Division of Family and Children Services
Office of Provider Management

FY 2018 Room Board and Watchful Oversight
Performance-Based Placement
Measurements and Standards Guide
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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 11. That testing phase of PBP was considered “hold harmless”, since providers were not being held accountable (rewarded or penalized) for their scores. FY 16 was the fourth year where accountability for scores was 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 were no significant changes in measures or score calculations in FY 2015 or FY 2016. For FY 2017 and FY2018, OPM removed the sibling contacts measure as well as the quality home evaluation review score (CPAs only). The requirements for the staff training measure have been modified, and the scoring threshold for the maltreatment in care measure was changed from .32 to all or none. The minimum age at which children in care should receive dental care is now one year. Weights for some measures have changed to reflect their importance. Finally, OPM has added two test measurements, which will not be calculated into overall PBP scores: placements within the child's legal county, and number of placements where siblings are placed together.

As in previous years, FY 18 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 2018 Overall Scores/Grades and Complete Score Card

FY 2018 marks the sixth 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/B”) are published on the public DHS and GA+SCORE websites, and the full GA+SCORECARD is published on an internal DHS website.
FY 2018 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. Effective FY2018 Q2, the CCI and CPA FY 2018 measures are:

<table>
<thead>
<tr>
<th>FY 2018 PBP Measures</th>
<th>CCI Weight</th>
<th>CPA Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPM Monitoring Reviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comprehensive Review</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>Safety Reviews</td>
<td>15%</td>
<td>15%</td>
</tr>
<tr>
<td>Safety Measures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incidence of Maltreatment</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Staff Training and Foundations</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>Staff Safety Checks</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>Permanency Measures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Placement Stability</td>
<td>15%</td>
<td>15%</td>
</tr>
<tr>
<td>Well-Being Measures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EPSDT Medical Visits</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>EPSDT Dental Visits</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>Academic Supports</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Provider Every Child Every Month Visit</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Provider General Contact</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Placements with Siblings</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Placements Within Legal County</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

The following incentive credits apply to CCI and CPA providers:

<table>
<thead>
<tr>
<th>Incentive Credit</th>
<th>CCI</th>
<th>CPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early EPSDT Medical Visits</td>
<td>Up to 2%</td>
<td>Up to 2%</td>
</tr>
<tr>
<td>Early EPSDT Dental Visits</td>
<td>Up to 2%</td>
<td>Up to 2%</td>
</tr>
<tr>
<td>Permanency Contacts</td>
<td>Up to 5%</td>
<td>Up to 5%</td>
</tr>
<tr>
<td>Additional Academic Supports</td>
<td>Up to 2%</td>
<td>Up to 2%</td>
</tr>
<tr>
<td>Foster Home Retention Rate</td>
<td>Up to 2 Points</td>
<td>Up to 2 Points</td>
</tr>
<tr>
<td>Foster Home Recruitment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active Agency Accreditation</td>
<td>Up to 2 points per accreditation up to 4 points total</td>
<td>Up to 2 points per accreditation up to 4 points total</td>
</tr>
<tr>
<td>Staff Clinical Licensure</td>
<td>Up to ½ point per person up to 5 points total</td>
<td>Up to ½ point per person up to 5 points total</td>
</tr>
<tr>
<td>Behavior Management (Use of ESI)</td>
<td>Add up to 4 Points</td>
<td>Up to 5 Points</td>
</tr>
<tr>
<td><strong>Maximum Total Combined Incentive Credit Allowed is 10 Points</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*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 18 for details.*
**Effective FY2018 Q2**, the FY 18 measures for Independent Living and Transitional Living Specialty Programs are as follows:

<table>
<thead>
<tr>
<th>IL and TLP Measures</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPM Monitoring Reviews</td>
<td></td>
</tr>
<tr>
<td>Comprehensive Review</td>
<td>15%</td>
</tr>
<tr>
<td>Safety Reviews</td>
<td>5%</td>
</tr>
<tr>
<td>General Safety Measures</td>
<td></td>
</tr>
<tr>
<td>Incidence of Maltreatment</td>
<td>3%</td>
</tr>
<tr>
<td>Staff Training and Foundations</td>
<td>5%</td>
</tr>
<tr>
<td>Staff Safety Checks</td>
<td>5%</td>
</tr>
<tr>
<td>General Permanency Measures</td>
<td></td>
</tr>
<tr>
<td>Placement Stability</td>
<td>3%</td>
</tr>
<tr>
<td>General Well-Being Measures</td>
<td></td>
</tr>
<tr>
<td>Academic Supports</td>
<td>2%</td>
</tr>
<tr>
<td>EPSDT Medical</td>
<td>4%</td>
</tr>
<tr>
<td>EPSDT Dental</td>
<td>4%</td>
</tr>
<tr>
<td>Provider Every Child Every Month Visit</td>
<td>4%</td>
</tr>
<tr>
<td>Placements with Siblings</td>
<td>N/A</td>
</tr>
<tr>
<td>Placements Within Legal County</td>
<td>N/A</td>
</tr>
<tr>
<td>IL/TLP Specialty Measures</td>
<td></td>
</tr>
<tr>
<td>Academic/Career Development</td>
<td>10%</td>
</tr>
<tr>
<td>Independent Living Skills Provision</td>
<td>15%</td>
</tr>
<tr>
<td>Financial Independence</td>
<td>5%</td>
</tr>
<tr>
<td>Community Connections</td>
<td>5%</td>
</tr>
<tr>
<td>WTLP /Life Coach</td>
<td>15%</td>
</tr>
</tbody>
</table>

Total = 100%

The following incentive credits apply to IL and TLP providers:

<table>
<thead>
<tr>
<th>Incentive Credits for IL and TLP Programs</th>
<th>Allowable</th>
</tr>
</thead>
<tbody>
<tr>
<td>No DJJ or DOC Involvement</td>
<td>Up to 5%</td>
</tr>
<tr>
<td>Extended Foster Care Services</td>
<td>Up to 5%</td>
</tr>
<tr>
<td>Positive Permanency Connections</td>
<td>Up to 5%</td>
</tr>
<tr>
<td>High School Graduation or College Participation</td>
<td>Up to 20%</td>
</tr>
<tr>
<td>At Least Part-Time Employment with Medical Benefits</td>
<td>Up to 20%</td>
</tr>
<tr>
<td>Living Arrangements at Discharge</td>
<td>Up to 20%</td>
</tr>
<tr>
<td>Additional Academic Supports</td>
<td>Up to 2%</td>
</tr>
<tr>
<td>Additional Independent Living Skills Provision</td>
<td>Up to 5%</td>
</tr>
<tr>
<td>Active Agency Accreditation</td>
<td>Up to 2 points per accreditation up to 4 points total</td>
</tr>
<tr>
<td>Staff Clinical Licensure</td>
<td>Up to ½ point per person up to 5 points total</td>
</tr>
</tbody>
</table>

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 26 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 for Child Caring Institutions (CCIs), 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 Comprehensive (Annual or Biennial) Review score, the averages for all Safety Reviews 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 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 Comprehensive Review score is included on any quarter's GA+SCORECARD. The scores for Safety 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 1-year 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, data-entry 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 by the PBP reporting deadline.

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 18 at 70% or higher. Thus, providers are expected to maintain at least a 70/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.

<table>
<thead>
<tr>
<th>Score</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>97-100</td>
<td>A+</td>
</tr>
<tr>
<td>94-96</td>
<td>A</td>
</tr>
<tr>
<td>90-93</td>
<td>A-</td>
</tr>
<tr>
<td>87-89</td>
<td>B+</td>
</tr>
<tr>
<td>84-86</td>
<td>B</td>
</tr>
<tr>
<td>80-83</td>
<td>B-</td>
</tr>
<tr>
<td>77-79</td>
<td>C+</td>
</tr>
<tr>
<td>74-76</td>
<td>C</td>
</tr>
<tr>
<td>70-73</td>
<td>C-</td>
</tr>
<tr>
<td>67-69</td>
<td>D+</td>
</tr>
<tr>
<td>64-66</td>
<td>D</td>
</tr>
<tr>
<td>60-63</td>
<td>D-</td>
</tr>
<tr>
<td>0-59</td>
<td>F</td>
</tr>
</tbody>
</table>
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 CCIs and 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 three points for academic supports in Q2. During the OPM PBP Verification review of six child records, OPM was unable to verify academic supports for 1 child. The penalty would be calculated as follows:

Verification Review Score for Academic Supports = 83%

Self-Report PBP Points = 3
Step One: 0.83 \times 3 = 2.5
Step Two: 3 - 2.5 = 0.5

Penalty Debit for the Next Quarter: 0.5 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
Step One: 0.75 \times 5 = 3.75
Step Two: 5 - 3.75 = 1.25

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 = 75%

Self-Report PBP Points = 12
Step One: 0.75 \times 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 10th 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
Please see the document titled “Provider Grievance, Appeal & Dispute Process Instructions” posted at https://www.gascore.com/content/page.cfm/300.
CCI 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). Two test measurements are included in the FY2018 GA+SCORECARDs, but do not affect the provider's overall score.

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 CCI and CPA.

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 Comprehensive Review (CR), including any subsequent PIPs, is displayed on each quarter's report until the next CR is conducted. Scores for Safety Reviews are cumulative averages of all monitoring events since 7/1/2012.

Comprehensive Review

**Comprehensive (Annual or Biennial) Reviews (CR) conducted by OPM account for 25% of the provider’s total PBP score.** Beginning July 1, 2016, OPM conducts comprehensive reviews every two years instead of annually for providers who score at or above the minimum threshold, which will be increased to 85% from 70%. OPM determines whether a provider has met the minimum threshold at the end of each fiscal year if the provider did not make the minimum threshold the previous year; otherwise, OPM will check every two years to determine whether the provider remains eligible for the biennial schedule. Until a CR is conducted for FY2018, each quarterly report is based on the CR score earned in the previous fiscal year. If OPM has not yet conducted a CR 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 CCI or CPA).

**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

**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 a CR, or 60 if the provider has received neither a CR nor an SR).
Safety Scoring Component

Provider self-reported measures related to child safety account for 10% of a CCI or CPA provider’s total PBP score.

**Incidence of Maltreatment (10%)**

*Children who have substantiated CPS investigations (all or none)*

*Data Source: GA SHINES*

On a quarterly basis, this measure is calculated by counting:

\[ \text{the number of children under 18 involved in an incident during the FY that is substantiated during the quarter} \]

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

**Staff Training and Foundations Training (5%)**

*Please note: the calculation of Staff Records and Foundations Training changed effective FY2018 Q2, when the new measure for Staff Safety Checks was added.*

For new staff: Percent of staff whose records are entered timely into GA+SCORE, are enrolled in Foundations within 30 days of hire or waived and complete the Foundations requirements within the deadline based on hire date.

For veteran staff: Percent of staff who complete at least 6 hours of annual training for each quarter worked during the fiscal year, assessed annually in Q4.

*Foundations component applies to HSP, CSS, CSW, LC only; other components apply to all staff with any role other than N/A.*

*Data Source: Provider Self-Report in GA+SCORE*

This measure tracks multiple components of staff records and training: maintaining an accurate staffing list in GA+SCORE, ensuring new staff complete or waive Foundations training within the established timelines, and ensuring staff complete the annual training requirement.

On a quarterly basis, this measure is calculated by dividing:

\[ \frac{\text{the number of staff meeting records requirements}}{\text{the number of staff employed during the quarter (based on hire and end dates and leave dates, if any)}} \]

**Condition:** A staff person meets all requirements if the staff person:

1) Started their RBWO role during the quarter or was reported to GA+SCORE during the quarter, and no more than ten days elapsed between the role start date and the date reported to GA+SCORE;
2) Is in an RBWO role requiring Foundations training, the 30th day of the role occurred during the quarter, and the staff person had waived Foundations or registered for Foundations e-Learning by that day;
3) Is in an RBWO role requiring Foundations training, the fourth month of the role occurred during the quarter, and the staff person had completed all Foundations training by the deadline;
4) Completed at least six hours of training for each quarter in which the person worked at least 60 days in an eligible RBWO role. **Training completion for all staff is assessed in Q4.**

Condition: The annual training requirement is a running total through the fiscal year, assessed once in Q4 for all staff, and prorated based on the number of days worked by the staff person in an eligible role. Each staff person must complete the equivalent of six hours for each quarter in which they worked at least 60 days in an eligible role. There is no requirement that training be completed in a specific quarter, as long as the prorated annual total is met by Q4.

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.

