation Waiver Operations

October 8, 2015

- Category 1 or 2 metrics, Category 3 milestones, and Category 4 reporting domains **achieved by September 30, 2015**, may be reported in October using the DSRIP Online Reporting System.
- October reports are due by October 31, 2015, 11:59 p.m.

Key Points for October DY4 Reporting

- Do not report a Category 1 or 2 metric/Category 3 milestone as completed unless it was fully completed by **September 30, 2015**.
- If the Texas Health and Human Services Commission (HHSC) does not find sufficient evidence of achievement in the documentation, the provider will have only one opportunity in December/January to submit additional information.
 - If HHSC and the Centers for Medicare & Medicaid Services (CMS) do not approve the additional information, the provider will no longer be eligible for payment for that metric/milestone.
- Providers should read the October DY4 companion document fully, as it includes updated guidance based on previous reporting periods.

Key Points for October DY4 Reporting, continued

- All providers are required to complete the following in the DSRIP Online Reporting System for every project regardless of whether the milestone/metric is reported for payment in October. DSRIP payments may be withheld until the complete report is submitted.
 - “Provider Summary” must be completed.
 - For each individual project:
 - “Project Summary” tab – all questions must be answered for each Category 1 or 2 DSRIP project.
 - “Progress Update” field – must be completed for each Category 1 or 2 metric and each Category 3 milestone.
 - **QPI Template** is required for DY3 Carryforward QPI metrics reporting “Yes-Completed,” as well as for **all DY4 QPI metrics**.

Key Items for October DY4 Reporting

- DY3 carryforward reporting
- QPI reporting
- Cat. 1-2 Clarifications
- Required Coversheet
- Additional Supporting Documentation Requirements
- Category 3 and Category 4 Reporting

DY3 Carryforward Reporting

- October 2015 is the final reporting opportunity for DY3 Category 1 or 2 metrics or Category 3 milestones that were carried forward to DY4.
 - Note that if you are reporting on a carried forward percentage improvement metric that is included in DY3 and DY4, then the DY3 carried forward metric must be demonstrated prior to the DY4 metric.
- For Category 3 carried forward milestones, providers should complete the Carryforward Category 3 DY3 Status Report (PM-8) and/or the Category 3 October DY4 Reporting Template (Combined Baseline & Performance Reporting Template) (PM-9) posted on the HHSC website under DY4 Reporting Templates and Instructions.

QPI Reporting

- Providers may report on DY4 QPI metrics in October if achieved between October 1, 2014, and September 30, 2015.
- All providers are required to submit the DY4 QPI reporting template, regardless of whether they are reporting achievement of DY4 QPI metrics.
- Providers must ensure that protected health information (PHI) is de-identified in supporting documentation.
- Please refer to the QPI Reporting Companion and presentation for additional information.

Cat. 1-2 Clarifications

- If a metric goal has multiple parts, all parts must be fully achieved to report for payment in October.
- Early achievement of DY4 metrics (i.e., metrics achieved in DY3, October 1, 2013 – September 30, 2014) may be allowable for **non-QPI** metrics if the State deems appropriate.
- If a provider is reporting on the same metric from DY3 but has a lower achievement in DY4, then an explanation should be provided in the "Progress Update" field.

Cat. 1-2 Clarifications, continued

- If a provider is deviating from a metric, an explanation is required in the “Progress Update” field. HHSC will review the explanation and may request additional information and/or submit for CMS approval if deemed appropriate.
 - If the requested deviation requires additional information and is approved during the additional information period, payment for the metric will occur following the next reporting period.
 - If the requested deviation is not approved, the provider will no longer be eligible for payment for that metric.
- If the reported and approved achievement of a DY2-4 metric has changed, please provide an explanation in the Project Summary section under “Project Overview: Challenges.”
- If the baseline reported previously for a non-QPI metric has changed, please provide an explanation in the “Progress Update” field for the metric.
 - If the DY4 goal is an improvement over baseline, HHSC will review in context of the entire project to determine appropriateness.

Required Coversheet

- Each project must include a coversheet explaining where reviewers should focus in reviewing specific documents and briefly explaining how the documents support achievement.
- A strong coversheet helps reviewers interpret the supporting documents, i.e., it is more than just a list of documents.
 - A coversheet template is posted on the HHSC website under DY4 Reporting Templates and Instructions.
 - The coversheet template includes boxes for nine metrics. If a provider is reporting on more than nine metrics for a given project in DY4, it will need to submit an additional coversheet for that project.
 - Upload the coversheet for a given project as one of the attachments under the first milestone and metric for which you are reporting “Yes-Completed.”

Required Coversheet, continued

Example of a strong coversheet

Metric 1:		
1	Metric ID (e.g., P-1.1):	P-5.1
2	Reporting type (select one):	Reporting current DY (not carryforward) <input type="text"/>
3	File name(s) for supporting documentation:	123456789.1.1_J.Doe_Provider_Contract_DY4_20150419.pdf 123456789.1.1_J.Smith_Contract_DY4_20150419.pdf 123456789.1.1_Primary_Care_Encounter_Summary_DY4__20150419.pdf
4	Page #s demonstrating achievement:	For Contracts = Page 1; for Encounters - only one page
5	Describe how the documentation supports achievement of this metric:	<p>123456789.1.1_J.Doe_Provider_Contract_DY4_20150419.pdf - contract on one primary care provider - shows employment as of February 2015.</p> <p>123456789.1.1_J.Smith_Contract_DY4_20150419.pdf - contract on second primary care provider - show employment as of November 2014. This provider is actually at a new location for pediatric patients.</p> <p>123456789.1.1_Primary_Care_Encounter_Summary_DY4__20150419.pdf - one page summary table pulled from patient financial system that shows that both providers are not only employed but currently seeing patients in the first six months of DY4. Our goal for this year is to see 40,144 visits by the end of DY4. Through March 2015, we are at 24,629 and expect to achieve our goal by the end of the measurement year.</p>

Additional Supporting Documentation Requirements

- All supporting documentation must demonstrate baseline information as well as the increase or total achievement stated in the goals.
 - If a baseline period is not specified and is cited as a point of improvement for a subsequent goal, a 12-month baseline period should be provided. A minimum six-month baseline period may be allowed due to delayed project implementation with sufficient provider explanation. If a DY4 metric goal is to demonstrate improvement over DY3 performance, there should be no gaps in DY3 and DY4 measurement periods without explanation.
- All supporting documentation must include dates to demonstrate that achievement occurred by September 30, 2015.
- Links will not be accepted as supporting documentation.
- For metrics that involve hiring of additional staff to increase care capacity, the provider should clearly demonstrate that the staff changes are different from business as usual (i.e., are to increase capacity as part of the DSRIP project).

