

In every approach to quality improvement, the health plan follows a consistent process. This process starts with understanding the needs and the relevance of these needs to our member population. It then continues with a traditional quality improvement approach. This approach is applied toward improving areas of clinical importance, as well as the member experience. Quality improvement is implemented through a cross functional team approach, as evidenced by the Quality Improvement Committee (QIC) that is empowered to oversee and address the quality improvement activities of the health plan.

Through the continuous quality improvement cycle of Plan, Do, Study, Act, the health plan:

- ✦ Identifies, evaluates, and prioritizes change or improvement opportunities based on the relevance to the health plan population (high-risk/high-volume)
- ✦ Uses a structured and systematic approach to identify opportunities for improvement in the effectiveness and efficiency of the healthcare delivery process
- ✦ Implements appropriate remedial action to achieve continuous quality improvement
- ✦ Provides common language and tools for problem-solving techniques such as fishbone diagramming
- ✦ Supports the basic quality value of managing by data and increases credibility and reproducibility of data by:
  - determining current performance
  - Identifying benchmarks and establishing goals
  - Performing root cause analysis
  - Designing interventions and implementing improvement plans
  - Monitoring and reporting results
  - Holding gains made
  - Continuing the cycle of improved performance by monitoring and identifying additional improvement opportunities and activities

## The Clarion Health (HMO) Program Goals

The QI/MM Program goals include:

- + Provide high-quality, accessible, and affordable healthcare and service to the membership through a qualified network of practitioners and providers who are systematically selected and retained through the credentialing and performance appraisal process
- + Maintain a health plan model that empowers the practitioner to make medical decisions, and enables the practitioner to proactively manage healthcare
- + Coordinate preventive care, wellness efforts, and chronic care management, ensuring efforts are member-centric
- + Conduct operations in a manner that protects the confidentiality, safety, and dignity of all members
- + Verify that the QI/MM Program is in compliance with, and responsive to, applicable requirements of federal and state regulators and appropriate accrediting bodies
- + Meet the guiding principles of the Triple Aim by:
  - Improving the health of our members
  - Enhancing the member experience
  - Controlling the cost of care



If you have any questions about our quality improvement program, you can contact our ***Customer Service Department.***

 **Clarion**Health | **Answering the call**