

QIP Leads Monthly Forum

Mon, April 25, 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 or an echo.



At any time, feel free to chat your question or raise your hand.



Please update your Zoom accounts – helps to fix issues/glitches.



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

Program Updates

QIP Performance – status request

SNI wants insights on PY4 (aka PY5 baseline) performance is landing to see where SNI might focus our PY5 member support.

To that end, **using encrypted email**, please send the below information to Arlene amarmolejo@caph.org.

CRITICAL – Do not spend more than 15-20 minutes to gather this data. If it will take longer, don't work on it.

PY₄ data (num/den)

- State of validation does not matter to SNI – send what you've got
- Include the two Equity Sub-rates in the DM Poor Control Measure and any IHE's you might report

PY₅ data (num/den)

- Use of PY₄ specs is fine

PY₅ end of year achievement projections (best guesses)

- Yes – we'll hit our target
- No way we'll hit our target
- Too soon to tell

PY4 COVID Narratives – Employee Vax & Surge

- Implementation of Employee Vaccination
 - Clarity from DHCS to be released next week
 - Likely will state that entities must report on both:
 - % of employees provided COVID-19 vaccinations by the entity
 - % of employees who have been vaccinated (regardless of who provided the vax)
- “Implementation of hospital surge planning and/or response in 2021”
 - How are you approaching this question?
 - What details are you including?

PY₄ Reporting: Inverse Measures

- PY₄ Inverse Measures: Q-AAB, Q-URI, and Q-LBP
- QUESTION:
 - Will the portal for submission calculate the 1-num/denom in the background based on our numerator and denominator or will we have to manually enter the inverse rate?
- ANSWER:
 - The entity enters the correct numerator in the portal that would calculate the correct rate. So, for Q-AAB, if the numerator is 5 (people who were prescribed abxs) and the denominator is 100, the entity would enter 95 as the numerator in the portal.

Q-CMS6g: BMI – Spec & Benchmark Issues*

See slides 13-14
from [4/11/2022](#)
[QIP Office](#)
[Hours](#) for
details

- Numerator narrative says “12 month look back”. Numerator Logic says “12 month look forward”
- [Per CMS](#), calculate the numerator by following the logic (documented follow-up plan within 12 months after the most recent abnormal BMI) **but only** report follow-up plans that occurred during the measurement period (i.e., the Program Year)
- PY₄ & PY₅ Benchmarks are based on v8 specs (look back) & aren’t consistent with PY₄ specs
 - HRSA MY2021 benchmarks (based on v9) to be published August of 2022.
- PY₄ (CMS6gv9) – choice: P₄P or P₄R
 - Entities may report this as of their 10 P₄P measures (using PY₄ benchmarks released Oct 2021), even though those benchmarks aren’t aligned to PY₄ specs, DHCS is ok with this approach).
 - Entities not reporting it as P₄P, can report it as one of the 30 P₄R measures.
 - PY₄ serves as baseline for PY₅.
- PY₅ (CMS6gv10) - fully P₄P
 - Benchmarks will be updated this August with the release of HRSA MY2021 data, which uses the 12 month look-forward specs, so is consistent with PY₅ specs.

PY5 PCR: PY4 is not your PY5 Baseline

- PY4 does not include non-entity readmissions (i.e., readmissions occurring at non-entity facilities).
- PY5 includes non-entity readmissions
- To track your PY5 progress using Cumulative Attributable Difference (CAD – 4/11/2022 QIP Office Hours) and to calculate your Calibrated O/E, entities will need to recalculate their performance as of 12/31/2021 including assigned lives readmissions that **occurred outside the entity's facilities** (i.e., using Plan data).

PY5 Reporting Manual

- Released: APRIL 15!!!!
- PY5 Reporting Manual Release Webinar – Tomorrow: Tuesday April 26, 12-1
- DHCS is working on enabling downloads of QIP Manuals directly from eQIP, complete with click-wrap agreement. That functionality will likely not be ready for several more weeks
- QIP Reporting Application to be open for use starting 4/28 (as long as platform validation is complete by then)

Shingrix supply

- In 2019 there were reports that due to overwhelming demand, there were Shingrix shortages
- Recently several CAC members reported ongoing difficulties with consistent supplies of Shingrix
- **QIP LEADS POLL QUESTIONS**
 - Have you been having trouble obtaining Shingrix or a sufficient supply of Shingrix?
 - How long has this problem existed (<6 months, 6-12 months, 1-2 years, 2-3 years, more than 3 years)?
 - Has it been consistently problematic or just off and on?

