

Medicaid Quality Improvement Program (MQIP) & milestones guidance

For years 2023–2028

Background

MQIP allows Washington to design quality improvement projects for Apple Health (Medicaid) enrollees. Under MQIP, managed care organizations (MCOs) partner with public hospitals (called “partnering providers”) to oversee the implementation of quality improvement projects. MCOs receive incentive funds as they meet designated, semi-annual quality-based milestones.

Starting in late 2023, Washington is implementing a revised approach for MQIP, MQIP 2.0. The Health Care Authority (HCA) will focus on improving social needs screening rates and reporting, which aligns with the state’s quality strategy goal of addressing health inequities and health-related social needs.

Current MQIP participants

Washington State Health Care Authority (HCA)

Managed care organizations (MCOs)

- Community Health Plan of Washington
- Coordinated Care of Washington
- Molina Healthcare of Washington, Inc.
- United Healthcare Community Plan
- Wellpoint

Partnering providers

- The University of Washington (UW), in association with UW Medicine
- The Association of Washington Public Hospital Districts (AWPHD), on behalf of AWPHD members

Program goals

HCA will engage collaboratively with MCOs and their network providers to design a comprehensive strategy to improve social needs screening rates and reporting. MQIP 2.0 will focus on **Social Need Screening (SNS)**. SNS is a growing body of work with increased importance to address health-related social needs. MQIP 2.0 will provide incentives to MCOs as they work with partnering providers to:

- Engage in projects that seek to improve data quality, improve screening rates, and improve referral rates.
- Report on SNS rates and results over time.

MQIP milestones

To be eligible for MQIP 2.0 incentive funding, MCOs are accountable for:

1. Furthering the state's understanding of the current state of social needs screening activities and measurement.
2. Collaborating with partnering providers to design and implement quality improvement projects to advance MQIP 2.0 goals.
3. Collaborating with partnering providers to report on the SNS metric.

Quality improvement projects

MCOs will work with partnering providers to identify a project and a set of activities that will advance MQIP goals. Partnering providers will collaborate on a single project and set of reporting elements for each relevant milestone. MCOs will shape the project and reporting by providing oversight and feedback to partnering providers, while actively collaborating with partnering providers to report on SNS screening practices.

The project should seek to advance one or more of the following goals to improve SNS rates and reporting, and address the health-related social needs of Apple Health enrollees:

- **Improve reporting:** HCA understands that some capacity building and operational changes are required to accurately report data and ensure high-quality data reporting. Through this project, the partnering provider may seek to build this capacity and implement such operational changes.
- **Improve screening rates:** to the extent social needs screenings are not happening consistently for Apple Health enrollees, partnering providers may work to implement social needs screenings as part of existing workflows.
- **Improve referral rates:** partnering providers may seek to implement systems to better refer and track referrals to social needs providers. They may also engage in partnership-building activities with social needs service providers, among other successful referrals.

MQIP reporting and payment timing

MQIP 2.0 will occur from 2023-2028. Partnering providers and MCOs will work together to achieve MQIP goals according to the performance period timelines. (See Table 1: MQIP Milestone Performance and Reporting Timeline below.) Following HCA's approval of the Milestone 1 landscape scan and Milestone 2 project proposal and implementation plan, MCOs will work with partnering providers on project status and implementation updates. MCOs will submit these documents to HCA, using the templates provided, on a semi-annual basis.

In future years, pending program approval, MQIP 2.0 payments may be tied to SNS metric reporting and corresponding improvement targets. Payments from MCOs to participating providers will be based on provider-level updates related to SNS. HCA will work with partnering providers and MCOs to design this structure and anticipate that most funding will be tied to provider-level updates.

HCA will make final approval decisions. HCA may conditionally approve milestones. In such cases, HCA will provide directions on how to correct deficiencies or address areas of concern during the following MQIP 2.0 performance period. HCA approval of required milestone documents will trigger payments to MCOs. HCA will only provide payment to MCOs once all milestone documents/reporting are received and approved. HCA may update the below timeline, the required milestones, and payment approach to align with project progress and revised priorities.

Table 1: MQIP 2.0 milestone performance timeline

Milestone	Performance period	Payment	Milestone details
1	July–Sept. 2023	Jan. 2024	For Milestone 1 , MCOs collaborate with partnering providers to develop and submit: <ul style="list-style-type: none"> • Landscape scan: a social needs screening and referral landscape scan using a survey developed by HCA. These will detail provider and MCO current state activities around social needs screening and reporting. Partnering providers must provide information on their organization’s current state for MCOs to include in this landscape scan.
2	Oct. 2023–March 2024	June 2024	For Milestone 2 , MCOs will collaborate with partnering providers to develop and submit an MQIP milestone report that includes: <ul style="list-style-type: none"> • Project proposal: a conceptual framework that describes: <ul style="list-style-type: none"> ○ The goals of the SNS project (e.g., improved quality of screening data, improved screening rates, improved referral rates, improved rate of successful referrals, improved sharing of screening data with plans or care team partners). ○ Participating partnering providers’ identified activities and deliverables to be completed in the next performance period to support the project goals. ○ Potential challenges and mitigation strategies associated with project goals.
3	April–June 2024	Dec. 2024	For Milestone 3 , MCOs will work with providers to submit: <ul style="list-style-type: none"> • Project status and implementation update: these updates will identify accomplishments, challenges, and risk mitigation strategies partnering providers used during the assessed performance period as well as a revised implementation plan. Project status updates will be developed by providers, with oversight from MCOs.
4	July–Dec. 2024	June 2025	Milestone 4: The implementation update will include baseline SNS rates observed during the reporting period.
5	Jan.–June 2025	Dec. 2025	Milestone 5 and following milestones will require MCOs to submit MQIP reports that include the following—and developed in partnership with providers, where applicable: <ul style="list-style-type: none"> • Social Needs Screening and Referral Metrics: each MCO to report on subsequent SNS rates starting with Milestone 4 (includes metric performance for calendar year (CY) 2024). MCOs will report the SNS and referral metrics semi-annually. This will include an unvalidated report, based on the milestone timing. As part of this reporting, MCOs are
6	July–Dec. 2025	June 2026	
7	Jan.–June 2026	Dec. 2026	
8	July–Dec. 2026	June 2027	

9	Jan.–June 2027	Dec. 2027
10	July–Dec. 2027	June 2028
11	Jan.–June 2028	Dec. 2028

required to share narrative updates on progress and challenges related to the SNS and referral metric.

- **Project status and implementation update:** these updates will identify accomplishments, challenges, observed unintended consequences, and risk mitigation strategies that partnering providers have used during the assessed performance period. These updates will also include revised implementation plans, if necessary.