



2026

Provider Incentive Program

**Primary Care Providers
Federally Qualified Health Centers
Rural Health Clinics**

Jefferson Service Area (STAR and CHIP)

CommunityHealthChoice.org
713.295.2295 | 1.888.760.2600

0037395



Our Members deserve quality health care. You deserve to be rewarded for it.

Community Health Choice (Community) is committed to improving the health of our Members by supporting access to high-quality, cost-effective health care. An important component of our commitment is to reward Primary Care Providers (PCPs), Federally Qualified Health Centers (FQHCs), and Rural Health Clinics (RHCs) for improving targeted clinical quality results, promoting safe and effective patient care, and increasing preventive care services for our Members – your patients.

We are pleased to share details about our Provider Incentive Program (PIP) for calendar year 2026.

Texas Government Code Section 536.051 requires the Health and Human Services Commission (HHSC) to base a percentage of the premiums paid to a managed care organization (MCO) participating in Medicaid or CHIP on the MCO's performance on quality measures. Community's PIP is an effort to align with state performance and quality measures.

PARTICIPATION REQUIREMENTS

To participate in the 2026 PIP, you must be in full compliance with Community's **Network Participation Criteria** requirements on January 1, 2026.



- Participation in CAQH Program
- Attested TPI number
- Not currently on any government exclusion list
- Hospital privileges at a participating hospital (or acceptable coverage agreement)
- Participation in THSteps Program (if you provide pediatric services)
- Electronic claims submission via one of the following clearinghouse vendors: Availity, Change Healthcare (formerly Emdeon and Relay Health) or TriZetto
- Electronic funds transfer (EFT)
- Electronic remittance advice (ERA)
- Maintain an open panel

You must meet a minimum panel requirement of 100 Members in order to be eligible for the PIP.

- We require Members to select a PCP and we reward the PCP of record for each Member. This means it is beneficial for you to:
 - Make sure Members on your panel come to see you for their healthcare needs.
 - Ask Members you see who are not on your panel to designate you as their PCP.
 - Community monitors Members as well, and we encourage them to keep their PCP of record up to date to ensure you receive proper credit for the Members you see.



Quality Metrics

The goal of our program is to target STAR and CHIP Members who need one or more HEDIS®-measured procedures or visits completed during the 2026 measurement year and to improve performance in other measures as indicated below.

MEASURE	SOURCE*	DESCRIPTION	WEIGHT	MINIMUM THRESHOLD
Well Child Visits in the First 15 Months (W15)	HEDIS	The percentage of children who turned 15 months old during the measurement year: six or more well-child visits.	15%	≥ 70%
Well Child Visits for Age 15 Months - 30 Months (W30)	HEDIS	The percentage of children who turned 30 months old during the measurement year: two or more well-child visits.	15%	≥ 80%
Immunizations for Adolescents – Combination 2 (IMA)	HEDIS	The percentage of adolescents 13 years of age who had one dose of meningococcal vaccine, one dose of tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and either the 2 or 3 dose series of the human papillomavirus (HPV) vaccine by their 13th birthday.	15%	≥ 40%
Child Immunization Status – Combination 10 (CIS)	HEDIS	The percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.	15%	≥ 30%
Weight Assessment and Counseling for Nutrition Children/Adolescents (WCC-BMI)	HEDIS	The percentage of members 3-17 years of age who had an outpatient visit with a PCP and who had evidence of BMI percentile documentation during the measurement year.	5%	≥ 80%
Asthma Medication Ratio (AMR)	HEDIS	The percentage of Members 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year	5%	≥ 75%
Appropriate Treatment for Upper Respiratory Infection (URI)	HEDIS	The percentage of episodes for Members 3 months of age and older with a diagnosis of upper respiratory infection (URI) that did not result in an antibiotic dispensing event.	5%	≥ 92%
Potentially Preventable ER Visits (PPV)	3M	The percentage of all emergency room visits during the measurement year that are potentially avoidable (STAR members only)	15%	≤ 60%
Potentially Preventable Admissions (PPA) *	3M	The percentage of hospital admissions that could potentially have been dealt with in the outpatient setting. These hospital admissions may result from hospital and/or ambulatory care inefficiency, lack of adequate access to outpatient care or inadequate coordination of ambulatory care services (STAR members only)	5%	≤ 7%
Follow-up for Children Prescribed ADHD Medication – Initiation Phase (ADD-Int)	HEDIS	The percentage of members 6–12 years of age with a prescription dispensed for ADHD medication, who had one follow-up visit with a practitioner with prescribing authority during the 30-day Initiation Phase.	5%	≥ 40%

Please note: This is an incentive program that Community may discontinue or modify as needed. Provider Participation in Community's PIP is voluntary. HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).



Payment Methodology

- Community will utilize the most current performance data available and will use claims data exclusively to determine rewards.
 - You must ascertain that your billing is accurate and includes all appropriate service and diagnoses codes.
- Community will issue one incentive payment for 2026.
 - The payment will be made in June 2027 to allow for claims processing and run-out.
 - The entity associated with the Tax ID number to which the physician(s) are affiliated for claims payment will receive the incentive payment.
 - The annual incentive payment will be calculated based on Per Member Per Month (PMPM) multiplied by the panel's Member months for the 2026 calendar year.
- Community will only pay the incentive if:
 - You meet the membership panel requirement as of December 31, 2026.
 - You meet the minimum performance threshold for that quality metric.
 - You must be an actively contracted, participating Provider in Community's STAR and CHIP networks at the time of payment to be eligible for payout.



PIP Performance Summary

Below is a performance summary for illustrative purposes:

2026 PCP Provider Incentive Program Sample Summary

TIN	NAME	MEMBERSHIP	PMPM
123456789	Community PCP	577	\$3.85

PIP METRIC FACTS				CURRENT PERFORMANCE			PMPM PAYMENT	
Metric Name	Source	Weight	Minimum Threshold	Denominator	Numerator	Rate	Current PMPM	Maximum PMPM
Well-Child Visits (0-15 Months)	HEDIS	15%	≥ 70%	10	10	100.00%	\$0.58	\$0.58
Well-Child Visits (15-30 Months)	HEDIS	15%	≥ 80%	12	12	100.00%	\$0.58	\$0.58
Immunizations for Adolescents-Combination 2 (IMA)	HEDIS	15%	≥ 40%	24	9	37.50%	\$0.58	\$0.58
Childhood Immunization Status (CIS)	HEDIS	15%	≥ 30%	375	70	18.66%	\$0.00	\$0.58
BMI Percentile (WCC)	HEDIS	5%	≥ 80%	314	26	8.28%	\$0.00	\$0.19
Asthma Medication Ratio (AMR)	HEDIS	5%	≥ 75%	80	23	28.75%	\$0.00	\$0.19
Appropriate Treatment for Upper Respiratory Infection (URI)	HEDIS	5%	≥ 92%	39	38	97.4%	\$0.19	\$0.19
Potentially Preventable ER Visits (PPV)	3M	15%	≤ 60%	16	10	62.5%	\$0.58	\$0.58
Potentially Preventable Admissions (PPA)	3M	5%	≤ 7%	18	8	44.4%	\$0.00	\$0.19
Follow-up for Children Prescribed AHD Medication - Initiation (ADD-Int)	HEDIS	5%	≥ 40%	25	4	16%	\$0.00	\$0.19

- You can access your PIP Performance Summary at any time via our Provider Portal at <https://provider.communityhealthchoice.org/>.
- Community updates the information weekly.
- If you have any questions, please contact your Provider Performance Manager.