

QIP Manager Metrics Office Hours

Mon, Jan 25, 2021, 12-1PM

[Recording Link](#)

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

Housekeeping



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](#)

PY3.5 Updates

PY3.5 Program Updates

- UPDATE: CMS approved the [COVID-Modified Preprint for PY3.5](#); posted on [DHCS QIP site](#).
 - Only “PRIME Transition” metrics are due 3/31/21. “QIP Core” metrics already reported.
 - Measurement period ending 2/29/20 instead of 12/31/20
 - Targets = PY3.5 minimum performance benchmark
 - DHCS Policy Letter forthcoming.
- **COVID-19 Public Health Emergency Immunization sub-pool (formerly known as PY3.5 High Performance Pool)**: [9/28 webinar](#) for metrics & mechanics; [10/19 webinar](#) for FAQ
- Exclusion of Dual Eligibles (this rule still applies for **Q-PC9 & Q-PC10 for the PY3.5 High Performance Pool**); [11/5 Office Hour](#) for FAQ
- 2.1.6 Postpartum Metric benchmark: DHCS sent to QIP listserv on Jan 13.

PY3.5 Narratives

- Narratives still required including the 3 Immunization Sub-Pool (HPP) metrics
- Report and Domain narratives:
 - Per instructions already provided in the portal and General Guidance: if there are no changes from the last reporting period, please put “no changes” and copy/paste from previous report.
- Project-level narratives:
 - Please provide any relevant updates from DY15 MY narratives. For example, if an entity’s DY15 MY narrative described plans to implement something for the project during the second half of DY15, the narrative should provide an update on whether that occurred or not.
- Metric-level QI narratives:
 - if there are **no major changes in performance** from DY15 MY **and no relevant updates to the QI information** previously provided in the DY15 MY narrative, an entity may submit a short statement that the QI activities outlined in the DY15 MY narrative continued through 2/29/20.

Reminder: Reporting Due Dates

Due Date	Measures	Performance as of	Portal Access
March 31, 2021	"PRIME Transition" metrics	Feb 29, 2020	DHCS PRIME Reporting Application opens Mar 1 Any data entered prior to March 1 may be lost.
June 15, 2021	Immunization Sub-Pool Metrics <ul style="list-style-type: none">Project 1.3 Influenza ImmunizationQ-PC9 Immunization for AdolescentsQ-PC10 Childhood Immunizations	Dec 31, 2020	DHCS QIP Reporting Application opens May 15

No baseline data required for any of the above.

POLL:

Do you anticipate any difficulties in submitting your PRIME data by March 31?

PY3 & PY3.5 Allocation (Maximum earnable)

Last week, CAPH Finance sent each CFO the PY3 and PY3.5 allocation amounts.

Program Year	Total DPH (gross)	DPH Allocation
PY3	\$701.5M	QIP pro rata (based on MCMC unduplicated patient count 7/1/2019 – 2/29/2020)
PY3.5 “Core QIP”	\$350.8M	Same as above
PY3.5 “PRIME Transition”	\$535M	PRIME 2015-2020 distribution factor

The final effect of the weighted FMAP is still TBD but the enhanced 56.2% FMAP will be available for QIP capitation months starting Jan 2020 – essentially half of PY3 and all of PY3.5 (PRIME & QIP portions) and based on prior calculations the overall FMAP (even without the 6.2% enhancement) is likely to be at least 65%.

PY4 Topics

PY 4 Manual

- Tentative release date: March 1, 2021
- DHCS is open to earlier releases “Draft” versions of specifications sections with no outstanding issues (as those sections are ready).
 - Refer to updated [PY4 Measure Matrix_2020.01.22](#) in the meantime
- Manual Walk-through Webinar by NCQA – Date TBD
- Webinar on 2 CMQCC measures –early March
- [Link](#) to PY4 measures listed in the submitted pre-print; same as in Jan 6 email to QIP teams
 - Remember the following metrics are no longer in PY4:
 - Perioperative Prophylactic Antibiotics Administered after Surgical Closure
 - Receipt of Appropriate Follow-up for Abnormal CRC Screening
 - Treatment Preferences (Inpatient)
 - Unhealthy Alcohol Use Screening and Follow-Up

Benchmark Updates Due to COVID Impacts

At the start of PY₄ (still pending):

- DHCS will release prelim PY₄ benchmarks generated from MY2019 (or MY2018) data.

