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Health and Human
Services

Aligning Technology by Linking Interoperable Systems (ATLIS) for Client Health Outcomes

Second Quantified Assessment Resources

MCS Quality and Program Improvement

HHSC Provider Finance Department

The ATLIS Program



ATLIS is a managed care organization (MCO) incentive program under the authority of [42 CFR 438.6\(b\)2](#), to expand the exchange of electronic health information between MCOs and providers.



ATLIS aims to improve Medicaid client outcomes and advance alternative payment models.



ATLIS provides an estimated \$900 million in potential incentive funding in fiscal year 2025.



ATLIS requires MCOs to **submit by July 15, 2025**, a second Quantified Assessment of MCO and in-network provider connectivity status.



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Quantified Assessments

Health Information Exchange (HIE) connectivity and use of data for the MCO and the MCO's in-network hospitals:

- Exchange of Admission Discharge Transfer (ADT) notifications and connections to Emergency Department Encounter Notification (EDEN) system
- Exchange of Consolidated Clinical Document Architecture (C-CDA) data
- Connections with regional, national, or private HIEs; THSA/HIETexas; and direct connections between providers and MCOs
- How MCOs and hospitals are using electronic health information to improve care
- Barriers, actions, and priorities with electronic health information
- Future plans to connect to EDEN

