



Primary Care Provider Quality Improvement Program (PCP QIP) eReports Training Webinar

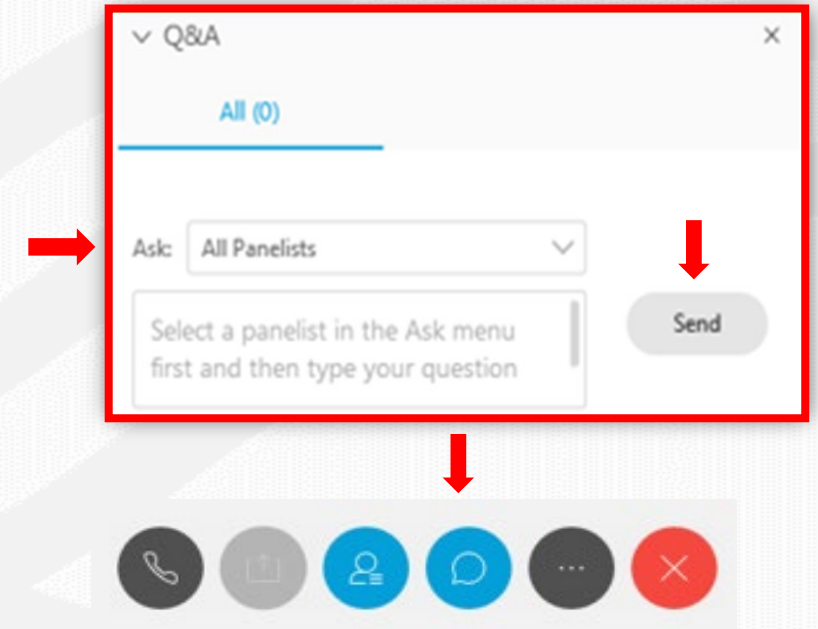
Athena Beltran-Nampraseut, Program Manager II
Eva Lopez, Program Manager I

February 26, 2026



Housekeeping

- **This webinar will be recorded.**
- If you do not wish to be recorded, you are welcome to exit the webinar now.
- By remaining as an attendee on this webinar, you are consenting to being recorded.
- All participants have been muted to eliminate any possible noise interference / distraction.
- If you have a question, please type your question in the CHAT BOX and address to “ALL PANELISTS.”
- This webinar presentation and recording will be available on the Primary Care Provider Quality Improvement Program (PCP QIP) webpage at a later date.

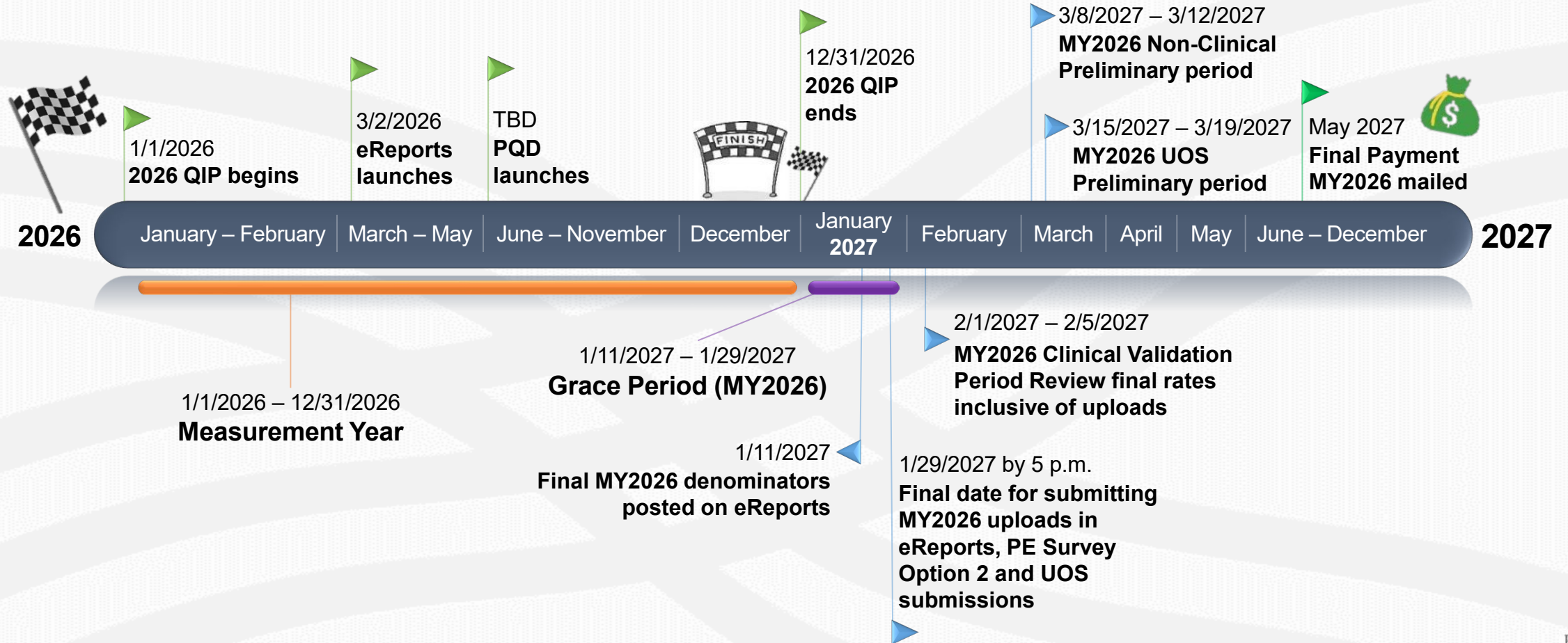


Objectives

- 2026 Measurement Year Timeline
- eReports
 - Overview
- Other Online Platforms
 - Partnership Quality Dashboard (PQD)
 - Preventive Care Reports
- Annual Uploads Audit
 - Best Practices
- Resources
- Upcoming Training Events



2026 PCP QIP Standard Timeline



2026 Timeline Highlights

- Measurement Year (MY) 2026: Quarter 1 – Quarter 3
 - eReports Launch: **Monday, March 2, 2026**
 - PQD Launch: **May 2026** (exact date TBD)
 - Kick-Off Webinar: TBD
 - Reducing Health Care Disparity (optional clinical measure):
 - Webinar recorded and posted, access [HERE](#)
 - POs will be notified of their qualification status: **March 2-6, 2026**
 - Sites must notify the QIP Team of their intent to participate by end of business day, **March 31, 2026**
 - Patient Experience:
 - CG CAHPS or Survey option: Providers will be notified of their qualification status in **May 2026**
 - Survey Option Part 1 is due **July 31, 2026**



What is eReports?

- Gives you the ability to:
 - Access a web-based portal 24 hours / 7 days a week.
 - Track your **clinical** performance in real time.
 - Download patient reports for each of the clinical measures.
 - Upload supplemental data for your patients.
 - Access detailed specifications manual.
 - Access both clinical and non-clinical code sets.

How Can I Access eReports?

- Open PartnershipHP.org

The screenshot shows the website's navigation bar with the following links: Miembros | Участники | Miyembro | मेंबरो | Member Portal | Language Assistance | Provider Online Services | Careers | Contact Us. The main navigation menu includes HOME, MEMBERS, PROVIDERS (highlighted with a yellow circle), ABOUT US, and COMMUNITY. A dropdown menu for PROVIDERS is open, listing categories: PROVIDERS, CLAIMS, PHARMACY, HEALTH SERVICES, QUALITY, and BEHAVIORAL HEALTH. A yellow arrow points to 'Quality Improvement Programs (QIP)' under the QUALITY category. The website footer features the NQQA Accredited Health Plan logo on the left, the mission statement 'OUR MISSION: TO HELP OUR MEMBERS, AND THE COMMUNITIES WE SERVE, BE HEALTHY' in the center, and the Partnership HealthPlan of California logo on the right.

How Can I Access eReports?

QUALITY INCENTIVE PROGRAMS

Partnership HealthPlan of California has several improvement programs that offer financial incentives and technical assistance to providers who serve our members.

Details on each specific program can be accessed by clicking the link below.

- [Primary Care Provider Quality Incentive Program \(PCP QIP\)](#)
- [Hospital Quality Incentive Program \(HQIP\)](#)
- [Palliative Care Quality Incentive Program \(PC QIP\)](#)
- [Perinatal Quality Incentive Program \(Perinatal QIP\)](#)
- [Enhanced Care Management Program \(ECM QIP\)](#)
- [Extended Care Center Quality Incentive Program \(EXT QIP\)](#)

Contact Us

Email: QIP@partnershiphp.org (please allow two business days for a response)

Fax: (707) 863-4316



How Can I Access eReports?

