

## **QUALITY IMPROVEMENT UPDATE FOR MEMBERS 2017**

Since the start of McLaren Health Plan, Inc. (MHP) in November 1997, the staff has continued to improve the health plan. In 2016, MHP has built a Quality Performance Improvement Program (QPIP) to help you get the care you need. The QPIP has many parts that we have summarized below to help you understand our quality focus, the goals, and outcomes of the QPIP.

In order to evaluate our accomplishments and look for improvement, we looked at several areas to make sure you receive high quality care.

### **MEETING STATE PERFORMANCE MONITORING FOR MEDICAID**

The purpose of the performance monitoring is to have a process for checking the performance of all health plans who work with Medicaid members. The measures range from childhood immunization rates to women's care.

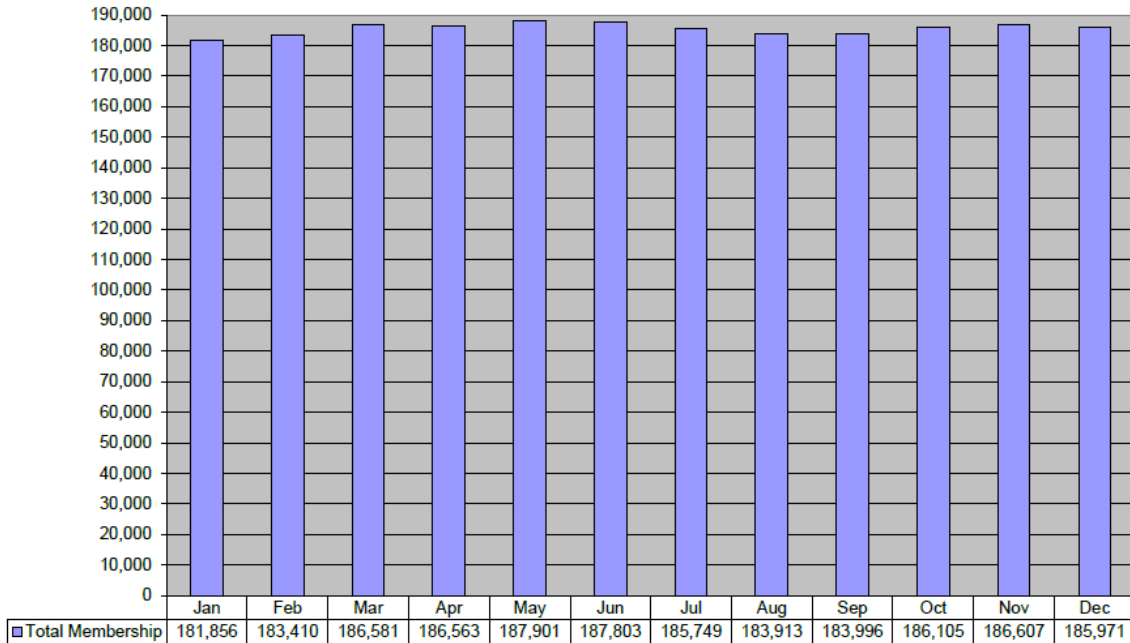
MHP exceeded the standards 82 percent of the time. There is ongoing focus on the measures; on a monthly basis we review our efforts in reaching our members. Improvements are made as we look at member surveys, complaints, and actual rates.

