



Skilled Nursing Facility Workforce & Quality Incentive Program (WQIP)



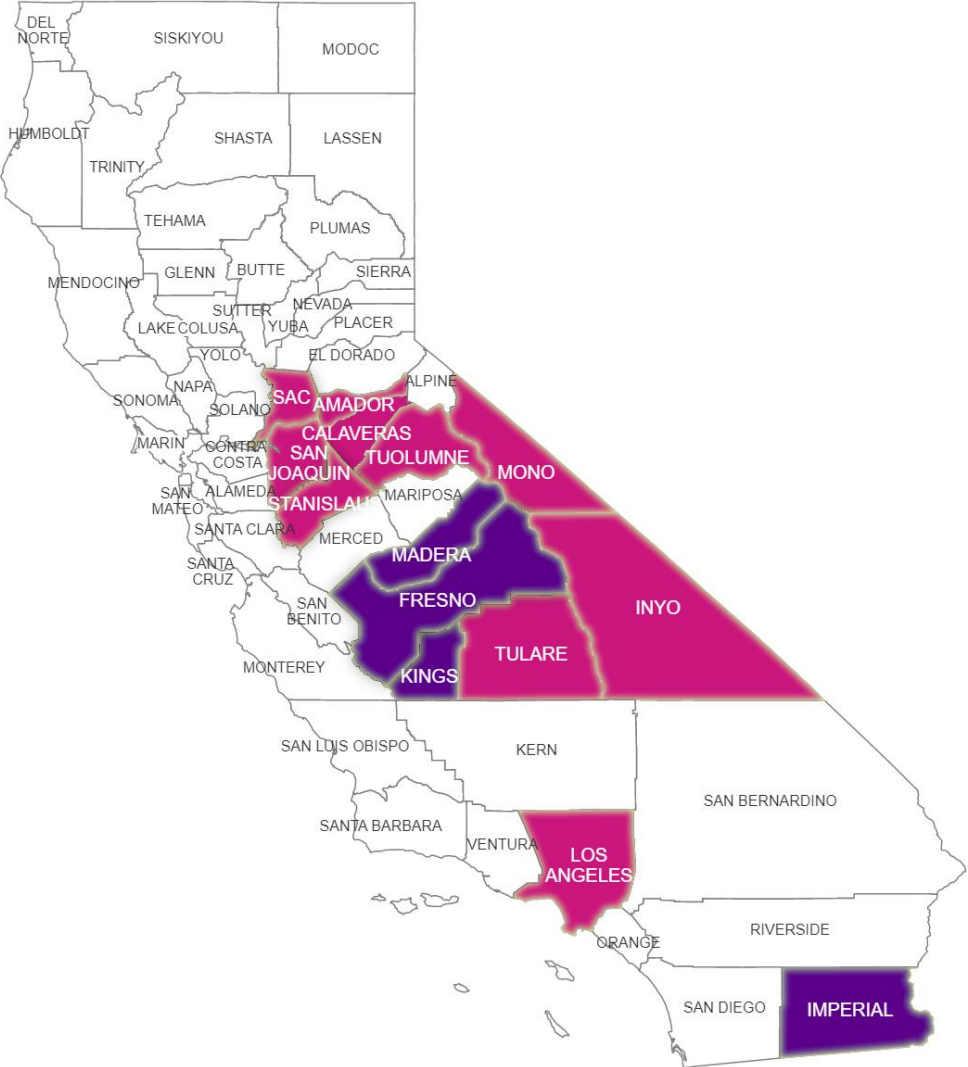


Health Plans We Support



Notice: CalViva Health is a licensed health plan in California that provides services to Medi-Cal enrollees in Fresno, Kings and Madera counties. CalViva Health contracts with Health Net Community Solutions, Inc. to provide and arrange for network services. Community Health Plan of Imperial Valley is a licensed health plan in California that provides services to Medi-Cal enrollees in Imperial County. Community Health Plan of Imperial Valley contracts with Health Net Community Solutions, Inc. to provide and arrange for network services. *Health Net Community Solutions, Inc. is a subsidiary of Health Net, LLC and Centene Corporation. Health Net is a registered service mark of Health Net, LLC. All other identified trademarks/service marks remain the property of their respective companies. All rights reserved.

