

Quality Assurance Surveillance Plan (QASP)

Outpatient Site of Care Service

The contractor shall be evaluated in accordance with the following:

1. PURPOSE

This Quality Assurance Surveillance Plan (QASP) provides a systematic method to evaluate performance for the stated contract. This QASP explains the following:

- What will be monitored.
- How monitoring will take place.
- Who will conduct the monitoring.
- How monitoring efforts and results will be documented.

This QASP does not detail how the contractor accomplishes the work. Rather, the QASP is created with the premise that the contractor is responsible for management and quality control actions to meet the terms of the contract. It is the Government's responsibility to be objective, fair, and consistent in evaluating performance.

This QASP is a "living document" and the Government may review and revise it on a regular basis. However, the Government shall coordinate changes with the contractor through contract modification. Copies of the original QASP and revisions shall be provided to the contractor and Government officials implementing surveillance activities.

2. GOVERNMENT ROLES AND RESPONSIBILITIES

The following personnel shall oversee and coordinate surveillance activities.

a. Contracting Officer (CO) – The CO shall ensure performance of all necessary actions for effective contracting, ensure compliance with the contract terms, and shall safeguard the interests of the United States in the contractual relationship. The CO shall also assure that the contractor receives impartial, fair, and equitable treatment under this contract. The CO is ultimately responsible for the final determination of the adequacy of the contractor's performance.

Assigned CO: Bennett Smith

Organization or Agency: Department of Veterans Affairs (IDENTIFY YOUR DIVISION)

b. Contracting Officer's Representative (COR) – The COR is responsible for technical administration of the contract and shall assure proper Government surveillance of the contractor's performance. The COR shall keep a quality assurance file. The COR is not empowered to make any contractual commitments or to authorize any contractual changes on the Government's behalf.

Assigned COR: Michael T. Anderson

3. CONTRACTOR REPRESENTATIVES

The following employee(s) of the contractor serve as the contractor's program manager(s) for this contract.

Primary: _____

Alternate: _____

4. PERFORMANCE STANDARDS

The contractor is responsible for performance of ALL terms and conditions of the contract. CORs will provide contract progress reports quarterly to the CO reflecting performance on this plan and all other aspects of the resultant contract. The performance standards outlined in this QASP shall be used to determine the level of contractor performance in the elements defined.

Performance standards define desired services. The Government performs surveillance to determine the level of Contractor performance to these standards.

The Performance Requirements are listed below in Section 6. The Government shall use these standards to determine contractor performance and shall compare contractor performance to the standard and assign a rating. At the end of the performance period, these ratings will be used, in part, to establish the past performance of the contractor on the contract.

5. INCENTIVES/DEDUCTS

The Government shall use past performance as incentives. Incentives shall be based on exceeding, meeting, or not meeting performance standards (if you include any monetary incentives, this requires approval through the Department's SPE).

6. METHODS OF QA SURVEILLANCE

Various methods exist to monitor performance. The COR shall use the surveillance methods listed below in the administration of this QASP. SAIL, VSSC, EPRP, VISTA, and CPRS.

- a. PERIODIC INSPECTION. Inspections scheduled and reported quarterly per COR delegation or as needed. All inspections and reports will be conducted in compliance with VA Privacy and Information security standards.
- b. VALIDATED USER/CUSTOMER COMPLAINTS. SAIL will be used to access CBOC's SHEP scores.
- c. RANDOM SAMPLING. Ten (10) randomly selected patient files will be reviewed per quarter. All reviews and reports will be conducted in compliance with VA Privacy and Information security standards.

Task	PWS Reference	Indicator	Standard	Acceptable Quality Level	Method of Surveillance	Incentives	Disincentives/ (Deducts)
CLINICAL REMINDERS	4.7.1.	<p>VISTA/CPRS will automatically remind providers to complete the following clinical reminders during patients visits:</p> <ul style="list-style-type: none"> -Alcohol Use Screen -Positive AUDIT-C Needs Evaluation -Depression Screening -Evaluation of positive PTSD -Tobacco Counseling by provider FY XX -Tobacco Counseling FY XX -Iraq and Afghanistan Post-Deployment Screening -TBI Screening -Influenza Immunization -Pneumovax -Colorectal Ca Screening -FOBT Positive F/U -Diabetes Eye Exam -Diabetes Foot Exam -Mammogram Screening -Pap Smear Screening 	100% Proper documentation and completion of all clinical reminders as they appear during a patient's visit	90% completion of clinical reminders each month.	Random Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system. VA will monitor progress weekly thru automated reports VSSC, VISTA, CPRS, SAIL, EPRP Reviews, Clinical Reminder Reports). VA will send these weekly reports to the contractor to notify them to their current performance.	Satisfactory or better past performance	<p>Negative Past Performance, Failure to meet VA performance measures shall result in the following deductions:</p> <p>85%-89.9%: A disincentive equaling 5% of that month's invoice when the AQL was not met. Past Performance rating of Marginal may be assigned</p> <p>80%-84.9%: A disincentive equaling 10% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned.</p> <p>79.9% and below: A disincentive equaling 10% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned.</p>

