

# QIP Manager

# MONTHLY FORUM

---

Monday, December 16, 2019  
12:00 to 12:45pm

[Play recording](#)

# Agenda

---

Time	Topic	Lead(s)
5 min	<b>Welcome &amp; Roll-Call</b>	Kristina Mody
10 min	<b>Program &amp; Reporting Updates</b>	
25 min	<b>QIP &amp; PRIME Program Evolution</b> <ul style="list-style-type: none"><li>• Q&amp;A</li></ul>	
5 min	<b>Wrap-up &amp; Announcements</b> <ul style="list-style-type: none"><li>• SNI Events</li></ul>	Kristina

# Roll-Call & Webinar Reminders

AHS	ARMC	CCRMC	KMC	LACDHS	NMC	RUHS	SCVMC	SFHN
Tangerine Brigham, Tanvir Hussain	Rolando Mantilla	Karin Stryker	Tyler Bangerter, Kevin Jenson	Paul Giboney	Jane Finney	Corinne Matthews	Elena Tindall, Vickie Wilson	Rachel Stern
SJGH	SMMC	UCD	UCI	UCLA	UCSD	UCSF	VCMC	
Ahad Yousuf, Farhan Fadoo	Brenda Macedo	Jeff Berg	Scott Thompson	Brandy Bryant	Heather Erwin	Sara Coleman, Clare Connors	Theresa Cho	

## WEBINAR REMINDERS:

**Chat** Questions typed here will only be seen by CAPH/SNI Staff, who will repeat question and answer for group

**Attendance** Designate one person (QIP lead or project lead) to speak  
Contact [Abby](#) if you want to add other team members

**Recordings** of the webinar and slide deck posted on [SNI Link/QIP/Webinars](#)

**[QIP Contact List & Leads](#)** posted on SNI Link

Updates to leads? Additions/deletions to team?

Please contact [Abby](#)

# Reporting & Program Updates

---



# PY2 Reporting

---

## CONGRATULATIONS

on completing PY2 reporting!

**REMINDER:** Please send, in a secured email, the excel & pdf downloads to [Dana Pong](#).

**FUTURE:** Review of PY2 data and achievement across health systems will be covered on the Jan QIP Leads webinar.



# PY3 Reporting Reminders

---

- ✓ 6/24/19: Measure additions/removals released on [DHCS QIP site](#)
- ✓ 7/24/19: Benchmarks v2 released
- ✓ 10/22/19: Q-RU-5 & Q-RU-6 NDC Codes & MMEs posted on [SNI Link](#)
- ✓ 11/22/19: Reporting Manual released on [SNI Link](#)
- ✓ \*new\* 12/3/19: Reporting Manual Walkthrough Webinar on [SNI Link](#)
- ✓ \*new\* 12/10/19: PY3 Value Sets by Measure for MCPs on [DHCS QIP site](#)
- 12/15/20: PY3 report due

# Plan Data Sharing

- Reminder: IEHP Data Sharing Template is available as a resource on the [DHCS QIP site](#) and on [SNI Link](#).

	A	B	C
1	Member File	This file contains Members assigned to [MCP Name] and [DPH Name] Prc	
2			
3	Column Name	Column Format	Column Notes
4	IEHP-ID	12 CHAR	
5	LAST_NAME	20 CHAR	
6	FIRST_NAME	12 CHAR	
7	MIDDLE	1 CHAR	
8	DATE_OF_BIRTH	MM/DD/YYYY	
9	GENDER	1 CHAR	SEE GENDER TAB FOR VALUES
10	RACE	50 CHAR	SEE ETHNICITY-VALUES TAB FOR VALUES
11	Ethnicity	50 CHAR	SEE ETHNICITY-VALUES TAB FOR VALUES
12	Language_Written	50 CHAR	WRITTEN LANGUAGE. SEE LANGUAGE-VALUES TAB
13	SSN	9 CHAR	

