



UnitedHealthcare Community and State

Discover the Impact That Quality of Care Can Have
in Your Office for Hoosier Care Connect Providers

2025 IHCP Works Annual Seminar

Rebecca Church, Provider Quality Outreach

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United
Healthcare®



Provider Quality Outreach

UnitedHealthcare strives to provide information to each contracted Hoosier Care Connect (HCC) provider in order to educate and assist in all aspects of member care.

Our Quality Outreach program will support HCC providers' offices with education for their staff regarding questions and issues within the program.





Agenda



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- Meet the Quality Team
- How Can the Quality Team Assist Providers?
- Quality Reporting for Providers
- Provider Incentives (2025) & New Contract Amendment





Meet the Quality Team





Meet the Quality Team for Community & State

- **JaNell Kendall** (Janell_Kendall@uhc.com) - Associate Director of Quality
- **Scott Smith** (Scott_Smith@uhc.com) - Quality Manager
- **Rebecca Church** (Rebecca_Church@uhc.com) - Clinical Provider Outreach & Quality Consultant



How Can the Quality Team Assist Providers?





Assistance to Providers

The Quality Team can assist providers in different ways:

- PROVIDE guidelines and key components for access to care
- DISCUSS Healthcare Effectiveness Data Information Set (HEDIS®) measures/reporting and utilize information to minimize care gaps
- PROVIDE educational materials and share best practices
- ENSURE provider is aware of Provider Incentives and Pay for Outcomes



Meeting With Providers

Provider offices can meet and correspond with Quality Outreach Specialist, Rebecca Church:

- VIRTUALLY – we can use Microsoft Teams or Zoom to schedule monthly or quarterly meetings
- EMAIL – we can send all information by secure email to providers' offices for follow-up and information distribution
- ON-SITE – we can also schedule times to visit offices on-site by request



Quality Reporting for Providers



Types of Reporting

- Member Rosters
- Year-to-Date (YTD) and Year-Over-Year (YOY) HEDIS® reporting by measure
- Gap Reporting and Members in Need of Services
- Patient Care Opportunity Report (PCOR)



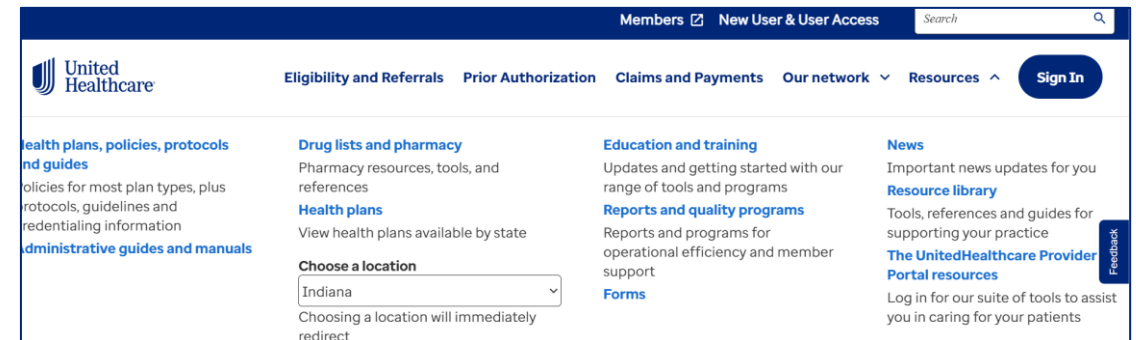
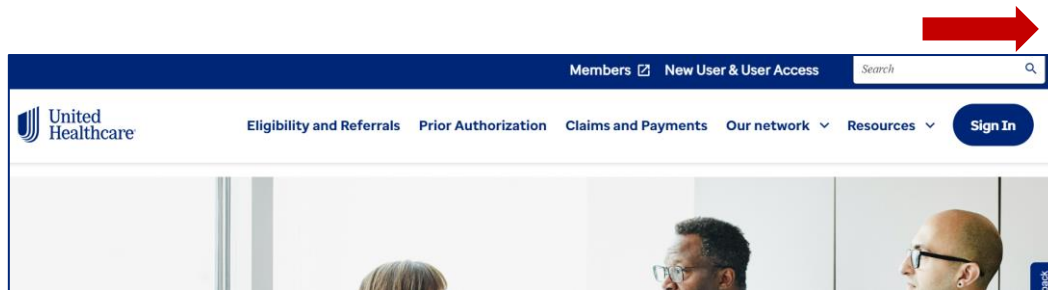
Quality Reporting

- During regular meetings, the Quality team will have the opportunity to share different Quality reports to further knowledge and work on goals and expectations for the year.
- We utilize the PCOR for information to track throughout the year.
- The providers are instructed on how to access PCOR and Practice Assist and which reporting will be available.
- We also review member rosters and panels and encourage a “clean up” of those listings. Making sure your panels are verified ensures more accurate compliancy records.



