MN P4P Journey

- 1988 – Buyers Health Care Action Group ("BHCAG" pronounced bee-keg) large self-funded employer coalition drives reform

- 1993 – Institute for Clinical Systems Improvement (ICSI) develops care guidelines, measures, primary care transformation

- 1996 – HealthPartners (health plan) starts P4P

- Early 2000s – Two other health plans begin P4P

MN Background

- 2004 MN Community Measurement (MNCM) produces first public report on diabetes using aggregated health plan data.

- 2007 MNCM reports performance with clinical data submitted by providers for diabetes and CVD to meet MN Bridges to Excellence requirements

- 2008 Legislature mandates common measures for public reporting, aligned P4P, data submission. BTE/MNCM adds depression as a P4P measure

7

Optimal Diabetes Care

Composite diabetes measure
- •Each patient must meet all five measures
- •Intermediate outcomes
- •Publicly reported since 2004
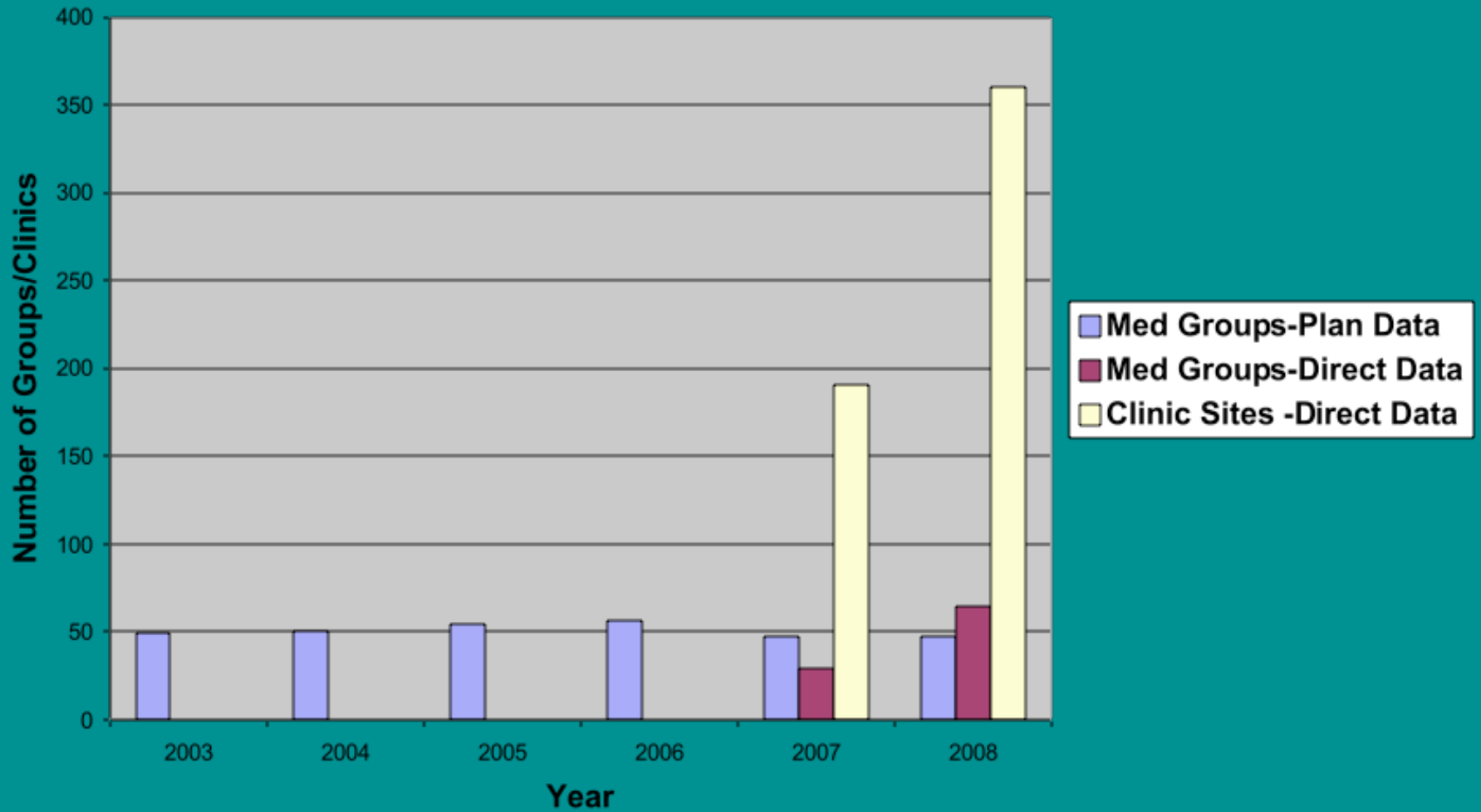- •Easier to compare physicians' performance