**Staff Safety Checks (5%)**

*Please note: this measure was added FY2018 Q2.*

For new staff: Percent of staff (all roles other than N/A) whose OIG letter is dated prior to the agency hire date and no more than one year prior to the agency hire date.

For veteran staff: Percent of staff (all roles other than N/A) whose OIG letter is valid every day worked during the quarter.

**Data Source: Provider Self-Report in GA+SCORE**

On a quarterly basis, this measure is calculated by dividing:

\[
\text{the number of staff meeting OIG requirements} \\
\quad \text{by} \\
\text{the number of staff employed during the quarter (based on hire and end dates and leave dates, if any)}
\]

Condition: A staff person meets all requirements if the staff person:

1) Has an agency start date during the quarter, completed the OIG letter on or before the agency hire date but no more than one year before the agency hire date, and the OIG letter was uploaded to GA+SCORE by the tenth of the following month.

2) Has an agency hire date before the quarter, and a valid OIG letter was in GA+SCORE each day during the quarter. If the OIG letter expires during the quarter, the replacement must be dated on or before the expiration date, and uploaded by the tenth of the following month.
Permanency Scoring Component

Provider self-reported measures related to child permanency account for 15% of a provider's total PBP score.

Placement Stability (15%)
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.
Well-Being Scoring Component

Provider self-reported measures related to child well-being account for 25% of a CCI or CPA provider’s total PBP score.

**EPSDT Medical Visits (4%)**

*Percent of children who receive health screenings based on Medicaid’s Early Prevention and Screening Diagnostic Test (EPSDT) periodicity schedule as recorded in Minimum Standard 6.2*

*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) all visits due during the quarter were completed within 15 days (for children 0-12 months), 30 days (for children 13-36 months), or 90 days (for children 3+) of the required completion date;

   or

2) 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).
**EPSDT Dental Visits (4%)**

*Percent of children age 1 or older who receive two dental screenings annually*

*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 1 or older with a non-expired dental screening

by

the number of children 1 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).
**Academic Supports (3%)**

*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:

\[
\frac{\text{the number of children with all required academic supports}}{\text{the number of children enrolled (or intended to enroll) in school (K-12 or GED) and in care for the full month}}
\]

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:

\[
\frac{\text{the number of children with an ECEM visit}}{\text{the number of children in care for the full month}}
\]

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).

---

**Placements with Siblings (not scored)**

*Percent of children placed with all siblings who are also in DFCS custody*

*Data Source: Provider Self-Report in GA+SCORE*

---

On a monthly basis, this measure is calculated by dividing:

- **the number of children placed with all siblings who are also in DFCS custody**
- by
- **the number of children with any siblings in DFCS custody**

---

**Placements within Legal County (not scored)**

*Percent of admissions to a foster home or CCI in the child's legal county*

*Data Source: Provider Self-Report in GA+SCORE*

---

On a monthly basis, this measure is calculated by dividing:

- **the number of admissions during the month into a foster home or CCI in the child's legal county**
- by
- **the number of admissions during the month**

**Condition:** A move between foster homes is a new admission.
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:

<table>
<thead>
<tr>
<th>CCIs</th>
<th>CPAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Behavior Management (up to 4 points)</td>
<td>1. Foster Home Retention Rate / Foster Home Recruitment (up to 2 points / up to 2 points)</td>
</tr>
<tr>
<td>2. Permanency Contacts (up to 5 points)</td>
<td>2. Permanency Contacts (up to 5 points)</td>
</tr>
<tr>
<td>3. Early EPSDT Medical / Dental Visits (up to 2 points / up to 2 points)</td>
<td>3. Early EPSDT Medical / Dental Visits (up to 2 points / up to 2 points)</td>
</tr>
<tr>
<td>4. Additional Academic Supports (up to 2 points)</td>
<td>4. Additional Academic Supports (up to 2 points)</td>
</tr>
<tr>
<td>5. Active Agency Accreditation / Staff Clinical Licensure (up to 4 points / up to 5 points)</td>
<td>5. Active Agency Accreditation / Staff Clinical Licensure (up to 4 points / up to 5 points)</td>
</tr>
</tbody>
</table>

**EPSDT Medical Visits (Up to 2%)**

Percent of required medical visits completed early (within 60 days for youth ages 3 and older or within 15 days for children 6-36 months)

*Data Source: Provider Self-Report in GA SHINES and GA+SCORE*

On a monthly basis, this measure is calculated by dividing:

\[
\frac{\text{the number of children who received an expected medical screening within 60 or 15 days}}{\text{the number of children who were due or overdue for a medical screening}}
\]

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.

