L.A. Care is pleased to announce Year 4 of the:

**PHYSICIAN PAY-FOR-PERFORMANCE PROGRAM**

January 1 - December 31, 2014

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**PROGRAM OVERVIEW**

L.A. Care’s Physician Pay-for-Performance (P4P) Program provides financial rewards for practices that provide high quality care for L.A. Care members, and represents an opportunity to receive significant revenue above capitation. Effective immediately, eligible physicians can qualify to receive annual incentive payments for outstanding performance and year-over-year improvement on multiple HEDIS measures.

New in Year 4: The Physician P4P Program now includes members in Medi-Cal and L.A. Care Covered!

**ELIGIBILITY**

- Solo and small group physicians with 250 or more L.A. Care Medi-Cal members as of September 2011 are eligible.

- Clinic organizations with 1,000 or more L.A. Care Medi-Cal members as of September 2011 are eligible. Within these practices, eligibility is extended to active physicians that hold L.A. Care Medi-Cal membership.

(Medi-Cal membership includes L.A. Care Medi-Cal members, as well as those served in conjunction with L.A. Care’s health plan partners.)

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**PARTICIPATION**

- **There is no need to sign-up.** All eligible physicians automatically participate in the Physician P4P Program.

- Physicians and their employers must submit timely, complete, and accurate encounter data through their normal reporting channels for all services rendered to L.A. Care members. Practices should also coordinate with their IPAs and medical groups to ensure that health plans receive complete lab data for services rendered. This encounter and lab reporting is the basis of performance scoring, and is essential to success in the Physician P4P Program.

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For more information, please refer to the Physician Pay-for-Performance Program – Program Manual, or contact Incentive_Ops@lacare.org.
**PERFORMANCE MEASURES**

In 2014, the Physician P4P Program includes 17 HEDIS measures that can impact your incentive income. Your continuing efforts to provide proactive and comprehensive care to L.A. Care members is essential:

- Appropriate Testing for Children with Pharyngitis
- Appropriate Treatment for Children with Upper Respiratory Infection
- Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life*
- Adolescent Well-Care Visits
- Immunizations for Adolescents - Combo 1
- Breast Cancer Screening*
- Cervical Cancer Screening*
- Chlamydia Screening in Women
- Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis
- Comprehensive Diabetes Care
  - HbA1c Screening
  - HbA1c Control (≤9.0%)
  - Eye Exam
  - LDL-C Control (<100 mg/dL)*
  - Nephropathy Screening

**NEW in 2014:**

- Childhood Immunization Status - Combo 3*
- Prenatal Care and Postpartum Care
  - Timeliness of Prenatal Care
  - Postpartum Care

* Measures highlighted in bold are double-weighted and have a greater role in determining physicians’ performance scores, performance rankings, and incentive payments in Year 4. Please pay extra attention to these measures to maximize performance and incentives income.

**Reporting-Only:**

**Avoidable Emergency Room (ER) Use:**

Avoidable ER measures are reporting-only in 2014, and may be scored in future years. These measures reflect the percentage of ER visits that could have been prevented with appropriate ongoing care:

- Avoidable ER—Seniors and People with Disabilities (SPD)
- Avoidable ER—non-SPD

**SCORING & PAYMENT**

1. Eligible physicians receive an *attainment* score and an *improvement* score for each performance measure:
   - Attainment reflects a physician’s HEDIS performance in the program year relative to peer group performance.
   - Improvement reflects a physician’s HEDIS performance in the program year compared to his or her performance one year prior.

   Physicians must have at least 10 eligible members to receive a score for a particular measure.

2. The better of these two scores becomes the physician’s *incentive score* for each measure. **This ensures that high performers receive high scores, and that lower performers demonstrating improvement also have an opportunity to score well.**

3. An average of all incentive scores (must have a minimum of three scored measures) determines the physician's overall *performance score*. (In community clinics, all physician performance scores are averaged to determine an *organizational performance score*.)

4. P4P payments are distributed annually in the fourth quarter according to the following formula:
   a. Performance score X # of eligible, assigned members = member points
   b. Member points X payment amount per member point = payment $$$