

## 2020 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 90<sup>th</sup> percentile performance of all Medicaid health plans reporting to the National Committee for Quality Assurance (NCQA); sites can receive partial points on these measures if the 75<sup>th</sup> percentile performance is met. For all new clinical measures, the full-point target is set at the 50<sup>th</sup> percentile performance, with no partial points and no points earnable through relative improvement. The 2020 thresholds for most measures have been set to the 75<sup>th</sup> percentile performance for partial points and the 90<sup>th</sup> percentile performance for full points.

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:

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

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 5% 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 2020.

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 2019. The Colorectal Cancer Screening targets are based on the 75<sup>th</sup> and 90<sup>th</sup> percentile plan-wide performance from the 2019 QIP, as NCQA data for Medicaid is not available.

**Gateway Measure: Timely Claim Submissions and PCP Office Visits**

Beginning Measurement Year 2020, PHC is adding a gateway measure for all practice types to the PCP QIP. This measure will be used to adjust incentive payments based on each parent organization’s percentage of timely claim / encounter data submissions and each site’s average PCP office visits. These threshold reinforce PHC’s efforts to increase timely administrative data capture and primary care office visits.

The incentive adjustment is determined by a participant’s position on the gateway matrix, (see table below). The columns in the matrix display ranges of the average number of PCP encounters per patient per year; the rows display ranges of the percentage of timely encounter submissions **at the parent organization level** over the course of the measurement year.

% claim submissions received during the measurement year that are within 90 days of date of service.	<u>Average PCP Encounters/Patient/Year</u> <i>(including phone/video encounters)</i>				
	<1.0	1.0 - <1.4	1.4 - <1.75	1.75 - <2.1	≥2.1
≥75%	0%	60%	85%	95%	100%
65 – <75%	0%	40%	80%	90%	95%
50 – <65%	0%	0%	25%	70%	85%
<50%	0%	0%	0%	0%	75%

**DEFINITIONS:**

- **TIMELINESS OF CLAIM/ENCOUNTER DATA:** The time, in days, between the date of service and the encounter/claim receipt date to PHC.
  - For this measure we evaluate all claims submitted to PHC by the provider during the measurement period, regardless of date of service.
  - Timeliness is calculated by subtracting the claim effective date (date of service) from the claim receipt date.
  - Any claim whose receipt date is more than 90 days after the effective date (date of service) is considered untimely; 90 days or less is considered timely; Includes both capitated and FFS claims;
- **PCP OFFICE VISITS:** PHC will extract the total number of PHC office visits using allowable PHC claim and encounter data submitted by primary care sites for services provided to assigned members or on-call services provided by another primary care site. An estimate for incurred but not yet paid/processed claims data will be included.