4

Optimal Diabetes Care

Five Measures

- A1c < 7
- LDL < 100
- BP < 130/80
- Non-smoking status
- Daily aspirin if > 40 y.o.
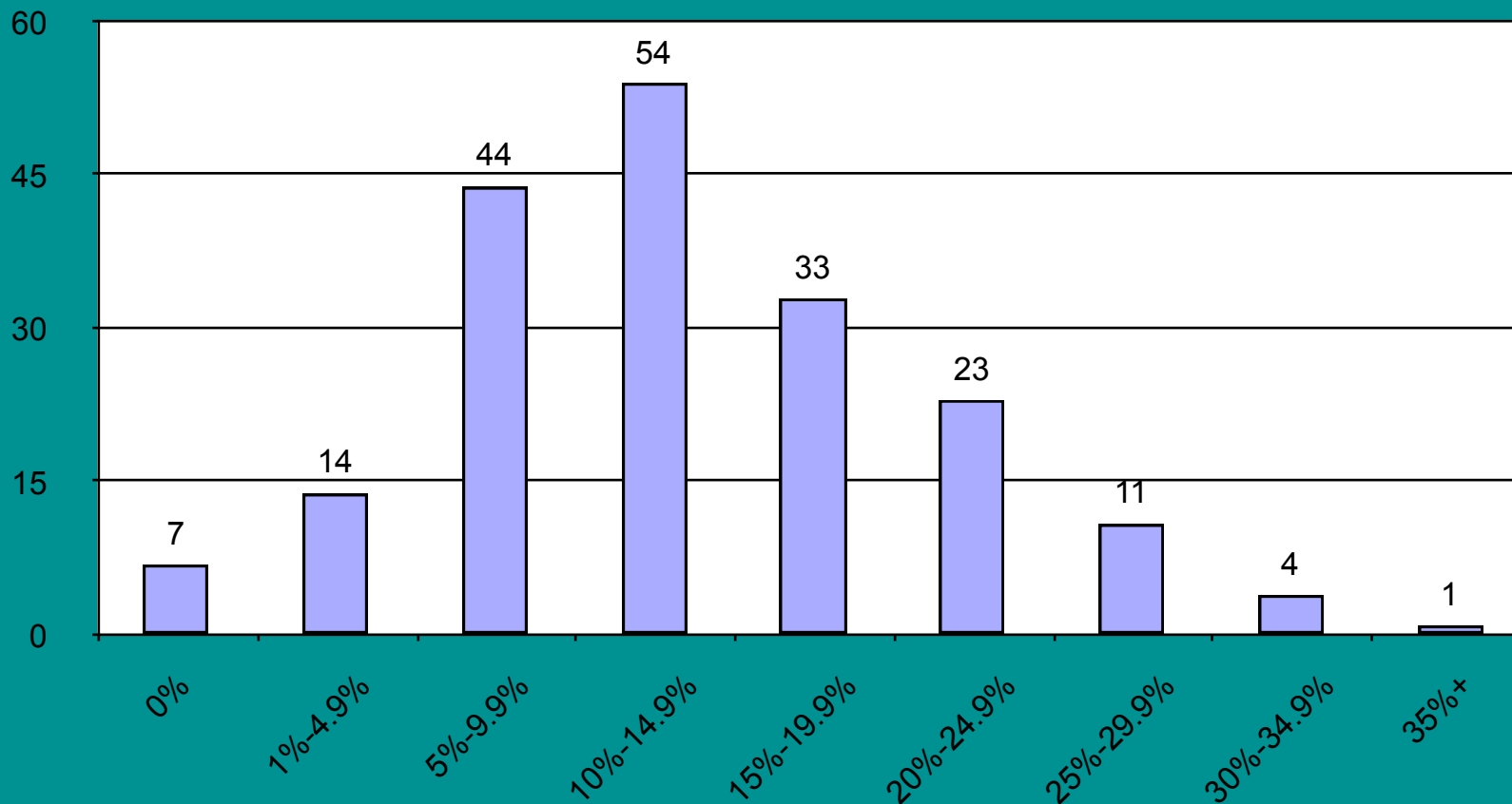
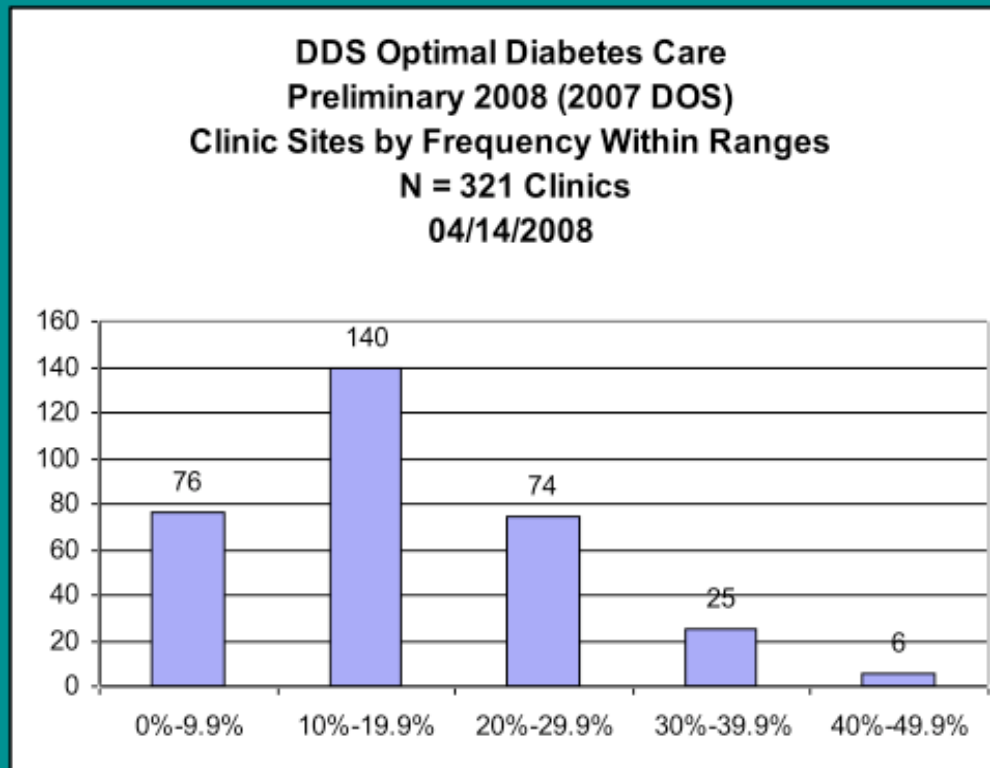**Credit for patients only passing all 5 measures**

