

By Physicians, For Physicians

To All Shore Quality Partners Members,

We are pleased to provide our newsletter for April that continues to update the growth and success of Shore Quality Partners.

SQP Networking Dinner: SQP is hosting a dinner event on May 14 at Greate Bay Country Club from 6-7:30pm for potential new Primary Care Physician members. You are welcome to attend the event to network with these physicians and share the value of SQP. To RSVP, please call Michelle Smith (609) 365-6260.

Diabetes Care Coordination Team Success Stories:

The SQP Diabetes Care Coordination Team has been able to provide proper diabetes education on an individual and specialized manner for a variety of patients, whether they are newly diagnosed, have existing diabetes, retired, working night shift or juggling multiple jobs. There are currently over 70 SQP patients enrolled in the Care Coordination Program. All of the patients seen thus far have been incredible. Some patients have come with little to no knowledge at all of the disease process and how to control their diabetes and leave feeling empowered and ready to make changes.

- In particular, a night shift worker who would fast throughout his shift at work, was chronically experiencing large spikes of highs and lows in his sugars, causing his HbA1c level to be over 9.0%. This patient was encouraged to introduce two healthy snack options throughout his shift consisting of a carbohydrate and a protein. Upon this patient's follow up, he reported 'I was shocked at how my levels became normal.' His sugars have been consistently between 95-120 mg/dL throughout the duration of the day and evening.
- With a newly diagnosed diabetic, who leads a busy schedule due to his demanding job as a lawyer, he had a basic understanding of diabetes but ultimately required improvement on his dietary intake. After reviewing nutrient dense and diabetic friendly foods, this patient began to keep a food journal, in which he tracked all of his foods and fluids, blood sugars and the amount of carbohydrates he had at each meal. At his follow up appointment, he reported feeling more energized, noticed he was beginning to lose weight and felt the healthier lifestyle he was leading was not as difficult as he originally thought.
- Another newly diagnosed diabetic came in with an HbA1c over 13%, he was initially started on insulin. He had very minimal knowledge of the disease process and the proper foods to eat. He brought his spouse to help him navigate through the new lifestyle changes they would be making together. The patient was educated on proper nutrition and how to use his glucometer and inject his insulin. The patient has returned for multiple follow up appointments to continue to improve his eating habits, physical activity and ask questions as they arise. His insulin dosage has decreased, his blood sugars have stabilized between 90-100 mg/dL, and he has noticed an increase in his mood and feels more energetic.

To consult with the Care Coordination Team, please fill out and fax the Care Coordination Referral Form. The form is attached to this email, and can also be found on our website home page <http://shorequalitypartners.com/>.

Diagnosis Coding of Visit Claims for Primary Care Practices:

Our Shared Savings Opportunity contract with Horizon BC/BS of NJ is based on the presumption that SQP practices can outperform the "control group," that is, non-SQP practices in Atlantic County. The measure that is used in this determination is the average Per Member Per Month (PMPM) expenditure by Horizon to our attributed patients divided by the Horizon calculated "Risk Score" (RS), this yields the "adjusted PMPM." For each practice (that is, a practitioner or group of practitioners that submit bills to Horizon based on one Tax ID number) the PMPM is a simple calculation, Gross dollars paid out by Horizon divided by the Horizon determined "risk score" (RS) for that patient. So, a higher RS per patient leads to a lower adjusted PMPM, and a better opportunity for each practitioner, each practice and SQP as a whole to achieve the differential dollar amount compared to the control group that leads to the Shared Savings distribution. We have discovered that the RS has several factors in the calculation. One of the more highly weighted factors is based on the ICD-9 diagnosis codes that are submitted with each patient care claim to Horizon. It is a simple fact, the more codes and the higher the degree of complexity of the codes leads to a higher RS, and then that results in a lower adjusted PMPM expense. Based on this analysis, SQP is launching our Diagnostic Coding Optimization Project. More details and a diagnosis coding tip sheet will be distributed soon in a separate announcement.

Shore Select Payments:

Effective 1/1/15, Shore Select Copays reimbursements have changed. There is no longer any "discount cards" in effect for in-office lowering of the printed copay. **SQP will no longer reimburse any missing claims submitted after May 15 2015.** 2014 copay reimbursements for October, November, and December must be submitted by May 15 2015 to qualify for reimbursement. If you have any questions, please call (609) 365-6260.

With Best Regards,

Steven P. Nachtigall, M.D.

Chairperson on behalf of the Board of Directors of SQP