2024 QUALITY IMPROVEMENT WORK PLAN

Activities/Objectives	Measure/Goal	State	Due Date
Quality Priority: Health Equity Advancement			
CLAS Program Initiatives			
Integrate Health Equity Infrastructure	Launch integrated committees and have approved charters (HE committee, HE/PH Steering and Health Equity Innovation Coalition)	All	12/2024
Involve culturally diverse groups of community members in identifying and prioritizing opportunities for improvement.	Partner with CBO and member stakeholders to run a focus group with members of the community to assist in determining and prioritizing opportunities for 2025.	Multi	12/2024
Conduct Medica staff CLAS Trainings	Employee CLAS trainings will be launched and offered to 100% of Medica staff.	All	12/2024
Re-launch internal staff mentorship program to support professional development- DEI Talent Mobility program	Achieve 80% satisfaction rate among mentees and 85% program completion rate by Dec 2024.	All	12/2024
Network Cultural Responsiveness			
Promote Practitioner CLAS Training	Launch initiative across our provider network in an effort to promote "Provider CLAS Toolkit" and measure engagement with tools.	All	12/2024
Language Services			
Translate appropriate documents to support members language needs	Enhance internal process for Medica member-facing staff to access translation services to support members linguistic needs.	All	12/2024
Identify infrastructure needed to support membership linguistic needs	Map out infrastructure requirements needed for all communication in the members preferred language.	All	12/2024
Expand language access for doula services	Increase doula utilization by 25% among Spanish speaking expectant mothers by Dec 2024.	WI	12/2024
Other Health Equity Activities			
Launch organizational framework to implement best practices to ensure 2025 Health Equity Accreditation	Develop a strategy and plan for achieving Health Equity Accreditation for the Minnesota Medicaid Product.	MN	3/2024
Improve and Maintain integrated data delivery systems	Build and deploy IT data infrastructure to have robust member data profile that captures at least 80% of member's race, ethnicity, language, sexual orientation and gender identity attributes.	All	12/2024
Expand partnerships with community health centers (i.e. FQHCs)	Establish partnerships with 3 new FQHCs by 2024.	Multi	12/2024
Boost participation in supplemental benefits	Increase utilization in supplemental benefits included in MN VBID Health Equity offering by 20% among under-resourced members by 2025.	MN	12/2024
Increase outreach for preventive cancer screenings	Increase colorectal cancer screening rates (COL HEDIS measure) by 10% among BIPOC members by MY2025.	WI	12/2024

2024 QUALITY IMPROVEMENT WORK PLAN			
Activities/Objectives	**Measure/Goal**	**State**	**Due Date**
Develop and launch strategic focus areas for health equity advancement	Launch an enterprise-wide campaign(s) across 3 key strategic priority areas: data, mental health, and maternal health, with the aim of raising awareness on disparities in health outcomes for underserved populations.	Multi	12/2024
Quality Priority: Medicare Stars Performance			
Implement CoC related to CMS 2024 Final Rule	Policy Development to confirm consistent adherence Staff Training to confirm consistent adherence Tracking/Monitoring/Auditing internally in UM as well as in conjunction with Compliance and CMS to confirm consistent adherence	All	12/2024
Quality Priority: Clinical Quality Improvement			
Preventive Care and Screenings			
Quality Improvement Priority Measures Monitoring - Improve Chlamydia Screening	Monitor, track, and implement continuous improvement activties to improve CHL screening rates to 66th percentile benchmark.	WI Markets	12/2024
Launch 2024 Quality Metrics Program centered around prevention	Drive improvement through provider led initiatives focused on Breast Cancer Screening, Colorectal Cancer Screening, Annual preventive Visits, Diabetes management and Blood Pressure control.	MN Markets	5/2024
Chronic Condition Management			
Evaluate PHM activities for supporting members with diabetes	Create a landscape document of current member programming specific to diabetes spanning continuum of care.	All	12/2024
Evaluate PHM activities for supporting members with hypertension	Create a landscape document current member programming specific to hypertension spanning continuum of care.	All	12/2024
Behavioral Health			
Improve depression screening + follow-up for members age 12+ (DSF)	Implement one member or provider intervention to improve depression screening + follow-up rates for MSN Commercial, Exchange, and Medicaid members age 12+ by 5%	Multi	12/2024
Improve metabolic monitoring for children and adolescents taking antipsychotics (APM)	Implement two member / provider interventions to improve metabolic monitoring for MSN Commercial, Exchange, and Medicaid and MTK Commericial and Medicaid children/adolescents taking antipsychotics by 5%	Multi	12/2024

