

# PAY-FOR-PERFORMANCE (P4P) PROGRAM

FOR ALAMEDA HEALTH SYSTEM



2022

ALAMEDA  
**Alliance**  
FOR HEALTH

# A NOTE FROM OUR MEDICAL DIRECTOR

**Dear Alameda Health System,**

Alameda Alliance for Health (Alliance) has proudly served our community for more than a quarter of a century. We were created by and for Alameda County residents, and we currently provide access to health care to more than 280,000 children and adults. We value the high-quality, accessible, and affordable health care services that you deliver as our provider partner.

Our 2022 Pay-for-Performance (P4P) program offers performance-based incentive payments for delivered services. Through this program, primary care providers (PCPs) and PCP Groups are rewarded for superior performance and yearly improvement.

In this pamphlet, please find a Program Guide and Quick Reference Guides as resources to help you better understand our P4P program.

If you have any questions about our P4P program, please feel free to reach out to our Provider Services Department at **1.510.747.4510** or contact me at the email below.

Sincerely,

A handwritten signature in black ink, appearing to read "S. Bhatt", enclosed within a large, loopy oval shape.

Sanjay Bhatt, MD, MS, MMM

Medical Director – Quality Improvement

Email: **[sbhatt@alamedaalliance.org](mailto:sbhatt@alamedaalliance.org)**

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For any questions regarding the P4P program, please contact us:

**Alliance Provider Services Department**

Phone Number: **1.510.747.4510**

Email: **[qualityanalytics@alamedaalliance.org](mailto:qualityanalytics@alamedaalliance.org)**

# P4P PROGRAM GUIDE

## Program Overview – 2022



### BACKGROUND

The Alliance Pay-for-Performance (P4P) program goal is to improve quality, performance, and outcomes through provider incentives.

### CRITERIA

#### Provider Criteria

- Alameda Health System (AHS) is contracted with the Alliance for primary care services.
- AHS is contracted with the Alliance through the date of payment.
- Measures and payments will be calculated for AHS as a whole and not by individual AHS clinics.

#### Eligible Population

- Alliance Medi-Cal and IHSS Group Care members assigned to AHS.

# P4P PROGRAM GUIDE

## PAYMENT POOL/DATES

### Pool Dollars

The total payment pool consists of the Alliance Board-approved budgeted amount.

This amount is subject to adjustment depending on the financial performance of the Alliance.

**Measurement Period:** January 1, 2022 – December 31, 2022

**Payment Date:** September 2023

## PAYMENT METHODOLOGY

### Distribution Method

The potential dollars for AHS will be based on its percentage of member months compared to the total member months for the Alliance.

## MEASURES

### The measurement categories are:

- Clinical Quality Measures (selected Healthcare Effectiveness Data and Information Set (HEDIS®) measures)
- Other Measures



# P4P PROGRAM GUIDE

## Measures, Point Values, and Goals

Clinical Quality Measures			
#	MEASURES	POINTS	GOAL
1	Well-Child Visits in the First 15 Months of Life: Six (6) or More Visits	5	20% of points awarded per measure for each 0.5% above the overall 2022 rate for the Alliance, up to 2.5% above. 0.5% above overall rate = 20% of points 1.0% above overall rate = 40% of points 1.5% above overall rate = 60% of points 2.0% above overall rate = 80% of points 2.5% above overall rate = 100% of points  If rate is below the overall 2022 rate for the Alliance: 3% increase from prior year rate = 20% of points 6% increase from prior year rate = 40% of points  A minimum of 15 members is required in measure eligible population. Members with dual Medi-Cal/Medicare coverage are excluded from HEDIS® measures.  *A lower rate is better. Points are earned the same as above, but rate must be below the overall Alliance rate or decrease from prior year rate.
2	Well-Child Visits for Age 15 Months to 30 Months: Two (2) or More Visits	5	
3	Child and Adolescent Well-Care Visits	10	
4	Child and Adolescent BMI Percentile Documentation	3	
5	Child and Adolescent Counseling for Nutrition	3	
6	Child and Adolescent Counseling for Physical Activity	4	
7	Breast Cancer Screening	10	
8	Cervical Cancer Screening	10	
9	HbA1c Poor Control (>9%) for Diabetics*	10	
<b>Clinical Quality Measures Total Points:</b>		<b>60</b>	

