Texas Health and Human Services Commission

USER GUIDE

DSRIP Online Reporting System

Updated September 2016

Table of Contents

User Login

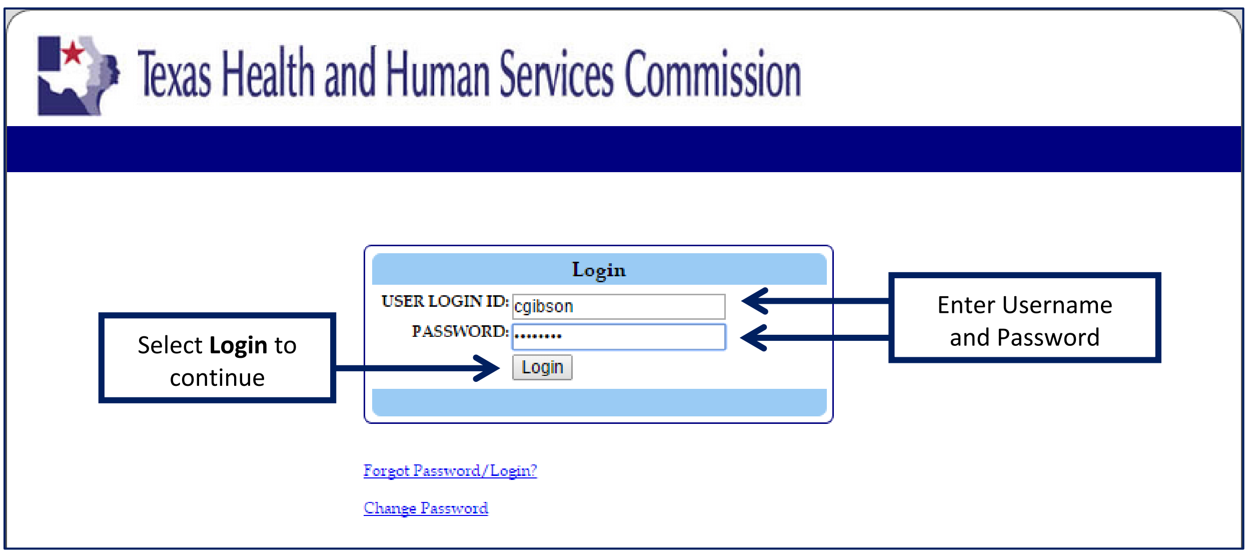
New Users

To add a new user, a provider contact should submit an **RHP Contact Change Form**, which can be found here: https://hhs.texas.gov/sites/hhs/files/documents/laws-regulations/policies-rules/1115-docs/RHP/Plans/Contact-Change.pdf, to the HHSC Transformation Waiver mailbox at TXHealthcareTransformation@hhsc.state.tx.us. Once HHSC staff registers the new user, they will receive two automated "Welcome to DSRIP" emails containing their login credentials and a link to the DSRIP Online Reporting System site.

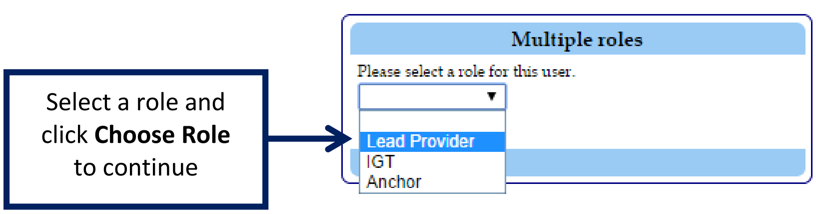
Logging In

Step 1: After receiving your login credentials via the automated "Welcome to DSRIP" emails, navigate to the DSRIP Online Reporting System by clicking on the provided link: https://dsrip.hhsc.texas.gov/dsrip/login.

Step 2: Enter your User Login ID and Password and click **LOGIN**.

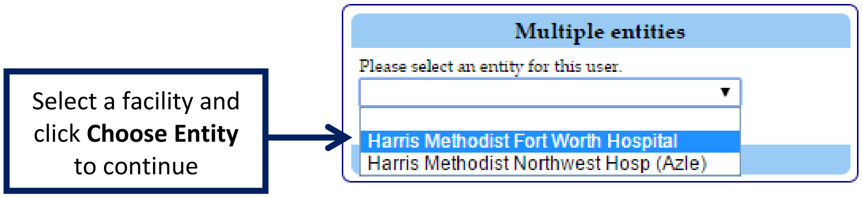


Step 3: If you have more than one role in the DSRIP program (e.g., Anchor and Provider), please select the role which you will be accessing the site as and click **CHOOSE ROLE**.



Note:	Some activities are restricted to certain roles which you will only be able to perform when logged in as that role. To change your role, you will need to log out of your current session, re-enter your user login information, and select a different role.

Step 4: If you are affiliated with more than one entity, you will also be prompted to select a facility when you log in. Once you make your selection, please click **CHOOSE ENTITY**.

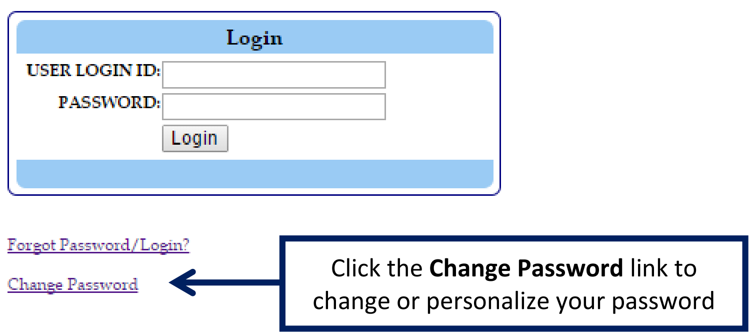


Step 5: You will be presented with a DSRIP homepage which reflects your chosen role and facility. The main navigation menu includes HOME and SEARCH functions. The user's role will appear in the top right corner. More details on DSRIP homepages can be found on pages 6-8.

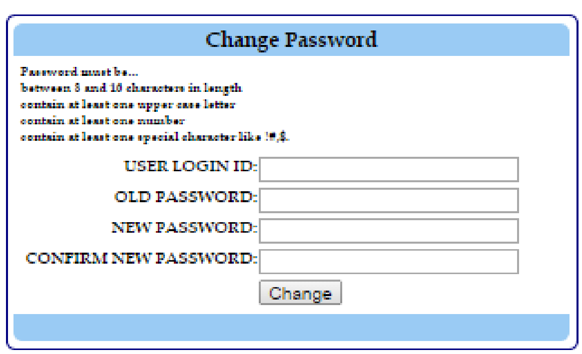
Note: A user may try and log into the system with the temporary password, but it is important to note that the temporary password will expire after two days and the user can no longer use it to log into the system. However, the temporary password should still be useable in the **Change Password** process.

Changing Your Password

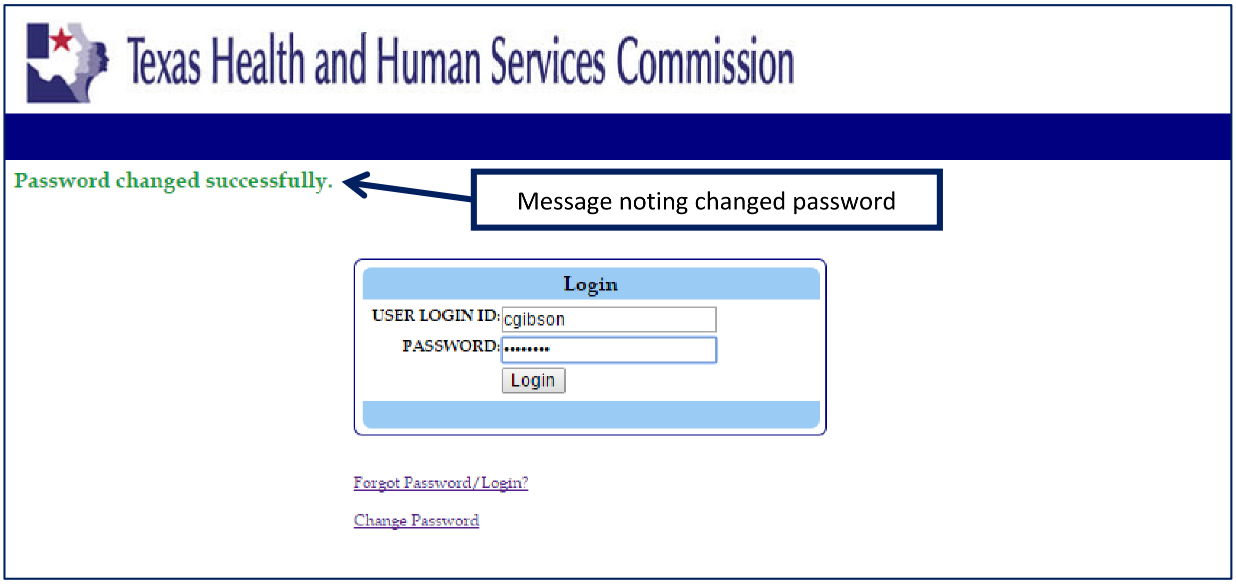
Step 1: On the DSRIP Online Reporting System login screen, click the **CHANGE PASSWORD** link.



Step 2: Enter your Username, your temporary password (Old Password), and then your personalized password (New Password) twice. Click **CHANGE**.

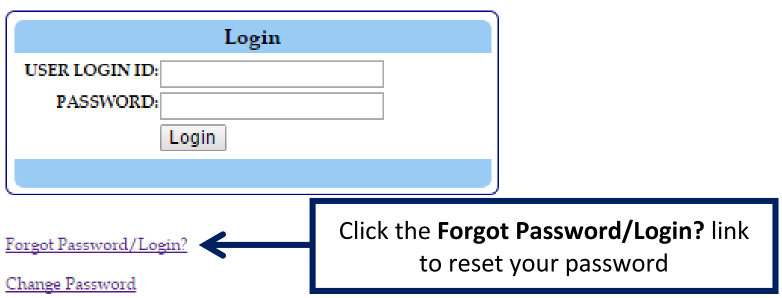


Step 3: You will not receive an email containing your updated password. A message in green text should appear at the top of the page noting the "Password changed successfully." You should be able to use the new password to log in as soon as you see this message.

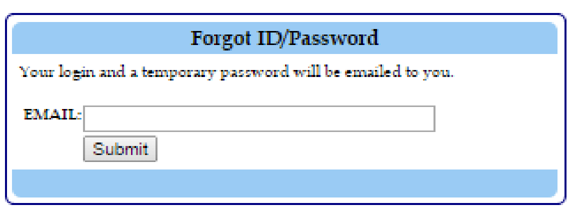


Resetting Your Password

Step 1: On the DSRIP Online Reporting System login screen, click the **FORGOT PASSWORD/LOGIN?** link.



Step 2: Enter your registered email address and click **SUBMIT**.



Step 3: You should receive an automated email containing a new temporary password shortly after you submit your email address. You would then use this "old password" to create a new personalized password in the **Change Password** process.

Note: Temporary passwords are case sensitive and it may be easiest to copy/paste them into the appropriate field. When using this method, please be mindful of extra spaces that may tag along and invalidate the password.

Locked Account

If your account has been locked due to too many login attempts, please notify the HHSC Transformation Waiver team at TXHealthcareTransformation@hhsc.state.tx.us. Please note that there is a limit of **seven** login attempts, so if you have failed to login six times, you may want to reset your password through the **FORGOT PASSWORD/LOGIN?** link.

Removing Users

An organization's lead contacts should notify the HHSC Transformation Waiver team if they need to remove access for staff members who are no longer with their organization. This can be requested through email or by submitting an RHP Contact Change Form if there are more changes to be made (e.g., the contact is being replaced). HHSC will then deactivate their account so they no longer will have access to the reporting tool.

DSRIP Homepages

As a reminder, a user will have different access to information and activities based on which role they are logged in as. For those users with multiple roles, please remember to select the role for the activity you plan on performing.

- **Anchor.** A user designated as an Anchor can view all of the project reporting pages for their region, but cannot edit and upload information to their providers' reporting pages.
- **Provider.** A user designated as a Provider may edit and upload information on their project reporting pages during the reporting rounds.
- **IGT Entity.** A user designated as an IGT Entity may review the project reporting pages for all providers that they are affiliated with. They also have the option to leave comments about a project's achievement of milestones/metrics at the end of a reporting round.

Please email the HHSC Transformation Waiver mailbox if you require a certain role added to your user profile.

Note: The provider information currently in the DSRIP Online Reporting System is what HHSC has on file from HHSC Rate Analysis' Affiliation file and the Comptroller system. If a provider needs to make a change to their **name, TPI, or TIN** they will need to complete the 74-176 form which can be found here: http://www.window.state.tx.us/taxinfo/taxforms/74-176.pdf. Please submit completed 74-176 forms to HHSC Rate Analysis at Rate_Analysis_DSRIP_Payments@hhsc.state.tx.us and cc: the HHSC Transformation Waiver team at TXHealthcareTransformation@hhsc.state.tx.us.

