

# Value-based reimbursement for primary care physicians for 2016 performance and 2017 reimbursement:

## Frequently asked questions



### 1. What's new about value-based reimbursement for primary care physicians?

- a. Quality measures are aligned for Commercial PPO and Medicare Advantage members.
- b. Clinical quality performance is evaluated on both performance and improvement.

### 2. When do we receive value-based reimbursement?

Primary care physicians' performance is measured during calendar year 2016. Based on this performance, primary care physicians receive value-based reimbursement on claims for dates of service from July 1, 2017, to June 30, 2018.

### 3. How will we know what our ongoing performance is throughout the year? Will we get reports?

Your physician organization receives routine performance information on a subset of the clinical quality measures. You can check with your physician organization for more information.

#### 4. What measures are we evaluated on for the 2016 performance period?

The quality measures chart below is available on [ValuePartnerships.com](http://ValuePartnerships.com) in the Partner Resources section.

Category	Measure
<b>Adult Prevention and Screening Measures</b>	Adult BMI Assessment
	Breast Cancer Screening
	Cervical Cancer Screening
	Chlamydia Screening in Women
	Colorectal Cancer Screening
<b>Pediatric Prevention and Screening Measures</b>	Childhood Immunization Status (combination 10)
	HPV Vaccination for Female Adolescents
	Immunizations for Adolescents (combination 1)
	Weight Assessment and Counseling for Nutrition and Physical Activity Children and Adolescents: BMI Percentile
	Weight Assessment and Counseling for Nutrition and Physical Activity Children and Adolescents: Counseling for Physical Activity
	Weight Assessment and Counseling for Nutrition and Physical Activity Children and Adolescents: Counseling for Physical Nutrition
	Well-Child Visits in the First 15 Months of Life (5 or more)
	Well-Child Visits in the 3rd, 4th, 5th and 6th Years of Life
<b>Comprehensive Diabetes Care</b>	Diabetes Care: Retinal Eye Exam Performed
	Diabetes Care: Hemoglobin A1c (HbA1c) Control <8.0%
	Diabetes Care: Hemoglobin A1c (HbA1c) Control ≥9.0%
	Diabetes Care: Hemoglobin A1c (HbA1c) Testing
	Diabetes Care: Medical Attention for Nephropathy
<b>Respiratory Conditions</b>	Appropriate Testing for Children with Pharyngitis
	Appropriate Treatment for Children with Upper Respiratory Infection
	Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis
	Medication Management for People With Asthma
<b>Behavioral Health</b>	Antidepressant Medication Management: Acute Phase
	Antidepressant Medication Management: Continuation Phase
	Follow-up Care for Children Prescribed ADHD Medication: Initiation Phase
	Follow-up Care for Children Prescribed ADHD Medication: Continuation and Maintenance Phase
<b>Pharmacy</b>	Annual Monitoring for Patients on Persistent Medications
	Statins in Diabetes
	Proportion of Days Covered (Diabetes All Class)
	Proportion of Days Covered (RAS Antagonists)
	Proportion of Days Covered (Statins)
<b>Other</b>	Controlling High Blood Pressure
	Use of Imaging Studies for Low Back Pain

PGIP Clinical Quality Value-Based Reimbursement					
Adult Practices		Family Practices		Pediatric Practices	
QRS Measures for Commercial Members	MA Stars Measures for MA Members	QRS Measures for Commercial Members	MA Stars Measures for MA Members	QRS Measures for Commercial Members	MA Stars Measures for MA Members
✓	✓	✓	✓		
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## 5. Are there other ways primary care physicians can earn value-based reimbursement? What if I'm Patient-Centered Medical Home designated, etc.?

Below is a table that shows the various ways primary care physicians can earn value-based reimbursement:

PCMH designation	Cost benchmark (with PCMH designation)	Participation in PDCM (with PCMH designation)	Clinical Quality Performance			Total reimbursement as percentage of TRUST/Trad/BPP/EPO Max Fee Schedules (for applicable codes)
			80-84.99 percentile	85-94.99 percentile	95+ percentile	
			x			105%
				x		110%
x					x	115%
x			x			120%
x		x				125%
x				x		130%
x	x					135%
x		x	x			140%
x					x	140%
x	x		x			140%
x		x				140%
x	x			x		140%
x	x	x	x			140%
x		x			x	140%
x	x				x	140%
x	x	x		x		140%
x		x			x	140%
x	x	x			x	140%

## 6. I don't understand how the program works. Who should I talk to?

Talk with your Physician Group Incentive Program physician organization. If you aren't affiliated with a PGIP participating physician organization, you should talk with your Blue Cross Blue Shield of Michigan provider consultant.

## 7. I'm an employed physician, so I may not receive this value-based reimbursement. Do I still need to adhere to these quality measures?

Yes. Improved quality performance leads to better health outcomes for our members, your patients. Focusing on continued improvement moves us toward better stewardship of the care delivered to our members or patients and results in efficiencies and improved outcomes.