2014 Pay for Performance (P4P) Program

Training for Participants
UCare's Pay for Performance (P4P) Program supports and encourages quality improvement by providing financial incentives and recognition to primary care physicians demonstrating superior or improved performance.

- UCare has conducted a P4P Program since 2002.
P4P Program Principles

- The program includes primary care clinics in the UCare network.

- The program focuses on clinical areas that address health improvement for our members.

- P4P rewards provider care systems/clinics that improve clinical outcomes for UCare members.
2014 P4P Program Measures

- Adolescent Well-Care Visits (revised)
- Anti-Depressant Medication Management: Effective Continuation Phase Treatment (new)
- Breast Cancer Screening
- Cholesterol Management for Patients with Cardiovascular Conditions: LDL Screening
- Comprehensive Diabetes Care: LDL Screening
- Comprehensive Diabetes Care: Medical Attention for Nephropathy
- Postpartum Care (new)
- Well Child Visits in the First 15 Months of Life (revised)
2014 P4P Program Goals

- Provider-specific goals will be determined using HEDIS administrative data (claims data) only.

- Goals to be used to determine payments will be calculated and distributed to all participants by April 25, 2014.

- These goals will allow for a complete claims run out and will be your true 2013 Rate (1/1/13 through 12/31/13).
The method of determining payment is based upon the success of the care systems in achieving the selected goal. Each measure will be evaluated by participating care systems/clinics. Those that meet the goal rates will be included in the payment calculation. Each care system/clinic is paid for each numerator compliant member, for each measure according to the following requirements:

- The care system/clinic must have achieved selected goal rates for the measure.
- The member must be found to be numerator compliant for the measure.
- The member must have received services during the 2014 calendar year.

Each measure is rated equally and will be paid the same amount per member. There is no disincentive or penalty for participating in the program and not meeting your goals.
In 2014, UCare is using a new methodology to place members on your Action Lists.

UCare will be changing from the assignment model to the Primary Care Clinic (PCC) attribution model. This will provide a more accurate representation of members seen at your clinic.

PCC attribution is an analysis process that assigns a specific Care System and Group Practice to all members of State Public Programs (SPP) according to a set of basic rules.

The attribution process is only conducted on members who participate in SPP.

All Medicare members elect a PCC when they enroll and are assigned accordingly.
UCare's P4P Action Lists

- Action Lists contain the names and contact information for UCare members who may be due for services related to the 2014 P4P measures.

- Quarterly Action Lists are available on the Provider Portal on April 30, July 30, and October 30. UCare will send an e-mail notification to the designated Provider Portal user when Action Lists are posted.

- Clinic staff must register to gain access to UCare's Provider Portal to download quarterly Action Lists.
How UCare's P4P Program Works

- UCare sends an e-mail or letter to the UCare Systems/Clinic groups announcing the 2014 P4P program on 1/21/14. UCare Systems/Clinic groups must Opt-in to participate by 2/28/14 via the P4P website at URL:

  https://forms.ucare.org/onlineforms/P4P/Optin.aspx

UCare's P4P Web Site

- [http://www.ucare.org/providers/Resources-Training/Pages/P4P.aspx](http://www.ucare.org/providers/Resources-Training/Pages/P4P.aspx)
- 2014 P4P Program Measures.
- 2014 P4P Participant Training.
- UCare's P4P program contact info.
Thank you for participating!

If you have any questions, please contact us via e-mail p4pinfo@ucare.org, or call the P4P message line at 612-676-6707 or toll-free at 1-866-243-0762.

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