



DSRIP Maternal & Newborn Health

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DSRIP Design

Participating providers earn incentive payments for implementing delivery system reforms intended to:

- Increase access to health care services
- Improve the quality of care
- Enhance the health of patients and families served



DSRIP Funding Pool

DSRIP	Demonstration Year (DY)	Pool Amount (All Funds)
DSRIP 1.0	DY1	\$0.5B
	DY2 (10/1/12 – 9/30/13)	\$2.3B
	DY3 (10/1/13 – 9/30/14)	\$2.67B
	DY4 (10/1/14 – 9/30/15)	\$2.85B
	DY5 (10/1/15 – 9/30/16)	\$3.1B
	DY6 (10/1/16 – 9/30/17)	\$3.1B
DSRIP 2.0	DY7 (10/1/17 – 9/30/18)	\$3.1B
	DY8 (10/1/18 – 9/30/19)	\$3.1B
	DY9 (10/1/19 – 9/30/20)	\$2.91B
	DY10 (10/1/20 – 9/30/21)	\$2.49B
	DY11 (10/1/21 – 9/30/22)	\$0



DSRIP Providers

DSRIP providers are limited to participating:

- Hospitals (public and private)
- Community mental health centers
- Physician practices (largely associated with academic health science centers)
- Local health departments



DSRIP Target Populations

All populations can benefit from delivery system transformation through DSRIP efforts.

Target populations:

- Medicaid enrollees
- Low-income/uninsured individuals



DSRIP 1.0

- In Demonstration Years (DY) 1 through 6 (2011 – 2017) performing providers implemented DSRIP projects.
- Projects were focused on infrastructure development and program innovation/redesign.
- In September 2016, there were 1,451 approved and active DSRIP projects.
- Providers earned DSRIP payments by achieving project metrics and milestones.



DSRIP 1.0 Project Examples

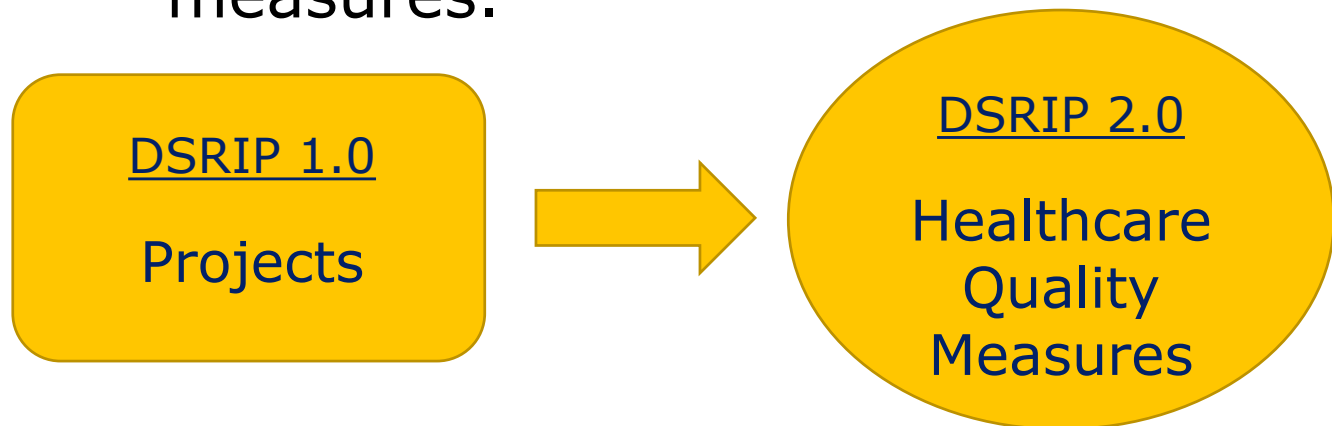
Provider Type	Project Description
Hospital in El Paso	Establish a Patient Care Navigation Program within the High Risk Clinic; a neonatal follow-up program to improve access to care, provide continuity of care and improve preterm and very low birth weight infants' long term outcomes in the region.
Hospital in Odessa	Improve access to gestational diabetes care through Perinatal Center
Public Health Department in Tarrant County	Implement the use of antenatal steroids to prevent preterm birth in women with a history of spontaneous preterm birth.
Community Mental Health Center in Harris County	Increase capacity by adding residential detoxification beds available to women accompanied by their children.



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DSRIP 1.0 vs. 2.0 (Part 1)

- Beginning in DY 7 (October 1, 2017), DSRIP evolved from project-level reporting to provider system-level reporting on healthcare quality measures.



DSRIP 2.0 Example (Part 1)

Hospital System in Harris County

Measure Bundle: Improved Maternal Care

Core Activity: Reassess existing and evaluate new protocols to align with industry standards of care and prevention to obtain the desired outcomes for mothers and newborns throughout pregnancy, childbirth, and the postnatal stages that address associated clinical outcomes. These interventions will be applied across the inpatient OB, all 14 ambulatory locations, as well as the emergency departments with approximately 200 providers committed to the interventions.



DSRIP 2.0 Example (Part 2)

Measures included in “Improved Maternal Care” Measure Bundle:

- Contraception Care: Post-partum Women Ages 15-44
- Timeliness of Prenatal Care
- Post-partum Follow Up and Care Coordination
- Behavioral Health Risk Assessment for Pregnant Women





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Sustaining DSRIP Successes

- Providers can continue to bill for the increased number of services they are providing due to enhanced capacity developed under DSRIP.
- Other DSRIP successes, such as quality improvements, can be sustained through quality programs in Medicaid managed care.
- HHSC will work with state leadership and CMS on both Medicaid and low-income uninsured strategies for post-DSRIP.