

Performance-Based Contracting: SCO Forum

December 2, 2025

Agenda - 90 minutes



- Status updates
- Poll: Feedback on Using MyPBC Portal
- Notification Letters and Resolution Process Guidance
- Purpose of QDI Measures and Details on ODP Measure Calculations
- Dissatisfaction Measure
- Top Unmet Measures
- Restrictive Procedures
- Poll: Feedback on PA Navigate Measure
- Next Steps and Important Dates
- Resources

Jan 2026 Waiver Amendment Approval Update



- April 19 to May 26: Public comment period for changes to the 1915(b)(4) waiver, Targeted Support Management State Plan, and Consolidated, Community Living, and Person/Family Directed Support (P/FDS) Waivers
- May 27 to July 1: ODP reviewed public comments and made changes based on public comments
- **July 31:** ODP submitted the 1915(b)(4) waiver and Consolidated, Community Living, and P/FDS Waivers to the Centers for Medicare and Medicaid Services (CMS) for review and approval
- August 25: ODP submitted the State Plan Amendment for Targeted Supports Management
 - still pending approval
- October 15: CMS approved the 1915(b)(4) and waiver amendments effective January 1, 2026.
 - No major changes made

Status Update: Submissions



 All PBC submissions have been scored - results will soon be emailed to SCOs

 When applicable, the communication will include a list of measures the SCO did not meet and instructions for the data submission resolution process available if the SCO believes ODP made an error in evaluating performance

Results will be published to DHS website January 2026

Status Update: Pay-for-Performance (P4P)



- Capacity building investments
 - Credentialing (\$3.835M available)
 - Technology (\$3.835M available)
- 45 SCOs submitted for at least one of the following
 - Credentialing: 44
 - Technology: 35

Poll: Experience Using MyPBC Portal



 In the Q&A panel, please tell us about your experience using the new MyPBC Portal for your submissions

Notification Letters – template





COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES

<<Month Day, Year>>

- <<Contact Full Name>>
- <<SCO Legal Entity Name>>
- <<MPI Number>>
- <<Contact Email>>

RE: Notice of Supports Coordination Performance-Based Contracting Determination

Dear <<Contact First Name>>.

On <<Date Submitted>>, you submitted materials to the Department of Human Services, Office of Developmental Programs (ODP) for purposes of evaluating <<SCO Name>'s performance relative to the established performance measures for Performance-Based Contracting.

ODP has reviewed your materials and completed the evaluation for <<SCO Legal Entity Name>>. Although not all measures were met, the SCO is eligible for the provisioning of supports coordination services through the Consolidated, Person Family Directed Support (P/FDS), Community Living 1915(c) Waivers, or Pennsylvania State Plan for contract cycle January 1, 2026 – June 30, 2027.

The following unmet performance measures(s) and ODP's determination about the measure(s) are shown below.

Measure	Measure Description	Reason(s) Measure was Unmet
Example: QI.01.1	Example: Description of how the provider coordinates wellness activities including use of HRS data for residential program participants.	Example: Response indicated HRST is not used to coordinate wellness activities.

Please create and implement Quality Management Plan(s) in order to meet the above performance standard(s) in advance of the next PBC submission period. ODP will be auditing SCOs with unmet measures to ensure plans are in place and have been implemented. Quality Management Templates, Tools, and Spotlights are available at Quality Management Planning and Implementation Documents — MyODP. Continued failure to meet these measures will impact your status for PBC in subsequent contract years.

ODP's Resolution Process

If you believe that <<SCO Legal Entity Name>> meets a performance measure that ODP determined was not met, you may initiate ODP's Resolution Process within 7 calendar days of the date of this notice by submitting information to support your position via the MyPBC Portal.

