



## 2021 Impact Report

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California Quality Collaborative,  
a program of Purchaser Business  
Group on Health

NOVEMBER 2021



## A Letter from the CQC Senior Director

Amidst the ongoing challenges of the COVID-19 pandemic, the California Quality Collaborative (CQC), a program of the Purchaser Business Group on Health (PBGH), continues to foster improvements in care delivery through technical assistance for care providers and teams, multi-stakeholder alignment on priorities and standards, resource development for operationalizing best practices and workforce training.

This year, CQC programs focused on expanding access to Advanced Primary Care for Californians that incorporates collaboration with high-value specialty expertise through four drivers of change.

### Aim

Californians have access to and receive **Advanced Primary Care** that incorporates collaboration with high value specialty expertise.

### Sub-Aims

Expand telehealth services as part of a longitudinal relationship with a care team

Increase the integration of behavioral health care

Reduce disparities in care and outcomes

Close deferred care gaps resulting from COVID-19

CQC has catalyzed systematic change that will enable practices to deliver the care patients and purchasers need and expect. In 2021, we:

- Developed a set of practice-level quality measures aligned and endorsed statewide to define advanced primary care.
- Designed a statewide pilot for implementation in 2022 of the Advanced Primary Care measure with adoption by California Public Employees' Retirement System (CalPERS), Covered California and the San Francisco Health Service System.
- Improved the care and experience among 720,000 Californians with diabetes and asthma through the CalHIVE Network's technical assistance, resulting in expanded care teams using telehealth to close care gaps and to pilot innovative care solutions, such as remote patient monitoring and mobile health clinics.
- Published two learning resources for provider organizations integrating behavioral health: a curriculum for self-directed learning and improvement collaborative design and a primary care team toolkit to implement screenings and follow-up care for adverse childhood experiences (ACEs).



Sincerely,

Crystal Eubanks, Senior Director

## Defining Advanced Primary Care Standards

CQC completed a nearly two-year effort to define the [attributes](#) and a common [measure set](#) of high-quality, patient-centered primary care, or [advanced primary care](#).

- The CQC Steering Committee defined and endorsed a set of practice-level [quality measures](#) to identify high-performing practices and support enhanced payments for advanced primary care. CQC's standards have also been adopted for use by the California Health Care Foundation, Integrated Healthcare Association, Blue Shield of California and the Purchaser Business Group on Health's National Primary Care Payment Reform Workgroup in its [Common Purchasing Agreement](#).
- CalPERS, Covered California and the San Francisco Health Service System have adopted CQC's measure set and are requiring health plans to participate in a 2022 statewide pilot of practice-level performance on the measures. This marks the first time purchasers in California are aligned on primary care expectations for health plans.
- CQC has partnered with the Integrated Healthcare Association and California purchasers to design the [statewide measurement pilot](#) based on our Advanced Primary Care definition and measures. It will utilize existing statewide infrastructure through IHA to support practice-level performance assessment. With support from the California Health Care Foundation, we have defined a common practice attribution methodology and explored integration of race, ethnicity and language data for performance stratification.
- The CQC Advanced Primary Care Workgroup developed recommendations for payers and providers to take action to support care teams in addressing structural barriers across the California delivery system. These recommendations call for payers to drive change through alignment that increases investment in primary care and significantly shifts the business model from volume to value.

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### Recommendations to Enable Advanced Primary Care in California



Increase net investment in primary care and revenue to primary care providers



Resource expanded data collection, exchange, and aggregation for care delivery and value-based payments



Ensure all patients have a continuous relationship with a primary care provider



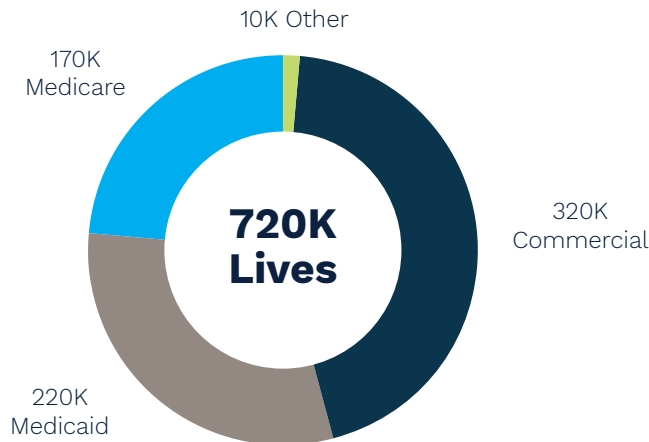
Support transformation with targeted technical assistance for business operations and quality improvement

