



Innovaccer EPT Platform and Dashboard Guide

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Overview

This document provides a comprehensive overview of the Innovaccer platform, key dashboards, and step-by-step navigation instructions to switch between modules. It is specifically tailored for Practice users to help them quickly access the functionality relevant to their role.

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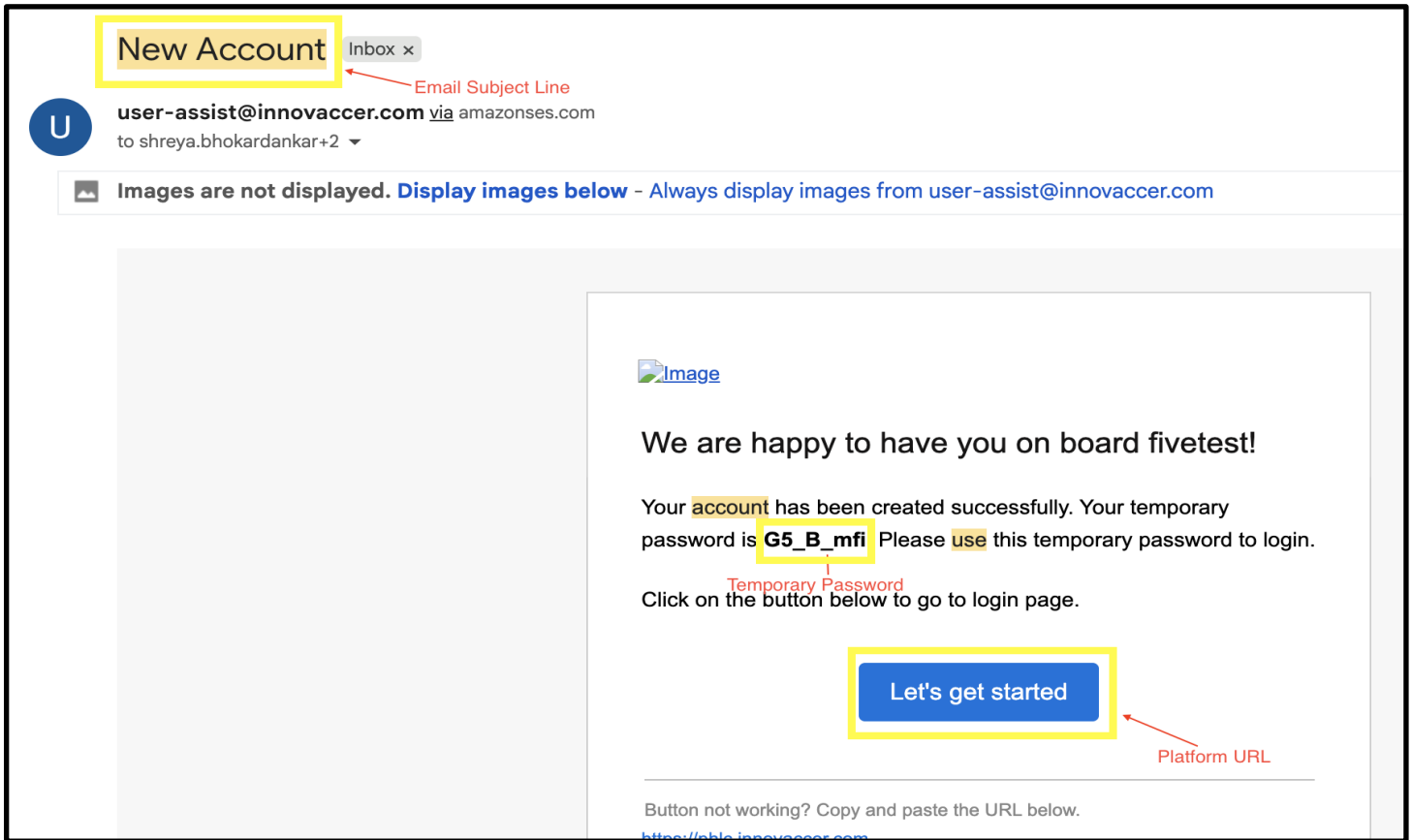
1. Platform Overview

Innovaccer is a unified population health management platform that combines claims and supplemental data for below practice use cases:

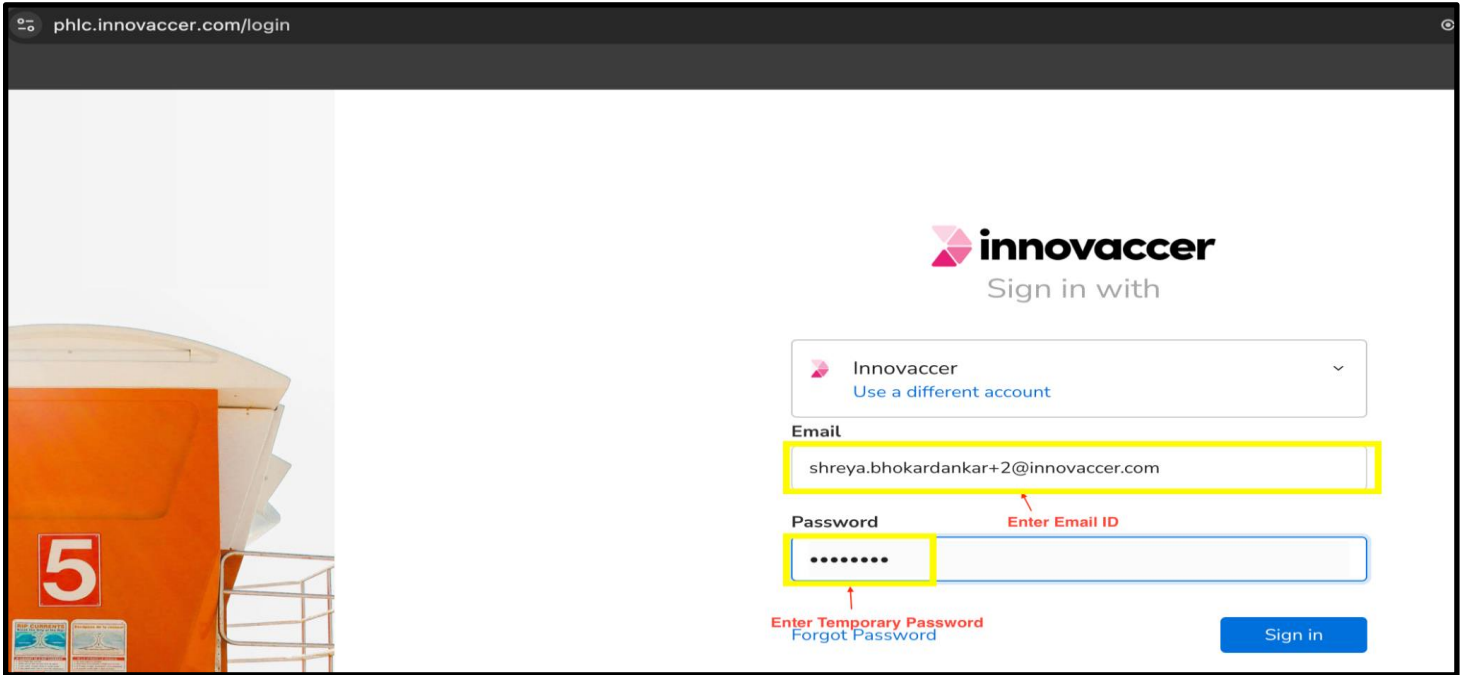
- Quality measure tracking for DHCS measure that adheres to HEDIS specifications along with Continuous Assignment Criteria
- Member attribution and segmentation

2. Login & Home Dashboard:

- New User Password Setup & Login Instructions:
 - **Step 1:** Receive Welcome Email
 - Upon onboarding, new users receive an automated email with:
 - Subject: Welcome to PHLC Platform – Your Account is Ready
 - Temporary Password



- **Step 2: Access Platform & Reset Password**
 - Open the platform: <https://phlc.innovaccer.com/login>
 - Enter your email and temporary password
 - Click Login → You will be redirected to Password Setup



phlc.innovaccer.com/login

 Sign in with

Innovaccer
[Use a different account](#)