2024 QUALITY IMPROVEMENT WORK PLAN			
Activities/Objectives	**Measure/Goal**	**State**	**Due Date**
Improve diabetes screening for members with schizophrenia or bipolar disorder taking antipsychotics (SSD)	Implement two member / provider interventions to improve diabetes screening for MSN Commercial, IFB, and Medicaid members and Implement one provider intervention to improve diabetes screening for MTKA Medicaid members 18-64 years of age with schizophrenia or bipolar disorder taking antipsychotics (SSD) by 5%	Multi	12/2024
Improve follow-up after hospitalization for mental illness or intentional self-harm (FUH) (P4P)	Implement two member / provider interventions to improve follow-up after hospitalization for MSN and MTK Commercial, IFB, and Medicaid members age 6+ with mental illness or intentional self-harm (FUH) within 7 days but no later than 30 days of discharge by 5%. SNBC/SNBC D-SNP are 3 percentage point increase per the DHS withhold minimum requirement.	Multi	12/2024
Improve initiation and engagement of substance use disorder treatment (IET) (P4P)	Implement one provider intervention to improve initiation and engagement of substance use disorder (SUD) treatment among MSN and MTK Commercial, IFB, and Medicaid members age 13+ with a new episode of SUD by 5%	Multi	12/2024
Improve antidepressant medication adherence for members age 18+ with a diagnosis of major depression (AMM)	Implement one provider intervention to improve the percentage of MTKA Commercial, IFB, Medicaid members age 18+ with a diagnosis of major depression who subsequently filled an antidepressant medication following initial identification of non-adherence by 10%	Multi	12/2024
Evaluate PHM activities for supporting members diagnosed with depression	Create a landscape document of current member programming specific to depression spanning continuum of care.	All	12/2024
Quality Priority: Medicaid Performance			
Medicaid Pay for Performance (P4P) 2024 - Improve Adolescent Immunization Rates (IMA Combo 2)	Monitor, track, and implement improvement activities as needed to meet goal of improving adolescent immunization rates (IMA Combo 2) from 42.3% (MY22) to 43.6% (75th%ile benchmark).	WI	12/2024

2024 QUALITY IMPROVEMENT WORK PLAN			
Activities/Objectives	**Measure/Goal**	**State**	**Due Date**
Medicaid Pay for Performance(P4P) 2024 - Improve Childhood Immunization Rates	Monitor, track, and implement improvement activities, including member incentive and outreach, to improve childhood immunization (CIS) rates from 66% (MY22) to 69% (75th %ile benchmark)	WI	12/2024
Medicaid Pay for Performance (P4P) 2024 - Improve Lead Screening Rates	Monitor, track and implement improvement activities to meet goal of improving lead screening (LSC) rates from 65% (MY22) to 70% (75th %ile benchmark)	WI	12/2024
Medicaid Pay for Performance (P4P) 2024 - Improve Well Care Visit Rates	Monitor, track and implement improvement activities to meet goal of improving well care visit (WCV) rates from 47.1% to 51.8% (67th %ile benchmark)	WI	12/2024
Medicaid Pay for Performance (P4P) 2024 - Improve Disease Management Composite Rates	Monitor, track and implement improvement activities to improve disease management composite (HBD, CBP, FUH) rates to their respective 75th %ile goals: *Improve A1c control (HBD) from 52.4% to 57.2% *Improve Blood pressure (CBP) from 68.4% to 70.5% *Improve Follow up to hosp for mental illness (FUH) from 64% to 66%	WI	12/2024
Medicaid Pay for Performance (P4P) 2024 - Improve Maternal Health Composite Rates for Prenatal and Postpartum Care	Monitor, track and implement improvement activities to improve maternal health composite rates (TOPC - timeliness of prenatal care and PPC-postpartum care) : *Improve prenatal care from 90.4% to 92% *Improve postpartum care rate from 81.2% to 82%	WI	12/2024
Medicaid Pay for Performance (P4P) 2024 -Improve rates for Asthma Medication Ratio	Monitor, track and implement improvement activities to meet goal of improving asthma medication ratio (AMR) rates from 63% (MY22) to 66% (50th %ile benchmark)	WI	12/2024

