

ACC Phase III Quality Program

Program Improvement Advisory Committee

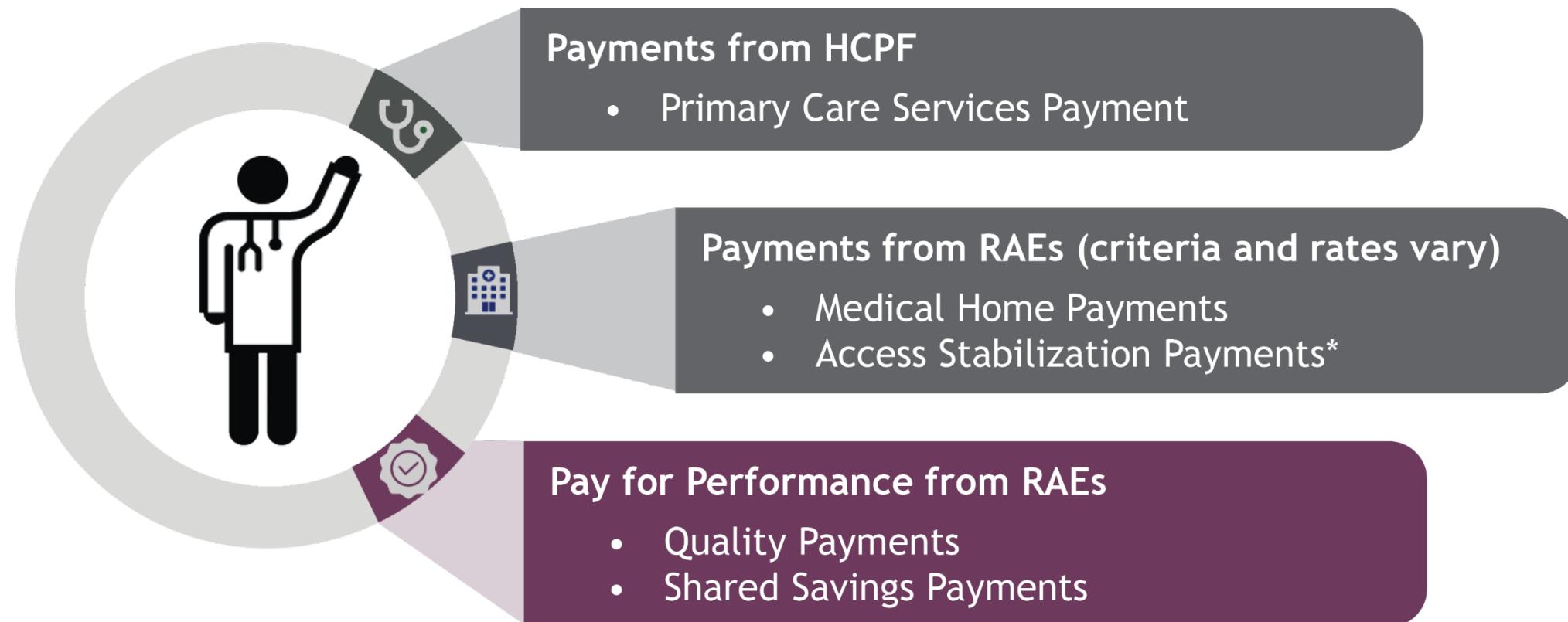
Dec. 17, 2025

Presented by:

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Primary Care Payment Structure: Quality Program



Key Changes to the Quality Program in ACC Phase III

PCMPs measured on their individual performance.

Align quality measures with national measures.

