

FEBRUARY 2026

# MPM PROVIDER QUALITY NEWSLETTER

To access the materials referenced in this newsletter, please go to:

- ▶ <https://www.medpointmanagement.com/provider-resources/>
- ▶ Click on “**Quality Management Information**” and then “**2026 Quality Newsletters.**”
- ▶ All materials are listed in one PDF document.
- ▶ Please also note that MedPOINT’s Reference Guides are available under “**HEDIS 2026 Health Plan Guides and Resources**” and “**MedPOINT Resources**”.



**MedPOINT**  
MANAGEMENT

## Join the MPM Quality Discussion Board!

MPM’s Quality Management Discussion Board has an all-new landing page! Be sure to check out the Discussion Board’s new look here: <https://www.medpointmanagement.com/qm-discussion-board> →

By joining the discussion forum, you can connect with a vibrant community of network providers, clinicians, and staff who are actively involved in exchanging ideas, seeking answers, and discussing optimal strategies for effectively implementing quality measures.

Our platform fosters collaboration and promotes the sharing of best practices to ensure the delivery of high-quality, cost-effective healthcare. The discussion board hosts various topics that you can peruse but be sure to make your own post to make the most of the platform. We look forward to reading and interacting with your discussions!

## Your source for up-to-date information



Standard vs. non-standard supplemental data

Quality Measures



Role of MPM Quality Specialists compared to Health Plan QM Staff Roles

Quality Measures



HEDIS vs. STARS vs. IHA AMP

Quality Measures



Cancer Screening Reporting & CPT-II Codes

Quality Measures  
Coding Tips and Tricks

## Cultural and Linguistics Corner

### Helping Immigrant Patients Stay Covered: Key Medi-Cal Changes for 2026

Starting January 1, 2026, some adult immigrants will no longer be eligible for full-scope Medi-Cal coverage based on their immigration status. This important change will affect a significant portion of California’s immigrant population. Specifically, it will impact:

- ▶ **Undocumented individuals** (those living in the U.S. without legal permission).
- ▶ **Lawfully present immigrants** who are **19 years or older** and not pregnant or postpartum, and who do not meet other qualifying criteria.

With these changes to Medi-Cal eligibility, it's vital that healthcare providers help their patients navigate this shift and ensure they maintain continuous coverage. Trusted healthcare professionals play a critical role in educating patients, assisting with renewals, and ensuring they don't experience gaps in coverage that could affect their access to essential services

## Key Provider Actions

### 1. Remind patients to update their contact information

Patients must make sure the county has their current contact details, so they receive important renewal notices. Encourage patients to:

- Update their phone numbers, mailing addresses, and email addresses with their local county Medi-Cal office. This will help them avoid missing any renewal notifications or deadlines.
- Providers should check with patients during appointments to confirm they have up-to-date information on file.

### 2. Encourage Patients to Watch for Renewal Notices

Patients who are due for renewal will receive a letter from Medi-Cal. This notice will inform them about their eligibility status and next steps.

- Advise patients to look for this letter and check whether they need to complete any forms or provide additional information.
- Remind them that they must respond to these renewal notices promptly to avoid a lapse in coverage.

### 3. Help Patients Create or Check Their Online Account

For easier management of Medi-Cal renewals, patients can access their BenefitsCal online account.

- Encourage patients to create an account or log in to review their eligibility status, sign up for renewal reminders, and submit their renewal forms online.
- By setting up text or email alerts through BenefitsCal, patients can receive timely updates on their Medi-Cal case and renewal dates, making it easier for them to stay on track.

### 4. Assist Patients in Completing Their Renewal Form

If patients receive a renewal form, they must complete it to maintain their Medi-Cal coverage. Here's how you can support them:

- Explain the options for submitting the renewal form: Online (via BenefitsCal.com), by mail, in person, or by phone.
- Remind patients to submit the renewal on time to prevent a gap in their coverage.

- If patients are confused or have questions about the renewal process, provide guidance or refer them to Medi-Cal support resources to ensure they don't miss important deadlines.

