Independence

PATIENT-FOCUSED CARE PROGRAMS

in Select Metro Service Areas (MSAs)

Providence-New Bedford-Fall River

Rhode Island-Massachusetts

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross and Blue Shield of Rhode Island
Program Name	BCBSRI Shared Savings Program
High-Level Program Description	Aimed at further improving healthcare quality and patient safety while slowing increases in healthcare costs. Providers become eligible to share a percentage of cost savings experienced by their group of patients by achieving best-in-class healthcare quality metrics established by NCQA and managing total cost of care better than the rest of BCBSRI's PCP network.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	• 176,723 • Covers 50% of BCBSRI membership in state
Total Program Participants	• 645 PCPs • 10 Hospitals
Key Providers	Includes RI's 5 largest healthcare systems: Coastal Medical, Care New England, Lifespan, Prospect/CharterCare, University Medicine

KEY PROGRAM FEATURES	
Launch Date	2014
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$10.87
Quality Results	Demonstrates improved performance against standard quality measures compared with rest of network
Cost Results	Demonstrates lower total medical expenses compared with rest of network

Providence-New Bedford-Fall River

Rhode Island-Massachusetts

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross and Blue Shield of Rhode Island
Program Name	BCBSRI Patient-Centered Medical Home Program
High-Level Program Description	Focuses on the promotion of team-based care to achieve the Triple Aim of improved clinical outcomes, reduced cost, and enhanced patient and provider satisfaction. Employs value-based reimbursement strategy rewarding practices for quality improvement and clinical quality outcomes.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	1,300
Total Program Participants	334 PCPs
Key Providers	Coastal Medical, Rhode Island Primary Care; Prospect/CharterCare

KEY PROGRAM FEATURES	
Launch Date	2009
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$5.13
Quality Results	Not available
Cost Results	Not available

Providence-New Bedford-Fall River

Rhode Island-Massachusetts

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross and Blue Shield of Rhode Island
Program Name	BCBSRI Care Transformation Collaborative
High-Level Program Description	Convened by the Rhode Island Health Insurance Commissioner, the Chronic Care Sustainability Initiative – renamed Care Transformation Collaborative in 2015 – provides support from all commercial insurers in Rhode Island. The goal is to provide enhanced quality and coordination of care resulting in improved clinical outcomes, lower costs, and improved member and provider satisfaction.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	23,000
Total Program Participants	577 PCPs
Key Providers	Anchor Medical Associates; University Medicine Foundation; Medical Associates of Rhode Island; South County Hospital Family Medicine; Memorial Hospital Center for Primary Care

KEY PROGRAM FEATURES	
Launch Date	October 2008
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$2.67
Quality Results	Not available
Cost Results	Not available

Boston-Cambridge-Quincy

Massachusetts-New Hampshire

Independence

PROGRAM OVERVIEW	
Blue Plan	BCBS of Massachusetts
Program Name	Massachusetts PPO Payment Reform
High-Level Program Description	Measures PPO providers on meeting targets for a broad set of nationally accepted quality measures.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	N/A
Total Program Participants	• 1,256 PCPs • 5,204 Specialists
Key Providers	N/A

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	New program: results not yet available
Quality Results	New program: results not yet available
Cost Results	New program: results not yet available

Boston-Cambridge-Quincy

Massachusetts-New Hampshire

Independence

PROGRAM OVERVIEW	
Blue Plan	Anthem Blue Cross and Blue Shield
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among accountable care organizations by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	136,825
Total Program Participants	• 722 PCPs • 900 Specialists • 12 Hospitals
Key Providers	First Choice PHO, Catholic Medical Center, Mondadnock Community Health, Frisbie Concord Hospital

KEY PROGRAM FEATURES	
Launch Date	2013
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	$6.62
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Washington-Arlington-Alexandria

DC-Virginia-Maryland-West Virginia

Independence

PROGRAM OVERVIEW	
Blue Plan	Highmark Blue Cross Blue Shield of West Virginia
Program Name	Quality Blue PCMH – West Virginia
High-Level Program Description	Through the PCMH model, physicians take greater accountability in coordinating patient care. Physicians assist patients and families with treatment options and implement shared decision making; implement improved patient education and use of tools such as electronic health records. Program catalyzes increased data sharing.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	61,713
Total Program Participants	472 PCPs
Key Providers	Wedgewood Family Practice; University Physicians & Surgeons; Huntington Internal Medicine Group; Mid Ohio-Valley Medical Group; University Healthcare Physicians

KEY PROGRAM FEATURES	
Launch Date	October 2012
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	September 2014 measurement period results show 15.5% increase in quality, decreasing ER utilization for all populations (adult commercial 4.2% lower; pediatric 11.5% lower; Medicare Advantage 4.2% lower). Rates for inpatient surgical & medical utilization decreasing for all populations.
Cost Results	September 2014 measurement period results show lower cost trend (4.7%) compared to the market trend (4.8%).