HOME MEMBERS PROVIDERS ABOUT US COMMUNITY

Home | Providers | Quality Improvement | PCP Quality Incentive Program

PROVIDER RELATIONS

CLAIMS

PHARMACY

QUALITY IMPROVEMENT

PCP QIP

- Hospital QIP
- Palliative Care QIP
- Perinatal QIP
- ECM QIP
- Extended Care Center QIP
- HEDIS
- Managing Pain Safety
- Partnership Improvement Academy
- Member Safety and Quality Assurance
- Potential Quality Issues
- Cologuard Care-Gap Orders

HEALTH SERVICES

STRATEGIC INITIATIVES

HIPAA/EDI PUBLICATIONS

PCP QUALITY INCENTIVE PROGRAM

The Primary Care Provider Quality Incentive Program (PCP QIP), designed in collaboration with California providers, offers substantial financial incentives, data resources, and technical assistance to providers who serve our members so that significant improvements can be made in the following areas:

- Preventive Screening
- Pediatric Access
- Hospital Utilization
- Primary Care Utilization
- Chronic Disease Management
- Patient Experience

Contact Us
Email: QIP@partnershiphp.org (please allow two business days for a response)
Fax: (707) 863-4316

PCP QIP Overview

To help orient our providers to the PCP QIP year, we have provided measurement set documents, a code list, and other useful tools and resources.

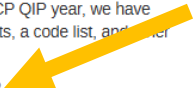
[Learn More about the 2026 PCP QIP](#)

[Equity Adjustment - PCP QIP Payment Methodology](#)

[PCP QIP Webinars](#)

[Upcoming Webinars and Training](#)

[On Demand Courses](#)



HOME MEMBERS PROVIDERS ABOUT US COMMUNITY

Home | Providers | Quality Improvement | PCP QIP 2026

PROVIDER RELATIONS

CLAIMS

PHARMACY

QUALITY IMPROVEMENT

PCP QIP

- Hospital QIP
- Palliative Care QIP
- Perinatal QIP
- ECM QIP
- Extended Care Center QIP
- HEDIS
- Managing Pain Safety
- Partnership Improvement Academy
- Member Safety and Quality Assurance
- Potential Quality Issues
- Cologuard Care-Gap Orders

HEALTH SERVICES

STRATEGIC INITIATIVES

PCP QIP 2026

This page includes measurement documents and tools referring to the last and current program years spanning January 1, 2025 – December 31, 2026.

[Approved 2026 PCP QIP Measure Summary \(Added January 7, 2026\)](#)

Measurement Set Documents

Measure Specifications
Measures vary by practice type. The following document includes measure descriptions and requirements as well as data submission processes by type.

[2025 PCP QIP Measure Specifications Manual](#)
Updated: September 30, 2025

[2026 PCP QIP Measure Specifications Manual](#)
Updated: January 8, 2025

Code List

Clinical Measurement Set - Please use eReports Diagnosis Crosswalk to view the code set.

Tools


[Click here for eReports](#)

Please refer to the specifications document for your practice type for a data submissions timeline and submission templates.

[Timeline for Addressing 2026 and 2027 PCP QIP Measures](#)

Measurement Year Performance Data by County

2024



eReports New User Access

- New Providers
 - The QIP team will email your POs individual Secret Key (Skey) along with detailed registration instructions so the appointed eAdmin(s) can create their accounts. eAdmin access should be limited to 1-2 designated staff.
- Existing Providers
 - Please review your **My eAdmins** list to ensure the appropriate staff have access. Appointed staff with eAdmin access have the ability to manage existing accounts and create new ones.

Sign Up:

First Name:

Last Name:

User Email:

Preferred Username:

Password:

Confirm Password:

Secret Key:

I am responsible for creating accounts for this organization.

I am responsible for managing permissions of users for eReports, including granting and revoking access.)

I am responsible for auditing user accounts periodically

I am a primary point of contact for PHC online services

I am the primary point of contact(s) for PHC's eReports Team.

I am responsible for ensuring that individuals of this organization only have permissions that are in accordance with HIPAA minimum use stands set forth in 45 CFR 1

Password Requirements:

Please use the following rules to create your password:

- Length should be atleast 8 characters long
- At least 1 Upper case letter
- At least 1 numeric character
- At least 1 special character like !,@,#,\$,%,&,^,&,*(),
- Sample password: e.g Partner2012*

QIP - eReports

My eAdmins

YOUR EADMIN DETAILS:

User

eAdmin Name

Email:

eReports Walkthrough

*Save URL to favorites for easy access: <https://qip.partnershiphp.org/>



QIP e-Reports

Sign in with your organizational account

Log In

Sign Up:

New user, please email the QIP Team at qip@partnershiphp.org for your site's registration key (For eAdmin Only) or contact for eAdmin (creation of general accounts). [Click here](#) to register with a registration Key.

Can't access your account?

Link to reset password

} Enter login credentials

[About Us](#) [What is QIP?](#) [User Login](#) [FAQ](#) [Help](#)
Quality Improvement Program (QIP) - A product of Partnership HealthPlan of California
[Privacy Policy](#)

eReports Terms and Conditions

QIP - eReports

- About Us
- What is QIP?
- User Login
- FAQ
- Help

Terms and Conditions:

Welcome to Partnership HealthPlan's QIP eReports system.

This is a PHC proprietary software product. This product may be only used for authorized business purposes and contains confidential data, including Protected Health Information (PHI). Confidential information and PHI may not be accessed or used without authorization. Any or all uses of this network and all files on this network may be intercepted, monitored, recorded, copied, audited, inspected, and disclosed to authorized personnel, law enforcement personnel, as well as authorized officials of other agencies.

Unauthorized or improper use of this system may result in administrative disciplinary action and civil and criminal penalties. By continuing to use this system you indicate your awareness of and consent to these terms and conditions of use.

LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.

"HIPAA" shall mean Section 262 of the Health Insurance Portability and Accountability Act, P.L. 104-191 ("HIPAA") which governs the use and transmission of individually identifiable health information.

"Legal Requirement" shall mean any law or regulation affecting the use or disclosure of Protected Health Information.

"Protected Health Information" shall mean any Protected Health Information as defined in HIPAA or any similar information obtained from individuals as a result of the Customer providing products or services.

Security and Confidentiality: You acknowledge that Protected Health Information requires special safeguarding and agree to abide by the laws & Procedures of your company, state, and HIPAA regarding the protection and disclosure of Protected Health Information contained in the Site.

Safeguards: You agree that it is your responsibility to implement reasonable and appropriate administrative, technical and physical safeguards to protect the confidentiality, integrity and availability of all Protected Health Information and any and all other confidential information accessible on or through the Site.

[Decline](#) [Accept](#)



eReports Home Screen

QIP - eReports

Log Out

Threshold Report

GROUP NAME:

★ Measures in view may not apply to your practice type. Refer to the QIP measure specifications manual for clinical measures in your measure set. ★

Select a PCP | Search for PCP

Core Clinical Measurement Set

| Measure | QIP_Score | Numerator | Denominator | 25th Threshold % | 25th (Target/Achieved) | 50th Threshold % | 50th (Target/Achieved) | 75th Threshold % | 75th (Target/Achieved) | 90th Threshold % | 90th (Target/Achieved) |
|--|-----------|-----------|-------------|------------------|------------------------|------------------|------------------------|------------------|------------------------|------------------|------------------------|
| Child and Adolescent Well Care 2026 | 5.32 % | 799 | 15016 | NA | NA | NA | NA | 61.47% | 9231/799 | 67.63% | 10156/799 |
| Breast Cancer Screening 2026 | 37.76 % | 2917 | 7725 | NA | NA | 55.87% | 4316/2917 | NA | NA | NA | NA |
| Cervical Cancer Screening 2026 | 43.39 % | 8187 | 18868 | NA | NA | NA | NA | 64.06% | 12087/8187 | 68.16% | 12861/8187 |
| Childhood Immunization Status CIS 10 2026 | 17.14 % | 145 | 846 | NA | NA | NA | NA | 33.41% | 283/145 | 39.89% | 338/145 |
| Colorectal Cancer Screening 2026 | 34.56 % | 5046 | 14599 | NA | NA | NA | NA | 48.22% | 7040/5046 | 53.31% | 7783/5046 |
| Controlling High Blood Pressure 2026 | 8.59 % | 429 | 4994 | NA | NA | NA | NA | 71.34% | 3563/429 | 75.43% | 3767/429 |
| Diabetes - HbA1C Good Control 2026 | 15.56 % | 653 | 4196 | NA | NA | NA | NA | 73.48% | 3084/653 | 76.40% | 3206/653 |
| Diabetes - Retinal Eye exam 2026 | 0.93 % | 39 | 4193 | NA | NA | NA | NA | 62.53% | 2622/39 | 68.61% | 2877/39 |
| Immunization for Adolescents 2026 | 32.83 % | 347 | 1057 | NA | NA | NA | NA | 43.55% | 461/347 | 52.31% | 553/347 |
| Well Child First 15 Months 2026 | 20.19 % | 193 | 956 | NA | NA | NA | NA | 67.49% | 646/193 | 71.71% | 686/193 |
| Lead Screening Children 2026 | 78.65 % | 523 | 665 | NA | NA | NA | NA | 76.34% | 508/523 | 82.86% | 552/523 |
| Chlamydia Screening 2026 | 2.25 % | 111 | 4936 | NA | NA | 56.30% | 2779/111 | 65.47% | 3232/111 | 70.67% | 3489/111 |
| Well Child First 15-30 Months 2026 | 63.82 % | 464 | 727 | NA | NA | 72.32% | 526/464 | 77.50% | 564/464 | 82.12% | 598/464 |
| Kidney Health Evaluation for Patients with Diabetes 2026 | 1.59 % | 67 | 4218 | NA | NA | 42.13% | 1778/67 | NA | NA | NA | NA |

