

Columbia Gorge 2017 PCP Incentive Matrix: Measure Descriptions and Details

Contact for all questions related to Primary Care Incentive Matrix:

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Claims-based: CCO QIM-Aligned

1. Adolescent Well Care (20%)

- **Meet or exceed quarterly targets identified by PacificSource**, with intent to meet 2017 CCO improvement target by end of year. COIPA will include target on each quarter's attestation materials.
 - The 2017 targets for AWC are:
 - **Q1- 11.2%**
 - **Q2- 19.9%**
 - **Q3- 33.0%**
 - **Q4- 45.7% (OHA target)**
- Data supplied by PacificSource via monthly QIM reports
- Measure specifications:
<http://www.oregon.gov/oha/analytics/CCOData/Adolescent%20Well%20Care%20Visits%20-%202017.pdf>

2. Childhood Immunizations (20%)

- **Meet or exceed quarterly targets identified by PacificSource**, with intent to meet 2017 CCO improvement target by end of year. COIPA will include target on each quarter's attestation materials.
 - The 2017 targets for CI are:
 - **Q1- 61.7%**
 - **Q2- 72.6%**
 - **Q3- 74.9%**
 - **Q4- 75.8% (OHA target)**
- This measure is front-loaded because of the number of children that already have all required imms before the start of the year. Collectively, the CCO was at 41.8% as of 1.31.17.
- Data supplied by PacificSource via monthly QIM reports
- Measure specifications:
<http://www.oregon.gov/oha/analytics/CCOData/Childhood%20Immunization%20Status%20-%202017.pdf>

EMR-based: CCO QIM-Aligned

3. Diabetes HbA1c Poor Control (20%)

- Develop clinic EMR reporting capabilities, with intent to meet 2017 CCO QIM measure by the end of the 2017
- Measure specifications:
[http://www.oregon.gov/oha/analytics/CCOData/Diabetes%20HbA1c%20Poor%20Control%20-%202017%20\(revised%20Feb%202017\).pdf](http://www.oregon.gov/oha/analytics/CCOData/Diabetes%20HbA1c%20Poor%20Control%20-%202017%20(revised%20Feb%202017).pdf)

- Incremental implementation:
 - **Q1: describe reporting capability**
 - **Q2: develop reporting capability**
 - **Q3: submit data (no target)**
 - **Q4: meet or exceed 2017 OHA QIM target of <19% uncontrolled**
- **Ashley Zeigler (Data & Analytics) and James McCormack (Informatics)** will be available to assess and help develop your EMR data and reporting capabilities: contact azeigler@coipa.org

Hybrid Measure: CCO QIM-Aligned

4. Colorectal Cancer Screening (20%)

- **Q1:** Describe your workflow around Colorectal Cancer screening (outreach, gap lists, use of FIT kits, EMR alerts, pre-clinic chart scrubbing, etc.). This quarter will be used to gather information that will help COIPA’s QIM improvement coordinator, Shiela Stewart, provide assistance if needed. If you have questions, contact her directly at stewart@coipa.org.
- **Q2-Q3:** Continue working on this measure. There will be no payout for these quarters.
- **Q4: Meet 2017 CCO target – Please note that clinic performance data on this measure will not be final until March-April 2018, after the chart review look-back is completed by PacificSource. If your clinic ultimately meets the measure, you will receive the Q2-Q4 incentive dollars allocated to this measure as a lump sum payment in 2018.**
- Measure specifications:
[http://www.oregon.gov/oha/analytics/CCOData/Colorectal%20Cancer%20Screening%20-%202017%20\(revised%20Feb%202017\).pdf](http://www.oregon.gov/oha/analytics/CCOData/Colorectal%20Cancer%20Screening%20-%202017%20(revised%20Feb%202017).pdf)

Additional Measure Selected by Providers

5. Having the Conversation & End of Life Care (20%)

- This measure will have two sections, each worth 10%.
 - **CME (10%):** At least one clinician CME regarding “Having the Conversation” with 80% attendance. **There will be at least one community-led qualifying CME, currently scheduled for September 19th, 12-1:30 at Providence Hood River Memorial Hospital.** Alternative CME options will be considered.
 - **Successes & Challenges Attestation (10%):** This is envisioned as a multi-year community effort. At the end of the year, clinics will submit each clinic will submit an email about their successes and challenges of “Having the Conversation” so that we can focus our collaboration for the following year. Attestation must be signed off on by at least 80% of their providers.
- **Incentive dollars for both parts of this measure (if achieved) will be paid out once during the year, in Q4, and will include all dollars allocated to this measure for the year.**
- In addition, clinics plan to pen a physician letter to hospital leadership at PHRMH requesting processes be put in place to ensure that each admission has downloaded the most updated POLST from the OHSU POLST registry and this updated info is placed in the EPIC medical record.