

Provider Profiler Narrative

The Alabama Medicaid Agency's Data Analytics Division is responsible for generating an ACHN provider scorecard which allows the provider to view and replicate, if desired, his or her quality, cost effectiveness, and/or Patient-Centered Medical Home (PCHM) recognition Bonus payment as part of the provider's overall Primary Care Physician (PCP) Bonus payment.

The PCP Bonus payment is comprised of three sections as mentioned above. Quality accounts for 50% of the bonus, Cost Effectiveness accounts for 45% of the bonus, and Patient-Centered Medical Home Recognition accounts for the last 5% of the bonus. In addition, this bonus is awarded on a quarterly basis with a \$15 million annual limit.

With the transitioning of programs, all participating and eligible providers will receive their full PCP Bonus payment until a specified period in which the bonus will then be calculated based on the provider's performance.

Attribution, the assignment of a recipient to a participating provider or provider group, is the key mechanism in calculating a PCP Bonus payment and the first step in calculating a payment. Attribution, briefly defined, takes into account the 24-month claims history of a recipient and, based on a scoring mechanism, assigns a PCP or eligible provider based on a calculated point value. This calculation is completed on a quarterly basis as the PCP Bonus payment is only distributed on a quarterly basis.

The first PCP Bonus payment was awarded on November 1, 2019, which fell on the first check write of November. Going forward, these payments will be awarded on the second check write of the month in which payment is to be received (quarterly), starting in January 2020.

PCP Bonus Payments

Quality Bonus Payment – 50%

To calculate this portion of the bonus, the eligible provider/provider group must know the number of members attributed to him or her as well as the total number of attributed providers in the program. This information is provided on a scorecard from the Agency's Analytics Division.

There are eight defined Provider Quality Measures: four Child Quality Measures and four Adult Quality Measures.

An actively participating provider will receive his or her first calculated payment in July 2021. Until then or for the first seven quarters, the provider will receive a payment based on attribution.

Cost Effectiveness – 45%

To calculate this portion of the bonus, the eligible provider or provider group must know the number of members attributed to him or her as well as the total number of attributed providers in the program. This information is provided on a scorecard from the Agency's Analytics Division.

An actively participating provider will receive his or her first calculated payment in January 2021. Until then or for the first five quarters, the provider will receive a payment based on attribution.

Patient-Centered Medical Home (PCMH) – 5%

This calculation is based on attributed members and only makes up 5% of the PCP Bonus payment. The eligible and actively participating provider must establish his or her PCHM status with Medicaid in order to receive this Bonus payment. Currently, the provider receives this amount based on attributed members only.

An actively participating provider will receive his or her first calculated payment in October 2020. Until then, the provider will receive a payment based on attribution.

For additional information about the ACHN for providers, please visit https://medicaid.alabama.gov/content/5.0_Managed_Care/5.1_ACHN/5.1.3_ACHN_Providers.aspx.