

Med-QUEST Division
Pay-for-Performance Hospital Quality Program
September 17, 2026



Meeting Logistics

- This meeting will be recorded
- Slides will be emailed to hospitals after today's meeting
- Questions during the meeting?
 - Use Teams to raise your hand at any time or type your question in the chat
- Questions after the meeting?
 - Email mqdcso_inquiries@dhs.hawaii.gov with the Subject Line – **Hospital Quality**. You should also include one of the following Milliman addresses:
 - HSDF: HI.MQD.Quality.HSDF@milliman.com
 - All other measures: HI.MQD.Quality@milliman.com



Agenda

- HSDF FAQ
- 2027 Memo Overview
- Next Steps, Reminders, & Questions



HSDF FAQ



Q3 REaL Data Submission

- Healthy Hawai'i HRSN Screening Q3 data submission due **November 2nd** will include the additional Race Ethnicity and Language (REaL) data
- We are sharing question from hospitals as they develop their file submission:
 - How should we map cases where a patient indicates “unknown” for our race/ethnicity screening?
 - If a member has an “unknown” race/ethnicity, please use [REaL Value Lookup] ‘RE900’ for Race “Other” and Ethnicity “Other”
 - How should we map cases where a patient leaves blank our race/ethnicity screening?
 - If a member leaves the race/ethnicity response blank and a “Decline” option is not available, the “Decline” option is a reasonable mapping. Please use [REaL Value Lookup] ‘RE901’ for Race “Decline” and Ethnicity “Decline”
 - Our system has many more Race options than the OMB standard and we are unsure of the appropriate mapping. In these cases, is “Other” an appropriate option?
 - Yes, please use [REaL Value Lookup] ‘RE900’ for Race “Other” and Ethnicity “Other” when mapping is unclear. Please use the optional text field to document patient response.