Oct 1 or by the release date of HEDIS' Quality Compass for Medicaid (~end of Sept):

- Benchmarks will be updated with MY2020 benchmarks for any measure for which the MY2020 benchmarks is released either by the above date. These latter benchmarks will be the official benchmarks for PY 4.
- The preliminary benchmark document will indicate which measures are expected to have MY2020 benchmarks released in the fall of 2021

For measures that do not have MY2020 benchmarks released by the above cut-off dates, their benchmarks from the start of PY 4 will be the official benchmarks

Q-IE: Improving Health Equity Metric

- DHCS proposal for *CDC: HbA1c Poor Control (>9%)*:
 - P4P (10% gap closure) on 3 rates (if have den ≥ 30): Total, Black/African American, Latinx
- SNI counter proposal
 - Require DPHs to choose *CDC: HbA1c Poor Control (>9%)* for their Q-IE #1 (required). DPHs can only select Black/African American or the Latinx sub-population.
 - Keep the *CDC: HbA1c Poor Control (>9%)* metric as-is (no P4P race/ethnicity sub-rates)
 - Require DPHs to report race/ethnicity stratified data on 5 Priority metrics in PY4 in order to gather more information on disparities.
- DHCS has countered with (but is still considering our proposal):
 - Q-IE #1: Two sub-rates of Black/African American and Latinx
 - Q-IE #2: Entity choice. Will consider SNI Q-IE streamlining suggestions:
 - “Disparity”= any sub-population with a ≥ 3 percentage point lower performance relative to the overall or highest performing population
 - Eligible Metric: Any Priority Metric (remove distinction between “State” and “local” disparity)

Other Reminders

- BIRADS to Biopsy benchmarking data
 - due June 15, 2021
 - Measurement period = CY 2020
 - If at any time it looks like you're unable to report, let [David](#) or [Dana](#) know.
- Purchase HEDIS MY 2020 & MY 2021 specs and value sets for the PY₄. See [NCQA Store](#) under "Technical Specifications for Health Plans."
- The most current HEDIS NDC list posted on [NCQA's MY 2021 NDC website](#).
- SNI working with NCQA to get a link to the NCQA Store to purchase the ECDS/Digital Specs for DRR

Peer Question: CPT II Codes

From Ventura:

“We are investigating the possibility of implementing CPT II codes. It would be helpful to hear how other systems have this set-up. Which other systems currently use these codes?”

PRIME Loose Ends

PRIME Loose Ends

DY14 Payments

[Summary](#) has been posted to [DHCS PRIME website](#).

DY15 Suppl. Payments

DHCS to calculate in Feb or Mar.

DY15 YE Reports

Please send a pdf and excel copy to [Dana](#) once DHCS completely closes out the comprehensive clinical review of the Year End report.