- SNI to re-survey on Plan-DPH Data Sharing in early 2020

# Deceased but Still Enrolled

---

- Scenario: DPH learns a patient has died but is remaining on the MCP enrollment files & based on those enrollment files meets metric(s)' continuous eligibility criteria.
- Options are different for PY2 and PY3.
- PY2: System must include that patient in that measure's denominator.
- PY3: System must:
  - Exclude patients who have died any time during the applicable continuous enrollment/assignment period
  - Notify the patient's MCP of the patient's death
  - Include in its data methodology narrative the # patients removed from the metric denominator for this reason.
- Language added to PY3 General Guidance, Measure Exclusions, Other Exclusions, Deceased Patients



# PY3.5 Reporting Reminders

---

- ✓ 7/24/19: QIP PY3 Benchmarks v2 released on [SNI Link](#)
- ✓ 11/15/19: PRIME DY15 Benchmarks v3 released on [DHCS PRIMEone](#)  
(Pending: *Controlling High BP*, updated 2.1.6 *Postpartum*)
- ✓ 10/22/19: Q-RU-5 & Q-RU-6 NDC Codes & MMEs posted on [SNI Link](#)
- 12/31/19: QIP PY3.5 Manual to be released on [SNI Link](#)  
(PRIME DY15 /QIP PY3 Manuals updated with PY3.5 period)
- 12/31/19: PY3.5 Value Sets by Measure for MCPs on [DHCS QIP site](#)  
(Same as DY15/PY3 except Postpartum which uses HEDIS 2020 value sets)
- CY2020 PY3.5 measurement period
- **3/20/21**: PY3.5 report due for “PRIME” measures
- **6/15/21**: PY3.5 report due for QIP measures

# PY3.5 Prenatal vs Postpartum Denominators

---

- Prenatal and Postpartum care differences in Eligible Population “Event/Diagnosis”
  - HEDIS 2019 (Pre-Natal metric):
    - Delivered a live birth on or between November 6 of the year prior to the MY and November 5 of the MY.
  - HEDIS 2020 (Postpartum metric):
    - Delivered a live birth on or between October 8 of the year prior to the MY and October 7 of the MY.

