



Shore Quality Partners & AmeriHealth FAQ's

Effective 1/1/2015, AmeriHealth and Shore Quality Partners have entered into a Care Coordination Program and a Quality Incentive Plan for attributed membership.

1) What are the quality metrics SQP must meet and what is the incentive?

There are **two** categories of quality metrics:

1. Primary Care Physicians receive \$4PMPM for meeting the following metrics:

PCP Quality Measures	Performance Score Weight	<u>Benchmark</u>
Effective Transitions of Care – Percentage of Members Discharged Home from a Medical Acute Inpatient Admission Who Had an Outpatient Office Visit Within 14 Days of Discharge * Data will exclude the following services: maternity, newborn, surgery and transport accidents	25%	Better than non-SQP Primary Care Practices in Atlantic and Cape May Counties
Emergency Department Utilization – Number of ED 1,000 *Data will exclude ER admissions which resulted in an IP admission	25%	Better than non-SQP Primary Care Practices in Atlantic and Cape May Counties
Inpatient Admission Rate – Number of Inpatient Admissions / 1,000 * Data will exclude the following services: maternity, newborn, surgery and transport accidents	25%	Better than non-SQP Primary Care Practices in Atlantic and Cape May Counties
Generic Dispensing Rate *Data will include dispensing rate for attributed members only	25%	Better than non-SQP Primary Care Practices in Atlantic and Cape May Counties

2. Annual Bonus. SQP members receive a portion of the fixed incentive pool for meeting the following metrics:

Quality Measure	NCQA/NQF	<u>Performance</u>	<u>Benchmark</u>
	<u>Measure</u>	Score Weight	
	Abbreviation (ID)		
Breast Cancer Screening – Percentage of women 50-	BCS (2703)	20%	69% or
74 years of age who had a mammogram to screen for			higher
breast cancer.			
Comprehensive Diabetes Care – Percentage of	CDC (2707)	20%	52% or
members 18–75 years of age with diabetes (type 1 and			higher
type 2) who had HbA1C < 8.0%.			
Appropriate Prevention / Management of	NQF 0546	20%	85% or
Nephropathy – Percentage of members aged 18 years			higher
or older with Type I or II diabetes who were dispensed			
either an angiotensin covering enzyme inhibitor (ACE-			
I) or an angiotensin receptor blocker (ARB).			

Use of Appropriate Medications for People with Asthma - Percentage of members 5-64 years of age during the measurement year who were identified as having moderate to severe persistent asthma and who were appropriately prescribed either an inhaled steroid; inhaled long-acting beta agonist; leukotriene inhibitor; or theophylline.	NQF 0036	20%	83% or higher
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis – Percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription	NQF 0058	20%	23% or higher

a) What If SQP meets one but not all of the annual bonus quality metrics?

Then SQP gets partial credit. Each metric is worth 20% of the fixed amount. Each metric must have a minimum of 25 cases to be considered.

- b) What if SQP does not meet any of the annual bonus quality metrics?
 - Then SQP receives no annual bonus.
- c) What if an individual SQP provider meets the metrics but the group does not?

The individual provider receives no bonus...it is only the SQP overall score that qualifies for the annual bonus

2) What are the requirements to receive the \$4PMPM payment monthly?

The requirements to receive the \$4PMPM payment are you must be a Primary Care Physician who is contracted with AmeriHealth, a member of SQP and meet the 4 quality metrics referenced in question

- a) How long are these rates and contract effective?
 - Through December 2015, then there will be a new expanded agreement with more covered lives
- b) When should SQP PCPs expect to receive care management checks?

PCP's will receive these checks monthly, around 2 weeks after the end of the month.

3) Which AmeriHealth patients are covered under this \$4PMPM fee and will I get a list of those members periodically?

The patients covered under this deal are all attributed AmeriHealth members based on NPI. Yes. SQP will provide you with a list on a monthly basis.

4) What determines an attributed patient?

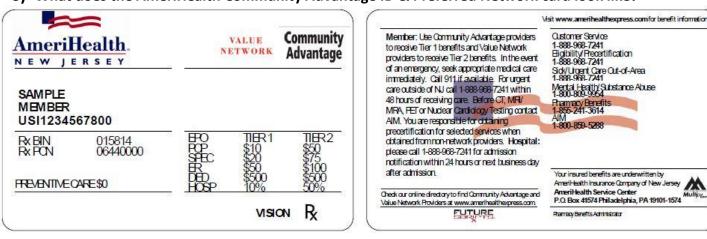
An attributed patient is determined by 2 consecutive PCP visits (based on NPI)

5) How does this arrangement affect my specialist referral choices?

Community Advantage Plan: If the patient has the Community Advantage Product, they have a strong economic incentive to stay in the AmeriHealth value network, which includes Shore, Cooper, Cape Regional and affiliated AmeriHealth value network specialists. A list is available on the AmeriHealth website. http://www.amerihealth.com/find a provider/

Value Network: If the patient has the Regional Preferred Network they can use any contracted AmeriHealth provider. A list is available on the AmeriHealth website. http://www.amerihealth.com/find a provider/

6) What does the AmeriHealth Community Advantage ID & Preferred Network card look like?



7) If I am not contracted with AmeriHealth can I participate and qualify for the bonus?

No, you must be contracted with AmeriHealth to qualify for any bonus payments. If you are contracted with AmeriHealth but do not wish to participate with the SQP/AmeriHealth contract, then you must resign with SQP. This arrangement is upside only and does not affect your underlying agreement with AmeriHealth.

8) What does my office staff need to do differently for AmeriHealth patients?

Your staff must be aware of the plan and make sure the patient gets to the correct referral sources (see question 5)