

State of California—Health and Human Services Agency Department of Health Care Services



DATE: October 11, 2021

QIP POLICY LETTER 21—007

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS

ALL QIP ENTITIES

SUBJECT: APPROVED COMMUNITY PARTNERSHIPS FOR PY4 AND PY5

PURPOSE:

This QIP Policy Letter (QPL) informs QIP DMPH entities and Medi-Cal managed care health plans (MCPs) of community partnerships approved by DHCS to include community partner data for Program Years (PYs) 4 and 5. It also provides directions for modifications to approved applications and future application submissions for DMPH entities who wish to include community partner data in QIP.

POLICY:

The participating QIP DMPH entities listed in Attachment 1, *Approved DMPH PY4 Community Partners*, have been approved by DHCS to include contracted community partner data on selected measures in their QIP data submissions for PYs 4 and 5. For additional details on DMPH Community Partner policies, refer to the <u>PY4 QIP Program Policies</u>, <u>QPL-21-003</u> and the application template available on <u>eQIP</u>. For an overview of QIP data sharing responsibilities for MCPs, refer to <u>QPL-21-004</u>.

Modifications

An entity that wishes to make modifications for future PYs to an existing application should do so by **November 15 prior to the start of the next PY**. A DMPH has the opportunity to reapply annually should the DMPH want to change the measure(s) on which it is doing quality improvement work with the contracted community partner. If a DMPH experiences a change that affects the information within their application on which the approval is based, the DMPH must report this change to DHCS within ten business days. DHCS will address modifications on a case-by-case basis. Please submit all modification requests to the QIP mailbox at qip@dhcs.ca.gov.

Future Applicants

DMPHs seeking DHCS approval to use community partners for the QIP program beginning PY5 or for future PYs can find the application template on <u>eQIP</u>. An updated

template for future applications will be emailed from the QIP mailbox and available on eQIP by October 15 prior to the start of the PY. The deadline to submit new applications is **November 15 prior to the start of the PY**, and entities will be notified of DHCS' decision no later than December 31 prior to the start of the PY. DHCS' approval is valid for two PYs for first-time applications. For detailed application guidelines DMPHs should refer to the community partner application template available on eQIP.

QIP entities and MCPs should contact the QIP Mailbox at qip@dhcs.ca.gov if there are any questions concerning this QPL.

Sincerely,

ORIGINAL SIGNED BY KAREN MARK

Karen E. Mark, MD, PhD Medical Director

Attachment 1 – Approved DMPH PY4 Community Partners

	DMPH Entity	Partner	Measures
1	El Camino Hospital	Ravenswood Family Health Center / MayView Community Health Center	Q-PPC-Pre: *Prenatal and Postpartum Care (Timeliness of Prenatal Care) (PPC-PRE) Q-PPC-Post: *Prenatal and Postpartum Care (Postpartum Care) (PPC-PST)
2	Marin General Hospital	Marin Community Clinics	Q-BCS: *Breast Cancer Screening (BCS) Q-CDC-H9: *Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%) (CDC-H9) Q-IHE1: *Improving Health Equity (Q-IHE-1)¹ Q-TRC: Transitions of Care (TRC)
3	Palomar Medical Center	Neighborhood Healthcare	Q-AMR: *Asthma Medication Ratio (AMR) Q-CDC-H9: *Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%) (CDC-H9) Q-CMS135: Heart Failure (HF): ACE/ARB/ARNI Therapy for LVSD Q-IHE1: *Improving Health Equity (Q-IHE-1)¹ Q-PCE: Pharmacotherapy Management of COPD Exacerbation (PCE) Q-TRC: Transitions of Care (TRC)
4	Tri-City Medical Center	Vista Community Clinic	Q-AMR: *Asthma Medication Ratio (AMR) Q-BCS: *Breast Cancer Screening (BCS) Q-CDC-H9: *Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%) (CDC-H9) Q-FUA: Follow-Up After ED Visit for Alcohol and Other Drug Abuse or Dependence (FUA) Q-IHE1: *Improving Health Equity (Q-IHE-1)¹ Q-IHE2: Improving Health Equity (Q-IHE-2)¹* Q-PCE: Pharmacotherapy Management of COPD Exacerbation (PCE) Q-PPC-Pre: *Prenatal and Postpartum Care (Timeliness of Prenatal Care) (PPC-PRE) Q-PPC-Post: *Prenatal and Postpartum Care (Postpartum Care) (PPC-PST) Q-TRC: Transitions of Care (TRC)

^{*}Priority measures

¹QIP Entities must report on the parent measure if reporting on a Q-IHE measure.

^{**}Q-IHE2 measure is allowable for community partner data only if the entity is engaging in improving equity for Q-AMR, Q-BCS, Q-PPC-Pre, and Q-PPC-Pst.