

**Item 6. D. Medicaid 1115 Waiver**

- Waiver includes three primary components:
  - Statewide Medicaid Managed Care Delivery System
  - Uncompensated Care
  - Delivery System Reform Incentive Payment (DSRIP)
  
- DSRIP - First Years of Waiver – DY 1-6 (2011-2016)
  - Emphasis on projects to improve access to care and quality health outcomes
  
- DSRIP - Five Year Renewal of Waiver – DY7-11 (2017-2022)
  - No longer identified as projects
  - Emphasis on achievement of specific quality health outcomes
  - Categories A, B, C, and D Reporting
  
- DSRIP Transition (2021 – ongoing)
  - Directed Payment Programs (DPP)
  - Public Health Provider Charity Care Program (PHP-CCP)
  - CMS-HHSC Negotiations
  
- Health District DSRIP Quality Measures (Projects)

Key Acronyms:

CMS – Center for Medicare and Medicaid Services (federal government)

CY – Calendar Year

DPP – Directed Payment Programs

DSRIP – Delivery System Reform Incentive Payment

DY – Demonstration Year (October 1 – September 30)

HHSC – Health and Human Services (state Medicaid agency)

RHP – Regional Healthcare Partnership