

Minnesota ambulatory care pay for performance programs (compiled April 2010)

	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>i</sup>	HealthPartners Adult Primary Care <sup>ii</sup> : Bonus Pool	HealthPartners Specialty <sup>iii</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>iv</sup>
ABMS Maintenance of Certification										x	
Acute Otitis Media (AOM)										x	
Alcohol or other drug treatment initiation						x					
Annual monitoring of ACE & ARB						x	x				
Annual monitoring of diuretics						x	x				
Appropriate testing for children pharyngitis	x										
Appropriate treatment for children with URI/bronchitis	x									x	
Arthrodisis lumbar spinal surgery no complications										x	
Assisting smokers to quit – MN clinic fax referral program										x	
Asthma- pharmacology	x										
Avoidance of antibiotics in acute bronchitis	x					x					
Body Mass Index (BMI)										x	
Colonoscopy – quality of colonoscopy performed	For 2011 x										
Follow up care for children prescribed ADHD medication	In 2011: x										
Generics					x	x	x				
Health Information Technology (HIT)	x									x	
Heart Failure											
Hypertension – controlling high blood pressure	x					x					
Immunizations –combo 3 (New combo 4-10)	x				x	x					
Knee- Pre-surgical and post-surgical pain/function							x				
Low Back Pain						x					
Optimal Asthma care	For 2011 x										
Optimal Depression Care	x			x		x	x			x	
Optimal diabetes care (ODC)	x	x	x	x		x		x	x	x	x
Optimal vascular care (OVC)	x	x	x	x		x	x	x		x	x
Oswestry Disability Index										x	
Patient experience	For 2011 reporting				x	x	x				



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ABMS Maintenance of Certification										Measure: <ul style="list-style-type: none"> <li>• % of physicians who are actively involved in ABMS MOC™</li> </ul> Providers <ul style="list-style-type: none"> <li>• Primary care</li> <li>• Internal medicine</li> <li>• OB/GYN,</li> <li>• Cardiology</li> <li>• Behavioral health</li> <li>• Pediatrics</li> </ul> Performance target: 10% Statewide Standardized Set <ul style="list-style-type: none"> <li>• No</li> </ul>	
Acute Otitis Media (AOM)										Measure <ul style="list-style-type: none"> <li>• % of pediatrics patients between the ages of 2 months and 5 years with Acute Otitis Media (AOM) who had not been treated for AOM 60 days prior to the current visit who were prescribed a first line antibiotic or had no</li> </ul>	

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										antibiotic prescribed at the current visit.  Data Source: <ul style="list-style-type: none"> <li>• Medical Record chart review with Paper Audit Tools or Electronic Reporting (CD)</li> </ul> Providers: <ul style="list-style-type: none"> <li>• Pediatrics</li> </ul> Performance target: Target - 95%  Statewide Standardized Set <ul style="list-style-type: none"> <li>• No</li> </ul>	

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Alcohol or other drug treatment initiation						Measure <ul style="list-style-type: none"> <li>• % of adolescent and adults with a new episode of alcohol or other drug dependence who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.</li> <li>• % of members who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.</li> </ul> Data source: <ul style="list-style-type: none"> <li>• Administrative claims</li> </ul> Providers: <ul style="list-style-type: none"> <li>• Adult Primary Care</li> </ul>					

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						Performance target: <ul style="list-style-type: none"> <li>• See reference 2 for details.</li> <li>• Targets are as follows:                             <ul style="list-style-type: none"> <li>Gold:                                     <ul style="list-style-type: none"> <li>Initiation: 25%,</li> <li>Engagement : 15%;</li> </ul> </li> <li>Silver:                                     <ul style="list-style-type: none"> <li>Initiation: 20%,</li> <li>Engagement : 10%</li> </ul> </li> </ul> </li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>• Yes</li> </ul>					

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Annual monitoring of ACE & ARB						<p>Measure</p> <ul style="list-style-type: none"> <li>% of members 18 years and older who received at least a 180-day supply of ambulatory medication therapy for ACE and/or ARB during the measurement year and had at least one therapeutic monitoring event for the therapeutic agent in the measurement year.</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>Administrative claims</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See reference 2 for details.</li> <li>Targets (In combination with Diuretics) are as follows: Gold: 90%,</li> </ul>	<p>Measure</p> <ul style="list-style-type: none"> <li>% of members 18 years and older who received at least a 180-day supply of ambulatory medication therapy for ACE and/or ARB during the measurement year and had at least one therapeutic monitoring event for the therapeutic agent in the measurement year.</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>Administrative claims</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Cardiology</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See reference 3 for details.</li> <li>Targets for cardiology (In combination with Diuretics) are as follows: Gold: 95%, Silver:</li> </ul>				

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						Silver: 85% Statewide Standardized Set • Yes	90% Statewide Standardized Set • Yes				
Annual monitoring of diuretics						Measure: • % of members 18 years and older who received at least a 180-day supply of ambulatory medication therapy for diuretics during the measurement year and had at least one therapeutic monitoring event for the therapeutic agent in the measurement year.  Data source: • Administrative claims  Providers: • Adult Primary Care  Performance target: • See reference 2 for details. • Targets (In combination with ACE/	Measure: • % of members 18 years and older who received at least a 180-day supply of ambulatory medication therapy for diuretics during the measurement year and had at least one therapeutic monitoring event for the therapeutic agent in the measurement year.  Data source: • Administrative claims  Providers: • Cardiology  Performance target: • See reference 3 for details. • Targets for cardiology (In combination with ACE/				



