

Physician Update

OCTOBER 2008

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BCBSM reaches out for reporting initiative

While we continue to develop a Web-based reporting system for health care cost and quality information, BCBSM remains committed to include our physician and hospital partners in our progress.

It is part of the overall responsibility we have to ensure that our actions are in the best interest of all stakeholders. While achieving this balance is challenging, we recognize the importance of this practice in our daily business decisions.

For example, as the health care market began to shift and put more responsibility for payment on the individual, we needed to ensure that our members had the necessary tools to make the decisions that affect their lives.

That is why we plan to launch a Web-based system beginning Jan. 1, 2009, which will provide members with comparative health care cost and quality information for our participating hospitals and some physicians.

However, in developing this tool, we also needed to ensure that the information is collected and represented fairly from the perspective of our health care providers. As a result, we have had dialogue over the past two years about this initiative with physicians, hospitals, the Michigan State Medical Society, Michigan Osteopathic Association, Michigan Health & Hospital Association, Michigan physician groups and other representatives.

In July, we held informational forums for hospitals about the data we collected and our methodologies. We also sent hospitals their cost data for the 41 procedures we will initially report on, so they could verify the accuracy of the data before we make it available to our members.

These efforts show how we understand and respect our participating health care providers, and work with them on initiatives like this.

On a larger scale, BCBSM is actively collaborating with other Blue plans nationally. Through this collaboration, we have developed a consistent data methodology for calculating and displaying hospital cost information in a fair and efficient way. Presenting the data in a single manner will make it easier for our members to make their health care decisions not only in Michigan, but across the country.

As we get closer to the launch of our Web-based reporting tool on Jan. 1, we will continue to share information in our newsletters about what members will see and how the data was calculated.



When it comes to patient-centered care, it's déjà vu all over again

The term "patient-centered" has become a popular way of describing how primary care services should be reoriented to help guide patients toward managing their health and medical conditions.

When reading this, many physicians will wonder how this is different from how they currently practice, which has always been patient-centered. There is also a bit of déjà vu here. Physicians ask, "Didn't we just go through this with disease management, a repackaging of what we believed we had been doing for years?"

True enough. Yet, we need to examine how clinical practice can become more effective in each of these areas, thereby reducing market demand for outside vendors to perform these services.

An office visit to manage acute injuries or ailments rightly focuses on the patient's chief complaint and history of the present illness. This approach doesn't work as well for promoting wellness, delivering preventive services and managing chronic conditions. Traditional office visits often fall short on many objective measures for these goals.

Getting thousands of physicians to redesign their office practices is more challenging than contracting with a vendor to offer the latest approach to wellness coaching, disease management or case management. The right choice, however, is not always the easy choice.

Physicians, facilitated by their physician organizations and professional societies, should regain the leadership position in delivering services that support patients to become informed and active stewards of their own health. This implies assessing patient risk, helping them understand what they need to do to achieve their own goals and helping them through the many challenges along the way.

I'd like to hear from you

If you have any questions or comments, please contact me by fax at 313-983-2020 or e-mail at doctorsimmer@bcbsm.com.

Thomas Simmer, M.D., is BCBSM's senior vice president and chief medical officer.



News in Brief

Bariatric surgery data shows improvement

Last summer, the Michigan Bariatric Surgery Collaborative — one of BCBSM's Collaborative Quality Initiatives — received some well-deserved front-page coverage from the *Detroit Free Press* for an initiative to measure the safety and efficacy of bariatric surgery. Since then, the MBSC reports that data from October 2007 through March 2008 continues the positive trend in bariatric surgical outcomes for key indicators: length of stay, readmissions, overall adverse events and overall complication rates.

For more information, see the July/August BCBSM *Hospital Update*, Page 3. In web-DENIS, under *BCBSM Provider Publications & Resources*, click on *Newsletters & Resources*, then *BCBSM Resources* to find *Hospital Update*.

Michigan physicians support national oncology database

More than 180 oncologists in 11 physician groups across Michigan — the largest number from any state — are submitting information to a national database to help identify what works best in cancer care.

Physician organizations with specialists participating in the American Society of Clinical Oncology initiative are eligible for payments for submitting cancer treatment data to the national registry and implementing changes leading to improved treatment of cancer patients. BCBSM is providing funding to defray costs and encourage participation.

For more information, go to bcbsm.com, click on *Newsroom* and then the news release dated Aug. 8, 2008.

NEWS continued on Page 4

PGIP Lean Thinking process aims to enhance patient care

Second in a two-part series on how participating Physician Group Incentive Program physician organizations are benefiting from Lean Thinking workshops as they implement the patient-centered medical home model.

Like many other participating organizations, ProMed/Borgess Ambulatory Care in Kalamazoo focused its Lean Thinking efforts on processes used to care for patients with diabetes.