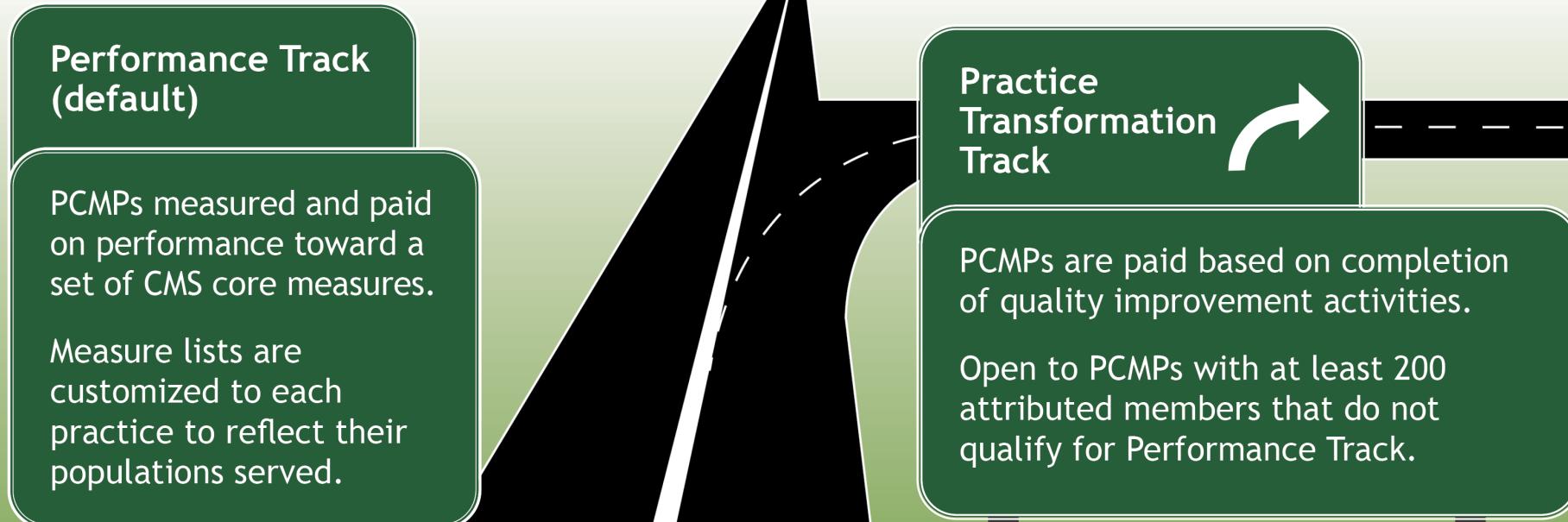
Creation of quality improvement (QI) activities.

Transition to a calendar year performance period.

Payments made annually.

Performance measured using thresholds.

Two Tracks to Receive Quality Payments



Quality Program Transition Period

Transition Period



When

July 1, 2025, to December 31, 2026



What

All PCMPs eligible to receive incentive payments for participation in quality improvement activities.



Why

Allows us to transition to a calendar year performance period to align with HEDIS measure specifications.

Transition Period: PCMP Requirements

Milestone	Requirements	Expected Payment Date
Payment 1: QI Activity Identification	July to December 2025: <ul style="list-style-type: none">• PCMP has designated a provider and an administrative champion.• No more than two QI activities identified.• Define mid-year and annual goal.	Spring 2026
Payment 2: Mid-Year Progress	January to June 2026: <ul style="list-style-type: none">• QI activities initiated - required gate to receive any payment.• Champions engaged - required gate to receive any payment.• Mid-year goals achieved.	Fall 2026
Payment 3: QI Activity Completion	July to December 2026: <ul style="list-style-type: none">• One or two QI activities completed.• RAE reporting that activities have been completed.	Spring 2027

- PCMPs can earn quality payments per attributed member, per QI activity for their full attributed membership.
- PCMPs must complete Payment 1 activities to be eligible for subsequent payments.

