



Maternity Quality Care Plus

An Incentive Program for Maternity Care Practitioners | 2024 Edition



Jefferson Health Plans appreciates the invaluable role that maternity care practitioners, including obstetricians (OB-GYNs), midwives, certified registered nurse practitioners (CRNPs) and primary care physicians (PCPs), play in improving birth outcomes.

Thank you for providing accessible, effective and efficient care to our members.

Our Maternity Quality Care Plus (MQCP) incentive program is designed to recognize and reward performance throughout the year. This manual explains the 2024 MQCP program and highlights what you need to know to maximize your incentive payments.

Jefferson Health Plans is the marketing name for Health Partners Plans, Inc., and includes the following lines of business: Jefferson Health Plans (Individual and Family Plans); Jefferson Health Plans (Medicare); Health Partners (Medicaid); and KidzPartners (CHIP). If information in a communication pertains to a specific line of business, Jefferson Health Plans will specify within the content.

This is a confidential and proprietary document for discussion solely between Jefferson Health Plans and participating maternity care practitioners in serving our Health Partners (Medicaid) members.



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What is the MQCP Program?

Maternity Quality Care Plus (MQCP) is an incentive program designed to recognize and reward the quality performance of maternity care practices serving Health Partners (Medicaid) members. The MQCP incentive program was implemented in 2016. This program incentivizes performance related to the measures under the Healthcare Effectiveness Data and Information Set (HEDIS), and timely prenatal and postpartum care. Practices must meet program requirements in order to participate.

MQCP Measures

There are **two** rewards criteria that are drawn from HEDIS measures:

1. Timeliness of first prenatal visit:

The percentage of deliveries that received a prenatal care visit as a Health Partners member either in the first trimester or within 42 days of enrollment in our health plan. Providers will have the opportunity to earn a bonus payment for hitting Tier 1 and Tier 2 on this measure in 2024 for their African-American population.

2. Postpartum care:

The percentage of Health Partners members that had a postpartum visit between seven and 84 days after delivery. Providers will have the opportunity to earn a bonus payment for hitting Tier 1 and Tier 2 on this measure in 2024 for their African American population.



Program Requirements

To qualify for a monthly incentive, the maternity care practice must have at least 20 deliveries in the reporting period and all patients must be seen by the practice for at least 75 percent of each patient's prenatal visits. Any licensed provider who meets the criteria (nurse midwives, OB-GYNs, CRNPs, PCPs) is eligible to participate. The practice must also accept new Health Partners maternity patients.

We will continue to offer a bonus payment for meeting Tier 1 and 2 on the following disparity measures for African American members:

- Timeliness of Prenatal Care
- Postpartum Care

This is in addition to the payments received for measures covering the entire population.



Monthly Payments to Maternity Care Practice (TIN Level)

Measurement Period and Reporting

Measurement performance determines a practice’s monthly per-delivery rewards:

April 2024 recalculation:

Measurement period from January 1, 2023 to December 31, 2023

April 2025 recalculation:

Measurement period from January 1, 2024 to December 31, 2024

April 2024 recalculation will impact payments from May 2024 – April 2025.

Calculation Methodology

Incentive payments are based on how well your practice meets predefined benchmarks. These benchmarks are set by industry standards (e.g., NCQA HEDIS results) and have been specifically calibrated to reflect the historical performance and averages of our MQCP-eligible practices.

There are two benchmark tiers: Good Performers (Tier 1) and Highest Achievers (Tier 2). The exact rates needed to reach each tier are detailed in the table below. There is no limit to the number of practices that can earn the maximum reward.

Upon notification of termination of your Participating Agreement with us, participation in the MQCP program and payments made to you in the program will end 90 days prior to the termination date.

Benchmarks for January 1 through December 31, 2024

Prenatal Care in the First Trimester

This measure looks at the percentage of deliveries that received a prenatal care visit in the first trimester or within 42 days of enrollment in Health Partners.

Tier Category	2023 Benchmark	2023 PMPM	2024 Benchmark	2024 PMPM
Tier 1	89.00%	\$15	88.00%	\$15
Tier 2	92.00%	\$30	92.00%	\$25

Postpartum Care

This measure looks at the percentage of deliveries that had a postpartum visit on or between seven and 84 days after delivery.

