

Division of Family and Children Services Office of Provider Management

# FY 2016 Room Board and Watchful Oversight Performance-Based Placement Measurements and Standards Guide 

(no changes from FY2015)



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## Performance-based Placement Background

The Office of Provider Management (OPM) contracts with and monitors Child Caring Institutions and Child Placing Agencies provision of Room, Board and Watchful Oversight (RBWO) services. OPM employs various data, on-site records review and collateral report mechanisms to monitor providers' adherence to RBWO Minimum Standards and contractual obligations, all of which direct provider performance expectations regarding the safety, permanency and well-being of children.

The foundational objective of OPM is to ensure that children placed in RBWO care are safe from abuse and neglect and that their well-being needs are met. To this end, OPM started testing the use of performance-based placement (PBP) with RBWO providers in FY 10. That testing phase of PBP was considered "hold harmless", since providers were not being held accountable (rewarded or penalized) for their scores. FY 16 is the fourth year where accountability for scores is upheld. Scores are used for placement matching, rewarding good performance and enforcing penalties for challenged performance.

The PBP process has yielded many learning opportunities for both OPM and providers. The measures chosen in FY 12, the second year of PBP testing, reflect lessons learned from FY 11, including improvements in selecting/defining measures and processes for scoring the measures. Begun in FY 13, including data from OPM monitoring visits provides a check on provider self-reported data. In summary, lessons learned resulted in the establishment of measures for independent and transitional living programs, better alignment of measures with desired child welfare outcomes (safety, permanency and well-being) and testing of bonus/incentive measures designed to encourage performance at more than the minimum level of expectation.

There have been no significant changes in measures or score calculations since FY 2014.
As in previous years, FY 16 measures are represented in each area of safety, permanency and well-being. Providers have the opportunity to earn incentive points, and may be debited by OPM when providers' self-reported information cannot be verified during regular monitoring checks.

## Publication of FY 2016 Overall Scores/Grades and Complete Score Card

FY 2016 marks the fourth accountability year for PBP. In addition to providers being held accountable to their scores, the PBP overall quarterly score/grade and complete quarterly score reports are used by DFCS as a component of placement matching and making referrals to providers. Quarterly overall scores (for example, AACME CPA earned an " $85 / \mathrm{B}$ ") are published on the public DHS and GA+SCORE websites, and the full GA+SCORECARD is published on an internal DHS website.

## FY 2016 PBP Measures Snapshot

Each contracted provider receives a quarterly scorecard (GA+SCORECARD) according to their provider type (CCI, CPA, or IL/TLP) detailing their scores earned for the quarter with an overall score and grade. A snapshot of the measures follows. Details of each measure begin on page 10. The CCl and CPA FY 2016 measures are:

| FY 2016 PBP Measures | CCls | CPAs |
| :---: | :---: | :---: |
|  | Weight | Weight |
| OPM Monitoring Reviews |  |  |
| Annual Comprehensive Review | 25\% | 25\% |
| Safety Reviews | 15\% | 10\% |
| Foster Home Evaluation Qualitative Reviews |  | 10\% |
| Safety Measures |  |  |
| Incidence of Maltreatment | 10\% | 10\% |
| Staff Training | 4\% | 4\% |
| Permanency Measures |  |  |
| Placement Stability | 15\% | 10\% |
| Sibling Contacts | 5\% | 5\% |
| Well-Being Measures |  |  |
| EPSDT Medical Visits | 4\% | 4 \% |
| EPSDT Dental Visits | 4\% | 4 \% |
| Academic Supports | 4\% | 4 \% |
| Provider Every Child Every Month Visit | 7\% | $7 \%$ |
| Provider General Contact | 7\% | 7 \% |
| Total $=100 \%$ |  |  |

The following incentive credits apply to CCl and CPA providers:

| Incentive Credit | CCIs | CPAs |
| :---: | :---: | :---: |
| Early EPSDT Medical Visits | Up to 2\% | Up to 2\% |
| Early EPSDT Dental Visits | Up to 2\% | Up to 2\% |
| Permanency Contacts | Up to 5\% | Up to 5\% |
| Additional Academic Supports | Up to 2\% | Up to 2\% |
| Foster Home Retention Rate | ------------- | Up to 2 Points |
| Foster Home Recruitment | ------------ | Up to 2 Points |
| Active Agency Accreditation | Up to 2 points per accreditation up to 4 points total | Up to 2 points per accreditation up to 4 points total |
| Staff Clinical Licensure | Up to $1 / 2$ point per person up to 5 points total | Up to $1 / 2$ point per person up to 5 points total |
| Behavior Management (Use of ESI) | Add up to 4 Points | ------- |
| Maximum Total Combined Incentive Credit Allowed is 10 Points* |  |  |

*If the number of incentive credits earned in a quarter exceeds the maximum total of 10 points, credits are awarded based on a hierarchy. See page 17 for details.

The FY 16 measures for Independent Living and Transitional Living Specialty Programs are as follows:

| IL and TLP Measures | Weight |
| :--- | :---: |
| OPM Monitoring Reviews |  |
| Annual Comprehensive Review | $15 \%$ |
| Safety Reviews | $5 \%$ |
| General Safety Measures | $3 \%$ |
| Incidence of Maltreatment | $5 \%$ |
| Staff Training |  |
| General Permanency Measures | $3 \%$ |
| Placement Stability | $3 \%$ |
| Sibling Contacts | $3 \%$ |
| General Well-Being Measures | $3 \%$ |
| Academic Supports | $4 \%$ |
| EPSDT Medical | $4 \%$ |
| EPSDT Dental | $5 \%$ |
| Provider Every Child Every Month Visit |  |
| IL/TLP Specialty Measures | $10 \%$ |
| Academic/Career Development | $15 \%$ |
| Independent Living Skills Provision | $5 \%$ |
| Financial Independence | $5 \%$ |
| Community Connections | $15 \%$ |
| WTLP /Life Coach | Total = 100\% |
|  |  |

The following incentive credits apply to IL and TLP providers:

| Incentive Credits for IL and TLP Programs |  |
| :---: | :---: |
| No DJJ or DOC Involvement | Up to 5\% |
| Extended Foster Care Services | Up to 5\% |
| Positive Permanency Connections | Up to 5\% |
| High School Graduation or College Participation | Up to 20\% |
| At Least Part-Time Employment with Medical Benefits | Up to 20\% |
| Living Arrangements at Discharge | Up to 20\% |
| Additional Academic Supports | Up to 2\% |
| Additional Independent Living Skills Provision | Up to 5\% |
| Active Agency Accreditation | Up to 2 points per accreditation up to 4 points total |
| Staff Clinical Licensure | Up to $1 / 2$ point per person up to 5 points total |
| Total Maximum Combined Incentive Credit Allowed is 10 Points* |  |

*If the number of incentive credits earned in a quarter exceeds the maximum total of 10 points, credits are awarded based on a hierarchy. See page 25 for details.