2024 QUALITY IMPROVEMENT WORK PLAN			
Activities/Objectives	**Measure/Goal**	**State**	**Due Date**
Medicaid Pay for Performance Improvement 2024 - Improve Annual Dental Visit Rates	Monitor, track and implement improvement activities to meet goal of improving Annual Dental Visit (ADV) rates: *Improve Seniors rate from 34.51% to 39.06% *Improve SNBC rate from 40.33% to 44.30%	MN	12/2024
Medicaid Pay for Performance Improvement 2024 - Improve Colorectal Cancer Screening Rates	Monitor, track and implement improvement activities to meet goal of improving Colorectal Cancer Screening (COL) rate by 3% from MY2022 baseline performance. *Improve rate from 55.67% to 58.67%	MN	12/2024
Medicaid Pay for Performance Improvement 2024 - Improve Follow-Up After ED Visit for People with Multiple Chronic Conditions	Monitor, track, and implement improvement activities to meet goal of improving Follow-Up After ED Visit for People with Multiple High-Risk Chronic Conditions (FMC) rate by 3% from MY2022 baseline performance. *Improve Seniors rate from 54.57% to 57.57% *Improve SNBC rate from 64.54% to 67.54%	MN	12/2024
Medicaid Pay for Performance Improvement 2024 - Improve Follow-Up After Hospitalization for Mental Illness	Monitor, track, and implement improvement activities to meet goal of improving Follow-up after Hospitalization for Mental Illness (FUH) rates. *Improve F&C rate from 10.00% to 15.00% (7-day) and 40.00% to 45.00% (30-day) *Improve SNBC rate from 33.87% to 36.87% (7-day) and 64.54% to 67.54% (30-day)	MN	12/2024
Medicaid Pay for Performance Improvement 2024 - Improve Ambulatory Care Rates	Monitor, track, and implement improvement activities to meet goal of improving Ambulatory Care (AMB) rate by 3% from MY2022 baseline performance. *Improve rate from 79.53% to 76.53%	MN	12/2024
Medicaid Pay for Performance Improvement 2024 - Improve Childhood Immunizations and Well-Care Visit Measures	Monitor, track, and implement improvement activities to meet goal of improving early childhood health measure rates in Childhood Immunization Status (CIS), Well Child Visits in First 15/30 Months (W30), and Child & Adolescent Well-Visits (WCV). *Improve CIS rate from 71.43% to 76.43% *Improve W30 rate from 55.77% to 60.77% (W15) and 65.79% to 70.79% (W30) *Improve WCV rate from 44.42% to 49.42%	MN	12/2024

2024 QUALITY IMPROVEMENT WORK PLAN			
Activities/Objectives	**Measure/Goal**	**State**	**Due Date**
Medicaid Pay for Performance Improvement 2024 - Improve Maternal Health Measures	Monitor, track, and implement improvement activities to meet goal of improving maternal health measure rates in Prenatal and Postpartum Care (PPC). *Improve Postpartum Care from 51.35% to 56.35% *Improve Prenatal Care from 70.27% to 75.27%	MN	12/2024
Medicaid Pay for Performance Improvement 2024 - Improve Initiation and Engagement of Substance Use Disorder Treatment Rates	Monitor, track, and implement improvement activities to meet goal of improving Initiation and Engagement of Substance Use Disorder Treatment (IET) rate. *Improve Total Initiation from 34.62% to 39.62% *Improve Total Engagement from 13.18% to 18.18%	MN	12/2024
Improve postpartum visit compliance for members participating in OB Medical Home Programming	The percentage of members engaged in the OB Medical Home program who attend a postpartum visit within 30 days of delivery will increase from a baseline of 79.8% in 2023 to 85% by year-end.	MN	12/2024
Quality Priority: Infrastructure Maturation			
Launch 2024 Integrated Committee Structure	Launch the new quality committee structure with new membership and approved charters.	Multi	6/2024
Develop and implement a standardized Integrated Policy and Procedure Management Structure for Quality Operations	Complete Assessment and gap analysis of current Policy and Procedures supporting quality program.	Multi	12/2024
Launch Network Adequacy Oversight Enterprise Structure	Identify and launch an enterprise-wide integrated process for monitoring and responding to network adequacy needs across hubs and supports the new Network Adequacy Committee.	All	6/2024
Align and Standardize Enterprise Population Health Program Documentation and Processes	Develop and implement an enterprise-wide integrated process for population health management programming	All	12/2024
Align and Standardize Enterprise Quality of Care Processes and platform	Develop and Implement and enterprise-wide integrated quality of care process across Hubs.	Multi	12/2024
Convert HEDIS Submissions to Cotiviti and single HEDIS Auditor	Complete conversion of Inovalon HEDIS Software processes to the Cotiviti software and align under an Enterprise-wide HEDIS Auditor.	All	12/2024
Convert Credentialing software from Echo to Symfact	The Minnetonka Hub is using Symfact as their credentialing database. Madison will be converting from Echo to Symfact, to align systems and credentialing processes.	All	12/2024

