



# Performance Metrics and Incentives in Outcomes Contracting

SIF ADP Learning Community

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#### Purpose

- Build a more robust understanding of performance metrics and incentive structures in Outcomes Contracts
- Examine how performance metrics and incentive structures can be designed to fit the needs of the contracting parties and the community served
- Develop further questions and considerations to contemplate within your project



#### Contents

Performance Metrics and Incentives Structures (15 min)

Case Studies: (20 min)

-Appropriate metrics and timing for payments: Northern Virginia

-Provider-specific and dynamic targets: King County, WA

Reflection and Discussion (25 min)

Bonus Case Study:

-Incorporating bonus and withheld payments: Santa Clara County, CA



#### **Opening Question: Identifying a personal performance metric**

**Group Share** 

- If you could be paid a bonus next year on one performance metric related to the job responsibilities you have right now, what would that metric be?
- How could attaching an incentive to this metric encourage you to behave differently?





### Our vision is to unite administrative data and outcomes contracts to unlock government and provider innovation and measurably improve lives

**ADP** Vision





#### Outcomes contracts articulate five key components that collectively ensure funding and services drive toward improving life outcomes

**Components of an Outcomes Contract** 





Performance metrics allow agencies to track progress towards outcomes goals and reward providers through incentive structures

**Performance Metrics Inform Incentive Structures** 





### Performance metrics are the immediate and extended results of a program's resources and activities



1. A logic model is a framework or visualization of how a program expects to achieve its ultimate social benefit goals, from resources (inputs and activities) to the products generated from those resources (outputs) to the expected impact of those products over time (outcomes).



### Agencies can leverage a range of incentives in an outcomes contract, and today we will focusing on those tied to performance metrics

#### Potential incentives for providers

| Contract dollars tied                  |  | Contingent bonus<br>payments  | Payments in excess of base costs after meeting or exceeding outcomes                    |
|--|--|-------------------------------|---|
| to achieving<br>outcome or output      |  | Contingent base payments      | Payments within base costs are withheld until success is determined                     |
| targets                                |  | Contract<br>renewal/expansion | Providers receive additional or larger contracts after successfully meeting targets     |
| Improved                               |  | Outcomes data access          | Providers have access to outcomes data to demonstrate a track record of success         |
| measurement and<br>compliance          |  | Reduced reporting burden      | Reporting streamlined to focus on outputs or outcomes and leverages administrative data |
| Flexibility in service<br>delivery and |  | Flexible program delivery     | Providers are encouraged to innovate on program delivery to achieve outcomes            |
| targeting                              |  | Population focus              | Providers are given the option to focus on a specific beneficiary population            |
| Organizational<br>sustainability       |  | Contract size / term          | Longer and/or larger contract in exchange for including outcome payments                |



### Tying incentives to outcomes aligns goals, reduces reporting, and offers providers flexibility to innovate for better results

| Types of Contract Payments |   |                   |  |  |
|----------------------------|---|-------------------|--|--|
| Cost Reimbursement         | Performance-based                       | Outcomes-oriented |  |  |
|                            | Financial link to goals achievement     |                   |  |  |
|                            | Minimized or simplified reporting       | ►                 |  |  |
|                            | Potential influence of external factors | 5                 |  |  |

| Benefits  |  |   |  |  |
|---|--|---|--|--|
| <ul> <li>Provides cost coverage to<br/>providers</li> </ul>   | • When rigorously selected, outputs can represent key indicators of outcomes   | <ul> <li>Allows providers to focus on<br/>cultural responsiveness and<br/>improving outcomes</li> </ul>                               |  |  |
| Considerations  |  |   |  |  |
| <ul> <li>Requires provider to submit<br/>documentation for expenses</li> <li>Incentivizes inputs of service<br/>delivery</li> </ul> | <ul> <li>Requires continued<br/>evaluation, audits, and<br/>stakeholder engagement to<br/>validate output choices</li> </ul> | <ul> <li>Involves careful, deliberate<br/>evaluation of the provider<br/>ecosystem and providers'<br/>financial accounting</li> </ul> |  |  |



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Case studies can demonstrate how to design incentive structures around key performance metrics to accelerate improved outcomes.

