

QMED 2.0 DASHBOARD USER MANUAL

Summary

Select the Managed Care Plan

Anthem Blue Cross

QMED

Quality Measures for Encounter Data (QMED) is an analytics toolkit that evaluates the quality of post-adjudicated encounter data submitted to the California Department of Health Care Services (DHCS) via X12 transaction requirements. This dashboard displays Professional and Institutional encounter records submitted by Managed Care Plans and unique Health Plan Code (HCP) for each county in which the Managed Care Plans maintains a Provider network.

Overall Compliance Grade

Fail

Current Quarter

Pass - all HCPs pass threshold.
Fail - at least one HCP does not pass threshold.

County

Managed Care Plans

Health Plan Code

Measure Performance Overview (By Managed Care Plan): Anthem Blue Cross

Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
A.1 - Denials Corrected	Fail	Fail	Fail	Fail
C.1 - Type 1 Rendering NPI	Fail	Fail	Fail	Fail
R.1 - DHCS-Denied Encounters	Fail	Fail	Fail	Fail
T.1 - Denied Turnaround Time - INST	Fail	Fail	Fail	Fail
T.2 - Denied Turnaround Time - PROF	Fail	Fail	Fail	Fail
T.3 - Submission Lagtime - INST	Fail	Fail	Fail	Fail
T.4 - Submission Lagtime - PROF	Fail	Fail	Fail	Fail
U.1 - Duplicate Encounters	Fail	Pass	Fail	Pass
U.2 - Duplicate Service Lines - INST	Fail	Fail	Fail	Fail

Select the Measure

A.1 - Denials Corrected

A.1 - Denials Corrected: The percentage of denied encounters that are corrected.
Grade - Fail if <99.5%.

Measure Performance (By HCP code)

	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
Anthem, Alpine (385)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	No Grade
Anthem, Amador (101)	Fail (0.33%)	Fail (11.93%)	Fail (0.00%)	Fail (2.13%)
Anthem, Calaveras (103)	Fail (0.00%)	Fail (16.34%)	Fail (0.00%)	Fail (0.00%)
Anthem, El Dorado (386)	Fail (0.00%)	Fail (1.93%)	Fail (0.01%)	Fail (0.04%)
Anthem, Fresno (362)	Fail (0.05%)	Fail (58.08%)	Fail (0.02%)	Fail (0.61%)
Anthem, Inyo (107)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)

Overview

The Quality Measures for Encounter Data (QMED) 2.0 dashboard is an analytics tool designed to evaluate the quality and compliance of encounter data submitted to the California Department of Health Care Services (DHCS) through X12 transactions.

This dashboard helps users monitor how well Managed Care Plans and their associated Health Plan Codes are meeting data quality requirements across reporting periods.

The dashboard presents compliance results using a Pass/Fail grading system based on predefined thresholds for each quality measure. These measures evaluate areas such as:

- » Encounter denial correction rates
- » Rendering provider identification accuracy
- » Denied encounter processing
- » Submission lag time
- » Duplicate encounter detection
- » Duplicate service line detection
- » Turnaround time for denied encounters

The dashboard allows users to analyze performance across multiple perspectives, including:

- » Managed Care Plans
- » Counties
- » Health Plan Codes (HCPs)
- » Individual quality measures
- » Quarterly reporting periods

Results are visualized through tables and charts to allow users to quickly identify compliance issues, trends over time, and areas requiring corrective action.

Dashboard Navigation

Users can interact with the dashboard by:

- » Clicking primary navigation tabs
- » Selecting filters
- » Clicking table rows
- » Comparing plans and codes
- » Expanding visuals in Focus Mode

All visuals update dynamically based on selected filters and navigation.



The dashboard contains four primary navigation tabs located at the top of the report:

- » Summary
- » County
- » Managed Care Plans
- » Health Plan Code

Each tab presents the data from a different analytical perspective.

Dashboard Pages

Summary Page

Summary

Select the Managed Care Plan

Anthem Blue Cross

QMED

Quality Measures for Encounter Data (QMED) is an analytics toolkit that evaluates the quality of post-adjudicated encounter data submitted to the California Department of Health Care Services (DHCS) via X12 transaction requirements. This dashboard displays Professional and Institutional encounter records submitted by Managed Care Plans and unique Health Plan Code (HCP) for each county in which the Managed Care Plans maintains a Provider network.