6

Direct Data Results
Wide range of results by site

DS Optimal Diabetes Measure Clinic Sites By Frequency Within Ranges N=191 Clinic Sites Final Rates

Range	Count
0%	7
1%-4.9%	14
5%-9.9%	44
10%-14.9%	54
15%-19.9%	33
20%-24.9%	23
25%-29.9%	11
30%-34.9%	4
35%+	1

Optimal Diabetes Care

DDS Optimal Diabetes Care
Preliminary 2008 (2007 DOS)
Clinic Sites by Frequency Within Ranges
N = 321 Clinics
04/14/2008

2006 Performance Diabetes Clinic Scores
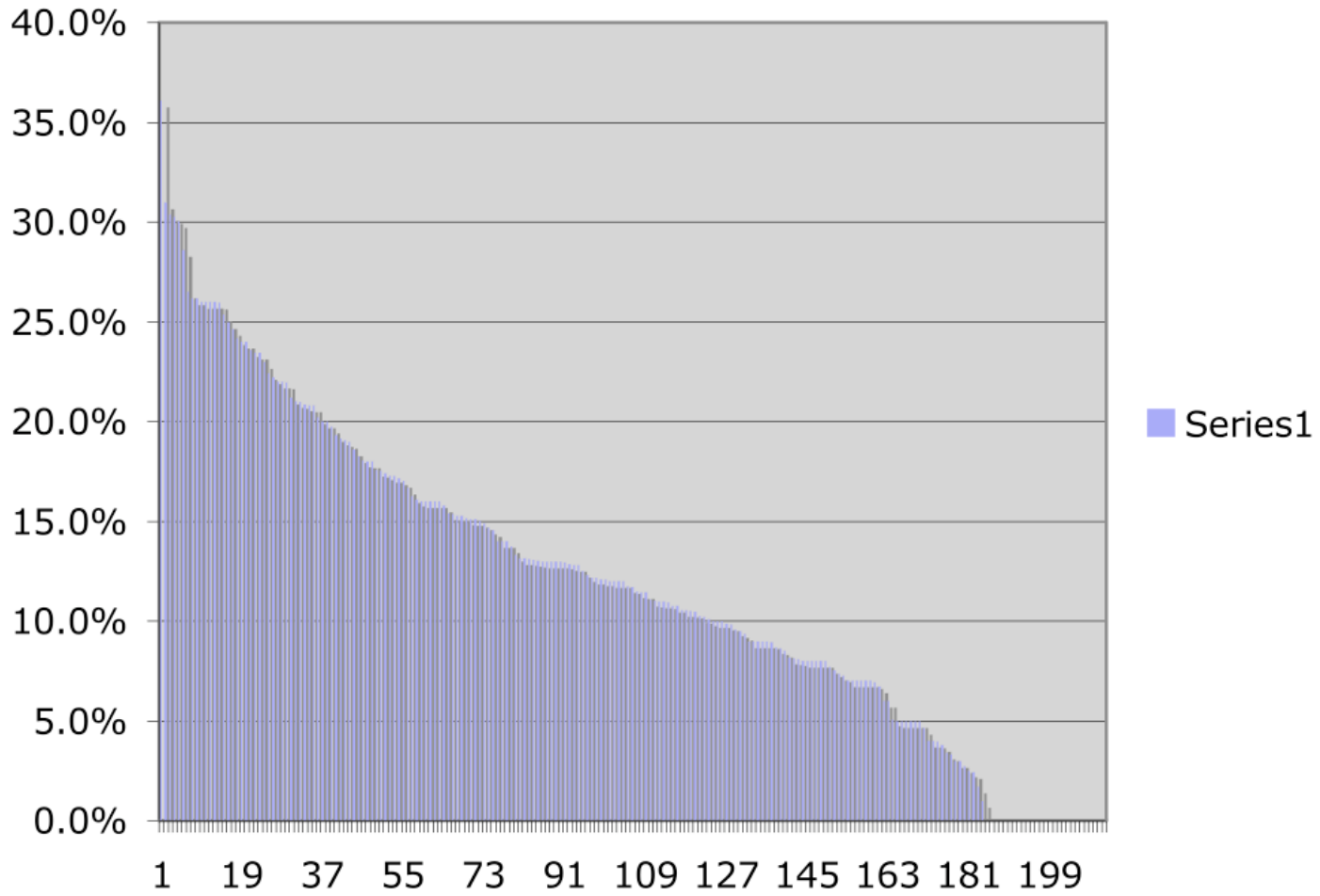
CAD clinic site scores 2007
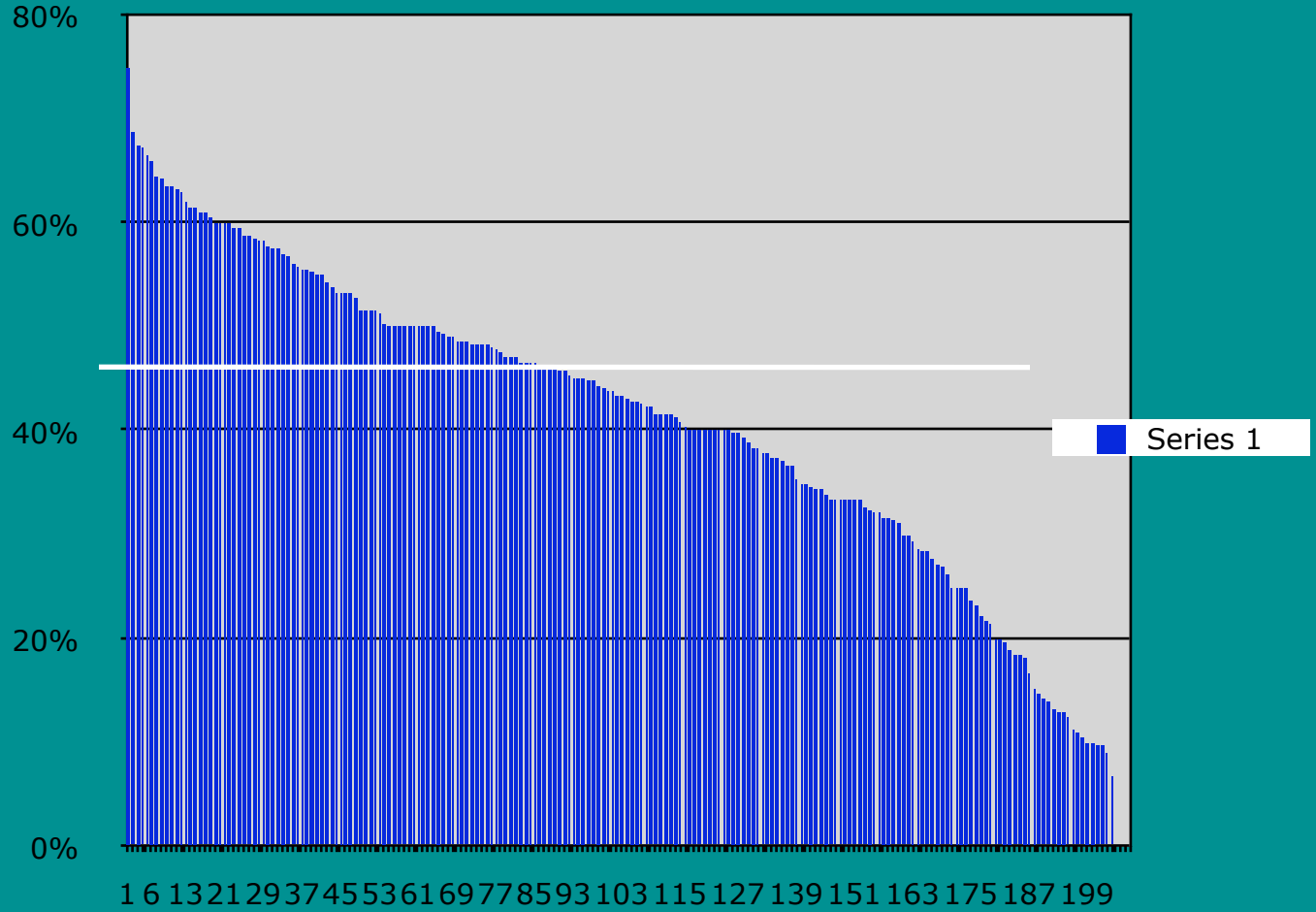
Rewards Threshold

