PBC Quarterly Provider Forum

Residential
Performance-Based Contracting

December 22, 2025

- Driving Performance

- Status updates

- Refinements to Process Details

- Commonly Missed Measure: Trauma Informed Care

- Validation of P4P Milestone 2 Data

- Provider Performance Review Update – Restrictive Procedures

- Important Dates

- Resources

Residential and Supports Coordination Organizations Driving Performance

PBC Measure Design: Measures Work Together

Within Residential Services

Clinical Capacity

- New standards related provider clinical capacity
- Data use to impact individual outcomes (example: Restraint, Inpatient care)

Access

- Community integration
- Competitive Integrated Employment
- Referral/discharge standards

PBC Measure Design: Measures Work Together

Between Residential and Supports Coordination

Measure	Residential	SCO
Continuum of Services	Expand availability of Life Sharing and Supported Living	Better counseling and support for individuals seeking alternatives to residential habilitation. Benchmarks for non-residential/residential, Life Sharing, Supported Living and Housing Transition and Tenancy Service
Employment	Employment positive environments, support for employment (i.e transportation, clothing, budgeting). Increase CIE.	Lifecourse, planning for employment and employment services. Accurate data capture for CIE. Benchmarks for CIE.
Wellness	Use of HRST data to inform wellness activities/programs; improve health outcomes	Promote wellness activities to promote health. Benchmarks for preventative care.
Technology	Increase the use of Supportive Technology to drive independence and better deployment of DSPs	Expectations for SCs to discuss technology and to increase the number of people using Assistive Tech and Remote Supports

Supports Coordination Organizations P4P: Investing in Shared Outcomes
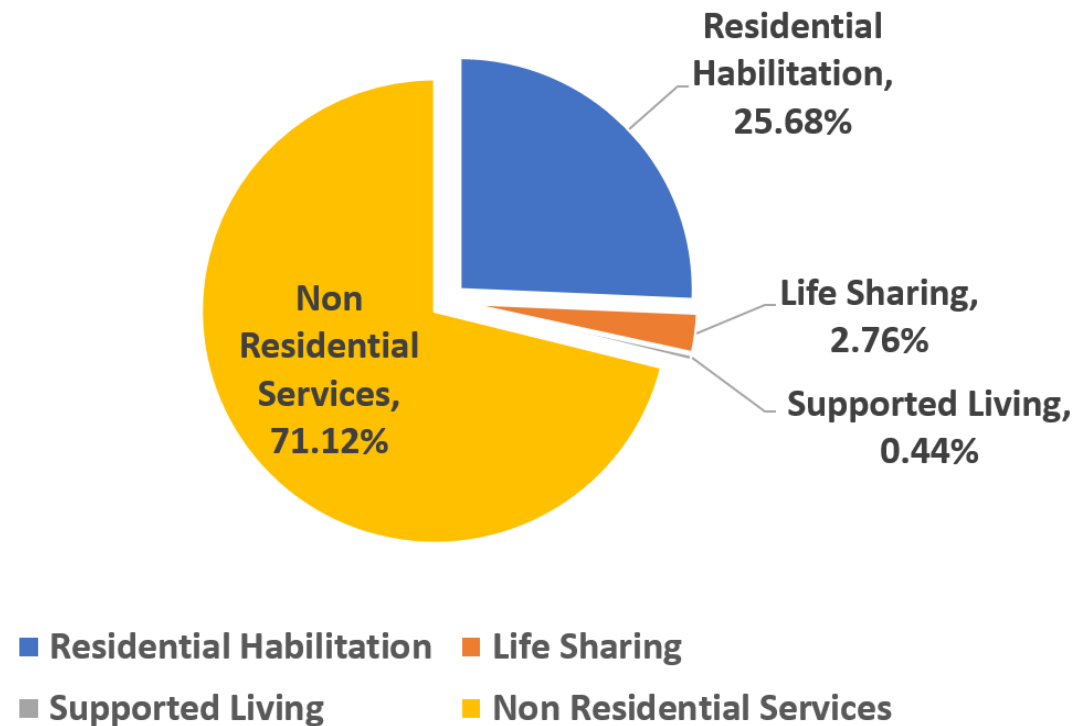
Competitive Integrated Employment

Continuum of services

Use of Supportive Technology

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Statewide Summary for Residential and Non-Residential Services CY2025

