MCT2D Performance Measure - uACR Year 1

Specialty: Nephrology
Measurement Year: 07/01/2025 - 08/31/2026
Reward Year: 03/01/2027 - 02/28/2028

Eligible Population (Denominator)

For all BCBSM/BCN/BCBS-MA/BCN-A patients attributed to an MCT2D participating nephrology practice who are:
- aged 18-≤85 and
- meet the MCT2D criteria for inclusion in the data registry and
- who have at least one claim **(for any service)** since the beginning of the baseline period (01/01/2024) and the population lock date (05/31/2026) received by MCT2D (indicating that MCT2D is receiving claims for that patient)

Reward Amount

Moving forward, BCBSM will not have separate participation and performance measure VBR. It will be part of a single scorecard that adds up to 100 points, consisting of both performance measures and participation measures. Different point thresholds will constitute different VBR earnings, with a point threshold required for 102% VBR, 103% VBR, and 105% VBR. These specific thresholds will be available by early June.

Eligible Physicians

Any physicians deemed eligible for VBR by BCBSM are eligible to participate in the performance measure.

Measurement Population

- *Practice level measurement*: All nephrology practices, irrespective of the size of their patient population, will be measured at the practice level.

Measurement Definition

The patients meeting the eligibility criteria above who have a urine albumin creatinine ratio (uACR) record during the measurement year.

Goal Rate

Practices must achieve a 5% absolute improvement on their baseline rate (e.g. if baseline rate was 54.5%, the goal rate is 59.5%), up to a rate of 90%. Practices with a baseline rate between

85%-90% only need to improve to 90%. Practices who have a baseline rate of >90% will be asked to repeat a rate of at least 90% during the measurement year.

Data

MCT2D will be using the MCT2D dashboards developed by the Michigan Data Collaborative to track performance on the metric. MCT2D will use uACR records from both clinical (PPQC/QMI data) and BCBSM/BCN medical claims data.

Baseline Data

Final baseline data is determined based on the April 2025 data refresh. The baseline measurement period is from 01/01/2024 through 02/28/2025.

Intervention Period Data

07/01/2025 - 08/31/2026

Please note, uACR values that are collected between 03/01/2025 - 06/30/2025 will NOT count towards meeting your measure. We do not expect that you will have been actively working on the measure during this period. If a patient has a UACR record during this timeframe, it will not be part of the final percentage calculation as it is outside the measurement year. The purpose of having a 14 month intervention period is to ensure clinical appropriateness for repeat testing on all patients.

The population denominator will be allowed to change until 5/31/2026, at which point it will be held steady, such that new patients are not added to the denominator for the final 3 months based on the date till which claims and clinical data is received in the extract from MDC.

MCT2D analysis of the data demonstrated that the number of attributed patients remains fairly stable throughout the year, such that this should not negatively impact practices. The reason for not locking into the population at the beginning of the performance year is to allow for the normal movement of providers and their patients between practices and places of employment, instead of the removal of these patients from the denominator at subsequent data refreshes. To be as fair as possible, the locking of the population for the last 3 months is to limit occurrences where a patient is attributed to a physician near the end of the performance year, and the practice is held accountable for ensuring that patient receives a test.

Data Release Estimates

Practices will receive data releases to run improvement cycles and improve their performance throughout the year. Additionally, both a list of patients who have received a uACR screening and a list of patients who have not received a uACR screening can be identified using filters on

the Renal Details page on the MCT2D Legacy Patient Data Dashboard. The anticipated data update schedule is below. Please note, these dates may shift slightly.

- 10/31/2025 (data through 08/31/2025)
- 12/30/2025 (data through 10/31/2025)
- 01/30/2026 (data through 11/30/2025)
- 03/31/2026 (data through 01/31/2026)
- 04/30/2026 (data through 02/28/2026)
- 06/30/2026 (data through 04/30/2026)
- 07/31/2026 (data through 05/31/2026)
- 09/30/2026 (data through 07/31/2026)
- 10/30/2025 (data through 08/31/2026)

We will also provide reports on current performance at the following timepoints:

- Baseline report: May 2025
- November 2025
- April 2026
- August 2026
- Final performance report: February 2027

Data Reconciliation Plan

We will use the January 2027 data release to calculate final performance in order to ensure full data completeness, though the performance year will end on 08/31/2026 and patients who receive a uACR test after that date will not be counted towards the measure. MCT2D will submit a list of physicians who earned the VBR to BCBSM by January 2027 and BCBSM will review and reconcile data in order to finalize and pay VBR on 03/1/2027.

FAQs on the UACR Measure

1. *Why is MCT2D not aligning with the HEDIS metric and including the eGFR component in addition to the UACR?*

   In reviewing our data, we determined that eGFR data has not been consistently reported across our data sources, which would have made performance tracking across practices even more difficult and less equitable.

2. *Will this measure be shown on the MCT2D Patient Data Dashboard?*

   Yes, we will be including information on UACR screening on the Summary Measures page, beginning with the October dashboard enhancement, which will include data through 07/31/2025.

Version: 12/18/2025