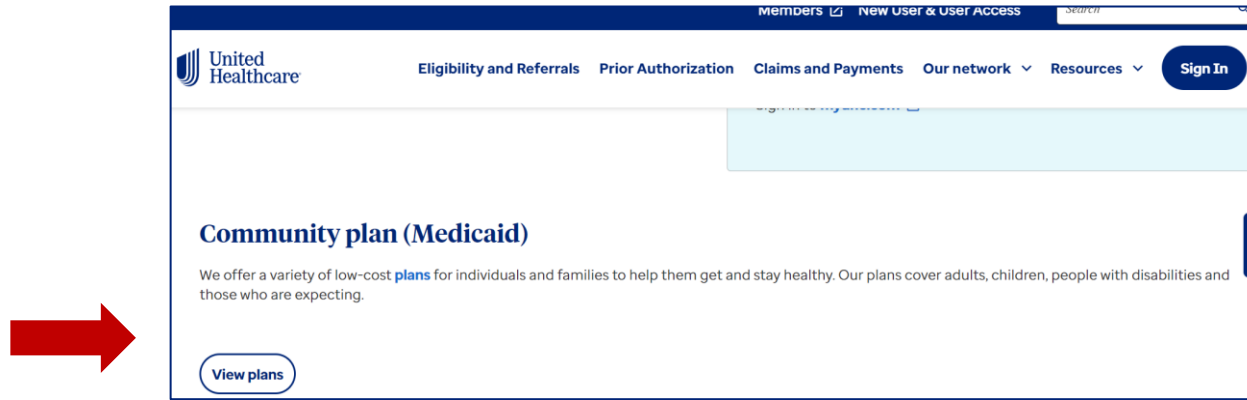
Quality Reporting – Where To Find Member Rosters

- The reports mentioned on the previous slides (member rosters, PCOR, Practice Assist, HEDIS® reporting) can all be found at www.uhcprovider.com.
- A username and password are required, and after logging in, the options for which reports to view are given.
- Providers can follow these screenshots to view member rosters:

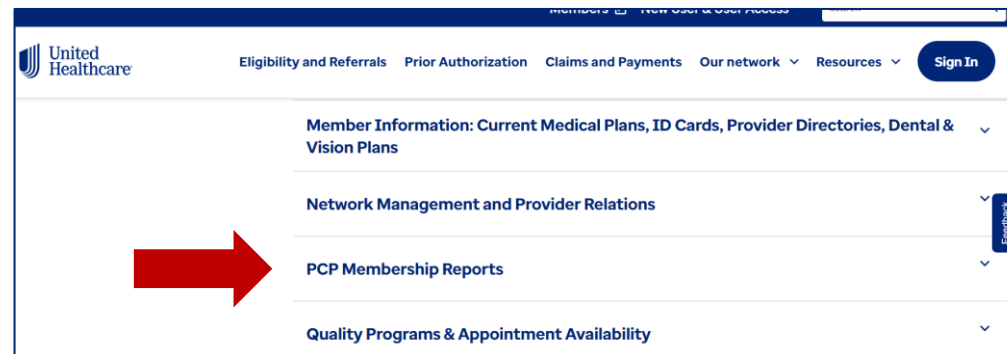




Quality Reporting – Member Rosters (cont.)

