

## Section 11: Access to Care (pediatric practices)

The Access to Care program is designed to reduce the volume of patients visiting Urgent Care Centers/Emergency Departments (ED) for services that you as their pediatrician already provide. The program consists of one incentive:

- Potentially avoidable ED visits and urgent care utilization

### Additional practice and member eligibility requirements

In addition to the core requirements, the following apply to this incentive:

- Practices must have an average panel size of 200 commercial HMO/POS/PPO and National BlueCard® Commercial PPO members for the measurement year.
- Practices who have an eligible vaccination population of at least 20 members and a vaccination rate below 15 percent for that population will be measured and scored on the incentive, but the practice will be **excluded** from payment.

### How do we calculate your score and payments?

A provider's performance in this incentive is calculated by combining potentially avoidable ED visits and urgent care events and computing them as a risk-adjusted\* rate per 100 eligible members to determine a practice's performance in this measure. That rate per 100 will then be compared and percentile-ranked among the pediatric practices. Note: ED visits that result in an admission or where a minor or ambulatory surgical procedure was required will be excluded.

*\*Risk-adjustment is performed using Verisk DxCG Risk Scores. The most recent risk scores of the measurement year for each practice's eligible member is taken, and a mean risk score is calculated based on that membership. These mean risk scores are normalized against a practice's specialty group peers who are also participating in QIPS. A practice's avoidable ED plus urgent care utilization rate is then adjusted according to its normalized mean risk score. Practices with a "higher risk" membership relative to their peers' memberships will see a diminishing effect on their utilization, while practices with a "lower risk" membership relative to their peers' memberships will see an inflationary effect on their utilization.*

The chart below illustrates the Access to Care payment rates at a tier level.

Primary Care Practice Percentile Rank	Commercial HMO/POS/PPO PAMPY/PMPY
Tier 1 (95 – 100%)	\$36.00
Tier 2 (85 – 94.99%)	\$19.20
Tier 3 (75 – 84.99%)	\$12.00
Tier 4 (50 – 74.99%)	\$2.40
Tier 5 (<50%)	\$0.00