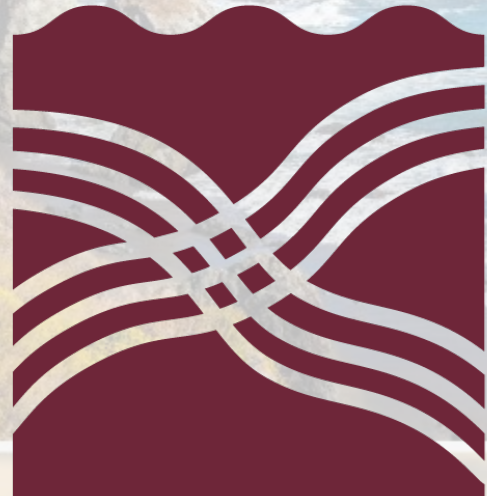


PARTNERSHIP



HEALTHPLAN

of CALIFORNIA

*A Public Agency*



Primary Care Provider (PCP)  
Quality Incentive Program (QIP)  
2024 Measurement Year Wrap-Up

QIP Managers: Amber Newell, Athena Beltran-Nampraseut,  
and Eva Lopez

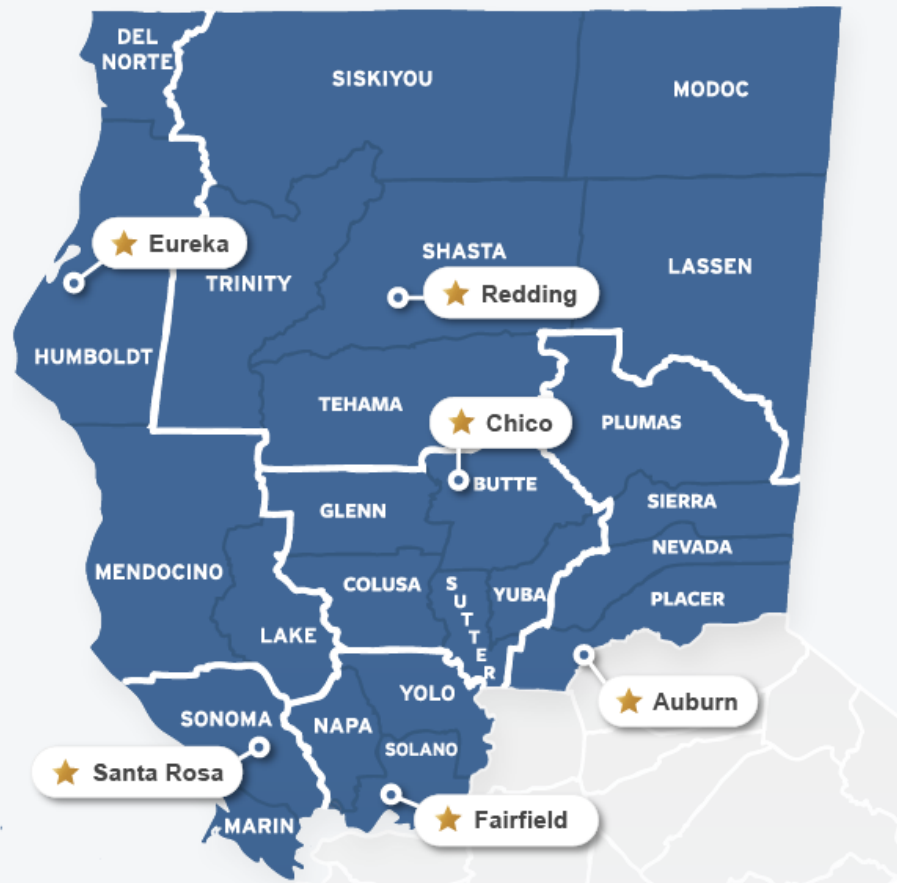
# Agenda

- PCP QIP background
- Upcoming dates
- eReports and Partnership Quality Dashboard
- Timeline checklist
- Upload best practices
- Resources
- Upcoming events
- Questions



# About Us

## Regional Offices



## Mission:

*To help our members, and the communities we serve, be healthy.*

## Vision:

*To be the most highly regarded managed care plan in California.*

# How We Are Organized

## **Partnership is a County Organized Health Systems (COHS) Plan**

### **Non-Profit Public Plan**

Low administrative rate allows for Partnership to have a higher provider reimbursement rate and support community initiatives.

