

PAY-FOR-PERFORMANCE (P4P) PROGRAM

FOR ALAMEDA HEALTH SYSTEM



ALAMEDA
Alliance
FOR HEALTH

2023

A NOTE FROM OUR SR. 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 317,000 children and adults. We value the high-quality, accessible, and affordable health care services that you deliver as our provider partner.

Our 2023 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

Sr. Medical Director – Quality Improvement

Email: **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**

P4P PROGRAM GUIDE

Program Overview – 2023



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, 2023 – December 31, 2023

Payment Date: September 2024

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	60% of points awarded per measure if the NCQA 50th Percentile is met. 75th Percentile = 80% of points 90th Percentile = 100% of points If below 50th Percentile: 3% increase from 2022 = 20% of points 6% increase from 2022 = 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 NCQA 50th Percentile 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	Lead Screening in Children	5	
5	Follow-up After ED Visit for Mental Illness - 30 Days	10	
6	Breast Cancer Screening	10	
7	Cervical Cancer Screening	10	
8	HbA1c Poor Control (>9%) for Diabetics*	5	
Clinical Quality Measures Total Points:		60	

Other Measures			
#	MEASURES	POINTS	GOAL
9	PCP Visits per 1,000 Members	10	0.5% increase from 2022 visits per 1,000 rate = 1/3 points 1% increase from 2022 visits per 1,000 rate = 2/3 points 1.5% increase from 2022 visits per 1,000 rate = Full points
10	Emergency Department (ED) Visits per 1,000 Members	10	20% of points awarded for each 0.5% below the overall 2023 rate for the Alliance, up to 2.5% below.
11	Readmission Rate	10	0.5% decrease in readmission rate = 1/3 points 1% decrease in readmission rate = 2/3 points 1.5% decrease in readmission rate = Full points
12	Member Satisfaction Survey: Urgent Appointment Availability	5	Full points if 70% of responses indicate member was able to get an urgent appointment within 2 business days. 3% improvement based on prior year gets 50% of the points. A minimum of 10 survey responses is required for the measurement year.
13	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 business days. 3% improvement based on prior year gets 50% of the points. A minimum of 10 survey responses is required for the measurement year.
Other Measures Total Points:		40	
TOTAL		100	

P4P PROGRAM GUIDE

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 2023 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 2023 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 2023.

Lead Screening in Children

Measures the percentage of members 2 years of age who had one (1) or more capillary or venous lead blood tests for lead poisoning in 2023 by their 2nd birthday.

Follow-up After ED Visit for Mental Illness – 30 Days

Measures the percentage of ED Visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness within 30 days.

Breast Cancer Screening

Measures the percentage of women 50-74 years of age who had a mammogram between October 1, 2021 and December 31, 2023.

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 (2021 – 2023).
- 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 (2019 – 2023) and who were 30 years or older on the date of the test.

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 2023 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 2023 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 2023 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 2023 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).

Member Satisfaction Survey: 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 2023 that indicate the member was able to schedule an urgent appointment within 2 business days.

The survey question reads:

“In the last six (6) months, when you made an appointment either in person or by telephone for urgent care that you needed right away, when was your appointment either in person or by telephone scheduled?”

- a. 0-2 business days
- b. 3-4 business days
- c. More than 4 business days

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 2023 that indicate the member was able to schedule a non-urgent appointment between 0-10 business days.

