2022 Quality Improvement Program Summary

The 2022 Quality Improvement Program (QIP) has a number of changes and improvements. These changes include highlighting the integration aspect of behavioral health, expanding programming related to member experience, and introducing a formal component to evaluate new and continuing initiatives on a 2-3 year cycle. This summary highlights all of the initiatives (new and continuing) proposed for 2022, along with a brief description. For full details, including initiative specifics and changes in organizational structure, please see the *2022 QIP Description.* New initiatives may be added to address opportunities identified in the finalized *2021 QIP Evaluation*.

Wellness and Prevention

Core Programs: Initial and Annual Health Appraisals, ChildrenFirst™ Program, Well Child and Immunization Passport, Birthday Cards, Colorectal Cancer Screening (The FITCHEK Program)

2022 Initiatives:

1. ***NEW*** **Prenatal and Postpartum Rewards Program:** Expansion of ChildrenFirst™ Program, improving prenatal rewards and a new postpartum incentive.
2. ***NEW*** **Cascade Select Quality Improvement Strategy (QIS):** Strategy for Cascade Select leveraging the P4P incentive framework for primary care providers.
3. ***NEW*** **Integrated Managed Care Performance Improvement Project (PIP) — Reducing Breast Cancer Screening Disparities:** Aimed at reducing racial/ethnic, linguistic, regional, and other disparities for breast cancer screenings.
4. **Member Portal Gap-in-Care Visibility:** Gap-in-care reminders are visible in the Member Center including educational links based on gaps identified and various preventive services.
5. **All MCO Performance Improvement Project (PIP) — Well Child Work Group:** Required PIP focused on improving well child visit rates among infants, young children, and adolescents, with a particular focus on 3-11 year olds.
6. **Equity Learning Collaborative Grant Program — Pregnancy Care:** P4P grant program to support Community Health Centers (CHCs) in improving pregnancy care with an equity lens.
7. **Pregnancy Identification Reports:** Monthly report to CHCs to help identify pregnant members and support timely outreach for prenatal care.
8. **HPV Immunization and Chlamydia Screening Outreach:** Outreach program to support adolescent health.
9. **Comprehensive In-Home Screening Strategy:** Expand in-home testing capabilities, including HbA1c tests.
10. **Member Engagement and Communication (HealthCrowd):** Comprehensive outreach targeting gaps in care.
11. **COVID-19 Vaccine Distribution and Communication:** Support dissemination of COVID-19 vaccine.
12. **Customer Service Gap-in-Care Visibility:** Customer Service offering care gap reminders to members.

Behavioral Health Integration

Core Programs: Mental Health Integration Program (MHIP), WISe Quality Oversight, Behavioral Health Care Management, Antidepressant Medication Management Initial Prescription Start Date (IPSD) Reporting

2022 Initiatives:

1. ***NEW*** **All MCO Health Equity Performance Improvement Project (PIP) — Mental Health Treatment Penetration:** All MCO focus on improving systems of care for children and youth in BIPOC communities.
2. ***NEW*** **Penetration Measure Gap-in-Care Visibility for Customer Service:** Expansion to include behavioral health services for gap-in-care visibility when members call customer service.
3. ***NEW*** **Washington Integrated Care Assessment Implementation:** Statewide effort to implement the Washington Integrated Care Assessment (WA-ICA).
4. ***NEW*** **Follow Up for Children on ADHD Medication:** Outreach to members/guardians who have been prescribed ADHD medication and promote scheduling a follow up appointment.
5. **BHSO Adult Performance Improvement Project (PIP) — Peer Services with Substance Use Disorder (SUD) Diagnosis:** App-based peer support for members with SUDs.
6. **Collaborative Care in Pediatric Primary Care:** Collaborative care model integrating behavioral health staff and services into the pediatric primary care setting.
7. **Caring Connections (Formally Caring Contacts):** Build upon the evidence-based Caring Contacts program for all CHPW members to reduce suicide and suicide attempts.
8. **Pharmacy Behavioral Health Adherence Outreach:** Outreach to members with schizophrenia to increase medication adherence.
9. **Equity Learning Collaborative Grant Program — Depression and Behavioral Health Management:** P4P grant program to support CHCs in improving depression care with an equity lens.
10. **Depression Screening in Preferred Languages:** Focused on promoting best practices for screening using telehealth generally and in preferred languages.
11. **Medication Assisted Treatment (MAT) for Substance Use Disorders (SUD) in Primary Care:** Integrating MAT in primary care settings.
12. **Behavioral Health Data Integration Demonstration Project:** Piloting access to the Clinical Integration Solution (CIS) with a behavioral health agency to enhance collaboration with primary care.
13. **Expanding Access to Value-Based Arrangements:** Evaluate arrangements and advance bi-directional integration of primary care and behavioral health.