Additional Supporting Documentation Requirements, continued

- For metrics involving learning collaboratives, documentation must include the agenda, sign in sheet, and a summary of topics discussed and **lessons learned relevant to the project** to demonstrate participation. An optional template is available on the waiver website.
- For metrics requiring implementation of “raise the floor” improvement initiatives, the documentation should include:
 - A list of ideas that came up during the semiannual meeting that would apply to the project.
 - A description of the provider’s agreement to implement at least one idea and rationale for the selection.
 - A description of the status of implementation.
 - Any details related to the impact of the idea on the project.

Category 3 & 4 Reporting

- Please refer to the Category 3 & 4 reporting presentation for additional information.

October Reporting Key Dates

- October 1, 2015 – The DSRIP Online Reporting System opened for providers to begin October reporting.
- October 23, 2015 – Final date to submit questions regarding October reporting and inform HHSC of any issues with DY4 data in the reporting system.
- October 31, 2015, 11:59 p.m. – Due date for October DY4 reporting, including required semi-annual progress reporting due to HHSC.
- November 20, 2015, 5:00 p.m. – Due date for IGT Entities to notify HHSC of any issues with their affiliated providers' October DY4 reports and IGT changes in entities or proportion of IGT among entities.

October Reporting Key Dates, continued

- December 9, 2015 – HHSC and CMS will complete their review and approval of October reports or request additional information (referred to as NMI) regarding the data reported.
- January 4, 2016 – IGT due for October reporting DSRIP payments and Monitoring IGT.
- January 15, 2016, 11:59 p.m. – Due date for providers to submit responses to HHSC requests for additional information on October reported milestone/metric achievement and incomplete semi-annual progress reports.
- January 15, 2016 – October reporting **DY4 DSRIP payments** processed for transferring hospitals and top 14 IGT entities.

October Reporting Key Dates, continued 2

- January 29, 2016 – October reporting DY3 DSRIP payments processed for all providers and DY4 DSRIP payments processed for remaining providers that were not paid on January 15.
- February 17, 2016 – 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.
 - Metrics approved during the additional information period will be included for payment in the next DSRIP payment period, estimated for July 2016.

October Reporting Key Dates, continued 3

- February 19, 2016 – HHSC and CMS will complete their review and approval of provisionally approved October reports or request additional information (referred to as NMI) regarding the data reported (if applicable).
- March 9, 2016 – Due date for providers to submit responses to HHSC requests for additional information on provisionally approved October reported milestone/metric achievement and incomplete semi-annual progress reports (if applicable).
- March 30, 2016 – HHSC and CMS will approve or deny the additional information submitted in response to HHSC comments on provisionally approved October reported milestone/metric achievement and semi-annual progress reports (if applicable).

Waiver Communications

- Find updated materials and outreach details:
 - <http://www.hhsc.state.tx.us/1115-waiver.shtml>
- Submit all questions to:
 - TXHealthcareTransformation@hhsc.state.tx.us



Using the DSRIP Online Reporting System

System Requirements

Browser Options

- Modern browsers: Firefox, Internet Explorer, Safari (Mac), Chrome, Opera
- Cross-platform (Mac, Windows)
- Minimum requirement: Internet Explorer 8



Other Requirements

- Modern computers and operating systems
- Tablets and phones not recommended

Getting System Access

- Access is role-based (Provider, Lead Provider, Anchor or IGT entity).
- Users should be logged in as a Provider or Lead Provider to complete their project reports.
- What if users need to update their roles?
 - Contact TXHealthcareTransformation@hhsc.state.tx.us
- What if new users need to be added or former users need to be removed?
 - Complete the RHP Contact Change Form (<http://www.hhsc.state.tx.us/1115-docs/RHP/Plans/Contact-Change.pdf>) and submit it to the waiver mailbox: TXHealthcareTransformation@hhsc.state.tx.us

Steps to Online Reporting

1. Enter and Save Provider Summary
2. Enter and Save Individual Project Reports
3. Confirm That Reporting Is Complete

Optional for Lead Providers: “Submit” project reports to prevent further editing

The Provider Details page is the access point to the following reporting pages:

- Provider Summary
- Category 1 and 2 Projects
- Category 3 Outcomes
- Category 4



Texas Health and Human Services Commission

User: aquinn
Role: HHSC Reviewer
[Log Out](#)

HOME | SEARCH | USERS AND ROLES | REPORTS

Provider Details

Seton Healthcare dba University Medical Center at

RHPs: 7 TPI: 137265806
Ownership: Non-State Owned Public TIN: 17411096435000

Contacts

+	Lydia Long	llylong@seton.org
+	Shelley Soucs	ssoucs@seton.org
+	Christine Jesser	cjesser@seton.org

DY2 DY3 **DY4** DY5

RHP: 7 **Provider Summary Rd 1** **Provider Summary Rd 2**

Reporting Status

137265806.1.1 RHP: 7

Year	Metric	Value	Remaining
DY4	Paid Amt	\$2,969,497	(Remaining: \$1,496,779)
	Achieved Amt	\$2,990,851	(66.67%)
	Project Max Amt	\$4,486,276	
DY3	Paid Amt	\$4,267,482	(Remaining: \$0)
	Achieved Amt	\$4,267,482	(100%)
	Project Max Amt	\$4,267,482	

Step 1: Enter and Save Provider Summary

Step 2:

