

The Quality Incentive Pool (QIP) is a managed care directed payment program for California’s public health care systems. QIP started in 2017 as a result of new requirements in the federal Centers for Medicare and Medicaid Services’ (CMS) Medicaid and CHIP (Children’s Health Insurance Program) Managed Care Final Rule. QIP converts funding from previously existing supplemental payments into a value-based structure. QIP payments are tied to achievement of performance on measures that assess the quality of care provided to Medi-Cal managed care enrollees. For three years, QIP existed in parallel with Public Hospital Redesign and Incentives in Medi-Cal (PRIME), a pay-for-performance program that was part of California’s five-year Section 1115 Medicaid waiver, known as Medi-Cal 2020. Measures across the two programs were designed to be complementary, but not duplicative.

With the expiration of PRIME in June 2020, California had the opportunity to redesign QIP to integrate successful components from PRIME and the first few years of QIP. CMS approved a transitional program from July to December 2020 and the new QIP began January 2021.

The new QIP requires public health care systems to report annually on a total 40 measures.

The program focuses on measures for conditions that represent leading causes of death in California and align with the State’s quality strategy and priorities that span the continuum of care provided by public hospitals and health care systems. The measures cover nine domains of care: Primary Care Access and Preventive Care, Behavioral Health Care, Care of Acute and Chronic Conditions, Care Coordination, Experience of Care, Improving Health Equity, Maternal and Perinatal Health, Patient Safety and Overuse/Appropriateness of Care.

This Renewal and Amendment will allow Ms. Finney to continue to perform the services for work associated with the QIP program. Services include implementation of milestones, execution of required programs, and further timely submission of required reports to the California Department of Health Care Services and other agencies. This amendment will also allow Ms. Finney to continue to provide other performance improvement and project management consulting services as requested by the Chief Medical Officer focusing on the hospital’s strategic priorities and new regulatory and accreditation requirements.

OTHER AGENCY INVOLVEMENT:

The Office of County Counsel has reviewed and approved this Renewal and Amendment No. 2 as to form, and the Auditor-Controller has reviewed and approved as to payment provisions. The amendment No. 2 has also been reviewed and approved by NMC’s Finance Committee and by its Board of Trustees on October 14, 2022.

FINANCING:

There is no financial impact to the County’s General Fund or Natividad’s Adopted Budget FY22/23.

BOARD OF SUPERVISORS STRATEGIC INITIATIVES:

This Renewal and Amendment will allow for further assistance with the QIP program as NMC continues to transform and improve the quality of care, access, and efficiency for its Medi-Cal members.

- Economic Development
- Administration
- Health and Human Services
- Infrastructure
- Public Safety

Prepared by: Raquel Mojica, IT Business Operations Manager, 783-2812

Approved by: Charles R. Harris, Chief Executive Officer, 783-2551

Attachments:

Jane Finney Renewal and Amendment No. 2

Jane Finney Renewal and Amendment No. 1
Jane Finney Agreement

Attachments on file with the Clerk of the Board