All providers will be accessed a penalty for any self-report information that cannot be verified. (See PBP Verification: Penalty Debit page 8).

## GA+SCORECARD

GA+SCORECARDs are issued quarterly for Child Caring Institutions (CCls), Child Placing Agencies (CPAs), and Independent Living/Transitional Living Programs (ILP/TLP) on a quarterly basis.

The GA+SCORECARD summarizes a provider's quarterly performance. Providers will receive an overall score and corresponding grade as well as a complete scorecard that details performance in each of the measurements.

Each GA+SCORECARD includes:

1. The most recent Annual Comprehensive Review score, the averages for all Safety Reviews or Foster Home Evaluation Reviews (CPAs only) conducted since 7/1/2012, and a subtotal for OPM Monitoring
2. Quarterly scores for each measure and a quarterly subtotal for the measures
3. Quarterly scores for each Incentive Credit and a quarterly subtotal for the credits (capped at 10 points)
4. Any penalty debit imposed as a result of non-verifiable self-reporting in a previous quarter
5. A total quarterly score that is the sum of \#1, \#2, and \#3, minus any penalty debit imposed in \#4

Scores and sub-scores are calculated by multiplying the provider's measurement performance (as a decimal) by the weight of the measure. For information on calculating measurement performance for any measure, please see that measure's description in this key.

GA+SCORECARDs also include investigations data shared from GA SHINES, Georgia's Statewide Automated Child Welfare Information System (SACWIS). This information is not used for scoring and is displayed for informational purposes.

Beginning in FY 2014, OPM Monitoring Review data rolls between fiscal years (starting from 7/1/2012). The Annual Comprehensive Review score from the previous year will continue to be included in all GA+SCORECARDS until the following year's review is completed. Only the most recent Annual Comprehensive Review score is included on any quarter's GA+SCORECARD. The scores for Safety Reviews and Foster Home Evaluation Reviews are cumulative averages from FY 2013 onward; all reviews conducted from 7/1/2012 through the end of the quarter are averaged on each quarter's GA+SCORECARD.

Individual measures may not apply to some providers in some quarters (e.g., a provider with all children under 3 years old cannot be scored on EPSDT Dental Visits). For those providers, the GA+SCORECARD is adjusted to redistribute the points from that measure to other measures in the same category (Safety, Permanency, or Well-being). The total weight of a category will always be equal within a provider type; however, the total points possible for each measure within a category may be different due to this redistribution.

## Data Sources \& Calculations

Data for the GA+SCORECARD is drawn from three sources: reviews conducted by OPM, self-reported data reported by RBWO providers to GA+SCORE and/or GA SHINES, and DFCS data gathered from GA SHINES. This document indicates the source of data for each measurement.

## Scoring Considerations

- Children, youth, staff, or foster homes may be excluded from consideration for a particular measure based on qualifying information: e.g., child admission and discharge dates or staff role. For instance, most measures are NA for a child who is not in care for the full month (based on admission and discharge dates). In most cases, PBP scores do not reflect work done for children, youth, or staff who are excluded from a measure, or work done in excess of the written measure. Exceptions are noted in that measure's description in this key.
- With the exception of EPSDT Dental visits, all measures apply to children and youth ages 0-21.
- For some measures, GA+SCORE determines whether to include a child, youth, or staff member based on other data entered by the provider. (For example, the number of academic supports required for a child or youth is determined based on information entered by the provider on the child's Education screen.) In most cases, if the provider has not completed necessary data entry, that child, youth, or staff person is automatically included in consideration for the measure. Exceptions are noted in that measure's description in this key.
- When a measure is tracked on a monthly basis (e.g., Every Child, Every Month visits), the provider's quarterly score is based on the combined monthly data. Credit is awarded for work in the month in which it is completed.
- To be counted for any measure, data must be entered in GA+SCORE by the tenth of the following month, unless OPM has established an earlier deadline or this document establishes an exception. In all cases of conflict, dataentry deadlines for reporting in GA SHINES override GA+SCORE requirements.
- Note that in order for data entered in GA SHINES to be included in these reports, the provider must enter the child's SHINES Person ID\# accurately in GA+SCORE.


## Acceptable Score Thresholds

Providers receive an overall quarterly score based on a 100 -point scale. Providers receive a numerical score and a corresponding letter grade. The chart below describes the range of numerical scores and the corresponding letter grade.

The threshold of acceptable provider performance has been set for FY 16 at $70 \%$ or higher. Thus, providers are expected to maintain at least a $70 / \mathrm{C}$ on every quarterly report. Providers who earn a quarterly score of less than $70 \%$ will be required to submit a corrective action plan to specifically address ways to improve performance. Technical assistance will be provided by the Office of Provider Management. Providers who earn less than $70 \%$ in any three consecutive quarters will be subject to admissions suspensions and other remedies as appropriate in order to address the performance deficit.

| Score | Grade |
| :--- | :--- |
| $97-100$ | A+ |
| $94-96$ | A |
| $90-93$ | A- |
| $87-89$ | B+ |
| $84-86$ | B |
| $80-83$ | B- |
| $77-79$ | C+ |
| $74-76$ | C |
| $70-73$ | C- |
| $67-69$ | D+ |
| $64-66$ | D |
| $60-63$ | D- |
| $0-59$ | F |

## PBP Verification: Debit Penalties

## PBP Verification

When provider self-reported information (everything other than DFCS data and OPM Monitoring data) cannot be verified (i.e., supporting documentation is not available), a penalty will be assessed on the following quarterly score. Self-reported measures equal $50 \%$ or 50 points for CCls, $45 \%$ or 45 points for CPAs, and $77 \%$ or 77 points for IL/TLP specialty providers.

