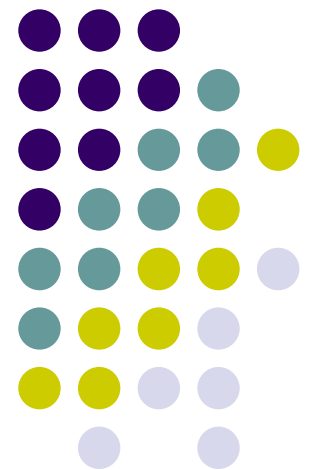


Driving Quality Through Incentives in a Municipal Hospital System

Government P4P Program: MetroPlus Health Plan

Arnold Saperstein, MD
Beverly Chung

The 2nd National Pay for Performance Summit
February 15, 2007





Session Outline

- MetroPlus Background
- Quality Incentive Programs
 - Evolution, Fundamentals, and Results
 - Generation 1: Annual QARR Awards
 - Generation 2: Medical Provider Performance Pool (MPPP)
 - Generation 3: Chronic Disease Pay-for-Performance (P4P)
- Take-Aways

MetroPlus Background



- Licensed since 1985 in New York State as a Managed Care Organization
- Prepaid Health Services Plan (PHSP)
- Wholly owned subsidiary corporation of the New York City Health and Hospitals Corporation
- Lines of business include Medicaid, Family Health Plus, Child Health Plus, MetroPlusGold, and HIV Special Needs Program

MetroPlus Background

Membership



- Approximately 250,000 as of January 1, 2007

Line of Business	# Members
Medicaid	190,000
Family Health Plus	38,000
Child Health Plus	19,000
MetroPlusGold	1,900
HIV Special Needs Plan	1,100

	Male	Female
Child (<19)	71,000	70,000
Adult	39,000	70,000

MetroPlus Background Network



- Built around HHC
- Includes:
 - All of HHC
 - Additional community providers and hospitals based on geographic and access needs

Provider Type	# as of Dec 2006
Primary Care	2,138
Specialty	5,292
OB/GYN	690
TOTAL	8,120

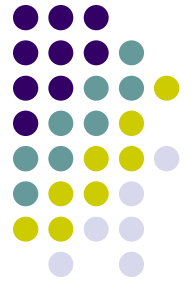
MetroPlus Background

Relationship with HHC



- HHC is the largest public hospital system in the United States
 - 11 tertiary care hospitals, 6 Diagnostic & Treatment Centers, over 70 offsite satellite clinics
- Close collaboration with our parent company
 - Forward-thinking environment
 - Mutual population served
 - Low-income, inner city communities, many racial minorities with higher health risk profiles

Quality Incentive Programs Evolution



- Since 1998, Annual QARR awards
 - QARR = Quality Assurance Reporting Requirements, an annual collection of quality measures reported to the NYSDOH; based on NCQA HEDIS measures
- Since 2002, Medical Provider Performance Pool (MPPP)
 - Quarterly profiles monitor and reward improvements in the *process* of care, recognizing above-average results for 14 claims-based indicators
- Since 2005, Chronic Disease Pay-for-Performance (P4P)
 - Rewards improvements in *outcomes* for members with Asthma and Diabetes

\$25 million dollars paid to date for MPPP & P4P



Annual QARR Awards

- 17 indicators were awarded during our 8th Annual Awards ceremony in November 2006
- MetroPlus awards:
 - A \$10,000 check for each indicator, recognizing the highest performing provider or facility
 - A plaque to each HHC network, listing the indicators for which their facilities scored highest
- Program generates competition for the awards and goodwill between MetroPlus and our providers



MPPP

Why did we do this program?

- To improve the delivery of the preventive health measures included in QARR
- To improve the reporting of these measures based on administrative data

Fundamentals

- All data based on claims, no medical record review
- Program includes all MetroPlus providers, both HHC & Non-HHC
- Providers are compared to the Plan mean and score points for performance statistically above the Plan mean
- Points are converted to dollars assigned to a performance pool
- Payments are made quarterly



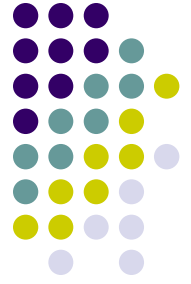
MPPP (cont'd)

Quarterly profiles

- Share results on key indicators prioritized for performance improvement
 - Most indicators based on HEDIS or QARR
 - Examples: Blood Lead Testing, Cervical & Breast Cancer Screening, Visits with assigned PCP, Emergency Room visits, Chlamydia Screening in Women, Well Child Visit Rates
- Enable MetroPlus and HHC providers to address
 - Variation in practice
 - Utilization patterns of members
 - Capture of data in an administrative fashion



MetroPlus Health Plan Quarterly Provider Performance Profiles



Reporting Period End Date: March 31, 2004
Primary Care Location: Facility XYZ

I. Summary of Performance	Rating
Blood Lead Testing	**
Well Child Visit Rates	*
Children's Access to Primary Care Practitioners	*
Cervical Cancer Screening	***
Breast Cancer Screening	***
Adult Access to Care	***
Visits with the Assigned PCP	*
Appropriate Medications for Members with Asthma	**
Emergency Room Visits	***

Legend
 *** means statistically significant: better than MetroPlus' Performance Rate
 ** means not significantly different from MetroPlus' Performance Rate
 * means statistically significant: worse than Metroplus' Performance Rate
 NR means not rated (less than 10 in denominator)
 NI means significantly lower than the LA County Medi-Cal rate (which is thought to be low but appropriate utilization)