Anchor Homepage

Features:

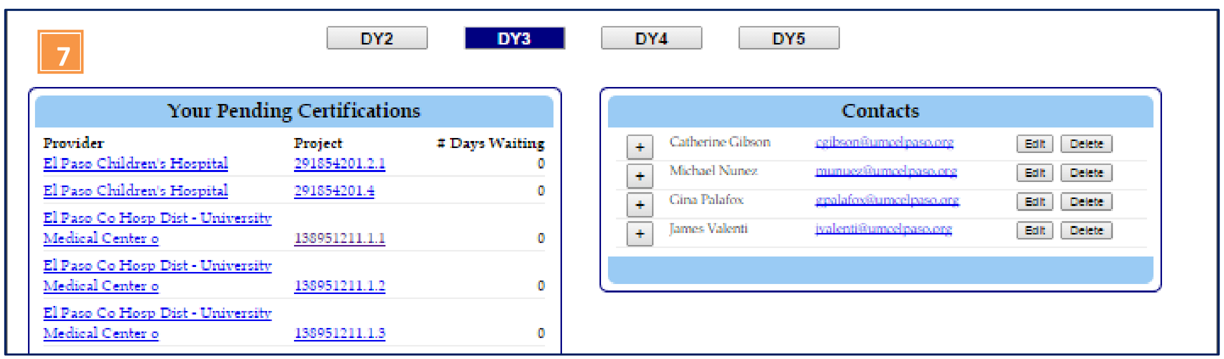
1. Identifies **USER** and **ROLE**
2. Select **LOG OUT** to end your session
3. Select **HOME** on the menu to return to the Anchor Homepage
4. Select **SEARCH** from the main menu to look up the Overview pages for each RHP, Provider, IGT Entity, and Project involved in DSRIP. Please note that the Metric search option is currently unavailable.
5. Select Provider or IGT and click **SEARCH** to sort projects by Provider or IGT entity. The default view is Provider. This allows you to search all of your region's projects by their reporting status throughout demonstration years 2-5. You can also change how you view the RHP projects by Provider or IGT source by using the search function.
6. Select **EDIT** to update your contact information. Anchors can edit their organization's contact information.
7. Click on a **Project ID** to access the Project Details and Project Reporting pages for the selected project. The Anchor can review project reports and documentation through the Project Details page for each of its performing providers. However, Anchors are restricted from making edits to the reports. Any necessary changes need to be coordinated with the provider before the reporting period closes.
8. Select **REPORTS** to access the Create Reports page. Available report(s) can be found on pages 22-25.

Provider Homepage

Features:

1. Identifies **USER** and **ROLE**
2. Select **LOG OUT** to end your session
3. Select **HOME** on the menu to return to the Provider Homepage
4. Select **SEARCH** from the main menu to look up the Overview pages for each RHP, Provider, IGT Entity, and Project involved in DSRIP. Please note that the Metric search option is currently unavailable.
5. Click the **RHP #** to view the Anchor Overview page
6. Select **EDIT** to update your contact information. Providers can edit their organization's contact information.
7. Select a **Provider Summary Round #** to enter or view your provider-level reports.
8. The **Project Summaries** tab gives a brief achievement overview for all of the provider's projects. Please note, for providers who have projects in more than one region, all projects will appear on this tab sorted by region.
9. The **Reporting Status** tab lists the provider's projects and their status during the reporting process. Please note, for providers who have projects in more than one region, all projects will appear on this tab sorted by region.
10. Click on a **Project ID** on either the Project Summaries tab or Reporting Status tab to access the Project Reporting page for the selected project.
11. Select **REPORTS** to access the Create Reports page. Available report(s) can be found on pages 22-25.

IGT Homepage



Features:

1. Identifies **USER** and **ROLE**
2. Select **LOG OUT** to end your session
3. Select **HOME** on the menu to return to the IGT Homepage
4. Select **SEARCH** from the main menu to look up the Overview pages for each RHP, Provider, IGT Entity, and Project involved in DSRIP. Please note that the Metric search option is currently unavailable.
5. Select **EDIT** to update your contact information. IGT entities can edit their organization's contact information since it is not linked to the user database. There is a three person limit for the contact list.
6. Click on a **Project ID** on either the Project Summaries or Reporting Status tabs to access the project reporting page for the selected project.
7. The IGT Homepage will update after the reporting period closes to show the **Pending Certifications** for projects affiliated with the IGT entity. It is during this time that the IGT entity can provide feedback on the accuracy of what was reported on during the reporting period. More information about this process and how to navigate the Project Reporting page can be found on page 18.
8. Select **REPORTS** to access the Create Reports page. Available report(s) can be found on pages 22-25.

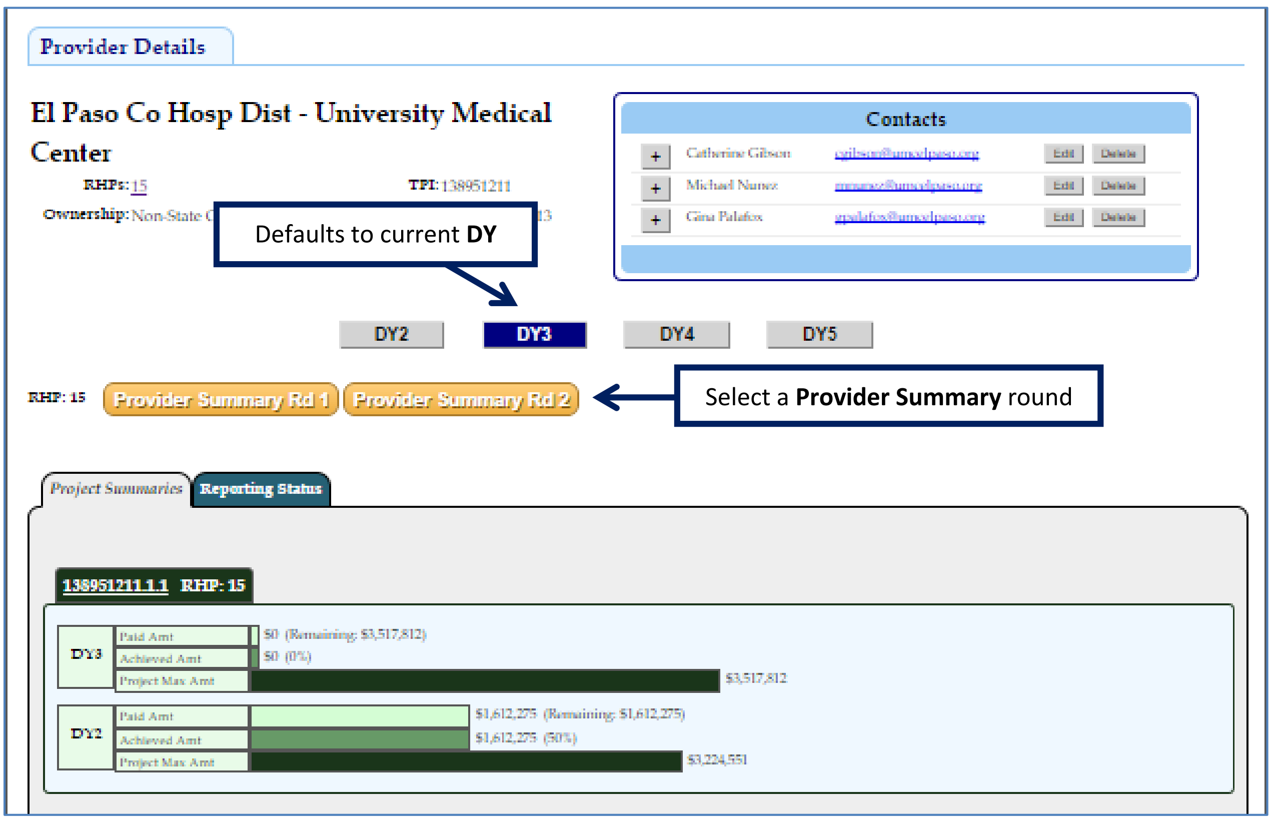
Note:	The **Max IGT** amount (found on the IGT Homepage) is based on the FMAP for Round 2 (FMAP for the next demonstration year) and represents the max amount of IGT that may be required. However, if milestones/metrics are reported and approved in Round 1, the IGT will be calculated based on the FMAP for the current demonstration year. For example, if a metric is reported and approved during October (or Round 2) of DY4, the DY5 FMAP would be applied because the payment is being made in DY5 (January 2016).

DSRIP Reporting Process

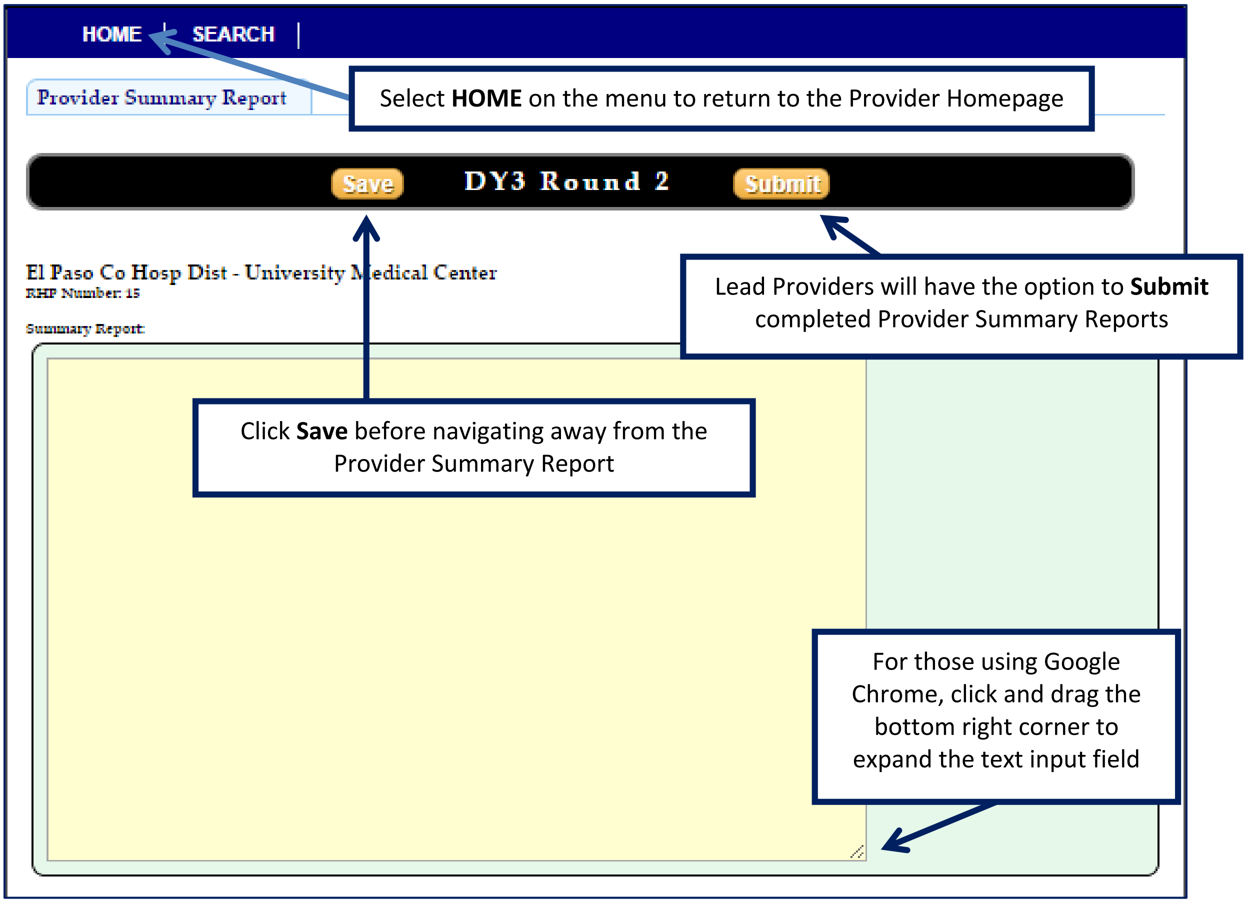
Note:	Organizations must be logged in as the "Provider" or "Lead Provider" role in order to report on their project metrics and complete their required semi-annual reporting fields. Providers can enter information, save, and submit their reports only during the reporting period.

Provider Summary

Step 1: On the **Provider Details** page, click a **Provider Summary** button. (Provider Summary Rd 1 is associated with April reporting and Provider Summary Rd 2 is associated with October reporting.) Providers completing reports in multiple regions will see additional Provider Summary round buttons for each RHP.



Step 2: Complete the **Provider Summary Report** in the yellow text input field provided.



