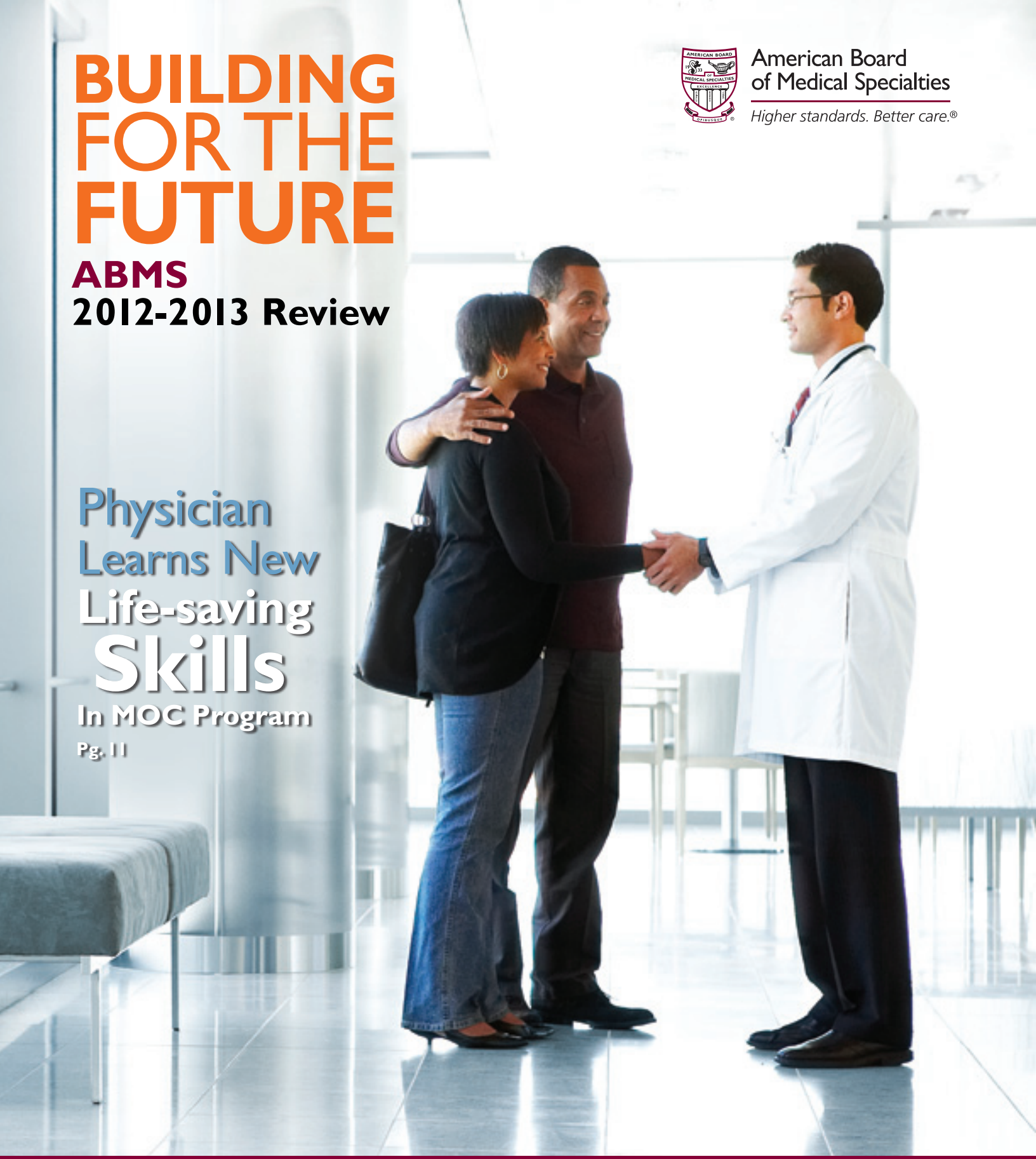
BUILDING FOR THE FUTURE

ABMS 2012-2013 Review

American Board of Medical Specialties

Higher standards. Better care.®



Physician Learns New Life-saving Skills In MOC Program

Pg. 11

Featuring...

EXPLORING PROFESSIONALISM
Q&A with Drs. Green and Levinson
Pg. 4

IMPROVING PERFORMANCE IN PRACTICE
Team Care Benefits Patients and Provider Organizations
Pg. 14

INCREASING AWARENESS
Ambassadors Promote Board Certification and MOC
Pg. 17

BUILDING A LEGACY OF QUALITY CARE
Why ABMS Member Board Certification Matters
Pg. 28

Team Care:

IPIP Benefits Physicians and Provider Organizations in Western New York

Since the Improving Performance in Practice (IPIP) initiative was convened seven years ago by the ABMS REF, it has created models of practice support emulated in primary care practices throughout the United States. IPIP's focus on smaller practices and its signature practice coaching model has helped participating practices in seven states improve outcomes for patients with chronic conditions such as diabetes and asthma as well as preventive care for all patients.