Health Net Medi-Cal Footprint



-  Health Net Community Solutions
Direct Contract with DHCS
-  CalViva Health
(Madera, Fresno and Kings Counties)
-  Community Health Plan of Imperial Valley (Imperial County)

Health Net Team

Health Net team supporting SNF WQIP

| | |
|-----------------|---------------------------------------------------|
| Ed Mariscal | Director, Population Health |
| Ciara Thomas | Supervisor, Long Term Care |
| Lori McBride | Lead Care Manager |
| Celine Rangel | LTSS Service Care Manager |
| William White | LTSS Service Care Manager |
| Andrea Franklin | LTSS Service Care Manager |
| Pamela Furtado | LTSS Service Care Manager |
| David Tran | Senior Manager, Contracting & Network Development |
| Talia McIlwain | Provider Engagement Account Manager |

To reach the team – email LTSS_Liaison@HealthNet.com



Background

The Department of Health Care Services (DHCS) published All-Plan Letter (APL) 25-002 on January 13, 2025.

Pursuant to the APL, Health Net hosted a webinar on May 13, 2025, with a second webinar today, October 21, 2025, for all skilled nursing facilities. We are inviting WQIP-eligible network providers and out of network providers.

Resources:

[APL 25-002](#) – All Plan Letter

[SNF WQIP](#) – DHCS SNF WQIP Website



Eligible Network Providers & Bed Days

SNF WQIP-Eligible Network Providers: Qualifying Freestanding SNF Level-B and Adult Freestanding Subacute Facility level-B facilities eligible to participate in the Medi-Cal program and that furnish services under a Network Provider Agreement are eligible.

Bed Days: Qualifying bed days are calendar days during which a Member receives SNF level-B services inclusive of the first day of the Member's stay and **excluding the day of discharge** unless it is also the first day of stay, rendered during the PY and billed under a Network Provider Agreement with our health plan.

SNF Level-B services are defined in Title 22 CCR §51123(a), 51511(b), 51535 and 51535.1. They include the following:

- SNF Services as set forth in Title 22 CCR §51123:
 - ✓ Room and board
 - ✓ Nursing and related care services
 - ✓ Commonly used items of equipment, supplies and services as set forth in Title 22 CCR §51511(b)
- Leave of absence days
- Bed hold days

Exclusions: *Freestanding pediatric subacute care facilities, intermediate care facilities for the developmentally disabled homes, distinct part facilities, and SNFs with 100% designated special treatment program beds are not eligible for SNF WQIP. Hospice bed days are not qualified for SNF WQIP. Bed days for which Medi-Cal is a secondary payer or bed days reimbursed through Medi-Cal FFS are not qualified for SNF WQIP.*



Program Year 1 (CY 2023) Review

WQIP Metrics

To evaluate the quality of care within SNFs, DHCS established the following domains and measurement areas:

- Workforce
 - Staffing hours
 - Staffing Turnover
- Clinical
 - MDS
 - Claims-Based Metrics
- Equity
 - Medi-Cal Disproportionate Share
 - MDS Racial and Ethnic Data

Program Year 1 (CY 2023) Review

Data Sources

- Payroll Based Journal (PBJ) Data
- Care Compare Metrics Data
- MDS 3.0
- Audited Claims-Based Metrics
- Medi-Cal Bed Day Data
- California Health & Human Services
- A/AA Citation Data

For specific information on how the metrics were calculated, please review the 2023 Technical Program Guide by DHCS

[Skilled Nursing Facility Workforce & Quality Incentive Program: 2023 Technical Program Guide](#)

Program Year 1 (CY 2023) Review

DHCS released first interim data and payments to our health plan on **March 29, 2024**. Separate data was sent to Health Net, CalViva Health and California Health & Wellness. All data was shared manually by the LTSS Liaison team to our SNF contacts.

DHCS released second interim payment exhibit to our health plans on **June 21, 2024**.

DHCS released final per diem exhibits identifying the final per diem reimbursement for each facility on **December 20, 2024**.

All final payments to SNF WQIP-eligible Network Providers were issued **January 31, 2025**. Separate payments were made by Health Net, CalViva Health and California Health & Wellness.



Program Year 2 (CY 2024) What to Expect

DHCS expects to provide SNF WQIP interim per diem exhibits to our health plan around the end of April 2025.

Health Net will make payments to SNF WQIP-eligible Network Providers for qualifying bed days within 45 calendar days of receiving CY2024 PY2 SNF WQIP interim per diem exhibits from DHCS, or within 30 calendar days of receiving a Clean Claim from the Provider, whichever is later.

Per this guideline, we expect all interim payments to SNF WQIP-eligible Network Providers to be issued by mid June 2025.

Payments for CalViva Health and Community Health Plan of Imperial Valley SNF WQIP-eligible Network Providers will come from Health Net.

SNF WQIP interim and final per diem amounts are calculated by the Department of Health Care Services in accordance with the [WQIP PY 2 Technical Program Guide](#).



Program Year 2 (CY 2024) What to Expect

DHCS expects to share the Program Year 2 final data and share with our health plan based on qualifying bed days that are reported by the health plan to the Post-Adjudicated Claims and Encounters System (PACES) by **June 30, 2025**, that are accepted by DHCS.