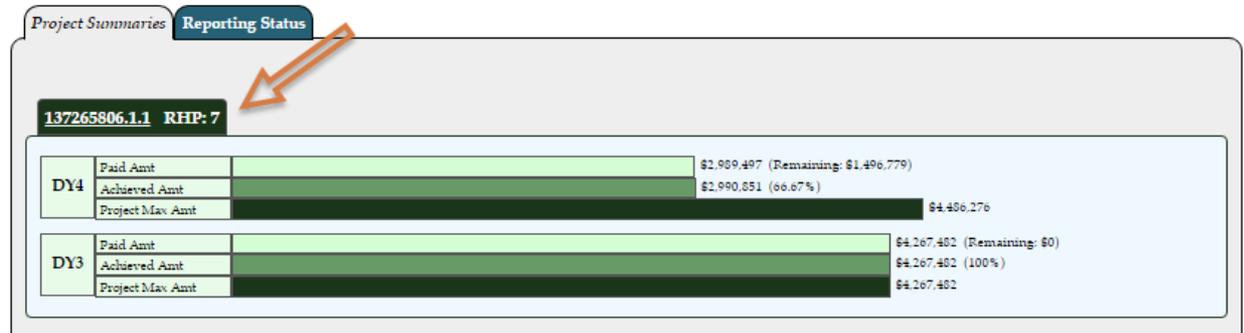
Enter and Save Individual Project Reports

Enter and Save Individual Project Reports

1. Project Summary for each project
2. Progress Update for each metric
3. Other required information for each metric reporting achievement
4. Supporting documentation for each metric reporting achievement

Step 2: Enter and Save Individual Project Reports

- On Provider Details page, choose a **Project ID** from listed projects.



- On Project Details page, click on **Round 2** button.



Texas Health and Human Services Commission

User: aquinn
Role: HHSC Reviewer
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HOME | SEARCH | USERS AND ROLES | **REPORTS**

Project Details

Project ID: 137265806.1.1
RHP: 7
Provider: [Seton Healthcare dba University Medical Center at](#)
Round 1 Status: HHSC Review Complete
Round 2 Status: Report not Started

Project Option: 1.13.1
Summary: Divert patients away from community Emergency Rooms into a more clinically appropriate and cost effective centralized Psychiatric Emergency Department.
Related Category
3 Projects: [137265806.3.4](#), [137265806.3.204](#), [137265806.3.205](#)
Semi-Annual Reports: **Round 2**

DY2 | DY3 | **DY4** | DY5

Step 2: Enter and Save Individual Project Reports, 2

- A Project Summary is required for each project.
- On Project Reporting page, click on **Project Summary** Tab.
- Enter Project Summary narrative for each question
- Click **Save** at any time.

Project Reporting

Project ID: [137265806.1.1](#)

Project Area: 1.13 - Development of behavioral health crisis stabilization services as alternatives to hospitalization.

Project Option: 1.13.1 - Develop and implement crisis stabilization services to address the identified gaps in the current community crisis system

Provider: [Seton Healthcare dba University Medical Center at RHP](#)

RHP: 7

Save **DY4 Round 2**

Instructions

IGT Info

Project Summary

Category 1 Milestone P-4

Category 1 Milestone P-9

Category 1 Milestone I-102

Category 3 137265806.1.4 IT-9.6

Category 3 137265806.1.104 IT-9.10.a

Category 3 137265806.1.105 IT-9.10.c

Show Round 1 Project Summary

Project Overview: Accomplishments	
Project Overview: Challenges	
Project Overview: Lessons Learned	
Patient Impact for Medicaid/Low-Income Uninsured Population:	
Progress on Core Components:	
Continuous Quality Improvement Activities:	

Does your project include other federal funding sources? Yes No

Step 2: Enter and Save Individual Project Reports, 3

- On each milestone tab, enter **current information** (as of September 30) or replace Round 1 information in each yellow box for each metric.
- DY3 carryforward milestone tabs are indicated with an asterisk.

Instructions
IGT Info
Project Summary
Category 1 Milestone P-4
Category 1 Milestone P-101
Category 1 Milestone P-9

Milestone: P-101
 Custom Description: Utilization of appropriate crisis alternatives
 Milestone Value: \$1,422,494
 Estimated DY4 Payment:

Metric Details	Metric P-101.1
Metric Description:	
Custom Metric Description:	Establish a baseline for specialty clinic volume ? number of visits.
Goal/Baseline:	Establish a baseline for specialty clinic volume. Estimated at 1500 clinic visits per year across all coverage locations. 1500 encounters.
Data Source:	
Custom Data Source:	
Goal Type:	Numeric
Numeric Goal:	1500
QPI:	Y
Medicaid/Low-Income Uninsured:	N
Baseline and Period:	<div style="background-color: yellow; height: 20px; width: 100%;"></div>
Round 1 Values	Metric P-101.1
Round 1 Achieved?	
Round 1 Goal Progress:	
Round 1 Progress Update:	
Round 1 Achievement Value:	0%
Round 1 HHSC Signoff:	
Round 1 HHSC Comments:	
Current Reporting Values	Metric P-101.1
Achieved by Sept. 30?	<input type="text" value=""/>
Numeric/Percentage Goal Progress:	<input type="text" value=""/> (Enter numbers only, %, commas or \$)
Goal Calculation (if applicable):	<div style="background-color: yellow; height: 20px; width: 100%;"></div>
Progress Update:	<div style="background-color: yellow; height: 20px; width: 100%;"></div>
Supporting Attachments:	<input type="button" value="Upload"/>
Achievement Value:	0%
Payment(s)	Metric P-101.1
Est. Round 1 Reporting Payment:	\$0
Est. Current Reporting Payment:	\$0
Carry-forward Questions	Metric P-101.1
If applicable, please explain why your achievement is less than expected.	<div style="background-color: yellow; height: 20px; width: 100%;"></div>
Do you want to carry this metric into the next demonstration year?	<input type="radio"/> Yes <input type="radio"/> No
What is your plan to improve performance by the end of the following DY?	<div style="background-color: yellow; height: 20px; width: 100%;"></div>

Step 2: Enter and Save Individual Project Reports, 4

- Baseline and Period.
- Numeric/Percentage Goal Progress
 - Numeric Goals should report a number
 - Example: A project with a metric goal of 8413 would report 7151, not .85 or 85(%)
 - Percentage Goals should report a percent related to the goal
 - Example: A project with a metric goal of .66 (66%) would report .66, not 1 or 100(%)
- Goal Calculation
 - Provider should include the actual numbers used to calculate a percentage goal

Baseline and Period:	Baseline: 0, No faculty were trained in CS&E. Period: DY2 (10/01/12 - 9/31/13)
-----------------------------	---

Numeric/Percentage Goal Progress:	7151
--	------

Numeric/Percentage Goal Progress:	0.66
--	------

Goal Calculation (if applicable):	7 clinics recognized/total 11 clinics = 64%
--	---

Step 3: Enter and Save Individual Project Reports, 5

- Click on **Upload** button to upload supporting attachments for each metric.
- There is a 50 MB size limit per file.
- Acceptable files include PDFs, MS Word, MS Excel, MS PowerPoint and zip files.
- **Note:** Supporting attachments cannot be edited or deleted after they are uploaded. However, you can save over documents by uploading a revised document with the same name.