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						ARB) are as follows: Gold: 90%, Silver: 85%	ARB) are as follows: Gold: 95%, Silver: 90%				
						Statewide Standardized Set • Yes	Statewide Standardized Set • Yes				
Appropriate testing for children pharyngitis	<p>Measure:</p> <ul style="list-style-type: none"> <li>% children ages 2–18 who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Pediatrics</li> <li>Convenience Care</li> <li>Urgent Care</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>										
Appropriate treatment for children with URI/bronchitis	<p>Measure:</p> <ul style="list-style-type: none"> <li>% of pediatric patients age 3 months to 18 years with a diagnosis of URI and/or Bronchitis;</li> </ul>									<p>Measure:</p> <ul style="list-style-type: none"> <li>% of pediatric patients age 3 months to 18 years with a diagnosis of URI and/or Bronchitis;</li> </ul>	

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	<p>and were not dispensed an antibiotic prescription.</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Pediatrics</li> <li>Convenience Care</li> <li>Urgent Care</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>									<p>and were not dispensed an antibiotic prescription.</p> <p>Data Source</p> <ul style="list-style-type: none"> <li>MNCM</li> </ul> <p>Providers</p> <ul style="list-style-type: none"> <li>Pediatrics</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Target - Top 20% of performance submissions</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	
Arthrodisis lumbar spinal surgery no complications										<p>Measure:</p> <ul style="list-style-type: none"> <li>% of patients with Arthrodisis lumbar spinal surgery who do not experience intraoperative or postoperative complications including any of the following: neurologic deficit, dural tears, vascular injuries, wound infections and/or return to surgery.</li> </ul>	

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										Data Source: <ul style="list-style-type: none"> <li>Medical Record chart review with Paper Audit Tools or Electronic Reporting (CD)</li> </ul> Providers: <ul style="list-style-type: none"> <li>Spinal surgeons</li> </ul> Target - Top 20% of performance Submissions Statewide Standardized Set <ul style="list-style-type: none"> <li>No</li> </ul>	
Assisting smokers to quit – MN clinic fax referral program										Measure <ul style="list-style-type: none"> <li>Documentation of successful referral to any of Minnesota's telephone – based tobacco use cessation counseling programs through the MN Clinic Fax Referral Program</li> </ul> Data Source: <ul style="list-style-type: none"> <li>Medical Record chart review with Paper Audit Tools or Electronic Reporting (CD)</li> </ul>	



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	<p>modifiers</p> <ul style="list-style-type: none"> <li>Cromolyn sodium or Nedocromil</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>										
Avoidance of antibiotics in acute bronchitis	<p>Measure:</p> <ul style="list-style-type: none"> <li>% adults ages 18-64 with a dx of acute bronchitis who were not dispensed an antibiotic Rx.</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> <p>Providers</p> <ul style="list-style-type: none"> <li>Primary care</li> <li>Convenience care</li> <li>Urgent care</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>					<p>Measure:</p> <ul style="list-style-type: none"> <li>% of adults 18-64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription. (Per HEDIS 2010 technical specifications)</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See reference 2 for details.</li> </ul>					

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						<ul style="list-style-type: none"> <li>Targets are as follows: Gold: 65%, Silver: 55%</li> </ul>					
Body Mass Index (BMI)						<ul style="list-style-type: none"> <li>Statewide Standardized Set</li> <li>Yes</li> </ul>				<p>Measure</p> <ul style="list-style-type: none"> <li>% of all patients age 2 and older with documentation of an annual Body Mass Index (BMI) calculation at their last preventive service visit.</li> <li>And for patients with elevated BMI, the percentage of patients with documentation of assistance/action plan.</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Medical Record chart review with Paper Audit Tools or Electronic Reporting (CD)</li> </ul> <p>Providers</p> <ul style="list-style-type: none"> <li>Measured once across all</li> </ul>	



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	Standardized Set: • No										
Follow up care for children prescribed ADHD medication	In 2011:  Measure • The 5 of children newly prescribed ADHD medication who have at least 3 follow up care visits in a 10 month period, one of which is w/in 30 days of when the first ADHD medication was dispensed  Data Source: • Health plan administrative data  Providers: • Pediatrics  Statewide Standardized Set • No										
Generics					Measure: • % of all generic prescriptions filled during the measurement period and written by providers for members with a drug	Measure: • % of all generic prescriptions filled during the measurement period and written by providers for members with a drug	Measure: • BH - % of all generic antidepressant prescriptions filled during the measurement period and written by behavioral				



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					<p>benefit.</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Pediatrics</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See Reference 1 for Performance target: details.</li> <li>Targets are as follows: Gold: 78%, Silver: 73%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>benefit.</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See Reference 2 for Performance target: details.</li> <li>Targets are as follows: Gold: 83%, Silver: 78%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>health providers for HealthPartners members with a drug benefit.</p> <ul style="list-style-type: none"> <li>OB/GYN, Cardiology, ENT - % of all generic prescriptions filled during the measurement period and written by providers for members with a drug benefit</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Cardiology</li> <li>Behavioral health</li> <li>OB/GYN</li> <li>ENT</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See Reference 3 for Performance target: details.</li> <li>Targets for Behavioral health, Cardiology, ENT, OB/GYN are as follows:</li> </ul>				

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							Gold: 83%, Silver: 78%				
Health Information Technology (HIT)	Measure: <ul style="list-style-type: none"> <li>HIT implementation <a href="http://www.health.state.mn.us/healthreform/measurement/adoptedrule.html">http://www.health.state.mn.us/healthreform/measurement/adoptedrule.html</a></li> </ul> Data Source: <ul style="list-style-type: none"> <li>Self-reported survey</li> </ul> Providers <ul style="list-style-type: none"> <li>Primary care</li> <li>Specialty care</li> </ul> Statewide Standardized Set Yes								Measure: All practices implementing IT as follows: <ul style="list-style-type: none"> <li>Electronic disease registry with at least two chronic disease and populated.</li> <li>Electronic disease registry is linked with practice management system to populate chronic diseases.</li> <li>Electronic disease registry electronically populated and electronically updated with lab values.</li> <li>CCHIT certified electronic health record with ability to manage chronic diseases and with e-prescribing.</li> <li>CCHIT certified</li> </ul>		