Email
shreya.bhokardankar+2@innovaccer.com

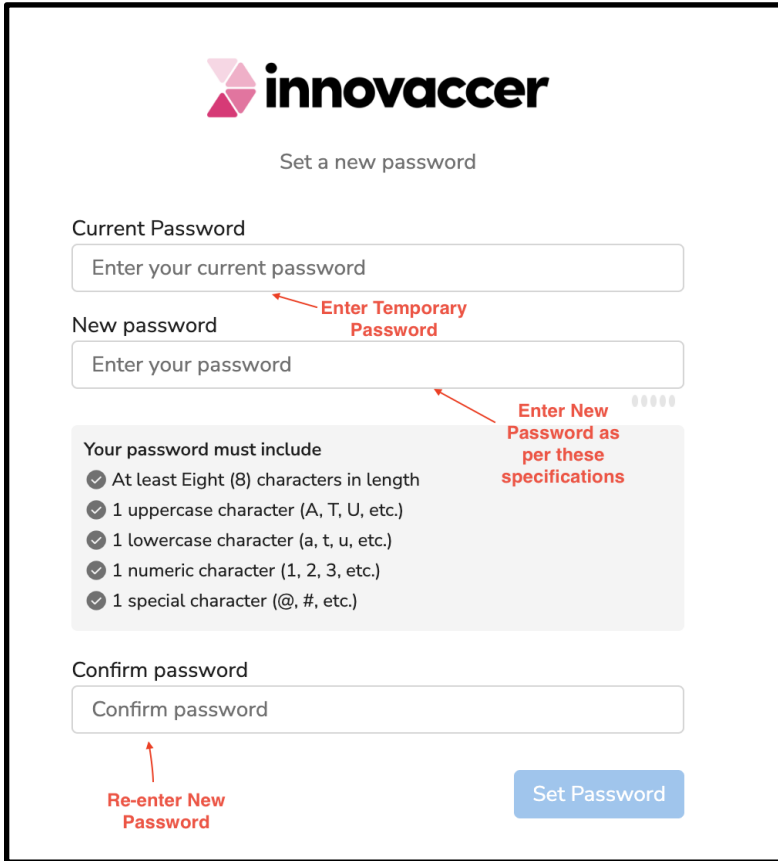
Password
.....

Enter Email ID

Enter Temporary Password
[Forgot Password](#)

Sign in

- **Step 3: Set New Password**
 - Enter Temporary and New Password
 - Confirm New password and click Set Password
 - Success: Password reset complete



 **innovaccer**

Set a new password

Current Password

Enter your current password

New password

Enter your password

Enter Temporary Password

Enter New Password as per these specifications

Your password must include

- ✓ At least Eight (8) characters in length
- ✓ 1 uppercase character (A, T, U, etc.)
- ✓ 1 lowercase character (a, t, u, etc.)
- ✓ 1 numeric character (1, 2, 3, etc.)
- ✓ 1 special character (@, #, etc.)

Confirm password

Confirm password

Re-enter New Password

Set Password

- **Step 4: Login with New Credentials**
 - Return to login page
 - Enter email and new password
 - Click Login → OKTA MFA code will be sent to your registered email



innovaccer - Action Required: One-time verification code

Hi fivetest,

You are receiving this email because a request was made for a one-time code that can be used for authentication.

Please enter the following code for verification:

996016

OKTA Code

If you believe you have received this email in error, please reach out to your system administrator.

- **Step 5:** Complete MFA Authentication
 - Enter the 6-digit OKTA code.
Note: This code can also be copy and pasted directly from the email
 - Click Enter



Two-Factor Authentication

Your organization requires you to verify yourself with two-step verification for security reasons.

We've sent you a code on
shreya.bhokardankar+2@innovaccer.com which will be only
valid for 5 minutes.

