

MercyCare Health Plans 2010 Work Plan

HEDIS ® Measures

Measure	Improvement Activities	Activity Timeframe	Person(s) Responsible
Antidepressant Medication Management (Acute Phase and Continuation Phase) <u>Measurement</u> The 12-month window starting on May 1 of the year prior to the measurement year and ending on April 30 of the measurement year.	Depression task force with physician advisors. Physician advisors need to be identified.	Quarterly	Linda Hanson
	Review and Analysis with network practitioners at the BHAC	2nd Quarter	Dr. Kosnar
	Members newly started on an antidepressant are downloaded into the depression case managers database for intervention	Weekly	Margaret Gregg
	Depression case manager works with members in the depression case management program to educate on antidepressants and adequate treatment length	Ongoing	Linda Hanson
	Review and analyze non hits for physician trends	2 nd Quarter	Linda Hanson
	Notify newly credentialed physicians of depression guidelines	Ongoing	Jane Sowles
	Notify network practitioners and members of depression guidelines in annual notices	4 th Quarter	Tracy Craker
	Review, update, approve and distribute depression guidelines	4 th Quarter	Linda Hanson
Appropriate Testing for Children with Pharyngitis <u>Measurement</u> A 12-month window that begins on July 1 of the year prior to the measurement year and ends on June 30 of the measurement year. The Intake Period captures eligible episodes of treatment.	Chart review for coding errors, non billed strep tests, and practitioner trends	2 nd Quarter and 4 th quarter	Tracy Craker
	Work with billing and coding to correct any errors found in the review	2 nd Quarter	Tracy Craker

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Appropriate Treatment for Children with Upper Respiratory Infection <u>Measurement</u> A 12-month window that begins on July 1 of the year prior to the measurement year and ends on June 30 of the measurement year.	Chart review for coding errors and practitioner trends	2 nd Quarter and 4 th Quarter	Tracy Craker
	Work with billing and coding to correct any errors found	2 nd Quarter	Tracy Craker
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis <u>Measurement</u> January 1–December 24 of the measurement year. The Intake Period captures eligible episodes of treatment.	Chart review for coding errors and practitioner trends	1 st Quarter and 3 rd Quarter	Tracy Craker
	Work with billing and coding to correct any errors	1 st Quarter	Tracy Craker
Use of Appropriate Medications for people with Asthma (inclusive of all sub measures) <u>Measurement</u> January 1-December 31 of the measurement year	Review and analyze at the Asthma Task Force	4 th Quarter	Lisa Singletary
	Telephonic case management for members that have had inpatient, urgent, or emergency room care	Ongoing	Lisa Singletary
	Reports to practitioners that identifies barriers and concerns	Ongoing	Lisa Singletary
	Review reports that identifies members that are on too many rescue inhalers and send letters	Quarterly	Lisa Singletary
	Asthma action plans and control tests sent to members newly identified notifying of the case management program (SAS report)	Monthly	Lisa Singletary
	Telephonic review with members who have increased inhaler use	Ongoing	Lisa Singletary
	Review Participation Rates at Asthma Task Force		Lisa Singletary
	Review, update, approve and distribute asthma guidelines	2 nd Quarter	Lisa Singletary
	Quarterly Asthma Task Force meetings with physician advisor Dr. Ron Ragotzy	Quarterly	Lisa Singletary

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Use of Appropriate Medications for people with Asthma (inclusive of all sub measures) <u>Measurement</u> January 1-December 31 of the measurement year	Satisfaction surveys sent to members	Ongoing	Lisa Singletary
	Information sent to members and providers about the Asthma Case Management Program and asthma guidelines in annual notices	4 th Quarter	Tracy Craker
	Review and analysis of satisfaction surveys along with comments/complaints (quantitative and qualitative of each) at asthma task force	1 st Quarter	Lisa Singletary
	Notification sent to newly credentialed practitioners of the asthma guidelines	Ongoing	Jane Sowles
	Notify network practitioners and members of asthma guidelines in annual notices	4 th Quarter	Tracy Craker
Breast Cancer Screening <u>Measurement</u> January 1-December 31 of the measurement year	Request data re: members who have not had their screening mammogram following HEDIS® methodology	September	Tracy Craker
	Mailing sent to members who have not had their screening mammogram reminding them to do so along with educational information and locations for mammograms	October	Tracy Craker
Cervical Cancer Screening <u>Measurement</u> January 1-December 31 of the measurement year	Request data re: members who have not had their cervical cancer screen following HEDIS® methodology	April	Tracy Craker
	Mailing sent to members who have not had their screening reminding them to do so along with educational information on cervical cancer and HPV	May	Tracy Craker
Childhood Immunization Status <u>Measurement</u> Birth-Age 2	Request report for the 10 th of the month prior to the quarter of those children in need of vaccination	Quarterly	Gina Caltagerone
	Reviews report, checks WIR, and refers to RN as needed	Quarterly	Gina Caltagerone
Chlamydia Screening in Women <u>Measurement</u> January 1-December 31 of the measurement year	Request data re: members who have not been screened for Chlamydia following HEDIS® methodology	May	Tracy Craker
	Mailing sent to members who have not been screened for Chlamydia reminding them to do so along with educational information	June	Tracy Craker