2022 Quality Improvement Program Summary

Appropriate Utilization

Core Programs: Utilization Management, Nurse Advice Line, Medical Alumni Volunteer Expert Network (MAVEN) Project

2022 Initiatives:
1. Community Health Worker Expansion: Expand Community Health Worker program into Thurston/Mason and Great River regions.
2. Teladoc Virtual Care Services: Expand access to telehealth services using Teladoc platform.

Condition Management

Core Programs: Care Management, Health Homes, Maternal Child Health Program, In-Home Health Risk Assessment, Pay for Performance (P4P) Quality Incentive Program, Provider Quality Improvement Support, Quit for Life, ScreenRx Medication Adherence Program, Value-Based Care, Supporting Star Medication Adherence, Electronic Clinical Data Access

2022 Initiatives:
1. *NEW* Expanded Medicare Zero Cost Services for Chronic Conditions: Expanded offering of reduced to zero and zero cost items to help members with chronic conditions.
2. *NEW* Chronic Condition Improvement Program (CCIP) — Members with End-Stage Renal Disease (ESRD): Increase focus on care and support and empower members with ESRD.
3. Hepatitis C Treatment Engagement: Outreach to members with Hepatitis C to encourage treatment.
4. Health Risk Assessment (HRA) Completion: Increasing HRA completion rates for SNP members by deploying high-touch strategies and engaging them to work with a case manager.
5. Equity Learning Collaborative Grant Program — Chronic Condition Management: P4P grant program to support CHCs in improving chronic condition management with an equity lens.
6. Improving Care of Members with Asthma: Participate in the Bree Collaborative Pediatric Asthma Workgroup and continue outreach to members with asthma and any activities requested by the Health Care Authority (HCA).

Safe Care

Core programs: Clinical Practice Guidelines, Medication Prescription Safety: Drug Utilization Reviews, Medication Therapy Management (Medicare), and the Personal Medication Coach (Medicaid), Monitor Clinical Quality Concerns, Patient Review and Coordination Program, Medicare Opioid Overutilization Program (MOOP)

Member and Provider Experience

Core Programs: Crossroads Patient Satisfaction Survey, HealthMaps, Member Engagement Workgroups, Provider Satisfaction Survey

2022 Initiatives:
1. *NEW* Member Experience Survey Redesign: New member experience survey that is universal across plans and provider networks.
2. *NEW* Member Listening Post: Opportunity for real-time feedback and service recovery when members call various member-facing CHPW teams.
3. Member Experience Plan (MXP): Comprehensive document outlining roadmap for member experience.
4. Center to Advance Consumer Partnership (CACP) Early Adopter Program: Operationalize Consumer Partnership Model and find opportunities to improve member experience.
5. Learning Collaborative Grant Program — Member Experience/Infrastructure: P4P grant program to support Community Health Centers (CHCs) in improving member experience with routine access to care, applying an equity lens.

