
FEHB Program Carrier Letter

All FEHB Carriers

U.S. Office of Personnel Management
Healthcare and Insurance

Letter No. 2020-20

Date: December 22, 2020

Fee-for-Service [17]

Experience-rated HMO [17]

Community-rated [18]

Subject: 2021 Plan Performance Assessment Procedure Manual

The purpose of this Carrier Letter is to transmit the attachments described below to all Carriers in the Federal Employees Health Benefits (FEHB) Program:

Attachment 1: 2021 Plan Performance Assessment Procedure Manual

The Plan Performance Assessment Procedure Manual is an annually published document that provides specific guidance for FEHB Carriers for the 2021 plan year on the following topics:

- Reporting Healthcare Effectiveness Data and Information Set (HEDIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) results to the National Committee for Quality Assurance (NCQA).
- Affirming the Clinical Quality, Customer Service and Resource Use (QCR) Measure Set.
- Including the 2021 Farm Team Measure Set. New and returning Farm Team measures for 2021 include: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (total rate), Breast Cancer Screening-Electronic, Colorectal Cancer Screening-Electronic, Emergency Department Utilization (returning to the Farm Team), and Well-Child Visits in the First 30 Months of Life (15-30 Months rate).
- Affirming procedures for Contract Oversight input and scoring. This section reinforces that significant performance issues may be scored in one or multiple Oversight domains according to the Contracting Officer's assessment of severity and impact.
- Affirming the Plan Performance Assessment (PPA) Timeline and QCR Scoring and Calculations Procedures, including Data Correction Procedures.
- Including procedures for new Carriers to the FEHB, and how they will be scored in years one, two and three. New Carriers will not receive a QCR score their first year in the program. The first year in the program, the Overall Performance Score will be based on the Contract Oversight score as determined by the Contracting Officer. New carriers should refer to section 4.
- Outlining the move to the All Lines of Business (ALOB) benchmark for the 2021 scoring cycle. Using the ALOB benchmarks means that carriers will be compared to the same standard for each measure.

- Including how the 10th percentile benchmarks will be integrated into the 2021 scoring. Adding the 10th percentile benchmark allows better differentiation in performance for carriers with scores between the 10th and 25th percentile benchmarks. This change creates a minimum Initial OPM Score of 1.0 for measures at or below the 10th percentile benchmark.
- Listing reporting expectations for existing FEHB Carriers with new enrollment codes or health plan options.
- Outlining the data preview process. For 2021, Carriers must actively respond during the QCR Data Preview Period. Carriers can concur with their score or provide feedback to address factual errors, omissions or miscalculations during this timeframe.
- Reinforcing the requirement for Corrective Action Plans.

Attachment 2: 2021 HEDIS and CAHPS Planned Reporting Document

FEHB Carriers will notify OPM of planned HEDIS and CAHPS reporting for 2021 by filling out Attachment 2. This important information is critical to our planning efforts for the scoring cycle. The spreadsheet includes definitions and examples.

Attachment 3: 2021 CAHPS Code List

For 2021, please refer to this attached CAHPS Code List to develop Carrier Crosswalks. While this list is titled 2021, it is based on 2020 CAHPS Codes and will need to be updated to include new codes and omit retired codes.

Thank you for your commitment to the FEHB Program. If you have any questions, please contact your Health Insurance Specialist.

Sincerely,

Laurie E. Bodenheimer
Acting Director
Healthcare and Insurance

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Attachment 2: 2021 HEDIS and CAHPS Planned Reporting Document
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