Instructions	IGT Info	Project Summary	Category 1 Milestone P-4	Category 1 Milestone P-101	Category 1 Milestone P-9
Milestone: P-101					
Custom Description: Utilization of appropriate crisis alternatives					
Milestone Value: \$1,422,494					
Estimated DY4 Payment: <input type="text" value="50"/>					
Metric Details			Metric P-101.1		
Metric Description:					
Custom Metric Description:			Establish a baseline for specialty clinic volume ? number of visits.		
Goal/Baseline:			Establish a baseline for specialty clinic volume. Estimated at 1500 clinic visits per year across all coverage locations. 1500 encounters.		
Data Source:					
Custom Data Source:					
Goal Type:			Numeric		
Numeric Goal:			1500		
QPI:			Y		
Medicaid/Low-Income Uninsured:			N		
Baseline and Period:			<input type="text"/>		
Round 1 Values			Metric P-101.1		
Round 1 Achieved?					
Round 1 Goal Progress:					
Round 1 Progress Update:					
Round 1 Achievement Value:			0%		
Round 1 HHSC Signoff:					
Round 1 HHSC Comments:					
Current Reporting Values			Metric P-101.1		
Achieved by Sept. 30?			<input type="text"/>		
Numeric/Percentage Goal Progress:			<input type="text"/> (enter numbers only, no %, commas or \$)		
Goal Calculation (if applicable):			<input type="text"/>		
Progress Update:			<input type="text"/>		
Supporting Attachments:			<input type="button" value="Upload"/>		
Achievement Value:			0%		
Payment(s)			Metric P-101.1		
Est. Round 1 Reporting Payment:			50		
Est. Current Reporting Payment:			50		
Carry-forward Questions			Metric P-101.1		
If applicable, please explain why your achievement is less than expected.			<input type="text"/>		
Do you want to carry this metric into the next demonstration year?			<input type="radio"/> Yes <input type="radio"/> No		
What is your plan to improve performance by the end of the following DY?			<input type="text"/>		

Supporting Attachments:

Upload

Step 3: Enter and Save Individual Project Reports, 6

- Upload the **Project Coversheet** as one of the attachments under the first milestone and metric for which you are reporting “Yes-Completed.”
- If reporting achievement of a QPI metric, and the project has more than one QPI metric, upload the **QPI Reporting Template** under the first QPI metric for which you are reporting “Yes-Completed.”

Instructions	IGT Info	Project Summary	Category 1 Milestone P-4	Category 1 Milestone P-101	Category 1 Milestone P-9
Milestone: P-101					
Custom Description: Utilization of appropriate crisis alternatives					
Milestone Value: \$1,422,494					
Estimated DY4 Payment: <input type="text" value="50"/>					
Metric Details			Metric P-101.1		
Metric Description:					
Custom Metric Description: Establish a baseline for specialty clinic volume ? number of visits.					
Goal/Baseline: Establish a baseline for specialty clinic volume. Estimated at 1500 clinic visits per year across all coverage locations. 1500 encounters.					
Data Source:					
Custom Data Source:					
Goal Type: Numeric					
Numeric Goal: 1500					
QPI: Y					
Medicaid/Low-Income Uninsured: N					
Baseline and Period: <input type="text"/>					
Round 1 Values			Metric P-101.1		
Round 1 Achieved?					
Round 1 Goal Progress:					
Round 1 Progress Update:					
Round 1 Achievement Value: 0%					
Round 1 HHSC Signoff:					
Round 1 HHSC Comments:					
Current Reporting Values			Metric P-101.1		
Achieved by Sept. 30? <input type="text"/>					
Numeric/Percentage Goal Progress: <input type="text"/> (enter numbers only, no %, commas or \$)					
Goal Calculation (if applicable): <input type="text"/>					
Progress Update: <input type="text"/>					
Supporting Attachments: <input type="button" value="Upload"/> 					
Achievement Value: 0%					
Payment(s)			Metric P-101.1		
Est. Round 1 Reporting Payment: 50					
Est. Current Reporting Payment: 50					
Carry-forward Questions			Metric P-101.1		
If applicable, please explain why your achievement is less than expected. <input type="text"/>					
Do you want to carry this metric into the next demonstration year? <input type="radio"/> Yes <input type="radio"/> No					
What is your plan to improve performance by the end of the following DY? <input type="text"/>					

Supporting Attachments:

Step 3: Enter and Save Individual Project Reports, 7

Click on **Choose File** to select document from your computer to upload.

- Please do not use symbols (e.g., @, #, %, &, etc.) when naming documents. These symbols create errors when HHSC reviewers are trying to access the files on the reporting tool and slow down the review process.
- Documentation cannot be deleted for tracking purposes, but if an uploaded document is not the final version or contains PHI, it can be replaced by uploading a file with the same name.



Step 3: Enter and Save Individual Project Reports, 8

- After uploading a file, you will receive a confirmation message.



