Maximizing Pay-for-Performance Opportunities

Proven Steps to Making P4P a Proactive, Successful and Sustainable Part of Your Practice

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In today's health care landscape, driven by health care reform and health information technology adoption, provider organizations are rapidly implementing internal Pay-for-Performance (P4P) improvement initiatives in response to payer reimbursement that is increasingly performance-based versus service-based. As provider organizations transition to a performance-driven culture, and prioritize the clinical and financial impact of various P4P incentive programs, it is essential to ask the following questions:

- Which P4P programs are we eligible for? What is the risk of not participating in them?
- Which P4P performance goals are aligned with our internal organizational priorities? Will our patients truly benefit?
- Will our Electronic Health Record (EHR) systems enable us to efficiently integrate P4P protocols into our clinical workflow?
- Do we have the appropriate proactive care tools to support our care teams in managing P4P patient populations?
- Do we have the analytic tools to report on P4P measure sets and drive improvement?

From Volume- to Value-Based Care

For many years, health care providers have been reimbursed based on the services they provide, such as an office visit, ancillary test or clinical procedure. Multiple visits are typically used to address separate but related health issues, in part because most current reimbursement models incentivize multiple visits. This has created a culture of over-utilization of services. While many providers believe in one complaint per visit to appropriately treat a patient, the office visit itself is substantially evolving because the rules and reimbursements are changing. Payments from payers, government and commercial, are shifting to compensate integrated systems of care, such as physician practices and hospitals, fewer adverse safety events, improved population health such as preventive care, chronic disease management and wellness, and improved patient experience. The goal, as envisioned by the *Institute for Healthcare Improvement (IHI) Triple Aim*, is to fundamentally create a new health system that contributes to the overall health of populations while reducing costs. Hundreds of *Accountable Care Organizations (ACO)*, or groups of health care providers who deliver coordinated care, are now accountable to patients and third-party payers for the quality, appropriateness and efficiency of health care provided.

Pay-for-Performance Types

P4P programs are typically administered using one of the following five models: pay for reporting, threshold quality incentives, shared savings between provider and payer, per member per month, and per patient per item incentives. Many P4P programs use a combination of these models. For example, *CMS Medicaid incentives for Meaningful Use of a Certified EHR* in Stage I include payments for threshold achievement of functional measures and for reporting *clinical quality measures (CQMs)* for public health purposes. As another example, many commercial health plans offer incentive payments for providers that achieve a threshold level of performance on select CQMs based on national norms.

Establish Your Pay-for-Performance Strategy

In order to make best use of your organization's resources for internal P4P improvement initiatives, it is important to understand how your P4P program will provide incentive payments so you can determine in which programs your organization should invest time and effort. Other questions to ask that will help you prioritize P4P efforts include:

- Will the P4P initiative positively affect a large number of our patients?
- Do the P4P measures make sense for our practice? Do they make sense for our patients?
- Are the incentive goals "all or nothing?"
- Do the P4P measures differ from our standard of care provided to all patients?
- Which care teams or other staff will be affected? How will their workflows change?
- How will payer outreach impact our practice? Is it helping or hurting?

Once your organization has prioritized the P4P initiative and identified the target population of focus, measures and goals, be sure to include the following in developing a successful work plan:

1. **Involve key stakeholders**, including medical leadership, nursing, front and back office staff, quality improvement, and IT staff. P4P initiatives cross over many functional departments, so be sure to include leadership from each.

2. **Understand clinical workflows** and how any new P4P clinical protocol requirements will fit in. Care teams that meet in daily huddles typically follow a standard workflow. New P4P requirements should be incorporated into these workflows.

3. **Define all measures of success**, including the clinical, operational, and financial measures and goals to be achieved to obtain P4P incentives. Though incentive payments may be limited to a select payer population, strive to achieve goals for all patients to reduce health disparities across insurance status. Assign accountability for measure performance to appropriate leaders and managers, and assign staff that will compile and trend measure performance by payer, facility and provider. Disseminate the data in periodic management and quality improvement forums to monitor progress, and distribute provider-level reports to engage providers in more focused improvement.

4. **Communicate** routinely with staff and patients about any changes in the care process to ensure they understand the rationale and importance. Consider which communication channels will work most effectively to share the message with your staff –such as meetings, huddles or email – and with patients, including face-to-face time and education materials.

