



## 2023 Scorecard

2023 Provider-Delivered Care Management funding will be distributed to Physician Organizations through two avenues, with different payment timelines:

1. Training Reimbursement → BCBSM will reimburse for the training of anyone affiliated with the PO at a flat rate of \$500 per person who passes the test for full-day approved MICMT training courses and \$250 per person who passes the test for half-day approved MICMT training courses. (For reimbursement, the test is expected to be completed within 5 business days of the training course. Learners are instructed to complete it during the course and via email following the course.) Reimbursement will be provided for the cost of approved non-MICMT training up to the standard reimbursement rate (\$250 per ½ day). Reimbursement will be paid up to the training cap for each PO. This reimbursement will occur in the January 2024 PGIP check and include those trainings that occur between October 11, 2022, and October 10, 2023.
2. Scorecard Distribution  
The following scorecard shows the infrastructure elements that MICMT / BCBSM consider fundamental for care management program success. This distribution will occur in the January 2025 PGIP check to allow time for outcomes evaluation.

Unless otherwise noted: The % of PDCM Participating practices will be assessed using the 2023 1% PDCM List (2 encounters on 1% of patients) from 2022 Claims. These practices are identified in the reports provided with the Value-Based Reimbursement and PDCM Participation reports that BCBSM will distribute in Fall, 2023.

2023 Scorecard				
Measure #	Weight	Measure Description	Points	Data Source
1	48	<b>Outcomes</b>		
		Points for the below outcome measures are earned based on the PO performance with the PDCM Outcomes VBR.  <i>(See Appendix A for more information)</i>		Outcomes measures align with BCBSM outcomes reporting for POs/sub-POs.
		Peds: IP Utilization	6	
		Peds: ED Utilization	6	
		Peds: Weight Metric	6	
		Peds: Composite Metric	6	
		Adult: A1c performance	6	
		Adult: BP Performance	6	
		Adult: ED Utilization	6	
		Adult: IP Utilization	6	

2023 Scorecard

Measure #	Weight	Measure Description	Points	Data Source										
2	20	<b>Care Management Operations (Note: This will not impact PDCM Outcomes or Population Outreach VBR)</b>												
		Percent of PCMH Designated practices that achieve the PDCM Participation threshold (2 encounters on 1% of the PDCM attributed population).  <b>Note that this uses a different list:</b> The % of PDCM Participating practices will be assessed using the 2024 1% PDCM List (2 encounters on 1% of patients) from 2023 Claims. These practices are identified in the reports provided with the Value-Based Reimbursement and PDCM Participation reports that BCBSM will distribute in Fall, 2024.	<table border="1"> <thead> <tr> <th>% of PCMH practices</th> <th># of points</th> </tr> </thead> <tbody> <tr> <td>90%</td> <td>5</td> </tr> <tr> <td>75%</td> <td>4</td> </tr> <tr> <td>50%</td> <td>2</td> </tr> <tr> <td>25%</td> <td>1</td> </tr> </tbody> </table>	% of PCMH practices	# of points	90%	5	75%	4	50%	2	25%	1	BCBSM 2024 PDCM reports (2023 claims) titled "...2023_PD CM_PU_Rpt ...".
		% of PCMH practices	# of points											
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Percentage of PDCM Participating (2 encounters on 1% of the PDCM population) practices that achieve the Population Management VBR (2 encounters on 4% of the PDCM attributed population).  <b>Note that this uses a different list:</b> The % of PDCM Participating practices will be assessed using the 2024 1% PDCM List (2 encounters on 1% of patients) from 2023 Claims. These practices are identified in the reports provided with the Value-Based Reimbursement and PDCM Participation reports that BCBSM will distribute in Fall, 2024.	<table border="1"> <thead> <tr> <th>% of PDCM practices</th> <th># of points</th> </tr> </thead> <tbody> <tr> <td>90%</td> <td>5</td> </tr> <tr> <td>75%</td> <td>4</td> </tr> <tr> <td>50%</td> <td>2</td> </tr> <tr> <td>25%</td> <td>1</td> </tr> </tbody> </table>	% of PDCM practices	# of points	90%	5	75%	4	50%	2	25%	1	BCBSM 2024 PDCM reports (2023 claims) titled "...2023_PD CM_PU_Rpt ...".		
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Patient Satisfaction Survey: PCMH Capability 4.4 in place. "PCMH/PCMH-N patient satisfaction/office efficiency measures are systematically administered."	<table border="1"> <thead> <tr> <th>% of PDCM practices</th> <th># of points</th> </tr> </thead> <tbody> <tr> <td>90%</td> <td>4</td> </tr> <tr> <td>75%</td> <td>3</td> </tr> <tr> <td>50%</td> <td>2</td> </tr> <tr> <td>25%</td> <td>1</td> </tr> </tbody> </table>	% of PDCM practices	# of points	90%	4	75%	3	50%	2	25%	1	First snapshot of 2024, looking at CY 2023.		
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Patient Satisfaction Evaluation & Improvement: PCMH Capability 4.23 in place. "Practice has engaged in root cause analysis of any areas where there are significant opportunities for improvement in patient experience of care using tested methods such as Journey Mapping or LEAN techniques."	<table border="1"> <thead> <tr> <th>% of PDCM practices</th> <th># of points</th> </tr> </thead> <tbody> <tr> <td>90%</td> <td>6</td> </tr> <tr> <td>75%</td> <td>4</td> </tr> <tr> <td>50%</td> <td>3</td> </tr> <tr> <td>25%</td> <td>2</td> </tr> </tbody> </table>	% of PDCM practices	# of points	90%	6	75%	4	50%	3	25%	2	First snapshot of 2024, looking at CY 2023.		
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3	32	<b>Engagement:</b>												
		Patient Engagement SME Identified by 3/1/23 & participate in PE SME activities (meetings & surveys)	<b>4</b>	MICMT Reporting  For capability: First snapshot of 2024, looking at CY 2023.										
		Advanced Patient Engagement Training Completed by SME (During calendar year 2022 or 2023)	<b>5</b>											
		Patient Engagement Capability 11.8 in place. “At least one member of PO or practice unit is formally trained through completion of a nationally or internationally-accredited program in self-management support concepts and techniques, and regularly works with appropriate staff members at the practice unit to educate them so they are able to actively use self-management support concepts and techniques.”	<b>5</b>											
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Practice & Care Team Member Attestation/Verification	<b>5</b>													
At least 3 scheduled phone conferences (30 minutes) with MICMT	<b>5</b>													
Participation in the entire Annual Team-Based Care Conference by at least 1 PO representative	<b>4</b>													
Participation in the entire Annual MICMT meeting by at least 1 PO Representative with a leadership role in Care Management activity at the PO level	<b>4</b>													



