

UNDERSTANDING YOUR PROVIDER PERFORMANCE REPORT

This tip sheet is being provided to help you gain a clear understanding of your performance score, how your current performance compares to your past year's performance, and highlights areas where there is room for improvement. Armed with an understanding of this report we hope to help you see:

- Where you are doing well with eligible Medi-Cal patients.
- Where you may be falling short (and by how much).
- Where you fall within the 3 performance tiers (by which your points are earned).
- Where you can focus your efforts to improve your score, increase your points, and successfully hit performance tiers.

Page 1: A summary of What is Measured and How to use the Color-Coded Legend



Santa Clara Family
Health Plan



Provider Performance Report Card for Calendar Year 2022
Measurement Period: 1/1/2022 - 12/31/2022
Data Received Through: 4/6/2022

SECTION A: On the top right of this page you will find the name of your organization, the measurement period for this report, and the date by which the data being measured was received.

SECTION B: This is a summary of the measures in the PPP and criteria description. Please note: for some measures a higher rate is better, and for two measures (HBD & PCR) a lower rate is better.

SECTION C: A color-coded legend is provided to help you understand the report card - specifically the tiers, color-coding, benchmarks, and points.



For the following measures, higher rates are better:

CBP: Controlling High Blood Pressure

HEDIS - Percentage of members (18-85 years) diagnosed with hypertension whose BP was adequately controlled (<140/90 mm Hg)

CCS: Cervical Cancer Screening

HEDIS - Percentage of women (21-64 years) who were screened for cervical cancer

CHL: Chlamydia Screening in Women

HEDIS - Percentage of sexually active women (16-24 years) with at least one test for chlamydia

DEV: Developmental Screening

SCFHP - Developmental screening in the first three years of life of measurement year

ENT: Encounter Submissions (Timeliness)

SCFHP - Percentage of encounters submitted within 75 days of date of service (DOS)

IHA: Initial Health Assessment

DHCS - Percentage of new members who received a completed IHA within 120 days of enrollment into the plan. Note: runs on a 12-month window based on IHA due date in the measurement year (1/1/2021 - 12/31/2021)

LSC: Lead Screening in Children

HEDIS - Percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday

PPC: Prenatal & Postpartum Care (Timeliness of Prenatal Care)

HEDIS - Percentage of live births that received a prenatal care visit within the first trimester or within 42 days of enrollment with SCFHP

TRS: Trauma Screening

SCFHP - Trauma screening birth to 18 years of age of measurement year



Understanding the report card:

All percentile benchmarks are based on 2021 results.

RED (●) indicates performance below Tier 3, and will earn 0 points for the measure

YELLOW/ORANGE (●) indicates performance at or above Tier 3, but below Tier 2, and will earn 6 points for the measure

LIGHT GREEN (●) indicates performance at or above Tier 2, but below Tier 1, and will earn 9 points for the measure

Blue (●) indicates performance at or above Tier 1, and will earn 12 points for the measure

Measure Benchmarks:

Red indicates the clinic is performing below 50th percentile

Yellow/Orange is at or above the 50th percentile, but below the 75th percentile

Light Green is performance at or above the 75th percentile, but below the 90th percentile

Blue indicates performance at or above the 90th percentile

If you are in need of further support to facilitate accurate/actionable interpretation of this report, please contact us via email at ProviderPerformance@scfhp.com.

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Page 2: Your Report and How to Interpret the Numbers

SECTION A: Medi-Cal Patient Count is added to the top of page 2.

SECTION B: Acronyms and Measure Names can be found in these columns.

SECTION C: Prior Year Rate is your performance rate for a given measure from the previous year end.

SECTION D: Denominator tells you how many Medi-cal members assigned to you were eligible for the measure. **Numerator** indicates how many of those members actually achieved the criteria to be compliant with the measure.

SECTION E: The color of the percentage in the **Current Year Rate** column will immediately let you know if you are meeting, exceeding, or falling short on your performance for a given measure – pay special attention to the color red.

SECTION F: Tier Columns show the benchmark rates you need for each tier.

SECTION G: Total Points indicates the points earned for each measure. Note: this should coincide with color-coding.