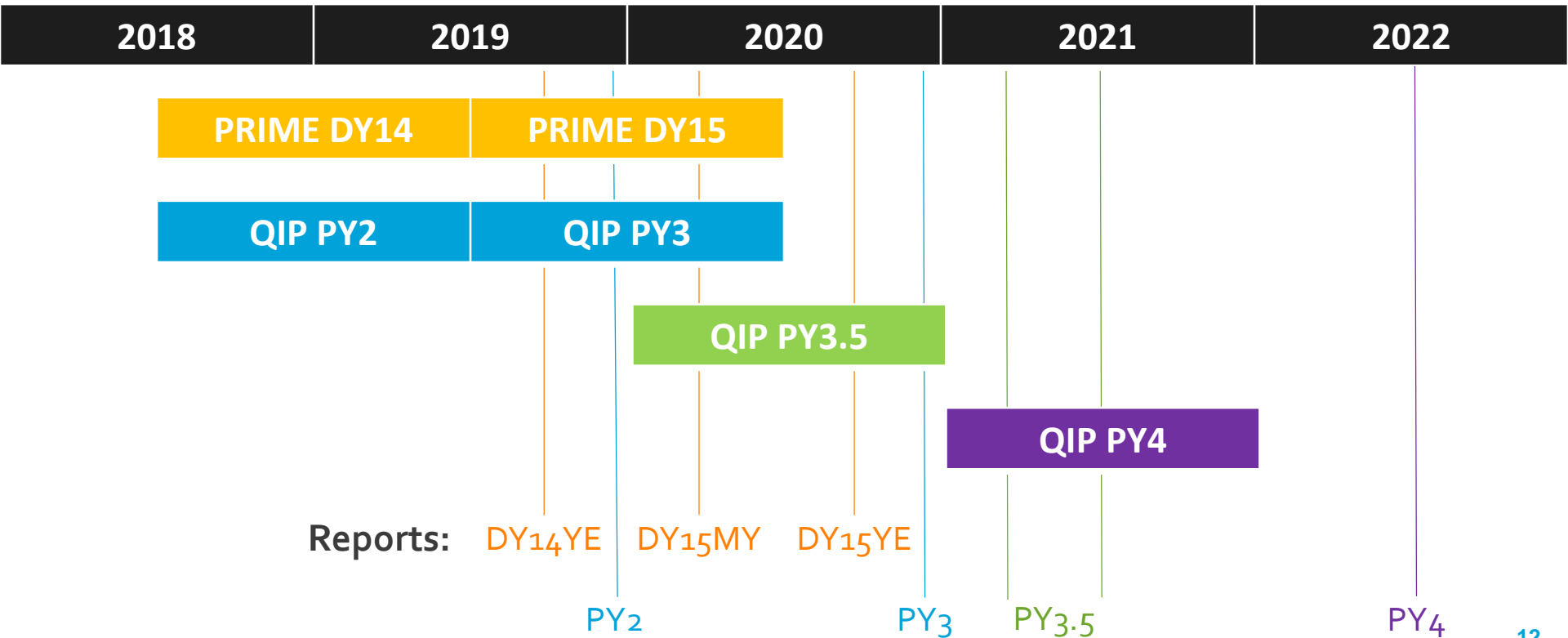
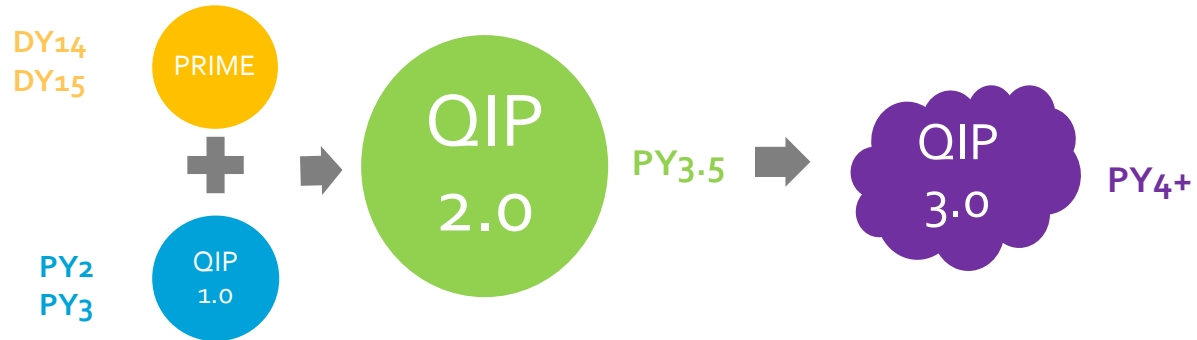
# QIP Evolution