**Calculation:**

***PCP Office Visits PER MEMBER, PER YEAR (PMPY) = (# Office Visits/ Non-Dual Capitated Member Months)\*12***

### Core Measurement Set – Family Medicine

Measure	Targets	Points	Risk Adjusted?
<b>CLINICAL DOMAIN (75 Points Total)</b>			
1. Well-child Visits (1 <sup>st</sup> 15 Months)	-Full Points: 72.87% (50 <sup>th</sup> percentile)	7.5	No
2. Well-Child Visits (3-6 yrs)	-Full Points: 83.85% (90 <sup>th</sup> percentile) -Partial Points: 78.46% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (72.87%), 5% RI improvement	7.5	
3. Adolescent Well-Care Visits (12-21 yrs)	-Full Points: 54.26% (50 <sup>th</sup> percentile)	7.5	
4. Controlling High Blood Pressure (18-85 yrs)	-Full Points: 72.26% (90 <sup>th</sup> percentile) -Partial Points: 66.91% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (61.04%), 5% RI improvement	7.5	
5. Cervical Cancer Screening (21-65 yrs)	-Full Points: 72.02% (90 <sup>th</sup> percentile) -Partial Points: 66.49% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (60.65%), 5% RI improvement	5	
6. Colorectal Cancer Screening (51-75 yrs)	-Full Points: TBD (90 <sup>th</sup> percentile) -Partial Points: TBD (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile TBD, 5% RI improvement	5	
7. Diabetes Management: HbA1C good control (18-75 yrs)	-Full Points: 60.77% (90 <sup>th</sup> percentile) -Partial Points: 55.96% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (50.97%), 5% RI improvement	5	
8. Diabetes Management: Retinal Eye Exams (18-75 yrs)	-Full Points: 69.53% (90 <sup>th</sup> percentile) -Partial Points: 64.72% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (58.88%), 5% RI improvement	5	
9. Breast Cancer Screening	-Full Points: 69.23% (90 <sup>th</sup> percentile) -Partial Points: 63.96% TBD (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (58.67%), 5% RI improvement	5	
10. Childhood Immunization Combo -10	-Full Points: 34.79% (50 <sup>th</sup> percentile)	5	
11. Immunizations for Adolescents	-Full Points: 42.02% (75 <sup>th</sup> percentile) -Partial Points: 34.43% (50 <sup>th</sup> percentile)	7.5	

12. Asthma Medication Ratio	-Full Points: 71.62% (90 <sup>th</sup> percentile) -Partial Points: 68.52% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile, (63.58%), RI improvement	7.5	
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**APPROPRIATE USE OF RESOURCES (10 Points Total)**

13. Ambulatory Care-Sensitive Admissions	-Full Points: Less than or equal to 110% of target <sup>3</sup> -Partial Points: 111-119% of site-specific target <sup>3</sup>	5	Yes: By PCP/Site <sup>3</sup>
14. Plan All-Cause Readmission Rate	-Full Points: Less than or equal to 110% of target <sup>3</sup> -Partial Points: 111-119% of site-specific target <sup>3</sup>	5	Yes: By Practice Type <sup>3</sup>

**ACCESS & OPERATIONS (5 Points Total)**

15. Avoidable ED Visits/1000 Members Per Year	-Full Points: At or below target for ED <sup>3</sup>	5	Yes: By plan and PCP/site <sup>3</sup>
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**PATIENT EXPERIENCE (10 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 $\geq$ PHC 50th percentile score  -Partial Points: Re-survey result between PHC 25th and 50th percentile scores  Access 50 <sup>th</sup> Percentile: 49.65% Access 25 <sup>th</sup> Percentile: 44.90%  Communication 50 <sup>th</sup> Percentile: 72.61% Communication 25 <sup>th</sup> Percentile: 70.49%	10	No
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**Core Measurement Set – Internal Medicine**

Measures	Targets	Points	Risk Adjusted?
<b>CLINICAL DOMAIN (75 Points Total)</b>			
1. Controlling High Blood Pressure (18-85 yrs)	-Full Points: 72.26% (90 <sup>th</sup> percentile) -Partial Points: 66.91% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (61.04%), 5% RI improvement	10	No
2. Cervical Cancer Screening (21-65 yrs)	-Full Points: 72.02% (90 <sup>th</sup> percentile) -Partial Points: 66.49% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (60.65%), 5% RI improvement	15	
3. Colorectal Cancer Screening (51-75 yrs)	-Full Points: TBD (90 <sup>th</sup> percentile) -Partial Points: TBD (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile TBD, 5% RI improvement	10	
4. Diabetes Management: HbA1C Good Control (18-75 yrs)	-Full Points: 60.77% (90 <sup>th</sup> percentile) -Partial Points: 55.96% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (50.97%), 5% RI improvement	7.5	
5. Diabetes Management: Retinal Eye Exams (18-75 yrs)	-Full Points: 69.53% (90 <sup>th</sup> percentile) -Partial Points: 64.72% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (58.88%), 5% RI improvement	7.5	
6. Breast Cancer Screening	-Full Points: 69.23% (90 <sup>th</sup> percentile) -Partial Points: 63.96% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (58.67%), 5% RI improvement	15	
7. Asthma Medication Ratio	-Full Points: 71.62% (90 <sup>th</sup> percentile) -Partial Points: 68.52% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (63.58%), 5% RI improvement	10	