Residential Habilitation, 25.68%

Life Sharing, 2.76%

Supported Living, 0.44%

Non Residential Services, 71.12%

- ■ Residential Habilitation
- ■ Life Sharing
- ■ Supported Living
- ■ Non Residential Services

- Performance evaluation and pay-for-performance data submission Oct 1- Nov 1, 2025

- Signed *Agreement for Provision of Supports Coordination Services* received for all SCOs

- All SCOs completed submissions and all have been scored

- Results mailed to SCOs - resolution process underway

- Results by SCO will be published to DHS website Jan 2026

- **Capacity building investments**
  - Credentialling ($3.835M available)
  - Technology ($3.835M available)

- **45 SCOs submitted for at least one of the following**
  - Credentialing: 44
  - Technology: 35

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- RM-HRS.01: Enhanced report now available in HRST (Record Activity with Provider) - process details have been updated

- RM-IM.01.3: Additional detail on methodology in process details
  - Coming in February – enhancements to the EIM Dashboard and IM Review Report

- QI.03.3: Providers will fail this measure if there is no evidence of supporting efforts with the family engagement survey (positive response rate, emails sent to families, etc.)
  - This measure is required for advanced tiers
  - There are currently 36 providers failing this measure
  - Survey closes 12/31/2025

Measure Review: Trauma Informed Care

Measure	Tier	Measure Description	Percent Unmet
CN-DD/Bx.03.2	SC	Documentation of specialized trauma-informed training/activities for individuals and staff.	52.5%

- Commonly missed measure involved engaging with individuals
  - Here are some great examples of responses from providers
    - Provider described a workbook used by mental health professionals to support individuals in navigating trauma therapy and addressing traumatic experiences in their own lives.
    - Provider indicated that individuals are supported to watch a video on trauma and impacts of trauma followed by introduction of materials and resources designed to assist with self-identifying trauma triggers and responses.
    - Provider indicated that individuals were invited to attend training on trauma-informed care/interaction and provided with laminated note cards with reminders on preserving personal space, getting consent before touching/hugging, and speaking kindly/moderately to others.

Provider Innovation Series

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- Through a competitive application process, providers may apply and be selected to present **innovative practices that promote peer to peer learning and drive quality**

- ODP encourages providers to use **ISAC Recommendations and Strategies** to identify areas of innovation

- **Quarterly, virtual sessions showcase** provider and panel presentations with attention to participant questions and discussion.

- The first selected provider(s) will **present as part of the Everyday Lives Conference** in May 2026.

- Informational webinar was held on **December 2 -** Everyday Lives Story Spotlight – MyODP

Status Update: Residential PBC and P4P

- FAQ content has been updated for 2026 measures

- MyPBC Portal will be open for profile set up in early February – expect to see a communication asking you to confirm contact information

  – **Primary Contact**: Responsible for identifying which users should have access to the MyPBC Portal and receive PBC-related communications

  – **Secondary Users:** Will access the MyPBC Portal and contribute to PBC submissions

- P4P Milestone 2 data submissions are coming in and will be due in January

  - Credentialing and Technology – January 15

  - Competitive Integrated Employment – January 31

- Credentialing
  - NADSP and additional ODP collected data
- Technology
  - Provider-submitted documentation
- CIE
  - HCSIS data
- Resolution Process
 - Providers will use this process to provide clarification for **any unmet initiatives**

Questions?

MyPBC Portal

- MyPBC Portal Overview:
  - User profile management
  - Provider data submission for PBC and P4P
  - Scoring and Quality Control
  - Reports and Dashboards

- **Open for profile set up in early February** – expect to see a communication asking providers to confirm contact information:
  - **Primary Contact**: Responsible for identifying which users should have access to the MyPBC Portal and receive PBC-related communications
  - **Secondary Users:** Will access the MyPBC Portal and contribute to PBC submissions

  Note: SCOs reported having a positive experience using the tool during their submission period

