

Quality Assessment and Improvement Strategy



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Quality Assessment

The UHC Quality Management Program is an organization wide, integrated program designed to improve the quality of care and service for UHC members.

The UHC Quality Management Program establishes key performance indicators and performance goals for the delivery of clinical care services in accordance with HEDIS criteria and measurement methodologies;

UHC uses demographic and utilization information from its system to identify areas for focused study and plan quality improvement initiatives. HEDIS data is compiled annually and used to identify measures for improvement.



Quality Goals

The goal of the Quality Management Program is to improve care and services to members through application of continuous improvement processes.

UHC maintains our Quality Management Program with the following goals:

- Member access to quality care
- Effective care that emphasizes member safety;
- Health outcomes that demonstrate effective health care delivery
- Member satisfaction with health plan services;
- Provider satisfaction with health plan services



Improvement Strategy

To demonstrate our commitment to high quality of care and service, Universal Health Care would like to present an excerpt from our Medicare Health Plan Employer Data and Information Set (HEDIS 2006) report.

This data provides information used to measure our success in meeting our goals in certain performance areas; including access and quality of care, preventive health care and member satisfaction (CAHPS). Below; is a representation of the measurement timeline for the performance indicators.

UHC identifies selected measures for additional review and analysis; as part of our Quality Improvement Activities (QIA), including diabetes, heart conditions and high blood pressure.

Measurement Process

Health Plan Employer Data and Information Set

HEDIS is the most widely used set of performance indicators in the managed care industry; it is often used as a report-card to categorize HMO performance

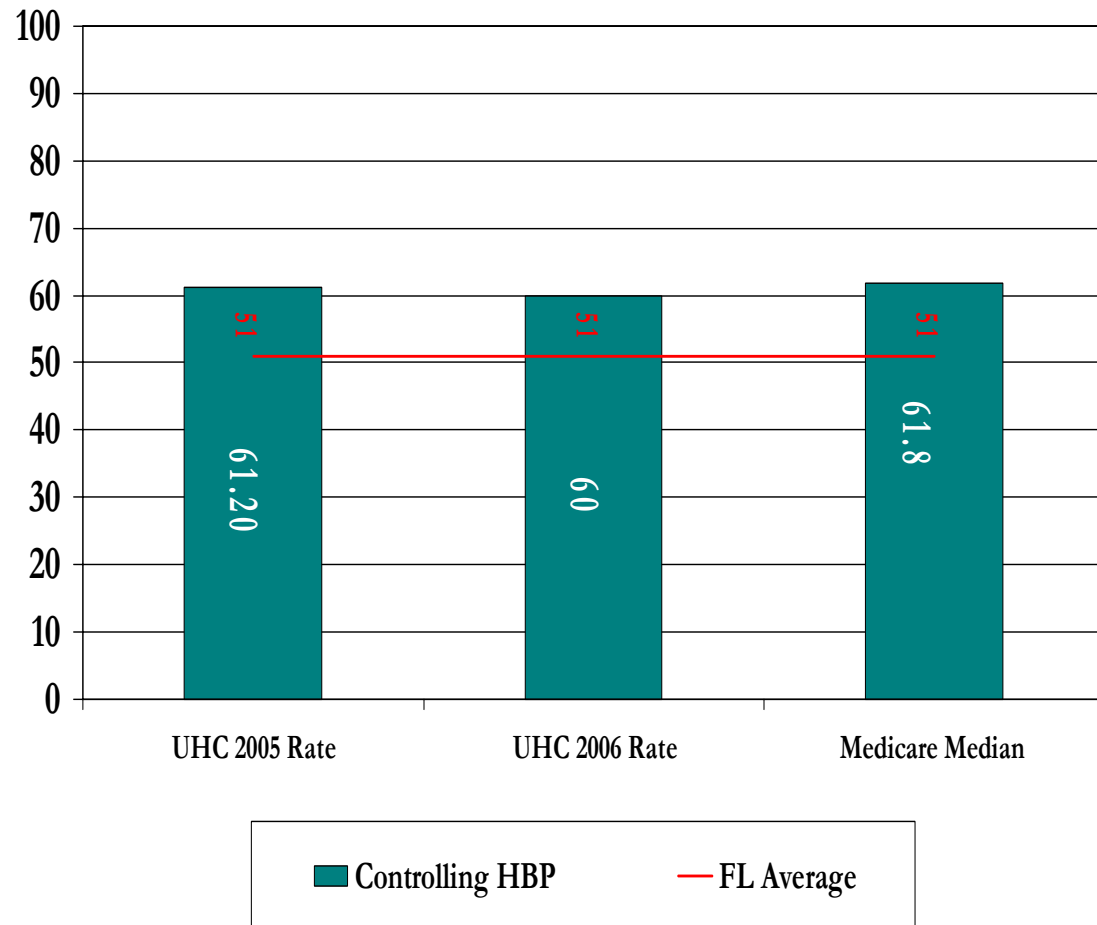
Additional information about UHC programs is available to providers and members, including the quality program description, HEDIS, quality activities and progress toward established goals. Please feel free to contact our Quality Improvement Department to request a copy of the UHC Quality Management Program



