

2026 PCMH Program Updates

Key Changes for the Performance Period

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Learning Outcomes

- Identify changes for the 2026 PCMH program, including activities and timelines
- Identify metric changes for 2026 PCMH program

Overview of 2026 Changes

- Activity Updates
- HealthySteps
- Metric Updates
- Informational Metrics

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Act 513 and HealthySteps Participation

- Practices recognized for completing training and on track to achieve model fidelity in an evidence-based pediatric transformation model (as defined in ACT 513 of 2023) will receive an additional \$3.44 per month for each attributed beneficiary ages 0–48 months.
- **Updates for 2026:**
 - Participating practices will be identified by the approved programs before the beginning of the performance period. No additional practices will be added until the next performance period.
- **Practice Requirements:**
 - The practice must be identified by the approved program before the performance period begins.
 - No new practices will be added mid-year.
- **Practice must:**
 - Attest participation in HealthySteps via the QCI portal
 - Upload annual site report submitted to HealthySteps
 - Receive and upload report from HealthySteps showing how the practice performed against fidelity activities.

2026 Activity Deadlines



 New for 2026

2026 At-A-Glance

- 15 Activities for 2026
- 5 New Activities ★
- Not all are applicable to every PCMH
- New Timeframe for Attestation ↑

Activity	3-Months	6-Months	9-Months	12-Months
A.	×		↑	
B.	× ★		↑	
C.	×			
D.	× ★			
E.		×		
F.		×		
G.		×		
H.			× ★	
I.			×	
J.			×	
K.			×	
L.			×	
M.				× ★
N.				×
O.				× ★

New Activities for 2026

- Identify Focus Area for Improvement (Activity B)
- Prescription Drug Monitoring Program (PDMP) (Activity D)
- Model Fidelity / ACT 513 Participation (Activity H)
- Model Fidelity / ACT 513 Practice Performance (Activity M)
- Identified Focus Area for Improvement Follow-Up Activity B (Activity O)

2025 Activities that will Sunset for 2026

- Track Third Next Available Appointment (Activity F)



So, What is Changing...

