



Annual Quality Update – 2017

Quality Improvement program

At Anthem Blue Cross and Blue Shield your health is important to us — and our experienced team can help you stay focused on it. To help us serve you the best we can, we closely look at the access to health care and programs we give you each year. We measure the quality and safety of them. The results tell us what works the best and what needs to be improved. The [Quality Improvement](#) program is the process of finding how we can improve your care.

What tells us how we're doing?

To measure how we're doing, we use tools from professional organizations, like:

- **Healthcare Effectiveness Data and Information Set (HEDIS®)** — to measure quality of care and services
- **Consumer Assessment of Healthcare Providers and Systems (CAHPS®)** — a member satisfaction survey

In 2017 we improved in the following areas:

- Antidepressant medication management
- Comprehensive diabetes care
- Childhood immunization status
- Prenatal care

We also earned high marks on accreditation surveys, quality audits and associate health training. This means we met all state laws and improved the way we delivered health care to our members in 2017.

To help members get and stay healthy, we offered the following programs and services in 2017:

Active programs	
Name	Count
Direct member outreach	35
Direct member education	27
Member incentive offer	15
Direct provider education	7
Provider incentive program	5
Supplemental data collection	4
Member service resource	2
Total	95

HEDIS®

A HEDIS performance measure is a set of technical specifications that define how to calculate a “rate” for some important indicator of quality. For instance, one HEDIS measure defines how plans should calculate the percentage of members who should have a medication for their heart

were actually given a prescription. Using these measures, plans can figure out what their rate is and how they compare to other plans.

The information from HEDIS helps us make sure you are getting the services you need. These services help keep you healthy or find health problems early so they can be treated sooner. We keep track of over 75 items and compare these to the average Medicaid rate in the United States.

CAHPS®

The CAHPS survey looks at member feedback on:

- The health plan
- Providers
- Your experience getting the care you need

The table below shows how our ratings for different measures changed from 2016 to 2017.

CAHPS Scores	
Member experience	Change from 2016 to 2017
Rating of health care	Increased ↑
Rating of health plan	Increased ↑
Rating of personal doctor	Increased ↑
Rating of specialist	Increased ↑
Customer service	Decreased ↓

This year, we want to make sure that:

- All our members get quality health care and services.
- We understand all our members' cultures and languages.
- We help our members stay well and manage their health care needs.
- We work to improve the health of our members, with a focus on breast cancer screening, postpartum care and follow-up to in-patient mental health stays.

Learn more about Quality Management

Have questions about the [Quality Management](#) program? Call us at 1-855-690-7800 (TTY 711), Monday through Friday 8 a.m. to 5 p.m. local time. We can tell you about:

- What quality management is.
- How we are doing and what our goals are.
- How we are working to make things better for you.

We can also send you information on our Quality Management program. Just ask us to mail you a copy of the program with goals, process and results.

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