Monitoring Measurement Set

★ **New Feature!**

| Measure | QIP Score | Numerator | Denominator | 25th Threshold % | 25th (Target/Achieved) | 50th Threshold % | 50th (Target/Achieved) | 75th Threshold % | 75th (Target/Achieved) | 90th Threshold % | 90th (Target/Achieved) |
|-----------------------------------|-----------|-----------|-------------|------------------|------------------------|------------------|------------------------|------------------|------------------------|------------------|------------------------|
| Topical Fluoride in Children 2026 | 0.00 % | 0 | 3488 | NA | NA | 21.60% | 754/0 | NA | NA | NA | NA |

Advanced Care Planning

LAST LOGIN: 2/6/2026 12:08:56 PM
QIP SCORES UPDATED ON: 2/10/2026 12:34:47 PM

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- Member Search
- Upload QIP Data
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- My eAdmins
- eAdmin
- Diagnosis Crosswalk
- QIP Specification Manual
- Templates
- PHC Internal User Menu
- Partnership Quality Dashboard
- Preventive Care Report
- Disparity Analysis Dashboard
- FAQ
- Help



eReports Features Menu

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QIP - eReports

Select a PCP

| Measure |
|--|
| Child and Adolescent Well Care 2026 |
| Breast Cancer Screening 2026 |
| Cervical Cancer Screening 2026 |
| Childhood Immunization Status CIS 10 2026 |
| Colorectal Cancer Screening 2026 |
| Controlling High Blood Pressure 2026 |
| Diabetes - HbA1C Good Control 2026 |
| Diabetes - Retinal Eye exam 2026 |
| Immunization for Adolescents 2026 |
| Well Child First 15 Months 2026 |
| Lead Screening Children 2026 |
| Chlamydia Screening 2026 |
| Well Child First 15-30 Months 2026 |
| Kidney Health Evaluation for Patients with Diabetes 2026 |

| Measure |
|-----------------------------------|
| Topical Fluoride in Children 2026 |

Advanced Care Planning



My QIP Score

QIP - eReports

My QIP Score

Home

My QIP Scores

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QIP Member Report

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Weekly Count Report

My eAdmins

Select a PCP:

Select a Measure:

QIP Site:

Numerator: 159

Denominator: 269

★ QIP Score: 59.1 %

Threshold:

Note: The denominator list for the selected measure does not apply continuous enrollment criteria. The eligible population used to calculate the final scores for all measures is defined as capitated Medi-Cal members. For measures in the Clinical domain, the member also has to be continuously enrolled with a PCP site, with continuous enrollment defined as being assigned for nine out of the 12 months of the measurement year. Medi-Medi or dually eligible members are excluded from all measures.



QIP Measure Report

QIP - eReports

QIP Member Reports

Select a measure: **Breast Cancer Screening 2026**

Select a PCP:

Numerator Denominator

[Apply Filter and Display Report](#) [Clear](#)

Number of members displayed for the selected measure: **269**



[Refresh](#)

| QIP Result | CIN | Member First Name | Member Last Name | Member Phone | Gender | DOB | Age | Mammography Date | PCP | NewMember | Details |
|-------------|-----|-------------------|------------------|--------------|--------|-----|-----|------------------|-----|-----------|-------------------------|
| Denominator | | | | | | | 64 | | | N | Details |
| Denominator | | | | | | | 55 | | | Y | Details |
| Denominator | | | | | | | 64 | | | N | Details |
| Numerator | | | | | | | 54 | 10/16/2023 | | N | Details |
| Numerator | | | | | | | 52 | 08/20/2024 | | N | Details |
| Numerator | | | | | | | 61 | 09/05/2024 | | N | Details |
| Numerator | | | | | | | 63 | 07/23/2024 | | N | Details |
| Numerator | | | | | | | 56 | 09/17/2024 | | N | Details |
| Numerator | | | | | | | 59 | 07/23/2024 | | N | Details |
| Numerator | | | | | | | 60 | 07/16/2024 | | N | Details |
| Numerator | | | | | | | 57 | 03/29/2023 | | N | Details |
| Numerator | | | | | | | 52 | 11/07/2024 | | N | Details |
| Numerator | | | | | | | 62 | 08/19/2024 | | N | Details |

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QIP Member Report

QIP - eReports

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Code Level QIP Member Reports

Number of members displayed: **8440**

New Features!

| QIP Result | Measure Name | CIN | Member First Name | Member Last Name | Member Phone | Gender | DOB | Race/Ethnicity | Language | Age | PCP | NewMember |
|-------------|--------------------------|-----|-------------------|------------------|--------------|--------|-----|--|----------|-----|-----|-----------|
| Denominator | Chlamydia Screening 2026 | | | | | F | | WHITE | EN | 18 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | HISPANIC | EN | 17 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | HISPANIC | EN | 17 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | HISPANIC | SP | 17 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | WHITE | EN | 18 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | HISPANIC | SP | 16 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | HISPANIC | EN | 16 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | HISPANIC | SP | 17 | | N |
| Denominator | Chlamydia Screening 2026 | | | | | F | | ASIAN/PACIFIC ISLANDER | EN | 18 | | Y |
| Denominator | Chlamydia Screening 2026 | | | | | F | | NO VALID DATA REPORTED(MEDS GENERATED) | EN | 16 | | N |



Member Search

QIP - eReports

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QIP Member Search

| | |
|----------------|---|
| Member CIN: | <input type="text" value="Enter CIN"/> |
| Member SSN: | <input type="text" value="Enter SSN"/> |
| First Name: | <input type="text" value="Enter First Name"/> |
| Last Name: | <input type="text" value="Enter Last Name"/> |
| Date of Birth: | <input type="text"/> |

[Search Member](#) [Clear](#)

- Search Criteria:**
1. CIN (e.g 12345678A9)
 2. SSN (e.g. 9999999999)
 3. Last Name and First Name
 4. Last Name and Date of Birth (e.g DOB 01/01/2017)

Search Results

| Member CIN | Member First Name | Member Last Name | Member DOB | Member SSN | Gender | PCP | Details |
|---------------------------------------|-------------------|------------------|------------|------------|--------|-----|---------|
| Search for Members... | | | | | | | |



Upload QIP Data

QIP - eReports

QIP Site: [dropdown]

Home

My QIP Scores

QIP Measure Report

QIP Member Report

Member Search

Upload QIP Data

Weekly Count Report


My eAdmins

eAdmin

Upload QIP Data

Select a measure: Child and Adolescent Well Care 2026

Selected File: 2026 Child and Adolescent Well Care Visit Template.xlsx

[View data with no errors](#) [View data with errors](#)  [Upload data with no errors](#) [Cancel Upload](#)

Showing total 3 records.

| CIN | DOS | Error |
|-----|------------|---|
| | 01/05/2026 | |
| | 12/20/2025 | |
| | 02/20/2026 | The date value for DOS cannot be later than today's date. |

*Diabetes - *Diabetes - HbA1c Good Control, Well Child visit - First 15 months of Life, Well-Child visit - First 15-30 months of Life and Controlling High Blood Pressure - Templates will release October 1 of the measurement year. Upload data will be accepted between October 1 through the end of the measurement year grace period.
*Child and Adolescent Well Care, Breast Cancer Screening, Chlamydia Screening and Kidney Health Evaluation in Patients with Diabetes - Templates will release on the first day of the measurement year grace period. Upload data will be accepted from the first day of the measurement year grace period through the end of the measurement year grace period.
The measurement year grace period will end at 5 p.m. on the last business day of January following the close of the current measurement year.



2026 eReports Upload Schedule

CLINICAL MEASUREMENT SET:

| | | |
|--|-----------------------------|-----------------------------|
| Cervical Cancer Screening Childhood Immunization Status - Combo 10 Comprehensive Diabetes Care - Retinal Eye Exams Colorectal Cancer Screening Lead Screening in Children Immunizations for Adolescents - Combination 2 | MAR 02, 2026 - JAN 29, 2027 | |
| Comprehensive Diabetes Care - HbA1c Control (A1c) Controlling High Blood Pressure Well-Child Visits in the First 15 Months of Life Well-Child Visits in the First 15-30 Months of Life | | OCT 01, 2026 - JAN 29, 2027 |
| Breast Cancer Screening Child and Adolescent Well Care Visits Chlamydia Screening Kidney Health Evaluation in Patients with Diabetes NEW | | JAN 11, 2027 - JAN 29, 2027 |

