

Improving STARS by leveraging PCPs and IT

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Disclosures

Jayson Hobbs is an employee of FocusMD. The conflict of interest was resolved by peer review of the slide content. He declares no other conflicts of interest or financial interest in any product or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.

Learning Objectives

Following this presentation, attendees should be able to:

1. Describe the star measures for primary care physicians (PCPs) as they relate to pharmacy.
2. Describe what IT tools are in place for PCPs to improve their star ratings performance.
3. List PCPs' top three perceived drivers for med adherence.

2016 STAR MEASURE PERFORMANCE SUMMARY

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RUN DATE: 19APR2016

ATTRIBUTION DATE: 28FEB2016

CLAIMS PAID THROUGH: 26MAR2016

CURRENT AGGREGATED STAR RATING: 2.72 STARS

Class	Measure Name	Measure Weight	Eligible Population (Denominator)	# of Gaps Closed (Numerator)	Non-Flagged	# of Gaps Addressed and On Track (Trend)	Pt to Gap Benchmark, 5 Star	# of Eligible Population Beyond Remediation	Actual YTD Compliance Rate	Trend Compliance Rate	Current Trend Measure Star Rating	Maximum Potential Compliance Rate	4 Star Compliance	5 Star Compliance
Dynamic	C15: Comprehensive Diabetes Care: HbA1c Control (<=9%)		3	24	19	5	16		20.80%		1	100.00%	74.00%	85.00%
Static	D15: Medication Therapy Management		3	28	3	25	20		10.70%		1		55.00%	81.00%
Static	C01: Breast Cancer Screening		1	42	30	12	5		71.40%		3		77.00%	83.00%
Static	C02: Colorectal Cancer Screening		1	89	63	26	10		70.80%		3		74.00%	82.00%
Static	C07: Adult BMI Assessment		1	76	63	13	11		82.90%		2		94.00%	97.00%
Static	C13: Comprehensive Diabetes Care: Eye Exam (retinal) performed		1	24	5	19	16		20.80%		1		76.00%	85.00%
Static	C14: Comprehensive Diabetes Care: Medical Attention for Nephropathy		1	24	19	5	5		79.20%		1		94.00%	98.00%
Static	DMC20: Statin Therapy for Patients with Cardiovascular Disease		1	10	7	3	2		70.00%		3		78.00%	84.00%
Static	DMC22: Statin Therapy for Patients with Diabetes		1	16	9	7	5		56.30%		1		76.00%	83.00%
Static	C51: Annual Wellness and Initial Preventative Physical Rate			254	25	229			9.80%					
Total						358	90							

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C15: Comprehensive Diabetes Care – HbA1c Control

(≤9%) Source: HEDIS® 2016 (portion of CDC)

Measure weight: 3 5 star: 85%

Percentage of members 18-75 years of age with diabetes (type 1 and type 2) whose most recent Hemoglobin A1C is ≤9.0%. The measure is reported as an inverted rate [1-(numerator/eligible population)]. Higher rate of compliance demonstrates better performance.

Numerator	Denominator	Exclusions
<p>Members whose most recent HbA1c level is >9.0% or is missing a result, or if an HbA1c test was not done during the measurement year.</p> <p>Control is demonstrated by: CPTII Codes: 3044F HbA1c: <7.0% 3045F HbA1c 7.0-9.0%</p> <p>The service date for the Category II code and the test result must follow the requirements outlined in general Guideline 36: the dates of service for the code and the test result must be no more than seven days apart..</p>	<p>Diabetic members age 18-75 years by the end of the measurement year and who were enrolled in the plan at the end of the measurement year.</p> <p><i>Please refer to Diabetic member definitions on Slide 13 – also applicable to this measure.</i></p>	<ul style="list-style-type: none"> • Diagnosis of gestational or steroid-induced diabetes during the measurement year or the year prior to the measurement year. <p>For exclusions, member must not have a face-to-face encounter in any setting, with a diagnosis of diabetes, during the measurement year or year prior to the measurement year.</p> <p><i>The exclusion "History of polycystic ovaries at any time before the measurement date" has been removed from specifications.</i></p>

Base 2016 Medicare Advantage Provider Incentive

Providers servicing Highmark Medicare Advantage members in 2016 will have opportunities to earn incentive payments for closing individual gaps in care as well as achieving a successful Year-End Star Rating across 16 selected measures.

\$10 Per Gap

Providers can earn \$10 per Care Gap* closed between **January 1, 2016** and **December 31, 2016** across select Star measures.

Based on service dates between 01/01/16 – 12/31/16

Quarterly Payment

The Per Gap incentive will be paid quarterly:

- Services Rendered January – March Paid in June 2016
- Unpaid services rendered through 06/30/16 paid in September 2016
- Unpaid services rendered through 09/30/16 paid in December 2016
- Unpaid services rendered through 12/31/16 paid in May 2017 (allows for 3 month run-out).

