

DATE: May 9, 2023

QIP POLICY LETTER 23—003

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS
ALL QIP ENTITIES

SUBJECT: APPROVED COMMUNITY PARTNERSHIPS FOR PY 6

PURPOSE:

This QIP Policy Letter (QPL) informs QIP DMPH entities and Medi-Cal managed care health plans (MCPs) of community partnerships approved by DHCS for Program Year (PY) 6. It also provides procedures for DMPHs on how to apply for modifications to the approved applications and instructions for future application submissions for entities who wish to include community partner data in subsequent QIP Program Years.

POLICY:

The participating QIP DMPH entities listed in Attachment 1, *Approved DMPH PY6 Community Partners*, have been approved by DHCS to include contracted community partner data on selected measures in their QIP data submissions for PY 6. For additional details on DMPH Community Partner policies, refer to the [QIP PY6 Program Policies](#) and [QPL-21-003](#). For an overview of QIP data sharing responsibilities for MCPs (which includes community partner data), refer to [QPL-22-005](#).

Modifications

If a DMPH experiences a change that affects the information within their application on which the approval is based, the DMPH must report this change to DHCS within ten business days. DHCS will address modifications on a case-by-case basis. All applications, notifications, and modification requests should be submitted to the QIP mailbox at gip@dhcs.ca.gov.

Future Applicants

For future submissions, an updated PY application template will be emailed from the QIP mailbox and available on [eQIP](#). DHCS must receive new applications no later than 60 calendar days after the release of the applicable QIP PY Reporting Manual.

QIP entities should contact their QIP liaison and MCPs should contact the QIP Mailbox at qip@dhcs.ca.gov if there are any questions concerning this QPL.

Sincerely,

ORIGINAL SIGNED BY PALAV BABARIA

Palav Babaria, MD, MHS
Deputy Director & Chief Quality
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Attachment 1 – Approved DMPH PY6 Community Partners

	DMPH Entity	Partner	Measures
1	El Camino Hospital	Ravenswood Family Health Network	Q-PPC-Pre: *Prenatal and Postpartum Care (Timeliness of Prenatal Care) (PPC-PRE) Q-PPC-Pst: *Prenatal and Postpartum Care (Postpartum Care) (PPC-PST) Q-PND-E: Prenatal Depression Screening and Follow-Up (PND-E) Q-PDS-E: Postpartum Depression Screening and Follow-Up (PDS-E)
2	Marin General Hospital	Marin Community Clinics	Q-BCS-E: Breast Cancer Screening (BCS-E) Q-HBD: Hemoglobin A1C Control for Patients with Diabetes (HBD) Q-PPC-Pst: *Prenatal and Postpartum Care (Postpartum Care) (PPC-PST) Q-TRC: Transitions of Care (TRC) Q-FUA: Follow-Up After ED Visit for Alcohol and Other Drug Abuse or Dependence (FUA)
3	Palomar Medical Center	Neighborhood Healthcare	Q-AMR: Asthma Medication Ratio (AMR) Q-HBD: Hemoglobin A1C Control for Patients with Diabetes (HBD) Q-CMS135: Heart Failure (HF): ACE/ARB/ARNI Therapy for LVSD Q-TRC: Transitions of Care (TRC)
4	Tri-City Medical Center	Vista Community Clinic	Q-HBD: Hemoglobin A1C Control for Patients with Diabetes (HBD) Q-BCS-E: Breast Cancer Screening (BCS-E) Q-COB: Concurrent Use of Opioids and Benzodiazepines (COB-AD) Q-FUA: Follow-Up After ED Visit for Alcohol and Other Drug Abuse or Dependence (FUA) Q-FUI: Follow-Up After High-Intensity Care for Substance Use Disorder (FUI) Q-PCE: Pharmacotherapy Management of COPD Exacerbation (PCE) Q-POD: Pharmacotherapy for Opioid Use Disorder (POD) Q-OHD: Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD) Q-TRC: Transitions of Care (TRC)

**Priority measures (defined in QIP PY6 Program Policies)*