

Understanding the Commercial BlueCross Performance Rating



We believe it's important to help our members make informed health care decisions for themselves and their families. That's why we include a rating system in our online provider directory to help guide members looking for primary care providers (PCPs) in Blue Network PSM or Blue Network SSM. We base our scores on a combination of factors, and PCPs who follow certain best practices for quality and efficient care delivery earn higher scores.

What is the Commercial BlueCross Performance Rating?

The Commercial BlueCross Performance Rating displays as a star rating, based on a five-point scale. This complements our Patient Experience rating, and gives members another tool to help navigate our online provider directory.

The rating is comprised of three weighted components:

- › **Select HEDIS[®] measures used in the Quality Care Partnership Initiative (QCPI) – 60%**
- › **Efficient care delivery – 20%**
- › **Medical Home Partnership (MHP) participation – 20%**

This rating is included for all PCPs who participate in Network P and/or Network S. If a PCP doesn't meet the minimum threshold requirement needed to establish a rating (at least 30 attributed Commercial BlueCross patients and have enough historical claims data to receive a score for the efficient care delivery component), the directory will note that the provider is not yet rated instead of including stars.

We refresh this performance rating each year, so providers will have an opportunity to maintain or improve their scores by effectively managing their patient population.

Select HEDIS Measures Used in Commercial QCPI

Developed by the National Committee for Quality Assurance (NCQA), HEDIS is the most widely used set of health care quality measures in the managed care industry. HEDIS measures show us where a stronger focus could lead to improvements in members' health. These quality measures change annually, but typically include clinical standards for adults, adolescents and children, such as:

- › Medication management guidelines
- › Diabetes care standards
- › Appropriate antibiotic treatment
- › Preventive screenings

The HEDIS quality component is based on each individual PCP's performance on HEDIS metrics included in the Commercial QCPI program. These metrics reflect how often a provider completes preventive screenings and follows treatment guidelines based on national HEDIS standards and NCQA requirements.

You can view the Directory Designation report in the Quality Care Rewards (QCR) application within Availity® to see current and prior year performance on HEDIS measures.



Efficient Care Delivery

We use an analytics solution called Motive, Practicing Wisely™ Solutions to define efficient care delivery for this component. Motive provides insights and actions that can lower costs and improve outcomes. These insights can help health care providers:

- › See and understand their own performance
- › Align medical decisions with evidence
- › Standardize care around evidence-based best practices

This solution uses measures developed and vetted by Motive's panel of over 600 board-certified, academically affiliated physicians, nurses and pharmacists. These measures target clinical areas where variation exists that can impact cost effectiveness and patient outcomes. The guideline-based measures aim to align clinical practice guidelines and clinician behavior, as assessed by data on individual physician-patient interactions.

Aggregated claims data is combined to establish parameters around outcomes, cost and quality to identify physician practice patterns over a 24-month period. The efficient care delivery measures are grouped into specialties by region, and scores are summarized in a simple 1 to 5-star rating.



MHP Participation

MHP is a total population health management program designed to improve care coordination, quality and utilization. This program is based on the same principles as the patient-centered medical home (PCMH) model, which is designed to inform and engage patients through the work of proactive care teams. It encourages providers to offer high-quality care and complete care coordination throughout each member’s health care journey.

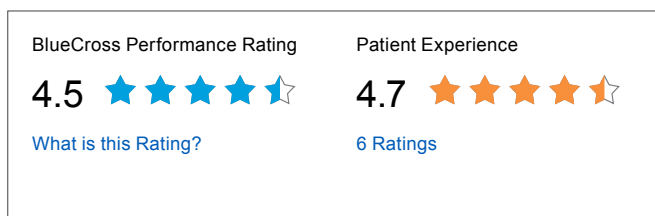
To achieve MHP program goals, we added a scorecard that measures provider performance on key utilization measures that drive costs.

The scorecard informs MHP providers about their practice patterns and helps them provide care more efficiently.

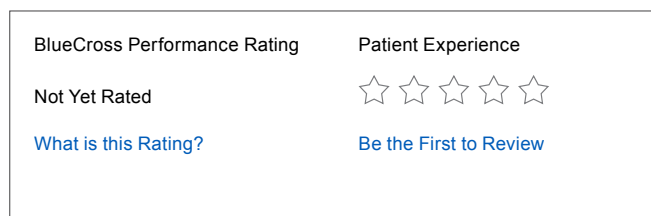
Participating MHP practices must continue to achieve a minimum three-star rating in our QCPI program.

Participating MHP PCPs automatically earn the total number of points for this component. PCPs who don’t participate in MHP receive no points, and their score displays as “Not Participating” for this component.

What Members See on the Search Results Page



When members search for a PCP, the directory shows a view of both the Commercial BlueCross Performance Rating, as well as the Patient Experience rating. Members can see a breakdown of the three Commercial BlueCross Performance Rating components by clicking the provider’s profile.



PCPs that didn’t meet the minimum threshold requirement or that join the network following the annual calculation of ratings display as “Not Yet Rated.”

The Patient Experience rating shows transparent stars if there have been no reviews. Only members who have claims for the PCP in our system are able to leave a review for that provider.

What Members See on the Profile Page

The directory shows a breakdown of the Commercial BlueCross Performance Rating under each provider's profile. Members don't see the technical name of the components (e.g., HEDIS Quality). Instead, they see the member-friendly description of each component shown below.

HEDIS Quality

★★★★★ 5.0

Meets Health and Wellness Standards

A high rating shows the provider performs preventive tests and prescribes treatments that are consistent with medically recommended care.

Efficient Care Delivery

★★★★★ 5.0

Delivers Efficient Care

We rely on select evidence-based measures developed by board-certified, academically affiliated physicians, nurses and pharmacists to measure this performance.

MHP Participation

★★★★★ 5.0

Manages Patients' Total Care

A five-star rating means the provider is in our Medical Home Partnership (MHP) program. An MHP provider can help you get the best results and save unnecessary costs by managing and coordinating your care with all your other health care providers.

■ Providers see the technical name of the components in blue.

■ Members see a member-friendly description of each component in black.



If you have questions about your score, or are interested in learning more about the Commercial BlueCross Performance Rating, please contact your Provider Network Manager.

If you have questions on how to use the Directory Designation report in QCR, please contact eBusiness Technical Support.