

IHA P4P Measurement Set Evolution

	2003 Measurement Year / 2004 Reporting Year	2004 Measurement / 2005 Reporting Year	2005 Measurement / 2006 Reporting Year	2006 Measurement / 2007 Reporting Year
Clinical	<div>1. Childhood Immunizations w/ 12-month continuous enrollment</div> <div>2. Cervical Cancer Screening</div> <div>3. Breast Cancer Screening</div> <div>4. Asthma Mgmt.</div> <div>5. HbA1c Screening</div> <div>6. LDL Screening (patients with cardiac event only)</div> <div>Encounter threshold ≥ 2.7 enc. PMPY¹</div>	<div>1. Childhood Immunizations w/ 24-month continuous enrollment</div> <div>2. Cervical Cancer Screening</div> <div>3. Breast Cancer Screening</div> <div>4. Asthma Mgmt.</div> <div>5. HbA1c Screening</div> <div>6. HbA1c Control</div> <div>7. LDL Screening (patients with cardiac event and diabetics)</div> <div>8. LDL Control <130</div> <div>9. Chlamydia Screening</div> <div>Encounter threshold ≥ 3.25 enc. PMPY¹</div>	<div>1. Childhood Immunizations w/ 24-month continuous enrollment</div> <div>2. Cervical Cancer Screening</div> <div>3. Breast Cancer Screening</div> <div>4. Asthma Mgmt.</div> <div>5. HbA1c Screening</div> <div>6. HbA1c Control</div> <div>7. LDL Screening</div> <div>8. LDL Control <130</div> <div>9. Chlamydia Screening</div> <div>10. Appropriate Treatment for Children with Upper Respiratory Infection</div> <div>Encounter threshold ≥ 3.25 enc. PMPY¹</div>	<div>1. Childhood Immunizations w/ 24-month continuous enrollment</div> <div>2. Cervical Cancer Screening</div> <div>3. Breast Cancer Screening</div> <div>4. Asthma Mgmt.</div> <div>5. HbA1c Screening</div> <div>6. HbA1c Control</div> <div>7. LDL Screening</div> <div>8. LDL Control <130</div> <div>9. Chlamydia Screening</div> <div>10. Appropriate Treatment for Children with Upper Respiratory Infection</div> <div>11. Nephropathy Monitoring for Diabetic Patients</div> <div>12. Obesity Counseling</div> <div>Encounter threshold ≥ 3.5 enc. PMPY</div>
Weighting	50%	40%	50%	50%
Patient Experience	<div>1. Specialty care</div> <div>2. Timely access to care</div> <div>3. Doctor-patient -communication</div> <div>4. Overall ratings of care</div>	<div>1. Specialty care</div> <div>2. Timely access to care</div> <div>3. Doctor-patient -communication</div> <div>4. Overall ratings of care</div>	<div>1. Specialty care</div> <div>2. Timely access to care</div> <div>3. Doctor-patient communication</div> <div>4. Care coordination (CAS Composite)</div> <div>5. Overall ratings of care</div>	<div>1. Specialty care</div> <div>2. Timely access to care</div> <div>3. Doctor-patient communication</div> <div>4. Care coordination (CAS Composite)</div> <div>5. Overall ratings of care</div>
Weighting	40%	40%	30%	30%
Information Technology Investment	<div>1. Integrate clinical electronic data sets at group level for population management</div> <div>2. Support clinical decision making at point of care through electronic tools</div> <div>Requires 2 activities, at least one in each Measure; each activity is worth 5%</div>	<div>1. Integrate clinical electronic data sets at group level for population management</div> <div>2. Support clinical decision making at point of care through electronic tools</div> <div>Requires 4 activities of which at least 2 are in Measure 2; each activity is worth 5%</div> <div>Added more qualifying activities</div>	<div>1. Integrate clinical electronic data sets at group level for population management</div> <div>2. Support clinical decision making at point of care through electronic tools</div> <div>Requires 4 activities of which at least 2 are in Measure 2; each activity is worth 5%</div> <div>Added more qualifying activities</div>	<div>1. Integrate clinical electronic data sets at group level for population management</div> <div>2. Support clinical decision making at point of care through electronic tools</div> <div>Requires 4 activities of which at least 2 are in Measure 2; each activity is worth 5%</div>
Weighting	10%	20%	20%	20%

	2003 Measurement Year / 2004 Reporting Year	2004 Measurement / 2005 Reporting Year	2005 Measurement / 2006 Reporting Year	2006 Measurement / 2007 Reporting Year
Bonus Opportunity			Physician Incentive Bonus: Physician groups can receive up to an additional 10% for a physician-level incentive program incorporating regular measurement and feedback on clinical metrics and patient experience to individual physicians.	Physician Incentive Bonus: Physician groups can receive up to an additional 10% for a physician-level incentive program incorporating regular measurement and feedback on clinical metrics and patient experience to individual physicians. Improvement over previous year P4P results
Testing Measures – Measures to be collected but not reported	1. HbA1c Control 2. LDL Control <130	1. Appropriate Treatment for Children with Upper Respiratory Infection (HEDIS specification) 2. Nephropathy Monitoring for diabetics – Use HEDIS Administrative specification 3. Physician Incentive Bonus: Physician groups can receive up to an additional 10% for a physician-level incentive program incorporating regular measurement and feedback on clinical metrics and patient experience to individual physicians.	1. Flu shots for ages 50 to 64 – Collect sample size information through 2005 CAS survey 2. Colorectal Screening – Collect sample size information through 2005 CAS survey and explore administrative specifications 3. Nephropathy Monitoring for diabetics – Use HEDIS Administrative specification	1. Colorectal Cancer Screening 2. Misuse of Rescue Inhalers 3. Medicare Measures: <ul style="list-style-type: none"> Breast Cancer Screening Diabetes Care HbA1c Screening Diabetes Care HbA1c Poor Control LDL Screening <i>(Includes Pts. w/ Cardiovascular Conditions and Diabetics)</i> LDL Control <130 <i>(Includes Pts. w/ Cardiovascular Conditions and Diabetics)</i> Nephropathy Monitoring for Diabetic Patients Colorectal Cancer Screening
Development Measures– Measures for which specifications will be developed			1. Antidepressant Medication Mgmt. – alternative to HEDIS 2. Obesity – questions on CAS Survey 3. Diabetic Retinal Exam – modified from HEDIS Administrative specification	1. Redesign of IT Domain to Systemness Domain 2. Depression Management in Primary Care 3. Overall Quality Score (RAND QA Tool) 4. Efficiency Domain

Notes:

1. To assure that reasonably complete data is used to create clinical scores, data streams with fewer than the specified number of encounters per member year will not be used to create the clinical rates from aggregating plan-supplied data.