DY15 Data and Graphs

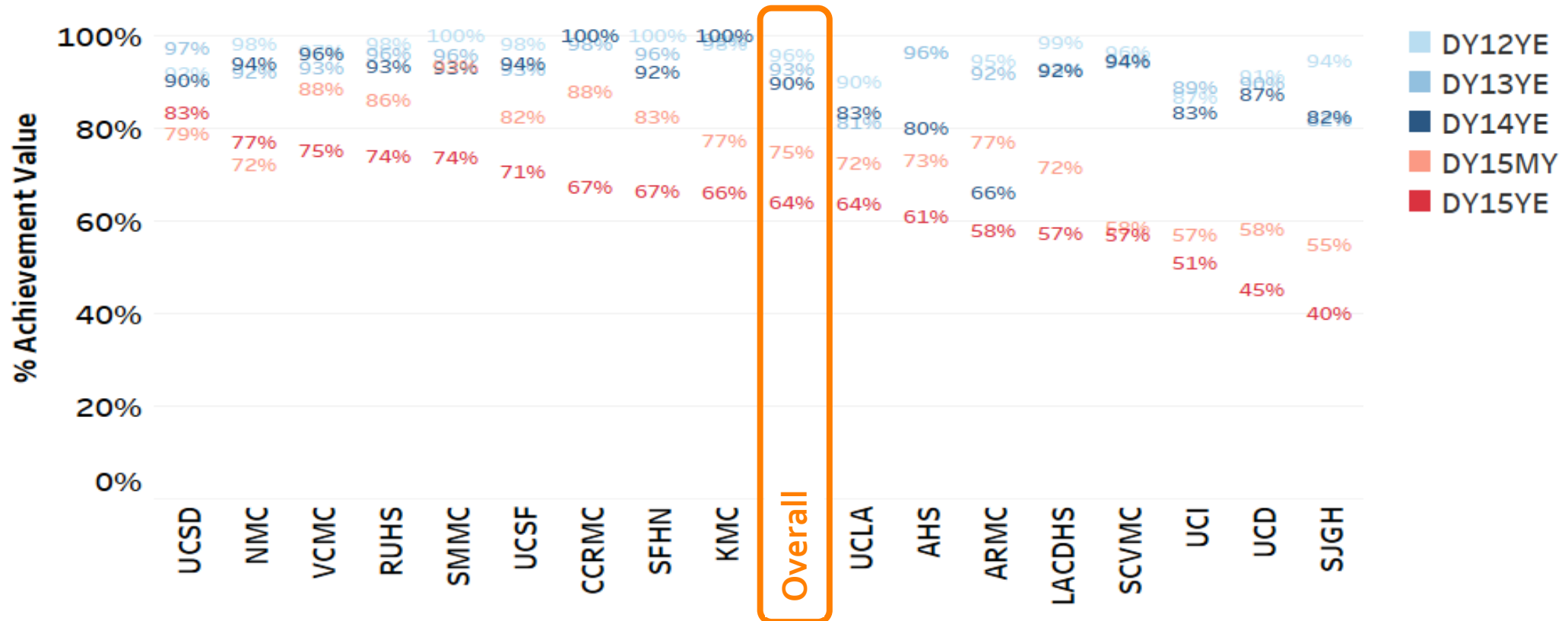
Posted on [SNI Link](#) for distribution among CAPH members only

PRIME QIP Express

SNI will no longer be sending out monthly emails

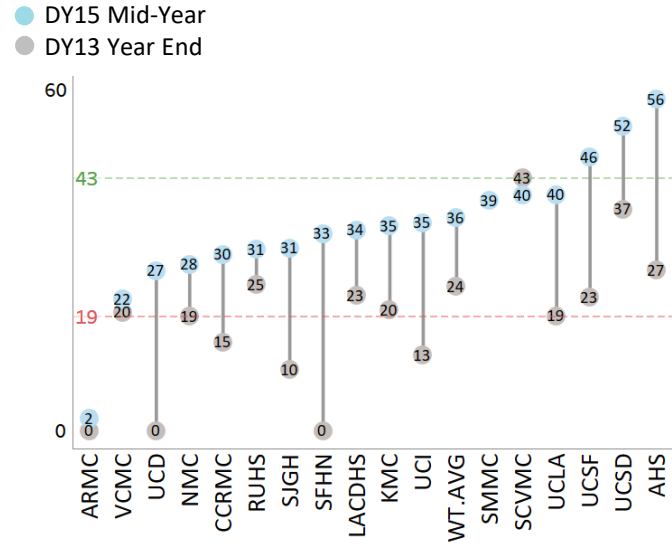
PRIME Achievement before Supplementals

- 58% of metric performances worsened from DY15 Mid Year to Year End
- Overall % achievement decreased from 75% to 64% from DY15 Mid Year to Year End

