



Global Quality P4P

To: IEHP Medi-Cal IPAs
From: IEHP – Quality Programs
Date: November 18, 2024
Subject: **2025 Global Quality P4P IPA Program – Program Guide Preliminary Release!**

Inland Empire Health Plan (IEHP) is pleased to announce the release of the 2025 Global Quality P4P (GQ P4P) IPA Program Guide!

An electronic guide version is now available on the IEHP website at: www.providerservices.iehp.org > Programs and Services > Provider Incentive Programs > Pay for Performance Program or [click here](#).

The 2025 GQ P4P IPA Program Guide provides program details including 2025 program requirements, scoring methodology, process measures details, and more! We encourage your office to review the program guide to maximize your efforts in the 2025 GQ P4P program year.

Please Note: This is an early release of the 2025 Global Quality P4P IPA Program Guide. There will be a final version (an additional posting) available on the IEHP website no later than December 31, 2024. This early release version will **NOT** be mailed out. There will be a finalized version of the 2025 Global Quality P4P IPA Program Guide mailed out 2025 Quarter 1.

WHAT'S NEW?

Eligibility and Participation

- Quality Score must be 1.0 or higher in order to qualify for incentive payments.
- CCA members will not be included in the incentive program.

Scoring Methodology Changes

- IEHP is reducing the 2025 Global Quality P4P for IPAs anticipated payout by \$12.5 million. To achieve this, the following changes are being made to the scoring and program methodology.
 - Payment multiplier reduced to: 10.85
 - IPAs eligible for the 2025 GQ P4P Quality PMPM (per member per month) payment will have the opportunity to earn a Maximum Quality Score of: 3.75



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- IPAs eligible for the 2025 GQ P4P Quality PMPM (per member per month) payment will have the opportunity to earn up to the Maximum Quality PMPM: \$5.89
 - Weight increased from 3 to 4 for the following measures:
 - Childhood Immunizations - Combo 10
 - Immunizations for Adolescents - Combo 2
 - Controlling High Blood Pressure
 - Glycemic Status Assessment for Patients with Diabetes
 - Weight increased from 1 to 3 for the following measure:
 - Potentially Avoidable ED Visits

Program Measures Changes

- Fifteen (15) measures were retired:
 - Antidepressant Medication Management (AMM)
 - Substance Use in Primary Care Adolescents
 - Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)
 - Screening for Clinical Depression in Primary Care
 - Social Determinants of Health Identification Rate
 - Social Determinants of Health Screening
 - Social Need Screening and Intervention
 - Substance Use Assessment in Primary Care
 - Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents – Counseling for Physical Activity
 - Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents – Counseling for Nutrition
 - After Hours Availability- On- Call Physician Access
 - After Hours Availability – Life-Threatening Emergency Calls
 - Appointment Availability – Urgent
 - Appointment Availability – Routine
 - Process Measure - Provider Diversity Equity Inclusion Survey
- Two (2) measures were added:
 - Adult Hepatitis B Vaccine
 - Process Measure – Diversity, Equity and Inclusion (DEI) Training Program PCP Completion
- Two (2) measures were revised (minor):
 - Adult Zoster Vaccine



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- Adult Pneumococcal Vaccine

NEW – Health Equity Domain

- The measures within the Health Equity domain are based on the specifications published by the National Committee for Quality Assurance (NCQA) for reporting race/ethnicity data in HEDIS measures, with a focus on the Black/African American, Hispanic, or White race. In addition to the Clinical Quality Domain, the following sub-population rates will also fall under the Health Equity Domain as separate reportable measures:
 - Child and Adolescent Well-Care Visits (for Whites)
 - Immunizations for Adolescents - Combo 2 (for Black/African American)
 - Controlling High Blood Pressure (for Black/African American)
 - Glycemic Status Assessment for Patients with Diabetes (for Hispanic)

Bonus Bundles

- All IPA Bonus Bundles will be retired in the 2025 program

New Penalty Measure

- Medi-Cal Managed Care Accountability Set (MCAS) Performance is a new Penalty Measure. The purpose of the MCAS Performance measure is to ensure IEHPs performance is aligned with MCAS performance goals established by the Department of Health Care Services (DHCS).
 - Goal: Providers must meet the MPL for at least 75% of the qualifying measures.
 - Penalty Amount: \$0.50
 - Eligibility: IPAs who have at least 3 scoreable MCAS MPL Measures.

Thank you for your continued partnership in providing quality healthcare to IEHP's Members. As a reminder, all communications sent by IEHP can also be found at: www.providerservices.iehp.org > News and Updates > Notices.

Any questions related to this program can be sent to IEHP's Provider Call Center at 909-890-2054, (866) 223- 4347, providerservices@iehp.org or email IEHP's Quality Department at QualityPrograms@iehp.org.