

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



CATHY BETTS
DIRECTOR
KA LUNA HO'OKELE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE


STATE OF HAWAII
KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELAWE KANAKA
Med-QUEST Division
Health Care Services Branch
P. O. Box 700190
Kapolei, Hawaii 96709-0190

June 19, 2023

MEMORANDUM

MEMO NO.
CCS-2309

TO: Community Care Services Behavioral Health Organization

FROM: Judy Mohr Peterson, PhD 
Med-QUEST Division Administrator

SUBJECT: CCS PAY FOR PERFORMANCE GUIDANCE FOR MEASUREMENT YEAR JULY 2023 TO JUNE 2024

The purpose of this memorandum is to provide guidance and description of algorithm through which BHO performance will be evaluated, scored, and final payments will be calculated for the Community Care Services (CCS) Pay for Performance (P4P) program for the measurement year July 2023 to June 2024 (MY 2024).

The P4P program will assess CCS Behavioral Health Organization (BHO) performance on key Quality Improvement indicators for their associated CCS populations, as outlined in the CCS RFP-MQD-2021-010 (CCS contract). The P4P measure was selected in alignment with Med-QUEST's Quality Improvement Strategy and relevance to the CCS managed care populations. MQD reserves the right to update or change the measure list as well as the number of total measures included in the P4P program due to measure revisions or retirements, as strategic priorities change, or as statewide performance goals for measures are reached.

Methodology

Measures will be scored based on five milestones between a minimum performance standard and the performance measure target. The BHO will earn P4P funds based on achieving performance milestones until they meet or exceed the performance measure target.

Table 1 displays the performance measure included in the P4P program for MY 2024.

Table 1—P4P Performance Measures

Measure	Specification
Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)	Assesses adults 18 years of age and older who have schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.

Financing

The financing of the program will be an incentive arrangement (bonus) described in Section 5.1.K.5 of the CCS contract that can be earned in addition to regular capitation payments. The bonus amount for MY 2024 will be calculated based on one percent of capitation payments attributed to the BHO. This is not a withhold program.

Please refer to Table 2 for a complete list of milestones, associated percent earnings, and the related calculations.

Table 2—CCS P4P Program Milestones Calculations

LEVELS	MILESTONE TARGET	% EARN	MILESTONE CALCULATION
1	NCQA 75 TH percentile	20%	NCQA 75 th percentile
2	1/2 Gap between 75 th and 90 th	40%	$75^{th} + ((90^{th} - 75^{th}) / 2)$
3	NCQA 90 TH percentile	60%	NCQA 90 th percentile
4	1/2 Gap between 90 th and 95 th	80%	$95^{th} + ((95^{th} - 90^{th}) / 2)$
5	NCQA 95 TH percentile	100%	NCQA 95 th percentile

Performance Targets for HEDIS Measure

The minimum performance standard is the NCQA Quality Compass 75th percentile. Scores below the 75th percentile will earn zero percent of the applicable P4P funds.

The performance measure target for HEDIS measures is the NCQA Quality Compass 95th percentile. Scores that meet or exceed the 95th percentile will earn 100 percent of the applicable P4P funds.

The version of NCQA’s Quality Compass used for target setting will be the version released by NCQA after the HEDIS performance measure submission is finalized on June 15th. (i.e.,

Measurement Year 2023 data is finalized on June 15th of 2024 and is used to create the Quality Compass data released in the Fall of 2024.)

If NCQA Quality Compass benchmarks are not available for a P4P measure, Med-QUEST will provide an alternate set of performance targets for evaluating P4P achievement.

P4P Payment Calculations

If there is only one measure in the P4P program, the measure will be worth 100% of the total P4P program value.

If there are multiple measures in the P4P program, the measures will be scored for the measurement period and then translated into a percentage of total earnings of the program value. Example: If there are 5 measures in the program and each measure is worth 20% of the total program value, the score for each measure will determine how much of the applicable measure's value (20% of total program value) was earned.

If any measures are not applicable for the entire measurement year, the measure year will be divided into sections based on the number of measures applicable to that timeframe and calculated separately. Then the P4P earnings for each timeframe are added together at the end of the calculation process to determine the total annual earnings.

Final P4P Earnings Determination

P4P earnings are calculated according to the following steps.

1. Score each measure according to the milestone and improvement bonus methodologies
2. Translate the score into a percentage of total earnings for the applicable timeframe (see Table 3).
3. Add the percentage of total earnings of each measure into a total percentage earned for the measurement period.
4. Multiply the total percentage earned by the P4P bonus amount to determine total earnings.

Conditional Methodology

Conditional methodology is designed to mitigate potential situations and challenges that could disrupt the P4P program. These extra methodologies only apply when the scenarios they are designed to mitigate are encountered.

Performance Measure Changes

Med-QUEST intends for this P4P methodology to remain in force for multiple years to streamline the P4P program and minimize delays in release of methodology, program participation, and results calculations. However, there are scenarios where Med-QUEST may opt to change one or more of the measures in the P4P program.

Conditions for changing P4P measures

1. A measure is no longer available due to reasons including retirement by the measure steward, changes in methodology, changes in clinical guidelines, or changes in healthcare policy and practice.
2. A measure is no longer appropriate for the P4P program due to reasons including changes in methodology, changes in clinical guidelines, or changes in healthcare policy and practice.
3. The BHO is performing well collectively on a measure and have resolved the health concerns or improved the health outcomes the measure was selected to address.
4. A measure no longer meets the needs of the Med-QUEST Quality Improvement Strategy.
5. A new measure that better meets the needs of the Med-QUEST Quality Improvement Strategy is identified.

If you have any questions, please contact Mr. Jon Fujii, Health Care Services Branch Administrator via email at jfujii@dhs.hawaii.gov.