Overall Compliance Grade

Fail

Current Quarter

Pass - all HCPs pass threshold.
Fail - at least one HCP does not pass threshold.

County

Managed Care Plans

Health Plan Code

2

Measure Performance Overview (By Managed Care Plan): Anthem Blue Cross

Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
A.1 - Denials Corrected	Fail	Fail	Fail	Fail
C.1 - Type 1 Rendering NPI	Fail	Fail	Fail	Fail
R.1 - DHCS-Denied Encounters	Fail	Fail	Fail	Fail
T.1 - Denied Turnaround Time - INST	Fail	Fail	Fail	Fail
T.2 - Denied Turnaround Time - PROF	Fail	Fail	Fail	Fail
T.3 - Submission Lagtime - INST	Fail	Fail	Fail	Fail
T.4 - Submission Lagtime - PROF	Fail	Fail	Fail	Fail
U.1 - Duplicate Encounters	Fail	Pass	Fail	Pass
U.2 - Duplicate Service Lines - INST	Fail	Fail	Fail	Fail

The matrix below shows thresholds and grading criteria by Health Plan Code (HCP) for selected measure.

3

Select the Measure

A.1 - Denials Corrected

A.1 - Denials Corrected: The percentage of denied encounters that are corrected.
Grade - Fail if <99.5%.

Measure Performance (By HCP code)	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
Anthem, Alpine (385)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	No Grade
Anthem, Amador (101)	Fail (0.33%)	Fail (11.93%)	Fail (0.00%)	Fail (2.13%)
Anthem, Calaveras (103)	Fail (0.00%)	Fail (16.34%)	Fail (0.00%)	Fail (0.00%)
Anthem, El Dorado (386)	Fail (0.00%)	Fail (1.93%)	Fail (0.01%)	Fail (0.04%)
Anthem, Fresno (362)	Fail (0.05%)	Fail (58.08%)	Fail (0.02%)	Fail (0.61%)
Anthem, Inyo (107)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)

No Grade: HCP submitted data, but the denominator is zero for the given measure calculation. Blank: HCP did not submit data for that time period or did not satisfy required 12 months of previous data submissions.

The Summary page serves as the primary dashboard view and provides a consolidated overview of performance metrics for the selected Managed Care Plan.

Select the Managed Care Plan

Anthem Blue Cross

This page allows users to quickly assess overall compliance and review performance across all quality measures and reporting quarters.

Key Elements

1. Select the Managed Care Plan filter

The “Select the Managed Care Plan” filter, located in the upper-lefts corner of the Summary page, determines the dataset displayed throughout the dashboard.

Select the Managed Care Plan

Anthem Blue Cross



All data presented on the Summary page, including the Measure Performance Overview and the HCP matrix, is directly tied to the selected Managed Care Plan.

2. Measure Performance Overview table

Measure Performance Overview (By Managed Care Plan): Anthem Blue Cross

Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
A.1 - Denials Corrected	Fail	Fail	Fail	Fail
C.1 - Type 1 Rendering NPI	Fail	Fail	Fail	Fail
R.1 - DHCS-Denied Encounters	Fail	Fail	Fail	Fail
T.1 - Denied Turnaround Time - INST	Fail	Fail	Fail	Fail
T.2 - Denied Turnaround Time - PROF	Fail	Fail	Fail	Fail
T.3 - Submission Lagtime - INST	Fail	Fail	Fail	Fail
T.4 - Submission Lagtime - PROF	Fail	Fail	Fail	Fail
U.1 - Duplicate Encounters	Fail	Pass	Fail	Pass
U.2 - Duplicate Service Lines - INST	Fail	Fail	Fail	Fail

This table displays quality measures and their Pass/Fail status for each reporting quarter.

Reporting periods include:

- » Jan – Mar (Q1)
- » Apr – Jun (Q2)
- » Jul – Sep (Q3)
- » Oct – Dec (Q4)

Each measure is evaluated against defined thresholds to determine whether the measure passed or failed.

Color Indicators

- » Blue – Pass
- » Orange – Fail
- » Blank / No Grade – No data available or measure not applicable

3. Measure Threshold Details table

The matrix below shows thresholds and grading criteria by Health Plan Code (HCP) for selected measure.

Select the Measure

A.1 - Denials Corrected

A.1 – Denials Corrected: The percentage of denied encounters that are corrected.
Grade - Fail if <99.5%.