Tier Category	2023 Benchmark	2023 PMPM	2024 Benchmark	2024 PMPM
Tier 1	80.00%	\$15	80.00%	\$15
Tier 2	90.00%	\$30	85.00%	\$25

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NEW in 2024: Improvement Incentive

A new improvement incentive will be offered to practices that achieve a 5% improvement compared to their own baseline rate (MY 2023) for both the Timeliness of Prenatal Care and Postpartum Care measures. Practices are eligible to earn a \$5 per member per month (PMPM) incentive for either or both measures.

Please note: practices must have qualified for MQCP during the previous measurement period (MY 2023) to be eligible for the improvement incentive.

Improvement Rate	PMPM
Less than 5% over baseline in both measures	\$0
5% improvement over baseline in one measure	\$5
5% improvement over baseline in both measures	\$10

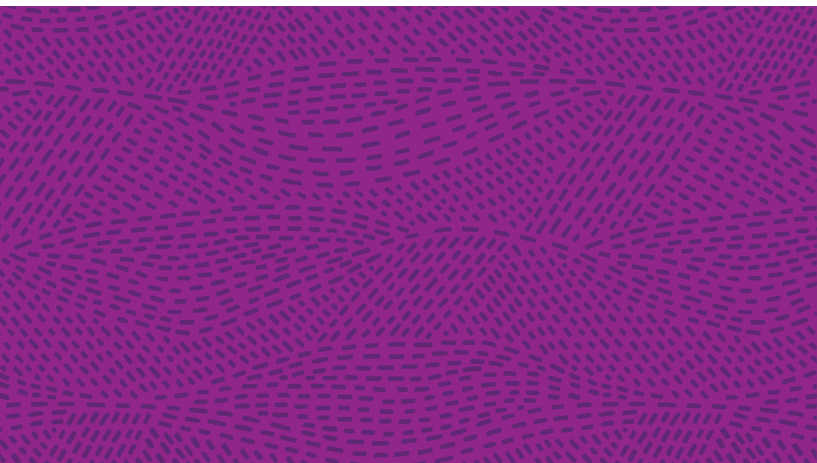
Health Equity Bonus

We will continue to offer a bonus payment for meeting Tier 1 and 2 on the following disparity measures for African American members: Timeliness of Prenatal Care and Postpartum Care. This is in addition to the payments received for measures covering the entire population.

Health Equity Bonus	2024 Benchmarks		2024 PMPM	
	Tier 1	Tier 2	Tier 1	Tier 2
Prenatal	88.00%	92.00%	\$5.00	\$10.00
Postpartum	80.00%	85.00%	\$5.00	\$10.00

By participating in the MQCP program, provider organizations agree that 80% of the incentive payment will be dispersed to the provider and/or care team that completed the MQCP requirements and/or care for the members and no more than 20% of those funds will be used for general administrative purposes, per DHS Exhibit B(3), Section III, D.

Please note: In alignment with the HEDIS calculation methodology, performance rates are not rounded up for any performance measures.



MQCP Monitoring Measures

Social Determinants of Health

Coding for Social Determinants of Health (SDoH) at least once during the member's pregnancy will continue to be included as a monitoring metric. Social determinants of health are the conditions in which people are born, grow, work, live and age.

The SDoH monitoring measure is included in the MQCP report cards for informational purposes only. At the end of the current measurement period, we will evaluate if we will include SDoH as a tracking measure that impacts MQCP incentives in future measurement periods.

In addition to claims, we use data from the ONAF under the Social, Economic & Lifestyle section for monitoring purposes.

1. If the SDoH assessment is completed and positive (barriers identified), submit HCPCS Code **G9919** and the appropriate SDoH Diagnosis Code(s) listed below.
2. If the SDoH assessment is completed and negative (no barriers identified), submit HCPCS Code **G9920**.

