

## Section 9: The QPM score program (pediatric practices)

The Quality Performance Measure (QPM) score program is a target-based system that rewards a qualifying pediatric practice for closing care gaps and meeting specific target-based thresholds among each of the quality measures in the program.

### What are we evaluating?

The quality measures for the QPM score program are based on the Healthcare Effectiveness Data and Information Set (HEDIS®)\*, a well-established and tested set of standard measures, and other established guidelines. These measures are based on services provided during the reporting period (January through December of the measurement year, unless otherwise noted)

You can earn incentives on the following quality measures:

- Well-Visit Composite:
  - [Well-child visits in the first 30 months of life](#)
  - [Child and adolescent well-care visits](#)
- Vaccination Composite:
  - [Childhood immunizations:](#)
    - DTaP
    - IPV
    - HIB
    - MMR
    - VZV
    - PCV
    - Flu
    - Rotavirus
  - [Adolescent immunizations:](#)
    - HPV
    - Tdap
    - Meningococcal

*\*Members' benefits vary based on product line, group, or benefit contract. Preventive health services benefits coverage for members for most of the quality measures may be more frequent than HEDIS measurements. Individual member benefits should be verified.*

### How do we calculate your scores?

For each quality composite, a practice is placed in a band by calculating a percentage using the total number of members who received the services (numerator) and dividing by the total number of members who were eligible to receive the services (denominator).

### How are target bands determined?

The Well-Visit Composite consists of well-child visits in the first 30 months of life as well as child and adolescent well-care visits. The targets for this composite are established by incorporating the HEDIS benchmarks (90th, 75th, 50th, and 25th national percentiles) for each measure's constituent components into synthesized rates.

The Vaccination Composite consists of DTaP, IPV, HIB, MMR, VZV, PCV, Flu, Rotavirus, HPV, Tdap, and Meningococcal. Childhood immunizations are not measured by each individual immunization. To receive credit, a patient must receive all required immunizations based on

their age. The targets for this composite are established by evaluating the QIPS pediatric offices measurement year performance among that composite. Practices are percentile-ranked from highest to lowest, which establishes the band level targets based on an even distribution.

A practice must have a minimum of five members who are eligible to receive the service for each measure. If a member qualifies for more than one quality measure, the member is counted separately for each one.

*Note: These targets are subject to change as peer performance ratings are refreshed.*

Target Bands	Well-Visit Composite	Vaccination Composite
1	86% – 100%	70% – 100%
2	82% – 85.99%	62% – 69.99%
3	73% – 81.99%	55% – 61.99%
4	48% – 72.99%	40% – 54.99%
5	<48%	<40%

### How do we calculate your payments?

The following chart outlines QPM score program payments (based on PAMPY/PMPY applicable to HMO/POS/PPO members) and the band level achieved for each quality measure composite:

QPM Score Program Payments (Pediatric Practices)*		
Band Level achieved for each quality measure composite†	Commercial HMO/POS/PPO	
	Open office (PAMPY/PMPY)	Current patients only (PAMPY/PMPY)
Band 1	\$28.80	\$14.40
Band 2	\$19.20	\$9.60
Band 3	\$12.00	\$6.00
Band 4	\$2.40	\$1.20
Band 5	\$0.00	\$0.00
Minimum average monthly panel size	200+	

\*Frozen offices are not eligible for QPM score program payments.

†These PAMPY/PMPYs are applicable to each quality measure composite.

## Participation in the QPM feedback process

The QPM feedback process is your annual opportunity to provide information to close gaps in care that may not have been received through claims in the measurement year. Information provided that closes a care gap will be added to each measure calculation, which will be reflected in your final QPM band level.

### How to participate

In the 2nd quarter after the measurement year, the QPM Feedback application will be available in the PEAR portal. Practices will be notified when the application is available via the email address provided during the opt-in process, a PEAR Notification, and the [QIPS Resources](#) page.

Review the *QPM Feedback Application* user guide in the [PEAR Help Center](#) to get acclimated to the process. Then, log into the QPM Feedback application. There you will find the listing of members for your practice that have open care gaps. Please ensure you read the instructions *before* filling out any records. For the feedback forms to be accepted, all records that indicate a service was rendered, or an exclusion applied, must be attested to by an authorized user (i.e., physician).

### Deadline for feedback

You will have one month to fill out the forms and submit the attested records. The deadline for feedback will be announced once the application is available.

### Audit

Independence may perform audits to validate the accuracy of the information provided by participating practices. Practices may be asked to provide additional documentation from their medical records to validate information submitted. After a careful review of the information submitted, practices will then be notified of the audit results.

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