II. Panel Information: (Number of members)

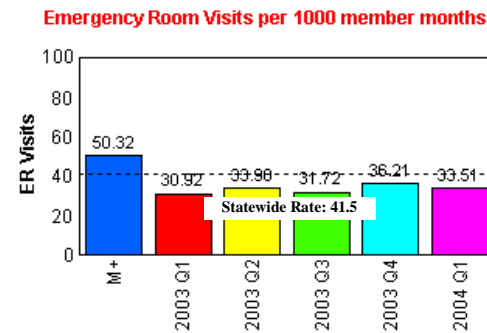
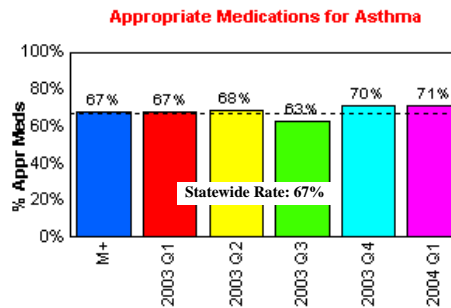
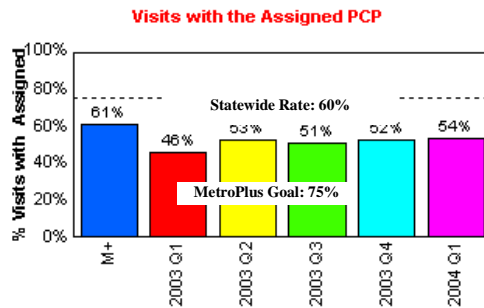
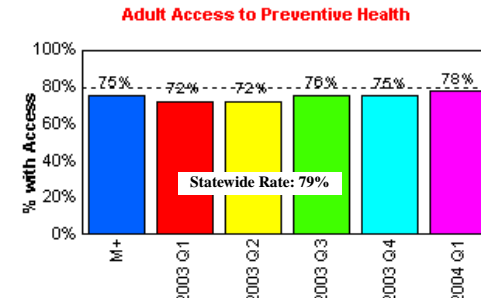
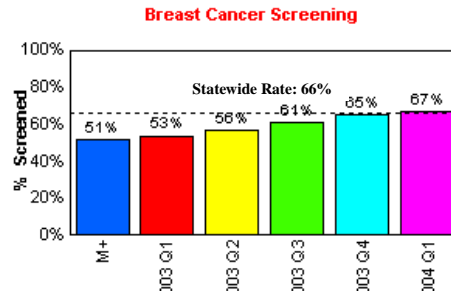
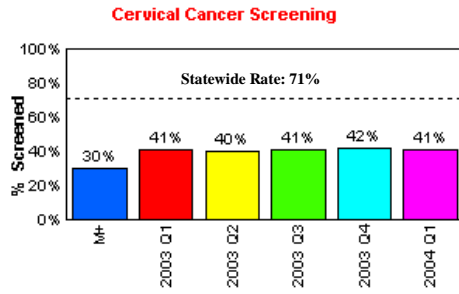
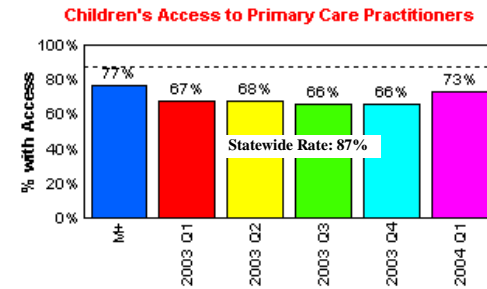
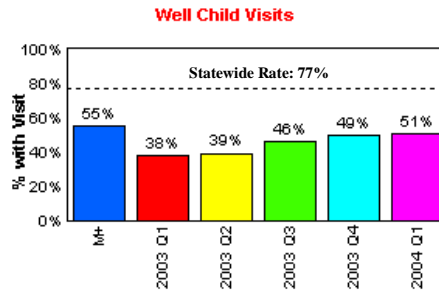
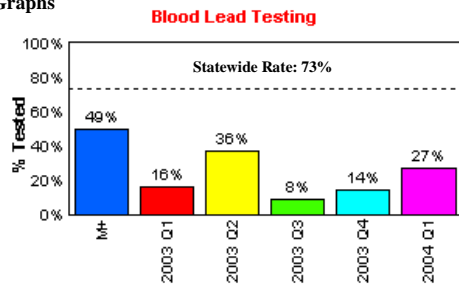
AGE	ALL	Medicaid	CHP	FHP	Female	Medicaid	CHP	FHP	Male	Medicaid	CHP	FHP
<=15 mo	196	182	14	0	94	91	3	0	102	91	11	0
16-35 mo	221	197	24	0	108	98	10	0	113	99	14	0
3-6 yo	483	418	65	0	234	207	27	0	249	211	38	0
7-11 yo	685	577	108	0	343	291	52	0	342	286	56	0
12-21 yo	1,200	990	154	56	657	529	87	41	543	461	67	15
22-40 yo	1,181	856	0	325	868	661	0	207	313	195	0	118
41-65 yo	1,030	621	0	409	659	420	0	239	371	201	0	170
66+	3	3	0	0	3	3	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Total:	4,999	3,844	365	790	2,966	2,300	179	487	2,033	1,544	186	303

MetroPlus Health Plan Quarterly Provider Performance Profiles

Reporting Period End Date: March 31, 2004
 Primary Care Location: Facility XYZ



III. Graphs





MetroPlus Health Plan Quarterly Provider Performance Profiles

Reporting Period End Date: March 31, 2004

Primary Care Location: Facility XYZ

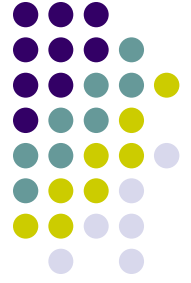


IV . Rates	Rate (Eligible Population)	M+	2003 Q1	2003 Q2	2003 Q3	2003 Q4	2004 Q1
Blood Lead Testing	49% (974)	16% (19)	36% (11)	8% (12)	14% (22)	27% (15)	
Well Child Visit Rates	55% (44,983)	38% (752)	39% (736)	46% (762)	49% (825)	51% (941)	
Children's Access to Primary Care Practitioners	77% (43,187)	67% (643)	68% (620)	66% (651)	66% (704)	73% (707)	
Cervical Cancer Screening	30% (27,429)	41% (325)	40% (344)	41% (404)	42% (545)	41% (693)	
Breast Cancer Screening	51% (2,075)	53% (43)	56% (39)	61% (38)	65% (37)	67% (45)	
Adult Access to Care	75% (43,166)	72% (421)	72% (455)	76% (547)	75% (761)	78% (984)	
Visits with the Assigned PCP (Total visits in denominator)	61% (101,525)	46% (1,308)	53% (1,456)	51% (1,608)	52% (1,418)	54% (2,132)	
Appropriate Medications for Members with Asthma	67% (2,550)	67% (52)	68% (50)	63% (48)	70% (44)	71% (55)	
Emergency Room Visits (Medicaid member months in denominator)	50.32 (456,231)	30.92 (7,698)	33.90 (8,584)	31.72 (9,142)	36.21 (9,831)	33.51 (10,474)	



MetroPlus Health Plan Quarterly Provider Performance Profiles

Reporting Period End Date: March 31, 2004
Primary Care Location: Facility XYZ



V. Member Details

A. Blood Lead Testing

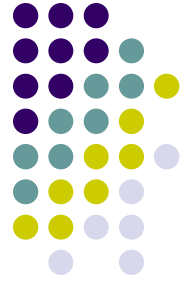
Member#	Name	DOB	Address	Phone	Date Last Visit to this PC	Medical Record

B. Well Child Visit Rates: Members with no claim/encounter for a WC visit past 12 mo.

Member#	Name	DOB	Address	Phone	Date Last Visit to this PC	Medical Record

Generation 2

MPPP (cont'd)

