



Medicaid Pediatric Healthcare Recovery Program

Measure Description and Payment Schedule

Measure and Payment Overview

As part of the Medicaid Pediatric Healthcare Recovery Program, payments will be contingent upon providers submitting and demonstrating measurable improvement in the defined well care visit measure and through participation in psychosocial and behavioral health technical assistance (TA). Providers will report performance data using the HEDIS “Child and Adolescent Well Care Visits” measure to earn payment. The first payment will be made on a pay-for-reporting basis, the second and fourth payments will be earned through achieving targets or demonstrating improvement on this measure, and the third payment will be contingent on participation in 1 or more psychosocial and behavioral health technical assistance (TA) sessions. In addition, practices will be provided with information on their performance on lead screening and immunization rates (including COVID 19) and technical assistance to assist practices with improving performance on these activities. However, payment will not be contingent on performance on lead screening or immunizations.

Performance calculation:

Providers will be asked to use the [NCQA HEDIS measure](#) for “Child and Adolescent Well Care Visits” reporting numerators and denominators for the two age group categories according to the table below. CTC-RI, on behalf of EOHHS, will calculate a weighted percentage based on each practice’s age distribution. Targets will be calculated to put practices on a trajectory to achieve the HEDIS 75th percentile target on this measure by July 2022. The benchmark for each practice will either be the specified performance target or a 2.5% or 5% increase from the baseline reporting period, as shown below. Individual practice targets will be calculated after baseline data submission because the targets will be weighted by the proportion of each practice’s panel that falls into each of the two age groups.

Reporting schedule and targets:

Reporting Deadline	Reporting Period	Target/Action Item	Payment Basis	Payment Pool
3/15/2022	1/1/2021-12/31/2021	Submission of baseline data	Pay for Reporting	\$3.0 million
4/15/2022	4/1/2021-3/31/2022	Achievement of 75% of annual target OR \geq 2.5% improvement over baseline performance	Pay for Performance or Improvement	\$1.5 million
7/15/2022	7/1/2021-6/30/2022	Achievement of annual target OR \geq 5% improvement over baseline performance	Pay for Performance or Improvement	\$1.5 million
NA	By May 31, 2022	Attendance at 1 or more Psychosocial & Behavioral Health TA session.	Pay for TA participation	\$1.3 million



Submission Instructions

Practices will submit data for this measure using the online tool at <https://www.tfaforms.com/4965083> [tfaforms.com]. Please follow the instructions provided within the tool to submit data.

Measure Description

The measure is broken into two age groups and calculated on a rolling year basis.

Age Group 1: 3-11 years

- a. Numerator 1: Enter the number of RI Medicaid covered children aged 3-11 years who have had a well-child visit within the following reporting periods:
Baseline: 1/1/2021-12/31/2021
Report 1: 4/1/21-3/31/22
Report 2: 7/1/21-6/30/22
- b. Denominator 1: Enter the total number of RI Medicaid covered children who will be aged 3-11 years as of:
Baseline: 12/31/2021
Report 1: 3/31/22
Report 2: 6/30/22
- c. Target: 60.12% (Based on the HEDIS National Medicaid 75th percentile)

Age Group 1: 12-17 years

- a. Numerator 2: Enter the number of RI Medicaid covered children aged 12-17 years who have had a well-child visit within the following reporting periods:
Baseline: 1/1/2021-12/31/2021
Report 1: 4/1/21-3/31/22
Report 2: 7/1/21-6/30/22
- b. Denominator 2: Enter the total number of RI Medicaid covered children who will be aged 12-17 years as of:
Baseline: 12/31/2021
Report 1: 3/31/22
Report 2: 6/30/22
- c. Target: 54.04% (Based on the HEDIS National Medicaid 75th percentile)

If you suspect that you submitted any data for this measure incorrectly, please reach out to OHHS.PediRelief@ohhs.ri.gov to provide updated data.

Any questions can be directed to OHHS.PediRelief@ohhs.ri.gov.



Appendix: Illustrative Example of weighted calculation methodology

Please note, this will be calculated for each practice upon submission using [the online tool here](#). This example is provided for reference only; the online tool will perform the calculations automatically.

The Child and Adolescent Well Visit measure is calculated separately for different age groups. Therefore, the HEDIS 75th percentile is calculated separately for each age group. In order to reduce administrative complexity and ensure fairness across practices with different age distributions in their patient panels, EOHHHS will calculate each practice's own weighted 75th percentile target for this program.

For example:

The HEDIS 75th percentile for the 3-11 age group is 60.12%. The HEDIS 75th percentile for the 12-17 age group is 54.04%.

Suppose a practice, "ABC Pediatrics," had the following age distribution:

Number of patients age 3-11: 806
Number of patients age 12-17: 900

This means that 47.25% of the practice's panel is age 3-11 and 52.75% is age 12-17.

To weight the HEDIS 75th percentile targets by this age distribution, we multiply the target for each age group by that age group's share of the patient panel and add the results:

- Age 3-11: $60.12 \times 47.25\% = 28.4$
- Age 12-17: $54.04 \times 52.75\% = 28.5$
- Total: $28.4 + 28.5 = 56.9$

So, the weighted 75th percentile is 56.9%

The same method will be used to calculate the weighted average for a practice's baseline performance.

If the practice above had baseline performance of 39% for the 3-11 age group and 40.9% for the 12-17 age group, this calculation would be:

- Age 3-11: $39 \times 47.25\% = 18.43$
- Age 12-17: $40.9 \times 52.75\% = 21.57$
- Total: $18.43 + 21.57 = 40$

So, the practice's baseline performance is 40%.



Example of targets and performance for practice “ABC Pediatrics”

Baseline Weighted 2021 Performance = 40%

HEDIS Goal (HEDIS 75th Percentile Weighted Target Based on ABC Pediatrics Patient Panel Age Distribution) = 56.9%

Q1 (Report 1 - April) Weighted Performance = 41.5%

1. Does practice meet the Q1 target based on achieving 75% of its HEDIS target?
 - a. No. The HEDIS Target for Q1 = 42.68% ($56.9 * 0.75$)
2. Does practice meet target based on 2.5% improvement over 2021 Baseline Performance?
 - a. Yes. Baseline Improvement Target for Q1 = 41% ($40 * 1.025$), so the rate of 41.5% achieves the performance *improvement* target.