



2017 Quality Management overview

BlueCross BlueShield of Western New York is committed to helping our members get and stay healthy at a low cost. We do this by:

- Offering quality programs.
- Working with your doctors and/or facilities.
- Educating our community.

Quality Management looks at services members receive and finds ways to make programs better as well as create new ones.

National and state quality programs

National Committee for Quality Assurance (NCQA)

BlueCross BlueShield has maintained national accreditation through the NCQA. NCQA reviews our Medicaid plan’s policy and procedures, quality programs, customer satisfaction and quality and access to care with surveys and reporting of HEDIS scores.

Healthcare Effectiveness Data and Information Sets (HEDIS®)

HEDIS is a set of measures collected by all accredited health plans using the same specifications. The results allow an “apples to apples” comparison of each health plans’ results. HEDIS has seven areas of care:

- Effectiveness of care
- Access/availability of care
- Experience of care
- Utilization and risk adjusted utilization
- Relative resource use
- Health plan descriptive information
- Measures collected using electronic clinical data systems

HEDIS rates improved in 26 measures in the Medicaid plan in 2017. Preventive services like well child visits assessing BMI, nutrition and physical activity increased an average of 5 percentage points. Adolescent well child visits also increased 5 percentage points.

Measure	2015	2016	2017
BMI	82.99	84.59	90.93
Nutrition	82.39	82.30	86.98
Physical activity	76.72	74.43	79.77
Adolescent well child	61.58	63.70	69.47

In 2017, NCQA awarded us a Commendable Accreditation status using the total of HEDIS scoring and customer satisfaction surveys. This accreditation status is reviewed every year.

Quality Assurance Reporting Requirements (QARR)

The Quality Assurance Reporting Requirement or QARR scores are submitted to the New York State Department of Health every year. The measures include:

- HEDIS measures.
- New York State measures, like adolescent preventive care, viral load suppression, lead screening in children and colorectal screening.

Both HEDIS and QARR scores are publically reported every year. They're used to find ways to make programs better as well as create new ones.

Quality programs

Medical records review for documentation standards

Complete and accurate medical records promote quality and coordination of care. The Quality Management team reviews the documentation in medical records from primary care providers. We give providers the results and use them to improve medical record documentation.

Continuity and coordination of care

Primary care physicians and specialists, hospitals and urgent care centers need to communicate to improve quality of care. Surveys and medical record reviews help review communication between primary care providers, specialists and/or facilities. Providers and facilities are given the results along with ways they can improve.

Patient safety

BlueCross BlueShield helps providers make sure members are receiving the right medication, in the right dosage and avoiding negative drug interactions. Some of our pharmacy-related programs that help do this are:

- Polypharmacy: Providers are told of members with multiple medications and prescribers.
- Age appropriateness: Providers are told of inappropriate medication in children under four years old and elderly members who are 65 years old and older.

Health promotion

BlueCross BlueShield health promotion includes health risk assessments, member outreach and community events. We do targeted outreach with the member to identify barriers and help educate them about the importance of a healthy lifestyle. Members are identified through gaps in care reports and other quality initiatives.

Our health program representative participates in community events promoting education on:

- Women's health.
- Prenatal care.
- Children's wellness visits.

Case Management programs

Case Management programs help members take control of their health care needs by helping them coordinate quality health care services and use their benefits through a cost-effective case

management plan. Case managers work together with members and their family and caregivers, who have medical and behavioral health conditions. This process develops individual care plans and provides education and available resources, helping improve members' health outcomes. Members may be referred to the program by providers, other internal programs and self-referral.

Disease Management program

Disease Management helps members meet health care goals. We encourage member education and self-care by working with members and/or family members and caregivers. Disease managers may:

- Coordinate health care services.
- Support relationships between members and providers.
- Provide interventions within a care management model.

Members are identified for the Disease Management program through claims data.

The Disease Management program includes the following eight NCQA accredited programs:

- Asthma
- Coronary Health Disease (CAD)
- Congestive Heart Failure (CHF)
- Diabetes
- HIV/AIDS
- Major depressive disorder
- Schizophrenia

In addition, Disease Management offers programs for:

- Bipolar disorder.
- Hypertension.
- Substance use disorder.

Customer satisfaction

BlueCross BlueShield is committed to keeping our members happy. Our plan uses member surveys, members' complaint and appeals data and provider feedback to improve member experience and satisfaction.

The annual Customer Assessment of Healthcare Providers and Systems or CAHPS survey lets our members give feedback on:

- The health plan.
- Providers.
- Their experience getting the care they need.

The results give us information on how we can better serve our members.