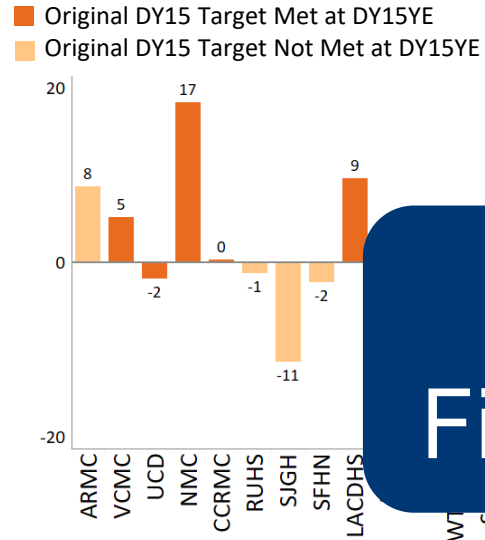


1.1.7 Depression Follow-Up

Performance (%): DY11 to DY15 Mid-Year

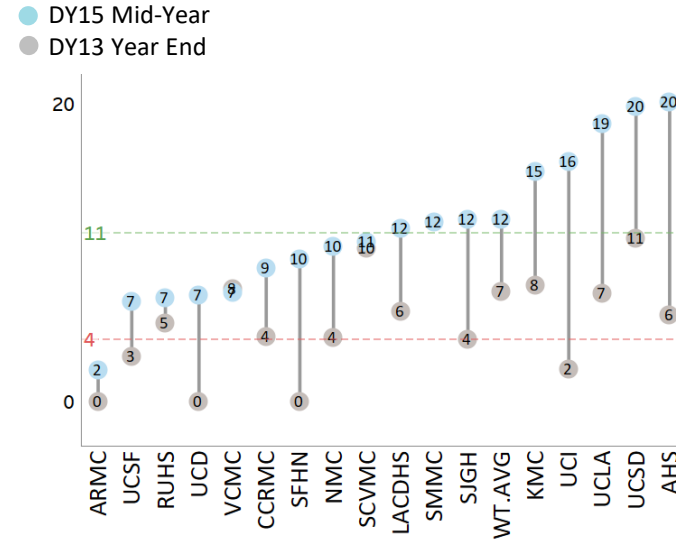


Actual Δ(%): DY15 Mid-Year to DY15 Year End

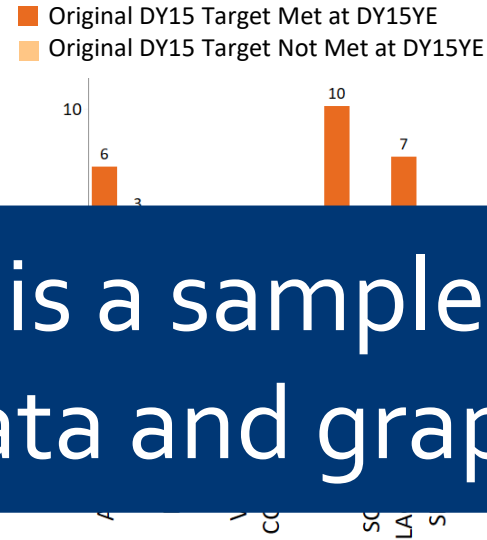


1.1.7 Depression Response

Performance (%): DY11 to DY15 Mid-Year

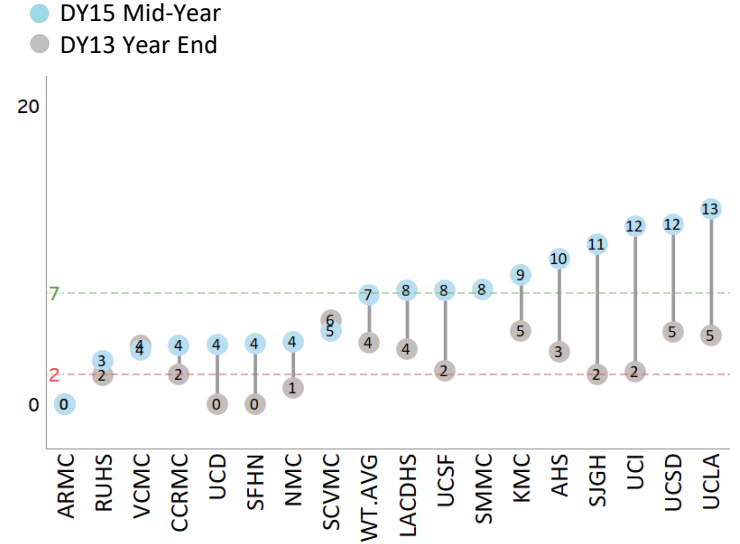


Actual Δ(%): DY15 Mid-Year to DY15 Year End

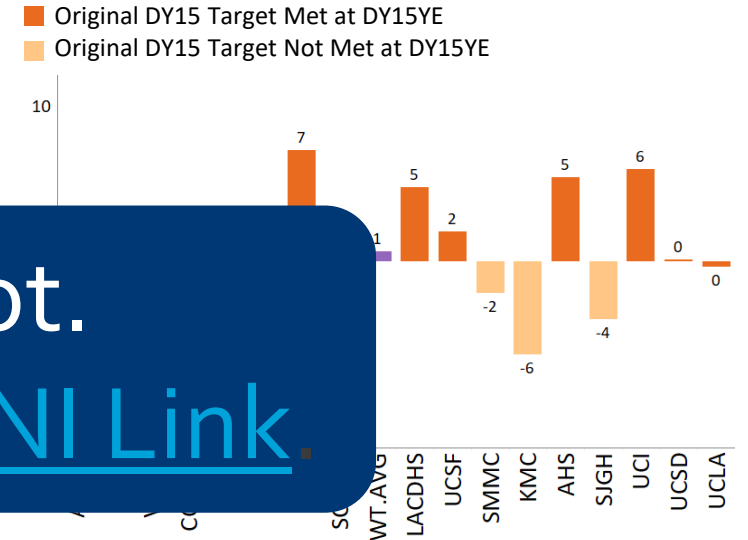


1.1.7 Depression Remission

Performance (%): DY11 to DY15 Mid-Year



Actual Δ(%): DY15 Mid-Year to DY15 Year End



This is a sample snapshot.
Find all data and graphs on [SNI Link](#).

Appendix: PY4 Over-Performance

as per Pre-Print sent to CMS on 12/31/2020; pending CMS approval

Two Methods

Same slide as in
[1/14 Office Hours](#)

	Method #1 Over-performance on Priority Metrics	Method #2 Over-performance on Elective Metrics
Unearned funds reclaimed from:	Any missed metrics (Priority and Elective)	PY4-5: ≤2 missed Priority Metrics PY6-7: ≤1 missed Priority Metrics PY8-9: No missed Priority Metrics Any Elective metric
Reclaiming based on performance of:	Priority metrics only	Elective metrics only
Gap Closure Required to Reclaim:	15% or 20% (and must also be ≥ 50 th percentile)	15% or 20% (and must also be ≥ 50 th percentile)
OR Top Performance Required to Reclaim:	≥90 th percentile	N/A

Over-performance Values (OV)

Same slide as in
[1/14 Office Hours](#)

Progress toward performance target	Method 1: Over-performance on Priority Measures	Method 2: Over-performance on Elective Measures
$\geq 15\%$ to $< 20\%$ gap closure (and $\geq 50^{\text{th}}$ percentile/ median benchmark)	0.5	0.25
20% gap closure (and $\geq 50^{\text{th}}$)	1.0	0.50
$\geq 90^{\text{th}}$ percentile	1.0	N/A