2027 MEMO OVERVIEW

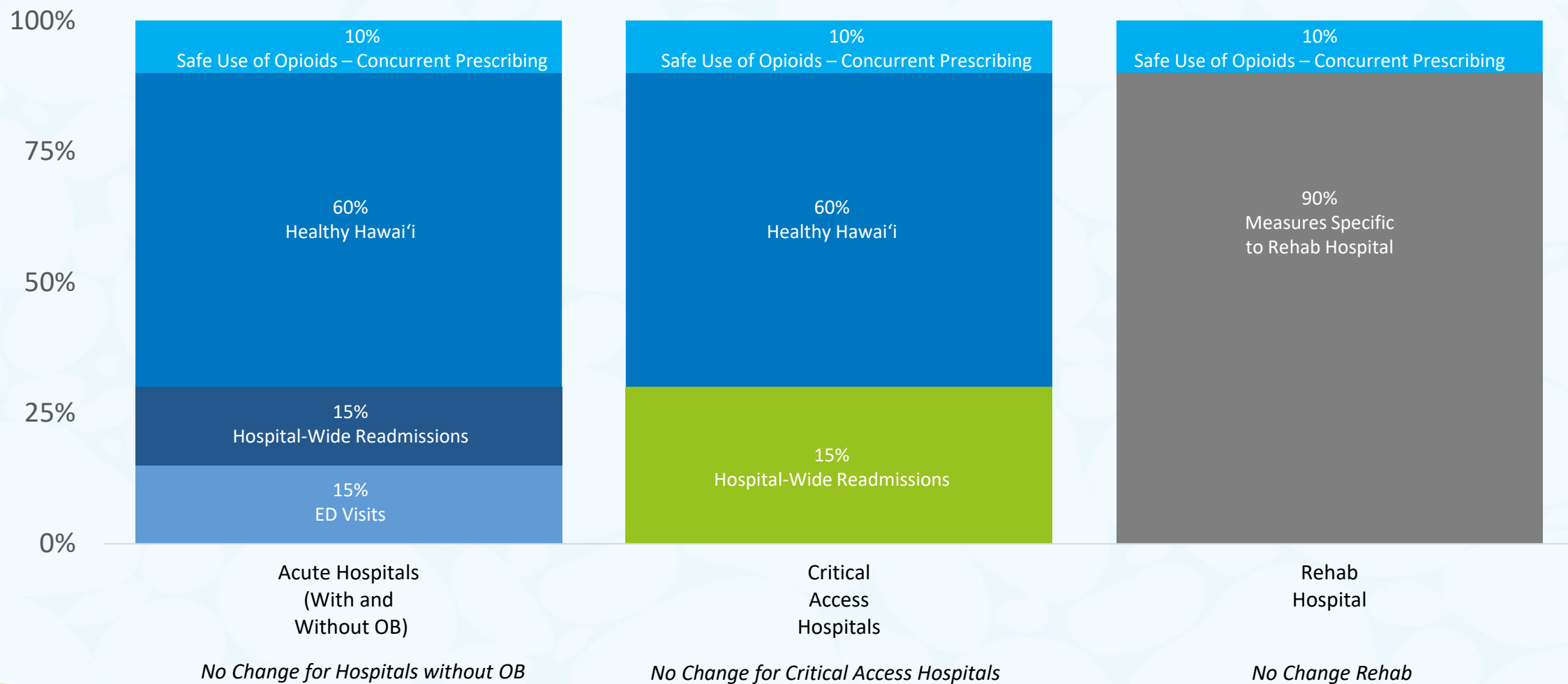


2027 P4P Program – Goals & Vision

- Align on program design and deliver finalized memo to participating hospitals by December 2026.
- Simplify program administration and improve transparency to reduce reporting burden across participants.
- Strengthen alignment between the Medicaid Hospital Global Budgets and the Medicaid P4P program to create a win-win definition of "successfully paying for care differently."
- Prepare for 2028 and future program evolution by enhancing measure auditability, evaluating refinements to measure methodology, and expanding the program's focus on avoidable utilization, including waitlist days.