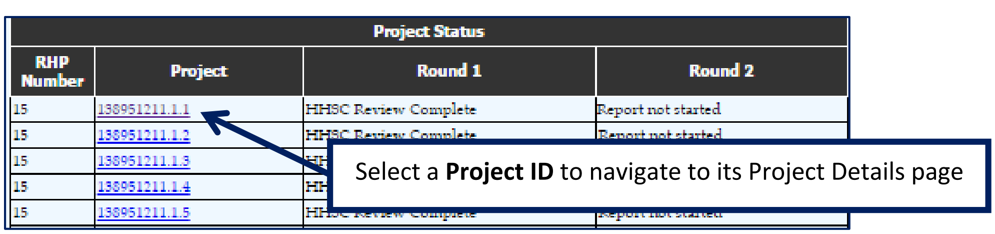
Step 3: Click **SAVE**. To make additional changes once your summary is saved you will need to navigate back to the Provider Homepage to access the Provider Summary page.

Note: As long as the Provider Summary Report has been completed and saved by the reporting deadline, it will be considered officially submitted. Individuals logged in as the "Lead Provider" also have the option to submit the Provider Summary Report by clicking on the Submit button. After the Lead Provider clicks Submit, users will no longer be able to make any changes. This rule applies to all other reporting pages as well.

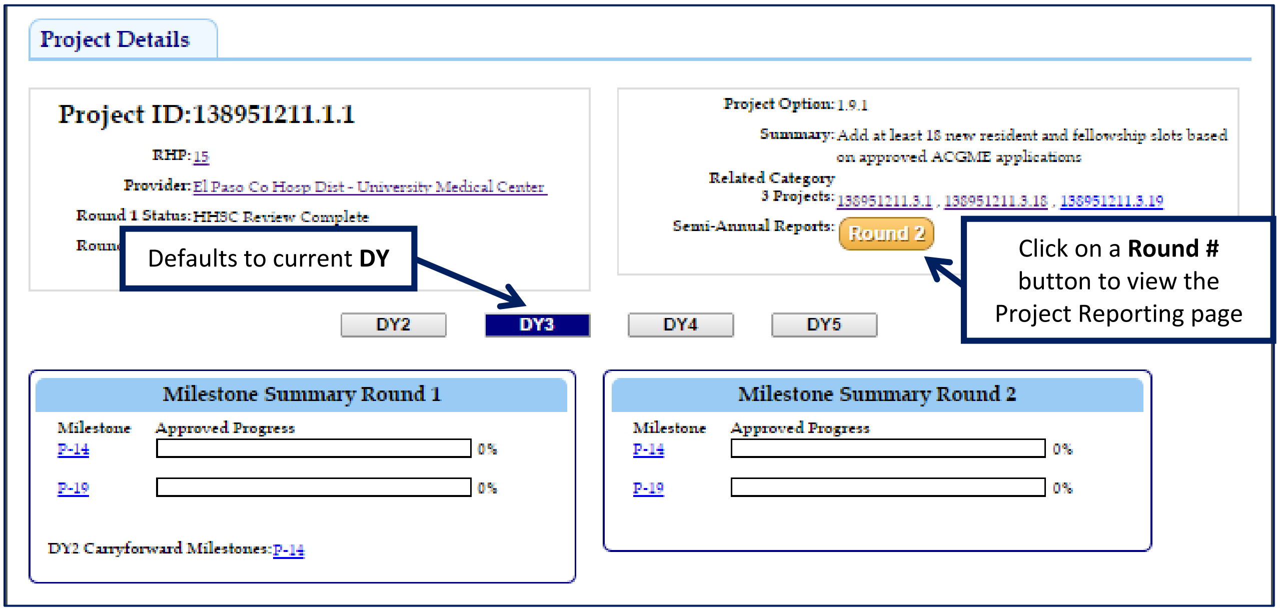
Categories 1-3

Step 1: On the **Provider Details** page, click on the **Reporting Status** tab. This tab will list all active projects and track the status of these projects during the reporting period.

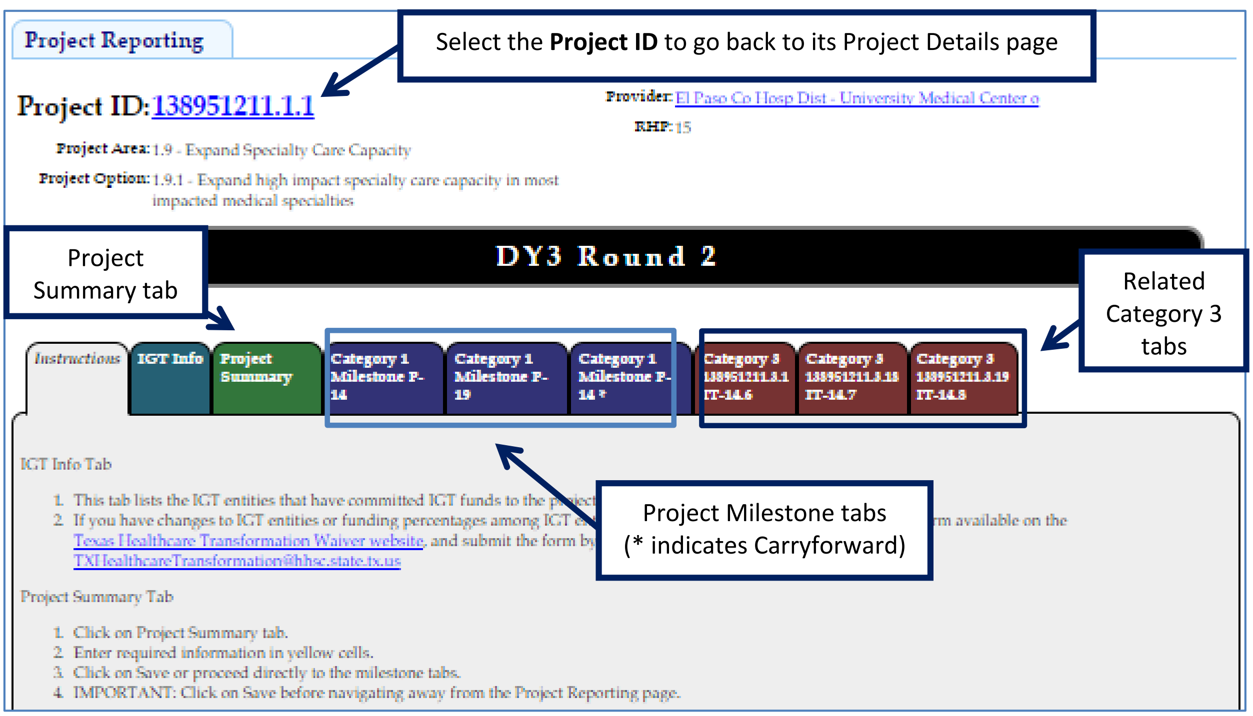
Step 2: Click on a **Project ID** to access its **Project Details** page and start reporting.



Step 3: Click on the yellow **ROUND #** button. For April reporting this will be Round 1 and for October reporting it will be Round 2. The DSRIP Online Reporting System defaults to the current DY.

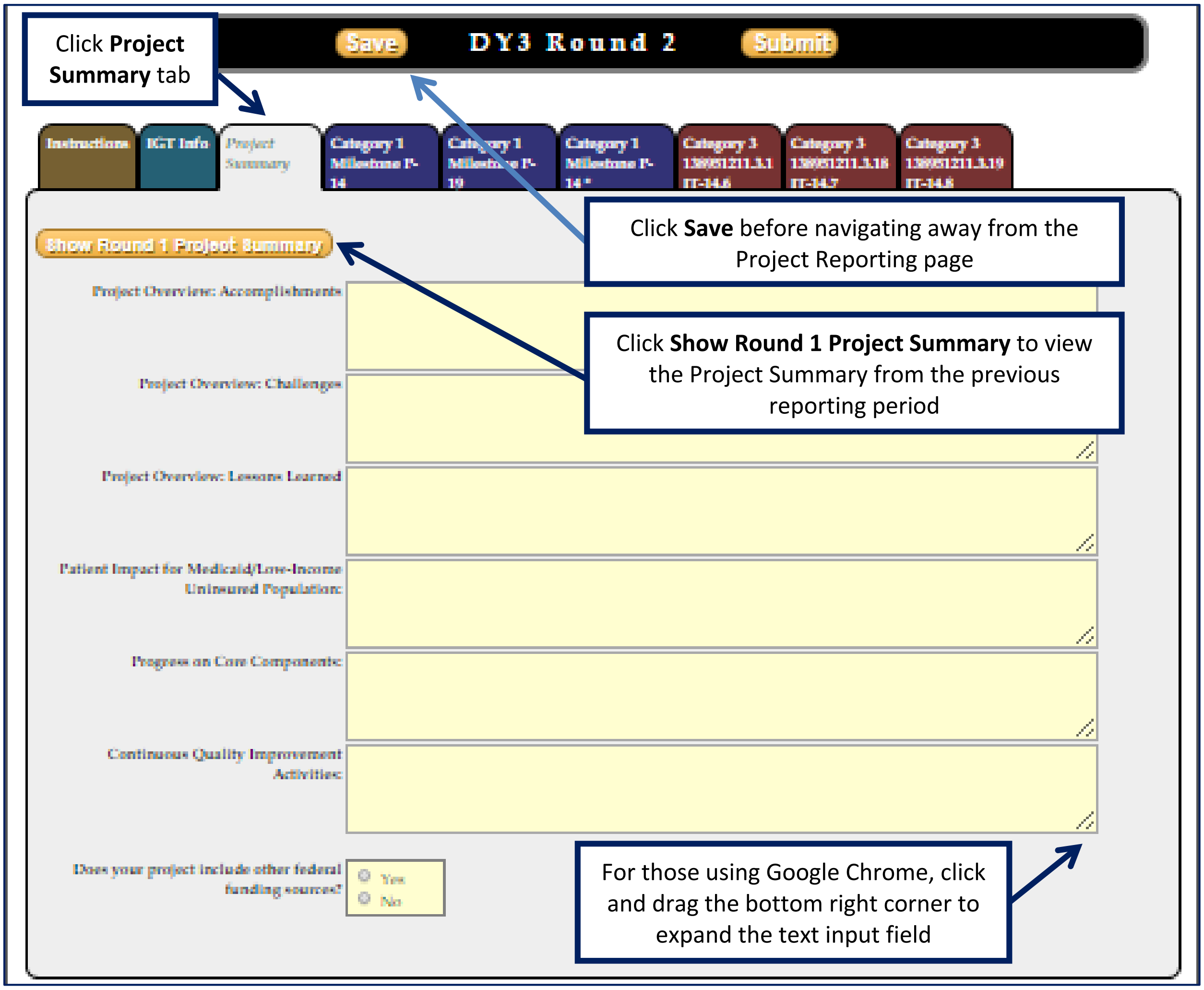


Step 4: This will bring you to the **Project Reporting** page where you will complete the project level reports. This includes the semi-annual reporting fields on the Project Summary tab, project milestones (current and carryforward), and related Category 3 outcomes.

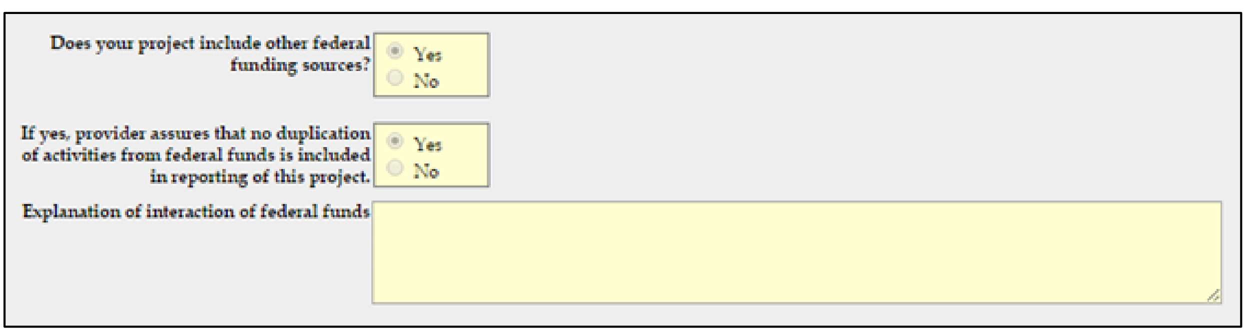


Note: Carryforward milestones are identified with an asterisk (e.g., P-14*), as shown above.

