Health Plan of San Joaquin
Mountain Valley Health Plan

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Dear Provider Partner:

Health Plan of San Joaquin/Mountain Valley Health Plan (Health Plan) is pleased to announce the 2026 Provider Incentive Program. These incentives reward our provider partners for ensuring Quality Care for our members. The incentive program will be categorized into two groups as follows:

Group A: Providers with a minimum of 40,000 Health Plan members
Group B: All other providers with a minimum of 400 Health Plan members

Based on your current membership count, you fall under **Group A**. Program guidelines for Group A remain the same as the 2025 Provider Incentive Program and are described below.

2026 Participation Criteria

1. Maintain a minimum of 40,000 Health Plan members
2. Remain open to new members for the calendar year if your provider to member ratio is within capacity
3. A minimum of 30 members in each measure denominator qualifies the measure for payout

2026 Incentivized Quality Measures

The 2026 incentivized quality measures are derived from the Healthcare Effectiveness Data and Information Set (HEDIS) and the Managed Care Accountability Set (MCAS). MCAS are performance measures that the Department of Health Care Services (DHCS) selects for annual reporting for Medi-Cal managed care health plans. Health Plan will incentivize provider performance on the following 16 target measures:

#	Chronic Health Measures	ACRONYM
1	Controlling High Blood Pressure	CBP
2	Glycemic Status Assessment for Patients with Diabetes (>9%)	GSD
#	**Women's Health Measures**	**ACRONYM**
3	Prenatal and Postpartum Care: Timeliness of Prenatal Care	PPC-Pre
4	Prenatal and Postpartum Care: Postpartum Care	PPC-Pst
5	Chlamydia Screening in Women	CHL
6	Cervical Cancer Screening	CCS-E
7	Breast Cancer Screening	BCS-E
#	**Children's Health Measures**	**ACRONYM**
8	Child and Adolescent Well-Care Visits	WCV
9	Childhood Immunization Status – Combination 10	CIS-10-E
10	Immunizations for Adolescents – Combination 2	IMA-2-E
11	Well-Child Visits in the First 30 Months of Life – 0 to 15 Months - Six or More Well-Child Visits	W30-6+
12	Well-Child Visits in the First 30 Months of Life – 15 to 30 Months - Two or More Well-Child Visits	W30-2+
13	Developmental Screening in the First Three Years of Life	DEV-CH

14	Topical Fluoride for Children	TFL-CH
#	**Behavioral Health Measures**	**ACRONYM**
15	Follow-Up After ED Visit for Substance Use – 30 days	FUA
16	Follow-Up After ED Visit for Mental Illness – 30 days	FUM

Program Structure

Incentive payments can be earned in the four categories below. Payment amounts cannot exceed your total incentive budget.

Category	Incentive Amount
Category 1: Reaching Minimum Performance Level (MPL) on Target Measures Incentivizes 16 measures grouped into four bundles	**Chronic Health (CBP, GSD):** • Must meet or exceed the MPL on both measures to earn 100% of the bundle budget • If only one measure meets or exceeds the MPL, you earn 60% of the budget • Can earn an additional 25% (in addition to the 60%) for reaching at least the 25th percentile on the second measure **Women's Health (PPC-Pre, PPC-Pst, CHL, CCS-E, BCS-E):** • Must meet or exceed the MPL for at least 3 of 5 measures to earn 100% of the bundle budget • If 2 measures meet or exceed the MPL, you earn 60%; if 1 measure meets or exceeds the MPL, you earn 50% of the budget **Children's Health (WCV, CIS-10-E, IMA-2-E, W30-6+, W30-2+, DEV-CH, TFL-CH):** • Must meet or exceed the MPL for at least 5 of 7 measures to earn 100% of the bundle budget • If 4 measures meet or exceed the MPL, you earn 60%; if 3 measures meet or exceed the MPL, you earn 50%; if 2 measures meet or exceed the MPL, you earn 25% of the budget **Behavioral Health (FUA, FUM):** • Must meet or exceed the MPL on both measures to earn 100% of the bundle budget • If only one measure meets or exceeds the MPL, you earn 60% of the budget • Can earn an additional 25% (in addition to the 60%) for reaching at least the 25th percentile on the second measure
Category 2: Percentage Point Improvement Incentivizes percentage point increase in provider's measure rate when compared with prior year ➢ Target Improvement Rate: >1%	Points are aggregated across 13 of the 16 measures (your 3 lowest scores are excluded). The total points are calculated based on year-over-year (YoY) improvement. An increase of more than 1% from the previous year earns an incentive. Payout cannot exceed your remaining incentive budget.
Category 3: Bonus for Highest Cumulative Performer If program funds remain after Category 1 & Category 2 are paid out to all providers, an additional incentive can be earned for the best performing provider, based on the highest earned MPL percentage.	The top provider can earn up to 5% of the remaining incentive program budget. Payout cannot exceed the remaining program funds. If more than one provider meets this criteria, the total available funds will be divided proportionate to the membership of the providers.

Category 4: Bonus for Most Improvement YoY If program funds remain after Category 3, an additional incentive can be earned for the top provider with the highest YoY total improvement points.	The provider that made the highest improvement from the previous year can earn up to 5% of the remaining incentive program budget. Payout cannot exceed the remaining program funds. If more than one provider meets this criteria, the total available funds will be divided proportionate to the membership of the providers.

We appreciate your continued partnership and commitment to our members in our communities. If you have any questions, please contact Provider Services at providerservices@hpsj.com or call 209.942.6340 and ask to speak to your Provider Services Representative.

Sincerely,

Ana Aranda

Ana Aranda
Director, Delegate & Provider Relations