

MVC Component of the BCBSM P4P Program:

Program Year 2023 In Review



Four Guiding Principles



Use high-quality data to drive improvement



Alignment, where possible, with BCBSM and CMS quality measures



Fair, simple, and transparent measures



Encourage use of MVC data to drive value improvement

PY 22/23 Timeline



PY 2023Scoring & Payment 2024



30-Day Episode Spending Component

Condition Selection Options:

- Chronic obstructive pulmonary disease (COPD)
- Colectomy (non-cancer)
- Congestive heart failure (CHF)
- Coronary artery bypass graft (CABG)
- Joint replacement (hip and knee)
- Pneumonia
- Spine surgery

P4P Eligibility:

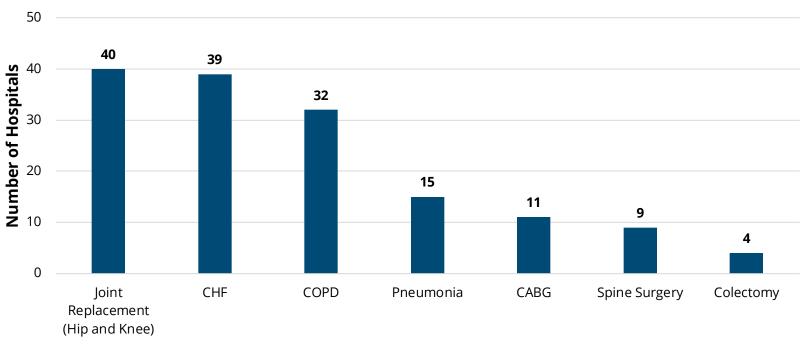
- Excluded: Episodes with inpatient transfers, inpatient death, discharge to hospice, or presence of COVID-19
- Hospitals must meet the quality threshold for inpatient mortality and readmissions in order to earn points



Episode Spending Metric Scoring

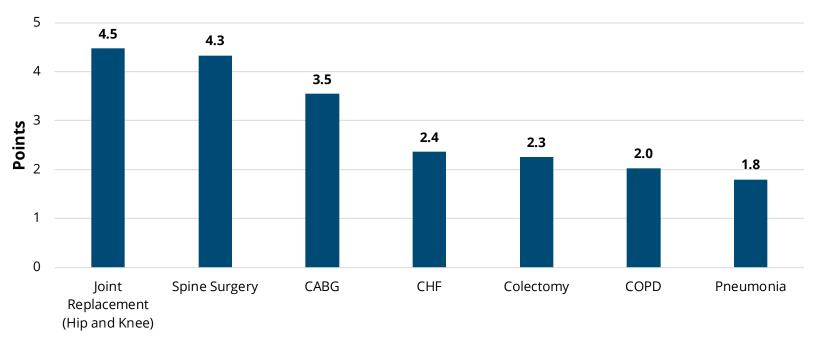
Metric Options	Maximum Score	Scoring Methodology
Choose 2 of 7	5 per condition	Z-score
Scoring Logic	Improvement Comparison	Achievement Comparison
Award greater of the two, either Improvement or Achievement	Improvement based on hospital's own past performance	Achievement based on comparison to MVC cohort

Condition Selections for PY22/23



P4P Conditions

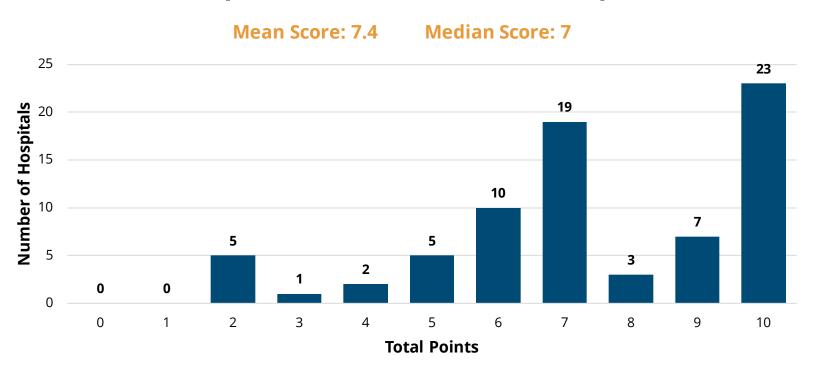
Average Points by Condition in PY23



P4P Conditions

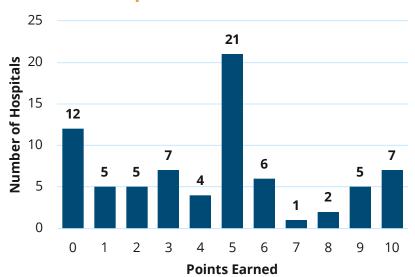
Distribution of Total Points in PY23

(Includes Bonus Points)