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										electronic health record with prompts for managing chronic disease with e-prescribing  Data Source • Self Report  Providers • Measured once across all Specialties  Performance target: • One point each for measure components  Statewide Standardized Set • Yes	
Hypertension – controlling high blood pressure	Measure: • % patients ages 18–85 with a diagnosis of hypertension whose blood pressure was adequately controlled at < 140/90 mmHg during the measurement year.  Data Source: • Hybrid - Health plan administrative					Measure: • % of members 18 through 85 years of age who had a diagnosis of hypertension and whose BP was adequately controlled (less than 140/90) during the measurement year.  Data source: • MNMCM					

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	<p>Medical data and medical record review</p> <p>Providers</p> <ul style="list-style-type: none"> <li>Primary care</li> <li>Cardiovascular</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>					<p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See reference 2 for details.</li> <li>Targets are as follows: Gold: 95%, Silver: 90%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>					
Immunizations – combo 3 (New combo 4-10)	<p>Measure:</p> <ul style="list-style-type: none"> <li>% of children two years of age who received:                             <ul style="list-style-type: none"> <li>4 DTaP/DT</li> <li>4 pneumo</li> <li>3 IPV</li> <li>1MMR</li> <li>2 H influenza type B</li> <li>3 Hep B</li> <li>1 VZV</li> <li>Hep A</li> <li>Rotavirus</li> <li>Influenza</li> </ul> </li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Hybrid - Health plan administrative data and medical record review</li> </ul> <p>Providers:</p>				<p>Measure:</p> <ul style="list-style-type: none"> <li>% of enrolled children who receive all recommended immunizations (DTaP, OPV, MMR, Hib, HBV, VZV, PCV7-pneumococcal conjugate) within prescribed timeframes by 24 months of age. (per HEDIS 2010 technical specifications)</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MN Community Measurement</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul>						

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	<ul style="list-style-type: none"> <li>Pediatrics</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>				Providers: <ul style="list-style-type: none"> <li>Pediatrics</li> </ul> Performance target: <ul style="list-style-type: none"> <li>See Reference 1 for Performance target: details.</li> <li>Targets are as follows: Gold: 95%, Silver: 90%</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>	Performance target: <ul style="list-style-type: none"> <li>See Reference 2 for Performance target: details.</li> <li>Targets are as follows: Gold: 95%, Silver: 90% In combination with Adult Preventive Services - Combo 2 and Preventive Services Child and Adolescent - Combo 2)</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>					

Minnesota ambulatory care pay for performance programs (compiled April 2010)

	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
Knee- Pre-surgical and post-surgical pain/function							<p>Measure</p> <ul style="list-style-type: none"> <li># and % of unique knee arthroplasty with both a pre-surgical pain/function assessment AND a 90-day pain/function assessment completed.</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Self report</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Orthopedics</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See Reference 3 for Performance target: details.</li> <li>Target s are as follows Gold: Written documentation received that demonstrate s registry development and use of standardized tool with process AND a longitudinal assessment rate of 75% or greater; Silver: Written</li> </ul>				

Minnesota ambulatory care pay for performance programs (compiled April 2010)

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							documentati on received that demonstrate s registry development and use of standardized tool with process AND a longitudinal assessment rate of 25% or greater  Statewide standardized set: • No				

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Low Back Pain						Measure: <ul style="list-style-type: none"> <li>• % of patients that received appropriate acute low back pain care. Patients with an initial office visit for low back pain and not having any of the following in the first 6 weeks; surgical consultation, imaging and injection therapy referral or a narcotics prescription.</li> <li>• Identify and implement plan for overall improvement in optimal care within the first six weeks for acute low back pain patients based on evidence-based guideline care. (ICSI)</li> </ul> Data source: <ul style="list-style-type: none"> <li>• Administrative</li> </ul> Providers:					





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	<p>bursts in last 12 mos)</p> <ul style="list-style-type: none"> <li>• Patient is tobacco free (use and exposure)</li> <li>• Patient has a current written asthma action/mgmt plan</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>• Groups/clinics Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>• Primary care Med/Peds</li> <li>• Pediatrics</li> <li>• Allergy</li> <li>• Pulmonology</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>• Yes</li> </ul>										
Optimal Depression Care	<p>Measure:</p> <ul style="list-style-type: none"> <li>• % of adults (&gt;18) in the practice with Dx of Major Depression</li> <li>• % of adults, in the practice with depression NOS</li> <li>• % of pts with Dx of major depression who had a PHQ-9</li> <li>• % who had</li> </ul>			<p>Measure:</p> <ul style="list-style-type: none"> <li>• % of adult patients who have major depression who have reached remission (PHQ-9 score &lt; 5) at six months (+/- 30 days) after being identified as having an initial PHQ-9 score &gt; 9.</li> </ul>		<p>Measure</p> <ul style="list-style-type: none"> <li>• % of members ages 18 and older on December 31st of the measurement year that were diagnosed with a new episode of depression in the measurement year and</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>• % of members ages 18 and older on December 31st of the measurement year that were diagnosed with a new episode of depression in the measurement year and</li> </ul>			<p>Measure:</p> <ul style="list-style-type: none"> <li>• % of patients 18 and older newly diagnosed with <b>Major Depressive Disorder</b>, appropriately diagnosed and progress in treatment is optimally monitored<sup>11</sup>.</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>• Medical</li> </ul>	

Minnesota ambulatory care pay for performance programs (compiled April 2010)