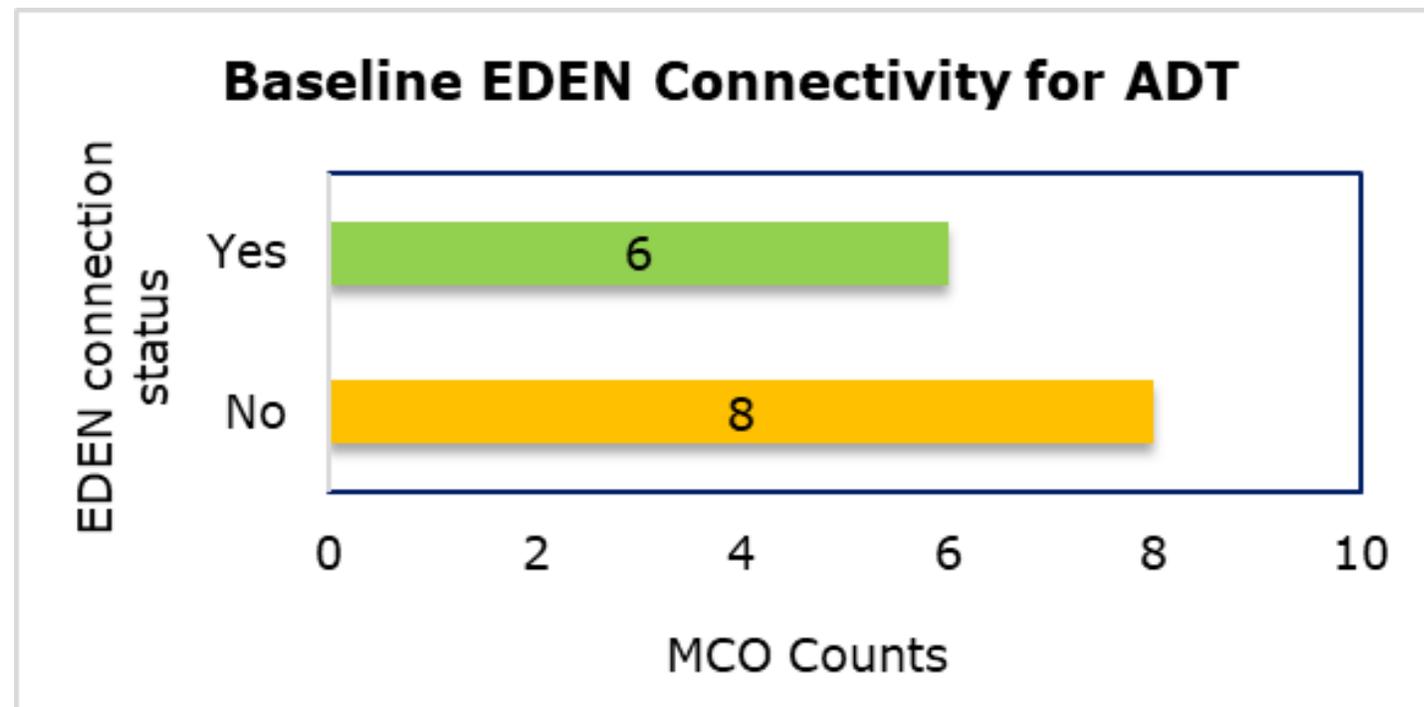


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First Quantified Assessment – Preliminary Findings

MCO Survey - ADT Data Notification – HIETexas

Of the 14 participating MCOs, six reported receiving ADT notifications from EDEN through a connection with HIETexas.

