



# Quality Program Summary

Magellan Complete Care of Arizona (HMO SNP)  
January 2020

The Magellan Complete Care of Arizona (MCC of AZ) (HMO SNP) Quality Improvement Program establishes the structure and standards for quality management and integrated improvement activities within the plan and is an integral component of measuring its effectiveness as an organization. The QI Program Description is the primary document that establishes the health plan's commitment to continuous quality improvement, and it serves the purpose of enabling all MCC of AZ (HMO SNP) leaders and staff to have a clear definition of the quality program structure, goals, and objectives within the organization.

The goal of the Quality Improvement Program (QIP) is to ensure the provision of consistently excellent health care, health information and services to its members. The goal will be met by:

- Defining and addressing:
  - The health care needs and health outcome of members who experience a higher burden of multiple chronic illnesses (both medical and behavioral)
  - Aspects of care and coordination for frail/disabled and culturally diverse populations, and those undergoing multiple care transitions with complex or unresolved needs
- Ensuring the provision of high quality and cost-effective integrated health care in compliance with state, federal and/or accreditation requirements
- Ensuring that improvements are based on "best practices" or on standards set by state, federal and/or accrediting organizations
- Providing the organization with an annual Work Plan Program Evaluation in accordance with state, federal and/or accreditation requirements
- Implementing quality standards, guidelines, processes and tracking indicators to monitor the safety and quality of clinical care, the quality of service and member experience
- Promoting a culture and structure for continuous quality improvement that identifies opportunities and addresses them through changes to existing processes and programs or by developing new approaches to improve care and service.
- Focusing on the measurement of effectiveness of quality interventions by tracking and monitoring the implementation and outcomes of quality interventions and scientifically evaluating the effectiveness of improving care and services
- Establishing policies and procedures that describe the implementation of comprehensive and coordinated delivery of integrated physical and behavioral health services including administrative and clinical integration of health care and service delivery
- Coordinating the collection, analysis, and reporting of data used in monitoring and evaluating care and services including quality, utilization, member services, credentialing and other related functions managed at the plan level or delegated to vendor organizations
- Communicating results of quality improvement activities to internal and external stakeholders

The scope of the Quality Improvement Program encompasses clinical and non-clinical services provided for MCC of AZ (HMO SNP) members. The program is designed to monitor, evaluate and continually improve the care and services delivered by MCC of AZ (HMO SNP) practitioners and affiliated providers across the full spectrum of services and sites of care. The program encompasses services rendered in inpatient, outpatient

and transitional settings and is designed to resolve identified areas of concern on an individual and system wide basis.

The QIP reflects the population served in terms of age groups, disease categories, special risk status and diversity. While many of the QIP initiatives address the needs of the entire population, there are specific programs focused on MCC of AZ (HMO SNP)'s most vulnerable members (those who are frail, disabled, near end-of-life; have multiple chronic conditions, and are homeless). The major program focusing on vulnerable members is the Complex Case Management Program, which uses assessments to identify members' unique needs, and develops customized care plans to address those needs. Complex Case Management is one component of a broader Population Health Management approach that includes care coordination programs, chronic disease programs, and other Population Health Management Initiatives.

The QIP embraces the plan, do, study, act (PDSA) methodology for conducting all quality activities including:

- Problem identification
- Establishing performance goals and benchmarks
- Conducting performance measurement
- Performing barrier and root causes analyses
- Analyzing performance data
- Developing and implementing interventions to address identified barriers/remedial action as appropriate issues
- Performing re-measurement and evaluation of program activities

To provide for overall quality functioning as a health plan, MCC of AZ (HMO SNP) continuously monitors important aspects of care, safety and service.