

# PRIME / QIP Manager MONTHLY FORUM

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Tuesday, May 26, 2020, 12-1PM

[Play recording](#)

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

# Housekeeping

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**Please mute locally.** Lines are also muted on entry.

Please don't use a speakerphone in order to prevent an audio feedback loop, an echo.



At any time, feel free to chat your question & we will read out



Webinar will be recorded and saved on SNI Link: [PRIME Webinars](#) and [QIP Webinars](#)

# Agenda

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1. PRIME Update (15 min)
2. QIP Update (15 min)
3. Telehealth (15 min)
4. Wrap-Up (5 min)

# PRIME Update

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# 1115 Waiver Extension Proposal

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- Update: DHCS began discussions with CMS about a 1 year extension.
- To our best understanding, this would not include PRIME due to the lack of budget neutrality to support a 6th year of PRIME.
- Potential implications:
  - PRIME metrics move into QIP as part of QIP PY3.5 (as originally planned)
  - Higher net funding since QIP has a higher FMAP (federal match) than the Waiver
- CAPH will work to ensure that PRIME is not included in the House's next stimulus package.
- For now, there are no changes to metrics through the end of 2020; only the proposed the PRIME & QIP funding mechanic changes discussed in next slides.

# DHCS' PRIME Proposal to CMS

Same slide as in [5/14 Office Hours](#).  
Status: DHCS still discussing with CMS

**Proposal:** Apply the % of performance and reclaiming of funds earned in DY14 to the DY15 allocation.

- **Step 1: Calculate % of DY14 allocation earned**
  - **A1** = % of DY14 allocation earned thru DY14 performance (before reclaiming) for individual entity
  - **A2** = average % of DY14 allocation earned across all DPH (before reclaiming)
  - **Select the higher of A1 or A2** (written as "A12" below)
- **Step 2: Determine % of funds reclaimed via methods 1, 2 and 3 at the individual PRIME entity level**
  - **B** = % of DY14 allocation earned through Method 1
  - **C** = % of DY13 unearned funds earned through Method 2
  - **D** = % of the total DY14 DPH/DMPH HPP (method 3) that the entity claimed in DY14
- **Step 3: Calculate the final DY15 payment**
  - Total earned in DY15 = DY15 \$ Allocation\*(A12+B) + C\*(DY14 unearned funds) + D\*(DY15 HPP)

# FAQ

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**Q:** What is the timeline for CMS and DHCS to decide on the DY15 and PY3 proposals?

**A:** Hopefully soon. For PRIME proposal, last week DHCS sent revision of PRIME STC's per CMS request = a good sign. For QIP PY3, CMS is reviewing. DHCS anticipates feedback any day now.

**Q:** For PRIME Proposal Step 1, will DHCS choose or will we have to calculate?

**A:** DHCS will calculate the values and select the higher value. DPH will have the opportunity to confirm. David shared DHCS' DY14 % achievements to PRIME leads via email on 5/6.

**Q:** How will the DY15 My payments be reconciled with whatever proposal is ultimately approved?

**A:** The DY15 Year End payment will be calculated according to whatever proposal is approved, truing up the amount paid out at Mid Year.

# FAQ

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**Q:** What will we be required to report at DY15 Year End?

**A:** TBD. SNI predicts that DHCS will likely require reporting of some sort. SNI will be advocating to DHCS that narratives be reported at the project or domain level. SNI & DHCS has not begun discussing Year End reporting yet, as we've been focused on the larger funding mechanics issue.

**Q:** If we had an EHR transition during DY15, wouldn't this proposal make our plan modification of modified targets moot?

**A:** Yes. If CMS approves DHCS' PRIME proposal, then target modifications would be unnecessary. If not and DY15 \$ is based on DY15 target achievement, then you would need to submit a plan modification before the June 30th, 2020 deadline.

# PRIME Reminders

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## DY14 YE Report

Email report to [Dana](#) after DHCS closes out clinical/ detailed review

## DY14 Suppl. Claim.

Email forms to [Dana](#) after you and DHCS finalize the forms. DHCS to finish sending forms with finalized HPP amounts this week. IGT letters are expected to go out prior to June 30.

## DY15 MY Report

Email report to [Dana](#) after you submit to DHCS.

