

Physician Integrated Network (PIN) Demonstration Phase: Funding Principles and Model

Our Vision

“Quality primary care is available to all Manitobans; through networked Primary Care Physicians in collaboration with other providers.”

Manitoba





PIN Funding Overview

- For the Demonstration Phase*, there are three parts to the PIN funding being provided to the participating Clinics:
 - Information Management
 - Plan Implementation
 - Quality Targets
- Funds will be payable to the Demonstration Sites based on a Service Purchase Agreement. Internal allocation of the funds are at the discretion of the Clinic management to meet Deliverables.

**Important: There are no commitments or expectations regarding this type of funding model continuing beyond the demonstration period.*



PIN Funding: Information Management

Objective:

- Obtain the data on quality care being provided by the Demonstration Sites and the Control Site.

This funding will be provided to the three physician groups participating as Demonstration Sites and the one physician group participating as a Control Site. Each physician group will require funding to work with the EMR vendors to design and test changes to data collection and extraction, as well as to engage, train and coach physicians to ensure the quality of the information.

The data extracted from the Physician Groups' EMRs will enable the Monitoring and Evaluation team to understand the initial and ongoing levels of patient care as they relate to the Indicator Clusters.



PIN Funding: Information Management

Funding Component	Rationale	Deliverable(s)
Information Management	<ul style="list-style-type: none">• Identification of required changes in clinic's information management practices and workflow• Participation in development of specifications for EMR changes• Testing of EMR changes	<ul style="list-style-type: none">• Procedures manual• Training provided to physicians and staff• Testing conducted and results summarized in signed off test report• Data extract file defined to support measurement of all indicators as outlined in the Evaluation Plan (file to be provided at 3 month intervals)• Information management monitoring plan



PIN Funding: Information Management

Total Funding for this Component: \$350,000

Process Administration: \$5,000 per Clinic

Scaled Participation: \$5,000 (maximum) per family physician*

- Funding allocated per Clinic will be based on the total number of participating physicians at the 3 Demonstration Sites and 1 Control Site.

* A minimum of 5 to the maximum number of family physicians as identified through the development of the individual Practice Profiles.



PIN Funding: Plan Implementation

Objective:

To support clinics in achieving practice changes that will address the four PIN Objectives:

- Improve access to primary care;
- Improve Primary Care Providers' access to and use of information;
- Improve the working environment for all primary care providers;
- Demonstrate high quality primary care with a specific focus on Chronic Disease.

This funding will be provided to the three Physician Groups participating as Demonstration Sites. Each Physician Group will require funding to support their clinics in implementing their Plan.

The Plan should support the Clinics' attainment of quality targets as outlined in the Evaluation Plan. This funding will also be used to support change management costs within the Clinics.



PIN Funding: Plan Implementation

Funding Component	Rationale	Deliverable(s)
Plan Implementation	<ul style="list-style-type: none">• Implementation of and consistent use of clinical practice changes identified in the clinic's plan (4 payments)	<ul style="list-style-type: none">• Implementation Report provided by clinic• Evidence of Implementation• Participation in provider and patient surveys/interviews• Provider participation in:<ol style="list-style-type: none">1. Site visits2. Status Reports



PIN Funding: Plan Implementation

Total Funding for this Component: \$370,000

Process Administration: \$40,000 per Clinic

Scaled Participation: \$5,000 (maximum) per family physician*

- Funding allocated per Clinic will be based on the total number of participating physicians at the 3 Demonstration Sites.

* A minimum of 5 to the maximum number of family physicians as identified through the development of the individual Practice Profiles.₈




PIN Funding: Quality Targets

Objective:

To provide financial incentives based on quality targets.

- This funding will be provided to the three Physician Groups participating as Demonstration Sites.
- The amount of funding provided will be determined based on the Clinic's attainment of quality targets as defined by the Evaluation Plan.



PIN Funding: Quality Targets

Funding Component	Rationale	Deliverable(s)
Quality Target Based Funding	<ul style="list-style-type: none">• Demonstrated quality of care in the two Indicator Clusters (e.g. Diabetes & Hypertension)	<ul style="list-style-type: none">• Target-level Achievement



PIN Funding: Quality Targets

Total Funding for this Component: \$420,000

- Divided by the total number of participating physicians*, and in consideration of 2 Indicator Clusters (weighted equally).
- While feedback will be provided at 3-month intervals, the Quality Target Funding itself will only be paid out at the end of the Demonstration Phase. The attainment of the full Quality Target amount is only achievable through meeting the 90-100 per cent range for that particular Indicator Cluster; otherwise amounts will be paid out on the following ratio:

Quality Target-Based Funding Scale

Target Range	20% - 39%	40% - 59%	60% - 79%	80% - 89%	90% -100%
Funding % of total	50%	65%	80%	95%	100%

* A minimum of 5 per clinic to the maximum number of family physicians as identified through the development of the individual Practice Profiles. 11



PIN Funding Timeline

Funding Breakdown:

- April '07: Information Management Funding (100%)
- June '07: Plan Implementation Funding (25%)
- September '07: Plan Implementation Funding (25%)
- December '07: Plan Implementation Funding (25%)
- March '08: Plan Implementation Funding (25%)
- June '08: Quality Target-Based Funding (50%-100%)



Funding Model: Future Directions

- Dr. Dominika Wranik, (Ph.D Health Economics) has been contracted through PEEK to produce two reports on quality measure based funding formulas.
- The objectives are:
 - Gather evidence of quality based funding models
 - Identify key components of quality based funding models including:
 - quality indicators and targets
 - Weighted indices (E.g. cost avoidance impacts, number of physician participants, numbers of patients)
 - Determination of funding allocation and distribution within physician groups.
- Dr. Wranik will be presenting her findings on April 16th and 17th, 2007 to the PIN/MAPC Advisory Committees and Manitoba Health Executive Management Committee.
- The recommendations from the Reports, in conjunction with the evaluation of the PIN Demonstration Phase Funding Model, will be used to inform the development of a sustainable quality-based blended funding model for primary care renewal.

Physician Integrated Network (PIN)

Questions?

PIN Project Team

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