Quality Improvement Program Accomplishments and

Progress Toward Goals 2015–2016

CalOptima strives to provide access to quality health care services for our members. Each year, we put a Quality Improvement (QI) program into practice to review and improve the health of our members. The program's goals are to ensure or improve:

- The quality of care and service the health care system provides in all settings
- That vital clinical and service issues facing CalOptima's members address demographics, high-risk conditions and disease profiles for both acute and chronic illnesses, and preventive care
- The continuity and coordination of care between specialists and primary care providers, and between physical and behavioral health practitioners
- The ease of access and ease of use of proper clinical care
- The qualifications and practice patterns of all individual providers in the CalOptima network to provide quality care and service
- Member experience and provider satisfaction experience; this includes the well-timed course of action regarding complaints and grievances.
- Risk prevention and risk management processes
- Compliance with regulatory requirements and accreditation standards
- The success and efficiency of CalOptima's internal operations
- The effectiveness and efficiency of operations associated with functions passed on to provider networks
- The effectiveness of aligning constant quality initiatives and performance measurements with CalOptima's strategic direction in support of our mission, vision and values
- Adherence to clinical practice guidelines and evidence-based medicine

Throughout CalOptima, there are projects and methods to ensure access to quality health care services, to provide education and tools that prevent disease, and to manage chronic health conditions. In 2015, CalOptima's QI program supported accomplishments by the agency with emphasis on the current most strategic priorities:

- Quality Health Care Delivery System
- Efficient and Sound Infrastructure
- Healthy Community

Quality Health Care Delivery System

Our action plan to deliver a quality health care delivery system is to build and put into practice a plan to engage and support providers in the provision of quality health care services for our members. The Healthcare Effectiveness Data and Information Set (HEDIS®) is the nationally recognized tool that we use to measure the quality of health care our members receive. The following are high-level results of our HEDIS 2016 (measurement year 2015) efforts:

- Fourteen Medi-Cal measures exceed 2015 HEDIS results
- Nine OneCare measures exceed 2015 HEDIS results

In 2015, CalOptima was very proud to again be the top ranked Medicaid plan in California according to the National Committee for Quality Assurance (NCQA) Medicaid Health Insurance Plan Ratings 2015-2016. Also, CalOptima's Medi-Cal program successfully renewed its accreditation by NCQA, for an additional three years through 2018. In addition, the Department of Health Care Services (DHCS) recognized CalOptima for our HEDIS 2015 performance with the HEDIS best performance award for a large-scale plan. CalOptima made quality measure gains in 2016 with improvements in adolescent immunizations, blood pressure control, diabetes, asthma and member experience for children. These achievements reflect CalOptima's commitment to the quality of care that our members receive from our provider partners. CalOptima's OneCare Connect Cal MediConnect Plan (Medicare-Medicaid Plan) started in 2015; hence, the OneCare Connect HEDIS and satisfaction rates will not be available until 2017. However, monitoring and measurement are in progress throughout 2016.

We measure quality and service to our members in member experience, as well as provider satisfaction. For member experience, we survey availability, access, and cultural and linguistic services. For provider satisfaction, we survey claims, authorizations, customer service and billing. Providers most often mention access to care and customer service as the positive aspects of CalOptima. The most common problems or concerns involve authorization or claim denials. Because member experience and provider satisfaction are very important to CalOptima, in 2016 we will work closely with member and provider teams to make the CalOptima experience even better.

Efficient and Sound Infrastructure

For CalOptima, 2015 was a significant year. CalOptima took major steps in the growth of its Quality Program infrastructure to make it more efficient and sound:

- The OneCare Connect program launched on July 1, 2015. The Quality Improvement Committee (QIC) now oversees the Medi-Cal, OneCare and OneCare Connect QI programs. We consolidated the 2016 QI program description and work plan to include all programs.
- CalOptima 's Delegation Oversight Committee continues to provide oversight of the health networks, and annually reviews audit results and discusses delegation and oversight responsibilities across all programs.
- CalOptima created a new Executive Director of Quality Improvement and Analytics position; we hired the new Executive Director in late 2015
- CalOptima continued to support all activities to maintain NCQA accreditation status.

Healthy Community

CalOptima is building a healthy community for our members through our Quality Improvement Projects (QIP). In 2015, improvement projects included pre-natal and postpartum care, diabetes

screening and treatment, and decreasing all cause hospital readmission rates. In 2016, additional QIP include increasing the Initial Health Assessment rate and improving coordination of care for Long-Term Support Services.

CalOptima is committed to the constant improvement of quality health care for our members. Although individual measures may vary in their level of accomplishment, our overall effort has been a considerable success. As we continue to monitor our performance and refine our methods, we are confident that our QI efforts will continue to make a positive impact on the quality of health care for our members.