



New Hampshire Healthy Families Annual Report

December 14, 2015

Our mission is to provide better health outcomes at lower costs for our members

Demonstration of our commitment to our members





2015 Quality Assessment and Performance Improvement

Improve our operations and service levels

- Implemented interventions aimed to improve care
 - Preventive care for acute and chronic conditions
 - Member satisfaction
 - Access to care
 - Getting care timely
 - Overall customer service

2015 Quality Assessment and Performance Improvement

Improve our operations and service levels

- Address barriers to receiving annual testing
 - Eye exams
 - Kidney monitoring
- Targeted mailings
 - Alerting physicians of their diabetic members requiring monitoring and testing
- Engaging non-compliant members by
 - Evaluating the population characteristics, cultural disparities, members age and gender, providers, and accessibility to care

2015 Quality Assessment and Performance Improvement

Improve our operations and service levels

- Outreach by nurses and health coaches
 - Importance of receiving care for their chronic disease
- Reminder post cards to diabetic members
 - Eye exams

Care Management

Nurses, behavioral health clinicians, or social workers who can help members manage their health problems

- Work with the member and their doctors to:
 - Help them get the care they need
 - Identify and engage community resources
 - Set up home health care or other needed services

Care Management

Nurses, behavioral health clinicians, or social workers who can help members manage their health problem

- Available for all members
- Commonly addressed
 - *Social and care coordination needs*
 - *Complex medical health needs*
 - *Behavioral health needs*
 - *Pregnancy*
 - *Disability*

Integrated Care Management

Integrates physical health, behavioral health, and social needs

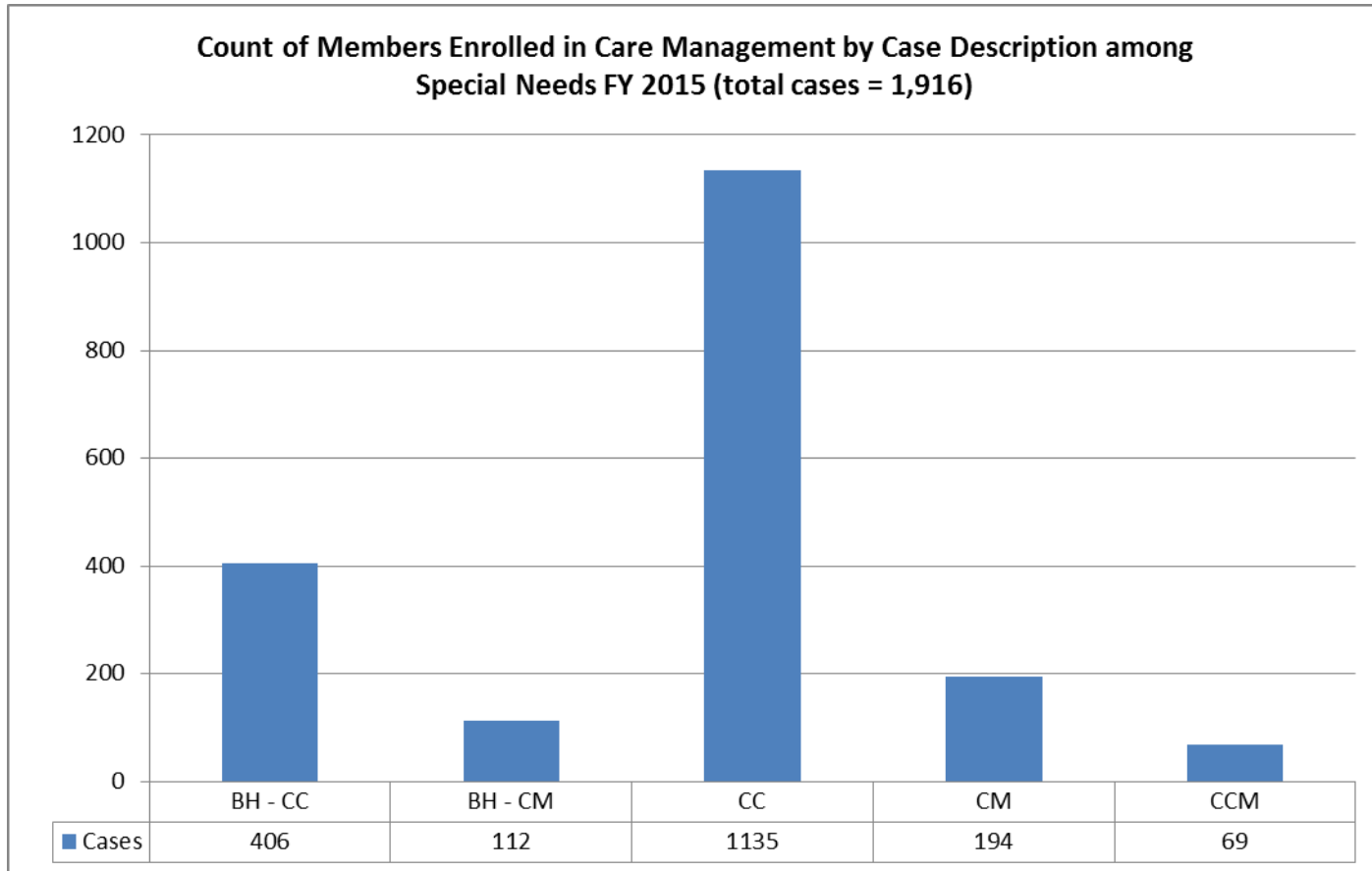
- Launched April 2015
- Three regional teams
- Comprised of clinical experts
 - Physicians and nurses
 - Behavioral health clinicians and social workers
 - Pharmacists and health coaches
 - Non-clinical support personnel