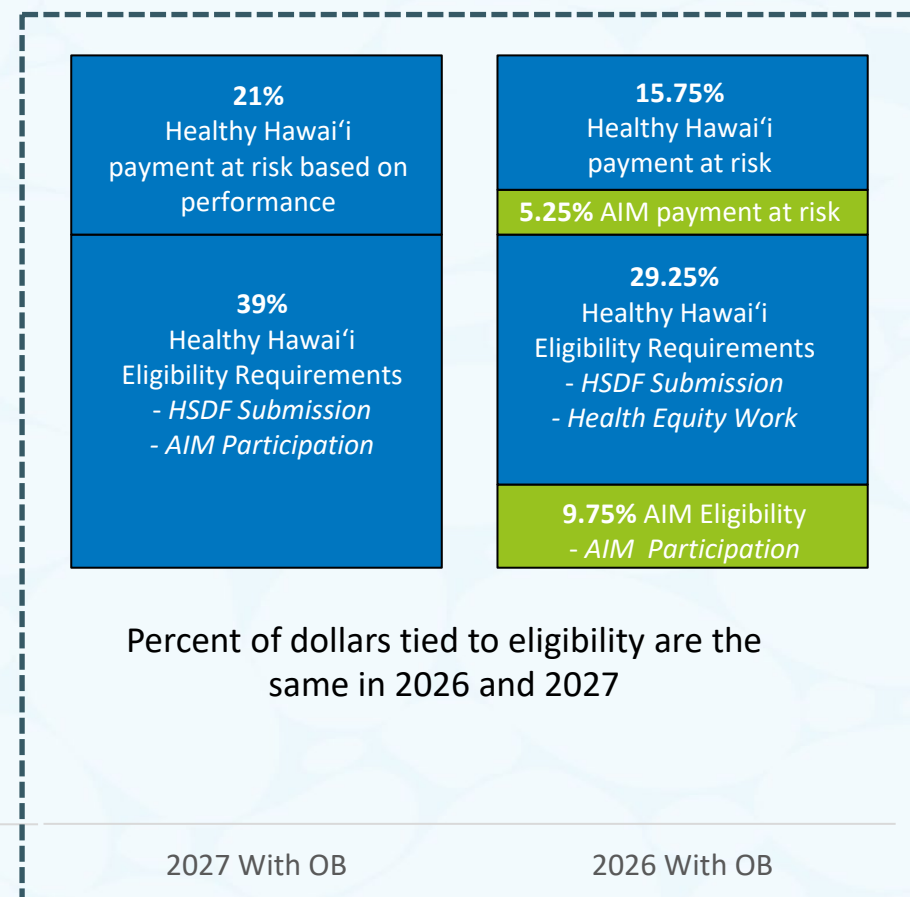
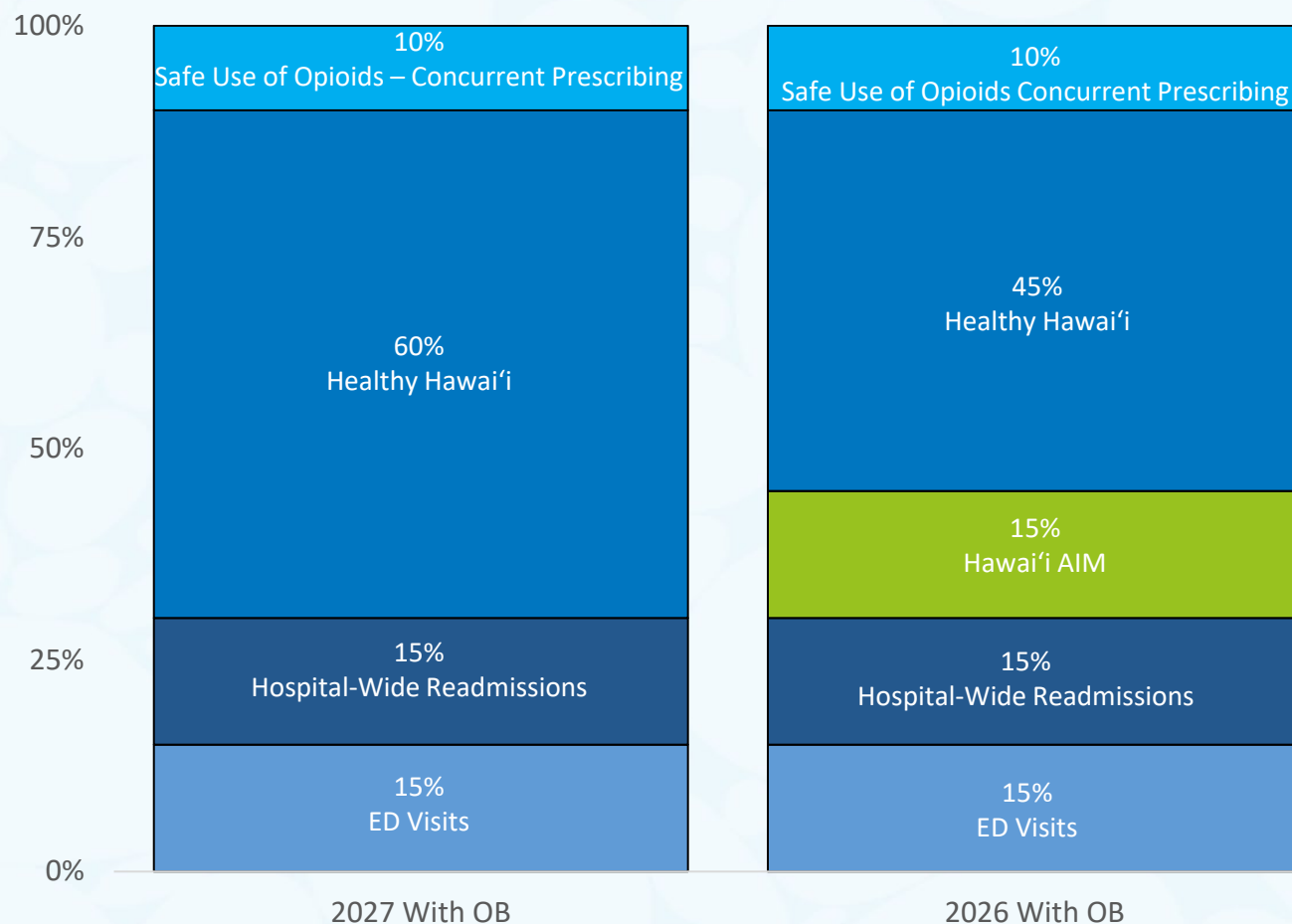


