



EPT May Deliverables Template Review

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Welcome

While we're waiting, please:

Rename yourself



1

Click the
Participants icon



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Hover over your
name & click
Rename



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Add your name,
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organization's name



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Click OK

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- Find your participant ID; it should be in the top left of your Zoom window
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Agenda

- Welcome and Introductions
- Overview of the May Deliverables Submission Frequently Asked Question (FAQ)
 - What is due?
 - Timeline & process
 - Review process
- Deliverables Template Review
- Preparing to Submit



May 2025 Deliverables

Templates are available for download on the [Milestones page](#).

Category	Milestone	Deliverable
PhmCAT	Complete year 2 PhmCAT	Assessment
Data to Enable Population Health Management	<p>Data implementation plan: Develop implementation plan for addressing data and technology gaps and transforming practice operations to support development of KPIs. Plan must include steps for implementing these three strategies:</p> <ol style="list-style-type: none"> 1. Identifying and outreaching to the assigned but unseen population 2. Using gaps in care reports that include practice and MCP data 3. Data exchange with 2 external partners, at least 1 of which is a Qualified Health Information Organization (QHIO) <p>Note: Before completing this Milestone, the team needs to have submitted Milestone 4: Data governance and HEDIS reporting assessment</p>	Implementation Plan
Stratified HEDIS®-like measures	<p>Stratify HEDIS®-like measures: Submit report that includes HEDIS®-like measures applicable to selected population of focus stratified by race and ethnicity and at least one additional characteristic: primary spoken language, sexual orientation, gender identity, housing status, or disability status.</p>	Stratified HEDIS-like measures
Key Performance Indicators (KPIs)	<p>Submit KPI Updates: Empanelment, Continuity, and Third Next Available Appointment</p> <p>Note: achievement/improvement must be sustained over two consecutive submissions or met in the final submission.</p> <p>Report on HEDIS-like Population of Focus Measures: Reporting for QI purposes (not for payment)</p>	KPI Report
Nov 2024 Deliverables	<p>If needed, EPT practices may also submit the Empanelment Assessment, Empanelment Policy and Procedure, Data Governance Assessment, and Data Governance Policy and Procedure.</p>	See details per deliverables

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May 2025 Submission Process FAQ

What can my EPT practice submit?

- EPT practices may submit the four May 2025 deliverables, plus any deliverables that were not submitted or approved from the November 2024 submission cycle.

Do I submit the templates that are currently available?

- The templates are for reference only, you do not submit the template.

Where do I submit my deliverables?

- All deliverables will be submitted via the EPT Deliverables Portal.

Deliverables Review Process FAQ

What type of feedback will my EPT practice receive?

- Practices will receive one of three results once their deliverable is reviewed:
 - **Accepted** – Congratulations, the deliverable meets milestone criteria
 - **Rejected** - Deliverable does not meet milestone criteria
 - **Resubmit** – Minor changes or clarification is needed
- The PhmCAT is reviewed for completion.
- The stratified HEDIS-like measures and KPI report are reviewed for completion and data accuracy.
 - Additionally, to achieve directed payment, practices must meet benchmarks and/or show improvement.
- Your practice should use your scores to identify areas of strength and opportunities.
- We will discuss sample feedback on the Data Implementation Plan later.

Deliverables Review Process FAQ

How will I know about my practices' deliverable results?

- The person who submitted will receive an email that confirms the Learning Center has received their deliverables, and a separate email with feedback when our review is completed. Please make sure that this person is checking their email!
- Practices can also check the status of their deliverables in the Deliverables Portal.

What is the submission timeline?

- April 1: The Deliverables Portal opens for submissions. The Learning Center will review deliverables on a rolling basis.
- May 1: Last day to submit deliverables.
- May 11: PHLC will complete the initial review of deliverables. Some practices may be given the opportunity to resubmit.
- May 19: Deadline to resubmit deliverables.
- May 23: Practices receive final feedback.

Let's review the deliverables!



Population Health Management Capabilities Assessment Tool (PhmCAT)

The PhmCAT provides an overview of your practice's baseline across key pop health domains and identifies areas of strengths and opportunities.

- EPT practices should have 3-5 staff within clinical, leadership, and operational roles complete the PhmCAT.
 - Small practices (under 3 FTEs) may have fewer respondents.
 - If possible, the same staff who completed the PhmCAT in 2024 should complete it in 2025.
 - Each staff person will submit their responses separately.
- The PhmCAT will be linked on the Deliverables Portal.
- Following this submission, EPT practices will be able to tell how their pop health capabilities have changed from 2024-2025.
- The Learning Center uses results to understand where practices are both individually and overall, inform technical assistance, and to track year over year progress.
- Learn more about the PhmCAT at our sessions on March 5 from 2-3pm and March 19 from 10:30-11:30am!

Stratified HEDIS-like Measures

Submit report that includes HEDIS®-like measures applicable to selected population of focus stratified by race and ethnicity and at least one additional characteristic. This will help practices to systematically assess disparities and lay the groundwork to address them.