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Controlling High Blood Pressure

- Members aged 46 – 85
- Diagnosed with hypertension
- BP control; 140/90 mmHg or lower

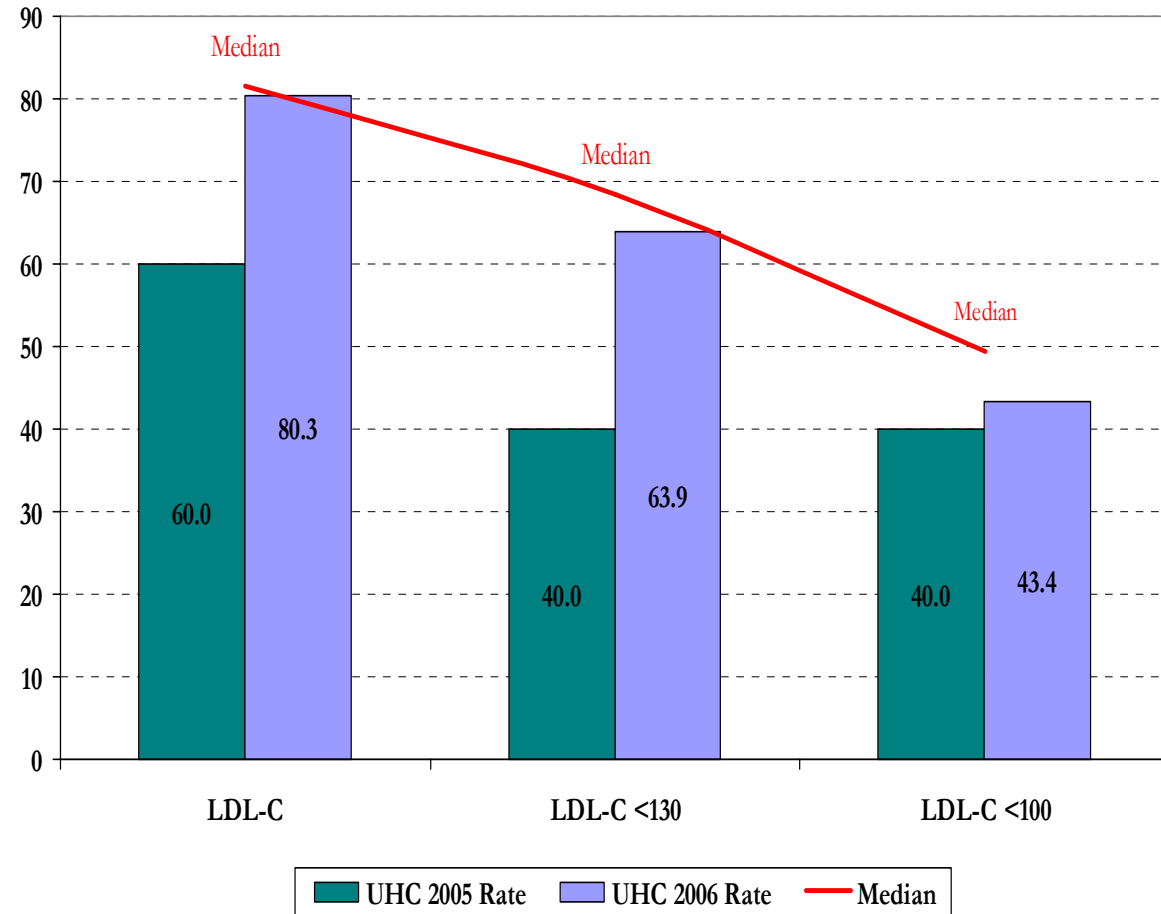


Cholesterol Mgt for Patients With Cardiovascular Conditions

