



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



GAVIN NEWSOM
GOVERNOR

DATE: November 22, 2022

QIP POLICY LETTER 22—004

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS
ALL QIP ENTITIES

SUBJECT: APPROVED COMMUNITY PARTNERSHIPS FOR 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 for Program Year (PY) 5. It also provides procedures for DMPHs to apply for modifications to approved applications and instructions for future application submissions for entities who wish to include community partner data in subsequent QIP Program Years.

POLICY:

The participating QIP DMPH entities listed in Attachment 1, *Approved DMPH PY5 Community Partners*, have been approved by DHCS to include contracted community partner data on selected measures in their QIP data submissions for PY 5. For additional details on DMPH Community Partner policies, refer to the [QIP PY5 Program Policies](#) and [QPL-21-003](#). For an overview of QIP data sharing responsibilities for MCPs (which includes community partner data), refer to [QPL-21-004](#).

Modifications

An entity that wishes to make modifications for future PYs to an existing application should refer to [QPL-21-007](#) for additional details and submit all modification requests to the QIP mailbox at gip@dhcs.ca.gov.

Future Applicants

DMPHs seeking DHCS approval to use community partners for the QIP program beginning PY6 can find the current application template on [eQIP](#) for reference. An updated PY6 application template will be emailed from the QIP mailbox and available on [eQIP](#) within 2-3 weeks after the PY 6 Manual release. DHCS' approval is valid for two PYs for first-time applications.

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

Sincerely,

ORIGINAL SIGNED BY PALAV BABARIA

Palav Babaria, MD, MHS
Deputy Director & Chief Quality Officer
Quality and Population Health Management

Attachment 1 – Approved DMPH PY5 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-Pst: *Prenatal and Postpartum Care (Postpartum Care) (PPC-PST) Q-PRS-E: Prenatal Immunization Status (PRS-E)
2	Marin General Hospital	Marin Community Clinics	Q-BCS: *Breast Cancer Screening (BCS) Q-HBD: *Hemoglobin A1C Control for Patients with Diabetes (HBD) Q-IHE1: *Improving Health Equity (Q-IHE-1) ¹ Q-PPC-Pst: *Prenatal and Postpartum Care (Postpartum Care) (PPC-PST) Q-TRC: Transitions of Care (TRC)
3	Palomar Medical Center	Neighborhood Healthcare	Q-AMR: *Asthma Medication Ratio (AMR) Q-HBD: *Hemoglobin A1C Control for Patients with Diabetes (HBD) Q-CMS135: Heart Failure (HF): ACE/ARB/ARNI Therapy for LVSD 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-HBD: *Hemoglobin A1C Control for Patients with Diabetes (HBD) Q-COB: Concurrent Use of Opioids and Benzodiazepines (COB-AD) Q-FUA: Follow-Up After ED Visit for Alcohol and Other Drug Abuse or Dependence (FUA) Q-FUI: Follow-Up After High-Intensity Care for Substance Use Disorder (FUI) 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-TRC: Transitions of Care (TRC)

**Priority measures (defined in QIP PY5 Program Policies)*

***Q-IHE measures are 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.*

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