



Welcome to BMC2

BMC2 Comprises 3 Prospective, Multicenter Quality Improvement Registries

- [BMC2-PCI](#)
- [BMC2-Vascular Surgery](#)
- [Michigan Structural Heart Consortium \(MISHC\)](#)
- PLUS an additional special initiative in [Cardiac Rehabilitation](#) – the Michigan Cardiac Rehab Network (MiCR)

IMPROVING SAFETY,
QUALITY, AND

SITES

PCI - 50
Vascular
Surgery - 36
MISHC - 30



PCI

350 interventional cardiologists
700,000 cases



VASCULAR SURGERY

250 participating physicians
60,000 cases



PATIENT OUTCOMES
THROUGH
COLLABORATION



MISHC

140 participating physicians
20,000 cases

PRESENTATIONS

100+ abstracts presented
at national and interna-
tional meetings



MANUSCRIPTS

100+ published manuscripts



BMC2 PCI

- A collaborative consortium dedicated to improving the quality of care and outcomes in patients who undergo percutaneous coronary intervention procedures across the State of Michigan
- We have collected information on >700,000 cases, performed by hundreds of physicians, from 50 participating facilities since 1996
- Support for BMC2 is provided by Blue Cross and Blue Shield of Michigan and Blue Care Network as part of the BCBSM Value Partnerships program
- BCBSM offers financial support to regular* sites through abstraction funding, P4P hospital incentives, and VBR physician incentives

**sites with on-site open-heart surgery*



BMC2 Vascular Surgery

- A collaborative consortium dedicated to improving the quality of care and outcomes in patients who undergo vascular procedures across the State of Michigan
- We have collected information on >50,000 cases, performed by hundreds of physicians, from 34 participating hospitals since 2012
- Support for BMC2 is provided by Blue Cross and Blue Shield of Michigan and Blue Care Network as part of the BCBSM Value Partnerships program
- BCBSM offers financial support to sites through abstraction funding, P4P hospital incentives, and VBR physician incentives



BMC2 Vascular Surgery Qualifying Case Types

- Open Abdominal Aneurysm Repair
- Endovascular Abdominal Aneurysm Repair (EVAR), Infraarenal, Suprarenal and Juxtarenal Repairs
- Open Bypass Procedures, Upper and Lower Extremity
- Carotid Stenting
- Carotid Endarterectomy
- Open Thrombectomy
- Data collection admission - discharge, and at 30 day and 1 year follow up

Quality Improvement Achievements

Review BMC2's 2022 [annual report](#) to learn about our quality improvement achievements across BMC2 and MISHC.

BMC2 is proud of the dedication and partnership of their member organizations in these efforts and looks forward to continued learning, sharing, and growth.



Annual Report 2022

A collaborative consortium of health care providers dedicated to improving quality of care and outcomes for cardiovascular patients across the State of Michigan



How It Works



Reporting to Sites

- BMC2 issues quarterly and year-end reports to participating sites and each physician who performs cases that are entered into the registry
- BMC2 also prepares annually
 - Case specific M & M reports (quarterly)
 - 3-year summary reports
 - Outlier reports
 - Risk-adjusted measures
 - Other special reports (ad hoc)
- **Distribution of site level and physician level reports at your site is a requirement of BMC2 participation**
- Sites are sent the entirety of their own data upon request, but they are never provided unblinded data from other sites
- Blinded data on the entire State and site level outcomes are presented at consortium-wide meetings

How We Ensure Data Quality

BMC2 Clinical Quality Improvement Leads review patient records at participating sites annually to ensure definitions are understood and all data is being thoroughly and accurately abstracted

