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Date: August 2011
To: Alliance Primary Care Providers
From: Provider Services Department
Re: Care Based Incentives and the 2011 Practice Profile

MEMORANDUM

The Alliance is proud to announce the distribution of the second quarterly Practice Profiles for the Alliance's recently implemented Care Based Incentive (CBI) program. CBI is a program designed to compensate Primary Care Providers (PCPs) for efforts undertaken to improve access, quality and efficiency of care provided to eligible Alliance members. There is also a member component to CBI that incentivizes members for a variety of healthy behaviors.

CBI began on January 1, 2011. In order to inform PCPs of where they stand on CBI measures thus far, the Alliance developed the Practice Profile. The Practice Profile shows Primary Care practices their performance for each measure along with the median scores of their peers. The Practice Profile will also give a projected CBI incentive amount for 2011 should your practice continue to perform at the same level for the remainder of the year.

In late August 2011, the Provider Services Department distributed the Quarter 2 Practice Profiles to all participating PCPs. The Provider Services staff will be available to meet with and assist each PCP in understanding their Practice Profile and determine areas of opportunity for improvement in their CBI performance.

More information about the CBI program is provided in this packet:

- Example of a Practice Profile
- Incentive Summary
- Alliance CBI Forms: <http://www.ccah-alliance.org/formlibrary.html>




Please contact the Provider Services Department with any questions at 1-800-700-3874 extension 5504 (Monterey and Santa Cruz counties) or extension 5514 (Merced County).



Care Based Incentives Program Practice Profile

This Practice Profile provides a quarterly cumulative summary of your practice's fee for service (current quarter and year to date) and programmatic (projected) performance against the Alliance's CBI Program measures. Results reported are based on current data, and may be adjusted in subsequent reports dependent on performance comparison to peer practices and Alliance board determination of funding allocations.

Practice	Moss Landing Medical Associates	Specialty	FAMILY PRACTICE
Report period from	1/1/2011	Your average practice membership	460
Report period to	12/31/2011	Peer average practice membership	628

Method	Measure	Measure category				Total possible points	Practice points
Access to practice							
FF/TH	<i>Extended office hours</i>	Your practice	Amount needed to qualify	Amount received QTD	Amount received YTD		
	Hours above 40 per week	10	8	\$5,516.00	\$5,516.00		
PR/TH	<i>Primary care visits</i>	Your Practice	Amount needed to qualify				
	Total visits	976					
	Visits per member / Y	2.10	2.25 - 3 = 2.5 points >3 = 5 points			5	2.5
PR	<i>Preventable ED visits ↓</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Total ED visits	225					
	Overall ED rate per (K / Y)	489	610				
	Percent preventable	27%	28%				
	Rate of preventable visits (K / Y)	132	171	90.0%	1	20	20
TH	<i>Member reassignments from practice</i>	Your practice	Your peer mean	Std. dev			
	Number of reassignments	1					
	Reassignments per (K / Y)	2.2	2.7	0			
Preventive care							
PR	<i>Well child visits</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Members eligible	52					
	Members with visits	41					
	Rate (%)	79%	76%	60.0%	2	3	1.5
PR	<i>Adolescent visits</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Members eligible	27					
	Members with visits	19					
	Rate (%)	70%	65%	99.0%	1	3	3

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Method	Measure	Measure category				Total possible points	Practice points
Disease detection							
PR	<i>BMI percentile calculated</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Visits eligible	227					
	Members with visits	205					
	Rate (%)	90.00%	85%	72.0%	2	4	2
PR	<i>Breast cancer screening</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Members eligible	19					
	Members screened	12					
	Rate (%)	63%	85%	15.0%	4	3	0
PR	<i>Cervical cancer screening</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Members eligible	25					
	Members screened	16					
	Rate (%)	64%	85%	40.0%	3	3	0
Managing chronic conditions							
FF	<i>Childhood obesity notification</i>	Number referred QTD	Number referred YTD	Amount received QTD	Amount received YTD		
	<i>Amount per referral \$25</i>	10	12	\$250.00	\$300.00		
<i>Patients with Diabetes</i>							
PR	<i>LDL testing</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Members eligible	19					
	Members screened	15					
	Rate (%)	79%	62%	95.0%	1	3	3
PR	<i>HbA1c testing</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Members eligible	19					
	Members screened	18					
	Rate (%)	95%	90%	60.0%	2	3	1.5
PR	<i>Nephropathy screening</i>	Your practice	Your peer median	Practice percentile	Quartile		
	Members eligible	19					
	Members screened	16					
	Rate (%)	84%	88%	35.0%	3	3	0
FF	Pts receiving all above interventions plus retinopathy screening	Pts that met all 4 QTD	Pts that met all 4 YTD	Amount received QTD	Amount received YTD		
	<i>Amount Per Pt: \$100</i>	7	8	\$700.00	\$800.00		