Measure Weights in 2027



Hospitals with OB 2027 vs 2026

Measure Weights



Measure 1: Reduce ED Visits

Data tracked by HAH

Eligible Hospitals: Private and HHSC Hospitals with OB, Private and HHSC Hospitals without OB

Measure weight: 15% for eligible hospitals

- The methodology in 2027 will remain consistent with prior years to maintain stability.
- MQD to explore approaches to improve auditability.

Reporting Activity	Due Date	Delivered By	Data Source	Tied to Interim Payments
MP Q1 (1/1/27 - 3/31/27) & FFQP (4/1/2026 - 3/31/2027) Data Reporting	06/30/2027	HAH	DataGen	N
MP Q2 (4/1/27 - 6/30/27) & FFQP (7/1/2026 - 6/30/2027) Data Reporting	09/30/2027	HAH	DataGen	N
MP Q3 (7/1/27 - 9/30/27) & FFQP (10/1/2026 - 9/30/2027) Data Reporting	12/31/2027	HAH	DataGen	N
MP Q4 (10/1/27 - 12/31/27) & FFQP (1/1/2027 - 12/31/2027) Data Reporting	03/31/2028	HAH	DataGen	N
MP Annual (1/1/27 - 12/31/27) Data Reporting	03/31/2028	HAH	DataGen	N



Measure 2: Reduce Hospital-Wide Readmission

Data tracked by HAH

Eligible Hospitals: Private and HHSC Hospitals with OB, Private and HHSC Hospitals without OB

Reporting Hospitals: Critical Access Hospitals (CAH), Rehab

Measure weight: 15% for all eligible hospitals

- The methodology in 2027 will remain consistent with prior years to maintain stability.
- MQD to continue to collaborate with HAH and hospitals on measure methodology.
- MQD to explore approaches to improve auditability.

Reporting Activity	Due Date	Delivered By	Data Source	Tied to Interim Payments
Q1 (01/1/27 - 03/31/27) Data Reporting	06/30/2027	HAH	DataGen	N
Q2 (04/1/27 - 06/30/27) Data Reporting	09/30/2027	HAH	DataGen	N
Q3 (07/1/27 - 09/30/27) Data Reporting	12/31/2027	HAH	DataGen	N
Q4 (10/1/27 - 12/31/27) Data Reporting	03/31/2028	HAH	DataGen	N
Annual Report (1/1/27 - 12/31/27) Data Reporting	03/31/2028	HAH	DataGen	N



Measure 3: OP-18

Time from ED Admit to Discharge

Data tracked by CAH Hospitals
and reported via template

Eligible Hospitals: Critical Access Hospitals (CAH)

Measure weight: 30% for all eligible hospitals

- OP-18 measure will continue this year as a pay-for-performance measure.
- Emergency Care Access and Timeliness (ECAT) reporting is added as an eligibility requirement with the goal of transitioning to pay-for-performance in 2028.

Reporting Activity	Due Date	Delivered By	Data Source	Tied to Interim Payments
ECAT Q1 Data Report (1/1/27 – 3/31/27)	4/30/2027	Hospitals	Hospitals	N
ECAT Q2 Data Report (4/1/27 – 6/30/27)	7/30/2027	Hospitals	Hospitals	N
ECAT Q3 Data Report (7/1/27 – 9/30/27)	10/29/2027	Hospitals	Hospitals	N
ECAT Q4 Data Report (10/1/27 – 12/31/27)	1/31/2028	Hospitals	Hospitals	N
OP-18 Time from ED Admit to Discharge: Annual (1/1/27 - 12/31/27) Data Reporting	3/31/2028	Hospitals	Hospitals	N



