Affected Programs: BadgerCare Plus, Medicaid
To: Hospital Providers, HMOs and Other Managed Care Programs

Hospital Pay for Performance Changes

For state fiscal year (SFY) 2013 (from July 1, 2012, to June 30, 2013), there are two components to the hospital pay for performance (P4P) initiative: the Assessment P4P program and the Withhold P4P program. The Assessment P4P program, which applies to acute, children’s, and rehabilitation hospitals, has been in existence for the past few years. The Withhold P4P program is new for SFY 2013, and it will apply to acute, children’s, critical access, and psychiatric hospitals. These two separate programs will run concurrently.

This ForwardHealth Update provides an overview of these two programs and outlines upcoming provider responsibilities between April and June 2012. Additional information on both the Assessment P4P and the Withhold P4P programs will be published in a June 2012 Update.

Hospital Assessment Pay for Performance Program Overview

As described in the August 2011 ForwardHealth Update (2011-43), titled “Hospitals Will Receive Performance-Based Payments for State Fiscal Year 2011,” the Department of Health Services (DHS) reserves $5 million for Wisconsin acute care, children’s, and rehabilitation hospitals that meet certain performance targets. This performance-based payment system has been in existence for several years and will continue for future fiscal years, but it will now be referred to as the Assessment pay for performance (P4P) program.

Assessment Pay for Performance Program Measures

For measurement year (MY) 2012 (July 1, 2011, to June 30, 2012), the Assessment P4P program consisted of the following five measures:

- Perinatal measures (combination of pay for reporting and P4P).
- Patient experience of care.
- Surgical infection prevention index.
- Flu vaccine for pneumonia patients.
- Surgical care improvement and clot prevention.

For MY 2013 (July 1, 2012, to June 30, 2013), the Assessment P4P program will include the following three measures:

- Perinatal measures.
- Patient experience of care.
- Discharge Instructions — Heart Failure (CheckPoint 11) (new to the Assessment P4P program for MY 2013).

The DHS will transfer the surgical infection prevention index and surgical care improvement and clot prevention measures from the Assessment P4P program to the Withhold P4P program for MY 2013. The flu vaccine for pneumonia patients measure is being retired and therefore will no longer be part of the Assessment P4P program.

Additional information on the Assessment P4P program, including measure specifications and payment methodology, will be provided in a June 2012 Update. Providers may...
submit questions about the Assessment P4P program to dhspayp4p@wisconsin.gov.

Hospital Withhold Pay for Performance Program Overview

As part of the P4P initiative included in the Wisconsin 2011-2013 biennial budget, beginning July 1, 2012, inpatient hospital claims with dates of discharge on and after July 1, 2012, and outpatient hospital claims with dates of service on and after July 1, 2012, will be subject to a 1.5 percent withholding on each payable inpatient and outpatient hospital claim amount. The 1.5 percent of the payable amount will be withheld after member cost sharing is deducted and before access payments are applied. The withheld amount will be redistributed at a later date to hospital providers who meet certain performance-based criteria. A future Update will address how the P4P withhold will be redistributed.

The P4P withhold will be deducted from claims submitted for fee-for-service members enrolled in Wisconsin Medicaid, the BadgerCare Plus Standard Plan, the BadgerCare Plus Benchmark Plan, and the BadgerCare Plus Core Plan. The P4P withhold will not be deducted from claims submitted for BadgerCare Plus Basic Plan members.

The following claims will be excluded from this withhold for MY 2013 (July 1, 2012, to June 30, 2013):
- Crossover claims.
- Claims from border status providers.
- Claims from out-of-state providers.

Hospitals certified as one of the following types will be excluded from this withhold:
- Border status.
- Out of state.
- Long term care, rehabilitation, and nursing facilities.

Note: The claim types and types of hospitals in or out of the scope of the P4P initiative may change in future measurement years.

Withhold Pay for Performance Program Measures

As part of the Withhold P4P program, the DHS will utilize data from multiple sources, including Hospital Compare and CheckPoint, for acute care, critical access, psychiatric, and children’s hospitals. Various combinations and permutations of the following six measures will apply to different types of hospitals:
- Thirty-day hospital readmission.
- Mental health follow-up visits within 30 days of discharge for mental health inpatient care.
- Asthma care for children.
- Surgical infection prevention index.
- Initial antibiotic for community-acquired pneumonia.
- Health care provider influenza vaccination.