---



# QIP Evolution

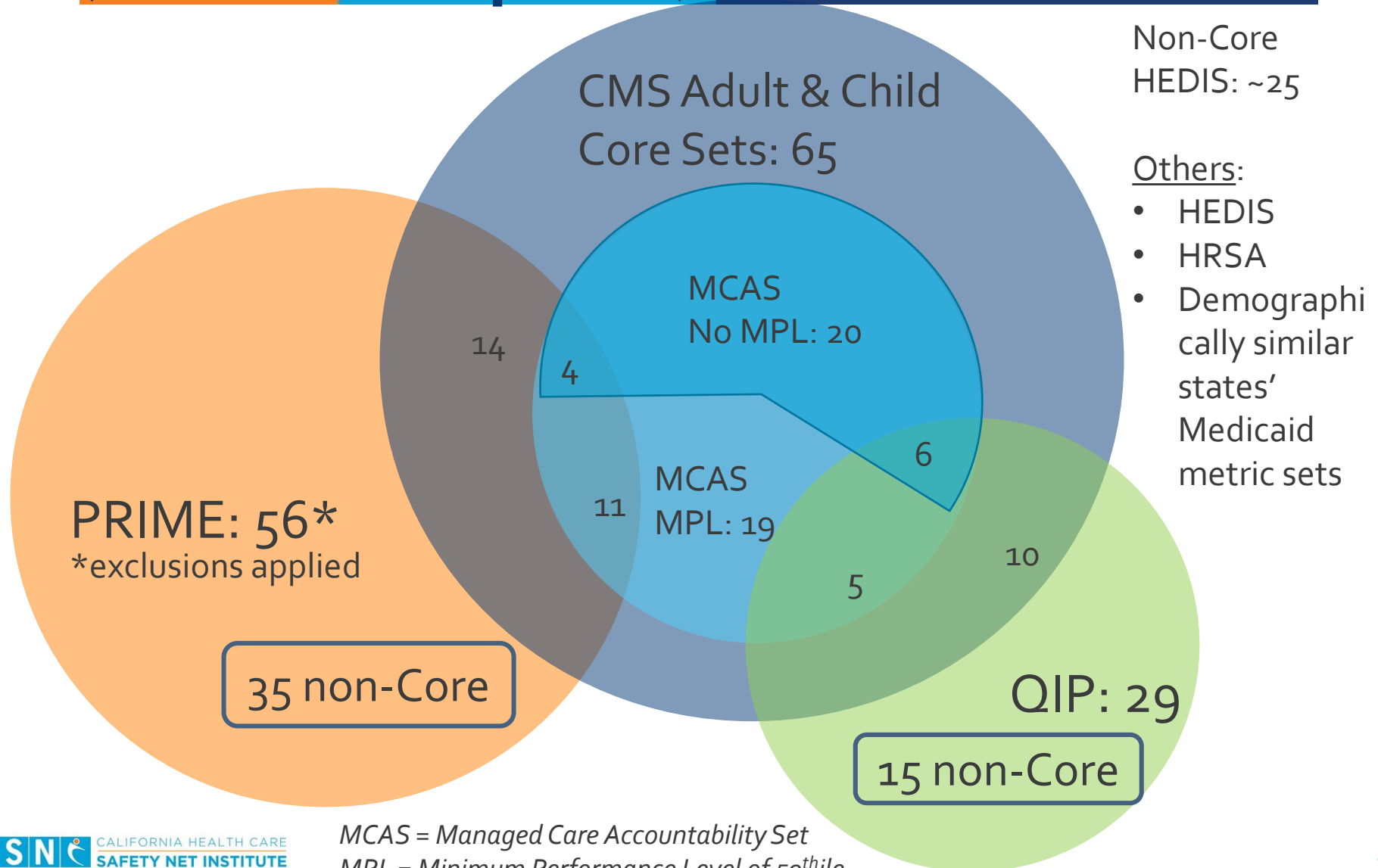
[See 8/26 QIP Webinar recording](#) for  
overview of QIP Evolution



# Development Process & Timeline

Date	Task
Sep 2019 – Jan 2020	SNI, DHLF, DHCS collaborates to identify a draft metric set (~80) <ul style="list-style-type: none"> <li>SNI engages CAPH &amp; SNI Boards, CAC, MTAC for guidance</li> </ul>
Jan 2020 Feb 2020 Mar 2020 Apr 2020	Draft metric set released for stakeholder input <ul style="list-style-type: none"> <li>DPH and DMPH input (via survey)</li> <li>CAPH/SNI &amp; DHLF internal committee and Board input</li> <li>Managed Care Plan input via survey (as done with PY3 menu)</li> </ul>
May 2020	QIP Quality Advisory Group recommendations
June 2020?	DHCS Approval of ~60 metric set for inclusion in Pre-Print to CMS
<b>?</b>	<b>DHCS submission of, and CMS approval, of Pre-Print</b>
Nov 2020	Reporting Manual completed
Dec 2020 (earlier if possible)	Benchmarks released
Jan 1, 2021	Program Year 4 begins

