



Healthy BlueSM

BlueChoice® HealthPlan of SC

Healthy Connections 

Quality Improvement Program

How we measure up

At Healthy Blue, 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 medical 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 we focus on

Chronic disease and prevention:

We look at chronic health problems like asthma, heart disease and diabetes. We try to find out how to prevent the diseases through checkups, shots and screenings.

Behavioral health:

We review behavioral and mental health problems like substance abuse and depression. We look to find how doctors and therapists can best work together so you can get the care you need.

Patient safety:

We try to find the best ways to stop and prevent medical errors.

Coordinated care:

We have programs to help you and your doctor work together to help you get and stay healthy.

Community health:

Our mission is to improve the health of South Carolinians. We've created programs in your community to help.

Service quality:

We put our members first. We offer you many ways to tell us if you're happy with the care you get and with our service. We also talk to your doctors to see what they think of our service to make sure we know where to improve.

Case management:

For our members with serious health problems, we help them learn how to use and follow their customized health care plans. If you have conditions like coronary heart disease (CAD) or certain mental health issues, we work with your doctor to set and meet personal goals to better your health.



How we know if we're doing a good job

We test how we're doing by using tools from outside groups of experts. The groups decide what and how to measure. One tool used is the Healthcare Effectiveness Data and Information Set (HEDIS®).¹ HEDIS measures the quality of different types of care. Almost all American health plans use HEDIS to measure their care and service. We use the tool each year to see where we can improve.

We also use a yearly survey in first three months of the year asking you how happy you are with your care, plan and doctors. It's called the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey.² CAHPS asks if you got the care you needed, how easy was it, and if you got good service.

We get data from many other tools and surveys, such as care plans and health assessments. We use all the information to help us improve the next year.

The South Carolina Department of Health and Human Services (SCDHHS) uses other criteria for evaluating and ranking the performance of health plans securing Medicaid beneficiaries. To view these results, please visit www.scdhhs.gov/reports-statistics.

¹ HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

² CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

What we learned

Each year, HEDIS and CAHPS report on the past year. These results tell us how we did compared to the year before. Our goal is to be at the National Committee for Quality Assurance's (NCQA) 50th percentile or above.



About our Healthy Blue members

Areas we improved:

The HEDIS charts below tell us how much our members used health plan benefits and got important screenings and tests. The CAHPS charts tell us how our members scored us on certain areas of service.

HEDIS Measure	HEDIS 2017 Measurement Year 2016	HEDIS 2018 Measurement Year 2017	HEDIS 2019 Measurement Year 2018
Diabetic HbA1c testing	83.10%	84.91%	85.16%
Blood Pressure Control (<140/90)	41.82%	47.45%	52.80%
Chlamydia Screening in Women	53.16%	54.72%	56.88%
Well-Child Visits in First 15 Months: Six visits (H)	68.29%	74.17%	75.43%
Adolescent Well Care	47.45%	48.66%	51.58%
WCC – Body mass index (BMI) Percentile	73.38%	76.40%	80.29%

CAHPS Adult Survey Question	Measurement Year 2017	Measurement Year 2018	Measurement Year 2019
Rating of Health Plan	73.40%	72.30%	76.78%
Rating of All Health Care Received	74.70%	68.90%	77.52%
Rating of Personal Doctor	85.20%	79.90%	85.21%
Getting Care Quickly	82.00%	78.30%	85.31%
Getting Needed Care	82.00%	78.30%	84.66%
Customer Service	89.30%	87.20%	89.90%

CAHPS Child Survey Question	Measurement Year 2017	Measurement Year 2018	Measurement Year 2019
Rating of Health Plan	85.20%	85.15%	87.85%
Rating of All Health Care Received	86.90%	90.00%	90.07%
Rating of Personal Doctor	89.20%	92.20%	93.63%

Areas we still need to improve:

HEDIS Measure	Measurement Year 2016	Measurement Year 2017	Measurement Year 2018
Comprehensive Diabetes Care – Retinal Eye Exams	34.72%	42.82%	36.74%
Breast Cancer Screening	49.19%	51.86%	50.95%
Comprehensive Diabetes Care – Medical Attention for Nephropathy	92.13%	91.73%	88.81%
Cervical Cancer Screening	52.47%	58.15%	57.61%

CAHPS Adult Survey Question	Measurement Year 2017	Measurement Year 2018	Measurement Year 2019
Rating of Specialist	80.60%	81.54%	80.60%

CAHPS Child Survey Question	Measurement Year 2017	Measurement Year 2018	Measurement Year 2019
Rating of Health Plan	85.20%	85.15%	87.85%
Rating of All Health Care Received	86.90%	90.00%	90.07%
Rating of Personal Doctor	89.20%	92.20%	93.63%



How we did with our 2019 performance improvement projects (PIP)

Every year, Healthy Blue has at least two performance improvement projects (PIPs) focusing on clinical and nonclinical areas. Please note the data presented is collected for one full year and reported the following year. Therefore, the data always represents the prior year. For 2019, Healthy Blue had one non-clinical and one clinical PIP:

- Non-clinical: Improving Access and Availability of Care for Adults
- Clinical: Improving Comprehensive Diabetes Care

The results are shown below:

Non-Clinical: Access and Availability of Care for Adults

We used claims data for adults who received at least one ambulatory or preventive care visit during 2018. The table below demonstrates the 2018 results as compared to 2016 and 2017.

