



May PO Monthly Call

05/12/2025
05/14/2025

AGENDA

- 1. Collaborative Wide Meeting Registration Reminder**
- 2. Spring Regional Meeting Wrap up**
- 3. End of Year VBR Reminders**
- 4. Performance Measure Updates**
 - a. Report Schedule**
 - b. Introducing New MCT2D Performance Measure**
 - i. Feedback Meetings on Next Measure**

Collaborative Wide Meeting Registration Open

- Each PO should have the PO clinical champion and a PO administrative lead/primary contact attend the meeting
- Please ensure that your **register by today, March 12th**
- Meeting will be held on Thursday, June 5th in Lansing at the MTG Space from 10am-3pm

Collaborative Wide Meeting Agenda

Time	Presentation Title	Speaker
10am-11am	MCT2D Welcome and Update	Lauren Oshman, MD MCT2D Program Director Heidi Diez, PharmD MCT2D Co-Program Director
11am-12pm	Review of A1C Control Quality Improvement Initiative	Lauren Oshman, MD MCT2D Program Director Heidi Diez, PharmD MCT2D Co-Program Director
12pm-1pm	Networking Lunch	N/A
1pm-2pm	Future MCT2D Performance Measures	Lauren Oshman, MD MCT2D Program Director Heidi Diez, PharmD MCT2D Co-Program Director
2pm-3pm	Race and Ethnicity Data	Matthias Kirch, MS Health Informatics Specialist MSHIELD Selena Tran, MS Health Data Analyst MSHIELD

Regional Meetings

- Final regional meetings took place last week
- By the end of this week, all attendance will be updated
 - Please notify us if someone has attended a meeting but has not been marked as attended and we will investigate
- Will also plan to distribute a recording of the meeting by the end of the week for those unable to attend in person to make up their attendance
 - Please note: missing the meeting will still result in a regional meeting “strike” but viewing the video and completing the quiz will make sure the practice earns the points associated with the regional meeting VBR
 - Practices will have until July 1st to view the recording and take the quiz

End of Year PCP VBR Requirements

- All remaining PCP VBR requirements are due on July 1st
- This includes the PO level learning community requirement, physician level learning community requirement, and practice level learning community requirements, as well as the 5 A1C forms
- Reminders will be sent to you as we get closer to the deadline letting you know which practices and physicians still need to complete their learning community requirements
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PCP **562 / 953** to go **Provider**
Physician Level Learning Community Requirement '24-'25
Due: July 1, 2025, 11:59 p.m.
[export](#) [More info](#)

PCP **148 / 286** to go **Practice**
Practice Level Learning Community Requirement '24-'25
Due: July 1, 2025, 11:59 p.m.
[export](#) [More info](#)

10 / 24 to go **PO**
PO Learning Community Requirement '24-'25
Due: July 1, 2025, 11:59 p.m.
[export](#) [More info](#)

Physician Level VBR Options

- Attending the upcoming May 16th learning community event on [Insulin and Type 2 Diabetes](#)
- Attending the June 13th learning community event on [Diabetes Complications: Liver Disease and Retinopathy](#)
- Viewing a previous recorded learning community event and [completing a quiz](#)
- Giving feedback on a [physician focused tool](#)
- Participating in the [MCT2D Continuous Glucose Monitor \(CGM\) User Experience Program.](#)
- Giving feedback on the [MCT2D Coverage Checker](#)

Practice Level VBR Options

- [Give feedback on a patient focused tool](#)
 - NOTE: This feedback is meant to be from a patient. That is why this is a practice level VBR instead of a physician level VBR, as it recognizes the additional effort required to collaborate with a patient to get this feedback. We may remove this VBR option in the future as it does not seem to have been used as intended
- Participate in the low carb diet workshop (currently occurring, attendees have already been chosen)
- Submit a dotphrase to the MCT2D dotphrase library
- Access the MCT2D Patient Data Dashboards twice during the performance year (through July 1, 2025)
- Participate in a user experience session on the MCT2D Admin Portal
 - Time still available for June 4 Admin Feedback Session
 - Some spots available for May 30 prediabetes focus group
- **NEW:** By the end of this week, MCT2D will be distributing a brief survey to practices (~10 minutes to complete). Completing this survey will meet the practice level learning community requirement

MCT2D Performance Measure- A1C

Last report was distributed April 21, 2025 on the admin portal with data through 1/30/2025

Next report will be in July with the final results for the performance year

Please note: The A1C measure on the practice scorecards and PO scorecards will not show as Met until the final reports in July, even if the A1C forms have been submitted and a practice has been meeting the measure throughout the performance year.

HEDIS Measure: Kidney Health Evaluation

- The KED measure looks at the percentage of members 18–85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR), during the measurement year.

