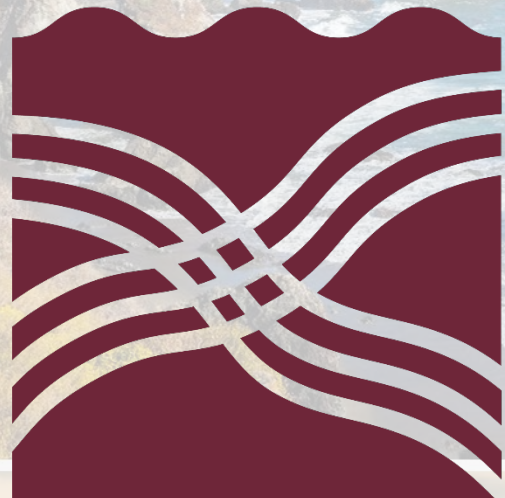


PARTNERSHIP



HEALTHPLAN  
of CALIFORNIA  
*A Public Agency*

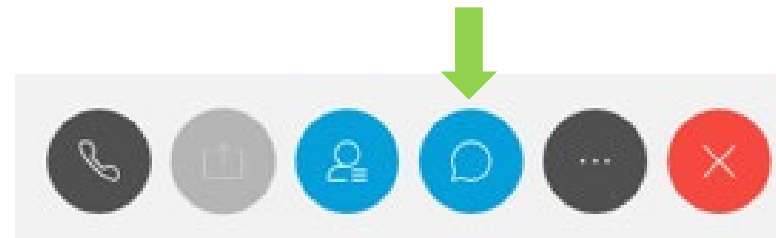
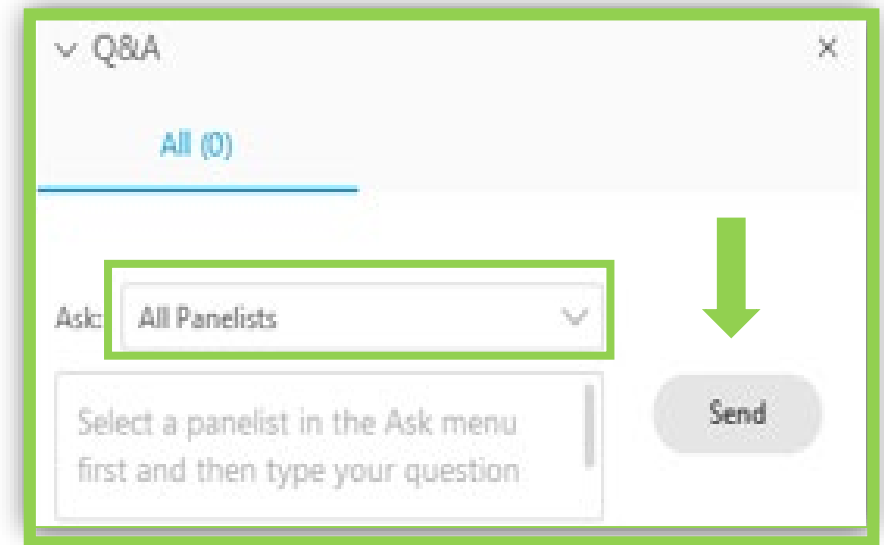


MY2024 Partnership Quality  
Dashboard (PQD) Kick-Off  
Webinar

Amber Newell & Athena Beltran-Nampraseut  
PCP QIP Program Managers  
May 8, 2024

# Webinar Instructions

- This webinar will be recorded.
- All participants have been muted to eliminate any possible noise interference/distraction.
- Time is put aside for questions at the end of the webinar.
- If you have a question, please type your question in the CHAT BOX, and address to “ALL PANELISTS.”



# Agenda

- Logging into PQD and navigation
- New 2023 features
  - Disparity Analysis Dashboard
- User guides and resources
- Discussion and Q&A



# PQD Login

## QIP - eReports

- Login to PQD through eReports
- For eReports login information, contact the eAdministrator for your site

- Home
- My QIP Scores
- QIP Measure Report
- QIP Member Report
- Member Search
- Upload QIP Data
- Weekly Count Report
- My eAdmins
- eAdmin
- Diagnosis Crosswalk
- QIP Specification Manual
- Templates
- Partnership Quality Dashboard**
- Preventive Care Reports

GROUP NAME:

Remove Impersonation

Select a PCP

Select Provider

Clear

### Core Clinical Measurement Set

Measure	QIP Score	Numerator	Denominator	25th Threshold %	25th(Target/Achieved)	50th Threshold %
Child and Adolescent Well Care 2024	14.48 %	1356	9362	NA	NA	48.07%
Breast Cancer Screening 2024	38.98 %	798	2047	NA	NA	52.20%
Cervical Cancer Screening 2024	47.24 %	4920	10415	NA	NA	57.11%
Childhood Immunization Status CIS 10 2024	13.91 %	69	496	NA	NA	30.90%
Colorectal Cancer Screening 2024	22.83 %	1700	7446	NA	NA	NA
Controlling High Blood Pressure 2024	6.11 %	93	1523	NA	NA	61.31%
Diabetes - HbA1C Good Control 2024	13.29 %	180	1354	NA	NA	52.31%
Diabetes - Retinal Eye exam 2024	31.09 %	421	1354	NA	NA	52.31%
Immunization for Adolescents 2024	16.85 %	108	641	NA	NA	34.31%
Well Child First 15 Months 2024	21.45 %	71	331	NA	NA	58.38%
Lead Screening Children 2024	76.20 %	301	395	NA	NA	62.79%

### Advanced Care Planning

# PQD Background

Partnership Quality Dashboard (PQD) is an online platform that integrates many sources of data and is designed to help prioritize, inform and evaluate quality improvement efforts.

# Home – Payout Status

View: Original | Home | QIP Stoplight | Provider | MeasurePerformance | Scorecard | DrillDown\_Clinical | Drilldown\_NonClinical | FS1 | FS2 | FS3

**Partnership HealthPlan of California**  
Quality Dashboard  
Home

- PQD is an online platform that integrates many sources of quality performance data to enable PCPs and PHC staff to prioritize, inform and evaluate quality improvement efforts.
- QIP data is updated monthly on the 10th in PQD.
- Please reach out to QIP team (QIP@partnershiphp.org) for any questions.

**Status** ESTIMATED | **Refresh Date** Mar-24

**Members** 35,732 | **Claims Timeliness** 91.66% (Good) (38,955/42,498)

**Payout Status**  
Your organization has earned **13.63%** of your Total Possible QIP \$.

**Parent Organization (PO) Executive QIP Measure Summary**

Measure	PO Score	50th Target	PO Partial Points	PO Full Points	PO QIP \$ Earned	PO Remaining QIP \$
ACS_ADMISSION	12.18	N/A	N/A	N/A	\$45,938	\$102,246
Avoidable ED/1000	20.88	N/A	N/A	N/A	\$5,438	\$202,308
Breast Cancer Screening	43.35	52.20	204	454	\$0	\$177,820
Cervical Cancer Screening	41.56	57.11	1565	2499	\$0	\$177,820
Child and Adolescent Well Care Visits	14.81	48.07	3695	5089	\$0	\$391,812
Childhood Immunization Status CIS 10	22.72	30.90	57	148	\$42,680	\$211,599

**Provider QIP PMPM, \$ Earned vs. Remaining QIP \$**

Site	PMPM	Earned	Remaining
Site #1	\$7.29	\$138,710	\$821,588
Site #2	\$6.97	\$88,411	\$707,291
Site #3	\$7.83	\$137,813	\$689,066
Site #4	\$8.21	\$58,814	\$458,752
Site #5	\$7.93	\$9,380	\$69,413
	\$4.00	\$748	\$2,320

**Total QIP \$ Earned** vs **Total Remaining QIP \$**

You have earned **13.59%** of your p  
Planwide Average to date is **21.39**  
Rank of **191** out of **250** parent org  
20" or "Bottom 20" to view unbl

**Top 20**



Site #1  
Site #2  
Site #3  
Site #4  
Site #5

# Home – Claims Timeliness



**Partnership HealthPlan of California**  
**Quality Dashboard**  
Home

- PQD is an online platform that integrates many sources of quality performance data to enable PCPs and PHC staff to prioritize, inform and evaluate quality improvement efforts.
- QIP data is updated monthly on the 10th in PQD.
- Please reach out to PQD team ([PQD@partnershiphp.org](mailto:PQD@partnershiphp.org)) for any questions.



