



BCBSM Pay-for-Performance Program Peer Group 1 - 4 Hospitals 2024 CEO/President Certification Form

Due: March 31st, 2025

I certify that I have reviewed the information being sent to Blue Cross Blue Shield of Michigan for the 2024 Pay-for-Performance Program, and it is true to the best of my knowledge. This includes, but is not limited to, the documentation for the components listed below:

Culture of Safety Prequalifying Conditions

1. Conducting regular patient safety walk-arounds with hospital leadership.
2. Assessing and improving patient safety performance by fully meeting at least **one** of the following options (**please check all that apply**):
 - Completing and submitting the National Quality Forum Safe Practices section of the Leapfrog Hospital Survey at least once every 18 months.
 - Completing the Joint Commission Periodic Performance Review of National Patient Safety Goals at least once every 18 months.
 - Measure, report, and improve on the Agency for Healthcare Research Patient Safety indicators at least once every 18 months.
 - Participating in a federally qualified patient safety organization.
3. Ensuring results of the patient safety assessment and improvement activities are shared with the hospital's governing body and incorporated into a board-approved, multidisciplinary patient safety plan that is reviewed and updated at least once every 12 months.

Social Needs Screening

1. Does your hospital screen for social needs?
 - Yes
 - No
2. If yes, in which settings does your hospital screen for social needs (select all that apply and if focused population is selected, please write in what focused population you're using)?
 - Emergency Department __ All patients __ Focused population only: _____
 - Inpatient Admissions __ All patients __ Focused population only: _____



- Outpatient Visits __ All patients __ Focused population only: _____
- Other _____

3. What domains of social needs do you screen for?

- Food insecurity
- Housing insecurity
- Transportation insecurity
- Utilities security
- Interpersonal safety

4. What does your hospital do with the social needs information collected?

- Identify the social needs of your patient population
- Adjust clinical management of patients with social needs by accommodating barriers to care
- Assist patients with identified social needs by connecting them to resources
- Align hospital activities with broader efforts related to social determinants of health in the community
- Advocate with community organizations and other partners to improve the social conditions of the community

5. Upon collection of the responses, they are handled as follows (select all that apply)

- Added to patient record (non-electronic)
- In Electronic Health Record (EHR)
- In registry
- Used to create an aggregated report
- Submitted to MiHIN



6. Upon collection of positive social needs screenings, are patients referred to additional resources?

Yes

No

Hospital Name

BCBSM Facility Code (5 digits ex. 00***)

CEO/President Signature (Required)

Title (Executive Leadership Only)

Name (Print or Type)

Date

Submit completed form to BCBSM Hospital Incentive Programs, emailed to: JAmundson@bcbsm.com by
March 31st, 2025:

BCBSM Hospital Incentive Programs - MC 513M
Blue Cross Blue Shield of Michigan
600 Lafayette Blvd
Detroit, Michigan 48226