### 5. Use Available Tools to Track Renewal Dates

To support patients in staying up to date, make use of the tools provided by your Medi-Cal plan or IPA (Independent Practice Association).

- Some Health Plan Provider Portals may include Medi-Cal renewal due date notifications. An on-screen alert could show when a patient has an upcoming renewal due, which can serve as a helpful reminder during patient visits or outreach.
- Participating Physician Groups (PPGs): On a monthly basis, some Health Plans could provide PPGs with a list of members who are due for renewal. You can contact your PPG to request this data if your practice is not currently receiving it. This information can help providers track renewal deadlines and ensure that patients are reminded of the necessary steps to avoid lapses in coverage.

## To support your immigrant patients:

- **Address concerns** about immigration status by reassuring them that California's protections prevent their data from being shared with immigration authorities.
- **Provide language access support** to ensure all patients fully understand the renewal process.
- **Clarify coverage for mixed-status families**, helping them understand who qualifies for which program.

For more information, please view the follow resources:

<https://www.dhcs.ca.gov/Medi-Cal/Pages/immigration-status-categories.aspx>

[Medi-Cal Renewals/Redetermination | L.A. Care Health Plan \(lacare.org\)](https://www.lacare.org/Medi-Cal-Renewals/Redetermination)

[Home | BenefitsCal. Together, we benefit.](#)



# Initial Health Appointment (IHA) Reports

## Available on the MedPOINT Provider Portal

Comprehensive reports for Medi-Cal members needing an Initial Health Appointment are available on the MedPOINT Provider Portal. The reports will be updated on a monthly cadence and include **ALL Health Plan members**. The task of obtaining multiple reports from the various health plans (i.e., LA Care, Molina, Healthnet, etc.) has been simplified. The lists include the following information to help improve compliance for the IHA metric:

- Member Medi-Cal ID Number
- Member Name

- Member Date of Birth
- Member Age
- Member Phone Number & Address
- Due Date for the IHA
- Countdown of days left till the member is due
- Status of member compliance
  - Due** – priority to schedule
  - Past Due** – continue to schedule as members still need to establish care
  - Completed**

## Access MedPOINT's Provider Portal for IHA Reports

MedPOINT Provider Portal: <https://portal.medpointmanagement.com/sign-in>

Need Access to MedPOINT Portal: <https://portal.medpointmanagement.com/user-request>

Follow steps 1 – 5 to download IHA reports.

The screenshot shows the MedPOINT Provider Portal interface. The navigation bar at the top has a 'Documents' dropdown menu highlighted with a red box and a yellow circle labeled '1'. Below the navigation bar, there is a search bar with 'My Documents' highlighted with a red box and a yellow circle labeled '2'. On the left side, there is a 'Categories' sidebar with 'IHA Member Reports (1)' highlighted with a red box and a yellow circle labeled '3'. In the center, there is a table with columns: Select, Type, Status, Category, Sent To, and Description. The first row is highlighted with a red box and a yellow circle labeled '4'. The table contains one row: 

Select	Type	Status	Category	Sent To	Description
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	IHA Member Reports	Provider/Clinic/FQHC Name	IHA Member Report

Below the table, there is a download button for the selected report, highlighted with a red box and a yellow circle labeled '5'. The download button is labeled 'Download this attachment.' and has a 'Sent Date' of 2025-07-22.

## Tips for Meeting the IHA Requirement

- Complete the IHA within 120 days or specified due date of member's effective date with the health plan, and code for all applicable services.
- NOTE: You may complete and code for the IHA as applicable during a sick visit.
- The IHA can be administered over the course of multiple visits, provided that all components are completed within 120 days or specified due date.

## What Provider Offices Need to Know

- Use standardized documentation to make it is easier to gather and track information.
- Send in complete and accurate CPT codes.
- Contact members shown on your monthly IHA Member Reports whom you have not yet seen. Document all outreach attempts to schedule the IHA in the member chart.
- If a member, parent, guardian or case worker submits a request for preventive services, an appointment must be made for a visit to take place within 10 working days.
- Members with unsuccessful IHA completions require a minimum of three documented outreach attempts. Examples could include a phone call, letter or postcard.

