

2017

## EXPECTATIONS OF PRACTICES IN THE PHYSICIAN GROUP INCENTIVE PROGRAM *SPECIALIST PRACTICES*

*A cornerstone of enrollment into the Physician Group Incentive Program (PGIP) is the pursuit toward building the Patient Centered Medical Home Neighborhood (PCMH-N) and obtaining the Specialist Valued Based Reimbursement by Blue Cross Blue Shield of Michigan. In your pursuit of PCMH-N development, our Practice Resource Team (PRT) is a dedicated resource to support your practice. Specialists must engage and commit to systematically implement a significant number of PCMH-N capabilities that are relevant to their specialty type and develop coordination of care processes. Specialists are also needed to develop processes to improve cost and quality to be nominated for the Specialist Valued Based Reimbursement opportunity in PGIP.*

*To be nominated for Specialist Fee Valued Based Reimbursement, practices must engage the Practice Resource Team (PRT) regularly to:*

- 1) Ensure that the practice understands the PGIP, PCMH-N and Specialist Valued Based Reimbursement program requirements*
- 2) Improve ability of obtaining and maintaining PCMH-N standing*
- 3) Review available data and focus on performance improvement activities*
- 4) For practices with < 100 capabilities, implement at least two (2) new PCMH-N capabilities within the year*
- 5) Systematically work toward Specialist Service Excellence Awards (optional but encouraged)*

### **Requirements for the Physician Group Incentive Program are:**

- **Engagement - Meet with Practice Resource Team:**
  - Complete a self-assessment data (SAD) survey twice a year to accurately report progress in collaboration with assigned PRT member.
  - Complete a physician champion visit twice a year for performance improvement.
  - Quarterly (more often as needed) meetings with PRT member to implement additional PCMH-N capabilities and/or for performance improvement activities based on practice opportunities for improvement.
- **Patient Centered Medical Home Neighborhood Capabilities:**
  - Practice will systematically implement PCMH-N capabilities that are relevant to their specialty type.
  - Practice will inform their PRT member if they are no longer meeting a capability that was previously noted as being “in place” and will work with PRT member to get it back “in place.”
  - Practice will implement at least 2 new capabilities per year until specialty maximum is obtained.
- **Performance Improvement:**
  - Meet with PRT at least bi-annually to review performance reports (as available for your specialty).
  - Develop Practice Process Improvement Plan (PPIP) from identified opportunities.
  - Actively work with PRT to improve identified data opportunities through PPIPs.
  - Follow up with any Practice Performance Improvement Plan.

### **Disenrollment from the Physician Group Incentive Program:**

There is a policy that has identified steps to dis-enroll practices from PGIP who do not meet the above outlined engagement expectations which is executed through The Physician Alliance Physician Performance and Enhancement Committee.