Hi Shreya

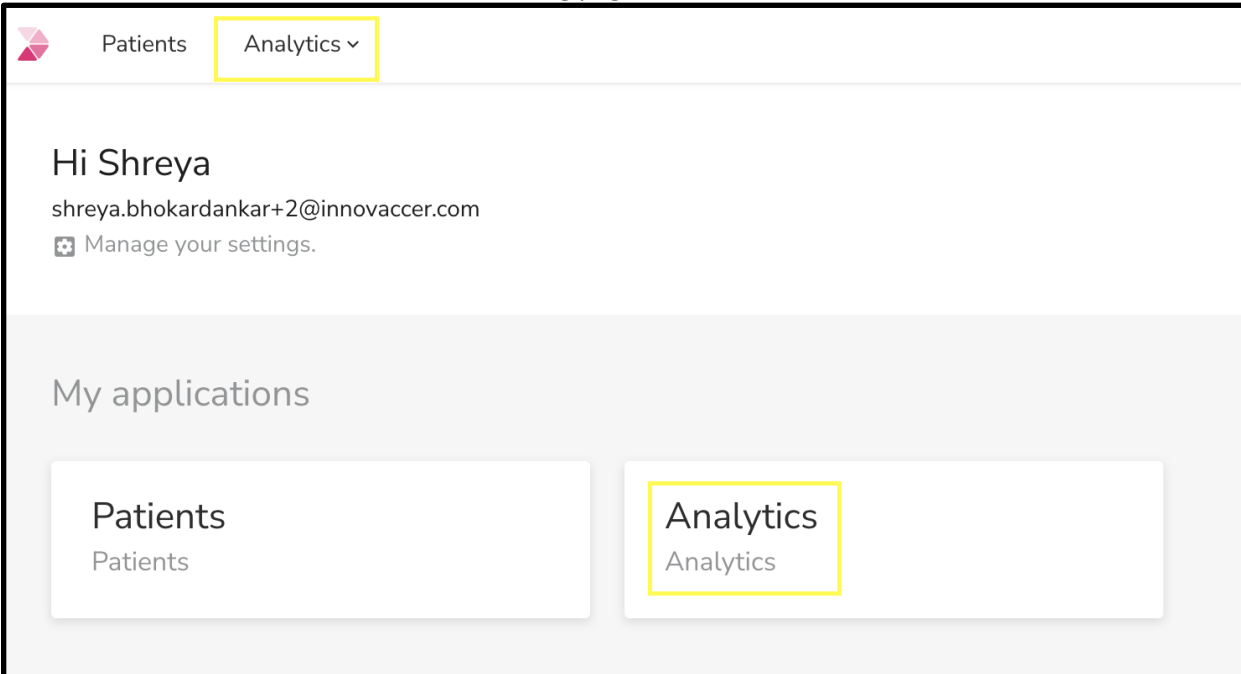
shreya.bhokardankar+2@innovaccer.com

 - - - -

[Resend code](#)

Enter OKTA Code here

- User will be redirected to below landing page



The landing page features a top navigation bar with a logo and two tabs: "Patients" and "Analytics". The "Analytics" tab is highlighted with a yellow border. Below the navigation bar, the user is greeted with "Hi Shreya" and their email address "shreya.bhokardankar+2@innovaccer.com". A link to "Manage your settings" is provided. The main section is titled "My applications" and contains two cards. The "Patients" card is on the left, and the "Analytics" card is on the right, also highlighted with a yellow border.

Patients Analytics ▾

Hi Shreya
shreya.bhokardankar+2@innovaccer.com
⚙️ Manage your settings.

My applications

Patients
Patients

Analytics
Analytics

Access the Dashboard: The user can access the dashboard through one of the two options below:

- **Option 1:**
My Applications → Analytics tab (highlighted in yellow) → Dashboard
- **Option 2:**
Top Left Corner → Analytics link (highlighted in yellow)

Dashboard Page: The user will be redirected to the below Dashboard page

Dashboards		
1 Starred	7 All	Q Search by name or description
Name: A-Z		Status Select
Showing 1-1 of 1 item		
Dashboard name ↑	Visibility	Data refresh status ↓
★ Quality Management PHLC Latest Provider View Quality Management PHLC Latest Provider View	Private	Up to date Feb 17, 2026 at 11:21 am

Dashboard: Quality Management PHLC Latest Provider View

This dashboard is designed for Practice users, providing access to data specific to their Practice, including the quality rate distribution across all contracted MCPs.

Medicaid Tab

Aggregated Population Summary: This KPI represents the total member population across the following three categories.

Aggregated population summary		
Total Enrolled Members	Total Eligible Members	Total Continuously Assigned Members
49,368	40,213	39,176
0.0%	0.0%	0.0%
Last year N/A	Last year N/A	Last year N/A

- **Total Enrolled Members:** Represents the total number of members enrolled in the in-scope Practices for Dec 2024.
- **Total Eligible Members:** Represents the Total eligible members for one or more measures, regardless of continuous assignment criteria.
- **Total Continuously Assigned Members:** Represents the total number of members eligible for at least one in-scope measure, after applying the continuous assignment criteria.

Measure Performance: This KPI provides a comparison of quality measure performance across multiple measures, considering data from all practices and plans.

Measure Name	Total Continuously Assigned Population	Numerator	Performance	Measure is Payable for EPT	50th Percentile	Open Gaps to 50th Percentile	75th Percentile	Open Gaps to 75th Percentile	90th Percentile	Open Gaps to 90th Percentile
Depression Screening and Follow-Up for Adolescents and Adults :: Depression Screening.	587	196	33.39%	Y	1.03%	0	4.52%	0	16.22%	0
Child and Adolescent Well-Care Visits	255	138	54.12%	N	51.81%	0	58.07%	10	64.74%	27
Cervical Cancer Screening	233	134	57.51%	N	57.18%	0	61.56%	9	67.46%	23
Colorectal Cancer Screening	206	103	50.00%	N	38.07%	0	43.71%	0	49.35%	0
Breast Cancer Screening	75	46	61.33%	N	52.68%	0	59.51%	0	63.48%	2