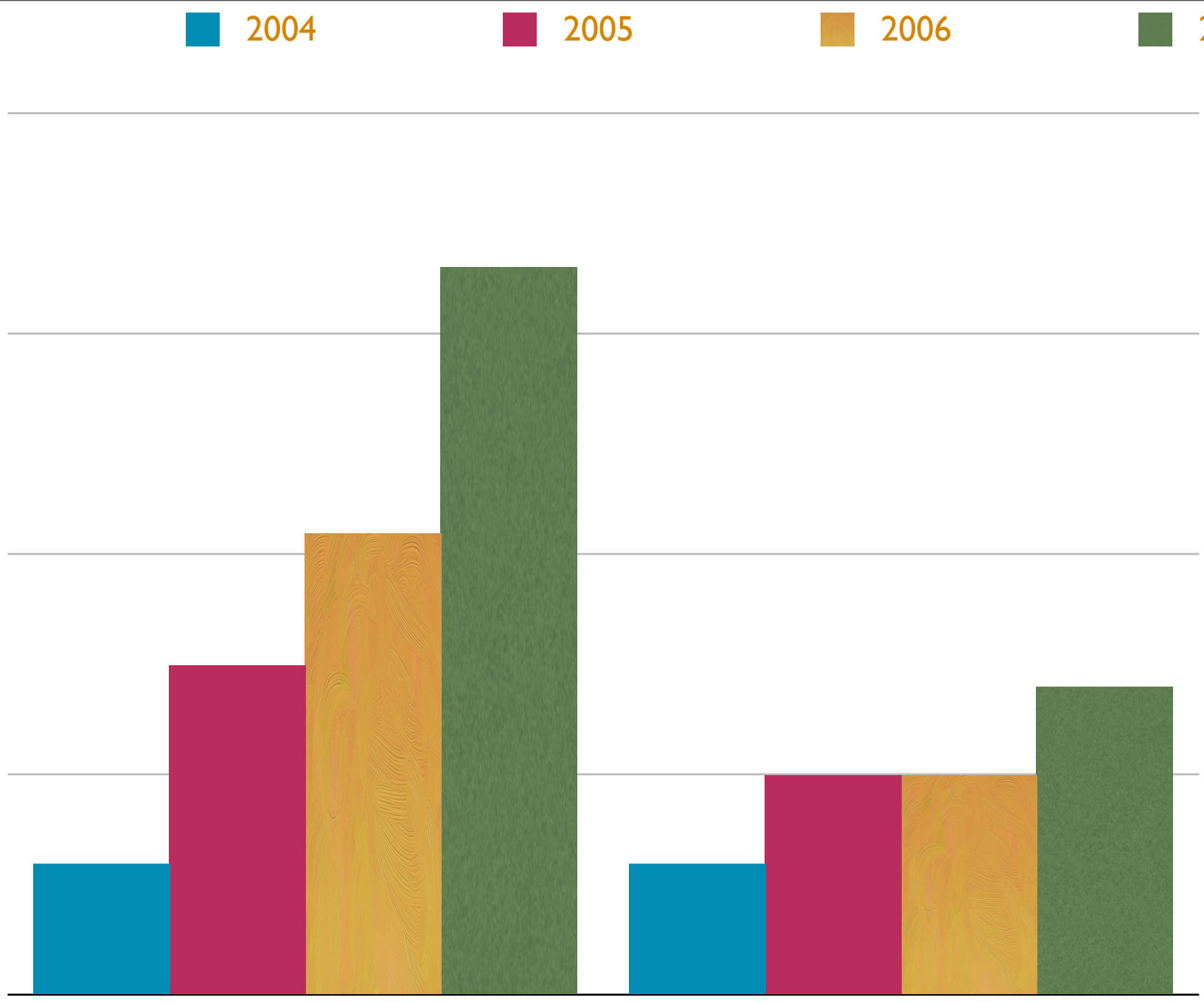Series 1

Overall Fairview Clinics (5 Care System) 2005 Quality Initiative Results

	Tobacco	Chlamydia	Obesity	Asthma	Diabetes	Hypertension
2004 External	86.0%	29.0%	10.0%		10.5%	58.0%
2005 Final	97.7%	59.2%	88.2%	73.3%	14.3%	74.6%

