



Maternity Quality Care Plus

A Maternity Care Incentive Plan for
Maternity Care Practitioners

Effective April 1, 2016



Health Partners Plans



Health Partners Plans would like to express our appreciation for the invaluable role obstetricians, midwives, nurse practitioners and primary care physicians play in improving birth outcomes.

Our maternity care practitioners represent “partners” in the truest sense of the word, providing quality care that is accessible, effective and efficient.

Our **Maternity Quality Care Plus** incentive program is designed to recognize and reward your practice’s quality performance throughout the year. This manual highlights what you need to know to understand and maximize your incentive payments.

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Healthcare Effectiveness Data and Information Set (HEDIS) Measures

Timeliness of First Prenatal Visit

Defined as the percentage of deliveries that received a prenatal care visit as a Health Partners (Medicaid) member in the first trimester or within 42 days of enrollment in Health Partners (Medicaid).

Postpartum Care

Defined as the percentage of Health Partners (Medicaid) deliveries that had a postpartum visit between 21 and 56 days after delivery.

For more information visit: www.ncqa.org

Frequency of Ongoing Prenatal Care

The percentage of Health Partners (Medicaid) deliveries that completed $\geq 81\%$ of expected prenatal visits as detailed in the chart below:

Expected Number of Prenatal Care Visits for a Given Gestational Age and Month Member Enrolled with Health Partners Plans

Developed by the National Committee for Quality Assurance (NCQA).

| Month of Pregnancy Member Enrolled with Health Partners Plans | | | | | | | | | |
|---|-------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Gestational Age in Weeks | 0-1st month | 2nd month | 3rd month | 4th month | 5th month | 6th month | 7th month | 8th month | 9th month |
| 28 | 6 | 5 | 4 | 3 | 1 | 1 | — | — | — |
| 29 | 6 | 5 | 4 | 3 | 1 | 1 | — | — | — |
| 30 | 7 | 6 | 5 | 4 | 2 | 1 | 1 | — | — |
| 31 | 7 | 6 | 5 | 4 | 2 | 1 | 1 | — | — |
| 32 | 8 | 7 | 6 | 5 | 3 | 2 | 1 | — | — |
| 33 | 8 | 7 | 6 | 5 | 3 | 2 | 1 | — | — |
| 34 | 9 | 8 | 7 | 6 | 4 | 3 | 2 | 1 | — |
| 35 | 9 | 8 | 7 | 6 | 4 | 3 | 2 | 1 | — |
| 36 | 10 | 9 | 8 | 7 | 5 | 4 | 3 | 1 | — |
| 37 | 11 | 10 | 9 | 8 | 6 | 5 | 4 | 2 | — |
| 38 | 12 | 11 | 10 | 9 | 7 | 6 | 5 | 3 | — |
| 39 | 13 | 12 | 11 | 10 | 8 | 7 | 6 | 4 | 1 |
| 40 | 14 | 13 | 12 | 11 | 9 | 8 | 7 | 5 | 1 |
| 41 | 15 | 14 | 13 | 12 | 10 | 9 | 8 | 6 | 2 |
| 42 | 16 | 15 | 14 | 13 | 11 | 10 | 9 | 7 | 3 |
| 43 | 17 | 16 | 15 | 14 | 12 | 11 | 10 | 8 | 4 |

Note: Dashes indicate that no visits are expected.

Future Program Measure: Cesarean Section (C-Section) Rate

The Centers for Disease Control and Prevention (CDC) reports a total United States C-section rate of 32.7% percent in 2013. The C-section rate in Pennsylvania was 31.4% in 2013

(<http://www.cdc.gov/nchs/pressroom/sosmap/cesareans.htm>), with the lowest hospital rate reported as 20.7% and 40.3% being the highest.

The Health Partners Plans C-section rate has been approximately 30% in recent years.

The Pennsylvania Medicaid program penalizes Managed Care Organizations (MCOs) with a C-section rate of 25% or higher. American College of Obstetricians and Gynecologists (ACOG) published new guidelines in February 2014 to prevent C-sections after seeing a 60% increase in C-section delivery from 1996 and 2011 and the related concern that “cesarean delivery is overused without clear evidence of improved maternal or newborn outcomes.”

