

# 2023 QUALITY IMPROVEMENT PROGRAM EVALUATION

## HIGHLIGHTS OF PLAN ACCOMPLISHMENTS FOR 2023 INCLUDE:

### Continued efforts to improve Access and Availability

- Hiring of Primary Care Providers (Family Medicine), Specialist and Ancillary, which include Anesthesia, General Surgery, OB/GYN, Pediatric Surgery, Radiology, Dialysis, DME, Hospice, Laboratory/Pathology, Outpatient Surgery Center, Palliative Care, Speech Therapy and Physical Therapy.
- Implemented the new Member and Provider Portals in April 2022. As of 12/29/23, 994 members created a member portal account, and 490 providers obtained access to the provider portal.
- VCHCP contracted with Teladoc in November 2019 to provide our members with 24/7 access to a licensed physician. There were 571 visits via Teladoc in 2023 and 2,970 visits since inception. According to Teladoc's 2023 Satisfaction Survey, 94% of the 60 respondents stated that their overall satisfaction with Teladoc was either good or outstanding.

### Effectiveness of Case Management Program:

- The case management (CM) program maintained its acceptance rate above the 20% goal which was 32%.
- 62.5% inpatient admissions decreased overall for the members enrolled in the program at least 60 days.
- 28.57% reduction in ER visits decreased overall for the members enrolled in the program at least 60 days.
- In the Episodic Case Management Member Satisfaction Survey, 18 members responded to the question about their satisfaction with the episodic case management they received. Of these, 17 indicated they were very satisfied, representing 94.44%, while 1 member reported being satisfied, making up 5.56%. For the second question regarding their satisfaction with their case managers, all 18 members responded, indicating 100% very satisfied.
- In the Case Management Satisfaction Survey, 3 members reported being 100% very satisfied with the case management they received, and these same 3 members also expressed 100% very satisfied with their case managers.

### Effectiveness of Disease Management Program:

- Successful health coaching calls to members with diabetes and asthma under the Disease Management Program
- Successful health coaching and case management resulted in higher member compliance with A1c testing and decreased risk stratification.
- 100% overall satisfaction with Asthma and 98.1% with Diabetes Disease Management programs.
- Health Effectiveness Data Information Set (HEDIS) birthday card to include preventive services care gaps and case management referral information.

### Efficiency in Utilization Management:

- The UM department achieved all goals and activities while meeting all the Department of Managed Health Care's (DMHC) requirements and initiated work for the National Committee on Quality Assurance (NCQA) Interim Survey.
- Collaborated with clinic providers and administration to improve care coordination, specialist access and increasing efficiency. In addition, collaborated with the clinics to ensure timely submission of treatment authorization requests to the Plan's UM.
- Annual evaluation and reduction of services requiring prior authorization resulted in efficiencies in the Utilization Management (UM) Department. This resulted in meeting the program resource needs of the UM program. In addition, the reduction in prior authorization of services in UM reduced unnecessary barriers for members getting timely care.
- Reduced the 45-day denial for lack of medical information due to implementation of process improvement in the Utilization Management (UM) department (Calling/communicating on all pended cases for clinical information & Medical Director's intervention by checking all pends and denials for appropriateness).

- Several systems enhancement and refining processes were implemented such as QNXT version upgrade, QNXT/Reporting systems enhancements for efficiency, continued expansion of provider treatment authorization requests (TARs) submission in the provider portal and continued viewing of authorizations in Healthx.
- VCHCP Ops Triad meeting in 2023 ensured collaboration with the VCMC Health Care Agency leadership to

### Services:

- Member Services Team met all phone and e-mail customer service response time and quality goals.

### Surveys:

- All surveys were completed in a timely manner, which included 2 directory assessments, After-Hours Survey, PAAS, and the Provider Satisfaction survey.

### Processes:

- The VCHCP Member Services Department phone and email response time goals were met.
- Achieved 98% to 100% compliance with UM review turnaround time.
- UM physicians and nurses met the passing score of 90% or better on inter-rater testing.

### Communications:

- Distributed member and provider newsletters twice a year, highlighting services offered by the Plan, as well as education about these services, benefits and guidelines.
- Continued to utilize email/fax-blasts to providers to relay important updates to practitioners on a timely basis; for example, the VCHCP drug formulary update (additions and deletions).
- Mailed postcard reminders to members re: needed mammograms, colorectal screenings and reminder on appropriate use of the Emergency Room.

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## WHILE THE PLAN REALIZED MULTIPLE ACCOMPLISHMENTS THROUGHOUT 2023, THERE WERE KEY CHALLENGES FOR THE PLAN IN 2023 THAT CAME TO LIGHT:

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- Identification of barriers and interventions that will improve Health Effectiveness Data Information Set (HEDIS) scores overall, with the emphasis on the following measures:
  - Hemoglobin A1C Control for Patients with Diabetes (HBD)
  - Breast Cancer Screening (BCS)
  - Postpartum Care (PPC)
  - Plan All-Cause Readmission (PCR)
- Consistent timeliness of follow up care:
  - After Emergency Room visits
  - After Inpatient hospital admissions
  - Postpartum
- Timely communication of feedback from behavioral health providers to PCPs through increased collaboration between Optum Behavioral Health and VCHCP.
- Increase rates of member participation in the Case Management program.
- Increased A1c testing compliance, decreased A1c level and decreased risk level of members with successful health coaching and case management.
- Maintain volume of members stratified as moderate and high risk to allow health coaching and case management screening and intervention to more members.



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HEALTH CARE PLAN  
A Department of Ventura County Health Care Agency