# Alignment with DHCS (and health plans)



# Metrics for Consideration

Metric Type in order of Priority	# Metrics	Comments
Core Sub-Total	38	
Non-Core HEDIS	22	Incl: 3 in 2020; Excl: 3 SMI, 1 Dentl
Non-Core HRSA/UDS	7	Excl: Depr Remiss_12mos; IVD: Dental
Remaining in PRIME/QIP metrics (exclusions applied)	50	35 PRIME/15 QIP (exl MSSA)
TOTAL	112	

# Metrics for Consideration

---

- QIP PY<sub>4</sub> Measure Matrix (current draft)
  - Sent with today's webinar materials or [Link](#)
  - **Disclaimer:** This is a working draft subject to change.
- Two major buckets of metrics
  - CMS Core Set, HEDIS, HRSA reviewed and given thumbs up by DHCS for inclusion in the Draft Metric Set
    - “Y” under “QIP PY<sub>4</sub> Draft Metric Set” column
  - Remaining PRIME & QIP metrics that are not CMS, HEDIS or HRSA and do not meet “exclusion” criteria
    - Blank under “Draft Metric Set” column



# Metrics for Consideration

---

## Please ask your teams:

- Among PRIME & QIP metrics that aren't CMS Core, HEDIS or HRSA (filter "Draft Metric Set" column by "Blanks" only) :
  - Which have been significantly problematic or non-value add and **should not be continued** under QIP?
  - Which have been highly valuable/impactful and definitely **should be included** in QIP?
- Email responses to [David Lown](#) & [Dana Pong](#) by Dec 19<sup>th</sup>.

---

# Questions?

# WRAP UP

---



# Cleaning Up QIP/PRIME Contacts

---

- Week of 12/16: SNI will send PRIME/QIP Leads at your organization list of PRIME and QIP Teams on our contacts lists
- Purpose:
  - Confirm if team members still involved with PRIME/QIP
  - Align PRIME and QIP contact lists as we will likely retire PRIME contact list in 2020
- Contacts lists are used for
  - Webinar distribution (PRIME/QIP Office Hours, QIP Leads)
  - PRIME/QIP Express
  - Email communication



# 2020 Invites

---

- QIP Leads Monthly Webinar – 4<sup>th</sup> Monday 12-1pm
- PRIME/QIP Office Hours – 2<sup>nd</sup> Thursday 12-1pm
- PRIME/QIP Express Emails – 2<sup>nd</sup> week of the month
- Contact [Abby Gonzalez](#) if you have any questions.

# SNI Link

---



SNI Link, SNI's members-only website, is 3 years old!

To help us make it as useful as possible, feel free to take this survey to give us feedback for possible improvements

Survey link:

<https://www.surveymonkey.com/r/DRM7RMS>

# PRIME External Webinar

---

- CAPH/SNI to share PRIME performance data and implementation trends for year four of the program.
- Los Angeles County Department of Health Services and University of California, San Diego, will share experiences

**Transforming Care Delivery  
and Improving Quality  
through PRIME**

**Webinar  
December 16, 1-2 PM PST**



**Share with your  
partners and  
stakeholders!**

[Register now](#)

An archived version of  
the webinar will be  
available [here](#)

# Upcoming Dates

---

**Jan 14 (12-1):** Anchoring PRIME  
Behavioral Health Integration in Practice  
[\[here\]](#)

M	T	W	Th	F
January				
30	31	1	2	3
6	7	8	9	10
13	14	15	16	17



# Appendix

---



# Current Status

---

- Early in development of QIP Program Years 4-8
  - Initial calls with DHCS Office of the Medical Director (OMD)
    - Nature of discussions with OMD
    - Not linked to larger negotiations
  - SNI has engaged CAC, MTAC, SNI Board and CAPH Board to date on general principles and some specific metrics
- Today - Present guiding principles, process and timeline