(http://www.acog.org/About_ACOG/News_Room/News_Releases/2014/Nations_ObGyns_Take_Aim_at_Preventing_Cesareans)

“ACOG has established a goal of 15.5% cesareans for first time births” and “the World Health Organization (WHO) advocates a rate of no more than 15% of all births.”

(<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1595104/pdf/JPE110041.pdf>)

Health Partners Plans desires to collaborate with maternity care practitioners to discover opportunities to reduce the variation in C-section rates. The rate for your practice [at the tax identification number (TIN) level] will be included on your monthly report card (see example on page 8). Health Partners Plans will add a measure for appropriate C-sections to this incentive program for the October 2016 bonus payout period to encourage a more appropriate C-section rate in the future.



Monthly Payments by Maternity Care Practice (Tax Identification Number TIN) Percentile Score

Patient activity for all maternity care practitioners affiliated with your Tax Identification Number (TIN) is consolidated and reported at the practice level. To qualify for a monthly incentive payment, the practice must have a **minimum of 15 patients who were seen at this practice for at least 75% of each patient’s total prenatal visits** during the twelve month reporting period. Also, the practice must be accepting new Health Partners (Medicaid) obstetric patients. Your practice’s results are compared with other

Health Partners (Medicaid) maternity care practices and a percentile score comparing your practice to your peers is calculated for each practice (at the TIN level). If your score is above the 50th percentile for any of the three HEDIS measures during the twelve-month reporting period, **you will receive monthly per patient incentive compensation as detailed in the table below.** (Monthly payment amounts are also annualized for your information.)

| Percentile | Monthly Payment per patient for <u>each</u> of 3 HEDIS Measures | Monthly Payment per patient for <u>all</u> 3 HEDIS Measures | Annual Payment per patient for <u>each</u> of 3 HEDIS Measures | Annual Payment per patient for <u>all</u> 3 HEDIS Measures |
|-------------------------------------|---|---|--|--|
| 90 th and above | \$22.08 | \$66.25 | \$265.00 | \$795.00 |
| 80 th – 89 th | \$18.75 | \$56.25 | \$225.00 | \$675.00 |
| 70 th – 79 th | \$15.42 | \$46.25 | \$185.00 | \$555.00 |
| 60 th – 69 th | \$12.08 | \$36.25 | \$145.00 | \$435.00 |
| 50 th – 59 th | \$8.75 | \$26.25 | \$105.00 | \$315.00 |
| 0 – 49 th | \$0 | \$0 | \$0 | \$0 |



Monthly Payments Maternity Care Practice (Tax Identification Number TIN) Percentile Score



Example 1:

A practice with 100 Health Partners (Medicaid) patients during the reporting period scoring between the 70th and 79th percentile for all three HEDIS measures will receive a monthly payment in that amount of **\$4,625** or **\$55,500** annually (or **\$555.00 per patient per year**).
Math: $100 \times \$46.25 = \$4,625 \times 12 = \$55,500$.

Example 2:

A practice with 250 patients scoring in the 90th percentile ($250 \times \$22.08 = \$5,520$ monthly for Timeliness of Prenatal Care, the 82nd percentile ($250 \times \$18.75 = \$4,687.50$ monthly) for Frequency of Prenatal Care and the 45th percentile for Postpartum Care (\$0) will receive a monthly payment in the amount of **\$10,207.50** ($\$5,520 + \$4,687.50$). The annualized payment is **\$122,490** ($\$10,207.50 \times 12$ months) or **\$489.96 per patient per year** ($\$122,490/250$ patients).

Example 3:

A practice with 325 patients scoring above the 90th percentile for **all three measures** will receive a monthly payment in the amount of **\$21,531.25** ($325 \times \66.25). The annualized payment is \$258,372 ($\$21,531 \times 12$) or **\$794.99 per patient per year** ($\$258,372/325$ patients).

Payment for Obstetrical Needs Assessment Form (ONAF) Submission

Health Partners Plans relies on your prompt submission of the Obstetrical Needs Assessment Form (ONAF) to enroll members into our Baby Partners program. We currently use the ONAF to engage the mother and assist with coordination of care in collaboration with the practitioner.