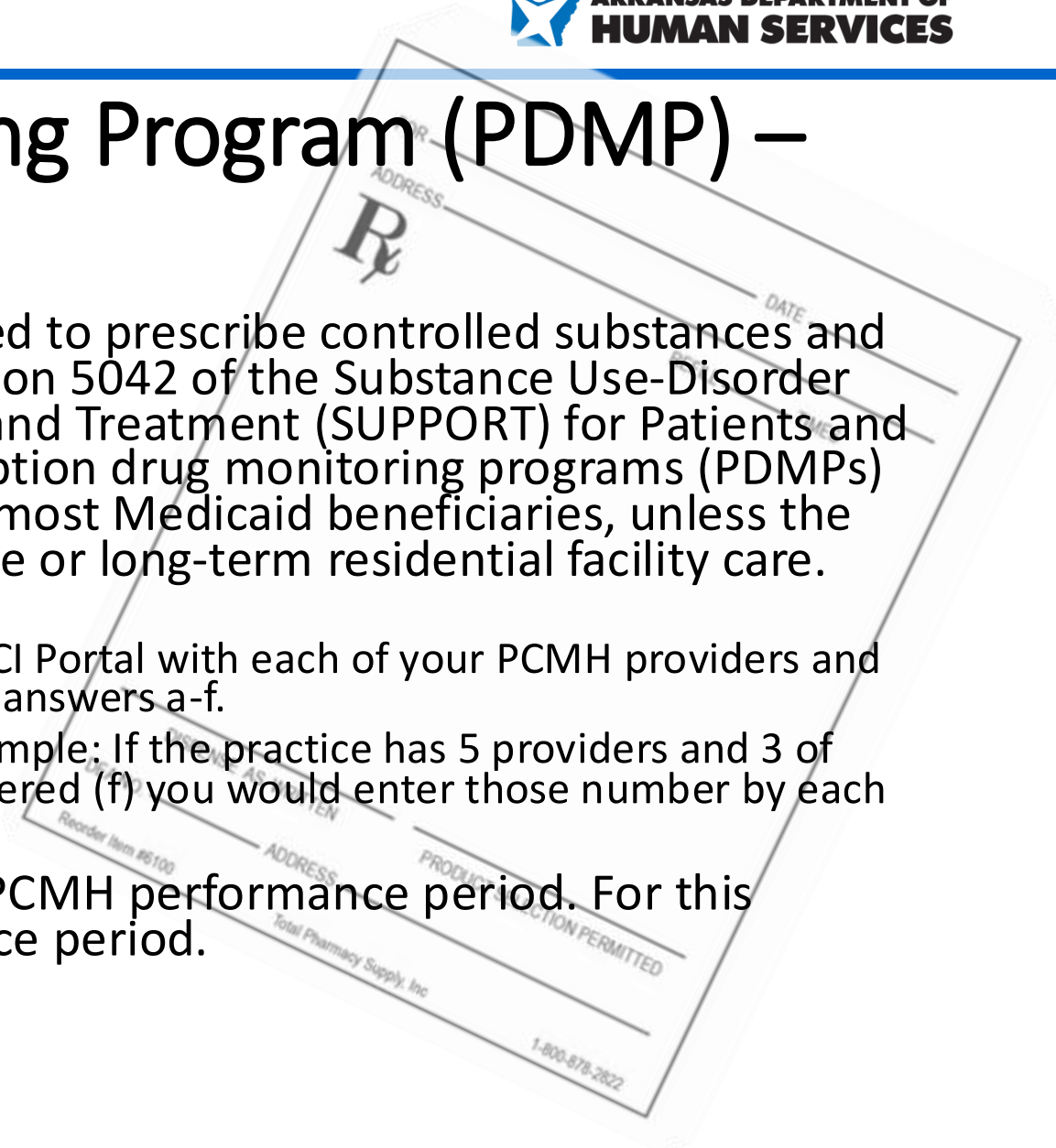


Identify Focus Area for Improvement – Activity B

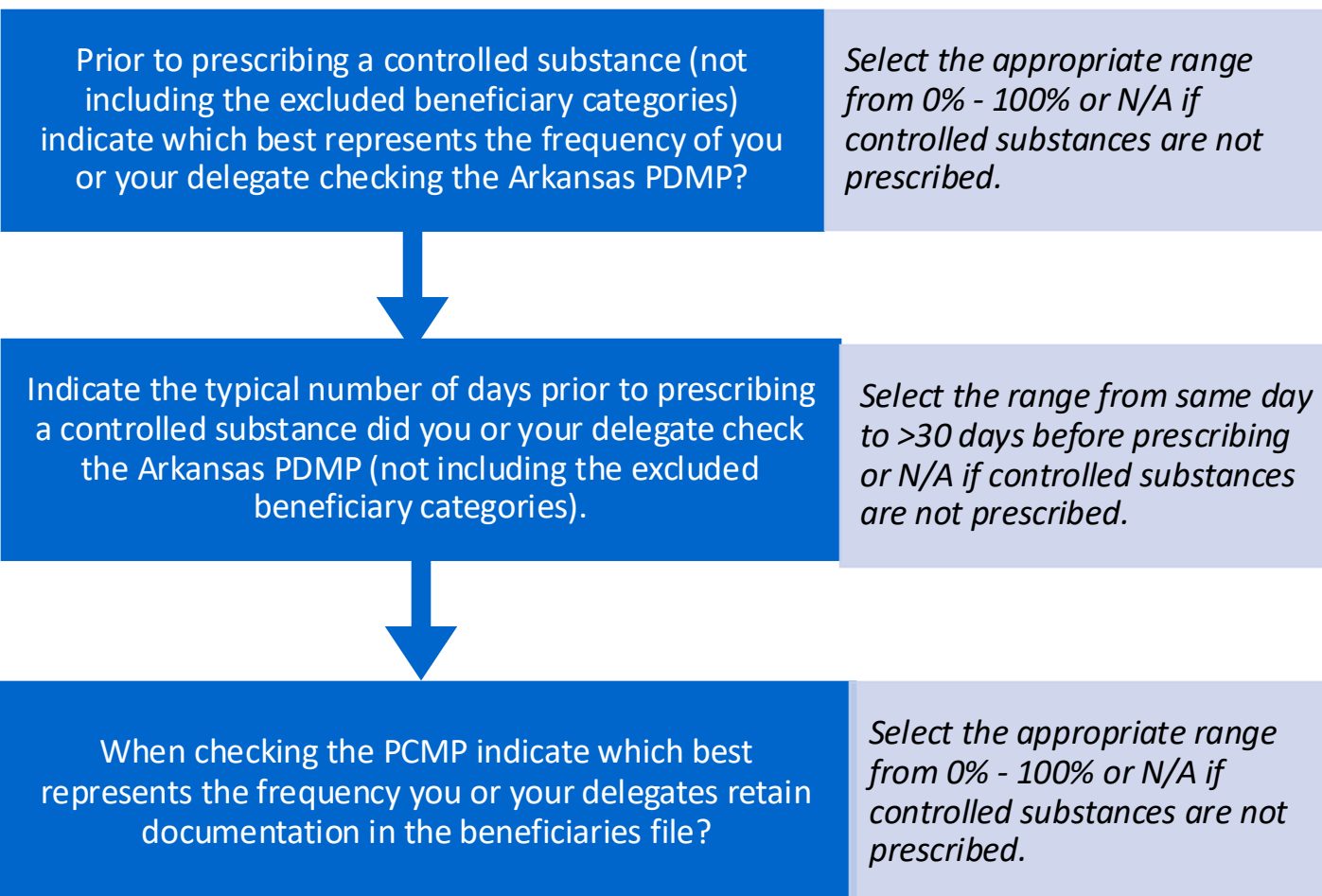
- Identify a minimum of 1 focus area for improvement
 - If new to the PCMH program review the current PCMH Manual and Addendum
 - Choose either an Activity or Metric that may be an obstacle for your practice
 - Meet with practice staff members to identify this area and develop goals and a quality improvement strategy
 - Define the process for monitoring progress, barriers, and expected outcomes
 - If re-enrolling in the PCMH program
 - Choose an existing area that has shown itself to be an obstacle for your practice in previous performance periods
 - Meet with practice staff members to identify this area and develop goals and a quality improvement strategy
- Submit these focus areas and goals via the QCI provider portal