Measure Performance (By HCP code)	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
Anthem, Alpine (385)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	No Grade
Anthem, Amador (101)	Fail (0.33%)	Fail (11.93%)	Fail (0.00%)	Fail (2.13%)
Anthem, Calaveras (103)	Fail (0.00%)	Fail (16.34%)	Fail (0.00%)	Fail (0.00%)
Anthem, El Dorado (386)	Fail (0.00%)	Fail (1.93%)	Fail (0.01%)	Fail (0.04%)
Anthem, Fresno (362)	Fail (0.05%)	Fail (58.08%)	Fail (0.02%)	Fail (0.61%)
Anthem, Inyo (107)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)
Anthem, Kern (370)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)

Below the summary matrix, the dashboard displays the grading criteria and thresholds for the selected measure.

Select the Measure

A.1 - Denials Corrected

This section helps users understand how performance is evaluated.

County Page

Summary

County

Managed Care Plans

Health Plan Code

Select the County

Search

☐ Select all
 ☐ Alameda
 ☐ Alpine
 ☐ Amador
 ☐ Calaveras
 ☐ Contra Costa
 ☐ El Dorado
 ☐ Fresno
 ☐ Imperial
 ☐ Inyo

Select the Managed Care Plan

Search

☒ Select all
 ☐ Alameda Alliance for Health
 ☒ Anthem Blue Cross
 ☐ Blue Shield of California Promise
 ☐ CalOptima
 ☐ CalViva Health
 ☐ CenCal Health
 ☐ Central California Alliance for Health
 ☐ Community Health Group
 ☐ Community Health Plan Imperial Valley
 ☐ Contra Costa Health Plan
 ☐ Gold Coast Health Plan
 ☐ Health Net Community Solutions
 ☐ Health Plan of San Joaquin
 ☐ Health Plan of San Mateo

County Selected: All Counties

Reset to Default

County	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
Alameda	Fail	Fail	Fail	Fail
Alpine	Fail	Fail	Fail	Fail
Amador	Fail	Fail	Fail	Fail
Calaveras	Fail	Fail	Fail	Fail
Contra Costa	Fail	Fail	Fail	Fail
El Dorado	Fail	Fail	Fail	Fail
Fresno	Fail	Fail	Fail	Fail
Imperial	Fail	Fail	Fail	Fail
Inyo	Fail	Fail	Fail	Fail
Kern	Fail	Fail	Fail	Fail
Kings	Fail	Fail	Fail	Fail
Los Angeles	Fail	Fail	Fail	Fail
Madera	Fail	Fail	Fail	Fail
Marin	Fail	Fail	Fail	Fail
Mariposa	Fail	Fail	Fail	Fail
Mono	Fail	Fail	Fail	Fail
Napa	Fail	Fail	Fail	Fail
Orange	Fail	Fail	Fail	Fail
Placer	Fail	Fail	Fail	Fail

No Grade: HCP submitted data, but the denominator is zero for the given measure calculation. Blank: HCP did not submit data for that time period or did not satisfy required 12 months of previous data submissions.

The County tab allows users to analyze encounter data quality performance across California counties.

This view is helpful for identifying regional variations in data quality performance.

Key Elements

1. County Table

County Selected: All Counties				Reset to Default
County	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
⊕ Alameda	Fail	Fail	Fail	Fail
⊕ Alpine	Fail	Fail	Fail	Fail
⊕ Amador	Fail	Fail	Fail	Fail
⊕ Calaveras	Fail	Fail	Fail	Fail
⊕ Contra Costa	Fail	Fail	Fail	Fail
⊕ El Dorado	Fail	Fail	Fail	Fail
⊕ Fresno	Fail	Fail	Fail	Fail
⊕ Imperial	Fail	Fail	Fail	Fail
⊕ Inyo	Fail	Fail	Fail	Fail
⊕ Kern	Fail	Fail	Fail	Fail
⊕ Kings	Fail	Fail	Fail	Fail
⊕ Los Angeles	Fail	Fail	Fail	Fail
⊕ Madera	Fail	Fail	Fail	Fail
⊕ Marin	Fail	Fail	Fail	Fail
⊕ Mariposa	Fail	Fail	Fail	Fail
⊕ Mono	Fail	Fail	Fail	Fail
⊕ Napa	Fail	Fail	Fail	Fail
⊕ Orange	Fail	Fail	Fail	Fail
⊕ Placer	Fail	Fail	Fail	Fail

The table displays:

- » Counties
- » Pass/Fail results for each quarter
- » Expandable rows to drill into more detailed results

Users can compare performance trends across counties and identify counties where data quality issues are most frequent.

