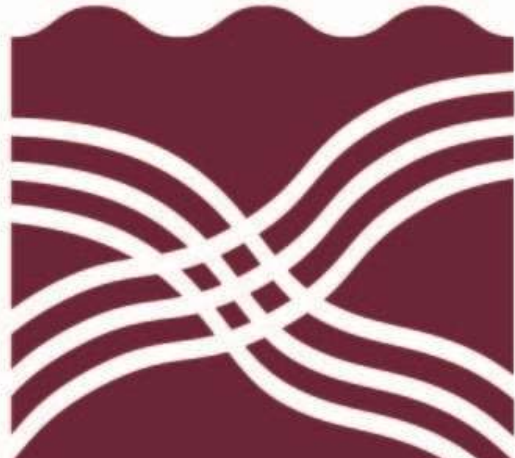




PARTNERSHIP



HEALTHPLAN
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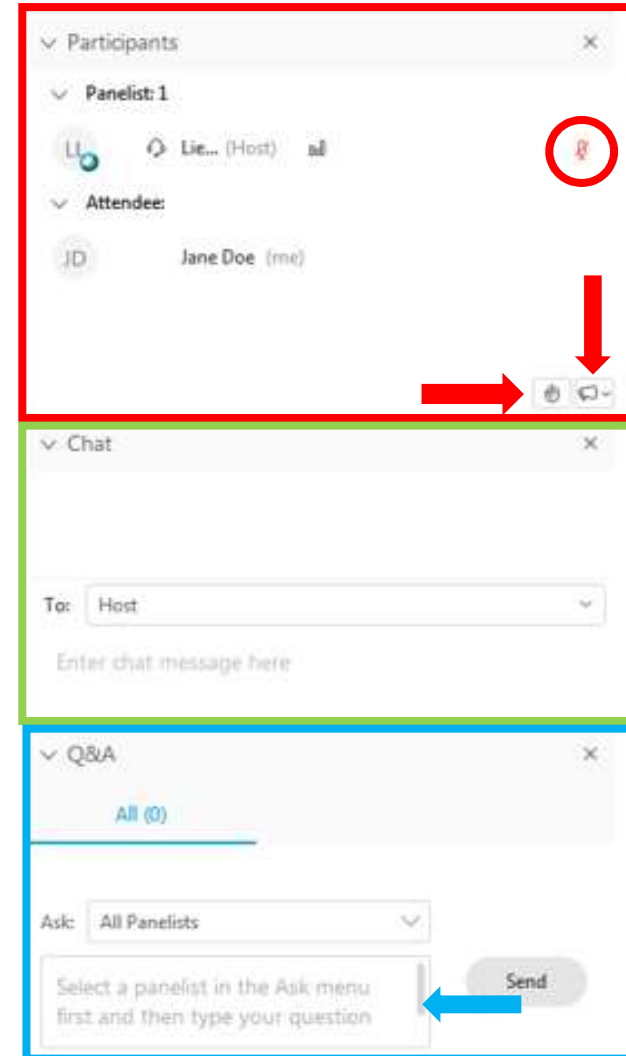
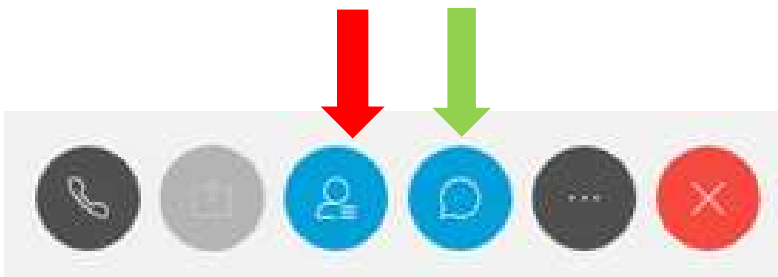
Primary Care Provider Quality Improvement Program (PCP QIP)

Measurement Year 2020 Relaunch

QIP Project Managers
Anthony Sackett & Tara Fogliasso
May 2020

Technical Instructions

- This webinar will be recorded.
- All participants have been muted to eliminate any possible noise interference/distraction.
- During the Q&A session, if you have a question, **please type your question in the “Q&A” box or click on the “raised hand” icon located in the Participants box.**





Agenda

- Guiding Principles
- QIP Background
- Measurement Year 2019 Summary of Results
- COVID-19: Telehealth with Dr. Moore
- Measurement Year 2020 Changes
 - Core Set
 - Unit of Service Set
- eReports
- Monitoring Measurement Set
- Resources
- Upcoming Events
- Q&A Session





Guiding Principles

1. Pay for outcomes, exceptional performance and improvement
2. Sizeable incentives
3. Actionable Measures
4. Feasible data collection
5. Collaboration with providers
6. Simplicity in the number of measures
7. Comprehensive measurement set
8. Align measures that are meaningful
9. Stable measures



QIP Background

- The QIP provides financial incentives, data reporting, and technical assistance
- Core Measurement Set and Unit of Service Measures
- All primary care providers with Medi-Cal assigned members are automatically enrolled
- 2019: 265 providers participated in the QIP; 189 in Southern Counties and 87 in Northern Counties
- A total of \$24.1m in incentives were distributed for the 2019 program year.



