



PerformPlus® True Care for Maternity Health Providers

Improving quality care and health outcomes

2026



Keystone First

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Keystone First

200 Stevens Drive
Philadelphia, PA 19113-1570

Dear Keystone First Provider:

To support your efforts in providing high-quality maternity care, the PerformPlus® True Care for Maternity Health Providers program, formerly known as our Maternity Quality Enhancement Program (MQEP), was developed as a unique compensation program that provides practices with incentives for providing timely prenatal and postpartum care. The reimbursement system for PerformPlus True Care for Maternity Health Providers program was developed for participating obstetricians, midwives, and family practice practitioners to deliver high-quality, cost-effective, and timely care to our pregnant members.

Keystone First will work with your practice so you can maximize your revenue while providing quality and cost-effective care to our members.

Thank you for your continued participation in our network and for your commitment to our members. If you have any questions, please contact your Provider Account Executive.

Sincerely,

Lily Higgins, MD, MBA, MS
Market Chief Medical Officer

Kim Beatty
Director
Provider Network Management

Introduction

The PerformPlus True Care for Maternity Health Providers program is a unique reimbursement system developed by Keystone First (the Plan) for participating obstetricians, midwives, and family practice practitioners who provide obstetric care.

The program is intended to be a fair and open system that provides incentives for high-quality and cost-effective care, and for submission of accurate and complete health data.

The program provides financial incentives over and above the provider group's base compensation for prenatal and postpartum care service. Incentive payments are not based on individual provider performance, but rather the performance of the overall practice in providing comprehensive prenatal and postpartum care services in accordance with quality metrics outlined in this PerformPlus True Care for Maternity Health Providers program manual.



Program eligibility

Practices must meet the minimum live-birth delivery criteria listed below to be eligible for program participation.

Program overview

Providers must manage a minimum of 30 deliveries for the first payment cycle and 40 deliveries for the second, third, and fourth payment cycles.

Quality performance is the determinant of the additional compensation. The incentive payment is based on the completion of the quality measures for women who have delivered and received the quality measures. These measures are based upon services rendered during the reporting period and require accurate and complete encounter and clinical reporting.

Payment will be made according to the schedule in the table below.

Payment cycle	Deliveries	Claims paid through	Payment date
1	30	June 30, 2026	September 1, 2026
2	40	September 30, 2026	December 1, 2026
3	40	December 31, 2026	March 1, 2027
4	40	March 31, 2027	June 1, 2027

Quality performance

The quality performance measures were selected based on national and state areas of focus and predicated on Keystone First's Preventive Health Guidelines and other established clinical guidelines.

These measures are based upon services rendered during the reporting period and require accurate and complete encounter reporting.

1. Prenatal Care First Trimester — Providers will receive credit for the prenatal visit if the member receives the visit in the first trimester or within 42 days of enrollment with Keystone First.

- Eligible members: No specific age.
- Continuous enrollment: 43 days prior to delivery through 60 days after delivery.
- Allowable gap: No allowable gap during the continuous enrollment period.
- Measure description: The percentage of live-birth deliveries in the measurement period that received a prenatal care visit as a member of the organization in the first trimester or within 42 days of enrollment in the Plan.

2. Postpartum Care — Providers will receive credit for the postpartum care if the identified birthing member receives the visit on or between 7 and 84 days after delivery.

- Eligible members: No specific age.
- Continuous enrollment: 43 days prior to delivery through 60 days after delivery.
- Allowable gap: No allowable gap during the continuous enrollment period.
- Anchor date: Date of delivery.
- Measure description: The percentage of live-birth deliveries in the measurement period that received a postpartum visit on or between 7 to 84 days after delivery.

Overall practice score calculation

Results will be calculated for each of the quality performance measures for each practice and then aggregated for a total score for both measures. Relative scaling at 5% intervals begins with the 65th percentile up to the 95th percentile; the aggregate score for the measures is compared to peers.