Prescription Drug Monitoring Program (PDMP) – Activity D

- As of October 1, 2021, all providers permitted to prescribe controlled substances and participate in Medicaid are required by Section 5042 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act, to query qualified prescription drug monitoring programs (PDMPs) before prescribing controlled substances to most Medicaid beneficiaries, unless the beneficiary is receiving inpatient hospice care or long-term residential facility care. **(This is required reporting for the State).**
 - Review the 3 required questions through the QCI Portal with each of your PCMH providers and anyone with prescribing rights and the possible answers a-f.
 - Enter the answers collectively as a practice (Example: If the practice has 5 providers and 3 of them answered (a), 1 answered (b), and 1 answered (f) you would enter those number by each answer.
- Submitted answers will be for the previous PCMH performance period. For this submission, answer for the 2025 performance period.
- [Login - AR PDMP AWARE \(pmpaware.net\)](https://pmpaware.net)



SHHH!!! Don't Tell, Here are the Questions!



Model Fidelity / ACT 513 Participation – Activity H

- This Activity is only for practices recognized as having completed training and are on track to achieve or have achieved model fidelity as defined in ACT 513.
- Currently the only model recognized for the 2026 performance period is HealthySteps
 - Attest that your practice participates in the above recognized program model.
 - Update the annual site report the practice must submit to HealthySteps to the QCI portal.



Model Fidelity / Act 513 Practice Performance – Activity M



- If practice is not recognized or on track to achieve model fidelity as defined in ACT 513, the practice is exempt from this activity.
- Currently the only model recognized for the 2026 performance period is HealthySteps
 - Attest to receiving from the Program Model the report documenting how the practice performed against Activities tracked for Fidelity.
 - Upload a copy of the report to the QCI Portal.

Identified Focus Area for Improvement Follow Up from Activity B – Activity O

- Attest that the PCMHs has been actively participating in a quality improvement strategy related to the focus area of improvement identified in Activity B.
- Through the QCI portal describe if these goals were met and list successes and/or challenges the practice may have faced this performance period



2026 LPCM Changes

Metric	Target Rate
Oral and Injectable Antibiotic Utilization (Low Performance)	1,300 oral and injectable antibiotic prescriptions or less per 1,000 attributed beneficiaries (NO CHANGE)
Well-Child Visits in the First 15 Months of Life (0 to 2 visits) (Low Performance)	12% or less of the patient panel, ages 0-15 months, having two or fewer wellness visits. (NO CHANGE)
PCP Visits for High Priority Beneficiaries (Low Performance)	At least 73% of the practice's high priority beneficiaries with 2 of the selected visit types and criteria with their attributed PCMH. (NO CHANGE)
Concurrent Use of Opioids and Benzodiazepines (Low Performance)	23% or less of beneficiaries with two or more prescription claims for any benzodiazepine with unique dates of service and concurrent use of opioids and benzodiazepines for 30 or more cumulative days.

Core Metric targets will be verified in June 2027, at the End of the 2nd Quarter following The completion Of the measured Performance period.

Metric	REMOVED for 2026
Adolescent Well-Care Visits (Ages 12-20) (AWC) (Low Performance)	REMOVED for 2026
No HbA1c Test	REMOVED for 2026

To be eligible for continued PBPM Payments, PCMH must Meet the target for Eligible Core Metrics.