Transition Period: How RAEs Will Support PCMPs

1. PROVIDER PERFORMANCE STATEMENTS

- ✓ Provide updates to PCMPs about performance and payments distributed
- ✓ Identify actionable next steps for PCMPs to improve performance and increase payments

2. COACHING

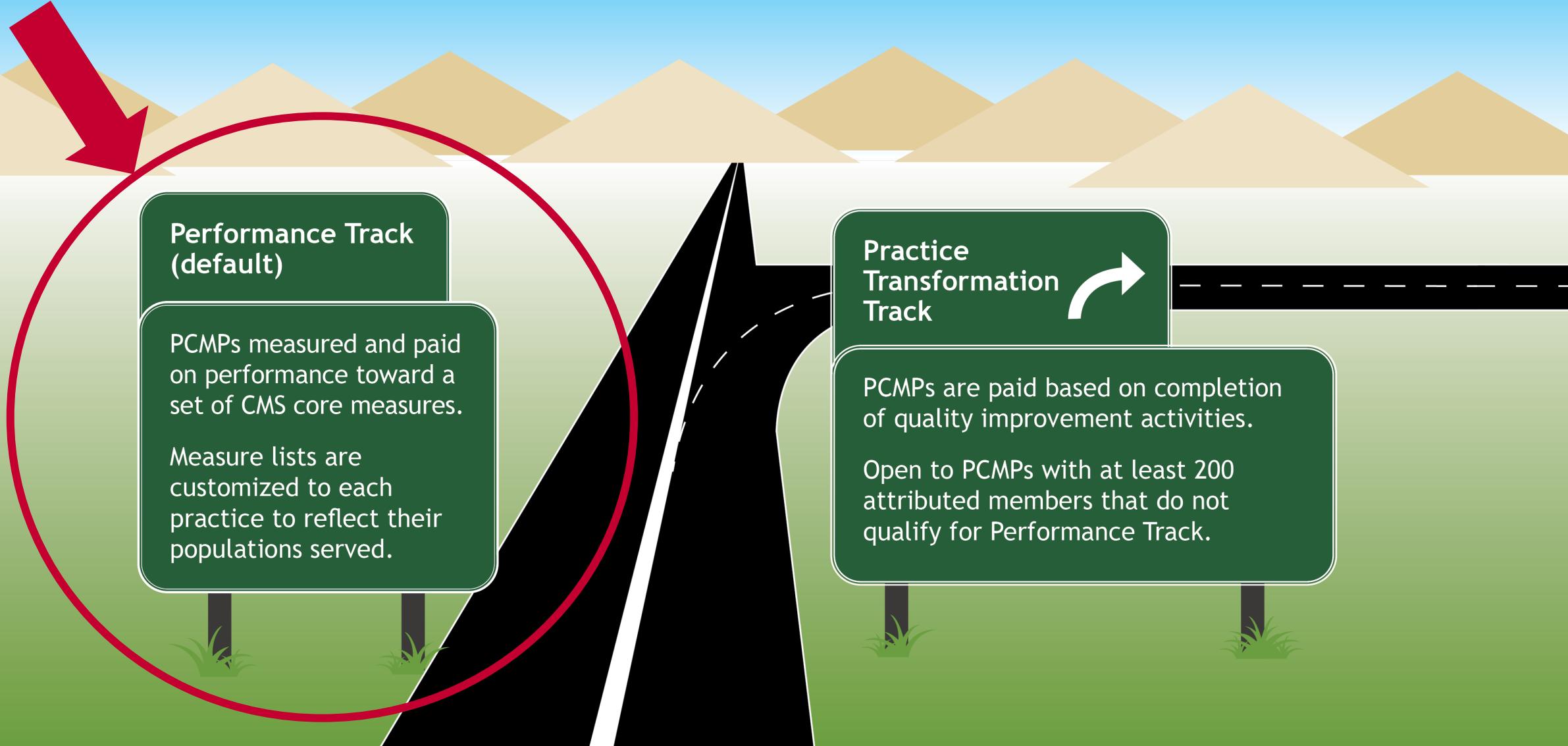
- ✓ Help identify and improve workflows that focus on PCMP metrics
- ✓ Improve PCMP coding
- ✓ Use data and analytics
- ✓ Identify and achieve cost goals (Shared Savings)
- ✓ Approve practice transformation project and determine if activities were completed
- ✓ Approve QI tools (e.g., PDSA, root cause analysis)
- ✓ Facilitate QI meetings
- ✓ Collaborate on implementation
- ✓ Provide resources
- ✓ Build a peer network

3. PRACTICE TRANSFORMATION ACTIVITIES



Performance Track

Performance Track



Performance Track: Key Things to Know



- **Measure assignment begins CY 2026 for eligible PCMPs.**
- Performance for CY 2026 is paid out in 2027.
- Step 4 of the measure assignment methodology will begin in CY 2027.

