

Value-based reimbursement for primary care physicians: An overview



We're enhancing our value-based reimbursement structure for primary care doctors who participate in the Physician Group Incentive Program.

Key elements of the program

There are three tiers of clinical quality value-based reimbursement.

Primary care doctors who take part in PGIP have more opportunities to earn value-based reimbursement.

Quality incentives are aligned among Commercial and Medicare populations.

Clinical quality tiers are based on both performance and improvement.

2016 clinical quality measures

Performance and improvement on the following HEDIS*, Quality Rating System and Medicare star rating measures in your practice type — adult practice, family practice or pediatric practice — will result in higher reimbursement:

Adult prevention and screening measures:

- Adult BMI assessment
- Breast cancer screening
- Cervical cancer screening
- Chlamydia screening in women
- Colorectal cancer screening

Pediatric prevention and screening measures:

- Childhood immunization status
- HPV vaccination for female adolescents
- Immunization for adolescents
- Weight assessment and counseling for nutrition and physical activity children and adolescents:
 - BMI percentile
 - Physical activity counseling
 - Nutrition counseling
- Well-child visits in the first 15 months of life
- Well-child visits for the third, fourth, fifth and sixth year of life

Comprehensive diabetes care:

- Retinal eye exam
- Hemoglobin A1c (HbA1c) control <8.0% or ≤9.0%
- Hemoglobin A1c (HbA1c) testing
- Medical attention for nephropathy

Respiratory conditions:

- 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 those with asthma

Behavioral health:

- Antidepressant medication management: acute phase
- Antidepressant medication management:
 - Continuation phase
- Follow-up care for children prescribed ADHD medication:
 - Initiation phase
 - Continuation and maintenance phase

Pharmacy:

- Annual monitoring for patients on persistent medications
- Statin use in persons with diabetes
- Proportion of days covered (diabetes all class)
- Proportion of days covered (RAS antagonist)
- Proportion of days covered (statins)

Other:

- Controlling high blood pressure
- Use of imaging studies for low back pain

*HEDIS is a registered trademark of the National Committee for Quality Assurance.

Value-based reimbursement opportunities

PGIP, primary care physicians who obtain a combination of Patient-Centered Medical Home designation, meet cost benchmark, offer Provider-Delivered Care Management and perform well on clinical quality measures may be able to earn up to 140 percent of the standard fee schedule.

PCMH designation	Cost benchmark (with PCMH designation)	Participation in PDCM (with PCMH designation)	Clinical quality performance			Total reimbursement as percentage of TRUST/Traditional/BPP/EPO Maximum 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	x				140%
x	x	x		x		140%
x		x			x	140%
x	x	x		x		140%
x	x	x			x	140%

Payment timeline

Measurement period	Reimbursement period (applicable to claims for the dates of service below)**
Jan. 1, 2016 through Dec. 31, 2016	July 1, 2017 through June 30, 2018

**For select procedure codes

Detailed information is available on web-DENIS.