P4P
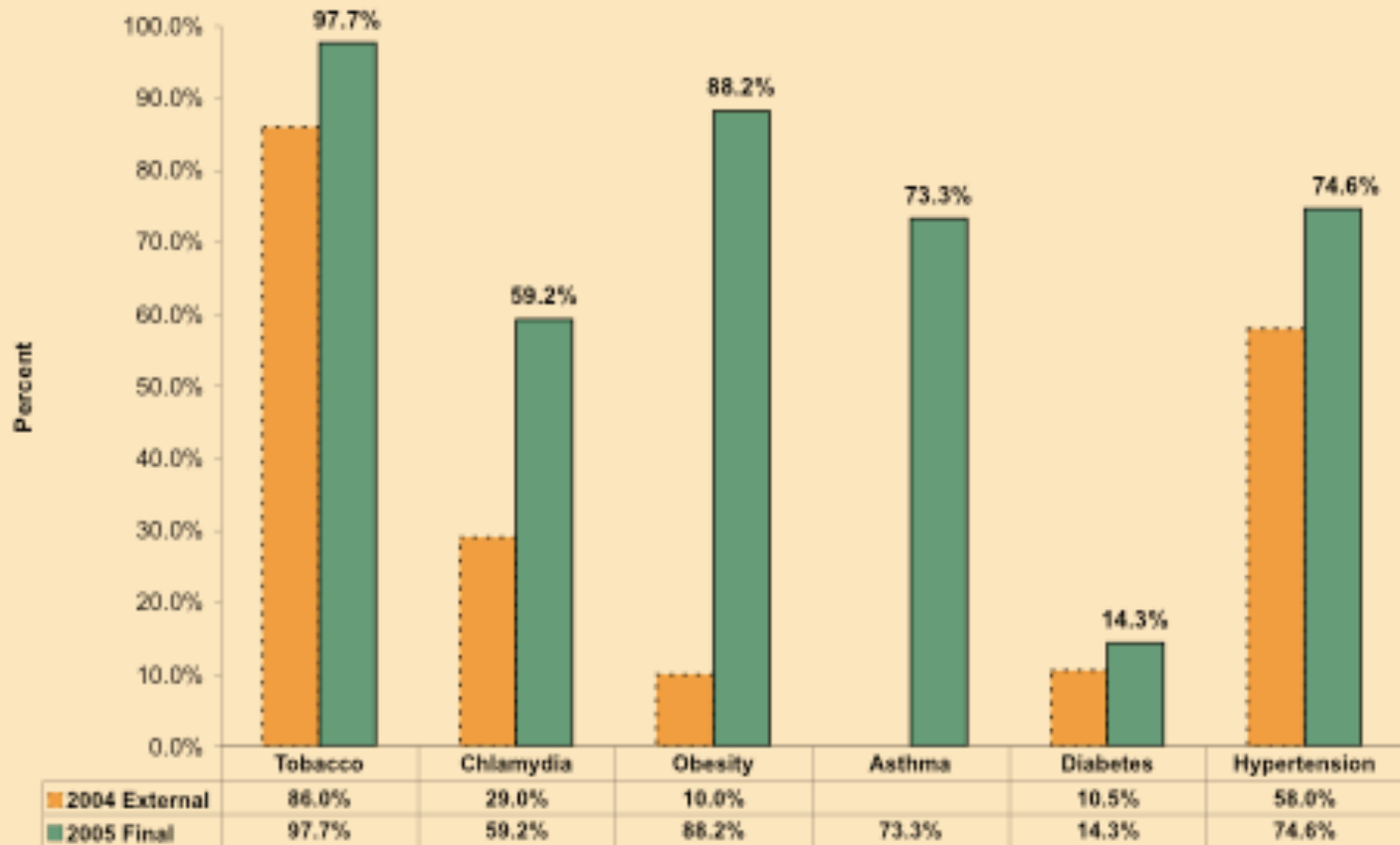
2007 Diabetes Performance (%)