Please be advised that while agencies may submit existing documentation that was inadvertently omitted or that contained typographical errors, this is not an opportunity to create new materials solely to meet the standard. Agencies may correct errors such as typos or submit missing documentation, but new documents developed exclusively for this purpose will not be accepted. Upon receipt, all documentation will be reviewed to evaluate whether ODP's determination needs to be changed. Agencies will be notified in writing of the results. Submissions will not be accepted after 11:59 PM on Wednesday, December 17, 2025.

If you have any questions regarding this notice, or any other questions regarding Performance-Based Contracting, please contact RA-PWODPPBC@pa.gov.

Sincerely,

Kristin Ahrens

Deputy Secretary
Office of Developmental Programs

Resolution Process Guidance



 Focus on measures where you can clarify or refute ODP's data or findings

- ODP will not review the following if they are submitted:
 - Newly created or modified policies and plans
 - State regulations or ODP bulletins
 - Comments about or suggested changes to the measures or process
- Final determination letters will be posted on the DHS website in an SCO Directory



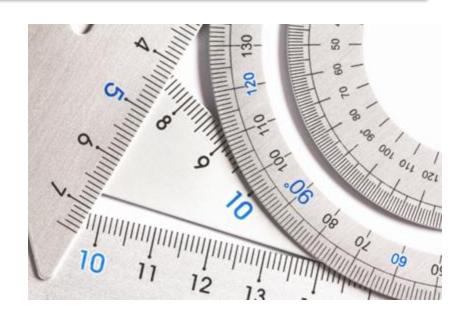
Questions?



Performance-Based Contracting

Data driven policies and operations

- Data integrity, completeness and accuracy essential
- SCs are a primary source of data collection and data entry!
- QDI measures to be dropped over time after performance improvements

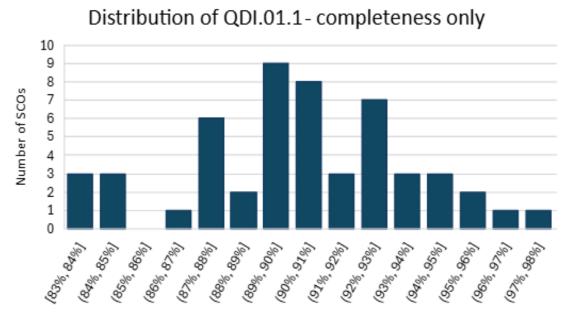


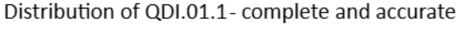


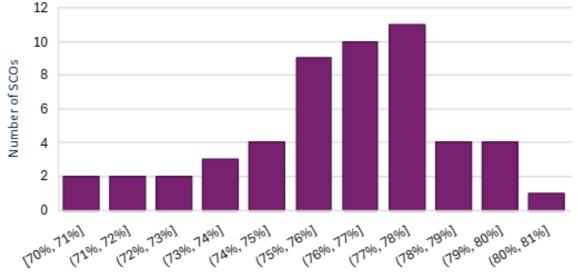
QDI.01.1: 86% of demographic information is complete and accurate, including living situation and individual and primary contact email address.

- Demographic fields must be present in the HCSIS dataset AND must match what is in the CIS dataset
- This measure looks at all the demographic fields assigned to the provider
 - It's not that 86% of demographic information is true for each person, it's that 86% of all demographic fields associated with individuals served by the SCO are complete.
- Results for Complete AND Accurate resulted in almost every SCO not meeting the measure – therefore we only focused on Completeness this year
- July 1, 2027-June 30, 2028: threshold increases to 93%









Importance:

- Supports meaningful quality oversight & person-centered planning
- Enables AE's, SCO's and ODP to identify trends, capacity issues and system gaps
- Will ensure a smooth transition to ECM by maintaining accurate and up-to-date data