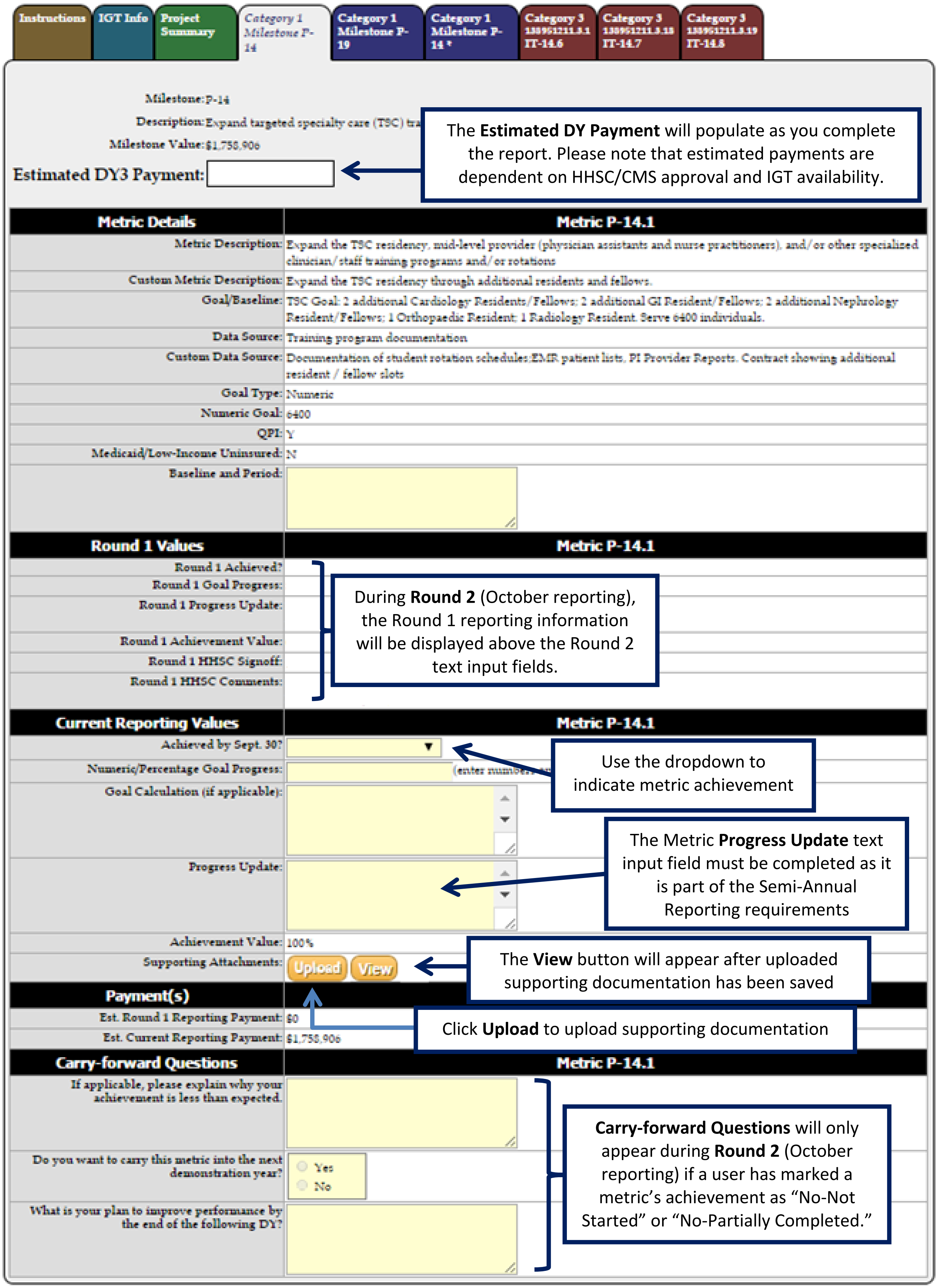
Step 5: Click on the **Project Summary** tab and complete the yellow text input fields. Click **SAVE**.



Note: If you indicate "Yes" on the question "**Does your project include other federal funding sources?**" two additional questions will open up for the user to complete, as shown below.



Step 6: Select each Milestone tab and complete the yellow text input fields for all metrics. Documentation for the appropriate milestone/metric should be uploaded under **Supporting Attachments**. Click **SAVE**.


Instructions
IGT Info
Project Summary
Category 1 Milestone P-14
Category 1 Milestone P-19
Category 1 Milestone P-14 *
Category 3 IT-14.6
Category 3 IT-14.7
Category 3 IT-14.8
Milestone: P-14
Description: Expand targeted specialty care (TSC) tra
Milestone Value: $1,758,906
Estimated DY3 Payment:
The Estimated DY Payment will populate as you complete the report. Please note that estimated payments are dependent on HHSC/CMS approval and IGT availability.
Metric Details
Metric P-14.1
Metric Description: Expand the TSC residency, mid-level provider (physician assistants and nurse practitioners), and/or other specialized clinician/staff training programs and/or rotations
Custom Metric Description: Expand the TSC residency through additional residents and fellows.
Goal/Baseline: TSC Goal: 2 additional Cardiology Residents/Fellows; 2 additional GI Resident/Fellows; 2 additional Nephrology Resident/Fellows; 1 Orthopaedic Resident; 1 Radiology Resident. Serve 6400 individuals.
Data Source: Training program documentation
Custom Data Source: Documentation of student rotation schedules;EMR patient lists, PI Provider Reports. Contract showing additional resident / fellow slots
Goal Type: Numeric
Numeric Goal: 6400
QPI: Y
Medicaid/Low-Income Uninsured: N
Baseline and Period:
Round 1 Values
Metric P-14.1
Round 1 Achieved?
Round 1 Goal Progress:
Round 1 Progress Update:
Round 1 Achievement Value:
Round 1 HHSC Signoff:
Round 1 HHSC Comments:
During Round 2 (October reporting), the Round 1 reporting information will be displayed above the Round 2 text input fields.
Current Reporting Values
Metric P-14.1
Achieved by Sept. 30?
Numeric/Percentage Goal Progress:
Goal Calculation (if applicable):
Progress Update:
Achievement Value: 100%
Supporting Attachments:
Upload
View
Use the dropdown to indicate metric achievement
The Metric Progress Update text input field must be completed as it is part of the Semi-Annual Reporting requirements
The View button will appear after uploaded supporting documentation has been saved
Payment(s)
Est. Round 1 Reporting Payment: $0
Est. Current Reporting Payment: $1,758,906
Click Upload to upload supporting documentation
Carry-forward Questions
Metric P-14.1
If applicable, please explain why your achievement is less than expected.
Do you want to carry this metric into the next demonstration year?
Yes
No
What is your plan to improve performance by the end of the following DY?
Carry-forward Questions will only appear during Round 2 (October reporting) if a user has marked a metric's achievement as "No-Not Started" or "No-Partially Completed."

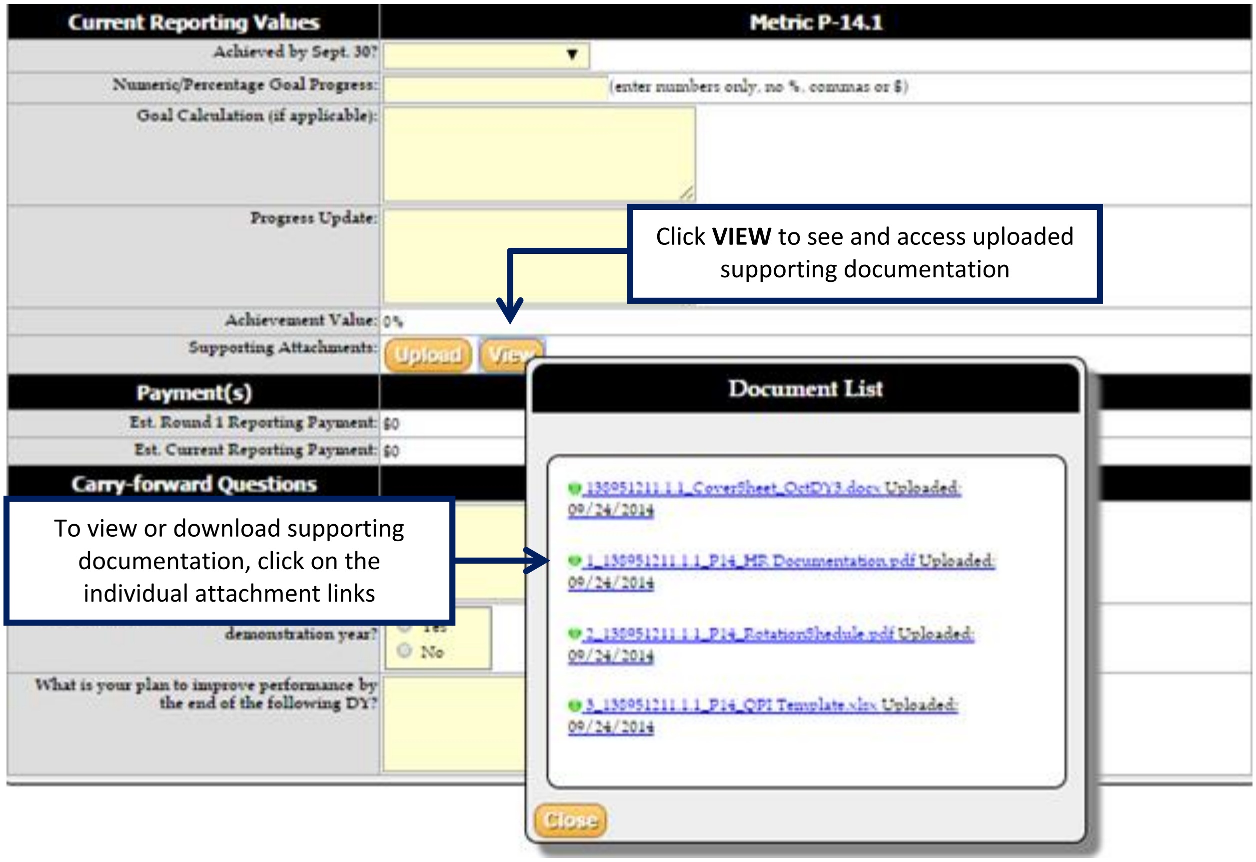
Note:	**Additional Guidance for Reporting Fields:** • **Metric Baseline and Baseline Measurement Period:** Enter explanation of metric baseline and baseline measurement period before activities for specific metric started (e.g., For a strategic plan/needs assessment/business case, no existing documentation when the waiver began; for hiring/training, 10 physicians were available as of the start date of the project of January 1, 2013; for quantifiable patient impact (a one-year measurement period), 50 patients were served in DY3 (October 1, 2013 – September 30, 2014)). • **Goal Calculation:** If the metric goal type is a percentage, input how the goal was calculated. Be sure to specify the numerator and denominator. If the metric goal included several numbers and percentages, input how each was achieved and calculated. If the metric goal is to establish the baseline, input the baseline, a description of the baseline, and how the baseline was calculated. Be sure to specify the numerator and denominator if a percentage. • Please see example below.

Metric Details	Metric I-9.1
Metric Description:	X% of Individuals with a treatment plan developed and implemented with primary care and behavioral health expertise
Custom Metric Description:	Percentage of Individuals with a treatment plan developed and implemented with primary care and behavioral health expertise
Goal/Baseline:	Goal: 15% of individuals with a treatment plan developed and implemented with primary care and behavioral health expertise
Data Source:	Project data; claims and encounter data; medical records
Custom Data Source:	
Goal Type:	Percentage
Numeric Goal:	15
QPI:	N
Medicaid/Low-Income Uninsured:	
Baseline and Period:	Baseline: 0 - This is a new project.
Round 1 Values	**Metric I-9.1**
Round 1 Achieved?	Partially Completed
Round 1 Goal Progress:	25
Round 1 Progress Update:	
Round 1 Achievement Value:	0%
Round 1 HHSC Signoff:	Did Not Report
Round 1 Progress Update Signoff:	Complete
Round 1 HHSC Comments:	Provider did not report for metric achievement during April ... fulfilling metric-level requirement for Semi-Annual Reportin...
Current Reporting Values	**Metric** ...
Achieved by Sept. 30?	Yes-Completed
Numeric/Percentage Goal Progress:	30 (enter numbers only, no %, co...
Goal Calculation (if applicable):	103/344 = .2994 or 30% Numerator: Individuals with treatment plans developed and implemented with primary care and behavioral health expertise Denominator: Individuals receiving services at our two co-located sites
Progress Update:	We have developed a treatment plan for 103 out of the 344 patients we have seen at our co-located sites during DY4 (10/1/14-9/30/15). Therefore we have exceeded our DY4 goal of 15%. Please see the project coversheet and attachments for more details.
Achievement Value:	0%
Supporting Attachments:	Upload View
Payment(s)	**Metric I-9.1**
Est. Round 1 Reporting Payment:	$0
Est. Current Reporting Payment:	

Baseline and Period may differ depending on whether the project is new or an expansion and the metric language (e.g., if the metric measures improvement over the previous DY).

For **Goal Progress**, if the goal type is a numeric (e.g., 120), enter your goal progress as a number (e.g., 120). If your goal type is percentage (e.g., 25%), input a percentage (e.g., .25 or 25).

Step 7: After saving your progress, you can click **VIEW** to access the uploaded supporting documentation in a pop up **Document List**. You can also download the individual attachments by clicking on their links.