"We worked through every aspect of providing quality care to diabetic patients," said Kim Nuyen, R.N., care coordinator at Borgess Ambulatory Care. "We built an efficient plan that I believe patients will benefit from. I feel an increased confidence that we will succeed in providing an exceptional level of care to our diabetic patients now."

In March, Borgess Ambulatory Care gave a presentation on its revised processes at the Institute for Healthcare Improvement Office Practice Summit in Dallas.

"Creating a culture of employee engagement and empowerment — with improvement in patient

satisfaction with care delivery as a result — is the ultimate goal," explained Cindy Buckner, R.N., executive director of Ambulatory Operations Design and Quality. "Successful Lean initiatives require leadership support to allow staff time away from day-to-day work in order to accomplish Lean tactics."

The facility has been recognized by the National Committee for Quality Assurance, a nonprofit organization dedicated to improving health care quality, for providing excellent care to patients with diabetes.

Integrated Health Associates in Ann Arbor also witnessed significant improvement in its processes for caring for diabetic patients as a result of Lean Thinking workshops.

"It's an investment on the front end that will definitely pay off in the long run," said Lynn Klima, a nurse



Team members from the ProMed physician organization participate in a three-day Lean workshop to improve processes at the clinical level.

practitioner and director of clinical improvement at IHA.

The organization used Lean Thinking principles to develop more efficient data tracking and to build data registries — key components of the patient-centered medical home model. "Data registries and test tracking have been a core strategy in helping manage our patients better," Klima said.

For more information, see the October Record or contact Tom Leyden, BCBSM health care manager, at tleyden@bcbsm.com.

MQIC offers guidelines for early detection of breast, cervical, colorectal cancer

As part of its campaign to improve outcomes for patients with certain targeted conditions, including diabetes and cancer, the Michigan Quality Improvement Consortium has issued guidelines for early detection of breast, cervical and colorectal cancer.

They include:

- Women's breast cancer screening
- Cervical cancer screening
- Colorectal cancer screening (for men and women)

More detailed information, including what screenings are recommended based on the patient's age, suggested frequency and risk factors, can be found in the October 2008 *Record*, Page 13.

MQIC is a collaboration of physicians and representatives of Michigan health plans, the Michigan State Medical Society, the Michigan Osteopathic Association, the Michigan Association of Health Plans, MPRO, Blue Care Network and Blue Cross Blue Shield of Michigan. The Blues endorse the guidelines developed by MQIC for improving patient care.

To learn more about MQIC or to access the MQIC adult preventive services guidelines, please visit mqic.org.

Non-BCBSM Web sites

BCBSM maintains bcbsm.com, MiBCN.com, hcbo.com and theunadvertisedbrand.com. The Blues do not control any other Web sites referenced in this publication or endorse their general content.

2008 Contact Sheet



BCBSM Accomplishments

Enhance ease of doing business

- Implemented new electronic funds transfer program, enabling Michigan professional practitioners — including those who bill for routine vision and hearing services — to receive payments and vouchers electronically
- Improved the *Physician/Professional Enrollment and Change Form* and posted it on our Web site at bcbsm.com/providers
- Enhanced the *View a Benefit Detail Record (BDR)* function for code and benefit searches on web-DENIS and provided associated computer-based training
- Launched Medicare eligibility feature on web-DENIS, our secure health care provider portal, for online verification of member eligibility, benefits and coverage information for Original Medicare members
- Revised the language for many rejection codes to be clearer, more concise and to include a liability statement

Responsive and accurate service

- Launched the specialty servicing pilot project for pediatricians, enabling them to receive all their pediatric specialty administrative support services from a single BCBSM team
- Enhanced our national claims system to clarify payment information in certain secondary balance coordination of benefits claims situations
- Added a touch-tone alternative to the CAREN telephone voice-recognition software
- Developed downloadable professional and facility CAREN brochures to help practitioners navigate through system prompts and patient eligibility information
- Expanded the specialty servicing pilot project for pediatricians in Southeast and Mid-Michigan to include any primary care practice that treats children
- Redesigned EDI Web pages to help practitioners more easily conduct electronic claim, eligibility and claim status transactions and locate documents

Partnerships to promote and facilitate better health care

- For the fourth consecutive year, provided \$1 million in grants to free clinics across Michigan to help the uninsured get needed medical care
- Offered the Healthy Blue IncentivesSM plan, which rewards members who commit to better health with lower copays and deductibles. The plan also offers basic dental services
- Developed the *Pediatric Healthy Weight Toolkit* to give physicians an efficient way to prevent and address all aspects of child obesity
- Expanded participation in a program to study and improve the use of coronary computed tomography angiography — a promising, noninvasive technology — to include qualifying cardiology and radiology groups