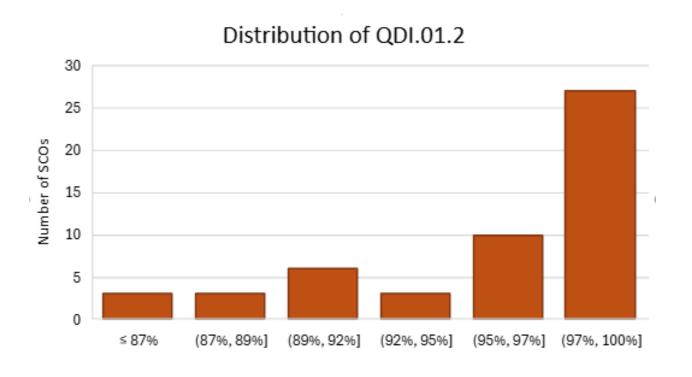
QDI.01.2

 Original: 90% of employment information is complete and accurate, including all employment fields in the individual monitoring tool, updated at every required monitoring (based on waiver enrollment).

Refined:

- Population: Anyone who received job coaching/support (W9794 or H2025) between 7/1/24 and 12/31/24
- Funding Sources: Consolidated Waiver, Community Living Waiver, or P/FDS Waiver
- Billing Timeframe: 7/1/24 6/30/25
- Monitoring Timeframe: 7/1/24 6/30/25
- Calculation: 90% of individuals who had billing for job coaching/support had YES checked for the following question in any monitoring tool for FY24/25: Is the individual working in a competitive integrated job?





Importance:

- Promote Competitive, Integrated
 Employment as the expected Outcome
- Holds SCOs accountable for exploring employment with every individual of working age.
- Provides Statewide data to inform Policy, Funding and System Improvements
- Prevent Underutilization of Employment services

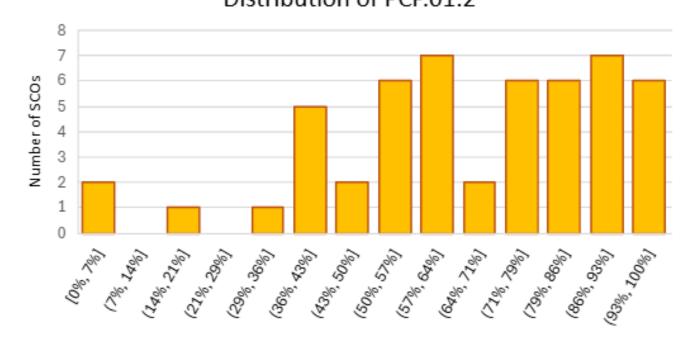


PCP.01.2: 90% compliance with monitoring frequency by waiver type

- PFDS: once every three months
- Consolidated and Community Living: once every two months
- Numerator: Number of compliant MCIs on Consolidated Waiver + Number of compliant MCIs on Community Living Waiver + Number of compliant MCIs on P/FDS Waiver
- Denominator: Total number of unique MCIs enrolled in the Community Living, Consolidated, and P/FDS waivers for that MPI, excluding individuals new to the SCO within the calendar year, those that changed waivers within the calendar year, and TSM
- If we had only focused on number of monitoring's, many more SCOs would have passed this measure
- July 1, 2027-June 30, 2028: threshold increases to 93%



Distribution of PCP.01.2



Importance:

- Ensures early identification of changes in needs
- Prevents service gaps and missed issues that could lead to crisis
- Supports consistent predictable engagement with individuals and families.
- Protects individuals risk mitigation

