2019 Primary Care Provider Quality Improvement Program Summary of Measures

For the tables below, please refer to these notes:

1: For most existing clinical measures, the full-point target is set at the 90th percentile performance of all Medicaid health plans. Sites have the opportunity to receive half points on measures if the 75th percentile performance is met. For all new clinical measures, the full-point target is set at the 50th percentile performance, and no partial points are available. The 2019 thresholds for the Immunizations for Adolescents Combo 2 and Childhood Immunizations Combo 3 measures have been set to the 50th percentile performance for partial points and the 75th percentile performance for full points. No points through relative improvement are available for these measures.

2: For existing clinical measures, sites can also earn partial points based on relative improvement (RI). Please note that if a provider site was not eligible for payment for a specific measure in the previous measurement year, the site is not eligible for earning points through relative improvement in the current measurement year. Relative improvement measures the percentage of the distance the provider has moved from the previous year's rate toward a goal of 100 percent. The method of calculating relative improvement is based on a *Journal of the American Medical Association* article authored by Jencks et al in 2003, and is as follows:

$$\frac{\text{(Current year performance) – (previous year performance)}}{\text{(100 – Previous year performance)}}$$

The formula is widely used by the Integrated Healthcare Association's commercial pay for performance program as well as by the Center for Medicare and Medicaid Services.

- A site's performance on a measure must meet the 50th percentile target in order to be eligible for RI points on the measure.
- A minimum of 10% RI will be needed to earn partial points.

3: Site specific and practice type risk adjusted targets will be sent to each participating site in Spring 2019.

4: All clinical measures except Colorectal Cancer Screening use as targets the performance percentiles obtained from the National Committee for Quality Assurance (NCQA) national averages for Medicaid health plans reported in 2018. The Colorectal Cancer Screening targets are based on the 75th and 90th percentile plan-wide performance from the 2018 QIP, as NCQA data for Medicaid is not available.

Core Measurement Set – Family Medicine

Measures	Targets	Points	Risk Adjusted?
CLINICAL DOMAIN (80 Points Total)			
1. Well Child Visits (3-6 yrs)	-Full Points: 83.70%[1] -Partial Points: 79.33%[1] or, if performance meets 50th (73.89%), 10% Relative Improvement[2]	10	No
2. Controlling High Blood Pressure (18-85 yrs)	-Full Points: 71.04%[1] -Partial Points: 65.78%[1] or, if performance meets 50th (58.64%), 10% Relative Improvement[2]	7.5	
3. Cervical Cancer Screening (21-65 yrs)	-Full Points: 70.68%[1] -Partial Points: 66.01%[1] or, if performance meets 50th (60.10%), 10% Relative Improvement[2]	7.5	
4. Colorectal Cancer Screening (51-75 yrs)	-Full Points: 58.69%[4] -Partial Points: 48.78%[4] or, if performance meets 50th (37.50%), 10% Relative Improvement[2]	5	
5. Diabetes Management: HbA1C good control (18-75 yrs)	-Full Points: 70.32%[1] -Partial Points: 66.91%[1] or, if performance meets 50th (61.80%), 10% Relative Improvement[2]	7.5	
6. Diabetes Management: Retinal Eye Exams (18-75 yrs)	-Full Points: 68.61%[1] -Partial Points: 64.23%[1] or, if performance meets 50th (57.88%), 10% Relative Improvement[2]	5	
7. Breast Cancer Screenings	-Full Points: 68.94%[1] -Partial Points: 64.12%[1] or, if performance meets 50th (58.04%), 10% Relative Improvement[2]	7.5	
8. Childhood Immunization Combo-3	-Full Points: 74.70%[1] -Partial Points: 70.80%[1]	10	
9. Immunizations for Adolescents	-Full Points: 37.71%[1] -Partial Points: 31.87%[1]	10	
10. Asthma Medication Ratio	-Full Points: 62.28%[1]	10	

APPROPRIATE USE OF RESOURCES (10 Points Total)			
13. Ambulatory Care-Sensitive Admissions	-Full Points: Less than or equal to 110% of target[3] -Partial Points: 111-119% of site-specific target[3]	5	Yes: By PCP/Site[3]
14. Readmission Rate	-Full Points: Less than or equal to 110% of target[3] -Partial Points: 111-119% of site-specific target[3]	5	Yes: By Practice Type[3]
ACCESS & OPERATIONS (5 Points Total)			
15. Primary Care Utilization: ED Visits and PCP Office Visits	-Full Points: At or below target for ED visits AND at or above target for PCP office visits[3] -Partial Points: At or below target for ED visits[3]	5	Yes: By plan and PCP/site[3]
PATIENT EXPERIENCE (5 Points Total)			
16. CG-CAHPS Survey for qualified sites, or Approved Provider-Developed Survey Option for all other sites	CG-CAHPS surveys will be paid based on site's Access and Communication composites according to the following targets: -Full Points: Re-survey result > PHC 50th percentile score -Partial Points: Re-survey result between PHC 25th and 50th percentile scores Access 50th Percentile: 48.22% Access 25th Percentile: 43.07% Communication 50th Percentile: 71.78% Communication 25th Percentile: 69.01%	5	No