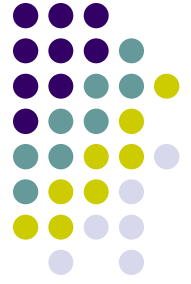


How results are shared

- Website
- Reports are sent out
- Checks are delivered by Provider Services Department staff
- An email is sent to all providers from the CEO to congratulate top performers

Generation 2

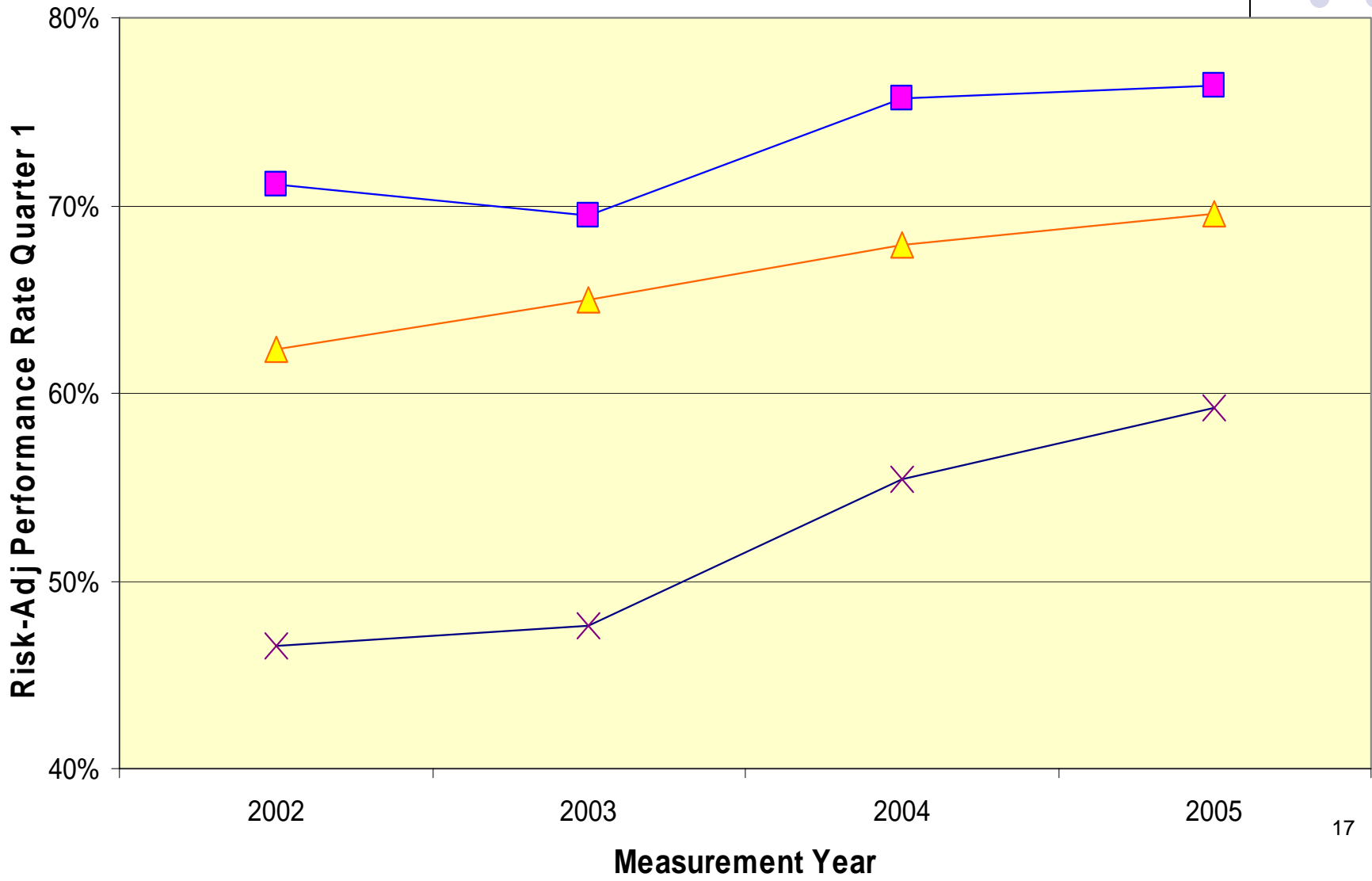
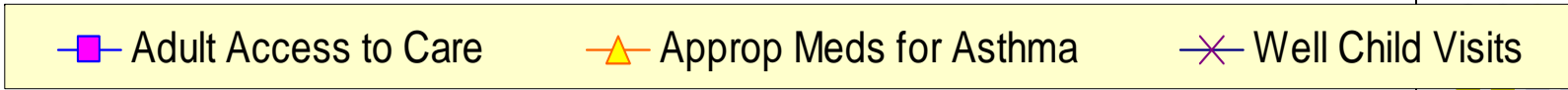
MPPP (cont'd)



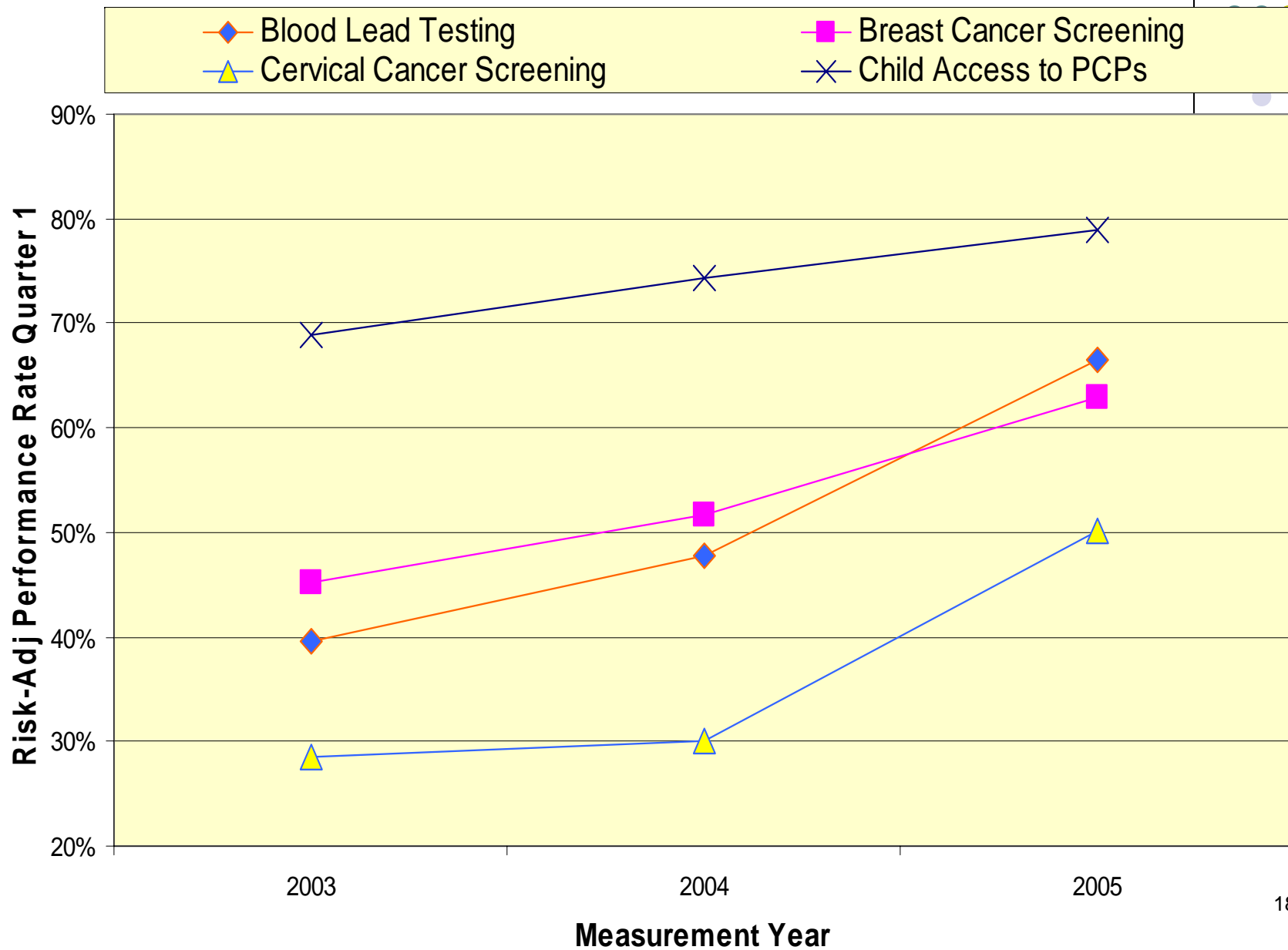
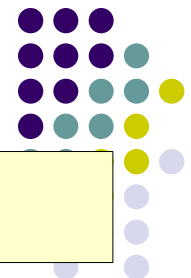
Overall Results

