Comprehensive Maternal Care Per-Member Per-Month and Quality Incentive Payments

July 11, 2022
Per-Member Per-Month Payments (PMPMs) are payments made to Comprehensive Maternal Care entities to support CMC-specific population health activities for attributed patients.

- Payments are made quarterly for all non-excluded attributed patients.
- Payments are determined at the patient level based on the risk tier calculated for the patient.
  - Based on preliminary data, patients are expected to be nearly evenly split between risk tiers, with slightly more patients in the standard tier.
- Average PMPM payment per patient is expected to be $25
  - **Standard** pregnancy care tier: $15 PMPM
  - **Enhanced** pregnancy care tier: $40 PMPM
Quality Incentive Payments

Quality Incentive Payments are made annually to reward CMC-enrolled entities for actively participating in health disparity reduction activities.

Capped at one million dollars annually for CMC program.

Awarded after the program year.

Must pass quality metric thresholds and activity requirements to be eligible.

$8000 per point per CMC entity, up to three points, with one point each awarded for:

- Participation in Perinatal Quality Improvement Collaborative OR implementing patient safety practices or bundles;
- Integration and support of community partners; and
- Integration of information from patient feedback processes.
ODM OB/GYN Practice
☆ 352 Patients attributed Q1 2023
  ☆ 202 in Standard care tier
  ☆ 100 in Enhanced care tier
☆ If same attribution over next three quarters
☆ Adding in Quality Incentive Payments
  ☆ One point for implementing AIM bundle
  ☆ One point for integrating HUB referrals

Example Calculations:
Q1 2023 PMPM Payment:
(202 * $15) + (100 * $40) = $7030

Annual PMPMs for 2023:
($7030 * 4) = $28,120

Quality Incentive:
$8000 x 2 points = $16,000

Annual Payment for 2023
$28,120 PMPMs + $16,000 QIP = $44,120