Top Unmet Measures



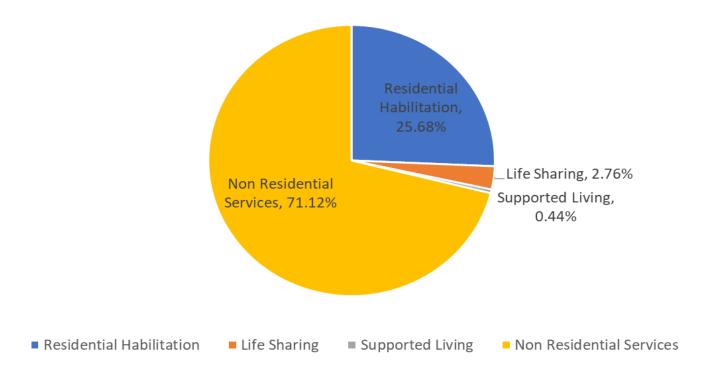
Measure	Measure Description	Number Unmet	Percent Unmet
PCP.01.2	90% compliance with monitoring frequency by waiver type	38	73%
QDI.01.6	Restrictive procedure data is 86% accurate as compared to the most current BSP.	30	58%
RN.01	Register in PA Navigate Resource Platform as a Community-Based Organization (CBO)	15	23%
QI.02.1	Provide SCO's policy on how person-centered performance data is utilized to develop the QM Plan and its action plan and to monitor progress towards QM plan goals	10	19%
WF.03.2	Describe current trauma informed supports training provided to SCs and SC Supervisors and/or plans to implement trauma informed supports training for SCs and SC Supervisors in the future	9	17%
ADM.01.2	Submission of current financial statements (audited if available)	6	12%
QDI.01.1	86% of demographic information is complete and accurate, including living situation and individual and primary contact email address	6	12%
QDI.01.2	90% of employment information is complete and accurate, including all employment fields in the individual monitoring tool, updated at every required monitoring (based on waiver enrollment)	6	12%

Residential v. Non-Residential Services



Provider Performance Review – ISAC Subcommittee

Statewide Summary for Residential and Non-Residential Services CY2025





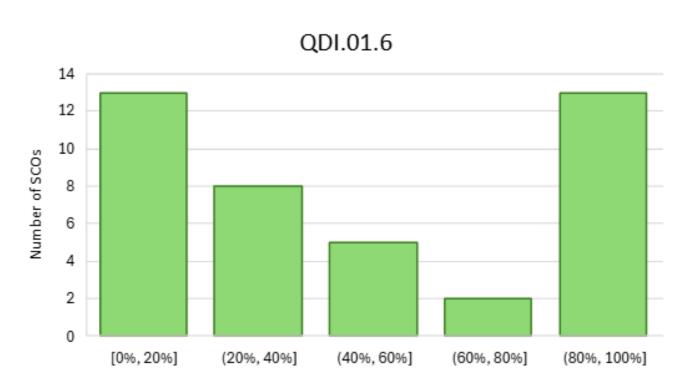
Restrictive Procedures



QDI.01.6: Restrictive procedure data is 86% accurate as compared to the most current BSP

- The population for this measure included individuals who had an active 2024-2025 ISP and text in the BSP Summary field (required for an active BSP) in HCSIS.
- Random samples were identified for each SCO using QA&I sampling methodology:
 - 2% of Base-funded individuals
 - A proportional allocation for Waiver-funded individuals (using 5% Margin of error, a 95% Confidence level, and 70% Response distribution)
 - A minimum of 7 individuals were reviewed for each SCO
 - Funding Sources: Consolidated, Community Living, and P/FDS waivers
- Scoring Approach:
 - 1. Identify whether a restrictive procedure is indicated in the BSP Summary based on standard criteria
 - 2. If restriction exists in #1, confirm whether the Restrictive Procedure checkbox is checked in HCSIS
- Calculation (based on provider sample): # of individuals where RP checkbox is checked and should be checked / Total # of individuals where RP checkbox should be checked





Importance:

- Ensures the individuals rights are protected, and any restrictions are justified
- Allows SCs to monitor for reduction and fading of restrictions over time
- Supports accurate risk identification and mitigation planning
- Ensures restrictive procedures are documented correctly in the ISP

Health and Welfare 4 (HW4)



Number and percent of participants with restrictive interventions where proper procedures were followed. ODP staff monitors incidents where proper procedures were not followed related to the use of a restraint or restrictive intervention.