Other Measures			
#	MEASURES	POINTS	GOAL
10	PCP Visits per 1,000 Members	10	2% increase from 2021 visits per 1,000 rate = 1/3 points 3% increase from 2021 visits per 1,000 rate = 2/3 points 4% increase from 2021 visits per 1,000 rate = Full points
11	Emergency Department (ED) Visits per 1,000 Members	10	20% of points awarded for each 0.5% below the overall 2022 rate for the Alliance, up to 2.5% below.
12	Readmission Rate	10	20.0% readmission rate = 1/3 points 19.5% readmission rate = 2/3 points 19.0% readmission rate = Full points
13	Flu Vaccination Rate	5	20% of points awarded for each 0.5% above prior year rate.
14	Member Satisfaction Survey: Non-Urgent Appointment Availability	5	Full points awarded if 80% of responses indicate member was able to schedule a non-urgent appointment within 10 days. A minimum of 10 survey responses are required for the measurement year.
15	Screening for Depression	Monitoring Measure	Measure will be monitored. No goal is set for this measure.
<b>Other Measures Total Points:</b>		<b>40</b>	
<b>TOTAL</b>		<b>100</b>	

## Measure Descriptions

### CLINICAL QUALITY MEASURES

Measures are based on NCQA HEDIS® specifications.

#### **Well-Child Visits in the First 15 Months of Life: Six (6) or More Visits**

Measures the percentage of children who turned 15 months old during 2022 and had six (6) or more well-child visits with a PCP during their first 15 months of life.

#### **Well-Child Visits for Age 15 Months to 30 Months: Two (2) or More Visits**

Measures the percentage of children who turned 30 months old during 2022 and had two (2) or more well-child visits with a PCP between the child's 15-month birthday plus one (1) day and the 30-month birthday.

#### **Child and Adolescent Well-Care Visits**

Measures the percentage of members 3-21 years of age who had one (1) or more well-care visits with a PCP or OB/GYN during 2022.

#### **Child and Adolescent BMI Percentile Documentation**

Measures the percentage of members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of BMI percentile documentation.

#### **Child and Adolescent Counseling for Nutrition**

Measures the percentage of members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of counseling for nutrition.

#### **Child and Adolescent Counseling for Physical Activity**

Measures the percentage of members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of counseling for physical activity.

#### **Breast Cancer Screening**

Measures the percentage of women 50-74 years of age who had a mammogram between October 1, 2020 and December 31, 2022.

#### **Cervical Cancer Screening**

Measures the percentage of women 21-64 years of age who were screened for cervical cancer by one of the following criteria:

- Women 21-64 years of age who had cervical cytology performed within the last three (3) years (2020 – 2022).
- Women 30-64 years of age who had human papillomavirus (HPV) testing or cervical cytology/HPV co-testing performed within the last five (5) years (2018 – 2022) and who were 30 years or older on the date of the test.

# P4P PROGRAM GUIDE

## **HbA1c Poor Control (>9%) for Diabetics**

Measures the percentage of members 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c test in 2022 shows poor control (>9%). A lower rate is better.

## **OTHER MEASURES**

### **Primary Care (PCP) Visits per 1,000 Members**

Measures primary care (PCP) visits in 2022 for members assigned to AHS.

Please be sure to complete the Initial Health Assessment (IHA) for new members within 120 days of enrollment during their PCP visit.

### **Emergency Department (ED) Visits per 1,000 Members**

Measures the utilization of Emergency Department (ED) visits in 2022 for members assigned to AHS. Please review and follow-up with members on the monthly ED Visit Report.

