

## MIBAC - MICHIGAN BACK COLLABORATIVE

### Quality Improvement Requirements and Responsibilities by Role - 2023-2024 Participation

#### Requirements / Responsibilities for MIBAC Quality Improvement Participation

##### Definition of roles

CC or Coordinating Center	Staff and leaders at the MIBAC Coordinating Center that coordinate the efforts of the collaborative. This may include the auditing team, the program manager, the program coordinator, the data team, or other designated team members approved by the CC
PO leadership or PO	Designated leader at the PO level
PO Steering Committee Delegate	A PCP and chiropractor, if applicable, selected by PO leadership to lead the clinical aspects of program participation
Participating Clinicians	Individual PCPs, APPs, or Chiropractors selected for participation by PO leadership
Administrative site leads	Designated by participating clinician or practice to oversee the daily participation responsibilities
Quality Improvement Lead / Quality Data Manager	Provide oversight of the data, ensure that data is meeting the coordinating center requirements for all participating practices and work with the Michigan Value Collaborative (MVC) and/or MIHIN (Michigan Shared Services Network) to develop and improve the data sharing process, work with practice liaisons as contact points within any practices that contain participating practitioners to help solve any data-related issues, serve as the primary data contact for the CQI Data team

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<b>Coordinating Center</b>
Assist PO leadership in selection process for clinicians to participate
The CC CQI program manager or CQI program coordinator will schedule and attend quarterly meetings, at minimum, with PO leadership to review progress toward program requirements
The CC will keep PO leadership informed of any changes in the program requirements
The CC CQI program manager or CQI program coordinator will schedule and attend bi-monthly Executive Committee meetings
The CC will meet with the PatientIQ MIBAC lead to review compliance of participants
The CC will oversee the functions of PatientIQ to insure the success of the program
The CC will meet regularly with BCBSM leads to review program process, PO compliance, etc.
The CC will provide quarterly update reports to PO leadership to track progress toward program requirements
The CC will respond to PO leader questions within 2 business days
The CC will meet with site leads, providers, practices, and PO leadership as requested and deemed necessary
The CC will assist the PO leadership with overcoming obstacles to success as they arise
The CC leadership team will review participant feedback presented by the Quality Improvement Steering Committee and/or Executive Committee and initiate process changes as determined necessary
The CC will keep PO leadership informed regarding all program changes and communications from BCBSM relevant to their participation as approved by BCBSM

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PO	
Designate a PO MIBAC lead to oversee Quality Improvement activities	
Select practitioners to participate using the following factors:	
	Willingness to participate
	Availability of patients with back pain based on past year's volume
	EMR is highly encouraged
Providers to be selected by PO leadership based on PO leadership's analysis with a reasonable expectation that this combination of practitioners participating will be able to recruit 200 patients with acute LBP as defined by the MIBAC program in a 12 month rolling period	
Selection of a Quality Improvement Steering Committee delegate consisting of a PCP serving the adult population and a Chiropractor (as applicable) to keep providers informed and updated on program updates, best practices for meeting program requirements, etc.	
Assist practices with onboarding, overcoming challenges with staffing, technical issues, training new employees, etc. to comply with registry compliance (registration, entry of demographic data points, entry of clinical data points)	
Monitor practitioner engagement and progress toward the requirements	
PO MIBAC lead will attend 4 monthly meetings/year or more with the Coordinating Center (may designate an alternate within a similar role), in addition to pre-reporting touchpoints with the MIBAC Program	
Keep the CC informed of any issues that arise that will impede the group's ability to meet the group requirements	
Attend additional review meetings to discuss spot-audits of participating clinicians who are not meeting enrollment threshold, failing to provide accurate and complete data points, or who receive a sub-optimal	
Internal audits of site specific program activities	
Facilitate and attend meetings with participating practitioners selected by PO leadership, a minimum of once per quarter, to discuss program progress, program changes, and share information and solutions re: practitioner or practice compliance obstacles	
Cooperate with CC efforts to arrange audits of program related data and site-visits as requested	
Actively participate in remediation efforts for any PO participating clinician as requested by the CC	
Attend two (2) CoRe meetings per year, including one in-person meeting (one Steering Committee Delegate plus one PO Lead required to attend). Alternate attendees of the same role and status may be designated for attendance by PO Leadership if approved the the CC	
Fully review all PO scorecards, chart review documents, agreements, and program information	
PO Leadership is to submit all information requested including participants to be added or deleted in accordance with the reporting periods set by BCBSM	

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Steering committee delegate requirements and responsibilities	
Provider Quality Improvement Steering Committee delegates must be active participants in the Quality Improvement activities	
Delegate commitment will be for a period of one year	
Delegate should be dedicated to the success of the MIBAC program	
Ability and willingness to attend meetings identified by program requirements and PO leadership	
Meet with practitioner administrative site leads to review provider progress and compliance with the MIBAC Quality Improvement requirements as needed for program success	
Meetings required by MIBAC leadership:	
	Attend 2 steering committee breakout sessions at CoRe meetings per year (delegate may send alternate practice provider - first contact provider with degree of MD, DO, chiropractor, NP, PA, or RN twice per year)
	PCP delegate may elect an alternate to attend one meeting per year (PCP delegate may send alternate designated PO first-contact practitioner with degree of MD, DO, NP, PA, or RN once per year)
	Chiro delegate may elect an alternate PO chiropractor to attend one meeting per year
Cooperate with CC efforts to arrange audits of program related data and site-visits as requested	

Participating Clinicians
Attend the training necessary to comply with requirements for patient registration, entry of demographic data points, and entry of clinical data points in the registry (PatientIQ) at time of PO enrollment and up to 2 additional times per year (virtual, as requested)
Keep PO leadership informed of progress and self-identify any barriers to patient enrollment
Work with PO leadership to designate an administrative site lead to manage compliance with the registry related tasks (this role may be shared by multiple practitioners as deemed appropriate by practitioner and/or PO leadership)
Site lead or designee attend meetings with PO leadership quarterly to review progress toward program requirements, as requested by PO leadership
Identify patients meeting the program specifications for acute low back pain and enroll them into the the registry by submitting patient information and clinical data points to the CC within 2 business days
Upon request of the CC, provide additional patient information deemed necessary for registry enrollment within two (2) days of request via phone or email
Provide current contact information including an accurate email address to the CC, and update such information should it change within 5 business days, and monitor this email address for important communications (weekly at minimum)
Cooperate with efforts of the CC to audit program-related data and site visits, annually at minimum
Actively participate in remediation efforts, as deemed necessary by the CC or PO Leadership

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<b>Administrative Site leads</b>
Attend training to learn the requirements of the program, the enrollment process, and any updates as they occur
Attend meetings as requested with the provider steering committee delegate
Attend meetings as requested with PO leadership
Provide guidance to office or practice staff regarding the enrollment and data entry process
Provide guidance to designated office team member(s) regarding the enrollment and data entry process
Review and respond to communications from the Coordinating Center that related to changes in program requirements
Review chart review reports for accuracy, and report any discrepancies to the CC within 20 business days
Cooperate with efforts of the CC to audit program-related data and site visits, annually at minimum