Problems related to education and literacy (Z55)	
Z55.0	Illiteracy and low-level literacy
Z55.1	Schooling unavailable and unattainable
Z55.2	Failed school examinations
Z55.3	Underachievement in school
Z55.4	Educational maladjustment and discord with teachers and classmates
Z55.5	Less than a high school diploma
Z55.8	Other problems related to education and literacy
Z55.9	Problems related to education and literacy, unspecified

Problems related to employment and unemployment (Z56)	
Z56.0	Unemployment, unspecified
Z56.1	Change of job
Z56.2	Threat of job loss
Z56.3	Stressful work schedule
Z56.4	Discord with boss and workmates
Z56.5	Uncongenial work environment
Z56.6	Other physical and mental strain related to work
Z56.9	Unspecified problems related to employment
Other problems related to employment (Z56.8)	
Z56.81	Sexual harassment on the job
Z56.82	Military deployment status
Z56.89	Other problems related to employment

Occupational exposure to risk factors (Z57)	
Z57.0	Occupational exposure to noise
Z57.1	Occupational exposure to radiation
Z57.2	Occupational exposure to dust
Z57.4	Occupational exposure to toxic agents in agriculture
Z57.5	Occupational exposure to toxic agents in other industries
Z57.6	Occupational exposure to extreme temperature
Z57.7	Occupational exposure to vibration
Z57.8	Occupational exposure to other risk factors
Z57.9	Occupational exposure to unspecified risk factor
Occupational exposure to other air contaminants (Z57.3)	
Z57.31	Occupational exposure to environmental tobacco smoke
Z57.39	Occupational exposure to other air contaminants

Problems related to physical environment (Z58)	
Z58.6	Inadequate drinking-water supply

Problems related to housing and economic circumstances (Z59)	
Z59.00	Homelessness unspecified
Z59.01	Sheltered homelessness
Z59.02	Unsheltered homelessness
Z59.0	Homelessness
Z59.1	Inadequate housing
Z59.2	Discord with neighbors, lodgers and landlord
Z59.3	Problems related to living in residential institution
Z59.4	Lack of adequate food
Z59.41	Food insecurity
Z59.48	Other specific lack of adequate food
Z59.5	Extreme poverty (100% FPL or below)
Z59.6	Low income (200% FPL or below)
Z59.7	Insufficient social insurance and welfare support
Z59.9	Problem related to housing and economic circumstances, unspecified
Other problems related to housing and economic circumstances (Z59.8)	
Z59.82	Transportation insecurity
Z59.86	Financial insecurity
Z59.87	Material hardship
Z59.89	Other problems related to housing and economic circumstances (billable)
Housing instability, housed (Z59.81)	
Z59.811	Housing instability, housed with risk of homelessness
Z59.812	Housing instability, housed, homelessness in past 12 months
Z59.819	Housing instability, housed unspecified

Problems related to social environment (Z60)	
Z60.0	Problems of adjustment to life-cycle transitions
Z60.2	Problems related to living alone
Z60.3	Acculturation difficulty
Z60.4	Social exclusion and rejection
Z60.5	Target of (perceived) adverse discrimination and persecution
Z60.8	Other problems related to social environment
Z60.9	Problem related to social environment, unspecified

Problems related to upbringing (Z62)	
Z62.0	Inadequate parental supervision and control
Z62.1	Parental overprotection
Z62.3	Hostility toward and scapegoating of child
Z62.6	Inappropriate (excessive) parental pressure
Z62.9	Problem related to upbringing, unspecified
Upbringing away from parents (Z62.2)	
Z62.21	Child in welfare custody
Z62.22	Institutional upbringing
Z62.23	Child in custody of non-parental relative
Z62.24	Child in custody of no-relative guardian
Z62.29	Other upbringing away from parents
Other specified problems related to upbringing (Z62.8) & Personal history of abuse in childhood (Z62.81)	
Z62.810	Personal history of physical and sexual abuse in childhood
Z62.811	Personal history of psychological abuse in childhood
Z62.812	Personal history of neglect in childhood
Z62.813	Personal history of forced labor or sexual exploitation in childhood
Z62.819	Personal history of unspecified abuse in childhood
Parent-child conflict (Z62.82)	
Z62.820	Parent-biological child conflict
Z62.821	Parent-adopted child conflict
Z62.822	Parent-foster child conflict
Z62.823	Parent-step child conflict
Non-parental relative or guardian-child conflict (Z62.83)	
Z62.831	Non-parental relative-child conflict
Z62.832	Non-relative guardian-child conflict
Z62.833	Group home staff-child conflict
Other specified problems related to upbringing (Z62.89)	
Z62.890	Parent-child estrangement not elsewhere classified
Z62.891	Sibling rivalry
Z62.892	Runaway (from current living environment)
Z62.898	Other specified problems related to upbringing