PCP QIP 2019 Summary of Results

2019 PCP Sites - Earned 90 or More Points			
PRACTICE TYPE	COUNTY	QIP SITE NAME	Adjusted Total Points Earned
PEDIATRICS	NAPA	HARVEST PEDIATRICS, NAPA - 1678	100
FAMILY	SONOMA	PETALUMA HEALTH CENTER - 14857	100
PEDIATRICS	SONOMA	CUETO-SALAS, MARTHA E, MD - 17395	100
INTERNAL MEDICINE	SONOMA	ANNADEL MEDICAL GROUP, STE. 303 - 22461	100
FAMILY	HUMBOLDT	FORTUNA CLINIC - 27933	100
INTERNAL MEDICINE	MENDOCINO	DORA STREET HEALTH CENTER - 61537	100
PEDIATRICS	SONOMA	SRCH ELSIE ALLEN CAMPUS - 19396	95.45
FAMILY	SOLANO	CENTER FOR PRIMARY CARE, VACAVILLE - 10717	95
FAMILY	SOLANO	CENTER FOR PRIMARY CARE, GREEN VALLEY - 13692	95
PEDIATRICS	SONOMA	SRCH PEDIATRIC CAMPUS - 15634	95
FAMILY	YOLO	DAVIS COMMUNITY CLINIC - 2426	93.75
FAMILY	MARIN	MARIN COMMUNITY CLINICS, 3260 KERNER BLVD. - 26754	93.75
FAMILY	MARIN	MARIN COMMUNITY CLINICS, 3110 KERNER BLVD. - 22856	91.25
PEDIATRICS	NAPA	HARVEST PEDIATRICS, ST. HELENA - 7469	91.18
INTERNAL MEDICINE	SONOMA	ANNADEL MEDICAL GROUP, PETALUMA - 25169	90

2019 PCP QIP Plan-Wide Facts

- Total Number of Sites: 265
- Average Number of Points Earned: 44.51
- Range of Points Earned: 0 - 100



COVID-19 Telehealth

Special Section: COVID-19 Telehealth



Telehealth: Why Use Virtual Visits?

- To reduce the risk of transmission of COVID-19: minimizing close personal contact and potential exposure to virus in the air or on surfaces in the health care setting.
- For patients fearful of face to face visits, to allow *some* medical care/evaluation to occur
- To decrease use of personal protective equipment, especially face masks.



Telehealth: When May Virtual Visits be Used?

- For care that would take the place of acute office visits: 99212-99214, 99202-99204
- For Comprehensive Perinatal Services Program services, including lactation consultation
- Visits by Registered Dietician
- Mental Health visits
- Physical Therapy, Occupational Therapy, Speech Therapy assessment and educational visits: G2061, G2062, G2063
- See PHC Telehealth policy for inpatient services



Telehealth: Well Child Visits

- NCQA requires physical exam to be a part of well-child visit but allows well-child visit to be divided into components
- AAP, DHCS and CDPH all focusing in importance of in- person exam for children under age 2.
- Well child visits for children aged 3-21 have been removed from PCP QIP.
- If a portion of a well-child visit is done virtually, use 992xx with modifier 95.
- For a portion of a well-child visit that includes the physical exam (or for complete well-child visits) use preventive visit codes: 99381-5 (new) or 99391-5 (established).



Telehealth: Obstetrical Visits (Prenatal)

- Prenatal Care

- Prenatal Care visits (Z1032.ZL, Z1034, Z1036) must include evaluation of fundal height and auscultation of fetal heart tones, and therefore must be done in-person
- Virtual visits done on pregnant women between in-person prenatal care visits should use E&M codes: 99212-99214 modifier 95



Telehealth: Obstetrical Visits (Post-Partum)

- Post-Partum Visits (Z1038 or 59430)
 - ACOG and DHCS recommend two post-partum visits
 - One before 21 days after delivery
 - One between 21 and 84 days after delivery
 - NCQA requires just one, in-person visit from 7 to 84 days after delivery.
 - PHC will allow one of the post-partum visits to be virtual, instead of in-person, but the other, in-person visit should be sometime between 7 and 84 days after delivery.