Note: No uploads will be accepted for Topical Fluoride in Children

Weekly Count Report

QIP - eReports

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Diagnosis Crosswalk

QIP Specification Manual

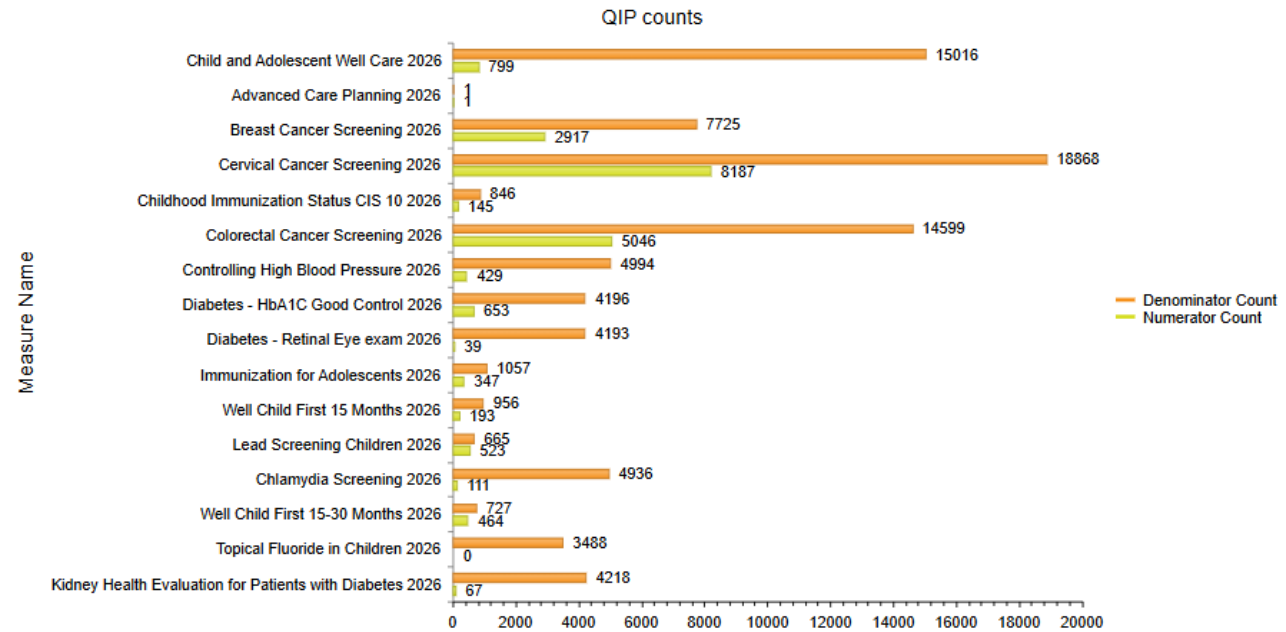
Templates

Partnership Quality Dashboard

Preventive Care Reports

Weekly Count Report

Note: Data Uploaded Only Applies To QIP Clinical Measures



My eAdmin

QIP – eReports

My eAdmins

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YOUR EADMIN DETAILS:

YOUR EADMIN DETAILS:

YOUR EADMIN DETAILS:

YOUR EADMIN DETAILS:

YOUR EADMIN DETAILS:


YOUR EADMIN DETAILS:



eAdmin

QIP - eReports

Log Out

 eAdmin

Name: [REDACTED]


Email: [REDACTED]

Username: qipintuser1

Group Name: [REDACTED]

Providers:

| Practice Type | Providers |
|-------------------|------------|
| INTERNAL MEDICINE | [REDACTED] |
| FAMILY | [REDACTED] |
| FAMILY | [REDACTED] |
| FAMILY | [REDACTED] |
| FAMILY | [REDACTED] |
| FAMILY | [REDACTED] |
| FAMILY | [REDACTED] |
| INTERNAL MEDICINE | [REDACTED] |

+ Add New User  Refresh

| Username | First Name | Last Name | User Email | Is Active | Is Locked | | |
|------------|------------|------------|------------|-----------|-----------|--------|--------------------------------|
| [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | False | False | Enable | Edit |
| [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | False | False | Enable | ReSend Email Verification Edit |
| [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | False | False | Enable | ReSend Email Verification Edit |

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Diagnosis Crosswalk

QIP - eReports

Diagnosis Code xWalk Report

[Back to report main page](#)

Select a Measure: **Child and Adolescent Well Care 2026**

Select a Code Type: **Well-Care**

[Display](#) [Clear](#)

| Code Type | Code System | Code | Route | Version Date |
|-----------|-------------|-------|-------|--------------|
| Well-Care | CPT | 99381 | | 12/05/2024 |
| Well-Care | CPT | 99382 | | 12/05/2024 |
| Well-Care | CPT | 99383 | | 12/05/2024 |
| Well-Care | CPT | 99384 | | 12/05/2024 |
| Well-Care | CPT | 99385 | | 12/05/2024 |
| Well-Care | CPT | 99391 | | 12/05/2024 |
| Well-Care | CPT | 99392 | | 12/05/2024 |
| Well-Care | CPT | 99393 | | 12/05/2024 |
| Well-Care | CPT | 99394 | | 12/05/2024 |
| Well-Care | CPT | 99395 | | 12/05/2024 |
| Well-Care | CPT | 99461 | | 12/05/2024 |
| Well-Care | HCPCS | G0438 | | 12/05/2024 |
| Well-Care | HCPCS | G0439 | | 12/05/2024 |

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- Diagnosis Crosswalk**
- QIP Specification Manual
- Templates
- Partnership Quality DashBoard



Comprehensive Specifications Manual

The image shows a PDF viewer interface. On the left is a dark sidebar menu with the following items: Home, My QIP Scores, QIP Measure Report, QIP Member Report, Member Search, Upload QIP Data, Weekly Count Report, My eAdmins, eAdmin, Diagnosis Crosswalk, **QIP Specification Manual** (highlighted with a yellow box), Templates, and PHC Internal User Menu. The main content area displays a table of contents with five items, each with a thumbnail and a page number:

| Thumbnail | Page Number |
|-----------|-------------|
| | 1 |
| | 2 |
| | 3 |
| | 4 |
| | 5 |

On the right, a preview of the manual's cover is shown. The cover features a photograph of a doctor in a white coat talking to a patient. The text on the cover includes:

- Top right: All Practice Types
- Logo: PARTNERSHIP HEALTHPLAN of CALIFORNIA A Public Agency
- Title: **Primary Care Provider Quality Incentive Program Specifications**
- Published: December 31, 2025
- Measurement Year: **2026**
- Bottom: MEASUREMENT YEAR



Upload Templates

QIP - eReports

Log Out

Home

My QIP Scores

QIP Measure Report

QIP Member Report

Member Search

Upload QIP Data

Weekly Count Report

My eAdmins

eAdmin

Diagnosis Crosswalk

QIP Specification Manual

Templates

Templates

Select a Measure:

Select a Measure...

Display



Download this template to upload data for the selected measure:

Data upload file format definitions for the selected measure:

The screenshot shows a spreadsheet with columns for Member CIN, PAP Smear Collection Date, High Risk HPV/HPV Collection Date, and Date of "Total", "Complete", or "Partial" hysterectomy. A pop-up window titled "Updated Instructions for Numerator Compliance" is overlaid on the spreadsheet, providing detailed instructions for data entry, including requirements for member age, measurement period, and data source.

Select a Measure...

Child and Adolescent Well Care 2026

Advanced Care Planning 2026

Breast Cancer Screening 2026

Cervical Cancer Screening 2026

Childhood Immunization Status CIS 10 2026

Colorectal Cancer Screening 2026

Controlling High Blood Pressure 2026

Diabetes - HbA1C Good Control 2026

Diabetes - Retinal Eye exam 2026

Immunization for Adolescents 2026

Well Child First 15 Months 2026

Lead Screening Children 2026

Chlamydia Screening 2026

Well Child First 15-30 Months 2026

Topical Fluoride in Children 2026

Kidney Health Evaluation for Patients with Diabetes 2026



Partnership Quality Dashboard (PQD)

- Home
- My QIP Scores
- QIP Measure Report
- QIP Member Report
- Member Search
- Upload QIP Data
- Weekly Count Report
- My eAdmins
- eAdmin
- Diagnosis Crosswalk
- QIP Specification Manual
- Templates
- Partnership Quality Dashboard**
- Preventive Care Report
- Disparity Analysis Dashboard
- FAQ
- Help



Partnership Quality Dashboard

Home
QIP Stoplight
Provider
MeasurePerformance
Scorecard
DrillDown_Clinical
Drilldown_NonClinical
FS1
FS2
FS3

Partnership Health Plan of California
Quality Dashboard
Home

- PQD is an online platform that integrates many sources of quality performance data to enable PCPs and PHC staff to prioritize, inform and evaluate quality improvement efforts.
- QIP data is updated monthly on the 10th in PQD.
- Please reach out to QIP team (QIP@partnershiphp.org) for any questions.

