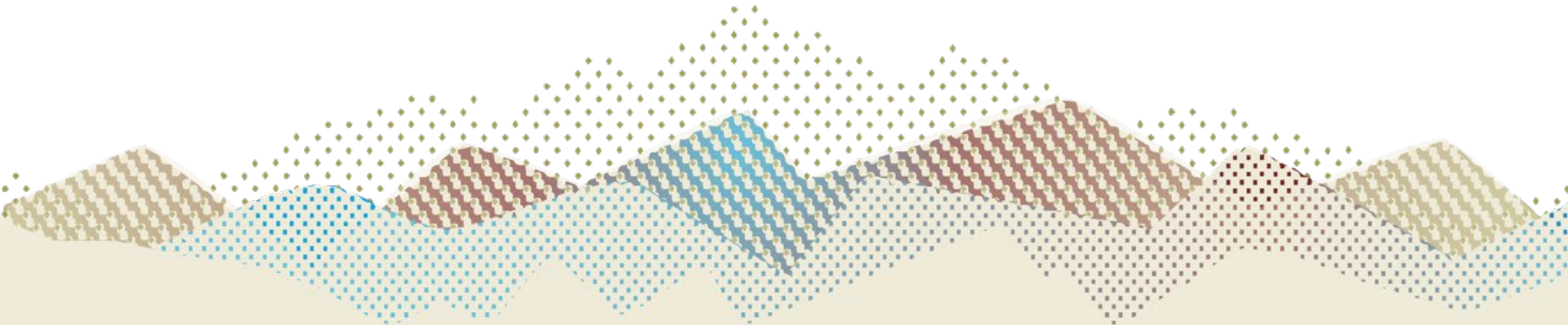




# **Perinatal Quality Incentive Program 2025-2026 Kickoff Webinar**

**Troy Foster, Program Manager II  
Hospital and Perinatal Quality Incentive Programs (QIPs)**



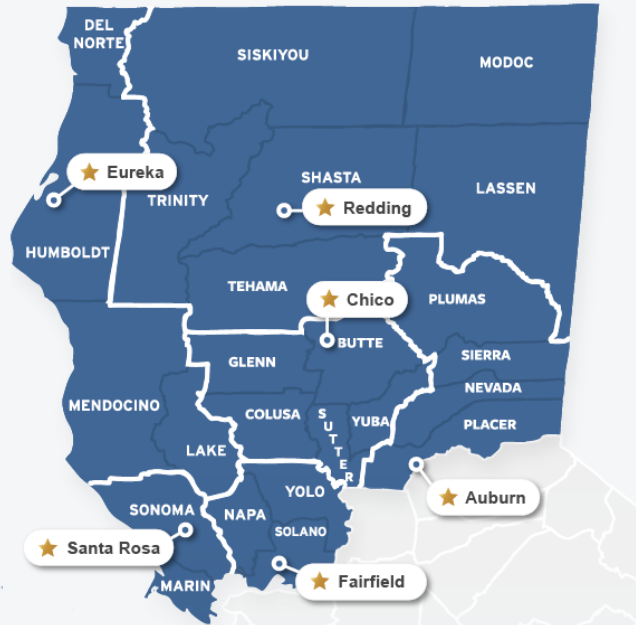
# Webinar Agenda

- 1 Perinatal QIP Background
- 2 2025-2026 Timeline
- 3 2025-2026 Perinatal QIP Measures
- 4 Q&A



# About Us

## Regional Offices



## Mission:

*To help our members, and the communities we serve, be healthy.*

## Vision:

*To be the most highly regarded managed care plan in California.*

# Perinatal QIP Background

The Perinatal Quality Improvement Program (PQIP) is an invitation only, value-based program. Started from humble beginnings in 2017, the PQIP ran an extensive pilot period from July 1, 2017 through June 30, 2020. The program was officially adopted as a pay-for-performance program in July 2020. We now have over 100 participating facilities from 30 parent organizations.

PQIP offers financial incentives to participating Comprehensive Perinatal Services Program (CPSP) and non-CPSP providers providing quality care in the spectrum of perinatal services to include timely prenatal care, immunization, and postpartum care to Partnership members.



# Participation Eligibility & Requirements

## Provider Eligibility

- Perinatal QIP provider participation is by invitation. Participating Partnership HealthPlan Perinatal Services (PHPS) practices and select perinatal practices with **more than 50 deliveries per year** may be invited to participate in the PQIP.

