

Provider Notice

To: Mental Health Outpatient Clinics and Partial Hospitalization Programs – Capital Area (CABHC) contract
From: Scott Daubert, PhD, VP Operations
Date: October 1, 2018
Subject: AD 18 105 Capital Area Performance Incentive Payments

On behalf of Capital Area Behavioral Health Collaborative (CABHC) and PerformCare, I am pleased to notify you that we are revising and extending the performance incentive program initially outlined in PerformCare Provider Notice AD 17 102. This program provides a value-based financial incentive to Mental Health Outpatient Clinics and Mental Health Partial Hospitalization Programs to meet the follow-up standard for Members discharged from psychiatric inpatient settings. This revised financial incentive will be in effect beginning October 1, 2018 and will be in place for the remainder of the 2018-19 state contract year, covering the final 3 quarters of the contract year. The first quarter of the 2018-19 contract year will continue to provide the original incentive (see AD 17 102 below).

The revised incentive will be administered according to the following revised criteria:

- If provider 7-day follow up percentage is <50%, the bonus incentive per qualifying follow up appointment will not be applied (\$0).
- If provider 7-day follow up percentage is >=50% to <80%, the bonus incentive per qualifying follow up appointment will remain \$150.
- If provider 7-day follow up percentage is >=80% to 100%, the bonus incentive per qualifying follow up appointment will be increased to \$200.

Provider-specific follow-up reports will be provided on a quarterly basis.

Provider Notice

To: Mental Health Outpatient Clinics and Partial Hospitalization Programs – Capital Area (CABHC) contract
From: Scott Daubert, PhD, VP Operations
Date: June 15, 2017
Subject: AD 17 102 Capital Area Performance Incentive Payments

On behalf of Capital Area Behavioral Health Collaborative (CABHC) and PerformCare, I am pleased to notify you of a new program that provides a value-based financial incentive to Mental Health Outpatient Clinics and Mental Health Partial Hospitalization Programs to meet the follow-up standard for Members discharged from psychiatric inpatient settings. This financial incentive will be in effect beginning July 1, 2017 and is expected to be in place for the 2017-18 state contract year at a minimum.

The payment mechanism will be the Retroactive Provider Rate Adjustment Process outlined in OMHSAS Policy Clarification #03-2012. Approval for this program is pending from OMHSAS and not yet granted. Nevertheless, we anticipate approval in the near future and wanted to provide you with the details of this new program. We strongly encourage you as providers to establish procedures that will support your successful engagement in this program.

The designated quality performance measure that will be the basis for the performance incentive payments will be the ability of outpatient and partial hospitalization providers in successfully meeting the Healthcare Effectiveness Data and Information Set (HEDIS) Follow Up after Hospitalization measure. HEDIS is a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service. Use of the HEDIS Follow Up after Hospitalization measure(s) as the target of a provider value based payment provides several advantages:

- It is a nationally used, well known behavioral health performance measure.
- It has an OMHSAS approved data methodology that will be followed.
- Semi-annual performance reports and payments will be forwarded to the providers by PerformCare. The intent is to provide reports and payment every 6 months (after a sufficient claims runout period). The first payment period will be based on claims submitted July-December 2017. Providers can also track their own progress on this measure for more timely feedback on performance.
- It ties value based payment to an area of relative weakness and needed improvement in the provider network.

Most importantly, this provider incentive will be paid to the providers who meet the HEDIS 7-day standard, regardless of whether overall surplus funds are available. In other words, payment will be guaranteed to the providers regardless of the overall financial performance of the HealthChoices program in order to make the incentive as strong as possible. The incentive will further be concentrated by focusing only on licensed mental health outpatient clinics / partial hospitalization programs and focusing on improving the 7-day national HEDIS measure. For each psychiatric inpatient discharge in the review period, a set dollar amount will be paid to each qualifying outpatient appointment delivered within 7 days. However, the same provider

can only qualify for one incentive payment per case, even if multiple services are delivered within 7 days. Subsequent appointments will not be paid the incentive, even if they also meet the standard. When two different providers deliver a qualifying outpatient appointment within 7 days, the incentive will be paid to both.

The upcoming contract year will be divided into two 6-month measurement periods (MH inpatient discharges July 1 through December 31, 2017 and January 1 through June 30, 2018). Please see *Attachment 1: HEDIS 2016 Follow Up After Hospitalization Technical Specifications – Qualifying OP Codes* for detail on which outpatient appointments qualify. Reports of performance and the incentive payment earned will be sent to qualifying mental health outpatient clinic and partial hospitalization providers following the end of each semi-annual period and after a sufficient claims runout period. **For each qualifying outpatient / partial hospitalization claim, an additional \$150 incentive payment will be earned.**

Thank you for your continued participation in the HealthChoices program and please feel free to contact your Account Executive or me directly at 717-671-6535 or sdaubert@performcare.org with any questions.

cc: James Laughman, PerformCare
Scott Suhring, Capital Area Behavioral Health Collaborative
PerformCare Account Executives

*Attachment 1: HEDIS Follow Up After Hospitalization Technical Specifications – Qualifying OP Codes
(Limited to base codes used on PerformCare rates schedules. Appropriate additional modifiers may need to be included on claims to PerformCare.)*

| CPT / HCPCS | POS (if applicable) | Provider Type / Specialty |
|---|---------------------|---------------------------|
| 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90847, 90853, 90870, 90875. H0034, H2010. | 49 | 08/110 |
| H0035 | 52 | 11/113 11/114 |