



# July 2025 PO Monthly Call

*Wednesday, July 9th at 2pm  
Monday, July 14th at 11am*



# AGENDA

A1c Measure Update

Reminder on PCP Measures

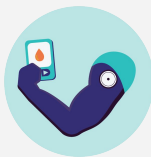
Updated 2025-2026 PCP Scorecards

PCP Performance Measure Review and Report Schedule

Learning Community Opportunities

Finalizing VBR Scores + Eligible Physicians

Endo and Nephro VBR Measure Updates



# PCP A1c Measure

## Year 2



# A1c Measure Update

BCBSM requested that we not set specific target rates for the A1c measure until the updated HEDIS percentiles are released in November.

New language on PCP Scorecard: Each practice: Meet the HEDIS 90th percentile rate for commercial (BCBSM-PPO, BCN) type 2 diabetes patients ages 18+ with an A1C < 8.0; and Medicare (BCBSM PPO-MA and BCNA) type 2 diabetes patients less than 76 years old with an A1C  $\leq$  9.0.

NOTE: HEDIS rates will be released in November 2025 and scoring may be adjusted to add improvement tiers based on the changes in HEDIS percentiles.

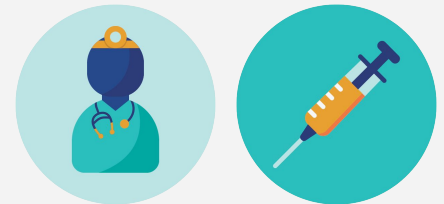
# Primary Care HbA1c Performance Measure - Year 2

- **Eligible Population**

- For all BCBSM/BCN/BCBS-MA/BCN-A patients attributed to an MCT2D participating Primary care physician who are:
  - aged 18- ≤75 and
  - meet the MCT2D T2D criteria for inclusion in the data registry and
  - who have had at least one A1C record (whether clinical or claims) between the start of the lookback period (06/01/2024) and the end of the performance period (04/30/2026).

- **Eligible Physicians**

- All physicians at MCT2D participating primary care practices deemed eligible for VBR by BCBSM are eligible for the A1c Year 2 performance measure VBR.



# Primary Care HbA1c Performance Measure - Year 2

- **Measurement Population Definition**

- Numerator

- The percent of members aged  $\geq 18$  and  $\leq 75$  with type 2 diabetes whose most recent glycemic status (A1C) was at the following level during the measurement year:
      - A1C  $< 8\%$  for Commercial insurance
      - A1C  $\leq 9\%$  for Medicare insurance