**Featured Case Studies** 







Northern Virginia Workforce Board partnered with Third Sector to determine the **optimal performance metrics and timing** for bonus payments along the impact continuum. King County worked with Third Sector to structure bonuses based on **customized performance targets** that update semiannually, and included **upfront funding** to boost providers' capacity

Third Sector helped Santa Clara County's Behavioral Health Services Department build an outcomes contract with contingent bonuses and withheld payments for the provider



### Northern Virginia Workforce Board partnered with Third Sector to determine the optimal metrics and timing for bonus payments

Northern Virginia Workforce Development Board







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#### Case Study: 2017 Northern Virginia Team Independence Project (NVTI)

| PERFORMANCE METRICS  |  |   |  |  |
|----------------------|--|---|--|--|
| Payment              | <b>Contracted outcomes:</b> Skills Gain During Program; Placement in Employment, Training, or Education (six months and one year after exit); Attainment of Degree or Certificate (within one year after exit) |   |  |  |
| Policy               | <b>Other outcomes of interest:</b> Reduction in recidivism rates and time spent incarcerated; Decrease in use of TANF, SNAP, and Medicaid  |   |  |  |
| INCENTIVE STRUCTURES |  |   |  |  |
| Туре                 | Bonus Payments to one workforce service provider, the Fairfax Department of Family Services (DFS)  |   |  |  |
| Conditions           | Paid out per outcome, per youth to the provider upon meeting NVTI success targets for each outcome achieved by foster care and/or justice-involved youth. Full bonus is made only if success target is met.    |   |  |  |
| Incentive            | Cost of<br>Service   | <ul> <li>Program Cost of Service is \$600K</li> <li>Cost of Service is paid to DFS through regular WIOA cost reimbursement in order to operate program</li> </ul>   |  |  |
| Amount               | Bonus<br>Amount  | <ul> <li>Up to \$150K in bonus payments paid out over 6 years for ~100 youth</li> <li>DFS can earn a bonus payment of \$712 per youth, per outcome achieved (per youth, total possible payment of \$2,848 for achieving all 4 contracted outcomes)</li> </ul>                             |  |  |
| Payment              | Timeline   | <ul> <li>Services delivered to each youth for 1.5 years (avg); 1 year observation post-program</li> <li>Program enrollment is ongoing; Bonus payment funds are set aside during the first 3 years of the program but program itself (with observation period) runs for 6 years</li> </ul> |  |  |
| Schedule             | Bonus<br>Frequency   | <ul> <li>Starting in Year 2, bonus payments made bi-annually if outcomes are met</li> <li>Bonus payments stop 3 years after the last enrollee has begun the program</li> </ul>  |  |  |





#### Northern Virginia used opportunities from new legislation to help enroll and serve at-risk youth

Context Innovation Bonus payments split equally across four Single provider **Sequential** performance metrics which include both working towards **Milestones** outputs during the program and outcomes multiple outcomes measured after program exit Services delivered to youth for 1.5 years Provider services end Longer (avg.), but additional 1 year observation before final outcomes **Observation** window incorporated to allow longer-term observed Window metrics Research from Bureau of Labor Statistics, External Lack of baseline data Census, and state-level studies informed the **Research for** success target design, as well as provider for population served **Success Targets** performance in general youth population







