

Adult BQPP 2018 Points Allocation <i>Duration of Cycle - Points Based Program/ 1 Year</i>	<u>BQPP Eligibility Requirements:</u> New and Renewing practices applying to BQPP must have the following completed before application can be scored: <ul style="list-style-type: none"> • PCMH/PCSP recognition • Website • EFT enrolled • Submitted Practice Scorecard with application 	<u>Possible Points:</u> Quality- 350 Cost- 250 Access- 250 Patient Experience - 200 PCMH= 500 Total 1550	<u>BQPP Reimbursement Levels:</u> <ul style="list-style-type: none"> • Level 2- 900 • Level 3- 1015
Program Measurement Components		Scoring Specifics	Possible Points
Accreditation: 500 Points			
Commitment to Practice Transformation and Development * Mandatory	NCQA/JCAHO/URAC Patient-Centered Medical Home (PCMH)	Practice must provide expiration date	500
Quality: 350 Points + Bonus 25			
Quality Metrics	<i>PQR used first, then scorecard for the scoring of Quality Metrics (denominator must be 20)</i> <i>New Practices must score 75th or 90th on at least 3 measures to be eligible for a level 3. Renewing Practices who do not score on at least 3 measures will be given 1 year to improve these measurements or will not be eligible for a level 2 or 3.</i>		
	Cancer Screenings: Breast Cancer Screening Cervical Cancer Screening Colorectal Cancer Screening Other: Comprehensive Diabetes - HbA1c Control (<8.0%) Comprehensive Diabetes - Medical Attn for Nephropathy Controlling High Blood Pressure Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis Med Management Asthma total -rate 75% (report only - no points)	Standard Points: 75th	Standard Points: 90th
	40	50	
	1. Breast Cancer		
	2. Colorectal Cancer		
	3. Cervical Cancer		
	4. Comprehensive Diabetes - HbA1c Control (<8.0%)		
	5. Comp Diabetes Care - Medical Attn for Nephropathy		
	6. Controlling High Blood Pressure		
7. Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis			
8. Med Management Asthma total -rate 75% (report only - no points)	Not scored		
Provider Quality Reports * Mandatory	Provider Quality Report (PQR): Accessed and reviewed the Provider Quality Report monthly on Blue e.		Mandatory, no points
Improving Quality Outcomes	ACA Risk Adjustment webinars *Mandatory for new practices only - optional for renewing practices (25 points are not included in the 350 points a practice		25
Improving Patient Experience: 200 Points			
Advanced Care Team	Advanced Care Team: 1 or 2 providers below: Health Coach (RN, LPN, MA) PharmD or Pharm Tech LCSW or LPC Psychologist/Psychiatrist Nutritionist/Dietician RN- Triage MA/RN/LPN case manager/care coordinator	Each Advanced Care Provider Type = 40pts 2 Advanced Care Team Provider Type = 80pts <i>(for example: 3 LCSWs only = 30pts)</i> The Advanced Care Team members must be engaged with BCNC members in order to receive points.	80

	Co-management agreement: In place with a behavioral health provider	Co-management = 25 OR a 3rd Advanced Care Team Provider Type in place of a co-management agreement = for a max total of 100 points for this section	25
Addressing Social determinants of Health:	Addressing Social determinants of Health: Exercise related activities Chronic disease management Weight-management nutrition Prenatal education classes, breast feeding classes, parenting classes IF YOUR PRACTICE HAS <u>ANY</u> PEDIATRIC PATIENTS THEN IT CAN PARTICIPATE IN THE FOLLOWING (does not have to be 50% of population): Dental Health: Primary care clinicians prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is deficient in fluoride. Primary care clinicians apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption. <i>Must be providing both dental health options to receive 25 points</i> Track RX Program: Signed up with Track RX program	1 Program = 25 2 Programs = 50 3+ Programs = 80 Max of 80 points	80
Electronic Patient Survey	Survey addressing patients' needs... provided to patient electronically	EMR Website (practice website, survey monkey, etc) = 15 points	15
Patient Portal *Mandatory	Patient Portal provided to ALL patients with link on practice website: *Mandatory	Patient Portal is mandatory	Mandatory, no points
Access: Max of 250 Points Total Points in Section = 300 Points. Practices can ONLY score a max of 250 Points			
Weekday After Hours	After Hours Criteria: Weekdays After Hours Care Weekdays (Hours after 5 pm and/or before 8am)	Total 4 hours Weekday = 40 Total of 7 hours on Weekday = 75 Max total of 75	75
Weekend After Hours	After Hours Criteria: Weekends After Hours Care Weekend (hours on Saturday and/or Sunday for any patient posted on website)	Total of 2 hours Saturday = 25 Total of 2 hours Sunday = 25 Both of the above would = 50 Total of 4 hours Saturday = 50 Total of 4 hours Sunday = 50 Both of the above would equal the max of 100 points Max of 100	100
Co- Management (3 Providers or less)	Co-Management Agreement with Urgent Care (<i>for practices with 3 providers or less only</i>)	Co-management agreement with urgent care = 50 points	50
Telehealth	Telehealth	Telehealth = 25 points	25
Direct Provider Communication	Direct Access to provider after hours via direct phone number or direct provider messaging through portal AFTER HOURS	Direct Access to Provider OR Direct Messaging through Patient Portal (<i>Providers and patients send a secure messages - provider responds directly after hours</i>) = 50 points	50
Cost: 250 Points			

Reducing Cost	Practice Cost Report- Evaluation of the cost efficiency & utilization metrics of a practice in comparison to peer groups across North Carolina. Practices must meet and maintain both criteria below: 1.17 1 year action plan if practice is above 1.17	Cost Index of: .93 or below= 250 points .94-1.01= 200 1.02-1.09= 150 1.10-1.17= 100 1.18-1.30=50	250
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