Core Measurement Set – Internal Medicine

Measures	Targets	Points	Risk Adjusted?
CLINICAL DOMAIN (80 Points Total)			
1. Controlling High Blood Pressure (18-85 yrs)	-Full Points: 71.04%[1] -Partial Points: 65.78%[1] or, if performance meets 50th (58.64%), 10% Relative Improvement[2]	12.5	No
2. Cervical Cancer Screening (21-65 yrs)	-Full Points: 70.68%[1] -Partial Points: 66.01%[1] or, if performance meets 50th (60.10%), 10% Relative Improvement[2]	10	
3. Colorectal Cancer Screening (51-75 yrs)	-Full Points: 58.69%[4] -Partial Points: 48.78%[4] or, if performance meets 50th (37.50%), 10% Relative Improvement[2]	10	
4. Diabetes Management: HbA1C Good Control (18-75 yrs)	-Full Points: 70.32%[1] -Partial Points: 66.91%[1] or, if performance meets 50th (61.80%), 10% Relative Improvement[2]	12.5	
5. Diabetes Management: Retinal Eye Exams (18-75 yrs)	-Full Points: 68.61%[1] -Partial Points: 64.23%[1] or, if performance meets 50th (57.88%), 10% Relative Improvement[2]	10	
6. Breast Cancer Screenings	-Full Points: 68.94%[1] -Partial Points: 64.12%[1] or, if performance meets 50th (58.04%), 10% Relative Improvement[2]	12.5	
7. Asthma Medication Ratio	-Full Points: 62.28[1]	12.5	

APPROPRIATE USE OF RESOURCES (10 Points Total)			
10. Ambulatory Care-Sensitive Admissions	-Full Points: <110% of target[3] -Partial Points: 111-119% of site-specific target[3]	5	Yes: By PCP/Site[3]
11. Readmission Rate	-Full Points: <110% of target[3] -Partial Points: 111-119% of site-specific target[3]	5	Yes: By Practice Type[3]
ACCESS & OPERATIONS (5 Points Total)			
12. Primary Care Utilization: ED Visits and PCP Office Visits	-Full Points: At or below target for ED visits AND at or above target for PCP office visits[3] -Partial Points: At or below target for ED visits[3]	5	Yes: By plan and PCP/site[3]
PATIENT EXPERIENCE (5 Points Total)			
13. CAHPS Survey for qualified sites, or Survey Option for all other sites	CAHPS surveys will be paid based on site's Access and Communication composites according to the following targets: -Full Points: Re-survey result > PHC 50th percentile score -Partial Points: Re-survey result between PHC 25th and 50th percentile scores Access Median: 48.22% Access 25th Percentile: 43.07% Communication 25th Percentile: 71.78% Communication 25th Percentile: 69.01%	5	No

Core Measurement Set – Pediatric Medicine

Measures	Targets	Points	Risk Adjusted?
CLINICAL DOMAIN (90 Points Total)			
1. Nutrition Counseling (3-17 yrs)	-Full Points: 83.45%[1] -Partial Points: 77.91%[1] or, if performance meets 50th (69.57%), 10% Relative Improvement[2]	15	No
2. Physical Activity Counseling (3-17 yrs)	-Full Points: 78.35%[1] -Partial Points: 71.29%[1] or, if performance meets 50th (63.50%), 10% Relative Improvement[2]	15	
3. Well Child Visits (3-6 yrs)	-Full Points: 83.70%[1] -Partial Points: 79.33%[1] or, if performance meets 50th (73.89%), 10% Relative Improvement[2]	15	
4. Adolescent Immunization	-Full Points: 37.71[1] -Partial Points: 31.87[1]	15	
5. Childhood Immunization Combo-3	-Full Points: 74.70[1] -Partial Points: 70.80[1]	15	
6. Asthma Medication Ratio	-Full Points: 62.28[1]	15	
ACCESS & OPERATIONS (5 Points Total)			
7. Primary Care Utilization: ED Visits and PCP Office Visits	-Full Points: At or below target for ED visits AND at or above target for PCP office visits[3] -Partial Points: At or below target for ED visits[3]	5	Yes: By plan and PCP/site[3]

PATIENT EXPERIENCE (5 Points Total)			
8. CAHPS Survey for qualified sites, or Survey Option for all other sites	CAHPS surveys will be paid based on site's Access and Communication composites according to the following targets: -Full Points: Re-survey result > PHC 50th percentile score -Partial Points: Re-survey result between PHC 25th and 50th percentile scores Access 50th Percentile: 48.22% Access 25th Percentile: 43.07% Communication 50th Percentile: 71.78% Communication 25th Percentile: 69.01%	5	No

Unit of Service Measures – All Practice Types

Measure	Incentive
Advance Care Planning attestations	$5,000 for 50-99 attestations; $10,000 for 100+ attestations; in addition, $5,000 for 50-99 advance directives/POLST; $10,000 for 100+ advance directives/POLST for Medi-Cal members 18 years and older.
Access/Extended Office Hours	10% of Capitation for sites that 1) earned at least 35 points in previous QIP year and 2) are open for extended office hours as defined as eight hours beyond normal business hours per week.
PCMH Certification	$1000 yearly for achieving or maintaining PCMH accreditation
Peer-led self-management support groups (both new and existing)	$1000 per group (Maximum of ten groups per parent organization)
Alcohol Misuse Screening and Counseling	$5 per screening for screening a minimum of 10% of eligible adult members
Health Information Exchange	One time $3000 incentive for signing on with a local or regional health information exchange; Annual $1000 incentive for showing continued participation with a local or regional health information exchange. The incentive is available once per parent organization.
Initial Health Assessment	$2000 for submitting all required parts of improvement plan
Palliative Care Identification & Referral	$2000 for sharing plan for identifying and communicating with potential palliative care patient and reporting the number of referrals made. The incentive is available once per parent organization.