### **Local Control and Autonomy**

A local governance is sensitive and responsive to the area's health care needs.

### **Community Involvement**

Advisory boards participate in decision-making regarding the direction of the plan.

# PCP QIP Background

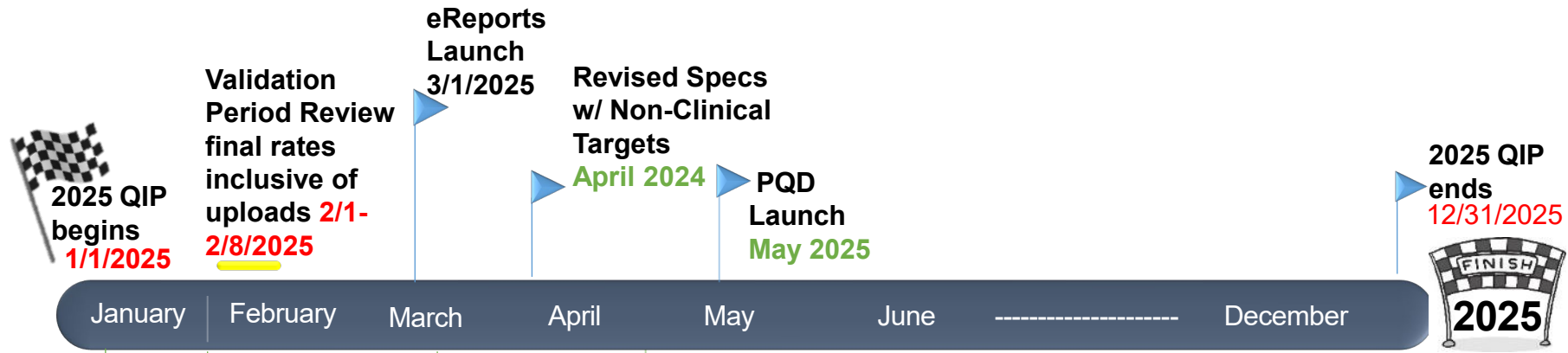
- The PCP QIP is a pay-for-performance program that provides financial incentives for driving quality health outcomes for Partnership members
- We offer measure performance reporting, member data, training and technical assistance
- All PCPs with Medi-Cal assigned members are automatically enrolled
- PCP program is structured by core measurement set and unit of service measures
- Measurement year 2023 PCP QIP highlights
  - 252 provider sites from 94 parent organizations
  - About \$38.5 million distributed incentives



# Timeline Terms

- **Continuous Enrollment** – requires members to be assigned to your parent organization for nine out of 12 months between January 1 and December 31, 2024. Sites where member(s) is assigned as of December 1 will be an “anchor” for inclusion in final denominators
- **Exclusion Deadline** – last day to submit clinical and small denominator exclusions request
- **Grace Period** – timeframe after the end of measurement year, to submit data for members in final denominators
- **Validation Period** – timeframe after the grace period, to review and validate uploads and final rates

# PCP QIP Standard Timeline



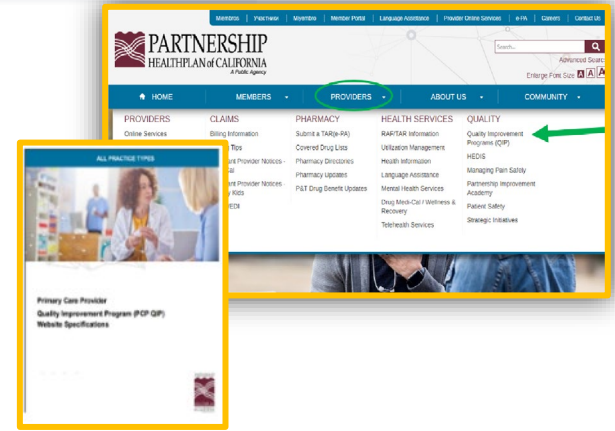
**Grace Period (MY24)**  
1/13/2025 – 1/31/2025