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Method	Measure	Measure category			Total possible points	Practice points
Managing chronic conditions - cont.						
<i>Patients with asthma</i>						
PR	<i>Controller medications</i>	Your Practice	Your peer median	Practice percentile	Quartile	
	Members eligible	65				
	Members with controller meds	51				
	Rate (%)	78%	76%	55.0%	2	5 2.5
FF	<i>Asthma actions plans</i>	Plans submitted QTD	Plans submitted YTD	Amount received QTD	Amount received YTD	
	Amount per plan \$35	22	30	\$770.00	\$1,050.00	
FF	<i>Medication management agreements</i>	Agreements submitted QTD	Agreements submitted YTD	Amount received QTD	Amount received YTD	
	Amount per agreement \$50	6	12	\$300.00	\$600.00	
PR	<i>Preventable inpatient admissions ↓</i>	Your practice	Your peer median	Practice percentile	Quartile	
	Total admissions	15				
	Overall rate (admit / K / Y)	33	40			
	Percent preventable	22%	28%			
	Rate (admit / K / Y)	7.26	11	96.0%	1	30 30
Prescribing						
PR	<i>Percent generic prescriptions</i>	Your Practice	Your peer median	Practice percentile	Quartile	
	Number of prescriptions	2,205				
	Number of generic prescriptions	2,000				
	Rate (prescriptions / member / Y)	4	6			
	Rate of generic prescriptions overall (%)	90%	78%	97.0%	1	10 10
Practice management						
PR/TH	<i>Percent of claims submitted electronically</i>	Your practice	Percent needed to qualify			
		97%	95%			5 5

Care Based Incentives Program Practice Profile

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Method	Measure	Measure category	Total possible points	Practice points
Practice summary - Totals (QTD and YTD for FFS and projected for programmatic) with comparison to peer practices				
FFS measures		<i>Amount QTD</i>	<i>Amount YTD</i>	
<i>Amount received for FFS activities</i>		\$7,536.00	\$8,266.00	
Programmatic measures		<i>Your practice</i>	<i>Peer score</i>	<i>Potential</i>
<i>Total points</i>		81.0	77.2	100.0
<i>Projected amount earned for 2011</i>		\$5,031.88	\$8,000.00	
				<i>Projected</i>
Total amount earned PR + YTD FFS ⁽¹⁾				\$16,266.00
Additional practice parameters		<i>Your practice</i>	<i>Peer score</i>	
<i>Amount earned per member per month</i>		\$2.84	\$2.43	
<i>Amount extra received per visit</i>		\$16.05	\$12.17	

Legend
 PR = Programmatic measures - most are calculated by relative ranking
 FF = Fee for service (FFS) - most paid as services are provided
 TH = Threshold - used to calculate certain measure. Can be applied to programmatic or FFS
 K / Y = rate per 1000 member per year
 MNS = Membership not sufficient
 YTD = Year to Date
 QTD = Quarter to Date
 ↓ = Lower rates represent better performance

Quartiles

1st: Top 75%-99%		2nd: Top 50%-74%		Membership not sufficient	
3rd: Low 25%-49%		4th: Low 0%-24%			