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	<p>PHQ – 9 &gt;9</p> <ul style="list-style-type: none"> <li>• % response rate at 6 months</li> <li>• % response rate at 12 months</li> <li>• % remission rate at 6 months</li> <li>• % remission rate at 12 months</li> <li>• PHQ 9 follow-up rate at 6 months</li> <li>• PHQ 9 follow-up rate at 12 months</li> </ul> <p>NOTE: Only measures 3, 7, 8 are publically reported</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>• Groups/clinics Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>• Primary care</li> <li>• Behavioral health</li> </ul> <p>Statewide Measure set:</p> <ul style="list-style-type: none"> <li>• Yes</li> </ul>			<p>Data source:</p> <ul style="list-style-type: none"> <li>• MNMCM Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>• Primary care</li> <li>• Behavioral health</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>• Top providers treating 20% of BTE patients</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>• Yes</li> </ul>		<p>treated with antidepressant medication and who are optimally managed.<sup>10</sup></p> <p>Data source:</p> <ul style="list-style-type: none"> <li>• Hybrid (MNCM, administrative claims)</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>• Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>• See reference 2 for details.</li> <li>• Targets are as follows: Gold: 50%, Silver: 45%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>• Yes</li> </ul>	<p>treated with antidepressant medication and who are optimally managed.<sup>4</sup></p> <p>Data source:</p> <ul style="list-style-type: none"> <li>• Hybrid (MNCM, administrative claims)</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>• Behavioral health</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>• See reference 3 for details.</li> <li>• Targets for BH are as follows: Gold: 65%, Silver: 55%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>• Yes</li> </ul>			<p>Record chart review with Paper Audit Tools or Electronic Reporting (CD)</p> <p>Providers:</p> <ul style="list-style-type: none"> <li>• Primary care</li> <li>• Behavioral health</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>• Top 20% of performance submissions</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>• Yes</li> </ul>	
Optimal diabetes care (ODC)	<p>Measure:</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• LDL &lt;100 mg/dL</li> <li>• BP&lt; 130/80 mm Hg</li> <li>• Daily aspirin use if age 41</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• LDL &lt;100 mg/dL</li> <li>• BP&lt; 130/80 mm Hg</li> <li>• Daily aspirin use if age 41</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• LDL &lt;100 mg/dL</li> <li>• BP&lt; 130/80 mm Hg</li> <li>• Daily aspirin use if age 41</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• LDL &lt;100 mg/dL</li> <li>• BP&lt; 130/80 mm Hg</li> <li>• Daily aspirin use if age 41</li> </ul>		<p>Measure:</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• LDL &lt;100 mg/dL</li> <li>• BP&lt; 130/80 mm Hg</li> <li>• Daily aspirin use if age 41</li> </ul>		<p>Measure:</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• BP&lt; 130/80 mmHg</li> <li>• LDL-C &lt; 100 mg/dl</li> <li>• Daily aspirin use (41-75)</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• BP&lt; 130/80 mmHg</li> <li>• LDL-C &lt; 100 mg/dl</li> <li>• Daily aspirin use (41-75)</li> </ul>	<p>Measure:</p> <p>PCP or IM patients</p> <ul style="list-style-type: none"> <li>• HbA1c &lt; 8%</li> <li>• BP&lt; 130/80 mmHg</li> <li>• LDL-C &lt; 100 mg/dl</li> </ul>	<p>Measure:</p> <p>Members 18-75 years</p> <ul style="list-style-type: none"> <li>• Eye exam (retinal) performed</li> <li>• LDL-C &lt;100mg/dL</li> </ul>

Minnesota ambulatory care pay for performance programs (compiled April 2010)

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	<p>years or older or contraindication to aspirin</p> <ul style="list-style-type: none"> <li>Documented tobacco free</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Groups/clinics Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care,</li> <li>Endocrinology</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>years or older or contraindication to aspirin</p> <ul style="list-style-type: none"> <li>Documented tobacco free</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>Minnesota Statewide Quality Reporting and Measurement System</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Absolute Threshold = 30%</li> <li>Relative improvement overtime= see formula <a href="http://www.health.state.mn.us/healthreform/measurement/QIPS_Report.pdf">http://www.health.state.mn.us/healthreform/measurement/QIPS_Report.pdf</a></li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>years or older or contraindication to aspirin</p> <ul style="list-style-type: none"> <li>Documented tobacco free</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>No threshold: \$250 up to twice in 12 months when physicians or APRNs render optimal chronic disease care to their qualifying MHCP recipients with CVD/diabetes</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>years or older or contraindication to aspirin</p> <ul style="list-style-type: none"> <li>Documented tobacco free</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Absolute Threshold</li> <li>Tier 1: 41%</li> <li>Tier 2: 51%</li> <li>Tier 3: 61%</li> <li>Improvement threshold: 10% pts over prior year's score</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>		<p>years or older or contraindication to aspirin</p> <ul style="list-style-type: none"> <li>Documented tobacco free</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See reference 2 for details.</li> <li>Targets are as follows: Gold: 50% (only if use full population), Silver: 40%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>		<p>years of age)</p> <ul style="list-style-type: none"> <li>Documented as tobacco-free in medical record</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Providers</p> <ul style="list-style-type: none"> <li>Endocrinology</li> <li>Family Practice</li> <li>General Practice</li> <li>Geriatric Medicine</li> <li>Internal Medicine</li> <li>Med/Peds</li> <li>MD</li> <li>Physician Assistant</li> <li>Nurse Practitioner</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Target goal partial Improvement over baseline of at least 4 percentage points</li> <li>Target Goal-Full Improvement over baseline of at least 6 percentage points; <b>or</b> if</li> </ul>	<p>years of age)</p> <ul style="list-style-type: none"> <li>Documented as tobacco-free in medical record</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Provider</p> <ul style="list-style-type: none"> <li>Participating providers eligible for MNMCM and a minimum of 20 Medica MHCP members with diabetes</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Target improvement over 2009 program performance – 5% improvement <b>or</b> 25% of attributed Medica members</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Daily aspirin use (41-75 years of age)</li> <li>Documented as tobacco-free in medical record</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care</li> </ul> <p>Performance target: Target - 30%</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>HbA1c &lt;8%</li> <li>Blood Pressure &lt;130/80 mm Hg</li> <li>Aspirin therapy</li> <li>Smoking cessation discussion</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Administrative claims data used to identify eye exams. Direct data submission</li> </ul> <p>Performance target: See Reference 4 for Performance target details.</p> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary Care</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>

