ACH pay for performance in Medicaid Transformation
Baseline results and improvement targets for DY 3 (2019)

What is the purpose of the improvement targets report?
To promote transparency and help communication among stakeholders and partners, HCA is publishing improvement target values by metric and by Accountable Community of Health (ACH). The summary table outlines each region’s pay for performance (P4P) metric results for the first baseline measurement period and improvement targets associated with the first performance year. These metric results set the goals for improvement for 2019.

How did the state arrive at these results and targets?
Data are collected and results are calculated by the state for each ACH region. ACHs are accountable for all the Medicaid beneficiaries that reside in their region that meet the criteria of the P4P metrics (e.g., age, Medicaid coverage criteria) and regional attribution criteria. Improvement target methodology and measure specifications can be found in the Measurement Guide¹ and the Medicaid Transformation metrics webpage.²

What is the significance of the improvement targets?
By selecting projects from the Project Toolkit, the ACH region is accountable for demonstrating improvement in outcomes over the course of Medicaid Transformation.³ Outcomes associated with the ACH’s Project Plan, known as P4P metrics, determine the proportion of earned Project Incentives year over year.

What happens next?
ACHs and their partners can use baseline information to understand the region’s starting point across the P4P metrics, and necessary improvement to earn the full amount of potential Project Incentives for the performance period.

Interested stakeholders, partners, and the public can view ACH P4P metrics on the Healthier Washington Dashboard.⁴ P4P metrics will be updated on a quarterly basis so that users can monitor changes over time. The dashboard also shows metric results by geographic region (e.g., ACH region, county) and demographics (e.g., age group, gender, race, ethnicity).

For questions about results, or to request the P4P results table in excel format, please contact the Medicaid Transformation inbox (medicaidtransformation@hca.wa.gov).

¹ https://www.hca.wa.gov/assets/program/mtp-measurement-guide.pdf
² https://www.hca.wa.gov/about-hca/healthier-washington/medicaid-transformation-metrics
³ https://www.hca.wa.gov/assets/program/project-toolkit-approved.pdf
⁴ https://fortress.wa.gov/hca/tableau/t/51/views/HealthierWashingtonDashboard/FrontPage?
Intended use of this report
This baseline report is intended to communicate Baseline Year 1 (CY 2017) Pay for Performance (P4P) metric results to ACHs. All P4P metrics that are active for Performance Year 1 (CY 2019) are shown in this report. If no results are displayed for a metric or submetric, the ACH is not accountable for the corresponding metric or submetric for Performance Year 1 (CY 2019).

Field definitions
<table>
<thead>
<tr>
<th>DSRIP P4P Metric</th>
<th>Name of P4P metric.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submetric</td>
<td>Submetrics associated with the metric to determine Achievement Value (AV).</td>
</tr>
</tbody>
</table>

Baseline (Rate or %)
P4P metric and submetric baseline results for calendar year 2017. For ease of review, results were rounded to the nearest hundredth decimal place. Note:
- If the value of the metric or submetric is "NULL," the ACH is not responsible for the metric or submetric.
- There are a few cases when the number of beneficiaries in the numerator is zero (0) for an improvement-over-self metric or submetric, resulting in an improvement target of 0% (e.g., Substance Use Disorder Treatment Penetration [Opioid] Age 65+ submetric). The ACH is still responsible for that metric or submetric.

Improvement Target (Rate or %)
ACH P4P metric and submetric improvement targets for performance year 2019. Note: Metric or submetric result(s) are not displayed if an ACH Baseline Year 1 (CY 2017) P4P metric or submetric result is above the corresponding benchmark for Performance Year 1 (CY 2019), and the ACH is not responsible for that metric or submetric during Performance Year 1 (CY 2019).

Additional information
The dental metrics are on a different timeline for this production cycle due to additional production capacity building and validation. This will not affect payment timelines during the performance year. The 2019 ACH Improvement Targets Report will be refreshed with these results by mid-December 2018.

