

Quality Improvement Strategy: Summary

Issuer Name: Premera Blue Cross

QHPs to which this Quality Improvement Strategy (QIS) applies:

All QHPs in the Exchange

QIS Title:

Global Outcomes Contracting for Quality and Value

QIS Topic Area: QIS

- Improve Health Outcomes
- Implement Wellness and Health Promotion Activities

Description:

Premera is moving forward with an Accountable Care model using a global outcomes contracting program. The program will include paying for quality as a part of the fee-for-service standard. This change will help control costs as well as quality. Payment in the global outcomes contract program still is fee-for-service-based, with savings shared approximately 50-50 between the group and the health plan. If a group does not meet quality goals, fees may be reduced the following year.

The global outcomes program supports Premera's corporate strategy to improve the cost and quality of care our customers receive. This strategy includes supplying providers with tools to identify quality opportunities, implementing a standard reporting package, quality incentives, actively engaging provider groups in quality improvement activities, and expanding capabilities to store non-claims data to integrate with quality.

Rationale for QIS:

Premera's approach supports providers by allowing them to decide how they want to tackle their most significant cost and quality opportunities. The two HEDIS measures chosen (colorectal screening and diabetic eye care) are consistently two of the worst performing measures across providers who have a global outcomes contract. These measures cover diabetes, a common chronic condition, and cancer screening for the older adult population.

Activities that Will Be Conducted to Implement the QIS:

- Meeting with provider groups
 - Review care gap list with and send updated list monthly
 - Review progress since last meeting to close care gaps on a quarterly basis
 - Evaluate current and future action plans to evaluate for success
- Data exchange opportunities:
 - Evaluate electronic medical record access
 - Supplemental data exchange
 - Providers must meet or exceed their performance on the quality portion of the agreement to earn shared savings bonus

QIS Goal 1:

Measure(s) used to track progress of Goal 1:

Increase the overall rate of colorectal cancer screening (claims by 5% from baseline for members ages 51-75.

Administrative rates only (claims)

Denominator—member's 51-75 years of age

Numerator – One or more screenings for colorectal cancer through any of the three following methods:

- Fecal occult blood test (FOBT) or fecal immunochemical test (FIT) annually
- Flexible sigmoidoscopy every five years
- Colonoscopy every 10 years

How measure reflects progress toward Goal 1:

Colorectal cancer is the second leading cause of cancer death in the United States for men and women. The disease is highly preventable if detected early through screening when treatment is extremely effective. Low rates may indicate inefficient processes in reminder systems and offering alternatives to colonoscopies.

QIS Goal 2:

Measure(s) used to track progress of Goal 2:

Increase the overall diabetic screening for eye examinations (claims) by 5% from baseline

Administrative Rates only (claims)

Denominator: Members' ages 18-75 years of age with diabetes (type 1 and type 2 show had the following
Numerator: an eye screening for diabetic retinal disease in the measurement year

- A retinal or dilated eye exam by an eye care professional in the measurement year
- A negative retinal or dilated eye exam by an eye care professional in the year prior

How measure reflects progress toward Goal 2:

Diabetes is the seventh leading cause of death in the United States. It is a complex group of diseases marked by high blood sugar due to the body's inability to make or use insulin. Left unmanaged, diabetes can lead to serious complications such as, heart disease, stroke, hypertension, blindness, kidney disease, disease of the nervous system, amputations, and premature death. Low rates may indicate inefficient processes in reminder systems and lack of emphasis on yearly eye retinal exam for good vision and good health.