



# Performance Based Contracting: AE Impacts

June 14, 2024

ODP is applying for a statewide 1915(b)(4) Selective Contracting waiver for residential services, which include Residential Habilitation\*, Supported Living and Life Sharing\* which are currently offered in the Consolidated and Community Living 1915(c) Waiver programs.

Section 1915(b) of the Social Security Act allows the Secretary of Health and Human Services discretion to waive a broad range of requirements. This is what will allow ODP to restrict the provider population to providers who meet PBC standards.

\*Licensed and unlicensed residential habilitation and licensed and unlicensed Life Sharing.

ODP will use PBC to establish performance standards for residential providers. We will monitor, support, and evaluate provider performance in meeting standards.

Providers will be reviewed annually and assigned a tier based on their performance.

PBC standards and measures will be published via Bulletin.

Generally strong support from all stakeholder groups and recognition for the need to elevate the quality of residential services.

Areas with high volume of comments:

- Select/Clinically Enhanced serving 10 or more
- Employment
- Population served average NL 4.5+ and average HCL 3.5+
- Primary providers limited to NG 1,2,3
- Number of measures
- Timeline for implementation

It is strongly recommended that AEs watch or review transcripts from the four Provider Preparedness Summits to gain deeper understanding of the proposed performance measures. The summits can be found on [Home.MyODP.org](https://www.Home.MyODP.org).

ODP is still reviewing public comments and anticipates making changes to many proposed performance measures.

- AE Operating Agreement is currently in draft for updates.
- No specific changes related to Performance Based Contracting have been made.
- General updates in various sections related to AE role in oversight of provider performance are expected.



## Question and Answer

The vendor for PAS has not been procured at this time. Procurement is active.

Ways AEs may interface with PAS include:

- Connecting with providers
- Providing technical assistance to providers on their interface with PAS
- Anticipate AEs will have access to data/dashboard to view provider performance data



- Providers will submit surveys, attestations and documentation to ODP between July 1, 2024-July 31, 2024.
- Providers will receive tier assignments in November 2024.
- Provider tier assignment is per MPI (not license).
- Providers will be evaluated again January 2026 (first cycle is 18 months) and every January going forward.

- Provider tier will only change mid-cycle/year if the provider's license is in provisional or revoked status in any region.
- If/when a provider's tier changes, the AE will share this change with impacted supports coordinators, individuals and families. The PACA workgroup along with ODP will develop the template for notification.
- Provider tier assignment will be published on MyODP and communicated via listservs.

- On June 4, 2024, residential providers received updated provider agreements to review and sign.
- To date, approximately 30% of residential providers have signed and returned their updated agreement.
- ODP is collecting residential provider agreements through [ra-odpprovideragreem@pa.gov](mailto:ra-odpprovideragreem@pa.gov)
- ODP may ask for AE assistance with prompting providers who have not signed and returned an updated provider agreement.
- Providers who do not sign and submit an updated provider agreement will not meet provider qualification requirements and will be issued Corrective Action Plans (CAP).

- AEs will not qualify new providers for residential services unless/until there is an active Request for Applications (RFA).
- Assigned AE for new residential providers will be determined by origin of RFA request and intended county of service.
- AEs will need to maintain/analyze data relative to local needs. ODP will support PACA workgroup to develop this process.
- ODP shared ***General Information for ODP and AE Staff*** through the AE list serv on June 5, 2024, with talking points to be used for provider applicants in various stages of qualification.
- ODP may ask AEs to validate additional training requirements i.e. training validation in the future.

- Providers will be able to expand existing qualified Residential Services (add service locations) as they do today.
- If a current residential habilitation provider wants to add Lifesharing or Supported Living, this is allowable under as is process and does not require RFA.
- AEs will notify ODP via established process when there is a need to open an RFA.

AEs are expected to ensure choice of appropriate providers are offered. This will include:

- Providing oversight of referrals to ensure Primary Providers are only receiving referrals for NG 1 thru 3.

- AEs will need to ensure residential services are authorized in accordance with the individual's assigned NG.
- ODP anticipates Enterprise Case Management (ECM) will provide better safeguards/hard stops to prevent Supports Coordinators from sending referrals to ineligible providers.
- AEs will need to ensure individual risks are identified and mitigated in the ISP.

- No immediate impacts to the QA&I process.
- In the future, there may be performance based contracting measures that are validated through QA&I. If/when this happens, fidelity to the QA&I process will be critical.



- AEs should continue to reinforce the use of EIM dashboards to support providers in achieving IM related performance measures.
- AEs will continue to issue CAPs/DCAPs to providers when Incident Management non-compliance is identified and unresolved through technical assistance.
- Incident Management fidelity is a performance standard under PBC, placing even greater emphasis on the importance of timely and accurate incident reporting.



- PRS will not see any immediate changes to the tool, but in the future the process may be amended to include indicators related to PBC measures.
- Where AEs identify areas of risk, continue to notify regional office through the current process.
- If identified risks are related to/could impact PBC measures (i.e. Incident Management), these areas should be flagged for targeted technical assistance by the AE and ODP if necessary.
- ODP has recently procured software to support the convergence and analysis of risk related data. As we begin to implement the software, we anticipate enhancements in our ability to identify risk early and support appropriate response.

- AEs will not be collecting provider performance data specific to PBC.

- AEs will be responsible for providing technical assistance related to PBC. PACA identified members to be PBC experts.
- ODP will also publish a Frequently Asked Questions (FAQ) document for the field to use once performance measures are finalized and update this document regularly.
- ODP staff will be available for questions and discussion.
- A Resource Account has been created for PBC related questions. AEs should refer providers with questions to submit them to [RA-PWODPPBC@pa.gov](mailto:RA-PWODPPBC@pa.gov)

- Provider tiers will not be available in HCSIS but will be in ECM.
- Procedure codes will not be connected to provider tier

- Base funded individual data will not be used in provider performance data.
- Base funded individuals will not be added to HRS unless they are identified to be moving from base to waiver.
- AEs are not obligated to pay Select and Clinically Enhanced proposed 5% and 8% or Pay for Performance incentives for base funded individuals.



## Question and Answer



Proposed fee schedule:

<https://www.pa.gov/content/dam/copapwp-pagov/en/dhs/documents/services/disabilities-aging/documents/developmental-programs/IDA-Proposed-Fee-Schedule-Rates-and-Department-Established-Fees-for-Community-Based%20-Services-REVISED.pdf>

PBC Implementation Plan:

<https://www.pa.gov/content/dam/copapwp-pagov/en/dhs/documents/services/disabilities-aging/documents/developmental-programs/Residential-Performance-Based-Contracting-Implementation-Plan.pdf>