Northern Virginia used a mix of performance metrics to incentivize enrollment and improved service delivery to program clients

|                        | Inputs                         | Outputs               | Short-Term Outcomes   | Long-Term Outcomes  |
|------------------------|--------------------------------|-----------------------|---|---|
| Cost-<br>Reimbursement | Program costs (three<br>years) |                       |   |   |
| Payment<br>Metrics     |                                | Enrollment in program | <ul> <li>Youth placed in<br/>employment, training,<br/>or education 2Q after<br/>exit</li> <li>Measurable gains in<br/>literacy and numeracy</li> </ul> | <ul> <li>Attainment of degree or<br/>certificate 4Q after exit</li> <li>Youth placed in<br/>employment, training,<br/>or education 4Q after<br/>exit</li> </ul> |
| Policy Metrics         |                                |                       |   | <ul> <li>Reduction in recidivism<br/>rates and time spent<br/>incarcerated</li> <li>Decrease in use of<br/>TANF, SNAP, and<br/>Medicaid</li> </ul>              |





#### Bonus payments were split equally between each of four metrics in order to balance provider risk and incentivize a progression of better outcomes





### King County responded to variation in provider performance with dynamic and provider-specific targets

Case Study: King County Behavioral Health and Recovery Division







Northern Virginia Workforce Board partnered with Third Sector to determine the **optimal performance metrics and timing** for bonus payments to improve education and employment outcomes King County worked with Third Sector to structure bonuses based on **customized performance targets** that update semiannually, and included **upfront funding** to boost providers' capacity

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#### **Case Study: King County Outpatient Treatment on Demand Initiative**

| Payment | <b>Contracted metrics:</b> Time from request for service to offered intake; Time from request for service to actual intake; Time from intake to routine service |
|---------|---|
| Policy  | Hypothesized outcomes of timely access: Reduced use of crisis services and hospital   |

| INCENTIVE STRUCTURES |   |  |  |
|----------------------|---|--|--|
| Туре                 | Performance-contingent bonus payments to 23 county-funded outpatient behavioral health contractors  |  |  |
| Conditions           | <ul> <li>A bonus is paid out if the provider meets the growth target for metric (all or nothing for each metric)</li> <li>Growth target is calculated relative to each provider's performance (over the previous 6 months)</li> </ul> |  |  |
| Incentive            | Affected<br>Funding <sup>1</sup>  | <ul> <li>Across All Providers: ~\$115 million in service delivery payments per year</li> </ul>   |  |
| Amount               | Bonus<br>Amount <sup>1</sup>  | <ul> <li>2% total bonus possible of provider case rate (Bonus per metric: Time to Intake: 0.5%;<br/>Time to Actual Intake: 0.5%; Time to Routine Service: 1%)</li> <li>Across all providers: Up to \$2.3 million a year (approximately)</li> </ul> |  |
| Payment              | Timeline  | <ul> <li>Initiative will last 3 years</li> <li>County granted the first performance payment upfront (6 month upfront bonus) so providers could implement the changes needed to meet performance targets</li> </ul>                                 |  |
| Schedule             | Bonus<br>Frequency  | <ul> <li>Outcomes measured and bonus payments paid out every 6 months (with 2 month lag between assessment &amp; payout)</li> <li>Providers receive monthly performance data</li> </ul>  |  |

1) Both affected funding and bonus amount figures are estimates. Actual figures may vary as they are affected by the number of actual clients enrolled with providers throughout the year.



### King County leveraged data insights to identify and set an overall county goal while developing provider-specific performance targets

King County

Features of the Performance Metric Design





## King County created a dynamic model that adjusts to individual provider baselines and progress to the overall County goal



Sample Provider Performance Modeling



#### King County determines performance based on three metrics every six months and pays bonuses to providers who meet targets

**King County Incentive Structure** 

| Performance Metric     | ••••••••••••••••••••••••••••••••••••••           |  |   |  |
|------------------------|--|--|---|--|
|                        | 1 day from request for service to offered intake | 4 days from request for service to actual intake | 7 days from intake to start of routine care |  |
| Incentive <sup>1</sup> | 0.5% of case rate                                | 0.5% of case rate                                | 1% of case rate                             |  |

|                      | Understanding providers' financial and capacity needs, the County  |
|----------------------|--|
| Upfront Investment   | <ol> <li>Granted the first performance payment upfront and</li> <li>Provided funding for technical assistance from national consultants on</li></ol> |
| in Provider Capacity | implementing 'open access' strategies.   |

1. Contracts applied a case rate reimbursement structure meaning that providers were paid a set rate for each client served. In this incentive structure, providers received a bonus based on their total case rate. Therefore, the more clients a provider served, the larger the bonus payment they could earn for reaching each target.



