

## Attachment G

41. If the State is currently updating the quality strategy, please submit a draft version, and provide:

a. A target date for submission of the revised quality strategy (month and year): March 2021

Texas is submitting an updated Quality Strategy to CMS by March 31, 2021, as required by 42 CFR 438.340 and the DSRIP Transition Plan. A draft of the proposed Quality Strategy is posted on the HHSC website.

b. Note any potential changes that might be made to the goals and objectives.

The Goals and Objectives submitted in response to Question 42, below, are from the revised proposed Managed Care Quality Strategy (March 2021 version) available at:

<https://hhs.texas.gov/sites/default/files/documents/about-hhs/process-improvement/quality-efficiency-improvement/tx-managed-care-quality-strategy-march-2021-draft.pdf>

The March 2018 Quality Strategy includes the following goals:

- Transition from volume-based purchasing models to a pay-for-performance model
- Improve member satisfaction with care
- Reduce payments for low quality care

The proposed Quality Strategy incorporates revised goals:

- Promoting optimal health for Texans at every stage of life through prevention and by engaging individuals, families, communities, and the healthcare system to address root causes of poor health.
- Strengthening person and family engagement as partners in their care to enhance respect for individual's values, preferences, and expressed needs.
- Keeping patients free from harm by building a safer healthcare system that limits human error.

## **Attachment G**

- Providing the right care in the right place at the right time to ensure people can easily navigate the health system to receive timely services in the least intensive or restrictive setting appropriate.
- Promoting effective practices for people with chronic, complex, and serious conditions to improve people's quality of life and independence, reduce mortality rates, and better manage the leading drivers of health care costs.
- Attracting and retaining high-performing Medicaid providers including medical, behavioral health, dental, and long-term services and supports providers to participate in team based, collaborative, and high-value care.

Note: The State should submit the final version to CMS as soon as it is finalized. To be in compliance with 42 C.F.R. § 438.340(c)(2) the quality strategy must be updated no less than once every 3-years.