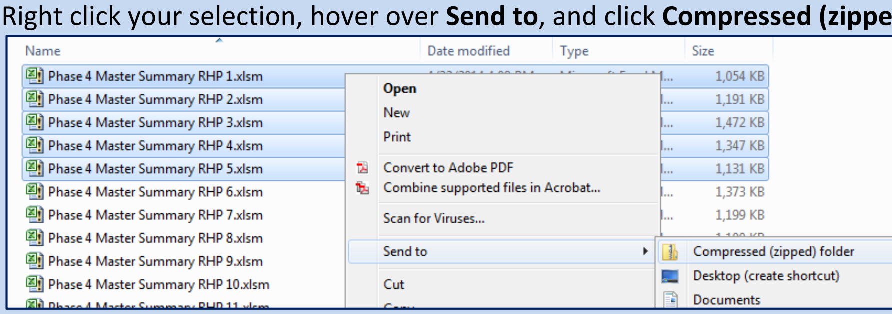


Note:	**Uploading Zip Files**

- If you have several attachments that need to be uploaded in support of a metric or oversized files, consider uploading them as a Zip file. Windows should already have a way to zip or compress files, but there is also free software out there (e.g., WinZip). Please check with your IT Department to see what is available to you.
- To create a zip file (in Windows 7):

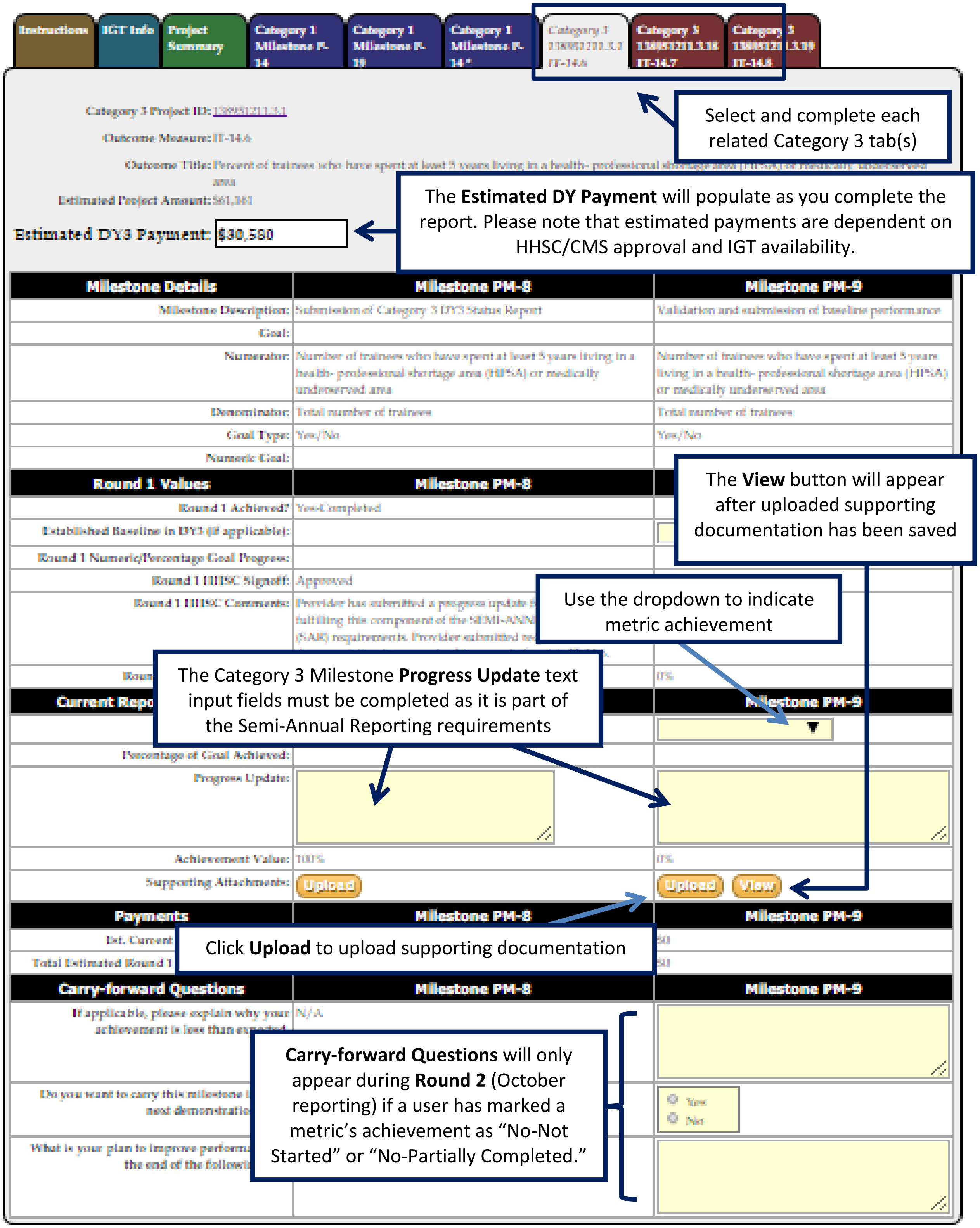
  Step 1: Select the files that want to zip

  Step 2: Right click your selection, hover over **Send to**, and click **Compressed (zipped) folder**

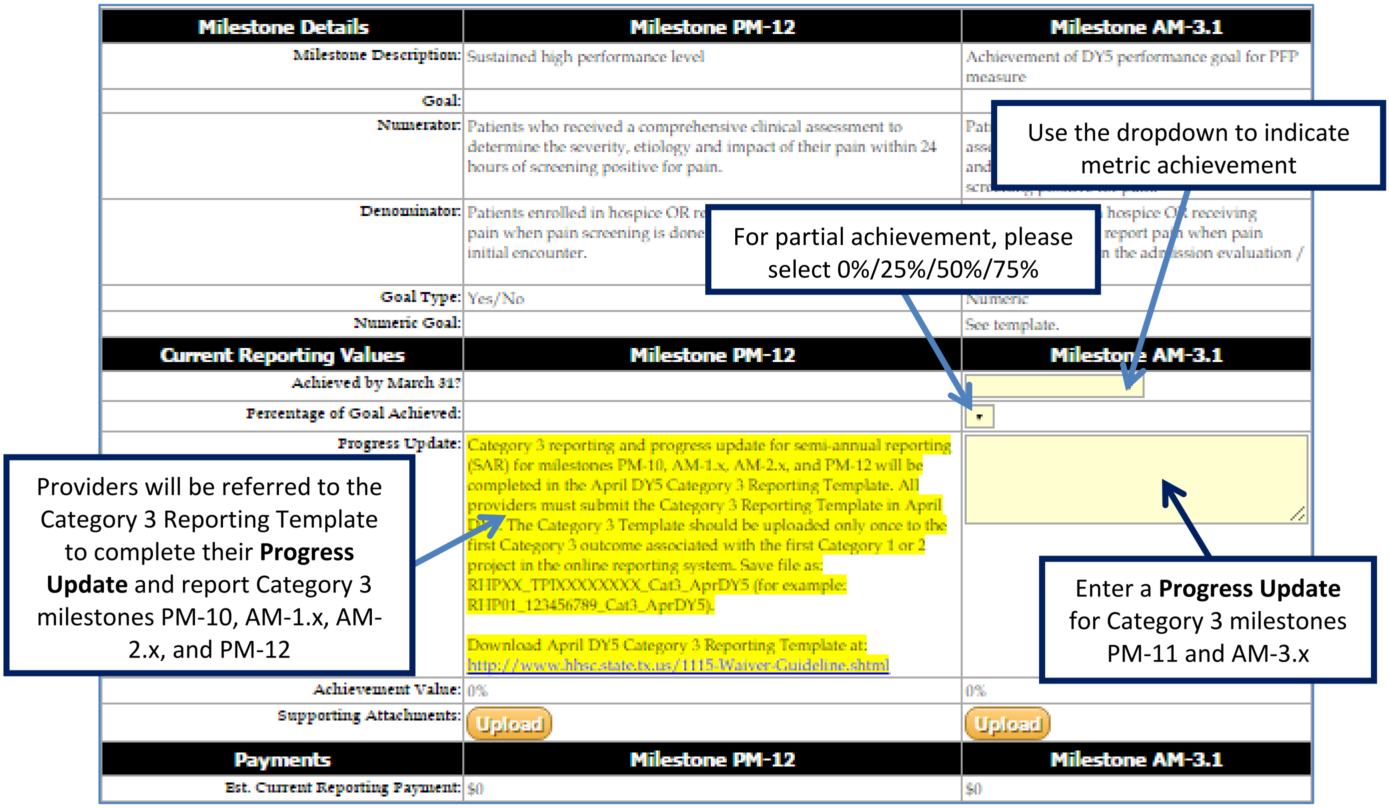


  Step 3: Once the zip file has been created, you can upload it onto the appropriate Milestone tab in the supporting documentation section. For zip files containing multiple files, the DSRIP Online Reporting System will split them out into individual files once uploaded.

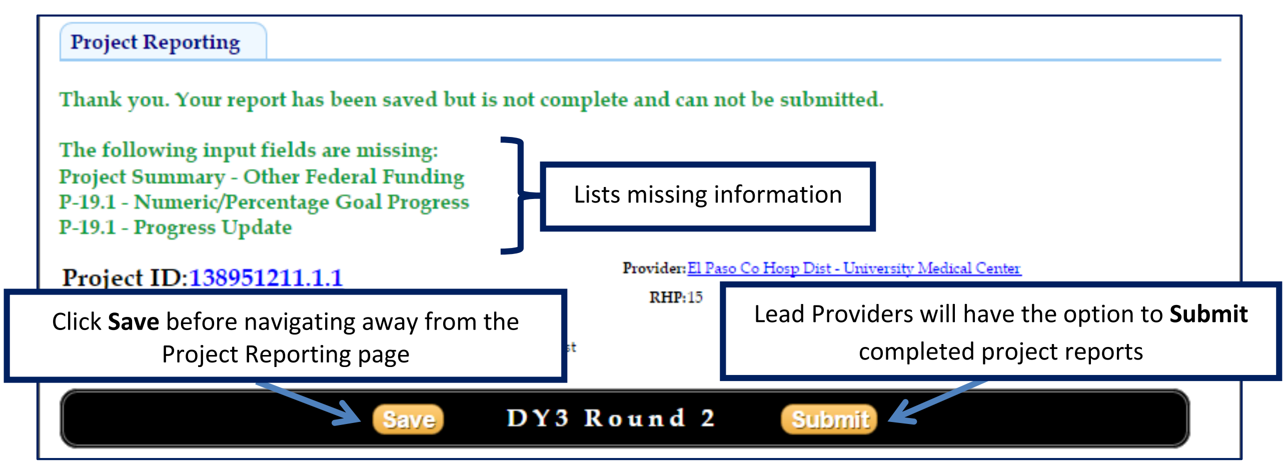
Step 8: Complete the yellow text input fields on the Category 3 tab(s) for your Category 3 milestones. Upload supporting documentation. Click **SAVE**.



Note:	**NEW in DY5.** Most Category 3 milestones (PM-10, AM-1.x, AM-2.x, and PM-12) will now be reported through the Category 3 Reporting Template instead of the reporting system. This includes the **Progress Update** that is part of semi-annual reporting requirements. Only **<u>ONE</u>** Category 3 Reporting Template should be uploaded to the reporting system per provider. After HHSC's initial review, this information will be seeded into the reporting system. The remaining Category 3 milestones (PM-11 and AM-3.x) will be reported in the reporting system. ***Please note, if a provider is not reporting achievement on AM-3.x, they should select "No-Not Started" from the "Achieved by March 31?" dropdown menu. "Partially Completed" should only be selected for AM-3.x if the provider is reporting partial achievement for payment.***



Step 9: After completing and saving your progress on the Project Summary, Category 1/2 Milestone, and Category 3 tabs for the **Project Reporting** page, please verify that all of the required data has been entered by scrolling to the top of the page. The system will list the input fields that are missing information as you complete the reporting tabs and save your progress.



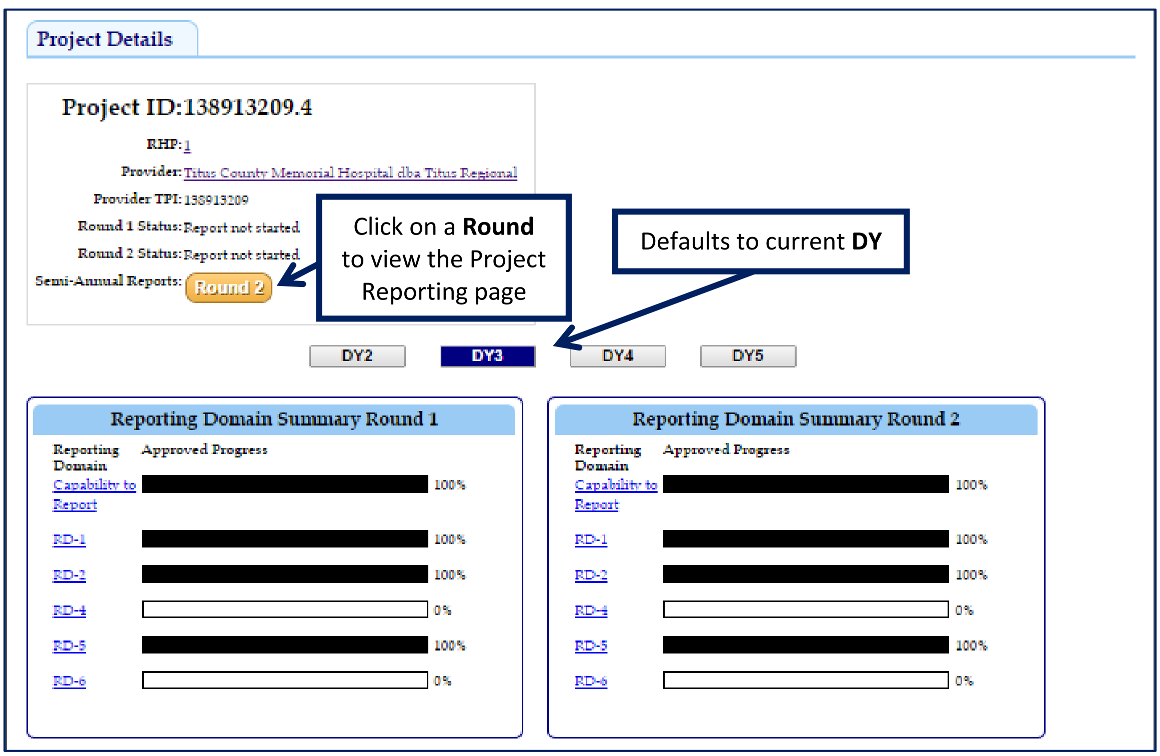
Step 10: If there are no other changes to make to the project report, a Lead Provider has the option to click **SUBMIT**. The purpose of the "Submit" button is to give Lead Providers the opportunity to be the last person to review a report before submission. Once a Lead Provider clicks on "Submit," editing data entry fields is no longer possible. Using the "Submit" button is optional. As long as the completed report and supporting attachments have been **saved** by the reporting deadline, they will be considered officially submitted.