Telehealth: New PHC Members Initial Health Assessments

- We expect an influx of new PHC members in the months to come
- While an in-person physical exam is typically required, DHCS has given flexibility on this requirement during COVID
- Be sure to include the age appropriate Staying Healthy Assessment, as well as other appropriate routine screening (for depression, for example)
- If done virtually, use 99213-5 or 99203-5 with the 95 modifier.



Telehealth: Frequently Asked Questions

- For a virtual visit, when is G0071 or G2012 used instead of 99212.95 for brief telephone visits?
 - 99212.95: Established patients,
 - minimum of 5 minutes,
 - clinical decision-making documented in record
 - G0071: FQHC, Rural Health Centers use this if either
 - Less than 5 minute visit
 - Lack of clinical-decision making as part of visit
 - G2012: Other providers, including tribal health if either
 - Less than 5 minute visit
 - Lack of clinical-decision making as part of visit



PCP QIP MY2020

PCP QIP MEASUREMENT YEAR 2020 RELAUNCH



2020 PCP QIP Timeline

Measurement Year 2020 (MY20)

January 1 – December 31, 2020

2020

May 13

PAC Approval

Effective Date of Core Set,
retroactive back to January 1, 2020

May 15

eReports Relaunch and updated
Specifications Manuals on website

June

PQD Relaunch and updated training
materials and webinar

2021

January 31

Final Submission Deadline

April 30

Payment Distribution



QIP Structure

- Core Measurement Set (2 Domains)
 - Clinical
 - Access & Operations
- Unit of Service, a.k.a. **BONUS Measures**



PCP QIP 2020 Measurement Set

POINT ALLOCATION AND THRESHOLD CHANGES:

	<u>Family Practice</u>	<u>Internal Medicine</u>	<u>Pediatrics</u>	<u>50th</u>
<u>Clinical Measures</u>	Points per measure			Full Points
Well-Child Visit, First 15 months of Life (W15)	15.0		25.0	65.83%
Controlling High Blood Pressure (CBP)	15.0	20.0		61.04%
Colorectal Cancer Screening (COL)*	12.5	20.0		32.24%
Diabetes - HbA1C Good Control <9 (A1c)	12.5	20.0		50.97%
Childhood Immunization Combo 10 (CIS-10)	15.0		25.0	34.79%
Asthma Medication Ratio (AMR)	15.0	20.0	25.0	63.58%
	<u>85.0</u>	<u>80.0</u>	<u>75.0</u>	
<u>Non-Clinical Measures</u>				
PCP Office Visits**	<u>15.0</u>	<u>20.0</u>	<u>25.0</u>	<u>TBD</u>
TOTAL POINTS AVAILABLE	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	

* Colorectal Cancer Screening is the only measure in the PCP QIP that does not have an NCQA Threshold equivalent for PHC. The threshold here is the 25th percentile across the entire plan.

**The threshold for PCP Office Visits will be established after PHC has more data on the impact of the COVID-19 Pandemic and orders to shelter in place.



2020 Programmatic Changes

Summary of the 2020 programmatic changes:

- Only full points are available (no partial).
- Except for Colorectal Cancer Screening, all thresholds are set at the HEDIS[®] 50th percentile for Medicaid HMO Plans.
- No points will be earned through relative improvement.
- No Gateway Measure. Restored 2019 payment methodology.



Core Measurement Set Terminology

- Assigned Medi-Cal PHC members
- Clinical Measures
 - Denominator/Numerator
 - Less than 10
 - Continuous enrollment
 - Thresholds/Percentile
 - Relative improvement
- Non-clinical Measures
 - Denominator/Numerator
 - Risk Adjusted Targets



Payment Methodology

Points earned: the number of points a site earns out of the total points distributed across the measurement set

Member months: the sum of monthly enrollment counts over the course of the 12 month measurement period

- Example: If a site has 1,000 members each month, for the full measurement year the site has accumulated 12,000 member months

PMPM (Per Member Per Month): amount budgeted for incentive payment



Payment Methodology

- Core Measurement Set
- Individual performance
- Single PMPM Amount
 - 2020: \$9.25/PMPM

$$\text{QIP Score \%} * \text{Annual MMs} * \text{PMPM} = \text{Incentive}$$

Example:

- Site earns 55% of its QIP Core Measurement Set points (projected average for 2018)
- 1000 members each month
 - 12,000 member months
- \$9.25 PMPM

$$55\% * 12,000 * \$9.25 = \$61,050$$



Continuous Enrollment

- Defined as assigned to the **Parent Organization** for at least **9** out of 12 months

- Example:

Month	Assigned: Pt. 1	Assigned: Pt. 2
January	Yes	Yes
February	Yes	Yes
March	No	No
April	Yes	No
May	No	No
June	No	Yes
July	Yes	Yes
August	Yes	No
September	Yes	Yes
October	Yes	Yes
November	Yes	Yes
December	Yes	Yes
Total/Denom Status	9 months, YES	8 months, NO



Clinical Domain

Well Child , First 15 Months of Life

MEASURE DESCRIPTION

The percentage of continuously enrolled Medi-Cal members who turned 15 months old during the measurement year and who had 6 or more well-child visits with a PCP during their first 15 months of life.

