

PARTNERSHIP



HEALTHPLAN  
of CALIFORNIA

*A Public Agency*



**Primary Care Provider  
Quality Improvement Program  
(PCP QIP)**

**eReports  
Training Webinar**

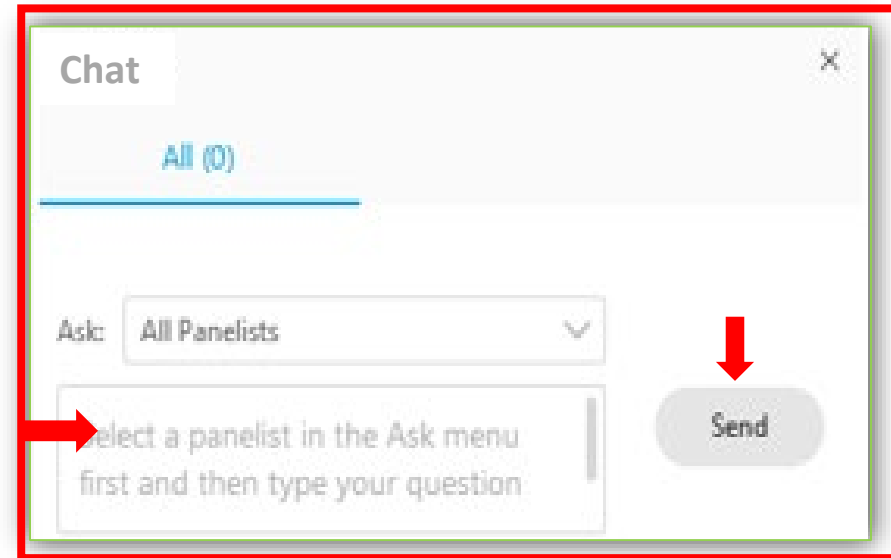
**Amber Newell**

**Athena Beltran-Nampraseut**

**February 20, 2024**

# Housekeeping

- 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.”

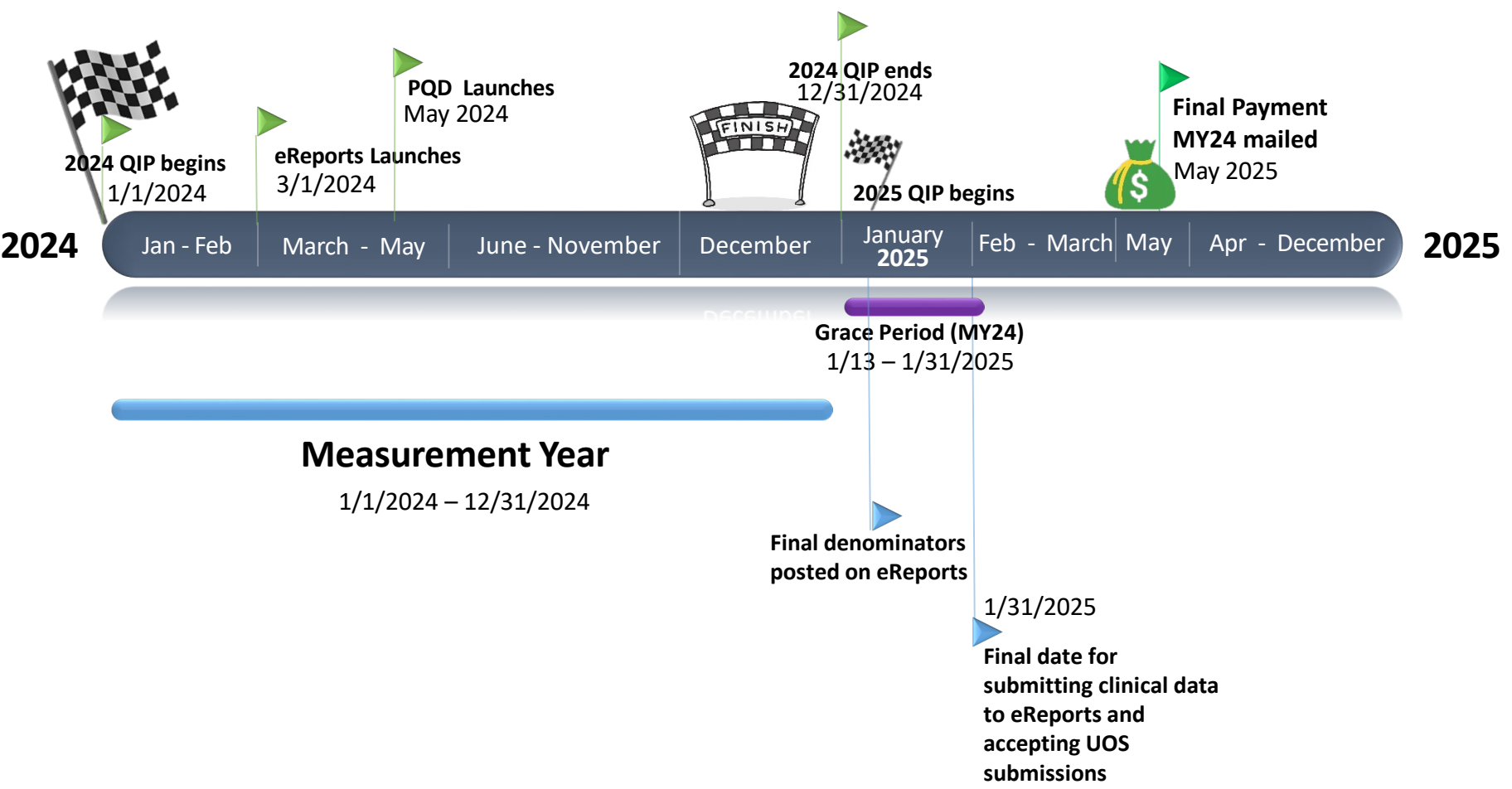


# Objectives

- Current Measurement Year Timeline
- eReports
  - Overview
  - Other online platforms: Partnership Quality Dashboard (PQD) and Preventive Care Dashboard (PCD)
  - Annual Uploads Audit
- Resources
- Chat Box: Questions & Answers



# 2024 PCP QIP Standard Timeline



# Important Dates

## Measurement Year 2024 (MY2024)

January 1 – December 31, 2024

- **2024 eReports Launch**
  - Friday, March 1<sup>st</sup> 2024
- **Electronic Clinical Data System (ECDS) Monthly Files**
  - Test data file submission due October 15, 2024
  - Final data file submission due January 7<sup>th</sup>-January 14<sup>th</sup>, 2025
- **Patient Experience, Survey Option only**
  - Part 1 Due July 31, 2024
  - Part 2 due January 31, 2025
- **Partnership Quality Dashboard (PQD) Launch**
  - May/June 2024 (exact date TBD)
    - PQD Kick-Off Webinar- Wednesday, May 8<sup>th</sup> from 12-1p



