

DHCS All Plan Letter Summary

To: Medi-Cal network participants

February 2026

Subject: All Plan Letter 25-015: Data Sharing and Quality Rate Production for Directed Payment Initiatives and Alternative Payment Methodology Programs

The Department of Health Care Services (DHCS) recently issued [All Plan Letter \(APL\) 25-015](#), "Data Sharing and Quality Rate Production for Directed Payment Initiatives and Alternative Payment Methodology Programs." We are sharing a summary of this APL with you to ensure you are aware of the information, and you can apply the information to your practice or facility operations, where appropriate.

APL 25-015 provides details about the obligations managed care plans (MCPs) such as Blue Shield of California Promise Health Plan have in relation to data sharing and quality measures when supporting DHCS Directed Payment Initiatives and Alternative Payment Methodology programs.

APL summary

APL 25-015 applies to programs that require data to determine payout rates related to quality, utilization, value-related or other measures, including the following programs, plus additional programs that may be approved in the future:

- Children's Hospital Supplemental Payment
- Children and Youth Behavioral Health Initiative
- Community Clinic Directed Payment Program
- Directed Payments for Adverse Childhood Experiences
- Directed Payments for Developmental Screening Services
- District and Municipal Public Hospital Directed Payment Program
- Enhanced Payment Program
- Equity and Practice Transformation (EPT) Directed Payment Program
- Federally Qualified Health Center APM (to create capitated rates)
- Long Term Care Fee-For-Service-Equivalent Base Directed Payment
- Organ and Bone Marrow Transplants
- Private Hospital Directed Payment Program
- Proposition 56 Directed Payments for Family Planning Services
- Quality Incentive Pool (QIP) for Designated Public Hospitals (DPHs)
- Quality Incentive Pool (QIP) for District Municipal Public Hospitals (DMPHs)
- Skilled Nursing Facility (SNF) Workforce and Quality Incentive Program (WQIP)
- Targeted Rate Increases

Key information

- MCPs may be asked to supply data to providers or produce performance rates on their behalf. MCPs are advised to supply the provider with the performance rates, the immediate components used to mathematically calculate that rate, and the time period for each component.

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- In programs where providers calculate their own performance, the APL advises MCPs to supply providers with the necessary data.
- The APL includes a chart showing the advised data elements, minimum frequency to provide data, data format, and turnaround times for MCPs to follow in their data sharing.
- APL 25-015 encourages MCPs to accept all relevant supplemental data from providers in the abovementioned programs in order to maximize potential performance and improve data integrity.
- DHCS has released the [California Technical Specifications \(CaTS\)](#) to provide specific direction to MCPs on how to calculate provider-level quality measure performance. Additional resources can be found on the [DHCS Directed Payments website](#).
- The APL advises MCPs on how to communicate with providers about programs, either by addressing issues directly or connecting providers with designated subject matter experts (SMEs). Providers should be able to reach SMEs directly or through a program-specific email inbox.

This summary is only meant as a brief description of the APL. Please see the APL itself for additional background and the complete requirements. The full text of APL 25-015 may be found at this URL:

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL%202025/APL25-015.pdf>

(Links to the websites above will take you off the Blue Shield Promise website.)

If you have questions about the topics covered in this APL, please contact our Provider Customer Service team via Live Chat after logging in at blueshieldca.com/provider or call **(800) 468-9935** from 6 a.m. to 6:30 p.m., Monday through Friday.