Denominator

The number of continuously enrolled (from age of 31 days and for 9 out of 12 months during the measurement period) Medi-Cal members who turned 15 months old between January 1, 2020 and December 31, 2020.



Clinical Domain

Well Child , First 15 Months of Life

Numerator

The number of children in the eligible population with at least six (6) well-child visits with a PCP by the date of age 15 months.

What component CANNOT be done via virtual visit?

A Physical Exam



Clinical Domain

Well Child, First 15 Months of Life

eReports Update for W15

- Data Upload Template is available.

Member CIN	Most Recent Well Child Visit Date (MM/DD/YYYY)

Upload Instructions for Numerator Compliance:

1. Identify and enter the following information in the appropriate column:

Children who turn 15 months of age during the measurement year who have at least six well care visits on or before 15 months of age:

- Member CIN (12345678A9)
- AND**
- Well Care Visit Date (MM/DD/YYYY)
 - **Important Notes:** Dates of service **MUST** be on different dates.
 - If you need to upload multiple dates, please repeat the steps on as many rows as needed. Meaning, the CIN can be on multiple rows with different dates of service.

2. Save the file to your desktop or other preferred location.

To be eligible for uploading data into eReports, your documentation in the chart must include the date and evidence of all of the following:

- A health history
- A physical development history
- A mental development history
- A physical exam
- Health education/anticipatory guidance

Strategies for upload success:

*Enter data as indicated in the column headings, i.e. MM/DD/YYYY. If the formatting is changed, the data could appear to be accepted and not reflected in your numerator.

*Acceptable file types: Excel 97-2003 Workbook (.xls) or Excel Workbook (.xlsx).

*Always confirm your uploaded data is reflected in your numerator within seven business days.

****Uploaded data is subject to an annual audit. Medical Record must be present in the patient's chart.****



Clinical Domain

Controlling High Blood Pressure

MEASURE DESCRIPTION

The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm Hg) during the measurement year.

Denominator

The number of continuously enrolled Medi-Cal members 18-85 years of age as of December 31, 2020 who had at least two visits on different dates of service with a diagnosis of hypertension during the measurement year or the year prior to the measurement year

Numerator

The number of eligible population in the denominator most recent blood pressure (BP) reading taken during an outpatient visit, a non-acute inpatient encounter, or remote monitoring event) during the measurement year.



Clinical Domain

Controlling High Blood Pressure

How to Prescribe a Blood Pressure Monitor/Kit to the members?

- Covered under the pharmacy benefit and can be prescribed by writing for one on a prescription pad or electronic prescription.
- Diagnosis code is not required. Try to limit prescriptions to individuals with some medical indication for regular blood pressure monitoring.
- 1 device every 2 years price limit for monitors from \$55. Effective 06/01/2020 price limit increases to \$100.

Formulary Guidance. What is the correct brand(s)? NDC, if any.

- It is under “Specific Covered Lists.” The formulary will be updated by 6/1/20 to include more models with the limit increase. The current list of blood pressure monitors can be accessed at:
<http://www.partnershiphp.org/Providers/Pharmacy/Pages/default.aspx>
- Questions: Contact Pharmacy at (800) 863-4155



Clinical Domain Controlling High Blood Pressure

Capturing BP Values in the patient's medical record during a virtual visit general physician guidance for the medical staff.

“During the course of the virtual visit, the patient was witnessed taking his/her blood pressure with an appropriate home blood pressure monitor device, the electronic result was shown to the provider and entered into the medical record.”

- Dr. Mark Netherda, PHC's Associate Medical Director, Quality



Clinical Domain

Colorectal Cancer Screening

MEASURE DESCRIPTION/Denominator

The percentage of members 51–75 years of age as of December 31, 2020 who had appropriate screening for colorectal cancer.

Numerator

Any of the following meet the criteria for 51–75 years of age as of December 31, 2020:

- Fecal occult blood test (FOBT) or fecal immunochemical test (FIT) during the measurement year.
- Flexible sigmoidoscopy during the measurement year or the four years prior to the measurement year.
- Colonoscopy during the measurement year or the nine years prior to the measurement year.
- CT colonography during the measurement year or the four years prior to the measurement year.
- FIT-DNA test during the measurement year or the two years prior to the measurement year.



Clinical Domain Colorectal Cancer Screening

What colorectal cancer screening tests does PHC cover?

- Fecal Immunochemical Test (FIT)
- Cologuard® DNA test
- Double contrast barium enema
- Flexible sigmoidoscopy
- Colonoscopy

Which one is the easiest for the patient?