Current HEDIS 95th percentiles:

64.65% for Commercial

62% for Medicare (estimated)

MCT2D Proposed UACR Measure Details

- Focuses solely on the UACR component of the KED measure, not looking at eGFR
- Based on if a test occurred, not on the result of the test
- Limited to BCBSM/BCN/BCBS-MA/BCN-A patients due to requiring claims data
 - Patients identified via BCBSM/BCN/BCBS-MA/BCN-A attribution files to determine that the patient has BCBSM/BCN/BCBS-MA/BCN-A insurance.
 - After determining that the patient is an active BCBSM/BCN/BCBS-MA/BCN-A patient, the attribution of the patient to a practice may come from a source other than BCBSM/BCN/BCBS-MA/BCN-A attribution (i.e. ACRS).
- Uses a 14 month timeframe in order to account for patients who were not seen exactly within a calendar year
- Measured at a practice level, no aggregate groups.
 - Attributed patient population ranges from 12 to 2,960.
- Nephrology practices in MCT2D are also focusing on improvement of UACR screening as their performance measure

MCT2D Performance on UACR Testing

Percentage of patients with a UACR over a 14-month timeframe:

Range	10%-94%
Q1	67.44%
Q2/Median	74.45%
Mean	71.9%
Q3	81.18%

Current HEDIS 95th percentiles:

64.65% for Commercial

62% for Medicare (estimated)

Measure Specifications

For all BCBSM/BCN/BCBS-MA/BCN-A patients attributed to an MCT2D participating primary care practice who are:

- *aged 18-85 and*
- *meet the MCT2D T2D criteria for inclusion in the data registry and*
- *who have at least one claim (for any service) in the last 14 months received by MCT2D (indicating that MCT2D is receiving claims for that patient)*

The practice must achieve a 10% absolute improvement on their baseline rate (e.g. if baseline rate was 54.5%, goal rate is 64.5%), up to a rate of 90%. Practices who have a baseline rate of >90% will be asked to maintain that rate and to present at the MCT2D fall regional meeting to share their approach to UACR testing.

- **Baseline Period:** January 1, 2024 - February 28, 2025
 - Baseline Reports distributed in May
- **Measurement Period:** July 1, 2025 - August 30, 2026

Target Rate

Proposed target rate for the UACR measure is a **10% absolute improvement** (e.g. if baseline rate is 72.03%, target rate is 82.03%) on current performance, up to 90%. For practices starting above 80%, reaching 90% will meet the goal even if it is not a full 10% increase.

A limited number of practices are above 90%. For these practices, the requirement will be to maintain performance and complete a form describing their current processes, as well as present on these at the fall regional meetings.

Number of patients needed to reach improvement goal range from 2 patients to 296 patients, depending on practice size.

UACR Measurement Period

- **Baseline Period:** January 1, 2024 - February 28, 2025
- Baseline report distributed in May 2025
- **Measurement Period**
 - July 1, 2025 - August 30, 2026

VBR Measure Weighting

3% Participation

- Participation will remain the same as the current VBR year and will include:
 - Regional Meeting Attendance in both spring and fall
 - Physician Level Learning Community requirement
 - Practice Level Learning Community requirement
 - PO Level Learning Community requirement

2% Performance

- Performance will be split between the maintenance A1C measure and the proposed UACR measure, as detailed on the following slide.

VBR Payment Years

VBR Year	2% Performance Payment Based On:
9/1/2025-8/30/2026	A1C performance from 6/1/2024- 4/30/2025
9/1/2026- 8/30/2027	A1C performance from 6/1/2025- 4/30/2026
9/1/2027- 8/30/2028	A1C performance from 6/1/2026- 4/30/2027 UACR performance from 7/1/2025- 8/31/2026

Performance Measure Weighting (9/1/2027 Payout)

Measure	Target	Measure Weight	Measure Scoring
A1C	Meet or maintain the HEDIS 95th percentile rate for Commercial and Medicare patients	40%	Met Both= 100% Met One, Improved* One: 75% Met One= 50% Didn't Meet Either= 0%
UACR	10% improvement on baseline rate (up to an baseline rate of 90%, those above 90% must maintain)	60%	10%+ Improvement: 100% 7.5%-9.99% Improvement: 75% 5%-7.49% Improvement: 50% 2.5%-4.99% Improvement: 25% 0-2.49% Improvement: 0%

* "Improved" is considered to be a X% or more increase in baseline rate, to be determined

**80% final score across both measures required to earn 2% VBR
associated with performance**

Performance Measure Feedback Sessions

Link to sign up: [Select a Date & Time - Calendly](#)

Beginning Thursday and going through next week



Next MCT2D Learning Community Event



INSULIN AND TYPE 2 DIABETES

5/16/25

with Jenni Iyengar, MD
Kara Mizokami Stout, MD



Insulin and Type 2 Diabetes

Dr. Kara Mizokami-Stout and Dr. Jenni Iyengar

Friday, May 16th, 12pm-1pm