Health Plan’s Leadership Structure and How We Use Day-to-Day Operations to Encourage Providers to Provide Appropriate and Quality Services to UnitedHealthcare Community Plan QUEST Integration Members

UnitedHealthcare Community Plan Hawai’i has a typical health plan management structure. The Health Plan CEO leads a leadership team that focuses on all aspects of the health plan. The leadership team includes Chief Financial Officer, Chief Operating Officer, Compliance Officer, Chief Medical Director, Vice President of Health Services, Vice President of Network Services. A key focus of our day-to-day operations is to encourage Providers to provide appropriate and quality services to UnitedHealthcare Community Plan Quest Integration members.

Our quality programs work to give our members better care and services. We have a plan each year to list activities and goals to improve members’ care and services. Examples of our activities include helping members with chronic illnesses get the care they need, working with pregnant women to have healthy babies, reminding members to get important tests and immunizations, making sure members get follow-up care after they are in the hospital, other public health issues, etc.

Part of our process is measuring how well these programs are working. We check doctors’ records. We look at claims data. We also conduct member surveys so we can see how well we are meeting our members’ needs. We listen to our members. We look at these results to see how we can do better. We share this information with Providers and Members through newsletters and in other ways. The results are used to develop and prioritize the next year’s annual plan.