DISCOVERY DATA: Annual																
Source: EIM																
Performance Measure: Number and																
percent of waiver participants with		Central			Northeast			Southeast			Western			Statewide		Total
restrictive procedures where proper	roper Annual															
procedures were followed.	CONS	P/FDS	CLW	CONS	P/FDS	CLW	CONS	P/FDS	CLW	CONS	P/FDS	CLW	CONS	P/FDS	CLW	
Numerator = Number of participants with																
restrictive procedures where proper	460	<11	<11	369	<11	<11	404	<11	15	642	<11	<11	1,875	17	43	1,935
procedures were followed.																
Denominator = Total number of																
unduplicated participants with a restrictive	547	27	47	442	-44	16	467	-44	40	720	-111	-111	2.405	4.4	Ca	2 200
procedure plan <u>and</u> those without a plan	547	27	17	443	<11	16	467	<11	18	728	<11	<11	2,185	44	61	2,290
who had an improper procedure applied.																
Compliance by Waiver and Region	84.10%	30-40%	50-60%	83.30%	0.00%	50-60%	86.50%	80-85%	80-85%	88.20%	50.00%	90.00%	85.80%	38.60%	70.50%	
Compliance by Region and Statewide 81.00% 81.50% 86.40% 87.90%					84.50%											

Data displayed is for the HW4 Annual Report, encompassing data from FY 24-25 (7/1/2024-6/30/25)

ISAC: Provider Performance Review Subcomm



Data Source:

Enterprise Incident Management (EIM) System

Discovery Date:

Calendar Year 2024 (1/1/2024-12/31/2024)

Categories:

Physical Restraint (HRT Approved, Provider Emergency Protocol)
Rights Violation (Unauthorized Restrictive Procedure),
Abuse (Misapplication/Unauthorized Use of Restraint (Injury), Misapplication/Unauthorized
Use of Restraint (No Injury))

Investigation Outcome Determination:

Abuse, Rights Violation = Confirmed

Funding Source:

HCBS Only (Consolidated, Community Living, P/FDS)



