



South Carolina

*BlueCross BlueShield of South Carolina  
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## Statement of Support for Value-Driven Health Care

America's health care system has an unprecedented opportunity to lay new foundations for better patient care, higher quality service and increased value.

To help realize this opportunity, BlueCross BlueShield of South Carolina commits to support the following actions. We will encourage providers, clearinghouses, vendors and our other contractors to take consistent actions to achieve these goals.

**Support Health Information Technology** - We will support interoperable health information systems and products. This will enable the availability and secure exchange of health care information to improve patient care. When our contractors launch, purchase or upgrade health information technology systems and products, we will request they use systems and products that meet interoperability standards recognized by the Secretary of Health and Human Services. Patient privacy will be properly protected when maintaining or exchanging information, as required by law.

**Provide Quality Information** - We will use programs to measure health care provider quality and make this information available to members. This will support knowledge and comparison of the quality of care delivered by health care providers. Right now, the most fully developed measures are those that the National Quality Forum (NQF) endorses. They have been adopted by the Ambulatory Care Quality Alliance (AQA), a multi-stakeholder group focused on physician quality measures, or the Hospital Quality Alliance (HQA). We believe that quality measurement and reporting programs will be based on these measures. If we wish to measure quality of care in other areas, however, we will use measures endorsed by the NQF or those approved by other national broad-based organizations. We will support national consensus efforts to increase the availability of consistent quality measures in these areas.

**Provide Pricing Information** - We will use programs to make the overall cost of their care available to members. This will support knowledge and comparison of the cost or price of care. As consensus develops on standard ways to measure and report cost or price information to benefit consumers, we will use these. We will promote the availability of cost or price information together with quality information, whenever possible, to help our members focus on value. We also participate in broad-based national



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public-private collaborative efforts to develop appropriate strategies to measure the overall cost of services for common episodes of care and the treatment of common chronic diseases, while avoiding undue administrative burden on health care providers.

**Promote Quality and Efficiency of Care** - We will work to develop approaches that encourage and facilitate high-quality and cost-effective health care. We will contract with those who will help us achieve these goals. For example, we may use pay-for-performance methods of reimbursement for providers. We may also offer consumer-directed health plan products, such as account-based plans for enrollees in employer-sponsored health benefit plans.

We recognize that this initiative is part of an ongoing effort to share quality and cost or price information. Over time, we can use this information to improve patient care and enhance the effectiveness of our health care system. It will increase the availability of uniform and comparable information all stakeholders can use to make informed decisions. These steps are the foundation for a value-driven health care system that delivers continued progress in medical care. It also delivers good health for our employees and for all Americans.