



May PO Monthly Call

*Wednesday, May 8th (2pm)
Monday, May 13th (11am)*

AGENDA

PRE-POPULATED REPORTS

PRACTICE LEVEL VIEWS

MCT2D PERFORMANCE MEASURE

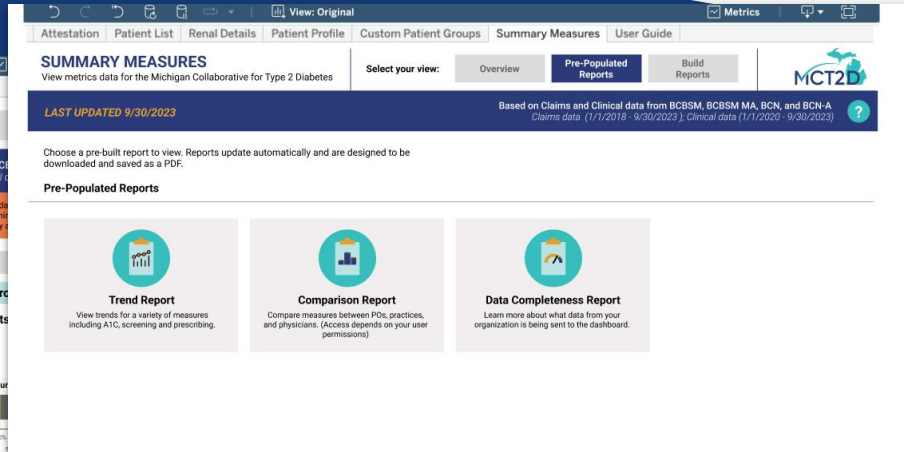
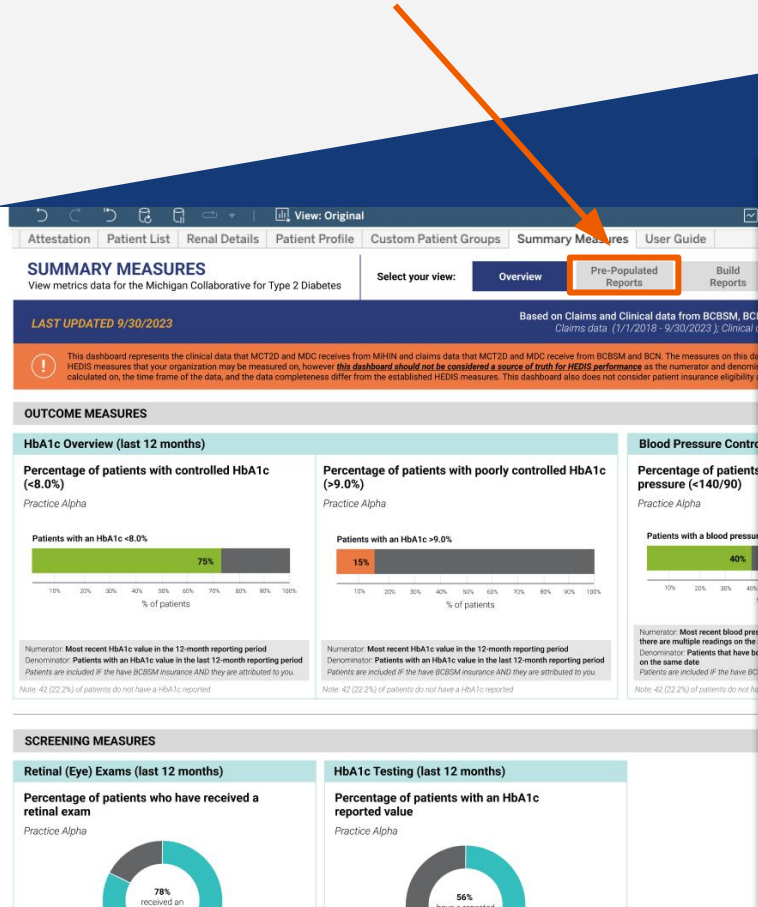




Pre-populated Reports

May PO Monthly Call

MCT2D is developing a series of pre-populated reports as part of Dashboard 2.0



Making it easy to find key information and data on a variety of topics

WE NEED YOUR INPUT

Help us **prioritize** what reports we build
and what data we include.

TOPICS: We need your input!

Vote on your TOP 2 topics in the poll.

We will prioritize these in the development of dashboard 2.0.

If you choose other, please add the topic you would like to see in the chat.

TOPICS

1. Prescribing trends on medications
2. Prescribing trends on CGM
3. Select HEDIS measure trends
4. Data reporting rates
5. SDOH screening
6. Other

FEATURES: We need your input!