A1c < 7   LDL < 100   BP < 130/80
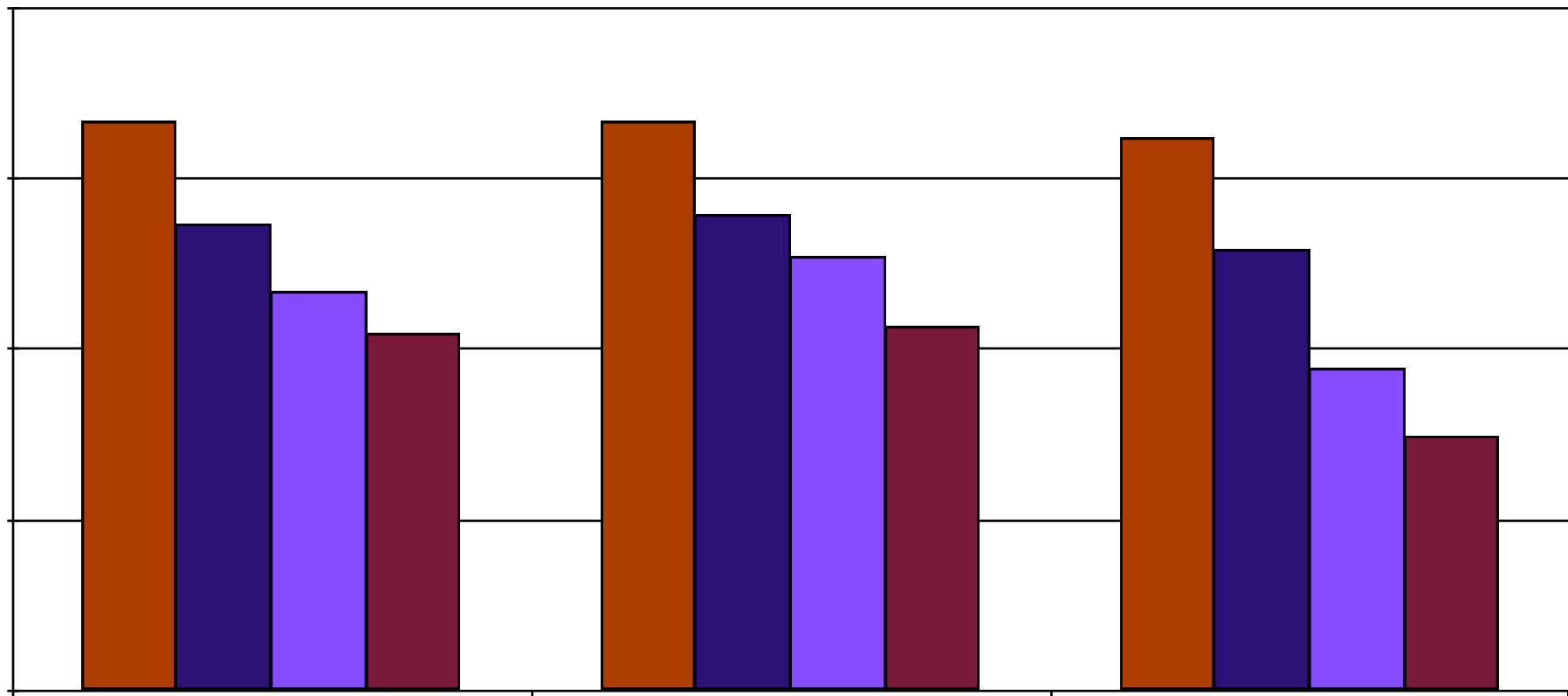
Fairview   Minnesota 2007   Cleveland EMR   NCQA

8

Quality vs. RVU's

MNCM 2007 Report
All Measures
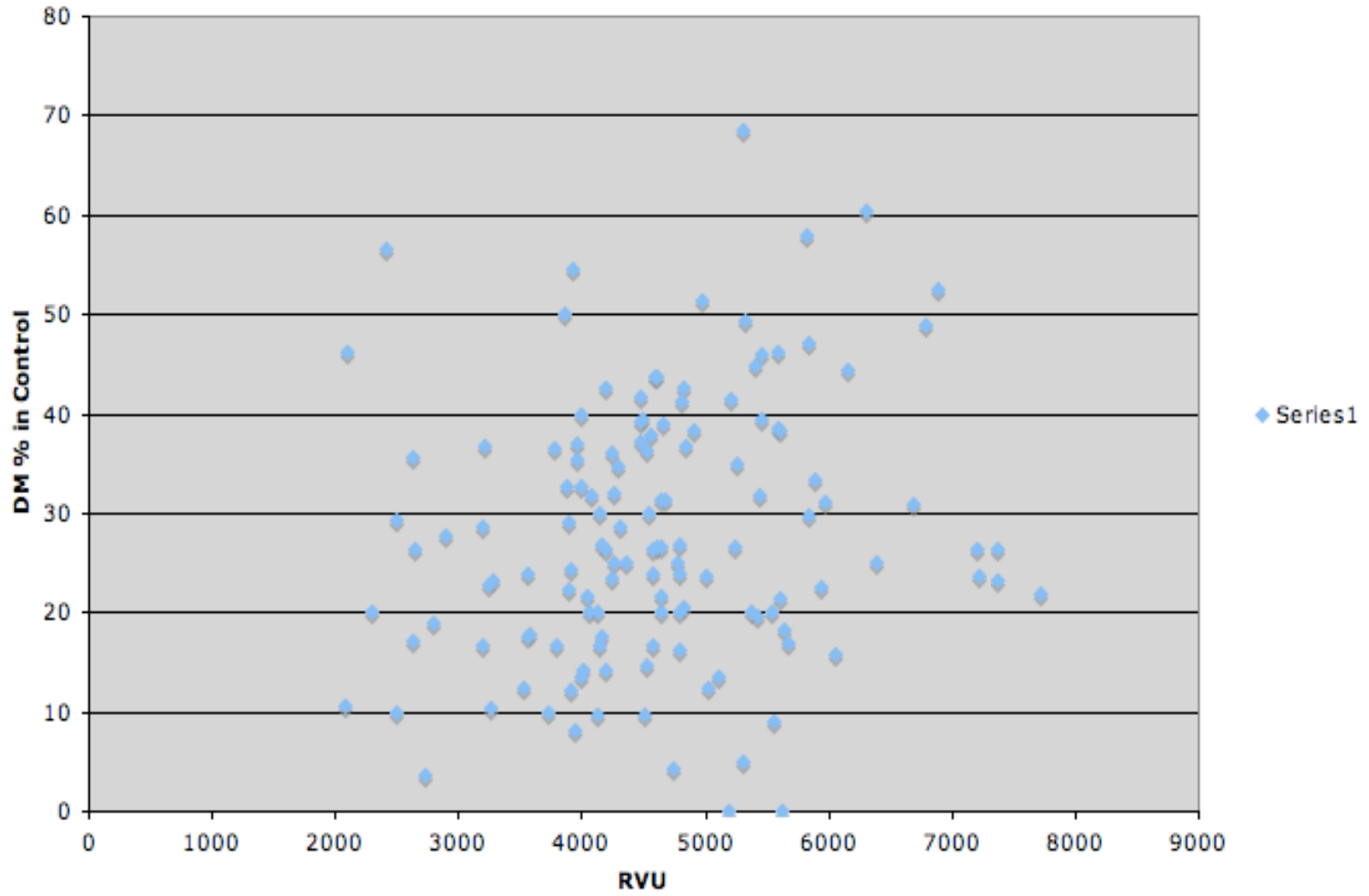
MN Community Measurement
2007 Summary of Statewide Results