For additional questions, please contact the MedPOINT Quality Management Team.

☎ 818.702.0100 ext. 1353    ✉ [QualityMeasures@medpointmanagement.com](mailto:QualityMeasures@medpointmanagement.com)

## (IMA-2-E) Immunizations for Adolescents Combo 2

Comprehensive reports for Medi-Cal members needing The U.S. Department of Health and Human Service and Centers for Disease Control released the updated Childhood Immunization Schedule in January 2026.

What do these changes mean for the Immunizations for Adolescents Combo 2 (IMA-E) Metric as it relates to the Medi-Cal Managed Care Accountability Set (MCAS) released by the California Department of Health Care Service (DHCS) for Measurement Year (MY) 2026 | Reporting Year (RY) 2027?

The simple answer is no changes for calculating quality performance. Please refer to MedPOINT's Quality Tipsheet attached for measure specific details.

## 💡 Tips to Improve HEDIS® Scores

- Use the California State Immunization Registry (CAIR) to register immunizations: <https://cair.cdph.ca.gov>
- California Assembly Bill **(AB) 1797**, effective January 1, 2023, requires Providers to enter immunizations and TB tests, into the California immunization registry.
- Review adolescents' immunization record before every visit and administer needed vaccines.
- Recommend immunizations to parents. It is helpful to recommend the HPV vaccine at the same time you recommend other vaccines. Parents are more likely to agree with vaccinations when supported by the provider.
- Address common misconceptions about vaccinations.
- Have a system for patient reminders.
- Schedule follow-up appointments for additional doses (for example, HPV) at the time of the initial vaccination. If unable to schedule a follow-up appointment, add patient to a recall list.
- Transcribe vaccine(s) into CAIR even if your office did not provide the vaccine(s).



Additional information released by the CDC can be found here: [Childhood Immunization Schedule by Recommendation Group | HHS.gov](#).



## HEDIS Measure Highlight: Colorectal Cancer Screening

Colorectal cancer is one of the leading causes of cancer-related deaths, but early detection through screening can significantly improve treatment outcomes.

### Measure Description:

The percentage of members 45 to 75 years of age who had appropriate screening for colorectal cancer.

### Line of Business:

- ▶ Medi-Cal \***NEW** MCAS Measure added for MY2026
- ▶ Medicare
- ▶ Commercial

### Potential screening methods include:

- ▶ Guaiac-based fecal occult blood test (gFOBT) – annually
- ▶ Fecal immunochemical test (FIT) – annually
- ▶ Multitargeted stool DNA with FIT test (sDNA FIT) – 3 years
- ▶ CT colonography – 5 years
- ▶ Flexible sigmoidoscopy – 5 years
- ▶ Colonoscopy – 10 years

Tests are used to screen for different types of cancer when a person does not have symptoms. Studies show that some screening tests for colorectal cancer help find cancer at an early stage and may decrease the number of deaths from the disease.

### Common Barriers:

- ▶ Members refuse screenings.
- ▶ Labs unable to process specimens (i.e., submitted too late, missing information, specimen collection not adequate).
- ▶ Historical data not received (i.e., colonoscopies).
- ▶ Providers who process FOBT kits in clinic need to improve documentation by specifying it is not a DRE.
- ▶ Very large volume of members in this metric.
- ▶ Access to GI Providers for completion of a colonoscopy is challenging.



### How is MedPOINT Management helping with improvement?

- ▶ Assist in ad-hoc campaigns with the various health plans.
- ▶ MPM completes text messaging/live outreach call campaigns to members and assists with appointment scheduling.
- ▶ MPM provides focused lists throughout the year to providers so members can be contacted and scheduled.
- ▶ MPM completes data digs to find compliant records not received via claims/encounters and uploads to Cozeva.
- ▶ MPM developed and will distribute MY2026 HEDIS Placemats, Comprehensive HEDIS Guides, and Measure Tip Sheets.
- ▶ MPM Completes data reconciliation to ensure MPM's data matches Health Plan's data.