Provider records will be reviewed to verify self-reported information and produce a PBP Verification score. A score of $100 \%$ on PBP Verification means that all self-reported information was verified. If the PBP Verification score is below $100 \%$, one or more instances of self-reported information could not be verified, and a penalty will be assessed for the following quarterly overall score. Providers will receive a PBP Verification score, a description of any discrepancies found and be provided with at least ten business days to refute the findings prior to the debit being finalized for the next quarterly score report.

## Determination of the Score Penalty

For each measure, OPM will verify a specific number of child, staff, or foster home records, based on the size and type of the provider. If data entered for a measure cannot be verified for one or more records, a percentage of the points awarded for that measure will be deducted the next quarter.

CCI Example: A large CCI was awarded the full four points for academic supports in Q2. During the OPM PBP Verification review of six child records, OPM was unable to verify academic supports for two children. The penalty would be calculated as follows:

## Verification Review Score for Academic Supports = 66\% <br> Self-Report PBP Points $=4$

Step One: 0.66 X $4=2.64$
Step Two: $4-2.64=1.36$
Penalty Debit for the Next Quarter: 1.36 Points + any penalty debits for other measures
CPA Example: A medium CPA was awarded 5 out of 7 points for ECEM visits in Q1. During the OPM PBP
Verification review of four child records, OPM was unable to verify some ECEM visits for one child. The penalty would be calculated as follows:

## Verification Review Score for ECEM Visits = 75\% Self-Report PBP Points = 5 <br> Step One: $0.75 \times 5=3.75$ <br> Step Two: $5-3.75=1.25$ <br> Penalty Debit for the Next Quarter: 1.25 Points + any penalty debits for other measures

IL and TLP Example: A medium ILP was awarded 12 out of 15 points for WTLP/Life Coach contacts in Q2. During the OPM PBP Verification review of four youth records, OPM was unable to verify a WTLP/Life Coach contact for one youth. The penalty would be calculated as follows:

Verification Review Score for WTLP/Life Coach Contacts $=\mathbf{7 5 \%}$
Self-Report PBP Points $=12$
Step One: 0.75 X $12=9$
Step Two: 12-9 = 3

## Penalty Debit for the Next Quarter: 3 Points + any penalty debits for other measures

For all providers, any incentive credits awarded (i.e., up to the maximum ten points) that cannot be verified will be subtracted during the next quarterly report. Incentive credits earned but not awarded (i.e., in excess of the maximum 10 points) will not be included in the PBP Verification process.

## Rebuttal Process

The DFCS Office of Provider Management (OPM) is committed to an effective partnership with providers. Providers are encouraged to contact OPM whenever there is a concern with the monitoring results, program designation decisions or performance-based scoring. OPM will work with the provider to resolve any concerns as expeditiously as possible.

Note: Please keep in mind that unless there is a noted exception, providers must enter all data in GA+SCORE by the $10^{\text {th }}$ of the following month to receive credit for PBP compliance. Accuracy and timeliness in monthly reporting are major contributors to the overall accuracy of the quarterly PBP report.

## Provider Performance-based Placement (PBP) Disputes

Providers will receive quarterly PBP score results. Providers have ten (10) business days from the date of receipt of the quarterly PBP report to respond in writing to the Director of OPM with any dispute related to the quarterly score report. Providers should submit mitigating information related to the disputed score, including any relevant documentation such as case records or monthly reports (e.g., ECEM reports, monthly summary reports).

A decision regarding the dispute will be provided in 15 business days of receipt, via email, to the provider. OPM's response will outline any changes, if applicable, to the PBP score as a result of this reconciliation. If there are no changes, OPM's response will outline the rationale for its denial of the change to the disputed scoring.

If the Provider is still in disagreement with OPM's decision to the PBP Scoring dispute, the Provider has ten (10) business days to notify OPM of the $2^{\text {nd }}$ appeal and request a formal reconciliation meeting.

The $2^{\text {nd }}$ Appeal includes an office conference facilitated by the Deputy DFCS Division Director. A final decision will be rendered within 10 business days after the meeting. The decision reached after this meeting is final.

Once the PBP Score dispute has been finalized, a newly revised scoring report will be issued within ten (10) business days (if applicable). Any revisions to the scoring will be incorporated into the overall results for the provider's performance results.

## OPM Dispute Packet Delivery Options

Acceptable methods of submitting a dispute to OPM include email, hand delivery, fax, or mail. The packet must include a completed OPM Provider Dispute Form (available on the GA+SCORE website) and include any supporting documentation. The provider must ensure a copy of all submitted documentation is maintained by the sender; no packets will be returned. Limit the number of pages submitted to 10 pages if possible.

| Hand Delivery | DFCS Office of Provider Management <br> Floor 18 Front Reception Desk |
| :--- | :---: |
| Postal Address | DFCS Office of Provider Management |
|  | Attn: Catrecia Stokes Bryan, Director |
|  | Floor 18, 2 Peachtree St. NW |
|  | Atlanta, GA 30303 |
| Facsimile Delivery | (770) $359-5335$ |
| Email | opmrequests@dhr.state.ga.us |

## CCl and CPA Measures

CCI and CPA scores are comprised of four components: OPM Monitoring; Safety, Permanency and Well-Being outcomes; Incentive Credits; and Debit Penalties (if any).

## OPM Monitoring Scoring Component

## Data Source: OPM

The Office of Provider Management conducts various types of RBWO provider monitoring throughout the fiscal year. These combined scores account for $40 \%$ of the total PBP score for CCIs and $45 \%$ of the total PBP score for CPAs.

## Unlike provider-reported measures, monitoring scores displayed on GA+SCORECARDs do not reflect a single quarter's work, and do not reset at the start of each quarter. The score from the most recent Annual Comprehensive Review (ACR), including any subsequent PIPs, is displayed on each quarter's report until the next ACR is conducted. Scores for Safety Reviews and Foster Home Evaluation Reviews (CPAs only) are cumulative averages of all monitoring events since 7/1/2012.

