

# OPNS Informatics Digest

October 2016



Putting the pieces together.

## OPNS Informatics

Information Technology represents a piece of the health care puzzle. It's more than computers and tablets.

It involves strategic planning, incorporates all aspects of each program and initiative to more efficiently guide patients through the Patient Centered Medical Home Neighborhood.

## What does OPNS do for you?

OPNS provides continuous education and supporting documentation to help physicians and office staff remain organized. This month, we will focus on four documents that OPNS provides and we will explain how they all can be used together to complete a full understanding of addressing quality measures.

- **Health Plan Incentive Matrix** - What the plans are paying for quality metrics.
- **Health Plan Coding** - How to accurately code the quality metrics.
- **Unmet Measures** - How to identify patients with needed services for the quality metrics.
- **Clinical Quality Scorecards** - Compare your physician to OPNS physician quality scores.

Each of the above listed reports tie into one another. Continue to read to learn how to efficiently and effectively navigate the work flow for successful outcomes.

## It's called a paradigm shift for a reason

Overall, quality metrics by Health Plans are beginning to become normalized. However, each Health Plan rewards in different fashions. OPNS continues to promote a population health approach but without understanding the unique details to succeed within each Health Plan, the opportunity for successfully managing a population decreases.

### What Health Plans are available on the Incentive Matrix?

- BCN Commercial HMO
- BCNA/BCBSM MAPPO
- Blue Cross Complete
- HAP
- Humana
- Meridian
- Molina
- Priority Health
- United Health Care

## Health Plan Incentive Matrix

The OPNS *Health Plan Incentive 2016 At A Glance* document categorizes high level notes as well as the incentive dollars tied to specific Health Plans and their associated incentive based quality measures.

The document is organized into condition specific sections to easily identify the measures that are associated to one another.

Example: Women's Health combines details on: Mammograms, Cervical Cancer Screening, Chlamydia Screening, and Osteoporosis Management

## Coding Provider Tip Sheet

The OPNS PCMH and PCMH-N Implementation Specialists developed two tip sheets that help physicians and office staff understand how to accurately code quality measures to assure the procedure is captured by the Health Plan. Keep your eyes open for the following:

- *2016 Adult Provider Tips*
- *2016 Pediatric Provider Tips*

## Unmet Measures

Once your office understands what quality metrics and incentives to focus on and how to accurately code for each metric, staff can then reference any of the nine monthly updated *OPNS Unmet Measure Reports* to identify what attributed patients are in need of what services.

Although Health Plans offer this information on their websites, OPNS consolidates each Health Plan into one measure specific report.

Current Health Plans within the reports are: BCBSM, BCBSM MA, BCN, HAP, Meridian, Priority Health, and United Health Care.

## Clinical Quality Scorecard

Each month, OPNS develops *Clinical Quality Scorecards* for BCBSM and BCN and posts the updated data on the Health Focus Registry.

To better compare physician to physician, the scorecards are categorized by Specialty as follows:

- Family Practice - Internal Medicine/Pediatrics
- Internal Medicine
- Pediatrics

## It's called a paradigm shift for a reason

The Health Focus Registry is the source for Unmet Measures and the Clinical Quality Scorecards. Learn how to use Health Focus to help your practice monitor the OPNS population of patients.

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