Resources

Upcoming Webinar

eVisit Transformation: Billable Medical Advice through EHR Messaging.

May 26, 11am-12pm

In response to an unprecedented surge in EHR messages, UCSF Health implemented a new model of billable Medical Advice Messages (or “eVisits”), which are reimbursable by Medi-Cal for non-FQHC providers. In doing so, UCSF Health is combating provider burnout by acknowledging the unpaid, after-hours time spent responding to messages. In this webinar, an expert from UCSF Health will share how they implemented Medical Advice Messages in Epic, updated their provider workflows, educated patients and staff on the change, and monitored for disparities.

Note: This webinar was originally intended for our CIO/CMIO peer group, but we are extending the invite to anyone interested. Operational, finance, and informatics leads are encouraged to attend. [Register here](#).

In Case You Missed it...

Reframing the Pandemic Response: UCSD Health's Framework for Endemic COVID-19 Operating Procedures

April 13, 1-2pm

Motivated by the need to transition from a “perpetual state of emergency” to a proactive approach that recognizes COVID-19 as one of many endemic viruses, UCSD Health recently developed “new normal” COVID-19 guidelines that inform patient and staff testing, PPE, telehealth, surge planning, return to office, and other health system operations. In this webinar, UCSD Health leaders will describe how they defined and operationalized three tiers of COVID-19 prevalence based on data-informed wastewater thresholds. Strategic, operational, clinical, and informatics leads are encouraged to attend. View our [Webinar Recap](#) and [Webinar Slides & Recording](#).

Integrating Navigation and Virtual Care: How to Improve Patient Access and Sustain Virtual Care Teams

April 14, 12-1pm

The Center for Innovation in Access and Quality at the Zuckerberg San Francisco General Hospital will share their experiences and strategies for developing their Tech Navigator Program using a volunteer-based model to ensure smooth daily operations and implementation of virtual care services, including onboarding new clinical services, developing resources and tools to screen patients for Zoom video visits, and providing staff trainings across the San Francisco Health Network. Public health care system leaders will discuss early lessons from the field, including successes, challenges, and opportunities for designing various Tech Navigator approaches to advance equity and improve patient access and adoption of virtual care. View [Webinar Slides & Recording Link](#).

In Case You Missed it...

Community-Centered Outreach and Engagement: Contra Costa Health Services' Approach February 23, 12-1pm

In this webinar, Contra Costa Health Services (CCHS) shared 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 described how they have leveraged and managed the workgroups for COVID-19 testing and vaccinations, as well as plans for future initiatives beyond COVID-19. View the [webinar recap](#) for key takeaways or view the [webinar slides and recording](#).

Virtual Care Measures of Success: 3-Month Check-in March 1, 12-1:30pm

In the third session of this 3-part series on virtual care measures of success, system leaders from UCSD shared their experience launching a virtual care strategic planning process, including reorganizing their governance structures, identifying and testing new key performance indicators (KPIs), and building a long-term virtual care strategy. View the [webinar recap](#) for key takeaways or view the [webinar slides and recording](#).

Designing the Future State: How a Mixed Model Approach Can Optimize Virtual Care for Patients March 30, 3-4pm

Leaders from Contra Costa Health Services (CCHS) and West County Health Center (WCHC) will share their experiences developing and adapting a mixed model approach for in-person and virtual care. CCHS will present their hybrid scheduling template and share evaluation results from piloting the template across 3 clinic sites. WCHC will discuss implementation of their West County Virtual Clinics using Zoom to build effective care teams and re-create the physical clinic environment online with an easy check-in process and dedicated virtual spaces for patients and the care team. [webinar slides and recording](#).

Questions?