<b>APPROPRIATE USE OF RESOURCES (10 Points Total)</b>			
8. Ambulatory Care-Sensitive Admissions	-Full Points: Less than or equal to 110% of target <sup>3</sup> -Partial Points: 111-119% of site-specific target <sup>3</sup>	5	Yes: By PCP/Site <sup>3</sup>
9. Plan All-Cause Readmission Rate	-Full Points: Less than or equal to 110% of target <sup>3</sup> -Partial Points: 111-119% of site-specific target <sup>3</sup>	5	Yes: By Practice Type <sup>3</sup>
<b>ACCESS &amp; OPERATIONS (5 Points Total)</b>			
10. Avoidable ED Visits/1000 Members Per Year	-Full Points: At or below target for ED <sup>3</sup>	5	Yes: By plan and PCP/site <sup>3</sup>
<b>PATIENT EXPERIENCE (10 Points Total)</b>			
11. CG-CAHPS Survey for qualified sites, or 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: Survey result > PHC 50th percentile score  -Partial Points: Survey result between PHC 25th and 50th percentile scores  Access 50th Percentile: 49.65% Access 25th Percentile: 44.90%  Communication 50th Percentile: 72.61% Communication 25th Percentile: 70.49%	10	No

**Core Measurement Set – Pediatric Medicine**

Measures	Targets	Points	Risk Adjusted?
<b>CLINICAL DOMAIN (85 Points Total)</b>			
1. Well Child Visits (1 <sup>st</sup> 15 Months)	-Full Points: 72.87% (50 <sup>th</sup> percentile)	15	No
2. Well Child Visits (3-6 yrs)	-Full Points: 83.85% (90 <sup>th</sup> percentile) -Partial Points: 78.46% (75 <sup>th</sup> percentile), or, -Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (72.87%), 5% RI improvement	15	
3. Well Child Visits (12-21 yrs)	-Full Points: 54.26% (50 <sup>th</sup> percentile)	15	
4. Childhood Immunization Combo-10	-Full Points: 34.79% (50 <sup>th</sup> percentile)	12.5	
5. Immunizations for Adolescents	-Full Points: 42.02% (75 <sup>th</sup> percentile) -Partial Points: 34.43% (50 <sup>th</sup> percentile)	12.5	
6. Asthma Medication Ratio	- Full Points: 71.62% (90 <sup>th</sup> percentile) - Partial Points: 68.52% (75 <sup>th</sup> percentile), or, - Relative Improvement <sup>2</sup> – if above 50 <sup>th</sup> percentile (63.58%), 5% RI improvement	15	
<b>ACCESS &amp; OPERATIONS (5 Points Total)</b>			
7. ED Visits	-Full Points: At or below target for ED <sup>3</sup>	5	Yes: By plan and PCP/site <sup>3</sup>
<b>PATIENT EXPERIENCE (10 Points Total)</b>			
8. CG-CAHPS Survey for qualified sites, or 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: Survey result > PHC 50th percentile score  -Partial Points: Survey result between PHC 25th and 50th percentile scores  Access 50th Percentile: 49.65% Access 25th Percentile: 44.90%  Communication 50th Percentile: 72.61% Communication 25th Percentile: 70.49%	10	No

**Unit of Service Measures – All Practice Types**

<b>Measure</b>	<b>Incentive</b>
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 are open for extended office hours as defined as eight hours beyond normal business hours per week. These hours can be counted as any time after 5 pm or 6 pm (depending on start time or either 8 am or 9 am).
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 per parent organization for submitting all required parts of improvement plan regardless of visit volume.