

IHC 2012 Bonus Payment for High Performance

The Illinois Department of Healthcare and Family Services (HFS) is proud to announce its Illinois Health Connect Bonus Payment program for 2012. Under this program, Illinois Health Connect (IHC) Primary Care Providers (PCPs) are eligible to receive annual bonus payments for each qualifying service under a bonus measurement. The bonus measurements are:

- Immunization Combo 3: Children who receive designated immunizations by age 24 months (benchmark 71.0%)
- **Developmental Screening:** Children who receive at least one objective screening <u>by</u> the age of 12 months (benchmark 80%), between the ages of 12 and 24 months (benchmark 70%), and between the ages of 24 and 36 months (benchmark 65%). A bonus will be available for each separate age group.
- Asthma management: Patients with persistent asthma ages 5-11 years (benchmark 92.3%), 12-18 years (benchmark 88.3%), ages 19-50 years (benchmark 84.3%), and ages 51-64 years (benchmark 80.3%) who fill an asthma controller medication prescription. A bonus will be available for each separate age group.
- **Diabetes Management:** Patients with diabetes ages 18 to 75 years who receive at least one HbA1c test annually (benchmark 82.2%).
- **Breast Cancer Screening:** Women between ages 40 and 69 who have had a mammogram in the last two years (benchmark 52.4%).
- **Lead Screening:** Children who receive at least one capillary or venous blood lead test <u>by</u> the age of 24 months (benchmark 72.2%).

These bonus measurements were selected by the Department based on input from participating PCPs, clinicians and healthcare quality specialists who participate in the Quality Management Advisory Subcommittee. A qualifying PCP is an IHC PCP who meets or exceeds the 2011 HEDIS 50th percentile benchmark, established by the National Committee for Quality Assurance (NCQA), collectively for all the IHC enrollees on their panel roster for a particular measure, or in the case of development screening, the benchmark target set forth above. HFS will count the number of qualifying patients for each measure enrolled on each PCP's Illinois Health Connect panel roster on December 1, 2012. HFS will then look to see which of those patients received the measured service during the measurement period.

HFS claims data will be used to determine whether a service was rendered (for immunizations, ICARE and Cornerstone data will also be used, and for the lead measure, data from IDPH will also be used). Although providers have 12 months from the date of service to bill HFS in order to be paid for the service, the bonus payment will be based on claims received no later than the end of a three-month run out (January through March of 2013), meaning all claims for these services must be submitted to HFS prior to April 1, 2013 to be counted in the bonus measurement for 2012.

PCPs do not have to report any special information to earn a bonus payment; they just need to submit a detailed claim for the services that are rendered as usual. A measured service is counted whether or not it was the current PCP or another provider who rendered the service during the measurement period.

If a PCP meets or exceeds the benchmark for a particular measured service, a bonus payment will be made for each patient that received the measured services. The bonus payment will be \$25 per patient per qualifying service. One patient may meet several measurements and, therefore, may count toward more than one qualifying service. If a PCP does not meet the benchmark, there will be no bonus payment made for any patients, whether they received the service or not.

More specific information about each bonus measurement and the target benchmarks can be found on the Illinois Health Connect Web site at www.illinoishealthconnect.com/provider/qualitytools/bonuspayment.aspx or obtained by calling the Illinois Health Connect Provider Services Help Desk at 1-877-912-1999, extension 3.