2. County Filter

Select the County

🔍 Search

- ☐ Select all
- ☐ Alameda
- ☐ Alpine
- ☐ Amador
- ☐ Butte
- ☐ Calaveras
- ☐ Colusa
- ☐ Contra Costa
- ☐ Del Norte
- ☐ El Dorado

Users can filter the results using the County selection panel.

Available options include:

- » Selecting a single county
- » Selecting multiple counties
- » Selecting All Counties

This allows targeted analysis for specific geographic areas.

3. Managed Care Plan Filter

Select the Managed Care Plan

 Search

- ☐ Select all
- ☐ Alameda Alliance for Health
- ☐ Anthem Blue Cross
- ☐ Blue Shield of California Promise
- ☐ CalOptima
- ☐ CalViva Health
- ☐ CenCal Health
- ☐ Central California Alliance for Health
- ☐ Community Health Group
- ☐ Community Health Plan Imperial Valley
- ☐ Contra Costa Health Plan
- ☐ Gold Coast Health Plan
- ☐ Health Net Community Solutions
- ☐ Health Plan of San Joaquin

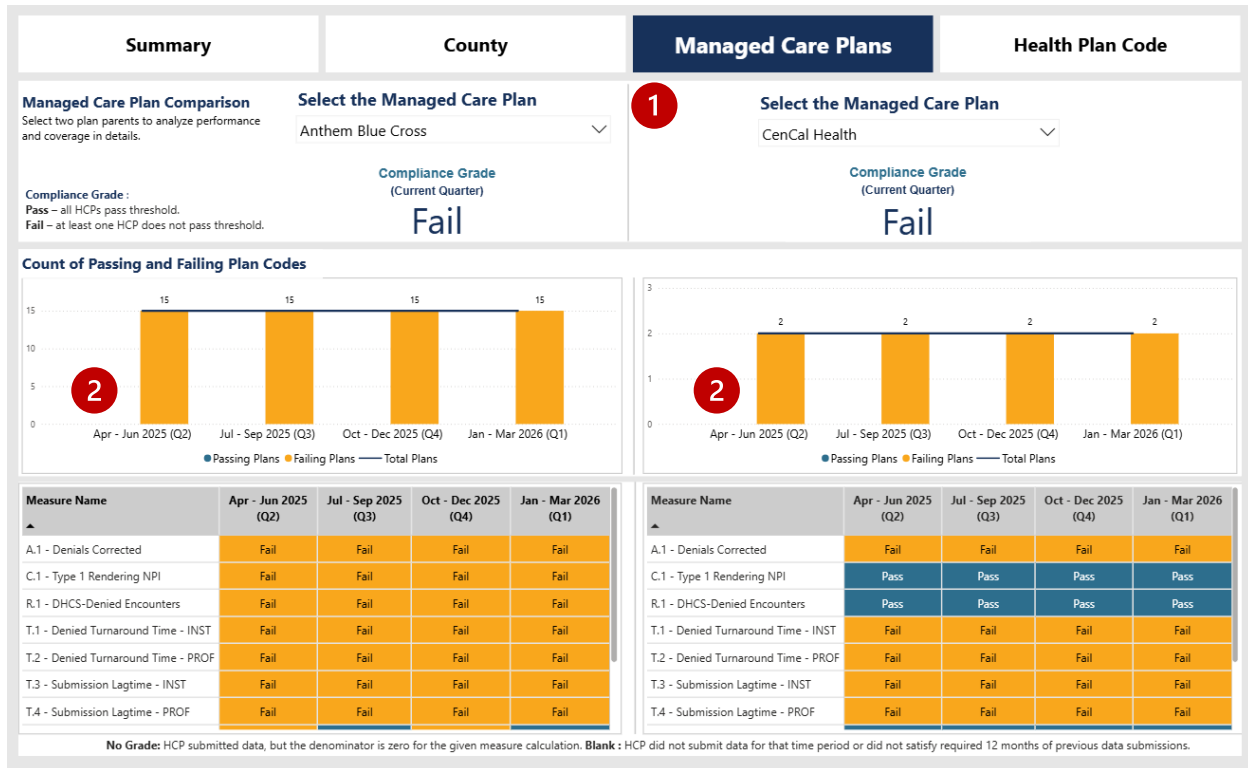
Users can filter the results using the Managed Care Plan panel. This allows targeted analysis for specific care plan.

