

State of California Medi-Cal Managed Care Developmental Screening Directed Payment Program Evaluation for Calendar Year 2020 (January 1, 2020 – December 31, 2020)

Background

In accordance with Title 42 of the Code of Federal Regulations (CFR), Section 438.6(c)(2)(ii)(D), the California Department of Health Care Services (DHCS) is required to submit an evaluation plan that measures the degree to which the directed payment arrangement advances at least one of the goals and objectives in the quality strategy. This evaluation plan will assess the performance and results of the Proposition 56 Developmental Screening Services Directed Payment Program implementation during the Calendar Year (CY) 2020 (January 1, 2020 through December 31, 2020).

The Proposition 56 Developmental Screening Directed Payment Program directs Medi-Cal managed care health plans (MCPs) to make uniform dollar add-on payments for specific developmental screening services. This directed payment program supports network providers to provide critical services to Medi-Cal managed care members.

Evaluation Purpose and Questions

The Proposition 56 Developmental Screening Directed Payment Program is expected to enhance the quality of care and improve encounter data submissions by providers to better target those areas where improved performance will have the greatest effect on health outcomes. The CMS-approved evaluation design features two evaluation questions:

- 1. Do higher provider directed payments for developmental screening services, serve to maintain or improve the timeliness and completeness of encounter data when compared to the Baseline period?
- 2. Do higher provider directed payments for developmental screening services,, serve to increase the frequency of developmental screenings in the first three years of life when compared to the Baseline period?





Evaluation Data Sources and Measures

This evaluation addresses these questions mainly through quantitative analyses of encounter data extracted from the DHCS Management Information System/Decision Support System (MIS/DSS), spanning service dates in CY 2019 and CY 2020.

To measure data quality improvement in encounter claim submissions, denied encounters, denied encounter turnaround times, and timeliness of submissions were assessed using the Post-Adjudicated Claims and Encounters System (PACES) data extracted via MIS/DSS.

To measure changes in utilization pattern, DHCS compared Healthcare Effectiveness Data and Information Set (HEDIS) rates of Developmental Screening in the First Three Years of Life (DEV-CH) for managed care members.

Evaluation Results

Encounter Data Quality

- 1. Denied claims and turnaround time:
 - a) Denied Encounters Turnaround Time This measure addresses how quickly denied encounter data files are corrected and resubmitted by MCPs. Turnaround time is the time, in days, between an encounter data file denial date and the resubmission date to DHCS.

Turnaround	CY 2019 (Baseline Period)			CY 2020 (Evaluation Period)		
Time	Corrected Encounters	Total Denied	Percentage of	Corrected Encounters	Total Denied	Percentage of
		Encounters	Corrected Encounters per Group		Encounters	Corrected Encounters per Group
0 to 15 Days	51	199	26%	-	148	0%
16 to 30 Days	-	199	0%	17	148	11%
31 to 60 Days	-	199	0%	1	148	1%
>60 Days	148	199	74%	130	148	88%

- 88% of denied encounters were corrected and resubmitted in greater than 60 days of denial notice for CY 2020, compared to 74% for the Baseline Period.

b) Total Denied Encounters

CY 2019 (Baseline Period)			CY 2020 (Evaluation Period)		
Total Denied	Total	Percent of	Total Denied	Total	Percent of
Encounters	Encounters	Denied	Encounters	Encounters	Denied
		Encounters			Encounters
		per Month			per Month
1,303	58,624	2%	381	63,164	1%

- Total denied encounters per month reported was 1% for CY 2020, compared to 2% for the Baseline Period.

c) Timeliness (lagtime): This measure reports the time it takes for MCPs to submit encounter data files. Lagtime is the time, in days, between applicable Dates of Service and the Submission date to DHCS.

Lagtime	CY 2019 (Baseline Period)			CY 2020 (Evaluation Period)		
	Encounters per Lagtime Group	Total Encounters	Percent of Encounters per Latime Group	Encounters per Lagtime Group	Total Encounters	Percent of Encounters per Lagtime Group
0 to 90 Days	37,793	58,624	64%	47,634	63,164	75%
91 to 180 Days	13,930	58,624	24%	12,038	63,164	19%
181 to 365 Days	4,796	58,624	8%	2,438	63,164	4%
>365 Days	2,123	58,624	4%	1,054	63,164	2%

- For CY 2020, approximately 94% of encounters were submitted within 180 days of dates of service compared to 88% for the Baseline Period.

Service Utilization

Utilization: From the MCP encounter data, DHCS evaluated DEV-CH in accordance with current CMS Core Set Technical Specifications to determine the percentage of children documented to have been screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding, or on, their first, second, or third birthday, as well as the combined rate for all age groups.

Age Group	CY 2019 (Baseline Period)	CY 2020 (Evaluation Period)	
	DEV Rate	DEV Rate	
Age of 1 Years	22.53%	19.67%	
Age of 2 Years	28.99%	26.65%	
Age of 3 Years	22.73%	21.06%	
Total	25.42%	23.11%	

- DEV-CH rates decreased across all age groups in CY 2020 compared to the Baseline Period.
- DHCS will continue to monitor this metric in future program years.

Limitations of Evaluation:

These results suggest that the directed payment program may have had positive impacts on encounter data quality. Both the percentage of denied claims and the timeliness of claim submissions showed positive improvements.

However, we cannot separate changes attributable to the directed payment programs from other secular changes such as technology advancements occurring across the health system, provider supply, or other factors. We are also unable to determine the effect that the COVID-19 public health emergency (PHE) may have had on service provision. Reporting may have been severely impacted by the PHE.

Conclusions:

DHCS' examination of the Baseline Period and CY 2020 encounter data quality and HEDIS DEV-CH rates for managed care members indicates the following:

- 1. The percent of denied encounters that took longer than 60 days to review, correct and resubmit during CY 2020 increased to 88% of denied encounters, relative to 74% for the Baseline period.
- 2. The percent of denied encounters declined to 1% per month in CY 2020 from to 2% during the Baseline period.
- 3. The percent of encounter files that were submitted within 180 days of the date of service increased to 94% relative to 88% in the Baseline period.
- Reflective of COVID-19 impacts, Proposition 56 Developmental Screening Directed Payment Program rates decreased for all age groups during CY 2020 compared to the Baseline Period.