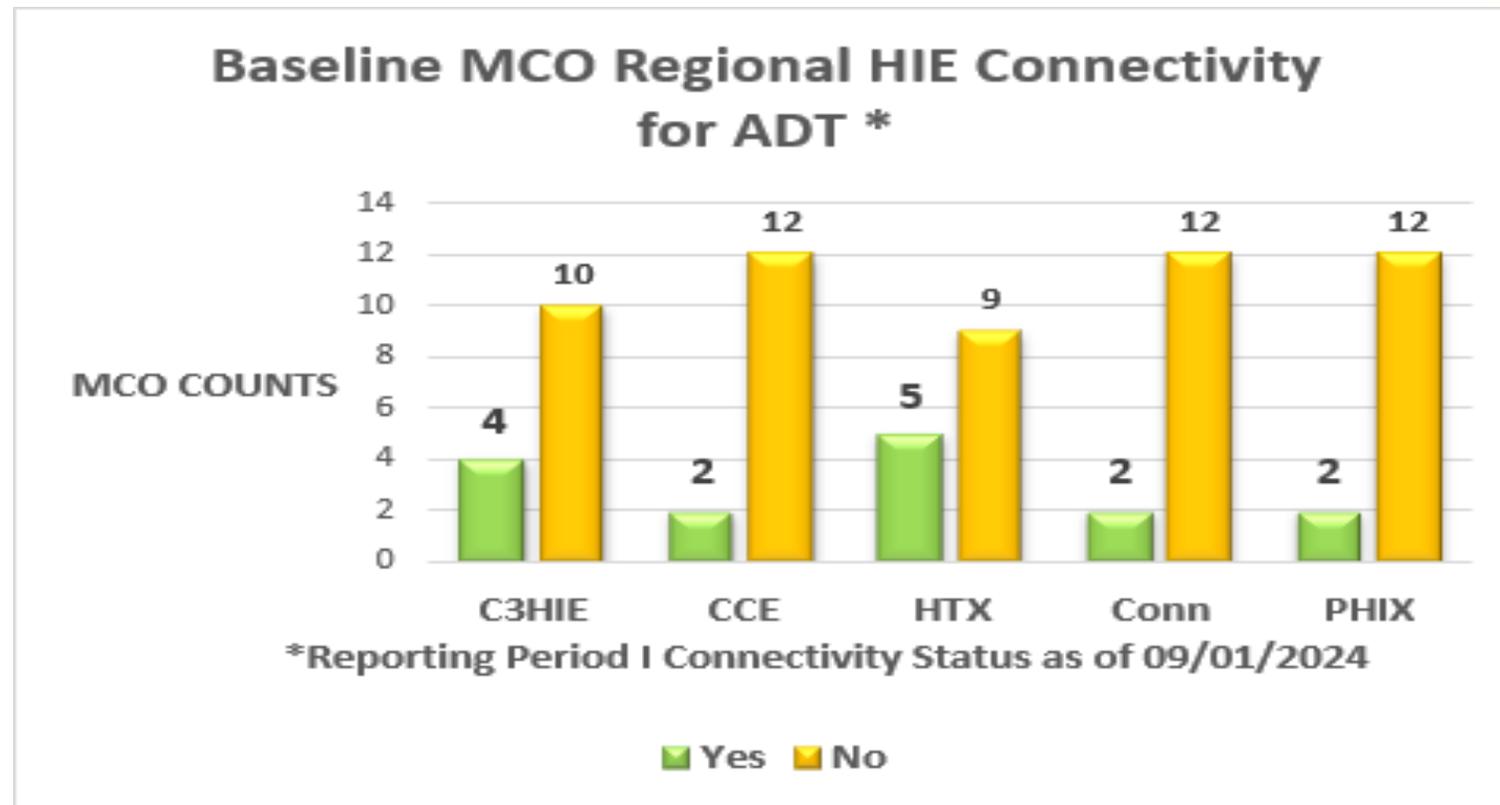


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First Quantified Assessment – Preliminary Findings

MCO Survey - ADT Data Notification – Regional HIEs

MCOs receive ADT data through all the Texas regional HIEs, with Healthconnect Texas (HTX), and Connected Care Exchange (CCE) being reported as the most frequently used.

