



MCT2D Performance Measure

Measurement Year: 9/1/2024 - 3/31/2025

Reward Year: 9/1/2025 - 8/31/2026

Eligible Population (Denominator)

BCBSM, BCBS-MA, BCN, and BCNA patients attributed to an MCT2D participating physician via the MCT2D dashboard who have had at least one A1C in the 12 months prior to the baseline data cut off of 05/31/2024 and a documented type 2 diabetes diagnosis.

Reward Amount

This performance metric will account for 2% of the VBR. Participation metrics will account for 3% of the VBR. A physician can earn 2%, 3%, or the full 5% depending on completion of the requirements.

Eligible Physicians

Those deemed eligible for VBR by BCBSM and who are part of an MCT2D practice that was recruited into the program prior to 2024, are eligible for the performance VBR. Physicians who are part of an MCT2D practice recruited in 2024 are not eligible for the performance metric VBR and will have entirely participation based VBR requirements for their first year.

Measurement Population (Practice or PO level)

- ***Practice level measurement:*** Practices with over 100 patients in their denominator will be measured at a practice level.
- ***PO level measurement:*** Practices with less than 100 patients in their denominator will be aggregated with all other practices in the PO with less than 100 patients.
 - If there is only one practice in the PO with less than 100 patients they will be measured at a practice level. The PO can offer them additional help and resources to meet their goal.
 - ***Ineligible POs:*** POs who have less than 100 patients total in the denominator are not eligible for the performance VBR. As such, these POs will only be eligible to earn the 3% participation VBR. These practices may work with MCT2D to submit additional data in order to become eligible on a case by case basis.



Measurement Definition

The percent of members age 18-75 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 ≤9% for Medicare insurance

Goal Rate

MCT2D will be aligning with the HEDIS 90%ile rate for commercial and projected 90%ile rate for Medicare populations:

- 70% with an A1C <8% for commercial
- 87% with an A1C ≤9% for Medicare

Data

MCT2D will be using the MCT2D dashboards developed by the Michigan Data Collaborative to track performance on the metric. MCT2D will use A1C rates from both clinical (PPQC data) and claims data. The population denominator will be held steady, such that new patients are not added to the denominator throughout the measurement year. The denominator may decrease due to a physician leaving a practice, patient attribution changes, and other causes, but it will never increase.

Baseline Data

Final baseline data will be determined based on the 08/07/2024 data refresh that will include data through 5/31/24.

Intervention Period Data

06/01/2024 - 04/30/2025

Please note, A1C values that are collected between 06/01/2024 - 08/31/2024 will count towards meeting your measure. We do not expect that you will have been actively working on the measure during this period, but if a patient has an A1c drawn in that time frame that makes them meet their target, this will still count if they do not have another drawn before 04/30/2025.

2023												2024												2025						
May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul				
Baseline Data												Intervention Period Data												VBR for 2025 (sept) - data is due to BCBSM by July 15th						
												Data Through 5/31												Data Released (8/7) VBR start 2025						
																								Data Released (06/25ish) Performance Due to BCBSM						



Data Release Estimates

Practices will receive data releases to run improvement cycles and improve their performance throughout the year. The anticipated release schedule is below. Please note, 2025 dates may shift slightly.

- 12/20/2024 (data through 9/30/2024)
- January 2025 (data through November 2024)
- March 2025 (data through January 2025)
- April 2025 (data through February 2025)
- June 2025 (data through April 2025)
- July 2025 (data through May 2025)
- September 2025 (data through July 2025)
- October 2025 (data through August 2025)
- December 2025 (data through October 2025)

Data Reconciliation Plan

We will use the final data release in June 2025 to calculate final performance. MCT2D will submit a list of physicians who earned the VBR to BCBSM by 7/15/2025 and BCBSM will review and reconcile data in order to finalize and pay VBR on 9/1/2025.

Additional Requirements

1. The PO is required to log into the MCT2D Patient Data Dashboard on a quarterly basis and disseminate information to their practices. This will be verified in two ways:
 - a. Reviewing the log in and usage information provided by the Michigan Data Collaborative AND
 - b. Submission of a brief plan on how dashboard reporting will be disseminated to practices. If this requirement is not met, the PO is not eligible to earn the points associated with this requirement.
 - i. This will entail completing a very brief survey on the admin portal. This link will be distributed to the PO Clinical Champion and Admin Lead by 09/13/2024.
2. Any independently measured practices or groups of aggregated practices who already are meeting or exceeding the performance level at the beginning of the VBR year, we will require them to maintain their excellent performance as well as review the charts of five patients per practice with an uncontrolled A1C and report on key drivers of poor control.
 - a. This will be completed via the submission of a brief Redcap form that will be available in mid-October.