Status
ESTIMATED

Refresh Date
Dec-25

Members
63,087

Claims Timeliness
98.77% (Excellent)
(279,177/282,667)

Parent Organization (PO) Executive QIP Measure Summary

| Measure | PO Score | 50th Target | 75th Target | 90th Target | PO QIP \$ Earned | PO Remaining QIP \$ | Progress Bar | |
|---------------------------------------|----------|-------------|-------------|-------------|------------------|---------------------|--------------|-----|
| 7 Days Follow-Up | 34.28 | N/A | N/A | N/A | \$392,804 | \$82,646 | 64 | 109 |
| ACS_ADMISSION | 11.06 | N/A | N/A | N/A | \$298,795 | \$176,655 | 85 | 115 |
| Avoidable ED/1000 | 9.01 | N/A | N/A | N/A | \$472,045 | \$100,716 | 76 | 125 |
| Breast Cancer Screening | 52.67 | 52.68 | 59.51 | 63.48 | \$62,727 | \$563,754 | 60 | 112 |
| Cervical Cancer Screening | 48.04 | 57.18 | 61.56 | 67.46 | \$27,101 | \$599,380 | 64 | 113 |
| Child and Adolescent Well Care Visits | 54.32 | 51.81 | 58.07 | 64.74 | \$265,789 | \$660,800 | 70 | 103 |
| Childhood Immunization Status CIS 10 | 24.97 | 27.49 | 34.79 | 42.34 | \$105,421 | \$500,922 | 39 | 97 |
| Chlamydia Screening | 22.83 | 55.95 | 64.37 | 69.07 | \$0 | \$445 | 65 | 117 |
| Colorectal Cancer Screening | 41.53 | 38.07 | 43.71 | 49.35 | \$383,307 | \$136,677 | 38 | 113 |
| Controlling High Blood Pressure | 64.94 | 64.48 | 69.37 | 72.75 | \$63,189 | \$542,459 | 53 | 110 |
| Diabetes - HbA1C Good Control | 76.82 | 66.67 | 70.07 | 72.99 | \$613,578 | \$403 | 29 | 111 |
| Diabetes - Retinal Eye exam | 53.38 | 53.53 | 59.41 | 64.06 | \$61,929 | \$433,055 | 44 | 111 |
| Immunization for Adolescents IMA 2 | 34.96 | 34.31 | 40.88 | 48.80 | \$188,629 | \$441,513 | 37 | 100 |
| Lead Screening in Children | 86.29 | 63.84 | 71.11 | 79.51 | \$324,334 | \$267,110 | 39 | 94 |
| PCP Office Visits | 2.31 | N/A | N/A | N/A | \$420,883 | \$151,878 | 68 | 125 |
| Well Child 15-30 Months | 78.23 | 69.43 | 73.09 | 79.94 | \$0 | \$445 | 49 | 96 |
| Well Child First 15 Months | 53.28 | 60.38 | 64.99 | 69.67 | \$158,132 | \$746,109 | 52 | 97 |

Payout Status
Your organization has earned 41.53% of your Total Possible QIP \$.

Total QIP \$ Earned: \$3,838,663
Total Remaining QIP \$: \$5,404,967

You have earned 41.44% of your possible points. The Planwide Average to date is 49.29% giving you an Overall Rank of 54 out of 125 parent organizations. Click "Top 20" or "Bottom 20" to view unblinded PO performance.

Top 20

54

125

Bottom 20

Provider Score

Preventive Care Reports

QIP - eReports

Preventive Care Reports

Summary Information | CIS_0-2 Yrs | IMA_9-13 Yrs | 6+Visits by 15Months | 2+Visits by 30Months | Annual Well Care Visits

Preventive Care Reports

These reports are supplemental to eReports and do not indicate measure compliance. The source of data is PHC's administrative data only. **Dates of service that have been uploaded into eReports are not visible in these reports.**

Immunization Dose Reports
The intent of the immunization dose reports is to enhance visibility of immunizations given, including for members not yet in the annual denominators for the Child Immunization Status and Immunizations for Adolescents measures. Data sources for this report include California Immunization Registry (CAIR) data, PHC's claims and encounter data, and immunization data received through PHC's Clinical Data Repository.

Well Care Reports
Like the Immunization reports, Well Care reports promote visibility of well visits completed for members who are not yet in the denominator for the Well Child Visits in the First 15 Months and the Child and Adolescent Well Care measures. The data source for these reports is PHC's claims and encounter data. Note that dates of service must be a minimum of 14 days apart to count towards numerator compliance.

Recommended Use

- Use reports to engage with members sooner, to help keep members on track with recommended immunization schedules and well care visits.
- Review service dates against measure requirements, to determine if members still require additional dates of service before aging out of the measure.
- If immunization dates of service are not captured on this report, please report them in CAIR. This will help to ensure data is captured administratively in eReports.

Important Notes

- Reports may not include recent dates of service due to claims lag (up to 3 months) and the timeframe by which PHC integrates CAIR data (typically a 4-6 week lag).
- Duplicate immunization dates, or dates of service close in time may be represented as separate immunizations on the report, depending on how records were entered in CAIR or services were billed. Confirm all service dates in eReports and against measure specification to ensure compliance.
- **No upload data from eReports is captured in this dashboard**

Frequently Asked Questions

Q. Members with letter "E" in their Client ID Number (CIN) show up with scientific notation formatting when I download the report.
A. This is due to Excel's auto-formatting. To fix this, open a new workbook and import the downloaded immunization report as a text file.

- Select the Data tab from the ribbon
- Select 'From Text' under Get External Data menu
- Locate your report from the folder it was downloaded to. Click Import.
- Use the Import Wizard to import the file
 - Step 1. Delimited data type (Next)
 - Step 2. Tab delimited check (Next)
 - Step 3. Highlight the column for CIN and change the column data format to Text (Finish, OK)

Q. Why are there more or less columns in the report for each vaccine-type than number of doses required for the series?
A. The number of immunization columns reflects the maximum number of dates of service for any given member in the report. If none of the members had any doses under a vaccine-type, there will be no placeholder columns for that vaccine. If a single member had many different dose dates under a series, that number of columns will display under the series. To confirm the number of required doses in a series refer to the QIP measure specifications document for Childhood Immunization Status and Immunizations for Adolescents measures.

Q. The columns showing dates of service are not in a standard date format when I export the dose report.
A. To fix this, highlight all columns in the exported report that should show dates of service. On the Excel ribbon, change the format from General to Short Date.

Q. What does "NULL" mean in the report(s)?
A. NULL means there is no data available to report for that metric.



Childhood Immunization Status (CIS 10)

Summary Information **CIS_0-2 Yrs** IMA_9-13 Yrs 6+Visits by 15Months 2+Visits by 30Months Annual Well Care Visits

Vaccine Dose Report

Childhood Immunization Status - Combo 10 (CIS-10)
Immunization Dates of Service

Export Instructions:
 -Select PCP(s) and apply age filter if preferred.
 -Click anywhere in the gray space below the "Updated" date to actively select the data.
 -Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

Urgency Flag:
 - Very Urgent: Members turning 2 in the upcoming 4 months
 - Urgent: Members turning 2 in 5 -7 months
 - To be Evaluated: Members turning 2 in 8 – 21 months
 - Newborn – To be Evaluated: Members born in the past 3 months

Year of Age 2: (All) PCP Name - ID#: (All)

Parent Organization: [REDACTED]
 Updated: 2/9/2024 7:57:57 PM

| PCP Name - ID# | Mbr CIN | Mbr DOB | Mbr Ethnicity CodeDesc | Current Age (Months) | Month of Age 2 | Urgency | Phone | Mbr Full Name First | Address | Hep A Illness | Hep B Illness | Measles Illness | Mumps Illness | Rubella Illness | VZV Illness | Null | DTaP1 | DTaP2 |
|----------------|------------|------------|------------------------|----------------------|----------------|--------------|----------|---------------------|------------|---------------|---------------|-----------------|---------------|-----------------|-------------|------|------------|------------|
| | [REDACTED] | 5/6/2022 | WHITE | 21 | May 2024 | Very Urgent | | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 6/30/2022 | 9/7/2022 |
| | [REDACTED] | 12/13/2019 | UNKNOWN | 50 | December 20.. | Over 2 Years | (510) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 2/27/2020 | 5/14/2020 |
| | [REDACTED] | 7/6/2020 | UNKNOWN | 43 | July 2022 | Over 2 Years | (530) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 11/11/2020 | 1/11/2021 |
| | [REDACTED] | 7/24/2020 | HISPANIC | 43 | July 2022 | Over 2 Years | (530) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 9/24/2020 | 11/30/2020 |
| | [REDACTED] | 3/11/2021 | WHITE | 35 | March 2023 | Over 2 Years | (916) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 5/17/2021 | 7/13/2021 |
| | [REDACTED] | 9/16/2021 | HISPANIC | 29 | September .. | Over 2 Years | | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 2/9/2022 | 5/16/2022 |
| | [REDACTED] | 1/26/2022 | UNKNOWN | 25 | January 20.. | Over 2 Years | | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 3/31/2022 | 5/18/2022 |
| | [REDACTED] | 5/8/2022 | WHITE | 21 | May 2024 | Very Urgent | | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 8/17/2022 | 10/19/2022 |
| | [REDACTED] | 9/12/2020 | UNKNOWN | 41 | September .. | Over 2 Years | (530) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 10/11/2022 | 11/15/2022 |
| | [REDACTED] | 3/19/2019 | UNKNOWN | 59 | March 2021 | Over 2 Years | (530) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 6/10/2019 | 9/9/2019 |
| | [REDACTED] | 8/15/2019 | UNKNOWN | 54 | August 2021 | Over 2 Years | (530) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 10/16/2019 | 5/7/2020 |
| | [REDACTED] | 3/22/2022 | WHITE | 23 | March 2024 | Very Urgent | | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | | |
| | [REDACTED] | 1/22/2020 | WHITE | 49 | January 20.. | Over 2 Years | (530) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | | |
| | [REDACTED] | 4/25/2019 | WHITE | 58 | April 2021 | Over 2 Years | (408) .. | [REDACTED] | [REDACTED] | Null | Null | Null | Null | Null | Null | | 6/21/2019 | 8/30/2019 |



Immunizations for Adolescents (IMA)

View: Original

Summary Information **CIS_0-2 Yrs** IMA_9-13 Yrs 6+Visits by 15Months 2+Visits by 30Months Annual Well Care Visits

PARTNERSHIP HEALTHPLAN of CALIFORNIA
Vaccine Dose Report
Immunizations For Adolescents - Combination 2 (IMA-2)
Immunization Dates of Service

