

Pay For Performance (P4P) Measures – Better Results for Members

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Pay For Performance (P4P) Measures – What are they?

P4P measures are set up in the contract of each Managed Care Plan (MCP) for each fiscal year (June-July). Areas of focus are selected, and 5-6 specific goals are set for MCPs to meet/exceed during the fiscal year under review. If an MCP meets or exceeds any of the goal set within their contract for that fiscal year, the MCP is then paid the amount identified within their contract for meeting that goal.

P4P goals are set up to:

- “Raise the bar” over minimum basic contract requirements
- Require improvement over previous performance
- Design plans for long-term improvement



Past P4P Measures

In prior years, many of the P4P measures implemented focused on MCP operations and contract standards

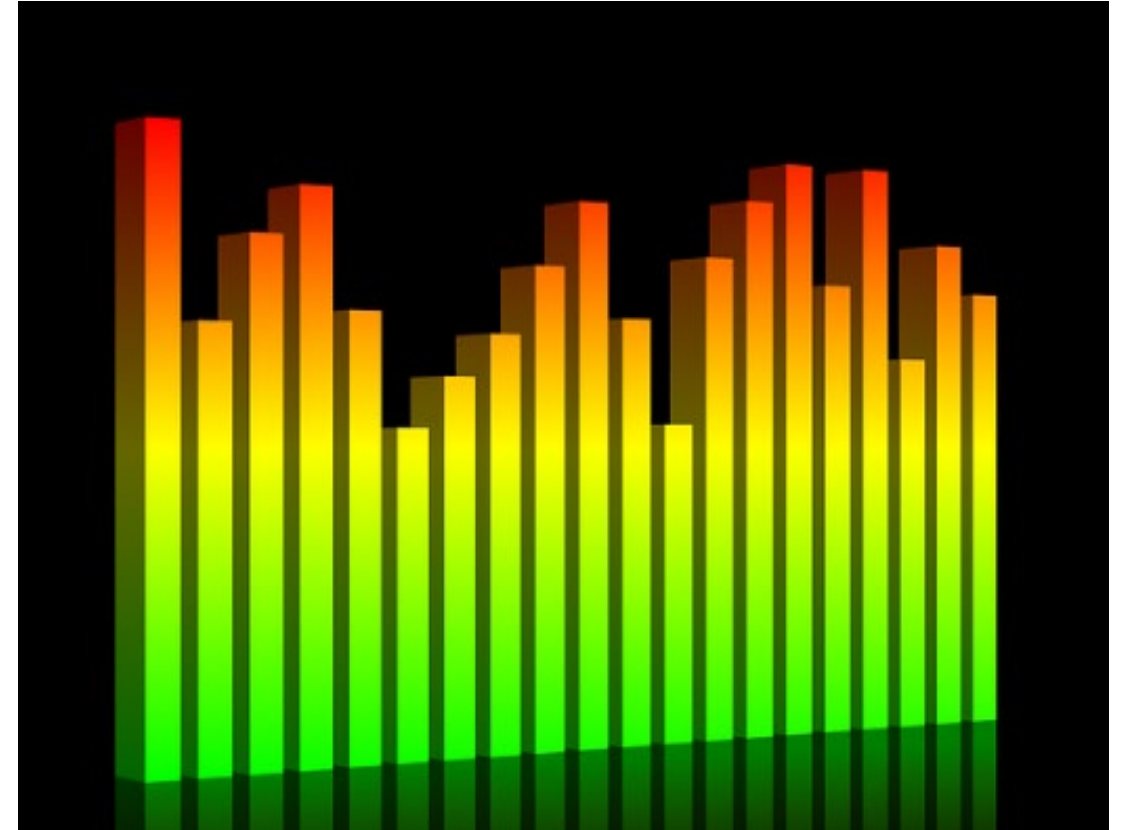
Examples:

- Timeliness of Claims Processing
- Timeliness of Prior Authorizations
- Timeliness of Provider Credentialing
- Timeliness of Appeal Processing
- Encounter Data Reconciliation with Financial Reports

P4P Measures – Refocusing on Quality for Members

In the last 2 years, the focus for P4P measures has shifted from MCP operations to member outcomes. While ensuring that MCPs are not just meeting but exceeding contract standards, HHS has been looking for improvements MCPs could make that will have a direct impact on members.

During ongoing review of MCP reports, HHS has noted data trends that identified room for improvement in certain areas. HHS has developed P4P measures based on these trends.



Examples of Recent Quality Based P4P Measures

1. Members Receiving Follow Up After Hospitalizations for Mental Illness
 - Within 7 days for children
 - Within 30 days for children
 - Within 7 days for adults
 - Within 30 days for adults
2. Members Receiving Prenatal Care (first trimester)
3. NEMT Helpline Service Level (Answering Member Calls within 30 Seconds)
4. NEMT – Members waiting over 15 minutes for Pick up

Why these measures?