Reclaiming Rules...

Same slide as in
[1/14 Office Hours](#)

1. Calculate **achievement values (AVs)** and **missed metric AVs** for Priority Metrics and Elective Metrics
2. Calculate **over-performance values (OVs)** for over-performance on Priority Metrics and Elective Metrics
3. Use up all of the **Priority Metric OVs** to reclaim (Method 1)
4. Then use up all of the **Elective Metric OVs** to reclaim (Method 2)
 - But you are limited in the # of missed Priority Metrics values you can reclaim with Elective Metric OVs - limited to 2 missed Priority metric values in PY₄, declining to zero by PY₈

Example

MP = Sum missed Priority Metric AV
ME = Sum missed Elective Metric AV
PO = Sum Priority Metric OVs
EO = Sum Elective Metric OVs

Same slide as in
[1/14 Office Hours](#)

- Of 40 reported metrics, 5 Priority & 3 Elective Metrics have AV = 0 (<5% gap closure)
- So, DPH has 8 missed metric values ("5MP" & "3ME") in their "reclaiming pool"
- DPH over-performed on 2 Priority metrics & 7 Elective metrics, worth 1.5 Priority (PO) & 3 Elective (EO) Over-performance metric values, respectively

Missed Metric Type	Missed Metric AVs	Over-Performance Values	Metric Values Reclaimed via Method 1 (PO)	Remaining Missed AVs after Method 1	Metric Values Reclaimed via Method 2 (EO)	FINAL Missed AVs after Method 2	FINAL Metric Values Reclaimed after Method 2
Priority	5	1.5	1.5	MP-PO = 5-1.5 = 3.5	2 (max is 2)	3.5-2 = 1.5	1.5+2 = 3.5
Elective	3	3	0	3	1	ME-1 = 2	0+1 = 1

In summary, DPH reclaims a total of 4.5 out of 8 missed metric values

- 3.5 Priority Metric Values reclaimed (only 2 from Elective Metrics)
- 1.5 missed Priority Metric values left unearned
- 1 Elective Metric value reclaimed
- 2 missed Elective Metric values left unearned