5. **Engage patients in their care**. Many P4P incentives rely heavily on patient adherence in following nationally recognized protocols for chronic disease management, preventive care and wellness. These often require periodic visits for lab testing, gender and age-specific screenings, and life cycle immunizations or vaccinations. Like care team staff, patients also need systematic reminders to help them adhere to care protocols. Are patients coming in for their visits? Do you need to call or send letters to remind them of upcoming appointments? Which method is most effective? What is the patient's preferred method of communication? Once in the clinic, ask the patient about other possible barriers to adherence. Help engage them in their care.

6. **Train care team and other support staff** to ensure they understand P4P workflows and clinical requirements. Provide focused training needed for clinical team members on documentation and coding to ensure they are capturing the quality care they are providing.

Leveraging i2iTracks for P4P Success

A strategy and work plan to capture P4P incentives is not complete without i2iTracks! Utilize the proactive care functionality and dynamic analytics of i2iTracks to catalyze achievement of your P4P incentives in the following ways:

1. **Tracking**: Design a tracking system for your target P4P population by creating a custom tracking type to search for all P4P eligible patients based on selection criteria. You will be able to search for potential P4P patients, match patients against attribution lists, send out recall letters, calls or text messages, and create custom searches and reports.

2. **Data Reporting**: Create reports using i2iTracks Population Health Analytics (iPHA) that compile P4P patient data, and trend patient volume and outcome performance in tabular or graphical format. Disseminate the data and ensure you have processes in place to communicate breakdowns and improve performance.

3. **Population Management**: Manage your population by identifying the clinical indicators needed for each P4P program, and incorporate them into your visits, pre-huddle reports and other workflows to ensure they occur during the patient visit. Assign a team member to track the patients in the P4P program and add a search to i2iTracks Today in order to identify patients that are missing care opportunities. Engage patients by calling them in for care and identify other barriers to achieving P4P incentive goals.

4. **Sustain**: Create automated care team reports and post reports in the clinic. Compare reports against payer reports to ensure consistent data capture and detect possible coding or documentation issues. An EHR documentation guide will help staff understand where and how to appropriately document clinical data.

Using i2iTracks to Maximize P4P Opportunity

i2iTracks breaks down the barriers to your EHR data with powerful analytics tools that support proactive management of P4P patient populations. i2iTracks enables care team members to uncover differences in P4P populations by patient age, race, gender, provider, location, payer, and clinical criteria. Once a P4P population is identified, built-in tools allow you to manage recall, tracking and follow up with those patients. The results: effective follow up, better patient compliance, healthier populations, and improved P4P incentive payments.

The following features of i2iTracks provide unmatched capability to manage and improve the care of your P4P populations:

Tracking types in i2iTracks provide a vital way of identifying eligible patients for P4P attribution. You can then actively consent a patient to join a P4P program, helping your organization receive substantial per member per month payments.

Searches enable quick-and-easy access to data to help you identify which P4P patients are out-of-compliance so you can produce recall letters, phone lists or text messages to remind them to come in for an appointment. Vitals, medications and lab values may all be used to establish out-of-compliance criteria. Searches may also be used to find patients who would qualify for funded programs based on their insurance or lack of insurance, and to identify high-risk populations.

The i2iTracks Today main screen allows you to easily find and use the searches you created to identify care management opportunities. The i2iTracks Today screen is customizable for each user on the care team to provide them with actionable information unique to their role. i2iTracks Today gives you a clear view of all the patients with appointments for the day so you can create your day-of-care plan. Knowing what each patient needs before he or she arrives allows you to offer proactive care, resulting in the best possible clinical outcomes for your patients. Staff members responsible for data validation can use i2iTracks Today to quickly identify potential problems. Similarly, management can view all staff tasks or view tasks by department, providing key insights into workload across the organization.

Morning Huddle Reports provide pertinent information about all patients with appointments for the day to help the care team prepare for their visit and balance workload among the team for efficient patient flow.

With **iPHA reporting**, program management for P4P initiatives is easily consolidated and streamlined. This dynamic analytics and reporting module enables trending of all P4P measures at the organization, facility and provider levels with one-click drill-down to supporting data. iPHA allows you to automate report production, print graphs without having to manipulate tables, and drill down to patient level data to find care improvement opportunities.

Maintaining and Sustaining P4P

When it comes to maintaining and sustaining a successful P4P program, timely and consistent data management is crucial. Data show which patients are missing important care items, which patients are underutilizing care, and which patients are high utilizers but still not receiving the treatment they need. However, while data will identify these patients, supplemental tools are needed for successful care management and outcomes tracking. Tools like i2iTracks will significantly enhance your ability to participate in P4P programs and to measurably prove that you provide high quality care. i2iTracks will help you navigate and fully leverage complex EHR data to achieve greater efficiency in patient and staff workflow, and proactively care for P4P populations to achieve maximum performance incentives.

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