

2023 PCP Incentive Program (PIP) FAQ

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General

What does the PIP 2023 program look like, in a nutshell?

Our 2023 PIP program will include two primary components:

Component 1: Base program

Our 2022 PIP program model will carry over into 2023 with some minor modifications, including those listed below:

- ✓ Settlement and reporting at the ACN level
- ✓ Monthly attestation in PRA tool required for incentive payment

The PIP 2023 Manual, to be available on or before January, will include all details

Component 2: Focus measures

Additionally, we're introducing two chronic condition management "focus measures" in 2023 – Hypertension and A1c \leq 9%. You'll receive guaranteed quarterly pre-payments throughout the year. Learn more about how this works below.

How do chronic condition management focus measures work?

Each quarter in 2023, your ACN will receive a guaranteed, estimated pre-payment for two measures based on a snapshot of your population (denominator) in the first quarter of 2023, reported through PRA attestation (ASO population will be excluded from denominator).

You'll receive quarterly pre-payments based on this estimate using the 75th percentile rate noted below.

Measure	2022 rate	2023 75 th percentile	2023 90 th percentile
Hypertension	\$60	\$75	\$130
A1c \leq 9%	\$75	\$75	\$130

For example: Best ACN Ever has 1,000 members in its denominator for A1c \leq 9% in the first quarter of 2023. The ACN will receive the following quarterly pre-payments:

- ✓ Q1: (1,000 members * \$75) / 4 = \$18,750
- ✓ Q2: (1,000 members * \$75) / 4 = \$18,750
- ✓ Q3: (1,000 members * \$75) / 4 = \$18,750
- ✓ Q4: (1,000 members * \$75) / 4 = \$18,750

At year-end settlement, we'll review actual population and performance. If your ACN doesn't achieve the 90th percentile for the performance year, we'll settle the difference from your year-end reward at the 75th percentile rate.

For example: Best ACN Ever achieves the 75th percentile for A1c \leq 9% for the performance year.

- ✓ Focus measure pre-payments: 1,000 members (denominator) * \$75 = \$75,000
- ✓ Focus measure settlement: 750 members (numerator) * \$75 = \$56,250
- ✓ Reduction to year-end settlement: \$18,750

PRA Attestation

Is monthly PRA attestation still required for incentive payment?

Monthly attestations are required to ensure accurate reporting and incentive payments. Submit your rosters monthly, regardless of whether there are network changes, to maintain data integrity.

Without external facility site IDs, how do we make sure new providers are correctly connected to the ACN?

This is why your monthly PRA attestation is so important. Your monthly PRA attestation will support PCP to ACN alignment.

Without facility site IDs, how does Priority Health maintain PCMH designation that's required for some of the measures?

PCMH designation is included in PRA attestation. PRA is set up by PCP, so during PRA attestation, you'll indicate which providers are practicing in a PCMH practice.

What bearing does PCMH attestation have?

For measures that require PCMH, we'll settle at the ACN level based on those attributed lives associated with a PCMH PCP. This is determined through PRA attestation.

Is there going to be a way in the future to link all roster submissions through PRA to reduce duplicative work?

We're working towards reducing this double work for those in delegated contracts. More information to come on how we're working to make this more efficient for everyone.

Will you be adding Specialist providers to PRA?

We're working towards this in 2024. More to information to come.

Billing

Are CPTII codes optional or required?

Optional and encouraged. In 2023, we'll continue to accept all forms of supplemental data to close gaps in care, including claims (CPT and CPTII), MiHIN, HL7, patient profile and PIP 70 reports. Future program years may rely more heavily on claims-based data.

Will you accept the SDoH G code for a negative screen in 2023?

Based on provider network feedback, we will return to our 2022 program design for SDoH, which doesn't incent the G code, however, you are encouraged to submit the code for reporting purposes.

Can you submit SDoH via MiHIN? That could provide a negative screen.

In 2023, we're continuing with Z codes. You can certainly send the negative screen through MiHIN, and we'd love that information for future years.

Is it only the SDoH z-codes in the PIP manual that will count toward meeting the measure?

Yes, and we're also reviewing to see if any additional z-codes were introduced in the new national coding guidelines. The full accepted list of z-codes will be available in the final 2023 PIP manual soon.

Is formal training required to bill for BHCC services?

Yes.

Will exclusions count as a numerator hit?

HEDIS exclusions will be excluded from the denominator.

Payment

Will payments be made to practices or ACNs?

We'll make payments for all measures at the ACN level.