4. Reset Filter Button

Reset to Default

This is the filter reset button. Click on it. This will wipe out any pre-existing filters that may have been placed on the data.

Managed Care Plans Page

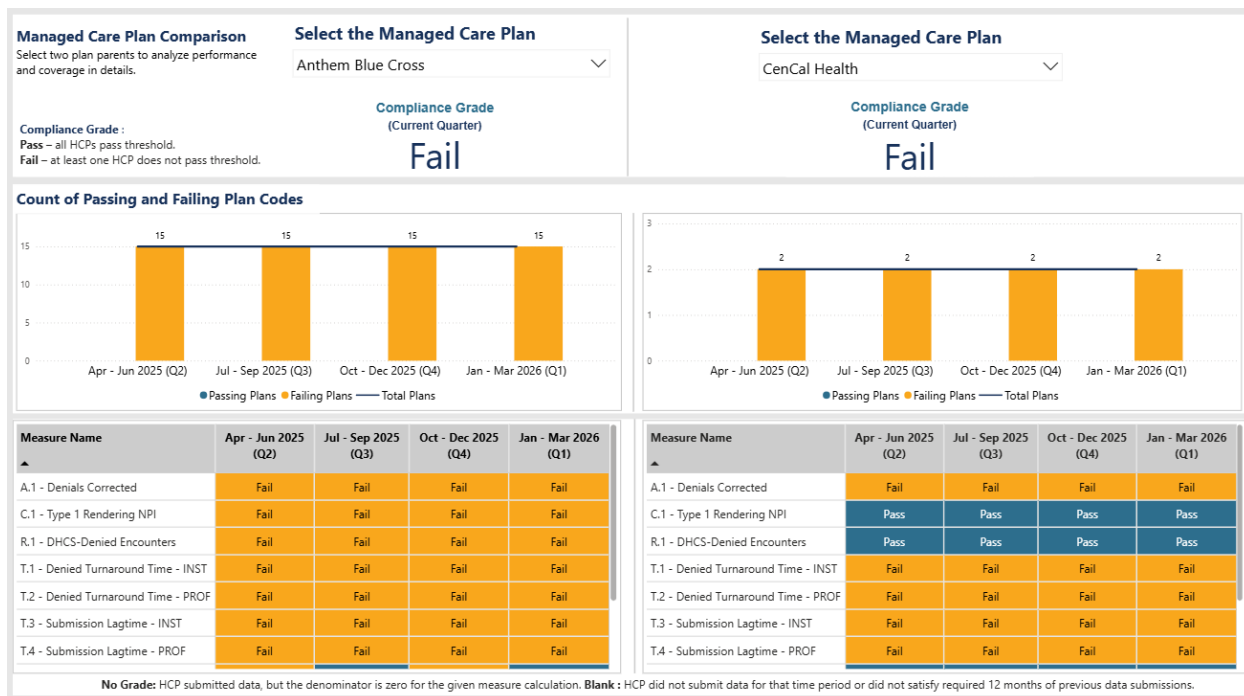


The Managed Care Plans tab allows users to compare the performance of different Managed Care Plans.

This view is useful for identifying which plans are meeting data quality thresholds and which require improvement.

Key Elements

1. Comparison View



The dashboard allows users to select two Managed Care Plans for side-by-side comparison.

Displayed elements include:

- » Current compliance grade
- » Count of passing and failing plan codes
- » Measure performance by quarter

2. Charts

The charts visualize:

- » Total number of plan codes
- » Number of passing plan codes
- » Number of failing plan codes

This allows quick identification of overall plan performance trends.

Health Plan Code Page

Summary

County

Managed Care Plans

Health Plan Code

Health Plan Code Comparison

Select two Health plan codes to analyze performance and coverage in details.

Compliance Grade:

Pass – all HCPs pass threshold.

Fail – at least one HCP does not pass threshold.