- Improved outcomes on all Profile indicators
- MetroPlus rated #1 in NYC in 2006 for Quality & Member Satisfaction
- Visit-based indicator rates (Adult & Child Access, Well Child, etc.) increased, but appear to be leveling off
- Lab-based indicator rates (Blood Lead Testing, Cervical Cancer Screening, etc.) increased significantly in 2005

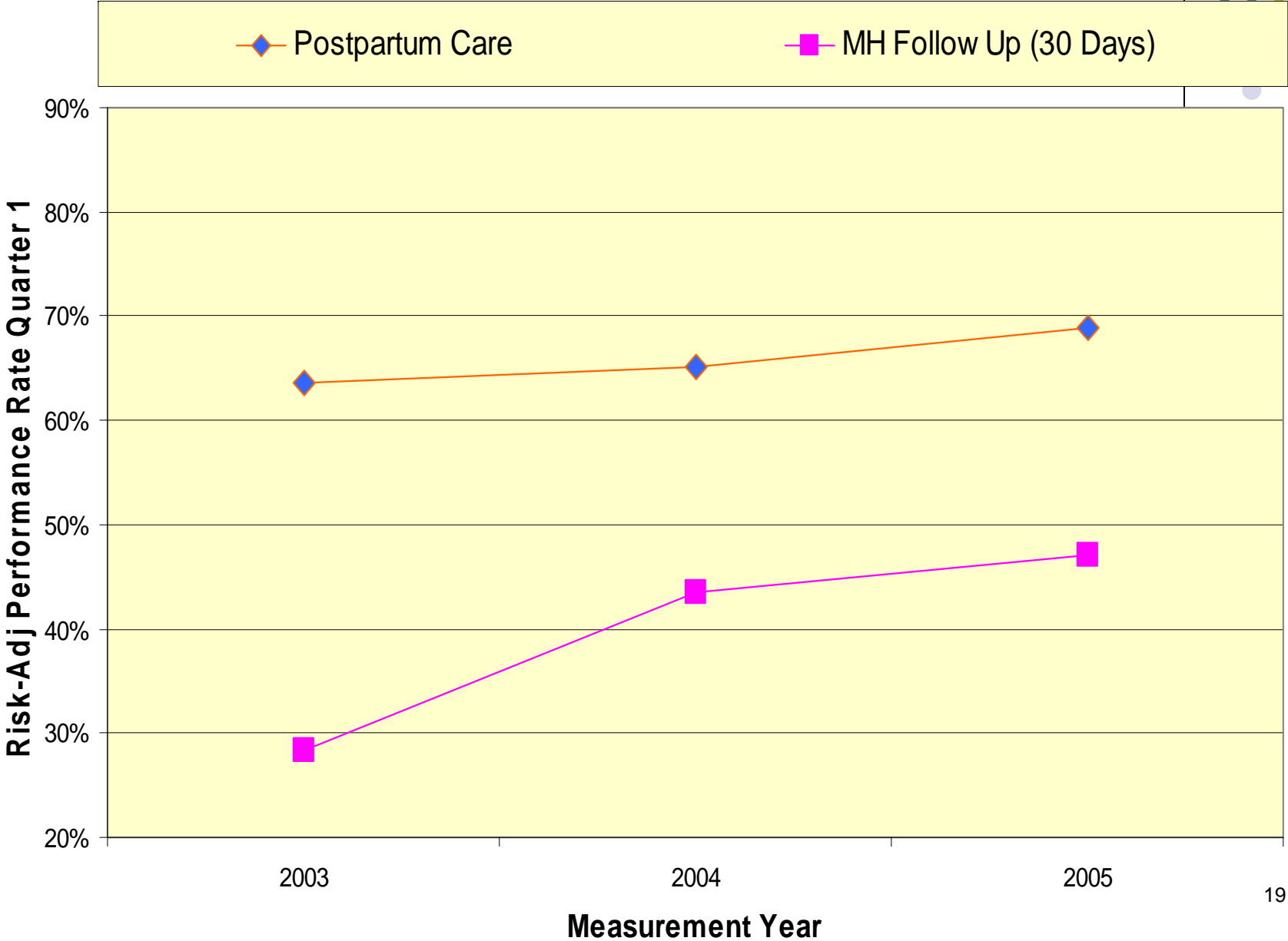
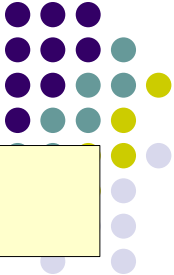
Original Profile Indicators



Enhanced Profile Indicators

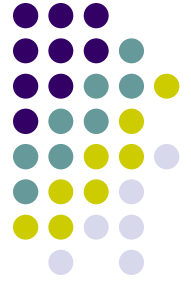


Profile Indicators for Acute Care Facilities



Generation 2

MPPP (cont'd)



