Score on Team-Based Care Phase 3 Milestones					
Driver	**Team-based Relationships**		**Coordinated Care Delivery**	**Organized, Evidence-Based Care**	**Quality Improvement Strategy**
Milestone	Question 6	Question 7	Question 14	Question 16	Question 20
Description for score required to meet Phase 3	The practice has documented each team member's role and accountability lanes and each team member works to the maxiumum of their skill set and credentials in order to optimize efficiency and outcomes.	Practice has implemented processes to promote continuity and has the metrics to demonstrate that the processes are effective.	Practice has developed the job descriptions and roles and responsibilities for care coordination but these have not been fully implemented.	Practiced produces or received care gap reports, but does not yet have a system in place to follow up on each report in order to reduce the gaps.	Practice has developed QI capability within the practice and empowers staff/providers to participate in QI activities by allocating time for QI activities, inlcuding QI within job duties, recognizing and rewarding innovation and improvement.
Score to Complete Phase 3	3	3	2	2	3
Red Practice - 1 provider	0	3	0	1	1
Orange Practice - 1 provider	2	3	1	3	2
Yellow Practice - 1 MD & 1 NP	3	2	2	2	3
Green Practice - 2 MDs	1	1	1	1	1
Blue Practice - 6 providers	1	2	0	2	2

***Highlighted cells indicate an average score below the phase 3 milestone requirements**

PRACTICES	OPPORTUNITIES	MILESTONES	HURDLES
Identify 2 practices you can work with to operationalize, spread, and sustain team-based care.	How could you work with these practices to strengthen team-based care?	Which milestones do you predict will progress?	What hurdles do you anticipate could be overcome with support from your organization? What support is needed?
	1		
	2		
	1		
	2		

PRIMARY CARE 2.0 **Practice Name:**

	Change Concept Ref	Milestone	0	1	2	3	Score
Driver 1.2 Team-based Relationships							
6	**1.2.2**	Practice sets clear expectations for each team member's functions and responsibilities to optimize efficiency, outcomes, and accountability.	The practice has not established clear roles for each member of the care team or set clear expectations for each team member's functions and responsibilities to optimize efficiency, outcomes, and accountability.	The practice has identified the work required before, during, and after patient visits and identifies the skills and credentials needed to perform that work.	The practice has matched the work that must be done with the team member who will do the work.	The practice has documented each team member's role and accountability lanes and each team member works to the maximum of his skill set and credentials in order to optimize efficiency and outcomes.	
7	**1.2.3**	Practice has a process in place to measure and promote continuity between a patient and his/her care team so that patients and care teams recognize each other as partners in care.	Practice does not have a process in place to measure continuity.	Practice is starting to measure continuity but does not have systems in place to promote it.	Practice has introduced processes and systems for promoting continuity (e.g. scheduler scripts, patient cards with team member names and photos) but patients sometimes see providers other than their panel provider.	Practice has implemented processes to promote continuity and has the metrics to demonstrate that the processes are effective.	
Driver 1.5 Coordinated Care Delivery							
14	**1.5.3**	Practice clearly defines care coordination roles and responsibilities and these have been fully implemented within the practice.	Practice has not developed its approach to providing care coordination for its patient population.	Practice has a plan for care coordination, but it has yet to be formally documented in writing or translated to specific roles and responsibilities within the practice.	Practice has developed the job descriptions and roles and responsibilities for care coordination but these have not been fully implemented.	The practice vision for care coordination is fully documented and fully implemented.	
Driver 1.6 Organized, Evidence-based Care							
16	**1.6.4**	Practice uses population reports or registries to identify care gaps and acts to reduce them.	Practice does not collect data on care gaps for its population of patients.	Practice produces or receives care gap reports but these reports are limited to specific payer or diagnostic groups and do not cover the entire population of patients.	Practice produces or receives care gap reports for prevention and chronic conditions/ other diagnoses prevalent in the practice's patient population, but does not yet have a system in place to follow up on each report in order to reduce the gaps.	Practice analyzes care gap reports for prevention and chronic conditions/ other diagnoses prevalent in the practice's patient population and has a system in place to regularly act on the data, including outreach to individual patients needing intervention.	
Driver 2.2 Quality Improvement Strategy							
20	**2.2.2** **2.2.3**	Practice builds QI capability in the practice and empowers staff to innovate and improve.	Practice recognizes the need for QI capacity and has developed or identified training programs for staff in QI skills and tools.	A limited number of practice staff/providers have QI skills and are involved in the practice's QI initiatives.	Practice is actively building QI capability within the practice through approaches such as including QI skills in orientation for all new staff and ensures that all staff participate in QI training.	Practice has developed QI capability within the practice and empowers staff/ providers to participate in QI activities by allocating time for QI activities, including QI within defined job duties, recognizing and rewarding innovation and improvement.	