Incentive Summary

Measure		FFS or Program ²	CBI, QBI or HEDIS ³	Practice		Member	
Name	Description ¹			Alliance Support Activities & Programs	Frequency / Method ⁴	Alliance Incentives & Reminders	Frequency
Access to Care Measures							
Extended Office Hours	Practices with office hours held for at least 8 hours beyond Mon - Fri 8 AM to 5 PM.	F	C	-Provider Attestation Form -Provider office hours included in Provider Directory	Annually	N/A	N/A
Primary Care Visits	Target of 3 or more PCP visits per year. CHDP & well visits excluded.	P	C, H	Roster of new linked members	Monthly (via Provider Portal)	New members who complete & return quiz to Alliance about access to care are entered into a gift card raffle.	Monthly raffle
Appropriate Emergency Department Use	Practice site's ED utilization defined by lower level of care (ED Visits Codes 99281-99283) calculated as a rate per 1,000 member per year.	P	Q	-List of patients with ≥ 3 ED visits visit within last quarter provided to practice	Quarterly (based on claims data)	Patients on list are mailed letters urging them to contact their PCP.	Quarterly mailing
Preventable Emergency Department Visits	Practice site's ED utilization defined by NYU diagnosis calculated as a rate per 1,000 member per year.	P	C	-Preventable ED Visits Code Guide available via Alliance website		Parents/guardians of members who receive the book "What To Do When Your Child Gets Sick" who complete & return quiz to Alliance are entered into a gift card raffle.	Monthly raffle
First Trimester Prenatal Visit	Pregnant members who have an initial visit within their first trimester of pregnancy.	F	C, H	N/A	N/A	Female members receive mailing on prenatal health & member incentives along with Prenatal form. Members who have visit are eligible to receive a gift card.	Monthly for new members
Postpartum Visit	Members who attend a postpartum visit within 21 to 56 days of the newborn's birth date.	F	C, H	N/A	N/A	Female members who have delivered a newborn receive mailing on scheduling a postpartum visit along with Postpartum form. Members who have visit are eligible to receive a gift card.	Weekly mailing
Member Reassignments	PCPs who reassign members at a rate that exceeds the Plan average by more than one standard deviation are disqualified from participation in the programmatic components of CBI.	P	C	-Alliance mails letters to members with missed appointments. -Providers can submit a Member No-Show Notification Form, directly from their Web Account	As notified (via Provider Portal)	Members who have not missed a scheduled appointment in the last six months are entered into a gift card raffle (upon notification from PCP to Alliance).	Monthly raffle
Preventive Care Measures							
Well Child Visits	The percentage of members 3-6 years of age who were continuously enrolled during measurement year, & who received a well-child visit with a primary care provider.	P	C, Q (FP, Ped), H	List of members, who may not have had a visit in the last 12 months, provided to PCP	Monthly, in coordination with date of birth (via Provider Portal)	Alliance mails reminders for well-care visit to members.	Monthly mailing (tied to member's birthday)
Adolescent Well Care Visits	The percentage of members 12-21 years of age who were continuously enrolled during the measurement year who had a comprehensive well-care visit with a primary care provider or an OB/GYN provider.	P	C, Q (FP, Ped), H	List of members, who may not have had a visit in the last 12 months, provided to the PCP	Monthly, in coordination with date of birth (via Provider Portal)	Members are mailed birthday reminders for well-care visits. Members who attend an annual well-care visit are automatically entered into a bike/gift card raffle.	Monthly mailing (tied to member's birthday)

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Incentive Summary

Measure		FFS or Program ²	CBI, QBI or HEDIS ³	Practice		Member	
Name	Description ¹			Alliance Support Activities & Programs	Frequency / Method ⁴	Alliance Incentives & Reminders	Frequency
Disease Detection Measures							
Breast Cancer Screening	The percentage of women 40-69 years of age who were continuously enrolled during the measurement year & the year prior & who had a mammogram during the measurement year or the year prior.	P	C, Q (FP, I), H	List of members who may have missed a screening in last 24 months provided to PCP	Three a year (May/Aug/Nov)	Reminders for screening mailed to female members with 0 claims for screening.	Twice yearly mailing (May/Nov)
Cervical Cancer Screening	The percentage of women 21-64 years of age who were continuously enrolled during the measurement year & the two years prior & who received one or more cervical cancer screening tests (e.g., Pap smears) during the measurement year or the two years.	P	C, Q (FP, I), H	List of members who may have missed a screening in last 36 months provided to PCP	Three a year (May/Aug/Nov)	Reminders for screening are mailed to female members with 0 claims for screening.	Twice yearly mailing (May/Nov)
BMI Percentile Calculated	The percentage of children & adolescents 3-17 years of age who were continuously enrolled during the measurement year and who had a body mass index (BMI) percentile determined during a visit.	P	C, H	Data available in Practice Profiles	Quarterly	N/A	N/A
Managing Chronic Conditions							
Childhood Obesity Notification	Notification to the Alliance (using the Plan's form) of BMI ≥ 90th percentile in children ages 3-18 once a year. Payment made for submission of childhood obesity notification.	F	C	N/A	N/A	Members referred by their PCP with BMI ≥90th percentile & who are able to reduce their BMI by 10% by their next annual measurement receive a gift card.	Annual incentive
Annual monitoring for members on angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blockers (ARB)	The percentage of members 18 years & older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year & at least one therapeutic monitoring event for the therapeutic agent.	P	Q (FP, I)	N/A	N/A	N/A	N/A
Diabetes Care							
LDL-C Testing	The percentage of members with diabetes (Type I or Type 2) 18-75 years of age who were continuously enrolled during the measurement year, & who had an LDL-C study done.	P	C, Q (FP, I), H	For all four diabetes care measures: List of members in the target age group with diabetes & their most recent lab studies provided to the PCP	Twice yearly (May/Nov)	For all four diabetes care measures: All members with a diagnosis of diabetes are mailed reminders for routine care & are contacted through Alliance outreach calls	Twice yearly mailing (May/Nov)
HbA1c Testing	The population described above who had one or more HbA1c tests conducted during the measurement year.	P	C, Q (FP, I), H				
Nephropathy Screening	The population described above who had appropriate evaluation for diabetic nephropathy conducted during the measurement period.	P	C, H				
Screening Retinal Exam	The population described above who had a retinal examination for detection of diabetic retinopathy; examination can be done by ophthalmologist or optometrists.		C, H				
Composite Diabetes Services	PCP paid quarterly for each member who received a HbA1c, LDL-C, Retinal exam, Nephropathy screen during the Fiscal Year. The Member must be linked to the Provider at the date of service.	F	C, H	N/A	N/A	Members ages 21-75 obtaining all four diabetes screening measures in a calendar year receive a gift card.	Annual incentive