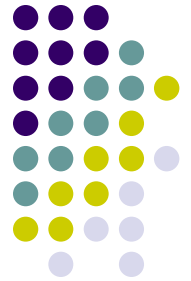
Next Steps

- Profiles appear to be contributing to improved outcomes
 - Parallel projects have likely contributed to increased rates
- Positive feedback from facilities
 - Meaningful dialogue
 - Requests for more information and improvement strategies



Chronic Disease P4P

- Move from process to outcomes-based indicators, focusing on members with Asthma and Diabetes
- Align with HHC
 - Mutual desire to improve health of chronically ill members
 - Need to succeed in global risk environment where funds are limited and financial success is based on ability to help people manage their chronic conditions, decreasing morbidity and their need for more intense services
 - Ongoing HHC chronic care collaboratives, chronic disease patient registry, MetroPlus Care Management Program



Chronic Disease P4P (cont'd)

- A joint HHC-MetroPlus workgroup developed the criteria, measures, benchmarks, and points for the program
 - Members included MDs and Finance staff

Key differences from MPPP

- Only HHC providers
- Each provider / facility is compared to its own past performance rather than to Plan average
- Measures are based on meeting or exceeding a benchmark, or improvement from the last data measured at the same facility

Generation 3



Chronic Disease P4P (cont'd)

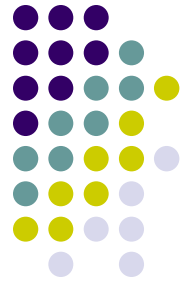
Quarterly Process

- Step 1: MetroPlus identifies the population.
- Step 2: MetroPlus claims and HHC clinical lab data are pulled for specified measures.
- Step 3: For each measure, results are compared against established benchmarks and points are calculated.
- Step 4: Facility-wide and provider/member-specific reports are published.

Semi-Annually

- Step 5: Rewards are distributed.

Generation 3



Chronic Disease P4P (cont'd)

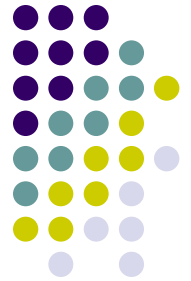
Step 1: MetroPlus identifies the population.

Three target groups

- Asthmatic Adults
- Asthmatic Children (<19)
- Diabetic Adults & Children

● Population

- Enrolled in any MetroPlus product line, except HIV/SNP
- PCP Assignment at an HHC Hospital, D&TC, or Satellite Office



Chronic Disease P4P (cont'd)

Step 2: MetroPlus Claims and HHC Clinical values are pulled for specified measures.

- Asthma
 - Data from the reporting period (twelve months) is compared to a baseline period (the prior twelve months)
 - Source: MetroPlus claims system (only paid claims)
- Diabetes
 - The reporting period for the diabetes analysis is the same twelve-month period as that used for asthma
 - HbA1c values from 16 months prior to the end of the reporting period
 - LDL values from 36 months prior to the end of the reporting period
 - Eye exams from 12 months prior to the end of the reporting period
 - Source: HHC data warehouses, MetroPlus claims system

Generation 3



Chronic Disease P4P (cont'd)

Step 3: For each measure, results are compared against established benchmarks and points are calculated.

Asthma

- Adults and Children populations measured separately
- Two utilization measures
 - Inpatient visits
 - ER Visits
- Two methodologies, equally weighted to minimize potential impact of high-utilizing members on standard population measure
 - Population-based (Utilization Rate per 1000 member months)
 - Individual-based (% Individuals Utilizing at Acute Level)



Chronic Disease P4P (cont'd)

Asthma

Utilization Rate per Thousand <i>(Population)</i>		Percent Utilizing at Acute Level <i>(Individual)</i>	
Point Category	Point Threshold	Point Category	Point Threshold
ER Benchmark	≤ 25 visits per 1000	% Utilizing ER	≤ 20%
ER % Improvement	≤ -10%	% Improvement in ER Utilization	≤ -10%
IP Benchmark	≤ 5 visits per 1000	% Utilizing IP	≤ 4%
IP % Improvement	≤ -10%	% Improvement in IP Utilization	≤ -10%

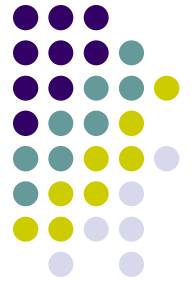
Generation 3



Chronic Disease P4P (cont'd)

Diabetes

- Population measured as a whole
- Two clinical, one utilization measure
 - HbA1c
 - LDL
 - Eye exam



Chronic Disease P4P (cont'd)

Diabetes

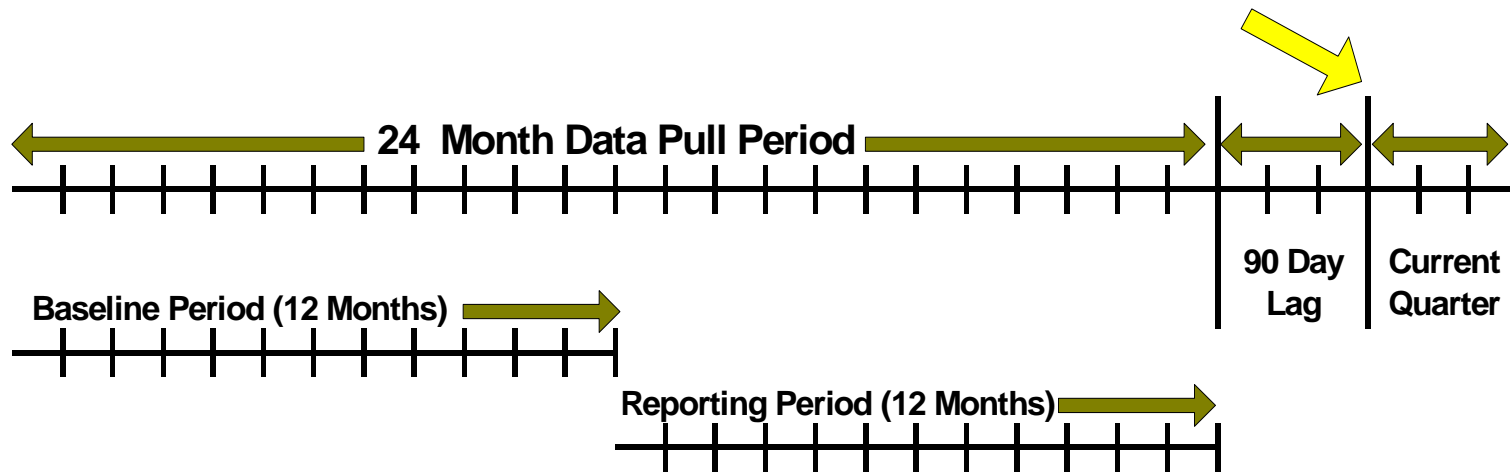
Clinical Value	Positive Point(s)	Negative Point
HbA1c = Glycated Hemoglobin	Value is less than 7%; or greater than or equal to 7% but with reduction of at least one percentage point since last test (time between tests must be 2-8 months)	No test in last 8 months; or value increased by at least one percentage point and is greater than or equal to 7%
LDL = Low-density Lipoprotein Blood Cholesterol	Less than 100 mg/dl	N/A
Eye Exam	Encounter within 12 months	N/A
Max Possible Points	3	-1



Chronic Disease P4P (cont'd)

Step 4: Facility-wide and provider/member-specific reports are published quarterly.

