

Quality Improvement

Purpose of the Quality Improvement/Utilization Management Program The Quality Improvement/Utilization Management (QI/UM) Program's purpose is to assure the quality, safety, appropriateness, timeliness, availability, and accessibility of care and services provided to Highmark Wholecare members. The comprehensive evaluation and assessment of clinical, demographic, and community data in conjunction with current scientific evidence is paramount to understanding the membership and developing effective programs to meet the identified needs. The development of health care programs must be done in collaboration with all partners including members, practitioners, community agencies, regulators, and staff, not only to meet the current health care needs of the members served but to begin to address the future needs of the members. Essential to the success of these partnerships and programs is the establishment of meaningful data collection and measurement of outcomes to assess the improvements in the quality of care and to identify where opportunities exist for improvement. As a participating provider Highmark Wholecare asks that you cooperate with QI activities to improve the quality of care and services members receive. This may include the collection and evaluation of data, participation in various QI initiatives and programs and allowing the plan to use and share your performance data.

Goal of the Quality Improvement/Utilization Management Program

The goal of the QI/UM Program is to ensure the provision and delivery of high quality medical and behavioral health care, pharmaceutical, and other covered health care services and quality health plan services. The QI/UM Program focuses on monitoring and evaluating the quality and appropriateness of care provided by the Highmark Wholecare™ health care provider network, and the effectiveness and efficiency of systems and processes that support the health care delivery system. Highmark Wholecare focuses on assessing its performance outcomes utilizing quality improvement concepts and appropriately recognized quality measurement tools and reports (such as qualitative, quantitative and root/cause barrier analyses). Assessing performance outcomes helps identify opportunities for improvement in the provision and delivery of health care and health plan services, patient safety, satisfaction with care and services, and achieving optimum member health outcomes.

Of specific importance, the QI Program focuses on three key areas:

- a) Preventive health care,
- b) Prevalent chronic health care conditions and
- c) Service indicators.

The Program strives to:

- Improve members' compliance with preventive care guidelines, disease management strategies, therapies that are essential to the successful management of certain chronic conditions.
- Identify opportunities to impact disparities and language barriers in healthcare.
- Improve patient safety by providing member and practitioner education about safe practices, and communicating safety actions or provisions in place throughout the practitioner/provider network. The Program allows for the assessment and identification of opportunities which will improve patient safety.

By considering population demographics and health risks, utilization of healthcare resources, and financial analysis, Highmark Wholecare plans ensure that the major population groups are represented in QI/UM activities and health management programs chosen for assessment and monitoring. This information, along with high-volume/high-cost medical and pharmaceutical/drug reports, health risk assessment data, disease management and care management data, satisfaction survey information, and other utilization reports, is used to identify members with special needs and/or chronic conditions and to develop programs and services to assist in managing their condition.

Objective of the Quality Improvement/Utilization Management Program
The objectives of the QI/UM Program are consistent with our mission, as well as its
commitment to the effective use of healthcare resources, and continuous quality
improvement. An annual QI/UM Work Plan is developed to ensure that the current needs of
the population are being evaluated, changes are noted, programs implemented to address
the needs of members, and to ensure continuous quality improvement. The QI/UM Program
is assessed on an annual basis to determine the status of all activities and identify
opportunities that meet the QI/UM Program objectives.

Objectives are as follows:

Implementation of a QI/UM Work Plan that identifies and tracks completion of planned activities for each year:

- ✓ Assuring processes are in place using Total Quality Management values to assess, monitor, and implement actions when opportunities are identified regarding the utilization of healthcare resources, quality of care, and access to services;
- ✓ Developing and updating guidelines from assessment of the member population to address key healthcare needs. These guidelines are built on scientific evidence and recommendations from expert and professional organizations and associations;

- ✓ Conducting studies to measure the quality of care provided, including established guideline studies which evaluate improvements made, observed barriers and opportunities;
- ✓ Developing actions to address quality of care opportunities;
- ✓ Evaluating the utilization and quality performance of Highmark Wholecare practitioners and vendors to assure Highmark Wholecare standards are met, identify opportunities and best practices;
- ✓ Identifying barriers, opportunities and interventions (as needed);
- ✓ Conducting satisfaction surveys to determine member and provider satisfaction with Highmark Wholecare services, programs, organizational policies, and the provision of healthcare. Results are reviewed to identify barriers and opportunities. Interventions are developed and implemented following an analysis of results in an effort to increase member satisfaction and to improve the quality of care and services provided.

Scope of the Quality Improvement/Utilization Management Program Implementation and evaluation of the QI/UM program is embedded into our daily operations. The QI/UM Program leverages internal information, systems, practitioners, and community resources to monitor and evaluate use of healthcare services, continuous improvement and to assure implementation of positive change.

The scope of the Program includes:

- ✓ Enrollment
- ✓ Members' Rights and Responsibilities
- ✓ Network Accessibility and Availability, including those related to Special Needs
- ✓ Healthcare Disparities
- ✓ Network Credentialing/Recredentialing
- ✓ Medical Record Standards
- ✓ Member, Provider and Employee Education
- ✓ Member and Provider Services
- ✓ Claims Administration
- ✓ Fair, Impartial and Consistent Utilization Review
- ✓ Evaluating the Healthcare Needs of Members
- ✓ Preventive Health, Disease Management, and Care Management Services, including Complex Case Management
- ✓ Clinical Outcomes
- ✓ Oversight of Delegated Activities
- ✓ Patient Safety
- ✓ Continuous Quality Improvement using Total Quality Management Principles

To request a copy of the Quality Improvement Program, Work Plan or Annual Evaluation, please contact Highmark Wholecare's Provider Services Department at 1-800-392-1145.