**Status**  
ESTIMATED

**Refresh Date**  
May

**Members**  
11,484

**Claims Timeliness**  
98.53% (Excellent)  
(16,219/16,461)

**Parent Organization Name**  
Parent Organization (PO) Executive QIP Measure Summary

Measure	PO Score	50th Target	PO Partial Points	PO Full Points NNT	PO QIP \$ Earned	PO Remaining QIP \$	Bar Chart
ACS_ADMISSION	8.88	N/A	N/A	N/A	\$58,976	\$10,886	44 / 92
	64.79	64.26	3	4	\$18,521	\$65,313	64 / 86
	9.92	N/A	N/A	N/A	\$15,434	\$54,428	56 / 99
	43.79	50.95	54	96	\$0	\$83,834	35 / 91
	45.29	57.64	388	541	\$0	\$83,834	37 / 92
	24.02	48.93	890	1195	\$0	\$125,751	8 / 76
	19.72	34.79	33	49	\$0	\$83,834	18 / 72
	23.94	40.23	214	392	\$0	\$69,862	60 / 91
	51.96	59.85	49	82	\$0	\$83,834	2 / 89
	31.03	60.10	182	209	\$0	\$83,834	35 / 89
	31.03	51.09	N/A	126	\$0	\$69,862	46 / 89
	46.52	35.04	0	0	\$83,834	\$0	7 / 75
	1.99	N/A	N/A	N/A	\$69,862	\$0	54 / 99
	1.27	N/A	N/A	N/A	\$15,434	\$54,428	61 / 92
Well Child First 15 Months	22.73	55.72	30	35	\$0	\$125,751	11 / 65

**Claims Timeliness**  
98.53% (Excellent)  
(16,219/16,461)

**Timeliness Status**  
Excellent  
Threshold  
>=95% Excellent  
85-95% Good  
75-85% Fair  
<75% Poor

**Payout Status**  
Your organization has earned 20.84% of your Total Possible QIP \$.

**Total QIP \$ Earned: \$262,061**  
**Total Remaining QIP \$: \$995,449**

You have earned 20.99% of your possible points. The Planwide Average to date is 22.62% giving you an Overall Rank of 52 out of 99 parent organizations. Click "Top 20" or "Bottom 20" to view unblinded PO performance.

**Top 20**

52 / 99

**Bottom 20**

**Provider Score**

Clinic #1234

Clinic #5678

# Home – Performance Ranking

You have earned **8.14%** of your possible points. The Planwide Average to date is **15.60%** giving you an Overall Rank of **100** out of **113** parent organizations. Click "Top 20" or "Bottom 20" to view unblinded PO performance.

Top 20



Bottom 20

This chart shows your organization's relative rank in performance against other organization's in the PCP QIP network.

- Click the **Top 20** and **Bottom 20** boxes to see an un-blinded list of the top and bottom performers.
- Performance ranking compares the PCP sites member months against parent organization member months.



# Home – PO Measure Summary



Partnership HealthPlan of California  
Quality Dashboard  
Home

- PQD is an online platform that integrates many sources of quality performance data to enable PCPs and PHC staff to prioritize, inform and evaluate quality improvement efforts.
- QIP data is updated monthly on the 10th in PQD.
- Please reach out to QIP team (QIP@partnershiphp.org) for any questions.



Status  
ESTIMATED



Refresh Date  
Feb-24



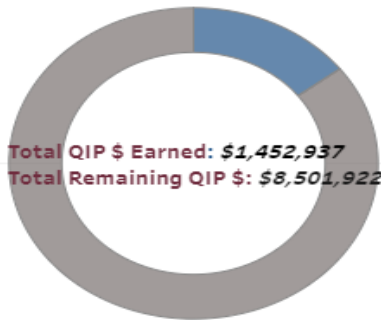
Members  
74,294



Claims Timeliness  
85.28% (Good)  
(23,491/27,546)

### Payout Status

Your organization has earned **14.60%** of your Total Possible QIP \$.



You have earned **17.23%** of your possible points. The Planwide Average to date is **19.11%** giving you an Overall Rank of **145** out of **252** parent organizations. Click "Top 20" or "Bottom 20" to view unblinded PO performance.

Top 20



145

252

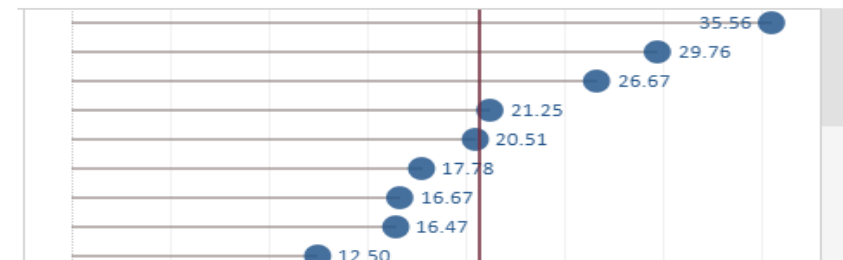
Bottom 20

### Parent Organization (PO) Executive QIP Measure Summary

Measure	PO Score	50th Target	PO Partial Points NNT	PO Full Points NNT	PO QIP \$ Earned	PO Remaining QIP \$	Progress
ACS_ADMISSION	8.24	N/A	N/A	N/A	\$125,540	\$55,699	85 / 115
Avoidable ED/1000	7.66	N/A	N/A	N/A	\$175,785	\$196,719	72 / 127
Breast Cancer Screening	34.50	52.20	242	342	\$27,015	\$235,495	18 / 89
Cervical Cancer Screening	25.11	57.11	2514	3523	\$0	\$268,731	77 / 115
Child and Adolescent Well Care Visits	4.92	48.07	3996	5888	\$0	\$687,136	47 / 105
Childhood Immunization Status CIS 1	12.03	30.90	114	190	\$0	\$440,130	31 / 100
Colorectal Cancer Screening	21.13	39.81	879	1463	\$25,131	\$196,741	69 / 114
Controlling High Blood Pressure	26.16	61.31	431	538	\$6,221	\$241,814	9 / 109
Diabetes - HbA1C Good Control	12.99	52.31	587	704	\$0	\$256,313	42 / 113
Diabetes - Retinal Eye exam	23.41	52.31	317	537	\$0	\$197,038	43 / 113
Immunization for Adolescents IMA 2	16.59	34.31	99	228	\$0	\$440,130	21 / 103
Lead Screening in Children	65.14	62.79	N/A	24	\$160,664	\$156,040	32 / 64
PCP Office Visits	1.40	N/A	N/A	N/A	\$34,622	\$337,882	65 / 127
RAR_READMISSION	0.49	N/A	N/A	N/A	\$162,691	\$6,441	76 / 104
Well Child First 15 Months	21.78	58.38	110	163	\$8,799	\$534,652	29 / 89