Minnesota ambulatory care pay for performance programs (compiled April 2010)

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								at 90th percentile of MNCM aggregate  Statewide Standardized Set • Yes			
Optimal vascular care (OVC)	<p>Measure:</p> <ul style="list-style-type: none"> <li>% patients ages 18–75 who have vascular disease and have reached all of the following four treatment goals:                             <ul style="list-style-type: none"> <li>BP &lt; 130/80 mm Hg</li> <li>LDL-C &lt; 100 mg/dl</li> <li>Daily aspirin use, all ages</li> <li>Documented tobacco-free status</li> </ul> </li> </ul> <p>NOTE – this is the DDS spec. MNCM has a 2nd measure from health plan claims (HEDIS) and Medical record review</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Groups/clinics Direct Data</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>LDL &lt;100 mg/dL</li> <li>BP&lt; 130/80 mm Hg</li> <li>Daily aspirin use if age 41 years or older or contraindication to aspirin</li> <li>Documented tobacco free</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>Minnesota Statewide Quality Reporting and Measurement System</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Absolute Threshold = 46%</li> <li>Relative improvement overtime= see formula <a href="http://www.health.state.mn.us/healthreform/measurement/QIPS_Report.pdf">http://www.health.state.mn.us/healthreform/measurement/QIPS_Report.pdf</a></li> </ul> <p>Statewide</p>	<p>Measure:</p> <ul style="list-style-type: none"> <li>LDL &lt;100 mg/dL</li> <li>BP&lt; 130/80 mm Hg</li> <li>Daily aspirin use if age 41 years or older or contraindication to aspirin</li> <li>Documented tobacco free</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>No threshold: \$250 up to twice in 12 months when physicians or APRNs render optimal chronic disease care to their qualifying MHCP recipients with CVD/diabetes</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>LDL &lt;100 mg/dL</li> <li>BP&lt; 130/80 mm Hg</li> <li>Daily aspirin use if age 41 years or older or contraindication to aspirin</li> <li>Documented tobacco free</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Absolute Threshold Tier 1: 50% Tier 2: 60% Tier 3: 70%</li> <li>Improvement threshold: 10% pts over prior year's score</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>		<p>Measure:</p> <ul style="list-style-type: none"> <li>LDL &lt;100 mg/dL</li> <li>BP&lt; 130/80 mm Hg</li> <li>Daily aspirin use if age 41 years or older or contraindication to aspirin</li> <li>Documented tobacco free</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See reference 2 for details.</li> <li>Targets are as follows: Gold: 60% (only if use full population), Silver: 55%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>LDL &lt;100 mg/dL</li> <li>BP&lt; 130/80 mm Hg</li> <li>Daily aspirin use if age 41 years or older or contraindication to aspirin</li> <li>Documented tobacco free</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Cardiology</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See reference 3 for details.</li> <li>Targets for cardiology are as follows: Gold: 60% (only if use full population), Silver: 55%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>LDL &lt;100 mg/dL</li> <li>BP&lt; 130/80 mm Hg</li> <li>Daily aspirin use if age 41 years or older or contraindication to aspirin</li> <li>Documented tobacco free</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Providers</p> <ul style="list-style-type: none"> <li>Cardiologist managing care (not device check only)</li> <li>Family Practice</li> <li>General Practice</li> <li>Geriatric Medicine</li> <li>Internal Medicine</li> <li>Med/Peds.</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Target goal partial Improvement</li> </ul>		<p>Measure:</p> <ul style="list-style-type: none"> <li>Cardiology, PCP or IM patients</li> <li>LDL &lt;100 mg/dL</li> <li>BP&lt; 130/80 mm Hg</li> <li>Daily aspirin use if age 41 years or older or contraindication to aspirin</li> <li>Documented tobacco free</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM Direct Data Submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care</li> <li>Cardiology</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Primary care = 40%</li> <li>Cardiology = Top 20% of performance submissions</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>Members 18-75 years of age</li> <li>LDL-C &lt;100mg/dL</li> <li>Blood Pressure &lt;130/80 mm Hg</li> <li>Aspirin therapy</li> <li>Smoking cessation discussion</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Direct data submission</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary Care</li> </ul> <p>Performance target: See Reference 4 for Performance target details.</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
	Submission  Providers: <ul style="list-style-type: none"> <li>Primary care</li> <li>Cardiology</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>	Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>	Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>					over baseline of at least 4 percentage points <ul style="list-style-type: none"> <li><b>Target Goal-Full</b> Improvement over baseline of at least 6 percentage points; <b>or</b> if at 90th percentile of MNCM aggregate</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>			
Oswestry Disability Index										Measure: <ul style="list-style-type: none"> <li>% of patients (ages 18+) with (any) spinal surgery who have completed the Oswestry Disability Index (ODI) - both pre-surgery and 6 months following surgery.</li> </ul> Data Source: <ul style="list-style-type: none"> <li>Medical Record chart review with Paper Audit Tools or Electronic Reporting (CD)</li> </ul>	