Members aged 18–75
Discharged after an
AMI, CABG or PTCA,
or a diagnosis of IVD

Numerator:

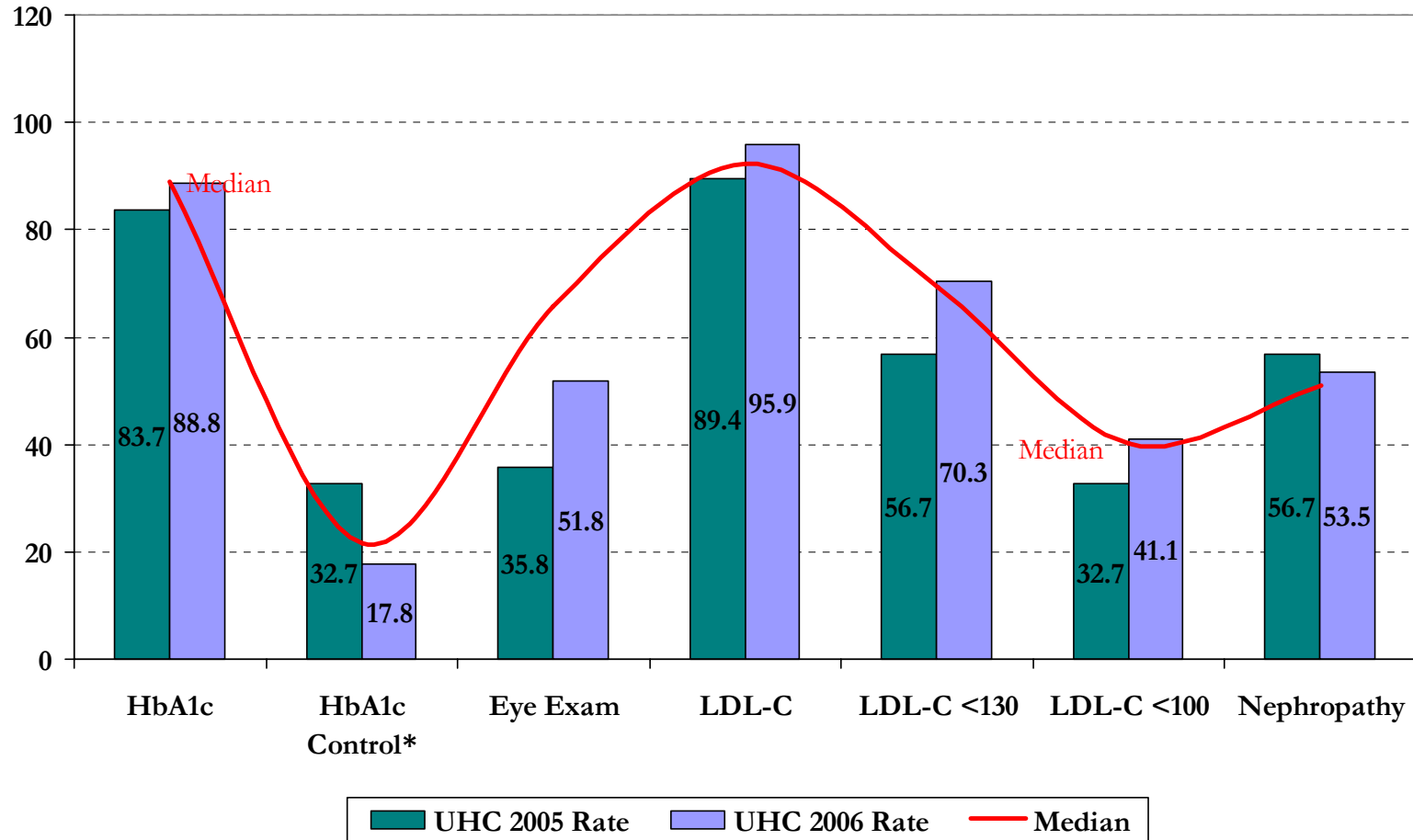
- LDL-C screening
- LDL-C controlled (<130 mg/dL)
- LDL-C controlled (<100 mg/dL)