Performance Track: Measure Assignment Methodology

STEP 1	Prioritized Measures
STEP 2	Largest Denominators
STEP 3	Secondary Focus Measure
STEP 4	Quality Improvement Activities (begins CY 2027)

Performance Track: Step 1

STEP 1

Prioritized Measures

Measures will automatically be assigned if a PCMP has at least 30 members in the denominator for any of the following:

1. Well-Child Visits in the First 30 Months of Life
2. Glycemic Status Assessment for Patients with Diabetes
3. Controlling High Blood Pressure

►► All PCMPs proceed to Step 2

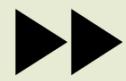
Performance Track: Step 2

STEP 2

Largest Denominators

Measures with the largest denominators will be included if a PCMP has at least 30 members in the denominator for any measure, for a maximum of six total measures:

1. Breast Cancer Screening
2. Cervical Cancer Screening
3. Colorectal Cancer Screening
4. Screening for Depression and Follow-Up Plan
5. Child and Adolescent Well-Care Visits
6. Developmental Screening in the First Three Years of Life
7. Childhood Immunization Status Combination 10
8. Immunizations for Adolescents Combination 2



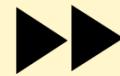
If a PCMP still has five or fewer measures, proceed to Step 3.

Performance Track: Step 3

STEP 3

Secondary Focus Measure

If a PCMP has at least 30 members in the denominator, the Chlamydia Screening in Women measure will be added.



If a PCMP still has four or five measures, proceed to Step 4.