2024 QUALITY IMPROVEMENT WORK PLAN

Activities/Objectives	Measure/Goal	State	Due Date
Create standard Provider Quality Metrics Program Framework	Identify steering committee membership and charter by 5/1/2024 Implement Core measure set(s) for all LOB's Assess data needs by Provider partner by 5/1/2024 Create and implement standard reporting package by 3/1/2024 Create meeting schedule and standard agenda by Q2 2024	All	12/2024
Develop a Long Range Enterprise Wide Medical Record Review Process	Create a multiyear roadmap by July 2024	All	12/2024
Develop a Multi-Year Provider Connectivity Model	Recommend a provider connectivity vendor solution and develop a multi-year roadmap.	All	12/2024
Quality Priority: Improve Member Experience			
Develop Integrated Service Quality Review Process and Action Plan	Develop and Implement a Service Quality Review Process and Action Plan in 2024	All	12/2024
Launch Medicaid Member Advisory Council	Establish the Member Advisory Council and host at least 1 council meeting and to develop an action plan based on Medicaid members feedback to the HMO on its policies and operations, how it is meeting the needs of members, and how operations and outcomes may be improved. Councils will solicit input on ways to improve access to covered services, coordination of services, and health equity challenges and opportunities.	WI	12/2024
Launch Over/Under Utilization Oversight for all Lines of Business (LOB)	Develop a standardized process for over/under utilization oversight across hubs that includes: Determining and obtaining data/reporting metrics in conjunction with Enterprise Analytics Evaluation of data specific to LOB by UM Leadership at least annually Evaluate utilization at or below the MCG 50% benchmark Evaluate over-utilization to the MCG loosely managed benchmark	All	12/2024
Other Quality Improvement Activities			
Research rate of depression remission or response for members age 12+ engaged in BH case management with an elevated PHQ-9 score	Collect baseline data on the percentage of members engaged in BH CM with a PHQ-9 score ≥10 who achieved depression remission or showed response at time of case closure following the initial elevated PHQ-9 score	Multi	12/2024
Implement Concurrent Review of MNTKA Hub Acute Inpatient Hospital Stays	Implementation of Concurrent process for a minimum of 3 Lines of Business	All	12/2024
CM/UM Quality Improvement Activities			

2024 QUALITY IMPROVEMENT WORK PLAN			
Activities/Objectives	**Measure/Goal**	**State**	**Due Date**
Integrate Clinical Documentation Systems	Integrate all clinical documentation into one system.	All	9/2024
Integrate Concurrent Review Processes	Define and align all criteria, policy and polices for concurrent review	All	5/2024
Integrate Gaps in Care and Data into Clinical Documentation System	Align gaps in care and load into clinical documentation system.	All	12/2024
Integrate of UM Processes within the Guiding Care Platform	Completion of transition between UM platforms by 9/1/2024	All	9/1/2024
Focused Studies / Regulatory Submissions			
Performance Improvement Projects (PIP)			
Health Disparities Prenatal Care Project (2024)	Improve overall prenatal care rate from 90.40% in MY22 to 92% in MY24 by offering Doula services.	WI	12/2024
Health Disparities Prenatal Care Project Interventions (2024)	Implement 2 to 3 interventions to address disparities in prenatal care in 2024.	WI	12/2024
Health Needs Assessment Health Disparities Project (2024)	Improve overall Medicaid Health Needs Assessment completion rates from 5.83% in MY2022 to 35% in MY2024 by deploying omni-channel intervention with Icario vendor.	WI	12/2024
Healthy Start 2.0 PIP (2024)	Improve into the next percentile benchmark for both Prenatal and postpartum care sub-measures each year through the three-year PIP cycle. We will also monitor race/ethnicity outcomes to identify any disparate outcomes that may exist for BIPOC members..	MN	12/2024
Depression and Diabetes PIP	Success will be achieved by seeing a statistically significant increase in the KED rate among the targeted cohort of MSHO, MSC+, SNBC and ISNBC members with depression and diabetes.	MN	12/2024