- **Measure Name:** The specific clinical quality measure used to assess care performance.
- **Total Continuously Assigned Population:** This represents the total number of continuously assigned members eligible for that measure.
- **Numerator:** This represents the total number of continuously assigned eligible members that are measure compliant.
- **Performance:** This represents the percentage of members who are compliant with the measure out of the total number of eligible members for that measure.
- **Measure is Payable for EPT:** This represents whether the measure is payable or not a/c to POF criteria and Den >=30.
- **50th Percentile:** This represents the 50th percentile benchmark as defined by NCQA for MY 2023.
- **Open Gaps to 50th Percentile:** This represents the total number of members that should be targeted to meet the 50th percentile benchmark.
- **75th Percentile:** This represents the 75th percentile benchmark as defined by NCQA for MY 2023.
- **Open Gaps to 75th Percentile:** This represents the total number of members that should be targeted to meet the 75th percentile benchmark.
- **90th Percentile:** This represents the 90th percentile benchmark as defined by NCQA for MY 2023.
- **Open Gaps to 90th Percentile:** This represents the total number of members that should be targeted to meet the 90th percentile benchmark.

Measure Performance Color Logic

The Performance column in the dashboard is conditionally formatted based on the 75th percentile benchmark and Pay for Performance (POF) criteria. The color indicators represent the following:

● Green - Meets 90th percentile benchmark.
The measure performance is at or above the 90th percentile benchmark .

● Yellow - Below 90th percentile benchmark .

The measure performance is below the 90th percentile benchmark.

POF Logic:

POF eligibility is determined at the practice level for each individual measure based on the following logic:

A practice will be considered Payable for a measure only when:

- The POF assigned to the practice matches the POF applicable to that specific measure, and
- The denominator for the measure is greater than or equal to 30 ($\text{Den} \geq 30$).

Practice-Level POF Display

When any Practice user logs in, a note is dynamically displayed at the top of the dashboard:

“POF for this practice is: [POF Name]”

This indicates the POF category assigned to the selected practice and is used in determining pof eligibility for each measure as described above.

Measure is Payable for EPT Logic

If this field is marked as **“Y”**, it indicates that the measure is **aligned with the practice’s Population of Focus (PoF)** and has a **denominator count greater than 30**.

However, this does **not indicate that the practice has met the 90th percentile benchmark**.

If the **Performance field is highlighted in green**, it indicates that the practice has **met the 90th percentile benchmark** for that measure.

Measure performance		Total Continuously Assigned Population with open gaps ↗ All Continuously Assigned Population ↗								
Select a measure to view specific members.		POF for this practice is: Children and youth								
Quality measures		● Meets 90th Percentile Benchmark ● Below 90th Percentile Benchmark								
Measure Name	Total Continuously Assigned Population	Numerator	Performance	Is Measure Payable	50th Percentile	Open Gaps to 50th Percentile	75th Percentile	Open Gaps to 75th Percentile	90th Percentile	Open Gaps to 90th Percentile
Well-Child Visits in for Age 15 Months - 30 Months	186	161	86.56%	Y	69.43%	0	73.09%	0	79.94%	0
Postpartum Depression Screening and Follow-Up : Depression screening for first delivery	184	31	16.85%	Y	1.30%	0	8.80%	0	29.84%	24

Consider the above example for Demo Practice #1:

For this practice, two measures have the “Measure is Payable for EPT” field marked as “Y.”

Measure 1: Well-Child Visits in the First 15–30 Months (Marked as Green)

- Eligible population: **186**
- Performance: **86.56%**
- Measure is Payable for EPT: **Y**
- Performance color: **Green**

Interpretation:

- The measure **qualifies for EPT evaluation** (aligned with PoF and denominator > 30).
- This measure is **both payable and meeting the target performance**.

Measure#2: Postpartum Depression Screening and Follow-Up (Marked as Yellow)

- Eligible population: **184**
- Performance: **16.85%**
- **Measure is Payable for EPT = Y**
- Performance color: **Yellow**

Interpretation:

- The measure **qualifies for EPT evaluation** (aligned with PoF and denominator > 30).
- But the practice has **not yet reached the 90th percentile benchmark**

Patient Drill Downs:

- **All Continuously Assigned Population:** Drill-through link to access patient-level details for all the continuously assigned members eligible for Quality Measures expect POD.