New York-Newark-Jersey City

New York-New Jersey

Independence

PROGRAM OVERVIEW	
Blue Plan	Horizon Blue Cross Blue Shield of New Jersey
Program Name	Horizon BCBSNJ ACO
High-Level Program Description	Aimed at partnering with healthcare systems to transform and improve NJ's healthcare delivery system, as well as collaborate and develop solutions to create high quality care, improved patient experience, and improved affordability.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	262,336
Total Program Participants	1,268 PCPs
Key Providers	Summit Medical Group; Union County; Hackensack ACO; Bergen County; Hunterdon Healthcare; Atlanticare; AHS ACO

KEY PROGRAM FEATURES	
Launch Date	2014
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	Improvements in all quality metrics in ACO (vs. non-VBP population) include a 4.3% breast cancer screening improvement; 5.7% colorectal cancer screening improvement; 4.9% diabetes HBA1C (<8.0%) improvement; 4.2% diabetes LDL-C screening improvement; 1.5% LDL-C screening improvement; and 13.9% pneumonia vaccination improvement
Cost Results	Not Available

New York-Newark-Jersey City

New York-New Jersey

Independence

PROGRAM OVERVIEW	
Blue Plan	Horizon Blue Cross Blue Shield of New Jersey
Program Name	Horizon BCBSNJ PCMH
High-Level Program Description	Aimed at partnering with PCPs to transform and improve NJ's healthcare delivery system, as well as collaborate and develop solutions to create high quality care, improved patient experience, and improved affordability.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	273,710
Total Program Participants	1,181 PCPs
Key Providers	Advocare; Vanguard; Cooper; RWJ Partners

KEY PROGRAM FEATURES	
Launch Date	2014
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	Improvements in all quality metrics in ACO (vs. non-VBP population) include a 2.3% breast cancer screening improvement; 8.6% colorectal cancer screening improvement; 6.0% diabetes HBA1C (<8.0) improvement; 7.5% diabetes LDL-C screening improvement; 7.5% LDL-C screening improvement; and 15.2% pneumonia vaccination improvement
Cost Results	Not Available

New York-Newark-Jersey City

New York-New Jersey

Independence

PROGRAM OVERVIEW

Blue Plan	Horizon Blue Cross Blue Shield of New Jersey
Program Name	Horizon Strategic Alliance Program
High-Level Program Description	Not Available

KEY PROGRAM FEATURES

Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	ACO

MEMBERSHIP/PROVIDER PARTICIPANTS

Attributed Members	Not Available
Total Program Participants	Includes over 6,000 providers across the state
Key Providers	Not Available

RESULTS/SAVINGS

Savings (PaMPM)	New program: program results not yet available
Quality Results	6% higher rate of diabetes control; 7% higher rate of cholesterol control; 8% higher rate of colorectal cancer screenings; 3% higher rate of breast cancer screenings (as compared to members served by traditional medical practices).
Cost Results	New program: program results not yet available

New York-Newark-Jersey City

New York-New Jersey

Independence

PROGRAM OVERVIEW	
Blue Plan	Empire Blue Cross and Blue Shield
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among accountable care organizations by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	306,416
Total Program Participants	3,359 PCPs
Key Providers	Health Quest Medical Practice; St. Peters Health Partners; Mount Kisco Medical Group; Advantage Care Physicians; Bon Secour Charity Health Care

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	$1.28
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