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#### Reflecting on these two case studies and your agency's project

**Discussion Questions** 

- What is *one feature* of King County's or Northern Virginia's performance metrics or incentives structures that sparked your interest and why?
- What *question or idea* do you have in regards to integrating performance metrics and incentives structures into contracts?



#### Our next learning session will focus on...

#### **Quarterly Sessions Timeline**

|    | 2017   | 2018  | 2019   |
|----|--|---|--|
| Q1 |  | <b>Technical training, in-person</b><br><b>visioning (Apr)</b><br>Lead: Stanford<br>Format: In-person | Sustainable data access &<br>sharing (Jan)<br>Lead: Stanford<br>Format: In-person                        |
| Q2 |  | Performance Metrics &<br>Incentive Structures (July)<br>Lead: Third Sector<br>Format: Webinar         | Leveraging insights & scaling<br>across agency (Apr)<br>Lead: Third Sector & Stanford<br>Format: Webinar |
| Q3 |  | Lesson or early insights on<br>integrating admin data (Sept)<br>Lead: Stanford<br>Format: Webinar     | Project closeout: contracts &<br>outcomes-orientation (July)<br>Lead: Third Sector<br>Format: Webinar    |
| Q4 | Overview of project sites &<br>learning communities (Jan '18)<br>Lead: Third Sector<br>Format: Webinar | Process check: are we where<br>we planned to be? (Nov)<br>Lead: Third Sector<br>Format: Webinar       |  |



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### Santa Clara County withholds a portion of payment from the provider and uses targets to determine the amount of contingent or bonus payment

Santa Clara County Behavioral Health Services Department







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#### Case Study: Santa Clara County Mental Health PFS Project

| PERFORMANCE METRICS  |  |  |  |  |
|----------------------|--|--|--|--|
| Payment              | <b>Contracted outcome:</b> Reduction in the utilization of high cost critical care services (avoided days in high cost care)   |  |  |  |
| Policy               | Other priority out   | comes: Improved mental health and wellness   |  |  |
| INCENTIVE STRUCTURES |  |  |  |  |
| Туре                 | Bonus or withheld payments on top of traditional core services contract  |  |  |  |
| Conditions           | <ul> <li>Payments are partially withheld at start of year; after year end, providers can earn full reimbursement<br/>plus a bonus, based on how far the program exceeded or missed the year's cashable savings target</li> </ul> |  |  |  |
| Incentive            | Cost of<br>Service   | <ul> <li>\$32M in total commitment, which includes \$10M in reallocated County funds from<br/>cost savings generated from reduced service utilization</li> </ul> |  |  |
| Amount               | Bonus<br>Amount  | <ul> <li>Up to \$1.4M in bonus or withheld payments over 6-years, ranging from (+/-) \$72K –<br/>\$321K per year</li> </ul>                                      |  |  |
| Payment              | Timeline   | <ul> <li>Traditional government service contract with a 6-year contingent bonus and<br/>withholding feature</li> </ul>   |  |  |
| Schedule             | Bonus<br>Frequency   | Bonuses paid annually and capped based on projected enrollment   |  |  |



### The gap between the County's savings and the year's target determined the size of the payment made or withheld



This black line represents how much money the County pays to the provider when the County realizes the respective amount of cashable savings, relative to full reimbursement (i.e., \$0 withheld or bonus payment made).

- The 6-year project includes \$32M in total provider payments with up to \$1.4M contingent on outcomes.
- The provider gains a bonus or has payments withheld based on how far the provider exceeded or fell below each year's County savings goal.
- Each year the project sets a different target for County savings as well as a different cap based on a percentage of distance from that target. The savings target and cap are expected to increase over the 6 year project which gives the provider time to implement changes.



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