

ABSOLUTE TOTAL CARE – Quality Improvement Program

Absolute Total Care (ATC) strives to improve the health of all enrolled members by focusing on helping them to be healthy and stay healthy. ATC has created a Quality Improvement (QI) Program to support this goal. The goal of the program is to ensure our members receive high quality care and services that are effective, safe and responsive to their health care needs, while understanding their cultural and linguistic needs and preferences. The program extends to all internal departments and measures numerous aspects of the care and services offered through ATC.

ATC's Board of Directors provides the QI Committee the authority to oversee the QI Program. The QI Committee is led by our Medical Director, who provides direction and has lead responsibility for health plan-wide QI Program activities. The QI Program utilizes a systematic approach to quality using reliable and valid methods of monitoring, analyzing, evaluating and improving the delivery of health care to all members. This systematic approach provides a continuous cycle for assessing the quality of care and service among initiatives, including preventive health, acute and chronic care, behavioral health, over and underutilization, continuity and coordination of care, and patient safety.

One way ATC measures progress towards meeting our goals each year, and determines areas in need of improvement, is by using the Healthcare Effectiveness Data and Information Set, or HEDIS®. HEDIS is a measurement tool used by health plans across the nation to evaluate performance in clinical quality and services provided by the health plan. Annual HEDIS scores are an indicator for ATC to evaluate progress towards QI Program goals, and where opportunities exist to improve overall services and health care for our members. ATC continuously looks for ways to increase the effectiveness of interventions and identify new initiatives for improvement.

Below is a sample of HEDIS scores for the last three years:

Measure	2013	2014	2015	2016 Goal
Diabetes A1C testing	82.93%	82.71%	85.65%	83.88%
Diabetes Eye Exam	50.11%	40.80%	51.39%	54.14%
Well Child 15 months	69.21%	61.57%	59.90%	69.75%
Well Child 3-6 years old	65.97%	58.33%	59.38%	65.97%
Adolescent Well Care	43.75%	39.58%	46.88%	41.70%
Timeliness of Prenatal Care	95.81%	93.29%	90.28%	94.16%

ATC also utilizes a survey called the Consumer Assessment of Healthcare Providers and Systems, or CAHPS® to evaluate member satisfaction. The CAHPS survey is a standard tool for measuring and reporting on member experience with their health plan and services received. CAHPS is a national tool used by health plans; questions include the ability to get an appointment with a primary care provider or specialist, and the treatment by the providers. The CAHPS results are reviewed by ATC and the QI Committee and actions plans are implemented to improve any deficiencies.

Below is a sample of our results for 2016 compared to 2015 rates:

Measure	2015 Child	2016 CHILD	2015 Adult	2016 ADULT
	CAHPS	CAHPS	CAHPS	CAHPS
Getting Needed Care	87.5%	88.35%	83.1%	78.02%
Getting Care Quickly	93.3%	92.33%	84.6%	81.33%
Rating of Health Plan	84.9%	82.69%	72.6%	72.75%
Rating of Personal Doctor	89.4%	91.35%	83.3%	80.28%
Rating of Health Care	89.3%	86.74%	70.4%	70.90%
How Well Doctors	94.2%	97.34%	92.5%	93.16%
Communicate				
Customer Service	90.3%	87.73%	86.4%	84.07%

ATC is proud to have earned accreditation with a status of "Commendable" from the National Committee for Quality Assurance (NCQA). NCQA recognized ATC for meeting or exceeding rigorous performance standards based on measures of clinical quality, member satisfaction, and results of the standards and guidelines review.

In summary, ATC's primary quality improvement goal is to improve members' health status through a variety of meaningful quality improvement initiatives implemented across all care settings and aimed at improving quality of care and services delivered. The objectives to support this goal are:

- To improve member health outcomes through continuous quality improvement efforts
- To seek input and work with members, providers and community resources to ensure quality of care
- To share periodic quality improvement information to participating providers in order to support their efforts to provide high quality health care
- To ensure adequate resources with the expertise required to support and effectively carry out all functions of the QI Program
- Improve HEDIS® and CAHPS® rates
- To facilitate provider adoption of evidence based Preventive Health and Clinical Practice Guidelines

The QI Program and annual evaluation are presented to the QI Committee and ATC Board of Directors for review and approval. If you have questions or would like more information about ATC's QI Program, call Member Services at 1-866-433-6041 and ask to speak to the Quality Department.