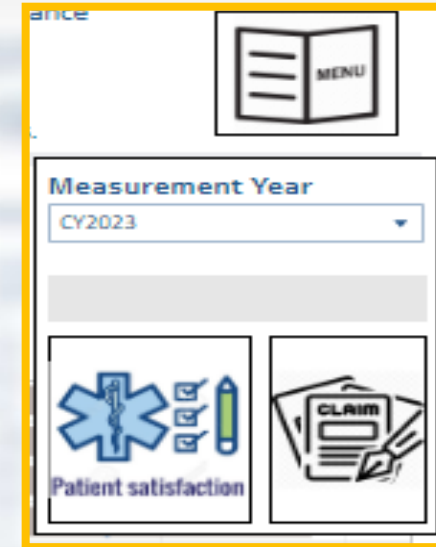
### Provider Score

Site #1  
Site #2  
Site #3



# Home - Menu

- Patient satisfaction shows CG-CAHPS scores from prior years.
- Untimely Claims shows a member-detail report of any claims received over 90 days from the service date.



# QIP Stoplight

## QIP Stoplight

Patient Gap to Reach Targets/Benchmarks and Remaining QIP Payout  
Gap Size & Dollars Remaining - Estimated Until QIP Data Is Finalized For The Measurement Year

(As of February 2024)

Show Trend Chart

Show QIP Targets

Parent Organization:  Refresh Date:  Target/Benchmark Filter:

Gap Size & Dollars Remaining

No Color = Measure N/A for site Target Met

< 10 From Target

< 30 From Target

> 30 From Target

Measure	Total Org Gap	Total Org Num	Total Org Denom	Site #1		Site#2		Site #3		Site #4		Site #5		Site #6								
Breast Cancer Screening	242	543	1,574	115 \$68,430	14 \$9,505	N/A \$0	31 \$14,170	9 \$9,547	18 \$8,082	11 \$7,787	19 \$15,342	N/A \$0	13 \$6,285	0 \$0	N/A \$0	N/A \$0	12 \$20,193					
Cervical Cancer Screening	2,514	2,447	9,744	699 \$68,430	N/A \$0	30 \$4,227	N/A \$0	N/A \$0	N/A \$0	40 \$7,787	97 \$15,342	N/A \$0	N/A \$0	275 \$5,184	1233 \$22,512	N/A \$0	N/A \$0	140 \$20,193				
Child and Adolescent Well Care Visits	3,996	586	11,918	N/A \$0						136 \$10,902	N/A \$0	1301 \$146,437	161 \$21,478	N/A \$0	28 \$824	9 \$8,799	186 \$7,258	1096 \$31,517	75 \$13,052	N/A \$0	N/A \$0	1004 \$116,053
Childhood Immunization Status CIS 10	114	77	640	N/A \$0						3 \$6,230	10 \$27,187	19 \$94,753	5 \$12,273	3 \$12,338	2 \$533	2 \$5,028	10 \$4,147	24 \$18,010	7 \$7,459	1 \$1,379	7 \$16,154	21 \$75,093
Colorectal Cancer Screening	879	1,641	7,765	122 \$54,744	21 \$7,777	0 \$0	15 \$11,593	0 \$0	10 \$6,613	0 \$0	10 \$12,273	34 \$12,338	0 \$0	113 \$4,147	524 \$18,010	12 \$7,459	N/A \$0	18 \$16,154				
Controlling High Blood Pressure	431	317	1,212	149 \$68,430	15 \$6,049	9 \$2,690	35 \$9,017	27 \$6,075	16 \$5,143	11 \$7,787	34 \$15,342	50 \$15,422	24 \$6,285	0 \$0	6 \$22,512	21 \$9,323	N/A \$0	34 \$20,193				
Diabetes - HbA1C Good Control	587	192	1,478	212 \$68,430	17 \$7,777	5 \$3,459	30 \$11,593	27 \$7,811	11 \$6,613	17 \$7,787	31 \$15,342	31 \$15,422	23 \$6,285	29 \$5,184	104 \$22,512	26 \$9,323	N/A \$0	24 \$20,193				
Diabetes - Retinal Eye exam	317	346	1,478	88 \$54,744	N/A \$0	5 \$1,537	16 \$5,153	17 \$3,472	N/A \$0	12 \$6,230	N/A \$0	N/A \$0	N/A \$0	38 \$4,147	141 \$18,010	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	
Immunization for Adolescents IMA 2	99	138	832	7 \$54,744						4 \$6,230	7 \$27,187	26 \$94,753	N/A \$0	N/A \$0	2 \$533	N/A \$0	7 \$4,147	44 \$18,010	N/A \$0	2 \$1,379	N/A \$0	N/A \$0
Lead Screening in Children	0	241	370	N/A \$0					N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0	N/A \$0
Well Child First 15 Months	110	76	349	N/A \$0					1 \$10,902	10 \$24,716	28 \$86,139	13 \$21,478	5 \$21,591	2 \$485	0 \$0	2 \$7,258	6 \$31,517	4 \$13,052	N/A \$0	9 \$28,270	30 \$68,266	

- Blank cell-Measure not applicable to its practice type or no denominator.
- N/A- Full points earned by achievement of provider specific relative improvement (RI) will replace the partial points option if the RI target is lower than the partial points target.
- Colorectal Cancer Screening targets from plan-wide 25<sup>th</sup> and 50<sup>th</sup> 2023 QIP performance. May increase to 50<sup>th</sup> and 90<sup>th</sup> MY 2024 to align closer with Medicaid targets.

# QIP Stoplight - Trend Chart

**QIP Stoplight**  
*Patient Gap to Reach Targets/Benchmarks and Remaining QIP Payout*  
*Gap Size & Dollars Remaining - Estimated Until QIP Data Is Finalized For The Measurement Year*  
**(As of December 2023)**

Hide Trend Chart

Show QIP Targets

Parent Organization: Adventist Health | Refresh Date: December 2023 | Target/Benchmark Filter: PCP QIP Full Points target



# QIP Stoplight - Targets

[LandingPage\\_Internal](#) | 
 [Home](#) | 
 [QIP Stoplight](#) | 
 [Provider](#) | 
 [MeasurePerformance](#) | 
 [Scorecard](#) | 
 [DrillDown\\_Clinical](#) | 
 [Drilldown\\_NonClinical](#) | 
 [FS1](#) | 
 [FS2](#) | 
 [FS3](#)



## QIP Stoplight

*Patient Gap to Reach Targets/Benchmarks and Remaining QIP Payout  
Gap Size & Dollars Remaining - Estimated Until QIP Data Is Finalized For The Measurement Year*

(As of February 2024)

