University of Utah Health Plans (U of U Health Plans) Quality Improvement Program establishes methods for evaluating and improving the quality of care and services provided to U of U Health Plans members.

The Health Plans Quality Improvement Program is based on the Triple Aim®
- Improving the experience of care (quality and satisfaction)
- Improving the health of populations
- Reducing health care costs

Health Plans Strategic Goals are focused on patient experience, quality, and financial strength in both the medical and behavioral health care realms. To support these Strategic Goals, the Quality Improvement focuses on:
- Patient Experience
  - Improve access
  - Improve care transitions
- Quality
  - Improve quality of care
  - Provide exceptional value
- Financial Strength
  - Monitor under- and over-utilization

The Quality Improvement Council, chaired by the Chief Medical Officer, has ultimate responsibility for the quality and safety of care and service delivered to members, and is the highest level of oversight for the Quality Improvement Program.

The purpose of the Quality Improvement Program is to assess and improve the quality, availability, and appropriateness of medical and behavioral health care, member safety, and service to our members.

Areas of Special Interest:
- Patient Safety to promote evidence based medical policies, reduce risk of readmissions, maintain and improve well/preventive care services for all age groups and the perinatal population, monitor medication management and choose quality (credentialed) providers and practitioners.
- Behavioral health services to be equally as important as physical health. Assure that we are supporting needs related to anxiety, depression for children, adolescents and adults. Adequate resources for members with substance use disorders and that the behavioral health practitioners are following evidence-based clinical practice guidelines. Actively collaborate with the behavioral health providers and medical care practitioners to assure effective communication and access to needed care.
- All members are treated equally based on identified needs and recognizing their individual needs or interests. Encouraging our members to participate in completing an online Health Risk Assessment, survey, allows us to gain a better understanding of their individual health and social determinants needs/risks.
• UUHP has a team of nurse care managers that are able to assist members; children, women, adults, with complex conditions to regain optimum health and/or improved functional capacity, in the right setting and in a cost effective manner. We are able to identify these members through various means, claims, utilization management, self-referrals and/or provider requests.

Strategic Aims:
These aims broadly represent what we intend to accomplish through activities related to care, service, and administrative functions. These activities are outlined in the Quality Improvement Work Plan. The Work Plan is also evaluated annually to assess the effectiveness of our interventions and to prioritize our work for the coming fiscal year. Briefly the aims include:

1. Administration & Leadership: Responsible to adopt and support an Accountable Care Organization (ACO) business model.


3. Enrollee Rights and Responsibilities: Established functions, operating under established policies and procedures, which are designed to provide safe, effective, efficient, timely, equitable and patient-centered services to our members.

4. Access & Availability: Ensures that all services are available, accessible, and provided to members in a culturally and linguistically appropriate manner.

5. Coordination & Continuity of Care: Committed to providing coordinated care across the continuum. Strengthening the care management team with physician leaders, using technology to expand the care managers’ reach, engaging members in self-management of chronic illnesses, and improving the potential and quality of life for tech dependent children are key strategies to achieve coordinated care across the continuum.

6. Utilization Management: Committed to a utilization management program based on nationally recognized criteria that are accurately and appropriately applied in all cases.

7. Provider Participation: Engages medical and behavioral health care providers through newsletters, updates and performance feedback.

8. Information Systems: Support the University of Utah Health Plans overall improvement strategy by facilitating the collection, aggregation, analysis, tracking, and reporting of utilization, cost, quality, and service data.

Commitment to Confidentiality: All content produced by Health Plans, written or electronic, that impacts business operations, members, or providers is confidential. Access is limited to the Quality Improvement Council, health plan personnel with a need to know, regulators, accreditors, and contracted entities for the sole purpose of quality review and delegation audits. Content is privileged and prepared in a manner to maintain confidentiality, meet HIPAA requirements, and are stored securely. Privileged and confidential information may not be disclosed outside of the committees or review entities.
QI Program Results:

Collaboration with Primary Care & Behavioral Health Providers:
Encouraging UUHP primary care providers to use Gate Utah, web-based services, for UUHP members. GATE is a covered benefit for members of University of Utah Health Plans. UUHP understands that in a busy primary care practice it can be frustrating and time consuming to get help with regard to mental health. We are aware that there is a shortage of Adult and Child Psychiatrists and that access to these specialists can be very difficult to obtain. University Neuropsychiatric Institute (UNI) has created a process to address these deficits GATE Utah (Giving Access to Everyone) is a web based consultation system. ([www.gateutah.org](http://www.gateutah.org)). Ask your doctor about GATE Utah if you are needing help for behavioral health concerns. UUHP had 3 Gate UTAH consults in January 2018. Our goal is to increase this number to an average of 10 consults per month through June 2018.

Anti-depressant medication management:
UUHP is sending letters to our members and their treating providers regarding managing your anti-depressant medication. Reminders of how to stay on track in taking your medication is also provided. We want to increase the compliance for our members by 10% overall goal. We recognize that depression is a serious illness and following prescribed treatment is very important to your overall health.

<table>
<thead>
<tr>
<th>HEDIS (Healthcare Effectiveness Data &amp; Information Set) Measure</th>
<th>University of Utah Health Plan (UUHP) Rate</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti-Depressant Medication Management Rate Acute Phase Treatment</td>
<td>61.40%</td>
<td>68.06%</td>
</tr>
<tr>
<td>Anti-Depressant Medication Management Rate Continuation Phase</td>
<td>50.88%</td>
<td>52.2%</td>
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</tbody>
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Member Access to UUHP:
University of Utah is committed to be member responsive. We track all the calls we receive. Our goal is ≤ 30 seconds hold time and our abandoned call rate ≤ 2%.