# QIP Update

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# DHCS' QIP Proposal to CMS

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- PY3 Proposal:
  - Performance period = March 1, 2019-Feb 29, 2020
  - Performance threshold equal to the 25<sup>th</sup>ile/minimum performance benchmark (instead of a 5 % gap closure)
  - Report due Dec 15, 2020

Same slide as in [5/14 Office Hours](#).  
Status: DHCS still discussing with CMS

# FAQ

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**Q:** Under the proposal, would we still have to meet the requirement that the measure had denominator >30 in PY2 in order to report on it in PY3 for payment?

**A:** TBD. SNI will advocate this to DHCS.

**Q:** When will we know what will happen to PY3.5 and PY4?

**A:** TBD. Because the official program period starts July 1, DHCS has not yet made any proposals to CMS. SNI is thinking through possibilities and will discuss with CAC & MTAC in the next month or so.

# NCQA Measure Certification Update

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## *Update from [9/23/19 QIP Leads Webinar](#)*

- *Organizations interested in offering a product or service using NCQA's HEDIS measures or the IHA AMP measures must first earn [NCQA Measure Certification](#) to demonstrate to partners and customers that coded measures meet current NCQA standards and produce accurate and comparable results.*
- NOT required for QIP PY2, PY3 or PY3.5, **PY4 (2021)**
- ~~Small possibility of requirement for PY4 (2021)~~
- Once QIP measures finalized, would take NCQA  $\geq 9$  months to develop a QIP specific measure certification program. QIP Entities would then need to be NCQA certified prior to reporting, so really not until 2022 **or 2023**
- To be discussed by SNI & NCQA ~~next summer~~ **ongoing**

# QIP Reminders

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## PY2 Report

Email report to [Dana](#) after DHCS closes out clinical/ detailed review

## PY4-8 Survey

Survey is postponed until further notice. Once you start shifting your analytic and clinical SME back to routine activities, please let us know.

# Telehealth

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# Telehealth in Current Measure Specs

Same slide as in  
[5/14 Office Hours](#).

- HEDIS measures allows for telehealth by default unless otherwise specified in specs.
  - Telehealth is billed using standard CPT and HCPCS codes for professional services in conjunction with a telehealth modifier and/or a telehealth POS code. Therefore, the CPT or HCPCS code in the value set will meet criteria (regardless of whether a telehealth modifier or POS code is present). (PCS #00288305)
- Non-HEDIS measures:
  - If not addressed in the spec, check the PCS report.
  - If not addressed in the PCS report, submit question to David/Dana or via PCS.

# Current PRIME & QIP PCS Inquiries

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|                         |   |
|-------------------------|---|
| PCS#00291643            | PRIME Eligible Population   |
| PCS# pending            | Alcohol and Drug Misuse SBIRT                                     |
| PCS# 00291203 (pending) | Tobacco Use – Screening and Cessation Intervention                |
| PCS#00287626            | Controlling Blood Pressure  |
| PCS#00237118            | Screening for Depression and Follow-Up                            |
| PCS#00285480            | Specialty Care Touches  |
| PCS#00288305            | Prenatal/Postpartum Care  |
| PCS#00287810            | Assessment & Management of Chronic Pain                           |
| PCS# 00160358           | Weight Assessment & Counseling for Nutrition, Physical Activity   |
| PCS# 00137496           | Medication Reconciliation Post-Discharge (PRIME)                  |
|                         | Depression Remission or Response (no PCS; spec already specifies) |
| PCS# 00206369           | Q-SC <sub>4</sub> CAD: Beta-Blocker Therapy-Prior MI or LVEF <40% |

# Telehealth in Future Measure Specs

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- SNI, along with our contracted partner NCQA, will be monitoring for changes to measures by stewards nationally and by CMS.
- For HEDIS measures, NCQA will be making decisions on certain HEDIS MY 2020 & 2021 measures this June.
  - Potentially for Controlling BP measure, Well Child Visits?

# \*Coming Soon\* Telehealth Peer-sharing & Resources

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- SNI is developing new technical assistance to support members' transition to telehealth, both in the immediate term to respond to the coronavirus emergency and ongoing as telehealth becomes the new norm.
- For more info, contact Zoe So ([zso@caph.org](mailto:zso@caph.org))