Report Time Frame: to account for the 90-day lag (post service delivery) in claim/encounter submission, data is taken from the twelve-month period prior to the current quarter.



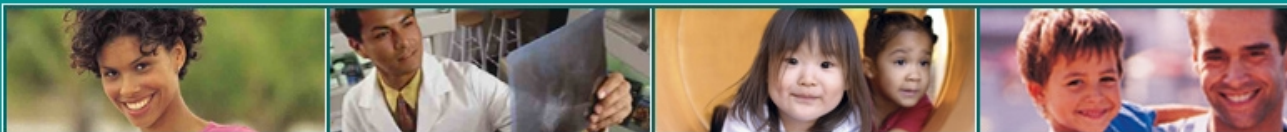


Chronic Disease P4P (cont'd)

Reports

- Asthma
 1. Point distribution for all measures: all facilities
 2. Population and utilization summary: all facilities
 3. Member detail: by PCP and facility
- Diabetes
 1. Point distribution for all measures: all facilities
 2. Member detail: by PCP and facility
- Reward Distribution

Detailed Methodology Guide also available online



- [Employee Home](#)
- [CBO Provider](#)
- [Benefit Search](#)
- [Claim Search](#)
- [Clinical Guidelines](#)
- [Decision Support System](#)
- [Employee Search](#)
- [ePower](#)
- [Find Family Members](#)
- [Find Member](#)
- [Find a Primary Care Provider](#)
- [Find a Specialist](#)
- [Find Specialty Services](#)
- [Groupwise WebAccess](#)
- [Helpful Links](#)
- [Marketing Newsletters](#)
- [Member Eligibility Search](#)
- [Policies and Procedures](#)
- [Provider Resources](#)
- [Report Delivery System](#)
- [Roster in Excel](#)
- [Service Phone Number](#)
- [IPCS](#)



Report Delivery System

[Home](#) | [Quality](#) | [Asthma and Diabetes Outcomes](#) | [Search](#) | [Help](#)

 **Current Location:** [Report List](#)

METHODOLOGY GUIDE

To sort reports by Report ID or by Name click on the corresponding column header.

<u>Report ID</u>	<u>Name</u>	<u>Documentation</u>
MHP1153A	Asthma Quality Improvement Point Distribution	
MHP1153B	Quarterly Report of Members with Asthma	
MHP1153C	Quarterly Detail Report of Members with Asthma	
MHP1187A	Diabetes Quality Improvement Point Distribution	
MHP1187B	Quarterly Detail Report of Members with Diabetes	
MHP1204A	Pay for Performance Reward Distribution	



Asthma Quality Improvement Point Distribution Adults



Reporting Period: 10/01/2004 - 09/30/2005

Baseline Period: 10/01/2003 - 09/30/2004

Utilization Rate per Thousand

	Baseline Period ER Rate per 1000	Reporting Period ER Rate per 1000	ER Rate Benchmark Points	ER Rate % Change	ER Rate % Improvement Points	Baseline Period IP Rate per 1000	Reporting Period IP Rate per 1000	IP Rate Benchmark Points	IP Rate % Change	IP Rate % Improvement Points
	9.37	11.41	1	21.77%	0	1.07	1.74	5	62.62%	0
	12.97	5.82	1	-55.13%	1	1.96	2.91	5	48.47%	0
	13.03	14.38	1	10.36%	0	2.00	0.00	5	-100.00%	5
	6.74	6.50	1	-3.56%	0	0.75	2.80	5	246.67%	0
	13.97	12.55	1	-10.16%	1	2.00	2.79	5	39.50%	0
	6.12	2.47	1	-59.64%	1	1.67	0.55	5	-67.07%	5
	37.86	48.48	0	28.05%	0	2.97	8.08	0	172.05%	0
	23.65	30.92	0	30.74%	0	2.58	3.14	5	21.71%	0
	38.06	30.19	0	-20.68%	1	2.82	2.13	5	-24.47%	5
	21.35	23.77	1	11.33%	0	2.61	2.92	5	11.88%	0
	12.56	18.43	1	46.74%	0	1.57	2.84	5	80.89%	0
	10.18	13.96	1	36.15%	0	3.24	2.80	5	-19.75%	5
	15.68	31.33	0	99.81%	0	0.96	2.57	5	167.71%	0
	10.85	14.64	1	34.93%	0	2.10	2.86	5	36.19%	0
	21.56	28.45	0	31.96%	0	1.80	2.84	5	57.78%	0
	15.45	14.04	1	-9.13%	0	3.17	1.85	5	-41.64%	5
	20.15	21.94	1	8.88%	0	3.25	0.80	5	-75.38%	5
Total	16.45	19.23	12	16.90%	4	2.14	2.44	80	14.02%	30
Point Threshold	N/A	<= 25	N/A	<= -10%	N/A	N/A	<= 5	N/A	<= -10%	N/A



Quarterly Report of Adults with Asthma

(12 Months of Claims data collected after 90 day lag)

Reporting Period: 10/01/2004 - 09/30/2005

Facility Name	Continuously Enrolled MM's	Total Unique Members	MM's for Unique Members w/Dx	Number of Unique Members w/Dx	Dx Rate per 1000	ER Rate per 1000	IP Rate per 1000	OP Rate per 1000	ER Utilization %	IP Utilization %
	41,314	3,460	4,031	337	97.57	11.41	1.74	80.38	9.79%	2.08%
	29,662	2,489	2,750	230	92.65	5.82	2.91	109.45	5.65%	1.74%
	11,031	924	1,113	93	100.90	14.38	0.00	48.52	10.75%	0.00%
	19,843	1,665	1,539	129	77.56	6.50	2.60	83.17	6.20%	3.10%
	44,394	3,725	2,151	180	46.45	12.55	2.79	57.18	10.00%	2.78%
	56,439	4,730	3,642	305	64.53	2.47	0.55	75.78	2.30%	0.66%
	16,554	1,367	1,609	135	97.20	48.48	8.08	40.40	32.59%	7.41%
	42,627	3,571	4,140	347	97.12	30.92	3.14	91.79	22.19%	3.46%
	37,323	3,127	2,352	197	63.02	30.19	2.13	65.48	25.38%	2.54%
	38,961	3,269	4,795	401	123.07	23.77	2.92	100.73	18.20%	3.49%
	30,312	2,540	4,232	354	139.61	18.43	2.84	86.72	15.54%	3.11%
	25,793	2,161	2,308	193	89.48	13.86	2.60	72.36	11.40%	2.59%
	42,974	3,625	3,894	328	90.61	31.33	2.57	65.74	22.87%	3.05%
	42,809	3,575	3,142	263	73.74	14.64	2.86	55.06	11.03%	3.42%
	13,176	1,105	1,406	118	106.71	26.45	2.84	61.88	20.34%	3.39%
	18,586	1,557	2,706	226	145.59	14.04	1.85	62.08	13.72%	2.21%
	36,577	3,082	3,738	314	102.20	21.94	0.80	82.13	19.43%	0.96%
	548,195	45,392	49,548	4,150	90.38	19.23	2.44	76.96	15.18%	2.65%