16
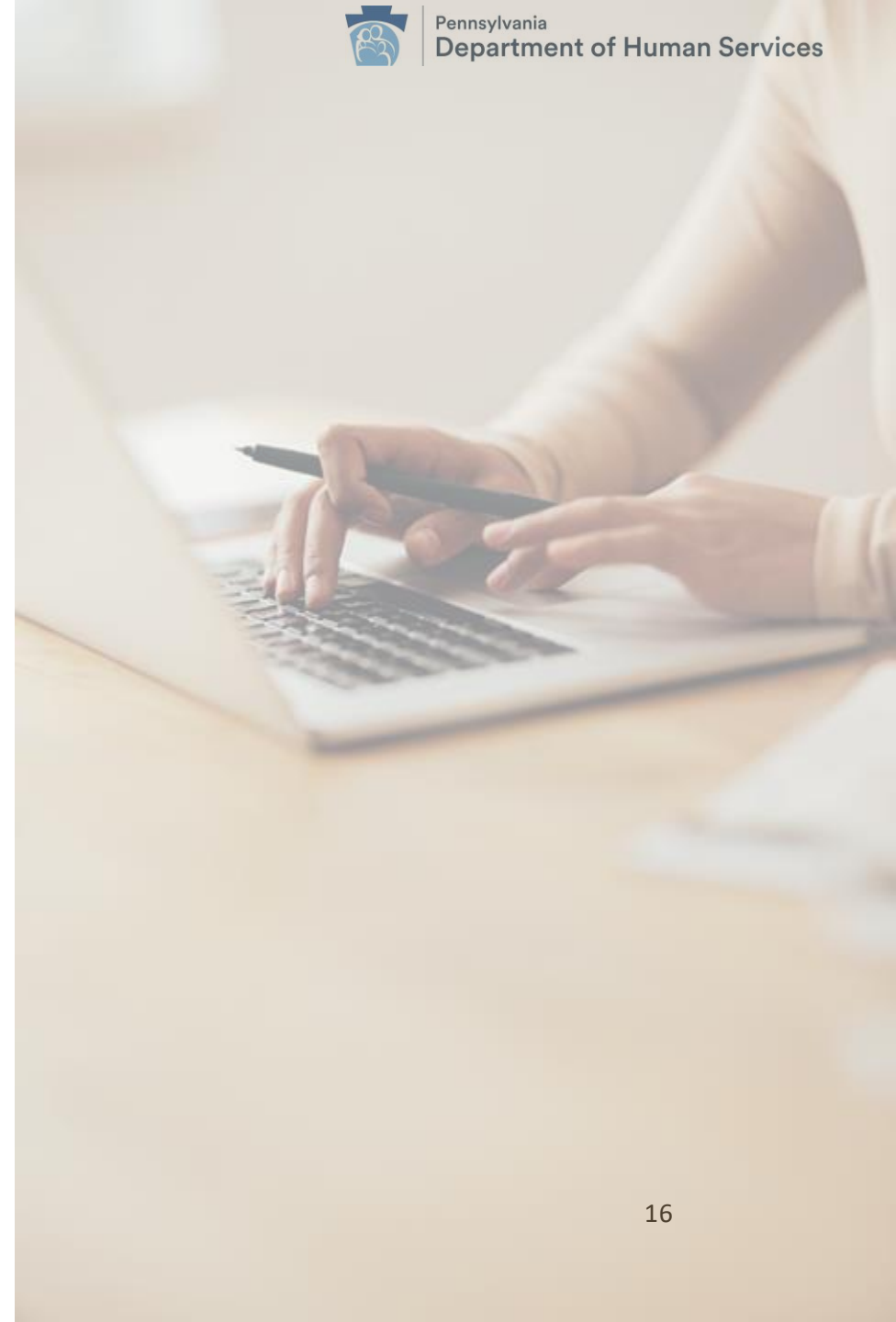
Example Data Submission Form: Attestation

Measure SC-PCP.02: SCO attests that beginning January 1, 2026, the SCO will support ODP data collection via ODP survey and encourage individual and family participation in the survey to inform NCI-IDD PCP-5: Satisfaction with Community Inclusion Scale (The proportion of people who report satisfaction with the level of participation in community inclusion activities).

*Question 14: Attestation SC-PCP.02   ☐ I attest

Example Data Submission Form: Document Upload

Measure SC-QI.02.1: Provide SCO's policy on how person-centered performance data is utilized to develop the QM Plan and its action plan, and to monitor progress towards QM plan goals.

