

**Specialist Program Summary****Patient Centered Medical Home – Neighbor (PCMH-N)**

An expansion of the current PCMH Program designed for Specialist (SCP) who are considered the “neighbors” with whom PCPs work to deliver the best care possible to patients. BCBSM’s vision is for the PCMH-N program, along with the PCMH program, to help create high functioning healthcare “neighborhoods” and overall Organized Systems of Care (OSC).

- **Focus/Goals:**
  - Support population management in collaboration with PCPs
  - Ensure effective communication & coordination with PCP practices
  - Provide appropriate and timely consultations and referrals
  - Clearly define roles and responsibilities of PCPs and SCPs when it comes co-managing patients’ care
  
- **PCMH-N Interpretive Guidelines (IGs):**
  - Provides the building blocks (capabilities) to a practice transforming into a PCMH-N site
  - Broken down into 13 Domains of Functions (“Chapters”)
  - 173 Capabilities
  
- **PCMH-N Site Visits:**
  - In 2015, BCBSM began conducting PCMH-N Site Visits
    - SCP offices are randomly selected
  - **BCBSM Objective of PCMH-N Site Visits:**
    - To validate the PCMH-N capabilities reported
    - To understand and learn about the work being done in SCP practices across the state
  - **Scoring of PCMH-N Site Visits:**
    - Practice will receive a score based on their performance during the visit
    - Practices’ PCMH-N scores impact the physician organization in the PGIP program and may impact SCP VBR as a future metric
  
- **Where to Start Building:**
  - Domains of Focus for PCMH-N:
    - Domain 1.0: Patient Provider Partnership
    - Domain 2.0: Patient Registry
    - Domain 4.0: Individual Care Management
    - Domain 5.0: Extended Access
    - Domain 6.0: Test Tracking Results & Follow-Up
    - Domain 8.0: Electronic Prescribing
    - Domain 10.0: Linkage to Community Services
    - Domain 11.0 Self-Management Support
    - Domain 12.0 Patient Web Portal
    - Domain 13.0: Coordination of Care
    - Domain 14.0: Specialist Pre-Consultation & Referral Process

The Beaumont ACO provides support to specialist practices in both the PCMH-N & SCP VBR program. Specialist practices are assigned a Practice Transformation Coordinator who will instruct and guide each practice on their journey of becoming a PCMH-N office and provide education on the SCP VBR program.

#### Specialist Value-Based Reimbursement (SCP VBR)

A PGIP incentive program for specialist physicians (SCP) based on Quality and Cost Metrics. This program shows BCBSMs move from fee-for-service, to an approach that layers fee-for-value upon the fee-for-service foundation.

- **Focus/Goals:**
  - Strengthen relationships between SCPs & Primary Care Physicians (PCPs)
  - Promote the idea of shared responsibility
  - Encourage process creation vs. focus on individual patients
  - Population Management
  
- **Eligible:** All SCPs; must be in PGIP for at least two snapshot cycles.
  
- **Incentive:**
  - Specialist can receive **up to a 45% VBR** which applies to all BCBSM claims.
  - All RVU procedure codes **EXCEPT** those for ambulance, durable medical equipment, prosthetics and orthotics, anesthesia, immunizations, hearing, routine vision services, non-RVU lab service, dental, and most injections.
  
- **Important Program Details:**
  - Top 2/3 of nominated practices receive a VBR
  - Population-based metrics will be calculated based on the PO member population to which the specialist belongs
  - The following measures are used for **ALL** specialist when scoring for the VBR:
    - **Cost of Care (CoC) PMPM:** Combines the costs (allowed amounts) for both the facility & professional components of Medical-Surgical and Pharmacy claims. CoC reflects comparable patient care costs by removing charity care, bad debt, & direct and indirect medical education, thus estimating the true cost of care in actual dollars.
    - **Cost Difference:** Measures the change in cost of care (CoC) PMPM over time. It is calculated by subtracting the previous year's CoC PMPM from the current year's CoC PMPM.
    - **Global Quality Index (GQI):** A single composite score comprised of 35 quality metrics from across many PGIP initiatives and source from HEDIS, QRS, PGIP dashboards, and existing specialist VBR analytics.
  
- **How to Improve Scores:**
  - Reviewing and following evidence-based care medicine guidelines when decision making on patient care.
  - Communicate with PCPs who refer their patients to you, to help:
    - Improve continuity & quality of care
    - Efficiently document the care & services provided
    - Eliminate the duplication of services
    - Reduce cost
    - Improve & sustain patient satisfaction