2026 Quality Metric Changes – Claims-Based

Metric #	Metric Name	2026 Target
Quality Metrics: Incentive Payment (Claims-Based)		
1	PCP Visits for High Priority Beneficiaries	≥ 87%
2	Well-Child Visits in the First 15 Months of Life (6+ Visits)	≥ 56%
3	Well-Child Visits 15-30 Months 2+ Visits	≥ 57%
4	Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	≥ 75%
5	Developmental Screening	≥ 21%
6	Well-Child Visits in the Seventh, Eighth, Ninth, Tenth, and Eleventh Years of Life	≥ 67%
7	Adolescent Well-Care Visits (Age 12-20)	≥ 58%

Metric #	Metric Name	2026 Target
Quality Metrics: Incentive Payment (Claims-Based)		
8	Oral and Injectable Antibiotic Utilization	≤ 1,000
9	Chlamydia Screening in Women	≥ 50%
10	Cervical Cancer Screening	≥ 43%
11	Breast Cancer Screening	≥ 45%
12	Colorectal Cancer Screening	≥ 35%

eCQMs

Metric #	eCQMs Quality Metrics	2026 Target
13	Controlling High Blood Pressure - CMS165v14 <i>Controlling High Blood Pressure</i>	≥ 64%
14	Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%) - CMS122v14 <i>Diabetes: Glycemic Status Assessment Greater Than 9%</i>	≤ 25%

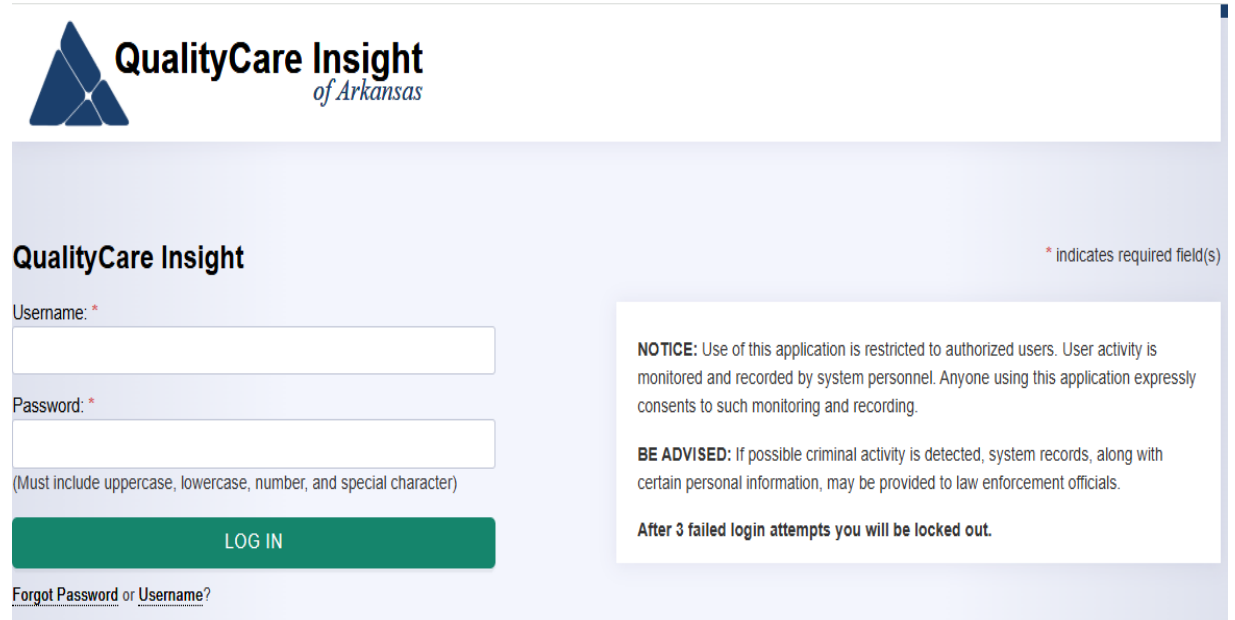
Informational	eCQM Reportable Informational Metrics
Informational	Body Mass Index - CMS69v14 <i>Preventive Care and Screening Body Mass Index (BMI) Screening and Follow Up Plan</i>
Informational	Tobacco Usage - CMS138v14 <i>Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention</i>

2026 Informational Metric Changes

Metric	Description
Syphilis Screening in Women	Percentage of women ages 16-24 who were identified as sexually active and who had at least one test for syphilis during the measurement period.
Contraceptive Care	Percentage of women ages 15-44 provided a most effective or moderately effective method of contraception.

QCI Portal Updates

- Updates for Practice Support Activities (PSA's)
- COMING SOON – New User Guides



 **QualityCare Insight**
of Arkansas

QualityCare Insight * indicates required field(s)

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Password: *

(Must include uppercase, lowercase, number, and special character)

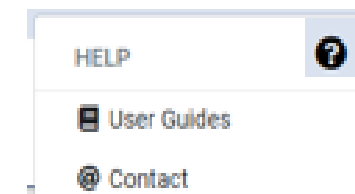
LOG IN

[Forgot Password](#) or [Username?](#)

NOTICE: Use of this application is restricted to authorized users. User activity is monitored and recorded by system personnel. Anyone using this application expressly consents to such monitoring and recording.

BE ADVISED: If possible criminal activity is detected, system records, along with certain personal information, may be provided to law enforcement officials.

After 3 failed login attempts you will be locked out.



Questions?