Note:	During the reporting cycle, the Reporting Status tab on the Provider Homepage will update as a project's status changes. At this time, the Category 1/2 project and Category 3 project statuses are tied together since they are reported on the same page. For example, if a user completes all of the metric reports for a Category 1 project, but has not yet completed the associated Category 3 tabs, the project's status for the Category 1 project will not update to "Report Ready to Submit" until the Category 3 tab(s) are completed and vice versa. In another example, during the Needs More Information (NMI) period, if a Category 1 metric receives an NMI, the associated Category 3 projects will also show an NMI status.

Category 4

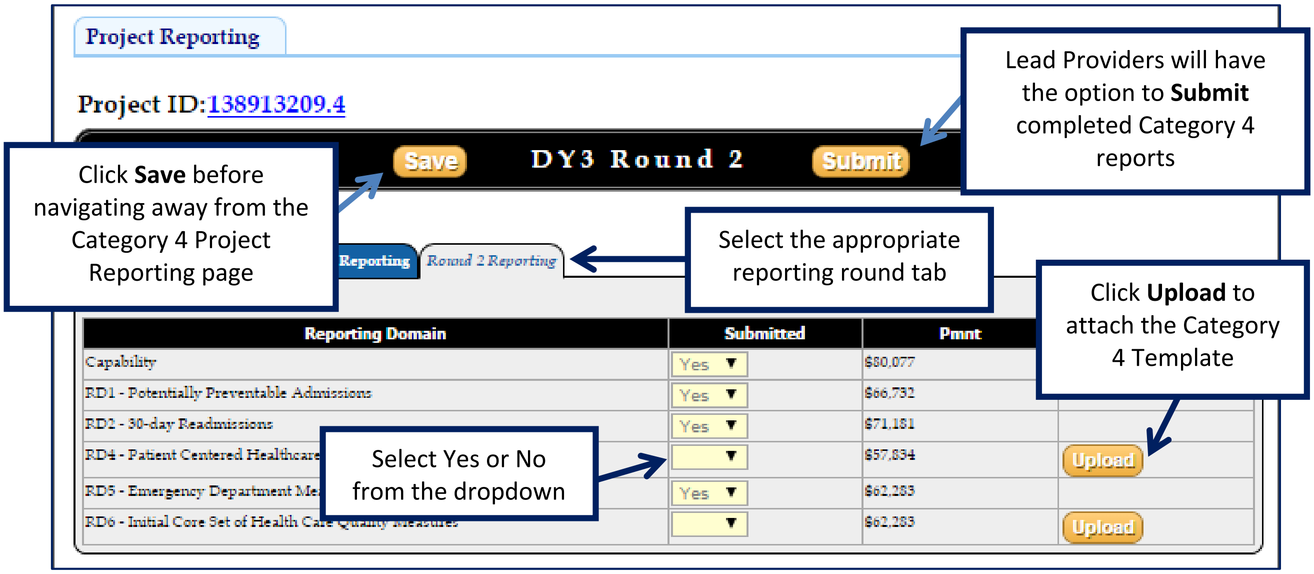
Step 1: From the **Reporting Status** tab, click on the **Category 4 Project ID**.

Step 2: Click on the yellow **ROUND #** button on the **Project Details** page. For April reporting this will be Round 1 and for October reporting it will be Round 2. The DSRIP Online Reporting System will default to the current DY.



Step 3: On the Category 4 **Project Reporting** page, select the appropriate **Round # Reporting** tab.

Step 4: Select "Yes" or "No" from the dropdown box in the **Submitted** column to indicate that you are reporting on the selected domain and upload the supporting documentation. Click **SAVE**.



Note:	The Category 4 Reporting Template includes all reporting domains, so it only needs to be uploaded **ONCE** to the first domain reporting achievement.

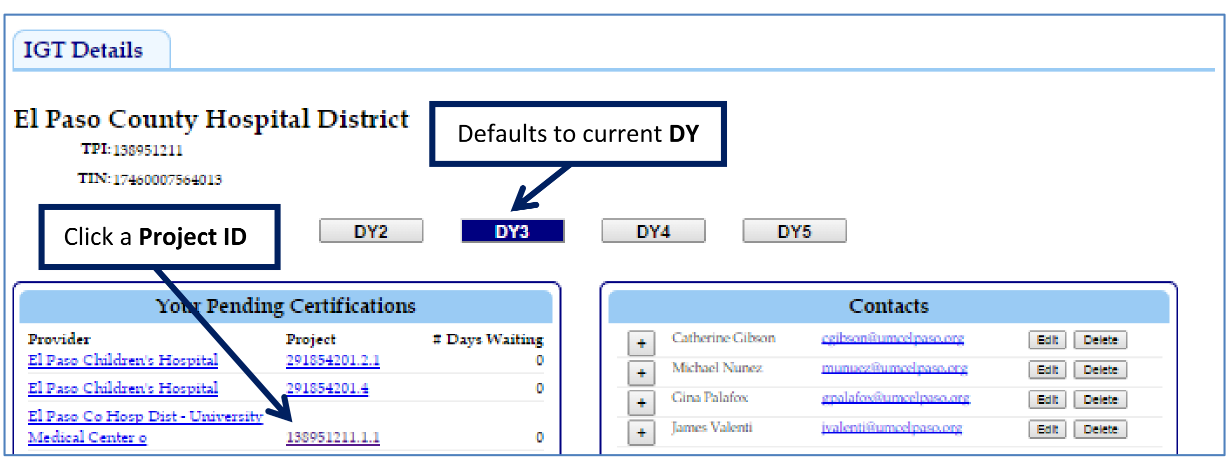
Step 5: If there are no other changes to make to the Category 4 report, a Lead Provider has the option to click **SUBMIT**. Please note that users are unable to undo this process. Once the Category 4 report has been submitted, it is not possible to make any edits.

IGT Entities: Approving Semi-Annual Reports

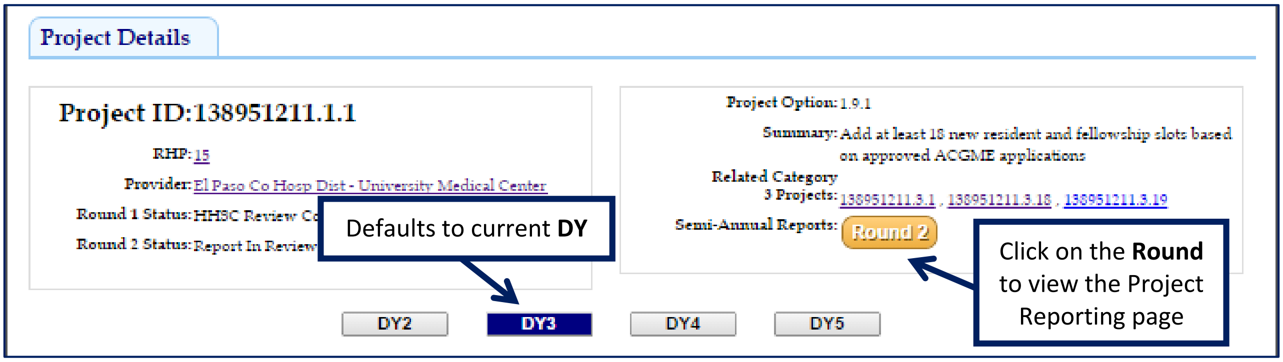
Note:	Organizations must be logged in as the "IGT" role in order to review and provide feedback concerning the accuracy of metric reporting. This activity is only available after the reporting period closes.

After the reporting period closes, the IGT Homepage will list the Pending Certifications for its affiliated projects which the IGT Entity can approve and provide feedback. This process is not required and will not affect payments if the IGT Entity decides not to indicate approval or provide feedback.

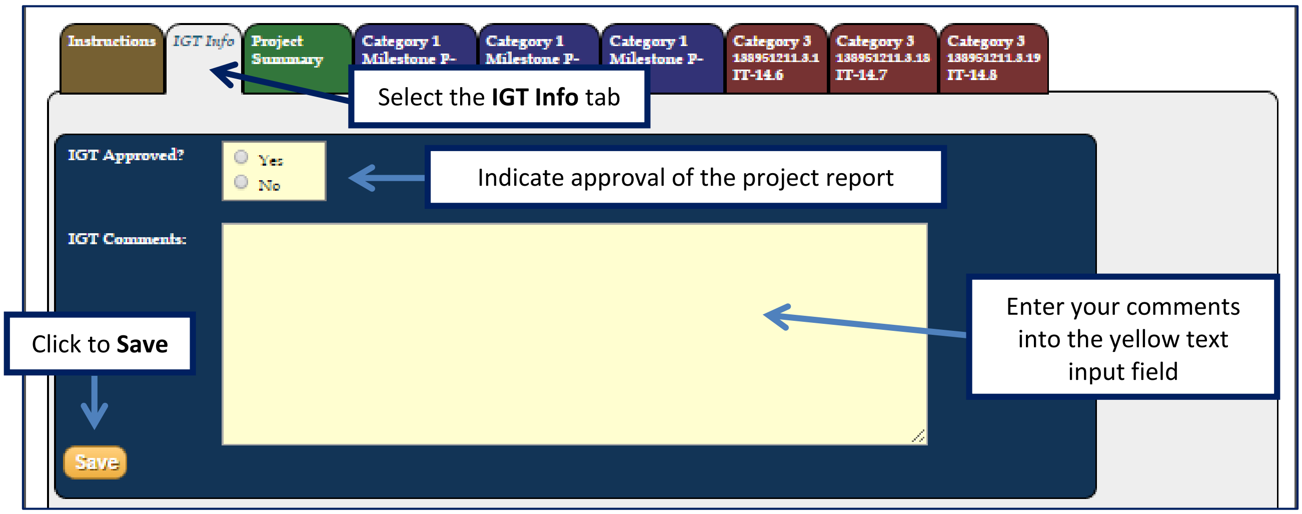
Step 1: Select a **Project ID** to navigate to its **Project Details** page.



Step 2: On the **Project Details** page, click on the yellow **Round #** button. For April reporting this will be Round 1 and for October reporting it will be Round 2. The DSRIP Online Reporting System defaults to the current DY.



Step 3: On the **Project Details** page, select **IGT Info** tab and enter your Approvals and Comments in the yellow text input fields. Click **SAVE**.



Step 4: To return to the list of projects, click **HOME** on the main menu.

Needs More Information (NMI) Reporting Period

This process is similar to the regular reporting period.

Step 1: On the **Provider Details** page, click on the **Reporting Status** tab. Review the appropriate Round column to see if your provider level summary or project received a Needs More Information (NMI) request.

Project Status			
RHP Number	Project	Round 1	Round 2
15	138951211.1.1	HHSC Review Complete	Report Needs More Information
15	138951211.1.2	HHSC Review Complete	HHSC Review Complete
15	138951211.1.3	HHSC Review Complete	HHSC Review Complete

Note:	At this time Category 1/2 and Category 3 statuses are linked together since they are reported on the same project reporting page. Although the status may say that Category 3 has an NMI, it may be because the related Category 1/2 project received an NMI and vice versa. It is important to check the individual milestone and metric tabs to view their HHSC Signoff status.

Step 2: Click on the **Project ID** to navigate to the **Project Details** page. Similar to the regular reporting period, click on the **Round #** button. This will bring you to the **Project Reporting** page.

Step 3: Review the **HHSC Review** section on the Project Summary, Milestone, and Category 3 tabs to identify the milestone/metric that requires additional information. The HHSC Comments should provide details regarding the Needs More Information request. If further clarification is needed, please send questions to the waiver mailbox.