## Appendix A – Outcomes Measurement Description

The 2022 Scorecard has 48 out of 100 points dedicated to outcomes measurement. As listed on the Scorecard, there are 7 outcomes measures. On the scorecard itself, specific targets for each of these are not mentioned as these metrics align with the measurements for PDCM Outcomes VBR analysis. The measures cover adults and pediatrics. If either set of measures does not apply to a specific PO, those points will be dropped from the scorecard. For example, a PO that does not have the potential to earn the PDCM Outcomes for VBR for pediatrics due to a lack of pediatric cases will have 24 points dropped from the denominator of the scorecard and the possible scorecard points will be 76 instead of 100.

Practice level VBR is earned at either a Sub-PO or PO level. If the population within that Sub-PO or PO performs at threshold or achieves the improvement threshold, then the Sub-PO or PO earns the VBR. MICMT will align the Scorecard outcomes measurement use a weighted average of Sub-PO performance to determine whether or not a PO earns the outcomes points.

For example:

The below PO has 2 Sub-POs that represent different portions of their population:

Sub-PO	Population
Sub-PO A	60%
Sub – PO B	40%

If only Sub-PO B earns the A1c practice-level PDCM Outcomes VBR for adults, then in the Scorecard, the PO would only earn 40% of the points for A1c.



## **Appendix B: Advanced Patient Engagement Training Description**

For a training to qualify as Advanced Patient Engagement training, the following criteria must be met:

- Individual must have evidence of a basic training, such as the MICMT Patient Engagement training or other introductory motivational interviewing training.
- Training should include analysis of practice audio or videotapes.
- Training should include a significant portion of demonstration and practice exercises, and less didactic material.
- The focus in advanced training is on differentiating change talk from commitment language and learning how to elicit and shape the two.
- Training should be accompanied by or support ongoing consultation and supervision (open-ended). Research indicates feedback and individualized training are most effective for gaining patient engagement skills.
  - This type of consultation can happen individually, within an organization, or contracted in addition to any workshop.
  - Please note that Amy Schneider offers one-on-one patient engagement coaching sessions, which can be accessed through the MICMT website.
  - Additionally, many MINT trainers offer individual consultation in person, telephonically, or through computer mediated communication such as video calls, digital audio or video recordings, and online classes. This allows for the most thorough adaptation of MI methods to specifics of the individual situation.

These criteria were adapted from the Motivational Interviewing Network of Trainers (MINT) website. Training designated as Advanced on this website (<https://motivationalinterviewing.org/list-events>) will automatically meet this requirement.

As a reminder, external training can be submitted to MICMT by POs for review and possible approval of learning credits and reimbursement via <https://micmt-cares.org/external-training>.