

SPECIAL BULLETIN

May 8, 2013

QUALITY BLUE EVOLUTION

Through the innovative *Quality Blue* Physician and Hospital Pay-for-Performance Programs, participating physicians and their staff have dedicated significant time and resources working with Highmark to help improve patient care, prevent infections, prevent errors, save money and, most importantly, save lives.

Quality Blue is now undergoing a historic evolution from solely pay-for-performance to include pay-for-value programs. Highmark is deploying new pay-for-value programs based on the care delivery models of Patient-Centered Medical Home (PCMH) and Accountable Care Alliance (ACA). We are partnering with providers to reinforce and improve quality, reduce the overall cost of care, support total patient management through care coordination and optimize the patient experience of care.

Highmark has been fortunate to partner with our providers for more than a decade in laying a solid foundation of capabilities, infrastructure and processes necessary for managing patient populations throughout the full continuum of care. We look forward to working with you in a model focused on accessible, affordable and coordinated quality care that reduces costs and improves the health and well-being of your patients.

Most provider partners will move from the long-standing *Quality Blue* Physician Pay-for-Performance Program into a pay-for-value model beginning in 2013 through 2015. Within three years, Highmark aims to have 75 percent of our 4.8 million members in Pennsylvania, West Virginia and Delaware receiving services from providers in value-based programs.

For those providers who choose not to move into the *Quality Blue* PCMH or ACA, the current *Quality Blue* Pay-for-Performance program will be undergoing significant change, as well. These changes will occur in stages in order to provide a stable transition. The first stage involves the "retirement" of the Best Practice indicator,



Camp Hill, PA 17089

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effective Aug. 1, 2013. Although Highmark is retiring the Best Practice indicator, any practice with active points on Sept. 30, 2013, or those who submitted a Best Practice between July 1 and Aug. 1, 2013 (for points in 4th Quarter 2013), will continue to receive their earned points through March 31, 2014. We anticipate that the first step of the evolution will be complete with 2nd Quarter 2014. This means that it is not necessary for any practice to submit additional Best Practice data for Year 2 to continue to earn points through March 31, 2014. New Best Practice submissions will not be accepted after Aug. 1, 2013.

Watch your mail and the NaviNet® Plan Central page for additional important information on the changes that are being made to the Quality Blue Physician Pay-for-Performance Program.

As always, if you have any questions, please contact your Highmark Clinical Quality Consultant or Provider Relations Representative.