## Annual Comprehensive Review

The Annual Comprehensive Review (ACR) conducted by OPM accounts for $25 \%$ of the provider's total PBP score. Until an ACR is conducted for FY2016, each quarterly report is based on the ACR score earned in the previous fiscal year. If OPM has not yet conducted an ACR for the provider (since $7 / 1 / 2012$ ), the quarterly report is adjusted to calculate a total score based on the actual number of points available (i.e., 75 for CCls or CPAs).

## Comprehensive Review Scoring Threshold and PIP Completion Incentive:

The acceptable scoring threshold for comprehensive reviews is at least $70 \%$ in each category of Safety, Permanency and Well-Being. Providers who score less than $70 \%$ on a comprehensive review in any category are required to complete a Program Improvement Plan (PIP). Providers who are required to complete a PIP and do so successfully can raise their score in the deficit category(ies) to $70 \%$ and will receive an adjusted comprehensive review score for the next quarterly report following the completed PIP.

Example: A provider's comprehensive review yielded sub-scores of Safety $80 \%$, Well-Being $68 \%$ and Permanency $72 \%$, for an overall score of $73 \%$. The provider must complete a PIP to address the Well-Being score. Upon successful completion of the PIP, the Well-Being score will be raised to $70 \%$, and the new comprehensive review score reported on the next quarterly scorecard will be $74 \%$ (Safety $80 \%$, Well-Being $70 \%$ and Permanency $72 \%$ ).

## Safety Reviews

For a CCI provider, Safety Reviews (SR) conducted by OPM account for $15 \%$ of the total PBP score. The Safety Review score is the average of all SRs conducted since $7 / 1 / 2012$. If OPM has not yet conducted any SRs for the provider, the quarterly report is adjusted to calculate a total score based on the actual number of points available (i.e., 85 if the provider has received an ACR, or 60 if the provider has received neither an ACR nor an SR).

For a CPA provider, Safety Reviews (SR) conducted by OPM account for 10\% of the total PBP score. The Safety Review score is the average of all SRs conducted since $7 / 1 / 2012$. If OPM has not yet conducted any SRs for the provider, the quarterly report is adjusted to calculate a total score based on the actual number of points available (i.e., 90 if the provider has received an ACR, or 65 if the provider has received neither an ACR nor an SR ).

## Foster Home Evaluation Reviews

For a CPA provider, Foster Home Evaluation Reviews (FHER) conducted by OPM account for $10 \%$ of the total PBP score. Scores are derived from a qualitative review of initial foster home evaluations and re-evaluations randomly selected throughout the year. The FHER score is the average of all FHERs conducted since 7/1/2012. If OPM has not yet conducted any FHERs for the provider, each quarterly report is adjusted to calculate a total score based on the actual number of points available (i.e., 90 if the provider has received an ACR, or 65 if the provider has received neither an ACR nor an SR, or 55 if the provider has not received any type of monitoring).

## Safety Scoring Component

Provider self-reported measures related to child safety account for $14 \%$ of a CCI or CPA provider's total PBP score.

Incidence of Maltreatment (10\%)
Percent of children who have substantiated CPS investigations; rate must be .32 or below Data Source: GA SHINES

On a quarterly basis, this measure is calculated by dividing:
the number of children under 18 involved in an incident during the $F Y$ that is substantiated during the quarter by
the number of children under 18 in placement during the quarter

For this measure, points are awarded based on the following scale:

- $0 \%$ maltreatment $=$ full 10 points
- $>0 \%$ and $\leq 0.16 \%$ maltreatment $=6$ points
- $>0.16 \%$ and $\leq 0.32 \%$ maltreatment $=3$ points
- $>0.32 \%$ maltreatment $=0$ points

Maltreatment data is reported to GA SHINES by DFCS staff and is not reported by child on the Child Data detail report.

Condition: If a child is involved in more than one incident substantiated during a quarter, that child is counted once for each incident in the numerator and in the denominator.

## Staff Training (4\%)

## Percent of staff (HSP, CSS, CSW, LC) who complete at least $25 \%$ of annual training requirement quarterly ( 6 hours) <br> Data Source: Provider Self-Report in GA+SCORE

On a quarterly basis, this measure is calculated by dividing:
the number of staff (HSP, CSS, CSW, LC) with at least $25 \%$ of annual training completed in each quarter
by
the number of staff (HSP, CSS, CSW, LC) employed at least 60 days during the quarter (based on hire and end dates and leave dates, if any)

Condition: Any staff working fewer than 20 hours a week is excluded from this requirement. If this field is not completed in GA+SCORE, the staff is assumed to require training.

Condition: The annual training requirement is a running total through the fiscal year. If a staff person completes more than 6 hours of training in a quarter, the excess will be applied to subsequent quarters.

Condition: Staff training may be reported at any time during the quarter in which the training is completed, through the tenth of the month following the end of the quarter.

## Permanency Scoring Component

Provider self-reported measures related to child permanency account for $20 \%$ of a CCI provider's total PBP score, and $15 \%$ for CPAs.

## Placement Stability (15\% CCIs; 10\% CPAs)

Percent of children remaining in provider placement without a disruption
Data Source: Provider Self-Report in GA+SCORE
On a monthly basis, this measure is calculated by dividing:
the number of placements that remain open or had acceptable discharges
by
the number of placements open at any time during the month

Condition: A placement is considered "not disrupted" if the child has not been discharged by the end of the month or if the explanation provided at discharge meets OPM standards for acceptable discharge.

## Sibling Contacts (5\%)

Percent of children receiving provider-supported contact between child and a sibling
Data Source: Provider Self-Report in GA SHINES and GA+SCORE
On a monthly basis, this measure is calculated by dividing:
the number of required visits completed during the month
by
the number of required visits

Visits are reported via the Provider Portal in GA SHINES. Attempted visits may be reported but do not count toward performance.

Condition: One visit is required if a child is in care for a full month and the Family screen in GA+SCORE indicates that the provider will facilitate meetings with a sibling. If this screen is blank, the child is assumed to require one visit per month.

## Well-Being Scoring Component

Provider self-reported measures related to child well-being account for $\mathbf{2 6 \%}$ of a CCI or CPA provider's total PBP score.