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
										Providers: <ul style="list-style-type: none"> <li>Spinal surgeons</li> </ul> Performance target: Target - Top 20% of performance Submissions Statewide Standardized Set <ul style="list-style-type: none"> <li>No</li> </ul>	
Patient experience	Measure: <ul style="list-style-type: none"> <li>CG-CAHPS Patient experience survey</li> </ul> Data Source: <ul style="list-style-type: none"> <li>Patient Survey</li> </ul> Providers: <ul style="list-style-type: none"> <li>All</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>				Measure: <ul style="list-style-type: none"> <li>The top box rates of members surveyed reflecting patient satisfaction, experience, and outcomes with pediatric primary care and service.</li> </ul> Data source: <ul style="list-style-type: none"> <li>Member survey</li> </ul> Providers: <ul style="list-style-type: none"> <li>Pediatrics</li> </ul> Performance target: <ul style="list-style-type: none"> <li>See Reference 1 for Performance target: details.</li> <li>Target s are as follows:                             <ul style="list-style-type: none"> <li>Gold: Informed about your</li> </ul> </li> </ul>	Measure: <ul style="list-style-type: none"> <li>The top box rates of patients surveyed during the measurement period, reflecting patient satisfaction, experience, and outcomes with adult primary care and service</li> </ul> Data source: <ul style="list-style-type: none"> <li>Member survey</li> </ul> Providers: <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> Performance target: <ul style="list-style-type: none"> <li>See Reference 2 for Performance target: details.</li> </ul>	Measure: <ul style="list-style-type: none"> <li>The top box rates of patients surveyed during the measurement period, reflecting patient satisfaction, experience, and outcomes with adult primary care and service</li> </ul> Data source: <ul style="list-style-type: none"> <li>Member survey</li> </ul> Providers <ul style="list-style-type: none"> <li>Cardiology</li> <li>ENT</li> <li>OB/GYN</li> <li>Ortho</li> </ul> Performance target: <ul style="list-style-type: none"> <li>See Reference 3 for Performance target:</li> </ul>				

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
					<p>needs: 77%, talked about pros and cons: 80%; Silver: Informed about your needs: 72%, talked about pros and cons: 75%</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>Target s are as follows: Gold: Informed about your needs: 77% Talked about pros and cons: 75%; Silver: Informed about your needs: 72% Talked about pros and cons: 70%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>No</li> </ul>	<p>details.</p> <ul style="list-style-type: none"> <li>Target s for cardiology and ENT are as follows: Gold: Informed about your needs: 90% Talked about pros and cons: 90%; Silver: Informed about your needs: 85% Talked about pros and cons: 85%</li> <li>Target s for OB/GYN and Ortho are as follows: Gold: Informed about your needs: 90% Talked about pros and cons: 95%; Silver: Informed about your needs: 85% Talked about pros an</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>No</li> </ul>				
Preventative services - Adolescent Combo 2					<p>Measure:</p> <ul style="list-style-type: none"> <li>% of enrolled members who were up to date for all appropriate preventive services</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>% of enrolled members who were up to date for all appropriate preventive services</li> </ul>					<p>Measure:</p> <ul style="list-style-type: none"> <li>Child and Teen Checkups (C&amp;TC) Members 0-20 years of who had</li> </ul>



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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
					during the measurement year. (Combo 2 <sup>12</sup> )  Data Source: <ul style="list-style-type: none"> <li>Hybrid (MNCM, administrative claims)</li> </ul> Providers: <ul style="list-style-type: none"> <li>Pediatrics</li> </ul> Performance target: <ul style="list-style-type: none"> <li>See Reference 1 for Performance target details.</li> <li>Targets are as follows:                          Gold: 85%                          Silver: 80%,                          (In combination with MNCM Childhood Immunizations - Combo 3)</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>	during the measurement year <sup>1</sup>  Data Source: <ul style="list-style-type: none"> <li>Hybrid (MNCM, administrative claims)</li> </ul> Providers: <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> Performance target: <ul style="list-style-type: none"> <li>See Reference 2 for Performance target details.</li> <li>Targets are as follows:                          Gold: 85%                          Silver: 80%                          In combination with Preventive Services - Adult - Combo 2 and MNCM Childhood Immunizations - Combo 3)</li> </ul> Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>					required number of complete C&TCs during the measurement year  Data Source: <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> Providers: <ul style="list-style-type: none"> <li>Primary Care</li> </ul> Performance target: See Reference 4 for Performance target details.  Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>
Preventive Services - Adult Primary Care - Combo 2						Measure: <ul style="list-style-type: none"> <li>% of enrolled members who were up to date for all</li> </ul>					

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
						<p>appropriate preventive services during the measurement year<sup>13</sup>.</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Hybrid (MNCM, administrative claims)</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Adult Primary Care</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See Reference 1 for Performance target: details.</li> <li>Targets are as follows Gold: 95%, Silver: 90%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>					
Screening - Blood Lead Test (as part of Child and Teen Checkups)	<p>Measure:</p> <ul style="list-style-type: none"> <li>% of children 2 years of age who had 1 or more capillary or venous lead blood tests for lead poisoning by the 2nd birthday (Medicaid product line)</li> </ul>								<p>Measure:</p> <ul style="list-style-type: none"> <li>% of unique members seen for a well-child visit and also received a blood lead test (billed blood lead test may be done at any time or place in the</li> </ul>		<p>Measure:</p> <ul style="list-style-type: none"> <li>Children ages 9-30 months who received one or more capillary or venous blood lead tests during the measurement year</li> </ul>

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
	<p>only)</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Hybrid - Health plan administrative data and medical record review</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Pediatrics</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>								<p>measurement year to count)</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM</li> </ul> <p>Provider</p> <ul style="list-style-type: none"> <li>Participating providers eligible for MNMCM and a minimum of 10 Medica MHCP members appropriate for a well-child visit</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Target improvement over 2009 program performance – 10% improvement <u>or</u> 90% of attributed Medica members</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>		<p>Data Source</p> <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary Care</li> </ul> <p>Performance target: See Reference 4 for Performance target details.</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>
Screening – Breast Cancer <sup>14</sup>	<p>Measure:</p> <ul style="list-style-type: none"> <li>% women ages 40–69 who have had a mammogram to screen for breast cancer in the measurement year or the</li> </ul>										<p>Measure:</p> <ul style="list-style-type: none"> <li>Women 50 to 69 years of age who have had one or more mammograms in the measurement year or the year prior.</li> </ul>