Performance Track: Step 4

STEP 4

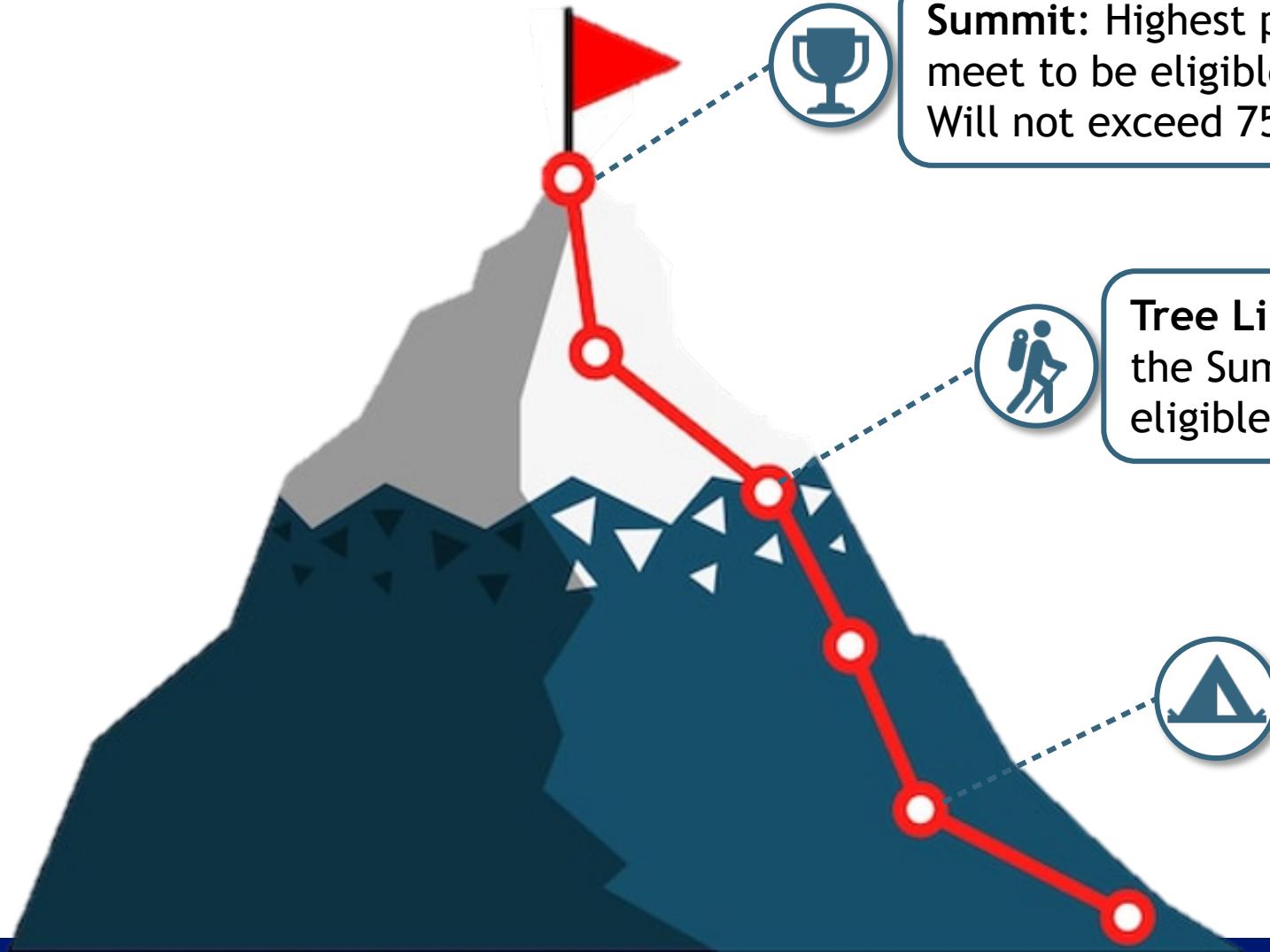
Quality Improvement (QI) Activities

Begins CY 2027

- If a PCMP has four measures, it can choose to participate in up to two QI activities to receive payments for up to six total performance measures.
- If a PCMP has five measures, it can choose to participate in one QI activity to receive payment for six total performance measures.

PCMPs with three or fewer assigned measures and **at least 200 attributed members** can opt to participate in the Practice Transformation Track instead.

Performance Track: Thresholds



Summit: Highest performance threshold PCMPs/RAEs must meet to be eligible for the **full** quality incentive payment. Will not exceed 75th percentile of national benchmarks.

Tree Line: Halfway point between Basecamp and the Summit. PCMPs/RAEs that meet threshold are eligible for **additional** quality incentive payment.

Basecamp: Minimum performance threshold PCMPs/RAEs must meet for **minimum** quality incentive payment. Threshold will not exceed 50th percentile of national benchmarks.