# eReports – Upload Schedule



## 2024 PCP QIP - eREPORTS UPLOAD SCHEDULE

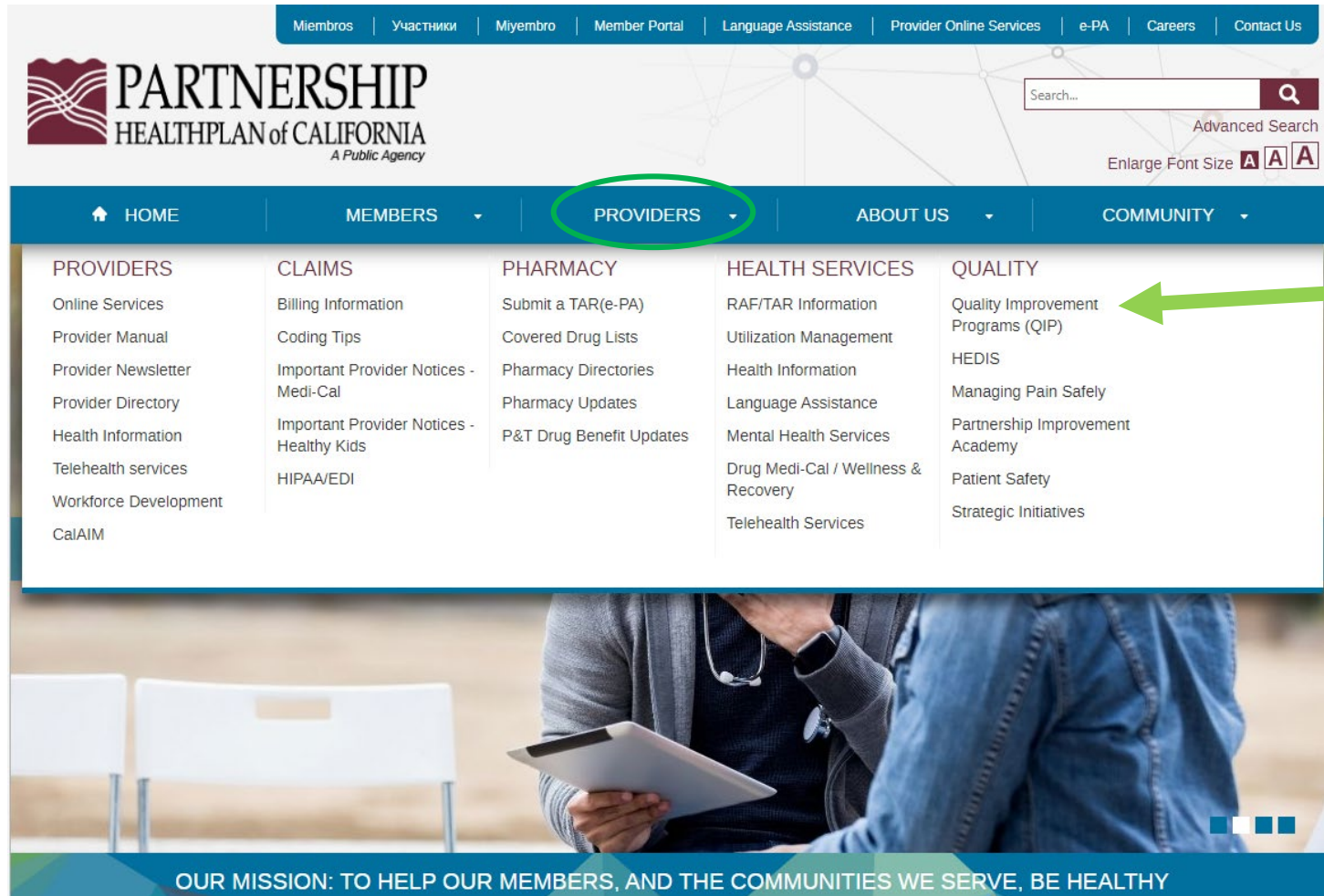
### CLINICAL MEASUREMENT SET:

Cervical Cancer Screening Childhood Immunization Status - Combo 10 Comprehensive Diabetes Care - Retinal Eye Exams Colorectal Cancer Screening Lead Screening in Children <b>*New</b> Immunizations for Adolescents - Combination 2	Mar 01, 2024 - JAN 31, 2025	
Comprehensive Diabetes Care - HbA1c Control (A1c) Controlling High Blood Pressure Well-Child Visits in the First 15 Months of Life		OCT 01, 2024 - JAN 31, 2025
Breast Cancer Screening Child and Adolescent Well Care Visits		JAN 09, 2025 - JAN 31, 2025





# Where is eReports? PHC Website

[Partnershiphp.org](http://Partnershiphp.org)




Miembros | Участники | Miembro | Member Portal | Language Assistance | Provider Online Services | e-PA | Careers | Contact Us

PARTNERSHIP  
HEALTHPLAN of CALIFORNIA  
A Public Agency

Search...  Advanced Search  
Enlarge Font Size 

HOME MEMBERS **PROVIDERS** ABOUT US COMMUNITY

PROVIDERS	CLAIMS	PHARMACY	HEALTH SERVICES	QUALITY
Online Services	Billing Information	Submit a TAR(e-PA)	RAF/TAR Information	Quality Improvement Programs (QIP) 
Provider Manual	Coding Tips	Covered Drug Lists	Utilization Management	HEDIS
Provider Newsletter	Important Provider Notices - Medi-Cal	Pharmacy Directories	Health Information	Managing Pain Safety
Provider Directory	Important Provider Notices - Healthy Kids	Pharmacy Updates	Language Assistance	Partnership Improvement Academy
Health Information	HIPAA/EDI	P&T Drug Benefit Updates	Mental Health Services	Patient Safety
Telehealth services			Drug Medi-Cal / Wellness & Recovery	Strategic Initiatives
Workforce Development			Telehealth Services	
CaAIM				


OUR MISSION: TO HELP OUR MEMBERS, AND THE COMMUNITIES WE SERVE, BE HEALTHY

# Where is eReports? QIP Webpage

## QUALITY IMPROVEMENT PROGRAMS

Partnership HealthPlan of California offers several Improvement Programs offering financial incentives and technical assistance to providers who serve our members.

Details on each specific program can be accessed by clicking the link below.

- Primary Care Provider Quality Improvement Program (PCP QIP) 
- Hospital Quality Improvement Program (HQIP)
- Long-Term Care Quality Improvement Program (LTC QIP)
- Palliative Care Quality Improvement Program (PC QIP)
- Perinatal Quality Improvement Program (Perinatal QIP)

### Contact Us

Email: [QIP@partnershiphp.org](mailto:QIP@partnershiphp.org) (please allow two business days for a response)

Fax: (707) 863-4316



# Where is eReports? PCP QIP Webpage

HOME MEMBERS PROVIDERS ABOUT US COMMUNITY

Home | Providers | Quality Improvement | PCP Quality Improvement Program

PROVIDER RELATIONS

CLAIMS

PHARMACY

QUALITY IMPROVEMENT

ECM QIP

PCP QIP

Hospital QIP

LTC QIP

Palliative Care QIP

Perinatal QIP

HEDIS

Managing Pain Safely

Partnership Improvement Academy

Patient Safety and Quality Assurance

Potential Quality Issues

HEALTH SERVICES

STRATEGIC INITIATIVES

## PCP QUALITY IMPROVEMENT PROGRAM

The Primary Care Provider Quality Improvement Program (PCP QIP), designed in collaboration with Partnership HealthPlan of California providers, offers substantial financial incentives, data resources, and technical assistance to primary care providers who serve our capitated Medi-Cal members so that significant improvements can be made in the following areas:

- Prevention and Screening
- Chronic Disease Management
- Appropriate Use of Resources
- Primary Care Access and Operations
- Patient Experience

**Contact Us**  
Email: [QIP@partnershiphp.org](mailto:QIP@partnershiphp.org) (please allow two business days for a response)  
Fax: (707) 863-4316

[PCP QIP Overview](#)

[Webinars](#)

To help orient our providers to the PCP QIP year, we have provided measurement set documents, a code list, and other useful tools and resources.

[Learn More about the 2024 PCP QIP](#)

[New 2023 Equity Adjustment](#)

[PCP QIP webinars](#)

[Upcoming Webinars and Trainings](#)

[On Demand Courses](#)

## PCP QIP 2024

This page includes measurement documents and tools referring to the last and current program years spanning January 1, 2023 – December 31, 2024.

[Approved 2024 PCP QIP Measure Summary \(Added January 3, 2024\).](#)

### Measurement Set Documents

#### Measure Specifications

Measures vary by practice type. The following document includes measure descriptions and requirements as well as data submission processes by type.

[2024 Specifications Manual](#)

### Code List

Clinical Measurement Set - Please use eReports Diagnosis Crosswalk to view the code set.

Non-Clinical Measures - Non-clinical code set (Updated October 12, 2022).

### Tools

[Click here for eReports](#)

Please refer to the specifications document for your practice type for a data submissions timeline and submission templates.

[Timeline for Addressing 2024 and 2025 PCP QIP Measures](#)

Added January 3, 2024

# What is eReports?

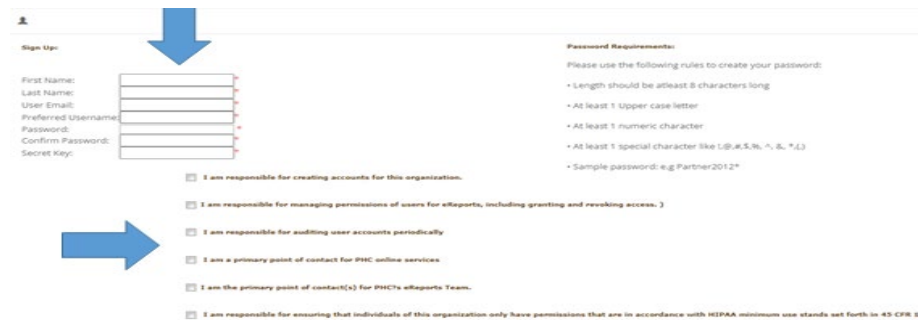
## Gives you:

- Access to a web based portal 24 hours/7 days a week
- Track your clinical performance in real time
- Download patient reports for each of the clinical measures
- Upload supplemental data for your patients
- Access to detailed specifications manual

# eReports New User Access

## New County Expansion Providers –

The QIP team will email your POs individual Secret Key (Skey) along with detailed registration instructions on Wednesday 2/21/24 so the appointed eAdmin(s) can create their accounts. eAdmin access should be limited to 1-2 designated staff.




