

## The Promise of IPIP

- We can help you ready your practice for Maintenance of Certification and Pay for Performance by helping you to define and describe your practice and to know your numbers.
- We will assist you, your colleagues, and your patients to achieve 'perfect' care as measured in your practice.
- We are designed and driven by physicians, not insurance or research. Our goal is improved care for our patients.
- We understand that an additional outcome needs to be preserving or improving your bottom line.
- As providers of care, we must take the lead to responsibly save money for the system as well.
- We can help build your confidence that you are doing all that you can to serve your patients with the best care possible.

- Have a commitment to improving quality of care for either diabetes or asthma.
- Identify a quality improvement team in your practice (physician champion, nurse leader and other staff as appropriate).
- Complete an initial assessment of your practice capacity for quality improvement as well as quality of care.
- Begin to develop office systems to identify all patients in your practice with the disease on which you will focus. We can help you with a disease registry if you prefer.
- Acquire and review data on your patient population monthly and submit it to our secure website
- Attend quarterly, regional dinner meetings with your practice team and other practices
- Conduct at least two tests of change per month, we will help you get started.
- Work with other practices to exchange ideas about how to improve care.
- Share what has been done in your practice – what has worked and what has not.
- Keep data about comparisons with other practices confidential.

- Onsite assistance to improve the quality of care you give your patients with diabetes or asthma.
- Free initial assessment about disease registries and EHR capability.
- A quality improvement consultant (QIC) free of charge to work regularly with you and your QI Team to improve your quality of care in your practice setting.
- Free Category One or AAFP Prescribed CME up to 20 hours/year of evidence based practices all that is necessary to maintain licensure in NC.
- Substantial credit towards Maintenance of Certification Part IV. The exact amount will vary according to your specialty board, but all are national partners in this project and have committed to support to IPIP.
- Compiled data from your practice that can be used for MOC IV or any other purpose you have, such as Bridges to Excellence or NCQA Accreditation.
- Free access to library resources such as current, evidence based references.
- Opportunities for you, your staff and your patients to gain from resources available on the local, state and national level.

