Blue Distinction® Centers for Maternity Care Evaluation Components

The Blue Distinction Specialty Care Program is a national designation program recognizing healthcare facilities that demonstrate expertise in delivering quality specialty care safely, effectively and cost-efficiently. The goal of the program is to help consumers find both quality and value for their specialty care needs, while providing a credible foundation for employers to design benefits tailored to meet their quality and cost objectives. The Blue Distinction Specialty Care Program includes two levels of designation:

- **Blue Distinction Centers (BDC):** Healthcare facilities recognized for their expertise in delivering specialty care.

- **Blue Distinction Centers+ (BDC+):** Healthcare facilities recognized for their expertise and cost-efficiency in delivering specialty care. Quality is key: only those facilities that first meet nationally established, objective quality measures for Blue Distinction Centers will be considered for designation as a Blue Distinction Center+.

Program Design

The 2017 Blue Distinction Centers for Maternity Care program will require a Provider Survey to collect data, similar to the other Specialty Care programs, to allow for a more robust quality evaluation. Acute care hospitals as well as children’s hospitals that offer maternity services will be able to apply for designation.

The following quality, business and cost components are to provide Plans and Providers an understanding of the how the evaluation components will be used to evaluate an applicant facility. Specific scoring thresholds required for eligibility as a Blue Distinction Center and Blue Distinction Center+ for Maternity Care, based on its selection criteria for quality and cost, will be published separately and posted on the Blue Distinction’s public website at [www.bcbs.com](http://www.bcbs.com).

Quality

Blue Distinction Specialty Care programs establish a nationally consistent approach to evaluating quality and safety, by incorporating quality measures with meaningful impact, using criteria that evolve over time with medical and quality measurement advances in that specialty area. Facilities may be evaluated for quality in the following domains for the Blue Distinction Centers for Maternity Care program:

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<thead>
<tr>
<th>Domain</th>
<th>Source</th>
<th>Metrics</th>
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<tbody>
<tr>
<td>General Facility</td>
<td>Provider Survey</td>
<td>National Accreditation</td>
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<tr>
<td>Delivery &amp; Transfer Volume</td>
<td>Provider Survey</td>
<td>Facility reported delivery and transfer volumes:</td>
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<td>- Vaginal</td>
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<td>- Cesarean Section</td>
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<td>- Neonatal Intensive Care Admissions</td>
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<td>- Neonate transfers to a higher level of care</td>
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## Business

The following components are evaluated to determine if the facility meets the business selection criteria:

- Facility’s participation in the local Blue Plan’s BlueCard Preferred Provider Organization (PPO) Network.
- Physician participation in the local Blue Plan’s BlueCard PPO network.
- Local Blue Plan Criteria, if applicable.
- Facility and its corporate family conflict with BCBSA logos and trademarks.

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1. The patient safety bundles are available on the Council on Patient Safety in Women’s Healthcare website and are used in the Alliance for Innovation on Maternal Health (AIM) Program.
Cost of Care

The process to incorporate cost of care measures into the program’s selection criteria is designed to provide a nationally consistent, equitable, and objective evaluation. Again, Quality is key: only those facilities that first meet nationally established, objective quality measures for Blue Distinction Centers will be considered for designation as a Blue Distinction Center+. The following components will be evaluated to determine if a facility meets the cost efficiency criteria:

Cost Data Source

Each facility’s cost of care is calculated using adjusted allowed amounts for maternity episodes of care (including vaginal and cesarean deliveries) derived from Blue Plans’ claims data. The methodology sums all costs incurred during an episode of care (including facility, professional, and other costs related to the maternity episode) using defined data fields (with specific inclusions/exclusions).

Risk and Geographic Adjustments

Maternity episode costs may be adjusted for patient-level risk factors, including co-morbidities. Additionally, a geographic adjustment factor may be applied to each episode to account for geographic cost variations in delivering care.

Deriving a Cost Measure and Setting the Cost Threshold

Costs are aggregated and conformed to a facility cost index. In calculating facility costs, statistical outlier trimming (or ‘winsorizing’) may be applied to prevent facility costs from being skewed due to a few outlier cases. Each cost index is determined relative to national distribution of the facility measures. Facility level cost indexes are then evaluated in comparison to a National Cost Threshold for each procedure type, which is established with consideration for both geographic accessibility and cost savings.

Use of Facility-level Cost Information

Information displayed on Blue Distinction’s public website at www.bcbs.com will confirm that the facility is designated as a Blue Distinction Center or Blue Distinction Center+ and that it met the program’s transparent national selection criteria. BCBSA may share a facility’s individual Provider Survey responses (Raw Data) and results (Scores) with BCBSA’s member Plans and, pursuant to a confidentiality agreement, Member Plans’ current and prospective accounts, for purposes of evaluation, care management, quality improvement, and Member Plans’ design of customized products and networks. BCBSA may combine a facility’s Raw Data and Scores together with other facilities’ data to create aggregate information for public dissemination, provided that such aggregate information will not identify the facility by name, and will not contain any Protected Health Information (PHI).