***Question 18**: Upload the SCO's written policy which includes, at a ⓘ minimum

A. What data is used from which data sources

B. Frequency of data monitoring, review and analysis

C. How opportunities for quality improvement are selected

D. How person-centered performance data is utilized to develop the QM plan and to measure process

E. How performance measures are established

F. The title of the person who is ODP QM certified and generally responsible for the organization's QM plan

Upload File

No File Uploaded

Example Data Submission Form: Text Boxes

Measure SC-QI.02.2: Report number of staff that have ODP QM certification; include number on executive leadership team who have the authority to adopt recommendations and direct QM activities.

Note: Staff who are in a leadership role include Executive Directors, Chief Executive Officers, Chief Operations Officers, Chief Nursing Officers/Directors of Nursing, Chief Clinical Officers/Directors of Clinical Services, and Quality Management and other Directors.

*Question 19: Use the table below to report the number of staff, including executive leadership staff, that have ODP QM certification; include number on executive leadership team who have the authority to adopt recommendations and direct QM activities.

	Total Number
Total Number of staff with ODP QM Certification as of November 1, 2025	Enter Response Here
Total Number of executive leadership staff with ODP QM Certification as of November 1, 2025	Enter Response Here

*Question 20: Use the table below to list each staff member, including executive leadership staff that hold an ODP Quality Management (QM) Certification as of November 1, 2025.

First Name	Last Name	Title
Enter Response Here	Enter Response Here	Enter Response Here

Add Row

Provider Performance Review: Restrictive Procedures

Health and Welfare 4 (HW4)

Number and percent of participants with restrictive interventions where proper procedures were followed. ODP staff monitors incidents where proper procedures were not followed related to the use of a restraint or restrictive intervention.

DISCOVERY DATA: Annual															
Source: EIM															
Performance Measure: Number and percent of waiver participants with restrictive procedures where proper procedures were followed.	Central			Northeast			Southeast			Western			Statewide			Total Annual
	CONS	P/FDS	CLW	CONS	P/FDS	CLW	CONS	P/FDS	CLW	CONS	P/FDS	CLW	CONS	P/FDS	CLW	
Numerator = Number of participants with restrictive procedures where proper procedures were followed.	460	<11	<11	369	<11	<11	404	<11	15	642	<11	<11	1,875	17	43	1,935
Denominator = Total number of unduplicated participants with a restrictive procedure plan <u>and</u> those without a plan who had an improper procedure applied.	547	27	17	443	<11	16	467	<11	18	728	<11	<11	2,185	44	61	2,290
Compliance by Waiver and Region	84.10%	30-40%	50-60%	83.30%	0.00%	50-60%	86.50%	80-85%	80-85%	88.20%	50.00%	90.00%	85.80%	38.60%	70.50%	
Compliance by Region and Statewide	81.00%			81.50%			86.40%			87.90%			84.50%			

Data displayed is for the HW4 Annual Report, encompassing data from FY 24-25 (7/1/2024-6/30/25)

Restrictive Procedure Analysis

SCO Entity Name	Percent of individuals served with BSP	Percent of individuals served with RPP	Percent of BSPs with RPP	Rate of RPP per 1000 supported
SCO 1	40%	30%	75%	300.00
SCO 2	36%	23%	65%	234.85
SCO 3	49%	20%	40%	195.12
SCO 4	30%	16%	53%	158.68
SCO 5	30%	12%	39%	118.42
SCO 6	52%	12%	23%	118.16
SCO 7	26%	11%	41%	108.23
SCO 8	25%	11%	42%	105.45
SCO 9	31%	10%	32%	99.04
SCO 10	43%	9%	21%	91.84
SCO 11	38%	9%	24%	89.46
SCO 12	31%	8%	28%	83.97
SCO 13	45%	8%	19%	83.56
SCO 14	34%	8%	24%	82.22
SCO 15	39%	8%	21%	82.16
SCO 16	46%	8%	18%	80.80
SCO 17	37%	8%	22%	79.22
SCO 18	44%	8%	18%	79.16
SCO 19	42%	8%	19%	78.79
SCO 20	37%	8%	21%	76.92

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Data Source:
Enterprise Incident Management (EIM) System

Discovery Date:
Calendar Year 2024 (1/1/2024-12/31/2024)

Categories:
Physical Restraint (HRT Approved, Provider Emergency Protocol)
Rights Violation (Unauthorized Restrictive Procedure),
Abuse (Misapplication/Unauthorized Use of Restraint (Injury), Misapplication/Unauthorized
Use of Restraint (No Injury))