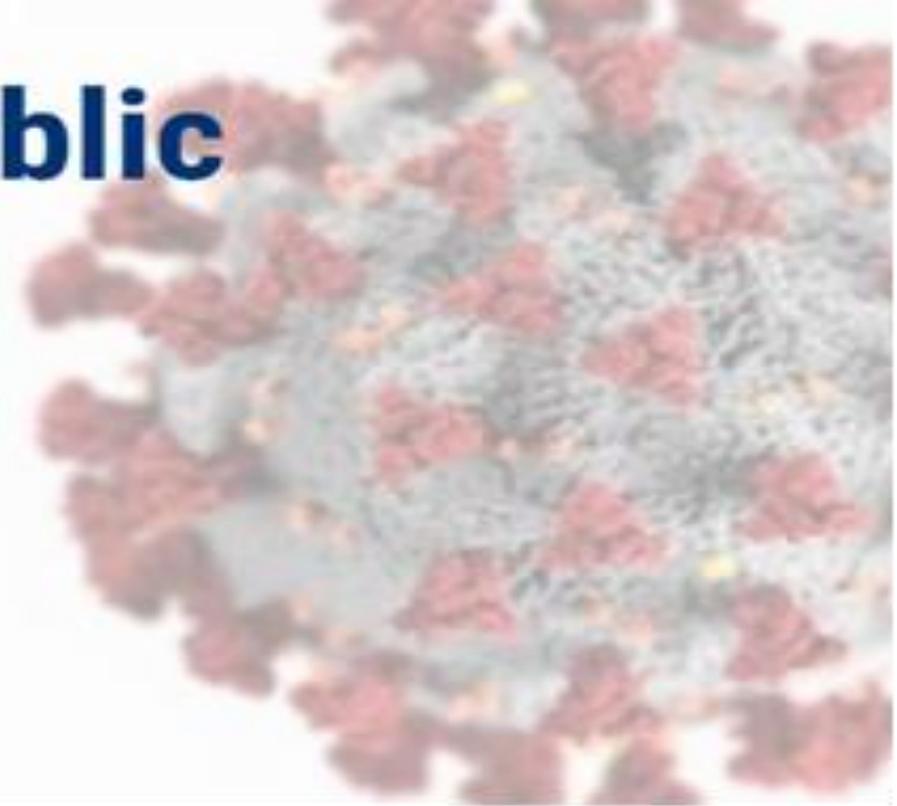
# WRAP UP

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# COVID-19: Impact on Public Health Care Systems' Programs

**Webinar**  
**June 9, 12-1 PM**



- COVID-19's impact on transition plans for our key waiver programs & other statewide initiatives, including flexibilities addressing modifications in reporting, payment, & operations
- Telehealth flexibilities implemented during COVID-19
- Register [here](#)

# On SNI Link: Coronavirus Resource Webpage

## Coronavirus Resources for Members

SNI and CAPH have compiled resources to assist members with responding to the Coronavirus.

### Resources from Other Health Care Systems

- [COVID-19 Community Testing Handbook, Riverside University Health System](#)
- [Kaiser Permanente's Mitigation Phase COVID 19 Playbook and Surge Planning Playbook](#)
- [University of Washington Medicine COVID-19 Resources Site](#)
- [Handbook of COVID-19 Prevention and Treatment, The First Affiliated Hospital Zhejiang University School of Medicine](#)

### State and Federal Resources

#### California Department of Public Health

- For daily updates on COVID-19 from CDPH, visit their [news releases page](#).
- For the most updated information on state guidance, visit CDPH's [coronavirus guidance page](#).
  - Guidance available for adult and senior care facilities, health care workers, first responders, health care facilities, health care plans, homeless assistance providers, immigration communities, and screening and testing for Medi-Cal managed care plans, among others.
- [CDPH coronavirus page](#) includes other resources, such as FAQ about N95 & Protection from COVID-19, Outpatient Healthcare facility infection control recommendations for suspect COVID-19 patients, and communications graphics
- New [COVID-19 website](#) (awareness campaign, more geared towards general public)

#### Department of Health Care Services

- [DHCS COVID-19 Medi-Cal Response](#) – includes resources specific to Medi-Cal, such as COVID-19 guidance for telehealth and virtual/telephonic communications. COVID-19 lab testing as a new benefit

# Safety Net User Groups

**Who:** Reporting, analytics or clinical operations leads

**What:** Systems well-established on Epic or Cerner share how they address technical & operational practices and lessons learned

**Info** on [SNI Link](#)

**Contact** [Zoe So](#) to be added to the listserv

## eSNUG

### Epic Safety Net User Group

6/16/20 [Contra Costa: Electronic Case Reporting w/ OCHIN & Sutter. Register here](#)

4/21/20 [COVID-19](#)

2/18/20 [Santa Clara: Predictive models](#)

## cSNUG

### Cerner Safety Net User Group

6/24/20 [Topic TBD Register here](#)

4/22/20 [COVID-19](#)

2/26/20 [HealthIntent](#)

# Questions?

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