Quarterly Detail Report of Adults with Asthma

(12 Months of Claims data collected after 90 day lag)



Reporting Period: 01/01/2005 - 12/31/2005

Bellevue Hospital Center

Member #	Member Name	DOB	# ER Visits	# Inpatient Visits	# Outpatient Visits	PCP	PCP Org
		02/24/1963	0	0	4		Bellevue Hospital Center
		09/02/1963	0	0	4		Bellevue Hospital Center
		05/28/1954	0	0	2		Bellevue Hospital Center
		02/02/1960	0	0	2		Bellevue Hospital Center
		03/31/1956	0	0	0		Bellevue Hospital Center
		07/04/1967	0	0	0		Bellevue Hospital Center
		12/18/1972	0	0	0		Bellevue Hospital Center
		04/21/1943	0	0	0		Bellevue Hospital Center
		08/21/1943	0	0	0		Bellevue Hospital Center
		03/24/1968	0	0	1		Bellevue Hospital Center
		07/29/1953	0	0	0		Bellevue Hospital Center
		04/30/1964	0	0	0		Bellevue Hospital Center
		11/15/1962	0	0	0		Bellevue Hospital Center
		01/09/1951	0	0	0		Bellevue Hospital Center
		08/13/1958	0	1	0		Bellevue Hospital Center
		09/09/1968	0	0	6		Bellevue Hospital Center
		05/30/1958	0	0	5		Bellevue Hospital Center
		08/03/1955	0	0	3		Bellevue Hospital Center
		06/01/1960	0	0	2		Bellevue Hospital Center
		05/07/1965	0	0	1		Bellevue Hospital Center
		04/23/1960	0	0	1		Bellevue Hospital Center
		09/22/1947	0	0	1		Bellevue Hospital Center
		01/28/1973	0	0	0		Bellevue Hospital Center
		11/03/1978	0	0	0		Bellevue Hospital Center
		09/19/1984	0	0	0		Bellevue Hospital Center



Diabetes Quality Improvement Point Distribution

Reporting Period: 10/01/2004 - 09/30/2005

	Number of Members	LDL Points	Eye Exam Points	HbA1c					Total Points
				No HbA1c in last 240 Days (6 mths)	HbA1c <7	HbA1c Improvement	HbA1c Worse	HbA1c Subtotal	
	390	233	175	-87	133	29	-18	57	465
	354	186	167	-75	112	20	-18	39	392
	113	53	50	-28	19	7	-13	-15	88
	91	42	42	-34	15	8	-5	-16	68
	478	243	159	-94	189	28	-32	91	493
	350	184	200	-86	122	9	-25	20	384
	170	63	49	-59	44	8	-3	-10	102
	411	213	169	-158	60	27	-27	-98	284
	391	192	112	-96	101	37	-24	18	322
	454	231	256	-140	122	31	-25	-12	475
	264	103	81	-82	64	22	-8	-4	180
	230	118	127	-41	98	10	-13	54	299
	294	125	122	-144	26	18	-24	-124	123
	663	416	335	-113	245	47	-41	138	889
	109	42	21	-26	30	12	-5	11	74
	166	75	85	-40	59	8	-12	15	175
	331	159	156	-94	81	17	-25	-21	294
Total:	5,259	2,658	2,306	-1,397	1,520	338	-318	143	5,107



Detail Report of Members with Diabetes

Reporting Period: 10/01/2004-09/30/2005

Bellevue Hospital Center

Member #	Member Name	DOB	Medical Record Number	Last A1C Value (<7%)	Last A1C Date	Penult A1C Value	Penult A1C Date	Last LDL Value (<100mg/dl)	Last LDL Date	Eye Exam
<u>PCP Name:</u>				6.30	12/03/2004			85.00	04/01/2005	No
										No
				6.80	09/16/2005	6.20	02/28/2005	93.00	09/16/2005	Yes
				8.00	09/09/2005	7.70	08/20/2005	71.00	09/09/2005	Yes
				7.70	08/09/2005	8.20	02/03/2005	62.00	08/09/2005	No
				8.40	03/15/2005	8.40	11/15/2004	107.00	03/15/2005	No
				6.50	05/03/2005			109.00	07/29/2005	No
				8.00	01/11/2005	6.70	09/09/2004	84.00	01/11/2005	No
				6.50	09/02/2005	5.70	06/16/2005	84.00	09/02/2005	Yes
				6.30	12/28/2004	5.90	10/07/2004	92.00	10/07/2004	No
				9.30	02/08/2005	8.90	11/03/2004	84.00	02/08/2005	Yes
				6.40	04/29/2005	6.70	02/18/2005	117.00	04/29/2005	No
				6.00	07/27/2005	5.50	03/23/2005	89.00	07/27/2005	No
				7.30	07/28/2004			115.00	07/28/2004	No
				6.70	03/07/2005	5.80	12/21/2004	49.00	09/23/2005	No
				7.80	11/17/2004			101.00	11/17/2004	No
				8.80	01/10/2005	7.30	09/20/2004	106.00	01/10/2005	Yes
				9.90	10/13/2004	9.00	05/03/2004	150.00	10/13/2004	Yes
				8.10	09/12/2005	10.00	06/23/2005	65.00	09/12/2005	No
				6.60	05/27/2005			98.00	05/27/2005	Yes
				6.70	04/12/2005	6.30	11/15/2004	56.00	06/15/2005	Yes