SECTION H: We use the Total Points earned divided by the Points Possible to calculate your overall **Total Provider Performance Score**.



Santa Clara Family Health Plan

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Provider Performance Report Card for Calendar Year 2022
Measurement Period: 1/1/2022 - 12/31/2022
Data Received Through: 4/6/2022

Medi-Cal Patient Count: 35,153

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Acronym	Measure Name	Prior Year Rate	Denominator	Numerator	Current Year Rate	Tier1	Tier2	Tier3	Points Possible	Total Points
CBP	Controlling High Blood Pressure <140/90mm Hg	76.65%	1,207	254	21.04%	66.79%	62.63%	55.35%	12	0
CCS	Cervical cancer screening of women aged 21-64 years	83.55%	7,004	4,870	69.53%	67.99%	63.66%	59.12%	12	12
CHL	Chlamydia Screening in Sexually Active Women aged 16-24 years	63.69%	617	207	33.55%	66.15%	61.75%	54.91%	12	0
DEV	Developmental screening in the first three years of life of measurement year	52.43%	2,257	1,011	44.79%	53.70%	40.20%	36.90%	12	9
ENT	Encounter Data Submission	86.22%	120,033	94,354	78.61%	80.00%	70.00%	60.00%	12	9
HBD	HbA1c Control for Patients with Diabetes: poor control >9.0%	25.74%	1,269	1,101	86.76%	34.06%	38.37%	43.19%	12	0
IHA	Initial Health Assessment	60.02%	2,669	1,252	46.91%	70.00%	60.00%	50.00%	12	0
LSC	Lead Screening in Children (0-2 years)	0.00%	632	289	45.73%	83.94%	77.86%	71.53%	12	0
PCR	Plan All-Cause Readmissions	11.90%	90	10	11.11%	6.80%	7.50%	8.20%	12	0
PPC	Prenatal and Postpartum Care: Timeliness of Prenatal Care	87.70%	167	154	92.22%	92.21%	89.29%	85.89%	12	12
TRS	Trauma screening birth to 18 years of age of measurement year	6.64%	12,708	828	6.52%	5.10%	4.00%	3.40%	12	12
W30	Members with six or more well child visits in the first 15 Months of Life	30.50%	374	55	14.71%	68.33%	61.25%	54.92%	12	0
	Members with two or more well child visits between 15 Months and 30 Months	45.91%	631	265	42.00%	82.82%	76.12%	70.67%	12	0
WCV	Child and Adolescent Well-Care Visits for members aged 3-21 years	53.30%	13,053	2,002	15.34%	61.97%	53.83%	45.31%	12	0
Grand Total									168	54

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PPP Score: 32.1%

All rates, except ENT, IHA, PCR, and PPC, are expected to increase throughout the year as gaps in care are closed since the target population (denominator) is relatively stable. ENT, IHA, PCR, and PPC rates are variable due to: changes in the eligible population (IHA, PCR, and PPC); and medical group practices (ENT and IHA).
HEDIS-based measure rates are based on administrative and supplemental data only, they do not include chart review.
*All measures are run on the calendar year and represent data received year to date.

Produced on 4/21/2022

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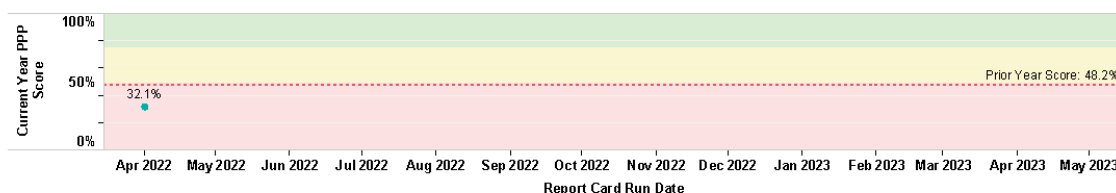


Provider Performance Report Card for Calendar Year 2022
Measurement Period: 1/1/2022 - 12/31/2022
Data Received Through: 4/6/2022