## EPSDT Medical Visits (4\%)

Percent of children who receive the minimum number of health screenings based on Medicaid's Early Prevention and Screening Diagnostic Test (EPSDT) periodicity schedule* Data Source: Provider Self-Report in GA SHINES and GA+SCORE

On a monthly basis, this measure is calculated by dividing:
the number of children with a non-expired medical screening
by
the number of children in placement at least 30 days

EPSDT Medical visits are reported to GA+SCORE and via the Provider Portal in GA SHINES.
Condition: A child has a non-expired medical screening if:

1) there is a recent EPSDT Medical visit on the Appts and Visits screen in GA+SCORE and that visit was completed within 12 months (for children 3-17) or within six months (for children 18 months - 3 years) or within 3 months (for children 6 months - 18 months) of the start of the report month, or on any date (for children 0-6 months);
or
2) there is an EPSDT Medical visit on the Appts and Visits screen in GA+SCORE and that visit was completed outside the timeframe in \#1 but within the applicable grace period (3 months for children 3-17, 1 month for children 0 - 3 years);
or
3) there is no EPSDT Medical visit on the Appts and Visits screen in GA+SCORE but the child is 3 years or older and has been in the placement less than 90 days.

Condition: For this measurement, a third attempt at an EPSDT medical screening is equivalent to a completed screening.

Additional credit may be given for children who receive required visits within narrower timeframes (see Incentive Credit: EPSDT Medical Visits).

* For EPSDT periodicity schedules, see "FY 2016 Room, Board and Watchful Oversight Minimum Standards for Child Placing Agencies and Child Caring Institutions".


## EPSDT Dental Visits (4\%)

## Percent of children age 3 or older who receive two dental screenings annually

 Data Source: Provider Self-Report in GA SHINES and GA+SCOREOn a monthly basis, this measure is calculated by dividing:
the number of children 3 or older with a non-expired dental screening
by
the number of children 3 or older in placement at least 30 days

EPSDT Dental visits are reported to GA+SCORE and via the Provider Portal in GA SHINES.
Condition: A child has a non-expired screening if:

1) there is an EPSDT Dental visit on the Appts and Visits screen in GA+SCORE and that visit was completed within 6 months of the start of the report month;
or
2) there is an EPSDT Dental visit on the Appts and Visits screen in GA+SCORE and that visit was completed more than 6 months from the start of the report month but within the grace period (3 months);
or
3) there is no EPSDT Dental visit on the Appts and Visits screen in GA+SCORE but the child has been in the placement less than 90 days.

Condition: For this measurement, a third attempt at an EPSDT dental screening is equivalent to a completed screening.

Additional credit may be given for children who receive required visits within narrower timeframes (see Incentive Credit: EPSDT Dental Visits).

* For EPSDT periodicity schedules, see "FY 2016 Room, Board and Watchful Oversight Minimum Standards for Child Placing Agencies and Child Caring Institutions".


## Academic Supports (4\%)

Percent of children enrolled in K-12 or a GED program who receive at least two academic supports per month Data Source: Provider Self-Report in GA+SCORE

On a monthly basis, this measure is calculated by dividing:
the number of children with all required academic supports
by
the number of children enrolled (or intended to enroll) in school (K-12 or GED) and in care for the full month

Condition: Expectations for academic supports are based on the Education screen in GA+SCORE. Children with no information on this screen are assumed to be enrolled in school and require academic supports.

Condition: A child is not required to receive academic supports during partial months in care, regardless of enrollment status. However, the provider receives credit if a child who is enrolled or intending to enroll but in care for a partial month nevertheless receives the minimum number of academic supports (the supports are added to the numerator and to the denominator).

Condition: The provider does not earn partial credit if a child completes only one academic support during a month. However, because the quarterly score is a combination of the monthly scores, providers do receive some credit if a child receives all required supports in one month but not in another month.

## Provider Every Child Every Month (ECEM) Visit (7\%)

Percent of children with whom the provider makes a purposeful monthly contact
Data Source: Provider Self-Report in GA SHINES
On a monthly basis, this measure is calculated by dividing:
the number of children with an ECEM visit
by
the number of children in care for the full month

ECEM visits are reported via the Provider Portal in GA SHINES. Attempted visits may be reported but do not count toward performance.

Condition: A child is not required to receive an ECEM during partial months in care. However, the provider receives credit if a child is in care for a partial month and the provider nevertheless conducts an ECEM during the month (the child is added to the numerator and to the denominator).

## Provider General Contact (7\%)

## Percent of children receiving a documented contact between child and HSP or CSW or CSS Data Source: Provider Self-Report in GA SHINES

On a monthly basis, this measure is calculated by dividing:
the number of children with a general contact
by
the number of children in care for the full month

Provider General Contacts are reported via the Provider Portal in GA SHINES. Attempted visits may be reported but do not count toward performance.

Please note that a general contact is in addition to the ECEM and cannot be conducted on the same day as the ECEM visit. A general contact reported to SHINES with the same visit date as the child's ECEM will not be counted towards this measure.

Condition: A child is not required to receive a Provider General Contact during partial months in care. However, the provider receives credit if a child is in care for a partial month and the provider nevertheless conducts a Provider General Contact during the month (the child is added to the numerator and to the denominator).

## CCI/CPA Incentive Credits

Incentive Credits are capped at 10 points per quarter. The report will display all incentive credits earned during the quarter, and indicate which credits (up to 10) have been awarded. Incentive credits are awarded based on the following hierarchy:

| CCls |  | CPAs |  |
| :---: | :---: | :---: | :---: |
| 1. | Behavior Management (up to 4 points) |  | . Foster Home Retention Rate / Foster Home |
| 2. | Permanency Contacts (up to 5 points) |  | Recruitment (up to 2 points / up to 2 points) |
| 3. | Early EPSDT Medical / Dental Visits (up | 2. | 2. Permanency Contacts (up to 5 points) |
|  | to 2 points / up to 2 points) | 3. | . Early EPSDT Medical / Dental Visits (up to 2 |
|  | Additional Academic Supports (up to 2 points) |  | points / up to 2 points) <br> Additional Academic Supports (up to 2 |
| 5. | Active Agency Accreditation / Staff Clinical |  | points) |
|  | Licensure (up to 4 points / up to 5 points) |  | Active Agency Accreditation / Staff Clinical Licensure (up to 4 points / up to 5 points) |

## EPSDT Medical Visits (Up to 2\%)

Percent of required medical visits completed early (within 60 days for youth ages 6 and older or within 15 days for children under 6 years old)
Data Source: Provider Self-Report in GA SHINES and GA+SCORE
On a monthly basis, this measure is calculated by dividing:
the number of children who received an expected medical screenings within 60 or 15 days
by
the number of children who were due or overdue for a medical screening

Conditions: See the EPSDT Medical Visits measure for information on when screenings are due. Only visits that comply with the periodicity schedule are eligible for this bonus: no additional credit is given for completing more than the minimum number of EPSDT Medical screenings, and visits must be spaced appropriately to qualify for the bonus. No provider can earn this bonus for more than one visit per child during a quarter, unless the child is under 18 months.