Annual Fecal Immunochemical Test (FIT)

Cologuard® is best used for PHC members who have demonstrated an inability to be able to perform FIT tests annually.



Clinical Domain

Diabetes – HbA1c Good Control <9

MEASURE DESCRIPTION

The percentage of members 18-75 years of age who had a diagnosis of diabetes with evidence of HbA1c levels at or below the threshold.

Denominator

The number of continuously enrolled Medi-Cal members 18-75 years of age with diabetes identified as of December 31, 2020.

Numerator

The number of diabetics in the eligible population with evidence of the most recent measurement at or below the threshold for HbA1c $\leq 9.0\%$ during the measurement year



Clinical Domain

Childhood Immunization, CIS10

Measure Description/Denominator

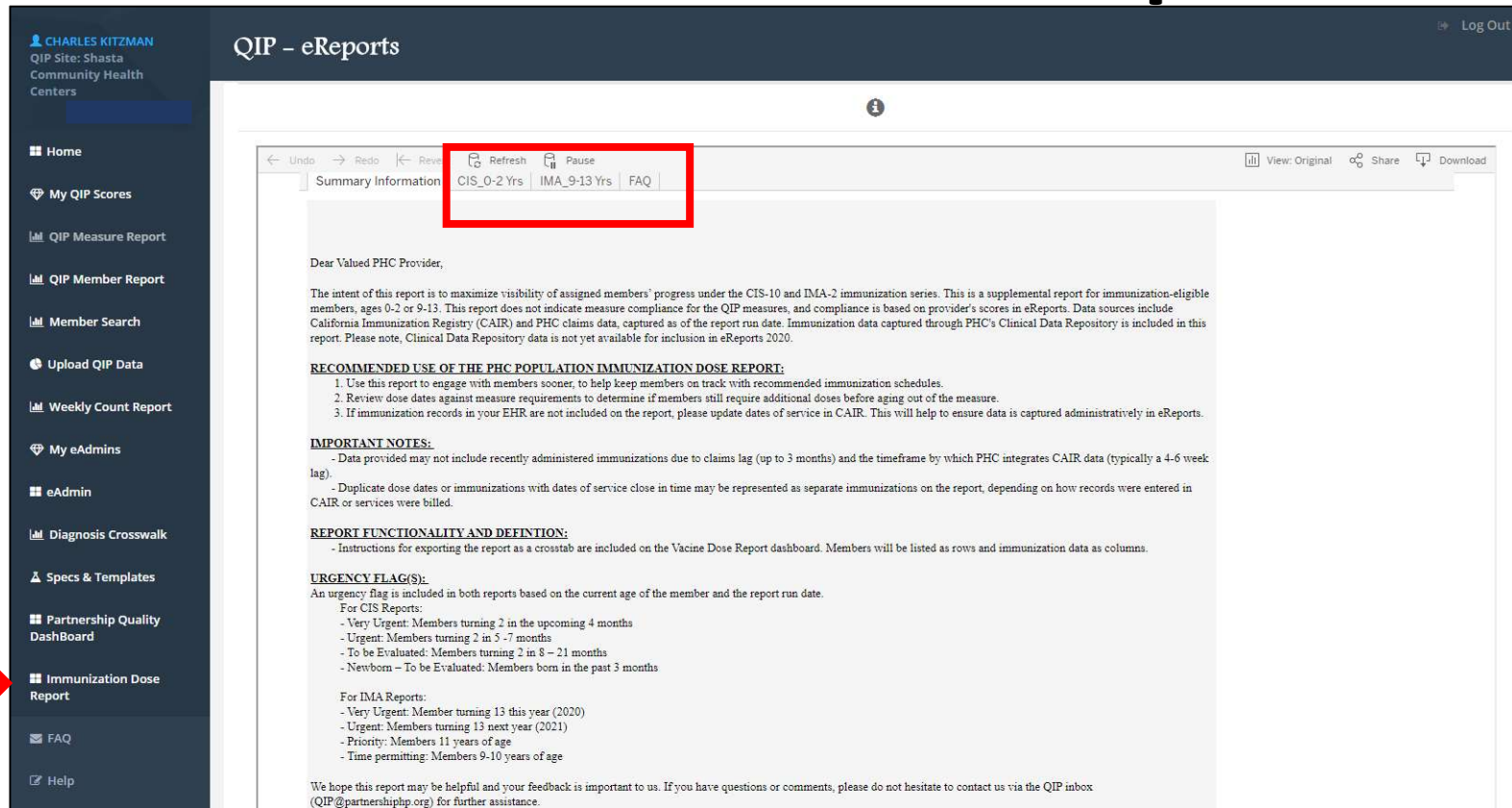
The percentage of children 2 years of age who had

Numerator

- 4 diphtheria, tetanus and acellular pertussis (DTaP)
- 3 polio (IPV)
- 1 measles, mumps and rubella (MMR)
- 3 haemophilus influenza type B (HiB)
- 3 hepatitis B (HepB)
- 1 chicken pox (VZV)
- 4 pneumococcal conjugate (PCV)
- 1 hepatitis A (HepA)
- 2 or 3 rotavirus (RV)
- 2 influenza (flu) vaccines

ALL on or before the child's second birthday.

