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## 2019 Payment Transformation measure changes

Aloha Provider,

Thank you for your continued participation in the HMSA Payment Transformation program. Based on your feedback, we continue to look for opportunities to evolve the program. Recently, changes to the value-based PMPM rate methodology, effective October 1, 2018, were included in the October 2018 version of the *Payment Transformation Program Guide*, which is available now on HHIN.

Changes to the PCP Performance and PCP Engagement measures for the 2019 performance period are summarized below. Detailed measure specifications will be included the January 2019 version of the *PT Program Guide*, which we hope to publish by the end of November. Additionally, updated code sets for the 2019 measures will be updated in the HMSA Provider Resource Center by the end of November.

### PCP Engagement Measure Changes

1. **Weighting of the PCP Engagement measures:** Performance on the 2019 PCP Engagement measures will impact base PMPM rates effective October 2020. Each PCP Engagement measure will be worth two percentage points instead of six or eight percentage points.
2. **Removing the access to and use of Coreo™ measure:** The intention of this measure was to incentivize provider engagement and the use of a tool that supported population health management, care gap management, pre-visit planning, and care coordination. Understanding that log-in activity was an imprecise measurement of this objective, the user provisioning process on Coreo was more complex than we anticipated and because providers have reported the ability to do some of these tasks through their EHR, HMSA decided to remove this measure from the 2019 PCP Engagement measure set.
3. **New measure—Use of Certified Electronic Health Record Technology (CEHRT) Platform:** All PCPs must report which CEHRT platform their practice uses. As an Other Payer Advanced APM, HMSA must require the use of CEHRT and must ensure that 50 percent of eligible clinicians use CEHRT to document and communicate clinical care. In 2019, PCPs who don't use CEHRT may still earn credit for this measure by reporting their intention to implement CEHRT or by providing a justification for their inability to implement CEHRT. Reporting will be through the annual Payment Transformation Provider Survey in the fourth quarter.
4. **EPSDT Form Completion measure:** PCPs who have fewer than 10 eligible members for the measure won't be scored.

### PCP Performance Measures Changes

1. **Sharecare RealAge® Test:** This measure won't be scored as part of the PT PCP Performance measure set in 2019. Coreo will continue to display the RealAge Test measure and care gaps; PCPs with the highest completion rates will be eligible for a separate incentive payment.
2. **Exclusion for advanced illness and frailty:** To align with HEDIS measure specification updates, members 66 years and older with advanced illness and frailty during the measurement year may be excluded from the following measures: Breast Cancer Screening, Colorectal Cancer Screening, Controlling Blood Pressure, and the four Comprehensive Diabetes Care measures. The logic for identifying advanced illness and frailty will be included in the program guide and the codes will be listed in the exclusion code sets for these measures. The exclusions will be applied as part of the measure logic.

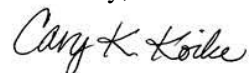
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3. **Controlling blood pressure:** This measure will be moved from the PO Performance measure set to the PCP Performance measure set in 2019. To align with HEDIS measure specification updates, the denominator will include members with two outpatient visits on different dates of service during the measurement year or year prior with diagnoses of hypertension. One of the two visits may be a telehealth visit, telephone visit, or online assessment. For numerator credit, the most recent blood pressure reading during the measurement period on or after the second diagnosis of hypertension must be <140/90 mm Hg. There's no longer a separate blood pressure threshold for members with diabetes. Blood pressure readings from remote monitoring devices that are electronically submitted directly to the provider will be accepted.
4. **Childhood immunization status:** To align with HEDIS measure specification updates and clinical guidelines, members must receive the MMR and VZV vaccines on or between their first and second birthday. The measure previously accepted MMR and VZV vaccines administered before the member's first birthday.
5. **Immunizations for adolescents:** The HPV vaccine will be added to this measure. To be compliant, members must have one meningococcal vaccine, one Tdap vaccine, and one HPV vaccine (two- or three-dose series) on or between their seventh and thirteenth birthdays.
6. **Review of Chronic Conditions:** The measurement period for the Review of Chronic Conditions measure will be January 1–September 30, 2019.
7. **Screening for depression and follow-up plan:** In an effort to align with a depression screening measure acknowledged by CMS for the MIPS quality program, the depression screening measure will be based on the specifications for NQF 0418. Members 13 years of age and older by the end of the measurement period who've had an office visit with a PCP during the measurement period must be screened for depression. Members who screen positive must have a follow-up plan documented on the date of the positive screen. The payment transformation page in the Provider Resource Center will list the new HCPCS codes required for numerator credit.
8. **Influenza vaccine:** Based on feedback about the reporting challenges for this measure from providers and physician organization leaders, we've decided not to score this measure in 2019. Coreo will continue to display care gaps for this measure and POs will have a process-based PO Performance measure to develop population health management strategies around influenza vaccinations and to work with HMSA to shore up gaps in the data. The process measure will be worth 34 percent of the PO Performance measure set.

If you have any questions, call us at 948-6820 on Oahu or 1 (877) 304-4672 toll-free on the Neighbor Islands. Or email [PSInquiries@hmsa.com](mailto:PSInquiries@hmsa.com).

We look forward to our continuing partnership as we all strive to improve the health of Hawaii's people. Thank you for the excellent care you provide to our members and for supporting HMSA.

Sincerely,



Cary K. Koike  
Director, Strategic Network Relations  
Provider Services

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