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
	<p>year prior. Report on ages 52-69.</p> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care</li> <li>OBGYN</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>										<p>Data Source</p> <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary Care</li> </ul> <p>Performance target: See Reference 4 for Performance target details.</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>
Screening -Cancer Screening Combined (cervical, breast, colorectal).	<p>Measure:</p> <ul style="list-style-type: none"> <li>% adults ages 51–75 who received all three components appropriate cancer screening services (breast, cervical, colorectal)</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Hybrid - Health plan administrative data and medical record review</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care</li> <li>OBGYN</li> </ul> <p>Statewide</p>									<p>Measure</p> <ul style="list-style-type: none"> <li>% of women in OB/GYN care ages 50-80 who are current for appropriate cancer screening services (cervical, breast, colorectal).</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>OB/GYN</li> </ul> <p>Performance target: Target = 74%</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	

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	Standardized Set • Yes										
Screening - Cervical Cancer <sup>8</sup>	Measure: • % women ages 24– 64 who received one or more Pap tests in the measurement year or the two years prior.  Data Source: • Health plan administrative data  Providers: • Primary care • OBGYN  Statewide Standardized Set • Yes					Measure: • % of women age 24 and older who were screened in accordance with evidence-based standards (One screening pap smear in measurement year or two years prior for women 24-64 and no history of hysterectomy)  Data Source: • Administrative  Providers: • Adult Primary Care  Performance target: • See reference 2 for details. • Targets are as follows: Gold: TBD, Silver: TBD  Statewide Standardized Set • Yes	Measure: • % of women age 24 and older who were screened in accordance with evidence-based standards (One screening pap smear in measurement year or two years prior for women 24-64 and no history of hysterectomy)  Data Source: • Administrative  Providers: • OB/GYN  Performance target: • See reference 3 for details. • Targets for OB/GYN are as follows: Gold: TBD, Silver: TBD  Statewide Standardized Set • Yes				Measure: • Women 24-64 years of age who received one or more Pap tests to screen for cervical cancer during 2008, 2009 or 2010.  Data Source • Administrative claims data  Providers: • Primary Care  Performance target: See Reference 4 for Performance target details.  Statewide Standardized Set • Yes

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
Screening – Chlamydia <sup>8</sup>	<p>Measure:</p> <ul style="list-style-type: none"> <li>% women ages 16 – 24 who were identified as sexually active and had at least one test for chlamydia.</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care</li> <li>OB/GYN</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>						<p>Measure:</p> <ul style="list-style-type: none"> <li>% of women 15 through 24 years of age who were identified as sexually active and who had at least one test for Chlamydia during the measurement year.</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>MNCM</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>OB/GYN</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>See Reference 3 for Performance target details.</li> <li>Targets are as follows: Gold: 80%, Silver: 75%</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>		<p>Measure:</p> <ul style="list-style-type: none"> <li>% of sexually active female members who have had at least one chlamydia test in the past year</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM - Medical Record Review</li> </ul> <p>Providers</p> <ul style="list-style-type: none"> <li>Participating providers eligible for MNMCM and a minimum of 45 Medica MHCP members</li> </ul> <p>Performance target:</p> <ul style="list-style-type: none"> <li>Target improvement over 2009 program performance – 10% improvement <u>or</u> 90% of attributed Medica members</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>Measure:</p> <ul style="list-style-type: none"> <li>% of sexually active women ages 16-24 years of age who had at least one test for Chlamydia</li> </ul> <p>Data source:</p> <ul style="list-style-type: none"> <li>MNCM</li> </ul> <p>Providers</p> <ul style="list-style-type: none"> <li>OB/GYN</li> </ul> <p>Performance target: Target = 90%</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>	<p>Measure</p> <ul style="list-style-type: none"> <li>Women 16-24 years of age who are sexually active and who have had at least one Chlamydia screen during the measurement year</li> </ul> <p>Data Source</p> <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary Care</li> </ul> <p>Performance target: See Reference 4 for Performance target details.</p> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
Screening Colorectal Cancer	<p>Measures:</p> <ul style="list-style-type: none"> <li>% adults ages 51-75 who had appropriate screening for colorectal cancer.                             <ul style="list-style-type: none"> <li>A) Fecal Occult Blood test (FOBT) during the Report Period;</li> <li>B) flexible sigmoidoscopy or double contrast barium enema in the past five years;</li> <li>C) colonoscopy in the past 10 years, or</li> <li>D) a documented refusal in the past year.</li> </ul> </li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Hybrid - Health plan administrative data and medical record review</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>										<p>Members 50-75 years of age who have had one or more screenings for colorectal cancer. Appropriate screenings are defined by any one of the following criteria:</p> <ul style="list-style-type: none"> <li>Fecal occult blood test (FOBT) guaiac or immunochemical during the measurement year.</li> <li>Flexible sigmoidoscopy during the measurement year or the four years prior to the measurement year.</li> <li>Colonoscopy during the measurement year or the nine years prior to the measurement year.</li> </ul> <p>Data Source</p> <ul style="list-style-type: none"> <li>Administrative claims data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary Care</li> </ul> <p>Performance target: See Reference 4 for Performance target details.</p>