Pay for Performance Reward Distribution

Reporting Period: 1st and 2nd Quarters of 2005

Facility Name	Asthma				Diabetes		Total Amount
	Adults		Children		Points	Amount	
	Points	Amount	Points	Amount			
	34	\$41,590.16	33	\$50,925.93	846	\$58,848.10	\$151,364.19
	38	\$46,483.12	44	\$67,901.24	748	\$52,031.18	\$166,415.54
	45	\$55,045.80	19	\$29,320.99	213	\$14,816.37	\$99,183.16
	26	\$31,804.24	23	\$35,493.83	123	\$8,555.93	\$75,854.00
	42	\$51,376.08	40	\$61,728.40	1,040	\$72,342.82	\$185,447.30
	43	\$52,599.32	34	\$52,469.14	423	\$29,424.05	\$134,492.51
	10	\$12,232.40	0	\$0.00	189	\$13,146.92	\$25,379.32
	25	\$30,581.00	20	\$30,864.20	748	\$52,031.18	\$113,476.38
	37	\$45,259.88	20	\$30,864.20	593	\$41,249.32	\$117,373.40
	17	\$20,795.08	31	\$47,839.51	794	\$55,230.96	\$123,865.55
	34	\$41,590.16	19	\$29,320.99	286	\$19,894.27	\$90,805.42
	44	\$53,822.56	44	\$67,901.24	378	\$26,293.83	\$148,017.63
	25	\$30,581.00	16	\$24,691.36	398	\$27,685.04	\$82,957.40
	19	\$23,241.56	0	\$0.00	1,813	\$126,113.01	\$149,354.57
	20	\$24,464.80	14	\$21,604.94	144	\$10,016.70	\$56,086.44
	44	\$53,822.56	44	\$67,901.24	265	\$18,433.51	\$140,157.31
	42	\$51,376.08	31	\$47,839.51	583	\$40,553.71	\$139,769.30
TOTAL	545	\$666,665.80	432	\$666,666.72	9,584	\$666,666.87	\$1,999,999.39

Dollars per Point

Asthma Adults	\$1,223.24
Asthma Children	\$1,543.21
Diabetes	\$69.56



Chronic Disease P4P (cont'd)

Step 5: Rewards are distributed semi-annually.

- Dollars determined by MetroPlus
- Initial distribution pool equally divided into groups:
 - (1) Asthmatic Adults
 - (2) Asthmatic Children
 - (3) Diabetic Adults & Children
- Points for each group assigned a dollar amount based on the available award for that group
- \$4 Million paid to date for P4P for 2005; same amount is allocated for 2006

Generation 3



Results - Asthmatic Population

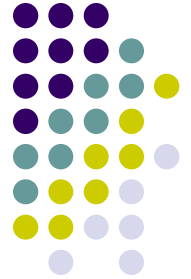
Adults

	Q1 2005	Q2 2005	Q3 2005	Q4 2005	Q1 2006
# M+ Members at HHC facilities	42,951	44,635	45,992	46,312	47,299
# Members with Dx	3,832	3,980	4,150	4,193	4,289
Dx Rate per 1,000	89.4	89.31	90.38	90.62	90.68

Children

	Q1 2005	Q2 2005	Q3 2005	Q4 2005	Q1 2006
# M+ Members at HHC facilities	54,258	55,125	57,241	57,605	58,354
# Members with Dx	7,375	7,395	7,932	8,257	8,058
Dx Rate per 1,000	136.29	134.42	138.84	143.53	138.09

Generation 3



Results - Asthma Measures

Total Facilities = 17

ER & Inpatient Measures Combined Average

Adults

	Q1 2005	Q2 2005	Q3 2005	Q4 2005	Q1 2006
# facilities meeting benchmark	13	14	14	16	16
# facilities that improved vs. prior year	8	6	4	7	7

Children

	Q1 2005	Q2 2005	Q3 2005	Q4 2005	Q1 2006
# facilities meeting benchmark	10	10	11	12	11
# facilities that improved vs. prior year	4	6	5	5	6

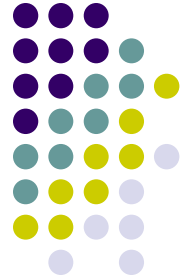
Generation 3



Asthma Results

- As of the first five quarters: improving results in ER, Inpatient utilization
- More than half of the 17 facilities already meet the benchmarks
- A few provider sites have changed their practice patterns, showing improvement in results

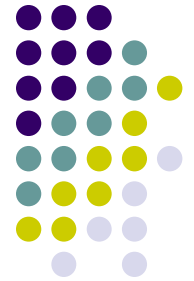
Generation 3



Results - Diabetic Population

Adults & Children

	Q1 2005	Q2 2005	Q3 2005	Q4 2005	Q1 2006
# M+ Members at HHC facilities	97,209	99,760	103,233	103,917	105,653
# Members with Dx	5,000	5,250	5,259	5,691	5,949
Dx Rate per 1,000	51.44	52.63	50.94	54.76	56.31



Results - Diabetes Measures

Adults & Children

	Q1 2005	Q2 2005	Q3 2005	Q4 2005	Q1 2006
LDL	46%	50%	51%	51%	52%
Eye Exam	47%	44%	44%	44%	45%

	Q1 2005	Q2 2005	Q3 2005	Q4 2005	Q1 2006
HbA1c - with test	72%	74%	73%	76%	76%
HbA1c - with test, value <7%	38%	37%	39%	41%	38%
HbA1c - with test, >7% but improved at least 1%	7%	8%	9%	8%	6%
HbA1c - with test, >7% but worsened at least 1%	8%	9%	8%	8%	10%



Diabetes Results

- As of the first five quarters: an increasing number of members meeting the benchmark for LDL and HbA1c tests
 - $\frac{3}{4}$ of Diabetic members are receiving timely HbA1c tests
 - $\frac{1}{2}$ of Diabetic members are reaching the LDL<100 mg/dl benchmark
- Less than half of Diabetic members are receiving yearly eye exams



Challenges

- Data
 - Member Identification (potential duplicates)
 - Eye Exam Coding
- Communication of P4P program objectives and available reports & resources
- Financial incentive transparency: rewards are distributed at corporate level, not to individual physicians or teams



Action Items

- Educate Providers and Hospital Administrators
 - Continual education
 - Share facility-specific results
 - Work through data issues
- Collaborate with other initiatives and incentive programs
 - Chronic Disease Patient Registry
 - Chronic Care Collaboratives
 - MetroPlus Generation 2 Program
- Physician-level rewards pilot at one HHC Network



Overall Take-Aways

- Definitive success already seen for Generation 2 HEDIS-based indicators program, which has been in place for four years
- Too early to make determination on Generation 3 Chronic Disease outcomes-based program, but:
 - Much provider interest
 - Facilities are sharing incentives directly with providers
 - Additional education in process
 - Early results are hopeful



Overall Take-Aways (cont'd)

- MetroPlus Health Plan and the New York City Health & Hospitals Corporation (HHC) are both quality-driven organizations.
- Being owned by a provider has allowed the Plan greater access to the data and the providers for follow-up.
- These circumstances have allowed MetroPlus to develop our programs effectively and to measure success in these initiatives.