Submit report that includes HEDIS®-like measures applicable to selected population of focus stratified by race and ethnicity and at least one additional characteristic, such as:

- Primary spoken language
- Sexual orientation
- Gender identity
- Housing status
- Disability status

For each measure, practices will report:

- Numerator
- Denominator
- Rate (will auto calculate)

By analyzing these stratifications, practices can better understand how health related social needs and other factors may impact care outcomes, enabling the development of more focused and equitable interventions.

Population	HEDIS-like Measures
Pregnant People	Postpartum care (PPC) Timeliness of prenatal care (PPC) Postpartum depression screening (PDS-E)
Children/Youth	Child immunization status (CIS) Well child visits first 30 months (W30) Child and Adolescent Well-Care Visits (WCV) Depression screening (DSF)
Adult Preventive	Breast cancer screening (BCS) Cervical cancer screening (CCS) Colorectal cancer screening (COL) Depression screening (DSF)
Adult Chronic Care	Controlling high blood pressure (CBP) Glycemic status assessment (GSB) Depression screening (DSF)
Behavioral Health	Depression screening (DSF) Depression remission or response (DRR) Pharmacotherapy for Opioid Use Disorder (POD)

Key Performance Indicators (KPI)

The KPIs help EPT practices to calculate and monitor important metrics related to access to care and quality of care for their assigned patients, as well as to monitor their HEDIS-like measures.

- Practices will submit:
 - Data on Medi-Cal lives stratified by race/ethnicity
 - The population (Medi-Cal or all patients), numerator, and denominator for each administrative KPI: **TNAA, Empanelment, and Continuity**. EPT practices should submit data on the same population that they submitted on in the November 2024 submission.
 - Numerator and denominator on the **HEDIS-like measures for their POF**, with a 12-month lookback period.
- The KPIs are an ongoing deliverable submission (due in May 2025, November 2025, May 2026, and November 2026).
- If EPT practices met the benchmarks in November 2024 submission and May 2025 submission, they will be eligible for payment.
 - Practices who meet the benchmarks will continue to report on the KPIs throughout EPT.
- There are many resources in PopHealth+ to help practices calculate these!

Performance Goals for KPIs

KPI	Improvement Threshold	Attainment Target
Empaneled Patients	N/A	$\geq 90\%$ target
Patient-Side Continuity	N/A	$\geq 70\%$ target
Third Next Available Appointment	N/A	≤ 10 days target

***Milestones related to performance on KPIs can be met by achieving the attainment target. Attainment target must be sustained over two consecutive submissions or met in the final submission. Where percentiles are referenced, these refer to NCQA Medicaid HEDIS® benchmarks.*

Data Implementation Plan

This deliverable helps practices to build the data infrastructure needed to collect and utilize data effectively, and helps practices to address identified data, technology, and operational gaps. Practices will report:

- Their *plan* for implementing strategies related to:
 1. Identifying and outreaching to the assigned but unseen population
 2. Using gaps in care reports that include practice and Managed Care Plan (MCP) data
 3. Data exchange with two external partners, at least one of which is a Qualified Health Information Organization.
- This plan will include:
 - SMARTIE goals (specific, measurable, achievable, realistic, timebound, inclusive, equitable) and your strategy for achieving your goals.
 - Baseline data, including for current gaps in care reports, and how practices will plan to close these gaps.
 - Questions related to QHIO connectivity and data exchange, including the types of data that you will exchange and with what partners.
 - And more!
- EPT practices do not have to implement all these strategies by May.
- In the November 2025 submission, practices will submit a report detailing their progress.
- To be eligible for directed payment, practices must demonstrate they are implementing a new application of their engagement with the QHIO/Partner

Data Implementation Plan: Strategy 1 - Identifying & Outreaching to Assigned but Unseen Patients

- **Purpose:** Unseen patients impact quality metrics and practice performance.
- **Steps to Complete:**
 - Define the assigned but unseen population.
 - Establish baseline data (Numerator & Denominator).
 - Set a **SMARTIE Goal** (Specific, Measurable, Achievable, Relevant, Time-bound, Inclusive, Equitable).
 - Identify interventions and action steps.
 - Track progress with key metrics.

Data Implementation Plan: Strategy 2 - Using Gaps in Care Reports

- **Purpose:** Improve HEDIS performance and patient outcomes.
- **Steps to Complete:**
 - Report your current **Care Gap Closure Rate**.
 - Define a **SMARTIE Goal** for improvement.
 - Select and implement interventions (e.g., outreach, alerts, workflows).
 - Track progress and refine approach.

Data Implementation Plan: Strategy 3 - Data Exchange with External Partners

- **Purpose:** Strengthen data integration for better decision-making.
- **Requirements:** Exchange data with **two external partners**, including **one QHIO**.
- **Key Questions:**
 - Are you already connected to a QHIO?
 - What types of data will be exchanged?
 - What processes will be improved with external data?
 - What are the barriers and mitigation strategies

What is a QHIO?