This is not a “data cleaning” exercise—this is monitoring for quality assurance

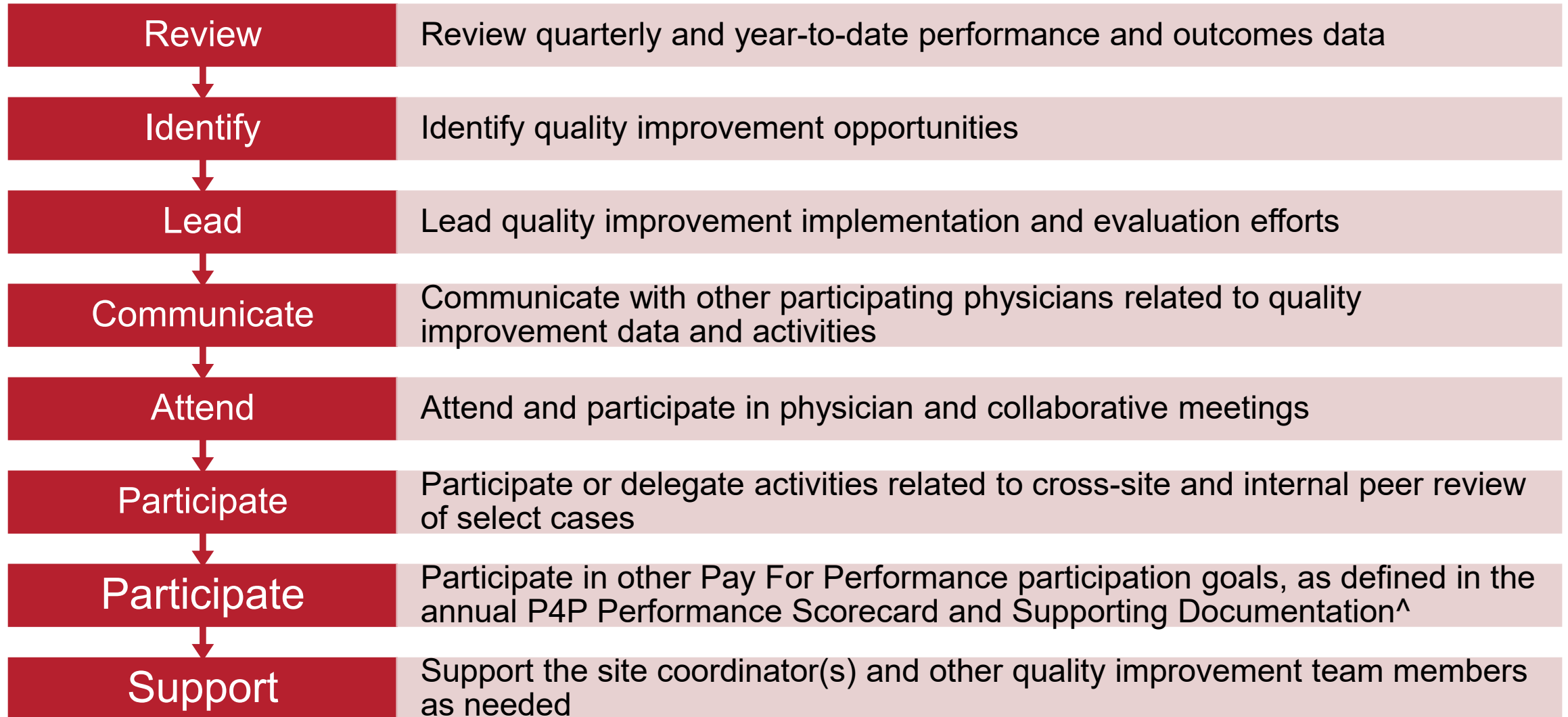
We provide new data abstractors with in-depth training, and we host monthly webinars with data abstractors to answer questions and to discuss data abstraction issues

Participating physicians, coordinators, and data abstractors attend online and in-person meetings throughout the year to discuss data trends and share quality improvement challenges and best practices

BMC2 Participation Activities

- ☐ Complete BMC2 Participation Agreement
- ☐ Complete NCDR Data Release Consent Form (DRCF); participate in CathPCI**
- ☐ Identify Physician Champion and Site Coordinator; notify BMC2 if physician champion changes
- ☐ Complete coordinator training
- ☐ Enter all consecutive procedures into database
- ☐ Distribute quarterly and special reports (site- and physician-level)
- ☐ Participate in annual site audit
- ☐ Timely response to site audit and meeting requests and other queries
- ☐ Invited to attend BMC2 Collaborative, Coordinator, and Physician meetings
- ☐ Submit quality improvement project information annually

Physician Champion Role



Pay for Performance (P4P)[^]

- Recognizes short term acute-care hospitals for achievements and improvements in quality, cost efficiency and population-health management.
- Typically the program will pay hospitals, in aggregate, an additional 5% of statewide inpatient and outpatient operating payments.
- The BCBSM Hospital Pay for Performance Peer Groups 1-4 guide is publicly accessible and updated annually.
- CQI performance makes up 40% of the available 5% annual P4P payment.
- The CQI component of the P4P is weighted equally for all hospitals, regardless of the number of CQIs a hospital participates in.

Program components and weights	
CQI performance	40%
Hospital cost efficiency	5%
Michigan Value Collaborative	10%
All-cause readmissions domain	30%
Health information exchange	15%

Value-Based Reimbursement (VBR)[^]

What is VBR?

