

QIP Leads Monthly Form

Mon, February 14 , 12-1PM

[Recording Link](#)

Presenter: David Lown dlownd@caph.org

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: [QIP Webinars](#)

Program Updates

QIP Audits

- Purpose of QIP Audit:
 1. Ensure accurate and valid reporting for \$1.8b QIP value-based program
 2. Understand root causes and possible solutions for the differences in the data and rates of MCAS measures reported by entities compared to those reported by MCPs (see Goal #2)
- DHCS Goals:
 1. All Medi-Cal Value-Based Programs (VBP) to be audited at the reporting entity level
 2. (in time) Streamline VBP reporting and validation by having MCPs be the official reporting entity across Medi-Cal VBP (where possible)
- Audit/Comparison Activities Timing:
 1. Spring: Establishment of a workgroup/group meetings (entity representatives and HSAG) to scope/streamline the upcoming audits and MCP comparison activities
 2. Post-6/15/2022, Fall: Audit of PY₄ data
 - Scope: Any reported PY₄ measures that are [MCAS](#) measures (14 Priority + 6 Elective)
 3. TBD: Comparison of entities' rates & MCP entity rates. ID causes and solutions for differences
 4. Late 2022/Early 2023: PY₅ Audit (exact timing and scope TBD)

PY4 COVID Modifications

- Approved by CMS on February 2.
- DHCS timeline for communicating details with entities is unknown.
- Data methodology & QI narratives are required for each of the 40 reported measures.
 - If there were no QI activities for a measure due to COVID, mention that.
 - Describe plans for future QI efforts for the measure.
- COVID Milestones
 - Pre-Print language allows DHCS flexibility.
 - SNI to discuss with DHCS re: their reporting expectations for these measures.
 - If no details added, entities could report as fits their internal tracking and reporting processes.
- **Please review slides 4-7** from [Dec 9 Office Hours](#).

Dually Enrolled – starting with PY4

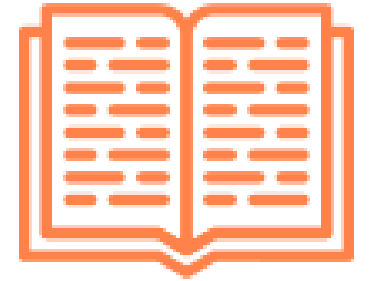
2 updates from
1.24.2022 slide

- **“Dually Enrolled” = Medi-Cal beneficiaries for whom Medi-Cal is not the primary payer**
- For “Enrolled in Medi-Cal at the time of the denominator event” and “Payor Agnostic” measures, QIP entities should include all those who are Dually Enrolled on the date of the denominator event (not a change for Payer Agnostic):
- For each Medi-Cal Managed Care (MCMC) assigned lives measure reported by a QIP entity, that entity may include all OR exclude all assigned individuals who were Dually Enrolled for at least one month of the PY.
 - The entity’s decision to include or exclude such individuals for each given measure will apply for all three PYs of PY4-6. Include vs Exclude attestation checkbox in reporting application.
- Q-HVL HIV Viral Suppression (HVL-AD) and **Q-CMS130 Colorectal Cancer Screening** :
 - All Dually Enrolled individuals across both the measure’s target populations must be included in the denominator.
- **For PY4, Q-CMS2 (Depression Screening) and Q-CMS69 (BMI) will also require inclusion of all Dually Enrolled individuals across both target populations.**

Program Year 5 (2022)

PY5 Reporting Manual:

- Estimated release: March 28, 2022.
- See slide 5 of [Jan 9 OH deck](#) for measure set changes from PY4.
- Purchase ECDS specs for DRR-E and PRS-E
 - Now available at <https://store.ncqa.org/ecds-qip-2022.html>
 - Bonus: Get a free copy of HEDIS Volume 2 MY2022
- Measure abbreviation update:
 - To align with the native HEDIS specs, Q-IMA2 and Q-CIS10 to be renamed Q-IMA and Q-CIS for PY5 Manual. You'll see this change in the PY4 Reporting Application.



PY5 Benchmarks:

- DHCS to use MY2020 MIPS benchmark data for QIP QPP measures (with downward adjustments as in the past).
- DHCS to send SNI final draft benchmark document on 2/14/2022
- See slide 6 of [Jan 9 OH deck](#).
- PCS not yet updated for PY5, so email me your PY5 questions (dlownd@caph.org)



Resources

HEDIS Public Comment

HEDIS Public Comment period opened Friday, **February 11 - March 11**.

All parties are invited to comment on proposed new measures, changes to existing measures and proposed measure retirements for HEDIS MY 2023. Some of the measures/topics out for public comment may be of interest:

- [Expansion of race and ethnicity stratification in select HEDIS measures](#)
- Proposed new measures for the Medicaid product line:
 - [Topical Fluoride for Children](#)
 - [Oral Evaluation, Dental Services](#)
 - [Social Need Screening and Intervention](#)
- HEDIS announcements
 - MY2022: Colorectal Cancer Screening (opportunity for QIP PY7):
 - Revised the age range to 45–75 years from 50–75 years (aligned with USPSTF)
 - Added the Medicaid product line
 - MY2023: Optional exclusions to become required

Community-Centered Outreach and Engagement: Contra Costa Health Services' Approach

February 23, 12-1pm

In this webinar, Contra Costa Health Services (CCHS) will share how they leverage their Historically Marginalized Community Engagement Unit, which includes multiple workgroups specific to African American, Asian American and Pacific Islander, Latinx, and other historically marginalized communities in Contra Costa County, to tailor COVID-19 outreach and engagement.

Presenters will describe how they have leveraged and managed the workgroups for COVID-19 testing and vaccinations, as well as plans for future initiatives beyond COVID-19. [Register here.](#)

2022 Tobacco Learning Collaborative

As mentioned during the QIP Annual Conference, the CA Quits' 4th annual Tobacco Learning Collaborative (TLC) is recruiting for 2022! About 40 health systems and partners have participated in the TLC and each year the TLC has received high satisfaction rates from participants. From April to December, the TLC group meets every other month for 2 hours with scheduled individual technical assistance in between monthly meetings. Participants will receive tools and strategies to achieve quality improvement goals in commercial tobacco treatment.

The CA Quits TLC offers an opportunity for:

- Peer-to-peer learning and dissemination of best practices in commercial tobacco treatment
- Technical assistance and training with screening, intervention, and health equity plans
- Connections with county resources and partners, Kick It California, and Medi-Cal Managed Care Plans

Click [here](#) to learn more about the TLC and Curriculum Overview.

Space is limited. Enroll now! Deadline to express interest in TLC is **March 4, 2022**.

We highly encourage all entities to participate and take advantage of this TLC and the resources and expertise it provides. Please contact CA Quits Public Hospital Systems Coordinator: **Moreen Sharma** at mmsharma@ucdavis.edu if you or anyone at your organization would like to participate in the TLC or if you have any questions. To view past TLC participants, click [here](#).

Questions?