## Participation Requirements

- All invited practices will submit an application for PHPS that includes contact information for their program and outlines the services and staff who provide perinatal clinical care and other perinatal services in their program.
- A Partnership contract is required within the first three (3) months of the measurement year (**by October 1**, and providers must remain contracted through **June 30, 2026** (end of Measurement Year) and be considered in “good standing” *as of the month* the PQIP incentive payment is to be disbursed by the end of **November**.
- Providers must sign and submit an **LOA by August 15, 2025**. Providers who do not submit an LOA will be removed from program participation within the measurement period.
- Providers with a LOA in effect are no longer required to renew an LOA for each measurement year. **Only new participating providers or providers that have had a break in program participation will be required to complete an LOA.**

# Perinatal Timeline

## Measurement Period July – June



**Measurement Year is a Fiscal Year: July 1 – June 30**

# PQIP Measurement Set

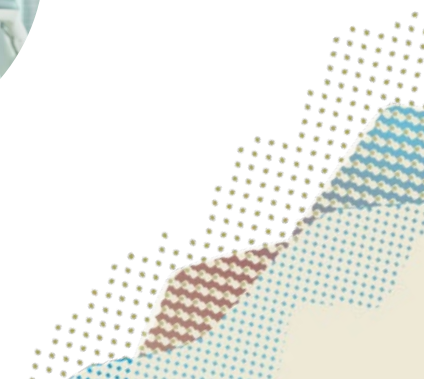


**Fiscal Year  
2025-2026**



# 2025-2026 PQIP Measures

1. Gateway Measure: Electronic Clinical Data System (ECDS)
2. Prenatal Immunization Status
3. Timely Prenatal Care Visit
4. Depression Screening at First Prenatal Visit
5. Timely Postpartum Care
6. Timely Assessments (Monitoring Measure)



# 1. Gateway Measure: ECDS

## Measure Purpose

This measure supports the allowance of data exchange from provider Electronic Health Records to Partnership to capture clinical screenings, follow-up care, and outcomes.

Partnership partnered with DataLink (a qualified HEDIS data aggregator) who can pull a much larger scope of measures than what is currently required for the Perinatal QIP.

## Measure Requirements

In measurement year 2025-2026, the ECDS measure is now a **Gateway Measure** requirement to receive incentive dollars. The gateway measure is a multi-step data exchange process that involves a Data Share Agreement or contract with DataLink and successful extraction of data.

Some providers may have completed this during the 2024-2025 measurement year. However, if a perinatal provider did not complete a contract and implementation with DataLink during the 2024-2025 measurement period, they must complete all **Implementation Phases** and **Participation**

**Requirement Steps** by June 30, 2026, to be eligible for incentive payment in the 2025-2026 measurement year.

# 1. Gateway Measure: ECDS

## *DataLink Implementation Phases*

- **Phase 1:** DataLink will coordinate outreach with targeted providers to schedule Discovery Meetings. Discovery Meetings will discuss connectivity, benefits of the data extraction, and the extraction process. Discovery meetings will include the QIP team, Partnership IT team, and the DataLink team.
- **Phase 2:** DataLink will work one-on-one with each practice to set up the Data Generation and Data Upload via sFTP
- **Phase 3:** DataLink will parse and ingest the provider's Continuity of Care Documents (CCD) and create the output file for both quality and risk.
- **Phase 4:** DataLink will deliver to Partnership via sFTP the output file for validation and processing.

# 1. Gateway Measure: ECDS

## *DataLink Participation Requirement Steps*

**Step 1:** Notify the PQIP team at [perinatalqip@partnershiphp.org](mailto:perinatalqip@partnershiphp.org) of your parent organization's intention to sign a contract/data share agreement **\*\*Required information needed is outlined in the FY2025/2026 Perinatal QIP specifications**

**Step 2:** Request a copy of the DataLink contract by emailing [perinatalqip@partnershiphp.org](mailto:perinatalqip@partnershiphp.org). Send the signed contract to the DataLink Legal Team and [perinatalqip@partnershiphp.org](mailto:perinatalqip@partnershiphp.org).

**Step 3:** Once the contract is received and approved, DataLink team will then coordinate onboarding meetings for all providers wanting to participate in the Perinatal QIP. Meetings will include the DataLink, HEDIS, and QIP teams.