### Tips to improve quality rates:

- ✔ Update patient history annually regarding colorectal cancer screening (test done and a date).
- ✔ Encourage patients who are resistant to having a colonoscopy to have a stool test that they can complete at home.
- ✔ Use standing orders and empower office staff to distribute FOBT and FIT kits to patients who need colorectal cancer screening or prepare referral for colonoscopy.
- ✔ Clearly document patients with ileostomies, which implies colon removal (exclusion), and patients with a history of colon cancer (more and more frequent).
- ✔ Upload records into Cozeva or send a supplemental file to MedPOINT.

Sources:

[Colorectal Cancer Screening - NCI](#)

[Recommendation: Colorectal Cancer: Screening | United States Preventive Services Taskforce](#)

[Screening for Colorectal Cancer | Colorectal Cancer | CDC](#)

FEBRUARY IS

# National American Heart Awareness Month

February is American Heart Month the time to raise awareness about heart disease, which is the leading cause of death for both men and women in the United States. Providers can help educate patients on early medical interventions to promote heart health, discuss the importance of making healthy lifestyle choices to lower the risk of cardiovascular problems, and the importance of high-quality care.

Cardiovascular disease, including high blood pressure, coronary heart disease, heart failure, and stroke continues to impact millions. High blood pressure is a leading cause of heart disease. Nearly half of U.S. adults have high blood pressure, which puts them at risk for heart disease and stroke. Only 1 in 4 people with high blood pressure have it under control. Comprehensive and coordinated patient care and management strategies are essential to help improve patient outcomes.

Providers can make an impact by requesting routine lab work as part of preventive care guidelines. As a health care professional, you can empower patients to take

their medications as prescribed. Medication adherence is critical to successful hypertension control for many patients. Effective two-way communication is critical; in fact, it doubles the odds of your patients taking their medications properly. Try to understand your patients' barriers and address them honestly to build trust.

Ongoing treatment and follow-ups are critical. Providers can support patients by emphasizing medication adherence, coordinating referrals to specialty care or support services when needed, and encourage regular monitoring.

American Heart Month serves as a reminder that small, consistent actions within everyday practice can lead to great improvements in public health.

Sources:

[American Heart Month Communications Toolkit | Heart Disease | CDC](#)

[American Heart Month | American Heart Association](#)

[Go Red for Women Wear Red and Give | Go Red for Women](#)

[Heart Health Month - The Heart Foundation](#)



## February Resources:

### ▶ **2026 Provider Webinar Series Opportunities:**

Lunch and learn series focused on physician communication, patient access and experience. For more information on how to register, this flyer will be attached to our MPM newsletter.

▶ **Health Net Mandatory Training Notice Due March 31st, 2026:** All Medi-Cal Providers serving Patients 21 years old and younger is required to complete this training. For Providers with a Relias Account click this link to complete your training: [Relias Authentication](#). For Providers with out an account please refer to this link: [Qumu - Registration](#). If you have taken this training through a separate HP please provide proof of completion to this link: [Qualtrics Survey | Qualtrics Experience Management](#). For questions about this training, please email: [partnersinperformance@healthnet.com](mailto:partnersinperformance@healthnet.com).

▶ **A Special CEO Message (CAHPS Impact):** from IEHP to all PCP's and IPAs, IEHP invites you to watch a special video from CEO Jarrod McNaughton, which highlights the importance of the annual Consumer Assessment of Healthcare Providers and Systems (CAHPS). To find more information this document will be attached to our MPM Newsletter.

▶ **Advancing Equitable Care – for patients with disabilities:** With L.A. Care discuss organizational and systems barriers in the care of persons with disability, identify inclusive care practices to improve health outcomes, and describe effective communication strategies, employing disability etiquette, to ensure respectful interactions to meet the healthcare needs of persons with disability. To locate this document for more information this will be posted on our MPM website.

▶ **Provider Training Guide for All Plan Letter 25-016:** Alternative format selection for members with visual impairments. Understanding APL 25-016, Effective communication requirements, how to provide accessible documents, Alternative format vendors, how to provide accessible websites, and additional training and resources. You can locate this document on our MPM website.