- Opportunity to increase BCBSM reimbursement by meeting quality improvement targets
- Practitioners can earn 103% of the Standard Fee Schedule for CQI performance if they participate in 1 CQI, or 105% if they participate in more than one CQI offering VBR (BMC2 + MISHC)

CQI VBR selection process

- Meet the performance targets set by the coordinating center
- Be a member of a PGIP physician organization for at least one year
- Have contributed data to the CQI's clinical data registry for at least two years

Incentive Goals Change Annually[^]

- See the current P4P Performance Index Scorecard and VBR measures on BMC2.org
- Don't miss the P4P Performance Index Supporting Documentation for in-depth descriptions of the performance measures

Performance Indexes

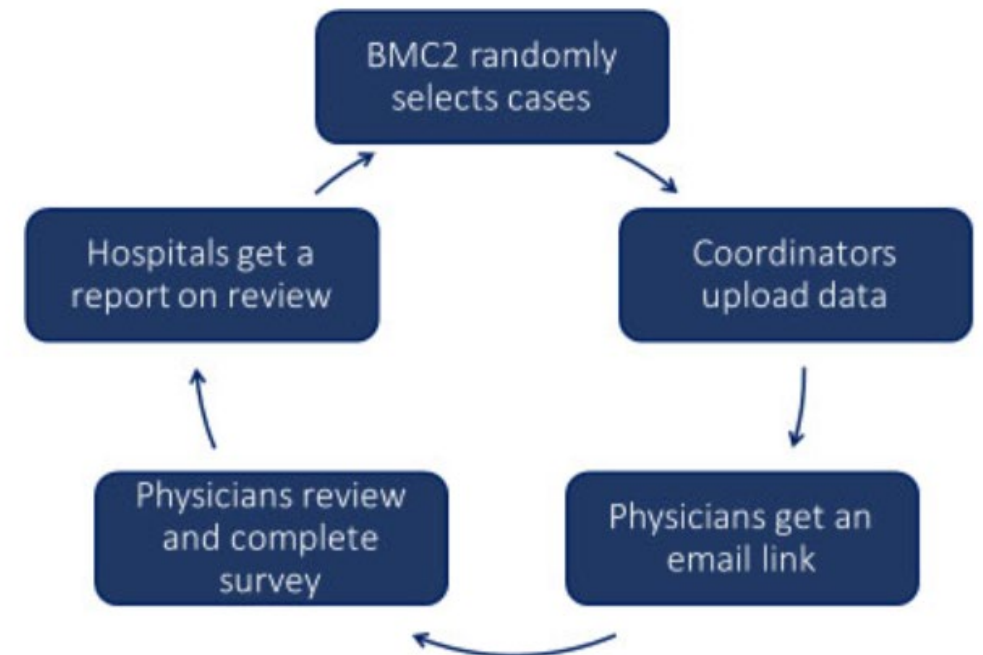
Our performance indexes track the progress and findings of our quality improvement projects each year.

[VIEW OUR PERFORMANCE INDEXES](#) →



Peer Review

- Each year physicians from across our consortium engage in cross-site peer review[^], providing feedback on anonymized cases performed by colleagues around the State of Michigan.
- Our physicians also participate in annual internal peer review, providing feedback on cases performed by colleagues at their own hospital.
- Different case types are performed with each new cycle of peer review.
- Feedback presents an opportunity for quality improvement activities leading to a decreased risk of complications from inappropriately performed procedures, decreased patient costs, decreased risk of readmission, and improved clinical outcomes.
- Details on [dates](#) of and [processes](#) for peer review are available on BMC2.org



BMC2 Meetings



Share quality improvement best practices



Learn from world experts on emerging clinical issues



Network with colleagues from around the state

Meeting invitations and registration information for in-person events will be sent to you via email and calendar invitation

Stay up-to-date on upcoming meeting dates by visiting the
[BMC2.org Events Calendar](#)

BMC2 Resources

[Best Practice documents](#)

[Risk calculators](#)

BMC2
[publications and presentations](#)

BMC2 [news and events](#)

Links to [external resources](#)

Training modules

Worksheets

Data dictionaries

Report dictionaries

FAQs

...and more

Meet Our Leaders



Hitinder Gurm, MD
BMC2 Program Director



Devraj Sukul, MD, MS
BMC2 PCI Associate
Program Director



Nicholas Osborne, MD, MS
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Key Contacts

Clinical Quality Improvement Leads

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Learn more about the rest of our staff [here](#)

Thank you!