Health Partners Plans will continue to provide an **incentive in the amount of \$100 for each of the three sections of the ONAF submitted in 2016**. The forms must be completed, dated and signed by the practitioner in order to be accepted. Claims must be submitted as noted in the table below in coordination with a faxed copy of ONAF being forwarded to the Baby Partners program at 215-967-4492.

| Baby Partners Incentive | Description/ Requirement | Codes/ Modifier | Incentive | Health Partners Plans Review |
|-------------------------|--|--|-----------|---|
| First prenatal visit | Provider must complete all sections of the ONAF including smoking and depression screening and tool used. Fax within 7 days of the visit. | 0500F with HD modifier with date of first prenatal visit | \$100.00 | Health Partners Plans will review ONAF form for completion and contact the member to enroll in the Baby Partners program. |
| Ongoing prenatal care | Provider must list all of the prenatal appointments that the member completed on the ONAF. Submit after the last prenatal appointment or with postpartum visit submission. | 0500F with HD modifier with date of last prenatal visit | \$100.00 | Health Partners Plans will review to confirm that visits were documented. |
| Postpartum visit | Provider must complete "postpartum visit" section of the ONAF completely and include required delivery data. The visit must take place between 21-56 days after delivery. | 0503F with HD modifier | \$100.00 | Health Partners Plans will review that the postpartum section has been fully completed and that the visit is within the time frame specified. |

A retrospective form review will be performed and Health Partners Plans reserves the right to retract payment in part or in full if the forms are not completed and/or submitted as required or the postpartum appointment is not within the specified time frame.

The ONAF form and instructions are located at:

http://www.dhs.state.pa.us/cs/groups/webcontent/documents/form/d_003632.pdf

Payment for Obstetrical Needs Assessment Form (ONAF) Submission

Baby Partners Patient Incentives

Health Partners Plans has developed an incentive program that **rewards members who schedule needed checkups**, while staying in contact with our Baby Partners care coordinators. This initiative is also designed to improve HEDIS measures in the areas of prenatal and postpartum care and dental screenings for pregnant members.

How the patient incentive program works

We provide Baby Partners participants with a restricted gift card good for purchases at Family Dollar, Dollar General and Rite Aid. Members can earn up to \$100 that can be used to purchase items selected to meet the needs of mother and child during pregnancy and beyond. Items may include diapers, lotion, shampoo, milk, medicine, baby toys and more.

Upon completion of each of the following doctor visits, gift cards are credited with \$25:

- First Prenatal visit within the first trimester or within 42 days of enrollment in Health Partners Plans
- Completion of a dental screening visit (anytime during the pregnancy or up to 60 days post-delivery)
- Postpartum visit within 21 to 56 days after delivery

Members who complete all three steps will also receive a \$25 bonus, totaling \$100. Members who are not known to the Baby Partners staff during their pregnancy receive an outreach call after delivery and still have an opportunity to earn up to \$50 for a dental screening and postpartum visit. Each time the card is loaded, an automated phone message is sent to the member notifying them.

Baby Partners staff can be contacted for questions or referrals at 215-967-4690.

Sample Report Card

Confidential and Proprietary Information: For Health Partners Plans and OB Practice Discussion Only