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Incentive Summary

Measure		FFS or Program ²	CBI, QBI or HEDIS ³	Practice		Member	
Name	Description ¹			Alliance Support Activities & Programs	Frequency / Method ⁴	Alliance Incentives & Reminders	Frequency
Asthma Care							
Controller Medications in Asthma	The percentage of members 5–50 years of age who during the measurement year were identified as having persistent asthma & who were appropriately prescribed medication during the measurement year.	P	Q (Ped, FP), H	List of members with asthma sent to providers	Twice yearly (May/Nov)	Reminder letter sent to members; other programs under development	Twice yearly mailing (May/Nov)
Asthma Medication Ratio	The percentage of members 5–50 years of age who were identified as having persistent asthma & had a ratio of controller medications to total asthma medication of 0.50 or greater during the measurement year.	P	C				
Pediatric Asthma Action Plan	Using the Alliance's form, PCP is paid \$35 for each submission of an asthma action plan for asthma patients up to age 18.	F	C,Q (Ped, FP)	Asthma Action Plan form provided on Alliance website	N/A	Members ages 18 & younger who complete an asthma action plan with their PCP are entered into a gift card raffle	Monthly raffle
Prescribing							
Rate of Generic Prescriptions	Percent of prescriptions filled by generic drugs among all prescriptions provided to patients by that practice.	P	C	-Formulary available on Alliance website & via Epocrates. -Alliance may require prior authorization for branded Rx. -Access to member specific drug use is available via Web Account Services Provider Portal.	N/A	Articles in member newsletter promoting generic drug utilization.	Annual article
Practice Management							
Medication Management Agreement	Using the Alliance's form, PCP is paid \$50 for each Medication Management Agreement for controlled substances.	F	C, Q (I, FP)	Medication Management Agreement form provided on Alliance website	N/A	N/A	N/A
Preventable Inpatient Admissions	The percent of hospital admissions for Ambulatory Care Sensitive Conditions (as defined by the federal Agency for Healthcare Research and Quality (AHRQ)) among all hospitalizations for that practice.	P	C	N/A	N/A	N/A	N/A
Percent of Claims Submitted Electronically	Percent of all eligible claims & encounter data submitted to the Alliance that were submitted electronically among all claims submitted by that physician or practice. Target Measure: Target level is 95%. CDHP and Medicare-Medicaid crossover claims are excluded.	P	C	Alliance provides EDI support	N/A	N/A	N/A

Legend:

¹Descriptions are for summary purposes only and do not supercede the descriptions in the Alliance contract with Primary Care Providers.

Additional information and an interactive version of this document is available at:

www.ccah-alliance.org

²FFS = fee for service (paid quarterly as services provided); P = programmatic (paid yearly based on performance)

³C = CBI or Care Based Incentive; Q = QBI or Quality Based Incentive; H = HEDIS. QBI measures do not apply to all specialties: Ped = Pediatrics, FP = Family Medicine, I = Internal Medicine

⁴Method of Distribution: HC = Hard Copy; PP = Alliance Web Provider Portal

For PCPs with an Alliance Web Account, click here to access HEDIS Technical Specifications Third Layer:

<https://portalprod.ccah-alliance.org/pls/apex/f?p=NCQA:2;>

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