# PY<sub>4</sub>-8 Overview

---

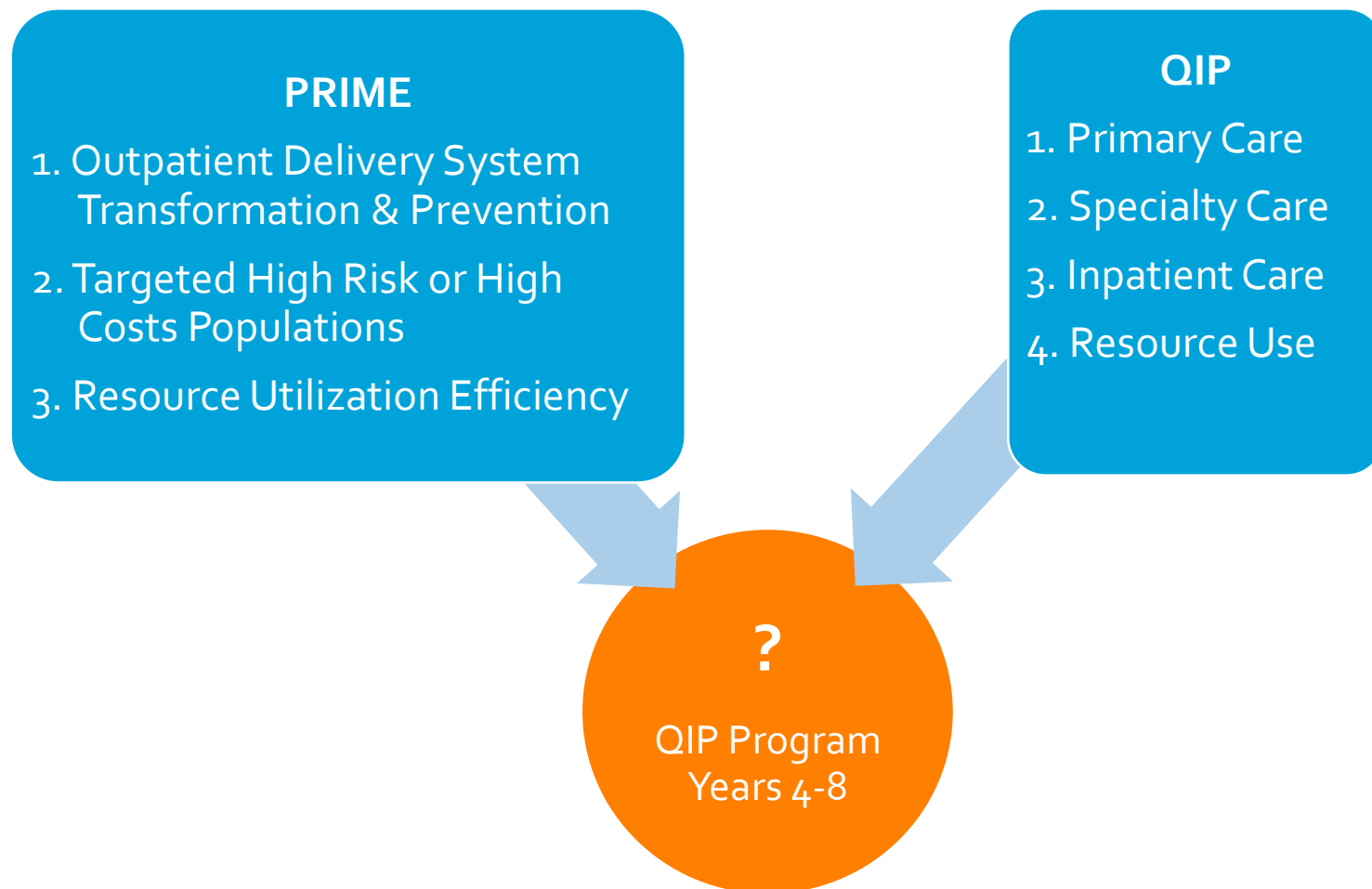
- PY<sub>4</sub>: Jan – Dec 2021, report due 6/15/22
- Participating Entities
  - Designated public hospitals (DPHs)
  - Districts & municipal hospitals (DMPHs)
- Patient population of measurement
  - Per OMD at PRIMEd: “1 Medi-Cal Managed Care beneficiaries per metric denominator” for all QIP measures, including any PRIME measures included in QIP PY<sub>4</sub>+
- Funding Goal: combined PRIME\$+QIP\$