How will ACNs receive settlement payment?

ACNs that are set up to receive EFT payments will be paid electronically. Paper checks to all others.

Are the chronic condition management focus measures paid out on the ACN attribution or the number of patients in the measure denominators?

They'll be paid out based on the denominator for the measure based on a snapshot taken in the first quarter of 2023. We'll base the denominators on an ACN's attributed population determined through PRA attestation in the first quarter of 2023 (for all lines of business except ASO/PPO).

What if the ACN doesn't hit the 75th percentile for the focus measures?

Your ACNs final settlement will still be at the 75th percentile. 75th percentile payment is guaranteed regardless of performance on these two measures.

For example: Best ACN Ever achieves 70% percentile A1c ≤ 9% for the performance year.

- ✓ Focus measure pre-payments: 1,000 members * \$75 = \$75,000
- ✓ Focus measure settlement: 700 members (numerator) * \$75 = \$52,500
- ✓ Reduction to year-end settlement: \$22,500

If you're paying 100% of the denominator for the two chronic condition management focus measures and we only hit 90th percentile (so still some open gaps), will we need to pay back the additional patients we were paid on or will that be waived?

At the end of the year, we'll settle your ACN at the 90th percentile. Pre-payments are based on the 75th percentile of your first quarter denominator because we assume your population will fluctuate throughout the year, and we don't want to underpay you. Additionally, we'll exclude ASO/PPO membership in the pre-payment, so this is a buffer that will be calculated for payment at settlement.

When do the chronic condition management focus measure pre-payments go out?

We're aiming for the end of each quarter. For the first quarter, for example, we're aiming to have payments to you before April 1.

Reporting

Is Filemart going away?

No, Filemart isn't going away. The final 2023 PIP Manual will include the Filemart report inventory that will be available for ACN-level reporting.

Will data reports be sent to practices directly or only through ACNs for distribution?

In 2023, data reports, including those in Filemart, will be available to the ACNs **only** because our criteria measures entities at the ACN-level. If you aren't in an ACN, we ask that you join one.

Will practices continue to see their ongoing performance transparently even though the ACN is going to get the payout?

ACNs will continue to receive monthly performance reporting via Filemart that will include data at the individual PCP level.

Will you be working with ACNs ahead of 2023 on available reports?

We typically release reports for a new performance year in March or April of that year. We'll have mockups of the updated 2023 reports around that time, and your ACNs can work with your Provider Strategy & Solutions Consultants to go through and disseminate that information.

Will PIP 70 still be available for 2023?

Yes. It will be available at the ACN level.

Will Patient Profile still be available for 2023?

Yes. Please continue to use as a means of reporting supplemental data.

Will the Healthy Michigan - HRA report be available for 2023?

Yes. It will be released monthly at the ACN level.

Our current reports have ASO/PPO & HMO/POS separately. In 2023 reports, will they be combined into one "commercial" line?

They'll continue to be separated and unique in the reports and measured separately as well.

Will ASO/PPO still be vulnerable to indexing?

Possibly. PIP is held to a budget based on line of business. To avoid this possibility, we'll exclude ASO membership from quarterly pre-payments.

What is the Data Users Workgroup?

It's a meeting series to formally introduce you to Clyde Kinney, Manager Provider Network Analytics (PNA) and the team members involved at Priority Health who support your requests for data and the right pace of change that will meet the needs of your existing platforms and operations. The series was organized specifically for those who have unique insights on the need of independent primary care.

Is the group and subgroup feature in PRA a requirement during attestation?

This is an optional step to add additional layering / filtering options to your RPX reports. With the retirement of Facility Site IDs, it may be helpful for grouping providers by practice group for example. If you don't want or need to further subgroup your providers, you don't need to take this step.

Can a physician be in two subgroups?

A physician can only be in one Group / Subgroup at a time, similar to them having one primary practice.

Which report has gaps at the practice level?

The 11c shows all of your ACN's members and their reported gaps in care. If you want to drill down to the practice level, you can manipulate the date using either Type II NPI or PRA's Group/Subgroup feature.

Do we need to tell you which new reports we want in Filemart or will they be added automatically?

If you're receiving the PIP_11c, which most of the network is, we'll automatically release our new reports to you. If you're not and would like to, contact your ACN's Provider Strategy and Solutions Consultant.

Is there a MIHIN supplemental data error report?

Yes. We'd need to send it to you outside of Filemart. If you'd like to receive it, contact your ACN's Provider Strategy and Solutions Consultant.