New York-Newark-Jersey City

New York-New Jersey

Independence

PROGRAM OVERVIEW	
Blue Plan	Empire Blue Cross and Blue Shield
Program Name	Comprehensive Primary Care Initiative
High-Level Program Description	A four-year, multi-payer initiative designed to strengthen primary care. Offers population-based care management fees and shared savings opportunities to participating PCPs to support 5 core "Comprehensive" functions: (1) risk-stratified care management, (2) Access and continuity, (3) Planned care for chronic conditions and preventive care, (4) patient and caregiver engagement, and (5) coordination of care across the medical neighborhood.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	23,863
Total Program Participants	• 203 PCPs • 7 Hospitals
Key Providers	Albany Medical College Physicians Group; St. Peters Health Partners; Westchester Health Associates; Capital Care; Community Care, Clifton Park

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$1.28
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending

New York-Newark-Jersey City

New York-New Jersey

Independence

PROGRAM OVERVIEW	
Blue Plan	Empire Blue Cross and Blue Shield
Program Name	Enhanced Personal Health Care, Freestanding Patient Centered Care
High-Level Program Description	Largest provider collaboration effort in NY state. Practices implement key capabilities (e.g. developing and using patient registries to identify gaps in care and monitor patients' long-term care, providing self-management education, and support patients with chronic conditions).

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	388,527
Total Program Participants	• 6,635 PCPs • 2,524 Specialists • 30 Hospitals
Key Providers	WestMed; Montefiore Medical Center; Beacon IPA; Crystal Run Health Care; Mt. Sinai Hospita

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$1.28
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Miami-Fort Lauderdale-West Palm Beach

Florida

Independence

PROGRAM OVERVIEW

Blue Plan	Florida Blue
Program Name	Baptist Health South Florida Accountable Cancer Care Program
High-Level Program Description	Focused on providing quality care for oncology patients (eligible population: patients with breast cancer, lymphomas, respiratory, and reproductive cancers) in South Florida while improving cost outcomes. The program focuses on evidence-based treatment regimens, advance care planning, and the avoidance of unnecessary ER visits and hospital admissions. This program is the first oncology-focused ACO in the nation and optimizes services delivered at the oncology office rather than the hospital, where care can be more personalized, affordable, and comfortable for patients.

MEMBERSHIP/PROVIDER PARTICIPANTS

Attributed Members	243
Total Program Participants	• 51 Specialists • 9 Hospitals
Key Providers	Baptist Health Medical Group; Baptist Hospital; South Miami Hospital; Homestead Hospital; West Kendall Baptist Hospital

KEY PROGRAM FEATURES

Launch Date	2012
Disease/Condition Focus	Cancer
Program Type	ACO

RESULTS/SAVINGS

Savings (PaMPM)	$104.88
Quality Results	Each year of the three-year agreement, Baptist Health South Florida has achieved each quality gate metric.
Cost Results	Not available

Miami-Fort Lauderdale-West Palm Beach

Florida

Independence

PROGRAM OVERVIEW	
Blue Plan	Florida Blue
Program Name	Florida Blue Patient-Centered Medical Home Program
High-Level Program Description	Providers must score same or better than peers in NCQA and HEDIS clinical quality measures to be eligible for financial rewards. Measures include adult and pediatric specialties for preventive screenings and chronic disease management. Physicians scoring worse than their peers on quality metrics will have the opportunity to identify and subsequently close outstanding care gaps through Florida Blue's electronic portal, the Quality and Efficiency Reporting Portal.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	397,593
Total Program Participants	2,200 PCPs
Key Providers	Not available

KEY PROGRAM FEATURES	
Launch Date	October 2011
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$9.00
Quality Results	Not available
Cost Results	Not available

Detit-Warren-Ann Arbor

Detit-Warren-Ann Arbor

Michigan

Independence

PROGRAM OVERVIEW

Blue Plan	Blue Cross Blue Shield of Michigan
Program Name	Organized Systems of Care
High-Level Program Description	Focuses on assisting providers in development of their population management infrastructure. OSCs are similar in model to ACOs, where a community of caregivers accepts accountability for a specific patient population, but have a broader focus on creating healthcare systems that work for patients. Program consists of 39 models statewide.

MEMBERSHIP/PROVIDER PARTICIPANTS

Attributed Members	1,245,000
Total Program Participants	• 4,442 PCPs • 11,000 Specialists
Key Providers	University of Michigan; Royal Oak; Henry Ford; Spectrum Health; Bronson

KEY PROGRAM FEATURES

Launch Date	July 2015
Disease/Condition Focus	All conditions
Program Type	ACO

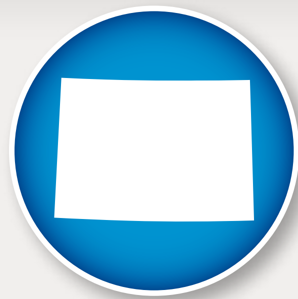
RESULTS/SAVINGS

Savings (PaMPM)	$6.65
Quality Results	Results are pending implementation of population management technology.
Cost Results	Implementation of health information technology expected to lower cost growth. Results not available to date.

