



Program Year 5

Community Discharge Pay-for-Performance (P4P)

Program Guidelines

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Eligible Discharge Period: **01/01/2024 – 12/31/2024**

### We value your feedback

Help us improve the program guidelines by sending us your questions or comments on this document.

Email [PSInquiries@hpsm.org](mailto:PSInquiries@hpsm.org)

# Incentive Overview

Health Plan of San Mateo’s Community Discharge Pay-for-Performance Program offers long-term care facilities bonus payments for successfully discharging HPSM Medi-Cal and CareAdvantage members with extended stays to a community setting where they remain for a continuous six months or more. HPSM uses standard claims reporting to identify eligible discharges and assess the length of community retention. See “**Member Eligibility**” below for a description of qualifying discharges and the minimum community retention period.

For additional questions about this incentive, please contact HPSM Provider Services at [PSinquiries@hpsm.org](mailto:PSinquiries@hpsm.org).

## Incentive Payments

Bonus payments are distributed in a lump sum in Q3 or Q4 of the calendar year after the measurement period. Facilities receive 60 days of the Medi-Cal per diem rate for every eligible member discharge and retained in community.

## Facility Eligibility

All contracted facilities providing long-term care services are automatically opted into this upside-only program. Facilities must have a contract with HPSM Medi-Cal and CareAdvantage lines of business effective no later than six months prior to end of the measurement period AND active as of the lump sum payment date.

## Member Eligibility

To be included in a facility’s final incentive payment, a member must meet all of the following criteria:

- Received long-term care services at a contracted facility and was discharged to a residential placement in the community at any point during the measurement period;
- Active as an HPSM Medi-Cal or CareAdvantage member on the date of discharge and for a minimum six months (180 days) after discharge;
- Accumulated at least 90 continuous days at an institutional level of care prior to discharge;
- Did not return to any level of institutional care (including inpatient, skilled nursing, and residential long-term care) at any point in the six months (180 days) post-discharge.

## Important Dates – Program Year 5

Period	Dates	Description
<b>Measurement Period</b>	01/01/2024 – 12/31/2024	Dates of discharge to community must occur within the measurement period to be eligible for that year’s incentive.
<b>Claims Submission Deadline</b>	01/30/2025	All HPSM claims and qualifying reporting codes for LTC services and discharge must be submitted by this date to guarantee eligibility.
<b>Bonus Payment Distribution</b>	Q3 – Q4 2025	Incentive payments are distributed in a lump sum via paper check mailed to the facility’s primary mailing address on file or via electronic funds transfer to eligible facilities.

# Terms & Conditions

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Participation in the Health Plan of San Mateo's ("HPSM") Community Discharge Pay-for-Performance Program ("the Incentive"), as well as acceptance of bonus payments, does not in any way modify or supersede any terms or conditions of any agreement between HPSM and participating providers. There is no guarantee of future funding or payment under any HPSM quality or incentive arrangement. The Incentive and its Terms & Conditions may be modified or terminated at any time, with or without notice, at HPSM's sole discretion.

In consideration of HPSM's offering of the Incentive, provider agrees to fully and forever release and discharge HPSM from any and all claims, demands, causes of action, and suits, of any nature, pertaining to or arising from the offering by HPSM of the Incentive. Any monies paid under the Incentive for services deemed inappropriately submitted will be recouped from future payment. All cases of suspected fraud or abuse will be investigated thoroughly and reported to the appropriate authorities.

HPSM reserves the right to audit medical records to validate services have been completed as billed. If there is evidence of fraud, waste, or abuse, HPSM can recoup the Incentive payments found to be invalidly billed and the provider could lose privileges to participate in future HPSM quality or incentive arrangements.

Participating providers must be in good standing with all contract and compliance requirements in order to receive the Incentive payments. If any participating providers are not in good standing, the Incentive payments will not be made until such time that providers are meeting all contract and compliance requirements.