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JUST THE FAX

March 22, 2019

Page 1 of 2

THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:

COUNTIES:

- ☐ Imperial
- ☐ Riverside/San Bernardino
- ☐ Los Angeles
- ☐ Orange
- ☐ San Diego

LINES OF BUSINESS:

- Molina Medi-Cal Managed Care
- ☐ Molina Medicare
- Options Plus

 Molina Dual Options Cal
 MediConnect Plan
 (Medicare-Medicaid Plan)
- ☐ Molina Marketplace (Covered CA)

PROVIDER TYPES:

☐ Medical Group/ IPA/MSO

Primary Care

- ☑ IPA/MSO
- □ Directs

Specialists

- ☐ Directs
- ☐ IPA

☐ Hospitals

Ancillary

- ☐ CBAS
- ☐ SNF/LTC
- □ DME
- $\hfill\Box$ Home Health
- ☐ Other

FOR QUESTIONS CALL PROVIDER SERVICES:

(855) 322-4075, Extension:

Los Angeles/Orange Counties

X111113 X123071 X127657 X123007

Riverside/San Bernardino Counties

X127684 X128010 X120618

Sacramento County

X126232 X121360

San Diego County

X121805 X121401 X127709 X121413 X123006 X121599

Imperial County

X125682 X125666

UPDATE

PAY-FOR-PERFORMANCE/HEDIS® PERFORMANCE BONUS PROGRAM

This is an advisory notification to inform our Molina Healthcare of California (MHC) network providers of updates to the Medi-Cal Pay-For-Performance/ HEDIS® Performance Bonus Program (P4P Program).

Effective immediately the Annual Monitoring for Patients on Persistent Medications (MPM) for ACE/ARB and Diuretics HEDIS measure will no longer be incentivized and has been removed from the 2019 P4P HEDIS program.

Please review the updated Medi-Cal HEDIS Metrics and Bonus Amounts on the following page:

Sacramento	
Measure	Bonus
Breast Cancer Screening	\$25 per procedure /up to one
	screening per member per year
Comprehensive Diabetes Care:	\$25 per procedure (retinal eye exam)
Retinal Eye Exam	/up to one payment per member per
HbA1C Control	year
Blood Pressure Control	\$75 per HbA1c control test result less
	than 8.0 /one-time payment in Q4 per
	member per year
	\$25 per last controlled BP reading of
	the year less than 140/90 /one-time
	payment in Q4 per member per year
Timeliness of Prenatal Care-First Trimester Visit	\$200 per visit/up to one payment per
	member per year
Timeliness of Post-Partum Care (21-56 days	\$200 per visit/up to one payment per
post-delivery)	member per year
Childhood Immunization Status – Combination 3	\$100 for the completion of
Includes: 4 DTap, 3 IPV, 1 MMR, 3 HiB, 3	combination 3 immunizations before
HepB, 1 VZV, 4 PCV	two years of age
Well Child Visits 3/4	\$75 per visit/up to one payment per
	member per year for children ages 3-6
	years old

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (855) 322-4075. Please refer to the extensions on page one.