

# North Carolina Integrated Care for Kids (NC InCK) Incentive Program

An innovative model to promote child and family well-being in North Carolina

# Training Objectives

- Program Introduction
- Eligibility Requirements
- Performance Measurement
- Performance Reporting
- Payment Model

# Program Introduction

- The NC InCK Incentive Program rewards Healthy Blue providers participating in the NC InCK pilot for providing quality care and services to members in Alamance, Granville, Durham, Vance, and Orange counties who are enrolled in the NC InCK pilot program.
- NC InCK participating providers who meet minimum eligibility requirements and achieve performance goals in NC InCK-specific domains, such as food and housing stability, management of clinical depression, and reduction in well-child disparities, will be eligible for incentive payments at the end of the Program Year.
- Our initial NC InCK Incentive Program is built on *HCP LAN category 2B* payment architecture, with plans to advance the model to category 3C after year two.

# Eligibility Requirements

- In network provider with Blue Cross and Blue Shield of North Carolina (Blue Cross NC)'s Healthy Blue plan for a minimum of six months and one day
- Execute an InCK Incentive Program *Letter of Agreement* in a format established by Blue Cross NC
- Meet/maintain minimum of 250 NC InCK eligible memberships during measurement year
- Remain contracted in the Healthy Blue network as an AMH tier 3 in Good Standing throughout Performance Measurement Period (AMH tier 2 considered on case-by-case basis)

# Performance Measurement

- Two models reflect a glidepath to a more advanced payment model with different levels of readiness to take on risk.
- InCK Foundation is built on a combination of reporting and performance-based payments as providers build capacity and infrastructure, with eventual requirement to transition to InCK Advanced after year two, which includes shared savings/losses.

## Performance Measurement (cont.)

NC InCK Measure	InCK Foundation	InCK Advanced
Primary Care Kindergarten Readiness Bundle	Pay for Reporting	Shared Savings/Losses
Screening for Housing Instability	Pay for Reporting	Shared Savings/Losses
Screening for Food Insecurity	Pay for Reporting	Shared Savings/Losses
Shared Action Plan for SILs 2 and 3	Pay for Reporting	Shared Savings/Losses
Clinical Depression Screening and Follow-Up Plan	<b>Pay for Performance</b>	Shared Savings/Losses
Ambulatory Care: ED Visits	<b>Pay for Performance</b>	
Equity: Well-Child Visits 0-30 months	<b>Pay for Performance</b>	
Total Cost of Care	<b>Aware</b>	Shared Savings/Losses

# Performance Reporting

Beginning in calendar year 2023, the North Carolina Department of Health and Human Services (the Department) will monitor progress towards meeting performance benchmarks for NC InCK Incentive Program measures in each contract year. Blue Cross NC will employ a tiered benchmark structure to allow opportunity for incentive payments for achieving various benchmark levels (for example, incrementally increasing incentive payment if you reach 50th, 75th, 90th percentile).

Benchmarks will be set using the following:

- Historical rates where comparable historical data are available at the regional, state, or national levels (with a preference for statewide or regional standards)
- Program goals where requirements have been set forth by CMS, particularly for the novel measures in the NC InCK Incentive Program measures.
- Benchmarks for calendar year 2023 will be established for the NC InCK Incentive Program measures and shared with Standard Plans. The Department will monitor performance and may adjust the benchmarking methodology over time.

# Performance Reporting (cont.)

Health plans will receive reports at the following levels:

- Plan-specific overall
- Plan-specific by provider
- All plans overall
- All plans by provider (the pooled performance measure by provider)

NC InCK service providers will receive reports at the following levels:

- Pooled performance: evaluates provider's performance for a specific performance measure across all prepaid health plans (PHPs) with whom they are contracted
- The Department will provide the necessary reporting for a practice's performance across all PHPs.



## Performance Reporting (cont.)

The Department will generate performance reports for PHPs and NC InCK service providers quarterly and annually. Measures will be stratified by race, ethnicity, and county in alignment with the Department's health equity focus. Blue Cross NC will use these reports in conjunction with internal health equity reporting to systematically identify disparities within NC InCK and Medicaid Managed Care patient populations.

# Payment Model

There are 10 core measures assigned within the NC InCK Incentive Program:

- Six measures are categorized as *Aware* (reporting only).
- Four measures are performance-based. These are equally weighted for the first year and eligible for up to \$0.75 PMPM per measure for max payout of \$3 PMPM. Performance is based on rate of compliance in each measure. Denominator for each measure equals eligible members in SIL level 1-3, while the numerator equals number of members with completed and documented services.

# Payment Model (cont.)

Column Header	Tier 1 (50% quality payment)	Tier 2 (75% quality payment)	Tier 3 (100% quality payment)
<b>Kindergarten Readiness Rate</b>	Aware*	Aware	Aware
<b>Primary Care Kindergarten Readiness Bundle</b>	Documented on 20% panel	Documented on 40% panel	Documented on 60% panel
<b>Food Insecurity and Housing Instability Screening</b>	Documented on 20% panel	Documented on 40% panel	Documented on 60% panel
<b>Food Insecurity Rate</b>	Aware	Aware	Aware
<b>Housing Instability Rate</b>	Aware	Aware	Aware
<b>Share Action Plan for Children in SIL-2 and SIL-3</b>	Plan documented for 5% SIL-2 and 10% SIL-3	Plan documented for 10% SIL-2 and 20% SIL-3	Plan documented for 10% SIL-2 and 30% SIL-3
<b>Screening for Clinical Depression and Follow-Up Plan</b>	Documented on 20% panel	Documented on 40% panel	Documented on 60% panel
<b>Ambulatory Care: ED Visits</b>	Stable compared to 2-year historical baseline	2.5% lower than 2-year historical baseline	5% lower than 2-year historical baseline
<b>Well-Child Visits for Age 0-15 Months (Disparity Measure)*</b>	Increase Black/African American rate by 5% X 1 year and overall rate is stable (+/- 1%) or improving*	Increase Black/African American rate by 10% X 1 year and overall rate is stable (+/- 1%) or improving	Increase Black/African American rate by 15% X 1 year and overall rate is stable (+/- 1%) or improving
<b>Well-Child Visits for Age 15-30 Months*</b>	Aware	Aware	Aware
<b>Total Cost of Care</b>	Aware	Aware	Aware

## Want to learn more?

To learn more about NC InCK:

- Go to <https://provider.healthybluenc.com/north-carolina-provider/training-academy>.
- Email NC InCK APM Program at [AMH@healthybluenc.com](mailto:AMH@healthybluenc.com).



HealthyBlue

<https://provider.healthybluenc.com>

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