Show Trend Chart

Hide QIP Targets

Parent Organization

Refresh Date

Target/Benchmark Filter

### Core Measurement Set

Measure Name	Full Point Target	Partial Point Target	Full Points	Partial Points
<b>CLINICAL DOMAIN: CLINICAL MEASURES</b>				
Breast Cancer Screening	90th Percentile (63.37%)	50th Percentile (52.20%)	6	5
Cervical Cancer Screening	90th Percentile (66.48%)	50th Percentile (57.11%)	6	5
Child and Adolescent Well Care Visits	90th Percentile (61.15%)	50th Percentile (48.07%)	9	7
Childhood Immunization Status: Combo 10	90th Percentile (45.26%)	50th Percentile (30.90%)	6	4
Colorectal Cancer Screening	50th Percentile (39.81%)	25th Percentile (31.68%)	5	4
Comprehensive Diabetes Care: HbA1c Control	90th Percentile (60.34%)	50th Percentile (52.31%)	6	5
Comprehensive Diabetes Care - Retinal Eye Exams	90th Percentile 63.33%	50th Percentile (52.31%)	5	4
Controlling High Blood Pressure	90th Percentile (72.22%)	50th Percentile (61.31%)	6	5
Lead Screening in Children	50th Percentile (62.79%)	N/A - New measures do not qualify for partial points in the first measurement year	6	N/A
Immunizations for Adolescents – Combo 2	90th Percentile (48.80%)	50th Percentile (34.31%)	6	4
Well-Child Visits in the First 15 Months of Life	90th Percentile (68.09%)	50th Percentile (58.38%)	9	7
<b>NON-CLINICAL DOMAIN: APPROPRIATE USE OF RESOURCES<sup>2</sup></b>				
Ambulatory Care Sensitive Admissions	60 <sup>th</sup> Percentile (8.86)	70 <sup>th</sup> Percentile (10.62)	5	4
Risk Adjusted Readmission Rate	Score <1.0	Score ≥ 1.0-1.2	5	4
<b>NON-CLINICAL DOMAIN: ACCESS AND OPERATIONS</b>				
Avoidable ED Visits	60 <sup>th</sup> Percentile (9.23)	70 <sup>th</sup> Percentile (11.43)	5	4


# Provider





**Partnership HealthPlan of California**
  
**Quality Dashboard**

**Provider Summary**




**Status/PMPM** (i)
  
 ESTIMATED/\$13.44


**Members**
  
 15,352 



**Refresh Date**
  
 Feb-24



**Timeliness**
  
 85.28% (Good)
   
(23,491/27,546)

**Organization:**

**Provider:**

**Practice Type:**
  
 FAMILY

**2024-2025 Measure Strategy Timeline**

*Click the icon to see a suggested timeline developed by PHC's Chief Officer for addressing measures and maximizing QIP performance.*



**Measurement Year**
  
 CY2024

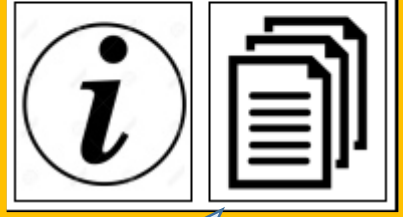
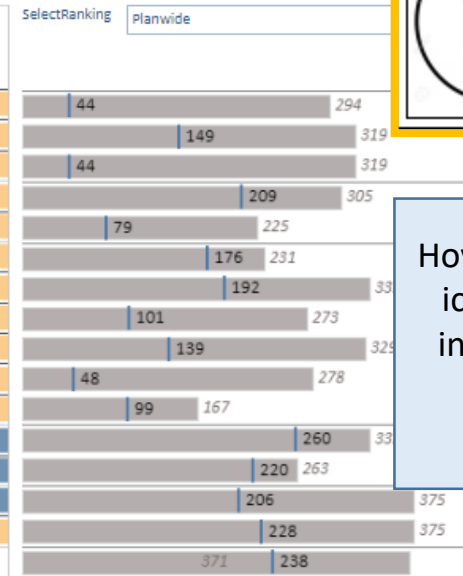
**Provider Name**
  
 (None)

Hover over the member trend icon to see trend chart of member months

**Performance Summary**

This table provides a timely summary of a individual provider's performance, showing score, Full Points/Partial Points/No Points, payout and ranking for a given measure.


Measure Type	Measure Category	Measure	Score	Partial Points Target	Partial Points NNT	Full Points Target	Full Points NNT	Points Earned	Potential Points	QIP \$ Earned	Total Possible QIP \$	Remaining QIP \$
Clinical	Chronic Disease Mgmt	Controlling High Blood Pressure	29.96	61.31	149	72.22	201	0	6	\$0	\$82,116	\$82,116
		Diabetes - HbA1C Good Control	11.71	52.31	212	60.34	254	0	6	\$0	\$82,116	\$82,116
		Diabetes - Retinal Eye exam	35.51	52.31	88	63.33	145	0	5	\$0	\$68,430	\$68,430
	Peds Access	Child and Adolescent Well Car..	2.55	N/A	N/A	48.07	430	0	9	\$0	\$123,174	\$123,174
		Well Child First 15 Months	12.50	N/A	N/A	58.38	23	0	9	\$0	\$123,174	\$123,174
	Preventative Screening	Breast Cancer Screening	33.39	52.20	115	55.39	134	0	6	\$0	\$82,116	\$82,116
		Cervical Cancer Screening	31.17	57.11	699	58.89	747	0	6	\$0	\$82,116	\$82,116
		Childhood Immunization Statu..	9.59	N/A	N/A	30.90	16	0	6	\$0	\$82,116	\$82,116
		Colorectal Cancer Screening	26.31	31.68	122	39.81	305	0	5	\$0	\$68,430	\$68,430
		Immunization for Adolescents ..	21.57	34.31	7	46.88	13	0	6	\$0	\$82,116	\$82,116
Non-Clinical	Hosp Utilization	ACS_ADMISSION	6.84	10.62	N/A	8.86	N/A	5	5	\$68,430	\$68,430	\$0
		RAR_READMISSION	0.46	1.20	N/A	1.00	N/A	5	5	\$68,430	\$68,430	\$0
	Primary Care Utilization	Avoidable ED/1000	5.69	11.43	N/A	9.23	N/A	5	5	\$68,430	\$68,430	\$0
		PCP Office Visits	1.21	1.60	N/A	1.90	N/A	0	5	\$0	\$68,430	\$68,430
<b>Grand Total</b>								<b>15</b>	<b>90</b>	<b>\$205,289</b>	<b>\$1,231,736</b>	<b>\$1,026,446</b>





Hover over either of these icons for more detailed info on PQD data or the QIP 2024 measure specifications


# Provider-Performance Summary


LandingPage\_Internal Home QIP Stoplight **Provider** MeasurePerformance Scorecard DrillDown\_Clinical Drilldown\_NonClinical FS1 FS2 FS3


**Partnership HealthPlan of California**  
**Quality Dashboard**


**Status/PMPM** *i*  
 ESTIMATED/\$13.44


**Refresh Date**  
 Feb-24


**Members**  
 15,352


**Timeliness**  
 85.28% (Good)  
 (23,491/27,546)

- Measures are grouped by **Clinical & Non-Clinical** measures.
- **NNT** is number of patients needed to treat to hit the identified target
- **QIP \$ Earned** and **Total Possible QIP \$** show current earnings vs. earnings if full points targets are met.

**| Performance Summary |**

This table provides a timely summary of a individual provider's performance, showing score, Full Points/Partial Points/No Points, payout and ranking for a given measure.

