

Performance-Based Contracting for Independent Prescribers and Evaluators

Outline

- What is Performance-Based Contracting?
- Independent Prescriber/Evaluator PBC criteria
- Timeline for Implementation
- Provider Feedback

What is Performance-Based Contracting?

- A performance-based contract focuses on the **outputs**, **quality**, and **outcomes** of a service provision and may tie at least a portion of a contractor's payment as well as any contract extensions to their accomplishment (Martin, L., 1997).
- This definition has been well received within diverse disciplines, as it has been used in several studies of Performance-Based Contracting including: Fisher, et.al. (2006); Daly, et.al (2004); Wyld (2003); Segal & Moore (2002); Liner, et.al (2000); Lahti (1999); and Vinson (1999).

Martin, L. L. (1997). "Performance contracting: Extending performance measurement to another level. *Public Administration Times*. 22 (1):1 and 8.

Fisher, S., Wasserman M. & P. Wolf (2006). *Effectively managing professional service contracts*. Washington, DC: IBM Center for the Business of Government.

Daly, D., Tucker-Tatlow, J. & C. Gibson (2004). *Innovations in performance-based contracting*. San Diego: Southern Area Consortium of Human services.

Wyld, D. (2003). *SeaPort: Charting a new course for professional services acquisition for America's navy*. Washington, DC: IBM Center for the Business of Government.

Segal, G. & Moore, A. (2002). *Weighing the watchman: Evaluating the costs and benefits of outsourcing correctional services*. Los Angeles: The Reason Foundation.

Lahti, M. (1997). "Measuring accountability in performance contracting systems: Mental health services for children." Paper presented at the 19th Annual Research Conference of the Association for Public Policy Analysis and Management, Washington, DC, November.

Vinson, E. (1999). *Performance contracting in six state human service agencies*. Washington, DC: The Urban Institute.

Why Performance-Based Contracting?

- VBH-PA's commitment to improve quality of care for our members in a fiscally responsible manner.
- Standardized measure of provider outputs, quality, and outcomes.
- Equitable way to reward and encourage providers.

Performance-Based Contracting Domains

- Evaluation
- CCASBE-LD Score
- Process
- Access
- Training
- Billing
- Compliance

Evaluation

- Documentation that the *child* has been interviewed by the prescriber/evaluator.
- ***If a Delegate conducts the evaluation***, there is documentation that the IP/IE has met with face-to-face with family/child (as per encounter form).
- CCASBE-LD evaluation contains documentation of discussion with family/guardian regarding *natural supports*.
- Documentation of a minimum of 45 minutes of face-to-face with child/family (encounter form).
- Evidence in the CCASBE-LD evaluation that the IP/IE has engaged, or attempted to engage, the parent/guardian in the child's treatment goals, plan, and obstacles to treatment.

CCASBE-LD Score

- CCASBE-LD score of 85% or above
 - Aggregate CCASBE-LD data scores
 - Separate domain, weighted accordingly

Process

- 100%? of completed evaluations are submitted to VBH-PA within the established time frame of seven (7) business days.
- $\leq 10\%$ of prescriptions go to peer review (mean was 13% in 2011 provider profile).
- *60% attendance (by phone or in person) at ISPT meetings (2010 = 25% average attendance rate for both initial and re-evals combined).

*Provider feedback needed for RCA

Process (Continued)

- Provider will have a request rate of $\leq 5\%$ retro-authorizations for evaluations.
- “IP/IE Registration Form” is completed for all evaluations conducted by IP/IE’s.
- Re-evaluation completed 45 days prior to end of current POC/Authorization.

Access

- A notice of capacity has been reported to VBH-PA, by the IP/IE, when an appointment to do the CCASBE-LD evaluation cannot be offered within seven (7) calendar days.

Training

- Each calendar year IP/IE attend 75% of routine IP/IE trainings/meetings sponsored by VBH-PA.
- IP/IE and Master's Level delegates or psychologists in training will attend all mandatory trainings designated as mandatory by VBH-PA.

Billing

- Diagnosis on CCASBE-LD matches diagnosis on claim.
- Place of service on the claim form matches place where the evaluation was conducted, as documented in the evaluation.
- At least 90% of claims are submitted as clean claims. “A clean claim is a claim received by VBH-PA with all required data present and valid that was adjudicated without having to obtain information from an external source”
- All four diagnoses Axis are filled out on the CMS 1500 form for every claim. Submit all primary (Axis I) diagnoses related to the authorization and treatment plan of the services provided.

Compliance

- No HIPAA disclosures or breaches.
- Compliance plans that conform to CMS regulations.

Implications of Performance-Based Contracting

- Independent Prescribers and Independent Evaluators are one of three PBC pilots currently in progress.
- Pilot programs are not initially tied into financial incentives/penalties, but future contracts will be.
- Scoring system and weights are currently in the process of development.

Anticipated Timeline

March 1, 2012 – Finalized criteria, timeline, and audit process.

June 1, 2012 – Audits begins.

August 31, 2012 – Audit process ends.

Questions/Feedback

Thank You

Presented by Jeff Braid, LSW
jeffery.braid@valueoptions.com