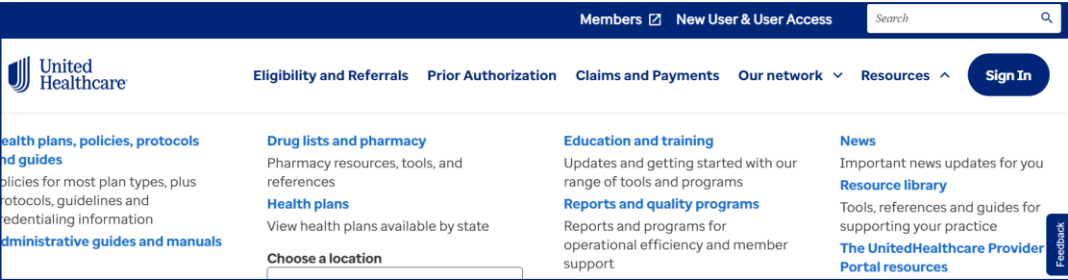
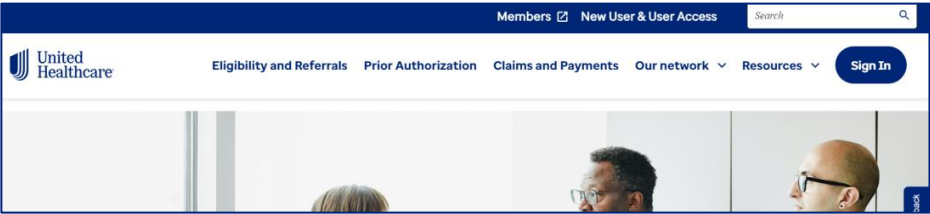


Scroll down





Quality Reporting – Where To Find PCOR, PCPi Reporting



Scroll down





Provider Incentives (2025) & New Contract Amendment



Provider Incentive Payments

Determining your CP-PCPi payment:

Care providers participating in the UnitedHealthcare Community Plan of Indiana network can earn a reward by addressing specific measures for the Hoosier Care Connect assigned members. The following slides will explain each measure name, any target scores needed, and the incentive amount that can be earned for each closed care opportunity. The CP-PCPi Payment is limited to one (1) payment per patient per measure, and payments are made based on the provider's Tax ID.

Receiving your CP PCPi payment:

Following the measurement period, UnitedHealthcare Community Plan will sum the closed care opportunity amounts earned. The total CP-PCPi Payment will be determined by UnitedHealthcare Community Plan claims that were paid or denied at least 90 days after the measurement period for HEDIS® measures. If a CP-PCPi payment is earned, UHC will send your practice an estimated Interim CP-PCPi payment, if earned, based on your initial performance results for the measurement period, no later than Q2, 2025. UHC will send your practice a final CP-PCPi payment, less the amount of any estimated interim CP-PCPi payment, no later than Q4, 2025.

Community Plan - Primary Care Physician Incentive (CP-PCPi) Payment



Provider Incentives for 2025

UnitedHealthcare Community Plan of Indiana

MEASURE	INCENTIVE	
Adult Access to Preventive/Ambulatory Health Services (AAP)	Payment for each closed care opportunity =	\$10
Child & Adolescent Well-Care Visits – Total (WCV)	Payment for each closed care opportunity =	\$10
Immunizations for Adolescents – Combo 1 (IMA)	Payment for each closed care opportunity =	\$10
Social Determinants of Health Assessment (SDOH)	Payment for each closed care opportunity =	\$10
Additional Incentive		
Tobacco Cessation Counseling (TCC)	Payment for each closed care opportunity =	\$10

NOTE: Percentiles are based on HEDIS® Quality Compass National Benchmarks. Benchmarks indicate a standard of achievement or excellence against which similar things are measured – in this case, health plan performance across the U.S. Example: The 90th percentile represents a level of performance that was met or exceeded by the top 10% of Medicaid plans that submitted HEDIS® data to NCQA.



Adult Access to Preventive Ambulatory Health Services (AAP)

Measure AAP	Incentive
Adult Access to Preventive/Ambulatory Health Services (AAP)	Payment for each closed care opportunity = \$10

- Providers can earn an incentive when members are seen for Preventive/Ambulatory Health Services.
- Through CP-PCPi, they can earn bonuses for helping their patients who are UnitedHealthcare Community Plan Members of Indiana become more engaged in their preventive health care.
- If the provider is an established Federally Qualified Health Care (FQHC) provider, their incentive may be increased based on reaching a compliant percentage of 79.54%. The incentive is increased to \$100 per member after the target is met. **Extra incentive (\$10) for closing care gaps for BIPOC members (Black Indigenous/People of Color)**

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Child & Adolescent Well-Care Visit (WCV)

Measure WCV	Incentive
Child & Adolescent Well-Care Visits – Total (WCV)	Payment for each closed care opportunity = \$10

- Providers can earn an incentive when members are seen for Child & Adolescent Well-Care Visits, children ages 3-21.
- Through CP-PCPi, they can earn bonuses for helping their patients who are UnitedHealthcare Community Plan Members of Indiana become more engaged in their preventive health care.
- If the provider is an established FQHC provider, their incentive may be increased based on reaching a compliant percentage of 58.07 %. The incentive is increased to \$100 per member after the target is met.

