UnitedHealthcare of New England, Inc. / Medicaid
Summary of 2010 Quality Improvement Program Activities

A summary of accomplishments for 2010 and opportunities for improvement identified for 2011 are listed below. To learn more about UnitedHealthcare of New England, Inc.’s Quality Improvement Program and the health plan’s progress on meeting its QI goals, or to request a paper copy of this document, please call Member Services at 1-800-587-5187 (TTY 711).

Introduction
Each year, UnitedHealthcare of New England, Inc. / Medicaid (UHCNE / Medicaid) evaluates the effectiveness of its Quality Improvement Program for enrolled Medicaid Rite Care, Rhody Health Partners (RHP) and Children with Special Healthcare Needs (CSN). The health plan evaluates overall quality improvement activities and processes to improve the health of plan members. The health plan also evaluates the service provided to members and providers. The evaluation includes:

- A summary of completed and ongoing quality improvement activities and studies that address the quality and safety of clinical care and the availability of needed services
- A review of HEDIS® performance for dates of service in the previous calendar year, including trending of measures to assess opportunities for improvement in clinical outcomes
- A review of CAHPS® performance to assess members’ satisfaction with the quality of service provided by network providers and health plan staff.
- An analysis of the results of all initiatives including potential and actual barriers to achieving goals.
- Evaluation of the overall effectiveness of the program including progress on developing safe clinical practices.

Accomplishments:
Some of the key accomplishments in 2010 include the following:

- Recognized as the #26 Medicaid health plan in America, according to the national ranking developed by U.S. News & World Report and NCQA and achieved the highest position in the 2010 U.S. News / NCQA America's Best Health Plans rankings when compared to other UHG Medicaid, Medicare and Commercial health plans.
- Provider satisfaction results in 2010 for overall rating of the health plan as ‘excellent’ or ‘very good’ increased compared to 2009 results. Improvements were noted in all areas of the survey. Key strengths include availability of disease management and health education programs and continue to include effectiveness of care management programs.
- Updates to the CareOne case management system to allow for additional tracking and monitoring of members in need of case management assistance.
- Implemented the Generics First formulary for all members.
- Rate increases in HEDIS 2010 in comparison to HEDIS 2009 were realized for the following measures: Childhood Immunization Status – Combo 2 and Combo 3; Appropriate Testing for Children with Pharyngitis; Breast Cancer Screening; Chlamydia Screening in Women; Controlling High Blood Pressure; Comprehensive Diabetes Care – Monitoring for Nephropathy; Antidepressant Medication Management (84-day); Timeliness of Prenatal Care.
- The plan achieved the 2009 Quality Compass HEDIS 90th percentile for the following measures:
The plan achieved the 2009 Quality Compass HEDIS 75th percentile for the following measures:

- Adolescent Well Care
- Appropriate Testing for Children with URI
- Breast Cancer Screening
- Children’s Access to PCP (24 months – 6 yrs)
- Follow-Up after Hospitalization for Mental Illness (7 and 30 days)
- Follow-Up for Children Prescribed ADHD Medication (Initiation)
- Lead Screening in Children
- Well Child Visits (1st 15 months of life)

**What’s Next in 2011?**

Specific information about the objectives, goals, metrics and reporting mechanisms proposed for 2011 are outlined in the 2011 QI-UM Program Description and the 2011 QI-UM Work Plan. In general, UHCNE / Medicaid’s Quality Improvement Program strives to achieve the Quality Compass HEDIS 90th percentile on all measures as applicable.

Some of UHCNE / Medicaid’s planned activities for 2011 include:

- Achieve NCQA reaccreditation in Q4 2011 and maintain ‘Excellent’ status.
- Ongoing monitoring and process improvements to improve provider satisfaction with the pharmaceutical authorization process.
- Introduce the new UnitedHealthcare Community and State provider and member websites, including the addition of searchable provider directory features.
- Continue polypharmacy program initiatives and deliver provider specific reports listing patients receiving multiple narcotic prescriptions.
- Identify new opportunities to improve the continuity and coordination of members’ care.