### **Readmission Rate**

Measures the percentage of acute inpatient admissions in 2022 that were followed by an unplanned acute readmission for any diagnosis within 30 days for members assigned to AHS.

Excludes OB admissions and planned admissions (e.g., inpatient chemotherapy, inpatient rehabilitation, organ transplant).

### **Flu Vaccination Rate**

Measures the percentage of members six (6) months old and above assigned to AHS who received the flu vaccination in 2022.

### **Member Satisfaction Survey: Non-Urgent Appointment Availability**

On a quarterly basis, members who have had a visit with a PCP are randomly selected for a satisfaction survey. This measure calculates the percentage of survey responses received in 2022 that indicate the member was able to schedule a non-urgent appointment between 0-10 days.

The survey question reads:

“In the last six (6) months, when you made an appointment either in person or by telephone for a check-up or routine care with this provider, when was your appointment either in person or by telephone scheduled?”

- a. 0–10 days
- b. More than 10 days

### **Screening for Depression**

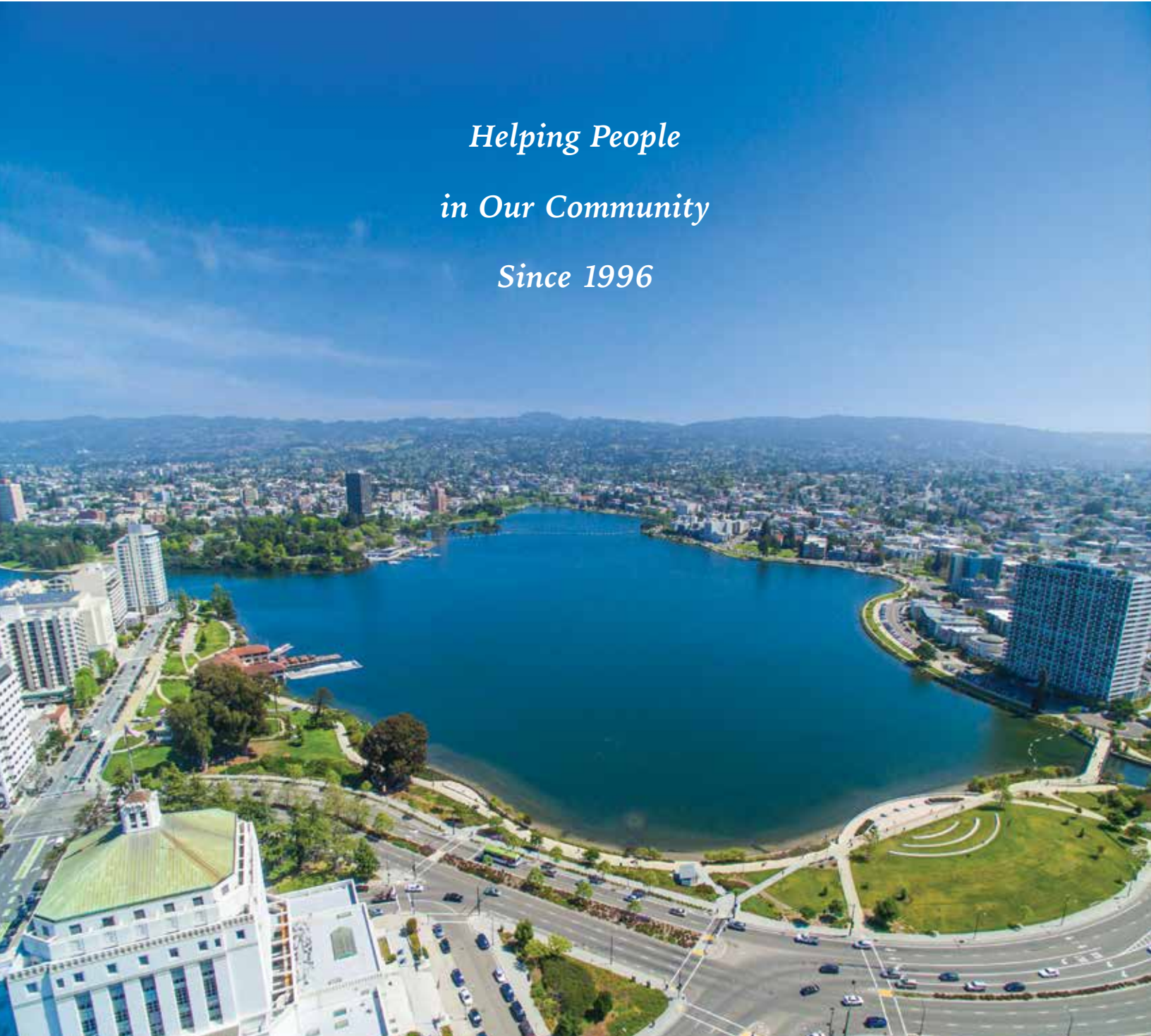
Measures the percentage of members 12 years of age and above assigned to AHS who were screened for depression in 2022.