Communication efforts

- Hosted health care provider outreach fairs at six hospitals around the state
- Offered home health care forums to discuss practitioner concerns and billing issue topics, including durable medical equipment
- Redesigned the bcbsm.com home page to include two key practitioner applications — *Provider Secured Services* log in and the physician and hospital finder — on the front page
- Educated practitioners about Medicare Advantage group-specific benefits that may allow for payment of additional procedure and diagnosis codes and places of service
- Continued to provide free billing seminars
- Added new audio training to the web-DENIS lineup, on topics including consumer-directed health plans and dental plans

Important contact information on the back >

Contact Information

Web site	bcbsm.com
CAREN (benefits and eligibility)	
Professional health care providers	800-344-8525
Hospitals and facilities	800-249-5103
Dental, vision and hearing providers	800-482-4047
Dr. Thomas Simmer, senior vice president and chief medical officer	
doctorsimmer@bcbsm.com	
Robert Milewski, senior vice president, Contracting and Hospital Relations	
rmilewski@bcbsm.com	
James Lang, Pharm.D., vice president, Pharmacy Services	
jlang@bcbsm.com	
Provider Inquiry, professional providers (by area code)	
248, 313, 586, 734, 810 and 947	800-245-9092
517, 989	800-272-0172
231, 269, 616 and *989	800-255-1878
906	866-872-5837
Outside Michigan	800-482-3146
Provider Inquiry, hospitals and facilities (by area code)	
248, 313, 517, 586, 734, 810, 947 and 989	
hospitals	800-228-4599
facilities	800-437-3804
231, 269, 616 and *989	800-643-2583
906	866-872-5837
Outside Michigan	800-482-0898
Provider Inquiry, dental, vision and hearing (by area code)	
248, 313, 517, 586, 734, 810, 947 and 989	800-482-5141
231, 269, 616 and *989	800-531-2583
906	866-872-5837
Outside Michigan	800-482-5141
Provider Consulting Services, manager's office	
Southeast Michigan	
professional	313-225-7778
facility	313-225-0914
West Michigan	616-389-8141
Mid Michigan	517-322-8088
Upper Peninsula	906-228-5457

Medicare AdvantageSM	
Provider Services	866-309-1719
DMEnson Benefit Management SM (DME/P&O providers only)	888-828-7858
Eligibility and coverage	800-676-BLUE (2583) Or check web-DENIS
BlueCard [®]	800-676-BLUE (2583)
Electronic Connectivity (EDI)	800-542-0945
Federal Employee Program inquiries	800-482-3600
DRAMS (Pharmacy)	800-437-3803
Physician Ombudsman office	800-816-BLUE (2583)
Provider Contracting (facility)	800-777-2118
Provider Enrollment and Data Management (professional)	800-822-2761
Radiology Management Program	Visit bcbsm.com , click on <i>Provider Publications</i> , click on <i>Other Resources</i>
Provider Secured Services help desk	877-258-3932
NPI	Visit bcbsm.com , click on <i>HIPAA/NPI</i>
Electronic funds transfer	Contact your provider consultant or visit bcbsm.com , click on <i>Provider Secured Services</i>
Other valuable contact information	
Michigan State Medical Society	517-337-1351 msms.org
Michigan Osteopathic Association	800-657-1556 mi-osteopathic.org
Michigan Health & Hospital Association	517-323-3443 mha.org



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NEWS continued from Page 2

2008 Contact Sheet available

As in years past, the updated BCBSM *Contact Sheet* lists many telephone numbers you can use to contact BCBSM. It also lists some of our activities during the past year to improve the ease of doing business with us, provide responsive and accurate service, create partnerships to promote better health care and communicate more effectively.

To view or print a copy of the *Contact Sheet*, please visit **bcbsm.com/pdf/physician_update.pdf**. For one or more printed copies, please fax your request on office letterhead to our database administrator at 313-225-7709 or 800-553-1369.



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Rob Sawalski, manager 313-225-5839
rsawalski@bcbsm.com

Dan Artman, co-editor 313-983-1690, dartman@bcbsm.com

Bonnie Meier, co-editor 313-225-0020, bmeier@bcbsm.com

Contributing writers Pam Berry, Joy Kind

Graphic Designer..... Lisa Schmidt

To update your information on our mailing list, please fax your name and new address, along with the old address, to our database administrator at 313-225-7709 or 800-553-1369 (toll-free). Or mail it to:

Database Administrator
Provider Communications — Mail Code 0205
Blue Cross Blue Shield of Michigan
600 E. Lafayette Blvd.
Detroit, MI 48226-2998

Provider Consulting Services, director's office.....313-225-7899

Physician Ombudsman department800-816-2583

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