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 1 and older)*  
*Data Source: Provider Self-Report in GA SHINES and GA+SCORE*

On a monthly basis, this measure is calculated by dividing:

\[
\frac{\text{the number of expected dental screenings completed within 60 days}}{\text{the number of children who were due or overdue for a dental screening}}
\]

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:

\[
\frac{\text{the number of expected visits completed during the month}}{\text{the number of expected visits}}
\]

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:

\[
\text{the number of children with six or more academic supports} \\
\quad \text{by} \\
\text{the number of children enrolled (or intended to enroll) in school (K-12 or GED) and in care for the full month}
\]

**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:

\[
\text{the number of homes open and approved on the first day of the quarter and still approved on the last day of the quarter or that had acceptable closure reasons} \\
\quad \text{by} \\
\text{the number of homes open and approved on the first day of the quarter}
\]

**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:

\[
\text{the number of new homes that open during the quarter} \\
\quad \text{to} \\
25\% \text{ of the number of approved homes open on the first day of the quarter or 4, whichever is smaller}
\]

**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) – CCI 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 10%
- Placement Stability 3%
- Academic Supports 2%
- EPSDT Medical 4%
- EPSDT Dental 4%
- Provider Every Child Every Month Visit 4%
- Placements Within Legal County N/A
- Placements with Siblings N/A

Percentages have been adjusted to fit a 100-point scale, but the calculations for the general measures are the same as for CCIs, with one exception: youth placed at ILP/TLP programs must receive 4 academic supports per month, not two. Please see the previous section (pages 11-17) 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:

\[
\text{the number of youth attending an educational program or employed} \quad \text{by} \quad \text{the number of youth in placement for the full month}
\]
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 WTLSP (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:

\[
\text{the number of youth fully participating in IDA} \div \text{the number of youth in placement for the full month}
\]

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:

5) 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

6) 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

7) 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:

\[
\text{the number of youth participating in a community organization or volunteer experience at least 10 hours per quarter} \div \text{the number of youth in placement for the full quarter}
\]

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).
**WTLP/Life Coach (15%)**

* Percent of youth who receive at least two documented contacts with Life Coach in support of achieving WTLP goals

*Data Source: Provider Self-Report in GA SHINES*

<table>
<thead>
<tr>
<th>On a monthly basis, this measure is calculated by dividing:</th>
</tr>
</thead>
<tbody>
<tr>
<td>the number of youth with at least two documented contacts</td>
</tr>
<tr>
<td>the number of youth in care for the full month</td>
</tr>
</tbody>
</table>

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

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).
**Positive Permanency Connections (Up to 5%)**

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:

\[
\frac{\text{the number of youth with 3 or more signed permanency pacts}}{\text{the number of youth in placement for a full quarter with APPLA goal or emancipated}}
\]

**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.

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**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:

\[
\frac{\text{the number of youth completing a HS diploma or who pass at least two classes at a college, university, trade, or technical school full-time, or pass a professional certification course}}{\text{the number of youth in placement for at least one full month during the quarter}}
\]

**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:

\[
\frac{\text{the number of youth discharged with FTE or PTE with medical benefits}}{\text{the number of youth discharged}}
\]

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:

\[
\frac{\text{the number of youth discharged who have a signed housing lease in their name}}{\text{the number of youth discharged}}
\]

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:

\[
\frac{\text{the number of youth with six or more academic supports}}{\text{the number of youth enrolled (or intended to enroll) in school (K-12 or GED) and in care for the full month}}
\]

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:

\[
\text{the number of youth with more than five IL skills experiences} \quad \text{by} \quad \text{the number of youth in care the full month}
\]

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 complete 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:

\[
\text{the number of program accreditations active on the last day of the quarter}
\]

 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:

\[
\text{the number of HSP, CSS, CSW, or LC staff with one or more state of Georgia clinical licenses active on the last day of the quarter}
\]

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 2018 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 800-227-3410.