Denver-Aurora-Lakewood

Colorado

Independence



PROGRAM OVERVIEW

Blue Plan	Anthem Blue Cross and Blue Shield of Colorado
Program Name	Comprehensive Primary Care Initiative
High-Level Program Description	Aims to strengthen primary care system while achieving better healthcare and lower costs through improvement. Includes quality component and meaningful use standards

MEMBERSHIP/PROVIDER PARTICIPANTS

Attributed Members	39,770
Total Program Participants	285 PCPs
Key Providers	Associates in Family Medicine PC; Boulder Medical Center; Poudre Valley Medical Group; Colorado Springs Health Partners; Boulder Community Hospital

KEY PROGRAM FEATURES

Launch Date	2012
Disease/Condition Focus	All conditions
Program Type	PCMH

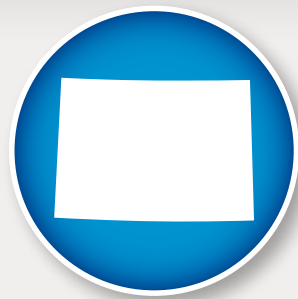
RESULTS/SAVINGS

Savings (PaMPM)	$6.62
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Denver-Aurora-Lakewood

Colorado

Independence



PROGRAM OVERVIEW	
Blue Plan	Anthem Blue Cross and Blue Shield of Colorado
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among accountable care organizations by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	54,557
Total Program Participants	• 1,783 PCPs • 3 Hospitals
Key Providers	Associates in Family Medicine PC; Boulder Medical Center; Poudre Valley Medical Group; Colorado Springs Health Partners; Boulder Community Hospital

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$6.62
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Los Angeles-Long Beach-Anaheim

California

Independence

PROGRAM OVERVIEW

Blue Plan	Anthem Blue Cross of California
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among accountable care organizations by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS

Attributed Members	604,326
Total Program Participants	• 7,194 PCPs • 4,937 Specialists • 2 Hospitals
Key Providers	Sharp Rees-Stealy; Sante, Fresno, Madera, & King Counties; SeaView; HealthCare Partners LA; Sharp Community Medical Group

KEY PROGRAM FEATURES

Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS

Savings (PaMPM)	$3.30
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

San Francisco-Oakland-Hayward

California

Independence

PROGRAM OVERVIEW	
Blue Plan	Anthem Blue Cross of California
Program Name	Enhanced Personal Health Care for Primary Care
High-Level Program Description	Aims to support patient-centered care among patient-centered medical homes by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	64,292
Total Program Participants	311 PCPs
Key Providers	Visalia Medical Clinic; Redding Family Medical Group; Lassen Medical Group; Northern California Medical Associates; Sonoma County; Napa Valley Family Medical Group

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$3.30
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Seattle-Tacoma-Bellevue

Washington

Independence

PROGRAM OVERVIEW

Blue Plan	Regence BlueShield
Program Name	Regence Total Cost of Care
High-Level Program Description	Comprehensive program focusing on the Triple Aim. Regence partners with medical groups and health systems that have a culture of quality and performance improvement to align reimbursement incentives. Providers agree to "beat the market trend" in total cost of care. If additional quality and patient experience benchmarks are also reached, providers will receive a portion of the shared savings.

MEMBERSHIP/PROVIDER PARTICIPANTS

Attributed Members	129,721
Total Program Participants	Not Available
Key Providers	Not Available

KEY PROGRAM FEATURES

Launch Date	2013
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS

Savings (PaMPM)	Not Available
Quality Results	Regence's program design is built on a foundation of improved care coordination and management. Provider partners deliver better population health, without sacrificing improved individual care, allowing those who receive care by a participating provider to obtain better outcomes and a better health care experience.
Cost Results	Not Available

