



BCBSNM – Bridges to Excellence[®] Cardiac Care Program Guide

Blue Cross and Blue Shield of New Mexico (BCBSNM) is pleased to offer an innovative program that recognizes New Mexico physicians who deliver superior care to patients diagnosed with cardiac disease. As a sponsor of the Health Care Incentives Improvement Institute (HCI3, formerly Bridges to Excellence [BTE]) organization and their Cardiac Care Recognition program, BCBSNM demonstrates our commitment to making health and wellness a priority for our members. This program financially rewards network physicians for their performance and their cardiac care recognition status.

Cardiac Care in America

Cardiac disease affects an estimated 81 million Americans with having one or more forms of the disease. Over 831,000 deaths were related to cardiac disease conditions with coronary heart disease being the leading cause of death among men and women in America today claiming over 425,000 deaths in 2006. Cardiac disease includes:

- High blood pressure
- Coronary heart disease
- Myocardial infarction
- Angina pectoris
- Heart failure
- Strokes are related to cardiac disease and its control

BCBSNM Cardiac Program Model

By implementing the BTE Cardiac Care Recognition program, our goal is to improve the health and quality of care provided to the BCBSNM members with cardiac disease by recognizing and financially rewarding physicians who have implemented comprehensive solutions in the management of cardiac disease.

Goals of the Cardiac Program

- Improve patient outcomes and their quality of life
- Financially reward physicians who provide superior care to the cardiac population
- Reduce the economic burden of caring for members with cardiac disease
- Link into other established Blue Care Connection® medical and dental programs that interact directly with members to improve their health and disease condition

BTE Cardiac Care Recognition Program

The BCBSNM program includes physicians who are currently recognized by the BTE organization in their Cardiac Care Recognition program. The program process is as follows:

- Obtain the BTE recognized provider list from BTE
- Identify BCBSNM members with cardiac disease that see BTE recognized physicians
- Send biometric data collection forms to BTE recognized physicians
- Physicians return biometric information to BCBSNM
- BCBSNM reviews the biometric forms, contacts physicians and provides authorizations for claims submission
- Physicians file a claim with specific CPT[®] codes
 - BCBSNM reimburses the physician for providing excellent care to our members with cardiac disease

BTE recognized physicians will be eligible for a financial reward of \$100 per patient per program year.

BCBSNM Incentives

After the BTE Cardiac Care program recognizes a physician, BCBSNM will attribute our members with cardiac disease to a BTE recognized physician. BTE recognized physicians are asked to provide clinical biometric information and are eligible for a financial reward of \$100 per selected patient per program. Members will be attributed to physicians every six months.

Identifying Members with Cardiac Disease

Members with cardiac disease are identified using the following criteria. They must:

- Be a BCBSNM PPO/POS or HMO member (BlueCard members are excluded)
- Have a New Mexico address
- Be five years of age or older
- Have at least one claim with a qualifying ICD-9 diagnosis code in at least one of the following ranges for cardiac conditions:
 - **410 411.89**
 - **413 414.07**
 - **435 435.9**
 - **437 438.42**
 - **438.6 438.9**
 - **440.20 440.29**
 - **444 445.89**
 - **447.0 447.9**
- Have CPT codes for cardiac surgeries
- Have ICD-9 procedure codes for cardiac surgeries
- Have submitted a qualified claim within the most recent 15 months of claims data

Members who have drug induced cardiac conditions are not eligible for this program. Additionally, coordination of benefits (COB) claims will not be considered and Medicare eligible members are excluded. Federal Employees are also excluded from this program.

Cardiac Attribution to a BTE Recognized Physician

Attribution is the process of linking a member to a physician for the BTE Cardiac Care Recognition program. Members are attributed to a BTE recognized physician using the following criteria:

- The physician must be an MD or DO, and non-hospital based.
- The member must have at least one face-to-face claim with an evaluation and management (E&M) code.
- If member sees multiple providers, the following hierarchy will apply for attribution:
 - Cardiologist is the first selected physician:
 - If the member sees multiple providers, the physician with the greatest number of claim service dates is attributed:
 - If the member still sees multiple providers, the physician with the most recent service date claim is selected:
 - If the member still sees multiple providers, the physician with the largest total allowed dollars is selected.
- Members are re-attributed to a physician every 12 months depending on attribution logic.

Becoming a BTE Recognized Physician

There are three avenues in which a physician may choose to become BTE recognized. The following table shows the Performance Assessment Organization (PAO) options, plus the PAO's respective websites where additional information can be found.

Recognitio	n Pathways		Rewarding Qu	BRIDGES to Excellence
Pathway	Quantity of Data Submitted	How data is extracted/submitted	Cost to Apply (Individual)	Cost to Apply (Group)
EMR/Registry System <u>www.hci3.org</u>	Full panel of patients with program condition	EMR or registry vendor will extract patient data from electronic medical record system and submit to MNCM or IPRO on their behalf	No BTE or PAO fee	No BTE or PAO fee
IPRO Direct Submission Portal www.pao.ipro.org	Full panel of patients with program condition when possible, otherwise sample of 25	Patient data is manually or electronically extracted into a standard file format and uploaded to the web portal for assessment	\$95	\$295 per practice of 3 or more clinicians
National Committee for Quality Assurance <u>www.ncqa.org</u>	Sample of 25 patients with program condition	Clinicians will extract data from patient charts and submit to NCQA for review	\$80 Program Materials fee \$500 Data Collection Fee (\$400 after BCBSTX 20% discount)	\$400 each with a maximum of \$3,000 for groups of up to 100; For groups over 100,\$10 surcharge for each clinician (Fees as of June 2010)
American Board of Internal Medicine www.abim.org	Submission of practice improvement module for program condition	Completion of cardiac and/or diabetes module	Fee is included in the maintenance certification package – additional IPRO fee of \$95	No group/practice option

BTE Cardiac Care Recognition Program Measures, Performance Criteria and Scoring

The following table outlines the measures and criteria used to assess physician performance for BTE cardiac care recognition.

Clinical Measures	Threshold	Minimum Criteria	Maximum Points				
Poor Control Measures							
Blood Pressure Control	≥ 145/95	≤ 45% of pts in sample	20				
LDL Control	≥ 130 mg/dl	≤ 40% of pts in sample	20				
Superior Control Measures							
Blood Pressure Superior Control	< 140/90	≥ 20% of pts in sample	10				
LDL Superior Control	< 100 mg/dl	≥ 25% of pts in sample	10				
Process Measures							
Complete Lipid Profile	N/A	N/A	10				
Use of Aspirin or Another Antithrombotic	N/A	N/A	20				
Smoking Status and Cessation Advice and Treatment	N/A	N/A	10				
		Total Points	100				
Percentage of To	60						

Whom Do I Contact if I have Questions?

For questions related to BCBSNM's BTE Diabetes Care Recognition program, please refer to:



BCBSNMs Bridges to Excellence on our website at:

http://www.bcbsnm.com/provider/tools/bte.html

Bridges to Excellence website at: www.bridgestoexcellence.org.

For all other questions, please contact your local Network Representative at 1-800-567-8540 or (505) 837-8800.