



Quality Management Evaluation Plan Year 2009

INTRODUCTION

Quality improvement is a program-wide endeavor. It is integrated by interdepartmental monitoring processes and activities, business application systems, databases accessible to all areas, and our internal performance improvement committee. Quality improvement activities are carried out within daily operational routines and are reported to appropriate internal departments, committees and/or external agencies as required.

The ACS quality improvement program is designed to provide a framework for the continuous assessment and improvement of care and services received by individual members. In addition, the program recognizes and promotes the use of approved medical standards, best practices, targeted benchmarks, data collection, and clinical indicators.

QUALITY WORK PLAN SUMMARY

Increasing the Rate of Adolescent Well-Care Visits

Interventions:

- Utilized Pay for Performance incentive to reward members with a gift card for completing their needed well child exam.
- Rewarded top four providers with a cash incentive. Providers assisted in scheduling well child exams and submitted redemption forms.
- Collaborated with MDwise for implementation of instructional flyer/form on PMP change for members transferring from a facility/institutional setting into a foster home.

Plans for 2010:

- The HEDIS measure continuous enrollment requirements were updated for 2010 to use continuous enrollment in the plan. This will assist in identifying members for intervention and the ability to track and trend intervention efforts.
- We will continue with a member incentive to complete needed well child exams but will be expanding the age group to ages 3-21 as a reflection of our 2010 contract amendment. We plan to begin the program earlier this year in an effort for members to schedule needed exams prior to the beginning of the school year.
- We will coordinate efforts with the other Indiana CMO/MCO groups for statewide well child visit interventions.

Increasing the Rate of Follow-Up after Hospitalization for Mental Illness

Interventions:



Quality Management Evaluation Plan Year 2009

- Worked with the MCO/CMO collaboration group to utilize HP Provider workshops to target behavioral health providers only and present educational materials focusing on behavioral health 7-day follow up HEDIS measure. Presentation had a clinical focus and continuing education credits were provided for attendance at no cost to providers.
- Utilized automated daily report within Care Management to ensure member compliance with follow up visits after behavioral health admission and coordination between behavioral health provider and PMP.

Plans for 2010:

- The HEDIS measure continuous enrollment requirements were updated for 2010 to use continuous enrollment in the plan. This will assist in identifying members for intervention and the ability to track and trend intervention efforts.
- We will continue to outreach behavioral health facilities to educate on the Care Select program in an effort to seek more collaboration.
- We anticipate that our new mutual staffing model with the Community Mental Health Centers will be beneficial to ensure members are keeping their follow up appointments after an inpatient behavioral health stay.

Increasing the Rate of LDL-C Screening for Diabetics

Interventions:

- Utilized Pay for Performance incentive to reward members with a \$10.00 gift card for completing their LDL-C Screening. During the same timeframe a \$10.00 gift card was also offered for Diabetic members who completed their Hemoglobin A1C test. Our response rate for the LDL-C screening was 6.20%. We attribute the high response rate due to the fact the member could schedule one visit, complete both tests and receive two \$10.00 gift cards.
- Education on the importance of LDL-C Screenings for diabetic members through our disease management program and pay for performance mailings.

Plans for 2010:

- The HEDIS measure continuous enrollment requirements were updated for 2010 to use continuous enrollment in the plan. This will assist in identifying members for intervention and the ability to track and trend intervention efforts.
- We will continue to perform educational outreach through our Disease Management program to enforce self management of healthcare in order to exceed our third target for HEDIS measurement.



Quality Management Evaluation Plan Year 2009

Increase Emergency Room Utilization Rates for ADVANTAGE Care Select Members with 0-1 ER visits per measurement year

Interventions:

- Provided information for our 24 hour Nurse Line in all member materials and during Care Management.
- Provided education via telephone hold messages on appropriate emergency room use.
- Provided letters and educational materials to members immediately following an emergency department visit.
- Utilized ER notifications via Web Interchange for timely contact of members following an ER visit.

Plans for 2010:

- We will work to optimize the ER notification process via Web Interchange through education and identification of best practices in order to reach the members in a timely fashion to avoid ER misuse.
- We will focus education of the importance of the member/PMP relationship.
- We will continue to audit our PMPs for 24 hour access and provide education to providers not in compliance.
- We will educate members on emergency room alternatives such as the 24 hour nurse line and urgent care facilities in their area.
- Our focus will change based on contractual changes to prevent members from visiting the ER twice in a thirty day period.

Increase rate of Influenza vaccinations for ADVANTAGE Care Select Members

Interventions:

- Provided information on the flu and flu vaccination in our member newsletter.
- Provided education on flu vaccination information via telephone hold messages.
- Provided postcards to all members during flu season to educate members on who should be receiving the flu vaccination.
- Care Management outreach for members in need of a flu vaccination.

Plans for 2010:

- We will continue to send educational postcards to our members prior to the flu season in an effort to protect our high risk members.
- All proper telephone hold messages and educational materials regarding flu season in the member newsletters will also be continued throughout 2010.



Quality Management Evaluation Plan Year 2009

Increase rate of Breast Cancer Screenings

Interventions:

- Utilized Pay for Performance incentive to reward members with a \$10.00 gift card for completing their needed breast cancer screening and provided an educational brochure with incentive offer. Member response rate for the gift card incentive was 3.98%.
- The member newsletter was used as an avenue of educational member outreach.
- Care Management outreach and education for targeted members.

Plans for 2010:

- The HEDIS measure continuous enrollment requirements were updated for 2010 to use continuous enrollment in the plan. This will assist in identifying members for intervention and the ability to track and trend intervention efforts.
- We are implementing a new incentive program in April 2010 which offers a \$15.00 gift card and runs throughout the remainder of the year. We anticipate an improved return rate based on lengthening the duration of the program and increasing the incentive amount.

Increasing provider knowledge and awareness regarding cultural competency

Interventions:

- Implemented provider newsletter which included cultural competency trivia questions in every issue
- Implemented pay for performance plan in which providers were offered \$100 and up to nine free Continuing Education credits to complete online cultural competency course provided by the Department of Health and Human Services' Office of Minority Health.

Plans for 2010:

- We plan to offer similar incentives for our providers to complete cultural competency training courses.
- Expand notification of program to avenues other than the provider newsletter in order to increase participation.
- Educate newly enrolled providers on the importance of cultural competency and the program availability.