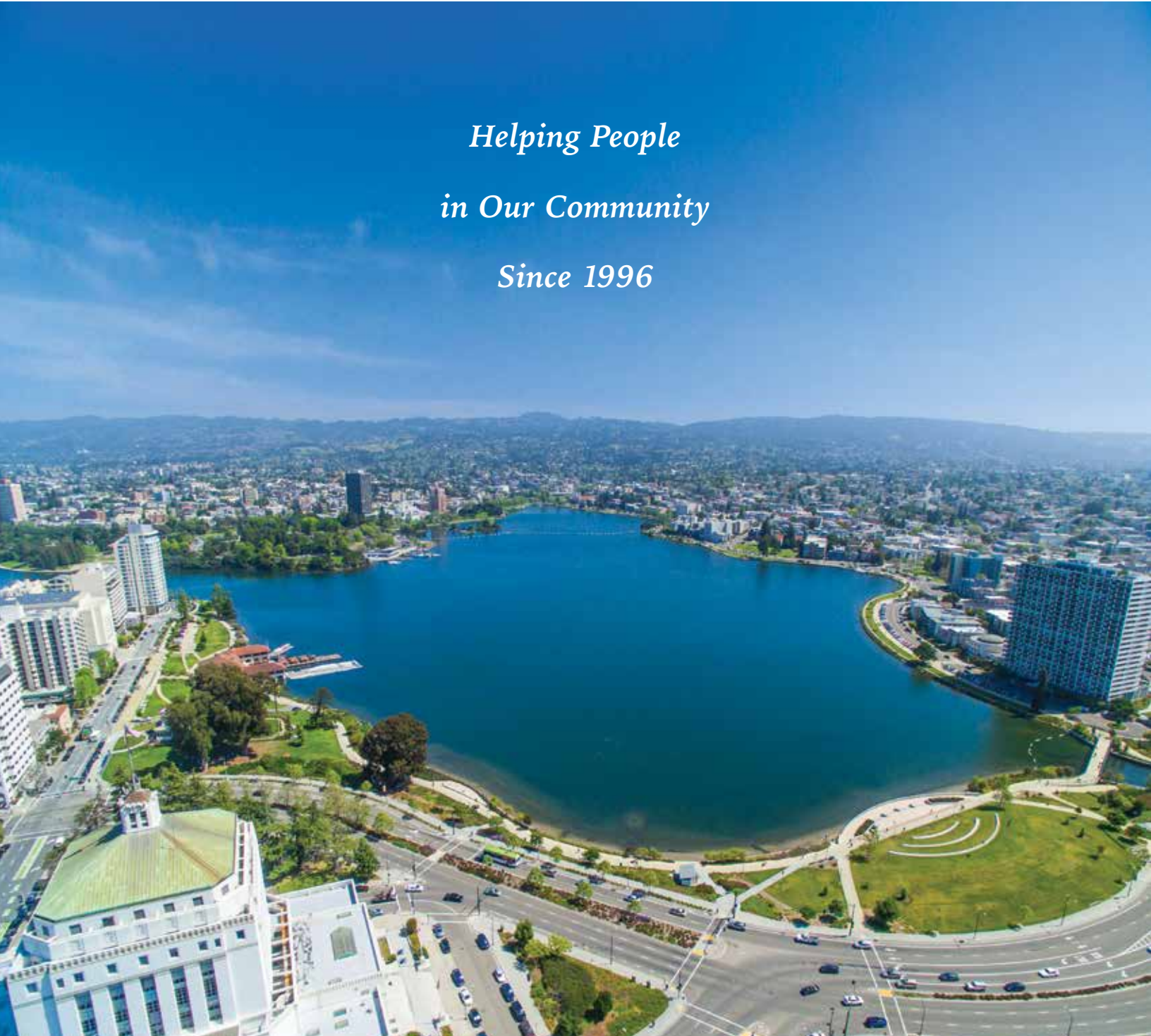
The survey question reads:

“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 business days
- b. More than 10 business days



*Helping People
in Our Community
Since 1996*



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 2023.

- 2023 P4P Program Guide
- 2023 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: _____

2023 P4P PROGRAM QUICK REFERENCE GUIDE FOR AHS PROVIDERS

MEASURE	DESCRIPTION	DOCUMENTATION
Well-Child Visits in the First 15 Months of Life: Six (6) or More Visits*	Children who turned 15 months old during 2023 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.
Well-Child Visits for Age 15 Months to 30 Months: Two (2) or More Visits*	Children who turned 30 months old during 2023 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.
Child and Adolescent Well-Care Visits*	Members 3-21 years of age who had one (1) or more well-care visits with a PCP or OB/GYN during 2023.	Follow the American Academy of Pediatrics Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents.
Lead Screening in Children	Members 2 years of age who had one or more capillary or venous lead blood tests for lead poisoning in 2023 by their 2nd birthday.	Document both of the following: <ul style="list-style-type: none"> • A note indicating the date the test was performed. • The result or finding.
Follow-up After ED Visit for Mental Illness - 30 Days*	Measures the percentage of ED Visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness within 30 days.	Based on claims data that a member had a follow-up visit within 30 days after the ED Visit with a practitioner: <ul style="list-style-type: none"> • with principal diagnosis of a mental health disorder or • with a principal diagnosis of intentional self-harm and any diagnosis of a mental health disorder.
Breast Cancer Screening	Women 50-74 years of age who had a mammogram between October 1, 2021 and December 31, 2023.	Based on claims data.
Cervical Cancer Screening	Women 21-64 years of age who were screened for cervical cancer by one of the following criteria: <ul style="list-style-type: none"> • Women 21-64 years of age who had cervical cytology performed within the last three (3) years (2021-2023). • 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 (2019-2023) and who were 30 years or older on the date of the test. 	<ul style="list-style-type: none"> • When the screening is completed offsite, obtain the record and results to ensure medical record is complete. • If patient had a hysterectomy, document date, type of surgery (TAH, complete) and absence or presence of cervix. • If date of hysterectomy is unknown, document the year.
HbA1c Poor Control (>9%) for Diabetics	Members 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c test in 2023 shows poor control (>9%). A lower rate is better.	<ul style="list-style-type: none"> • Document HbA1c test in 2023 along with result. Goal is < 8.0%. • Repeat labs indicating poor control (> 9.0%) later in 2023. • When the service is completed off-site, obtain the record and results to ensure medical record is complete.
PCP Visits Per 1,000 Members*	Measures PCP visits in 2023 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.
Emergency Department (ED) Visits per 1,000 Members	Measures the utilization of Emergency Department (ED) visits in 2023 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.