Seattle-Tacoma-Bellevue

Washington

Independence

PROGRAM OVERVIEW	
Blue Plan	Premera Blue Cross
Program Name	Global Outcomes Contracting
High-Level Program Description	Highly scalable program design. Includes HEDIS/NCQA quality metrics for chronic care management, preventive care, and avoidable utilization.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	215,000
Total Program Participants	• 3,000 PCPs • 7,000 Specialists
Key Providers	The Polyclinic; The Everett Clinic; Edmonds Family Medicine; Rockwood Clinic

KEY PROGRAM FEATURES	
Launch Date	2013
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	$3.77
Quality Results	Program has demonstrated utilization and chronic condition improvements. All participating providers have been effective at managing diabetes care.
Cost Results	$24.2 million in total program savings, 3-5% lower patient cost

Minneapolis-St. Paul-Bloomington

Minnesota-Wisconsin

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross Blue Shield of Minnesota
Program Name	Aligned Incentives Contracts (AIC)
High-Level Program Description	Collaboration with integrated care delivery systems that align hospital and physician payments with performance and outcomes. Value is defined as lowering the historical cost-of-care trend while making measurable improvements in quality and effectiveness of care. Core principles include: longer-term contract duration (typically 3 years), deemphasized FFS, financial incentive for outcome-based quality improvement, and shared incentives for reducing total cost.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	443,432
Total Program Participants	• 7,452 PCPs • 8,844 Specialists • 111 Hospitals
Key Providers	Allina; Fairview; HealthEast; Entira; North Memorial

KEY PROGRAM FEATURES	
Launch Date	2011
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	In 2014, AIC continues to show positive impact on key quality metrics focused on improving health outcomes and overall patient experience of care.
Cost Results	Not Available

Minneapolis-St. Paul-Bloomington

Minnesota-Wisconsin

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross Blue Shield of Minnesota
Program Name	Patient-Centered Medical Home
High-Level Program Description	Requires participants to be certified as a Health Care Home through the Minnesota Department of Health within the first year of the three-year program. Certification requires modeling an approach to primary care that supports value-based care.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	443,432
Total Program Participants	• 7,452 PCPs • 8,844 Specialists • 111 Hospitals
Key Providers	Mankato Clinic; Affiliated Community Medical Center; Minnesota Health Network; St. Luke's

KEY PROGRAM FEATURES	
Launch Date	2013
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	Not Available
Cost Results	Not Available

Chicago-Naperville-Elgin

Illinois-Indiana-Wisconsin

Independence

PROGRAM OVERVIEW	
Blue Plan	Anthem Blue Cross and Blue Shield of Wisconsin
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among accountable care organizations by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	443,432
Total Program Participants	• 1,200 PCPs • 1,800 Specialists • 20 Hospitals
Key Providers	Aurora Health System; Bellin ThedaCare Healthcare Partners; ProHealth Solutions

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	$6.62
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Chicago-Naperville-Elgin

Illinois-Indiana-Wisconsin

Independence

PROGRAM OVERVIEW	
Blue Plan	Anthem Blue Cross and Blue Shield of Illinois
Program Name	Accountable Care Organizations
High-Level Program Description	Incentives structured to focus on delivering more services to patients in greatest need. Includes measures such as breast cancer screening, cervical cancer screening, colorectal cancer screening, childhood immunization status (MMR), HbA1c testing, HbA1c control (<8%), and blood pressure control <140/90 mmHg.

MEMBERSHIP/PROVIDER PARTICIPANTS		
Attributed Members	451,134	
Total Program Participants	• 3,459 PCPs	• 49 Hospitals
Key Providers	Advocate Physician Partners ACO; Alexian Brothers Clinically Integrated Network ACO; Dupage Medical group; Edward Elmhurst Health; Fox Valley Medicine; Independent Physicians' ACO of Chicago; Kane County Independent Physicians Association ACO; NorthShore Physician Associates ACO; Northwest Community Health System; OSF Healthcare System ACO; Presence Health Partners ACO; Unity Point Health Partners	

KEY PROGRAM FEATURES	
Launch Date	2014
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	Not Available
Cost Results	Not Available

Omaha-Council Bluffs

Nebraska-Idaho

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross Blue Shield of Nebraska
Program Name	Primary Blue
High-Level Program Description	Focuses on quality of care and outcomes for diabetes, vascular disease, and hypertension. Promotes proactive management of chronic conditions through improved access to preventive care and care coordination. As of 2015, focuses more directly on the Triple Aim.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	96,793
Total Program Participants	476 PCPs
Key Providers	UNMC Physicians; Clarkson Family Medicine; Children's Physicians; Methodist Physicians; Boys Town Pediatrics