Update (01/03/2019): ACH Improvement Targets Report updated with dental metrics associated with Project 3C.
<table>
<thead>
<tr>
<th>DSRIP P4P Metric</th>
<th>Submetric</th>
<th>November 2018 (updated January 2019)</th>
<th>Page 3 of 4</th>
</tr>
</thead>
</table>

### All Cause Emergency Department Visits per 1,000 Member Months

- **Ages 0-17**
  - Baseline: 34.55
  - Improvement Target: 33.90

- **Ages 18 - 64**
  - Baseline: 66.93
  - Improvement Target: 65.65

- **Ages 65+**
  - Baseline: 58.25
  - Improvement Target: 57.15

### Antidepressant Medication Management

- **Acute (12 weeks)**
  - Baseline: 53.13
  - Improvement Target: 54.17

### Children’s and Adolescents’ Access to Primary Care Practitioners

- **Ages 12-24 months**
  - Baseline: 96.28
  - Improvement Target: 96.44

- **Ages 25 months - 6 years**
  - Baseline: 87.23
  - Improvement Target: 87.83

- **Ages 7-11 years**
  - Baseline: 91.43
  - Improvement Target: 91.90

- **Ages 12-19 years**
  - Baseline: 92.31
  - Improvement Target: 92.69

### Chlamydia Screening in Women

- Baseline: 53.26%
  - Improvement Target: 53.94%

### Comprehensive Diabetes Care: Hemoglobin A1c Testing

- Baseline: 85.89%
  - Improvement Target: 85.54%

### Comprehensive Diabetes Care: Medical Attention for Nephropathy

- Baseline: 87.86%
  - Improvement Target: 88.20%

### Medication Management for People with Asthma: Medication Compliance 75%

- Baseline: 37.76%
  - Improvement Target: 38.98%

### Mental Health Treatment Penetration (Broad Version)

- **Ages 6-17 years**
  - Baseline: 66.97%
  - Improvement Target: 68.24%

- **Ages 18-64 years**
  - Baseline: 47.57%
  - Improvement Target: 48.47%

### Patients Prescribed Chronic Concurrent Opioids and Sedatives Prescriptions

- Baseline: 20.39%
  - Improvement Target: 20.60%

### Patients Prescribed High-dose Chronic Opioid Therapy

- **≥50 mg MED in a calendar quarter**
  - Baseline: 33.07%
  - Improvement Target: 34.29%

- **≥90 mg MED in a calendar quarter**
  - Baseline: 14.85%
  - Improvement Target: 14.67%

### Percent Homeless (Narrow Definition)

- **Ages 0-17 years**
  - Baseline: 0.63%
  - Improvement Target: 0.62%

- **Ages 18-64 years**
  - Baseline: 4.30%
  - Improvement Target: 4.22%

### Plan All-Cause Hospital Readmissions (30 Days)

- Baseline: 12.87%
  - Improvement Target: 12.62%

### Primary Care Prevention Intervention as Offered by Medical Provider: Topical Fluoride Application Delivered by Non-Dental Health Professional

- Baseline: 4.83%
  - Improvement Target: 4.92%
## Substance Use Disorder Treatment Penetration

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 12-17 years</td>
<td>31.29</td>
<td>31.89</td>
<td>47.20</td>
<td>48.10</td>
<td>27.74</td>
<td>28.27</td>
<td>29.11</td>
<td>29.67</td>
<td>28.29</td>
<td>28.83</td>
</tr>
<tr>
<td>Ages 18-64 years</td>
<td>27.51</td>
<td>28.03</td>
<td>30.37</td>
<td>30.95</td>
<td>24.32</td>
<td>24.79</td>
<td>30.91</td>
<td>31.49</td>
<td>22.30</td>
<td>22.72</td>
</tr>
<tr>
<td>Ages 65 years</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>6.25</td>
<td>6.37</td>
<td>9.09</td>
<td>9.26</td>
<td>16.67</td>
<td>16.98</td>
</tr>
</tbody>
</table>

## Utilization of Dental Services

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 0-20 years</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>61.45</td>
<td>62.62</td>
</tr>
<tr>
<td>Ages 21 years and older</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>24.91</td>
<td>25.39</td>
</tr>
</tbody>
</table>

## Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life

<table>
<thead>
<tr>
<th></th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
<th>Baseline (Rate or %)</th>
<th>Improvement Target (Rate or %)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NULL</td>
<td>NULL</td>
<td>60.02</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>NULL</td>
<td>63.09</td>
<td>65.29</td>
</tr>
</tbody>
</table>