The screenshot shows a registration form with the following fields: First Name, Last Name, User Email, Preferred Username, Password, Confirm Password, and Secret Key. A blue arrow points to the Secret Key field. To the right, there are password requirements: length of at least 8 characters, at least 1 upper case letter, at least 1 numeric character, and at least 1 special character. Below the form, there are several checkboxes for user responsibilities, with a blue arrow pointing to the first one: "I am responsible for creating accounts for this organization."

## Existing County –

Please review your **My eAdmins** list to ensure the correct staff have this access. Appointed staff with eAdmin access have the ability be manage existing account and created new ones.

QIP – eReports

My eAdmins



The screenshot shows a table titled "YOUR EADMIN DETAILS:" with columns for User, eAdmin Name, and Email.

# eReports Walk-Through



## QIP e-Reports

Sign in with your organizational account

Log In

### Sign Up:

New user, email QIP Team at [qip@partnership.org](mailto:qip@partnership.org) for your site's registration Key. Click [here](#) to register with a registration Key.

[Can't access your account?](#)





# eReports Terms and Conditions

## QIP - eReports

- About Us
- What is QIP?
- User Login
- FAQ
- Help



### Terms and Conditions:

Welcome to Partnership HealthPlan's QIP eReports system.

This is a PHC proprietary software product. This product may be only used for authorized business purposes and contains confidential data, including Protected Health Information (PHI). Confidential information and PHI may not be accessed or used without authorization. Any or all uses of this network and all files on this network may be intercepted, monitored, recorded, copied, audited, inspected, and disclosed to authorized personnel, law enforcement personnel, as well as authorized officials of other agencies.

Unauthorized or improper use of this system may result in administrative disciplinary action and civil and criminal penalties. By continuing to use this system you indicate your awareness of and consent to these terms and conditions of use.

LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.

"HIPAA" shall mean Section 262 of the Health Insurance Portability and Accountability Act, P.L. 104-191 ("HIPAA") which governs the use and transmission of individually identifiable health information.

"Legal Requirement" shall mean any law or regulation affecting the use or disclosure of Protected Health Information.

"Protected Health Information" shall mean any Protected Health Information as defined in HIPAA or any similar information obtained from individuals as a result of the Customer providing products or services.

Security and Confidentiality: You acknowledge that Protected Health Information requires special safeguarding and agree to abide by the laws & Procedures of your company, state, and HIPAA regarding the protection and disclosure of Protected Health Information contained in the Site.

Safeguards: You agree that it is your responsibility to implement reasonable and appropriate administrative, technical and physical safeguards to protect the confidentiality, integrity and availability of all Protected Health Information and any and all other confidential information accessible on or through the Site.

Decline

Accept



# eReports Home Screen

## QIP - eReports



"Measures in view may not apply to your practice type. Refer to the QIP measure specifications manual for clinical measures in your measure set."

GROUP NAME [REDACTED]

Select a PCP

Select Provider

Clear

### Core Clinical Measurement Set

Refresh

Measure	QIP Score	Numerator	Denominator	25th Threshold %	25th(Target/Achieved)	50th Threshold %	50th(Target/Achieved)	75th Threshold %	75th(Target/Achieved)
Child and Adolescent Well Care 2024	15.47 %	985	6368	NA	NA	NA	NA	NA	NA
Breast Cancer Screening 2024	35.09 %	93	265	NA	NA	NA	NA	NA	NA
Cervical Cancer Screening 2024	27.78 %	693	2495	NA	NA	NA	NA	NA	NA
Childhood Immunization Status CIS 10 2024	3.54 %	14	395	NA	NA	NA	NA	NA	NA
Colorectal Cancer Screening 2024	15.24 %	273	1791	NA	NA	NA	NA	NA	NA
Controlling High Blood Pressure 2024	7.10 %	12	169	NA	NA	NA	NA	NA	NA
Diabetes - HbA1C Good Control 2024	7.30 %	20	274	NA	NA	NA	NA	NA	NA
Diabetes - Retinal Eye exam 2024	14.14 %	43	304	NA	NA	NA	NA	NA	NA
Immunization for Adolescents 2024	5.87 %	26	443	NA	NA	NA	NA	NA	NA
Well Child First 15 Months 2024	10.53 %	6	57	NA	NA	NA	NA	NA	NA
Lead Screening Children 2024	18.45 %	19	103	NA	NA	NA	NA	NA	NA

### Advanced Care Planning



LAST LOGIN: 2/2/2024 1:18:55 PM  
QIP SCORES UPDATED ON: 2/1/2024 2:51:27 PM



# eReports Features Menu



**QIP - eReports**

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My QIP Scores

QIP Measure Report

QIP Member Report

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Weekly Count Report

My eAdmins

eAdmin

Diagnosis Crosswalk

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Preventive Care Reports

FAQ

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Select a PCP

Measure
Child and Adolescent Well Care 2024
Breast Cancer Screening 2024
Cervical Cancer Screening 2024
Childhood Immunization Status CIS 10 2024
Colorectal Cancer Screening 2024
Controlling High Blood Pressure 2024
Diabetes - HbA1C Good Control 2024
Diabetes - Retinal Eye exam 2024
Immunization for Adolescents 2024
Well Child First 15 Months 2024
Lead Screening Children 2024











Advanced Care Planning

172.25.7.199/OIP2024\_Amv/Default.aspx

# My QIP Score

## QIP – eReports

### My QIP Score

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-  Member Search
-  Upload QIP Data
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-  My eAdmins
-  eAdmin

Select a PCP:	<input type="text" value="Search for PCP"/>	
Select a Measure:	<input type="text" value="Breast Cancer Screening 2024"/>	<input type="button" value="Display"/> <input type="button" value="Clear"/>
QIP Site:	[REDACTED]	
Numerator:	<b>93</b>	
Denominator:	<b>265</b>	
QIP Score:	<b>35.1 %</b>	
Threshold:		

Note: The denominator list for the selected measure does not apply continuous enrollment criteria. The eligible population used to calculate the final scores for all measures is defined as measures in the Clinical domain, the member also has to be continuously enrolled with a PCP site, with continuous enrollment defined as being assigned for nine out of the 12 months of dually eligible members are excluded from all measures.



# QIP Measure Report

## QIP - eReports

### QIP Member Reports

Select a measure: Breast Cancer Screening 2024

Select a PCP: Search for PCP

Numerator  Denominator

[Apply Filter and Display Report](#) [Clear](#)

Number of members displayed for the selected measure: **265**

Export Data Sources

[Refresh](#)

QIP Result	CIN	Member First Name	Member Last Name	Member Phone	Gender	DOB	Age	Mammography Date	PCP	NewMember	Details
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>
Denominator										N	<a href="#">Details</a>


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# QIP Member Report

## QIP - eReports

### Code Level QIP Member Reports

Number of members displayed: **12755**

Refresh 

QIP Result	Measure Name	CIN	Member First Name	Member Last Name	Member Phone	Gender	DOB	Age	PCP	NewMember
Denominator	Cervical Cancer Screening 2024									N
Denominator	Cervical Cancer Screening 2024									Y
Denominator	Cervical Cancer Screening 2024									N
Denominator	Cervical Cancer Screening 2024									N
Denominator	Cervical Cancer Screening 2024									N
Denominator	Cervical Cancer Screening 2024									N
Denominator	Cervical Cancer Screening 2024									Y
Denominator	Cervical Cancer Screening 2024									Y

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# Member Search

## QIP - eReports

### QIP Member Search

Member CIN:	<input type="text" value="Enter CIN"/>	<b>Search Criteria:</b> 1. CIN (e.g. 12345678A9) 2. SSN (e.g. 9999999999) 3. Last Name and First Name 4. Last Name and Date of Birth (e.g. DOB 01/01/2017)
Member SSN:	<input type="text" value="Enter SSN"/>	
First Name:	<input type="text" value="Enter First Name"/>	
Last Name:	<input type="text" value="Enter Last Name"/>	
Date of Birth:	<input type="text" value=""/> <input type="calendar"/>	
<input type="button" value="Search Member"/> <input type="button" value="Clear"/>		

### Search Results

Member CIN	Member First Name	Member Last Name	Member DOB	Member SSN	Gender	PCP	Details
Search for Members...							

