Gastroenterology Associates of the Piedmont, P.A. (GAP): Utilizing Patient-Centered Specialty Practice (PCSP) Recognition to Shift to Value-Based Care
Background

Gastroenterology Associates of the Piedmont, P.A. (GAP) was looking for a way to merge two practices and blend together their cultures at the same time. GAP also wanted to prepare its practice for the shift from fee-for-service to value-based care. Composed of 3 practice locations and 2 endoscopy centers with 15 physicians and 6 advanced practitioners, GAP wanted to increase patient focus, get staff on the same page and help differentiate itself from other providers. The shift not only resulted in better care, but made GAP more attractive for referrals and better prepared for value-based contracts.

ACTIONS

While the practice has long been a favorite of patients because of its exceptional level of service in digestive and liver disease, GAP felt there was more it could do to become the premier gastroenterology practice in the region. So, in 2016 GAP decided to pursue the National Committee of Quality Assurance (NCQA) Patient-Centered Specialty Practice™ (PCSP) Recognition Program.

A Set of Standards to Measure Against

GAP is the first single-specialty gastroenterology practice in North Carolina to achieve NCQA Level 3 PCSP Recognition. Practice leaders thought that the NCQA PCSP Recognition Program would be the best tool to use to help put goals in writing and solidify their mission.

“Defining the components of the quality experience and putting these processes in writing was a powerful tool in supporting GAP’s patient-centered culture,” said Anne Hill, CEO of GAP. “I think that's one of the huge advantages that the PCSP [Recognition] helped us to accomplish. The fact that we were actually setting specific expectations and measuring against those goals is core to managing effectively. It has been incredibly helpful in getting everyone on the same page, making sure we do things the right way and maintain our patient focus.”

Clearly Defined Processes and Improved Morale

Going through the recognition process resulted in better defined job descriptions, workflow and processes for each position—which resulted in higher staff morale. And while analyzing processes to determine if they were patient-centered, GAP was able to eliminate unnecessary steps and refine each process.

“We wanted a workflow and guideline for every area with defined job responsibilities. This was a really nice accomplishment at the end of this project. We not only accomplished our goal to become a patient-centered specialty practice, but we also had a standard procedures manual for our staff to follow as well, which led to more efficient and consistent workflows,” said Alexis Horton, RN, Process Improvement Coordinator for GAP.
A Better Process for Referrals
One change that had a big impact on staff and referring providers was implementing a referral form and agreement. These documents—and the related processes—facilitate open communication between referring providers, the GAP provider, the patient and the staff. The referral agreement helped set expectations for service, access and communication. GAP staff now have an effective process for handling referrals, and referring providers have a clear picture of how GAP delivers care to mutual patients.

“We have had referring physicians tell us that they prefer to send patients to us because we handle the referral so quickly, and they know what to expect in terms of action and follow-up. We’ve actually had care providers in other communities reach out and invite us to practice in their medical community,” said Hill. “We’re in the process of doing just that.”

Referrals increased by 4.25% and office visits increased by 17.5%.

RESULTS

Good Quality Means Good Business
In 2016 GAP saw more than 40,000 patients, and that number is growing. The revised workflows have improved patient experience and satisfaction. This has resulted in frequent compliments on how quickly they are able to see patients, including many same-day appointments. This efficiency also led to an increase in referrals and procedures performed: Referrals increased by 4.25% and office visits increased by 17.5%. In 2016, GAP performed 15,000 procedures. That has increased by more than 10% in 2017.

“GAP is seen as a leader by practices throughout North Carolina and surrounding states, where we have received requests for sharing best practices when pursuing PCSP Recognition,” Hill said. “I believe being recognized as a patient-centered specialty practice shows our dedication in putting our patients first and putting them in the center of their care. I think it speaks volumes to our patients that we have pursued and accomplished this,” says Horton.
Discussions with Payers
As a forward-thinking organization, GAP wanted to be on the leading edge of the shift from fee-for-service to the value-based model of care. PCSP Recognition helped move staff culture to better align with value-based care and gain distinction as a provider of quality, patient-centered care.

“When we have conversations with employers or health insurance companies, NCQA PCSP Recognition is one of the first things that is mentioned,” says Hill.

GAP believes that reimbursements will change as payers continue to move away from fee-for-service arrangements. Getting carriers in line with the quality aspects of payment, along with completing PCSP Recognition, helped GAP earn a premium designation, making it sought after in the networks. PCSP Recognition has also given GAP an advantage with regard to MACRA and MIPS Improvement Activities because it reports back to Medicare on a number of measures. Recognition has brought awareness of how quality can be improved, which can lead to higher reimbursements from payers in the future.

“We have the premium designation and are taking it to the next level to where it financially benefits the practice. We are included in narrowed networks, and are working on bundled payment models. PCSP has opened doors to negotiation, which is sometimes difficult for independents. We expect to receive better reimbursement for the quality of care we provide,” said Hill.

During the first year of being an NCQA PCSP Recognized practice, GAP has seen tremendous benefits. Its growth and success will encourage continued utilization of the PCSP Recognition roadmap, which will help GAP deliver timely, cost-effective, compassionate and patient-centered care in gastroenterology and hepatology.

“Patients love it. They can’t believe how efficient we’re becoming.”