On February 9, 2012, the DHS discussed with hospitals the measures, methodology, and timeframe and shared a draft State Fiscal Year 2013 Hospital P4P Guide describing the initiative. The DHS sought and received feedback from hospitals and made subsequent modifications to the methodology. The draft Hospital P4P Guide will continue to be updated by the DHS and can be accessed on the secure Provider area of the ForwardHealth Portal.

The hospital readmission rates and mental health follow-up visits will be calculated by the DHS using Wisconsin Medicaid’s claims data. Performance on other measures will be evaluated based on data submitted to Hospital Compare, CheckPoint, or the DHS Division of Public Health. If a hospital does not report data for a particular measure, it will forfeit its withhold for that measure and will not be eligible for any bonus. The DHS reserves the right to verify a hospital’s reported data using the DHS’s Medicaid claim data.

Response Timeline

On April 9, 2012, the DHS will share with hospitals (via the Portal) each hospital’s individual preliminary P4P baseline reports for the 30-day hospital readmission and mental health follow-up measures. Hospitals can view and download the baseline report from their secure Provider
Providers will receive a secure provider Portal message when new reports are available for review. If the DHS does not have data on either the readmissions or the mental health follow-up measures, the hospital will not receive a baseline report for that particular measure.

*Note:* Even though a hospital may not receive a baseline report for a particular measure, that measure could still apply to the hospital if the hospital has sufficient observations for MY 2013.

By April 30, 2012, hospital providers with questions or concerns about their baseline reports should complete the following steps:

- Send an e-mail to dhshospitalp4p@wisconsin.gov outlining their intent to respond to the reports and a description of any identified discrepancies.
- Submit the supporting data related to the identified discrepancies via the secure Provider area of the Portal. The format for submitting data discrepancies will be provided by the DHS as part of the preliminary baseline reports.

If there are no discrepancies between the preliminary baseline reports and a hospital’s data, no response is required. If a hospital does not respond to the baseline reports, the DHS will assume that the hospital agrees with the data contained in the report, and that data will be used to set the P4P targets for MY 2013.

*Note:* All communication involving sensitive data, including individually identifiable health information (known as protected health information [PHI]), must be submitted via the secure Provider area of the Portal. Protected health information can include things such as the member's name combined with his/her identification number or Social Security number.

By May 15, 2012, the DHS plans to review all questions/discrepancies related to the baseline reports submitted by hospitals and will respond to each inquiry via the secure Provider area of the Portal.

### Portal Access and Roles

In order to access P4P baseline reports, to submit responses, and to access the Hospital P4P Guide on the secure Portal, staff must be either the Portal Administrator for the facility or a Clerk assigned the new role of “Hospital P4P.” Beginning on March 30, 2012, the Portal Administrator for each facility will be able to assign the “Hospital P4P” role to staff who require access to the P4P reports. Portal Administrators can add this new role for staff currently designated as Clerks and determine if additional staff should be added as Clerks with this role. The Portal Administrator can also choose to designate a Clerk Administrator who can then assign the “Hospital P4P” Clerk role.

Following are instructions for assigning roles:

- Log in to the secure Provider area of the Portal.
- Click *Account* from the main menu.
- Click *Clerk Maintenance*.

Once on the Clerk Maintenance page, the following options can be performed:

- Add a Clerk.
- Remove a Clerk.
- Change Clerk Profiles and Roles.
- Reset a Clerk’s Password to either assign a Clerk Administrator or to add Clerk roles.

For more information on adding Clerks and Clerk roles, refer to the ForwardHealth Provider Portal Account User Guide available on the Portal User Guides page of the Portal at <https://www.forwardhealth.wi.gov/WIPortal/content/Provider/userguides/userguides.htm.spage>. On the Portal User Guides page, click the “Account” link under the “General Portal Functionality” heading.

Once a Clerk’s “Hospital P4P” role has been assigned, the P4P information can be accessed by logging in to the secure Provider area of the Portal and clicking the “Hospital Pay for Performance” link in the Quick Links box.
Questions Regarding the Pay for Performance Initiative

Hospital providers may submit questions regarding specific measures or methodology for the P4P initiative to ForwardHealth at dhshospitalp4p@wisconsin.gov. All communication involving the transmission of sensitive data, such as PHI, must be submitted via the secure Portal.

Information Regarding Managed Care Organizations

This Update contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at www.forwardhealth.wi.gov/.

P-1250