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The JPA Examiner

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2 **QUALITY REPORT CARDS: ARE YOU MEASURING UP?**

3 In today's healthcare environment, patients are striving to become more proactive in their individual healthcare, not only by kicking bad habits and leading healthier lifestyles but also by choosing the best physician-care and health plans possible.

4 Quality health care can be defined as "the extent to which patients get the care they need in a manner that most effectively protects or restores their health." This means having timely access to care, getting treatment that medical evidence has found to be effective and getting appropriate preventive care. Choosing a high-quality health plan – and a high-quality doctor – play a significant role in determining whether high-quality care will be received.

4 One popular reference source is the National Committee for Quality Assurance (NCQA), an independent, nonprofit group. Through NCQA, patients can compare the experiences others have with different physicians, specialists and health plans.

4 For years, NCQA has been monitoring health care plan efforts to improve health care quality through a set of measures called the Healthcare Effectiveness Data and Information Set (HEDIS). The data is used to rate health plans. They rate quality of care, access to care and member satisfaction.

4 Now, physicians and hospitals are subject to Physician and Hospital Quality (PHQ) standards, which evaluate how organizations measure physicians to ensure that measurement methods are fair and rely not only on cost, but



also on accepted measures of quality. For hospitals, the standards evaluate whether organizations provide members with performance information on hospitals from reliable government and other sources to inform decision-making. NCQA's PHQ Certification is awarded to organizations that meet or exceed NCQA's standards, which are widely acknowledged to be the most rigorous in the field.

PHQ standards were developed with input from physicians and physician groups; consumer advocates; employers; representatives from state and local agencies; and health plans. NCQA consulted with physician measurement experts

See NCQA PHQ, page 3

Year 2009-10 JPA Board Members

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- Dr. Bruce Bigelow
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Celebrating Success!!

In this critical time of practice transformation, it's time to celebrate our recent BCN accomplishment. Hat's off to all of you who diligently entered data into the Health eBlue website.

This past month, we met with our Blue Care Network administrative team and learned that the JPA primary care physicians had one of the highest overall compliance rates with BCN's

2009 Physician Recognition Program (PRP). JPA's overall compliance rate was 80.51%. What makes this accomplishment even more important is that our physician organization represents 72 total primary care physicians and membership of over 8,000. We are one of the largest participating physician organizations in the program. JPA's physicians and practice

See Celebrating Success, page 4

Payer News



Consult Code Reminder

The Centers for Medicare & Medicaid Services is no longer reimbursing for any reported consultation codes. As a result, Blue Care Network is not reimbursing these codes for BCN Advantage HMO and BCN 65 products. BCN will continue to pay these codes for BCN commercial products only until June 30, 2010.

Blue Distinction Centers

Blue Care Network is aligning its Center of Excellence program with the Blue Cross and Blue Shield Association's national Blue Distinction Centers for Specialty Care program. BCN doesn't require use of a Blue Distinction center for specialty services.

Medical Care Groups

In future communications to BCN physicians and groups, Blue Care Network

is replacing references to primary care groups with the term medical care group. When applying as a new primary care physician or changing status from PCP to specialist, BCN requires completion of the BCN MCG Affiliation Form. This requirement applies to all primary care physicians, including those not affiliated with an established group.

Observe application, contract deadlines

Blue Care Network will deny applications for new lines of business for professional providers who do not attest within 14 days of their application that the information reported on CAQH is current. The denial reason will be "denied CAQH."

Providers who receive contracts by e-mail must sign and return the signature page within seven days. Providers who receive

contracts by U.S. Mail must sign and return the signature page within 10 days. Failure to return signature documents by the deadline will result in denial of the application.

Physician Assessment Form Update

Several diagnosis code categories are not included on the paper version of the Physician Assessment form for the BCN Advantage HMO Healthy Advantage Rewards program. To avoid a delay in processing the form for your members, BCN recommends submitting the electronic version of the form, which includes all diagnosis code categories.