**Final denominators posted on eReports**  
1/13/2025

**Final date for submitting clinical data to eReports and accepting UOS submissions**  
1/31/2025

**Unit of Service Preliminary Period**  
3/17-3/21

**MY24 Final Payment mailed**  
May 2025



**2025 Measurement Year**  
January 1 – December 31, 2025



# Important 2024 Closeout Dates

DATE	EVENT
December 31, 2024	End of measurement year
January 1-10, 2025	eReports under maintenance. No provider access to eReports or Partnership Quality Dashboard
January 13, 2025	eReports with your final denominators are available
January 13- 31, 2025	Grace period to upload data on services delivered between January 1 – December 31, 2024
January 1- 15, 2025	Submissions for clinical exclusions
January 15- 31, 2025	Submissions for small denominator exclusions
January 31, 2025 by 5 p.m. (close of business)	Last day to submit unit of service submissions and small denominator exclusions and upload data for the 2024 QIP
February 1-8, 2025	Validation period: eReports frozen so providers can review final rates inclusive of uploads.





# Checklist and Best Practices



# Timeline Checklist

- **January 1-15, 2025** - Small denominator exclusions accepted for modified QIP providers only.
- **January 15-31, 2025** - Submissions for small denominator exclusions are accepted for unsuccessful outreach efforts for non-responsive members. A provider site must have less than 15 members in a measure to qualify.
  - *The three outreach attempts must include: One written outreach attempt, one verbal outreach attempt and a third outreach attempt of the sites choice. Text messages are accepted as an outreach effort.*
- **January 15, 2025** – This is last day to submit clinical exclusions for measurement year 2024.
  - *A clinical measure exclusion is a submission by a provider for a member which whom they feel does not meet the measure qualifications and should be excluded from a measure. A medical director will review these requests on a case-by-case basis.*
- **January 31, 2025** by 5 p.m. (close of business) - This is the last day to submit small denominator exclusions, UOS submissions and upload any missing data for measurement year 2024.
- **February 1-8, 2025** - Validation Period in eReports. Providers are able to review final rates inclusive of uploads.

# Best Practices for Uploading

- Prior to uploading a measure DOS or value for a member, check eReports to make sure this DOS or value has not already been captured by a claim or upload.
- When filling out an upload template, be sure not to manipulate the template and that all the required information is inputted correctly as the template outlines.
- Save a copy of your upload template and be sure to screen shot a picture of the successful upload message after uploading your template.
- Allow up to seven business days for the eReports refresh to show your upload. If after seven days you do not see your upload, please reach out to the QIP inbox.



# eReports and Partnership's Quality Dashboard Comparison

	eReports	Quality Dashboard
Real-time data monitoring	Yes	No
Historical data monitoring	No	Yes
Measure set(s)	Clinical	Clinical and Non-Clinical
Accepts uploaded data	Yes	No
Data refresh schedule	Twice a week (Tuesdays and Thursdays)	Monthly (10 <sup>th</sup> of each month)
Target user(s)	QI teams	Executive/QI leadership teams



# 2024 Program Resources

- **2025 Core Measurement Set and Specifications**
  - Target publication date: December 31, 2024
  - **Reminder** – Detailed Specifications only available in eReports, starting March 1, 2025
  - Website version is an abridged version for general public consumption starting December 31, 2024
- **2025 Clinical Measure Code Set** – Available in eReports diagnosis crosswalk, starting March 1, 2025
- **2025 Non-Clinical Measure Code Set** – Available on Partnership QIP webpage in April 2025.
- **2025 PCP QIP Kick-off Webinar** – January 15 (Noon -1 p.m.) Click [here](#) to register.
- **Webinars**
  - [2023 Wrap-up, 2024 Kick-off, 2024 eReports and PQD trainings](#)
- **eReports**
- **Partnership Quality Dashboard (PQD)**
- **Quarterly PCP QIP Newsletter**
- **Helpdesk:** Email us at [QIP@partnershiphp.org](mailto:QIP@partnershiphp.org)





# ABCs of Quality Improvement

The ABCs of Quality Improvement is an in-person training designed to teach you the basic principles of quality improvement:

- Introduction to quality improvement and the model for improvement
- Learn how to create an aim statement (project goal)
- Learn how to use data to measure quality and drive improvement
- Tips for developing change ideas for improvement
- Testing changes via the plan-do-study-act cycle

*Who Should Attend? This course is designed for clinicians, practice managers, quality improvement team members, and staff who are responsible for participating and leading quality improvement efforts within their organization.*

**Date:** Thursday, January 30, 2025

**Time:** 8 a.m. – 4 p.m.

**Location:** Ukiah Valley Conference Center  
200 S. School Street, Ukiah

*Registration and light breakfast from 8 – 8:30 a.m.  
Lunch will be provided.*

**Registration is  
FREE**



Scan me

\*The AAFP has reviewed ABCs of Quality Improvement (QI) and deemed it acceptable for AAFP credit. Term of approval is from 11/07/2024 to 11/07/2025. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This session ABCs of Quality Improvement (QI) is approved for 5.50 Live AAFP Prescribed credits.