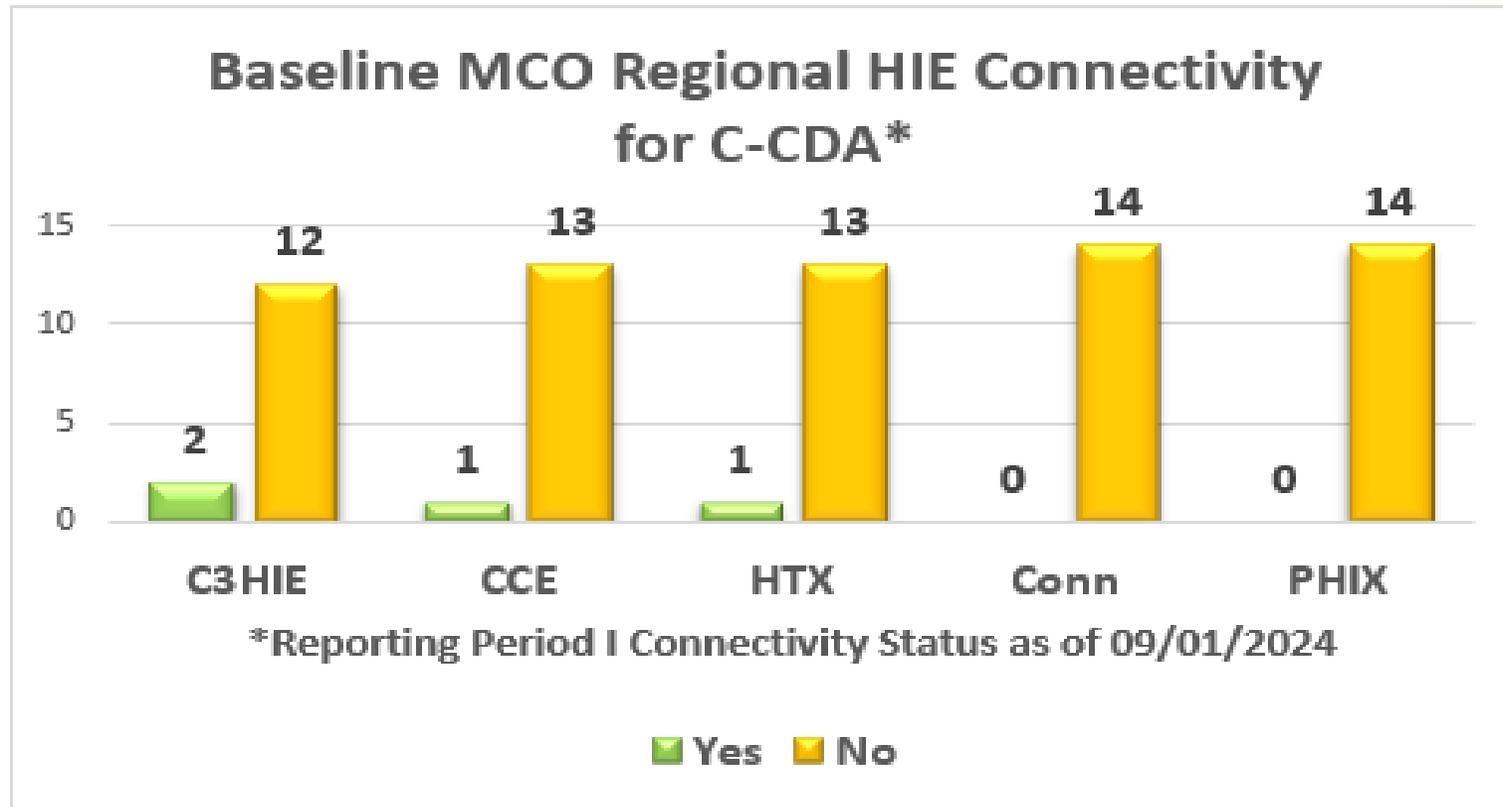


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First Quantified Assessment – Preliminary Findings

MCO Survey - C-CDA Data Notification

Overall, only a few MCOs reported receiving C-CDA data through Texas regional HIEs, with C3HIE, CCE and HTX being the only regional HIEs utilized



First Quantified Assessment – Preliminary Findings

In Network Hospital Survey

ADT Data HIE connectivity

- 17% of hospitals share through Healthconnect Texas (HTX)
- 10% share through C3HIE
- **64% not currently sharing ADT data through regional HIEs**
- **57% not currently sharing ADT data via the EDEN system**

C-CDA sharing

- 17% use HTX
- 11% use C3HIE
- 2% Connected Care Exchange (CCE)
- 1% PHIX
- **69% do not share C-CDA data through HIEs**



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First Quantified Assessment – Preliminary Findings

Barriers

- Technical: Vendor limitations, security concerns, bandwidth and resource issues
- Operational: Provider engagement, data quality concerns
- Systemic: lack of standardization across HIEs

Future Priorities

- Enhancing data quality and completeness
- Expanding provider engagement strategies
- Preparing for digital quality implementation



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Second Quantified Assessment Resources

Companion Guide

- Developed to assist MCOs in completing the ATLAS Quantified Assessment accurately, following all the instructions provided to ensure compliance and ATLAS payment eligibility.
- Comprehensive completion instructions
- Common error prevention tips

Updated Data Reporting Tool

- Streamlined to add the summary columns for reviewing efficiency and provide transparency into milestone achievement.
- Pre-populated milestone tracking
- Real-time completion indicators



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ATLIS Performance Criteria

- **Year 1:** Quantified Assessment of MCO baseline HIE connectivity and interoperability by certain measures.
- **Year 2:** Increases over baseline Year 1 measures for MCOs and their in-network hospitals.
- **Year 3:** Progress over Year 2 including adding measures demonstrating MCOs use of electronic health information.
- **Years 4 and 5:** Increase over previous year achievement levels including measuring performance on quality measures impactable by HIE.



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ATLIS Year 2 – Programmatic

Key Focus Areas for Assessments

- Connectivity Growth
- Early Implementation
- Quality Preparation
- Workflow Integration



ATLIS Year 2 – Financial

The total funding amount will be maintained at Year 1 amounts (about \$930 million)

Planned Changes

- Private Institution of Mental Diseases (IMD) added as a new class with which milestones are associated
- Incentive percentages will be more uniform across SDAs and managed care programs



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Next Steps

HHSC is developing a streamlined Year 2 assessment.

MCO Input Needed:

- Feedback request – via MCO notice and survey expected August 2025
- Focus on challenges
- Suggestions for measuring meaningful progress

Goal: Year 2 Framework that is fair, achievable, and builds towards measurable quality outcomes in future program years.



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Thank you!

Submit comments and questions to
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