Average Score on Team-Based Care Phase 3 Milestones (PAT data submitted through 6/25/17)					
Driver	**Team-based Relationships**		**Coordinated Care Delivery**	**Organized, Evidence-Based Care**	**Quality Improvement Strategy**
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Description for score required to meet Phase 3	The practice has documented each team member's role and accountability lanes and each team member works to the maxiumum of their skill set and credentials in order to optimize efficiency and outcomes.	Practice has implemented processes to promote continuity and has the metrics to demonstrate that the processes are effective.	Practice has developed the job descriptions and roles and responsibilities for care coordination but these have not been fully implemented.	Practiced produces or received care gap reports, but does not yet have a system in place to follow up on each report in order to reduce the gaps.	Practice has developed QI capability within the practice and empowers staff/providers to participate in QI activities by allocating time for QI activities, inlcuding QI within job duties, recognizing and rewarding innovation and improvement.
Score to Complete Phase 3	3	3	2	2	3
PTI	1.85	1.48	1.79	1.63	1.16
Allied	1.53	0.51	0.63	0.71	0.34
Applecare	1.01	0.99	2.54	2.00	0.07
CVC	1.92	1.67	1.75	2.08	2.00
EPIC	2.13	2.25	2.25	1.25	2.38
HCP	1.78	1.41	1.59	1.16	1.25
Hill	2.53	2.49	2.09	1.79	2.09
Medpoint	2.33	1.50	1.17	1.67	1.17
MMG	3.00	2.00	3.00	1.00	2.00
Molina HC	2.76	2.47	2.82	2.68	2.92
NCHIIN	2.33	1.50	1.17	1.67	1.17
PAMF	2.37	1.85	2.07	2.37	2.48
PMGSJ	2.31	1.91	2.00	2.12	1.29
Prospect	2.13	1.76	1.94	1.57	1.45
RPN	0.94	0.53	0.94	1.88	0.94
Sharp	1.82	1.71	1.63	2.11	1.55
SPMF	2.00	2.00	3.00	2.00	2.00
St. Joes	1.33	0.00	2.00	1.67	0.33

***Highlighted cells indicate an average score below the phase 3 milestone requirements**

Percentage of Reporting Practices Meeting Phase 3 Milestone Requirements (PAT data submitted through 6/25/17)					
Driver	**Team-based Relationships**		**Coordinated Care Delivery**	**Organized, Evidence-Based Care**	**Quality Improvement Strategy**
Milestone	Question 6	Question 7	Question 14	Question 16	Question 20
Description for score required to meet Phase 3	The practice has documented each team member's role and accountability lanes and each team member works to the maxiumum of their skill set and credentials in order to optimize efficiency and outcomes.	Practice has implemented processes to promote continuity and has the metrics to demonstrate that the processes are effective.	Practice has developed the job descriptions and roles and responsibilities for care coordination but these have not been fully implemented.	Practiced produces or received care gap reports, but does not yet have a system in place to follow up on each report in order to reduce the gaps.	Practice has developed QI capability within the practice and empowers staff/providers to participate in QI activities by allocating time for QI activities, inlcuding QI within job duties, recognizing and rewarding innovation and improvement.
Score to Complete Phase 3	3	3	2	2	3
PTI	33%	25%	57%	59%	18%
Allied	21%	2%	10%	16%	0%
Applecare	1%	1%	85%	100%	1%
CVC	25%	25%	67%	83%	42%
EPIC	13%	38%	88%	25%	38%
HCP	29%	21%	46%	34%	11%
Hill	65%	67%	65%	60%	37%
Medpoint	56%	53%	79%	68%	23%
MMG	100%	0%	100%	0%	0%
Molina HC	71%	47%	92%	87%	89%
NCHIIN	33%	17%	33%	67%	0%
PAMF	48%	30%	81%	85%	67%
PMGSJ	47%	43%	67%	76%	18%
Prospect	48%	37%	63%	54%	23%
RPN	0%	0%	0%	94%	0%
Sharp	21%	32%	61%	82%	18%
SPMF	0%	0%	100%	100%	0%
St. Joes	0%	0%	100%	33%	0%

***Highlighted cells indicate less than 70% of reporting practices meet the phase 3 milestone requirements**