# 1. Gateway Measure: ECDS

## *Current DataLink Participants*

Contracted with DataLink	Not Contracted Yet	Participating through OCHIN/EPIC Contract, but have not signed DataLink Contract
Alliance Medical Center	Adventist Health Clearlake	Mendocino Community
Ampla Health	Capital OBGYN	La Clinica
Chapa-De Indian Health	Community Medical Centers	Marin Community
Enloe Health	Dignity Health	CommuniCare+Ole
Open Door	Fairchild Medical Clinic	Tahoe Forest
Peach Tree Healthcare	Lake County Tribal Health Consortium	
Petaluma Health Center	Mendocino Coast Clinic	
Samuel Van Kirk	Northbay Healthcare	
Santa Rosa Community Health	Northeastern Rural Health	
Shasta Community Health Center	Northern Valley Indian Health	
Sonoma County Indian Health Project	Generations of Women	
Sonoma Valley Community Health	Providence Medical Foundation	
WellSpace	Santa Rosa Birth Center and Midwifery	
West County Health Centers	Winters Healthcare	

**\*Gateway measure requires both contract completion and connection set-up completion.**

**Above list does not include connection/extraction status.**

**\*\*Contracting with DataLink for the Perinatal QIP also counts as credit for the ECDS measure in the PCP QIP.**

## 2. Prenatal Immunization Status

### Measure Description


Pregnant members who had one dose of the tetanus, diphtheria, acellular pertussis vaccine (Tdap) within 30 weeks before delivery date AND an influenza vaccine during pregnancy (i.e., within 40 weeks of delivery date) will be considered for incentive payment.

### Incentive Amount

Providers can receive a financial incentive of \$37.50 for each Tdap vaccination and \$12.50 for each influenza vaccine administered, for a total potential \$50 for each member who received both vaccinations.

### Reporting Requirement

Providers are not required to submit documents for this measure. Partnership will capture data from our claims system. The above immunizations must be provided and billed through claims.



# 3. Timely Prenatal Care Visits

## Measure Summary

Timely prenatal care services rendered to pregnant Partnership members in the first trimester, as defined as [less than 14 weeks of gestation](#), or within 42 days of enrollment in the organization.

## Incentive Amount \$100

Providers can receive a \$100 incentive for the first timely visit for each patient, with all required elements completed.

## SECURE Submissions

Participating providers submit a monthly (by the 10th day following each reporting month) attestation template via SECURE email indicating services provided at reported visit. One new template has been created for this measurement year.

Prenatal care submissions must be sent securely to the PQIP inbox at: [perinatalqip@partnershiphp.org](mailto:perinatalqip@partnershiphp.org)



# 4. Depression Screening at First Prenatal Visit (*> 14 weeks Gestation*)

## Measure Summary

Prenatal care services rendered to pregnant Partnership members after the first trimester, defined as **equal to or greater than 14 weeks of gestation** that include documentation of depression screening.

## Incentive Amount \$25

Providers can receive a \$25 incentive per patient entering care for the first time at  $\geq 14$  weeks gestation (must include a depression screening).

## SECURE Submissions

Participating providers submit a monthly (by the 10th day following each reporting month) attestation template via SECURE email indicating services provided at reported visit. One new template has been created for this measurement year. Prenatal care submissions must be sent securely to the PQIP inbox at: [perinatalqip@partnershiphp.org](mailto:perinatalqip@partnershiphp.org)



# Prenatal QIP Submission Template



## 2025-2026 Perinatal QIP

## Perinatal QIP Submission Template

**NOTE:** This template is a **combined** template for both the Timely Prenatal Visit Measure < 14 weeks gestation **and** for Depression Screening at first visit ≥ 14 weeks gestation

For visits completed during: July 1, 2025 and June 30, 2026. All information provided here is subject to an audit by Partnership HealthPlan of California.

In accordance with the HIPAA Privacy and Partnership HealthPlan of California (Partnership) policy, failure to secure member personal health information (PHI) is subject to Partnership Regulatory Affairs and Compliance & DHCS incident reporting and Perinatal program suspension. It is **MANDATORY** that this submission template be sent in a secure email / encrypted format. If your organization does not provide this option, please request a **SECURE** email from the QIP team.

[REQUEST PARTNERSHIP SECURE EMAIL](#)

CIN Character Count	CIN (must be 10 characters)	Patient First Name	Patient Last Name	DOB	Date of Service	Estimated Delivery Date	Depression Screening Tool Used	Score	Gestational Age	Partnership Site ID	Provider Site Name (Physical Site)
10	12345678A1	Fake	Patient1	1/1/2000	7/1/2025	1/1/2026	Patient Health Questionnaire (PHQ-9)®	4.00	13 5/7	1234	Redding Perinatal Site
10	32165487D1	Fake	Patient 2	1/1/2005	7/4/2025	12/31/2025	Edinburgh Postnatal Depression Scale (EPDS)	2.00	14 2/7	1234	Redding Perinatal Site
10	74185296E1	Fake	Patient 3	1/1/2010	7/5/2025	1/31/2026	Patient Health Questionnaire Modified for Teens (PHQ-9M)®	3.00	10	1234	Redding Perinatal Site

Example

July 2025

Aug

Sep

Oct

Nov

Dec

Jan 2026

Feb

Mar

Apr

May

June

...