Select the Health Plan Code

Anthem, Amador (101)

Compliance Grade

(Current Quarter)

Fail

Select the Health Plan Code

Blue Shield, San Diego (167)

Compliance Grade

(Current Quarter)

Fail

Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
A.1 - Denials Corrected	Fail (0.33%)	Fail (11.93%)	Fail (0.00%)	Fail (2.13%)
C.1 - Type 1 Rendering NPI	Fail (86.36%)	Fail (85.54%)	Fail (84.65%)	Fail (87.77%)
R.1 - DHCS-Denied Encounters	Fail (17.01%)	Pass (0.65%)	Fail (9.10%)	Pass (0.15%)
T.1 - Denied Turnaround Time - INST	No Grade	Fail (0.00%)	Pass (100.00%)	Fail (0.00%)
T.2 - Denied Turnaround Time - PROF	Fail (0.00%)	Fail (2.56%)	Fail (0.00%)	Fail (0.00%)
T.3 - Submission Lagtime - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)
T.4 - Submission Lagtime - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)
U.1 - Duplicate Encounters	Fail (16.96%)	Pass (0.01%)	Fail (9.28%)	Pass (0.14%)
U.2 - Duplicate Service Lines - INST	Pass (2.43%)	Pass (2.55%)	Pass (3.32%)	Pass (2.79%)
U.3 - Duplicate Service Lines - PROF	Fail (0.73%)	Fail (0.89%)	Fail (1.31%)	Pass (0.47%)

Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
A.1 - Denials Corrected	Fail (2.53%)	Fail (0.00%)	Pass (99.60%)	Fail (94.66%)
C.1 - Type 1 Rendering NPI	Fail (83.47%)	Fail (86.77%)	Fail (88.76%)	Fail (88.58%)
R.1 - DHCS-Denied Encounters	Pass (0.13%)	Pass (0.02%)	Fail (36.56%)	Pass (0.03%)
T.1 - Denied Turnaround Time - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Pass (99.94%)
T.2 - Denied Turnaround Time - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Pass (100.00%)
T.3 - Submission Lagtime - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)
T.4 - Submission Lagtime - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)
U.1 - Duplicate Encounters	Pass (0.06%)	Pass (0.00%)	Pass (0.02%)	Pass (0.01%)
U.2 - Duplicate Service Lines - INST	Pass (2.44%)	Pass (2.20%)	Pass (2.20%)	Pass (2.22%)
U.3 - Duplicate Service Lines - PROF	Fail (0.97%)	Fail (0.53%)	Pass (0.49%)	Fail (0.59%)

No Grade: HCP submitted data, but the denominator is zero for the given measure calculation. Blank : HCP did not submit data for that time period or did not satisfy required 12 months of previous data submissions.

The Health Plan Code tab provides the most detailed level of analysis.

This tab allows users to examine performance at the Health Plan Code (HCP) level.

Health Plan Codes represent individual plan identifiers associated with Managed Care Plans.