Measure Type	Measure Category	Measure	Score	Partial Points Target	Partial Points NNT	Full Points Target	Full Points NNT	Points Earned	Potential Points	QIP \$ Earned	Total Possible QIP \$	Remaining QIP \$	Select Ranking
Clinical	Chronic Disease Mgmt	Controlling High Blood Pressure	29.96	61.31	149	72.22	201	0	6	\$0	\$82,116	\$82,116	44   294
		Diabetes - HbA1C Good Control	11.71	52.31	212	60.34	254	0	6	\$0	\$82,116	\$82,116	149   319
		Diabetes - Retinal Eye exam	35.51	52.31	88	63.33	145	0	5	\$0	\$68,430	\$68,430	44   319
	Peds Access	Child and Adolescent Well Car..	2.55	N/A	N/A	48.07	430	0	9	\$0	\$123,174	\$123,174	209   305
		Well Child First 15 Months	12.50	N/A	N/A	58.38	23	0	9	\$0	\$123,174	\$123,174	79   225
	Preventative Screening	Breast Cancer Screening	33.39	52.20	115	55.39	134	0	6	\$0	\$82,116	\$82,116	176   231
		Cervical Cancer Screening	31.17	57.11	699	58.89	747	0	6	\$0	\$82,116	\$82,116	192   332
		Childhood Immunization Statu..	9.59	N/A	N/A	30.90	16	0	6	\$0	\$82,116	\$82,116	101   273
		Colorectal Cancer Screening	26.31	31.68	122	39.81	305	0	5	\$0	\$68,430	\$68,430	139   329
		Immunization for Adolescents ..	21.57	34.31	7	46.88	13	0	6	\$0	\$82,116	\$82,116	48   278
Non-Clinical	Hosp Utilization	ACS_ADMISSION	6.84	10.62	N/A	8.86	N/A	5	5	\$68,430	\$68,430	\$0	260   332
		RAR_READMISSION	0.46	1.20	N/A	1.00	N/A	5	5	\$68,430	\$68,430	\$0	220   263
	Primary Care Utilization	Avoidable ED/1000	5.69	11.43	N/A	9.23	N/A	5	5	\$68,430	\$68,430	\$0	206   375
		PCP Office Visits	1.21	1.60	N/A	1.90	N/A	0	5	\$0	\$68,430	\$68,430	228   375
<b>Grand Total</b>								<b>15</b>	<b>90</b>	<b>\$205,289</b>	<b>\$1,231,736</b>	<b>\$1,026,446</b>	371   238

# Provider – Timeline



**Partnership HealthPlan of California**
  
**Quality Dashboard**

[Provider Summary](#)



## Timeline for addressing 2024 and 2025 PCP QIP Measures

2024				2025
Q1: Jan - Mar	Q2: Apr - Jun	Q3: Jul - Sep	Q4: Oct - Dec	Q1: Jan - Mar
<b>Year-round:</b> On call system to reduce ED visits; Quick hospital follow-up to prevent readmissions; Control of CHF and COPD to reduce admissions				
<ul style="list-style-type: none"> <li>Childhood Immunization Status (0-2 yrs)</li> <li>Well-Child Visits (0-15 months)</li> <li><b>NEW:</b> Lead Screening in Children (0-2 yrs)</li> <li>Controlling High Blood Pressure (18-85 yrs)</li> <li>Diabetes Management: HbA1C good control (18-75 yrs)</li> <li>Child (Turning 3-11 yrs) and Adolescent Well Care (12-17 yrs) Visits</li> </ul>		<ul style="list-style-type: none"> <li>Breast Cancer Screening (50-74 yrs)</li> <li>Cervical Cancer Screening (21-64 yrs)</li> <li>Colorectal Cancer Screening (45-75 yrs)</li> <li>Adolescent Immunization (10-12 yrs)</li> <li>Diabetes Management: Retinal Eye Exams (18-75 yrs)</li> </ul>		
		<b>Annual Measures</b>		
		<b>Multi-year Measures</b>		
		<b>Early Measures</b>		
		Schedule those with Jan-March birthdays:		
		<ul style="list-style-type: none"> <li>Well-Child Visits (0-15 months)</li> <li>Lead Screening in Children (0-2 yrs)</li> <li>Childhood Immunization Status (0-2 yrs)</li> <li>Adolescent Immunization (Turning 13 yrs)</li> </ul>		
		<b>Final push to close gaps in annual measures using eReports uploads before CE and RI are applied in January</b>		
		<ul style="list-style-type: none"> <li>Controlling High Blood Pressure</li> <li>Diabetes Management: HbA1C good control</li> <li>Child and Adolescent Well Care Visits</li> </ul>		
		<b>Grace Period: January 9-31</b>		
		Review eReports data after CE and RI applied.		
		Upload missing data in eReports for prior measurement year		

Rev. 1.2.2024

### 2024-2025 Measure Strategy Timeline

Click the icon to see a suggested timeline developed by PHC's Chief Medical Officer for addressing measures and maximizing QIP performance.



nts, payout and ranking for a given measure.

Remaining QIP \$	Select Ranking	Planwide
\$82,116	44	294
\$82,116	149	319
\$68,430	44	319
\$123,174	209	305
\$123,174	79	225
\$82,116	176	231
\$82,116	192	332
\$82,116	101	273
\$68,430	139	329
\$82,116	48	278
\$82,116	99	167
\$0	260	332
\$0	220	263
\$0	206	375
\$68,430	228	375
\$1,026,446	371	238





# Measure Performance

Navigation: LandingPage\_Internal | Home | QIP Stoplight | Provider | **MeasurePerformance** | Scorecard | DrillDown\_Clinical | Drilldown\_NonClinical | FS1 | FS2 | FS3

Partnership Quality Dashboard  
Measure Performance

Select Metric: Score | Select Geo Level: Planwide | Select Comparison: None

Select Chart Type: Trend Table | Select Dimension: None

Count of Providers in View: [Get Info](#)

	FAMILY	INTERNAL M..	PEDIATRICS	Grand Total
CY2024	274	58	43	375

Legend for Score and % Metrics Only

- 0-50% better
- 0-50% worse
- 0% Diff
- 50-100% better
- 50-100% worse
- >100% better

MeasureName	Geo Level	Dimension	CY2024	
			Jan-24	Feb-24
Breast Cancer Screening	Planwide			42.42
Cervical Cancer Screening	Planwide			31.62
Child and Adolescent Well Care Visits	Planwide			5.92
Childhood Immunization Status CIS 10	Planwide			10.95
Colorectal Cancer Screening	Planwide			19.58
Controlling High Blood Pressure	Planwide			11.91
Diabetes - HbA1C Good Control	Planwide			12.28
Diabetes - Retinal Eye exam	Planwide			21.16
Immunization for Adolescents IMA 2	Planwide			13.94
Lead Screening in Children	Planwide			62.26
Well Child First 15 Months	Planwide			15.41
ACS_ADMISSION	Planwide		6.49	6.80
Avoidable ED/1000	Planwide		12.89	10.21
PCP Office Visits	Planwide		1.99	1.51
RAR_READMISSION	Planwide		0.80	1.71

Measure Type: Clinical | Non-Clinical

Well Child First 15 Months Pop-out Chart:


Provider Name	CY2024	
	Feb-24	Mar-24
Clinic #12345	12.50	20.51
Clinic #23456	50.00	40.00

- Use filters on the left side of the dashboard to filter the data in your view.
- Use filters on the top of the dashboard to change the parameters of the view and stratify rates.
- Use the “Select Dimension” view breakdown by choice of measure, Practice Type, Gender, Ethnicity, etc.
- Center columns will display month to month data as filtered

Clicking into any measure displays pop-out chart with individual provider scores.

