QUALITY IMPROVEMENT PROGRAM – 2015
ANNUAL SUMMARY

During the 2015 calendar year, Total Health Care (THC) continued to work toward enhancing the quality and safety of health care received within our network. Every year, THC evaluates its goals and objectives and makes changes based on:

- The results of surveys and audits
- Feedback from its members, providers and staff

**Goals and Objectives**

Quality Improvement activities have more than one goal:

- To improve the safety and outcomes of care
- To improve the quality of service provided to our members

THC reviews its Quality Improvement Program annually to determine our overall success in promoting safe, high quality clinical care, first-class service and an outstanding member experience. THC makes program revisions as necessary.

The following provides information on a number of our goals for 2015. Our progress towards meeting those goals this past year is also included.

**Clinical Goals**

Our clinical goals focus on improving care for members. In 2015, two of these goals were:

- Improve blood lead testing rates in members turning 2 years of age
- Improving hemoglobin A1c (HbA1c) testing rates in members with diabetes
Blood Lead Testing

Lead poisoning is a serious problem for young children. Lead poisoning comes from lead paint, soil, water, dust, home repairs, ceramics and toys made with lead. It enters the body through the mouth or nose and can cause serious health effects such as:

- Attention Deficit Disorder (ADD)
- Developmental and Mental Delays
- Anemia
- Speech and Hearing Damage
- Headaches and Stomach Aches
- Seizures, Coma and Death

Protecting your child from exposure to lead is important for good health. All children must have a lead test at age 1 and again by age 2. It is a simple and quick blood test (finger prick) that can prevent permanent damage.

THC monitors lead blood tests to ensure that children are being tested according to the Michigan Department of Community Health (MDCH) guidelines.

In 2015, lead blood testing for Medicaid members increased from 48.60% to 71.90%. The state does not require that THC measure blood testing for commercial members.

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<tr>
<th>Plan</th>
<th>2014</th>
<th>2015</th>
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<tbody>
<tr>
<td>Medicaid</td>
<td>48.60%</td>
<td>71.90%</td>
</tr>
<tr>
<td>Commercial</td>
<td>N/A</td>
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THC offers incentives to both Medicaid and commercial members who get their children tested for lead before age 2!

Diabetes

The Hemoglobin A1c test is an important blood test for monitoring how well blood glucose metabolism is controlled. The test result provides average blood sugar for the past six to twelve weeks. The higher the HbA1c, the greater the risk of developing problems such as, retinopathy, cardiovascular disease and nephropathy. Clinical trials have shown that improving HbA1c results will decrease the development and progression of eye, kidney and nerve complications in both type 1 and type 2 diabetes.
HbA1c is a useful indicator of how well the blood sugar level has been controlled in the recent past and may be used to monitor the effects of diet, exercise and drug therapy on your blood sugar if you have diabetes. The American Diabetes Association (ADA) recommends that HbA1c be controlled to less than 7%. If the level exceeds 8%, then improvement in blood sugar control is required. If the level is above 9%, the blood sugar level is poorly controlled. It can significantly increase the risk of developing chronic complications.

By lowering your HbA1c by just 1%, you can:
- decrease the risk of heart failure
- decrease the risk of fatal or nonfatal myocardial infarction
- decrease the risk of fatal or nonfatal stroke
- decrease the risk of diabetes-related death
- decrease the risk of amputation
- decrease the risk of small blood vessel disease (e.g. retinal blood vessel disease causing vision loss).

By improving HbA1c screening rates, blood sugar control is easily known. Steps to better management can be implemented quickly, lowering the risk of complications and medical costs.

Our goal at THC is to increase the number of diabetics that receive the HbA1c test and how often the test is performed.

The data reviewed in 2015 demonstrated an increase in HbA1c testing for commercial members and a decrease for Medicaid members.

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<tr>
<th>Plan</th>
<th>2014</th>
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<tbody>
<tr>
<td>Medicaid</td>
<td>77.20%</td>
<td>75.40%</td>
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<tr>
<td>Commercial</td>
<td>81.80%</td>
<td>83.10%</td>
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Barriers identified were:
- Members not seeing their doctor
- Doctor not requesting the test
- Lack of member knowledge regarding the test
Interventions included:

- Providing educational information and materials via our website regarding recommendations for testing and how the test is used in determining blood glucose control and risk factors
- Encouraging members with diabetes to enroll in our Diabetes Disease Management Program
- Sending an educational letter to eligible members
- Providing primary care doctors with the latest clinical guideline for managing diabetes

THC will re-measure this data in July of 2016.

**SAFETY**

**Pharmacy**

THC has several patient safety programs. These programs continue to provide for patient safety surrounding medication usage.

The pharmaceutical program applies to all members with a pharmacy benefit. When you pick up a new medication at the pharmacy, the new medicine is compared to your current medication profile and checked for potential drug-to-drug interactions that could occur. Any identified interactions and any information that would be helpful in determining potential risk to you are immediately reported to the dispensing pharmacy. The pharmacy can then provide the necessary services before the medication is dispensed.

Total Health Care is on top of FDA (Food and Drug Administration) drug recalls too. There are different classes of drug recalls. In 2015, there were six voluntary recalls where appropriate action was taken by THC to notify affected members. Recalls were initiated by the manufacturing companies for the following drugs: Hydrochlorothiazide tablets, Bactroban nasal ointment and cream, Ventolin and Mupiricin Calcium cream.

**QUALITY OF SERVICE**

**Provider Network**

Every year, Total Health Care (THC) conducts a performance review of our provider network to confirm there is adequate coverage to take care of our members and to get a timely appointment.
THC has specific performance standards to ensure members get the care when and where it is needed.

Our most recent review conducted in December 2015, showed that THC has met or exceeded our standards:

- **Network Adequacy: Exceeded Goal**
  - THC’s network of over 5900 providers for primary and specialty care is more than adequate to service our membership
  - THC’s network of over 2800 clinics, 30 hospitals, 1100 ancillary sites and 4100 pharmacies provide access within the required time and distance requirements.

- **PCP Appointment Availability: Exceeded Goal**
  - THC results for the following standards exceeded 90% goal, with 100% compliance for:
    - Regular and routine care appointments scheduled within thirty days
    - Routine, non-urgent symptomatic appointments scheduled within seven days
    - Urgent care appointments within twenty-four hours
    - After hours care available twenty four hours a day/seven days a week
    - Patients saw doctor within thirty minutes of their scheduled appointment

Overall, Total Health Care’s provider network more than meets the needs of its membership in numbers, locations and availability. All Total Health Care standards and criteria were met. THC will continue to perform yearly reviews to ensure ongoing compliance.

**Customer Service**

Total Health Care ensures you have access to our member services department when you need it.

THC has a goal of a less than 5% abandonment rate (calls were abandoned by the caller before being answered by a live voice) which was met at 1.5% and improved from 2.2% in 2014. However, the percentage of calls received by THC’s Member Services call center during operating hours and answered by a live voice within 30 seconds fell short by one
second at an average of 31 seconds. THC continues to monitor these rates daily and makes adjustments as necessary.

**Summary**

THC recognizes that achieving optimal health outcomes requires the collaboration of the Plan, the provider network, and the members. At Total Health Care we are Totally here for you!