

**Overview of Value-Based Payments for Home and Community-Based Services Providers
Specific For May 28, 2025, Initial Outcome Based Payment**

VBP Payment Period: January 1, 2025 to April 30, 2025 (4 months)

Payment Disbursement: The Value Based Payment is processed through Gainwell Interchange Remittance Advice for eligible providers. The RA reason code for Value Based Payment is 8327

What is the purpose of value-based payments for Home and Community-Based Services (HCBS)?

- Value based payments are a way of paying for performance and incentivizing organizations to improve member outcomes.
- If organizations reach specific benchmarks during the performance period they will get an extra payment.

What outcomes are included in value-based payments?

Avoidable Hospitalizations measure is implemented for the first outcome based VBP.

Avoidable hospitalizations (Measure implemented in this period)

Percent of a participating organization's Medicaid HCBS population with a potentially avoidable hospitalization in the performance period. Avoidable hospitalizations are defined by Centers for Medicare and Medicaid Services (CMS).

Future/Additional measures will be as follows:

Discharges from hospital to community (versus facility)	Person-Centered Goals
Percent of a participating organization's Medicaid HCBS population that was discharged from hospital back to the community (instead of a facility), out of the number who had any hospitalizations during the performance period.	Person-Centered Goals include three measures: percent of a participating organization's Medicaid HCBS population in the performance period who (1) Goal Identification: had a goal identified; (2) Goal Assessment: had a follow-up within 15-180 days; and (3) Goal Attainment: met or exceeded their goal.

Eligible if organization has ≥30 individuals served:

What is the maximum payment my organization could receive?

- The maximum potential payment for any organization is 2% of the last 4 months of expenditures for HCBS services.
- The maximum payment for each outcome depends on how many outcomes are being measured for your organization. See table for breakdown below.

Organization type: Eligible if organization has ≥30 individuals served	Total maximum payment
Agencies serving Care-Managed/Waiver Members	2%
Home Health Agency	2%

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How much of the 2% maximum payment will my organization receive?

The payments received for each outcome depend on how your organization performs in each performance period. Payments are a percentage of the maximum payments for each outcome noted above.

Benchmark category	Benchmark not met	Low Benchmark	High Benchmark
Avoidable hospitalizations*	0%	50%	100%

How are the payments calculated

Organizations with ≥ 30 Panel Size	Outcome Measures	Max VBP %	Benchmark Not Met (0%)	Low Benchmark (50%)	High Benchmark (100%)
Home and Community Based Services (Agencies serving Care-Managed/Waiver Members)	Avoidable Hospitalizations	2.00%	0.00%	1.00%	2.00%
	Total Max Payment	2.00%	0.00%	1.00%	2.00%
Home Health Agency	Avoidable Hospitalizations	2.00%	0.00%	1.00%	2.00%
	Total Max Payment	2.00%	0.00%	1.00%	2.00%

Eligible if organization has <30 individuals served:

What if my organization does not have enough individuals served to be eligible for certain value-based payments?

If your organization does not have enough individuals served (see numbers required above), you will be eligible for an **engagement payment**.

What is the engagement payment?

- The engagement payment rewards organizations that used the Connie dashboard to monitor the status of individuals they serve to support improvements in care.
- Only organizations that are not eligible for the value-based payments because of a smaller number of individuals served are eligible for the engagement payments.
- The engagement payment is 40% of the maximum payment for each outcome (see description of maximum payments below).
- Metrics are collected on the organization's engagement with the Connie dashboard and are used to determine whether an organization meets the criteria for an engagement payment.

Organizations with < 30 Panel size	Engagement Metric	Max VBP %	Not Met (0%)	Met (40%)
Home and Community Based Services (Agencies serving Care-Managed/Waiver Members)	Engagement Metric	2.00%	0%	0.80%
Home Health Agency	Engagement Metric	2.00%	0%	0.80%