

2024 Blue Cross Blue Shield of Michigan Cardiovascular Consortium (BMC2)  
 Collaborative Quality Initiative Performance Index Scorecard  
 PCI & YEAR 2 Vascular Surgery Sites

Measure #	Weight	Measure Description	PCI points	VS points
1	15	<b>Meeting Participation - Clinician Lead</b>		
		2 Meetings (attendance at the collaborative-wide meeting earns 1 additional extra credit point)	5	10
		1 Meeting	2.5	5
		Did not participate	0	0
2	20	<b>Data Coordinator Expectations</b>		
		Meets all expectations	5	15
		Meets most expectations	2.5	10
		Does not meet expectations	0	0
3	15	<b>Physicians Complete Cross Site Review of Assigned Cases for Procedural Indications and Technical Quality</b>		
		Submitted reviews for 100% of cases	5	10
		Submitted reviews for <100% of cases	0	0
4	5	<b>Vascular Surgery Performance Goal - Documentation of EVAR* imaging performed on the 1-year follow up form</b>		
		≥80%	NA	5
		70% - <80%	NA	2.5
		<70%	NA	0
5	5	<b>Vascular Surgery Performance Goal - Duplex ultrasound completed prior to asymptomatic carotid endarterectomy</b>		
		≥90%	NA	5
		80% - <90%	NA	2.5
		<80%	NA	0
6	5	<b>Vascular Surgery Performance Goal - Vein mapping completed before elective lower extremity open bypass</b>		
		≥50%	NA	5
		40% - <50%	NA	2.5
		<40%	NA	0
<b>Sites select two measures for scoring from measures 4, 5, 6</b>				
7	5	<b>Vascular Surgery Performance Goal - Smokers receive smoking cessation treatment prior to discharge</b>		
		≥25%	NA	5
		20% - <25%	NA	2.5
		<20%	NA	0
8	10	<b>PCI Performance Goal - Use of IVUS/OCT^ for stent optimization</b>		
		≥45% in EITHER all cases OR ≥45% in cases involving the left main coronary artery, in-stent restenosis, or stent thrombosis	10	NA

8	10	≥10 percentage points absolute increase in all cases* from Q4 YTD 2023	5	NA
		<10 percentage points absolute increase in all cases from Q4 YTD 2023	0	NA
9	25	<b>PCI Performance Goal - Outcomes and Process Composite, inclusive of risk-adjusted mortality, risk-adjusted AKI, risk-adjusted major bleeding, guideline medications prescription at discharge (aspirin, statin, P2Y12), and referral to cardiac rehab.</b>		
		<b>Risk-adjusted mortality</b>		
		A/P ≤1	5	NA
		A/P >1, ≤1.5	3	NA
		A/P >1.5	0	NA
		<b>Risk-adjusted acute kidney injury</b>		
		A/P ≤1	5	NA
		A/P >1, ≤1.5	3	NA
		A/P >1.5	0	NA
		<b>Risk-adjusted major bleeding</b>		
		A/P ≤1	5	NA
		A/P >1, ≤1.5	3	NA
		A/P >1.5	0	NA
		<b>Guideline medications prescription at discharge</b>		
		≥95%	5	NA
		90% - <95%	3	NA
		<90%	0	NA
<b>Referral to cardiac rehabilitation</b>				
≥95%	5	NA		
90% - <95%	3	NA		
<90%	0	NA		
10	0	<b>PCI Performance Goal - Cardiac rehabilitation utilization within 90 days after PCI discharge†</b>		
		Site performance ≥40% or absolute increase of ≥5 points from baseline site performance. Baseline 1/1/2022 - 9/30/2022. Scored in 2025.	10	NA
		Site performance ≥37% - <40% or absolute increase of ≥3 points from baseline site performance. Scored in 2025.	5	NA
		Site performance <37% and absolute increase of <3 points from baseline site performance. Scored in 2025.	0	NA
11	0	Extra credit: 1 point per approved activity (maximum of 5 points) Examples include: Physician attendance at the collaborative-wide meeting, presentation at a meeting, engagement in a work group/task force, referral of an engaged patient advisor, special initiatives, TBD	1-5	

\*EVAR = endovascular aneurysm repair

^IVUS = intravascular ultrasound; OCT = optical coherence tomography

\*Does not apply to the LM, ISR, IST measure

†Cardiac rehabilitation utilization will be measured in 2024, but due to data lag, will be scored in 2025