- You will be able to **View** uploaded documents **after clicking on "Save."**



Step 3: Enter and Save Individual Project Reports, 9

- Save Project Reports
 - Click **Save** at any time.
 - **IMPORTANT: Be sure to Save before navigating away from the Project Details page or logging out.**
 - **NOTE: The system will logout if idle for 20 minutes. If a user does not save prior to being logged out, any unsaved data will be lost.**



The screenshot displays the 'Project Reporting' interface. At the top, there is a 'Project Reporting' tab. Below it, the 'Project ID' is [137265806.1.1](#) and the 'Provider' is [Seton Healthcare dba University Medical Center at](#). The 'RHP' is 7. The 'Project Area' is '1.13 - Development of behavioral health crisis stabilization services as alternatives to hospitalization.' and the 'Project Option' is '1.13.1 - Develop and implement crisis stabilization services to address the identified gaps in the current community crisis system'. A large black button with a yellow 'Save' label and the text 'DY4 Round 2' is prominently displayed. An orange arrow points to the 'Save' button. Below the main content area, there is a navigation bar with several buttons: 'Instructions', 'IGT Info', 'Project Summary', 'Category 1 Milestone P-4', 'Category 1 Milestone P-9', 'Category 1 Milestone I-102', 'Category 3 137265806.3.4 IT-9.6', 'Category 3 137265806.3.204 IT-9.10.a', and 'Category 3 137265806.3.205 IT-9.10.c'.

Step 3: Enter and Save Individual Project Reports, 10

- Save Project Reports

- After saving, if report is not complete, elements that still need responses will be listed.
- Also after saving, documents that have been uploaded will be available by clicking on **View** on the Supporting Attachments row.

Project Reporting

Thank you. Your report has been saved but is not complete and can not be submitted.

The following input fields are missing:

- Project Summary - Accomplishments
- Project Summary - Challenges
- Project Summary - Lessons Learned
- Project Summary - Improvement Activities
- Project Summary - Patient Impact
- Project Summary - Progress
- Project Summary - Other Federal Funding

Supporting Attachments:	Upload	View
ment(s)		
and 1 Reporting Payment:	50	
urrent Reporting Payment:	50	
ard Questions		
, please explain why your ment is less than expected.	N/A	
y this metric into the next demonstration year?	N/A	
o improve performance by end of the following DY?	N/A	



Document List

[RHP03_133355104.2.1_OPI.xlsx](#) Uploaded: 04/28/2015

Close

Step 3: Enter and Save Individual Project Reports, 11

When the report is complete for a given project, the user sees this message after saving: **“Thank you. Your report has been saved and is ready to submit.”**

Click on **HOME** to return to the Provider Details page and continue until reports have been entered and saved for all projects.

Project Reporting

Thank you. Your report has been saved and is ready to submit.

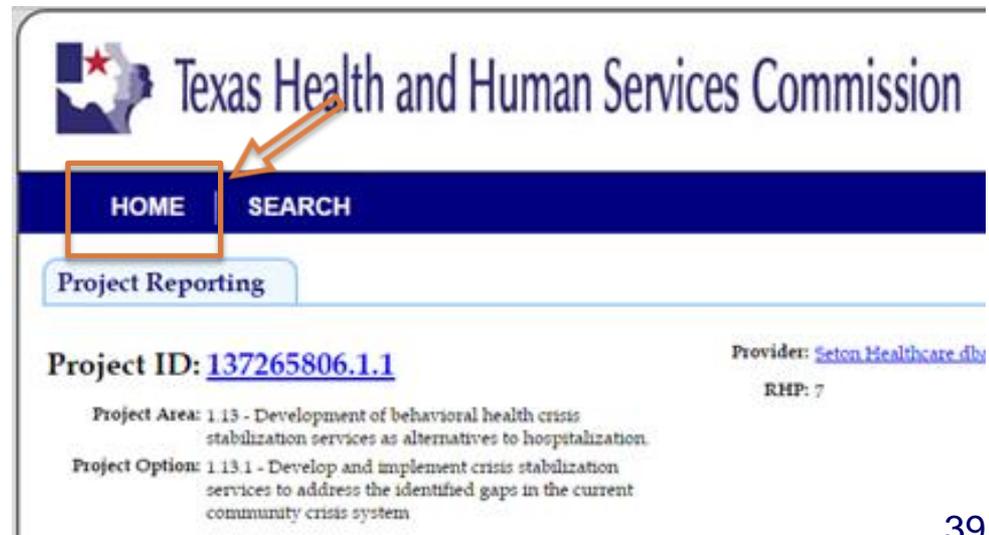
Project ID: [137265806.1.1](#)

Provider: [Seton](#)

RHP: 7

Project Area: 1.13 - Development of behavioral health crisis stabilization services as alternatives to hospitalization.

Project Option: 1.13.1 - Develop and implement crisis stabilization services to address the identified gaps in the current community crisis system



 **Texas Health and Human Services Commission**

HOME **SEARCH**

Project Reporting

Project ID: [137265806.1.1](#)