Other problems related to primary support group, including family circumstances (Z63)	
Z63.0	Problems in relationship with spouse or partner
Z63.1	Problems in relationship with in-laws
Z63.4	Disappearance and death of family member
Z63.5	Disruption of family by separation and divorce
Z63.6	Dependent relative needing care at home
Z63.8	Other specified problems related to primary support group
Z63.9	Problem related to primary support group, unspecified
Absence of family member (Z63.3)	
Z63.31	Absence of family member due to military deployment
Z63.32	Other absence of family member
Other stressful life events affecting family & household (Z63.7)	
Z63.71	Stress on family due to return of family member from military deployment
Z63.72	Alcoholism and drug addiction in family
Z63.79	Other stressful life events affecting family and household

Problems related to certain psychosocial circumstances (Z64)	
Z64.0	Problems related to unwanted pregnancy
Z64.1	Problems related to multiparity
Z64.4	Discord with counselors

Problems related to other psychosocial circumstances (Z65)	
Z65.0	Conviction in civil and criminal proceedings without imprisonment
Z65.1	Imprisonment and other incarceration
Z65.2	Problems related to release from prison
Z65.3	Problems related to other legal circumstances
Z65.4	Victim of crime and terrorism
Z65.5	Exposure to disaster, war and other hostilities
Z65.8	Other specified problems related to psychosocial circumstances

Problems related to life management difficulty (Z73)	
Z73.3	Stress not elsewhere classified
Z91.120	Patient's intentional underdosing of medication regimen due to financial hardship

Personal history of psychological trauma, not elsewhere classified (Z91.4)	
Z91.42	Personal history of forced labor or sexual exploitation
Personal history of adult abuse (Z91.41)	
Z91.410	Personal history of adult physical and sexual abuse
Z91.411	Personal history of adult psychological abuse
Z91.412	Personal history of adult neglect

Encounter for screening, unspecified	
Z13.9	Encounter for screening, unspecified



Frequently Asked Questions

Where can I learn more about the ONAF program?

Visit the “Tools and Resources” page of our website at hplans.com/providers/resources to learn more about the ONAF forms and submission process. Select “Form and Supply Requests” and choose “Perinatal Assessment Forms” for more information and to download a user guide for the online Optum tool. You can also call Optum’s toll-free customer service support number at **1-800-765-6808**.

Who should I contact with questions about the ONAF program?

Contact your Network Market Manager within our plan. His or her name and contact information appear on the report that accompanies your monthly incentive check.

Can I complete prenatal or postpartum visits via telehealth?

Yes, both prenatal and postpartum visits can be completed via telehealth. Prenatal visits must include a pregnancy diagnosis and need to occur in the first trimester or within 42 days of enrollment with us. One of the following provider types can complete the visit: OB/GYN, midwives, PCP, CRNP or a PA. Postpartum visits can also be completed within 7-84 days of delivery via telehealth. There is no provider type requirement for claim submission. Telehealth visits must be submitted with a 95 or GT modifier.

How is the maternity care incentive plan payment calculated?

The incentive compensation is based on how well your practice meets predefined benchmarks on two measures. There are two benchmark tiers: Good Performers (Tier 1) and Highest Achievers (Tier 2). All practices are eligible for the maximum incentive if they meet the highest performance benchmarks.

What is the lag time on results being included in our MQCP scores?

MQCP scores are updated annually. There will be one recalculation cycle in April 2024. The April 2024 recalculation will include the measurement period from January 1, 2023 through December 31, 2023, that will impact the payment period May 2024 to April 2025. Since most of the measures depend on claims data, the measure calculations will incorporate any data received by February 15 for the April calculations.

What should I do if I believe that my scores are incorrect?

