



New Jersey Academy of Family Physicians and Horizon Blue Cross Blue Shield of New Jersey Pilot Project

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New Jersey Academy of Family Physicians (NJAFP)

- Non-profit medical association for Family Medicine (Family Physicians)
 - Approximately 1800 New Jersey members
- Full time staff
- Web site: www.njafp.org

NJAFP/Horizon Blue Cross Blue Shield of New Jersey (Horizon) Pilot Project

- Project Overview
 - Mission
 - Accelerate assimilation of New Jersey primary care practices receiving PCMH designation to help ensure highest quality of care is provided
 - Goal
 - Implement a comprehensive project resulting in primary care practices putting processes and systems in place to receive designation and begin operating as PCMH

Pilot Project

Project components

- NCQA PCMH Recognition
- Quality metrics/cost savings
 - Focus on adult patients with diabetes
 - Additional measures include prevention services and screenings

NJAFP Roles

- Design, implement and oversee all activities
 - Recruitment
 - Monitoring “active” practice participation
 - Created and deployed curriculum for practices
- Dedicated resource for practices
 - Trainings and communications
 - Liaison with NCQA
 - Tools, resources, materials
 - Quality improvement
 - Health information technology

Horizon Roles

- Fund project
 - NJAFP infrastructure
 - Care coordination fee/defined payment to practices receiving NCQA PCMH recognition
 - Share cost savings with practices
- Patient attribution list development and dissemination
- Collaboratively identify quality measures and metrics

Pilot Project Participants

- Primary care practices
 - Targeted by specific criteria/geographically dispersed
 - Agree to:
 - Active participation throughout project
 - Identify physician and office champion
 - Monitor, track and document information
 - Seek NCQA recognition
 - Transform practice into operational PCMH
 - Report quality measures

Project Components and Time Frames

- Project began (Feb. 2009)
- Recognition project implementation (March 2009 – Oct. 2009)
- Quality metrics/cost savings component implementation (Oct. 2009 – Sept. 2010)
- Evaluation/lessons learned/successes (Nov. 2009 – Winter 2011)

Recognition Component

- NJAFP developed and implemented 16 week educational curriculum for practices
 - Collaborative and consultative model
 - NJAFP team provided education, guidance, assistance, resources and tools
 - Policy and process development and review
 - Documentation review and assessment
 - More

Participating Practice Demographics

- Practices located in 15 (out of 21) counties
- Solo, medium and large family practice, internal medicine sites, hospital owned sites, residency programs
 - Single location practices: 25
 - Multi-location practices: 9 (two to nine sites)
 - TOTALS
 - More than 60 practice locations
 - More than 165 primary care physicians

Amazing Accomplishment in ONLY Four Months (or Less) !

- 34 practices submit for recognition from 8/7/09 through 9/21/09
 - First practices received recognition status 9/10/09
 - Currently 32 practices received recognition
 - Level 1: 20 practices
 - Level 2: 5 practice
 - Level 3: 7 practices
 - Several paper-based practices
 - Average number of points achieved: 69.59

Practices are Changing

- Due to NCQA PCHM survey submission, practices have made changes
- Survey conducted in early September
 - Results of 22 practices that responded
 - All practices responding made changes

Survey Says...

“Did you make changes...due to submission for PCMH, if so which standards/elements?”

- Frequent changes made by practices include access and communications policies and monitoring, and test and referral tracking/follow-up
- Fewest changes made
 - E-prescribing
 - Advanced electronic communications

Changes Made

“List one change made in the practice that you deem has important impact as practice transforms to PCMH?”

- Top changes (in order)
 - Test tracking
 - Improved inter-office/team communications
 - Patient satisfaction surveys
 - Flow sheet implementation

Continuing the Journey: Transitioning to a Patient- Centered Medical Home



Focus Areas Moving Forward

- Enhanced coordination of care/care transitions
- Reduce avoidable emergency department visits and hospital admissions
- Participating vs. non-participating providers
- Medication adherence
- Team based care
- Physician/staff data feedback and improvement
- Patient self-management

Successes

- Practice satisfaction with project very positive
- Practices have begun to transform to operational PCMHs
- Positive recognition for Horizon and NJAFP
- Amassed extensive knowledge/expertise in guiding practices in recognition/transformation processes
- Horizon/NJAFP relationship/communications enhanced

Lessons Learned

- Hand-holding is important for success
- Size does not matter !
- Details are critical and necessary
- Communication is key
- Health plan and physician membership collaboration CAN WORK !!!

Practice Feedback

“We consistently implemented guidelines for important conditions. Best practices for both clinical and administrative were put into an organized system. Communication between administration and physicians as well as physician to patient are more cohesive in nature and outcomes are tracked and easily accessible.”

“We were one of those practice without anything written down...we now have a process and procedure manual. Staff has received training and we are putting it to use everyday.”

Practice Feedback (cont.)

“Better follow up for patients and awareness of our deficits, realizing that we need to implement an electronic record to maintain control and provide better follow up to all our patients, it is difficult to keep control in a paper based system which allows for gaps in care. The project made us aware of many aspects that need improvement in the education and training of our staff to better serve our patients.”

“We never would have been able to do this without this project. We actually had the NCQA tool for more than a year and did nothing with it. Thanks !”