Immunization Dose Report



CHARLES KITZMAN
QIP Site: Shasta
Community Health
Centers

Home
My QIP Scores
QIP Measure Report
QIP Member Report
Member Search
Upload QIP Data
Weekly Count Report
My eAdmins
eAdmin
Diagnosis Crosswalk
Specs & Templates
Partnership Quality
Dashboard
Immunization Dose
Report
FAQ
Help

QIP - eReports

Summary Information
CIS_0-2 Yrs | IMA_9-13 Yrs | FAQ

Dear Valued PHC Provider,

The intent of this report is to maximize visibility of assigned members' progress under the CIS-10 and IMA-2 immunization series. This is a supplemental report for immunization-eligible members, ages 0-2 or 9-13. This report does not indicate measure compliance for the QIP measures, and compliance is based on provider's scores in eReports. Data sources include California Immunization Registry (CAIR) and PHC claims data, captured as of the report run date. Immunization data captured through PHC's Clinical Data Repository is included in this report. Please note, Clinical Data Repository data is not yet available for inclusion in eReports 2020.

RECOMMENDED USE OF THE PHC POPULATION IMMUNIZATION DOSE REPORT:

1. Use this report to engage with members sooner, to help keep members on track with recommended immunization schedules.
2. Review dose dates against measure requirements to determine if members still require additional doses before aging out of the measure.
3. If immunization records in your EHR are not included on the report, please update dates of service in CAIR. This will help to ensure data is captured administratively in eReports.

IMPORTANT NOTES:

- Data provided may not include recently administered immunizations due to claims lag (up to 3 months) and the timeframe by which PHC integrates CAIR data (typically a 4-6 week lag).
- Duplicate dose dates or immunizations with dates of service close in time may be represented as separate immunizations on the report, depending on how records were entered in CAIR or services were billed.

REPORT FUNCTIONALITY AND DEFINITION:

- Instructions for exporting the report as a crosstab are included on the Vaccine Dose Report dashboard. Members will be listed as rows and immunization data as columns.

URGENCY FLAG(S):

An urgency flag is included in both reports based on the current age of the member and the report run date.

For CIS Reports:

- Very Urgent: Members turning 2 in the upcoming 4 months
- Urgent: Members turning 2 in 5 -7 months
- To be Evaluated: Members turning 2 in 8 - 21 months
- Newborn - To be Evaluated: Members born in the past 3 months

For IMA Reports:

- Very Urgent: Member turning 13 this year (2020)
- Urgent: Members turning 13 next year (2021)
- Priority: Members 11 years of age
- Time permitting: Members 9-10 years of age

We hope this report may be helpful and your feedback is important to us. If you have questions or comments, please do not hesitate to contact us via the QIP inbox (QIP@partnership.org) for further assistance.

