

Provider Performance Analytics

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Agenda

Overview of Provider Performance Analytics

- Measurements and Reports
- Cover letter and mailings
- Access with Blue e
- Physician Reconsideration Process

What will Provider Performance Analytics bring to the Table?

- Sharing of claims-based information with contracted physician practices.
- Assistance identifying and decreasing potential gaps in care.
- Documentation for NCQA recognition programs
- Streamlined office processes: ability to identify patients needing f/u appointments → generate revenue.
- Provides feedback on quality and performance Measures

Measures

- Reports will include 22 nationally recognized cardiac and HEDIS measures.
- Measures focus on preventative care, cardiac services, heart failure, and diabetes.
- Three measures will address pediatrics:
 1. use of appropriate medications for people with asthma
 2. appropriate testing for children with pharyngitis
 3. appropriate treatment for children with URIs.

Reports

Report	Definition
Measures Report	ID, name, description, clinical rationale and citations for each measure included in the run. This report will be the same for all physicians.
Summary Report	Based on each individual measure, this report will tell you how many of the physician's patients were vetted to each measure (denominator) and of those the total number who have claims data in our system showing the measure has been met (Numerator) . An adherence rate is then calculated for each measure. Looking at a composite of all patients vetted to this measure, a peer adherence rate is assigned for each measure as well.
Patient Report	An individual physician's report, showing a complete list of all patients who based on claims data were deemed appropriate to be vetted against each measure. This report is in Excel format- to allow sorting and printing in multiple ways to meet the practice's needs.

Mailings to physicians will have 3 components

- A cover letter explaining the intent and logistics of this program.
- A brief summary that outlines the measures and provides an overview of individual and peer comparison of adherence rates.
- A link to access registration page as well as a personal registration code.

Blue e

Blue e is the provider portal on www.bcbsnc.com

- Utilizing the link in the cover letter, physicians will use their NPI1 number and registration code to register and create a personal profile.
- Reports will be accessed on the administration tab.

Enter type1 NPI and registration code

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Blue e

Please register to review your unique reports

Need Help?
Be sure you have entered your rendering provider or individual NPI number. If you are still having problems logging in, please call Quality Based Networks at 1-919-765-xxxx.

Warning: You are attempting to access a private computer system. Unauthorized access is prohibited. System use is monitored and recorded, therefore users should have no expectation of personal privacy when using this system. Anyone accessing this system agrees to use the system only as authorized and expressly consents to such monitoring. Blue Cross and Blue Shield reserves the right to access, use and disclose any and all information on the system as provided or allowed by federal or state law.
You agree to comply with all security requirements Blue Cross and Blue Shield of North Carolina may impose for use of the Blue e Network, and you agree not to attempt to circumvent such security requirements. By clicking "Log In" you are agreeing to these terms.


Type 1 NPI:

Registration Code:

Already registered?
Please [log in.](#)

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Physicians will create a Profile on Blue e

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Blue e 12/8/2009 9:19:56 AM

[Accept Terms >>](#) [Create Your Profile](#)

Create Your Profile

A

1. Create a User ID and password

*User ID:
Must contain at least 6 characters

*Password:
Must contain a number or a symbol

*Confirm Password:

2. Select your security question.
As an added measure of security, please select a question that only you will know the answer to, and provide the answer.

~ Security Question:

~ Your Answer:

~ Retype Your Answer:

3. Provide your contact information Is your name displayed incorrectly? Please correct any information that is incorrectly displayed.

~ First Name: Middle Initial: ~ Last Name: **B**

* Email Address:

~ Phone: () - Ext.

Fax: () -

~ Required Field

Submit **C**

Blue e home page

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Blue e | Welcome jane-doctor | 11/23/2009 2:26:27 PM

Home Administration Resources **A**

What's New
New Home Page Redesign coming October
[View All Articles >](#)

Administration
BCBSNC Disclosures
Performance Reports **B**

Related Links **C**
BCBSNC eSolutions Web Site
BCBSNC.com for Healthcare Providers
Blue Book for Healthcare Providers November 2008
Prior Plan Approval (PPA) List
Use ePrescribe to submit your prescriptions online

[The Blue BookSM Provider Manual](#)

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Viewing reports on Blue e

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Blue e | Welcome jane doctor | 11/24/2009 10:30:42 AM

Home Administration Resources

Home > Administration > Performance Reports

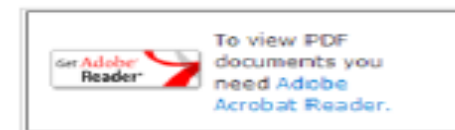
Performance Reports

You have 4 sets of reports available **A**

Please review [Frequently Asked Questions](#) for more information.

C [Lookup Another Provider](#)

B Date	Report Name	Summary Report	Patient Report	Measures Report	FAQs
mm/dd/yyyy	<Run Name>	View PDF	Download in Excel	View PDF D	View PDF D
mm/dd/yyyy	<Run Name>	View PDF	Download in Excel	View PDF	View PDF
mm/dd/yyyy	<Run Name>	View PDF	Download in Excel	View PDF	View PDF
mm/dd/yyyy	<Run Name>	View PDF	Download in Excel	View PDF	View PDF



Key Messages

- To maintain confidentiality- reports are accessed with rendering NPI number and can only be viewed by the individual physician.
- Reports are intended to be informational only.
- BCBSNC is not using these reports for any other purpose.
- The primary goal of this program is to improve outcomes for patients (our members).

Importance of Reconsideration Process

- Provides physicians input into accuracy of report data.
- Increases accuracy with identification of gaps in care.
- Defined process for physicians to request a change in subsequent report runs.
- Tracking mechanism to evaluate program processes
 - Provider attribution logic
 - Accuracy of denominator /numerator definitions

Potential Reconsideration Types

- “Not my patient”
- Measure not met / procedure not done because....
 - wrong diagnosis
 - not appropriate
 - antibiotic prescribed for another indication
- Measure met / procedure done elsewhere...
- Claims error- filed wrong or error with processing

Determination of Validity

Consideration	Process and Data Needed
Not my Patient	BCBSNC will review claims and assess who patient is “most often seen by”. Verify accuracy of attribution logic. Educate or accept reconsideration based on claims review.
Measure not Met / procedure not done	<p>Wrong Diagnosis- accept reconsideration and educate as appropriate.</p> <p>Procedure not appropriate- request and verify documentation (diagnosis/rationale and DOS) educate or accept reconsideration per medical judgment.</p> <p>Antibiotic for another indication- request and verify documentation (diagnosis and DOS). Accept reconsideration.</p>
Measure met/ procedure done elsewhere	Request and verify documentation (DOS and copy of report)
Claims error	<p>Verify and direct as appropriate:</p> <p>Filing Error- direct to re-file claim</p> <p>Processing error- request internal reprocess.</p>

Not Valid For Reconsideration

- **Patient refused procedure-** BCBSNC has no expectation for a perfect score. We believe the measures represent standards of practice that are reasonable for patients and it is the responsibility of the practice/physician to educate patients as to why care is needed.
- **Patient followed by GYN- should not “ding” PCP if did not have CCS-** While we can appreciate that patients who see a GYN present the challenge of co-management, using the PCMH model, the primary physician retains this responsibility.

Updating Data When Reconsideration Considered Valid

- All provider feedback will be tracked and documented.
- On the 8th Calendar day of each month all valid reconsiderations from previous month will be uploaded into Health Smart Designer, and will be pulled into all subsequent report runs.
- Reports will not be re-run for the physician at the time of reconsideration.