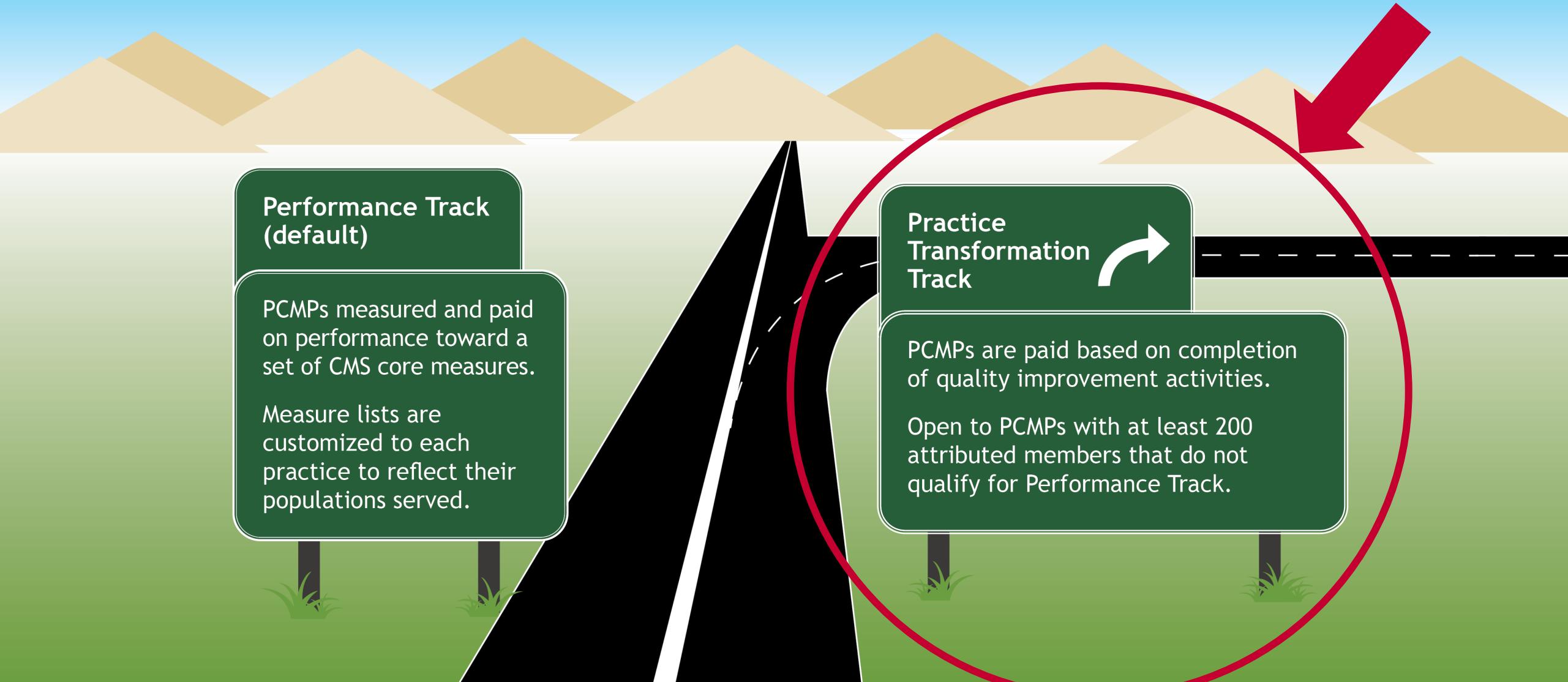
Performance Track: Payment



- For assigned measures:
 - PCMPs can earn quality payments per attributed member, per measure for full attributed membership.
 - Attribution determined on last day of activity window.
 - Payments made annually.
- For supplemental QI activities (beginning CY 2027)
 - PCMPs can earn quality payments per attributed member, per QI activity for full attributed membership.
 - Attribution determined on last day of activity window.
 - Payments made semi-annually.

Practice Transformation Track

Practice Transformation Track



Practice Transformation Track: Key Things to Know



- For the Transition Period, the 200 member minimum is waived.
- The standard eligibility requirements and assignment into this track will **begin CY 2027**.
- Like the transition period, PCMPs can earn quality payments per attributed member, per QI activity for full attributed membership.
- Payments made semi-annually.

Administrative Clinical Quality Measure Data Sources

Data Used for the Performance Track



- Data currently used by HCPF in measure calculation
 - interChange
 - Claims
 - Encounter Data
 - Quest/LabCorp
 - CDPHE CIIS
 - EHR (HIE+CCMCN)
- HIE connection
 - HCPF can help cover the cost of connection

Clinical Quality Measure Types

Allowable Data Source	Claims	Administrative	ECQM	ECDS	Hybrid
Measurement tool		Perform+	PCMP EHR	Perform+	Manual Review
Claims	X	X		X	X
Encounter Data		X		X	
Clinical EHR Data (Contexture, QHN, CCMCN)		X	X	X	
CIIS Registry Data		X		X	
Magellan (Lab) Data		X		X	
Chart Review					X
Medicare Data		X		X	



Questions?



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