Measure 4: Healthy Hawai‘i

HRSN and REaL Screening Rates

Hospitals submit HSDF and
MQD calculates rate

Eligible Hospitals: Private and HHSC Hospitals with OB, Private and HHSC Hospitals without OB, Critical Access Hospitals (CAH)

Reporting Hospitals: Rehab

Measure weight: 60% for all eligible hospitals

- Institute of Healthcare Improvement (IHI) Health Equity Assessment component has been discontinued.
- Electronic Health Record (HER) workflow change components are not included following completion of implementation in 2026.
- Payout determination is based on completion rates for HRSN 15-17 years, HRSN 18+ years, and REaL 15+ years.

HRSN (15-17 Years)	HRSN (18+ Years)	REaL (15+ Years)	Payout
50%+	70%+	70%+	100%
25%+	50%+	50%+	85%
10%+	10%+	10%+	75%
<10%	<10%	<10%	65%



Measure 4: Healthy Hawai'i

PQC Eligibility Requirements (Hospitals with OB Only)

- Perinatal Quality Collaborative (PQC) requirements are now included as a part of this measure for hospitals with O/B
 - 4.a: Hospitals must actively participate in **80%** of the Hawai'i Perinatal Quality Collaborative (PQC) meetings.
 - 4.b: **Quarterly check-ins** with the PQC Program Manager to discuss any implementation challenges and success stories.
 - 4.c: Submission of Medicaid data for the hemorrhage, hypertension, and care for pregnant/postpartum people with substance use disorder bundles.
 - 4.d: Hospitals must submit a CY 2027 progress summary report by **3/31/2028**.

- *If eligibility requirements **are met**, a hospital will earn 65%, 75%, 85% or 100% depending on 2027 Medicaid managed care performance.*
- *If eligibility requirements **are not met**, a hospital will earn 0% payment.*



Measure 4: Healthy Hawai‘i

HSDF Submission Eligibility Requirement

Reporting Activity	Due Date	Delivered By	Data Source	Tied to Interim Payments
4.e Q1 (1/1/27 - 3/31/27) HRSN Data Reporting w/ Appendix A & C REaL	04/30/27	Hospitals	Hospital EMR	Y - Fall 2026
4.e Q2 (4/1/27 - 6/30/27) HRSN Data Reporting w/ Appendix A & C REaL	07/30/27	Hospitals	Hospital EMR	Y - Fall 2026
4.e Q3 (7/1/27 - 9/30/27) HRSN Data Reporting w/ Appendix A & C REaL	10/29/27	Hospitals	Hospital EMR	Y - Winter 2026/2027
4.e Q4 (10/1/27 - 12/31/27) HRSN Data Reporting w/ Appendix A & C REaL	01/31/28	Hospitals	Hospital EMR	Y - Winter 2026/2027

- *If eligibility requirements **are met**, a hospital will earn 65%, 75%, 85% or 100% depending on 2027 Medicaid managed care performance.*
- *If eligibility requirements **are not met**, a hospital will earn 0% payment.*



Measure 5: Measures Specific to Rehab Hospital

Data tracked by Hospital
and reported via template

Eligible Hospitals: Rehabilitation Hospital of the Pacific
Measure weight: 90% for all eligible hospitals

- The measure will remain consistent with the prior year methodology.
- Rehab will continue to track readmissions reporting under Measure 2 and submit REaL data under Measure 5 as eligibility requirements.

Reporting Activity	Due Date	Delivered By	Data Source	Tied to Interim Payments
Annual Report	3/31/2028	Hospitals	Hospitals	N



Measure 6: Safe use of Opioids - Concurrent Prescribing

Data tracked by Hospitals and reported via template

Eligible Hospitals: Private and HHSC Hospitals with OB, Private and HHSC Hospitals without OB, Critical Access Hospitals (CAH), Rehab

Measure weight: 10% for all eligible hospitals

- The methodology in 2027 will remain consistent with 2026 to maintain stability.
- No need for baseline submission in 2027 since that data will be collected as the annual report under the 2026 program.