Condition: A provider may earn this bonus if a child is in care for a partial month but nevertheless receives a required screening in the applicable timeframe (the child is added to the numerator and to the denominator).

Condition: Attempted visits do not count toward incentive credit.

## EPSDT Dental Visits (Up to 2\%)

Percent of required dental visits completed early (within 60 days for youth ages 3 and older) Data Source: Provider Self-Report in GA SHINES and GA+SCORE

On a monthly basis, this measure is calculated by dividing:
the number of expected dental screenings completed within 60 days
by
the number of children who were due or overdue for a dental screening

Conditions: See the EPSDT Dental Visits measure for information on when screenings are due. Only visits that comply with the periodicity schedule are eligible for this bonus: no additional credit is given for completing more than the minimum number of EPSDT Dental screenings, and visits must be spaced appropriately to qualify for the bonus. No provider can earn this bonus for more than one visit per child during a quarter.

Condition: A provider may earn this bonus if a child is in care for a partial month but nevertheless receives a required screening in the applicable timeframe (the child is added to the numerator and to the denominator).

Condition: Attempted visits do not count toward incentive credit.

## Permanency Contacts (Up to 5\%)

Percent of children receiving provider supported contact between child and permanency adult which support the DFCS permanency plan
Data Source: Provider Self-Report in GA SHINES and GA+SCORE
On a monthly basis, this measure is calculated by dividing:
the number of expected visits completed during the month
by
the number of expected visits

Visits are reported via the Provider Portal in GA SHINES.
Condition: Attempted visits do not count toward incentive credit.

## Additional Academic Supports (Up to 2\%)

Percent of children enrolled in K-12 or a GED program who receive six or more academic supports per month Data Source: Provider Self-Report in GA+SCORE

On a monthly basis, this measure is calculated by dividing:
the number of children with six or more academic supports
by
the number of children enrolled (or intended to enroll) in school (K-12 or GED) and in care for the full month

Condition: Expectations for academic supports are based on the Education screen in GA+SCORE. Children with no information on this screen are assumed to be enrolled in school and require academic supports.

Condition: A child is not expected to receive academic supports during partial months in care, regardless of enrollment status. However, the provider receives credit if a child who is enrolled or intending to enroll but in care for a partial month nevertheless receives six or more academic supports (the supports are added to the numerator and to the denominator).

## Foster Home Retention (2 points) - CPA only

Total quarterly foster home retention rate is at least 90\%
Data Source: GA+SCORE derived from provider self-report
On a quarterly basis, this measure is calculated by dividing:
the number of homes open and approved on the first day of the quarter and still approved on the last day of the quarter or that had acceptable closure reasons
by
the number of homes open and approved on the first day of the quarter

Condition: Providers must be open for the full quarter to be eligible for this incentive credit.

## Foster Home Recruitment (2 points) - CPA only

Approval of at least four new homes (or at least $25 \%$ of \# approved of homes at the start of the quarter) during the quarter
Data Source: GA+SCORE derived from provider self-report
On a quarterly basis, this measure is calculated by comparing:
the number of new homes that open during the quarter
to
$25 \%$ of the number of approved homes open on the first day of the quarter or 4 , whichever is smaller

Condition: Providers must be open for the full quarter to be eligible for this incentive credit.
Condition: A home that has been previously open at another agency is considered a new home. A home that has been previously open at the same agency (any program site) is not considered a new home.

## Active Accreditation (up to 4 points)

Add 2 points for each accreditation active on the last day of the quarter Data Source: Provider Self-Report in GA+SCORE

On a quarterly basis, this measure is calculated by counting:
the number of program accreditations active on the last day of the quarter

Condition: Providers may receive up to four points on this Incentive Credit. No credit is awarded for additional accreditations.

## Staff Clinical Licensure (up to 5 points)

Add $1 / 2$ point per HSP, CSS, CSW or LC staff with one or more state of Georgia clinical licenses active on the last day of the quarter
Data Source: Provider Self-Report in GA+SCORE
On a quarterly basis, this measure is calculated by counting:
the number of HSP, CSS, CSW, or LC staff with one or more state of Georgia clinical licenses active on the last day of the quarter

Condition: Providers may receive up to five points on this Incentive Credit. No credit is awarded for additional licenses.

Behavior Management (4 points) - CCl only
No "reportable" use of physical restraint/seclusion/ESI during the quarter
Data Source: GA+SCORE derived from provider self-report
On a quarterly basis, this measure is calculated by counting:
the number of Significant Events involving ESI reported during the quarter

## ILP/TLP Measures

ILP/TLP scores are comprised of five components: OPM Monitoring; general Safety, Permanency and Well-Being outcomes; specialty ILP/TLP outcomes; Incentive Credits; and Debit Penalties (if any).

ILP/TLP specialty programs receive $50 \%$ of their scores from OPM Monitoring visits and select CCI measures, given their license type is a Child Caring Institution:

- Comprehensive Reviews 15\%
- Safety Reviews 5\%
- Incidence of Maltreatment 3\%
- Staff Training 5\%
- Placement Stability $3 \%$
- Sibling Contacts $3 \%$
- Academic Supports 3\%
- EPSDT Medical 4\%
- EPSDT Dental 5\%
- Provider Every Child Every Month Visit

5\%
Percentages have been adjusted to fit a 100-point scale, but the calculations for the general measures are the same as for CCls, with one exception: youth placed at ILP/TLP programs must receive 4 academic supports per month, not two. Please see the previous section (pages 10-20) for details on those general measures.

