

January 1, 2024

Aetna Better Health® of Illinois

2024 Pay for Performance program details

Aetna Better Health® of Illinois introduces the 2024 Pay for Performance (P4P) Program to help our members achieve optimal health outcomes and improve quality scores. The program measurement year is the 2024 calendar year for dates of service January 1, 2024, to December 31, 2024.

P4P offers incentives to participating primary care providers (PCPs), pediatricians, behavioral health providers and OB/GYNs who perform recommended services for key HEDIS® measures. Providers may earn incentives by accurately coding on claims or using direct data feeds to submit data to the health plan.

Program details

- Participating providers with a member panel of 100 or greater are eligible. The requirement to see 50% of the member panel has been retired, in lieu of the minimum percentile payment threshold at the 33rd percentile.
- Measure incentives increase as performance improves at three distinct tiers: 33rd percentile, 50th percentile and 75th percentile. Providers receive compensation for all gaps closed when the next performance tier is reached.
- Reconciliation occurs at the next payment cycle for any performance decline that may occur because of measure definitions (i.e., CBP no longer controlled at last entry of year, BH measure declines due to readmissions, etc.)
- Prenatal and postpartum care for members with live births from October 8, 2023, to October 7, 2024.
- The Follow Up to Mental Health Hospitalization (FUH) measure can only be addressed by a behavioral health provider. Follow up After Emergency Department Visit for Substance Abuse (FUA) and Follow up After Emergency Department Visit for Mental Illness (FUM) visits can be with any practitioner type. The follow-up measures capture events from December 1 to January 1, to allow time for 30-day gap closure in all follow-up measures.
- In addition to the Timeliness of Prenatal Care (TOPC) measure performance, providers can earn \$30 per notification of pregnancy. [Download the form with instructions here.](#)
- Providers can receive \$25 for every [Health Risk Survey \(HRS\)](#) completed for a new member in the first 60 days. Providers can receive \$10 per HRS completed for all other members.
- Providers can receive an additional \$25 per member per day for entry of Z-code Z59.x to document problems related to housing and economic circumstances.
- Providers with more than a thousand members will receive a one-time bonus of \$1,000 for a new SDS approved by September 1, 2024.

How can you earn P4P incentives?

Incentive payments are attributed to eligible providers at the TIN level for achieving the required targeted tier for a specific HEDIS® measure.

When will payments be made?

Three estimated payments will be issued for 2024 gap closures:

- Payment 1: August 2024 for all gaps closed by claims through 6/30/2024
- Payment 2: February 2025 reconciliation on all gaps closed by claims through 12/31/2024
- Payment 3: Expected in Q1 2026 - Final reconciliation 45 days after HFS payout of the 2024 program

Tracking your progress

The [Availity portal](#) has two reports to help you close quality gaps and see your P4P progress throughout the year. Contact your Quality Practice Liaison (QPL) to learn how to access and leverage the reports — “Group Level P4Q Performance” and “Quality Care Gaps”. If you need help registering for Availity, contact your Network Relations representative.

Questions?

Reach out to your Quality Practice Liaison or to the Quality Department at ABHILQualityOutreach@aetna.com.