Recognizing Practitioners for Quality Care and Services

Practitioner Golden Globe Award

Date: ___________________________________________
Practitioner’s Name and Credentials: ___________________________________________
Practice Location: ___________________________________________
Practitioner’s/Point of Contact Phone #: __________________________
Practitioner’s/Point of Contact Fax #: ___________________________________________
Practitioner’s/Point of Contact Email Address: ___________________________
Date the accolade was awarded and/or professional health care innovation was instituted: mm/dd/yy
Brief description of the accolade and/or professional health care innovation to be recognized:
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

If nominating with an accolade, please attach a copy of the accolade to serve as proof.
Accomplishments cannot be published without proof of receipt (Letterhead of awarding organization preferred). Providers have a better chance of winning the award if they: participate in the P4P Program, utilize Electronic Prescribing, have Electronic Medical Records.

Verification/Nominator Contact: Name ________________________________________________
Phone ______________________ E-mail ______________________________

I agree, by signing and dating this form, that all information included and/or attached is true and accurate.

__________________________________________  _______________________
Signature of Nominator                     Date

Virginia Premier, in its sole discretion, will select the annual winner of the Practitioner Golden Globe Award.

Fax to: 804.819.5171  Attn: Quality Project Manager
**About the Award**

Virginia Premier Health Plan (VPHP) values quality and safety, especially when coordinating and managing care for our members. In an effort to promote, enhance and salute excellence, the Plan has developed and implemented a physician recognition program.

**Requirements for Participation**

1. The practitioner’s license must be unrestricted, current and valid.
2. The practitioner must be in good standing with VPHP.
   
   Good Standing: Most recent site visit score and medical record keeping scores meet the Plan’s thresholds; the practitioner submits quality information, credentialing applications, etc. per policy; and the practitioner continuously follows and adheres to VPHP’s policies and procedures.
3. The practitioner cannot have grievances/complaints filed against him/her in the last 12 months prior to being published in the Newsletters and/or on the Website.
4. The practitioner cannot have any quality issues in the last 12 months noted on the National Practitioner Data Bank Report, Department of Health Professions – Board of Medicine Sanctions Report, the Office of the Inspector General Sanctions Report or Department of Medical Assistance Services (DMAS).
5. The practitioner cannot be involved in any pending legal issues that could impede the safe care of members.
6. The practitioner must have documentation of taking a cultural competency course.
7. The practitioner or nominator must complete the designated form and submit with the accolade and/or an explanation and examples of current professional innovations in health care that have improved the health status of recipients.

**Benefits of Participation**

**Exemption:**
A practitioner may be exempt from random site visits and random medical record keeping reviews. *(Only applicable if the practitioner has received the NCQA Physician Practices Award.)*

**Recognition:**
Members, colleagues, and the public will have access to this information via member and provider newsletters and notification of the recognition will be on the VPHP website within 30 days from PGA award presentation: www.vapremier.com.

**Quality Commitment:**
Practitioner exemplifies commitment to quality, excellence and continuous health education.

**Receipt of an Award from VPHP (awarded to one practitioner annually):**
VPHP encourages each practitioner that is recognized to proudly display the award in his or her office where visible.

*Do not submit duplicate recognition/awards.*

**Specifics of the Program**

**Who is eligible?**
All participating VPHP practitioners, of any specialty. This includes all medical, allied health, and behavioral health practitioners.

**Who can nominate a practitioner?**
The practitioner, on his/her own behalf, office staff, a VPHP participating colleague, a member, or VPHP employee can submit the form.

**What accolade(s)and/or professional innovations are eligible for recognition?**
Practitioners can be recognized if he/she has received an award and/or special designation in his/her field, appointment to a health related Local, State or National Committee, has received recognition for any of the National Committee for Quality Assurance programs, Centers for Medicare and Medicaid Services (CMS) and DMAS. Also recognized are physicians that have instituted health improvement programs in their practice to reach a specific group of patients to meet their health care needs.

**When will the nominated eligible practitioners be recognized?**
Nominated Practitioners will be recognized quarterly.

**How many PGA Awards will be presented in one year?**
One award will be presented per year.

**Where will the annual accolade be published?**
The winning practitioner will be recognized in the Member and Provider Newsletters and on the VPHP Website.

**How does the practitioner participate?**
The practitioner/nominator must complete the PGA form.

**How often can a practitioner be awarded a PGA by VPHP?**
Once every 5 years.