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## SoonerExcel and Transitional Payment Summary

**SoonerExcel** (OHCA pay-for-excellence program) – An initial pool of dollars will be available for providers who meet our pay-for-excellence measures in the first year. This amount will increase as the transitional payments (described below) are migrated into the SoonerExcel incentive program. These payments will be made quarterly; the first proposed payments will be made in April 09 based on Oct – Dec 08 claims data at a paid status by March 09. Below is a list of proposed measures.

- *Child Health Exams (EPSDT) and DTaP payments* will continue to be calculated using the current distribution methodology and the previously allocated funds.
- *Chronic Conditions; High Risk Members payment* will be made to providers that participate in the Health Management program (HMP).
- Generic Drug Prescribing payments will be determined by College of Pharmacy COP profiling.
- *ER utilization payments* will use the profiling developed by APS that is currently being shared with the providers.
- **B&CC** screening payments will also be determined by APS profiling.
- *Physician inpatient admitting and visits payments* will be divided into two levels. At the first level physicians will receive a bonus payment per claim for admitting and caring for a patient in an inpatient setting. The amount per claim will be determined by the overall utilization in this area and the amount of funds dedicated to this level. The next level will further incentivize physicians to visit members for whom they are the PCP. This incentive payment will be distributed based on a sliding percent scale. For example, the bonus payment would be larger for a PCP who saw 75% of their patients in the hospital compared to a PCP who only saw 10%.

**Transitional Payments** – A pool of dollars will be made available during the first two years to aid providers during the transition. After the first year the available pool will decrease by 50%. These payments will also be made quarterly. The following criteria must be met in order to qualify for the transitional payment:

- Not on the QA/QI noncompliance list for selected reasons.
- At least 20% of their practice (using 1,500 patients as an average full practice) must consist of SoonerCare members.
- Their capitation utilization must be within one standard deviation for the average capitation utilization for their specialty. Where there is insufficient data to calculate the standard deviation within a specialty they must fall within 55% of the CY06 national benchmark of 3.60. The capitation utilization is calculated as follows:

Unduplicated Claim Count x 12 Total MMs