



Quality of Care Improvement Program (QCIP)

The Health Net of California, Inc. (Health Net) Quality of Care Improvement Program (QCIP) recognizes participating physician groups (PPGs) for excellence in care and service to members. QCIP rewards PPG performance based largely on the Integrated Healthcare Association (IHA) Value Based Pay for Performance (VBP4P) program.

This update includes information about the 2018 QCIP encounter data requirements, data-sharing requirements and final award calculations for the 2018 measurement year (MY).

PARTICIPATION REQUIREMENTS

Encounter Data Requirements

In order for a PPG to gain entry into the Health Net 2019 QCIP (2018 MY), Health Net must receive encounter data for 2018 dates of service by February 28, 2019.

Any encounter data submissions received after the deadline due to PPG delays or data issues, clearinghouse delays or data issues, or delays or data issues for any other reasons will not be included in the program calculations.

Laboratory Data-Sharing Requirement

To be included in Health Net's QCIP program, Health Net requires that PPGs send letters to laboratories advising them to provide laboratory results directly to Health Net. If a PPG has not previously submitted a letter or communicated applicable changes or updates as indicated below, the PPG must do so by October 31, 2018.

Health Net utilizes laboratory results to support quality of care initiatives and for Healthcare Effectiveness Data and Information Set (HEDIS®) reporting requirements. These letters must explicitly include the frequency for data transmission; monthly or weekly submission is highly preferred. Laboratory results must be submitted in an agreed-upon format.

PPGs should send copies of laboratory letters via email or secure fax to Eric Garthwaite, Director, HEDIS – Measurement and Reporting, as follows:

Email: Eric.Garthwaite@healthnet.com
Fax: 1-800-773-9628

If PPGs have changes in their laboratory vendors or process, they must send letters to Health Net within 60 days following the changes. PPGs that have questions regarding data-sharing should contact Eric Garthwaite via email or fax as listed above.

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO/POS
- PPO
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
 - Kern
 - Los Angeles
 - Molina
 - Riverside
 - Sacramento
 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

PROVIDER SERVICES

provider_services@healthnet.com

Health Net Employer Group HMO and POS

1-800-641-7761

provider.healthnet.com

IFP – CommunityCare HMO

1-888-926-2164

provider.healthnetcalifornia.com

PROVIDER COMMUNICATIONS

provider.communications@healthnet.com

healthnet.com

fax 1-800-937-6086

METHODOLOGY AND CALCULATION OF POTENTIAL AWARD

Methodology

Health Net applies IHA's quality methodology for the 2018 MY (2019 QCIP) and rewards incentives based on the following domains:

- 60 percent – clinical
- 30 percent – patient experience
- 10 percent – advancing care information (e-Measures)

The program scores each measure on both attainment and improvement, taking the higher of the two for payment purposes. Details regarding the methodology are posted on IHA's website at www.iha.org/manuals_operations.html.

Final Award Calculation¹

Health Net adjusts the final award based on the professional encounter submission rate (ESR) which includes evaluation and management (E&M) and other professional encounters as reported by the PPG and received by Health Net on the HIPAA 837P form by February 28, 2019. The Health Net ESR is based on a tiered methodology, as follows:

- 100 percent payout if the PPG's encounter rate per member per year (PMPY) is ranked in the 75th percentile or above.
- 75 percent payout if the PPG's encounter rate PMPY is ranked in the 50th–75th percentile.
- 50 percent payout if the PPG's encounter rate PMPY is ranked in the 25th–50th percentile.
- 0 percent payout if the PPG's encounter rate PMPY is ranked under the 25th percentile.

The Health Net encounter rate includes the following codes by category:

Category	Description
E&M CODES	Procedure codes 92002, 92004, 92012, 92014, and 99201–99499
OTHER	All other procedure codes except laboratory/pathology and radiology (CPT codes 70000–89999)
HEALTH NET ENCOUNTER RATE	Total of the above categories

ADDITIONAL INFORMATION

If you have questions regarding encounter data submissions, requirements or submission deadlines for QCIP, contact the Encounter Team at enc_group@healthnet.com.

If you have questions regarding the information contained in this update, contact the applicable Health Net Provider Services Center within 60 days at:

Line of Business	Telephone Number	Provider Portal	Email Address
HEALTH NET EMPLOYER GROUP HMO & POS	1-800-641-7761	provider.healthnet.com	provider_services@healthnet.com
IFP (COMMUNITYCARE HMO)	1-888-926-2164	provider.healthnetcalifornia.com	

¹ CommunityCare HMO membership and applicable professional paid claims paid directly by Health Net plus applicable encounter data submissions for CommunityCare members are included in this calculation.