Pennsylvania
Department of Human Services
Office of Developmental Programs

Proposed language for amendments to 55 Pa. Code Sections 6100, relating to the addition of code sections for Performance Based Contracting (PBC) for review by the PBC Workgroup. Information contained in this document is pre-decisional. For workgroup members who miss a meeting, you may submit suggestions or comments to RA-PWODP6100REGS@pa.gov.

Key

Black Bold Font = Additions proposed to be added.
Strikethrough = Information proposed to be removed.

Please see below for definitions from 55 Pa. Code Section 6100.3 for reference.

Code Section/Title: 55 Pa. Code Sec. 6100. (New)

(a) The Department may limit initial provider qualifications and enrollment for designated HCBS to improve the quality of designated HCBS based on factors including HCBS population needs, location of providers, program integrity, cost effectiveness, and quality of services. Designated HCBS shall be published as notice in the *Pennsylvania Bulletin* for public review and comment.

(b) The Department shall establish and publish as notice in the *Pennsylvania Bulletin* for public review and comment performance standards containing performance measures for providers which address the following areas:

(1) Clinical and programmatic needs.

(2) Sustainability of HCBS.

(3) Access to HCBS.

(4) Quality Improvement.

(5) Other performance areas which are identified through public review and comment.

(c) The Department shall determine if a provider's performance meets the established performance measures for the designated HCBS.

(d) All providers who deliver the designated HCBS must participate in performance determination as required by subsection (c), including the submission of required documentation and data.

(e) Providers may be eligible for alternative payment methods for designated HCBS based on the Department's determination in subsection (c).

(f) The Department shall offer providers the opportunity to participate in a resolution process to resolve disagreements with the results of the determination process in subsection (c) that impacts provider payment for the designated HCBS. Any provider who disagrees with the initial determination must notify the Department within 14 calendar days of receipt of the initial determination. The Department must resolve the disagreement within 45 calendar days of the provider's notification.

(g) The Department shall establish and publish the timeframes it will use to determine if a provider's performance meets the established performance measures for the designated HCBS.

(h) The Department shall publish its final determination of results made under subsection (c).

(i) The Department may establish and publish as a notice in the *Pennsylvania Bulletin* for public review and comment alternative payment methods for designated HCBS other than the methods specified in § 6100.481 (relating to Departmental rates and classifications), including the following:

(1) Rate add ons.

(2) Pay for performance.

(3) Bundled payments.

(4) Shared savings.

(5) Per member per month.

Reason for Change

ODP proposes adding a new section to 55 Pa. Code Sec. 6100 to create regulations and establish Department authority for selective contracting or "Performance Based Contracting" for designated HCBS to ensure service sustainability, quality improvement, improved clinical capacity, workforce sustainability, and support for individuals with complex needs.

55 Pa. Code Sec. 6100.3. (Amendment)

Rate add on – percentage or amount added to a rate.

Pay for performance – outcome-based payments that reward providers with incentive payments for achieving predetermined goals aimed at improving quality, efficiency, and value.

Bundled payment - A single payment for the combined cost of eligible services and supplies, provided during a defined episode of HCBS. This payment can cover multiple providers involved in the episode of HCBS.

Shared savings – a payment arrangement in which a provider can receive or retain a portion of the money saved when the cost of rendering HCBS is below the established rate, subject to applicable program requirements related to quality performance.

Per member per month – A payment method that pays a provider a predetermined amount each month for each enrolled or assigned participant, regardless of the number of separately billed or rendered HCBS that person receives.

55 Pa. Code Sec. 6100.43 - Regulatory Waiver (Amendment)

(a) A provider may submit a request for a waiver of a section, subsection, paragraph or subparagraph of this chapter, except for the following:

(1) Sections 6100.1—6100.3.

DRAFT

(2) Sections 6100.41—6100.56.

(3) Sections 6100.181—6100.186.

(4) Sections 6100.341—6100.350.

(5) Section 6100.XX

Definitions from 55 Pa. Code Chapter 6100.3 for reference:

The Department- The Department of Human Services of the Commonwealth.

HCBS- Home and community-based service- An activity, assistance or product provided to an individual that is funded through a Federally-approved waiver program or the State plan.

Provider- The person, entity or agency that is contracted or authorized to deliver the service to the individual.

DRAFT