Task	PWS Reference	Indicator	Standard	Acceptable Quality Level	Method of Surveillance	Incentives	Disincentives/ (Deducts)
NEW PC PATIENT WAIT TIME (PC 14)	4.7.2	New PC Patient Wait Time	The Contractor shall schedule routine new patient appointments within thirty (30) calendar days of Primary Care request	99.7% monthly; New PC appointments completed no later than 30 days of requested date.	Monthly; VHA SAIL Report http://reports2.vssc.med.va.gov/reportserver?%2fMgmtReports%2fVATR%2fSAIL_Prod%2fSAIL&rs:Command=Render , Periodic Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures shall result in the following deductions: 80%-85.9%: A disincentive equaling 10% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal may be assigned. 75%-79.9%: A disincentive equaling 15% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned.
ESTABLISHED PC PATIENT WAIT TIME (PC12)	4.7.3.	Established PC Prospective Wait Time	The Contractor shall schedule routine new patient appointments within thirty (30) calendar days of Primary Care request.	94% completion of established primary care appointments no later than 30 days of requested date.	VHA SAIL Report http://reports2.vssc.med.va.gov/reportserver?%2fMgmtReports%2fVATR%2fSAIL_Prod%2fSAIL&rs:Command=Render , Periodic Inspection audit of VHA Performance Measure Report and PACT Dashboard VA will monitor and report progress Quarterly (non-cumulative)	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in the following deductions: Past Performance Rating of Marginal or Unsatisfactory may be assigned if AQL is not met
SAME DAY APPOINTMENTS WITH PRIMARY CARE PROVIDER (PCP) [PACT 7]	4.7.4	Same day appointments provided with PCP	70% completion of same day primary care appointments with PCP	48% completion of same day primary care appointments with PCP	Periodic Inspection audit of VHA Performance Measure Report and PACT Dashboard VA will monitor and report progress Quarterly (non-cumulative)	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in the following deductions: Past Performance Rating of Marginal or Unsatisfactory may be assigned if AQL is not met.

Task	PWS Reference	Indicator	Standard	Acceptable Quality Level	Method of Surveillance	Incentives	Disincentives/ (Deducts)
CLINICAL ENCOUNTERS	4.7.5	Providers must complete proper documentation for each patient visit.	100% Documentation must be complete for all fields including whether or not the patient is service connected. The CPT and provider codes must match and codes must accurately reflect complexity of visit. Complete documentation must be completed before the 18th of each month.	99.9% completion of clinical encounters each month.	Random Sampling (auditing) VA will monitor using Electronic report using data from VA VISTA/CPRS system. VA will monitor progress weekly thru automated reports. VA will send these weekly reports to the contractor to notify them to their current performance.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures shall result in the following deductions: 90%-99.9%: A disincentive equaling 5% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal may be assigned. 80%-89.9%: A disincentive equaling 10% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned. 79.9% and below: A disincentive equaling 10% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned.
PHARMACY	4.7.6.	Contractor shall submit a non-formulary and restricted drug request in CPRS using the PBM consult option.	100% (zero disapproval ratings for non-formulary and restricted drug requests quarterly).	90%(no more than 10% disapproval ratings for non-formulary and restricted drug requests quarterly).	Random Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system VA will monitor progress monthly thru automated reports. VA will send these monthly status reports to the contractor to notify them to their current performance.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures shall result in the following deductions: 89.9% (more than 10% disapproval ratings for non-formulary and restricted drug requests quarterly). A disincentive equaling 10%of the quarter's invoices when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned.

TASK	PWS Reference	Indicator	Standard	Acceptable Quality Level	Method of Surveillance	Incentives	Disincentives/ (Deducts)
PHARMACY NEW DRUG ORDER REQUESTS	4.7.7	Contractor shall submit new drug orders through CPRS to VA	100% The contractor shall ensure that all new drug order requests follow all GLA prescribing guidelines. This is including but not limited to ensuring all appropriate labs have been previously ordered and that the order is not a non-formulary drug	95% of new drug order requests follow all GLA prescribing guidelines. This is including but not limited to ensuring all appropriate labs have been previously ordered and that the order is not a non-formulary drug	Random Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system VA will monitor progress quarterly thru automated reports. VA will send monthly status reports to the contractor to notify them to their current performance.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures shall result in the following deductions: 94.9% or less of new drug order requests follow GLA prescribing guidelines. A disincentive equaling 10% of the quarter's invoices when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned.
VESTED PATIENTS	4.7.8.	Contractor shall maintain a specific number of vested patients in the clinic.	Contractor to maintain 99% active vested patients in the clinic for at least three of the option years.	90% of required active vested patients in the clinic for at least three of the option years.	VA will monitor using Electronic report using data from VISTA/CPRS annually. Contractor can check the status of their performance by running reports in VISTA/CPRS as frequently as needed. VA will monitor progress annually thru automated reports.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.