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Cholesterol Management for Patients with Cardiovascular Disease (LDL Screening) Measurement January 1-December 31 of the measurement year	Telephonic case management for members with ICD-9 codes for hypertension, hyperlipidemia, and LDL greater than 159, and a secondary or tertiary diagnosis of AMI, CABG, IVD, and all other cases of PTCA	Ongoing	Lisa Singletary
	Assist members with determining what changes they are ready to make	Ongoing	Lisa Singletary
Colorectal Cancer Screening Measurement January 1-December 31 of the measurement year	Send letters to members over 50 who have not had appropriate screening for colorectal cancer screening offering FOBT kit	April	Gina Caltagerone
	Send FOBT kits to members who request them	Ongoing	Gina Caltagerone
	FOBT results sent to physician through EMR	Ongoing	Gina Caltagerone
Comprehensive Diabetes Care Measurement January 1-December 31 of the measurement year	Diabetes Task Force Meetings with physician advisor Dr. Tim Reid	Quarterly	Joan Fisher
	Review, update, approve and distribute diabetes guidelines	3 rd Quarter	Joan Fisher
	Satisfaction surveys sent to members	Ongoing	Joan Fisher
	Review Participation Rates at Diabetes Task Force	1 st Quarter	Joan Fisher
Comprehensive Diabetes Care Measurement January 1-December 31 of the measurement year	Review and analysis of satisfaction surveys along with comments/complaints (quantitative and qualitative of each) at diabetes task force	1 st Quarter	Joan Fisher
	Notification sent to newly credentialed practitioners of the diabetes guidelines	Ongoing	Jane Sowles
	Notify network practitioners and members of diabetes guidelines in annual notices	4 th Quarter	Tracy Craker
	Physician performance comparative profiles using HEDIS® data	3 rd Quarter	Joan Fisher
	Letters sent to members, and their physician who have not had an A1c, eye exam, or LDL test in the last 9 mo.	Quarterly	Joan Fisher
	Telephonic case management to members whose HbA1c is ≥ 8.5	Every 2 months	Joan Fisher
	Letters sent to newly diagnosed members offering the diabetes case management	Monthly	Joan Fisher

HEDIS ® Measures			
Measure	Improvement Activities	Activity Timeframe	Person(s) Responsible
Controlling High Blood Pressure Measurement January 1-December 31 of the measurement year	Targeted mailings to members to introduce members to the Healthy Heart Case Management program	Monthly	Lisa Singletary
	Telephonic case management to program members	Ongoing	Lisa Singletary
Flu Shots for Adults (ages 50-64) Reported from CAHPS® Measurement September 1 of the measurement year and the date on which the CAHPS 4.0H survey was completed	Educational mailings to members on the importance of the flu shot	September	Gina Caltagerone
Follow Up After Hospitalization for Mental Illness Measurement January 1 to December 1 of the measurement year	Reviewed and analyzed with network practitioners at the BHAC	2 nd Quarter	Dr. Kosnar
	Depression case manger to facilitate follow up for members with the outpatient provider if the inpatient provider cannot obtain an appointment	Ongoing	Linda Hanson
	Review at quality meetings with Mercy and Rogers	Ongoing	Linda Hanson, Tracy Craker, Dr. Kosnar
	UR nurse to request discharge appointment be set up prior to discharge	Ongoing	UR RN
Follow Up for Children Prescribed ADHD Medication Measurement The 12-month window starting March 1 of the year prior to the measurement year and ending February 28 of the measurement year	Review and update guidelines and take to QUM for approval	1 st Quarter	Dr. Kosnar
	Notification to practitioners of reviewed and updated guidelines	1 st Quarter	Tracy Craker
	Notification sent to newly credentialed practitioners of the ADHD guidelines	Ongoing	Jane Sowles
	Notify network practitioners and members of ADHD guidelines in annual notices	4 th Quarter	Tracy Craker
	Review and Analysis with network practitioners at the BHAC	2nd Quarter	Dr. Kosnar

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Medical Assistance with Smoking Cessation (Advising Members to Quit) <u>Measurement</u> January 1 to December 1 of the measurement year	Participation in CTRI grant for ongoing translational research of smoking cessation counseling to clinical settings	ongoing	Gina Caltagerone
Timeliness of Prenatal and Postpartum Care <u>Intake Period</u> November 6 of the year prior to the measurement year and November 5 of the measurement year	Main provider to manage scheduling system to allow more appointment slots for prenatal appointments	Ongoing	LaVay Scott
	Main provider to transfer to physician’s nurse if an appointment is not available	Ongoing	LaVay Scott
	Continue to work with main provider in the improvement process	Ongoing	LaVay Scott
	Letters sent after delivery reminding members to schedule their postpartum appointment	Ongoing	LaVay Scott
	Main hospital to continue to include follow up appointment on the discharge paper work	Ongoing	LaVay Scott
	Main practice site schedules postpartum appointment at prenatal visit	Ongoing	LaVay Scott
	Review HEDIS® misses to identify practitioner trends	3 rd Quarter	LaVay Scott
	Continue to work with main provider in the improvement process	Ongoing	LaVay Scott
	Main provider site will continue to schedule 2 week post op appointment along with the postpartum visit for cesarean sections	Ongoing	LaVay Scott
Use of Imaging Studies for Low Back Pain <u>Intake Period</u> January 1–December 3 of the measurement year.	Prior authorizations for MRI	Ongoing	Dr. Bedrossian
	Continue educational communications with physicians when needed	Ongoing	Dr. Bedrossian
	Facilitate meeting with the radiology department	Ongoing	Dr. Bedrossian