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	MN Community Measurement	State of MN P4P (State Employee Group Insurance Program and enrollees in state health care programs)	MHCP fee-for-service (FFS) providers	Bridges to Excellence (Employer program)	HealthPartners Pediatric Care: Bonus Pool <sup>6</sup>	HealthPartners Adult Primary Care <sup>7</sup> : Bonus Pool	HealthPartners Specialty <sup>8</sup> Bonus Pool	Medica	Medica Public programs (Medica Choice Care <sup>s</sup> and Medica MinnesotaCare)	BCBS	UCare <sup>9</sup>
											Statewide Standardized Set • Yes
Spirometry use in assessment and diagnosis of COPD	<p>Measure:</p> <ul style="list-style-type: none"> <li>% of patients 40 years and older with a new diagnosis or newly active COPD who received appropriate spirometry testing to confirm the diagnosis</li> </ul> <p>Data Source:</p> <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> <p>Providers:</p> <ul style="list-style-type: none"> <li>Primary care Med/Peds</li> <li>Pediatrics</li> <li>Allergy</li> <li>Pulmonology</li> </ul> <p>Statewide Standardized Set</p> <ul style="list-style-type: none"> <li>Yes</li> </ul>										
Standardized alcohol abuse screening questionnaire										Measure	<ul style="list-style-type: none"> <li>% of patients 18 and older that completed a standardized alcohol abuse screening questionnaire at their last preventive service visit.</li> </ul>





**Minnesota ambulatory care pay for performance programs (compiled April 2010)**

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	Data Source: <ul style="list-style-type: none"> <li>Health plan administrative data</li> </ul> Providers: Statewide Standardized Set <ul style="list-style-type: none"> <li>Yes</li> </ul>										

- i Each measure is assigned a percent of bonus pool. When the Gold target is met 100% of the assigned percent of bonus pool is paid out. When Silver target is met 25% of the assigned percent of bonus pool is paid out.
- ii The methodology for allocating the percent of bonus pool that is eligible for payout is based on the number of targets met. This methodology will assign a greater weight to measures when the targets are achieved. The methodology for primary care is outlined below along with examples.
- iii Each measure is assigned a percent of bonus pool according to Specialty. When the Gold target is met 100% of the assigned percent of bonus pool is paid out. When Silver target is met 25% of the assigned percent of bonus pool is paid out.
- iv Payments will be made for each member up-to-date or provided service as specified below. If the care system performance is above the network 60th percentile for that measure, the system will receive full payment for all members up-to-date or provided service for that measure. If the care system performance achieves the minimum required improvement from the previous year, but is not above the network 60th percentile, the system will receive half payment for all members up-to-date or provided service for that measure. The care system must improve by 10% of the difference between their rate from the previous year and the network 60th percentile rate from the previous year (in absolute percentage points)
- v In 2010 MNMCM will report on Specialties (endocrinology and cardiology) clinics that meet the minimum reporting thresholds for preventive measures.
- 6 Each measure is assigned a percent of bonus pool. When the Gold target is met 100% of the assigned percent of bonus pool is paid out. When Silver target is met 25% of the assigned percent of bonus pool is paid out.
- 7 The methodology for allocating the percent of bonus pool that is eligible for payout is based on the number of targets met. This methodology will assign a greater weight to measures when the targets are achieved. The methodology for primary care is outlined below along with examples.
- 8 Each measure is assigned a percent of bonus pool according to Specialty. When the Gold target is met 100% of the assigned percent of bonus pool is paid out. When Silver target is met 25% of the assigned percent of bonus pool is paid out.
- 9 Payments will be made for each member up-to-date or provided service as specified below. If the care system performance is above the network 60th percentile for that measure, the system will receive full payment for all members up-to-date or provided service for that measure. If the care system performance achieves the minimum required improvement from the previous year, but is not above the network 60th percentile, the system will receive half payment for all members up-to-date or provided service for that measure. The care system must improve by 10% of the difference between their rate from the previous year and the network 60th percentile rate from the previous year (in absolute percentage points)
- 10 Index visit symptom documentation - % of members who had documentation of 5 or more of the DSM-IV symptoms of Major Affective Disorder on the Index Episode Start Date, Follow-up visit symptom documentation - % of members who had documentation of 3 or more of the DSM-IV symptoms of Major Affective Disorder in a follow-up visit within 3 months of the Index Episode Start Date, Antidepressant Medication Management - % of members who had remained on their antidepressant medication for 6 months (same as HEDIS Description)
- 11 Measurement requires meeting the following criteria: Comprehensive documentation of DSM-IV-TR criteria for the disorder within one month of initial diagnosis, Standardized depression symptom severity assessment questionnaire is administered at diagnosis, The same standardized depression symptom severity assessment questionnaire is administered between 30 and 90 days of diagnosis.
- 12 The number of members who received, or were contraindicated for all appropriate preventive services for age/gender specific components and timeframes. Vision (on or before 5th birthday); Height and Weight recorded on same day (in measurement year); Chlamydia Screening (in measurement year) members who meet HEDIS codes for sexually active; Peds Imm Combo (4 DTaP, 3 Polio, 1 MMR, 3 HiB, 1 VZV, 4 Pneumococcal) (UTD as of December 31 of measurement year); Peds Imm Combo (DTaP booster, MMR #2, Polio #4, VZV #2) (UTD on or before 7th birthday); Tdap or TD (Adolescent) (on or before 13th birthday); Meningococcal Immunization (on or before 13th birthday)
- HPV (series of 3) (by 12/31 of measurement year)
- 13 Cholesterol, total and HDL (measurement year or four years prior to measurement year), Colon Cancer Screening (colonoscopy - measurement year or nine years prior to measurement year, flex sig - measurement year or four years prior to measurement year or FOBT in measurement year), Breast cancer screening (measurement year or year prior to measurement year), Cervical cancer screening (measurement year or two years prior to measurement year), Chlamydia Screening (in measurement year for sexually active women per HEDIS specifications), Pneumococcal Vaccine (65 yrs and older) (once ever), Blood Pressure (measurement year and year prior to measurement year), Vision Screening 65 yrs and older (measurement year and four years prior to measurement year)
- 14 In 2010 MNMCM will report on Specialties (endocrinology and cardiology) clinics that meet the minimum reporting thresholds for preventive measures.