TASK	PWS Reference	Indicator	Standard	Acceptable Quality Level	Method of Surveillance	Incentives	Disincentives/ (Deducts)
PACT PATIENTS ENROLLED IN HOME TELEHEALTH (HT) [PACT 13]	4.7.9	Contractor shall maintain a specific number of vested patients enrolled in HT.	Contractor to maintain 1.6% of required vested patients in HT	1.2% of required vested patients enrolled in HT	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard. VA will monitor progress quarterly (non-cumulative) thru automated reports.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.
PRIMARY CARE PATIENTS IN MENTAL HEALTH INTEGRATION (PCMHI) [PACT 15]	4.7.10.	Contractor reports PCMHI Penetration that uses patients assigned to a PACT team as the cohort (instead of core uniques with a primary care encounter).	Contractor to maintain 6% of required vested patients in PCMHI.	Contractor to maintain 4% of required vested patients in PCMHI.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard. VA will monitor progress quarterly (non-cumulative) thru automated reports. Incentive: satisfactory or better past performance	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.

TASK	PWS Reference	Indicator	Standard	Acceptable Quality Level	Method of Surveillance	Incentives	Disincentives/ (Deducts)
RATIO OF NON-TRADITIONAL ENCOUNTERS [PACT 16]	4.7.11	Contractor reports the sum of all PC Telephone encounters added to the sum of all PC Group Encounters added to the sum of all incoming and outgoing secure messages as the numerator.	Contractor shall maintain at least 20% in the appropriate ratio of non-traditional encounters.	Contractor shall maintain at least 12% in the appropriate ratio of non-traditional encounters.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard. VA will monitor progress quarterly (non-cumulative) thru automated reports	Satisfactory or better past performance .	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.
POST DISCHARGE CONTACT BY PACT TEAM [PACT 17]	4.7.12.	Number of discharges with follow-up contact by a member of the assigned PACT Team within two business days of discharge.	Contractor assigned PACT Team member shall contact at least 75% of patients within two business days of discharge.	Contractor assigned PACT Team member shall contact at least 40% of patients within two business days of discharge.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard. VA will monitor progress quarterly (non-cumulative) thru automated reports.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.
PACT STAFFING RATIO [PACT 18]	4.7.13	Percent of Divisions Meeting Staffing Ratio of 3:1 - (instead of the avg. ratio of staff per PC provider)	Contractor shall meet PACT Division Staffing Ratio of 3:1 - (instead of the avg. ratio of staff per PC provider) at least 75% of the time.	Contractor shall meet PACT Division Staffing Ratio of 3:1 - (instead of the avg. ratio of staff per PC provider) at least 50% of the time.	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard. VA will monitor progress quarterly (non-cumulative) thru automated reports.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.

TASK	PWS Reference	Indicator	Standard	Acceptable Quality Level	Method of Surveillance	Incentives	Disincentives/ (Deducts)
4.6.1. PATIENT SATISFACTION WITH ACCESS MEASURE COMPOSITE [PCMH 4; SHEP]	4.7.14	Composite % Based on 2 Questions: Get an urgent care appointment as soon as needed, Get a routine care appointment as soon as needed	55%	53%	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard. VA will monitor progress quarterly (non-cumulative) thru automated reports	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.
APPOINTMENT CANCELLATIONS	4.7.15	Contractor shall not unnecessarily cancel patient appointments and will reschedule cancelled appointments in a timely manner. Any appointment cancelled needs to be rescheduled within 2 weeks. This means the patients must be seen within 2 weeks of the original cancelled appointment date.	100% of patients seen within 2 weeks of the original cancelled appointment date.	100% of patients seen within 2 weeks of the original cancelled appointment date	Random Sampling VA will monitor using Electronic report using data from VA VISTA/CPRS system. VA will monitor progress through quarterly audits using automated reports. Contractor can check the status of their performance by running reports in VISTA/CPRS system.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures shall result in the following deductions: 95%- 99.9%: A disincentive equaling 10% of that month's invoice when the AQL was not met. Past Performance Rating of Marginal or Unsatisfactory may be assigned. 90%-94.9%: A disincentive equaling 15% of that month's invoice when the AQL was not met. Past Performance Rating of Unsatisfactory may be assigned.
PRIMARY CARE PROVIDER CONTINUITY	4.7.16	Patients see same PCP for appointments	77% of appointments provided with assigned PCP	65% of appointments provided with assigned PCP	VA will monitor using Electronic report using data from Performance Measure Report: T21, Quality and PACT Dashboard. VA will monitor progress quarterly (non-cumulative) thru automated reports.	Satisfactory or better past performance	Negative Past Performance, Failure to meet VA performance measures may result in marginal or unsatisfactory past performance rating.

