



Fact Sheet

Physician Group Incentive Program

2011/2012

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

The Physician Group Incentive Program (PGIP) began in 2005 to encourage and incentivize physicians to more effectively manage populations of patients and build an infrastructure to more robustly measure and monitor care quality. As of September 2011, 40 physician organizations (POs) across the state of Michigan representing nearly 15,000 primary care physicians and specialists are working together to improve health care for nearly 2 million Michigan Blues members. Additionally, PGIP is cultivating a healthier future for all Michigan residents by catalyzing all payer system development. Patients throughout the state, regardless of payer, benefit from the improved care processes developed through the PGIP provider community.

Organized Systems of Care

Overview

An Organized System of Care (OSC) is a community of caregivers consisting of primary care practices, specialists, hospitals and other providers that measure performance, set goals, track progress, and coordinate care across the continuum for the primary care-attributed patient population.

The OSC initiatives are designed to assist nascent OSCs in developing the capabilities that are essential for high-functioning OSCs.

The OSC Initiatives address three OSC domains of function and have been collaboratively developed by BCBSM and representatives from the PGIP Physician Organizations (POs). See the OSC Interpretive Guidelines for more information on the OSC Initiatives. The three domains of function include:

- OSC Integrated Patient Registry (July 2011)
- OSC Integrated Performance Measurement (July 2011)
- OSC Processes of Care (Expected launch date: 1Q12)

The OSC Initiatives provide a roadmap to a state-of-the-art vision that will be incrementally implemented over the course of five to ten years. Organizations are *not* expected to have all of these capabilities initially.

OSC Initiatives

OSC Integrated Patient Registry Initiative – designed to build on the capabilities in the PCMH Registry Initiatives and enable OSC providers to perform OSC-wide management of the attributed patient population and reduce disparities in the provision of healthcare services.

OSC Integrated Performance Measurement Initiative – designed to build on the capabilities in the PCMH Performance Reporting Initiative and enable OSCs to generate OSC-wide performance reporting for all patients. Initially, performance reports will be for internal use, but in the longer-term, OSCs will collaborate to define a common set of measures that can be used to provide external entities with information for payment and public reporting.



OSC Processes of Care Initiative – designed to ensure that all relevant PCMH capabilities are in place across all care partners with appropriate linkages at the OSC level.

Incentive Design

Through the PGIIP program, BCBSM will reward OSCs for implementing the capabilities outlined in the OSC Interpretive Guidelines.

In addition, in 2013, BCBSM will implement an OSC recognition program to recognize and provide financial support for OSCs that meet criteria as a high-performing OSC.

Participation Criteria

The OSC Initiatives are open to PGIIP OSCs.

Evaluation

OSCs will be evaluated based on the number of self-reported capabilities “fully in place”.

Results

Results are to be determined and will be reported in future updates.