Key Elements

1. Side-by-Side Comparison

Health Plan Code Comparison Select two Health plan codes to analyze performance and coverage in details.					Select the Health Plan Code Anthem, Amador (101) ▾					Select the Health Plan Code Blue Shield, San Diego (167) ▾				
Compliance Grade: Pass – all HCPs pass threshold. Fail – at least one HCP does not pass threshold.					Compliance Grade (Current Quarter)					Compliance Grade (Current Quarter)				
Fail										Fail				
Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)	Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)	Measure Name	Apr - Jun 2025 (Q2)	Jul - Sep 2025 (Q3)	Oct - Dec 2025 (Q4)	Jan - Mar 2026 (Q1)
A.1 - Denials Corrected	Fail (0.33%)	Fail (11.93%)	Fail (0.00%)	Fail (2.13%)	A.1 - Denials Corrected	Fail (2.53%)	Fail (0.00%)	Pass (99.60%)	Fail (94.66%)	A.1 - Denials Corrected	Fail (2.53%)	Fail (0.00%)	Pass (99.60%)	Fail (94.66%)
C.1 - Type 1 Rendering NPI	Fail (86.36%)	Fail (85.54%)	Fail (84.65%)	Fail (87.77%)	C.1 - Type 1 Rendering NPI	Fail (83.47%)	Fail (86.77%)	Fail (88.76%)	Fail (88.58%)	C.1 - Type 1 Rendering NPI	Fail (83.47%)	Fail (86.77%)	Fail (88.76%)	Fail (88.58%)
R.1 - DHCS-Denied Encounters	Fail (17.01%)	Pass (0.65%)	Fail (9.10%)	Pass (0.15%)	R.1 - DHCS-Denied Encounters	Pass (0.13%)	Pass (0.02%)	Fail (36.56%)	Pass (0.03%)	R.1 - DHCS-Denied Encounters	Pass (0.13%)	Pass (0.02%)	Fail (36.56%)	Pass (0.03%)
T.1 - Denied Turnaround Time - INST	No Grade	Fail (0.00%)	Pass (100.00%)	Fail (0.00%)	T.1 - Denied Turnaround Time - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Pass (99.94%)	T.1 - Denied Turnaround Time - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Pass (99.94%)
T.2 - Denied Turnaround Time - PROF	Fail (0.00%)	Fail (2.56%)	Fail (0.00%)	Fail (0.00%)	T.2 - Denied Turnaround Time - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Pass (100.00%)	T.2 - Denied Turnaround Time - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Pass (100.00%)
T.3 - Submission Lagtime - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	T.3 - Submission Lagtime - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	T.3 - Submission Lagtime - INST	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)
T.4 - Submission Lagtime - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	T.4 - Submission Lagtime - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	T.4 - Submission Lagtime - PROF	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)	Fail (0.00%)
U.1 - Duplicate Encounters	Fail (16.96%)	Pass (0.01%)	Fail (9.28%)	Pass (0.14%)	U.1 - Duplicate Encounters	Pass (0.06%)	Pass (0.00%)	Pass (0.02%)	Pass (0.01%)	U.1 - Duplicate Encounters	Pass (0.06%)	Pass (0.00%)	Pass (0.02%)	Pass (0.01%)
U.2 - Duplicate Service Lines - INST	Pass (2.43%)	Pass (2.55%)	Pass (3.32%)	Pass (2.79%)	U.2 - Duplicate Service Lines - INST	Pass (2.44%)	Pass (2.20%)	Pass (2.20%)	Pass (2.22%)	U.2 - Duplicate Service Lines - INST	Pass (2.44%)	Pass (2.20%)	Pass (2.20%)	Pass (2.22%)
U.3 - Duplicate Service Lines - PROF	Fail (0.73%)	Fail (0.89%)	Fail (1.31%)	Pass (0.47%)	U.3 - Duplicate Service Lines - PROF	Fail (0.97%)	Fail (0.53%)	Pass (0.49%)	Fail (0.59%)	U.3 - Duplicate Service Lines - PROF	Fail (0.97%)	Fail (0.53%)	Pass (0.49%)	Fail (0.59%)

No Grade: HCP submitted data, but the denominator is zero for the given measure calculation. **Blank:** HCP did not submit data for that time period or did not satisfy required 12 months of previous data submissions.

Users can select two Health Plan Codes to compare.

The dashboard displays:

- » Compliance grade for each code
- » Performance across all measures
- » Quarterly results

2. Measure Details

For each Health Plan Code, the table shows:

- » Measure name
- » Pass/Fail status
- » Performance percentages

This view helps identify specific issues affecting individual plan codes.

Dashboard Filters

The dashboard includes multiple filters that allow users to refine the displayed data.

County Filter

Select the County

 Search

- ☐ Select all
- ☐ Alameda
- ☐ Alpine
- ☐ Amador
- ☐ Butte
- ☐ Calaveras
- ☐ Colusa
- ☐ Contra Costa
- ☐ Del Norte
- ☐ El Dorado

Allows users to:

- » Select specific counties
- » Select multiple counties
- » View results for all counties

Managed Care Plan Filter

Select the Managed Care Plan

Anthem Blue Cross

Allow users to select one or more Managed Care Plans. Filtering by plan updates all visuals across the page.

Health Plan Code Filter

Select the Health Plan Code

Anthem, Amador (101)

Allows users to analyze results for a specific Health Plan Code associated with a Managed Care Plan.