7. Ratings:

Metrics and methods are designed to determine rating for a given standard and acceptable quality level. The following ratings shall be used:

EXCEPTIONAL:	<p>Performance meets contractual requirements and exceeds many to the Government's benefit. The contractual performance of the element or sub-element being assessed was accomplished with few minor problems for which corrective actions taken by the contractor were highly effective.</p> <p>Note: To justify an Exceptional rating, you should identify <u>multiple</u> significant events in each category and state how it was a benefit to the GOVERNMENT. However a singular event could be of such magnitude that it alone constitutes an Exceptional rating. Also there should have been NO significant weaknesses identified.</p>
VERY GOOD:	<p>Performance meets contractual requirements and exceeds some to the Government's benefit. The contractual performance of the element or sub-element being assessed was accomplished with some minor problems for which corrective actions taken by the contractor were effective.</p> <p>Note: To justify a Very Good rating, you should identify a significant event in each category and state how it was a benefit to the GOVERNMENT. Also there should have been NO significant weaknesses identified.</p>
SATISFACTORY:	<p>Performance meets contractual requirements. The contractual performance of the element or sub-element contains some minor problems for which corrective actions taken by the contractor appear or were satisfactory.</p> <p>Note: To justify a Satisfactory rating, there should have been only minor problems, or major problems the contractor recovered from without impact to the contract. Also there should have been NO significant weaknesses identified.</p>
MARGINAL:	<p>Performance does not meet some contractual requirements. The contractual performance of the element or sub-element being assessed reflects a serious problem for which the contractor has not yet identified corrective actions. The contractor's proposed actions appear only marginally effective or were not fully implemented.</p> <p>Note: To justify Marginal performance, you should identify a significant event in each category that the contractor had trouble overcoming and state how it impacted the GOVERNMENT. A Marginal rating should be supported by referencing the management tool that notified the contractor of the contractual deficiency (e.g., Management, Quality, Safety or Environmental Deficiency Report or letter).</p>
UNSATISFACTORY:	<p>Performance does not meet most contractual requirements and recovery is not likely in a timely manner. The contractual performance of the element or sub-element being assessed contains serious problem(s) for which the contractor's corrective actions appear or were ineffective.</p> <p>Note: To justify an Unsatisfactory rating, you should identify multiple significant events in each category that the contractor had trouble overcoming and state how it impacted the GOVERNMENT. However, a singular problem could be of such serious magnitude that it alone constitutes an unsatisfactory rating. An Unsatisfactory rating should be supported by referencing the management tools used to notify the contractor of the contractual deficiencies (e.g. Management, Quality, Safety or Environmental Deficiency Reports, or letters).</p>

8. DOCUMENTING PERFORMANCE

a. The Government shall document positive and/or negative performance. Any report may become a part of the supporting documentation for any contractual action and preparing annual past performance using CONTRACTOR PERFORMANCE ASSESSMENT REPORT (CPAR).

b. If contractor performance does not meet the Acceptable Quality level, the CO shall inform the contractor. This will normally be in writing unless circumstances necessitate verbal communication. In any case the CO shall document the discussion and place it in the contract file. When the COR and the CO determines formal written communication is required, the COR shall prepare a Contract Discrepancy Report (CDR), and present it to CO. The CO will in turn review and will present to the contractor's program manager for corrective action

The contractor shall acknowledge receipt of the CDR in writing. The CDR will specify if the contractor is required to prepare a corrective action plan to document how the contractor shall correct the unacceptable performance and avoid a recurrence. The CDR will also state how long after receipt the contractor has to present this corrective action plan to the CO. The Government shall review the contractor's corrective action plan to determine acceptability. The CO shall also assure that the contractor receives impartial, fair, and equitable treatment. The CO is ultimately responsible for the final determination of the adequacy of the contractor's performance and the acceptability of the Contractor's corrective action plan.

Any CDRs may become a part of the supporting documentation for any contractual action deemed necessary by the CO.

9. FREQUENCY OF MEASUREMENT

a. Frequency of Measurement.

The frequency of measurement is defined in the contract or otherwise in this document. The government (COR or CO) will periodically analyze whether the frequency of surveillance is appropriate for the work being performed.

b. Frequency of Performance Reporting.

The COR shall communicate with the Contractor and will provide written reports to the Contracting Officer quarterly (or as outlined in the contract or COR delegation) to review Contractor performance.

10. COR AND CONTRACTOR ACKNOWLEDGEMENT OF QASP

SIGNED:

Michael T. Anderson, COR DATE

SIGNED:

CONTRACTOR NAME/TITLE DATE