+

:

The new template includes a separate tab within the worksheet for each month of the year. When submitting the template, please add the new month's data in the appropriate tab. This will help keep all your data on one worksheet for the whole year.

The [2025-26 Perinatal QIP Submission Template](#) can be downloaded under the submission templates header on from the [Perinatal QIP Webpage](#).

## 5. Timely Postpartum Visits

### Measure Summary

Two timely postpartum care services rendered to Partnership members with one occurring within 21 days after delivery and the other occurring between 22 and 84 days after delivery.

### Measurement Period

April 8, 2025 to April 7, 2026: Index period by which women with live births are identified.

### Incentive Amount

- \$25 for first postpartum visit
- \$50 for second visit, totaling \$75 per member

### Reporting

Data will be extracted from Partnership's claims system. Summary reports will be produced quarterly and emailed to providers to inform them of what has been received. Providers should expect to receive final statements and payments by the end of November.



## 6. Timely Assessments (Monitoring Measure)

### Measure Summary

During the 2025- 2026 measurement year, Partnership will be monitoring claims data looking for members receiving Comprehensive Health Assessment from the PHPS programs of psychosocial, nutrition, and behavioral health assessment at the initiation of care, in each trimester and in the post-partum period.

This measure is a **monitoring-only measure**, without any incentive dollars attached to the measure. It may be developed into an incentive measure in future years. Summary reports will be produced quarterly and emailed to providers to inform them of what has been received.

### Reporting

There is no reporting from providers required. Data will be extracted from Partnership's claims system for the codes under Comprehensive Health Education Services that reflect initial and follow-up health education assessments, treatment, and care plans.



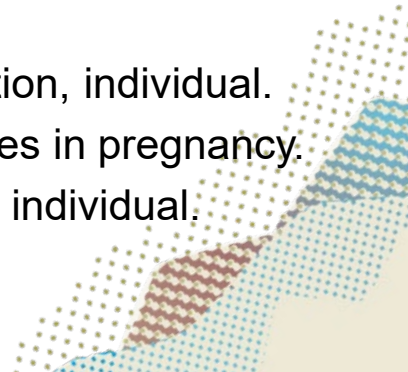
# Measure Guidance

**A typical coding scenario for a member who is seen in each trimester and postpartum:**

1. Partnership to receive one (1) Z6402 code for the first prenatal visit
2. Minimum of two (2) Z6406 codes for follow-up visits
3. One (1) Z6414 code billed for an assessment postpartum.

**Providers should use the following Z Codes from the Comprehensive Health Education Services category of Perinatal Services:**

- **Z6402:** Initial health education assessment and development of care plan, individual initial 30 minutes.
- **Z6406:** Follow-up antenatal psychosocial assessment/treatment/intervention, individual. This code is billed in 15 minutes increments and can be used up to 72 times in pregnancy.
- **Z6414:** Post partum health education assessment/treatment/intervention, individual.



# Contact Us



Visit our website: [PartnershipHP.org](https://www.partnershiphp.org)

**PQIP Webpage:**

<https://www.partnershiphp.org/Providers/Quality/Pages/Perinatal-QIP.aspx>

**Measurement Set Specifications Page:**

<https://www.partnershiphp.org/Providers/Quality/Pages/Perinatal-QIP-Overview.aspx>

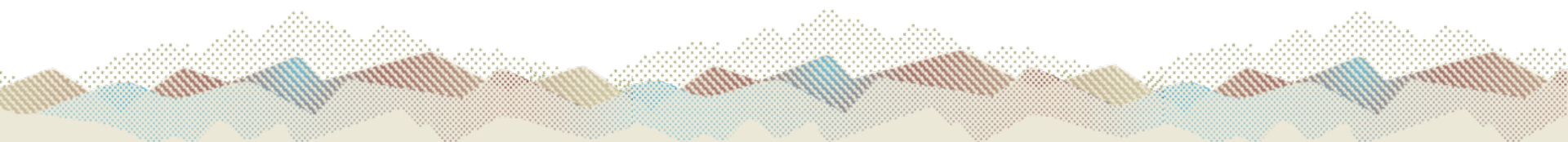
**Email us:** [PerinatalQIP@partnershiphp.org](mailto:PerinatalQIP@partnershiphp.org)

**Perinatal QIP Team:**

**Amy McCune**, Manager of Quality Incentive Programs

**Troy Foster**, Program Manager

# Questions?



# Thank You



Thank you for attending.