### **MEMBERSHIP NUMBERS**

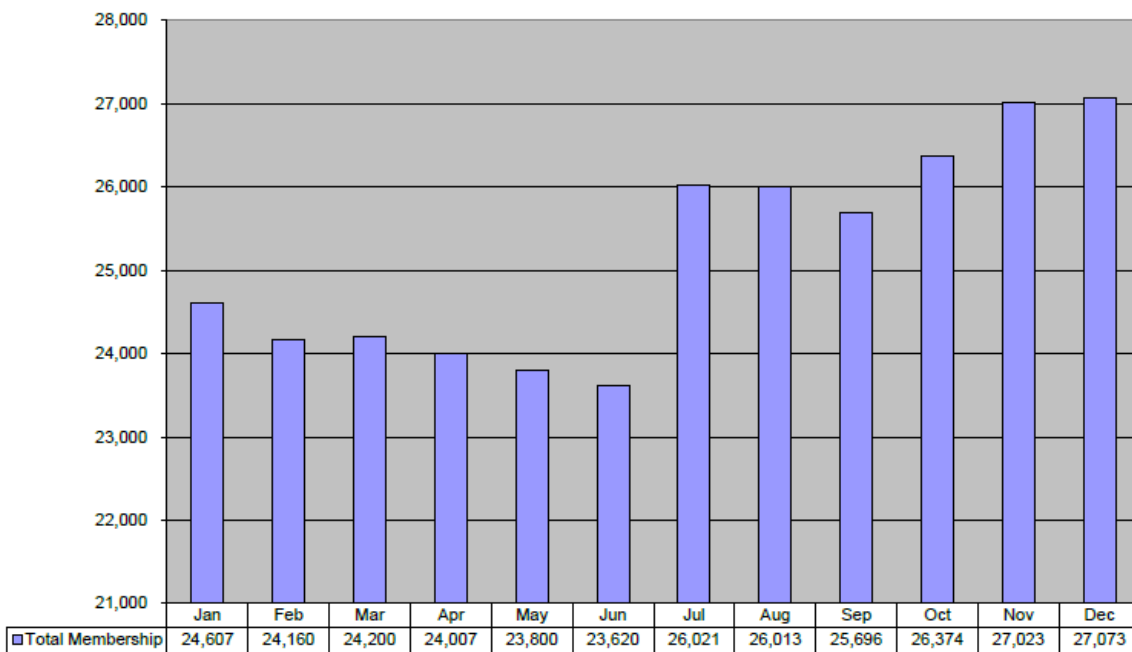
We watch the trends we have in membership growth. This helps us know if our members are satisfied and staying with us. In addition, for the community (commercial) product, the membership via the Michigan Insurance Marketplace is included and subject to all policies, procedures and programs as the MHP Community (commercial) membership off the Marketplace. See the following graphs:

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**Medicaid Membership  
CY 2016**



**Commercial Membership  
CY 2016**

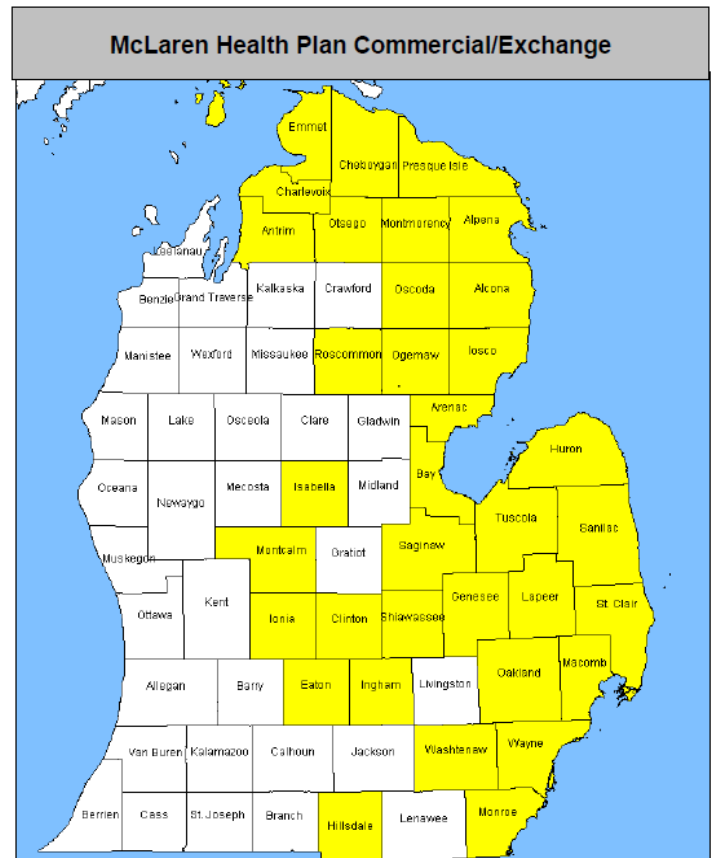
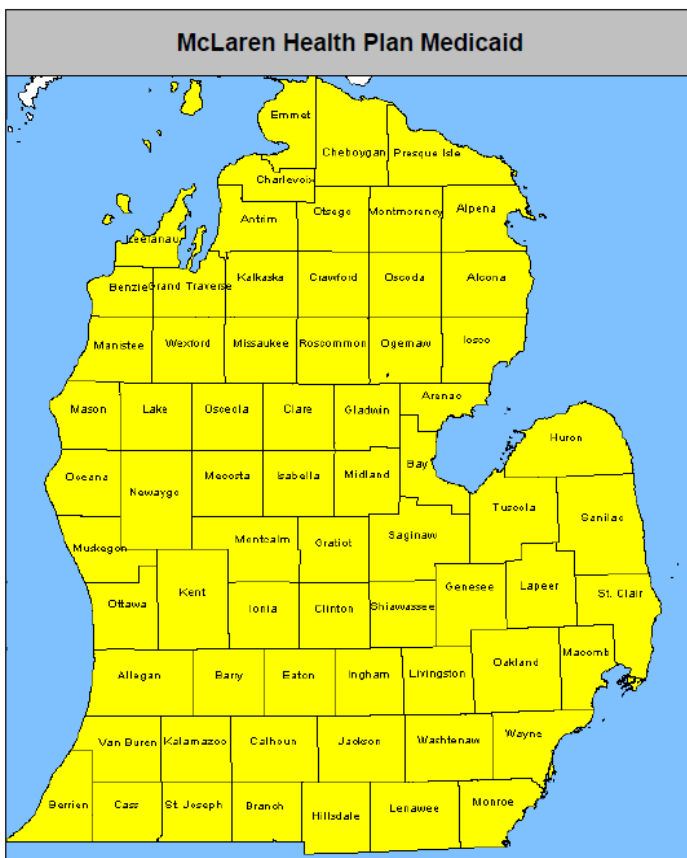