Investigation Determination:
Abuse, Rights Violation = Confirmed

Funding Source:
HCBS Only (Consolidated, Community Living, P/FDS)
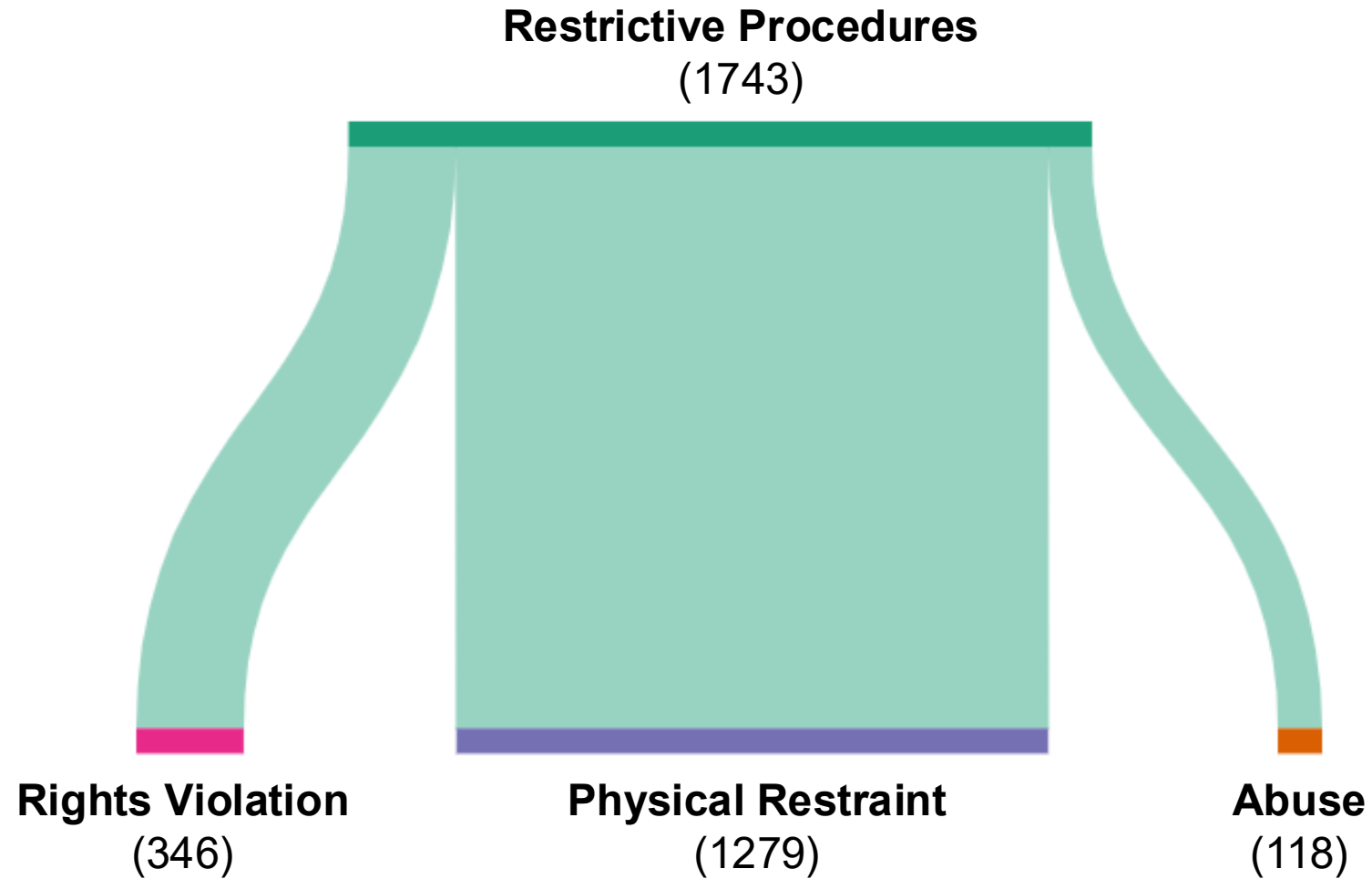
Restrictive Procedure Analysis

1743

Restrictive Procedures

651

Individuals Restricted

1982

Individuals with RPPs

284

Individuals Restricted with an RPP

Restrictive Procedure Analysis

Restrictive Procedures
(1743)