Integrated Care Management

Integrates physical health, behavioral health, and social needs

- One point of contact
 - Improve communication
 - Reduce duplication of services
- Categories of cases
 - Care Coordination
 - Complex Care Management

Integrated Care Management



Integrated Care Management

What is Complex Care Management?

- High level of care needs and services for members with complex needs
 - Children or adults with special health needs
 - Catastrophic, high-cost, high risk or co-morbid conditions
 - Non-adherent in less intensive programs
 - Frail, elderly or disabled
 - End of life

NHHF Membership in CM by Category

Eligibility	Membership	# in CM	% in CM
Foster Care	385	97	25%
LTC Dual	884	197	22%
LTC non-Dual	1634	395	24%
Medicaid Expansion	9781	13	Less than 1%
SSI Dual	2180	388	18%
SSI non-Dual	4618	1304	28%
TANF	44696	1902	4%
Total	64178	4296	7%

Performance Improvement Projects

- Diabetic Retinal Eye Exams
- Weight assessment, Counseling on Nutrition and Physical Activity for Children/Adolescents
- Diabetes screening for people with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications
- Well-Child visits for 3- 6 year olds

Disease Management

- Asthma
- Back pain management
- Chronic obstructive pulmonary disease
- Depression
- Tobacco cessation
- Diabetes
- Heart disease (CAD and CHF)
- Hypertension
- Telecare monitoring
- Puff free pregnancy
- Weight management

Disease Management

Interactions include:

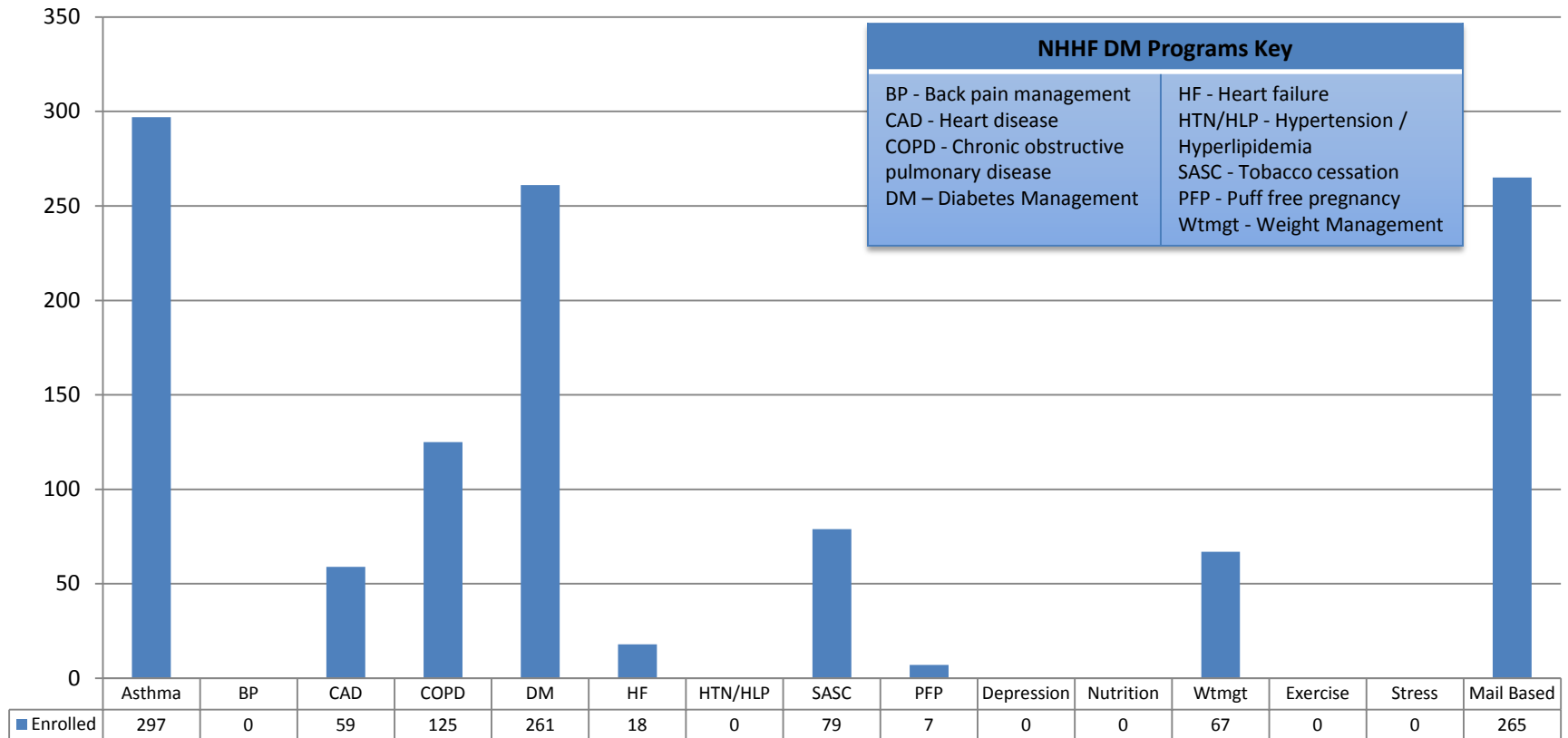
- Educational mailings and telephonic interactions with trained clinical licensed professionals or health coaches
- Therapeutic interventions focused on behavioral modification
- Symptom management and prevention
- Improvement of member self-management