2023 P4P PROGRAM QUICK REFERENCE GUIDE FOR AHS PROVIDERS (CONT.)

MEASURE	DESCRIPTION	DOCUMENTATION
Readmission Rate	Measures the percentage of acute inpatient admissions in 2023 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.
Member Satisfaction Survey: Urgent Appointment Availability	Measures the percentage of survey responses received in 2023 that indicate the member was able to schedule an urgent appointment within 2 business days.	Survey question: “In the last six (6) months, when you made an appointment either in person or by telephone for urgent care that you needed right away, when was your appointment either in person or by telephone scheduled?” a. 0-2 business days b. 3-4 business days c. More than 4 business days
Member Satisfaction Survey: Non-Urgent Appointment Availability	Measures the percentage of survey responses received in 2023 that indicate the member was able to schedule a non-urgent appointment between 0-10 business 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 business days b. More than 10 business days

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

2023 P4P PROGRAM QUICK REFERENCE GUIDE FOR AHS BILLING STAFF

MEASURE	DESCRIPTION	CODES
Well-Child Visits in the First 15 Months of Life: Six (6) or More Visits*	Children who turned 15 months old during 2023 and had six (6) or more well-child visits with a PCP during their first 15 months of life.	CPT: 99381, 99382, 99391, 99392, 99461 Or ICD-10 Dx: Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z76.1, Z76.2
Well-Child Visits for Age 15 Months to 30 Months: Two (2) or More Visits*	Children who turned 30 months old during 2023 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.	CPT: 99381, 99382, 99391, 99392, 99461 Or ICD-10 Dx: Z00.121, Z00.129, Z00.2, Z76.1, Z76.2
Child and Adolescent Well-Care Visits*	Members 3-21 years of age who had one (1) or more well-care visits with a PCP or OB/GYN during 2023.	CPT: 99382-99385, 99392-99395 Or ICD-10 Dx: Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z02.5, Z76.2
Lead Screening in Children	Members 2 years of age who had one or more capillary or venous lead blood tests for lead poisoning in 2023 by their second birthday.	CPT: 83655 Or LOINC: Codes submitted by lab
Follow-up After ED Visit for Mental Illness - 30 Days*	Measures the percentage of ED Visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness within 30 days.	CPT: 90791, 90792, 90832-90834, 90836-90840, 90847, 90849, 90853, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 Visit must have a principal diagnosis of a mental health disorder and must be in an outpatient setting – e.g. Office POS 11, FQHC POS 50.
Breast Cancer Screening	Women 50-74 years of age who had a mammogram between October 1, 2021 and December 31, 2023.	Codes submitted by imaging center.
Cervical Cancer Screening	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"> Women 21-64 years of age who had cervical cytology performed within the last three (3) years (2021-2023). 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 (2019-2023) and who were 30 years or older on the date of the test. 	Cervical Cytology CPT: 88141-88143, 88147, 88148, 88150, 88152, 88153, 88164-88167, 88174, 88175 Or LOINC: Codes submitted by lab HPV Test CPT: 87624, 87625 Or LOINC: Codes submitted by lab
HbA1c Poor Control (>9%) for Diabetics	Members 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c test in 2023 shows poor control (>9%). A lower rate is better.	CPT II: HbA1c level < 7.0: 3044F HbA1c level ≥ 7.0 and < 8.0: 3051F HbA1c level ≥ 8.0 and ≤ 9.0: 3052F HbA1c level > 9.0: 3046F
PCP Visits per 1,000 Members*	Measures PCP Visits in 2023 for members assigned to AHS.	CPT: 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.

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