Empl ↑	Name	Member Id	Dob	Race	Ethnicity	language	Phone	Email
T100002	[REDACTED]	[REDACTED]	03/03/2005	N/A	N/A	-	[REDACTED]	-
T100014	[REDACTED]	[REDACTED]	07/27/2009	N/A	N/A	-	[REDACTED]	-
T100018	[REDACTED]	[REDACTED]	11/03/2010	N/A	N/A	-	[REDACTED]	-
T100025	[REDACTED]	[REDACTED]	08/26/2016	N/A	N/A	-	[REDACTED]	-
T100031	[REDACTED]	[REDACTED]	08/06/2004	N/A	N/A	-	[REDACTED]	-
T100032	[REDACTED]	[REDACTED]	06/30/2004	N/A	N/A	-	[REDACTED]	-

- **Total Continuously Assigned Population with open gaps:** Drill-through link to access patient-level details for all the continuously assigned members with open gaps for Quality Measures expect POD.

Empl ↑	Name	Member Id	Dob	Race	Ethnicity	language	Phone	Email
T100002	[REDACTED]	[REDACTED]	03/03/2005	N/A	N/A	-	[REDACTED]	-
T100014	[REDACTED]	[REDACTED]	07/27/2009	N/A	N/A	-	[REDACTED]	-
T100018	[REDACTED]	[REDACTED]	11/03/2010	N/A	N/A	-	[REDACTED]	-
T100025	[REDACTED]	[REDACTED]	08/26/2016	N/A	N/A	-	[REDACTED]	-
T100031	[REDACTED]	[REDACTED]	08/06/2004	N/A	N/A	-	[REDACTED]	-
T100032	[REDACTED]	[REDACTED]	06/30/2004	N/A	N/A	-	[REDACTED]	-

Note: To view the complete patient data, users can download the patient list using the **Download List** button located on the right side when a patient list is opened.

All dashboards / Quality Management PHLC Demo Latest Practice View

Go back to insights Download List

Empl ↑ Name ↓ Member Id ↓ Dob ↓ Race ↓ Ethnicity ↓ language ↓ Phone ↓ Email ↓

FILTERS Contract Name Medicaid

- **Total Continuously Assigned Population for Visit Measure:** Drill-through link to access patient-level details for all the continuously assigned members eligible for Visit Measure (*Pharmacotherapy for Opioid Use Disorder*).

Insights All-Patient-Visit x

Empl ↑ Name ↓ Member Id ↓ Dob ↓ Visit Start Date ↓ Visit End Date ↓

Drill Through from Measure: This section enables the user to access a drill-through page that displays the distribution of quality measure performance rates for a given measure — across multiple MCPs, and aggregated totals.

Measure Name	Total Continuously Assigned Population	Numerator	Performance	Measure is Payable for EPT	50th Percentile	Open Gaps to 50th Percentile	75th Percentile	Open Gaps to 75th Percentile	90th Percentile	Open Gaps to 90th Percentile
Depression Screening and Follow-Up for Adolescents and Adults :: Depression Screening.	587	196	33.39%	Y	1.03%	0	4.52%	0	16.22%	0
Child and Adolescent Well-Care Visits	255	138	54.12%	N	51.81%	0	58.07%	10	64.74%	27
Cervical Cancer Screening	233	134	57.51%	N	57.18%	0	61.56%	9	67.46%	23
Colorectal Cancer Screening	206	103	50.00%	N	38.07%	0	43.71%	0	49.35%	0
Breast Cancer Screening	75	46	61.33%	N	52.68%	0	59.51%	0	63.48%	2
Glycemic Status Assessment :: Glycemic Status Assessment	68	36	52.94%	N	33.33%	9	29.93%	12	27.01%	14
Depression Screening Adolescents and Adults :: Depression Screening.	29	18	62.07%	N	70.91%	3	78.82%	5	87.39%	7
Drill through	Measure DrillDown									

Cervical Cancer Screening				Denominator	Numerator
				11,338	6,811
Continuously Assigned Members with open gaps				All Continuously Assigned members	Total Continuously Assigned Population for Visit Measure
Plan performance					
Select a plan to view specific members.					
Plan	Denominator	Numerator	%Rate		
Demo Mcp Two	11,105	6,677	60.13%		
Demo Mcp One	233	134	57.51%		

Plan Performance: This KPI provides a comparison of quality measures performance across Contracted MCPs.