Refresh

Refresh

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# Upload QIP Data

## QIP - eReports

### Upload QIP Data

Select a measure:

Selected File: **2024 CervicalCancerScreening- 1.24.24 Upload.xls**

[View data with no errors](#)

[View data with errors](#)

[Upload data with no errors](#)

[Cancel Upload](#)

*Showing total 15 records.*

CIN	Date of Most Recent PAP Smear	High Risk HPV/HPV	Date of Hysterectomy	Error
	10/01/2023			
	10/15/2023			
	01/05/2020			
	01/02/2023			
			12/01/2023	
			02/02/2024	
	12/05/2023		12/05/2023	
		11/01/2023		
		11/14/2022		
		03/01/2024		The date value for HPV test date cannot be later than today's date.
		12/10/2023		Validation failed for Member CIN. The given CIN number is not valid.
		05/05/2023		
	06/12/2019			
	05/05/2023	05/05/2023		
	04/23/2023	04/23/2023		

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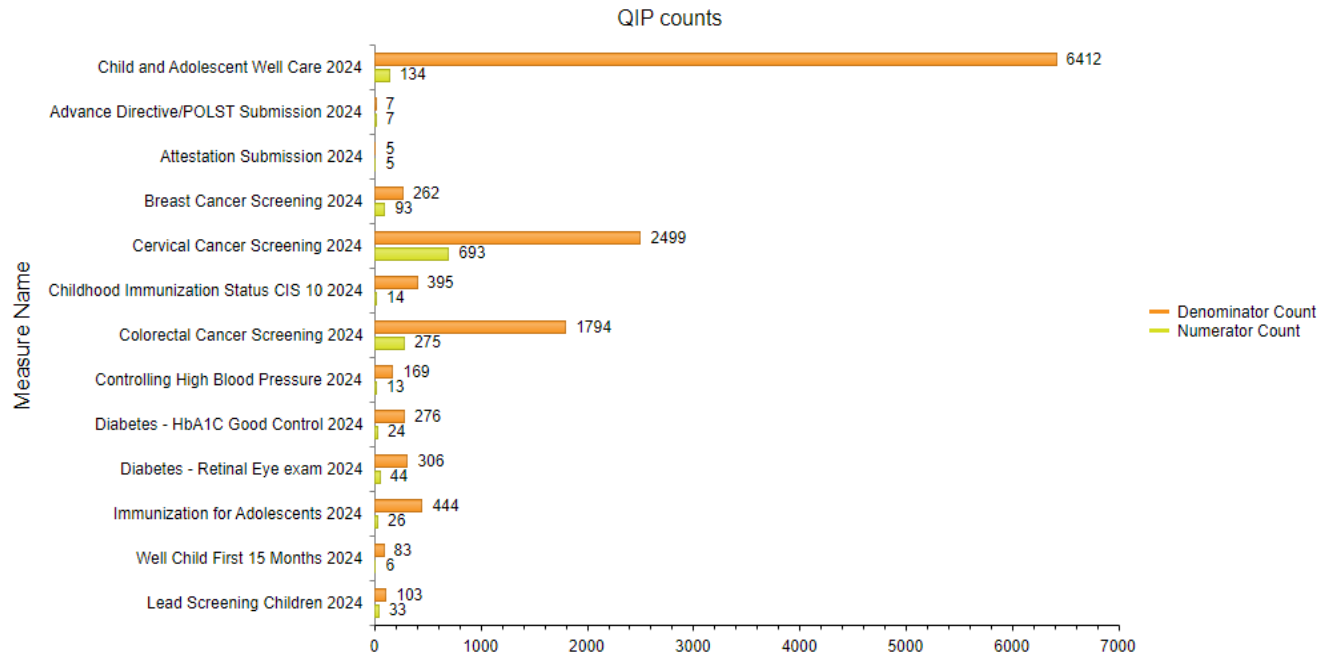
# Weekly Count Report

## QIP - eReports

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Note: Data Uploaded Only Applies To QIP Clinical Measures





# My eAdmin

## QIP – eReports

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YOUR EADMIN DETAILS:  
[REDACTED]

YOUR EADMIN DETAILS:  
[REDACTED]

YOUR EADMIN DETAILS:  
[REDACTED]

YOUR EADMIN DETAILS:  
[REDACTED]

YOUR EADMIN DETAILS:  
[REDACTED]

YOUR EADMIN DETAILS:  
[REDACTED]



## QIP - eReports

**i** eAdmin

Name: [REDACTED]	Email: [REDACTED]
Username: qipintuser1	Group Name: [REDACTED]

Providers:

Practice Type	Providers
INTERNAL MEDICINE	[REDACTED]
FAMILY	[REDACTED]
FAMILY	[REDACTED]
FAMILY	[REDACTED]
FAMILY	[REDACTED]
FAMILY	[REDACTED]
FAMILY	[REDACTED]
INTERNAL MEDICINE	[REDACTED]

**+ Add New User** Refresh

Username	First Name	Last Name	User Email	Is Active	Is Locked		
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	False	False	Enable	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	False	False	Enable	ReSend Email Verification
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	False	False	Enable	ReSend Email Verification

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# Diagnosis Crosswalk

## QIP - eReports

### Diagnosis Code xWalk Report

[Back to report main page](#)

Select a Measure:

Select a Code Type:

Code Type	Code System	Code	Route	Version Date
Mammography	CPT	77061		10/26/2023
Mammography	CPT	77062		10/26/2023
Mammography	CPT	77063		10/26/2023
Mammography	CPT	77065		10/26/2023
Mammography	CPT	77066		10/26/2023
Mammography	CPT	77067		10/26/2023
Mammography	LOINC	24604-1		10/26/2023
Mammography	LOINC	24605-8		10/26/2023
Mammography	LOINC	24606-6		10/26/2023
Mammography	LOINC	24610-8		10/26/2023
Mammography	LOINC	26175-0		10/26/2023
Mammography	LOINC	26176-8		10/26/2023
Mammography	LOINC	26177-6		10/26/2023
Mammography	LOINC	26287-3		10/26/2023
Mammography	LOINC	26289-9		10/26/2023
Mammography	LOINC	26291-5		10/26/2023
Mammography	LOINC	26346-7		10/26/2023
Mammography	LOINC	26347-5		10/26/2023
Mammography	LOINC	26348-3		10/26/2023
Mammography	LOINC	26349-1		10/26/2023

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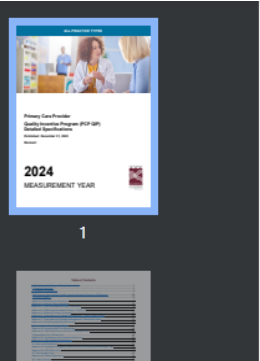






# Comprehensive Specifications Manual

- QIP Site: [Redacted]
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ALL PRACTICE TYPES

Primary Care Provider  
 Quality Incentive Program (QIP QIP)  
 Detailed Specifications  
 Published: December 27, 2023  
 Keyword:

2024  
 MEASUREMENT YEAR



# Upload Templates

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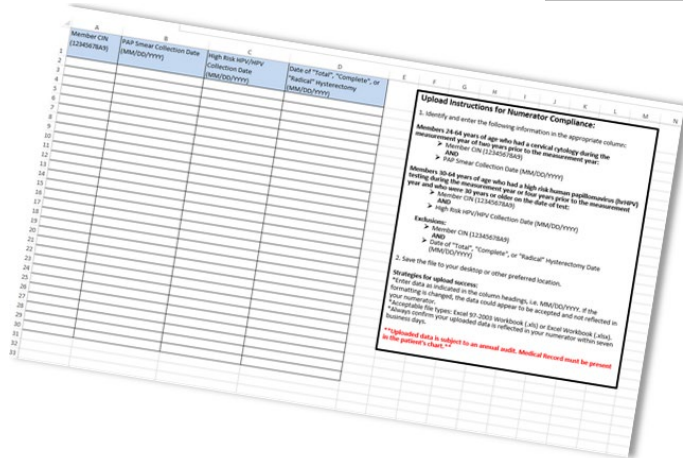
Select a Measure:

QIP Specifications for the selected measure:

Download this template to upload data for the selected measure:

Data upload file format definitions for the selected measure:

- Select a Measure...
- Select a Measure...**
- Child and Adolescent Well Care 2024
- Advance Directive/POLST Submission 2024
- Attestation Submission 2024
- Breast Cancer Screening 2024
- Cervical Cancer Screening 2024
- Childhood Immunization Status CIS 10 2024
- Colorectal Cancer Screening 2024
- Controlling High Blood Pressure 2024
- Diabetes - HbA1C Good Control 2024
- Diabetes - Retinal Eye exam 2024
- Immunization for Adolescents 2024
- Well Child First 15 Months 2024
- Lead Screening Children 2024



**Upload Instructions for Hemerstor Compliance:**

- Identify and enter the following information in the appropriate column:
  - Members 24-64 years of age who had a cervical cytology during the measurement year of two years prior to the measurement year:
    - Member CIN (123456789)
    - PAP smear Collection Date (MM/DD/YYYY)
    - High Risk HPV/very Collection Date (MM/DD/YYYY)
    - Date of "Total", "Complete", or "Partial" hysterectomy (MM/DD/YYYY)
  - Members 50-64 years of age who had a high risk human papillomavirus (HPV) test during the measurement year or two years prior to the measurement year:
    - Member CIN (123456789)
    - High Risk HPV/very Collection Date (MM/DD/YYYY)
- Exclusions:
  - Member CIN (123456789)
  - Date of "Total", "Complete", or "Partial" hysterectomy Date (MM/DD/YYYY)

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

**Guidelines for upload notes:**

- Enter data as indicated in the column headings, i.e. MM/DD/YYYY, if the reporting is changed, the data should appear to be accepted and not reflected in the member's data.
- Always confirm that uploaded data is reflected in your Hemerstor (also, Hemerstor days).
- Uploaded data is subject to an annual audit. Medical Record must be present in the patient's chart.