Export Instructions:
 -Select PCP(s) and apply age filter if preferred.
 -Click anywhere in the gray space below the "Updated" date to actively select the data.
 -Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

Urgency Flag:
 - Members currently 13 years or older: "13+"
 - Members age 12: "Very Urgent"
 - Members age 11: "Urgent"
 - Members age 10: "Priority"
 - Members age 9: "Time Permitting"

Year Age 13
 (All)
 (All)
 2023
 2024
 2025
 2026
 2027
 2028

PCP Name - ID#
 (All)

| Month of 13 | Urgency | Year Age 13 | Null | HPV/1 | HPV/2 | HPV/3 | IZ/Rank | MCV/1 | MCV/2 |
|----------------|-------------|-------------|------|------------|-----------|-------|---------|-----------|-------|
| September .. | Age 13+ | 2024 | | | | | | | |
| September 2023 | Age 13+ | 2023 | | 11/9/2022 | 8/11/2023 | | | | |
| October 20.. | Age 13+ | 2024 | | 6/9/2023 | | | | 6/9/2023 | |
| July 2026 | Urgent | 2026 | | | | | | | |
| November .. | Age 13+ | 2023 | | | | | | | |
| May 2025 | Very Urgent | 2025 | | | | | | | |
| July 2026 | Urgent | 2026 | | | | | | | |
| October 20.. | Very Urgent | 2025 | | | | | | | |
| August 2023 | Age 13+ | 2023 | | | | | | | |
| June 2024 | Age 13+ | 2024 | | 8/18/2023 | | | | | |
| June 2024 | Age 13+ | 2024 | | | | | | | |
| January 20.. | Age 13+ | 2024 | | 8/17/2023 | | | | 8/17/2023 | |
| October 20.. | Very Urgent | 2025 | | | | | | | |
| July 2024 | Age 13+ | 2024 | | 11/15/2021 | 3/20/2023 | | | 8/18/2023 | |



Well-Child Visits in the First 15 Months (W15)

View: Original Share

Summary Information | CIS_0-2 Yrs | IMA_9-13 Yrs | **6+Visits by 15Months** | 2+Visits by 30Months | Annual Well Care Visits

Well Care Reports

Well-Child Visits in the First 15 Months

Export Instructions:

- Select PCP(s) and apply age filter if preferred.
- Click anywhere in the gray space below the "Updated" date to actively select the data.
- Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

Year Date 15 Months: (All) | PCP Name - ID#: (All)

Parent Organization: [REDACTED]
 6+Visits by 15 Months
 Updated: 2/9/2024 7:01:59 PM


| Parent Organization | PCP Name - ID# | CIN | DOB | Mbr Ethnicity C.. | Mbr Language | Mbr Full Name First | Mbr Address 1 | Mbr Address 2 | Mbr Address 3 | Mbr Address 4 | Mbr Address 5 | Current Age (Yrs) | Current Age (Months) | #DOS < 15 Mos | Date 15 Months |
|---------------------|----------------|------------|------------|-------------------|--------------|---------------------|---------------|---------------|---------------|---------------|---------------|-------------------|----------------------|---------------|----------------|
| [REDACTED] | [REDACTED] | [REDACTED] | 1/9/2021 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-2661 | 3 | 37 | 0 | 4/9/2022 |
| [REDACTED] | [REDACTED] | [REDACTED] | 9/18/2022 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-3506 | 1 | 16 | 0 | 12/17/2023 |
| [REDACTED] | [REDACTED] | [REDACTED] | 12/27/2021 | HISPANIC | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-2082 | 2 | 25 | 0 | 3/27/2023 |
| [REDACTED] | [REDACTED] | [REDACTED] | 1/20/2021 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-3936 | 3 | 37 | 0 | 4/20/2022 |
| [REDACTED] | [REDACTED] | [REDACTED] | 12/24/2022 | HISPANIC | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-4141 | 1 | 13 | 1 | 3/23/2024 |
| [REDACTED] | [REDACTED] | [REDACTED] | 1/4/2023 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-4717 | 1 | 13 | 1 | 4/3/2024 |
| [REDACTED] | [REDACTED] | [REDACTED] | 1/17/2022 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | REDDING | CA | 96003 | 2 | 25 | 7 | 4/17/2023 |
| [REDACTED] | [REDACTED] | [REDACTED] | 1/3/2023 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-9009 | 1 | 13 | 1 | 4/2/2024 |
| [REDACTED] | [REDACTED] | [REDACTED] | 9/30/2022 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-3720 | 1 | 16 | 0 | 12/29/2023 |
| [REDACTED] | [REDACTED] | [REDACTED] | 9/5/2023 | HISPANIC | SPANISH | [REDACTED] | [REDACTED] | [REDACTED] | REDDING | CA | 96049 | 0 | 4 | 1 | 12/4/2024 |
| [REDACTED] | [REDACTED] | [REDACTED] | 12/23/2022 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-2733 | 1 | 13 | 1 | 3/22/2024 |
| [REDACTED] | [REDACTED] | [REDACTED] | 10/21/2020 | UNKNOWN | SPANISH | [REDACTED] | [REDACTED] | [REDACTED] | CORNING | CA | 96021-2075 | 3 | 39 | 0 | 1/19/2022 |
| [REDACTED] | [REDACTED] | [REDACTED] | 7/21/2022 | HISPANIC | SPANISH | [REDACTED] | [REDACTED] | [REDACTED] | RED BLUFF | CA | 96080-3511 | 1 | 18 | 0 | 10/19/2023 |
| [REDACTED] | [REDACTED] | [REDACTED] | 7/11/2023 | UNKNOWN | ENGLISH | [REDACTED] | [REDACTED] | [REDACTED] | CORNING | CA | 96021-2071 | 0 | 6 | 1 | 10/9/2024 |



Well-Child Visits in the First 15-30 Months (W30)

View: Original Share

Summary Information | CIS_0-2 Yrs | IMA_9-13 Yrs | 6+Visits by 15Months | **2+Visits by 30Months** | Annual Well Care Visits



Well Care Reports

Well-Child Visits in the First 15 - 30 Months

Export Instructions:

- Select PCP(s) and apply age filter if preferred.
- Click anywhere in the gray space below the "Updated" date to actively select the data.
- Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

Year of Date 30 Months: PCP Name - ID#: CIN:

Parent Organization: [REDACTED]
 2+Visits by 30 Months
 Updated: 2/10/2026 7:22:40 AM

| Parent Organization | PCP Name - ID# | CIN | DOB | Mbr Ethnicity C.. | Mbr Language | Mbr Full Name First | Mbr Address 1 | Mbr Address 2 | Mbr Address 3 | Mbr Address 4 | Mbr Address 5 | Current Age (Yrs) | Current Age (Months) | Year of Date 30 Months | #DOS 15-30 Mos | Date 15 Months | Date 30 Months |
|---------------------|----------------|-----|------------|-------------------|--------------|---------------------|---------------|---------------|---------------|---------------|---------------|-------------------|----------------------|------------------------|----------------|----------------|----------------|
| | | | 1/9/2021 | UNKNOWN | ENGLISH | | | | RED BLUFF | CA | 96080-2661 | 1 | 13 | 2027 | 0 | 04/01/2026 | 06/30/2027 |
| | | | 9/18/2022 | UNKNOWN | ENGLISH | | | | RED BLUFF | CA | 96080-3506 | | | | | | |
| | | | 12/27/2021 | HISPANIC | ENGLISH | | | | RED BLUFF | CA | 96080-2082 | 1 | 21 | 2026 | 3 | 07/11/2025 | 10/09/2026 |
| | | | 1/20/2021 | UNKNOWN | ENGLISH | | | | RED BLUFF | CA | 96080-3936 | | | | | | |
| | | | 12/24/2022 | HISPANIC | ENGLISH | | | | RED BLUFF | CA | 96080-4141 | 0 | 7 | 2027 | 0 | 09/12/2026 | 12/11/2027 |
| | | | 1/4/2023 | UNKNOWN | ENGLISH | | | | RED BLUFF | CA | 96080-4717 | | | | | | |
| | | | 1/17/2022 | UNKNOWN | ENGLISH | | | | REDDING | CA | 96003 | 1 | 13 | 2027 | 0 | 03/19/2026 | 06/17/2027 |
| | | | 1/3/2023 | UNKNOWN | ENGLISH | | | | RED BLUFF | CA | 96080-9009 | 3 | 36 | 2025 | 3 | 05/02/2024 | 08/01/2025 |
| | | | 9/30/2022 | UNKNOWN | ENGLISH | | | | RED BLUFF | CA | 96080-3720 | | | | | | |
| | | | 9/5/2023 | HISPANIC | SPANISH | | | | REDDING | CA | 96049 | 0 | 5 | 2028 | 0 | 10/30/2026 | 01/28/2028 |
| | | | 12/23/2022 | UNKNOWN | ENGLISH | | | | RED BLUFF | CA | 96080-2733 | 1 | 13 | 2027 | 0 | 03/04/2026 | 06/02/2027 |
| | | | 10/21/2020 | UNKNOWN | SPANISH | | | | CORNING | CA | 96021-2075 | | | | | | |
| | | | 7/21/2022 | HISPANIC | SPANISH | | | | RED BLUFF | CA | 96080-3511 | 2 | 26 | 2026 | 1 | 02/24/2025 | 05/25/2026 |
| | | | 7/11/2023 | UNKNOWN | ENGLISH | | | | CORNING | CA | 96021-2071 | 3 | 37 | 2025 | 3 | 03/19/2024 | 06/18/2025 |



Child & Adolescent Well Care Visits

View: Original Share

Summary Information | CIS_0-2 Yrs | IMA_9-13 Yrs | 6+Visits by 15Months | 2+Visits by 30Months | **Annual Well Care Visits**

Well Care Reports

Child and Adolescent Well Care Visits

Export Instructions:
 -Select PCP(s) and apply age filter if preferred.
 -Click anywhere in the gray space below the "Updated" date to actively select the data.
 -Click the download button from the menu bar above and export the report as a crosstab to view the report in Excel.