Plan	Enrolled Members	Total Continuously Assigned Members	Total Measures Meeting 50th Percentile	Total Measures Meeting 75th Percentile	Total Measures Meeting 90th Percentile	Last Year Performance
Demo Mcp One	1,871	831	9/25	6/25	4/25	N/A
Demo Mcp Two	49,368	39,080	11/25	9/25	6/25	N/A

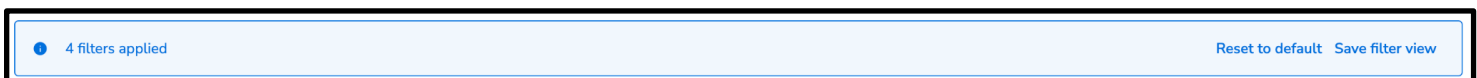
- **Enrolled Members:** Represents the total number of members enrolled in the in-scope MCPs for the selected month and year, as specified in the dashboard's filter section.
- **Total Continuously Assigned Members:** This represents the total number of members eligible for at least one in-scope measure, after applying the continuous assignment criteria.
- **Total measures meeting 50th Percentile:** Number of quality measures meeting or exceeding the 50th percentile benchmark out of total applicable measures.
- **Total measures meeting 75th Percentile:** Number of quality measures meeting or exceeding the 75th percentile benchmark out of total applicable measures.
- **Total measures meeting 90th Percentile:** Number of quality measures meeting or exceeding the 90th percentile benchmark out of total applicable measures.
- **Last Year Performance:** This represents the last year's performance across all eligible measures for that Practice.

Filters Explanation

1. **Measure:** Choose one or more quality measures from the list or select "All" to include details for all measures
2. **Plan:** Filter by MCP , or choose "All" to review and measure performance across all plans.
3. **Practice:** Filter by Practice , or choose "All" to review measure performance across all practices
4. **Race:** Filter the measure output by race categories.
5. **Ethnicity:** Filter the measure output by ethnicity categories.
6. **Age Bucket:** Choose a particular age group or select "All" to view data across all age groups. This is helpful in understanding how age affects measure eligibility or outcomes.

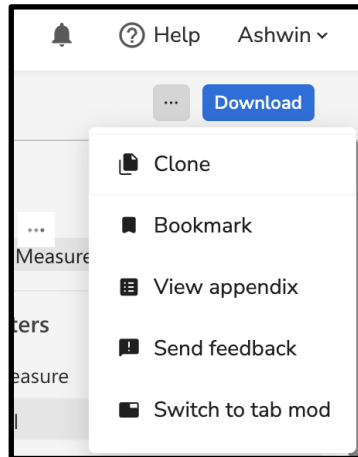
Note:

- After applying any filter to the dashboard, use the "Reset to default" button to set the dashboard filters back to default.
- To save the applied filters, use the "Save filter option" for quick access. The user can access saved filters in the bookmark tab present in options(check next section for more details).



Additional Instructions

Below are additional dashboard features available for the end user:



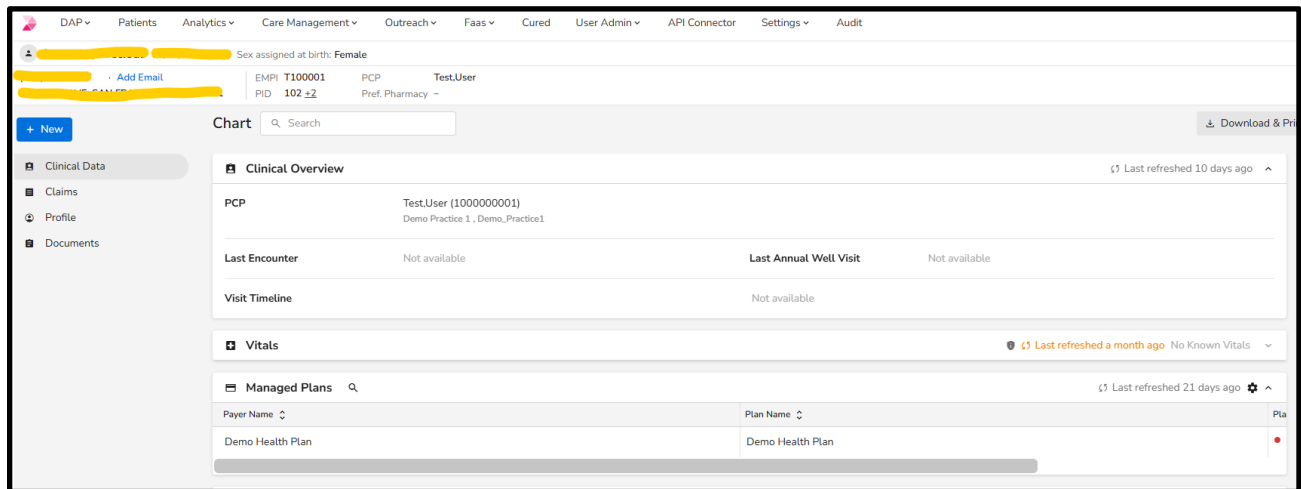
1. **Clone:** To duplicate or clone the dashboard view.
2. **Bookmark:** To access all saved filter selections for quick access.
3. **View appendix:** To view detailed descriptions for all KPIs available on the dashboard.
4. **Send feedback:** To send back any feedback related to the dashboard utilization.
5. **Switch to Tab mode:** To switch between tab default modes.