For the most efficient and timely processing of the Healthy Advantage Rewards incentives, BCN recommends submitting required information electronically on Health e-Blue.

More Improvements to the Auth Inquiry tool

The Auth Request portion of our online Authorizations tool has been removed. This section of the tool was not available to many providers and was problematic to others. To expedite your authorization requests and avoid confusion, the Authorizations tool will

now be solely for authorization inquiries.

Through Auth Inquiry you can:

- Check the status of an authorization requests
- See a detailed report on your request
- PCPs can view authorizations associated with your Priority Health



patients

We are continuously working to improve the functionality of our online tools. If you discover something you'd like to see added or improved with any of our tools, please let your provider account representative know.

Welcome JPAs Newest Preferred Vendor

Increase revenue at each stage of the revenue cycle with JPA's newest Preferred Vendor – Medical Management Systems (MMS) of Michigan, Inc.

MMS Workflow Intelligence has revolutionized the way physicians collect reimbursement and run their practices. Every stage of the revenue cycle has potential for leaks... so MMS

has combined 25 years of industry knowledge with revenue enhancing technology to counteract and eliminate the causes of revenue loss.

MMS has created workflow tools and strategies that not only increase revenue but also improve practice productivity. Some services MMS offers include Accounts/Receivables management, self-pay and co-pay collections,



benchmarking, scheduling and Eligibility Checks.

For more information, contact Rich Frankford at (517) 485-0001 ext. 123 or visit www.mmsm.com.



June 22nd, 2010
Practice Managers Forum
Dining Room 1

August 17th, 2010
Practice Managers Forum
Dining Room 1

August 26th, 2010
PGIP Training Session:
Topic Undetermined
Allegiance Auditorium

October 28th, 2010
PGIP Training Session:
Topic Undetermined

Practice Manager Survey Results

In February of 2010, JPA conducted its Annual Needs and Satisfaction Survey. The survey was sent to 90 JPA practices. Practice Managers/Administrators were directed to take the survey online or, if preferred, complete a paper survey version and fax it back to JPA. The survey was designed to explore practice needs and satisfaction with JPA, its contracted payers, and JPA's preferred vendors. The survey represents an opportunity for JPA's member practices to supply input related to the PO's operations and direction.

The overall response rate was 51%, which represents the typical percentage of respondents that JPA sees year to year.

The following are key findings of the survey:

- Reimbursement from insurance payers, patients' ability to pay, increased overhead/workload to achieve all pay-for-performance and quality initiatives, and the economy and healthcare reform are the most pressing issues noted by practice managers for 2010.
- Overall satisfaction with JPA continues to be high, with an average rating of 8.14 on a scale of 1 to 10 and a "grade score" of "A" (including A+, A, and A-) by more than half (55%) of the respondents.
- Practices continue to use a variety of traditional and new forms of marketing for their practice. Patient education continues being dominated by brochures and highlight sheets with some increase in newer forms of education (i.e. reference websites and referral to community providers).
- Overall, communications from JPA (JPA Examiner newsletter, website, physician direction, and preferred vendor directory) continue to provide value to practices.

JPA NCQA PPC®

PCMH Application Process

In February, the JPA Board decided to move forward with the submittal of National Committee for Quality Assurance (NCQA)



Physician Practice Connections® (PPC) Patient Centered Medical Home (PCMH) applications with a goal of completing the application process by 2010 year end. The board also hired an outside consultant, Mr. Jed Constantz, to assist practices with the application process and has augmented its dedicated PCMH staff (see Susan Maxsween below).

In an effort to streamline the process, JPA has identified Primary Care Physician practices to be included in the application process and will provide policies and procedures for each PCP practice to adopt.

The following steps remain for chosen practices to be eligible for NCQA PPC PCMH approval:

June, July and August 2010 - Assemble documentation related to NCQA PCMH standards.
Organize the documentation by practice.

September 2010 - Assemble application and verify documentation.