## Specialty Measures

## Academic/Career Development (10\%)

Percent of youth attending an educational program leading to HS completion or higher education and/or employed at least 10 hours a week
Data Source: Provider Self-Report in GA+SCORE
On a monthly basis, this measure is calculated by dividing:
the number of youth attending an educational program or employed
by
the number of youth in placement for the full month

## Independent Living Skills Provision (15\%)

Percent of youth receiving at least four independent living skills experiences monthly: counseling, workshop, experiential activity or other that supports the youth's development as dictated by the ACLSA and the youth's WTLP (ISP)
Data Source: Provider Self-Report in GA SHINES
On a monthly basis, this measure is calculated by dividing:
the number of youth with at least four IL skills experiences
by
the number of youth in care the full month

IL Skills Provision experiences are reported via the Provider Portal in GA SHINES. Attempted visits may be reported but do not count toward performance.

Condition: A youth is not required to receive IL skills experiences during partial months in care. However, the provider receives credit if a youth who is in placement for a partial month nevertheless receives the minimum number of IL skills experiences (the youth is added to the numerator and to the denominator).

Condition: The provider does not earn partial credit if a youth receives fewer than four IL skills experiences during a month. However, because the quarterly score is a combination of the monthly scores, providers do receive some credit if a youth receives all required experiences in one month but not in another month.

## Financial Independence (5\%)

Percent of youth enrolled in the Individual Development Account program, attending financial literacy class and maintaining IDA with minimum $\$ 5$ monthly contribution and at least one skill training experience on finances monthly
Data Source: Provider Self-Report in GA+SCORE
This measure tracks three components of IDA participation: receiving at least one skill training experience on finances monthly, enrolling in the IDA program and attending a financial literacy class, and maintaining the IDA with a minimum $\$ 5$ contribution per month.

On a monthly basis, this measure is calculated by dividing:
the number of youth fully participating in IDA
by
the number of youth in placement for the full month

Condition: A youth is fully participating in IDA if the youth completes at least one skill training experience on finances during each full month in care AND:

1) By the end of the youth's second full month in placement, the youth enrolls in the IDA program and attends the financial literacy class, or the provider reports that the youth has completed those steps at a previous placement. No credit is given for a youth who enrolls in the IDA program but does not attend the financial literacy class, or vice versa;
or
2) In any subsequent month, the youth makes the minimum $\$ 5$ monthly contribution. No credit is given for a youth who makes the minimum $\$ 5$ monthly contribution but has not previously both enrolled in the IDA program and attended the financial literacy class;
or
3) If the youth is unable to open an account due to credit history, that information is reported to GA+SCORE by the end of the second full month in placement. The youth must continue to receive monthly skill training experiences, but will not be responsible for completing the financial literacy class or making regular $\$ 5$ contributions.

Condition: A youth is not required to participate in IDA during partial months. However, the provider receives credit if a youth nevertheless participates fully in IDA (the youth is added to the numerator and to the denominator).

## Community Connections (5\%)

Percent of youth participating in a community organization or volunteer experience at least 10 hours a quarter Data Source: Provider Self-Report in GA+SCORE

On a quarterly basis, this measure is calculated by dividing:
the number of youth participating in a community organization or volunteer experience at least 10 hours per quarter
by
the number of youth in placement for the full quarter

Condition: A youth who is in care for less than the full quarter is not required to participate at least 10 hours. However, the provider receives credit if a youth is in care for a partial quarter but nevertheless completes at least 10 hours of service in a community organization or volunteer experience during the quarter (the youth is added to the numerator and the denominator).

## Percent of youth who receive at least two documented contacts with Life Coach in support of achieving WTLP goals <br> Data Source: Provider Self-Report in GA SHINES

On a monthly basis, this measure is calculated by dividing:
the number of youth with at least two documented contacts
by
the number of youth in care for the full month

WTLP/Life Coach contacts are reported via the Provider Portal in GA SHINES. Attempted visits may be reported but do not count toward performance.

In FY 2013, all ECEM and general contact visits reported for youth in ILP/TLP specialty programs were counted as WTLP/Life Coach contacts. In FY 2016, ECEM visits will not be counted towards this measure. To receive credit for WTLP/Life Coach contacts, the youth must have two case manager contacts entered in SHINES in addition to the ECEM.

Please note that WTLP/Life Coach contacts are in addition to the ECEM and cannot be conducted on the same day as the ECEM visit. A WTLP/Life Coach contact reported to SHINES with the same visit date as the child's ECEM will not be counted towards this measure. In addition, each WTLP/Life Coach contact must be conducted on a separate day; only one per day will be counted towards this measure.

Condition: A youth is not required to receive contacts during partial months in care. However, the provider receives credit if a youth is in care for a partial month and the provider nevertheless conducts two contacts during the month (the youth is added to the numerator and to the denominator).

Condition: The provider does not earn partial credit if a youth receives fewer than two WTLP/Life Coach contacts during a month. However, because the quarterly score is a combination of the monthly scores, providers do receive some credit if a youth receives all required contacts in one month but not in another month.

## ILP/TLP Incentive Credits

Incentive Credits are capped at 10 points per quarter. ILP/TLP specialty programs are eligible only for ILP/TLP incentive credits; specialty programs cannot earn general CCI incentive credits. The report will display all incentive credits earned during the quarter, and indicate which credits (up to 10) have been awarded. Incentive credits are awarded based on the following hierarchy:

1. Extended Foster Care Services (up to 5 points)
2. At Least Part-Time Employment with Medical Benefits / Living Arrangements at Discharge (up to 20 points / up to 20 points)
3. High School Graduation or College Participation (up to 20 points)
4. No DJJ or DOC Involvement (up to 5 points)
5. Positive Permanency Connections (up to 5 points)
6. Additional Academic Supports / Additional Independent Living Skills Provision (up to 2 points / up to 5 points)
7. Active Agency Accreditation / Staff Clinical Licensure (up to 4 points / up to 5 points)

## No DJJ or DOC Involvement (Up to 5\%)

Percent of youth with no DJJ or DOC involvement OR no additional involvement or probation violations and no Significant Events with police involvement
Data Source: Provider Self-Report in GA+SCORE
On a monthly basis, this measure is calculated by dividing:
the number of youth with no DJJ or DOC involvement OR with no additional involvement or probation violations and no Significant Events with police involvement
by
the number of youth in placement for the full month

## Extended Foster Care Services (Up to 5\%)

Percent of youth agreeing to extended foster care at 18 years of age Data Source: GA SHINES

On a quarterly basis, this measure is calculated by dividing:
the number of youth who consent to extended foster care services within 30 days of turning 18
by
the number of youth turning 18 during the quarter and in placement at least 30 days since the 18th birthday

Extended foster care services signatures are reported to GA SHINES by DFCS staff.
Condition: A youth in care less than 30 days following the 18th birthday is not expected to agree to extended foster care. However, the provider receives credit if a youth is in care for less than 30 days after the birthday but the youth nevertheless agrees to extended foster care within 30 days of turning 18 (the youth is added to the numerator and the denominator).

