

Frequently Asked Questions Physician Organizations (POs)

What is the Michigan Value Collaborative?

The Michigan Value Collaborative (MVC) is a partnership between Michigan hospitals and Blue Cross Blue Shield of Michigan (BCBSM)/Blue Care Network (BCN). MVC aims to improve healthcare quality across Michigan through rigorous performance feedback using claims data, empirical identification of best practices, and collaborative learning.

What is the value of MVC data to POs?

MVC provides hospital-level data to help POs understand episode efficiency and better manage transitions of care within their attributed hospitals. MVC serves as the linkage between hospital and PO leadership, helping to address competing objectives such as tradeoffs between post-acute care and outpatient claims.

What hospital data can POs access on the registry?

A PO can acquire access to a hospital's data in two ways:

1. MVC provides access to a PO when specifically requested to do so by a hospital.
2. Without an explicit request by the hospital, a PO will only be given access to a hospital's MVC report if it has a shared population with the hospital (i.e., the same patients attributed to the hospital under the BCBSM value-based contracting program and reported in the Population Insights report).

The attribution of POs to hospitals is updated biannually, and POs can view any changes in the Population Insights report. For questions about Blue Cross's attribution methodology please contact Marc Cohen at MCohen@bcbsm.com.

Who from the PO can access the registry?

Without an explicit hospital request, each PO will designate a site coordinator to have access to the registry. Additional requests for access can be requested and granted at the discretion of the MVC Coordinating Center. These individuals will represent the PO on the registry and can share data from the registry reports with other individuals within their organization.

What is the process for obtaining access to the registry?

After a PO has identified their organization's site coordinator to MVC, the individual will be contacted and given a website confidentiality agreement form to be signed and sent back. Once the signed confidentiality agreement has been received by MVC, the site coordinator will be emailed with their log-in information.



When can I get access to the registry?

Immediately. The MVC Coordinating Center began granting POs access to the [MVC registry](#) in September 2018.

What data is available for POs on the registry?

PO site coordinators can access BCBSM PPO and BCN claims data for Michigan patients receiving care at their MVC affiliated hospitals. This includes BCBSM and BCN's Medicare Advantage claims data.

Does MVC show my attributed patient population?

MVC data is at the hospital level. If you are attributed to a hospital you will see all patients seen at that hospital, not just those that are treated by a physician affiliated with your PO. As of 2021, however, MVC has developed and began distribution of PO-specific reports with patient attribution at the PO level. These reports are distributed directly to PO site coordinators and specific site contacts. Currently, PO patient attribution breakdown is not available on the registry.

What does MVC data measure?

MVC data contains risk-adjusted and price-standardized measures of 30-day and 90-day episode payments around hospitalizations for common conditions and procedures. Episode costs are risk-adjusted to account for differences in case mix across hospitals. They are also price standardized, so measures reflect utilization rates rather than negotiated prices/rates. Clinical services unrelated to the index admission are excluded.

How is an episode of care defined?

An episode of care is defined by four main payment components: a facility index payment, professional payment, post-acute care payment, and readmission payment. These components are further outlined in MVC's Episode of Care Payment Components Model and technical documents, which can each be found on the resources page of the [MVC website](#).

How does MVC risk adjust data?

MVC performs risk adjustment using observed/expected (O/E) ratios. The numerator in this ratio is the aggregate of all observed payments for a particular hospital. The denominator is the aggregate of all expected payments. This ratio is multiplied by the statewide expected mean payment to arrive at the risk-adjusted payment for that hospital.

How will the data be reported?

In addition to viewing overall episode costs for attributed hospitals against the MVC average, POs are able to drill down into the BCBSM and BCN data to understand the comparative utilization of specific services, trends over time, and root causes of variation. There are a variety of reports on the registry, which can be exported and used internally within your PO.

How often is the data updated?

The MVC registry is regularly updated with the most recent claims data received. The Coordinating Center receives frequent updates of BCBSM/BCN data (monthly), Medicare Fee-for-Service data (quarterly), and Medicaid data (bi-annually). As always, there is an anticipated adjudication time for each of these sources and it is anticipated that BCBSM data will have a four- to five-month lag, while Medicare data will incur a nine to 10-month lag. Please view the registry or contact the Coordinating Center for more information on the data available to users.

Are high episode costs “good” or “bad?”

The overarching goal of MVC is to help Michigan hospitals and POs achieve the best possible patient outcomes at the lowest reasonable cost. Taken alone, the utilization measures provided by MVC cannot establish “optimal” practice for any given service line. However, using such data in the context of credible measures of clinical performance from other sources, including the Collaborative Quality Initiative (CQI) programs, enables members to identify and share best practices, identify episode trends and utilization, and benchmark for quality and cost.

What are the expectations of POs, with regard to using these data?

The Coordinating Center hopes that POs, in partnership with their affiliated hospitals, will use these data to target improvement opportunities; identify and share best practices; and design, implement, and evaluate statewide interventions. At the local level, MVC encourages PO leaders to use these data to understand and improve their comparative efficiency, both overall and across individual specialties.

Which facilities are included in the online data registry?

A list of current MVC partner hospitals and POs can be accessed [here](#).

What resources are available for learning how to use the registry?

The Coordinating Center holds PO webinar sessions once per month. You may also schedule virtual one-on-one trainings or site visits (MVC staff come to your organization to deliver a presentation and discuss your needs in more detail) by contacting Jeffrey Jameel (jefjamee@med.umich.edu). More information can be found by visiting the [MVC website](#).

How can I find current information on MVC events, meetings, and quality initiatives?

In addition to contacting the MVC Coordinating Center at michiganvaluecollaborative@gmail.com, individuals may stay up to date with MVC activities by visiting MVC’s [website](#) and [subscribing](#) to the MVC blog.