# Partnership Quality Dashboard (PQD)

## Partnership Quality Dashboard

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**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**  
Dec-23

**Members**  
5,090

**Claims Timeliness**  
82.01% (Fair)  
(24,020/29,289)

### 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 \$	PO Score	Target
ACS_ADMISSION	3.65	N/A	N/A	N/A	\$27,351	\$3,234	22	87
Asthma Medication Ratio	59.52	64.26	1	10	\$3,339	\$36,702	59	84
Avoidable ED/1000	8.04	N/A	N/A	N/A	\$16,533	\$16,784	50	94
Breast Cancer Screening	46.84	50.95	13	26	\$16,260	\$24,202	49	85
Cervical Cancer Screening	49.31	57.64	42	117	\$4,575	\$35,887	52	86
Child and Adolescent Well Care Visits	44.64	48.93	6	187	\$28,207	\$31,041	44	73
Childhood Immunization Status CIS 10	1.53	34.79	N/A	47	\$0	\$39,498	46	68
Colorectal Cancer Screening	33.15	40.23	7	52	\$18,543	\$15,335	46	85
Controlling High Blood Pressure	46.89	59.85	0	39	\$14,556	\$25,621	47	85
Diabetes - HbA1C Good Control	61.31	60.10	4	11	\$25,037	\$15,344	53	84
Diabetes - Retinal Eye exam	44.64	51.09	9	23	\$10,563	\$22,754	43	84
Immunization for Adolescents IMA 2	13.68	35.04	N/A	29	\$0	\$39,498	45	72
PCP Office Visits	1.77	N/A	N/A	N/A	\$19,196	\$14,121	60	94
RAR_READMISSION	0.76	N/A	N/A	N/A	\$25,936	\$4,649	45	87
Well Child First 15 Months	37.50	55.72	1	11	\$23,460	\$28,584	30	62

**Payout Status**  
Your organization has earned **39.80%** of your Total Possible QIP \$.

**Total QIP \$ Earned: \$233,556**  
**Total Remaining QIP \$: \$353,254**

You have earned **39.80%** of your possible points. The Planwide Average to date is **60.81%** giving you an Overall Rank of **57** out of **94** parent organizations. Click "Top 20" or "Bottom 20" to view unblinded PO performance.

**Top 20**

57

94

**Bottom 20**

**Provider Score**

58.89
51.25
43.55
35.56
34.44
28.75
26.67
12.35

Eureka | Fairfield | Redding | Santa Rosa

ACCREDITED  
NCQA  
HEALTH PLAN  
ACCREDITED

# Preventative Care Reports


## QIP - eReports

- Home
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- Preventative Care Reports**
- FAQ
- Help

### Preventive Care Reports

View: Original
Share

Summary Information
CIS\_0-2 Yrs
IMA\_9-13 Yrs
6+Visits by 15Months
Annual Well Care Visits



#### Preventive Care Reports

These reports are supplemental to eReports and do not indicate measure compliance. The source of data is PHC's administrative data only. Dates of service that have been uploaded into eReports are not visible in these reports.

Immunization Dose Reports  
The intent of the immunization dose reports is to enhance visibility of immunizations given, including for members not yet in the annual denominators for the Child Immunization Status and Immunizations for Adolescents measures. Data sources for this report include California Immunization Registry (CAIR) data, PHC's claims and encounter data, and immunization data received through PHC's Clinical Data Repository.

Well Care Reports  
Like the Immunization reports, Well Care reports promote visibility of well visits completed for members who are not yet in the denominator for the Well Child Visits in the First 15 Months and the Child and Adolescent Well Care measures. The data source for these reports is PHC's claims and encounter data. Note that dates of service must be a minimum of 14 days apart to count towards numerator compliance.

Recommended Use

- Use reports to engage with members sooner, to help keep members on track with recommended immunization schedules and well care visits.
- Review service dates against measure requirements, to determine if members still require additional dates of service before aging out of the measure.
- If immunization dates of service are not captured on this report, please report them in CAIR. This will help to ensure data is captured administratively in eReports.

Important Notes

- Reports may not include recent dates of service due to claims lag (up to 3 months) and the timeframe by which PHC integrates CAIR data (typically a 4-6 week lag).
- Duplicate immunization dates, or 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. Confirm all service dates in eReports and against measure specification to ensure compliance.

#### Frequently Asked Questions

Q. Members with letter 'E' in their Client ID Number (CIN) show up with scientific notation formatting when I download the report.  
A. This is due to Excel's auto-formatting. To fix this, open a new workbook and import the downloaded immunization report as a text file.

- Select the Data tab from the ribbon
- Select 'From Text' under Get External Data menu
- Locate your report from the folder it was downloaded to. Click Import.
- Use the Import Wizard to import the file
  - Step 1. Delimited data type (Next)
  - Step 2. Tab delimited check (Next)
  - Step 3. Highlight the column for CIN and change the column data format to Text (Finish, OK)

Q. Why are there more or less columns in the report for each vaccine-type than number of doses required for the series?  
A. The number of immunization columns reflects the maximum number of dates of service for any given member in the report. If none of the members had any doses under a vaccine-type, there will be no placeholder columns for that vaccine. If a single member had many different dose dates under a series, that number of columns will display under the series. To confirm the number of required doses in a series refer to the QIP measure specifications document for Childhood Immunization Status and Immunizations for Adolescents measures.

Q. The columns showing dates of service are not in a standard date format when I export the dose report.  
A. To fix this, highlight all columns in the exported report that should show dates of service. On the Excel ribbon, change the format from General to Short Date.



# Childhood Immunization Status (CIS 10)

Summary Information | 
 CIS\_0-2 Yrs | 
 IMA\_9-13 Yrs | 
 6+Visits by 15Months | 
 Annual Well Care Visits



## Vaccine Dose Report

### Childhood Immunization Status - Combo 10 (CIS-10) Immunization Dates of Service

#### Export Instructions:

- Select PCP(s) and apply age filter if preferred.
- Click anywhere in the gray space below the "Updated" date to actively select the data.
- Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

#### Urgency Flag:

- 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

Year of Age 2

PCP Name - ID#

Parent Organization: [Redacted]  
 Updated: 2/9/2024 7:57:57 PM

PCP Name - ID#	Mbr CIN	Mbr DOB	Mbr Ethnicity Code Desc	Current Age (Months)	Month of Age 2	Urgency	Phone	Mbr Full Name First	Address	Hep A Illness	Hep B Illness	Measles Illness	Mumps Illness	Rubella Illness	VZV Illness	Null	DTaP1	DTaP2
	[Redacted]	5/6/2022	WHITE	21	May 2024	Very Urgent		[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		6/30/2022	9/7/2022
	[Redacted]	12/13/2019	UNKNOWN	50	December 2..	Over 2 Years	(510) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		2/27/2020	5/14/2020
	[Redacted]	7/6/2020	UNKNOWN	43	July 2022	Over 2 Years	(530) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		11/11/2020	1/11/2021
	[Redacted]	7/24/2020	HISPANIC	43	July 2022	Over 2 Years	(530) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		9/24/2020	11/30/2020
	[Redacted]	3/11/2021	WHITE	35	March 2023	Over 2 Years	(916) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		5/17/2021	7/13/2021
	[Redacted]	9/16/2021	HISPANIC	29	September ..	Over 2 Years		[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		2/9/2022	5/16/2022
	[Redacted]	1/26/2022	UNKNOWN	25	January 20..	Over 2 Years		[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		3/31/2022	5/18/2022
	[Redacted]	5/8/2022	WHITE	21	May 2024	Very Urgent		[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		8/17/2022	10/19/2022
	[Redacted]	9/12/2020	UNKNOWN	41	September ..	Over 2 Years	(530) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		10/11/2022	11/15/2022
	[Redacted]	3/19/2019	UNKNOWN	59	March 2021	Over 2 Years	(530) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		6/10/2019	9/9/2019
	[Redacted]	8/15/2019	UNKNOWN	54	August 2021	Over 2 Years	(530) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		10/16/2019	5/7/2020
	[Redacted]	3/22/2022	WHITE	23	March 2024	Very Urgent		[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null			
	[Redacted]	1/22/2020	WHITE	49	January 20..	Over 2 Years	(530) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null			
	[Redacted]	4/25/2019	WHITE	58	April 2021	Over 2 Years	(408) ..	[Redacted]	[Redacted]	Null	Null	Null	Null	Null	Null		6/21/2019	8/30/2019





