

Physicians Advocacy Institute, Inc.

January 2008

CME VIDEO FOR PHYSICIANS: “UNDERSTANDING EPISODES OF CARE.”

In June 2007, the Physicians Advocacy Institute, Inc., (PAI) held a workshop for Federation staff entitled “Understanding Episodes of Care.” The purpose of this workshop was to educate the Federation about how health insurers use Episode of Treatment Groupers, known as ETGs, to rate physicians on cost of care measures. This workshop brought together national experts to highlight the methodology underlying how ETGs are derived and what physicians need to know in order to combat unfair and inaccurate ratings of physicians by health plans using ETGs.

The PAI is pleased to offer state and county medical associations a link to a CME accredited video with accompanying workbook for this seminar. In addition, you will all be mailed a DVD for downloading to your own state medical association web site. Physicians will be able to view this CME accredited video over the internet or on DVD.

This video is intended to reach the widest possible audience of physicians in order to educate physicians about the intricacies of this latest methodology that rates physicians’ “efficiency,” most commonly known as “cost of care.” This video defines pertinent terminology and explains how the ETG methodology works. After completing this course, it is anticipated that physicians will be armed with the information they need to engage health plans in meaningful dialogue about the quality of care decisions and advocacy that physicians undertake on behalf of their patients.

All practicing physicians and their practice staff will benefit from the technical and practical information contained on this video.

PAI is a not-for-profit 501(c)(6) advocacy organization established in 2006 with funds from the Multi-District Litigation class action settlements against major national for-profit health insurers. The PAI’s primary mission is to ensure compliance with the settlements and to undertake special projects to guarantee the viability of physicians’ medical practices and the ability of physicians to deliver quality patient care. Any questions about this video should be directed to Mary Jo Malone, Executive Vice President and CEO of the PAI by e-mail: maryjomalone@sbcglobal.net.

Accreditation

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint partnership of Texas Medical Association and Physicians Advocacy Institute, Inc. The Texas Medical Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

Hour Designation

The TMA designates this educational activity for a maximum of 3 *AMA PRA Category 1 Credits*[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Learning Objective

Upon completion of this activity, the participant should be able to:

- Define terminology involved in “episodes of care,” as currently defined by those deploying the methodology and software to evaluate physician “efficiency.”
- Explain how the methodology works. This involves many inputs and outputs of “efficiency” as defined by health plans. Physicians must understand the intricacies of formulas and health plan data that is encapsulated in claims data used to derive the ratings. This particularly means that physicians must learn the shortcomings of using claims data alone for such evaluations.
- Engage health plans in a meaningful dialogue related to physicians’ patient population and the necessity for risk adjustment to take into account sicker patients or special needs assessments of physicians’ patient populations.
- Defend their quality of care decisions and patient advocacy. Physicians can demand information and due process from health plans but only if they are armed with the knowledge to do so.

Faculty Credentials: Faculty credentials are presented in the accompanying handbook and are summarized below:

Robert A. Greene, MD, FACP, Co-founder, CEO and Chief Medical Officer of Focused Medical Analytics through December 31, 2007 and at the time of video production.

Effective January, 2008, Dr. Greene is the Vice President of Clinical Analytics for UnitedHealthcare, Minnetonka, Minnesota.

Dr. Greene is on three national expert panels on physician performance measurement (AQA Physician Measurement Work Group, AHRQ Technical Expert Panel on Efficiency Measurement, and Symmetry (ETG) Medical Advisory Board). A practicing internist since 1989, Dr. Greene’s career began with an electrical engineering degree from Harvard. His work was helping design the early network computers for the ARPAnet, the direct precursor of the Internet. He became involved with managed care administration in 1992, serving as Finance Committee chair of the Rochester (NY) Individual Practice Association (RIPA), a 3,700 member IPA and since 2002 as its associate medical director.

Gregory H. Partridge, Co-founder and Vice President for Technical Affairs, Focused Medical Analytics. Mr. Partridge has over 25 years experience working in information systems of numerous health care organizations. He has had a variety of roles, from Emergency Room Technician, programmer, project manager, to business analyst. Since 1995, he has been the senior medical business analyst for the Rochester (NY) Individual Practice Association (RIPA). Over the last ten years, Mr. Partridge has spent a great deal of time on analysis of physician data to identify action items. In 2005, Mr. Partridge and Dr. Greene founded Focused Medical Analytics, LLC., in order to bring their tools to a wider audience.

Faculty Continued

Elaine Kirshenbaum, MPH, Vice President of Policy, Planning and Member Services, Massachusetts Medical Society. Elaine Kirshenbaum is vice president of Policy, Planning and Member Services at the Massachusetts Medical Society (MMS), the nation's oldest continuously operating state medical society with a membership of more than 18,000 Massachusetts physicians and medical students. Founded in 1781, the Society owns and publishes *The New England Journal of Medicine*, the *Journal Watch* family of professional newsletters and *AIDS Clinical Care*.

As vice president at MMS, Ms. Kirshenbaum oversees several areas of the organization including Health Policy, Health Systems, Strategic Planning, Membership, and Continuing Education and Certification. She Staffs the Massachusetts Medical Society's Committee on the Quality of Medical Practice, which focuses on patient safety and improving the quality of medical care. She has been associated with the MMS since 1996 and has worked on critical health care issues for over thirty years.