Please contact your Provider Relations Representative as soon as you identify potential incorrect scores and/or payments. All appeals must be made in writing and submitted no later than 90 days after MQCP scores are released. Appeals will only be considered in the event of errors made by Jefferson Health Plans that are beyond the providers' control or previously communicated technical issues.

MQCP Quick Reference Coding Sheet

Measure Name	Timeliness of First Prenatal Visit		
Measure Goal/Description	Prenatal intake visit in the first trimester or within 42 days of enrollment with us. Visits occurring prior to the member's enrollment with the plan also count if they occurred within the first trimester.		
What are the inclusion criteria?	Female Medicaid patients who are continuously enrolled 43 days before delivery through 56 days after delivering a live birth.		
Codes for compliance	Initial Prenatal Visit	CPT:	99201–99205, 99211–99215, 99241–99245, 99483, 99500, 0500F, 0501F, 0502F
		HCPS:	T1015, H1000, H1001, H1002, H1003, H1004, G0463
		ICD-10 Diagnosis	Any pregnancy diagnosis code. Examples: Z34.00–Z34.03, Z34.80–Z34.83, Z34.90–Z34.93, Z36

Measure Name	Postpartum Care Visit		
Measure Goal/Description	Postpartum visit between seven and 84 days after delivery.		
What are the inclusion criteria?	Female Medicaid patients who are continuously enrolled 43 days before delivery through 84 days after delivering a live birth.		
Codes for compliance	Postpartum Visit	CPT:	0503F, 59430, 99501, 57170, 58300
		HCPS:	G0101
		ICD-10 Diagnosis	Z01.411, Z01.419, Z01.42, Z30.430, Z39.1, Z39.2

ONAF Reimbursement Program

Effective for Calendar Year 2023, ONAF was removed from MQCP as a program measure. In the new ONAF Program, providers will be eligible for a maximum of \$200 total incentive for submission of one prenatal and one postpartum ONAF form. All ONAFs must be submitted electronically via Optum. Providers will receive payments quarterly.

Please reach out to your Network Market Manager or contact our Provider Services Helpline at **1-888-991-9023** with any questions.

Maternity Benefits Program

Encouraging members to take an active role in managing their own health through additional benefits and incentive programs are an effective way to encourage healthy lifestyles to our members. Health Partners members are automatically enrolled in our benefit and reward programs; however, they must register through our online member portal, (www.HPPRewards.net) to view and request earned gift cards.

Baby Bundle

These benefits will be provided as a prepaid gift card for \$25 and will be applied each time a visit/screening listed below is completed, which can be used as a discount for items such as food resources, diapers and healthy products to care for themselves and the baby.

- 1st prenatal care visit as a member within the first trimester or within 42 days of enrollment.
- Postpartum care visit within 7-84 days after delivery.
- Well child visit within 30 days of baby's date of birth.
- Lead screening is completed once between 9-12 months.

Dental Rewards

Oral health is an important part of general health and should be maintained even during pregnancy. Routine dental treatment such as radiographs, restorations, extractions, and preventive services have been established as safe throughout all stages of pregnancy and should not be avoided. Women should be counseled and encouraged to seek regular dental visits for their own health as well as the future health of their child.

- Members can earn a \$20 prepaid gift card for completing a comprehensive or periodic dental exam while pregnant. Members are eligible to receive this incentive once per pregnancy.

Tips for Success

- Work with the member to schedule a prenatal visit as soon as possible following a positive pregnancy test.
- Encourage pregnant members to enroll in our Baby Partners program by calling **215-967-4690**.
- If you have concerns about a pregnant Health Partners member, email the Baby Partners Manager at ecohen@jeffersonhealthplans.com or call **215-967-4592**.
- When barriers of care are identified, contact the Baby Partners program for assistance at **215-967-4690** or askbabypartners@jeffersonhealthplans.com.
- Provide members with instructions about how to access after-hours care.
- Complete and submit ONAFs in a timely manner so that our Baby Partners team can reach out to provide additional prenatal and postpartum care and support.

Jefferson Health Plans
1-888-991-9023 (Provider Services Helpline)
JeffersonHealthPlans.com

