ProviderBulletin 2



2015 Texas Pay for Quality Provider Incentive Plan

Through our Pay for Quality (P4Q) program, we reward you for helping us meet HEDIS® quality measure standards. The goal of our program is to target Medicaid and CHIP members who need one or more HEDIS-measured procedures or visits completed during the 2015 calendar year. Program objectives are to improve targeted clinical quality results, promote safe and effective patient care, and increase preventive care services for our members.

The HEDIS measures along with your potential 2015 incentives are as follows:

Product	Measure	Technical Specs	Notes	Incentive
STAR CHIP	AWC Adolescent Wellness Visits	Members ages 12-21 years as of 12/31/15, enrolled for all of 2015. Must have at least one comprehensive wellness visit with a primary care provider (PCP) or OB-GYN between 1/1/15 and 12/31/15.	Does not have to be the member's assigned PCP but must be a PCP or OB-GYN. Visit must include the following: A health and development history Physical exam Health education or anticipatory guidance	\$10
STAR CHIP	W34 Well-Child Visits Ages 3-6	Children ages 3-6 years as of 12/31/15 who have been enrolled for 2015. Must have one or more well-child visit(s) with a PCP between 1/1/15and 12/31/15 Please note: A gap in enrollment is allowed for the well-child visits per HEDIS specifications.	Does not have to be the member's assigned PCP but must be a PCP. Visit must include the following: A health and development history Physical exam Health education or anticipatory guidance	\$10
STAR	Prenatal Care	For live births occurring between 11/6/14 and 11/5/15, the mother must have had a prenatal care visit in the first trimester of pregnancy or within 42 days of enrollment with the plan.	Prenatal or Postpartum visits include visits with physician assistants, nurse practitioners, midwives and registered nurses if a physician co-signature is present, if required by state law.	\$20
STAR	Postpartum Care	For live births occurring between 11/6/14and 11/5/15, the mother must have had a postpartum visit on or between 21 and 56 days after delivery.	For members who have a cesarean section, the postoperative visit in the first two weeks does not fulfill the requirements for a postpartum visit. The visit must occur within 21-56 days of delivery, but Amerigroup will reimburse for up to two postpartum visits. Postpartum visit to an OB/GYN practitioner or midwife, family practitioner or other PCP on or between 21 and 56 days after delivery	\$20
STAR+PLUS	HbA1c Test	Members ages 18-75 years who as of 12/31/15 were enrolled for all of 2015 and who have a diagnosis of diabetes (type 1 or type 2) and who received an HbA1c test during 2015.	This incentive will be paid to the provider regardless of whether or not the member's HbA1c is less than 8.	\$10

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.

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STAR+PLUS	HbA1c < 8%	Members ages 18-75 years who as of 12/31/15 were enrolled for all of 2015 and who have a diagnosis of diabetes (type 1 or type 2). For compliance, member must have at least one hemoglobin A1c (HbA1c) test between 1/1/15 and 12/31/15, and for control the result of the most recent test (closest to 12/31/15) must be less than 8%.	A member who does not have at least one HbA1c test during 2015 is presumed to have a level that is not controlled. If the last test of the year is greater than 8%, or the result is not available, the member is not compliant with the measure.	\$25
STAR+PLUS	AMM Acute Antidepressant Medication Management	Members 18 years of age or older with a diagnosis of major depression who were treated with antidepressant medication and who remained on an antidepressant medication for at least 84 days (12 weeks).	Intake period begins 5/1/14 and ends 4/30/15. Members must be continuously enrolled from 105 days prior to the first prescription to 231 days after the first prescription.	\$25
STAR+PLUS	AMM Continuous Antidepressant Medication Management	Members 18 years of age or older with a diagnosis of major depression who were treated with antidepressant medication and who remained on an antidepressant medication for at least 180 days (6 months).	Intake period begins 5/1/14 and ends 4/30/15 Members must be continuously enrolled from 105 days prior to the first prescription to 231 days after the first prescription.	\$20

When can I expect to receive my incentive payments?

There will be a total of three incentive payments for 2015. The first payment is scheduled to pay in July 2015 and the final payment will be scheduled for May 2016.

How can I expect to receive my incentive payment?

If you are currently enrolled in electronic funds transfer (EFT), you will receive your payment via EFT. If you are not currently enrolled in EFT and receive live checks, you will receive this payment via USPS.

If I am not the member's PCP, can I still receive the incentive?

Incentives will be paid to the provider rendering services and not necessarily the PCP of record.

How will Amerigroup know if I provided one of the services above?

Incentives will be determined based on claims data received. It is imperative that you bill using the appropriate CPT/HEDIS-compliant code in order to ensure an incentive payment.

Is it possible to be incentivized for the HbA1c test more than once a year?

The \$10 incentive is paid when you order the lab and is not based on whether or not the member's HbA1c is less than 8. However, if the member's results are less than 8, you are also eligible to receive an additional \$25 incentive. We encourage you to complete this test as early in the year as possible. This incentive can be paid once per quarter.

Note-if you are a provider whose office processes labs in-house you will need to reach out to your local Provider Relations Representative for details on how to qualify for this incentive.

Also, if this test was performed and it continues to appear on your Missed Opportunity Report as incomplete, you should reach out to your local Provider Relations Representative.

How does this information feed into the monthly Missed Opportunity Reports I am receiving?

Our incentive plan and monthly Missed Opportunity Reports are directly related. The incentive is only payable for those members who appear on the report and receive the specific services identified in the report.