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Use of Spirometry Testing in the Assessment and Diagnosis of COPD Intake Period July 1 st of the year prior to June 30 th of the measurement year	Evaluate if we will have enough members for the HMO to report	Ongoing	Margaret Gregg
	Educational letters to practitioners	1 st Quarter	Lisa Singletary

Monitoring Safety			
Project	Improvement Activities	Activity Timeframe	Person(s) Responsible
Education to Members	Educate members on how to access CheckPoint and the information about network hospitals that is available	website	Tracy Craker
	Educate members on the importance of communication	website	Tracy Craker
	Educate on EMR	website	Tracy Craker
	Notify members of their rights and responsibilities	Member Handbook	Tracy Craker
	Notify members of quality and safety resources	website	Tracy Craker
Adverse Events	Identify potential quality issues during all health plan activities	Ongoing	UR RN
Medical Record Audit	Request data for medical record audit	1 st Quarter	Gina Caltagerone
	Medical record review	1 st Quarter	HEDIS RNs
	Notify practitioners of audit results	2 nd Quarter	Gina Caltagerone
	Request data for medical record re-audit if needed	3 rd Quarter	Gina Caltagerone
	Medical record re-audit if needed	3 rd Quarter	Sue Kumlien/Kay Kastor
	Notify practitioners of re-audit results	4 th Quarter	Gina Caltagerone
	Medical Record Report	4 th Quarter	Tracy Craker
Site Visits	Review all sites prior to credentialing	Ongoing	Jane Sowles
Member Complaint Review	Review complaint report and work to resolve	Monthly	Jane Sowles
Pharmacy Management	Continue quantity limits	Ongoing	Marc Dinnel
	Continue prior authorizations	Ongoing	Marc Dinnel
	Pharmacy and Therapeutics Committee	Quarterly	Marc Dinnel

Monitoring Safety			
Project	Improvement Activities	Activity Timeframe	Person(s) Responsible
Continuity and Coordination of Care	Chart review of all members admitted to a network psychiatric facility to ensure the psychiatric discharge summary was sent to the member's PCP	Quarterly	Tracy Craker
Clinical Practice Guidelines	Review/update and approve needed clinical practice guidelines	Annually	Specific Task Forces/QUM
	Notify member and practitioners of guidelines in member handbook and provider mailing	Annually	Tracy Craker
	Notify newly credentialed practitioners of guidelines	Ongoing	Jane Sowles
EMR	Continue to advocate for the use of more pop up functions	Ongoing	Dr. Bedrossian
	Continue to advocate for EMR at all network provider sites	Ongoing	Dr. Bedrossian
Safety Committee	Review safety activities for potential improvement recommendations	Annually	Dr. Bedrossian

CAHPS®			
CAHPS Measure	Improvement Activities	Activity Timeframe	Person(s) Responsible
Claims Processing Composite	Claims restructured to form teams.	Ongoing	Betsy Fulmer/Karol Frame
	Claims processing streamlined by using reports for claims processing	Ongoing	Betsy Fulmer/Karol Frame
	Reviewing claims processes, updating or developing appropriate SOP's	Ongoing	Claims Department
	Develop training manual	Ongoing	Betsy Fulmer
	Audits being developed to assist in training	Ongoing	Betsy Fulmer/Karol Frame
Customer Service Composite	Reduction in grievances through member pay and educate	Ongoing	Betsy Fulmer /Patti Heise
	Implementation of interactive website resulting in reduction of provider calls	Ongoing	Barb Johnson
	Reviewing types of phone calls by hour to determine how to improve percent of calls answered in under 30 seconds	Ongoing	Jamie Luth/Betsy Fulmer

CAHPS®			
CAHPS Measure	Improvement Activities	Activity Timeframe	Person(s) Responsible
Clinical Care Composites: <ul style="list-style-type: none"> ▪ <i>Getting Care Quickly Composite</i> ▪ <i>Getting Needed Care Composite</i> ▪ <i>How Well Doctors Communicate Composite</i> ▪ <i>Rating of Personal Doctor</i> ▪ <i>Rating of Specialist Seen Most Often</i> 	Letter to physicians with results of CAHPS® scores	4 th Quarter	Dr. Bedrossian
	Vice president of the health plan and the manager of customer service participating in ongoing review with executives and clinic directors to develop action plans	Ongoing	Joe Nemeth/Betsy Fulmer
	Publish CAHPS & HEDIS accomplishments	Website	Tracy Craker