Percent of emancipating youth (with APPLA goal) or emancipated youth with signed "Permanency Pacts" or agreements with three or more caring adults
Data Source: Provider Self-Report in GA+SCORE

On a quarterly basis, this measure is calculated by dividing:
the number of youth with 3 or more signed permanency pacts
by
the number of youth in placement for a full quarter with APPLA goal or emancipated

Condition: Expectations for positive permanency connections for youth under 18 are based on the APPLA Goal section of the ILP/TLP screen in GA+SCORE. Youth under 18 with no information in this section are assumed to have a permanency goal of APPLA and require positive permanency connections. (All youth 18 and over are required to have positive permanency connections.)

Condition: A youth who is in care for a partial quarter is not expected to have any signed permanency pacts. However, the provider receives credit if a youth with APPLA goal or who has emancipated is in care for a partial quarter but nevertheless has three permanency pacts during the quarter (the youth is added to the numerator and the denominator).

Condition: Permanency pacts do not have to be simultaneous to receive credit as long as each is active at least one day during the quarter.

## High School Graduation, College Participation, or Professional Certification (Up to 20\%)

Percent of youth completing a HS diploma or who pass at least two classes at a college, university, trade, or technical school full-time, or pass a professional certification course Data Source: Provider Self-Report in GA+SCORE

On a monthly basis, this measure is calculated by dividing:
the number of youth completing a HS diploma or who pass at least two classes at a college, university, trade, or technical school full-time, or pass a professional certification course
by
the number of youth in placement for at least one full month during the quarter

Condition: A youth who is in care for a partial month is not expected to complete a HS diploma, etc. However, the provider receives credit if a youth is in care for a partial month but nevertheless has a qualifying accomplishment during the month (the youth is added to the numerator and the denominator).

Condition: No provider can earn this incentive for the same youth more than once in a quarter.

## At Least Part Time Employment with Medical Benefits (Up to 20\%)

Percent of discharged youth who have at least a part time job with medical benefits Data Source: Provider Self-Report in GA+SCORE

On a quarterly basis, this measure is calculated by dividing:
the number of youth discharged with FTE or PTE with medical benefits
by
the number of youth discharged

Condition: No provider can earn this incentive for the same youth more than once in a quarter.

## Living Arrangements at Discharge (Up to 20\%)

Percent of youth discharged who have a signed housing lease in their name Data Source: Provider Self-Report in GA+SCORE

On a quarterly basis, this measure is calculated by dividing:
the number of youth discharged who have a signed housing lease in their name
by
the number of youth discharged

Condition: No provider can earn this incentive for the same youth more than once in a quarter.

## Additional Academic Supports (Up to 2\%)

Percent of children enrolled in grade school or GED program who receive six or more academic supports per month
Data Source: Provider Self-Report in GA+SCORE
On a monthly basis, this measure is calculated by dividing:
the number of youth with six or more academic supports
by
the number of youth enrolled (or intended to enroll) in school (K-12 or GED) and in care for the full month

Condition: Expectations for academic supports are based on the Education screen in GA+SCORE. Youth with no information on this screen are assumed to be enrolled in school and require academic supports.

Condition: A youth is not expected to receive academic supports during partial months in care, regardless of enrollment status. However, the provider receives credit if a youth who is enrolled or intending to enroll but in care for a partial month nevertheless receives six or more academic supports (the supports are added to the numerator and to the denominator).

## Additional Independent Living Skills Provision (Up to 5\%)

Percent of youth receiving more than 5 independent living skills/activities monthly Data Source: Provider Self-Report in GA SHINES

On a monthly basis, this measure is calculated by dividing:
the number of youth with more than five IL skills experiences
by
the number of youth in care the full month

IL Skills Provision experiences are reported via the Provider Portal in GA SHINES. Attempted visits do not count toward incentive credit.

Condition: A youth is not required to expected IL skills experiences during partial months in care. However, the provider receives credit if a youth who is in placement for a partial month nevertheless receives more than five IL skills experiences (the youth is added to the numerator and to the denominator).

## Active Accreditation (up to 4 points)

Add 2 points for each accreditation active on the last day of the quarter Data Source: Provider Self-Report in GA+SCORE

On a quarterly basis, this measure is calculated by counting:
the number of program accreditations active on the last day of the quarter

Condition: Providers may receive up to four points on this Incentive Credit. No credit is awarded for additional accreditations.

## Staff Clinical Licensure (up to 5 points)

Add $1 / 2$ point per HSP, CSS, CSW, or LC staff with one or more state of Georgia clinical licenses active on the last day of the quarter
Data Source: Provider Self-Report in GA+SCORE
On a quarterly basis, this measure is calculated by counting:
the number of HSP, CSS, CSW, or LC staff with one or more state of Georgia clinical licenses active on the last day of the quarter

Condition: Providers may receive up to five points on this Incentive Credit. No credit is awarded for additional licenses.

## Training and Feedback Sessions for FY 2016 PBP Measures

The Office of Provider Management is committed to providing support and training to providers as well as partnering to strengthen and define measures in the years to come. Feedback sessions will be scheduled periodically throughout the year to share lessons learned and to understand PBP expectations from the provider perspective. Questions regarding measures should be directed to the OPM Monitoring Team Manager. Questions regarding data input into GA+SCORE should be directed to Care Solutions at support@gascore.com or by phone: 770-642-6722 or 800-2273410.