# Immunizations for Adolescents (IMA)

View: Original | Summary Information | CIS\_0-2 Yrs | IMA\_9-13 Yrs | 6+Visits by 15Months | Annual Well Care Visits



## Vaccine Dose Report

### Immunizations For Adolescents - Combination 2 (IMA-2) Immunization Dates of Service

#### Export Instructions:

- Select PCP(s) and apply age filter if preferred.
- Click anywhere in the gray space below the "Updated" date to actively select the data.
- Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

#### Urgency Flag:

- Members currently 13 years or older: "13+"
- Members age 12: "Very Urgent"
- Members age 11: "Urgent"
- Members age 10: "Priority"
- Members age 9: "Time Permitting"

Year Age 13  
(All)

PCP Name - ID#  
(All)

- (All)
- 2023
- 2024
- 2025
- 2026
- 2027
- 2028

Month of Birth	Urgency	Year Age 13	Null	HPV/1	HPV/2	HPV/3	MCV/1	MCV/2
September 2023	Age 13+	2024						
September 2023	Age 13+	2023		11/9/2022	8/11/2023			
October 20..	Age 13+	2024		6/9/2023			6/9/2023	
July 2026	Urgent	2026						
November ..	Age 13+	2023						
May 2025	Very Urgent	2025						
July 2026	Urgent	2026						
October 20..	Very Urgent	2025						
August 2023	Age 13+	2023						
June 2024	Age 13+	2024		8/18/2023				
June 2024	Age 13+	2024						
January 20..	Age 13+	2024		8/17/2023			8/17/2023	
October 20..	Very Urgent	2025						
July 2024	Age 13+	2024		11/15/2023	8/20/2023		8/18/2023	





# Well Child Visits in the First 15 months (W15)

View: Original | Summary Information | CIS\_0-2 Yrs | IMA\_9-13 Yrs | **6+Visits by 15Months** | Annual Well Care Visits | Share

Well Care Reports

**Well-Child Visits in the First 15 Months**

**Export Instructions:**  
 -Select PCP(s) and apply age filter if preferred.  
 -Click anywhere in the gray space below the "Updated" date to actively select the data.  
 -Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

Year Date 15 Months: (All) | PCP Name - ID#: (All)

Parent Organization: [Redacted]  
 6+Visits by 15 Months  
 Updated: 2/9/2024 7:01:59 PM

Parent Organization	PCP Name - ID#	CIN	DOB	Mbr Ethnicity C..	Mbr Language	Mbr Full Name First	Mbr Address 1	Mbr Address 2	Mbr Address 3	Mbr Address 4	Mbr Address 5	Current Age (Yrs)	Current Age (Months)	#DOS < 15 Mos	Date 15 Months
[Redacted]	[Redacted]	[Redacted]	1/9/2021	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-2661	3	37	0	4/9/2022
[Redacted]	[Redacted]	[Redacted]	9/18/2022	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-3506	1	16	0	12/17/2023
[Redacted]	[Redacted]	[Redacted]	12/27/2021	HISPANIC	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-2082	2	25	0	3/27/2023
[Redacted]	[Redacted]	[Redacted]	1/20/2021	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-3936	3	37	0	4/20/2022
[Redacted]	[Redacted]	[Redacted]	12/24/2022	HISPANIC	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-4141	1	13	1	3/23/2024
[Redacted]	[Redacted]	[Redacted]	1/4/2023	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-4717	1	13	1	4/3/2024
[Redacted]	[Redacted]	[Redacted]	1/17/2022	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	REDDING	CA	96003	2	25	7	4/17/2023
[Redacted]	[Redacted]	[Redacted]	1/3/2023	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-9009	1	13	1	4/2/2024
[Redacted]	[Redacted]	[Redacted]	9/30/2022	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-3720	1	16	0	12/29/2023
[Redacted]	[Redacted]	[Redacted]	9/5/2023	HISPANIC	SPANISH	[Redacted]	[Redacted]	[Redacted]	REDDING	CA	96049	0	4	1	12/4/2024
[Redacted]	[Redacted]	[Redacted]	12/23/2022	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-2733	1	13	1	3/22/2024
[Redacted]	[Redacted]	[Redacted]	10/21/2020	UNKNOWN	SPANISH	[Redacted]	[Redacted]	[Redacted]	CORNING	CA	96021-2075	3	39	0	1/19/2022
[Redacted]	[Redacted]	[Redacted]	7/21/2022	HISPANIC	SPANISH	[Redacted]	[Redacted]	[Redacted]	RED BLUFF	CA	96080-3511	1	18	0	10/19/2023
[Redacted]	[Redacted]	[Redacted]	7/11/2023	UNKNOWN	ENGLISH	[Redacted]	[Redacted]	[Redacted]	CORNING	CA	96021-2071	0	6	1	10/9/2024





# Child & Adolescent Well Care Visits

View: Original

Share

Summary Information | CIS\_0-2 Yrs | IMA\_9-13 Yrs | 6+Visits by 15Months | **Annual Well Care Visits**



## Well Care Reports

### Child and Adolescent Well Care Visits

#### Export Instructions:

- Select PCP(s) and apply age filter if preferred.
- Click anywhere in the gray space below the "Updated" date to actively select the data.
- Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

Ages 3 - 17 in 2023: DOB 1/1/2006 - 12/31/2020

Year of DOB: (Multiple values) PCP Name - ID#: (All)

Parent Organization: [REDACTED]

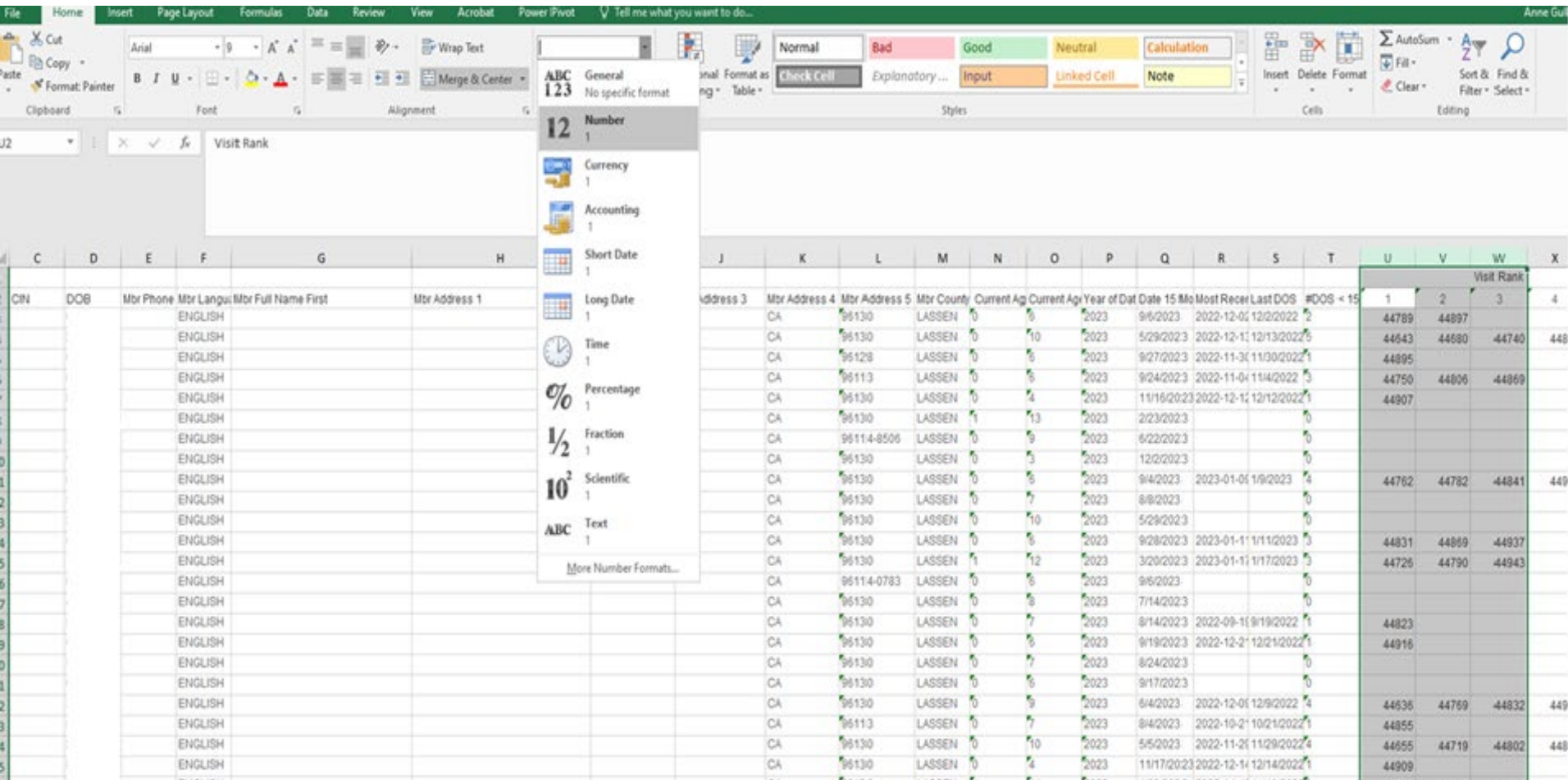
Annual WellCare Visit  
Updated: 2/9/2024 7:01:59 PM

