



The 2022 Perinatal Quality Enhancement Program

Improving quality care and health outcomes

October 2022

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AmeriHealth Caritas[™]
New Hampshire

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Dear Obstetrics Provider:

AmeriHealth Caritas New Hampshire is pleased to announce the Perinatal Quality Enhancement Program (PQEP). The PQEP is a unique reimbursement system developed for participating obstetric, midwife, and family practice providers to deliver quality, cost-effective, and timely care to our pregnant members.

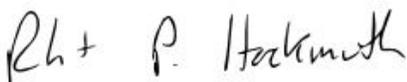
The program provides an opportunity for providers of obstetric care to receive incentive payments based upon their performance on the following maternity and perinatal quality measures:

- HEDIS® Chlamydia Screening in Women (CHL)
- HEDIS Prenatal and Postpartum Care (PPC) – Timeliness of Prenatal Care
- HEDIS Prenatal and Postpartum Care (PPC)

AmeriHealth Caritas New Hampshire is excited about our incentive program and will actively work with your practice to recognize your efforts to deliver healthy babies.

Thank you for your continued participation in our network and your commitment to our members. If you have any questions, please contact your Provider Network Management Account Executive.

Sincerely,



Robert P. Hockmuth, M.D.
Chief Medical Officer

Introduction

The PQEP is a reimbursement system developed by AmeriHealth Caritas New Hampshire for participating obstetric, midwife, and family practice providers who provide obstetric care.

The PQEP is intended to be a fair and open system that provides incentives for high-quality and cost-effective care and submission of accurate and complete health data.

The PQEP provides financial incentives over and above the provider group's base compensation for prenatal care service and postpartum care service. Incentive payments are not based on individual provider performance, but rather the performance of the overall practice in providing prenatal and postpartum care services in accordance with the quality metrics outlined in the PQEP.

Program overview

Providers must meet the minimum number of 15 deliveries in the measurement period to be eligible for the quality performance incentive. The incentive payments will be paid out semiannually, based on deliveries occurring during the measurement period. Quality performance is the determinant of the additional compensation.

The incentive payment is based on a practice's performance on the quality measures for women who have delivered. These measures are based on services rendered during the reporting period and require accurate and complete encounter and clinical reporting. Practices that have alternate incentive arrangements or risk-sharing arrangements with AmeriHealth Caritas New Hampshire are not eligible for participation in the PQEP.

Quality performance measures

The quality performance measures were selected based on national and New Hampshire focus and predicated on AmeriHealth Caritas New Hampshire's preventive health guidelines and other established clinical guidelines.

These measures are based on services rendered during the reporting period and require accurate and complete encounter reporting.

- HEDIS Chlamydia Screening in Women (CHL)
- HEDIS Prenatal and Postpartum Care (PPC) – Timeliness of Prenatal Care
- HEDIS Prenatal and Postpartum Care (PPC)

As additional meaningful measures are developed and improved, the program's quality indicators will be refined. AmeriHealth Caritas New Hampshire reserves the right to make changes to this program at any time and will provide written notification of any changes.

CPT II Care Gap Closure incentive

There will be a \$20 payment at the time of the claim submission for each CPT II code submitted that closes the gap for the specified HEDIS measure.

Quality performance measures	
<p>HEDIS Prenatal and Postpartum Care (PPC)</p> <p><i>Timeliness of Prenatal Care</i></p>	<p>Measure summary: The percentage of women who had a prenatal visit in their first trimester.</p> <p>Evidence is a claim or encounter data record of an in-person or telehealth visit with the prenatal visit date of service submitted to AmeriHealth Caritas New Hampshire.</p> <p>For your patients who have a first prenatal visit, closing the Gap in Care for Timeliness of Prenatal Care, please submit a claim with the appropriate CPT II with the date of service.</p> <p>CPT II code — Date of first prenatal visit - Incentive Amount</p> <p>0500F — Initial Prenatal Care Visit — \$20</p>
<p>HEDIS Prenatal and Postpartum Care (PPC)</p> <p><i>Timeliness of Postpartum Care</i></p>	<p>Measure summary: The percentage of women who had a postpartum visit on or between day 7 and 84 days following the live birth delivery.</p> <p>Evidence is a claim or encounter data record of an in-person or telehealth visit with the postpartum visit date of service submitted to AmeriHealth Caritas New Hampshire.</p> <p>For your patients who have a postpartum visit, close the Gap in Care for Timeliness of Postpartum Care, please submit a claim with the appropriate CPT II with the date of service</p> <p>CPT II code — Date of postpartum visit - Incentive Amount</p> <p>0503F — Postpartum Care visit - \$20</p>

Quality performance

This component of the PQEP is based on quality performance measures consistent with Healthcare Effectiveness Data and Information Set (HEDIS®) technical specifications and predicated on the AmeriHealth Caritas New Hampshire Preventive Health Guidelines and other established clinical guidelines.

These measures are assessed based on services rendered during the reporting period and require accurate and complete encounter reporting. Please note that each measure requires participating Obstetric providers to have a minimum of five members who meet HEDIS eligibility requirements detailed next to the HEDIS measure to be considered as part of the component for the PIP.

Quality performance measures	
HEDIS Chlamydia Screening in Women (CHL)	<p>Measure summary: The percentage of women ages 16 – 24 who were identified as sexually active and who had at least one test for chlamydia during a calendar year.</p> <p>Evidence is a lab claim or encounter data of chlamydia urine screen submitted to AmeriHealth Caritas New Hampshire.</p>
HEDIS Prenatal and Postpartum Care (PPC) <i>Timeliness of Prenatal Care</i>	<p>Measure summary: See CPT II Care Gap Closure incentive above.</p>
HEDIS Prenatal and Postpartum Care (PPC) <i>Timeliness of Postpartum Care</i>	<p>Measure summary: See CPT II Care Gap Closure incentive above.</p>

Practice score calculation

A rate will be calculated for each of the metrics above for each practice participating in the PQEP. This rate is calculated by dividing the number of members who received the above described services (numerator) by the number of members eligible to receive the services (denominator). This rate will then be compared to the same rates calculated for all other eligible practices to determine the practice's peer percentile rank. The practice's score for the quality component of the program will be the average of the peer percentile ranks of all measures for which the practice's panel met minimum denominator criteria.

The practice score (average peer percentile rank) will be used to determine the PMPM earned for the quality component. The minimum percentile rank is at 50th percentile to earn. Payment for the quality component will be paid at the PMPM rate for members attributed during each month of the settlement period. See the chart below.

Enrollment	Claims paid through	Payment date
October 8, 2022 – June 30, 2023	June 30, 2023	December 2023
October 8, 2022 – October 7, 2023	March 31, 2024	June 2024

Important notes and conditions

- The PQEP may be further revised, enhanced, or discontinued. AmeriHealth Caritas New Hampshire reserves the right to modify the program at any time and will provide written notification of any changes.
- Annually, the sum of the incentive payments for the program will not exceed 33% of the total compensation for medical and administrative services. Only capitation and fee-for-service payments are considered part of total compensation for medical and administrative services.
- Quality performance measures are subject to change at any time upon written notification. AmeriHealth Caritas New Hampshire will continuously improve and enhance its quality management and quality assessment systems. As a result, new quality variables will be added periodically, and criteria for existing quality variables will be modified.
- For computational and administrative ease, no retroactive adjustments will be made to incentive payments.
- If you have any questions about the PQEP or your program results, please contact your Account Executive.



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