*Helping People  
in Our Community  
Since 1996*



[www.alamedaalliance.org](http://www.alamedaalliance.org)

# P4P PROGRAM ATTESTATION

By signing below, I \_\_\_\_\_ attest that I have  
Print Name  
received the following materials as they relate to the Alameda Alliance for Health (Alliance)  
Pay-for-Performance (P4P) program for measurement year 2022.

- 2022 P4P Program Guide
- 2022 P4P Program Quick Reference Guides

I also attest that I have received information on whom to contact with any questions  
or if further assistance is needed.

**Provider/Group Name (Print):** \_\_\_\_\_

**Signature of Person Attesting:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## 2022 P4P PROGRAM QUICK REFERENCE GUIDE FOR AHS PROVIDERS

MEASURE	DESCRIPTION	DOCUMENTATION
<b>Well-Child Visits in the First 15 Months of Life: Six (6) or More Visits*</b>	Children who turned 15 months old during 2022 and had six (6) or more well-child visits with a PCP during their first 15 months of life.	Follow the American Academy of Pediatrics Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents.
<b>Well-Child Visits for Age 15 Months to 30 Months: Two (2) or More Visits*</b>	Children who turned 30 months old during 2022 and had two (2) or more well-child visits with a PCP between the child's 15-month birthday plus 1 day and the 30-month birthday.	Follow the American Academy of Pediatrics Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents.
<b>Child and Adolescent Well-Care Visits*</b>	Members 3-21 years of age who had one (1) or more well-care visits with a PCP or OB/GYN during 2022.	Follow the American Academy of Pediatrics Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents.
<b>Child and Adolescent BMI Percentile Documentation*</b>	Members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of BMI percentile documentation.	Document height, weight, and BMI percentile in 2022. BMI percentile may also be plotted on an age-growth chart.
<b>Child and Adolescent Counseling for Nutrition*</b>	Members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of counseling for nutrition.	Document at least one of the following: <ul style="list-style-type: none"> <li>• Discussion of current nutrition behaviors.</li> <li>• Checklist indicating nutrition was addressed.</li> <li>• Counseling or referral for nutrition education.</li> <li>• Member received educational materials on nutrition during a face-to-face visit.</li> <li>• Anticipatory guidance for nutrition.</li> <li>• Weight or obesity counseling.</li> </ul>
<b>Child and Adolescent Counseling for Physical Activity*</b>	Members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of counseling for physical activity.	Document at least one of the following: <ul style="list-style-type: none"> <li>• Discussion of current physical activity behaviors.</li> <li>• Checklist indicating physical activity was addressed.</li> <li>• Counseling or referral for physical activity.</li> <li>• Member received educational materials on physical activity during a face-to-face visit.</li> <li>• Anticipatory guidance specific to the child's physical activity.</li> <li>• Weight or obesity counseling.</li> </ul>
<b>Breast Cancer Screening</b>	Women 50-74 years of age who had a mammogram between October 1, 2020 and December 31, 2022.	Based on claims data.
<b>Cervical Cancer Screening</b>	Women 21-64 years of age who were screened for cervical cancer by one of the following criteria: <ul style="list-style-type: none"> <li>• Women 21-64 years of age who had cervical cytology performed within the last three (3) years (2020-2022).</li> <li>• Women 30-64 years of age who had human papillomavirus (HPV) testing or cervical cytology/HPV co-testing performed within the last five (5) years (2018-2022) and who were 30 years or older on the date of the test.</li> </ul>	<ul style="list-style-type: none"> <li>• When the screening is completed offsite, obtain the record and results to ensure medical record is complete.</li> <li>• If patient had a hysterectomy, document date, type of surgery (TAH, complete) and absence or presence of cervix.</li> <li>• If date of hysterectomy is unknown, document the year.</li> </ul>
<b>HbA1c Poor Control (&gt;9%) for Diabetics</b>	Members 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c test in 2022 shows poor control (>9%). A lower rate is better.	<ul style="list-style-type: none"> <li>• Document HbA1c test in 2022 along with result. Goal is &lt; 8.0%.</li> <li>• Repeat labs indicating poor control (&gt; 9.0%) later in 2022.</li> <li>• When the service is completed off-site, obtain the record and results to ensure medical record is complete.</li> </ul>