Comprehensive Diabetes Care

- Diabetic members aged between 18 and 75
- HbA1c screening
- HbA1c poorly controlled*; > 9% (inverted rate)
- Lipids Screening
- Lipids in control LDL-C < 130 mg/dL
- Lipids in control LDL-C < 100 mg/dL
- Eye Exam (retinal)
- Screening or evidence of treatment for nephropathy

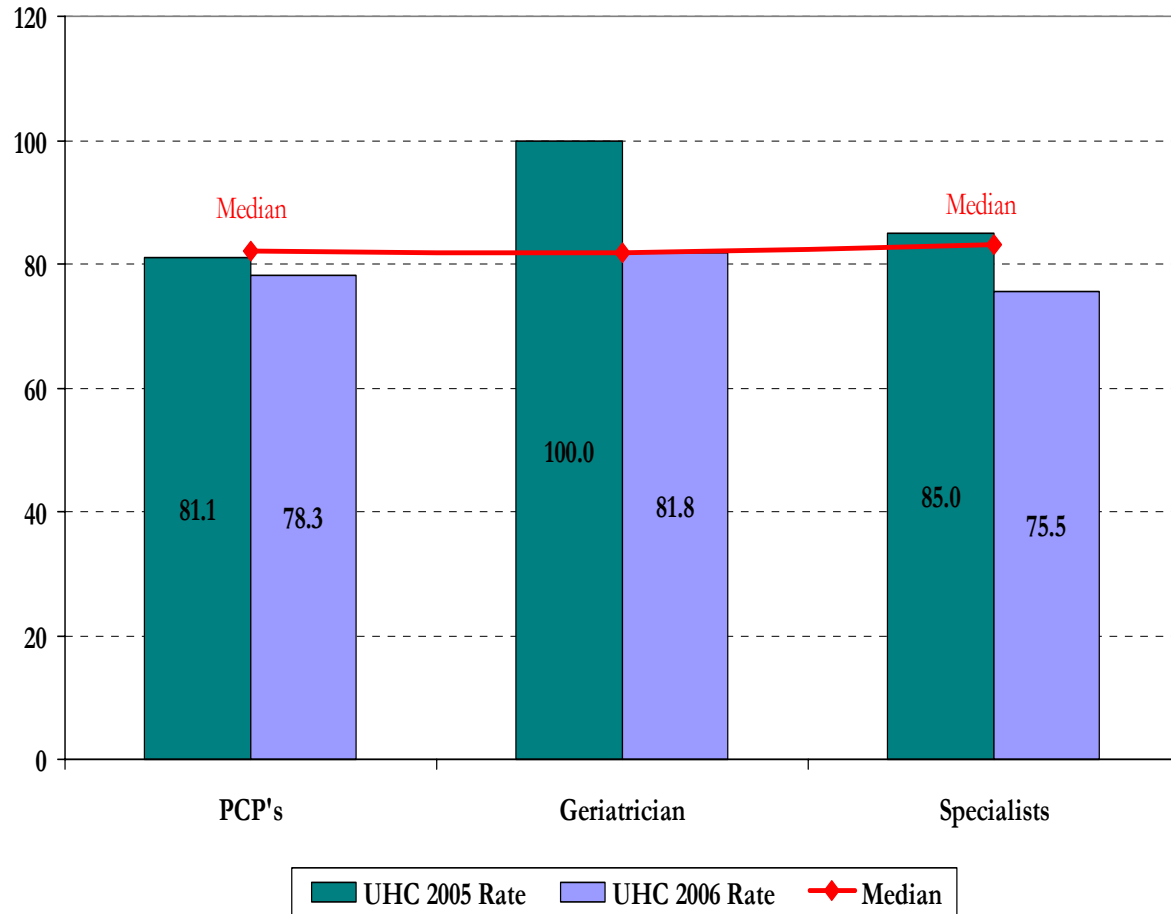
Diabetic Care Measurement



UHC Physicians: Board Certification

Percentage of board certified physicians:

- PCP's
- Geriatricians
- Specialists



UHC Member Satisfaction

Measurement

Annually, the Centers for Medicare & Medicaid Services (CMS) surveys Medicare beneficiaries; to assess enrollee experiences with their health plan. This survey is called the Consumer Assessment of Health Plans Study (CAHPS)

UHC Strengths

Based on the survey results, UHC scored better than the FL-State Average on

- Getting Care Quickly
- Courteous and Helpful Office Staff

UHC Opportunities For Improvement

Based on the survey results, UHC scored equal to the FL-State Average on

- Getting Care Needed
- Doctors Who Communicate Well
- Health Plan Customer Service



UHC Provider Satisfaction

Measurement

UHC conducted a Provider Satisfaction survey. The survey was sent by mail to PCP's and high volume Specialists to determine provider satisfaction with both the Utilization Management processes and overall satisfaction with UHC. Survey results were analyzed by individual question response.

Opportunities For Improvement


Based on the survey numeric results and comments, the following areas were chosen for further review and analysis:

- Communication between providers and UHC staff in Medical Management, Member Services, and Provider Operations ; and
- The Medical Management program and processes.



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UHC Provider Satisfaction

 UNIVERSAL HEALTHCARE		Strongly Agree = 5		Agree = 4		Neither Agree nor Disagree = 3		Disagree = 2		Strongly Disagree = 1		Total # Responses
		CNT	PCT	CNT	PCT	CNT	PCT	CNT	PCT	CNT	PCT	
1	I am satisfied with the pre-service determination (pre-certification) process.	14	11%	48	36%	24	18%	20	15%	26	20%	132
2	The pre-service determination (pre-certification) process is timely.	14	11%	51	38%	24	18%	20	15%	24	18%	133
3	The preferred drug list meets the members' needs.	8	6%	41	32%	46	36%	19	15%	15	12%	129
4	The UHC speciality network meets the members' needs.	14	10%	43	32%	41	31%	13	10%	23	17%	134
5	The UHC Medical Director is available to me.	11	9%	25	19%	61	47%	11	9%	21	16%	129
6	The UHC case management program is valuable to the members.	9	7%	32	24%	65	50%	11	8%	14	11%	131
7	I am satisfied overall with the medical management at UHC.	15	12%	43	33%	21	16%	29	22%	22	17%	130
8	I understand the UHC medical management requirements.	11	8%	62	47%	38	29%	14	11%	6	5%	131
9	The provider manual adequately addresses UHC medical management procedures.	9	7%	48	37%	45	35%	16	12%	11	9%	129
10	There is good communication between my office and health plan Medical Management staff.	11	8%	44	33%	28	21%	22	16%	29	22%	134
11	There is good communication between my office and health plan Member Services staff.	9	7%	45	34%	29	22%	21	16%	27	21%	131
12	There is good communication between my office and health plan Provider Operations staff.	11	8%	47	35%	32	24%	19	14%	24	18%	133
13	I would recommend UHC to other Medicare members.	15	11%	41	31%	30	22%	12	9%	36	27%	134
14	I would recommend UHC to other providers.	18	14%	39	29%	30	23%	14	11%	32	24%	133
15	UHC is committed to excellence.	15	11%	38	29%	39	29%	18	14%	23	17%	133

Quality Improvement Strategy

Quality Improvement Strategy: Select key indicators required for future success based on:

- Reporting/Potential for improvement
- Use HEDIS audit report as a guide for system improvement and process refinement
- Identify interventions to improve outcome measures

If you have any suggestions for us on how we can improve this report, or if you have any questions regarding the interpretation of the results, please feel free to contact our Quality Improvement Department