# What are we trying to achieve?

**Improve clinical quality, advance population health, and drive continued system transformation – via a metric set that:**

- Builds on PRIME & QIP's successes and addresses program weaknesses = the "best of" PRIME and QIP + new metrics
- Aligns DPH efforts with DHCS (and therefore health plan) priorities
- Has an optimal # of metrics balancing:
  - organizational focus (not too many metrics)
  - financial risk per metric & choice of metrics (not too few metrics)
- Represents the spectrum of care provided by DPH to Medicaid Managed Care beneficiaries (i.e., different types of members, services and populations)

# Current PRIME & QIP Categories



# QIP PY 4-8 metric categories



- Aim is to measure quality across the continuum of care provided to Medi-Cal managed care beneficiaries by DPHs and to provide DPHs choices among metrics
- May not formalize the categories/domains
- Areas under consideration (driven by CMS Core Measure categories):
  - Primary care access and preventive care
  - Care of acute and chronic conditions
  - Maternal and perinatal health
  - Behavioral health care
  - Appropriate resource use
  - Care coordination, including transitions of care
  - Patient safety
  - Experience of care
  - Dental and oral health services

# Initial Working Assumptions w/DHCS

---

- Metrics should meet minimum criteria as outlined in the current pre-print:
  - Nationally vetted or in wide use across Medicare & Medicaid quality initiatives
  - Medicaid applicable benchmarks
  - NQF endorsed; CMS Medicaid Core Set: or in CMS P4P program
- Reasons not to include a metric:
  - Retired
  - Survey-based
  - Certification-based
  - Explicitly not designed for P4P
  - Has a Licensure Fee
- Need to carefully consider the inclusion of any metric where the population may pose challenges if the DPH does not provide the service, or in terms of reporting:
  - Serious Mentally Ill, Substance Use Disorder, Dental, Small Populations

# Number of metrics

---

- Current
  - PRIME: 56-79 metrics/DPH
  - QIP: 20-26/DPH ( $\geq 20$  out of menu of 29)
  - TOTAL: 76-99 metrics/DPH
- Working agreement with DHCS for QIP PY<sub>4-8</sub>:
  - Final metric set would have ~60 measures
  - DPHs would be required to report on at least ~40 metrics
    - No discussion yet on specific metrics being required for all DPHs
  - Working towards a draft set of 70-80 metrics on which to get feedback from DPHs, DMPHs, and plans in early 2020



# Potential issues with DHCS

---

- Measures should meet minimum criteria as outlined in the current pre-print:
  - Nationally vetted or in wide use across Medicare and Medicaid quality initiatives
  - Medicaid applicable benchmarks
  - NQF endorsed; CMS Medicaid Core Set: or in CMS P4P program
- Strict interpretation of criteria (above) by DHCS OMD may impact our ability to include certain metrics e.g. specialty care, inpatient care
- At the same time, DHCS has interest in advancing value-based payments, and improving productivity, access, & equity - concepts that don't necessarily lend themselves to inclusion in QIP with the above strict criteria.
- Timing
  - Pre-print submission to & approval by CMS
  - PY<sub>4</sub> begins January 2021 -> potential operational & implementation challenges