Provider: [Seton Healthcare db](#)
RHP: 7

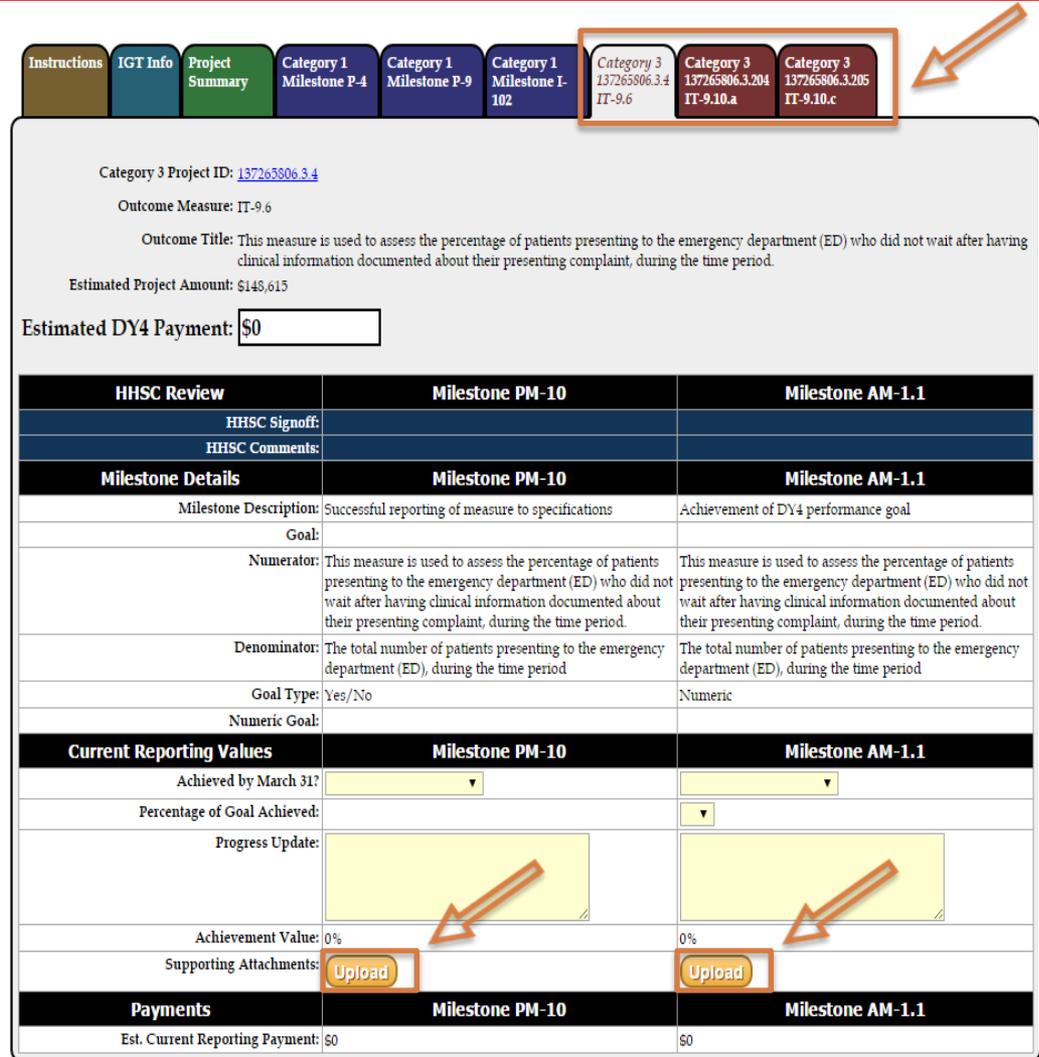
Project Area: 1.13 - Development of behavioral health crisis stabilization services as alternatives to hospitalization.

Project Option: 1.13.1 - Develop and implement crisis stabilization services to address the identified gaps in the current community crisis system

Project Reporting for Category 3

Project Reporting for Category 3

- Click on the Category 3 ID listed on the Provider Details page.
- Category 3 projects appear as tabs on the Project Reporting page for the affiliated Category 1 or 2 project.
- Enter information in required fields.



Instructions IGT Info Project Summary Category 1 Milestone P-4 Category 1 Milestone P-9 Category 1 Milestone I-102 **Category 3 137263806.3.4 IT-9.6** Category 3 137263806.3.204 IT-9.10.a Category 3 137263806.3.205 IT-9.10.c

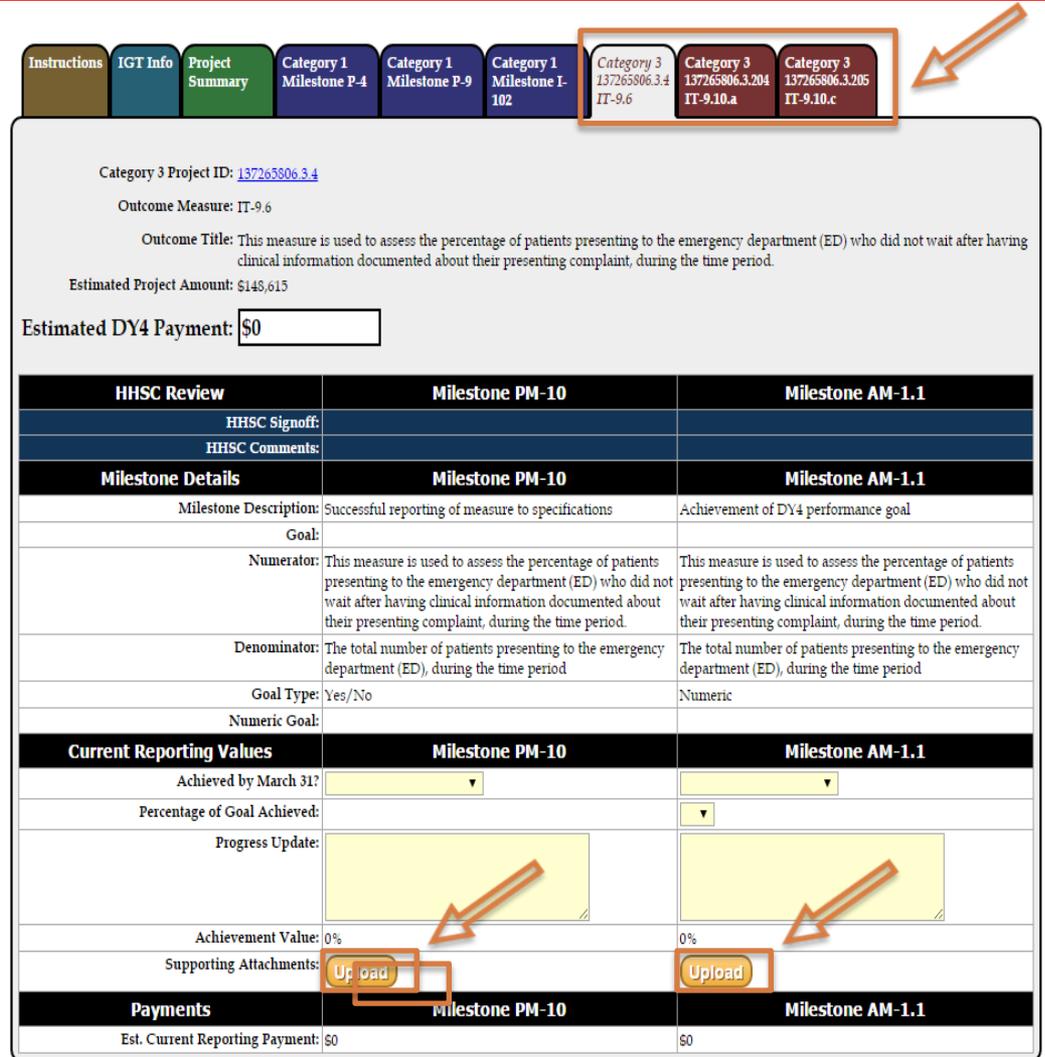
Category 3 Project ID: [137263806.3.4](#)
Outcome Measure: IT-9.6
Outcome Title: This measure is used to assess the percentage of patients presenting to the emergency department (ED) who did not wait after having clinical information documented about their presenting complaint, during the time period.
Estimated Project Amount: \$148,615
Estimated DY4 Payment:

HHSC Review	Milestone PM-10	Milestone AM-1.1
HHSC Signoff:		
HHSC Comments:		
Milestone Details	Milestone PM-10	Milestone AM-1.1
Milestone Description:	Successful reporting of measure to specifications	Achievement of DY4 performance goal
Goal:		
Numerator:	This measure is used to assess the percentage of patients presenting to the emergency department (ED) who did not wait after having clinical information documented about their presenting complaint, during the time period.	This measure is used to assess the percentage of patients presenting to the emergency department (ED) who did not wait after having clinical information documented about their presenting complaint, during the time period.
Denominator:	The total number of patients presenting to the emergency department (ED), during the time period	The total number of patients presenting to the emergency department (ED), during the time period
Goal Type:	Yes/No	Numeric
Numeric Goal:		
Current Reporting Values	Milestone PM-10	Milestone AM-1.1
Achieved by March 31:	<input type="text" value="0%"/>	<input type="text" value="0%"/>
Percentage of Goal Achieved:	<input type="text" value="0%"/>	<input type="text" value="0%"/>
Progress Update:	<input type="text" value="0%"/>	<input type="text" value="0%"/>
Achievement Value:	0%	0%
Supporting Attachments:	<input type="button" value="Upload"/>	<input type="button" value="Upload"/>
Payments	Milestone PM-10	Milestone AM-1.1
Est. Current Reporting Payment:	\$0	\$0

Project Reporting for Category 3...2

- Upload the appropriate Category 3 Template and **Save**.
- Upload template only once, to the first Cat. 3 outcome associated with the first Cat. 1-2 project. For other Cat. 3 outcomes, indicate in Progress Update field where template was uploaded.

Note: For AM milestones, please make sure the Percentage of Goal Achieved selected in the reporting system matches the Category 3 October DY4 Reporting Template.



Instructions IGT Info **Project Summary** Category 1 Milestone P-4 Category 1 Milestone P-9 Category 1 Milestone I-102 **Category 3 137265806.3.4 IT-9.6** Category 3 137265806.3.204 IT-9.10.a Category 3 137265806.3.205 IT-9.10.c

Category 3 Project ID: [137265806.3.4](#)
Outcome Measure: IT-9.6
Outcome Title: This measure is used to assess the percentage of patients presenting to the emergency department (ED) who did not wait after having clinical information documented about their presenting complaint, during the time period.
Estimated Project Amount: \$148,615
Estimated DY4 Payment:

HHSC Review	Milestone PM-10	Milestone AM-1.1
HHSC Signoff:		
HHSC Comments:		
Milestone Details	Milestone PM-10	Milestone AM-1.1
Milestone Description:	Successful reporting of measure to specifications	Achievement of DY4 performance goal
Goal:		
Numerator:	This measure is used to assess the percentage of patients presenting to the emergency department (ED) who did not wait after having clinical information documented about their presenting complaint, during the time period.	This measure is used to assess the percentage of patients presenting to the emergency department (ED) who did not wait after having clinical information documented about their presenting complaint, during the time period.
Denominator:	The total number of patients presenting to the emergency department (ED), during the time period	The total number of patients presenting to the emergency department (ED), during the time period
Goal Type:	Yes/No	Numeric
Numeric Goal:		
Current Reporting Values	Milestone PM-10	Milestone AM-1.1
Achieved by March 31:	<input type="text" value="0%"/>	<input type="text" value="0%"/>
Percentage of Goal Achieved:	<input type="text" value="0%"/>	<input type="text" value="0%"/>
Progress Update:	<input type="text" value=""/>	<input type="text" value=""/>
Achievement Value:	0%	0%
Supporting Attachments:	<input type="button" value="Upload"/>	<input type="button" value="Upload"/>
Payments	Milestone PM-10	Milestone AM-1.1
Est. Current Reporting Payment:	\$0	\$0

Project Reporting for Category 4

Project Reporting for Category 4

- Click on the Category 4 ID listed on the Provider Details page with Category 1 and 2 projects.
- On the Category 4 Project Details page, Click on **Round 2**.
- Click on the tab for **Round 2 Reporting** the Category 4 Project Reporting page.

Project Reporting

Project ID: [137265806.4](#)

Save DY4 Round 2

Instructions IGT Info Round 1 Reporting **Round 2 Reporting**

IGT Info Tab

1. This tab lists the IGT entities that have committed IGT funds to the project, along with their funding percentages.
2. If you have changes to IGT entities or funding percentages among IGT entities, please complete the IGT Entity Change Form available on the [Texas Healthcare Transformation Waiver website](#), and submit the form by the end of the semi-annual reporting period to TXHealthcareTransformation@hhsc.state.tx.us

Project Reporting for Category 4...2

- Enter **Yes** or **No** in the Submitted column to indicate which RDs are being reported in October DY4.
- Upload the Category 4 template. Because the Category 4 template includes all reporting domains, **it needs to be uploaded only once**, with the first reported domain.
- When finished, click on **Save**.

Project Reporting

Project ID: [137265806.4](#)

Save DY4 Round 2

Instructions IGT Info Round 1 Reporting Round 2 Reporting

Reporting Domain	Submitted	Pmnt	Attachments
RD1 - Potentially Preventable Admissions	Yes ▼	\$852,888	Upload View
RD2 - 30-day Readmissions	Yes ▼	\$852,888	Upload
RD3 - Potentially Preventable Complications	Yes ▼	\$852,888	Upload
RD4 - Patient Centered Healthcare	Yes ▼	\$852,888	Upload
RD5 - Emergency Department Measures	▼	\$852,888	Upload

Step 3:

Confirm that Reporting Is Complete

Step 3: Confirm that Reporting Is Complete

To check reporting status, click on **Home** to return to **Provider Details**, and then click on **Reporting Status** tab.