2006 Dates of Services

Quality Measure	Statewide Average	95% CI	Eligible Population	Page
Calculated Using Direct Data Submission by Medical Groups				
Optimal Diabetes Care	13.5%*	13.3% - 13.8%	85,225	19
Optimal Coronary Artery Disease (CAD) Care	45.1%*	44.4% - 45.9%	27,787	24
Calculated Using Data Collected by Health Plans				
"Living with Illness" measures				
Asthma Care				
Ages 5-56 (all ages)	91.3%	90.9% - 91.8%	14,722	29
Ages 5-17 (children)	94.6%	94.0% - 95.2%	4,962	30
Ages 18-56 (adults)	89.7%	89.0% - 90.3%	9,760	31
Optimal Diabetes Care	10.5%*	9.9% - 11.1%	50,037	33
A1c <7.0	51.3%*	50.4% - 52.3%	50,037	34
Blood Pressure <130/80	45.9%*	45.0% - 46.9%	50,037	35
LDL-C <100	48.1%*	47.1% - 49.0%	50,037	36
Daily Aspirin Use – Ages 41-75	73.9%*	73.0% - 74.7%	44,839	37
Documented Tobacco Free	71.7%*	70.9% - 72.6%	50,037	38
High Blood Pressure Control	65.5%*	64.5% - 66.4%	101,902	41
Optimal Vascular Care	38.9%*	37.5% - 40.3%	11,740	43
LDL-C < 100	63.9%*	62.5% - 65.3%	11,740	44
Blood Pressure <130/85	73.5%*	72.2% - 74.7%	11,740	45
Daily Aspirin Use	89.4%*	88.5% - 90.3%	11,740	46
Documented Tobacco Free	75.8%*	74.5% - 77.0%	11,740	47
"Getting Better" measures				
Appropriate Treatment for Children with URI	84.4%	84.0% - 84.7%	45,409	50
Appropriate Testing for Children with Pharyngitis	80.7%	80.2% - 81.1%	33,312	54
"Staying Healthy" measures				
Breast Cancer Screening (Mammograms)	75.5%	75.3% - 75.8%	99,295	58
Cervical Cancer Screening (Pap Tests)	77.6%	77.4% - 77.8%	243,056	62
Colorectal Cancer Screening	59.7%*	58.6% - 60.8%	234,131	65
Cancer Screening Combined – Ages 50-80 (breast, cervical, colorectal)	49.3%*	48.1% - 50.4%	234,131	67
Chlamydia Screening – Ages 16-25	40.8%	40.3% - 41.2%	45,212	70
Childhood Immunizations	74.4%*	73.2% - 75.5%	20,434	73

* These statewide averages are weighted.

18

53

Future Plans in Lake Wobegon

- Care model re-design
- reimbursement re-design (medical home and Capitation 2.0)
- Moving away from RVUs

42