



About Value Partnerships

Value Partnerships is a collection of clinically oriented initiatives among Michigan physicians, hospitals and Blue Cross Blue Shield of Michigan 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 September 2011, 40 physician organizations (POs) across the state of Michigan representing nearly 15,000 primary care physicians and specialists are working together to improve health care for nearly 2 million Michigan Blues members. Additionally, PGIP is cultivating a healthier future for all Michigan residents by catalyzing all payer system development. Patients throughout the state, regardless of payer, benefit from the improved care processes developed through the PGIP provider community.

PGIP American Society of Clinical Oncology (ASCO) Quality Oncology Practice Initiative (QOPI)

Overview

QOPI is a quality improvement tool focused on process and safety measures at the oncology practice level. The goal of the PGIP QOPI program is to promote high-quality, effective, and cost-efficient care for cancer patients, facilitated by participation in the ASCO QOPI Health Plan Program. The University of Michigan Health System Comprehensive Cancer Center serves as the Coordinating Center for this Initiative under the name Michigan Oncology Quality Consortium (MOQC).

Objectives

- Improve adherence to clinical guidelines for cancer treatment
- Assist oncology practices in promoting a culture of quality improvement
- Improve the process for the delivery of cancer care

Incentive Design

Incentive payments are based on oncology practices meeting the participation requirements, including semi-annual data submissions to ASCO and a signed Data Use Agreement (DUA) with MOQC. Once participation is deemed satisfactory, the following three factors contribute to the incentive amount POs can receive for their oncologists' active participation in QOPI:

- BCBSM membership attributed to the PO
- Projected data abstraction costs based on the size and number of practices participating
- Size and number of practice units in a PO



Participation Criteria

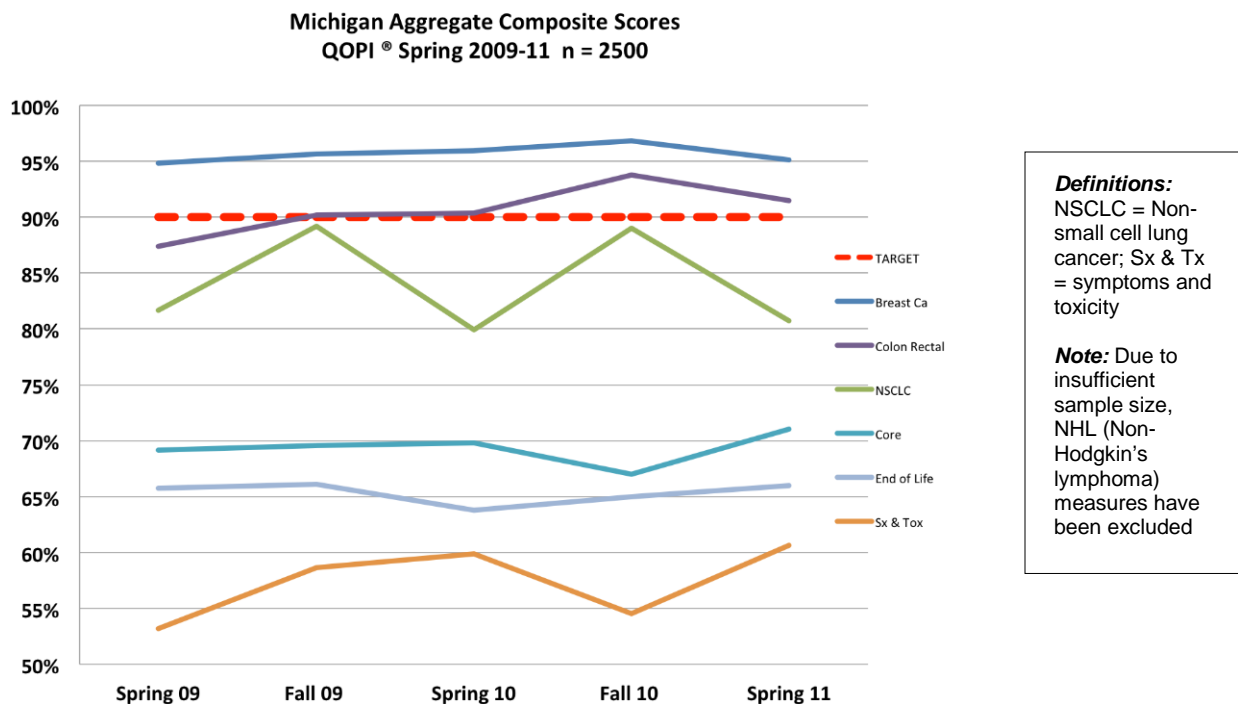
Oncologists and oncology practices participating in PGIP are eligible to participate in this initiative. QOPI participants must:

- Enroll and fully participate in the ASCO QOPI Health Plan Program
- Conduct retrospective chart reviews at the practice level
- Sign a data use agreement with MOQC for the goal of developing Michigan-specific data, reports, and analyses
- Participate in semi-annual meetings to discuss QOPI results and share best practices

Results

MOQC reports the following QOPI Initiative results to date:

- 87% of PGIP oncologists participate representing 78 oncology practices.
- 46 (59%) of PGIP oncology practices participated in QOPI data submissions to ASCO in Spring 2011.
- Of the seven QOPI modules, Michigan aggregate composite scores exceeded the MOQC target for breast cancer and colon cancer modules (see chart below).
- Michigan aggregate scores have increased for three additional modules, Core, End of Life Care, and Symptom and Toxicity Management.
- Learning collaborative processes have led to improving performance among QOPI participation in several focused measures (e.g., KRAS measure for colorectal cancer).
- Five Michigan oncology practices are QOPI certified.



For 2012, the Initiative will focus on the ASCO QOPI pain management measures, with a specific concentration on pain management at the end of life.

Questions about the Clinical Treatment Pathways Program?

Please contact Kim Harrison, MHSA,
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For more information on PGIP, or for a copy of the full initiative plan, please contact:

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