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Immunizations for Adolescents (IMA)

Measure IMA	Incentive
Immunizations for Adolescents – Combo 1 (IMA)	Payment for each closed care opportunity = \$10

- Providers can earn an incentive when members are seen completing their Combo 1 for IMA.
- IMA assesses adolescents 13 years of age who have had one dose of the meningococcal vaccine, one Tdap vaccine, and the complete human papillomavirus vaccine series by their 13th birthday.
- Through CP-PCPi, they can earn bonuses for helping their patients who are UnitedHealthcare Community Plan Members of Indiana become more engaged in their preventive health care.

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Social Determinants of Health (SDOH)

Measure (SDOH)	Incentive
Social Determinants of Health Assessment (SDOH)	Payment for each closed care opportunity = \$10

- Providers can earn an incentive when members are seen and assessed for SDOH.
- Through CP-PCPi, they can earn bonuses for helping their patients who are UnitedHealthcare Community Plan Members of Indiana become more engaged in their preventive health care.

To receive the incentive payout, the provider must:

1. Bill their claim with a completed health assessment, which includes the CPT code 96160 (health risk assessment)
2. Bill with the identified Z-code for Social Determinant of Health.

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Tobacco Cessation Counseling (TCC)

Measure	Incentive
Tobacco Cessation Counseling (TCC)	Payment for each closed care opportunity = \$10

- Providers can also earn an additional incentive when members are seen and counseled for Tobacco Cessation.
- Qualifying primary medical providers and dentists will receive an incentive amount for each claim billed with any of the following codes: 99406, 99407, and D1320.
- Through CP-PCPi, they can earn bonuses for helping their patients who are UnitedHealthcare Community Plan Members of Indiana become more engaged in their preventive health care.

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Behavioral Health Provider Incentive (BHPI) Program

- Through BHPI, providers can earn bonuses for helping clients, who are UnitedHealthcare Community Plan Medicaid members, become more engaged in their health care. The program rewards qualifying behavioral health providers for performance tied to addressing care opportunities for certain HEDIS® measures during the measurement period.
- The total incentive payment amount will be determined by claims paid or denied at least ninety (90) days after the measurement period is completed. If a bonus payment is earned, it will be sent within ninety (90) days post the measurement period's ninety (90) day claims run-out period.
- The chart below shows the measure name and the incentive amount that can be earned for each closed care opportunity.

Measure	Payment for Each Closed Care Opportunity
7 Day Follow-Up After Hospitalization for Mental Illness	\$100
30 Day Follow-Up After Hospitalization for Mental Illness	\$50



Chronic Conditions Initiatives – Dental Care

- UnitedHealthcare began a dental pilot program for primary medical providers to recognize the need for their younger patients, ages 0-21, to receive timely dental care.
- Dental offices in seven Indiana counties agreed to take part in this program, where the Primary Medical Provider (PMP) could offer referrals for those patients in need. The members/patients are given a \$25 gift card upon completion of their dental visit.
- The seven counties participating in the pilot program are Lake, Hamilton, Marion, Vigo, Vanderburgh, Tippecanoe, and Allen counties. The physician offices received information and education, along with the participating dental offices and dentists.



New Contract Amendment (currently in progress)

HCC Contract Revisions

- Effective July 9, 2025, Centers for Medicare & Medicaid Service (CMS) has new requirements for Medicaid primary care provider Pay for Outcomes (P4O) quality incentive programs. To align with new CMS requirements, UnitedHealthcare Community Plan (Medicaid) is modifying the quality incentive portion of the current PCP Quality Incentive program and the Community Plan Health Equity Program Incentive (CP PCPi & CP HEPi) for 2025 services.
- Your offices have been sent updated contracts, which, in turn, requests a signature, informing of the current CP PCPi and CP HEPi incentive programs. Once this signed contract is returned, the incentive program and payouts for such will continue as normal.



- Please contact our Outreach Specialist, **Rebecca Church**, for questions and/or to schedule a virtual or on-site visit.
 - rebecca_church@uhc.com
- Please contact **JaNell Kendall** or **Scott Smith** with any Quality-related questions and issues.
 - janell_kendall@uhc.com
 - scott_smith@uhc.com

QUESTIONS?