HHSC Review	Metric P-4.1
HHSC Signoff:	Needs More Information
Progress Update Signoff:	Complete
HHSC Comments:	HHSC found achievement of metric is not clearly demonstrated. HHSC is unable to determine the baseline hours to compare the additional eight hours referenced by the provider. The documentation does not specify when the extended hours began. Please submit documentation of the previous hours including dates of when the previous hours were in effect and documentation of when the extended hours began to demonstrate the 75 hour total increase as required in the metric goal. Metric is not approved at this time. Provider should submit this information during December/ January response period.

Step 4: Upload supporting documentation. Additional comments or explanations can be uploaded as a separate document or included in the **Progress Update** field (see below). **DO NOT** overwrite documents or delete updates from the initial reporting period.

Current Reporting Values	Metric P-4.1
Achieved by Sept. 30?	Yes-Completed ▼
Numeric/Percentage Goal Progress:	78 (enter numbers only, no %, commas or $)
Goal Calculation (if applicable):	About 8 additional hours a month
Progress Update:	We have met our metric goal by increasing our clinic hours by 78 hours in DY3. NMI Response: As shown in the NMI documentation, our clinic was originally open M-F from 9:00am - 7:00pm. and Saturday from 9:00am - 2:00pm. Starting on January 4, 2014, we expanded Saturday hours by two hours: 9:00am - 4:00pm and still maintain these hours.
Achievement Value:	100%
Supporting Attachments:	Upload View

Note:	Documentation uploaded during the NMI reporting period should include NMI at the beginning of the document name (ex: NMI_RHP05_123456789.1.2_P-5.1_OriginalClinicHours)

Step 5: Click **SAVE**. Any saved changes will update the Project Status to "Report Ready to Submit."

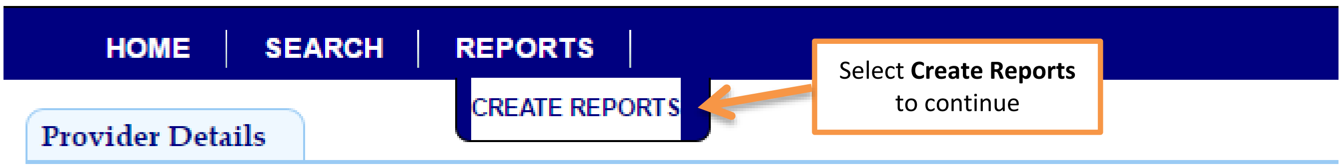
Step 6: If there are no other changes to make to impacted report, a Lead Provider has the option to click **SUBMIT**. Please note that users are unable to undo this process. Once the report has been submitted, it is not possible to make any edits.

DSRIP Reports

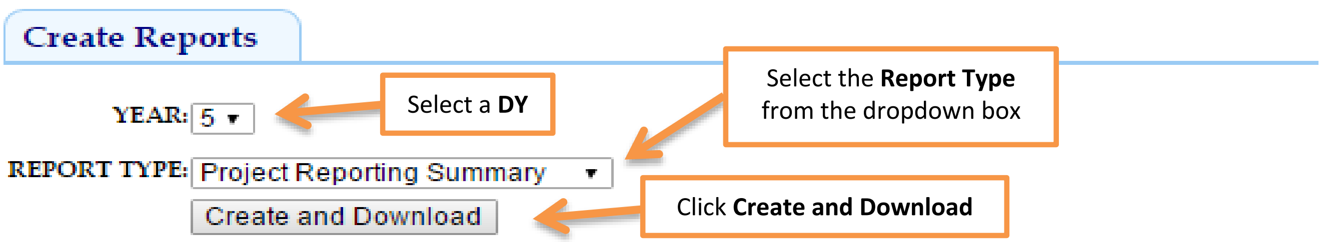
Creating Reports

Step 1: On the menu bar of the Provider Details page, hover over **Reports** to show options.

Step 2: Click on **Create Reports**.



Step 3: On the Create Reports page, select the type of report you would like from the **Report Type** dropdown and click **Create and Download**. Depending on the report, you will also need to select a Round and/or Year.



Types of Reports

Project Reporting Summary

This report is broken up into three tabs which the provider can run by demonstration year (DY). The report is role based, so it will pull information differently depending on which role the user is logged in as.

- **Anchor**: The Anchor version of the report will pull in all reporting information for all projects that fall under their region.
- **Provider**: The Provider version of the report will pull in the reporting information for all projects belonging to the provider. Since the report is pulled at the provider level, a provider who has projects in multiple regions will see the projects from all of the regions appear in the report.
- **IGT Entity**: The IGT version of the report will pull in the reporting information for all projects for which the entity provided IGT during the selected demonstration year.
    - <u>PLEASE NOTE</u> due to the way the reporting system is set up, if a provider has changed IGT entities between DYs and is reporting carryforward, the new IGT entity will then have access to the previous DY's reporting information. For example, IGT B replaces IGT A prior to DY4 Round 1 reporting and the provider has several DY3 carryforward milestones. Once the IGT change has been made, IGT B can run the Project Reporting Summary report and pull the DY3 project

reporting information for that provider, while IGT A will no longer be able to pull DY3 project reporting information

The report has three tabs: Metric Reporting Summary, Provider Level SAR Summary, and Project Level SAR Summary. Below you will find a brief description of each tab, a list of headers found on each tab, and any necessary clarifications of the header fields.

Note:	Reports created during Round 1 will only contain Round 1 reporting information, while reports created during Round 2 will contain both Round 1 and Round 2 reporting information.

Project Reporting Summary Tab

The Metric Reporting Summary tab details the project information displayed in the reporting system, as well as what has been entered and approved during selected demonstration years. Information is at the metric level, so projects may appear in the report more than once depending on how many metrics were being reported on during the selected DY.

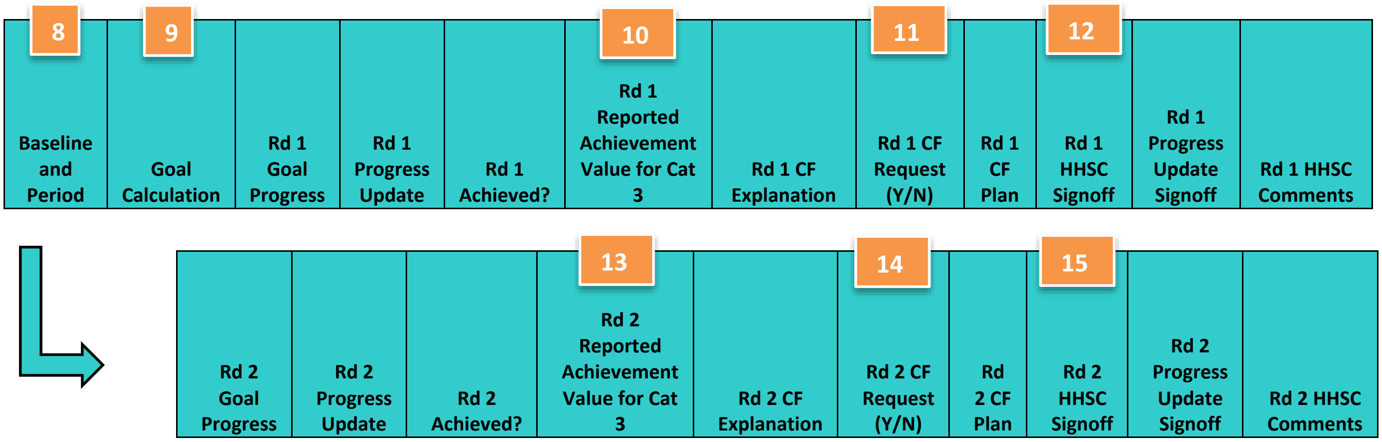
Project and Milestone/Metric Information:

			1		2		3			
RHP	TPI	Provider Name	Active	Project Id	Project Focus Code	Cat	DY	Milestone ID /Reporting Domain	Milestone /Reporting Domain Description	Milestone /Reporting Domain Custom Description

				4	5	6	7
Metric ID	Metric Description	Metric Custom Description	Baseline/Goal	Goal Type	Numeric Goal	QPI	MLIU

1. **Active -** Indicates whether or not the project is active. "Y" means the project is active and "N" means the project has been withdrawn.
2. **Project Focus Code** - For Category 1 and 2, this will be the Project Option. For Category 3, this will be the Outcome Measure. For Category 4, this field will remain blank.
3. **DY** - Indicates the demonstration year of the metrics, milestones, and reporting domains in a given reporting period. For example, a project reporting summary from DY3 could contain DY2 carryforward and DY3 milestones and metrics.
4. **Goal Type** - For Category 1 and 2 metrics, this will be either numeric, percentage, or yes/no. This field will be blank for Category 3 milestones and Category 4 reporting domains.
5. **Numeric Goal -** For Category 1 and 2 metrics, this will be either numeric, percentage, or yes/no. This field will be blank for Category 3 milestones and Category 4 reporting domains.
6. **QPI** - Indicates whether or not the Category 1 or 2 metric is a QPI metric. "Y" means the metric is a QPI metric and "N" or a blank field means the metric is non-QPI. This field will be blank for Category 3 milestones and Category 4 reporting domains.
7. **MLIU -** Indicates whether or not the Category 1 or 2 metric is required to report on Medicaid low income and uninsured (MLIU) in order to achieve the metric. "Y" means the metric must report MLIU and "N" or a blank field means the metric is not required to report MLIU. This field will be blank for Category 3 milestones and Category 4 reporting domains.

Reporting Information:



8. **Baseline and Period -** Displays the most recent reported information for the selected metric, so it may change between Round 1 and Round 2 depending on when the provider reports achievement.
9. **Goal Calculation -** Displays the most recent reported information for the selected metric, so it may change between Round 1 and Round 2 depending on when the provider reports achievement.
10. **Rd 1 Reported Achieve Value for Cat 3** - The partial achievement percentage for Category 3 achievement milestones (AM). This field will be blank for Category 1, 2, and 4 as they are not eligible for partial achievement.
11. **Rd 1 CF Request (Y/N)** - Please note, carryforward is only available to Category 3 milestones reporting partial achievement during Round 1.
12. **Rd 1 HHSC Signoff** - Signoff information, including the **Progress Update Signoff** and **HHSC Comments**, will not be available until after HHSC completes their review (i.e., at the end of Initial review and the end of NMI review). Signoff information may also be updated based on requests for additional information during the Initial Reporting/Review Period. For example, a metric that may have received an NMI during initial review may be updated to either NMI-Approved or Not Approved, along with its comments, after HHSC's NMI review.
13. **Rd 2 Reported Achieve Value for Cat 3** - The partial achievement percentage for Category 3 achievement milestones (AM). This field will be blank for Category 1, 2, and 4 as they are not eligible for partial achievement.
14. **Rd 2 CF Request (Y/N) -** Indicates which Category 1 and 2 metrics and Category 3 milestones requested carryforward during Round 2. "Y" means the metric or milestones requested carryforward during the current reporting year or carried forward from the previous demonstration year. "N" or a blank field means the metric or milestone did not request carryforward. Category 4 is not eligible for carryforward.
15. **Rd 2 HHSC Signoff** - Signoff information, including the **Progress Update Signoff** and **HHSC Comments**, will not be available until after HHSC completes their review (i.e., at the end of Initial review and the end of NMI review). Signoff information may also be updated based on requests for additional information during the Initial Reporting/Review Period. For example, a metric that may have received an NMI during initial review may be updated to either NMI-Approved or Not Approved, along with its comments, after HHSC's NMI review.

Note:	The reporting system did not have a place to keep track of the **HHSC Progress Update Signoff** for Category 3 milestones until DY4 Round 2. As a result, this field will be blank for Category 3 milestones in earlier reporting periods.

Provider Level SAR Summary Tab

The Provider Level SAR Summary tab contains the provider summary and signoff information for both rounds of the selected demonstration year (DY).

RHP	TPI	Provider Name	DY	Rd 1 Provider Summary	Rd 1 HHSC Signoff	Rd 1 HHSC Comments	Rd 2 Provider Summary	Rd 2 HHSC Signoff	Rd 2 HHSC Comments

Project Level SAR Tab

The Project Level SAR Summary tab contains the project summary and signoff information for all of the provider's projects from both rounds of the selected demonstration year (DY).

				1						
RHP	TPI	Provider Name	Project ID	Active	Year	Rd 1 Accomplishments	Rd 1 Challenges	Rd 1 Lessons Learned	Rd 1 Patient Impact for MLIU Pop	Rd 1 Progress on Core Components

Rd 1 CQI Activities	Rd 1 Other Federal Funding?	Rd 1 No Duplication of Activities	Rd 1 Explanation of Federal Funds	Rd 1 HHSC Signoff	Rd 1 HHSC Comments	Rd 2 Accomplishments	Rd 2 Challenges	Rd 2 Lessons Learned

Rd 2 Patient Impact for MLIU Pop	Rd 2 Progress on Core Components	Rd 2 CQI Activities	Rd 2 Other Federal Funding?	Rd 2 No Duplication of Activities	Rd 2 Explanation of Federal Funds	Rd 2 HHSC Signoff	Rd 2 HHSC Comments

1. **Active -** Indicates whether or not the project is active. "Y" means the project is active and "N" means the project has been withdrawn. HHSC also notes that the project has been withdrawn in the question fields and HHSC Comments.

