

## Bridges to Excellence



Health Care Incentives Improvement Institute (HCI<sup>3</sup>) is an organization dedicated to developing programs and resources to help payers and providers quantify and capture their opportunities through incentive design. We also have learning networks to help spread all innovative designs and programs to encourage knowledge and adoption of value-based payment as well as global metrics by which we can all measure our success in health care incentives improvement. Our two main programs include Bridges to Excellence<sup>®</sup> (BTE), a family of programs to reward Recognized physicians, nurse practitioners and physician assistants who meet certain performance measures and PROMETHEUS Payment<sup>®</sup>, a compensation approach based on medical episodes of care, that provides a fair and realistic blueprint for true payment reform.

**Our Bridges to Excellence programs recognize and reward clinicians who deliver superior patient care.**

These programs measure the quality of care delivered in provider practices. We place a special emphasis on managing patients with chronic conditions, who are most at risk of incurring potentially avoidable complications. Our Recognitions cover all major chronic conditions, plus office systems – and a real Medical Home measurement scheme to promote comprehensive care delivery and strong relationships between patients and their care teams.

## What is Bridges to Excellence?

The BTE mission in a nutshell: help the best clinicians build their practices, help patients get healthier, help insurers and employers manage costs better.

BTE programs are designed around three key lessons gained from our research and experience.

First, it's critical to measure what matters most—the handful of indicators that have truly significant clinical and financial impact. These are the quality measures most predictive of improved patient health. These measures also form a set of indicators to help practices identify patients who are not well controlled and need more proactive management.

Second, clinicians who follow those quality measures will consistently provide better care at lower costs. Typically, they outperform their peers on process measures of quality, and have lower average costs per patient and per episode. In part, this is because they tend to rely more on evaluation and management and less on tests and procedures; they know costlier care is not always better care.

Third, incentives only work if they are fair and designed to increase over time, so clinicians who continually improve their practices are rewarded in kind. The better they get, the more incentives they deserve—and the more patients should be encouraged to utilize them. As in any industry, the best performers should earn the most and have the biggest market share.

All BTE Recognition Programs are based on nationally accepted measures, with an emphasis on intermediate outcomes where available. Measures are scored to create an overall program score where 60 is most often the passing grade, and represents a significant accomplishment for a clinician or practice.

BTE Programs don't have any downside. Clinicians and practices get a complete report on their measures from the clinical data submitted, with benchmarks on performance and peer comparisons. Only those that achieve the passing grade get recognized and can become eligible for incentives. For the others, the report is private.



BTE Care Recognition Programs are Clinician Recognition Programs intended to identify clinicians who deliver high-value care to patients with specific chronic conditions. The programs each comprise a set of clinical measures representing standards of care for patients with these conditions. BTE believes that its recognition programs have the potential to significantly improve the quality of care experienced by patients and to reduce the financial and human burden of unnecessary hospitalizations and complications. Additionally, BTE's Physician Office Systems Recognition Program is focused on promoting the office practice's use of information systems to enhance the quality of patient care. Each BTE Program has three performance thresholds translating to Level I, Level II or Level III recognition. For clinicians and practices who achieve a combination of BTE's Care Recognition and Physician Office Programs, they will receive the BTE Medical Home designation since they have demonstrated that they have information systems in place and are using them to achieve improved outcomes in patient care.

BTE programs include:

- ★ Asthma Care
- ★ Cardiac Care in collaboration with the ACC
- ★ Congestive Heart Failure Care
- ★ COPD Care
- ★ Coronary Artery Disease Care
- ★ Depression Care
- ★ Diabetes Care
- ★ Hypertension Care
- ★ IBD Care in collaboration with the AGA
- ★ Physician Office Program
- ★ BTE Medical Home

## Submission Pathways

There are various ways to submit for recognition. In this toolkit, we have provided a Clinician Submission Pathway Brochure that outlines the best submission path for you.

## PQRS Alignment

Program	BTE – PQRS Alignment
Asthma	<ul style="list-style-type: none"><li>• DX codes aligned - ICD-9 (and ICD-10 when applicable)</li><li>• 2014 PQRS encounter codes included</li><li>• Asthma Assessment and Classification (PQRS Measure #64)</li><li>• Appropriate Medication Therapy (PQRS Measure #53)</li><li>• Tobacco Status and Cessation Advice and Treatment (PQRS Measures #231 and #232)</li></ul>
Cardiac Care	<ul style="list-style-type: none"><li>• DX codes aligned - ICD-9 (and ICD-10 when applicable)</li><li>• 2014 PQRS encounter codes included</li><li>• Blood Pressure Superior Control (PQRS Measure #236)</li><li>• Use of aspirin or another antithrombotic (PQRS Measure #204)</li><li>• Tobacco Status and Cessation Advice and Treatment (PQRS Measure #226)</li></ul>
Diabetes	<ul style="list-style-type: none"><li>• DX codes aligned - ICD-9 (and ICD-10 when applicable)</li><li>• 2014 PQRS encounter codes included</li><li>• Podiatry Examination (PQRS Measure #163)</li><li>• Nephropathy Assessment (PQRS Measure #119)</li><li>• Ophthalmologic Examination (PQRS Measure #117)</li></ul>