Rights Violation
(346)

Physical Restraint
(1279)

Abuse
(118)

Restrictive Procedures Over Time 2024

Restrictive Procedure Analysis

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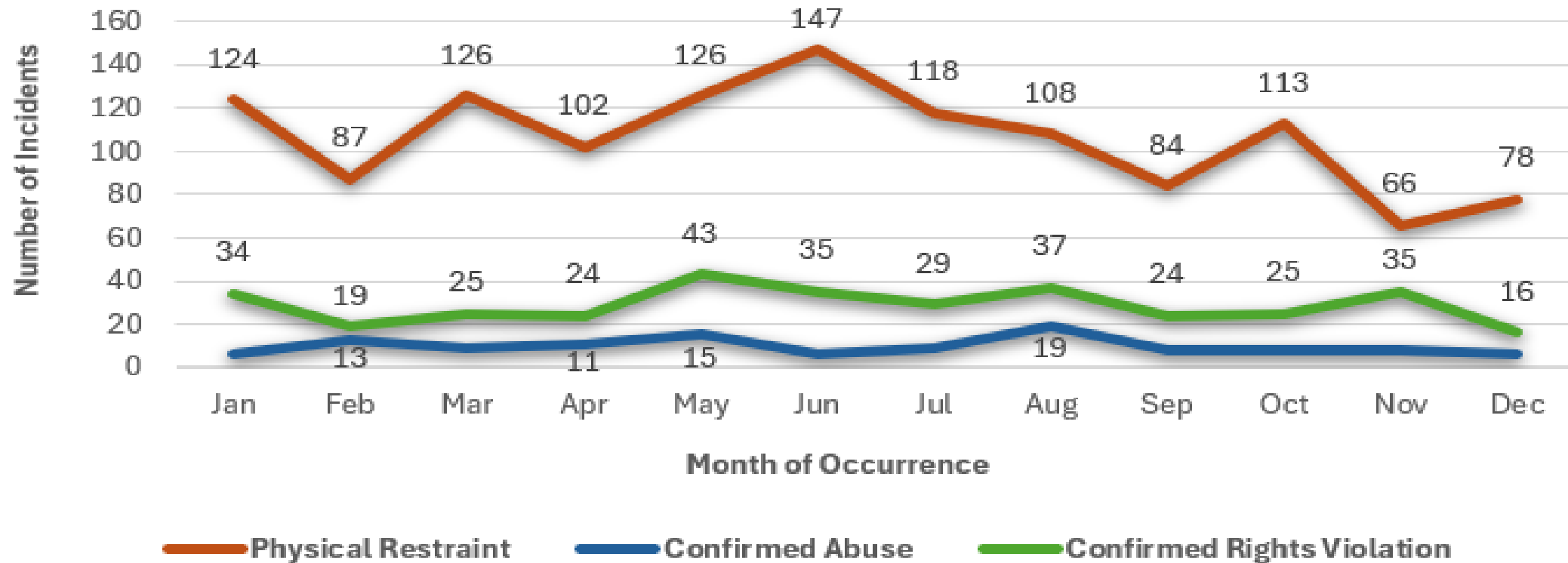
	2022		2023		2024	
	Incidents	Rate	Incidents	Rate	Incidents	Rate
Restrictive Procedures	1922	52.9	1848	52.1	1743	45.0
Physical Restraint	1589	43.8	1471	41.4	1279	33.0
Rights Violation	237	6.5	267	7.5	346	8.9
Abuse	96	2.6	110	3.1	118	3.0

Rate calculation:
Incidents ÷ HCBS Enrollment x 1000 = Incident rate per 1000 individuals enrolled

- P4P Milestone 2 data submission periods:
  - Credentialing and Technology: November 1, 2025 – January 15, 2026
  - CIE: November 1, 2025 – January 31, 2026

- 2026 PBC Residential Data Submission: February 15 – March 15

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- [MyODP PBC resource page](#)

  – FAQs published on MyODP [PBC FAQs](#)

- PBC Mailbox ra-pwodppbc@pa.gov

- HRST technical support can be accessed by emailing: pasupport@replacingrisk.com

- HRST clinical support can be accessed by emailing: paclinassist@replacingrisk.com

- [Quality Management Landing Page](#)

Questions from Provider

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Questions?