# Scorecard – Dimension Filter

[LandingPage\\_Internal](#) | [Home](#) | [QIP Stoplight](#) | [Provider](#) | [MeasurePerformance](#) | **Scorecard** | [DrillDown\\_Clinical](#) | [Drilldown\\_NonClinical](#) | [FS1](#) | [FS2](#) | [FS3](#)



**Partnership Quality Dashboard  
Points and Payout Tracking  
Scorecard**

Select Chart

Points Earned (Pie Charts)

Select Metric

% of Points Earned

Select Dimension / Breakout

Planwide

Count of Providers in Selected View

Measurement Year	FAMILY	INTERN.	Pediatrics	Total
CY2024	274	58	43	375

Pie slices represent a count of the number of providers in each point level for each measure. Select Dimension option will create a Column for each categorical value in the dimension. Metric Selection option is disabled in this view. Click on a Data point to see Provider List. Currently viewing Number of Providers with No Breakout

Measurement Year

CY2024

---

Measure

(All)

---

Parent Organization

(All)

---

Provider Name

(All)

---

Practice Size

(All)

---

Practice Type

(All)

---

Points Received

(All)

---

Region

(All)

---

Sub Region

(All)

---

County

(All)

			CY2024
			Feb-24
			Planwide
Clinical	Chronic Disease Mgmt	Controlling High Blood Pressure	
		Diabetes - HbA1C Good Control	
		Diabetes - Retinal Eye exam	
	Peds Access	Child and Adolescent Well Care Visits	
		Well Child First 15 Months	
	Preventative Screening	Breast Cancer Screening	
		Cervical Cancer Screening	
		Childhood Immunization Status CIS 10	
		Colorectal Cancer Screening	
		Immunization for Adolescents IMA 2	
Non-Clinical	Hosp Utilization	ACS_ADMISSION	
		RAR_READMISSION	
	Primary Care Utilization	Avoidable ED/1000	
		PCP Office Visits	

Select a dimension to break out performance into individual columns. The example below shows breakout by practice type, displaying points earned for each practice types in the organization.

The county dimension is only applicable if your organization spans into multiple counties.

Practice size is based on total assigned Medi-Cal primary membership.

			CY2024		
			FAMILY	INTERNAL MEDICINE	PEDIATRICS
			Feb-24	Feb-24	Feb-24
Clinical	Chronic Disease Mgmt	Controlling High Blood Pressure			
		Diabetes - HbA1C Good Control			
		Diabetes - Retinal Eye exam			
	Peds Access	Child and Adolescent Well Care Visits			
		Well Child First 15 Months			
	Preventative Screening	Breast Cancer Screening			
		Cervical Cancer Screening			
		Childhood Immunization Status CIS 10			
		Colorectal Cancer Screening			
		Immunization for Adolescents IMA 2			
Non-Clinical	Hosp Utilization	ACS_ADMISSION			
		RAR_READMISSION			
	Primary Care Utilization	Avoidable ED/1000			
		PCP Office Visits			

# Clinical Member Drilldown

Measurement Year: CY2024

Measure Name: Breast Cancer Screening

Provider Name: (All)

Member Name:

Refresh Date: Mar-24  
 Provider Name: All  
 Measure Name: Breast Cancer Screening  
 Numerator: 1,466  
 Denominator: 3,016  
 Score: 48.6

Compliant  
 Non-Compliant

Provider Name	Member Name	CIN	Ethnicity	Elig Date	
				Feb-24	Mar-24
			OTHER	●	●
			HISPANIC	●	●
			WHITE	●	●
			HISPANIC	●	●
			HISPANIC	●	●
			HISPANIC	●	●
			WHITE	●	●
			CHINESE	●	●
			HISPANIC	●	●
			HISPANIC	●	●
			HISPANIC	●	●
			HISPANIC	●	●
			HISPANIC	●	●
			HISPANIC	●	●
			UNKNOWN	●	●
			OTHER	●	●

Select Provider Name to view site's member compliance list

Select Measure Name to view member compliance list for the measure

Use Member Name text box to search for a member by name

# Non-Clinical Member Drilldown



**Drilldown Instructions:**

- Single click any of the measure names below to open/close the drilldown pop-up. Before moving to a new measure, please click the current measure drilldown tab to close it.
- Risk Adjusted Readmissions has two views: 1) Start with Provider Summary 2) Select provider name(s) to view observed and expected ratio 3) Switch to Member Drilldown to view readmission details

Available ED Visits	Ambulatory Care Sensitive Admissions	Risk Adjusted Readmissions	Office Visits
---------------------	--------------------------------------	----------------------------	---------------

Report header will turn blue when open and red when closed.



- Single click measure name to open and close dashboards.
- Hide reports before viewing another measure.
- Provider site must first be selected to populate reports.

# Non-Clinical Member Drilldown



**How to get started:**

1. Click on the measure name (red box) THEN, Click one or more Provider Name(s) from the Provider name dropdown.
2. Risk Adjusted Readmission (ONLY). Settings for Select View (Provider Summary (default setting)) and Provider Name filters to view:
  - a. Observed/Expected Ratio: Provider Summary AND select one or more Provider Name(s)
  - b. Member Drilldown AND Select one or more Provider Name(s).
3. To view another measure drilldown: Re-click the measure name (blue box) OR the Revert button upper left corner AND return to step 1 or 2 above.

**Available ED Visits**

**Ambulatory Care Sensitive Admissions**

**Risk Adjusted Readmissions**

**Office Visits**

Measurement Year: CY2024  
 Provider Name: (All)  
 Search for CIN:   
 Search for Member Name:

Provider Name: All  
 Total Avoidable ED: 1,093

Admit Dt	CIN	Member Name	Age at Admit	Gender	Ethnicity	Hospital Name
1/1/24				F	WHITE	CTR MT SHASTA MERCY MEDI..
				F	WHITE	ROSEVILLE HOSP SUTTER
				F	UNKNOWN	UKIAH VALLEY ADVENTIST HL..
				M	WHITE	MEDICAL CENTER ENLOE
				F	HISPANIC	HEATH RIDEOUT ADVENTIST
				M	BLACK	MEDICAL CENTER ALAMEDA ..
				M	UNKNOWN	SUTTER SOLANO MEDICAL CE..
				M	UNKNOWN	MEDICAL CENTER LOS ALAMI..
				M	HISPANIC	HOSPITAL VACAVALLEY
				F	HISPANIC	SUTTER SOLANO MEDICAL CE..
				F	OTHER	MEMORIAL HOSP PROVIDEN..

Measure performance data displayed here.

Scroll bar appears when reports are larger than the window.

# Non-Clinical Member Drilldown - Risk Adjusted Readmissions, Provider View

- How to get started:**
1. Click on the measure name (red box) THEN, Click one or more Provider Name(s) from the Provider name dropdown.
  2. Risk Adjusted Readmission (ONLY). Settings for Select View (Provider Summary (default setting)) and Provider Name filters to view:
    - a. Observed/Expected Ratio: Provider Summary AND select one or more Provider Name(s)
    - b. Member Drilldown AND Select one or more Provider Name(s).
  3. To view another measure drilldown: Re-click the measure name (blue box) OR the Revert button upper left corner AND return to step 1 or 2 above.

Select View: Provider Summary |
 Measurement Year: CY2024 |
 Provider Name: (All) |
 Search for CIN:  |
 Search for Member Name:

PCP Name	Index Hospital Stays	30-day Readmissions	Estimated_ Readmission_Risk	Observed_Readm_Rate	Expected_Readm_Rate	Observed/Expected Ratio
	29	1	2.18	0.03	0.08	0.46
						0.00
						0.00
						3.52
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						1.33
						0.83
						0.00
						0.66
						0.00

## Select View = Provider Summary

This report shows important data points used for the measure calculation.