Vote on your TOP 2 features in the poll.

We will prioritize these in the development of dashboard 2.0.

If you choose other, please add the feature you would like to see in the chat.

FEATURES

1. The ability to compare your providers
2. The ability to compare practices
3. The ability to compare your PO's performance to the collaborative
4. The ability to see detailed reports for each practice
5. The ability to see your trends for the last 2 years
6. The ability to see your trends for the length of time you have participated in MCT2D
7. The ability to see your current prescribing rates
8. Ability to see your current A1C (controlled vs. uncontrolled) rates
9. Other

Dashboard User Levels for Summary Measures

PO User

Can compare their PO and any practices in their PO to all practices and providers in their PO

Practice User

All other users can compare their practice or themselves to their PO, providers in their practice, and to their practice

Comparison data -
blinded data vs
only seeing data
for their practice

Other Facility 1	8.3%	(29/250)
Other Facility 2	8.9%	(45/503)
Other Facility 3	9.2%	(27/295)
Other Facility 4	9.7%	(40/4109)
Other Facility 5	11.4%	(15/132)
Other Facility 6	12.1%	(22/182)
Other Facility 7	12.5%	(15/124)
Other Facility 8	13.8%	(9/65)
Other Facility 9	14.1%	(31/220)
Other Facility 10	14.8%	(4/27)
Other Facility 11	15.1%	(24/159)
Other Facility 12	15.7%	(86/541)
Other Facility 13	17.4%	(30/169)
Other Facility 14	18.1%	(116/640)
Other Facility 15	19.2%	(14/73)
Other Facility 16	19.5%	(82/420)
Other Facility 17	21.4%	(83/294)
Other Facility 18	21.5%	(1,424/6,629)
Other Facility 19	23.1%	(66/295)
Other Facility 20		
Other Facility 21	25.1%	(113/454)
Other Facility 22	27.5%	(320/904)

Practice User:
Practice Name De-identified

Data Reporting Rate by Practice	
PO Alpha	
Metric <input type="text"/>	
Practice Name	61% 124/285
Practice Name	61% 124/285
Practice Name	61% 124/285
Practice Name	61% 124/285
Practice Name	61% 124/285
Practice Name	61% 124/285
Practice Name	61% 124/285
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Practice Name	61% 124/285
Practice Name	61% 124/285

PO User:
Practice Name Identified

We need your input!

Is it ok for us to share **blinded** data on other practices/providers with practice users within your PO?

(such as in comparison reports)

1. **IT IS OK** to share blinded comparison data for practices/providers with practice users within my PO.
2. **IT IS NOT OK** to share blinded comparison data for practices/providers with practice users within my PO.

If you are not ok with us sharing data, please reach out to us to discuss further at ccteam@mct2d.org

A map of Michigan is shown in the background, with a large blue arrow pointing from the left towards the text. The map includes labels for various cities and regions such as Grand Rapids, Lansing, Ann Arbor, Detroit, and Toledo. The word "MICHIGAN" is prominently displayed in the center of the state.

MCT2D Performance Measure

Performance Measure Proposal: Addressing Patients with A1C > 8%

- MCT2D is required to launch a performance based VBR measure.
- The performance measure will be separate from participation measures. Participation will be 3%, and performance will be 2%. Practices can earn both, one or the other, or neither.

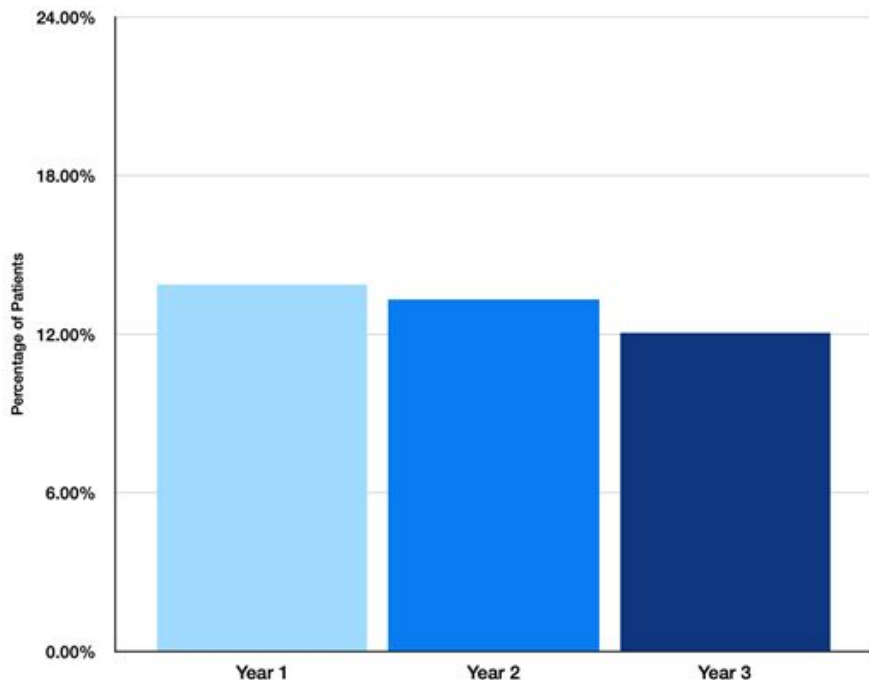
As an initial performance metric for the September 1st VBR start date for PCPs, we plan to look at percent reduction of patients with an A1C >8% at the PO level.