Patient 360: This module is aimed at improving patient care and enhancing the healthcare experience by providing a comprehensive view of patient data. The platform consolidates various data sources, such as claims data, and supplemental data to create a unified patient profile. This holistic view allows healthcare organizations to better manage the health of specific populations and improve overall health outcomes.

- Drill through from the Patient List on the Dashboard .
 - Patient List → Drill Through from the link on EMPI

Empi ↑	Name ↕	Member Id ↕	Dob ↕	Race ↕	Ethnicity ↕	language ↕	Phone ↕	Email ↕
T100001				N/A	N/A	-		-

Patient 360 Landing Page:



The screenshot displays the Provider Dashboard for a patient. The top navigation bar includes links for DAP, Patients, Analytics, Care Management, Outreach, Faas, Cured, User Admin, API Connector, Settings, and Audit. The patient's name is redacted with a yellow box. Below the name, the sex is listed as Female. The dashboard is divided into several sections: a left sidebar with links for Clinical Data, Claims, Profile, and Documents; a main content area with a 'Chart' section (containing a search bar and a 'Download & Print' button), a 'Clinical Overview' section (showing PCP information, last encounter, last annual well visit, and visit timeline), a 'Vitals' section (showing a refresh button and 'No Known Vitals'), and a 'Managed Plans' section (showing a table with Payer Name and Plan Name columns).

Provider Dashboard – Frequently Asked Questions (FAQs)

1. What is the purpose of the Provider Dashboard?

The Provider Dashboard provides a consolidated view of your practice's performance on **quality measures**. This Dashboard is part of the Equity & Practice Transformation (EPT) program; three of the 25 EPT milestones are tied to the clinical outcomes of your practice's Population of Focus, as measured by these quality measures. The Dashboard is designed to help care teams track performance, identify care gaps, and prioritize outreach activities.

The Dashboard aggregates data across all managed care plans (MCPs) in California on Medi-Cal patients and calculates performance according to the California Technical Specifications (CaTS). CaTS provides operating instruction on generating site-level quality metric performance.

2. What measures are included in the Provider Dashboard?

All practices have access to all 21 HEDIS-like measures in the EPT in the Provider Dashboard. Examples include Cervical Cancer Screening, Childhood Immunizations, Timely Prenatal Care, and Controlling High Blood Pressure. You can see the full list of EPT measures [here](#).

3. What is the difference between Continuous Enrolment and Continuous Assignment?

- **Continuous Enrolment:** This refers to the members that are continuously enrolled with a particular Payer for a specified period of time as per HEDIS standard specifications
- **Continuous Assignment:** This refers to the members that are continuously assigned with a particular Practice for a specified period of time as per DHCS CATs Measure specification

4. What is the measurement period? Will the data be shown on a rolling or year-to-date basis?

The current dashboard is powered for Measurement Year 2024. The Quality Rates will always be calculated on a rolling basis, containing 12 months of data.

5. What are the specifications used to calculate Quality Rates to power up the dashboard?

Quality Rates are calculated as per DHCS CaTS measures specifications, which can be found [here](#).

6. Are Practice users able to view Quality Rates only for members attributed to their practice?

Yes. Access controls are applied on the dashboard, ensuring that Practice users can only view Quality Rates and related data for members attributed to their respective practice.

7. What are the data sources used to calculate the Quality Rates displayed on the Dashboard?

Nineteen MCPs across California submitted claims, eligibility and ECDS data.

8. In case of any issues/concerns or new user creation or existing user deactivation, whom to reach out from the PHLC or Innovaccer team?

For Any issues related to user management, kindly email to info@pophealthlc.org

9. What do Numerator and Denominator mean in the dashboard?

- **Denominator:** Total Continuously Enrolled and Continuously Assigned patients eligible for the measure.
- **Numerator:** Total Continuously Enrolled and Continuously Assigned Patients who have completed the required care activity or have met the measure complaint Criteria

Performance is calculated as:

Performance = Numerator / Denominator

10. How often is the dashboard updated?

The dashboard is refreshed based on the **latest available claims, eligibility, and clinical data feeds** received on the platform by 19 different MCPs.

Incremental Refresh Cycles are yet to be finalized