

Summary of 2016 Evaluation and 2017 Work Plan

Our Commitment to Quality

Blue Cross Blue Shield of Massachusetts is committed to making high-quality health care affordable. This commitment is the foundation of our corporate, cultural, and business models. We depend on all our associates—from executive leaders to front-line teams—to deliver on our promise to always put our members first.

Our Quality Improvement Program

Our Quality Improvement Program ensures that members get high-quality, cost-effective care and that they're satisfied with their experience. Our Quality Improvement teams develop new initiatives every year and evaluate their progress. If we don't fully meet our goals, we design solutions to achieve them. Each year, we create a Quality Improvement Work Plan based on achievements and lessons learned during the previous year, and with the most current scientific evidence.

Evaluation of the 2016 Quality Improvement Work Plan

In 2016, we approached quality with a set of coordinated initiatives across the clinical, member, and provider focus areas:

- **Clinical**—Our initiatives focused on improving patient safety, behavioral health care, prevention and wellness, and care management of chronic conditions.
- **Member**—We identified opportunities to address population health disparities. We also created extensive communications to educate members about their plan and their rights, and to enhance their overall experience.
- **Provider**—We continued to identify opportunities to enhance our relationship, support, and reporting to providers and further strengthen their performance related to evidence-based clinical care.

Recognition of Our Commitment to Quality in 2016

The National Committee for Quality Assurance (NCQA) awarded Blue Cross with an “Excellent” status for our Commercial HMO/POS and PPO plans. Additionally, NCQA’s Health Insurance Plan Ratings 2016-2017 indicate that our Commercial HMO/POS plan received the highest rating of 5, with only 13 of 500 plans in the country earning this achievement.¹ Our Medicare Advantage HMO and prescription drug products also achieved the highest rating of 5 stars from the Center for Medicare & Medicaid Services while our PPO product maintained a solid 4.5 out of 5 stars.²

Our Quality Improvement teams analyzed the results of the 2016 improvement efforts to identify opportunities for our 2017 Work Plan. We found that the 2016 quality improvement initiatives were consistent with our commitment to providing safe, affordable health care to our members. We’re proud of our achievements and recognitions in 2016.

2017 Quality Improvement Work Plan

In this year’s Work Plan, our projects address important issues including:

<ul style="list-style-type: none"> • Improving patient safety • Reducing hospital readmissions and complications • Addressing disparities in health care • Improving access to quality behavioral health care 	<ul style="list-style-type: none"> • Chronic condition and advanced illness care support • Integration of delivery systems • Improving our members’ and providers’ experience
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Below is an outline of the 2016 & 2017 Quality Improvement Work Plan Highlights:

Quality Improvement Area	2016 Highlighted Achievements	2017 Highlighted Goals
<p>Clinical Quality means...</p> <p>Coordination of Care: Improving member health by better coordinating transitions across settings.</p> <p>Patient Safety: Improving health outcomes by minimizing the risk of complications.</p> <p>Health Management: Improving health of members with chronic conditions and helping to keep all members healthier through prevention.</p>	<ul style="list-style-type: none"> ✓ Once again, we were ranked “Best-in-Nation” for our program to help members manage their chronic conditions. ✓ We helped reduce hospital readmission rates for members in our Commercial plans. ✓ We launched a program for Medicare members in central Massachusetts in which coaches support members from bedside through their transition to home. ✓ We used the convenience of email and text to connect with our members about cancer screenings. ✓ Our prescription Pain Medication Safety Program is a national leader in addressing the opioid epidemic. This program has reduced the use of both long- and short-acting opioid painkillers and prevented over 60,000 members from receiving inappropriate dosages of painkillers. ✓ We enhanced our benefits for addiction treatment, removing barriers to receiving addiction care. 	<ul style="list-style-type: none"> • Continue to work with doctors and pharmacists to develop and encourage safe opioid prescribing practices. • Continue to educate members about clinical support programs through personalized communications outreach. • Create programs to ensure our members get behavioral health care services when they need them. • Continue to focus on opportunities to reduce avoidable hospital readmissions by ensuring our members understand their care plans and follow up with their doctors, which will improve transition of care from hospital to home. • Continue to encourage members to participate in cancer screenings to prevent disease.

1. NCQA’s Health Insurance Plan Ratings 2016–2017–Private PPO and HMO plans

2. Medicare evaluates plans based on a 5-star rating system. Star Ratings are calculated each year and may change from one year to the next.

3. Independent analysis completed by Disease Management Purchasing Consortium

Quality Improvement Area	2016 Highlighted Achievements	2017 Highlighted Goals
<p>Member Quality means...</p> <p>Member Experience: Making sure that interactions with Blue Cross are easy and that members understand their benefits and can make the best choices for their health care.</p> <p>Cultural Competency and Health Equity: Ensuring that all members have access to quality, affordable health care, and are served in a manner that addresses their unique needs.</p>	<ul style="list-style-type: none"> ✓ We achieved 5 stars in the 2016 Consumer Assessment of Healthcare Providers and Systems survey⁴ of our Medicare members. ✓ We exceeded our goals for resolving members' inquiries in one call. ✓ We launched a redesigned MyBlue® Member Portal with a streamlined member-friendly experience. ✓ We engaged with different groups in South East Massachusetts to develop programs to address health care disparities. 	<ul style="list-style-type: none"> • Continue to enhance our communication with members and educate them about their benefits and services through additional languages and platforms. • Enhance our capabilities to collect valuable opinions from our members that would help us improve their experiences. • Launch a collaborative program in South East Massachusetts to identify and address population health disparities.
<p>Provider Quality means...</p> <p>Provider Experience: Making Blue Cross Blue Shield of Massachusetts the insurer of choice among doctors and other clinical care providers.</p> <p>Provider Performance: Supporting our network of doctors and clinicians to deliver quality, affordable health care.</p>	<ul style="list-style-type: none"> ✓ Providers participating in our Alternative Quality Contract performance program continued to share best practices and used high-performance methods to manage the health of chronically ill patients. ✓ We expanded access of care through new Telehealth services for both medical and behavioral health visits by more than one million members. ✓ We enhanced our reports to providers about their health care delivery and patient-reported health care outcomes. ✓ We worked with providers to support and educate them about improving communication between critically ill patients and their caregivers through the Serious Illness Care Program. ✓ We launched a behavioral health hospital incentive program to reward free-standing behavioral health facilities that give high performance behavioral health care to members. 	<ul style="list-style-type: none"> • Develop new quality performance measures which include patients' clinical experiences. • Continue to enhance reporting to providers on their health care delivery and patient health care outcomes. • Continue to develop new tools and technology to make it easier for providers to do business with us. • Support providers' telemedicine services to improve members' access to care. • Collaborate with providers to enhance conversations with patients about advanced illness care. • Increase coordination with providers to better manage patients' complex health conditions.

4. Member Experience Rating Category



Commercial HMO/POS Combined,
Commercial PPO

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