Use select view filter to switch to the Member Drilldown report.  
See example of next slide

# Non-Clinical Member Drilldown - Risk Adjusted Readmissions, Member View



**How to get started:**

1. Click on the measure name (red box) THEN, Click one or more Provider Name(s) from the Provider name dropdown.
2. Risk Adjusted Readmission (ONLY). Settings for Select View (Provider Summary (default setting)) and Provider Name filters to view:
  - a. Observed/Expected Ratio: Provider Summary AND select one or more Provider Name(s)
  - b. Member Drilldown AND Select one or more Provider Name(s).
3. To view another measure drilldown: Re-click the measure name (blue box) OR the Revert button upper left corner AND return to step 1 or 2 above.

Available ED Visits | Ambulatory Care Sensitive Admissions | **Risk Adjusted Readmissions** | Office Visits

Select View: **Member Drilldown** | Measurement Year: CY2024 | Provider Name: (None) | Search for CIN: | Search for Member Name: |

PCP Name	Admit Dt	CIN	Member Name	Age at Admit	Gender	Ethnicity	Hospital Name	Discharge Dt	30-day Readmissions	Estimated_Risk	Readmission_Risk	Readm_Days
				62	M	BLACK	SUTTER DAVIS HOSPITAL	2024-01-01	0	0.08	0	2
									0	0.06	0	2
									0	0.07	0	6
									0	0.09	0	7
									0	0.09	160	6
									0	0.07	0	2
									0	0.11	193	8
									0	0.07	0	1
									0	0.07	0	1
									0	0.06	0	6
									0	0.08	0	3
									0	0.07	0	4
									0	0.07	44	2
									0	0.12	0	3
									0	0.07	0	4

**30-day Readmissions:** # of any readmissions within 30 days of current admission date.  
**Estimated Readmission Risk:** Unique to the member and used in the Expected 30-Day Readmission risk calculation.  
**Readmission Days:** Days between the current admission and the subsequent admission date.

# Final Statement - FS1



Partnership Health Plan  
PCP Quality Improvement Program Statement  
Final Report

Measurement Year:  Parent Organization: CY2023 Member Months: 105,346

Provider Name:  Total Due to PCP: 5648,054.35

A site must be selected from the Provider Name dropdown menu in order for the report to populate

Practice Type: FAMILY  
County:

Measure Type	Measure Name	MeasureCategory Monitoring Vs. Core	Desired Position	Partial Points Target	Full Points Target	QIP Score	RI Score	Points Earned	Potential Points
Clinical	• Asthma Medication Ratio	Core	≥	64.26	69.67	72.81	-50.89	6	6
	• Breast Cancer Screening	Core	≥	50.95	56.52	61.69	-1.35	6	6
	• Cervical Cancer Screening	Core	≥	57.64	62.53	63.45	-6.53	6	6
	• Child and Adolescent Well Care Visits	Core	≥	N/A	48.93	51.3	14.43	9	9
	• Childhood Immunization Status CIS 10	Core	≥	34.79	42.09	36.22	-17.81	5	6
	• Colorectal Cancer Screening	Core	≥	32.8	40.23	48.89	-4.41	5	5
	• Controlling High Blood Pressure	Core	≥	59.85	61.95	47.88	-23.27	0	6
	• Diabetes - HbA1C Good Control	Core	≥	60.1	64.48	65	-4.45	6	6
	• Diabetes - Retinal Eye exam	Core	≥	N/A	51.09	43.87	38.94	0	5
	• Immunization for Adolescents IMA 2	Core	≥	N/A	35.04	41.01	18.7	6	6
	• Well Child First 15 Months	Core	≥	55.72	61.19	60.98	-17.07	7	9
	<b>Grand Total</b>								<b>56</b>

Measure Type	Measure Name	MeasureCategory Monitoring Vs. Core	Desired Position	Partial Points Target	Full Points Target	QIP Score	Points Earned	Potential Points	
Non-Clinical	• ACS Admissions	Core	≤	10.61	8.21	15.91	0	5	
	• Avoidable ED/1000	Core	≤	8.25	6.57	2.19	5	5	
	• CAHPS or Survey Option	Core	≥	N/A	N/A	0	10	10	
	• PCP Office Visits	Core	≥	1.5	1.8	2.98	5	5	
	• RAR_Readmission	Core	≤	1.2	0.99	1.25	0	5	
<b>Grand Total</b>								<b>20</b>	<b>30</b>

<b>Total Quality Improvement Unadjusted Points Earned/Potential Points</b>	<b>76</b>	<b>100.0</b>
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# Final Statement - FS2

View: Original

Home | QIP Stoplight | Provider | MeasurePerformance | Scorecard | DrillDown\_Clinical | Drilldown\_NonClinical | FS1 | **FS2** | FS3

**Partnership Health Plan**  
PCP Quality Improvement Program Statement  
Final Report

Measurement Year: **CY2023** | Parent Organization: CY2023 Member Months: 105,346

Provider Name: [ ] | Total Due to PCP: \$648,054.35

**Quality Improvement Program Funds Distribution**

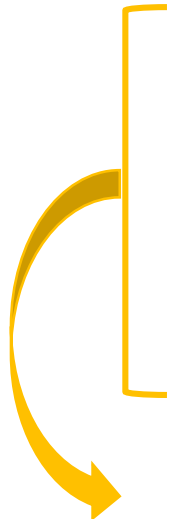
Total Quality Improvement Points (Unadj. Pts. Earned/Adj. Max Points Possible x 100): 76.00  
Adj. Max Points Possible: 100.0

(a.) Total Calendar Year Member Months	105,346
(b.) Adjusted Points Earned	76.00
(c.) Budgeted QIP PMPM	\$8.09
<b>Total QIP Core Measurement Set Payment Due (a x b x c / 100)</b>	<b>\$647,709.35</b>

**Optional Unit of Service Measures**

Advanced Care Planning - Attestations	\$0.00
Blood Lead Screening	\$0.00
Dental Fluoride Varnish	\$345.00
ECDS	\$0.00
Health Equity	\$0.00
Health Information Exchange	\$0.00
PCMH Certification	\$0.00
Peer-led Self Mgmt. Support Groups	\$0.00
POLST/AD	\$0.00
Tobacco Use Screening	\$0.00
<b>Total Unit of Service Measures</b>	<b>\$345.00</b>

**Total Core Measurement Set + Total Unit of Service** **\$648,054.35**



# Final Statement - FS3

[Home](#) | [QIP Stoplight](#) | [Provider](#) | [MeasurePerformance](#) | [Scorecard](#) | [DrillDown\\_Clinical](#) | [Drilldown\\_NonClinical](#) | [FS1](#) | [FS2](#) | **FS3**

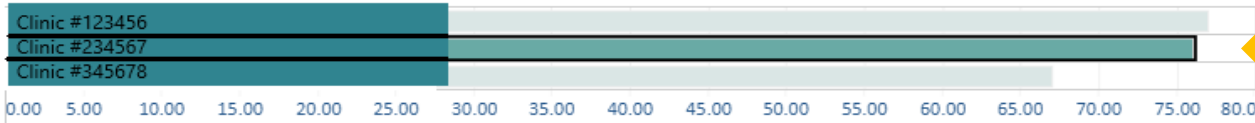


Partnership Health Plan  
 PCP Quality Improvement Program Statement  
 Final Report  
 Adjusted Points Earned  
 All Sites by Ranking

