

# Fact Sheet

## Physician Group Incentive Program 2011



### Michigan Anticoagulation Quality Improvement Initiative (MAQI2)

#### About Value Partnerships

*Value Partnerships is a collection of clinically oriented initiatives among Michigan physicians, hospitals and Blue Cross Blue Shield of Michigan (BCBSM) that are improving clinical quality, reducing complications, controlling cost trends, eliminating errors, and improving health outcomes throughout Michigan.*

#### About The Physician Group Incentive Program

*The Physician Group Incentive Program (PGIP) began in 2005 to encourage and incentivize physicians to more effectively manage populations of patients and build an infrastructure to more robustly measure and monitor care quality. As of August 2010, 37 physician organizations (POs) and over 8,600 physicians are working together to improve health care for more than 1.8 million Michigan Blues members.*

#### Overview

Recognizing the need for appropriate anticoagulation management to decrease mortality rates, bleeding complications, and adverse drug events associated with anticoagulation therapy, BCBSM launched the Michigan Anticoagulation Quality Improvement Initiative (MAQI2) in 2010. This initiative is a PGIP professional Collaborative Quality Initiative (CQI) that includes a statewide consortium centered around a comprehensive clinical registry. This anticoagulation registry is used to generate performance reports designed to improve the quality of care for patients receiving ongoing medical care for bleeding disorders under the guidance of anticoagulation services. The University of Michigan serves as the BCBSM contracted coordinating center for MAQI2.

#### Objectives

- Improve outcomes and safety for patients receiving anticoagulation therapy
- Identify best practices of high performing anticoagulation service (ACS) providers
- Disseminate these strategies to a larger audience of providers (e.g., smaller physician offices and other hospital-based anticoagulation clinics)
- Reduce adverse events related to anticoagulation therapy

#### Incentive Design

BCBSM is providing participation payments to assist participants in staffing and maintaining this project. The payment model is designed to cover data abstraction costs and participation costs of the anticoagulation clinic.

#### Participation Criteria

A PGIP PO's anticoagulation service has to meet the following criteria in order to be eligible for the initiative:

- Be an organized ACS that has been fully functioning for at least one year
- Meet an annual minimum, ongoing caseload requirement of 150 distinct patients under active management
- Be staffed with a medical director who has expertise or training in the clinical or scientific underpinnings of anticoagulation and conditions requiring anticoagulation therapy



## Results

Since its launch in 2010, MAQI2 has grown to include nine ACS clinics across Michigan. Most participating sites are currently collecting data on new and follow-up patients. The data registry has grown to include over 2,000 new patient entries and over 19,000 follow-ups. The coordinating center is currently developing a plan for identifying quality improvement areas within existing data and examining the impact of new anticoagulation drugs that have arrived on the market since inception of this initiative.

In 2011 it is expected that registry data will be robust enough to begin the analytical process. Additionally, the introduction of new anticoagulation drugs could influence the design and data collection process associated with the registry.

Questions about the Michigan  
Anticoagulation Improvement Initiative?

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For more information on PGIP, or for a  
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