## Transforming Telehealth Care

The [CalHIVE \(Health-Impact-Value-Engagement\)](#) Network is a two-year improvement collaborative engaging over 1,300 clinicians working to improve access and outcomes of care delivered through telehealth services. With support from CVS Health Aetna, CalHIVE has engaged provider organizations across eight California counties serving the communities within the Central Valley and Inland Empire. These organizations are working to:

- Maximize telehealth operations to enhance access and support sustainable virtual management of chronic conditions
- Adopt a measurement plan for telehealth quality and monitoring
- Improve clinical outcomes and reduce variation for patients with diabetes and asthma
- Ensure equitable access to virtual care services

*California Lives Touched by CalHIVE*



- More than 720,000 Californians have been touched by CalHIVE since the program's launch in October 2020.
- CQC improvement and data advisors have engaged participants in 90 hours of one-to-one consultation and 40 hours of peer learning events, resulting in care and workflow improvements since the start of the project to:
  - close care gaps through systematic sharing of reports and follow-up;
  - expand care team members' functions and use standing orders to share the care; and
  - pilot new care management supports and evaluate their effectiveness.
- Participating delivery organizations have designed long-term strategies to sustain consistent telehealth services across their practice network and to scale their new or enhanced virtual care services.
  - Choice Medical Group implemented an appointment scheduling triage system to enable front office staff to guide patients toward in-person or virtual care to best meet their clinical needs.
  - Desert Oasis Health Care launched a mobile health clinic to expand access for patients with diabetes by enrolling them in remote patient monitoring programs and providing glucometers and other supports.
  - PrimeCare developed a virtual diabetes care program, adopted across its 10 IPAs, that includes a communication plan to engage patients through one-on-one conversations with a patient advocate.

# Accelerating Behavioral Health Integration

The integration of behavioral health into primary care has been central to the work of CQC, given that nearly seven in 10 patients in need of behavioral health treatment seek care via primary care practices. CQC has published best practice resources to guide ambulatory care organizations on integrating behavioral health care services:

- [The Behavioral Health Integration Improvement Collaborative Curriculum](#), with support from the California Health Care Foundation, was developed for health care provider organizations working to integrate behavioral health services into primary care. Curriculum content, curated resources and learning activities will help organizations launch or expand BH screening, treatment and referrals for patients with mild- to moderate-severity depression, substance use disorders and other conditions.
- [The CQC Toolkit: Integrate Adverse Childhood Experiences \(ACE\) Screening in Primary Care](#), funded by California’s landmark ACEs Aware project, is a collection of evidence-based interventions and resources for ambulatory care provider organizations to implement ACEs screenings and follow-up care. It was developed through interviews with primary care organizations throughout California and features case studies from leading organizations.

## Curriculum Structure: Phases, Activities and Topic Areas



### 1 Launch the journey

#### Month 1

Begin self-assessment, identify team and establish learning community



### 2 Get started

#### Months 2–4

Understand current BH data and patient needs, determine the business case and identify Aim statement



### 3 Prepare for the pilot

#### Months 5–9

Build your implementation team, assess training needs, begin care model development and clinic focus, design a measurement strategy and address HIT needs



### 4 Implement care model

#### Months 10–15

Design training plan, roll out new care pathways and redesigned workflows and measure progress



### 5 Evaluate and spread

#### Months 16–17

Analyze pilot site success and plan for future care model spread across clinics/network



### 6 Refresh your sustainability plan

#### Months 18–19

Ensure ongoing sustainability by addressing ongoing staffing, training/education, retention and financing



### 7 Reflect on your journey

#### Month 20

Assess and catalog improvements and challenges and develop performance story

## Building Capacity for Improvement

CQC held over 40 learning events in 2021 to disseminate best practices, foster peer sharing and learning and identify actions for change among more than 150 organizations. CQC's free [public webinars](#) highlighted the learnings from organizations throughout the state to strengthen the resiliency of primary care in the face of the pandemic and to accelerate behavioral health integration for meeting even greater needs of patients. In October, in-person trainings resumed with a two-day Improvement Coaching Workshop in Riverside.

## Acknowledgements

Thank you to the individuals and organizations that support the CQC and its initiatives.

The [CQC Steering Committee](#) is a multi-stakeholder advisory committee to the CQC program, comprised of leaders from all facets of California's healthcare delivery system working together to effect positive change.

CQC is sponsored by the following health plans:



**CQC is a program of the Purchaser Business Group on Health.**

### Join Us

Learn more about CQC and its quality improvement initiatives and resources at [www.pbgh.org/california-quality-collaborative](http://www.pbgh.org/california-quality-collaborative)

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