Overall practice scores will be calculated as the ratio of members who received the services as evidenced by claim and/or encounter information (numerator) to those members who were eligible to receive the services based upon the definitions (denominator). This score will then be compared to peers to determine the percentile ranking.

Health equity component

OB/GYN groups at the 75th percentile rank or higher when compared to their peers will be awarded an additional increase in their total earned per delivery payment with regard to the following measures for their Black American population: prenatal care in the first trimester and postpartum care. This component will be paid during the fourth and final cycle of the 2026 program year.

Obstetrical Needs Assessment Form (ONAF) component

OB/GYN groups will be incentivized and paid at the contracted rate for the timely and accurate electronic submission of their members' complete series of the ONAF form via the Optum OB Care website and are required to complete the following series:

- Initial:** Within seven business days of the initial prenatal visit (prenatal visit should be performed in the first trimester or within 42 days of enrollment to Plan).
- Third trimester:** Again at the 28 – 32 week visit, updating all areas as needed and adding dates of additional prenatal visits throughout pregnancy.
- Post-delivery:** The postpartum visit (within seven – 84 days of delivery) with all postpartum information and any additional visit dates as needed.

This incentive will be paid during the fourth and final cycle of the program year.

Sample scorecard

 Keystone First <small>Coverage by Vista Health Plan, an independent licensee of the Blue Cross and Blue Shield Association.</small>	PerformPlus® True Care Maternity Delivery Cycle: 10/08/2025 - 10/07/2026 Claims Paid Through: 03/31/2027 Payment Period: June 2027			
Entity MATERNITY CARE LLC				
Summary				
Qualifying Delivery Count: 611		Earned Per Delivery:		\$70.58
Total Care Management Percent Rank 76.92%		Total Incentive Earned:		\$43,124.38
Quality Performance Metrics				
Measures	Num	Denom	Rate	Quality Per Delivery Payment
Prenatal Care in First Trimester	559	611	91.49%	
Post-Partum Care	498	611	81.51%	
Total Care Management	1,057	1,222	86.50%	\$66.25
Health Equity Component				
Measures	Num	Denom	Rate	HE Per Delivery Payment
Prenatal Care in First Trimester_AA	93	102	91.18%	
Post-Partum Care_AA	82	102	80.39%	
Total Care Management_AA	175	204	85.78%	\$4.33
Group Detail				
Group ID	Group Deliveries		Group Payment	
GROUP #1	398		\$28,090.84	
GROUP #2	190		\$13,410.20	
GROUP #3	23		\$1,623.34	

Provider appeal of ranking determination

If a provider wishes to appeal his or her percentile ranking on any or all incentive components, this appeal must be in writing.

The written appeal must be addressed to the Market Chief Medical Officer of the Plan and specify the basis for the appeal.

The appeal must be submitted within 60 days of receiving the overall ranking from the Plan.

The appeal will be forwarded to the Plan's PerformPlus True Care for Maternity Health Providers Review Committee for review and determination.

If the Plan's PerformPlus True Care for Maternity Health Providers Review Committee determines that a ranking correction is warranted, an adjustment will appear on the next payment cycle following committee approval.

Important notes and conditions

1. The sum of incentive payments will not exceed 33% of the total compensation for medical and administrative services.
2. The quality performance measures are subject to change at any time upon written notification. The Plan will continuously improve and enhance its quality management and quality assessment systems. As a result, new quality variables may be periodically added, and criteria for existing quality variables may be modified.
3. For computational and administrative ease, no retroactive adjustments will be made to incentive payments.
4. Percentile rankings and scores are used solely and exclusively for the PerformPlus True Care for Maternity Health Providers program.



Keystone First

Coverage by Vista Health Plan,
an independent licensee of the Blue Cross and Blue Shield Association.

Our Mission

We help people get care, stay well,
and build healthy communities.



www.keystonefirstpa.com

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