▶ **Department of Health Care Services:** To all Medi-Cal Managed Care Health plans, Initial Health Appointment – the purpose, background, and policy. To locate this document, you can find this posted on the MPM website.

▶ **IHA Audit Components:** All Members, and source for more information this will be posted on our MPM website.

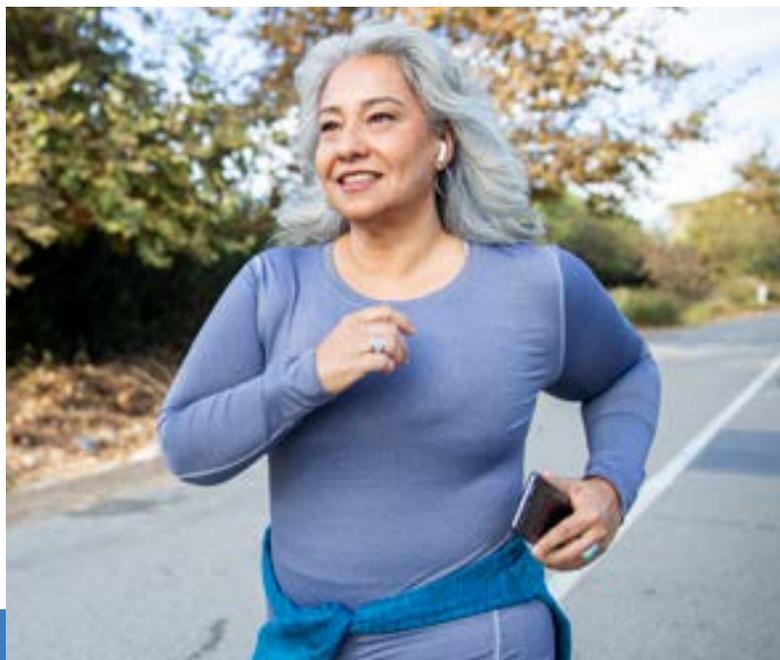
▶ **IHA Training PowerPoint:** What is an IHA, Components and Requirements of an IHA, Providers who can complete an IHA, Providers Office Responsibility, and Codes for completion of an IHA. To locate this PowerPoint, you will find it on our MPM website.

▶ **Initial Health Appointment Reference Guide for PCPs':** To view this document this can be found on our MPM website.

▶ **Initial Health Appointment (IHA) Requirement for Newly Enrolled Medi-Cal Members:** L.A. Care Health Plan (L.A. Care) appreciates the primary care you provide our members. The purpose of this letter is to provide additional information regarding the requirement to complete an Initial Health Appointment (IHA) for your assigned members enrolled in Medi-Cal through the L.A. Care. As you know, the IHA allows members and their Primary Care Physician (PCP) to meet, identify, and address current care needs, and establish a working partnership to manage the member's health. This document is posted on our MPM website for more information.

▶ **2026 Annual PPG Training Initial Health Appointments, Monitoring and Compliance:** To View this PowerPoint, it will be posted on our MPM website.

▶ **February 2026 Behavioral Health/ ACE's Training Series:** Join Health Net's educational webinars and earn Continuing Education (CE) hours. Add these trainings on Adverse Childhood Experiences, Trauma informed Care, Social Determinants of Health and more to your 2026 calendar. For more information please click this link: [CalAIM Resources for Providers | Health Net](#).



