



FOR IMMEDIATE RELEASE  
March 17, 2009

For more information, contact:  
Greg Bury, Medica  
952-992-8437  
E-mail: [greg.bury@medica.com](mailto:greg.bury@medica.com)

## **MEDICA PAY FOR PERFORMANCE PROGRAM REWARDS PROVIDERS MORE THAN \$3 MILLION**

Medica in the past year has paid more than \$3 million to providers in its network for improvements in the clinical care provided to the health plan's members. The payments are associated with improvements to clinical outcomes related to Medica's Pay for Performance program during the 2007 calendar year. The reward payments are over and above the reimbursements Medica pays to providers based on claims for providing care to its members.

The program is designed to assess the efficiency and quality related to certain areas of clinical care. Measurements assess how well chronic conditions like asthma and diabetes are managed, and the rate at which routine preventive services and exams are performed by providers participating in the program. Additional incentives reward providers driving care improvements and achieving evidence-based outcomes.

### **Clinical Areas of Focus**

For 2007, the clinical component of Medica's Pay for Performance program focused on asthma, Chlamydia screening, diabetes, generic drug prescribing, well-child examinations, childhood immunizations, mammography, Pap tests as well as participation in Medica's high tech imaging program. To qualify for a Pay for Performance payout, for example, a provider participating in diabetes management would need to show an improvement in the number of members with diabetes who met criteria for optimally managed care. Optimally managed care for diabetics focuses on five treatment goals that, when achieved together, represent the highest standard for managing diabetes. Reaching all five goals greatly reduces a patient's risk for the cardiovascular problems associated with diabetes. The goals are: blood sugar that is under control, blood pressure in the normal range, healthy cholesterol levels, daily aspirin use for persons ages 18-75, and a tobacco-free lifestyle. Similar standards are used to measure quality and efficacy in other areas of care in the program.

Altogether, more than \$2,207,476 has been sent to providers who participated in the clinical programs.

### **Care Improvements**

Medica also paid \$915,500 to providers for developing clinical practices that result in improved care and have evidence-based outcomes. Care improvement payments were made to providers through the Medica Raising the Bar Innovation Awards and its Clinic-Based Chronic Care Management programs. Raising the Bar Innovation Awards recognize the work of provider groups — from single-site practices to healthcare systems — that are implementing unique changes that improve patient care and have proven results, through measures of clinical outcomes or effectiveness. Clinic Based Chronic Care Programs focus on the whole person who has or is at risk for a chronic disease, taking into account such things as lifestyle, prevention and physical and behavioral health. Proven behavior change methods are used and each person's level of engagement is determined by their desire to work on changes in behavior that will improve their health or lower their risk of disease. News releases about those programs are available at: <http://www.medica.com/C12/NewsReleases/default.aspx>.

“Medica’s Pay for Performance program demonstrates the high value we place on improving the care delivered to our members,” said Charles Fazio, MD, Medica’s chief medical officer. “It shows that when we focus on the right care at the right time and place we can achieve outcomes that are better for patients, have lower cost and stronger partnerships between Medica and our provider network. We are delighted to provide incentives when everyone benefits.”

### **About Medica**

Serving more than 1.3 million members, Medica is a health insurance company headquartered in Minneapolis and active in the Upper Midwest. The non-profit company provides health care coverage in the employer, individual, Medicaid, Medicare and Medicare Part D markets in Minnesota and a growing number of counties in North Dakota, South Dakota and Wisconsin. Medica also offers national network coverage to employers who also have employees outside the Medica regional network.

Medica has the highest accreditation status, Excellent, from the National Committee for Quality Assurance (NCQA®) for its Minnesota Medicaid HMO plans and commercial health plans in Minnesota and North Dakota. Medica’s vision is to become the community’s health plan of choice, trusted for its integrity, respected for its service, and admired for its commitment to innovation and efficiency.

###