PCP Name - ID#	CIN	Mbr ID	DOB	Mbr Ethnicity C..	Mbr Language	Current Age (Yrs)	Mbr Phone	Mbr Full Name First	Mbr Address 1	Mbr Address 2	Mbr Address 3	Mbr Address 4	Mbr Address 5	Compliance Flag (WCV)	Most Recent Well Visit
[REDACTED]	[REDACTED]	[REDACTED]	6/10/2017	WHITE	ENGLISH	6		[REDACTED]	[REDACTED]	[REDACTED]	MOUNT S..	CA	96067	N	Null
[REDACTED]	[REDACTED]	[REDACTED]	5/17/2010	WHITE	ENGLISH	13	(916) 61..	[REDACTED]	[REDACTED]	[REDACTED]	WEED	CA	96094	N	2022-09-14.. 1/20/2021
[REDACTED]	[REDACTED]	[REDACTED]	8/27/2006	WHITE	ENGLISH	17	(530) 27..	[REDACTED]	[REDACTED]	[REDACTED]	WEED	CA	96094	N	2023-09-06.. 2/22/2023
[REDACTED]	[REDACTED]	[REDACTED]	1/14/2014	WHITE	ENGLISH	10		[REDACTED]	[REDACTED]	[REDACTED]	MOUNT S..	CA	96067	Y	2024-01-31.. 1/31/2024
[REDACTED]	[REDACTED]	[REDACTED]	6/13/2017	UNKNOWN	ENGLISH	6		[REDACTED]	[REDACTED]	[REDACTED]	WEED	CA	96094	N	2023-10-11.. 7/5/2017
[REDACTED]	[REDACTED]	[REDACTED]	1/28/2007	WHITE	ENGLISH	17		[REDACTED]	[REDACTED]	[REDACTED]	DUNSMUIR	CA	96025	N	2023-11-01.. 11/2/2020
[REDACTED]	[REDACTED]	[REDACTED]	12/20/2007	WHITE	ENGLISH	16	(530) 96..	[REDACTED]	[REDACTED]	[REDACTED]	MCCLOUD	CA	96057	N	2021-05-07.. 6/26/2019
[REDACTED]	[REDACTED]	[REDACTED]	6/9/2007	BLACK	ENGLISH	16	(760) 84..	[REDACTED]	[REDACTED]	[REDACTED]	MOUNT S..	CA	96067	N	2022-12-09.. 12/9/2022
[REDACTED]	[REDACTED]	[REDACTED]	2/15/2015	WHITE	ENGLISH	8	(530) 34..	[REDACTED]	[REDACTED]	[REDACTED]	MOUNT S..	CA	96067	N	2023-04-14.. 3/5/2020
[REDACTED]	[REDACTED]	[REDACTED]	12/30/2010	WHITE	ENGLISH	13	(707) 70..	[REDACTED]	[REDACTED]	[REDACTED]	WEED	CA	96094	N	2023-12-08.. 9/28/2016
[REDACTED]	[REDACTED]	[REDACTED]	6/19/2012	WHITE	ENGLISH	11	(530) 55..	[REDACTED]	[REDACTED]	[REDACTED]	MOUNT S..	CA	96067	N	2023-12-13.. 7/6/2017
[REDACTED]	[REDACTED]	[REDACTED]	7/4/2016	UNKNOWN	ENGLISH	7	(530) 60..	[REDACTED]	[REDACTED]	[REDACTED]	REDDING	CA	96001	N	2021-06-03.. 11/21/2016
[REDACTED]	[REDACTED]	[REDACTED]	4/3/2016	WHITE	ENGLISH	7		[REDACTED]	[REDACTED]	[REDACTED]	MOUNT S..	CA	96067	N	2023-11-08.. 7/27/2021





# How to download reports



The screenshot shows an Excel spreadsheet with a data table. The 'Number' format dropdown menu is open, showing various options like 'General', 'Currency', 'Percentage', etc. The 'Visit Rank' column is highlighted in green. The data table includes columns for patient information and visit details.

C	D	E	F	G	H	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X
CIN	DOB	Mbr Phone	Mbr Lang	Mbr Full Name First	Mbr Address 1	Address 3	Mbr Address 4	Mbr Address 5	Mbr County	Current Ag	Current Ag	Year of Dat	Date 15 Mo	Most Recel	Last DOS	#DOS < 15	1	2	3	4
			ENGLISH			CA	96130	LASSEN	7	6	2023	9/6/2023	2022-12-05	12/2/2022	2		44789	44897		
			ENGLISH			CA	96130	LASSEN	7	10	2023	5/29/2023	2022-12-11	12/13/2022	5		44543	44680	44740	448
			ENGLISH			CA	96128	LASSEN	7	6	2023	9/27/2023	2022-11-30	11/30/2022	1		44895			
			ENGLISH			CA	96113	LASSEN	7	6	2023	9/24/2023	2022-11-04	11/4/2022	3		44750	44806	44869	
			ENGLISH			CA	96130	LASSEN	7	4	2023	11/16/2023	2022-12-12	12/12/2022	1		44907			
			ENGLISH			CA	96130	LASSEN	7	13	2023	2/23/2023								
			ENGLISH			CA	96114-8506	LASSEN	7	9	2023	6/22/2023								
			ENGLISH			CA	96130	LASSEN	7	3	2023	12/2/2023								
			ENGLISH			CA	96130	LASSEN	7	6	2023	9/4/2023	2023-01-05	1/9/2023	4		44762	44782	44841	449
			ENGLISH			CA	96130	LASSEN	7	7	2023	8/8/2023								
			ENGLISH			CA	96130	LASSEN	7	10	2023	5/29/2023								
			ENGLISH			CA	96130	LASSEN	7	6	2023	9/28/2023	2023-01-11	1/11/2023	3		44831	44869	44937	
			ENGLISH			CA	96130	LASSEN	7	12	2023	3/20/2023	2023-01-11	1/17/2023	3		44726	44790	44943	
			ENGLISH			CA	96114-0783	LASSEN	7	6	2023	9/6/2023								
			ENGLISH			CA	96130	LASSEN	7	6	2023	7/14/2023								
			ENGLISH			CA	96130	LASSEN	7	7	2023	8/14/2023	2022-09-11	9/19/2022	1		44823			
			ENGLISH			CA	96130	LASSEN	7	6	2023	9/19/2023	2022-12-21	12/21/2022	1		44916			
			ENGLISH			CA	96130	LASSEN	7	7	2023	8/24/2023								
			ENGLISH			CA	96130	LASSEN	7	6	2023	9/17/2023								
			ENGLISH			CA	96130	LASSEN	7	9	2023	6/4/2023	2022-12-05	12/9/2022	4		44536	44769	44832	449
			ENGLISH			CA	96113	LASSEN	7	7	2023	8/4/2023	2022-10-21	10/21/2022	1		44855			
			ENGLISH			CA	96130	LASSEN	7	10	2023	5/5/2023	2022-11-26	11/29/2022	4		44555	44719	44802	448
			ENGLISH			CA	96130	LASSEN	7	4	2023	11/17/2023	2022-12-14	12/14/2022	1		44909			