# 2026 Provider Webinar Series Opportunities

Lunch and Learn Series focused on physician communication, patient access and experience

Register Now



**Who should attend:**  
Staff, Managers and Clinicians



Topic	Date	Link
 A Better Care Experience with A.I.M.	Tuesday, 2/24 11:30am-12:30pm	<a href="#">Register Here</a>
 Aligning Patient and Clinician Expectations – Negotiating with Patients	Thursday, 2/26 11:30am-12:30pm	<a href="#">Register Here</a>
 Managing For Service Excellence	Tuesday, 3/3 11:30am-12:30pm	<a href="#">Register Here</a>
 Managing Challenging Patient Situations	Thursday, 3/5 11:30am-12:30pm	<a href="#">Register Here</a>
 Patient Access: Facing Reality – Balancing Appointment Supply with Appointment Demand	Tuesday, 3/10 11:30am-12:30pm	<a href="#">Register Here</a>
 Thriving in a Busy Practice – Avoiding “Burnout”	Thursday, 3/12 11:30am-12:30pm	<a href="#">Register Here</a>
 Improving Service Excellence Through Successful Telephone Communication	Tuesday, 3/17 11:30am-12:30pm	<a href="#">Register Here</a>

30 Years  
IEHP

# A Special CEO Update

CEO Office Communication

**To:** PCPs & IPAs  
**From:** IEHP – Jarrod McNaughton, CEO  
**Date:** February 11, 2026  
**Subject:** A Special CEO Message: CAHPS Impact

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Greetings Providers!

We invite you to watch a special video from CEO Jarrod McNaughton, which highlights the importance of the annual Consumer Assessment of Healthcare Providers and Systems (CAHPS).

The CAHPS Survey is underway now through May 2026 and impacts both provider and health plan ratings. Together, we have the opportunity to improve our members' perceptions of their care.

Please click [here](#) to view this message, or if you are receiving this via fax, you may scan the QR code with a mobile device or access the communication via our Notices page: [www.providerservices.iehp.org](http://www.providerservices.iehp.org) > News and Updates > Notices



Thank you for all you do to deliver quality care to our community. Please don't hesitate to share with your Provider Relations Manager how together, we can improve Member experience and CAHPS.

If you have any questions, please contact the IEHP Provider Call Center at (909) 890-2054, (866) 223-4347 or email [ProviderServices@iehp.org](mailto:ProviderServices@iehp.org)

All IEHP communications can be found at: [www.providerservices.iehp.org](http://www.providerservices.iehp.org) > News and Updates > Notices

## Quality Performance for Timely Completion of All Vaccines is Measured

### Measure Description

Members 13 years of age who received the following vaccines on or before their 13th birthday:

Description	Age Range
(1) Meningococcal ^	Must be completed on or between the 10 <sup>th</sup> and 13 <sup>th</sup> birthday
(1) Tdap	Must be completed on or between the 10 <sup>th</sup> and 13 <sup>th</sup> birthday
(2) or (3) Human Papillomavirus Vaccine (HPV)	Must be completed on or between the 9 <sup>th</sup> and 13 <sup>th</sup> birthday <b>2 Dose:</b> There must be at least <b>146</b> days between the first and second dose of HPV vaccines.

### Codes to Identify Adolescent Immunizations

Description	Codes
Meningococcal ^	CPT: 90619, 90623, 90624, 90733, <b>90734</b>
Tdap	CPT: <b>90715</b>
Human Papillomavirus (HPV)	CPT: 90649, 90650, <b>90651</b>

(^) Not part of the CDC Immunization Recommended Schedule for 2026, but quality performance is inclusive of vaccine.

**Completed vaccine declination form(s) will NOT make a member compliant.**

**All vaccines must be administered timely.**

## Tips to Improve HEDIS® Scores

- Use the California State Immunization Registry (CAIR) to register immunizations: <https://cair.cdph.ca.gov>
- California Assembly Bill [\(AB\) 1797](#), effective January 1, 2023, requires Providers to enter immunizations and TB tests, into the California immunization registry.
- Review adolescents' immunization record before every visit and administer needed vaccines.
- Recommend immunizations to parents. It is helpful to recommend the HPV vaccine at the same time you recommend other vaccines. Parents are more likely to agree with vaccinations when supported by the provider.
- Address common misconceptions about vaccinations.
- Have a system for patient reminders.
- Schedule follow-up appointments for additional doses (for example, HPV) at the time of the initial vaccination. If unable to schedule a follow-up appointment, add patient to a recall list.
- Transcribe vaccine(s) into CAIR even if your office did not provide the vaccine(s).