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**COUNTY EXPANSION**

At MHP, we work very hard to be able to provide services all over Michigan. We submit each county by county for approval, and many factors affect whether or not a health plan can provide services in the county. For example, whether or not we have enough doctors and hospitals to take care of everyone. Every year we expand our counties; in 2017, we were approved for the whole state of Michigan for Medicaid members.

See following map for contracted counties by product:



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## MAINTAINING NCQA MANAGED CARE ORGANIZATION (MCO) ACCREDITATION

MHP has completed the National Committee for Quality Assurance (NCQA) accreditation process. This is an onsite review of the quality operations. MHP’s score resulted in an Accredited status. This is based on CAHPS® and HEDIS® for 2016. MHP received the following final 2016 scores for Medicaid:

Accreditation Category	2016	2015	2014
HEDIS	22.5	19.3	19.7
CAHPS	7.9	6.9	7.3
STANDARDS	49.0	49.0	53.3
TOTAL POINTS	79.4	75.2	80.2

For MHP Community (commercial HMO) there were decreases in both CAHPS and HEDIS. The following final 2016 scores for Community (commercial), excluding Marketplace, were scored only on standards:

Accreditation Category	2016	2015	2014
HEDIS	21.3	23.4	17.8
CAHPS	4.4	5.5	6.9
STANDARDS	49.0	49.0	53.3
TOTAL POINTS	74.6	77.9	88.0

On a monthly basis, MHP reviews results to help improve quality care and member satisfaction. The decrease in scores has been moved to a work group to review what areas need the greatest work.

We have listed the areas that we have improved in during 2016:

- A welcome letter to the Healthy Michigan (HMP) membership into our current Medicaid program.
- A new Member Outreach team that supports improving members’ care. There is a focus on HEDIS scores, PCP relationships, and member satisfaction. The outreach team has touched over 75 percent of our contracted PCP offices.

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- The number of members in our diabetic and asthma support programs continues to increase.
- Two additional health management programs; *Taking It Off*, a weight management program, and *Down With Hypertension*, a blood pressure support program, continued during 2016. The focus on these programs is the promotion of life style changes.
- Our McLaren MOMS support program enrolled over 3,600 pregnant members.
- For Medicaid, there were 27 Key Measures from HEDIS that we worked on. 2016 results showed 22 percent of the measures increased.
- Lead screening remains a key performance measure. The goal is 81 percent of 2 year olds having had a blood lead screening. We currently are at 83 percent of 2 year olds.
- Our disabled population continues to be targeted with the *Let's Connect* program. Over 6,000 members of this population were contacted with the goal of encouraging access to their PCP within 60 days of enrollment. 74 percent had a PCP visit within 60 days.
- The Emergency Room Program (ERP) remained focused on frequent utilizers. The foundation of the program is member education coupled with PCP awareness of the members' visit.
- The commercial customer service team focused on issues by product line. Improvement in speed to answer phone calls and decreasing the abandonment rate were accomplished with streamlining of staff.
- MHP delivered physician specific HEDIS reports. This increased the delivery to PCPs and our ability to provide office assistance for patient scheduling by the Member Outreach team.
- MHP has over 24 outreach programs focusing on preventive care. Customer Service and Medical Management have championed this area, and there was an increase in HEDIS and State Performance rates.

MHP is always looking for ways to improve care for our members. Our full QPIP is available upon request by calling the Quality Department at (888) 327-0671, TTY: 711.

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