## 2022 P4P PROGRAM QUICK REFERENCE GUIDE FOR AHS PROVIDERS (CONT.)

MEASURE	DESCRIPTION	DOCUMENTATION
<b>PCP Visits Per 1,000 Members*</b>	Measures PCP visits in 2022 for members assigned to AHS.	Based on claims data. Visit must be in an outpatient setting – e.g. Office POS 11, FQHC POS 50. Visit must be with a provider that is contracted as a PCP or mid-level.
<b>Emergency Department (ED) Visits per 1,000 Members</b>	Measures the utilization of Emergency Department (ED) visits in 2022 for members assigned to AHS. A lower rate is better.	Based on claims data. Please review and follow-up with members on the monthly ED Visit Report.
<b>Readmission Rate</b>	Measures the percentage of acute inpatient admissions in 2022 that were followed by an unplanned acute readmission for any diagnosis within 30 days for members assigned to AHS. Excludes OB admissions and planned admissions (e.g., inpatient chemotherapy, inpatient rehabilitation, organ transplant).	Based on claims data.
<b>Flu Vaccination Rate</b>	Measures the percentage of members age 6 months and above assigned to AHS who received the flu vaccination in 2022.	Based on claims data and California Immunization Registry (CAIR) data.
<b>Member Satisfaction Survey: Non-Urgent Appointment Availability</b>	Measures the percentage of survey responses received in 2022 that indicate the member was able to schedule a non-urgent appointment between 0-10 days.	Survey question: “In the last six (6) months, when you made an appointment either in person or by telephone for a check-up or routine care with this provider, when was your appointment either in person or by telephone scheduled?” a. 0-10 days b. More than 10 days
<b>Screening for Depression*</b>	Measures the percentage of members 12 years of age and above assigned to AHS who were screened for depression in 2022.	Based on claims data.

\*Telehealth is allowed for services that can be done via telehealth.

