No.	Measure	Description	Data Source	2020 Quality Compass	Measure Weight	2023 Performance Target
1.	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment – Initiation of AOD - Total (Total)	Adolescents and adults who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication-assisted treatment (MAT) within 14 days of diagnosis	Healthcare Effectiveness Data and Information Set [HEDIS] - Please note that all HEDIS measures for P4P should be hybrid unless that is not an option per HEDIS specifications.	<50th	7.14%	<ul> <li>&gt;= 50th%-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 4 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 2 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> <li>NOTE: All measures will be paid on the aggregate, however, we need the MCOs to also report subsets indicated on the CMS website for CORE measure reporting.</li> </ul>
2.	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI percentile (Total)	Assesses children and adolescents 3-17 years of age who had an outpatient visit with a primary care practitioner or OB/GYN during the measurement year and had evidence of Body mass index (BMI) percentile documentation	HEDIS	<25th	7.14%	<ul> <li>&gt;= 50th %-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 4 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 2 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> </ul>

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No.	Measure	Description	Data Source	2020 Quality Compass	Measure Weight	2023 Performance Target
3.	Chlamydia Screening in Women	The percentage of women 16-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.	HEDIS	<25th	7.14%	<ul> <li>&gt;= 50th %-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 5 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 3 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> </ul>
4.	Timeliness of Prenatal Care	Percentage of deliveries of live births between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these women, the percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization.	HEDIS	≥50th	7.14%	<ul> <li>&gt;= 50th %-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 5 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 3 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> </ul>

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No.	Measure	Description	Data Source	2020 Quality Compass	Measure Weight	2023 Performance Target
5.	Postpartum Care	The percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery	HEDIS	>75th	7.14%	<ul> <li>&gt;= 5 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 3 percentage point improvement: 50%</li> <li>IF THE ELIGIBILITY EXTENSION FOR POSTPARTUM COVERAGE is implemented, then</li> <li>&gt;= 50th %-ile benchmark would be eligible for 100% of incentive payment for measure</li> </ul>
6.	Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	Adults 40 years of age and older who had appropriate medication therapy to manage an exacerbation. A COPD exacerbation is defined as an inpatient or ED visit with a primary discharge diagnosis of COPD	HEDIS	<5th	7.14%	<ul> <li>&gt;= 50th %-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 4 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 2 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> </ul>

No.	Measure	Description	Data Source	2020 Quality Compass	Measure Weight	2023 Performance Target
7.	Lead Screening in Children	The percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.	HEDIS	<25th	7.14%	<ul> <li>&gt;= 50th %-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 5 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 3 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> </ul>
8.	Residents of a NF or nursing facility for mental health (NFMH), receiving antipsychotic medication *Lower rate indicates better performance.	Percentage of long-term stay nursing home residents who are receiving an antipsychotic medication, excluding those residents diagnosed with schizophrenia, Huntington's Disease or Tourette's Syndrome.	Minimum Data Set (MDS)		7.14%	• Rate <= 12%: 100%
9.	Nursing Home residents discharged to the community who are admitted to a hospital within 30 days of discharge *Lower rate indicates better performance.	Percentage of NF discharges who are admitted to a hospital within 30 days of discharge from the NF.	MDS/ Encounter Data		7.14%	<ul> <li>Rate &lt;= 11.5%: 100% OR</li> <li>&gt;= 1 percentage point improvement: 50%</li> <li>If MCO meets both criteria, it shall receive 100% of incentive payment for measure.</li> </ul>
10.	Peer Support services utilization for Behavioral Health services.	Increase the utilization of Peer Support state plan services as Behavioral Health services.	Encounter Data		7.14%	<ul> <li>Increase &gt;= <u>10% from previous year</u>: 100%</li> </ul>

No.	Measure	Description	Data Source	2020 Quality Compass	Measure Weight	2023 Performance Target
11.	Residents of a NF or NFMH discharged to a community setting	Percentage of NF and NFMH residents indicating a desire to return to the community who are discharged to a community setting during the year.	MDS		14.28%	• <i>Rate</i> >= <del>58</del> 59%: 100%
12.	Risk of Continued Opioid Use – 30 day period Ages 65+	The percentage of members 65 years of age and older with at least 15 days of prescription opioids in a 30-day period.	HEDIS	<10th	7.14%	<ul> <li>&gt;= 50th %-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 4 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 2 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> </ul>
13.	Appropriate Treatment for Upper Respiratory Infection – 3 months to 17 years	The percentage of episodes for members 3 months of age and older with a diagnosis of upper respiratory infection (URI) that did not result in an antibiotic dispensing event.	HEDIS	<33.33rd	7.14%	<ul> <li>&gt;= 50th %-ile benchmark: 100% of incentive payment for measure</li> <li>OR</li> <li>&gt;= 4 percentage point improvement: 100%</li> <li>OR</li> <li>&gt;= 2 percentage point improvement: 50%</li> <li>If MCO meets more than one criteria, it shall receive 100% of incentive payment for measure.</li> </ul>

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Please note that timeliness and financial accuracy of encounters must continue to be audited and publicly posted per Federal regulations. Enforcement will be through liquidated damages or contractual stipulations.