Ages 3 - 17 in 2025: DOB 1/1/2008 - 12/31/2022

Year of DOB: (Multiple values) | PCP Name - ID#: (All)

Parent Organization: [REDACTED]
 Annual WellCare Visit
 Updated: 2/9/2024 7:01:59 PM

| PCP Name - ID# | CIN | Mbr ID | DOB | Mbr Ethnicity C.. | Mbr Language | Current Age (Yrs) | Mbr Phone | Mbr Full Name First | Mbr Address 1 | Mbr Address 2 | Mbr Address 3 | Mbr Address 4 | Mbr Address 5 | Compliance Flag (WCV) | Most Recent Well Visit |
|----------------|------------|------------|------------|-------------------|--------------|-------------------|------------|---------------------|---------------|---------------|---------------|---------------|---------------|-----------------------|-------------------------|
| [REDACTED] | [REDACTED] | [REDACTED] | 6/10/2017 | WHITE | ENGLISH | 6 | | [REDACTED] | [REDACTED] | [REDACTED] | MOUNT S.. | CA | 96067 | N | Null |
| [REDACTED] | [REDACTED] | [REDACTED] | 5/17/2010 | WHITE | ENGLISH | 13 | (916) 61.. | [REDACTED] | [REDACTED] | [REDACTED] | WEED | CA | 96094 | N | 2022-09-14.. 1/20/2021 |
| [REDACTED] | [REDACTED] | [REDACTED] | 8/27/2006 | WHITE | ENGLISH | 17 | (530) 27.. | [REDACTED] | [REDACTED] | [REDACTED] | WEED | CA | 96094 | N | 2023-09-06.. 2/22/2023 |
| [REDACTED] | [REDACTED] | [REDACTED] | 1/14/2014 | WHITE | ENGLISH | 10 | | [REDACTED] | [REDACTED] | [REDACTED] | MOUNT S.. | CA | 96067 | Y | 2024-01-31.. 1/31/2024 |
| [REDACTED] | [REDACTED] | [REDACTED] | 6/13/2017 | UNKNOWN | ENGLISH | 6 | | [REDACTED] | [REDACTED] | [REDACTED] | WEED | CA | 96094 | N | 2023-10-11.. 7/5/2017 |
| [REDACTED] | [REDACTED] | [REDACTED] | 1/28/2007 | WHITE | ENGLISH | 17 | | [REDACTED] | [REDACTED] | [REDACTED] | DUNSMUIR | CA | 96025 | N | 2023-11-01.. 11/2/2020 |
| [REDACTED] | [REDACTED] | [REDACTED] | 12/20/2007 | WHITE | ENGLISH | 16 | (530) 96.. | [REDACTED] | [REDACTED] | [REDACTED] | MCCLOUD | CA | 96057 | N | 2021-05-07.. 6/26/2019 |
| [REDACTED] | [REDACTED] | [REDACTED] | 6/9/2007 | BLACK | ENGLISH | 16 | (760) 84.. | [REDACTED] | [REDACTED] | [REDACTED] | MOUNT S.. | CA | 96067 | N | 2022-12-09.. 12/9/2022 |
| [REDACTED] | [REDACTED] | [REDACTED] | 2/15/2015 | WHITE | ENGLISH | 8 | (530) 34.. | [REDACTED] | [REDACTED] | [REDACTED] | MOUNT S.. | CA | 96067 | N | 2023-04-14.. 3/5/2020 |
| [REDACTED] | [REDACTED] | [REDACTED] | 12/30/2010 | WHITE | ENGLISH | 13 | (707) 70.. | [REDACTED] | [REDACTED] | [REDACTED] | WEED | CA | 96094 | N | 2023-12-08.. 9/28/2016 |
| [REDACTED] | [REDACTED] | [REDACTED] | 6/19/2012 | WHITE | ENGLISH | 11 | (530) 55.. | [REDACTED] | [REDACTED] | [REDACTED] | MOUNT S.. | CA | 96067 | N | 2023-12-13.. 7/6/2017 |
| [REDACTED] | [REDACTED] | [REDACTED] | 7/4/2016 | UNKNOWN | ENGLISH | 7 | (530) 60.. | [REDACTED] | [REDACTED] | [REDACTED] | REDDING | CA | 96001 | N | 2021-06-03.. 11/21/2016 |
| [REDACTED] | [REDACTED] | [REDACTED] | 4/3/2016 | WHITE | ENGLISH | 7 | | [REDACTED] | [REDACTED] | [REDACTED] | MOUNT S.. | CA | 96067 | N | 2023-11-08.. 7/27/2021 |



How to Download Reports

The screenshot shows an Excel spreadsheet with a data table. The table has columns for CIN, DOB, Mbr Phone, Mbr Lang, Mbr Full Name First, Mbr Address 1, Address 3, Mbr Address 4, Mbr Address 5, Mbr County, Current Ag, Current Ag, Year of Dat, Date 15 Mo, Most Rece, Last DOS, #DOS < 1, and Visit Rank. The 'Visit Rank' column is highlighted in green. A dropdown menu for the 'Number' format is open, showing options like General, Number, Currency, Accounting, Short Date, Long Date, Time, Percentage, Fraction, Scientific, and Text. A yellow star is placed next to the 'Short Date' option. The 'Visit Rank' column contains values such as 44789, 44897, 44643, 44680, 44740, 448, 44895, 44806, 44869, 44907, 44762, 44782, 44841, 449, 44831, 44889, 44937, 44726, 44790, 44943, 44823, 44916, 44636, 44769, 44832, 449, 44855, 44719, 44802, 448, and 44909.

| CIN | DOB | Mbr Phone | Mbr Lang | Mbr Full Name First | Mbr Address 1 | Address 3 | Mbr Address 4 | Mbr Address 5 | Mbr County | Current Ag | Current Ag | Year of Dat | Date 15 Mo | Most Rece | Last DOS | #DOS < 1 | Visit Rank | | | |
|-----|-----|-----------|----------|---------------------|---------------|-----------|---------------|---------------|------------|------------|------------|-------------|------------|------------|----------|----------|------------|-------|-------|-----|
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 6 | 2023 | 9/6/2023 | 2022-12-06 | 12/2/2022 | 2 | | 44789 | 44897 | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 10 | 2023 | 5/29/2023 | 2022-12-11 | 12/13/2022 | 5 | | 44643 | 44680 | 44740 | 448 |
| | | | ENGLISH | | | CA | 96128 | LASSEN | 0 | 6 | 2023 | 9/27/2023 | 2022-11-30 | 11/30/2022 | 1 | | 44895 | | | |
| | | | ENGLISH | | | CA | 96113 | LASSEN | 0 | 6 | 2023 | 9/24/2023 | 2022-11-04 | 11/4/2022 | 3 | | 44750 | 44806 | 44869 | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 4 | 2023 | 11/16/2023 | 2022-12-12 | 12/12/2022 | 1 | | 44907 | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 1 | 13 | 2023 | 2/23/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96114-8506 | LASSEN | 0 | 9 | 2023 | 6/22/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 3 | 2023 | 12/2/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 6 | 2023 | 9/4/2023 | 2023-01-06 | 1/9/2023 | 4 | | 44762 | 44782 | 44841 | 449 |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 7 | 2023 | 8/8/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 10 | 2023 | 5/28/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 6 | 2023 | 9/28/2023 | 2023-01-11 | 1/11/2023 | 3 | | 44831 | 44889 | 44937 | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 1 | 12 | 2023 | 3/20/2023 | 2023-01-11 | 1/17/2023 | 3 | | 44726 | 44790 | 44943 | |
| | | | ENGLISH | | | CA | 96114-0783 | LASSEN | 0 | 6 | 2023 | 9/6/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 6 | 2023 | 7/14/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 7 | 2023 | 8/14/2023 | 2022-09-16 | 9/19/2022 | 1 | | 44823 | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 6 | 2023 | 9/19/2023 | 2022-12-21 | 12/21/2022 | 1 | | 44916 | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 7 | 2023 | 8/24/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 6 | 2023 | 9/17/2023 | | | | 0 | | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 9 | 2023 | 6/4/2023 | 2022-12-06 | 12/9/2022 | 4 | | 44636 | 44769 | 44832 | 449 |
| | | | ENGLISH | | | CA | 96113 | LASSEN | 0 | 7 | 2023 | 8/4/2023 | 2022-10-21 | 10/21/2022 | 1 | | 44855 | | | |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 10 | 2023 | 5/5/2023 | 2022-11-26 | 11/29/2022 | 4 | | 44655 | 44719 | 44802 | 448 |
| | | | ENGLISH | | | CA | 96130 | LASSEN | 0 | 4 | 2023 | 11/17/2023 | 2022-12-14 | 12/14/2022 | 1 | | 44909 | | | |



eReports Audit



Annual Audit of Uploaded Data

2026 Upload Best Practices

- Administrative data vs. uploads – help me strategize!
- Can I upload too much?
- Was my upload successful?
- When should I reach out for help?



