



JENNIFER KENT
DIRECTOR

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



EDMUND G. BROWN JR.
GOVERNOR

DATE: August 12, 2018

DUALS PLAN LETTER 18-002
SUPERSEDES DUALS PLAN LETTER 16-001

TO: CAL MEDICCONNECT MEDICARE-MEDICAID PLANS

SUBJECT: PERFORMANCE IMPROVEMENT PROJECT REQUIREMENTS

PURPOSE:

The purpose of this Duals Plan Letter (DPL) is to notify all Medicare-Medicaid Plans (MMPs) participating in the Duals Demonstration Project, referred to as Cal MediConnect, of the requirements under the Quality Improvement Program stipulated in the three-way contract (contract).¹ MMPs are required to participate in one quality improvement project (QIP) that is a DHCS-facilitated statewide collaborative (contract section 2.16.4.3.1.2.2) during the course of Cal MediConnect.

BACKGROUND:

In January 2012, Governor Brown announced his intent to enhance health outcomes and beneficiary satisfaction for low-income Seniors and Persons with Disabilities by shifting service delivery away from institutional care to home and community-based settings. To implement that goal, the Legislature passed, and Governor Brown signed, Senate Bill (SB) 1008 (Committee on Budget and Fiscal Review, Chapter 33, Statutes of 2012), SB 1036 (Committee on Budget and Fiscal Review, Chapter 45, Statutes of 2012), SB 75 (Chapter 18, Statutes of 2015), SB 94 (Committee on Budget and Fiscal Review, Chapter 37, Statutes of 2013), and SB 97 (Committee on Budget and Fiscal Review, Chapter 52, Statutes of 2017) to authorize the Coordinated Care Initiative (CCI).

The state-mandated QIP is referred to as a Performance Improvement Project (PIP) in order to align with the Centers for Medicare and Medicaid Services' (CMS) terminology. The purpose of the PIP is to assess and improve processes and outcomes of health care provided by MMPs. Furthermore, the PIP must utilize the outcome-focused improvement strategies and must be documented and submitted on forms supplied by the Health Services Advisory Group (HSAG), DHCS' external quality review

¹The three-way contract can be found at: <https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/Downloads/CAContract01012018.pdf>

organization (EQRO).

POLICY:

PERFORMANCE IMPROVEMENT PROJECT

1. **PIP Topics:** DHCS works with MMPs to identify performance improvement topics that will positively affect MMP enrollees.
2. **PIP Approach:** The EQRO provides the PIP overview document, PIP Companion Guide, and submission forms.
 - a. **PIP Topic Selection:** MMPs are required to choose a focused PIP topic, in consultation with DHCS, to improve care coordination. DHCS/EQRO assists MMPs, when needed, in narrowing the focus of their PIP topics.
 - i. **Timelines and Format:** DHCS provides a timeline for PIP submissions and notifies MMPs of the format to use for the topic proposal and summary.
 - ii. **Form Submissions:** Each MMP must submit its completed forms to the EQRO's File Transfer Protocol (FTP) site with a copy to DHCS' quality mailbox. The website and contact information for the FTP site and quality mailbox are located below under Addresses for Electronic Submissions.
 - iii. **DHCS' Approval:** After receiving the MMP's submission, the EQRO validates the annual reporting provided on the PIP summary form for sound reasoning and validity. If the MMP receives an overall score of "Met," the EQRO notifies the MMP that its submission has been approved. If the MMP receives an overall score of "Partially Met" or "Not Met," the EQRO requests additional information, or suggests that the MMP participate in a technical assistance call with the EQRO.
 - b. **PIP Submissions:** All MMPs are required to use the DHCS EQRO methodology for their PIP submissions. The methodology is outlined and determined at the start of each new PIP and follows the lifecycle through to completion. For guidance on the current PIP submission and methodology contact your Managed Care Operations Division (MCO) Contract Manager. All PIP methodologies align with CMS' PIP protocols.

- c. **PIP Submission Timelines:** DHCS provides timelines for submission that outline important dates for the PIP cycle process. For the timeline and other instructions, MMPs should contact their MCO Contract Manager.
- d. **PIP Duration:** DHCS notifies MMPs of the length of the PIP cycle. PIPs typically last 12–18 months. MMPs who wish to conduct longer PIPs must request and receive approval from DHCS.
- e. **Communications, Trainings and Technical Assistance:**
 - i. **Designated Contacts:** MMPs are required to provide DHCS with one primary contact (PIP lead) and at least one backup contact who is familiar enough with the PIP to serve as back-up, should the PIP lead be absent. Only under extraordinary circumstances will DHCS approve an MMP's request for an extension of time to submit PIP-related documentation because of a staff absence.
 - ii. **Module-Specific Trainings and Technical Assistance:** The EQRO conducts module-specific trainings and technical assistance calls to guide MMPs through the PIP process. MMPs are required to participate in these calls. To ensure that PIPs are valid and result in real improvements in the care and services provided to MMP enrollees, DHCS periodically holds technical assistance conference calls for all MMPs to: (1) present changes in methodologies or processes, and (2) assist MMPs that are having difficulties with a PIP.

ADDRESSES FOR ELECTRONIC SUBMISSIONS

- **EQRO's FTP Website:** DHCS' EQRO, HSAG, uses a secure FTP website. All MMPs must identify staff members who need access to the FTP site and request access from Michelle Joo, Project Manager, HSAG, at mjoo@hsag.com.
- MMPs must upload their PIP information into their MMP-specific folder.
- **DHCS' Submission E-Address:** DHCS' quality mailbox: dhcsquality@dhcs.ca.gov.

MMPs are responsible for ensuring that their delegates comply with all applicable state and federal laws and regulations, contract requirements, and other DHCS guidance,

including DPLs. These requirements must be communicated by each MMP to all delegated entities and subcontractors.

If you have questions about the information in this DPL, please contact your MCO Contract Manager. DHCS may direct questions to the EQRO as appropriate.

Sincerely,

Original signed by Nathan Nau

Nathan Nau, Chief
Managed Care Quality and Monitoring Division