2016 Star Rating Incentive

Earn up to \$150 per Medicare Advantage member based on overall 2016 Star Rating:

< 3.5 Stars	\$0 Per Member
3.5 Stars	\$10 Per Member
3.75 Stars	\$20 Per Member
4.0 Stars	\$50 Per Member
4.25 Stars	\$75 Per Member
4.5 Stars	\$90 Per Member
4.75 Stars	\$125 Per Member
5.0 Stars	\$150 Per Member

Exact Star calculation methodology and measure specifications guide to be provided in Incentive training materials.

Performance Incentive Tiers

Overall Stars Rating	Incentive per Medicare Member	Multiplier 120% (with 50% AWV)	Multiplier 150% (with 75% AWV)	Multiplier 125% (with 30% eAWV)	Multiplier 160% (with 60% eAWV)
5.00	\$150	\$180	\$225	\$187.50	\$240
4.75-4.9999	\$125	\$150	\$187.50	\$156.30	\$200
4.50-4.7499	\$90	\$108	\$135	\$112.50	\$144
4.25-4.4999	\$75	\$90	\$112.50	\$93.80	\$120
4.00-4.2499	\$50	\$60	\$75	\$62.50	\$80
3.75-3.9999	\$20	\$24	\$30	\$26	\$32
3.50-3.7499	\$10	\$12	\$15	\$12.50	\$16
<3.50	\$0	\$0	\$0	\$0	\$0

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2016 Medicare Advantage Incentive Measure Set

This program is structured to assess and improve the process of care for Highmark Medicare Advantage patients by their primary care practices using specific CMS Stars measures and AWW completion as the clinical quality component.

Static Measures Included in \$10 Per Gap Incentive	Dynamic Measures NOT Included in \$10 Per Gap Incentive
<ul style="list-style-type: none">• Annual Wellness Visit *• Breast Cancer Screening• Colorectal Cancer Screening• Adult BMI Assessment• Osteoporosis Management in Women w/Fracture• Diabetes Care - Eye Exam• Diabetes Care - Kidney Disease Monitoring• Rheumatoid Arthritis Management• Statin Therapy for Patients with CV Disease• Statin Therapy For Diabetes• Medication Therapy Management	<ul style="list-style-type: none">• Diabetes Care - Blood Sugar Controlled• Plan All-Cause Readmissions• Medication Adherence for Diabetes Meds• Medication Adherence for Hypertension• Medication Adherence for Cholesterol• Medication Management for patients with Asthma

Verisk Provider Intelligence

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Workflows ▾

Highmark Blue Cross Blue Shield | Quality Blue

HIGHMARK (IE001) Individuals Extract

Hide Preferences Show Header Generate Individuals Extract Customize Notes Help

Business Levels

Entity: All
 Practice Site: All
 Practitioner NPI: All
 Highmark: All

Records 1-25 of 88

Individual ID	Individual	DOB	RI	CGI	Age	Gender	Current	Rel. Flag	QN01	QN02	QN02.01	QN02.03	QN02.04	QN03	QN04	QN05	QN06	QN06.01	QN06.02	QN07	QN08	QN09	QN10	QN12.06	QN13	QN14	QN16.01	QN16.01.01	QN16.02	QN16.03	QN17.01	QN17.02	QN17.03	QN20
79991999399959994799	[REDACTED]	11/30/1970	11	0	45	M	Y	E	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
29990199899919990399	[REDACTED]	05/29/1977	2	0	38	F	Y	E	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
99999999899970998799	[REDACTED]	08/05/1993	14	2	22	M	Y	E	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
89992899099909995899	[REDACTED]	09/20/1967	3	0	48	F	Y	E	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
89990999399939994699	[REDACTED]	12/22/1997	2	2	18	F	Y	D	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
89990899599951999999	[REDACTED]	07/19/1974	1	0	41	F	Y	S	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
79998399299980993599	[REDACTED]	07/31/1955	13	0	60	F	Y	S	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
19995499099959990299	[REDACTED]	09/13/1987	3	0	28	M	Y	E	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
29995999599949994099	[REDACTED]	05/19/1985	4	0	30	F	Y	E	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
29994999399980996699	[REDACTED]	04/01/1979	4	0	36	F	Y	S	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		

Provider Intelligence 6.9.0
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Compliance Data Matching Pilot



- Pull non compliant patients from payers' claims database
- Match non compliant patients to pharmacy database
- Implement compliance programs
- Drive STARs and Pharmacy Quality Results

Perceived Med Adherence Drivers

1. **Cost**-Drug costs to patients
2. **Quality**-Drug Availability and Quality Ratings
3. **Service**-Compliance Programs and home delivery

Thank You!

Questions??

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