Texas Health and Human Services Commission

User: aquinn
Role: HHSC Reviewer
[Log Out](#)

HOME | SEARCH | USERS AND ROLES | REPORTS

Provider Details

Seton Healthcare dba University Medical Center at
RHPs: [7](#) TPI: 137265806
Ownership: Non-State Owned Public TIN: 17411096435000

Contacts

- Lydia Long ldlong@seton.org
- Shelley Saucis ssaucis@seton.org
- Christine Jesser cjesser@seton.org

DY2 | DY3 | **DY4** | DY5

RHP: 7 **Provider Summary Rd 1** **Provider Summary Rd 2**

Project Summaries **Reporting Status**

137265806.1.1 RHP: 7		
DY4	Paid Amt	\$2,909,497 (Remaining: \$1,496,779)
	Achieved Amt	\$2,990,851 (86.67%)
	Project Max Amt	\$4,486,276
DY3	Paid Amt	\$4,267,482 (Remaining: \$0)
	Achieved Amt	\$4,267,482 (100%)
	Project Max Amt	\$4,267,482

Step 3: Confirm that Reporting Is Complete, 2

View status of reports for Provider Summary and for each project.

Note: Statuses for Cat. 1-2 projects and their associated Cat. 3 projects are linked. The status will not update until all tabs on the Project Reporting page are completed (Cat. 1 or 2 milestone tabs and Cat. 3 tabs).

Provider Summary Status		
RHP Number	Round 1	Round 2
7	HHSC Review Complete	Report Submitted

Project Status			
RHP Number	Project	Round 1	Round 2
7	137265806.1.1	HHSC Review Complete	Ready to Submit
7	137265806.1.2	HHSC Review Complete	Ready to Submit
7	137265806.1.3	HHSC Review Complete	Ready to Submit
7	137265806.1.4	HHSC Review Complete	Ready to Submit
7	137265806.1.5	HHSC Review Complete	Ready to Submit

IMPORTANT: Provider Summary Status and Project Status should be either:

1. Report Submitted (Report has been submitted by Lead Provider. No further editing allowed.)

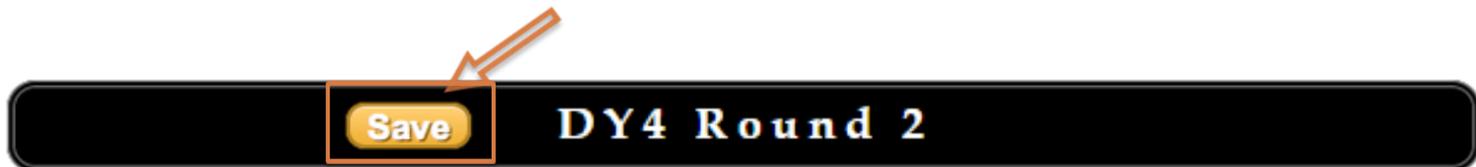
or

2. Ready to Submit (Report has been saved and is complete.)

Optional for Lead Providers: “SUBMIT” Project Reports To Prevent Further Editing

Optional for Lead Providers: Submit Reports

- Saving the Reports
 - Providers may **Save** and edit the Provider Summary, Project Summary, Cat. 1-3 Milestone/Metric Reports, and Cat. 4 Reporting Domain data entry fields throughout the DY4 Round 2 reporting period (October 1-31).
 - **Note:** Supporting attachments may not be edited or removed once they are uploaded. However, they may be saved over with a revised document with the same name.
 - As long as the completed reports and supporting attachments have been **Saved** by the reporting deadline, they will be considered officially submitted.



Optional for Lead Providers: Submit Reports, 2

- Users designated as “Lead Providers” also have “Submit” buttons.
- The purpose of the Submit button is to give Lead Providers the opportunity to be the last person to review a report before submission.
- **IMPORTANT: Once a Lead Provider clicks on “Submit,” editing data entry fields is no longer possible.**
- As long as the completed reports and supporting attachments have been **Saved** by the reporting deadline, they will be considered officially submitted.



Recap: Steps to Online Reporting

1. Enter and Save Provider Summary
2. Enter and Save Individual Project Reports
3. Confirm That Reporting Is Complete

Optional for Lead Providers: “Submit” project reports to prevent further editing

Reminder: Reporting Templates to Upload

- Coversheet for each Cat. 1-2 project
 - Upload under project's first milestone/metric reporting "Yes-Completed."
- QPI Reporting Template
 - Upload under project's first QPI metric reporting achievement. Required for all DY4 QPI metrics.
- Cat. 3: DY3 Status Report Template
 - Upload under PM-8 if status reporting was carried forward from DY3.

Reminder: Reporting Templates to Upload

- **Cat. 3: October DY4 Reporting Template (Combined Baseline & Performance Reporting Template)**
 - For reporting of PM-9, PM-10, AM-1.x, and PM-12.
 - Upload under the first Cat. 3 outcome associated with the first Cat. 1-2 project in the online reporting system. Reference the location in the Progress Update field for other Cat. 3 projects.
- **Category 4 Reporting Template**
 - Upload only once under first submitted reporting domain.

Multiple Users

- Multiple users for the same provider can login at the same time.
- This allows multiple project managers to enter information for their individual projects simultaneously.
- **CAUTION:** Only one user at a time should enter and save data on the Provider Summary page or an individual project reporting page. (These pages have their own “Save” buttons.)
- If multiple users are entering data at the same time on the same Provider Summary or the same project, the one who saves last will “win.”
- HHSC recommends that providers use internal processes to assign specific users to enter and save 1) the Provider Summary and 2) specific project reports.

Reporting Deadline

Reporting Deadline

- Reports and supporting documentation must be saved or submitted no later than **11:59 p.m. on October 31, 2015.**
- Please allow sufficient time to upload supporting attachments.

Additional Reporting Resources

Additional Reporting Resources

- **User Guide: DSRIP Online Reporting System**
 - Please consult the User Guide for more a detailed walkthrough of the online reporting process and other helpful information.
- **Previous Reporting Webinars**
 - For a live demonstration of the DSRIP Online Reporting system please refer to the October DY3 General Reporting Webinar.
 - Previous webinars can be found here:
<http://www.hhsc.state.tx.us/1115-webinar-archive.shtml>

HELP MAILBOX

TXHealthcareTransformation@hhsc.state.tx.us