9 organizations designated as QHIOs can assist Participants in meeting their Dx/F obligations:



Manifest MedEx



San Diego Health Connect



SacValley MedShare



Cozeva



LongHealth



Serving Communities Health Information Organization (SCHIO)



Health Gorilla



Los Angeles Network for Enhanced Services (LANES)



Orange County Partners in Health (OCPH)

Data Implementation Plan: Strategy 3 - Data Exchange with External Partners (cont.)

External Partner: entities that offer independent data streams essential for enhancing initiatives. Acceptable partners include:

- Managed Care Plans (MCPs)
- Hospitals
- Behavioral Health Providers
- Community-Based Organizations
- Specialty Consult Providers
- Immunization Registries (like CAIR2 or RIDE) (*Only practices with children and youth PoF*)
- Pharmacies/PBM
- **Excluded** entities like Care Everywhere , Care Quality, eHealth Exchange . These platforms largely represent pre-established integrations rather than new, transformative partnerships and may be redundant with the QHIO connection for this exercise.

Data Implementation Plan: High-Level Workplan & Progress Tracking

- Define interventions and responsible parties.
- Establish realistic timelines.
- Identify key progress indicators.
- Monitor and adjust as needed.

Sample Data Implementation Plan Feedback

Accepted deliverables will...

- **Demonstrate a Clear, Measurable Improvement Plan:** The plan includes a well-defined SMARTIE goal with a robust baseline, detailed interventions, realistic timelines, and clear accountability.
- **Show Evidence of Active Data Integration:** It includes actionable steps to achieve data exchange with external partners, and includes a comprehensive workplan with defined roles, milestones, timelines and proposed performance metrics.

You may be asked to **resubmit** if the deliverable...

- **Lacks Sufficient Detail or Clarity:** The submission does not fully articulate key elements such as baseline data, specific steps, or roles/responsibilities, making it difficult to assess feasibility.
- **Provides Vague or Incomplete Data Integration Strategies:** The plan fails to clearly explain how external data will be integrated and leveraged to improve, without a clear roadmap or measurable outcomes.

Deliverables will be **rejected** if they...

- **Rely on Pre-Existing or Passive Partnerships:** The plan depends solely on data sources or integrations established prior to the EPT program, without demonstrating new, active, and transformative external connections.
- **Do Not Demonstrate Operational Readiness:** There is no clear evidence of actionable steps for data exchange, or the plan lacks measurable targets and defined milestones to track progress and impact.

Preparing to Submit



You can start to prepare to submit deliverables now!

- Review the deliverables templates
- Create a workplan
 - What data will you need?
 - What team members might you need to work with?
 - What questions do you have? Where might you need support?
 - Create a timeline for drafting your response
- Access EPT TA, including Office Hours, Practice Tracks, and PopHealth+ resources, for support.
- Draft your responses using the templates
- Starting April 1st, submit your responses on the EPT deliverables portal
 - Don't wait until the May 1st deadline to submit!

The Learning Center is hosting many TA opportunities and resources to help you prepare



Some **March Practice Tracks** will feature a working session for the Data Implementation Plan. Please tell your facilitator if you want to share your draft Plan to receive feedback from your peers!



Come to **office hours** focused on Data, Access, DxF framework, or the PhmCAT. See the schedule and register here on the Events Calendar, <https://pophealthlearningcenter.org/eventcalendar/>



Review content on **PopHealth+**, which includes eModules and resources on empanelment, data, and access. Access **Vroom!** for additional access eModules.

Resources

EPT Milestone & Deliverables Information

- [PhmCAT](#)
- [EPT Stratified HEDIS Data Template](#)
- [EPT KPI Submission Template Feb 2025](#)
- Data Implementation Plan Template – link available soon!
- [KPI Measure Specifications](#)

[Deliverables Portal](#)

- 2024 PhmCAT responses will be posted in the Portal in early March

[Events Calendar](#)

- Sign up for Office Hours here

Visit [PopHealth+](#) for...

- eModules on data governance, empanelment, access, and more!
- KPI reporting tool and how-to video
- Vroom!, Coleman Associates eLearning Platform
- Learning Community slides
- And more!

Any Questions?



Appendix

KPI Milestones (8 in total)

4 Milestones Tied to HEDIS-like Measures

Population	HEDIS-like Measures (Each practice selects one population of focus)
Pregnant People	Postpartum care (PPC) Timeliness of prenatal care (PPC) Postpartum depression screening (PDS-E)
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- Demonstrate improvement or reach target in 3 HEDIS-like measures (3 milestones total, each measure = 1 milestone)
 - Reported by both MCP and practice, paid based on MCP rate
- Demonstrate improvement in one disparity in HEDIS-like measure (1 milestone)
 - Reported by practice

KPI Milestones Cont'd (8 in total)

4 Milestones Tied to Administrative Measures

Empanelment Achievement

Achieve target for the percent of patients who are assigned to a care team at the practice

Reported by practice

Continuity Achievement

Achieve target for patient-side continuity

Reported by practice

TNAA Achievement

Achieve target for average number of days to third next available routine appointment (TNAA)

Reported by practice

Assigned & Seen Improvement

Achieve improvement in assigned patients who had at least one primary care visit within a 12-month period

Reported by MCP