DHCS will provide SNF WQIP Final Per Diem Exhibits to our health plan for CY 2024 by **September 30, 2025**.

Health Net will make payments to SNF WQIP-eligible Network Providers for qualifying bed days within 45 calendar days of receiving CY 2024 PY2 SNF WQIP Final Per Diem Exhibits from DHCS or within 30 calendar days of receiving a Clean Claim from the Provider, whichever is later.

Per this guideline, we expect all final payments to SNF WQIP-eligible Network Providers to be issued by **November 14, 2025**.

Note: For Health Net members assigned to Molina Healthcare of California (MHC) in Los Angeles County, eligible member days will be included in Health Net SNF WQIP reports and payments.



Class AA and A Citations

In accordance with the SNF WQIP requirements, Health Net will withhold payments for facilities with one or more Class AA or A citations issued by the CDPH for violations that occur wholly or in part during the Program Year.

- Class AA – Facilities with one or more AA citations are disqualified from payments for the program year.
- Class A – Facilities with one or more A citations receive a 40% penalty to the per diem payment amount for the program year.

If we become aware of an applicable citation after the time of an interim or final payment, we are required to recoup and withhold applicable payments retroactively for the respective Program year.

If the citations are appealed, the health plan must withhold the applicable payments until all appeals are exhausted and, if applicable, release the applicable payments based on the final disposition of the citation, without regard to the length of the appeals process.

WQIP Score & Quality Metrics

DHCS will calculate each SNF WQIP-eligible Network Provider's performance metrics, WQIP score, and resulting interim and final per diem payment amounts. For PY1, PY2 and PY3, SNF WQIP includes several quality metrics across workforce, clinical and equity domains.

SNF WQIP includes three claims-based clinical quality metrics that the health plan will calculate on behalf of Network Providers. These metrics are the three LTC report only metrics in Measurement Year 2023, 2024, and 2025 of the Medi-Cal Accountability Set (MCAS). The specifications for the SNF WQIP versions of these metrics are provided in the SNF WQIP Technical Program Guide.

Bed Days & Data Sharing

DHCS will provide the health plan data reflecting all SNF bed days reported by health plan to PACES on a quarterly basis. The health plan must reconcile the data against our own records and provide each SNF WQIP-eligible Network Provider with a summary level report including the specified data fields. These summary level reports must be sent to all SNF WQIP-eligible Network Providers in a manipulatable digital format within 30 calendar days of receiving the data from DHCS.

Discrepancies: The Health Plan must confirm receipt of a discrepancy inquiry within **3 business days** and work with the Network Provider to reconcile the data, which must include providing Member-level data and claims, in a machine readable format to the Network Provider upon request.

Data Sharing

DHCS will provide a dataset containing the below data elements to each health plan. Each Health Plan must reconcile the data against our own records and provide each Network Provider with summary-level reporting containing at least the following data fields:

- Plan Name
- Plan Code
- Facility Name
- NPI
- Contracted Status
- Medicare Crossover Claim
- Remove Days – how many days zeroed out due to Medicare A exclusion
- Remove Notes – days not qualified for WQIP
- WQIP Days



WQIP Program Years – Important Notes

For each WQIP Program Year, DHCS will calculate quality scores and provide payment exhibits directing the health plan to pay the interim per diem amount during the first part of the Calendar Year following the rating period. The final per diem amount will be paid during the second part of the Calendar Year following the rating period.

The health plan is responsible for calculating the number of SNF WQIP qualifying bed days and paying the directed per diem amount for all clean and complete SNF WQIP qualifying bed days without regard to when these bed days are reported to DHCS consistent with any reporting requirements applicable to the SNF.

The health plan is responsible for netting out any previously directed interim payment amounts from the final payment.



Lessons Learned

1. You must be contracted to be eligible. We received a lot of calls/inquiries about missing or outstanding data and checks from facilities not contracted with the health plans
2. If you are unsure, please check that Health Net has your current W-9 to ensure timely and accurate payments
3. If you are working with an external AR/billing consultant, please ensure Health Net is aware so we can share PHI safely
4. Our data will include eligible network days from delegated groups. In LA County, our data will include Health Net members assigned to Molina Health Plan.

How to File a Grievance and SNF WQIP Point of Contacts

How to file a provider grievance:

Detailed instructions on filing a provider grievance can be found here: [Grievances](#)

Note: Provider grievances may be submitted orally or in writing within 180 days of the date of occurrence.

CalViva Health Point of Contact:

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Chief Financial Officer

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Health Net Point of Contact:

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Imperial Valley Point of Contact:

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Q&A



Thank you