Disease Management

In FY 2015, approximately 7,000 members were contacted to participate in the Disease Management program. Of those contacted, 26% were successfully reached and of those, 1,600 were medically eligible and 73% opted to enroll in the program.

Disease Management

Member Enrollment in DM Programs and Wellness Initiatives
7/1/2014 - 6/30/2015



Value Added Services

- MemberConnections®
 - Representatives are trained staff who provide support and help arrange needed services. They often conduct home visits to help with immediate needs
 - Promotes preventive health and
 - Connects members to quality healthcare and community social services.
- ConnectionsPlus®
 - Provides free cell phones to NHHF members who do not have safe, reliable access to a telephone.

Value Added Services

- CentAccount®
 - Provides incentives to members for healthy behaviors
- Educational Resources
 - Krames

Member Grievances

- Via telephone, mail, fax or in person
- Resolved as quickly as possible
 - No longer than 45 days from the receipt of the complaint
- Complaints are tracked and monitored
 - NHHF identified an issue with non-emergent transportation vendor and services, as a result, corrective action was implemented

Appeals

- Via telephone, mail, fax or in person
- Provide additional clinical information
- Option for “peer to peer” discussion between the plan Medical Director and their provider

Consumer Advisory Board

- Met quarterly in the following locations across New Hampshire:
 - Harbor Homes Community Health Center, Nashua
 - Ammonoosuc Community Health Services, Littleton
 - Families First Health and Support Center, Portsmouth
 - Manchester Community Health Center, Manchester

Consumer Advisory Committee

- Solicits feedback from our members on clinical programs
- Listens to the voice of our customers on preferences for outreach
 - Regarding preventive care reminders
 - Member handbook and website
- Assesses our marketing and communication approach to attract new enrollees

Consumer Advisory Committee

- Obtains valuable information
 - Why members select NHHF
 - Perception of the network
 - Reasons they are not satisfied with the Health Plan

Provider Advisory Board

- Met quarterly with physicians/ providers to solicit feedback and identify opportunities to improve processes
 - Appeals/grievances
 - Peer reviews
 - Clinical policies
 - Pharmacy issues
 - Behavioral health authorizations

Provider Survey

- Conducted a Provider Satisfaction Survey from July to September 2015
 - Yielded 31% response rate
 - Comparative rates with prior year's survey showed statistically significant improvement in two composites or categories

Member Experience Survey (CAHPS®)

Certified NCQA Survey Vendor conducted Consumer Assessment of Healthcare Providers and Systems (CAHPS®) member experience survey in early 2015

- Adult survey yielded response rate 26%
- Child survey yielded response rate 25%

2015 Member Experience Survey (Adult CAHPS®)

Composite	NHMF Rate	Mean	50 th National Percentile	75 th National Percentile	90 th National Percentile
Getting Needed Care	84.8%	80.8%	81%	<u>84.7%</u>	85.6%
Getting Care Quickly	84.5%	81.3	82.1%	<u>83.9%</u>	85.5%
How Well Doctors Communicate	91.1%	89.4%	89.8%	<u>90.9%</u>	92.2%
Customer Service	88.7%	86.6%	87.1%	<u>88.7%</u>	90.3%

2015 Member Experience Survey (Adult CAHPS®)

Composite	NHMF Rate	Mean	50 th National Percentile	75 th National Percentile	90 th National Percentile
Rating of Health Care	70.6%	71.3%	71.6%	<u>74.3%</u>	76.7%
Rating of Personal Doctor	80.4%	78.7%	78.3%	<u>80.9%</u>	83%
Rating of Specialist	82.7%	80.4%	80.7%	<u>82.5%</u>	84.6%
Rating of Health Plan	67.7%	75.2%	76.3%	79.3%	81.8%

National Committee for Quality Assurance

Has awarded

**New Hampshire Healthy Families
Medicaid HMO**

An accreditation status of

“COMMENDABLE”



Questions or comments

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