Rationale: Addressing Patients with A1C > 8%

- Practices can utilize MCT2D initiatives (medication, CGM, low carb diet) and their respective tools, without being directly required to increase these prescribing of these interventions.
- HEDIS measure: A1C >8% is being incentivised through other value based programs allowing for synergized quality improvement efforts and reduction of burden on practices to meet separate unrelated metrics.
- A1C over 8.0% significantly increases the rate of complications.
- A1C data is one of the most robustly reported values in the MCT2D database.

Current Rates: Collaborative

Percentage of Patients with an A1c value greater than 8 for each PO over a 3 year period



COLLABORATIVE WIDE

Denominator is the number of Patients (in the collaborative as well as attributed to a PO) who have at least one HbA1c value recorded in the year being looked at.

Numerator is the number of patients whose last recorded A1c value in the given year is equal to or greater than 8.

- Year 1 is 2/28/2021-2/28/2022
- Year 2 is 2/28/2022-2/28/2023
- Year 3 is 2/28/2023-2/28/2024

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PO Name	Count_Y3_Total	Count_Y3_Over8	Percent_Y3
PO A	21	1	4.76%
PO B	60	12	20.00%
PO C	68	14	20.59%
PO D	86	14	16.28%
PO E	180	24	13.33%
PO F	221	30	13.57%
PO G	477	39	8.18%
PO H	622	81	13.02%
PO I	790	89	11.27%
PO J	854	103	12.06%
PO K	949	105	11.06%
PO L	940	120	12.77%
PO M	872	136	15.60%
PO N	1339	138	10.31%
PO O	1415	146	10.32%
PO P	1829	202	11.04%
PO Q	1832	208	11.35%
PO R	1648	213	12.92%
PO S	1542	214	13.88%
PO T	1751	240	13.71%
PO U	2945	243	8.25%
PO W	1325	250	18.87%
PO X	2775	279	10.05%
PO Y	2952	298	10.09%
PO Z	2378	304	12.78%
PO AA	2819	436	15.47%
PO AB	3613	568	15.72%
PO AC	6507	676	10.39%

Performance Measure: Next Steps

- Now: Getting your feedback - in this meeting and through May 31st
 - Will share Calendly for brief meetings with POs + PDs to discuss
- Determining baseline rate and improvement goals, including time frames
- Discussion at the collaborative wide meeting around potential interventions and planned approaches
- Vetting baseline and improvement goals with the steering committee at the June 10th meeting
- Sharing with BCBSM for their final sign off



Discussion

- **Do you agree with measuring at a PO level?**
 - Practice counts will likely be too small
- **What have been your previous (good or bad) experiences with addressing HEDIS metrics?**
- **What concerns do you have with this measure?**

Reminders & Announcements



June Collaborative Wide Meeting

Friday, June 7th, 12pm-5pm

MCT2D's collaborative wide meeting is taking place at Lansing Community College on Friday, June 7th. INHALE will host the morning section of the meeting, from 8am-12pm. Lunch will be from 12pm-1pm, and MCT2D's portion will begin at 1pm.

Topics at the collaborative meeting will include: health equity, prediabetes, and supporting quality improvement implementation.

Please register by Friday, May 17th at the latest!!

REMINDER: Attendance at the meeting by a PO administrative contact and PO clinical champion is required as part of the MCT2D PO Scorecard.

Learning Community Events

Friday, May 24th, 2024: 12pm-1pm



Implementing CGMs
Panel of MCT2D Members

Reminder: VBR Requirements

There is less than one month to complete all VBR requirements for this year!

Please remind your physicians and practices of this requirement.

PCP	539 / 893	Provider
Learning Community Requirement Met - Provider		
Due: June 1, 2024, 6 p.m.		
export		
PCP	144 / 300	Practice
Learning Community Requirement Met - Practice		
Due: June 1, 2024, 6 p.m.		
export		