

BCBSM PGIP Quarterly Meeting
March 13, 2009

Initiatives Update:
Emergency Department Use
E-Prescribing
Patient-Centered Medical Home

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Emergency Department Use Initiative



- Focus on Primary Care Sensitive conditions
 - Semi-annual dashboard reports
 - Quarterly datasets
- Participation expectations
 - Describe use of BCBSM data in Progress Report and Implementation Plan
 - Key trends, underlying major causes of PCS ED use
 - Opportunities for improvement
 - Dissemination of data to Practice Units and physicians
 - Planned strategies
- Performance expectations
 - Decrease rate of Primary Care Sensitive ED visits
 - Decrease number of frequent ED users for Primary Care Sensitive ED visits

Potential Strategies to Reduce PCS Emergency Department Use



- Improve patient access
- Improve management of patients with chronic conditions
- Improve coordination of care for patients needing specialist referral or complex testing
- Conduct patient education and outreach
- Consult and collaborate with other POs

Revised E-prescribing Initiative



- Extensive feedback from customers, providers
 - Significant concerns regarding definition of e-prescribing
- Medicare program roll-out
- Confusion among providers regarding vendor capabilities and complexity

- BCBSM determination:
 - Align with Medicare definition and standards for qualified e-prescribing systems
 - Pay incentives based on self-reported information (subject to validation)
 - Number of physicians in Practice Units that are actively implementing qualified e-Rx system or extending use beyond physician champions (6 months maximum for implementation period)
 - Number of physicians in Practice Units in which all physicians are actively using qualified e-prescribing system (pro-rated by attributed patients)

Revised E-prescribing Initiative – Expectations of POs



- Update self-assessment database with current status at practice unit level
- Implementation Plan
 - Identify PO milestones for implementing sustained, maximum use of e-Rx in all practice units, and developing or procuring tools and processes for tracking e-Rx use and results
- Progress Report
 - Provide E-Rx vendor information, including reporting capabilities and costs
 - Provide summary of monitoring and follow-up activities undertaken with Practice Units to ensure ongoing maximum use of e-Rx system

PCMH Initiatives (total of 12)



- For POs continuing to participate in a PCMH Initiative from 2008
 - Self-assessment update due end of June 1, 2009
 - May identify additional practice units as participating in Initiative
 - Expected to implement at least 1 task by end of May 2008, and 3 tasks per year
- For POs beginning to participate in a PCMH Initiative for the first time in 2009
 - Planning period December 1, 2008 – May 31, 2009
 - Implementation plan and self-assessment database update with baseline data on each participating practice unit due end of May 2009
 - Expected to implement 2 tasks by end of year