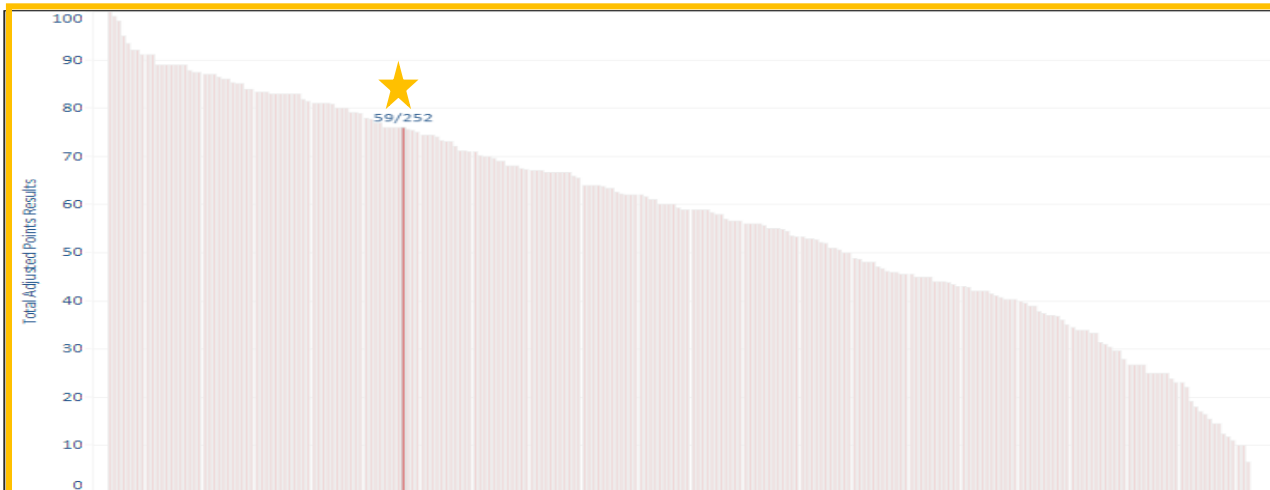
Measurement Year

CY2023

-Bar chart below shows your organization's provider score comparison, click a provider to highlight its rank planwide.



Bar Chart shows your organization's provider score comparison. Click on applicable site to highlight its rank planwide. Ranking will display in the second graph below



# eReports and Partnership Quality Dashboard (PQD) Comparison

	eReports	PQD
Real-Time Data Monitoring	Yes	No
Historical Data Monitoring	No	Yes
Measure Set (s)	Clinical	Clinical & Non-Clinical
Accepts Uploaded Data	Yes	No
Data Refresh Schedule	Twice a week (Tues & Thurs)	Monthly (10 <sup>th</sup> of each month)
Target User(s)	QI Teams	Executive/QI Leadership Teams

# Disparity Analysis Dashboard



Partnership HealthPlan of California  
Quality Dashboard  
Disparity Analysis - Measure and Race Geo Drilldown

### Filters and Breakouts to Modify the Table Display

Refresh Date Mar 24	Measure Name (All)	Parent Organization (All)	Provider Name (All)	Race/Ethnicity Group (All)	Denominator Size (All)	<b>Color Legend</b> <span style="display: inline-block; width: 10px; height: 10px; background-color: #f4a460; border: 1px solid #ccc;"></span> Below MPL <span style="display: inline-block; width: 10px; height: 10px; background-color: #4682b4; border: 1px solid #ccc;"></span> 75th <span style="display: inline-block; width: 10px; height: 10px; background-color: #add8e6; border: 1px solid #ccc;"></span> 50th		
<table border="1"> <tr> <td>Geo Breakout 1 None</td> <td>Geo Breakout 2 None</td> <td>Geo Breakout 3 None</td> </tr> </table>							Geo Breakout 1 None	Geo Breakout 2 None
Geo Breakout 1 None	Geo Breakout 2 None	Geo Breakout 3 None						

Length of the horizontal color bar represents denominator size in log scale

Subregion and County Average on tooltip only makes sense when user drills down to a more granular geo level (i.e. Parent Organization, PCP)

### Measure and Race Drilldown

Measure Name	Geo Breakout 1	Geo Breakout 2	Geo Breakout 3	ASIAN/PACIFIC ISLANDER	BLACK	EAST ASIAN	HISPANIC	NATIVE AMERICAN	OTHER	SOUTH ASIAN	SOUTHEAST ASIAN	UNKNOWN	WHITE
Breast Cancer Screening	None	None	None	38.53	39.83	39.37	55.33	31.68	39.25	42.08	47.16	39.05	37.53
Cervical Cancer Screening	None	None	None	28.61	33.80	32.30	33.72	30.93	37.53	24.01	33.94	33.66	30.69
Child and Adolescent Well Care Visits	None	None	None	9.46	7.49	10.65	10.95	6.75	9.60	13.68	9.20	10.17	7.52
Childhood Immunization Status CIS 10	None	None	None	12.26	6.93	9.09	18.17	4.27	12.33	12.50	15.28	10.08	6.50
Colorectal Cancer Screening	None	None	None	19.29	19.34	25.70	22.07	17.15	22.67	14.91	25.57	19.81	18.65
Controlling High Blood Pressure	None	None	None	11.49	11.03	19.01	16.89	9.59	18.45	19.09	12.37	15.82	13.57
Diabetes - HbA1C Good Control	None	None	None	22.29	15.83	22.88	20.47	16.17	22.48	25.45	22.32	21.52	20.75
Diabetes - Retinal Eye exam	None	None	None	17.86	18.30	25.42	20.99	14.02	25.08	13.00	27.62	20.47	16.84
Immunization for Adolescents IMA 2	None	None	None	9.75	13.79	26.09	20.72	14.23	9.79	17.07	15.61	9.70	8.77
Lead Screening In Children	None	None	None	57.45	59.22	40.00	71.64	67.12	53.85	55.00	52.38	58.51	59.73
Well Child First 15 Months	None	None	None	16.67	17.57	0.00	20.70	10.64	17.00	20.51	12.90	18.30	18.26

- Home
- My QIP Scores
- QIP Measure Report
- QIP Member Report
- Member Search
- Upload QIP Data
- Weekly Count Report
- My eAdmins
- eAdmin
- Diagnosis Crosswalk
- QIP Specification Manual
- Templates
- PHC Internal User Menu
- Partnership Quality Dashboard
- Preventive Care Reports
- Disparity Analysis Dashboard**



# Resources

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## HELP:

Please click [here](#) for the eReports User Manual

Please click [here](#) for the PQD User Manual

Please click [here](#) for ECDS ADD Template

Please click [here](#) for ECDS Alcohol Screening (ASF) template

Please click [here](#) for ECDS Breast Cancer Screening (BCS) template

Please click [here](#) for ECDS Depression Screening (DEP) template

Please click [here](#) for ECDS Value Sets

Visit the [PCP Quality Improvement Program \(QIP\) Web Page](#)

For all questions related to the QIP, please email [QIP@partnershiphp.org](mailto:QIP@partnershiphp.org)



# Questions

Please feel free to  
contact PHC's PCP QIP  
Team at:  
[QIP@PartnershipHP.org](mailto:QIP@PartnershipHP.org)