Measure Selection Filter

Select the Measure

A.1 - Denials Corrected

Users can select a specific quality measure to view:

- » Measure description
- » Threshold criteria
- » Detailed performance results

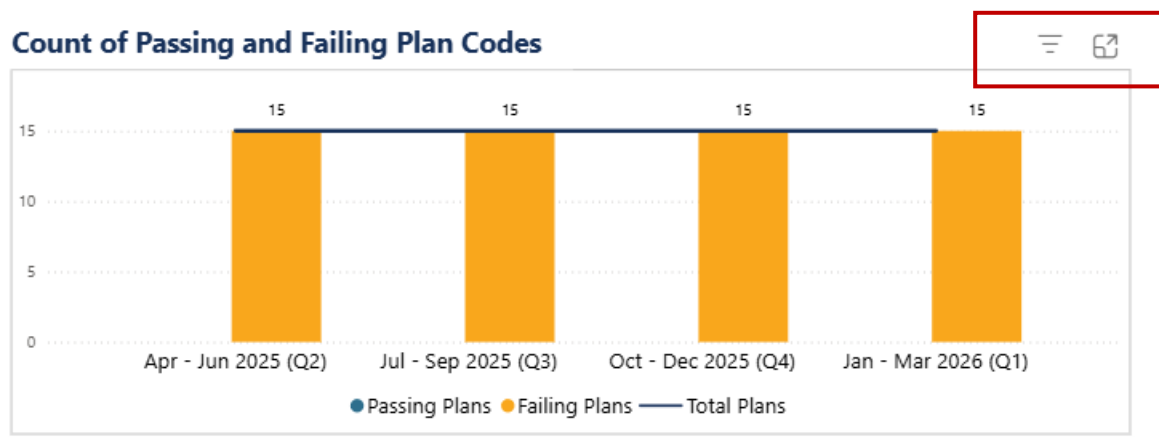
Filter Reset Button

Reset to Default

This is the filter reset button located on the County Page. Click on it. This will wipe out any pre-existing filters that may have been placed on the data.

Power BI Visual Controls

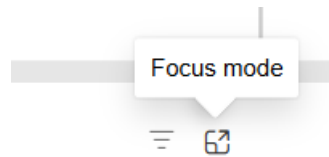
Each chart and table in the dashboard includes Power BI visual controls located in the top-right corner of the visual. These controls provide additional functionality for interacting with the data.



How to access the controls:

1. Move your cursor over any chart or table
2. Look at the top-right corner of that visual
3. The control icons will appear
4. Click on any icon to interact with the data

Focus Mode



The Focus Mode icon expands the visual to occupy the full report screen.

This allows users to:

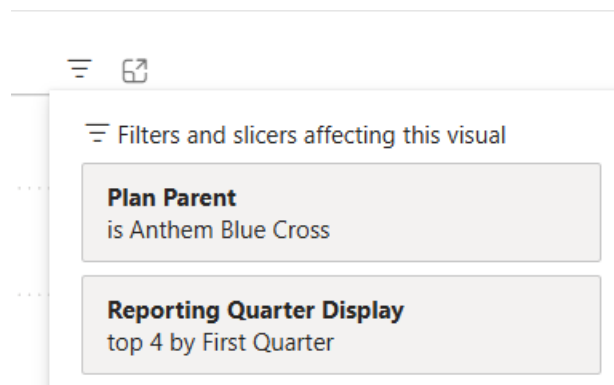
- » View larger tables and charts
- » Examine detailed data
- » Improve readability

To activate Focus Mode:

1. Hover over the visual
2. Click the Focus Mode icon
3. The visual will expand to full screen

To exit Focus Mode, select Back to Report.

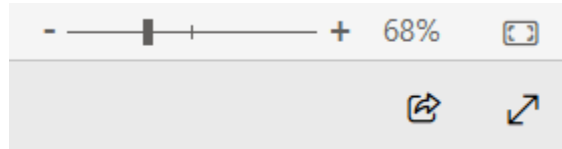
Filter Icon



Some visuals contain a filter icon, which indicates that the visual is affected by applied filters.

Users can hover over this icon to see which filters are impacting the visual.

Display and Interaction Controls



The bottom-right panel of the Power BI dashboard serves as a view and interaction control area, giving users quick access to display adjustments and sharing options:

- » Zoom control slider – lets users zoom in or out of the dashboard canvas for better readability. The “-” and “+” buttons allow precise adjustments, while the slider enables quick scaling
- » Fit / Responsive view indicator – helps ensure the report fits properly within the screen
- » Share / Export icon – provides options to share the report with others or export it
- » Full-Screen / Expand icon – expands the dashboard into a distraction-free full-screen mode