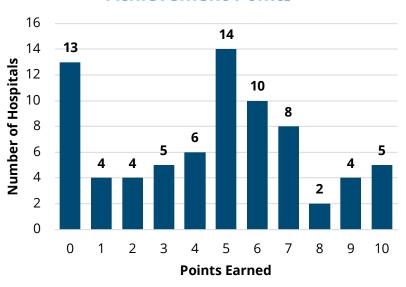
Distribution of Improvement vs Achievement Points in PY23

Improvement Points



Mean: 4.4 Median: 5

Achievement Points



Mean: 4.5

Median: 5

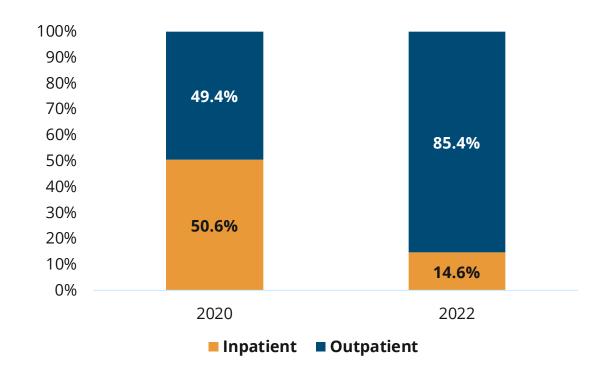
Average and Cumulative Payment Change

P4P Condition	Program Year 2023 Average Payment Change	Program Year 2023 Cumulative Payment Change
CABG	-\$1,325	-\$846,867
CHF	\$130	\$703,279
Colectomy	-\$126	-\$32,876
COPD	-\$40	-\$86,496
Joint Replacement (Hip and Knee)	-\$814	-\$9,564,256
Pneumonia	\$14	\$16,449
Spine	-\$2,037	-\$2,685,043
Total	-\$4,198	-\$12,495,810



- Outpatient joint replacements increased from 49.4% in 2020 to 85.4% in 2022
- Outpatient joint replacement costs about \$6,000 less on average than inpatient joint replacement

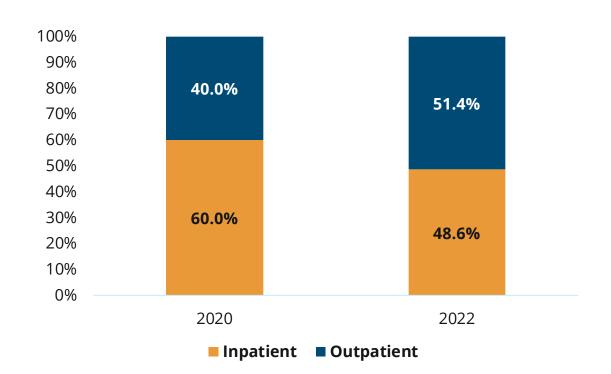
Condition-Specific Investigation



Spine

- Outpatient spine surgery increased from 40% in 2020 to 51.4% in 2022
- Outpatient spine surgery costs about \$25,300 less on average than inpatient spine surgery

Condition-Specific Investigation



Next Steps

- Program Year 2024 Mid-Year Scorecards will be distributed in the Summer of 2024
- Current P4P scores can be accessed by members on the MVC registry

PY24 Engagement Opportunities

Engagement Activities	Points
Attend MVC's Collaborative-Wide Meetings	0.25 (0.75 for both)
Submit and present a poster at MVC's Collaborative-Wide Meetings (max 1 poster per mtg)	0.5
Present at an MVC workgroup (max 1 per site per year)	0.5
Participate in all four workgroup sessions in a series (cardiac rehab, preoperative testing, follow-up, sepsis) and complete post-workgroup survey (max .5 pts per year)	0.25
Participate in four workgroups from either Health In Action or Rural Health (max .25 per year)	0.25
Attend an MVC networking event	0.25
Complete MVC's analytic custom report process (max .25 pts per year)	0.25
Member hosts a virtual, in-person, or multi-site visit	Varies by Setting
Complete a quality improvement (QI) initiative survey – due 9/30/2024	0.25
Complete a one-hour virtual interview with MVC about member QI initiatives and successes	0.25