



ADVANCING INTEGRATED HEALTHCARE

PCMH Kids Cohort 3 2020-2021 Incentive Payment

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CONTRACTING COMMITTEE MEETING JUNE 2, 2020

2020 CONTRACTING COMMITTEE AGENDA

Ongoing Sustainability Payment

Current Incentive Payment Structure

CAHPS

Clinical Quality Measures

Utilization Measures

Incentive Payment Recommendation

Ongoing Sustainability Payment

- Adult Cohort 5 and PCMH Kids Cohort 2 PCMH practices will be ending their 3-year contract with the health plans on 6/30/2020.
- PCMH practices that meet the OHIC PCMH Rhode Island definition are eligible for commercial health plan sustainability payments effective 7/1/2020.
- CTC-RI/PCMH Kids leadership has worked with EOHHS to calculate sustainability payments into the MCO rates for PCMH Kids practices.
- Goal: PCMH Kids Cohort 2 should continue to receive PMPM sustainability payment without interruption post completion of the CTC/PCMH Kids Contract.

Current PCMH Kids Cohort 3 Performance Standards for Incentive Payment Structure

Incentive Payment: \$0.50 pmpm

Meet 3 out of 4 performance measure thresholds

Clinical Quality: 2 can be clinical quality measures

Customer Experience: 1 can be CAHPS measure
(Defined as meeting 2 out of 3 of CAHPS measures)

Utilization: 1 can be ED utilization (5% favorable difference via method of using rolling years to compare the change in trends of CTC practices to the comparison of non PCMH group)

CAHPS Survey

- The child CAHPS survey has a look back period of 6 months. Given the timing of the survey, patients will be asked about their patient experience during the months of **March 2020 through September 2020**.
- COVID-19 pandemic likely to impact results of survey & results will not be comparable to prior year.
- CAHPS survey does not have validated questions regarding telemedicine.
- The cost of fielding the CAHPS survey is approximately \$32,000 and involves practice resources to provide patient information reports.
- For NCQA Patient Centered Medical Home recognition, practices need to monitor patient experience but this can be done without using a certified NCQA certified vendor.
- Data and Evaluation Committee recommendation is to not field the CAHPS survey for PCMH Kids Cohort 3 practices because the results would not be comparable with previous year due to COVID-19.**

Clinical Quality Measures

- For reporting in 2020, OHIC has decided to move all measures to reporting-only status as it anticipates that COVID-19 will have a significant impact on quality measure performance.
- **Data and Evaluation Committee recommendation is to follow OHIC's recommendation for reporting only on Clinical Quality Measures.**

ED Utilization

- 2020-2021 contract adjudication ED Utilization measurement periods are July 2018-June 2019 compared to July 2019-June 2020.
- ED Utilization measurement is not likely to be a valid measure for both July 2019 – June 2020 and July 2020 – June 2021 time periods due to COVID-19.
- **CTC-RI's / PCMH Kids recommendation is to eliminate ED Utilization** from PCMH Kids Cohort 3 Incentive Payment Structure due to potential COVID-19 impact on results.

Consistent with national data, RI data from KIDSNET shows a corresponding decline in immunization rates and lead screening rates:

Number of Childhood Vaccines Administered, Rhode Island, 2019-2020									
	March			April			Total		
Vaccine Group	2019	2020	% change	2019	2020	% change	2019	2020	% change
Hepatitis B	3907	3441	-11.9%	3717	3122	-16.0%	7624	6563	-13.9%
DTaP/DT/Tdap/Td	5801	4225	-27.2%	5753	3332	-42.1%	11554	7557	-34.6%
HPV	1959	1140	-41.8%	2249	396	-82.4%	4208	1536	-63.5%
Hepatitis A	2553	1532	-40.0%	2651	1308	-50.7%	5204	2840	-45.4%
Hib	2781	2240	-19.5%	2663	2109	-20.8%	5444	4349	-20.1%
Influenza	4317	4529	4.9%	2150	1200	-44.2%	6467	5729	-11.4%
MMR	2053	1247	-39.3%	2433	972	-60.0%	4486	2219	-50.5%
MenACWY	1760	1011	-42.6%	1903	329	-82.7%	3663	1340	-63.4%
MenB	896	650	-27.5%	926	235	-74.6%	1822	885	-51.4%
Other	57	60	5.3%	57	5	*	114	65	-43.0%
Pneumo	3674	3117	-15.2%	3536	2846	-19.5%	7210	5963	-17.3%
Polio	3960	3063	-22.7%	3792	2518	-33.6%	7752	5581	-28.0%
Rotavirus	1750	1513	-13.5%	1617	1432	-11.4%	3367	2945	-12.5%
Varicella	2185	1287	-41.1%	2382	980	-58.9%	4567	2267	-50.4%
TOTAL	37653	29055	-22.8%	35829	20784	-42.0%	73482	49839	-32.2%
Source: RIDOH, Center for Health Data and Analysis, KIDSNET							last updated 5/15/2020		
* % may be an unstable estimate due to small numbers									

Recommended Incentive Payment Structure for 2020-2021 Performance Period

- Following OHIC's guidance, practices continue to report clinical quality measures (with no incentive targets to meet) and deliver on other deliverables outlined on the CTC-RI/PCMH Kids milestone document.
- In lieu of CAHPS survey & ED Utilization, PCMH Kids Cohort 3 would receive performance improvement incentive (\$0.50 pmpm) based on developing, implementing and meeting deliverables identified in the Quality Improvement Immunization Work Plan.
 - Incentive payment 75% upfront; 25% for meeting goal
 - Goal: MMR immunization for school age children with 10% prior year by December 31, 2020*. Adolescent Medicine may need to target adolescent immunizations for incentive payout.
 - Funding: BCBSRI pledge of funding (\$71,750) + re-allocate CAHPS survey spend (\$32,000) to financially support Learning Network and Practice Facilitation Services.

*may need to be adjusted based on Governor's Task Force.