2022 Quality Improvement Program Summary

Equitable Care

Core Programs: Culturally and Linguistically Appropriate Service (CLAS) Standards, CLAS Learning Series, Multicultural Healthcare Distinction/Health Equity Accreditation, Language and Communication Services

2022 Initiatives:

1. ***NEW*** **Promoting Organizational Diversity, Equity, and Inclusion:** Cross-organizational focus on diversity in recruiting, hiring, retention, and promotion, as well as staff training on racial equity and bias.
2. ***NEW*** **All MCO Health Equity Performance Improvement Project (PIP) — Mental Health Service Penetration:** All MCO focus on improving systems of care for children and youth in BIPOC communities.
3. ***NEW*** **Integrated Managed Care (IMC) Performance Improvement Project (PIP) — Reducing Breast Cancer Screening Disparities:** Aimed at reducing racial/ethnic, linguistic, regional and other disparities for Breast Cancer Screenings.
4. ***NEW*** **Expanding Equity Data:** Implement new process to collect, store, and use sexual orientation and gender identity (SOGI) and disability data.
5. **Support Access to Care for Refugee and Immigrant Families:** Supporting immigrant and refugee families and addressing concerns regarding Public Charge rule.
6. **Optimizing Social Determinant of Health (SDoH) Data:** Assess, collect and share pertinent SDoH data to inform development of community programs and quality initiatives.
7. **Social Determinants of Health Resource Network (Unite Us):** In collaboration with community partners across the state, CHPW will expand verified referral network for members in need of social services.

Measures of Focus for New and Continuing Initiative Goals

Note: This is not inclusive of all measures tracked in the QIP Evaluation. *Indicates non-HEDIS measures.

Wellness & Prevention

- Well-Child Visits in the First 30 Months of Life
- Child and Adolescent Well-Care Visits
- Childhood Immunization Status Combo 10
- Prenatal and Postpartum Care
- Immunizations for Adolescents—HPV
- Chlamydia Screening in Women
- Colorectal Cancer Screening
- Breast Cancer Screening
- Cervical Cancer Screening
- Adult's Access to Preventive/Ambulatory Health Services
- COVID-19 Vaccine Distribution*

Behavioral Health Integration

- Adherence to Antipsychotic Medications for Individuals with Schizophrenia
- Antidepressant Medication Management
- Depression Screening and Depression Follow-Up*
- Access to Behavioral Health Services for Children and Adolescents*
- Behavioral Health Evidence-Based Practice Implementation*
- At Least 70% of Eligible Members Engaged in/opt into Caring Connections*
- MH and SUD Services Penetration*
- Follow-Up Care for Children Prescribed ADHD Medication
- Pharmacotherapy for Opioid Use Disorder

Appropriate Utilization

- Avoidable ED Use*

Safe Care

- Maintain all safety standards and requirements*

Condition Management

- Medication Adherence for Hypertension (RAS Antagonists)
- Medication Adherence for Diabetes
- Medication Adherence for Cholesterol
- Controlling High Blood Pressure
- Comprehensive Diabetes Care - Blood Pressure Control
- Comprehensive Diabetes Care—Eye Exam
- Comprehensive Diabetes Care—HbA1c Poor Controlled
- Asthma Medication Ratio
- Hepatitis C Treatment Initiated*
- SNP Initial Health Risk Assessment (HRA) Completion*
- Behavioral Health Value-Based Payment Arrangements Effectiveness*
- Increase focus on care for members with ESRD*
- Improve Member Engagement in Condition Management*

Member and Provider Experience:

- Getting Needed Care
- Getting Care Quickly
- Create Real-Time Feedback Loops with Members*
- Improve Member Retention, Satisfaction, and Overall CAHPS Scores and Medicare STAR Rating*

Equitable Care:

- Education, Advocacy, and Resources for Immigrant Health Services*
- Addressing Social Determinants of Health*
- Expansion of Equity Data*
- Create a Culture of Equity*