112209 O3

Attachment 6 – QPPs

Quality Performance Program Measures – Contract Year Six

\*This is an example from the current MCO contract. This may not necessarily reflect the QPP for the awarded contract.

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| **Base Performance Requirement** | **40% Payment Threshold** | **Full Payment Threshold** | **% of Payment Pool** |
| **Claims Processing Timeliness - 15 Days:** Process and pay or deny, as appropriate, at least ninety percent (90%) of all claims for medical services provided to members within fifteen (15) days of the date of receipt. The date of receipt is the date the MCO receives the clean claim. | N/A | 95% within 10 business days | 5% |
| **Encounter Acceptance Rate:** Submitted encounters must be accepted ninety-five percent (95%) or greater by MLTC’s Medicaid Management Information System pursuant to MLTC specifications. | N/A | 98% | 10% |
| **Appeal Resolution Timeliness:** MCO must resolve each appeal, and provide notice, as expeditiously as the member’s health condition requires, within forty-five (45) calendar days from the day the MCO receives the appeal. | N/A | 95% within 20 days | 5% |
| **Breast Cancer Screening (BCS-AD):** Percentage of women ages fifty (50) to seventy-four (74) who had a mammogram to screen for breast cancer. | 53.93% | 56.72% | 10% |
| **Prenatal and Postpartum Care: Postpartum Care (PPC-AD):** Percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year that had a postpartum visit on or between seven (7) and eighty-four (84) days after delivery. | 76.4% | 78.35% | 7.5% |
| **Controlling High Blood Pressure (CBP-AD):** Percentage of beneficiaries ages eighteen (18) to eight-five (85) who had a diagnosis of hypertension and whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement year. | 62.53% | 66.79% | 10% |
| **Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD):** Percentage of beneficiaries age eighteen (18) and older (Combining age groups 18-64 and 65+) with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following: * **Initiation of AOD Treatment**. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within fourteen (14) days of the diagnosis
* **Engagement of AOD Treatment**. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within thirty-four (34) days of the initiation visit
 | Total AOD abuse of dependence Initiation 41.73%Total AOD abuse of dependence Engagement 11.03% | Total AOD abuse of dependence Initiation44.33%Total AOD abuse of dependenceEngagement13.86% | 7.5%7.5% |
| **Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH):** Percentage of adolescents ages twelve (12) to seventeen (17) who had an outpatient visit with a primary care practitioner (PCP) or obstetrician/gynecologist (OB/GYN) and who had evidence of the following during the measurement year: * Body mass index (BMI) percentile documentation
* Counseling for nutrition
* Counseling for physical activity
 | BMI71.43%Counseling for Nutrition61.87%Counseling for Physical Activity61.01% | BMI75.68%Counseling for Nutrition67.96%Counseling for Physical Activity 66.86% | 5%5%5% |
| **Prenatal and Postpartum Care: Timeliness of Prenatal Care (PPC-CH):** Percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October7 of the measurement year that received a prenatal care visit in the first trimester, on or before the enrollment start date or within forty-two (42) days of enrollment in Medicaid/CHIP. | 81.51% | 85.89% | 7.5% |
| **Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-CH):** Percentage of adolescents ages twelve (12) to seventeen (17) who had two (2) or more antipsychotic prescriptions and had metabolic testing:* Percentage of adolescents on antipsychotics who received blood glucose and cholesterol testing
 | Blood Glucose and CholesterolTesting:28.86% | Blood Glucose and Cholesterol Testing: 32.72%  | 7.5% |
| **Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH):** Percentage of adolescents ages twelve (12) to seventeen (17) who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.  | 67.45% | 70.93% | 7.5% |
| **Plan All-Cause Readmissions (PCR-AD):** For beneficiaries ages eighteen (18) to sixty-four (64), the number of acute inpatient and observation stays during the measurement year that were followed by an unplanned acute readmission for any diagnosis within thirty (30) days and the predicted probability of an acute readmission. Data are reported in the following categories: * Count of Index Hospital Stays (IHS)
* Count of Observed 30-Day Readmissions
* Count of Expected 30-Day Readmissions
 | Monitoring Metric Only | Monitoring Metric Only | NA |
| **Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD):** Percentage of Medicaid beneficiaries ages eighteen (18) to sixty-four (64) with an opioid use disorder (OUD) who filled a prescription for or were administered or dispensed an FDA-approved medication for the disorder during the measurement year. Five (5) rates are reported: * A total (overall) rate capturing any medications used in medication assisted treatment of opioid dependence and addiction (Rate 1)
* Four separate rates representing the following types of FDA-approved drug products:
	+ Buprenorphine (Rate 2)
	+ Oral naltrexone (Rate 3)
	+ Long-acting, injectable naltrexone (Rate 4)
	+ Methadone (Rate 5)
 | Monitoring Metric Only | Monitoring Metric Only | NA |

State may request supporting documentation for metrics, including but not limited to, claims extracts, denominator member list, supplemental information used in calculation, etc. If the plan does not supply the requested documentation, the measure target will be held to have not been met.