Medi-Cal Patient Count: 35,153

Acronym	Measure Name	Current Year Rate	Numerator	Denominator	Numerator Needed For Tier 3	Numerator Needed For Tier 2	Numerator Needed For Tier 1
CBP	Controlling High Blood Pressure <140/90mm Hg	21.04%	254	1,207	415	501	553
CCS	Cervical cancer screening of women aged 21-64 years	69.53%	4,870	7,004	-	-	-
CHL	Chlamydia Screening in Sexually Active Women aged 16-24 years	33.55%	207	617	132	174	202
DEV	Developmental screening in the first three years of life of measurement year	44.79%	1,011	2,257	-	-	202
ENT	Encounter Data Submission	78.61%	94,354	120,033	-	-	1,673
HBD	HbA1c Control for Patients with Diabetes: poor control >9.0%	86.76%	1,101	1,269	553	615	669
IHA	Initial Health Assessment	46.91%	1,252	2,669	83	350	617
LSC	Lead Screening in Children (0-2 years)	45.73%	289	632	164	204	242
PCR	Plan All-Cause Readmissions	11.11%	10	90	3	4	4
PPC	Prenatal and Postpartum Care: Timeliness of Prenatal Care	92.22%	154	167	-	-	-
TRS	Trauma screening birth to 18 years of age of measurement year	6.52%	828	12,708	-	-	-
W30	Members with six or more well child visits in the first 15 Months of Life	14.71%	55	374	151	175	201
	Members with two or more well child visits between 15 Months and 30 Months	42.00%	265	631	181	216	258
WCV	Child and Adolescent Well-Care Visits for members aged 3-21 years	15.34%	2,002	13,053	3,913	5,025	6,087

PPP Score Trend



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For your reference, we also include additional data for measures not included in your PPP score. Use this information to address possible gaps in care.

Acronym	Measure Name	Prior Year Rate	Denominator	Numerator	Current Year Rate	Benchmark 50th Percentile
AAP	Adults Access to Preventive/Ambulatory Health Services for members aged 20 years and older	88.21%	13,617	7,006	51.45%	78.30%
APM	Metabolic Monitoring age 1-17 years on Antipsychotics for blood glucose and cholesterol testing	46.15%	26	2	7.69%	30.58%
BCS	Breast Cancer Screening for Women aged 50-74 years	69.61%	1,422	912	64.14%	53.93%
BPD	Blood Pressure Control for Patients with Diabetes - BP 140/90	75.31%	1,269	106	8.35%	58.52%
CDC	Comprehensive Diabetes Care: HbA1c testing for members aged 18-75 years	92.38%	1,269	647	50.99%	
CIS	Childhood Immunizations for DTaP, IPV, MMR, Hib, HepB, VZV, PCV, HepA, Rotavirus and Influenza	53.29%	632	307	48.58%	38.20%
EED	Eye Exam for Patients (18-75 years) with Diabetes	70.84%	1,269	576	45.39%	51.36%
HDO	Use of Opioids at High Dosage for members aged 18 years and older	4.05%	189	10	5.29%	5.12%
IMA	Immunization for Adolescents aged 13 years for combination 2	60.33%	664	378	56.93%	36.74%
KED	Kidney Health Evaluation for Patients With Diabetes aged 18-85 years	79.16%	1,249	182	14.57%	
PPC	Prenatal and Postpartum Care: Postpartum Care	77.27%	167	118	70.66%	76.40%
SPC	Males aged 21-75 and Females aged 40-75 with Cardiovascular Disease and Statin adherence of 80%	91.43%	22	5	22.73%	72.21%
	Males aged 21-75 and Females aged 40-75 with Cardiovascular Disease who received Statin Therapy	87.50%	32	22	68.75%	80.34%
SPD	Members aged as 40-75 with Diabetes who received Statin Therapy during the measurement year	73.21%	811	513	63.26%	66.47%
	Members aged as 40-75 with statin adherence 80% for patients with Diabetes	76.22%	513	125	24.37%	68.75%
SSD	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Using Antipsychotic Medications	76.43%	73	37	50.68%	76.64%
UOP	Use of Opioids From Multiple Prescribers and Multiple Pharmacies for 18 years and older	0.00%	210	7	3.33%	1.75%

* CDC: HbA1c testing for members aged 18-75 years and KED - benchmark is unavailable

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