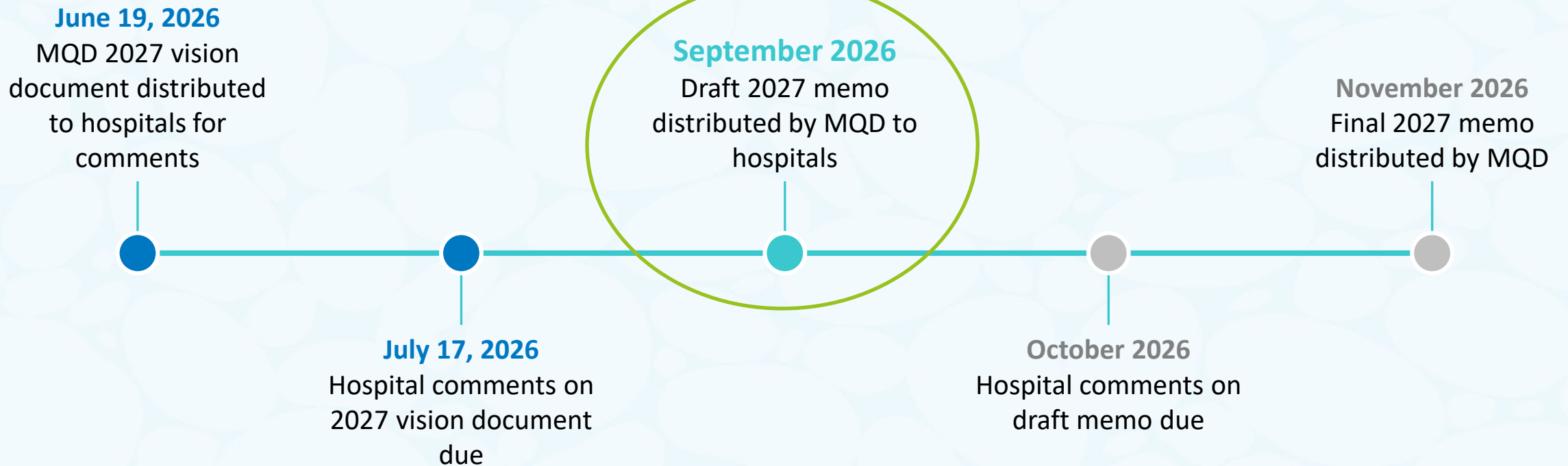
Reporting Activity	Due Date	Delivered By	Data Source	Tied to Interim Payments
Annual (1/1/27 - 12/31/27) Data Reporting	3/31/2028	Hospitals	Hospital EMR	N



NEXT STEPS & REMINDERS



2027 P4P Program – Next Steps



● Complete

● In Progress

● Not Started



Upcoming Q4 Deliverables – 2026 P4P Program

Reporting Element	Due Date (as specified in 2026 Memo)	Submission Process
Measure 5: Healthy Hawai'i HRSN Screening Q3 (7/1/26 - 9/30/26) HRSN Data Reporting w/ Appendix A& C REaL	11/02/26	Hospitals submit via MFT
Measure 1: Reduce ED Visits for Medicaid Managed Care with 4 or more Visits MP Q2 (4/1/26 - 6/30/26) & FFQP (7/1/2025 - 6/30/2026)	12/29/26	HAH to send data to MQD
Measure 2: Q2 Reduce Hospital-Wide Readmission Rates for Medicaid Managed Care Members	12/29/26	HAH to send data to MQD
Measure 5: Domain Element Completion	12/31/26	Hospitals to submit to HAH
Measure 5: Updated roadmap and IHI assessment	12/31/26	Hospitals to submit to HAH



A photograph of a lush field of taro plants. The plants feature large, vibrant green, heart-shaped leaves with prominent veins. The leaves are densely packed, creating a thick canopy. In the background, some dark, vertical stalks and a small body of water are visible. The word "Mahalo!" is written in a large, white, sans-serif font across the middle of the image.

Mahalo!