Health Partners Plans

Quality Care Plus Obstetrics Medicaid Payment Plan 2016 - SAMPLE

ABC Obstetrics

Attn: John Doe

ABC Obstetrics, 123 Main St

Philadelphia, PA, 12345

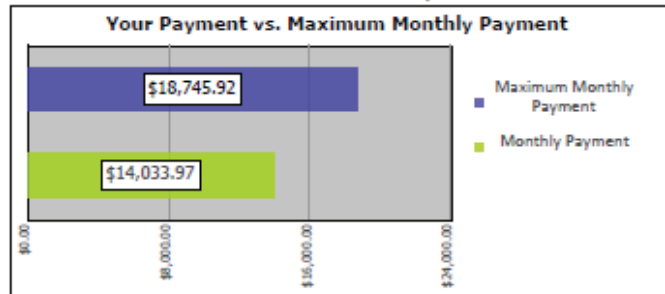
TIN #: 123456789

Total Eligible Members for
12 months ending 06/2015: 283

C-Section Rate: 28.57%

July 2014 – June 2015 Payment - SAMPLE

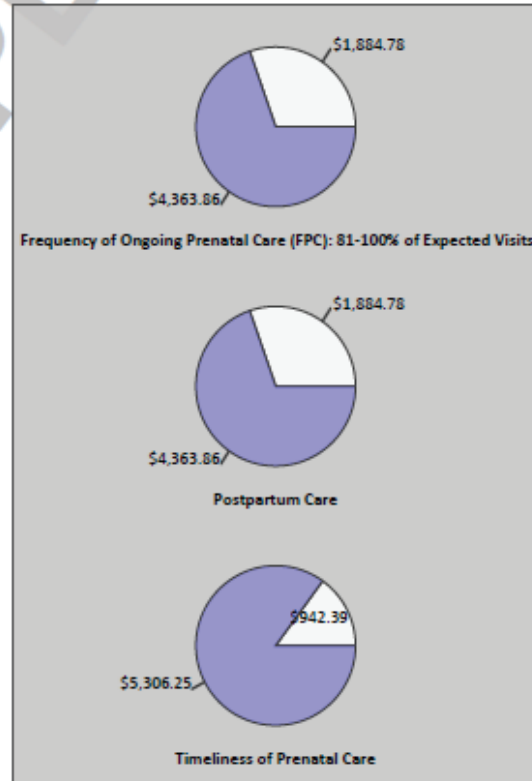
74.9% of Total Potential Payment



| Measure | Your Percentile Rank | Your Actual / Eligible Patients | Your Payment Per Eligible Patient | Your Total Monthly Payment | Maximum Potential Total Monthly Payment |
|--|----------------------|---------------------------------|-----------------------------------|----------------------------|---|
| Frequency of Ongoing Prenatal Care (FPC): 81-100% of Expected Visits | 73.9% | 196/283 | \$15.42 | \$4,363.86 | \$6,248.64 |
| Postpartum Care | 78.3% | 206/283 | \$15.42 | \$4,363.86 | \$6,248.64 |
| Timeliness of Prenatal Care | 82.6% | 252/283 | \$18.75 | \$5,306.25 | \$6,248.64 |
| Obstetrics Incentive Total | -- | -- | \$49.59 | \$14,033.97 | \$18,745.92 |

| Provider Name | Visit Count | % of Total Visits |
|-----------------|-------------|-------------------|
| Provider Name 1 | 1,282 | 50.2% |
| Provider Name 2 | 684 | 26.8% |
| Provider Name 3 | 420 | 16.5% |
| Provider Name 4 | 144 | 5.6% |
| Provider Name 5 | 14 | 0.5% |
| Provider Name 6 | 6 | 0.2% |
| Provider Name 7 | 2 | 0.1% |
| Provider Name 8 | 1 | 0.0% |

Your Payment vs. Maximum Monthly Payment by Measure



■ Monthly Payment □ Unreached Potential Payment

Questions? - Please contact your Network Account Manager: Shanika Wilson Austin at swaustin@hpplans.com or 215-967-4662

Frequently Asked Questions

1. Who is eligible to participate in the Maternity Care Incentive Plan?

To qualify for a monthly incentive, the maternity care practice must have at least 15 patients and all patients must be seen by your practice for at least 75% of each patient's prenatal visits. Also, the practice must be accepting new Health Partners (Medicaid) maternity patients.

2. How is the Maternity Care Incentive Plan payment calculated?

Your practice results are compared with other Health Partners (Medicaid) maternity care practice and a percentile score is calculated for each practice (at the TIN level). If you score above the 50th percentile for any of the three HEDIS measures during the twelve-month reporting period, you will receive monthly per patient incentive compensation (as detailed in the Table on page 2).

3. When will I receive the Maternity Care Incentive payment?

A separate incentive check will be issued monthly to your practice (as defined by Tax Identification Number or TIN) to reward your performance on the program measures.

4. How does percentile ranking work?

A percentile rank is the percentage of scores that fall at or below a given score. For example, if ABC Obstetrics ranked 14th out of 67 OB groups for the Frequency of Ongoing Prenatal Care measure, then 53 other OB groups were ranked below ABC Obstetrics. ABC's percentile rank would be calculated as: $53/67 = .791 = 79\text{th percentile}$.

5. Will I receive any reports to track my practice's incentive compensation?

You will receive a report each month with your incentive check. Reports are updated every six months and describe a twelve-month reporting period. April 2016 checks are calculated based on claims and other data submitted by your maternity care practice during the twelve months ending December 31, 2015. Reports are updated again in October for the twelve month reporting period ending June 30, 2016.

6. Who should I contact with questions about this program?

Contact your Network Account Manager. Their name and contact information appears on the report that accompanies your monthly incentive check.



Health Partners Plans

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