



435 Fort Washington Avenue, Suite 1C, New York, NY, 10033
 Tel: (212) 923-0408 - Fax: (646) 657-0037 or (212) 923-4032
 www.josegoris.com

Table A – Measurement Thresholds and Awards (per qualifying patient):

(These are derived from the QARR 2010 rates published by NYSDOH in October 2011. Actual benchmarks for QCM1 2012 will be made available in October 2013.)

QCM1 Measure	2010 QARR (2010 dates of service, reported 2011) 85% Benchmark	Award if Panel Size is 250 or more	Award if Panel Size is 200-249	Award if Panel Size is 150-199
Breast Cancer Screening	71	\$115	\$86	\$58
Cervical Cancer Screening	75	\$115	\$86	\$58
Lead Screening*	94	\$115	\$86	\$58
Well Child 0-15 months (6+visits)*	61	\$259	\$194	\$130
Well Child 3-6 Yrs*	84	\$230	\$173	\$115
Adolescent Well Care 12-21 Yrs*	61	\$230	\$173	\$115
Immunization - Combo 3	81	\$460	\$345	\$230
Appropriate Med for Asthma 3+ (5-11)	81	\$250	\$188	\$125
Appropriate Med for Asthma 3+ (12-64)	80	\$250	\$188	\$125
Hypertension Control	71	\$288	\$216	\$144
Cholesterol Management in CV Disease	56	\$288	\$216	\$144
Diabetes - HbA1c Test	90	\$173	\$130	\$87
Diabetes - LDL-C Test	90	\$173	\$130	\$87
Diabetes - Dilated Eye Exam	68	\$173	\$130	\$87
Diabetes - Nephropathy Screening	86	\$173	\$130	\$87
Diabetes - Screening Composite	54	\$345	\$259	\$173

* Payment amount reduced by 50% if practice does not meet 2011 Statewide Average for Childhood immunizations.

Table B – Medicare Measurement Thresholds and Awards (per qualifying patient):

(These are derived from the 2011 HEDIS means published by NCQA in February 2012. Actual benchmarks for QCM1 2012 will be made available in 2014.)

QCM1 Measure	HEDIS Target Threshold	Award
Cholesterol Management in CV Disease	68	\$288
Colorectal Cancer Screening	71	\$288
Controlling High Blood Pressure	71	\$288
Diabetes - HbA1c Test	96	\$173
Diabetes - LDL-C Test	94	\$173
Diabetes - Dilated Eye Exam	76	\$173
Diabetes - Nephropathy Screening	94	\$173
Diabetes - Screening Composite	62	\$345
Glaucoma Screening	74	\$288
Osteoporosis Screening	25	\$288

Table C – Required Frequency of Prenatal Visits (as recommended by the American College of Obstetricians and Gynecologists and National Committee for Quality Assurance and determined by the month of pregnancy the member enrolled in Fidelis Care and the gestational age at the time of delivery.)

Month of Pregnancy Member Enrolled in the MCO	Gestational Age in Weeks at the Time of Delivery																				
	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46
9th month	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	2	3	4	5	6	7
8th month	-	-	-	-	-	-	-	-	1	1	1	2	3	4	5	6	7	8	9	10	11
7th month	-	-	-	-	1	1	1	1	2	2	3	4	5	6	7	8	9	10	11	12	13
6th month	1	1	1	1	1	1	2	2	3	3	4	5	6	7	8	9	10	11	12	13	14
5th month	1	1	1	1	2	2	3	3	4	4	5	6	7	8	9	10	11	12	13	14	15
4th month	2	2	3	3	4	4	5	5	6	6	7	8	9	10	11	12	13	14	15	16	17
3rd month	3	3	4	4	5	5	6	6	7	7	8	9	10	11	12	13	14	15	16	17	18
2nd month	4	4	5	5	6	6	7	7	8	8	9	10	11	12	13	14	15	16	17	18	19
1st month	5	5	6	6	7	7	8	8	9	9	10	11	12	13	14	15	16	17	18	19	20