Adults 20 and older who received at least one ambulatory or preventive care visit during 2018:



2018	2017	2016
78.51%	79.00%	78.79%

The result demonstrated very stable access rates for adults.

We also reviewed our member satisfaction survey, or CAHPS, for two particular questions — noting urgent or emergent care, and checkup or routine care at the doctor's office or clinic. These two questions combined gave us information on adults accessing care quickly. The table below demonstrates the 2018 results as compared to 2016 and 2017.

Adults CAHPS: Getting Care Quickly in 2018 (Composite 2 questions):

2018	2017	2016
79.00%	78.31%	81.62%

The results demonstrate a slight increase response over the prior year.

To improve our adult access to care, Healthy Blue engages with direct outreach reminders to members through phone calls, on hold messages, texting, social media and working with your providers to understand any gaps in your health maintenance status. Healthy Blue has worked to establish and maintain a robust primary and specialty care network of physicians, hospitals and other providers to provide you with comprehensive access when you need it.

Clinical: Comprehensive Diabetes Care

Healthy Blue examined its care offered and provided to members who are diabetic. For this study, we focused on plan members ages 18 through 75. The primary goal is to increase the number of adult members who receive appropriate and timely blood tests for diabetes — hemoglobin A1c (HbA1c) and dilated eye examinations to evaluate the back of the eye for diabetes impact, or dilated retinal eye exams (DRE). These two services are deemed necessary based on the Comprehensive Diabetes Care guidelines and are part of a larger group of tests that includes screening for diabetes impact to the kidneys, screening for neurological impact to the feet and hands (peripheral neuropathy), and blood pressure.





This particular PIP began in 2018, based on 2017 data. The table below demonstrates the 2018 rate compared to 2017.

Measure	2018	2017
HbA1c	85.16%	84.91%
DRE	36.74%	42.82%

Our results demonstrated a slight improvement for the blood tests, but the eye examinations declined. Healthy Blue recognizes poorly controlled diabetes is a leading cause for blindness and works to get diabetic members to have the full comprehensive diabetes screenings as part of their full health maintenance plan.

To help improve access to screenings for our diabetic members, Healthy Blue works with a vendor that provides the full comprehensive diabetic screening panel in members' homes. The company, Five Star, works with your schedule and has a professional technical team to perform all these tests at no charge to you. Your test results are shared with your primary care provider (PCP).

Quality Improvement Goals for 2020

Healthy Blue continues to work so:

- All our members get quality health care.
- We understand our members' cultures and languages could negatively affect access to care.
- Our members' health statuses improve and stay healthy.

How this helps you

We care about what you think about the care you receive and how we serve you. We want to know how we compare to other health plans — we strive to do better. Knowing this helps us improve your care quality and serve you better.

If you have questions about quality improvement, please contact us at 1-855-347-0549. Let us know.

Your opinion is important!



Language Services

Do you need help with your health care, talking with us, or reading what we send you? We provide our materials in other languages and formats at no cost to you. Call us toll free at 1-866-781-5094 (TTY 1-866-773-9634). For help choosing a health plan, call 1-877-552-4642 (TTY 1-877-552-4670).

¿Necesita ayuda con su cuidado de la salud, para hablar con nosotros o leer lo que le enviamos? Proporcionamos nuestros materiales en otros idiomas y formatos sin costo alguno para usted. Llámenos a la línea gratuita al 1-866-781-5094 (TTY 1-866-773-9634). Si necesita ayuda para elegir un plan de salud, llame al 1-877-552-4642 (TTY 1-877-552-4670).

هل تحتاج إلى مساعدة في رعايتك الصحية أو في التحدث معنا أو قراءة ما نقوم بإرساله إليك؟ نحن نقدم المواد الخاصة بنا بلغات وتنسيقات أخرى بدون تكلفة عليك. اتصل بنا على الرقم المجاني 1-866-781-5094 (TTY 1-866-773-9634). للحصول على مساعدة في اختيار الخطة الصحية، اتصل على الرقم 1-877-552-4642 (TTY 1-877-552-4670).

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