\*\*Provider approved by the California Board of Registered Nursing, Provider Number CEP16728, for 5.50 contact hours.

Email questions to [improvementacademy@partnershiphp.org](mailto:improvementacademy@partnershiphp.org)

**Date:** Tuesday, March 25, 2025

**Time:** 8:30 a.m. – 4:30 p.m.

**Location:** The McConnell Foundation  
800 Shasta View Dr, Redding

*Registration and light breakfast from 8:30 – 9 a.m.  
Lunch will be provided.*

**Registration is  
FREE**



Scan me

\*The AAFP has reviewed ABCs of Quality Improvement (QI) and deemed it acceptable for AAFP credit. Term of approval is from 11/07/2024 to 11/07/2025. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This session ABCs of Quality Improvement (QI) is approved for 5.50 Live AAFP Prescribed credits.

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Email questions to [improvementacademv@partnershiopho.org](mailto:improvementacademv@partnershiopho.org)



# Upcoming Trainings

## **Improving Measure Outcomes Webinar Series: February - April 2025**

The *Improving Measure Outcomes Webinar Series* allows Quality Improvement teams to make knowledge actionable, improving quality service and clinical outcomes around specific measures of care.

Target Audience: Clinicians, practice managers, quality improvement teams, and staff who are responsible for participating and leading quality improvement efforts within their organization.

These learning sessions will cover Partnership's Primary Care Provider Quality Incentive Program measures. Content will focus on direct application on best practices including eliminating health disparities with examples from quality improvement teams who are doing the work.

Planned sessions include:

- February 12, 2025 - Pediatric Preventive Care for Ages 0 - 30 Months
- February 26, 2025 - Pediatric Preventive Care for Ages 3 - 17 years
- March 12, 2025 - Chronic Disease and Colorectal Cancer Screening
- March 26, 2025 - Perinatal Care and Chlamydia Screening
- April 9, 2025 - Breast and Cervical Cancer Screenings
- April 23, 2025 - Diabetes Control

*\*Sessions offered during the lunch hour and approximately 60 minutes in length. CME/CEs will be offered for live attendance.*

For more trainings, visit [http://www.partnershiphp.org/Providers/Quality/Pages/Quality\\_Events.aspx](http://www.partnershiphp.org/Providers/Quality/Pages/Quality_Events.aspx).

For questions, please email [improvementacademy@partnershiphp.org](mailto:improvementacademy@partnershiphp.org)



# Questions and Answers

**Q:** Does the 9 of 12 months for continuous enrollment have to be consecutive months?

**A:** No, member just needs to have at least 9 months of assignment between Jan 1-Dec 31 of the measurement year and these months can be non-consecutive. For example, member is assigned to your site from January through June, no coverage or assignment in July and August, assigned back to your site for the month of September and October, no coverage or assignment in November then assigned back in December. This member would remain in your denominator since they had 9 total months of assignment within your organization and assigned on the anchor date of December 1.

**Q:** What is the earliest date the small denominator exclusion can be submitted?

**A:** For modified QIP, the small denominator exclusion template can be submitted between January 1-15. For all other providers, the small denominator exclusion request can be submitted between Jan 15-31.

**Q:** Is there a different template for the different types of clinical exclusions?

**A:** No, the template is the same for all clinical exclusions. If you need to submit a clinical exclusion, please reach out to the QIP inbox so they can forward you a copy of the clinical exclusion template.

**Q:** Regarding the outreach documentation for small denominator exclusions, what happens if there is no member address or phone number for letter/text to be sent or phone call can be made?

**A:** There needs to be an “attempt” made so you would document that you attempted to call or mail a letter but there is no phone number or address on file via your medical records or Partnership’s portal.





# Contact Us

- For questions, please email [QIP@partnershiphp.org](mailto:QIP@partnershiphp.org)