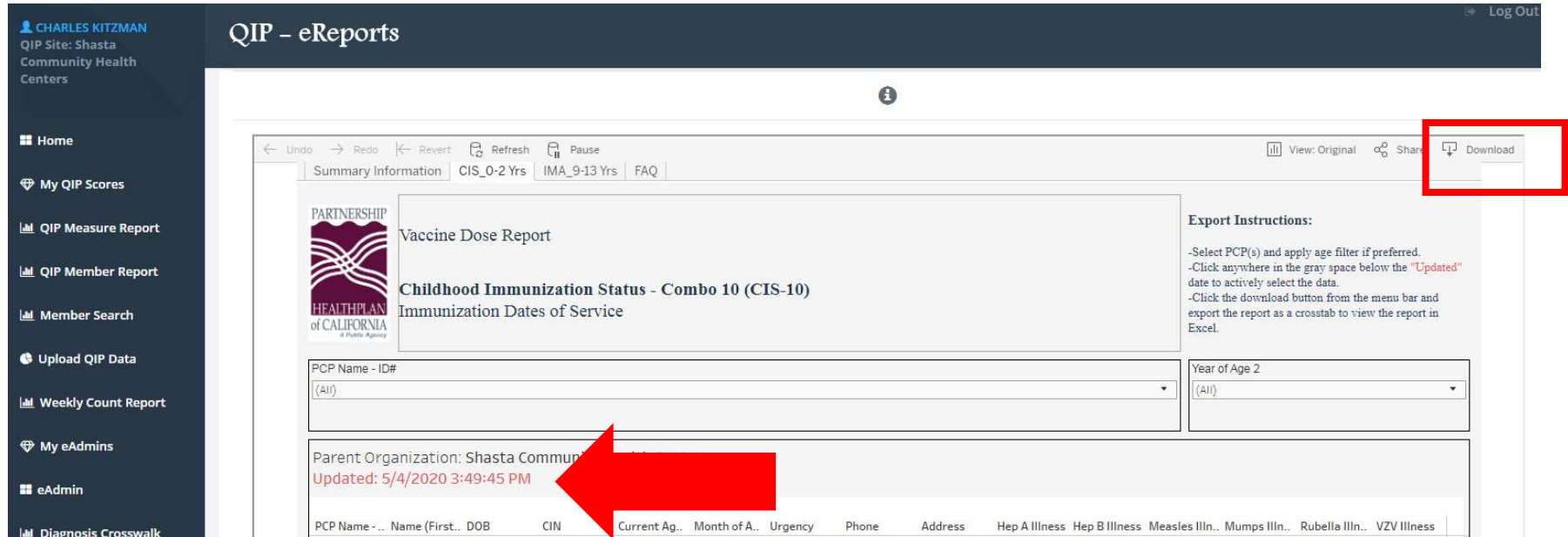
Launched Friday, May 8, 2020



Clinical Domain Childhood Immunization, CIS10

How to Download the Immunization Dose Reports?

1. Click the data table to select data.
2. Click Download and select Data or Crosstab.
3. Report will download into Excel.





Clinical Domain

Asthma Medication Ratio

MEASURE DESCRIPTION

The percentage of members 5 - 64 years of age who are identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

Denominator

Members 5 - 64 years of age who are identified as having persistent asthma (please see measure specification for persistent asthma criteria).



Clinical Domain Asthma Medication Ratio

Numerator

Member in the denominator who have a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

CMO Strategy for Success/Reminder:

Budesonide/formoterol (Symbicort) and mometasone/formoterol (Dulera) are covered without prior authorization, and can be used prn as rapid-acting, but long-lasting bronchodilation, instead of albuterol, while simultaneously providing inhaled-corticosteroid controller effect. – Dr. Robert Moore, PHC's Chief Medical Officer



Non - Clinical Domain PCP Office Visits

Description

The average number of assigned members' visits to a PCP per member, per year (PMPY).

PHC will extract the total number of PHC office visits, telephone visits, and video visits from claims and encounter claims data submitted by primary care sites for services provided to assigned members or on-call services provided by another primary care site.

Calculation

*(# Office Visits/ Non-Dual Capitated Member Months)*12*



Proposed 2020 Unit of Service Measurement Set

Measure	Incentive
Advance Care Planning Attestations	<p>Minimum 1/1000th (0.01%) of the sites assigned monthly membership 18 years and older for:</p> <ul style="list-style-type: none"> • \$100 per Attestation, maximum payment \$10,000. • \$100 per Advance Directive/POLST, maximum payment \$10,000
Extended Office Hours	<p>10% of Capitation for sites that are open for extended office hours:</p> <ul style="list-style-type: none"> • Quarter 1 (January-March 2020): 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) from January to February, excluding March • Quarter 2 (April-June 2020): 10 hours of after-hours clinician face-to-face, telephonic, or video visits or combination of face-to-face, telephonic, or video visits • Quarter 3 and 4 (July to December 2020): To be determined by PHC's Executive Team on or before June 30, 2020.
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 5% of eligible adult members.
Health Information Exchange	One time \$3000 incentive for signing on with a local or regional health information exchange; Annual \$1500 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.



eReports 2020

Log Out

QIP - eReports

Home | My QIP Scores | QIP Measure Report | QIP Member Report | Member Search | Upload QIP Data | Weekly Count Report | My eAdmins | eAdmin | Diagnosis Crosswalk | Specs & Templates | PHC Internal User Menu | Partnership Quality Dashboard | Immunization Dose Report | FAQ | Help

Threshold Report

GROUP NAME: _____

Select a PCP Select Provider Clear

Core Clinical Measurement Set									
Measure	QIP Score	Numerator	Denominator	25th Threshold %	25th(Target/Achieved)	50th Threshold %	50th(Target/Achieved)	75th Threshold %	75th(Target/Achieved)
Asthma Medication Ratio 2020	52.04 %	51	98	NA	NA	63.58%	63/51	NA	NA
Childhood Immunization Status CIS 10 2020	13.79 %	44	319	NA	NA	34.79%	111/44	NA	NA
Colorectal Cancer Screening 2020	19.39 %	422	2176	32.24%	702/422	NA	NA	NA	NA
Controlling High Blood Pressure 2020	0.52 %	4	772	NA	NA	61.04%	472/4	NA	NA
Diabetes - HbA1C Good Control 2020	15.20 %	112	737	NA	NA	50.97%	376/112	NA	NA
Well Child First 15 Months 2020	18.40 %	39	212	NA	NA	65.83%	140/39	NA	NA