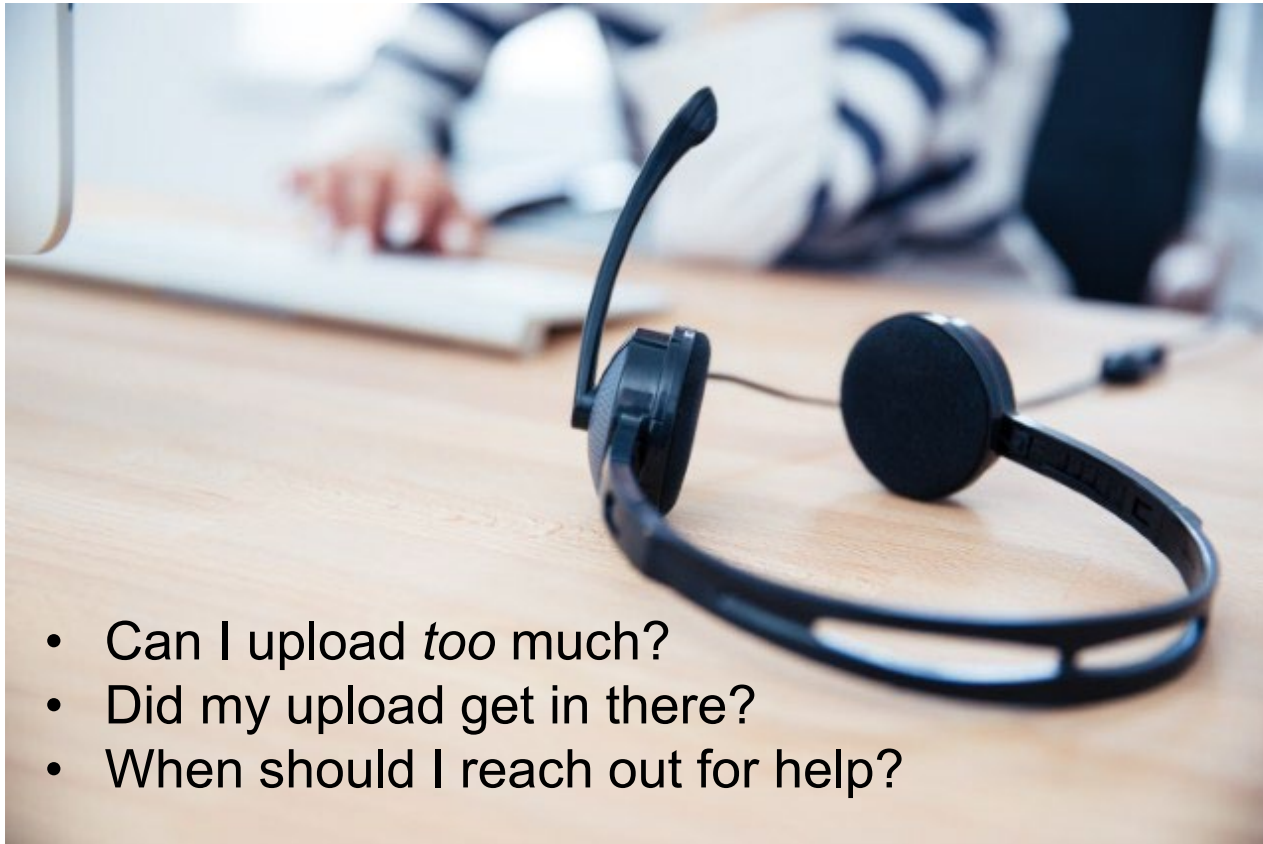
# eReports Audit



## Annual Audit on Uploaded Data!

# 2024 Upload Best Practices

## ADMINISTRATIVE DATA vs UPLOADS HELP ME STRATEGIZE!



- Can I upload *too* much?
- Did my upload get in there?
- When should I reach out for help?

# Best Practices to be successful in PCP QIP

- **Can I upload too much/did my upload accept into eReports?** Each template can only include 100 lines. Once the template is uploaded, eReports will provide you a message letting you know that your upload was successfully submitted. Please take a screen shot of this for documentation purposes in case your upload did not take or you have a question about your upload after eReports refreshes.
- **Upload only once for each DOS.** For example, if you upload on Tuesday for multiple DOS for a member and you don't see your data or DOS change after the eReports refresh (**allow 7 days**), do not upload again. Reach out to the QIP inbox and one of us is able to assist you from there. There may be a specific reason why your upload did not take and we may be able to identify that reason for you.
- **When uploading DOS for vaccines/well care visits, please make sure the DOS was NOT already uploaded via CAIRs or claims.** You can use the Preventive Care Dashboard in your verification or the eReports member details for the specific member you are uploading for. There is up to a 90 day lag (most claims are processed within 30 days) with claims and a 4-6 weeks lag with CAIRs. Sometimes a typo happens and a different DOS is submitted with uploads which can violate the 14 day rule and prohibits the member from being able to become a numerator compliant. If this happens, the member will remain in your denominator and you need to wait until the end of the year to see this change when we submit manual adjustments. There is no need to upload for a member if a claims or CAIRs DOS was already submitted and can be seen in eReports.

# Best Practices to be successful in PCP QIP

- **Rotavirus vaccines-** Verify the billed CPT code. Be sure to verify which vaccines is being given, either the 2-dose or 3-dose vaccine. If a 2 dose is being given, verify the patient has 2 DOS submitted or uploaded. The same goes for the 3 dose, verify the patient has 3 DOS submitted or uploaded.
- **For each subset of vaccinations, there MUST be at least 14 days in between each vaccination.** For example: If the first vaccination was given at 12/1, the next vaccination from any data source to count towards the measure, would have to be given on 12/15 or later. A vaccination with a DOS of 12/14 wouldn't qualify since it violates the 14 day rule and the member would remain in your denominator.
- **We highly recommend for our providers to review the CDC recommended child and adolescent immunization schedule prior to scheduling and administering vaccinations.** The link to this website is in our specs under the CIS10 & IMA measures. PHC follows these guidelines.

# Best Practices to be successful in PCP QIP

- **If possible, designate one person to provide claims, CAIRs or upload data.** We have noticed that when multiple users are submitting DOS for vaccinations or well care visits and DOS get missed, duplicated or submitted for the wrong date.
- **Carefully review and follow the upload template guidelines.** Make sure the DOS formatting is correctly inputted as MM/DD/YYYY. For HbA1c, the A1c values must be formatted the same as shown on the template. For example, if a patient has a HbA1c result of 7.1, the template requires a zero be placed in front of the seven (07.1). If this formatting is not used, your upload will most likely not be captured. If there are multiple columns to enter a DOS, please verify the DOS was placed in the correct column before submitting your upload template.
- **If a patient was provided a service prior to becoming a PHC member or prior to being assigned to a Parent Org,** please use the upload option to submit this data to PHC so you receive credit for this member.



# Improvement Academy - Upcoming 2024 Trainings

## Improving Measure Outcomes Webinar Series: February - April 2024

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

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.

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. CME/CEs are available.

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

### Planned 2024 sessions include:

- February 28, 2024 - Preventative Care for 3 - 17 Year Olds
- March 13, 2024 - Chronic Disease
- March 27, 2024 - Diabetes Management
- April 10, 2024 - Women's Cancer Screenings
- April 24, 2024 - Women's Sexual and Reproductive Health

Registration: [http://www.partnershiphp.org/Providers/Quality/Pages/Quality\\_Events.aspx](http://www.partnershiphp.org/Providers/Quality/Pages/Quality_Events.aspx)

Contact: [improvementacademy@partnershiphp.org](mailto:improvementacademy@partnershiphp.org)



# Improvement Academy - Upcoming 2024 Trainings

## **ABCs of Quality Improvement**

Wednesday, March 20 - 8:30 a.m. to 4:30 p.m. - **IN PERSON**

### **The McConnell Foundation**

800 Shasta View Drive, **Redding**

*Breakfast and lunch provided*

*The ABCs of Quality Improvement is a one-day in person training designed to teach you the basic principles of quality improvement.*

***The 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. Excellent refresher course for repeat attendees or skill-builder for new quality professionals.***

*CME/CEs available.*

*Register:*

*[www.partnershiphp.org/Providers/Quality/Pages/Quality\\_Events.aspx](http://www.partnershiphp.org/Providers/Quality/Pages/Quality_Events.aspx)*

*Contact: [cackerman@partnershiphp.org](mailto:cackerman@partnershiphp.org)*





# Questions

**If you have additional questions or would like a 1:1 overview of eReports, please contact our QIP Team at:**

**[QIP@PartnershipHP.org](mailto:QIP@PartnershipHP.org)**