Uploaded Files Summary

The Uploaded Files Summary lists all documents uploaded into the DSRIP Online Reporting System per milestone/metric/reporting domain for the selected demonstration year (DY) and round. This report is available to Anchors and Providers.

							1	2		3		4
RHP	TPI	Provider Name	Project Id	Cat	DY	Metric Id	Unique Id	QPI	File Name	File Ext	Size (bytes)	Date Modified

1. **Unique ID** - Please ignore. This field is for HHSC use only.
2. **QPI** - Indicates whether or not the Category 1 or 2 metric is a QPI metric. "Y" means the metric is a QPI metric and "N" or a blank field means the metric is non-QPI. This field will be blank for Category 3 milestones and Category 4 reporting domains.
3. **File Ext** (Extension) - Indicates file type (e.g., .xlsm, .xlsx, .docx, .pdf).
4. **Date Modified** - Indicates the date the file was uploaded. This may change if a user overwrites a previously uploaded file.

Technical Issues

Reporting Website Errors

Please contact the HHSC Transformation Waiver team at TXHealthcareTransformation@hhsc.state.tx.us if a user encounters an error with the reporting tool. Please include a screenshot of the error code (example below) and additional details (e.g. the project page you were working on, the button you clicked when the error occurred, etc.) in your email.

We're sorry. An error has occurred:

Please report this error by sending a screen shot (Alt-Print Scrn then paste) to DSRIP Program Staff. Thank you.

```
org.springframework.dao.DataIntegrityViolationException
stackTrace = org.springframework.dao.DataIntegrityViolationException: Could not execute JDBC batch update; SQL [insert into PROJECT_REPORTING_CAT_1_2_3
(ACHIEVED_INDICATOR, BASELINE_AND_PERIOD, CARRY_FORWARD_REASON_ID, CARRY_FORWARD_REPORTING_DY, CARRY_FORWARD_YN,
DEMO_YEAR_APPROVED, DENOMINATOR_VALUE, ACHIEVED_STATUS_ID, GOAL_CALCULATION_DESCRIPTION, HHSC_COMMENTS, HHSC_SIGNOFF,
NUMERATOR_VALUE, NUMERIC_GOAL_PROGRESS, PROGRESS_UPDATE, PROGRESS_UPDATE_SIGNOFF, PROJECT_DEMO_YEAR_ID, PROJECT_ID,
PROJECT_METRIC_ID, PROJECT_MILESTONE_ID, ROUND1_ACHIEVED_INDICATOR, ROUND1_ACHIEVED_STATUS_ID, ROUND1_HHSC_COMMENTS,
ROUND1_HHSC_SIGNOFF, ROUND1_NUMERIC_GOAL_PROGRESS, ROUND1_PROGRESS_UPDATE, ROUND1_PROGRESS_UPDATE_SIGNOFF,
ROUND_APPROVED, UNDER_ACHIEVE_IMPROVEMENT_PLAN, UNDER_ACHIEVE_WHY, UPDATE_TIMESTAMP, UPDATE_USER_ID,
PROJECT_RPT_CAT_1_2_3_ID) values (?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?, ?)]; constraint [null]; nested exception is
org.hibernate.exception.ConstraintViolationException: Could not execute JDBC batch update at
org.springframework.orm.hibernate3.SessionFactoryUtils.convertHibernateAccessException(SessionFactoryUtils.java:643) at
org.springframework.orm.hibernate3.HibernateTransactionManager.convertHibernateAccessException(HibernateTransactionManager.java:794) at
org.springframework.orm.hibernate3.HibernateTransactionManager.doCommit(HibernateTransactionManager.java:665) at
org.springframework.transaction.support.AbstractPlatformTransactionManager.processCommit(AbstractPlatformTransactionManager.java:755) at
org.springframework.transaction.support.AbstractPlatformTransactionManager.commit(AbstractPlatformTransactionManager.java:724) at
org.springframework.transaction.interceptor.TransactionAspectSupport.commitTransactionAfterReturning(TransactionAspectSupport.java:475) at
org.springframework.transaction.interceptor.TransactionAspectSupport.invokeWithinTransaction(TransactionAspectSupport.java:270) at
org.springframework.transaction.interceptor.TransactionInterceptor.invoke(TransactionInterceptor.java:94) at
```

Browser Differences

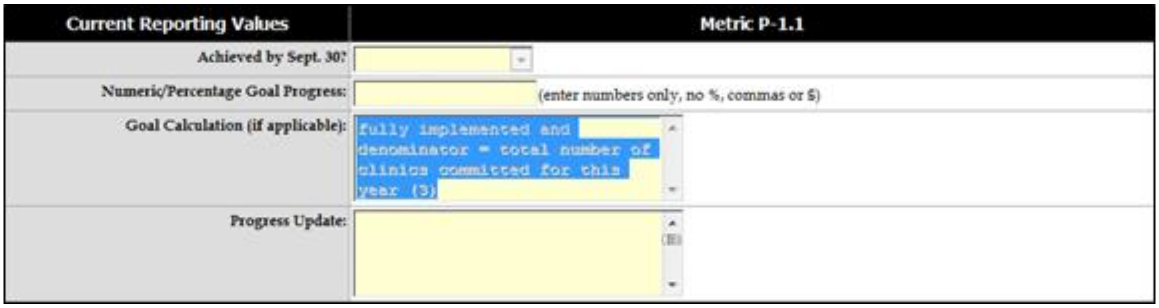
There are slight differences in the DSRIP Online Reporting System's appearance and features depending on which browser the user is using. Below are two examples of browsers and the differences the user may expect from their appearance and features.

Internet Explorer

- **Nonadjustable Text Fields.** Internet Explorer utilizes scroll bars in order to view information inputted into the text fields. However, once the text input field has been locked for editing at the close of the reporting period, the user must highlight the text and move the cursor downward over the text box in order to read the information in its entirety.

Current Reporting Values	Metric P-1.1
Achieved by Sept. 30?	
Numeric/Percentage Goal Progress:	(enter numbers only, no %, commas or $)
Goal Calculation (if applicable):	Numerator = number of clinics fully implemented and denominator = total number of clinics committed for this
Progress Update:	

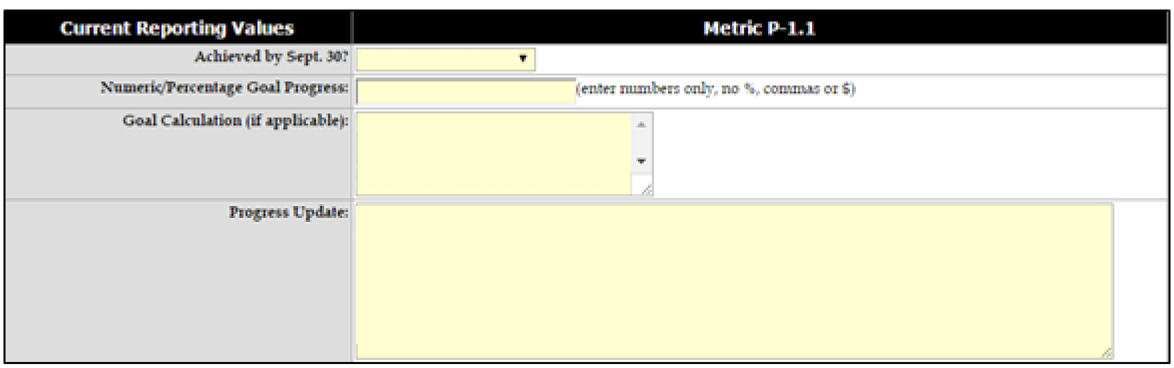
Example of the highlighting method:



- **Viewing Documentation**. PDF documents are capable of being viewed through a new browser window. Please note a user will need to have Adobe Reader for this to work. Internet Explorer will also prompt the user to open a file directly from the **Document List** window or to download it to the user's desktop.

Google Chrome

- **Adjustable Text Fields.** When the text fields are at their smallest size, a scroll bar will appear and the user will be able to scroll down through the text. The Google Chrome browser also allows for the text field to be expanded by clicking and dragging on the little hash marks in the bottom right corner of the text field. These text fields remain adjustable even after they are locked for editing at the close of the reporting period.



- **Viewing Documentation.** Depending on user settings, PDF documents are capable of being viewed through a new browser window. Please note a user will need to have Adobe Reader for this to work. Other file formats may need to be downloaded to the user's desktop before the user can view it.

Helpful Tips

- **Homepage Navigation.** Please use HOME on the main menu to return to your homepage at any time. Your homepage is role based.
- **Idle Users**. The DSRIP Online Reporting System will log you out if you are idle for more than 20 minutes and will prompt you to log in again. Clicking on "Login" will bring you back to the main login screen where you will need to re-enter your user login information to log into the system again.

- **Save Frequently.** In general, this is a good habit to have while inputting your reporting information on the Provider Summary and Project Reporting pages. You will also be reminded to save your report before navigating away from the Project Reporting page. It is also important to note, the DSRIP Online Reporting System will log you out if you are idle for more than 20 minutes. If you do not save your reporting page prior to this forced log out, you will lose whatever information was not saved and will have to re-enter it.
- **Multiple Users.** HHSC recommends that only one user at a time enter and save data on the provider summary page, an individual project reporting page, or a Category 4 reporting page. This is because the user who clicks "Save" last will save over whatever the other user(s) have entered. The save buttons on these pages apply only to that page (i.e., "Save" on the Provider Summary page applies only to the Provider Summary; "Save" on the Project Reporting page applies only to all the tabs on that page [Project Summary tab and milestone tabs]; and "Save" on the Cat. 4 Project Reporting page applies only to Cat. 4).
- **Calculations.** As HHSC and our contractor continue to work on improving the accuracy of the calculations displayed on the reporting tool, we wanted to remind users to refer to the historical payment documents that have been posted on the HHSC Waiver website (https://hhs.texas.gov/laws-regulations/policies-and-rules/medicaid-1115-waiver/tools-and-guidelines-regional-healthcare-partnership-participants) and the payment documents that have been distributed to Providers and Anchors at the end of HHSC's reporting review which reflect more accurate information.
- **Project Status.** All tabs included on the Project Reporting Page are connected (e.g. Project Summary tab, Milestone tabs, Category 3 tabs). As a result, if the user completes only the Category 1/2 milestone tabs on the project reporting page, then both the Category 1/2 and Category 3 project statuses will show the report as not completed.
- **Coversheets.** Coversheets are required for all Category 1 and 2 projects that are reporting achievement of metrics. Please upload the Project Coversheet as one of the attachments under the first milestone and metric for which you are reporting "Yes-Completed."
- **Supporting Attachments**
    - **Deleting Documentation.** Unfortunately the ability to delete documents from the DSRIP reporting site is not available at this time. Please note any documentation that HHSC should disregard in the Progress Update field of your metric report and/or project coversheet.
    - **Replacing Documentation.** This method is a workaround for deleting or updating documentation. For example, if a user accidently uploaded documentation that was not the final version or may have contained PHI, they can save over the current document if they upload an updated or blank version with the same name and extension. Please note that a user must click **Save** in order to view the newly uploaded replacement.
      The example below shows just a few of the errors HHSC observed during DY3 October reporting when users attempted to replace documentation.

RHP00_123456789.1.1_QPI.xlsm	Original File
RHP00 123456789.1.1 QPI.xlsm	The new file omitted certain characters (e.g. underscores).
RHP00_123456789.1.1_QPI(1).xlsm	A copy of the file was not renamed before it was uploaded.
RHP00_123456789.1.1_QPI.xlsx	The new file was saved using a different extension.

    - **Documentation Containing PHI.** If a user discovers one of their documents contains PHI after they have uploaded to the system and they are unable to replace it with a blank document or

PHI-free version, please notify the HHSC Transformation Waiver team and we will have it removed from the reporting tool. HHSC does ask that a non-PHI version be submitted for audit purposes.

- **Naming Documentation.** 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.
- **Uploading Documentation.**
    - Clicking the **Upload** button will create a new window to browse and upload documents. If a user does not see the dialog box pop up, please try disabling pop up blockers for the website.
    - The upload limit for documentation has been increased to **50MB**. Please note users may still experience issues depending on their internet connection (e.g., sometimes the upload will time out).
    - If the provider must use an alternative method to submit their documentation due to size limits, please note so in the **Progress Update** field or in the project coversheet, so that the HHSC reviewer will know that documentation has been submitted.
    - If a certain file extension is not listed on the acceptable files list in the upload dialog box, then it will not upload to the reporting page. Acceptable files include: PDFs, Microsoft Word (.doc, .docx, .docm), Microsoft Excel (.xls, .xlsx, .xlsm), Microsoft PowerPoint (.ppt, .pptx), PDF (.pdf), and zip files (.zip). For example, if a user would like to submit a picture (.jpeg), they should insert it into a Word document, PowerPoint slide, etc. in order to upload it with their supporting documentation.