

Net SFY 2020 Performance Withhold Program Model

Managed Care Performance Withhold Program Payout Model

This is based on a 3% withhold and 14 total HEDIS measures (see page 2).

Standard Payout Based on Each HEDIS Measure Will Be Made if One of the Following Conditions are Met, Whichever is Most Beneficial to the Health Plan

Percentage of Withhold Portion to be Paid Out	Percentile Requirement*	Number of Percentage Points in Performance Year compared to Baseline Year
150%		6.00 or more percentage points above baseline
125%		4.00 to less than 6.00 percentage points above
		baseline
100%	At or above 50 th percentile	2.00 to less than 4.00 percentage points above
		baseline
75%	At or above the 33.33th percentile	1.50 to less than 2.00 percentage points above
	but below the 50 th percentile.	baseline
50%		1.00 to less than 1.50 percentage points above
		baseline
25%		0.50 to less than 1.00 percentage points above
		baseline

Supplemental Payout Will Be Made if One of the Following Conditions are Met

Percentage of Withhold	Percentile Requirement*	Number of Percentage Points in Performance	
Portion to be Paid Out		Year compared to Baseline Year	
50% aggregate of the 3%	Any 5 or more measures at or above		
withhold (i.e., 1.50%) will	50 th percentile.		
be applied to the payout.			

OR

25% aggregate of the 3%	Any 3 or more measures at or above	
withhold (i.e., 0.75%) will	the 33.33th percentile.	
be applied to the payout.		

Definitions

*Percentile requirements refer to the National Committee for Quality Assurance (NCQA) Quality Compass percentile rankings for Managed Care Organizations for the measurement (performance) year being evaluated.

After the Standard Payout percentage is determined based on the above criteria, each health plan can earn an additional Supplemental Payout based on the above criteria. The combined, total payout for the Standard Payout and Supplemental Payout shall not exceed the 3.00% total withhold percentage set aside for each health plan.

Only one Supplemental Payout will be paid in the event both 25% aggregate and 50% aggregate are achieved. The health plan will receive the most beneficial of the two. These amounts will not be combined to equal a payout of 75% aggregate.

Use standard rounding (1.487 = 1.49) to arrive at a final value out two decimal places for both baseline and performance year as well as comparisons to benchmarks.

Percentage points are different from a percent increase; a two-percentage point increase over 10% is 12%.

For the State Fiscal Year 2020 contract, the baseline is based on health plan specific Calendar Year 2018 rates and the measurement (performance) year is based on health plan specific Calendar Year 2019 rates. In future contract periods, the baseline year will be reset reflect the year prior to the measurement year.



Performance Withhold Program Measures

Category	Portion of Total Withhold per Category	Acronym	Healthcare Effectiveness Data and Information Set (HEDIS) Measure	Portion of Total Withhold Per HEDIS Measure
Access to Care for Children	1.00%	W15	Well-Child Visits in the First 15 Months of Life (6+ Visits): Percentage of members who turned 15 months old during the measurement year and who had six or more well-child visits with a PCP during their first 15 months of life.	0.25%
		W34	Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life: Percentage of members 3–6 years of age who had one or more well-child visits with a PCP during the measurement year.	0.25%
		AWC	Adolescent Well-Care Visits: Percentage of enrolled members 12–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.	0.25%
		ADV	Annual Dental Visits (Total): Percentage of members 2–20 years of age who had at least one dental visit during the measurement year.	0.25%
Screening & Immunizations for Children	0.75%	CIS	Childhood Immunization Status (Combo 10): Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.	0.25%
		IMA	Immunizations for Adolescents (Combo 1): Percentage of adolescents 13 years of age who had one dose of meningococcal conjugate vaccine, one tetanus, diphtheria toxoids and acellular pertussis (DTaP) vaccine by their 13th birthday.	0.25%
		LSC	Lead Screening in Children: Percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.	0.25%
Chronic Disease Management - Children	0.25%	ММА	Medication Management for People With Asthma (5-11 Years - 75%): Percentage of members 5–11 years of age during the measurement year who were identified as having persistent asthma and remained on an asthma controller medication for at least 75% of their treatment period.	0.15%
			Medication Management for People With Asthma (12-18 Years - 75%): Percentage of members 12–18 years of age during the measurement year who were identified as having persistent asthma and remained on an asthma controller medication for at least 75% of their treatment period.	0.10%
Chronic Disease Management - Adults	0.25%	CDC	Comprehensive Diabetes Care: Percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had HbA1c Control (<8.0%).	
Women's Health	0.50%	PPC	Timeliness of Prenatal Care: Percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester, on the enrollment start date or within 42 days of enrollment in the organization.	0.20%
			Postpartum Care: Percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.	0.20%
		CHL	Chlamydia Screening in Women (Total): Percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.	0.10%
Behavioral Health	0.25%	FUH	Follow-Up After Hospitalization for Mental Illness (30 Days): Percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental illness diagnoses and who had a follow-up visit with a mental health practitioner within 30 days after discharge.	0.25%
		UOP	Use of Opioids from Multiple Providers. This measure assesses the rate of health plan members 18 years and older who receive opioids from multiple prescribers and multiple pharmacies (to monitor for possible inclusion in future years).	0.00%

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