Beginning in 2011, ABMS REF received a subcontract from the National Program Office of the Robert Wood Johnson Foundation (RWJF) Aligning Forces for Quality (AF4Q) initiative to work with many of the 16 AF4Q communities on ambulatory quality improvement (QI) initiatives based on the IPIP model. The AF4Q communities include geographically, demographically and economically diverse regions that together cover 12.5 percent of the U.S. population.

This year, the ABMS Member Boards of Family Medicine (ABFM), Internal Medicine (ABIM) and Pediatrics (ABPeds) have approved physician participation in RWJF AF4Q alliance programs as a pathway by which they can achieve MOC practice improvement credit.

The P² Collaborative of Western New York, Inc. (P² Collaborative) is the first AF4Q community to seek this recognition for primary care physicians in their region.

The P² Collaborative is a multi-stakeholder leadership alliance working to advance the goals and activities of AF4Q in the eight counties of Western New York which include rural communities and the cities of Buffalo and Niagara Falls. "We are focused on helping smaller providers that serve low-income Medicaid patients," explained Kate Ebersole, Director of Regional Quality Improvement for the P² Collaborative. "Our goal is to ensure access to the highest quality of care, promote the implementation of proven practices in medicine and encourage patients to partner with their health care team in managing their own health."

> *"Working with IPIP has helped us improve our coaching program and connect practice-level changes with our broader vision for quality improvement in the region."*

The P² Collaborative joined the AF4Q practice affinity group led by IPIP to help improve the quality initiatives that already are in place. "IPIP ties evidence-based national quality measures to the delivery of consistent high-quality care," said Sheldon Horowitz, MD, ABMS Senior Advisor, Professional and Scientific Affairs and Principal Investigator for IPIP. "We then provide tools, support and coaching to help physicians and practices assess their performance and work on improvement activities using their own practice data and comparisons to others in their peer groups as benchmarks."

The concept of team care is consistent with IPIP's entire approach. Participating practices receive a process-improvement kit based on the Chronic Care Model. P²'s network of practice coaches, called Practice Enhancement Associates (PEA), have expertise in QI and help the practice develop an improvement plan and process for collecting data and tracking progress. They work with all the functional areas of the practice, including administration, health information technology (HIT) and clinical personnel on activities such as patient registries, electronic health records (EHRs) and templates and protocols for office staff to prepare for and manage patient visits.

The P² Collaborative is targeting 150 internal medicine and family medicine providers to focus on making improvements in diabetic patient care in order to reach National Committee for Quality Assurance (NCQA) Diabetes Recognition, and to qualify for MOC credit. Each practice runs a registry of diabetic patients and key measures for that patient population. They use this report to develop QI action plans. The key measures are then tracked and reported to the key stakeholders in the practice, and are used to make course corrections to the action plans in order to continue to improve diabetic patient outcomes. The practice also is involved with learning activities such as conference calls, webinars and QI methodologies such as Plan-Do-Study-Act (PDSA) cycles.

"We are able to create value and really get the practices doing some good work," said Ebersole. "Practices are improving their quality and their outcomes. Patients are benefitting from more sophisticated use of health information technology, registries and better population health management, all because a PEA came to help. Working with IPIP has helped us improve our coaching program and connect practice-level changes with our broader vision for quality improvement in the region."

The work that the P² Collaborative is doing with IPIP also has attracted regional and national interest and is receiving support from other improvement initiatives such as NYS HEAL grant to help practices reach Patient Centered Medical Home certification, the federal Beacon Community project for the facilitation of HIT, the federal Regional Extension Center grant to help providers reach meaningful use of their Electronic Medical Records (EHR) systems and the NCQA Diabetes Recognition Program through the New York State Health Foundation.

IPIP Succeeds in Designing Large-scale Multi-level Quality Improvement

The IPIP initiative has received $7 million in funding support from the RWJF. Through additional collaborative efforts, the IPIP project encouraged federal and state governments, foundations and insurers in seven states to invest more than $30 million for practice improvement in their communities. More information about IPIP can be found at **www.ipipprogram.org**.

Practice Results of Patients with Diabetes

The run chart below represents a typical primary care practice in Western New York. It is staffed by six Board Certified physicians in Family Medicine with more than 600 diabetic patients out of approximately 7,000 patients seen per year. This is one example of a practice that has focused its efforts on implementing medical interventions and health programs to improve comprehensive diabetes care through improvement efforts to lower low-density lipoprotein (LDL) cholesterol, improve diabetes control (HbA1C) and maintain blood pressure control. Physicians in this practice are receiving practice improvement credit for the MOC program of their ABMS Member Boards.