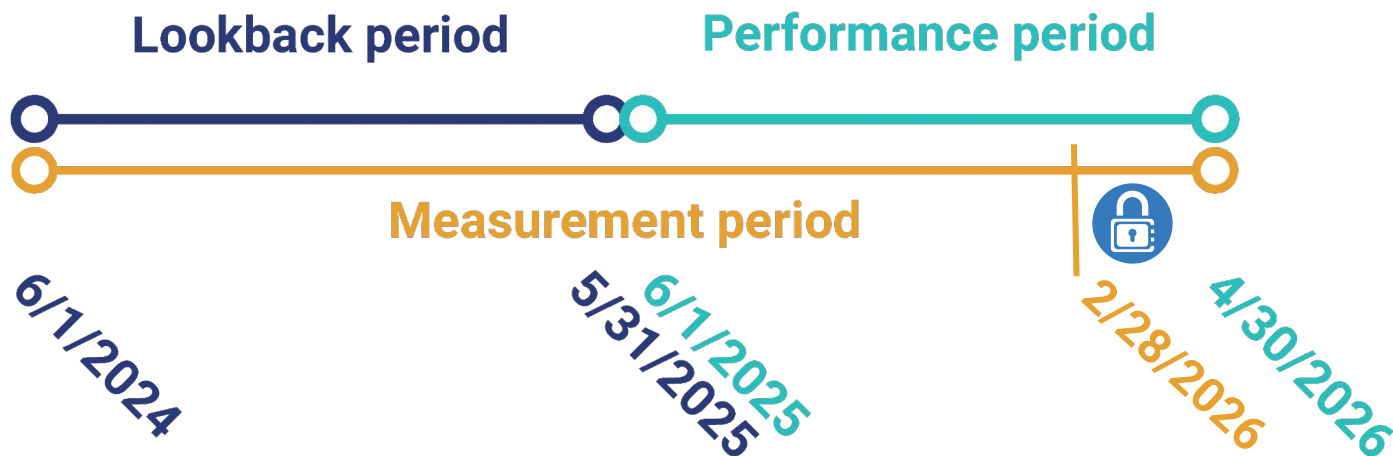
- Denominator

- All patients at the practice that meet the eligibility criteria (as described in previous slide)
  - Please note that patients who are 75 years old will remain in the measure until which time they turn 76. When they turn 76 they will drop out of the measure. For the two month locked period, patients will be proactively dropped who will turn 76 before the end of the performance period (04/30/2026).

# A1c (Year 2) Performance Measure Time Frame

## Measure Continuation

Lookback period + Performance period = Measurement period (6/1/2024 to 4/30/2026)



# Report Dissemination Timeline

PCP HbA1c Year 2

- **Report 1:**
  - August 2025
  - Baseline Report (extract received 07/25/2025 has data through 5/31/2025)
- **Report 2:**
  - November 2025
  - Initial report with 3 months of data for feedback (extract received 10/31/2025, has data through 08/31/2025)- **will be able to update with new HEDIS target rate**
- **Report 3:**
  - February 2026
  - 6 months of measurement period (extract received 01/30/2026, has data through 11/30/2025)
- **Report 4:**
  - July 2026
  - All 11 months of measurement year (extract received by 06/30/2026, has data through 04/30/2026)
  - Due to BCBSM by mid July



# **Summary of Changes Compared to the Year 1 (2024-2025) HbA1c Performance Measure**

- **Addition of upper age limit of <76 years of age for inclusion in the measure to align with HEDIS.**
- **Delineation between Commercial and Medicare will be made using a specific indicator from BCBSM/BCN rather than 65 years of age as a proxy.**
- **Removal of aggregate groups.**
- **Removal of denominator lock until the last 2 months of the performance period.**
- **MCT2D will not be providing a list of patients included in the measure at the beginning of the measure as it is not locked, nor will we provide one after locking in the denominator population for the last 2 months, as we will not receive data through 02/28/2026 until after the end of the measurement period.**
- **Removal of the additional requirement for practices currently meeting the measure to submit uncontrolled A1C forms.**

# PCP uACR Measure

## Year 1



# Primary Care uACR Performance Measure - Year 1

- **Key Details**

- Measurement Year: 7/1/2025 - 8/31/2026
- Reward Year: 09/01/2027 - 08/31/2028
- Practice level measurement: All primary care practices, irrespective of the size of their patient population, will be measured at the practice level.

- **Goal Rate**

- 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 with a baseline rate between 80%-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.

# Primary Care uACR Performance Measure - Year 1

- **Eligible Population**

- For all BCBSM/BCN/BCBS-MA/BCN-A patients attributed to an MCT2D participating Primary care physician 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 14 month baseline period received by MCT2D (indicating that MCT2D is receiving claims for that patient)

- **Eligible Physicians**

- Any physicians deemed eligible for VBR by BCBSM are eligible to participate in the performance measure. BCBSM will finalize the physicians that are VBR eligible on **9/1/2025**.