Members Receiving Follow Up After Hospitalizations for Mental Illness

- Within 7 days for children
- Within 30 days for children
- Within 7 days for adults
- Within 30 days for adults

Members Receiving Prenatal Care (first trimester)

There has been an increased focus on behavioral health services (for both children and adults) and early child health services in recent years. This interest led HHS to identify existing measures that could be used to encourage improvements in member use of these services. These two sets of measures are already submitted by the MCPs on an annual basis, and so MCPs are now able to earn financial incentives by increasing the number of members receiving these services.

Why these measures?

NEMT Helpline Service Level (Answering Member Calls within 30 Seconds)

During review of regular MCP reporting, HHS noticed a trend of MCPs not meeting the required monthly 80% service level for their NEMT helpline. To encourage better provision of service to members calling this helpline, HHS set up a P4P measure in which the MCPs would earn a financial incentive by achieving an 82% service level. As the number of months meeting the 82% service level increases, the financial incentive would also increase.

NEMT – Members waiting over 15 minutes for Pick up

Ongoing review of MCP reporting on grievances revealed that one of the consistent top 10 reasons listed for filing a grievance was driver delay or no-show for transportation services. To promote better provision of this service to members, HHS set up a P4P measure in which the MCPs would earn a financial incentive for reducing the percentage of members waiting over 15 minutes by 5% or more over the course of the fiscal year.

SFY2023 Preliminary results (still under review)

P4P MEASURE	GOAL	AGP SCORE	ITC SCORE
Follow -up After Hospitalization for Mental Illness - within 7 days for child	SFY23 results must be at least 1.00% increase over CY21 results	CY21 results - 63.54%, SFY23 results - 72.34%, Percentage change - 13.84%	CY21 results - 58.71%, SFY23 results - 69.00%, Percentage change - 17.52%
Follow -up After Hospitalization for Mental Illness - within 30 days for child	SFY23 results must be at least 1.00% increase over CY21 results	CY21 results - 81.85%, SFY23 results - 86.72%, Percentage change - 5.94%	CY21 results - 82.58%, SFY23 results - 86.14%, Percentage change - 4.31%
Follow -up After Hospitalization for Mental Illness - within 7 days for adult	SFY23 results must be at least 1.00% increase over CY21 results	CY21 results - 54.07%, SFY23 results - 61.00%, Percentage change - 12.81%	CY21 results - 40.55%, SFY23 results - 49.20%, Percentage change - 21.33%
Follow -up After Hospitalization for Mental Illness - within 30 days for adult	SFY23 results must be at least 1.00% increase over CY21 results	CY21 results - 71.65%, SFY23 results - 76.48%, Percentage change - 6.74%	CY21 results - 60.49%, SFY23 results - 67.94%, Percentage change - 12.31%
Prenatal and Postpartum Care: Timeliness of Prenatal Care	SFY23 results must be at least 1.00% increase over CY21 results	CY21 results - 81.51%, SFY23 results - 60.17%, Percentage change - -26.18%	CY21 results - 75.43%, SFY23 results - 73.84%, Percentage change - -2.10%
Service Level for NEMT Helpline	Achieve an 82% service level for at least one month of SFY23	July 2022 - 89.74%	July 2022 - 90.54%
		August 2022 - 86.89%	August 2022 - 86.32%
		September 2022 - 86.29%	September 2022 - 85.31%
		October 2022 - 85.88%	October 2022 - 87.78%
		November 2022 - 83.33%	November 2022 - 88.98%
		December 2022 - 84.00%	December 2022 - 92.79%
		January 2023 - 82.28%	January 2023 - 84.30%
		February 2023 - 86.51%	February 2023 - 91.84%
		March 2023 - 89.22%	March 2023 - 90.02%
		April 2023 - 84.34%	April 2023 - 85.06%
		May 2023 - 85.49%	May 2023 - 86.56%
		June 2023 - 95.88%	June 2023 - 96.22%
Wait Time for NEMT Members	SFY23 total percentage must be a reduction of at least 5% from SFY22 total percentage - 2.8815644%	1.0459042%	1.1564718%

Using P4P for more than one year

These measures were used in both SFY2023 and SFY2024 – looking for continued ongoing improvement in service provision to members

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In the works.....

1. Timely Prior Authorization (PA) Decisions

- MCPs will need to send decisions regarding standard Prior Authorization decisions within seven (7) calendar days of receiving the request

2. Potential HEDIS measures

- Improving monitoring of children and adolescents on certain medications
- Continuing measure on improving Prenatal Care

3. Project Plans

- Requiring MCPs to design and implement projects to improve member education and access to types of services (Behavioral Health, Long Term Services and Supports, etc.)
- MCP projects must include specific required components and meet design and implementation deadlines to earn withhold
- After implementation, MCPs will provide ongoing reports to HHS on progress toward goals