1743

Restrictive Procedures

1982

Individuals with RPPs

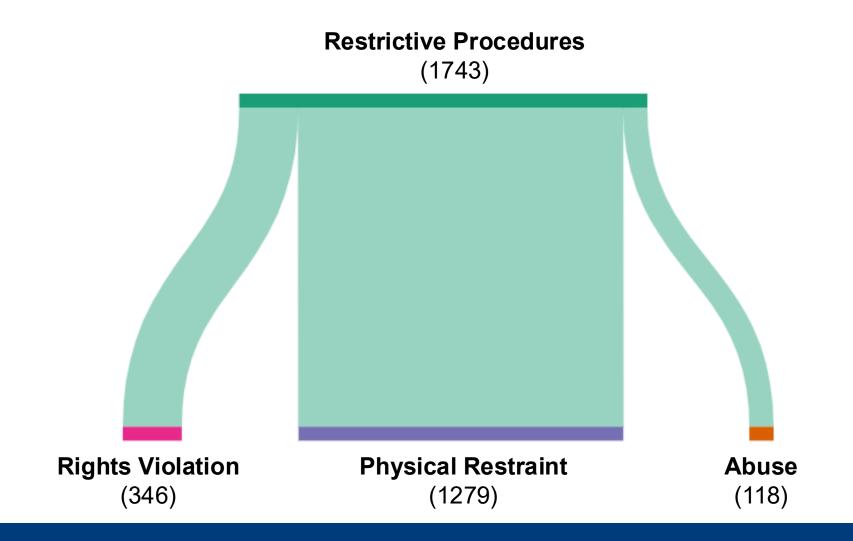
651

Individuals Restricted

284

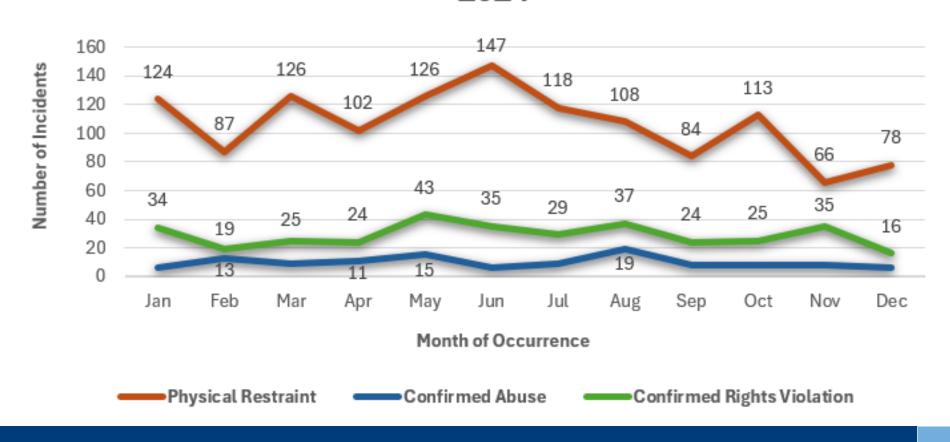
Individuals Restricted with an RPP







Restrictive Procedures Over Time 2024





	202	22	2023	3	2024		
	Incidents	Rate	Incidents	Rate	Incidents	Rate	
Restrictive Procedures	1922	52.9	1848	52.1	1743	45.0	
Physical Restraint	1589	43.8	1471	41.4	1279	33.0	
Rights Violation	237	6.5	267	7.5	346	8.9	
Abuse	96	2.6	110	3.1	118	3.0	

Rate calculation:

Incidents ÷ HCBS Enrollment x 1000 = Incident rate per 1000 individuals enrolled



81 SCOs

Have at least 1 person with a BSP

73 SCOs

Have at least 1 person with a RPP

38%

Of HCBS enrollees have a BSP

14%

Of BSPs are restrictive



SCO Entity Name	Percent of individuals served with BSP	Percent of individuals served with RPP	Percent of BSPs with RPP	Rate of RPP per 1000 supported
SCO1	40%	30%	75%	300.00
SCO2	36%	23%	65%	234.85
SCO3	49%	20%	40%	195.12
SCO4	30%	16%	53%	158.68
SCO 5	30%	12%	39%	118.42
SCO6	52%	12%	23%	118.16
SCO7	26%	11%	41%	108.23
SCO8	25%	11%	42%	105.45
SCO9	31%	10%	32%	99.04
SCO 10	43%	9%	21%	91.84
SCO 11	38%	9%	24%	89.46
SCO 12	31%	8%	28%	83.97
SCO 13	45%	8%	19%	83.56
SCO 14	34%	8%	24%	82.22
SCO 15	39%	8%	21%	82.16
SCO 16	46%	8%	18%	80.80
SCO 17	37%	8%	22%	79.22
SCO 18	44%	8%	18%	79.16
SCO 19	42%	8%	19%	78.79
SCO 20	37%	8%	21%	76.92

Dissatisfaction Measure – QI.01.2



- Measure and Process Details Report the number of individuals who chose another SCO due to dissatisfaction with SC services and provide reason.
- ODP will use the data to understand the baseline and how we should move forward with the measure.



Questions?

Poll: PA Navigate Measure

 In the Q&A panel, please tell us about your experience signing up with or claiming your program on PA Navigate

Next Steps - Important Dates

- December Notification Letters and Resolution Process
 - Resolution Process allows 7 calendar days for SCO response
- Jan 1, 2026 Contract period begins
- February session with billing system vendor
 - Reminder that information about billing changes is on MyODP (Updated 25-075 Announcement)
- March 3, 2026 Next SCO Forum

- MyODP PBC resource page
 - FAQs published on MyODP PBC FAQs
- PBC Mailbox <u>ra-pwodppbc@pa.gov</u>
- Quality Management Landing Page