# Data Timeline


Primary Care uACR Performance Measure - Year 1

**Baseline period: 01/01/2024 to 02/28/2025**

**Measurement period: 07/01/2025 to 08/31/2026**

# Report Dissemination Timeline

PCP uACR Year 1

- **Report 1:** 
  - ~~May 2025~~
  - ~~Baseline Report (extract received 4/30/2026 has data through 2/28/2025)~~
- **Report 2:**
  - October 2025
  - 1 month of data and release of uACR Data on Summary Measures and initial report for feedback (extract received 9/30/2025 has data through 7/31/2025)
- **Report 3:**
  - March 2026
  - 5 months of measurement period (extract received 1/30/2026 has data through 11/30/2025)
- **Report 4:**
  - August 2026
  - 11 months of measurement year (extract received 7/31/2026 has data through 5/31/2026)
- **Final Report:**
  - February 2027
  - Due to BCBSM by mid July 2027 (extract data and data through TBD)

# Additional Scorecard Updates

Going to be offering 5 “bonus”/ “extra credit” points for PCP practices who complete their practice level learning community requirement AND has 90-100% of physicians having completed their physician level learning community requirement by 1/1/2026.

These points can be used to increase the practice's score up to 100 points. Practices who go over 100 points will not receive additional value based reimbursement.

# 2025-2026 PCP Scorecard

Consists of 4 measures:

- **Regional Meeting Attendance (25 points)**
- **Physician Level Learning Community Requirement (25 points)**
- **Practice Level Learning Community Requirement (25 points)**
- **A1c Control Measure (25 points)**

NOTE: The PO learning community requirement is no longer included on the practice scorecard and will only be part of the PO scorecard.

The uACR measure that practices are working on is not included because the scorecards are retrospective and reimbursement for that will not begin until 9/1/2027.



# Reminder: VBR Measure Weighting

- Beginning in with the September 2025 VBR cycle, BCBSM will no longer be separating participation and performance measures
- There will be one scorecard that equals to 100 points, with different thresholds:
  - $\geq 55$  to  $< 70$  points = 102% VBR
  - $\geq 70$  to  $< 85$  points = 103% VBR
  - 85+ points = 105% VBR

# Learning Community Options

- Going to be reviewing and revamping the different learning community options offered
- Want to expand options available, especially at the PO and practice level
- Will be reviewing each of the current options and considering if we want to keep it, amend it, or remove it
- Will go over all new options at August PO call and share with collaborative prior to VBR year start

# Finalizing VBR Scores

- You have already been notified if any your practices did not meet the performance measure. Since it is a very small number of practices, we will directly share this information with you. This is worth 2% of the VBR.
- Participation measures are scored in the Admin Portal. If your practice has received a score of >80 points, they will receive the 3% participation VBR.
- Please review the participation scores and if you have any questions or issues, please notify us ASAP.

# 2025-2026 VBR Recipients

- We will be receiving the PGIP list from BCBSM on July 11th and will be generating a list of all of your physicians who will be submitted to BCBSM to earn VBR for the next performance year.
- Performance is calculated at a practice level, so if you have a physician who is newly eligible to earn VBR, they will be receiving the VBR rate of their practice (2%, 3%, or 5% depending on scores).
- BCBSM has asked for a quick turnaround on this as in previous years, so please review and sign off on the list ASAP as there is limited opportunity to make changes.

# Endocrinology VBR Measure

- CGM Interpretation Year 1
  - 7/1/2025 - 8/31/2026

# Endocrinology CGM Interpretation Performance Measure - Year 1

- **Key Details**

- Measurement Year: 7/1/2025 - 8/31/2026
- Reward Year: 03/01/2027 - 02/28/2028
- Practice level measurement: All continuing endocrinology practices, irrespective of the size of their patient population, will be measured at the practice level.

- **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 the collaborative wide (PCP and endocrinology practices) 95th percentile benchmark of 89.59%.
- Practices with a baseline rate between 84.59%-89.59% only need to improve to 89.59%.
- Practices that are already above the 95th percentile benchmark (89.59%) will be asked to maintain performance throughout the measurement period.

\*Please note that the goal rate is awaiting sign off from BCBSM and may change. Any updates will be sent separately via email.

# Endocrinology CGM Interpretation Performance Measure - Year 1

- **Eligible Population**

- For all BCBSM/BCN/BCBS-MA/BCN-A patients attributed to an MCT2D participating Primary care physician who are:
  - aged 18+ and
  - meet the MCT2D T2D criteria for inclusion in the data registry and
  - who have at least one claim for a CGM device within the 12-month CGM baseline period

- **Eligible Physicians**

- Any endocrinologist who is part of a continuing practice (started in MCT2D prior to 2025) who are deemed eligible for VBR by BCBSM is eligible to participate in the performance measure.