## 2022 P4P PROGRAM QUICK REFERENCE GUIDE FOR AHS BILLING STAFF

MEASURE	DESCRIPTION	CODES
<b>Well-Child Visits in the First 15 Months of Life: Six (6) or More Visits*</b>	Children who turned 15 months old during 2022 and had six (6) or more well-child visits with a PCP during their first 15 months of life.	<b>CPT:</b> 99381, 99382, 99391, 99392, 99461 <b>Or ICD-10 Dx:</b> Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z76.1, Z76.2
<b>Well-Child Visits for Age 15 Months to 30 Months: Two (2) or More Visits*</b>	Children who turned 30 months old during 2022 and had two (2) or more well-child visits with a PCP between the child's 15-month birthday plus 1 day and the 30-month birthday.	<b>CPT:</b> 99381, 99382, 99391, 99392, 99461 <b>Or ICD-10 Dx:</b> Z00.121, Z00.129, Z00.2, Z76.1, Z76.2
<b>Child and Adolescent Well-Care Visits*</b>	Members 3-21 years of age who had one (1) or more well-care visits with a PCP or OB/GYN during 2022.	<b>CPT:</b> 99382-99385, 99392-99395 <b>Or ICD-10 Dx:</b> Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z02.5, Z76.2
<b>Child and Adolescent BMI Percentile Documentation*</b>	Members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of BMI percentile documentation.	<b>ICD-10 Dx:</b> Z68.51, Z68.52, Z68.53, Z68.54
<b>Child and Adolescent Counseling for Nutrition*</b>	Members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of counseling for nutrition.	<b>CPT:</b> 97802, 97803, 97804 <b>Or HCPCS:</b> G0447 <b>Or ICD-10 Dx:</b> Z71.3
<b>Child and Adolescent Counseling for Physical Activity*</b>	Members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN during 2022 and had evidence of counseling for physical activity.	<b>HCPCS:</b> G0447 <b>Or ICD-10 Dx:</b> Z02.5, Z71.82
<b>Breast Cancer Screening</b>	Women 50-74 years of age who had a mammogram between October 1, 2020 and December 31, 2022.	Codes submitted by imaging center.
<b>Cervical Cancer Screening</b>	Women 21-64 years of age who were screened for cervical cancer by one (1) of the following criteria: <ul style="list-style-type: none"> <li>Women 21-64 years of age who had cervical cytology performed within the last three (3) years (2020-2022).</li> <li>Women 30-64 years of age who had human papillomavirus (HPV) testing or cervical cytology/HPV co-testing performed within the last five (5) years (2018-2022) and who were 30 years or older on the date of the test.</li> </ul>	<b>Cervical Cytology</b> <b>CPT:</b> 88141-88143, 88147, 88148, 88150, 88152, 88153, 88164-88167, 88174, 88175 <b>Or LOINC:</b> Codes submitted by lab  <b>HPV Test</b> <b>CPT:</b> 87624, 87625 <b>Or LOINC:</b> Codes submitted by lab
<b>HbA1c Poor Control (&gt;9%) for Diabetics</b>	Members 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c test in 2022 shows poor control (>9%). A lower rate is better.	<b>CPT II:</b> <b>HbA1c level &lt; 7.0:</b> 3044F <b>HbA1c level ≥ 7.0 and &lt; 8.0:</b> 3051F <b>HbA1c level ≥ 8.0 and ≤ 9.0:</b> 3052F <b>HbA1c level &gt; 9.0:</b> 3046F
<b>PCP Visits per 1,000 Members*</b>	Measures PCP Visits in 2022 for members assigned to AHS.	<b>CPT:</b> 99201-99499, if covered Medi-Cal code Visit must be in an outpatient setting – e.g. Office POS 11, FQHC POS 50. Visit must be with a provider that is contracted as a PCP or mid-level.
<b>Flu Vaccination Rate</b>	Measures the percentage of members age 6 months and above assigned to AHS who received the flu vaccination in 2022.	<b>Influenza CPT:</b> 90630, 90653-90658, 90661, 90662, 90673, 90674, 90682, 90685-90689, 90756 <b>Influenza LAIV CPT:</b> 90660, 90672
<b>Screening for Depression*</b>	Measures the percentage of members 12 years of age and above assigned to AHS who were screened for depression in 2022.	<b>CPT:</b> 96127 <b>with ICD-10 Dx:</b> Z13.31 <b>Or HCPCS:</b> G8431, G8510

\*Telehealth is allowed for services that can be done via telehealth. Please bill with POS 02 and modifier 95.

If you have any questions, please call the Alliance Provider Services Department  
Monday – Friday, 7:30 am – 5 pm  
Phone Number: **1.510.747.4510**  
[www.alamedaalliance.org](http://www.alamedaalliance.org)