

Medica's Quality Improvement Program: 2011

What is the Medica Quality Improvement Program?

The Medica Quality Improvement (QI) Program is made up of the projects and activities Medica performs to:

- Improve care, service, access and safety for our members;
- Improve service to our providers, employers, brokers and other customers; and
- Improve Medica's internal operations.

The QI program supports Medica's mission to meet our customers' needs for health plan products and services.

What areas does the QI Program cover?

Our QI program covers a wide range of topics that affect our members, providers, employers and brokers, as well as our internal staff. We want to be sure that:

- Our members receive high-quality health care and service from our providers.
 - Our members can get appointments quickly.
 - We have enough doctors in the areas where our members live.
 - Our members get the help they need when they change doctors.
 - Our complaint and appeal processes work fairly and efficiently.
 - We can offer appropriate help to our members with chronic health problems.
 - We can help our members be sure that the care they receive is safe.
 - Our members are satisfied with Medica, and we're identifying areas where we can do better.
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How does Medica find out about its customers?

We know that all of Medica's customers want the best possible care and service. Our members want the best-quality health care from a wide choice of providers. Members, and doctors too, want questions answered promptly, claims paid quickly and benefits that are easy to understand. Employers who buy Medica health plans for their employees want quality health care coverage, at prices they and their employees can afford. Medica's QI program is designed to address all our customers' needs.

To create an effective quality plan, Medica must understand what our customers need, want and believe about health care. One important tool for gathering information is our Member Advisory Council, a group of Medica members that meets to share information about their health plan experiences and needs.

We also learn about members and other important stakeholders through satisfaction surveys, reports on member complaints and appeals, and other data that shows the kind of care our members receive and how well it works for them.

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How does Medica choose QI projects?

When Medica chooses QI projects, we look for the best opportunities to improve care, service and safety for the greatest number of members. These are some of the questions we consider:

- Will this improvement be meaningful to our members?
- Do we have the ability to make a real impact on the problem?
- How are we doing compared to other local and national health plans? Can we do even better?
- What laws and regulations do we need to consider?
- What will it cost – in dollars, time, and staff – to do this project well?

Once we choose a project, we set a performance goal. We measure progress toward the goal throughout the project to see how effective the improvement is.

What is the Quality Improvement Work Plan?

Every year, Medica prepares a Quality Improvement Work Plan. The work plan is a summary of the key QI activities we plan for the year. Here are some examples of projects on the 2011 work plan:

- Develop and implement health and wellness interventions for members under age 18.
- Develop and implement interventions to help members reduce inappropriate emergency room use.
- Improve the quality of letters sent to members when medical services are authorized.
- Track the reasons members most often contact Medica, and identify ways to decrease calls that don't add value for members.
- Improve "first-call" problem resolution in the member call centers.

Every work plan activity has an "owner" – a Medica staff member who watches over the project and reports on progress. Some projects or goals may change during the year if progress reports show we aren't getting the results we need. We may also add new projects throughout the year.

What is the Quality Improvement Program Evaluation?

Medica evaluates the QI program at the end of each year. The Quality Improvement Program Evaluation is a report that reviews how well we did on our quality improvement activities. In the report, we compare measurements and look for trends to see how well we've done over time. If we didn't meet a goal, we also report on any problems or unexpected happenings that kept us from being successful.

The QI Program Evaluation is an important learning tool for Medica. The information in the report helps us understand how effective our QI program has been, and also helps us make recommendations for the next year's work plan.

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Who's in charge of the Medica QI Program?

At Medica, quality is everyone's responsibility. Departments and staff throughout Medica "own" and participate in QI activities. Our Senior Vice President and Chief Medical Officer, a licensed physician, is responsible for leading the QI program. Staff in the Quality Improvement department monitor and support program activities.

Medica's Quality Improvement Subcommittee (QIS) directs and oversees the QI program. QIS is staffed by Medica employees representing key business units across the organization. QIS reports to the Medical Committee of the Medica Board of Directors. The Medical Committee then reports to the full Medica Board of Directors.

For More Information

We always welcome member feedback! If you'd like to share your comments or suggestions, or would like more information about Medica's QI Program, please contact our Customer Service Department at 952-945-8000 or 1-800-992-3455.