September 30, 2010 - Submit application online to NCQA.

October and November, 2010 - Undertake NCQA site visit.

December 2010 - Notification from NCQA regarding application request.

NCQA PHQ

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and considered feedback from a formal public comment period. The PHQ standards were approved by NCQA's multi-stakeholder Standards Committee and by its Board of Directors.

PHQ evaluation is divided into two standard areas: (1) Measuring Physician Performance, which assesses how organizations measure and report on physician performance; and (2) Hospital Performance, which reviews whether third-party information on hospital performance is available in a manner that is useful to members. An organization can be reviewed on either standard or on both standards.

The PHQ standards are built on the following principles:

- **Standardization and sound methodology**, allowing results to be compared across organizations;
- **Transparency**, giving physicians and hospitals the opportunity to provide input on measurement programs and how measurement results will be used;
- **Collaboration**, pooling data on standardized measures to produce results with greater statistical reliability; and
- **Action on quality and cost**, avoiding the use of cost measurement results alone.

To learn more, visit the NCQA website at www.ncqa.org.

Need help with your NCQA application? Call Susan Maxsween at RMS

Susan Maxsween recently joined RMS as the Healthcare Transformation Manager at Research & Marketing Strategies, Inc. (RMS). In her role, Susan works with primary care physician groups helping them to prepare for National Committee for Quality Assurance (NCQA) Physician Practice Connection Patient Centered Medical Home accreditation. Susan will work with both physicians and practice managers to help them ensure that quality improvement processes are in place to help optimize patient care.

Susan has direct past experience working with NCQA officials and achieving accreditation goals.



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**Making
Healthcare Better**

Looking for a specific topic in The JPA Examiner?

E-mail comments, ideas or suggestions to ErinW@RMSresults.com.

Welcome JPA's newest staff members

Jackson Physician's Alliance recently added new staff members Erika Byrum as the Healthcare Management Associate and Kristin Schaller as the Office Coordinator.

Erika assists Bonnie Mauch with moving the practices along the Patient Centered Medical Home (PCMH) continuum. She is focusing on helping medical practices find solutions to improve HEDIS indicators, increasing compliance with preventive screenings and insurance company pay-for-performance criteria.

Kristin is the face and voice of JPA, greeting guests who visit the office and directing those who phone in. She takes care of the day-to-day needs of the office including updating the website calendar, performing administrative duties, sending notices of meetings and reports via e-mail.



Erika Byrum



Kristin Schaller

JPA's Open Enrollment is Now

Open enrollment for JPA health insurance will take place throughout the month of June. JPA offers its member practices the opportunity to enroll employees into its health insurance program. To learn more, JPA members should contact Lori Zajec (of JFP Benefit Management) at 1-800-589-7660 or LZajec@JFPbenefitmanagement.com.



JPA Salutes its Own for Excellence Award

The medical practice of **David B. Munro, MD, PC**, has received a special recognition award for excellence in patient safety, quality care and risk management from American Physicians Assurance Corporation (APAC).

Dr. Munro's practice is one of only three medical offices selected for recognition out of 877 that participated in a comprehensive On-Site Risk Management Assessment conducted in 2009 by APAC.

"Our on-site assessment is a rigorous review of important factors," said Ann Prater of APAC. "We commend Dr. Munro and the entire staff for the excellence they bring to their profession every day."
JPA is proud to have Dr. Munro as an active member.

Celebrating Success

administration can be very proud.

The JPA results were higher than those from Michigan State University, Lansing area PC Physicians Group, the Baw Beese Medical Group, Sparrow Family Health Center and several other regional primary care groups.

The BCN PRP program measures preventive care services related to diabetes, cardiovascular

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disease testing, adolescent immunizations, cancer screening and well child. The overall goal was 75.0%. JPA's actual results were significantly higher than this.

The BCN PRP is a pay-for-performance program for primary care physicians targeted toward attaining HEDIS goals. JPA has been participating in the program since 2004.