Best Practices to be Successful in PCP QIP

- When populating your upload template(s), please ensure the following:
 - **Verify current denominator list(s) via current measure report.**
 - **Verify each upload template contains a maximum of 100 lines per submission.**
 - **Double check your data entry against your EMR and eReports.**
 - **When uploading DOS for vaccines / well care visits, please ensure the DOS has NOT already been captured via CAIR or claims.** You can use the Preventive Care Dashboard or the eReports member details via the measure report in your verification.
 - Note: There is up to a 14-day lag (most claims are processed within 30 days) with claims and a 4-6 weeks lag with CAIR.
 - Sometimes a typo and a different DOS is submitted with uploads which can violate the 14-day rule and prohibits the member from being able to become a numerator compliant. If this happens, the member will remain in your denominator, and you need to request an EOY manual adjustments. This creates extra work from both yours and QIP team.
 - Uploads are not necessary if numerator claim, lab or CAIR data had already submitted and can be visible in eReports.



Best Practices to be Successful in PCP QIP

- **Upload only once for each DOS.** For example, if you submitted upload and you don't see your data or member's compliance change after two eReports refreshes (**allow at least seven days**), **do not** upload again. Reach out to the QIP inbox for assistance. Do not send PHI via unsecure email.
- **Take a screenshot of successful upload transmission message and save a copy of your upload templates.** Once the upload template is submitted, eReports will provide you a message letting you know that your upload was successfully transmitted. We highly advise users to take a screenshot of this display and saving a copy of your upload template for documentation purposes. This documentation will be helpful if we need to research your uploads or why a member may have not turned numerator compliant.
- **Review numerator criteria prior to uploading.** Uploads should only be submitted to counts numerator compliance. For example, date of service of uploaded blood pressure values should be taken during the current measurement year and diastolic value should be <140 and systolic value should be <90 (DOS: 02/18/2026, BP values: 125/75)



Best Practices to be Successful in PCP QIP

- **Important Reminders for Vaccinations:**

- **Rotavirus vaccines** – Please verify the billed CPT code as there are two different codes based on the series given. Be sure to verify which vaccine series was given, either the two-dose or three-dose vaccine. If a two dose is being given, verify the patient has two DOS submitted or uploaded and the appropriate code was used. The same goes for the three dose.
- **For each subset of vaccinations, there MUST be at least 14 days in between each vaccination.** For example: If the first vaccination was given at 12/1, the next vaccination from any data source (claim or CAIR) to count towards the measure, would have to be given on 12/15 or later. A vaccination with a DOS of 12/14 wouldn't qualify since it violates the 14-day rule and the member would remain in your denominator.
- **Correction:** We strongly encourage providers to **review the American Academy of Pediatrics (AAP) recommended child and adolescent immunization schedule prior to scheduling and administering vaccinations.** Our vaccination measures closely follow these guidelines:

<https://downloads.aap.org/AAP/PDF/AAP-Immunization-Schedule.pdf>



Best Practices to be Successful in PCP QIP

- **If possible, designate one or two people to thoroughly review each non-compliant member's records prior to uploading any data.** Some users from the same organization are uploading duplicate DOS for vaccinations or well care visits or updating the wrong date. It is important for the providers to thoroughly review the member record prior and verify their upload templates prior to uploading any supplemental data via eReports. When these verification steps are missed, it can cause issues with the logic and create additional work towards researching and fixing.
- **Carefully review and follow the upload template instructions.** Ensure the correct formatting is used when inputting data onto the template. For examples: DOS must be formatted as MM/DD/YYYY and A1c values must be formatted as XX.X. If this required formatting is not used, your upload will most likely not be captured. If the template has multiple columns where data can be entered, please verify the placement of the inputted prior to submitting your upload template.
- **If a patient was provided a service prior to becoming a Partnership member or prior to being assigned to a Parent Organization,** the upload option can be utilized to submit any supplemental data that was not or cannot be administratively captured by Partnership. *First, please review the member records in eReports.



Resources

- PCP QIP Webpage:

<https://www.partnershiphp.org/Providers/Quality/Pages/PCPQIPLandingPage.aspx>

User Guides found under
eReports in Help:

 Help

HELP:

Please click [here](#) for the eReports User Manual

Please click [here](#) for the PQD User Manual

PCP QIP Overview



To help orient our providers to the PCP QIP year, we have provided measurement set documents, a code list, and other useful tools and resources.

[Learn More about the 2026 PCP QIP](#)

[Equity Adjustment - PCP QIP Payment Methodology](#)

Webinars



[PCP QIP Webinars](#)

[Upcoming Webinars and Trainings](#)

[On Demand Courses](#)

Newsletters



[2025 Quarter One Newsletter](#)

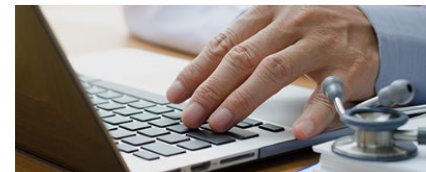
[2025 Quarter Two Newsletter](#)

[2025 Quarter Three Newsletter](#)

[2025 Quarter Four Newsletter](#)

[More Newsletters](#)

Resources



[Program Information](#)

PCP QIP programmatic activities occur regularly throughout a measurement year. This section is a good place to come for program timeline events and other supportive information on available program data tools.

★ Preventive Care Reports
User Guide can be found here

Improvement Academy – Upcoming 2026 Trainings

Improving Measure Outcomes Webinar Series: February – April 2026

- Allows Quality Improvement teams to make knowledge actionable, improving quality service and clinical outcomes around specific measures of care.
- These learning sessions will cover Partnership’s Primary Care Provider Quality Incentive Program measures. Content will focus on direct application on best practices including eliminating health disparities with examples from quality improvement teams who are doing the work.
- **Target Audience:** Clinicians, practice managers, quality improvement teams, and staff who are responsible for participating and leading quality improvement efforts within their organization.
- Planned sessions include: (*Note – February sessions have been completed*)
 - March 11, 2026 – Preventive Cancer Screenings: Improving Outcomes through Early Detection
 - March 25, 2026 – Managing Chronic Disease: Strategies for Blood Pressure and Diabetes Control
 - April 8, 2026 – Sexual and Reproductive Health
 - April 22, 2026 – Improving Perinatal Outcomes

**Sessions begin at noon and are approximately 60 minutes in length. CME/CEs will be offered for live attendance.*



Improvement Academy – Upcoming 2026 Trainings

Vaccine Hesitancy in the Current Climate Webinar

- Designed to equip providers to address vaccine misinformation and navigate recent immunization changes. Learn directly from a panel of pediatric organizations as they share their strategic blueprints for achieving benchmark-setting vaccination rates and overcoming vaccine hesitancy.
- **Target Audience:** Clinicians, practice managers, quality improvement teams, and staff who are responsible for participating and leading quality improvement efforts within their organization.

[REGISTER HERE](#)

Tuesday, March 3, 2026
Noon – 1 p.m.



**Sessions begin at noon and are approximately 60 minutes in length. Continuing education credits available.*



Improvement Academy – Upcoming 2026 Trainings

ABCs of Quality Improvement

- An in-person training designed to teach you the basic principles of quality improvement:
 - Introduction to Quality Improvement and the Model for Improvement
 - Learn how to create an Aim Statement (project goal)
 - Learn how to use data to measure quality and drive improvement
 - Tips for developing change ideas for improvement
 - Testing changes via the Plan-Do-Study-Act cycle
- **Target Audience:** Clinicians, practice managers, quality improvement teams, and staff who are responsible for participating and leading quality improvement efforts within their organization.

Date: Thursday, March 19, 2026

Time: 8:30 a.m. – 4:30 p.m.

Location: The McConnell Foundation
800 Shasta View Drive, Redding, CA 96003

*Registration and light breakfast from 8:30 – 9 a.m.
Lunch will be provided.*

[REGISTER HERE](#)



Date: Thursday, May 14, 2026

Time: 8 a.m. – 4 p.m.

Location: Placer County Health & Human Services
11434 B Avenue, Auburn, CA 95603

*Registration and light breakfast from 8 – 8:30 a.m.
Lunch will be provided.*

[REGISTER HERE](#)



Thank You!

If you have questions or would like a 1:1 overview of eReports, email our QIP Team at:

QIP@partnershiphp.org

To visit learn more about our trainings and events, visit:

http://www.partnershiphp.org/Providers/Quality/Pages/Quality_Events.aspx

For questions about our events, email:

improvementacademy@partnershiphp.org



Q&A

When can I start uploads, and how many times can I upload?

Providers can start uploading for a clinical measure once the measure's upload template has been released. There is no limit on how many times a provider can upload. However, once you have successfully submitted an upload, please do not upload duplicate data (such as the same date of service, which is already reflected in the member details). Please be sure to review the member details for any compliant data prior to uploading.