KEY PROGRAM FEATURES	
Launch Date	2009
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	The program has shown correlated lower rates of hospitalizations and higher patient satisfaction.
Cost Results	Not Available

Omaha-Council Bluffs

Nebraska-Idaho

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross Blue Shield of Nebraska
Program Name	South East Rural Physicians Alliance (SERPA)
High-Level Program Description	Centered on improving quality of care provided to patients in rural areas of Nebraska. All physicians are independent; BCBS Nebraska believes this gives SERPA physicians the freedom to practice medicine with the best interest of their patients in mind.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	18,000
Total Program Participants	78 PCPs
Key Providers	Lincoln Family Wellness; McCook Clinic; York Medical Clinic; Lifecare Family Medicine of Bellevue; Family Practice Associates

KEY PROGRAM FEATURES	
Launch Date	2014
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	Not Available
Quality Results	Not Available
Cost Results	Not Available

Atlanta-Sandy Springs-Roswell

Georgia

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross and Blue Shield of Georgia
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among patient-centered medical homes by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	27,111
Total Program Participants	• 245 PCPs • 2,005 Specialists • 5 Hospitals
Key Providers	Emory Healthcare Network

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS	
Savings (PaMPM)	$6.62
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Atlanta-Sandy Springs-Roswell

Georgia

Independence

PROGRAM OVERVIEW	
Blue Plan	Blue Cross and Blue Shield of Georgia
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among accountable care organizations by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	30,755
Total Program Participants	• 1,016 PCPs • 134 Specialists
Key Providers	Memorial Health University Physicians; Phoebe Physicians Group; St. Francis Columbus Clinic; Athens Regional Physician Services; Emory Healthcare

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$6.62
Quality Results	Comprised of 32 quality metrics. Members attributed to BDTC providers had 7.8% fewer acute admissions and ER visits. BDTC providers showed better outcomes: 9.6% in pediatric prevention, 4.8% in annual monitoring of medications, 4.3% in diabetes care, 4.3% in cancer screenings, 3.9% in acute and chronic conditions.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Hartford-West Hartford-East Hartford

Connecticut

Independence

PROGRAM OVERVIEW	
Blue Plan	Anthem Blue Cross and Blue Shield of Connecticut
Program Name	Enhanced Personal Health Care
High-Level Program Description	Aims to support patient-centered care among patient-centered medical homes by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS	
Attributed Members	128,830
Total Program Participants	• 1,282 PCPs • 319 Specialists
Key Providers	New Haven Community Medical Group; Northeast Medical group; Medical Professional Services; Eastern Connecticut Health Network; Soundview Medical

KEY PROGRAM FEATURES	
Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	PCMH

RESULTS/SAVINGS	
Savings (PaMPM)	$6.62
Quality Results	Year one results show a 22% improvement in prevention measures; 39% reduction in Ambulatory Sensitive Admits; and 12% reduction in Avoidable ER visits.
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.

Hartford-West Hartford-East Hartford

Connecticut

Independence

PROGRAM OVERVIEW

Blue Plan	Anthem Blue Cross and Blue Shield of Connecticut
Program Name	Enhanced Personal Health Care, Freestanding Patient Centered Care (FPCC)
High-Level Program Description	Aims to support patient-centered care among accountable care organizations by rewarding providers for high quality, cost-effective care, and providing clinicians with the tools and support needed to achieve these goals. Program is comprised of 32 measures, including acute admissions to the ER, annual monitoring of medications, diabetes care, and cancer screenings.

MEMBERSHIP/PROVIDER PARTICIPANTS

Attributed Members	142,116
Total Program Participants	• 123 PCPs • 807 Specialists
Key Providers	ProHealth; St. Francis Health Partners; Hartford Hospital Systems; St. Mary's Hospital & PHO

KEY PROGRAM FEATURES

Launch Date	2015
Disease/Condition Focus	All conditions
Program Type	ACO

RESULTS/SAVINGS

Savings (PaMPM)	$6.62
Quality Results	Year one results show a 22% improvement in prevention measures; 39% reduction in Ambulatory Sensitive Admits; and 12% reduction in Avoidable ER visits..
Cost Results	Members attributed to BDTC providers had 3.3% lower costs for ER visits and lower outpatient spending.