



FACT SHEET

Physician Group Incentive Program Patient-Centered Medical Home

About Value Partnerships

Value Partnerships is a collection of clinically oriented initiatives among Michigan physicians, hospitals and Blue Cross Blue Shield of Michigan that are improving clinical quality, reducing complications, controlling cost trends, eliminating errors and improving health outcomes throughout Michigan.

About The Physician Group Incentive Program

This program began in 2005 to encourage and incentivize physicians to more effectively manage populations of patients with chronic diseases and build an infrastructure to more robustly measure and monitor care quality. As of January 2010, 38 physician organizations and 8,148 physicians are working together to improve health care for roughly 1.8 million Michigan Blues members.

The Patient Centered Medical Home Model

In July 2009, BCBSM established the PCMH Designation program to provide additional financial support to those PGIP primary care physicians who have made significant progress in incorporating PCMH infrastructure and care processes into routine practice and have achieved outstanding results on quality and efficiency measures.

Test Results Tracking and Follow-Up Initiative

Overview

The purpose of the Test Results Tracking initiative is to implement a standardized, reliable system to ensure that patients receive needed tests, results are communicated in a timely manner, follow-up appropriate to the patient case is conducted, and each step in the test tracking process is properly documented.

Objectives

- Increase patient access to care and decrease fragmentation of care
- Reduce cost and use
- Improve health care processes and outcomes
- Increase patient and provider satisfaction

Incentive Design

Physician Organizations will receive incentive payments commensurate with their performance on implementing PCMH capabilities during the six-month incentive payment period. The first time a PO reports implementation activity for a particular PCMH Initiative, the PO should also submit an Initial Implementation Plan for that Initiative; for that six-month incentive period only, incentives will be paid for participation as well as performance.

Evaluation

Performance improvement is evaluated based on Practice Unit progress toward implementing PCMH capabilities. Results from the Progress Reports and Self-Assessment Database will be used to gauge performance improvement twice a year.

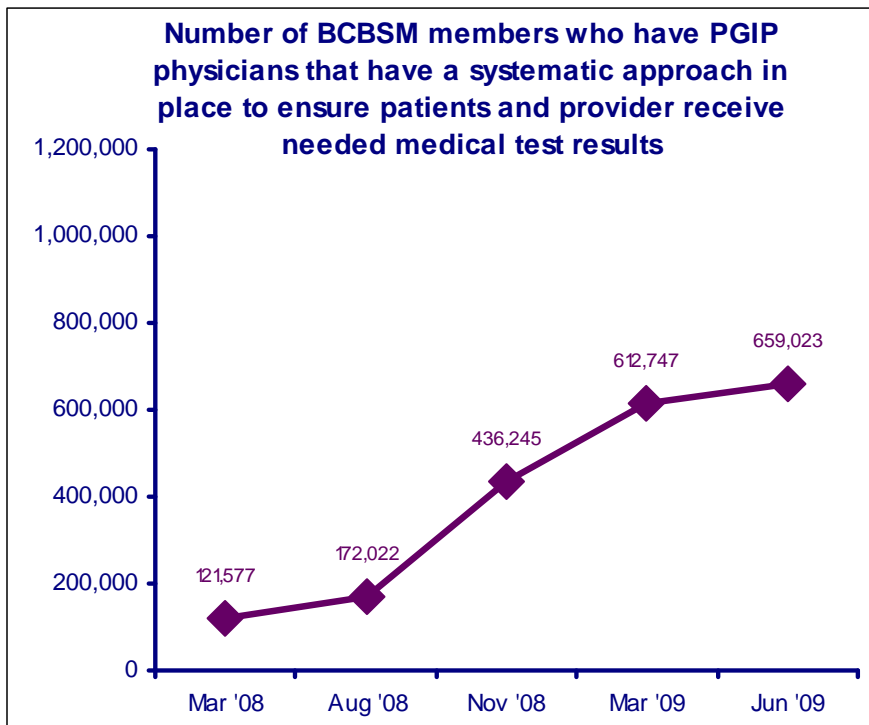


Initiative Capabilities

- 6.1 Practice has test tracking process/procedure documented, which requires tracking and follow-up for all tests and test results, with identified timeframes for notifying patients of results
- 6.2 Systematic approach and identified time frames are in place for ensuring patients receive needed tests and practice obtains results
- 6.3 Process is in place for ensuring patient contact details are kept up to date
- 6.4 Mechanism is in place for patients to obtain information about normal tests
- 6.5 Systematic approach is used to inform patients about abnormal test results
- 6.6 Systematic approach is used to ensure that patients with abnormal results receive the recommended follow-up care within defined timeframes
- 6.7 Systematic approach is used to document all test tracking steps in the patient's medical record
- 6.8 All clinicians and appropriate office staff are trained to ensure adherence to the test-tracking procedure; all training is documented either in personnel file or in training logs or records
- 6.9 Practice has automated test tracking system with Computerized Order Entry

Evaluation and Results

*Compared to baseline data taken at 2/29/2008, the number of members who have physicians that ensure they receive needed medical test results has more than quadrupled.



For more information on PGIP, or for a copy of the full initiative description, please contact: providerpartnerships@bcbsm.com



Questions about the Test Tracking Initiative? Please contact Margaret Mason, MHSA
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