Today's recording will be available soon on our PQIP  
webpage!



# Resources

The following resources are also found in the 2025-2026 Perinatal QIP Measurement file, which you can download [here](#).

# Approved Depression Screening Tools

## **Instruments for Adolescents (12–17 years)**

Tool	Positive Finding
Patient Health Questionnaire (PHQ-9)®	Total Score ≥5
Patient Health Questionnaire Modified for Teens (PHQ-9M)®	Total Score ≥5
PRIME MD-PHQ2®	Total Score ≥3
Beck Depression Inventory-Fast Screen (BDI-FS)®*	Total Score ≥4
Center for Epidemiologic Studies Depression Scale-Revised (CESD-R)	Total Score ≥10
Edinburgh Postnatal Depression Scale (EPDS)	Total Score ≥9
PROMIS Depression	Total Score ≥52.5

## **Instruments for Adults (18+ years)**

Tool	Positive Finding
Patient Health Questionnaire (PHQ-9)®	Total Score ≥5
PRIME MD-PHQ2®	Total Score ≥3
Beck Depression Inventory-Fast Screen (BDI-FS)®*	Total Score ≥4
Beck Depression Inventory (BDI-II)	Total Score ≥14
Center for Epidemiologic Studies Depression Scale-Revised (CESD-R)	Total Score ≥10
Edinburgh Postnatal Depression Scale (EPDS)	Total Score ≥9
My Mood Monitor (M-3)®	Total Score ≥5
PROMIS Depression	Total Score ≥52.5

# Timely Postpartum Care Compliant Documentation

Documentation in the medical record must include a note indicating the date when a postpartum visit occurred and the following:

- Date of delivery and live birth confirmation
- A complete postpartum visit that includes all of the following:
  - Weight, blood pressure, and evaluation of the abdomen and breasts.
  - Notation of “normal” / “abnormal” components of a medically necessary physical exam
  - Notation of abdominal exam as: “normal” / “abnormal” or “not clinically indicated”
  - Notation of “breastfeeding” is acceptable for the “evaluation of breasts” component
- Depression screening using one of the approved tools at each visit
- The provider also attests that the following evaluation occurred:
  - Evaluation of lactation (if breastfeeding)
  - Discussion of family planning

# Timely Prenatal Care Elements

For each submitted timely prenatal care visit, the submitting provider is **attesting** that a diagnosis of pregnancy is present and the completion of the following:

- A note indicating the date when prenatal care visits occurred
- Weight (lbs.) and Blood Pressure
- Documentation of estimated due date (EDD) and gestational age in weeks
- Comprehensive physical/obstetrical exam including weight, blood pressure **AND one** of the following:
  - Auscultation for fetal heart tone
  - Pelvic exam with obstetric observations
  - Measurement of fundus height (standardized prenatal flow sheet may be used)
  - Ultrasound
- Assessment of a complete medical and social history including but not limited to:
  - History of gestational diabetes
  - Use of drugs, alcohol, or tobacco during pregnancy
  - C-section prior to the pregnancy
  - Issues with previous pregnancy
- Depression screening using one of the approved tools

# Partnership Growing Together and Care Coordination

## Growing Together Program (GTP)

- Focus: Health education and access to services for all members
- Prenatal and postpartum outreach from Partnership to members
- Refer ALL pregnant, postpartum members, and members/families < 24 months

Phone: (855) 798-8764

Monday – Friday, 8 a.m. – 5 p.m.

[PopHealthOutreach@partnershiphp.org](mailto:PopHealthOutreach@partnershiphp.org)



# Partnership Growing Together Program

Member education and engagement through targeted outreach

## Member Engagement

- Phone call check ins
  - Prenatal up to three
  - Postpartum up to two
  - Healthy Babies up to 30 months of age
- Perinatal incentives - \$25 x 2 and \$50 x 2
  - TDAP vaccine
  - Flu vaccine
  - Postpartum exams before 84 days
- Case management follow-up as needed
  - At-risk members
  - At-risk babies





## Partnership Growing Together Program



Healthy Baby incentives - \$25 x 4

- Two Well Child visits before three months
- Two Well Child visits between four to six months
- Two Well Child visits between nine to 15 months **NEW**
- Two Well Child visits between 15 to 30 months **NEW**
- Incentive - \$100 gift card **NEW**
  - For receiving all required immunizations, including two flu shots, on time by 24 months. Record verification is required.