Monitoring Measures (Not in the Core Clinical Measurement Set)									
Measure	QIP Score	Numerator	Denominator	25th Threshold %	25th(Target/Achieved)	50th Threshold %	50th(Target/Achieved)	75th Threshold %	75th(Target/Achieved)
Adolescent Well Care 2020	9.76 %	257	2634	NA	NA	54.26%	1430/257	NA	NA
Breast Cancer Screening 2020	52.96 %	403	761	NA	NA	58.67%	447/403	NA	NA
Cervical Cancer Screening 2020	50.04 %	1682	3361	NA	NA	60.65%	2039/1682	NA	NA
Diabetes - Retinal Eye exam 2020	17.31 %	126	728	NA	NA	58.88%	429/126	NA	NA
Immunization for Adolescents 2020	16.15 %	52	322	NA	NA	34.43%	111/52	NA	NA
Well Child 3-6 Years 2020	13.27 %	155	1168	NA	NA	72.87%	852/155	NA	NA

Relaunching by Friday, May 15, 2020

Eureka | Fairfield | Redding | Santa Rosa



Monitoring Measures

Monitoring Measures (Not in the Core Clinical Measurement Set)									
Measure	QIP Score	Numerator	Denominator	25th Threshold %	25th(Target/Achieved)	50th Threshold %	50th(Target/Achieved)	75th Threshold %	75th(Target/Achieved)
Adolescent Well Care 2020	9.76 %	257	2634	NA	NA	54.26%	1430/257	NA	NA
Breast Cancer Screening 2020	52.96 %	403	761	NA	NA	58.67%	447/403	NA	NA
Cervical Cancer Screening 2020	50.04 %	1682	3361	NA	NA	60.65%	2039/1682	NA	NA
Diabetes – Retinal Eye exam 2020	17.31 %	126	728	NA	NA	58.88%	429/126	NA	NA
Immunization for Adolescents 2020	16.15 %	52	322	NA	NA	34.43%	111/52	NA	NA
Well Child 3-6 Years 2020	13.27 %	155	1168	NA	NA	72.87%	852/155	NA	NA

Intentions for the Monitoring Measurement Set

- Not part of the Core Measurement Set.
- No points assigned for incentive dollars.
- Ability to monitoring your performance with access to the member gap in-care lists.

We challenge you to keep your performance rates up for:

- **Breast Cancer Screening**
- **Cervical Cancer Screening**

Because the member stays numerator compliant for a couple of measurement years.



Resources

- **2020 PCP QIP Program:**
<http://www.partnershiphp.org/Providers/Quality/Pages/PCP-QIP-2020.aspx>
 - **Measure Specifications** (one for each practice type)
 - **Code List**
 - **Webinars**
 - **QI Newsletter**
- **Partnership Improvement Academy:**
<http://www.partnershiphp.org/Providers/Quality/Pages/PIAcademyLandingPage.aspx>
- **Quality Measure Highlights:**
<http://www.partnershiphp.org/Providers/Quality/Pages/Quality-Measure-Highlights.aspx>



Spring 2020 PHC Regional Medical Directors Meeting

Medical Directors' Virtual Meeting

Come for a large variety of PHC Updates on the following:

- PHC Updates, New Programs, Major Policy Changes, and COVID-19
- Other topics include: Major Pharmacy Changes, Formulary Highlights, Clinical Updates, Mental Health & Substance Use Disorder Treatment, Data Review: Opioid Use, Vaccination, Readmission, PCP-QIP Changes, Special Initiatives, Prop 56 incentive programs and more.

Date: Friday, May 22, 2020

Time: 9:00 a.m. – 12:00 p.m.

[Register Now](#)



PHC Educational Opportunity

Accelerated Learning Education Programs

We acknowledge that the COVID-19 response is changing how health centers and practices approach their daily work and QIP efforts. Wishing to be mindful of the situation, we solicited feedback regarding your ability to participate in the upcoming scheduled webinars. The information received back indicates that most would like the webinars to continue as planned. We want to continue to provide education and resources to help practices on the PCP QIP measures, and will maintain the currently scheduled webinars:

Colorectal Cancer Screening (CCS)

CME/CE credits available

Date: Wednesday, June 24, 2020

Time: Noon – 1 p.m.

[Sign-Up Now](#)



Questions

**Please feel free
to contact PHC's
QIP Team at:**

QIP@PartnershipHP.org

