



## Quality improvement program overview

### Introduction

CarePlus' quality improvement (QI) program guides and directs activities to enhance care and treatment for our CarePlus-covered patients. By aligning with our company-wide commitment to **Health First**, the program supports continuous quality improvement across the organization. It adheres to the standards set by the Centers for Medicare & Medicaid Services' (CMS) National Quality Strategy (NQS), which aims for a resilient, high-value health system promoting quality outcomes, safety, equity, and accessible care for all individuals.

To accomplish this, CarePlus supports and collaborates with your physicians and other healthcare professionals to deliver integrated care, ensuring ongoing monitoring, evaluation, and improvement in the quality of healthcare services you receive.

### Purpose

The primary aim of the QI program is to monitor, evaluate, and facilitate improvement in the quality of healthcare services provided to CarePlus-covered patients. The program is based on contractual, governmental, accreditation, and organizational requirements and guidelines. Data is systematically tracked and analyzed for trends on a monthly, quarterly, and annual basis, enabling the identification of improvement opportunities and, when necessary, conducting root-cause analyses.

### Scope

The QI program's scope covers CarePlus' Medicare Advantage HMO plan that includes Part D prescription drug coverage and Special Needs Plans (SNPs).

## Ongoing Quality Improvement Activities

To improve the quality of care provided to patients, CarePlus implements several initiatives, including:

- **Population health management (PHM)**

CarePlus utilizes a range of tools to assist physicians in implementing a value-based care strategy. This approach aims to improve quality, care coordination, and cost-effectiveness while managing social determinants of health (SDoH), promoting health equity, and enhancing patient experiences.

- **Member safety**

Safety initiatives are prioritized, reviewed, and aligned with national safety concerns. CarePlus focuses on three key areas:

- Reduction of 30-day readmissions
- Eliminating medical errors
- Improving medication adherence

- **Continuity and coordination of care**

Data is collected and analyzed from various delivery sites and disease processes to identify opportunities for enhancing care coordination and transitions between providers.

- **Behavioral health (BH)**

By reviewing prevalent behavioral health diagnoses, CarePlus can better serve its members, identify care gaps, and implement more effective behavioral health services.

- **Pharmacy management**

CarePlus adheres to a structured process to promote clinically appropriate, safe, and cost-effective drug therapies. This includes evaluations for safety and efficacy when developing formularies and regular reviews of drug policies.

- **Special Needs Plan (SNP)**

CarePlus is committed to implementing the requirements of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA). Our SNP model of care (MOC) includes quality performance metrics, with results available upon request from Quality Operations Compliance & Accreditation (QOCA).

- **Chronic Care Improvement Program (CCIP)**

As mandated by federal regulations, CarePlus implements CCIPs. Each year, we attest that our CCIP study is ongoing, analyzing data outcomes, interventions, barriers to achieving goals, and identifying best practices.

- **Clinical and preventive health initiatives**

To evaluate the effectiveness of clinical and preventive healthcare initiatives, CarePlus utilizes Healthcare Effectiveness Data & Information Set (HEDIS®)

measures, developed and maintained by the National Committee for Quality Assurance (NCQA).

- **Service and availability**

Member and provider experiences are assessed through net promoter scores, complaints, and satisfaction surveys. CarePlus continuously monitors service access indicators and takes appropriate actions to address trends and needed improvements.

## **Conclusions and priorities**

CarePlus is dedicated to creating solutions that engage our members in their health and healthcare, achieving better outcomes and lower costs while supporting our overarching goal of **Health First**. Moving forward, CarePlus' QI program will continue to:

- Showcase clinical excellence through accreditation.
- Support value-based strategies.
- Embrace digital innovation and technology.
- Evaluate progress in improving member/provider experiences.
- Promote member health through HEDIS clinical measures.
- Advance health equity for patients with chronic conditions (e.g., diabetes, congestive heart failure, and COPD).
- Foster community engagement to positively influence SDoH.