MCCP2024 Attachment A

Original Approval Date: 11-14-18

Effective Date: 01-01-19 Revised: 02-12-20

Pediatric Risk Stratification Algorithm

PHC will use a Pediatric Risk Stratification Process (PRSP) to assess the risk of all potential WCM participants within 45 days of enrollment or transition from a county CCS program. Any member who qualifies as high risk in any of the categories below will be stratified as High Risk. Members who do not qualify in any of the categories below will be stratified as Low Risk.

	Response	High Risk
Utilization Data Finding		
Claims costs in prior 12 months > \$50,000	Yes	X
Weighted Algorithm including the following data points applying the formula (Snyder, 2005): -6.07 + (Frequent medications x 0.8) + (Office/Outpatient Clinic Visits x 0.69) + (Breathing Problems x 1.32)		Weighted score > -0.50
Frequent medications defined as any one of the following	[Yes=2	
 >12 prescriptions in past 12 months or 	No=1]	
 >7 months with prescriptions in past 12 months or 	*	
 >6 unique prescriptions in past 12 months or 	0.8	
Total days' supply >300 in past 365 days		
If any of the above is true, then Frequent Medications equals		
yes; else, no		
Breathing Problems defined as any one of the following claims ICD10 diagnosis codes: • J98x, • J95821x, • J44x, • J80x, • J80x, • J96x, • R06x	[Yes=2 No=1] * 1.32	
Number of Doctor's Office/Clinic Visits in past 12 months scored as:	[score]	
None = 1	*	
• One visit = 2	0.69	
• Two to three visits = 3		
• Four to six visits = 4		
• Greater than 6 visits = 5		
Identification as High Risk by CCS/MTP Staff		X
NICU Admission		Х
New CCS Diagnosis		X

References

Snyder, A. W. (2005, September). Development of Risk Assessment Tool for Predicting Pediatric Health Services Utilization. *Journal of Clinical Outcomes Management*, 12(9), 451-458.