# Endocrinology CGM Interpretation Performance Measure - Year 1

- **Measurement Population Definition**

- Numerator

- The percent of eligible patients (see previous slide) who have had at least one 95251 billing claim within the 14-month period.

- Denominator

- All patients at the practice that meet the eligibility criteria (as described in previous slide)



# Data Timeline

Endocrinology CGM Interpretation Performance Measure - Year

1

## Baseline Data

- Final baseline data is determined based on the April 2025 data refresh.
- The baseline measurement period for
  - CGM device claims is from 01/01/2024 through 12/31/2024.
  - Billing code 95251 is from 01/01/2024 through 02/28/2025.

## Intervention Period Data

- Determination of if a patient is on a CGM device (Denominator): 07/01/2025 - 06/30/2026
- Determination of 95251 Billing (Numerator): 07/01/2025 - 08/31/2026

# Report Dissemination Timeline

Endocrinology CGM  
Interpretation Year 1

- **Report 1:** ✓
  - Send out today, July 14th
  - Baseline Report (extract received in April 2025 has data through 2/28/2025)
- **Report 2:**
  - October 2025
  - Initial report for feedback - 1 month of data (extract received 9/30/2025 has data through 7/31/2025)
- **Report 3:**
  - March 2026
  - 5 months of measurement period (extract received 1/30/2026 has data through 11/30/2025)
- **Report 4:**
  - August 2026
  - 11 months of measurement year (extract received 7/31/2026 has data through 5/31/2026)
- **Final Report:**
  - January 2027
  - Due to BCBSM by mid January 2027

# Nephrology VBR Measure

- uACR Year 1
  - 7/1/2025 - 8/31/2026

# Nephrology uACR Performance Measure - Year 1

- **Key Details**

- Measurement Year: 7/1/2025 - 8/31/2026
- Reward Year: 09/01/2027 - 08/31/2028
- Practice level measurement: All nephrology practices, irrespective of the size of their patient population, will be measured at the practice level.

- **Goal Rate**

- A 5% absolute improvement on their baseline rate (e.g. if baseline rate was 54.5%, 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.

# Nephrology uACR Performance Measure - Year 1

- **Eligible Population**

- For all BCBSM/BCN/BCBS-MA/BCN-A patients attributed to an MCT2D participating Primary care physician 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 14 month baseline period received by MCT2D (indicating that MCT2D is receiving claims for that patient)

- **Eligible Physicians**

- Any physicians attributed to a nephrology practice who are deemed eligible for VBR by BCBSM are eligible to participate in the performance measure.



# Nephrology uACR Performance Measure - Year 1

- **Measurement Population Definition**

- Numerator
  - The percent of patients aged 18-≤85 with type 2 diabetes who have a urine albumin creatinine ratio (uACR) record during the measurement year.
- Denominator
  - All patients at the practice that meet the eligibility criteria (as described in previous slide)
- Please note that patients who are 85 years old will remain in the measure until which time they turn 86. When they turn 86 they will drop out of the measure. For the three month locked period, patients will be proactively dropped who will turn 86 before the end of the performance period (08/31/2026).

# Data Timeline


Nephrology uACR Performance Measure - Year 1

**Baseline period: 01/01/2024 to 02/28/2025**

**Measurement period: 07/01/2025 to 08/31/2026**

# Report Dissemination Timeline

Nephrology uACR  
Year 1

- **Report 1:**
  -  May 2025
  - ~~Baseline Report (extract received 4/30/2026 has data through 2/28/2025)~~
- **Report 2:**
  - October 2025
  - 1 month of data and release of uACR Data on Summary Measures and initial report for feedback (extract received 9/30/2025 has data through 7/31/2025)
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- **Final Report:**
  - January 2027
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# Next Month's PO Call Dates

**Monday, August 11th at 11am**

**Wednesday, August 13th at 2pm**