

Molina Healthcare is committed to ensuring our members receive recommended preventive care based on their age, health status, and any medical conditions they may have. Our goal is to help members take better care of themselves and their children through HEDIS[®] guidelines.

We also want to give our members the best service possible. That is why we use CAHPS[®], a survey about Molina Healthcare and health care services that covers important topics to consumers and focuses on aspects of quality that consumers are best qualified to assess. Providers and organizations can use the survey results to improve the quality of health care services.

The following articles are meant to be used as tools to assist with HEDIS[®] and CAHPS[®] measures. With further education on these measures we hope to increase understanding, emphasize importance, and provide guidance on ways to positively influence the member's experiences.

COMPREHENSIVE DIABETES CARE (CDC)

Molina Healthcare annually monitors the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had each of the following during the calendar year.

HEDIS [®] Measure	2012 Rate	2013 Rate	Goal*
HbA1c Testing	79.91%	81.24%	87.01%
HbA1c Poor Control (>9.0%, lower is better)	42.83%	42.38%	N/A
Eye Exam	55.19%	65.78%	61.75%
Monitoring for Nephropathy	76.60%	76.38%	83.03%
Blood Pressure Control (<140/90)	56.73%	60.26%	69.82%

Strategies for Improvement

- Review diabetes services needed at each office visit.
- Order labs prior to patient appointments.
- If point-of-care HbA1c tests are completed in-office, it is helpful to bill for this.
- Ensure HbA1c result and date documented in the chart.
- Adjust therapy to improve HbA1c and BP levels. Follow up with patients to monitor changes.
- A dilated retinal eye exam, remote imaging, and fundus photography can count as long as the results are read by an eye care professional (optometrist or ophthalmologist).
- Molina Healthcare has a Healthy Living with Diabetes program, to which you can refer patients.

ANTIDEPRESSANT MEDICATION MANAGEMENT

Molina Healthcare annually monitors the percentage of members 18 years of age and older with a diagnosis of major depression who were newly treated with antidepressant medication and who remained on an antidepressant medication treatment for 12-week and six-month periods.

HEDIS [®] Measure	2012 Rate	2013 Rate	Goal*
Antidepressant Medication Management – 12 weeks	66.51%	49.68%	52.74%
Antidepressant Medication Management – 6 months	50.82%	33.57%	37.31%

Strategies for Improvement

Questions?

Call Provider Services
 (855) 322-4079 – 8 a.m. to 6 p.m.
 Monday through Friday

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To receive this bulletin via email, contact
ProviderServices@MolinaHealthcare.com
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- group name
- TIN
- service location address
- contact name
- contact phone number
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4th Quarter Health Messages

Nov. – Diabetes management
 Dec. – Mental health for the holidays
 Jan. – Prevention of birth defects

- Educate your patients on how to take their antidepressant medications including:
 - How antidepressants work, their benefits, and how long they should be used
 - Expected length of time to be on antidepressant before starting to feel better
 - Importance of continuing medication even if patient feels better (at least six months)
 - Common side effects, how long the side effects may last, and how to manage them
 - What to do if there are questions or concerns

FOLLOW-UP AFTER HOSPITALIZATION FOR MENTAL ILLNESS

Molina Healthcare annually monitors the percentage of members 6 years of age and older who were hospitalized for treatment of selected mental health disorders and who had an outpatient visit, an intensive outpatient encounter, or partial hospitalization with a mental health practitioner within seven and 30 days of discharge.

HEDIS® Measure	2012 Rate	2013 Rate	Goal*
Follow-up within 30 days	43.86%	73.93%	77.47%
Follow-up within 7 days	30.54%	51.53%	57.86%

Strategies for Improvement

- Educate inpatient and outpatient providers about the measure and the clinical practice guidelines.
- Schedule follow-up appointment before the patient leaves. Same-day outpatient visits count.
- Try to use Molina Healthcare care managers or care coordinators to set up appointments.
- Visits must be with a mental health provider.

INITIATION/ENGAGEMENT OF ALCOHOL AND DRUG DEPENDENCE TREATMENT

Molina Healthcare annually monitors the percentage of adolescent and adult members 13 years of age and older with a new episode of alcohol or other drug (AOD) dependence who received the following:

- Initiation of AOD Treatment: Initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter, or partial hospitalization within 14 days of diagnosis.
- Engagement of AOD Treatment: Initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit.

HEDIS® Measure	2012 Rate	2013 Rate	Goal*
Engagement of AOD Treatment	35.22%	38.16%	43.62%
Initiation of AOD Treatment	2.31%	9.28%	18.56%

Strategies for Improvement

- Clinical Practice Guidelines for Adults are provided at www.MolinaHealthcare.com.
- Use templates in charts and EMRs that allow checkboxes for standard counseling activities.
- Provide patient reminders and materials to assist in upcoming care visits.

FOLLOW-UP FOR CHILDREN PRESCRIBED ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD) MEDICATION

Molina Healthcare annually monitors the percentage of children ages 6 to 12 newly prescribed ADHD medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed. Two rates are reported:

- (1) Initiation Phase: One follow-up visit with a prescribing practitioner during the 30 day initiation phase
- (2) Continuation and Maintenance Phase: In addition to the visit in the Initiation Phase, at least two follow-up visits with a practitioner within 270 days (nine months) after the Initiation Phase ended.

HEDIS® Measure	2012 Rate	2013 Rate	Goal*
Initiation Phase	38.45%	47.95%	44.46%
Continuation/Maintenance Phase	45.23%	60.23%	56.10%

Strategies for Improvement

- When prescribing a new medication, be sure to schedule a follow-up visit within 30 days to assess how the medication is working. Schedule this visit while your patient is still in the office.

- Schedule two more visits in the nine months after the first 30 days to monitor progress.
- Never continue these controlled substances without at least two visits per year to evaluate progress. If nothing else, monitor the child's growth to ensure the correct dosage.

FREQUENCY OF ONGOING PRENATAL CARE & TIMELINESS OF PRENATAL CARE

Molina Healthcare annually monitors the percentage of members who delivered between Nov. 6 of the prior year and Nov. 5 of the measurement year who received nine expected prenatal visits. The percentage is adjusted by the month of pregnancy at the time of enrollment and gestational age.

HEDIS® Measure	2012 Rate	2013 Rate	Goal*
Frequency of Ongoing Prenatal Care (Nine Visits)	69.80%	72.49%	72.99%

Molina Healthcare annually monitors the percentage of pregnant members who received a prenatal care visit in the first trimester or within 42 days of enrollment.

HEDIS® Measure	2012 Rate	2013 Rate	Goal*
Timeliness of Prenatal Care	86.29%	85.55%	90.39%

Strategies for Improvement

- Schedule prenatal care visits starting in the first trimester or within 42 days of enrollment.
- Ask front office staff to prioritize new pregnant patients and ensure prompt appointments for any patient calling for a pregnancy visit to ensure an appointment in the first trimester.
- Have a direct referral process to OB/GYN in place.
- Molina Healthcare has a Motherhood Matters® program to which you can refer patients.

POSTPARTUM CARE (PPC)

Molina Healthcare annually monitors the percentage of pregnant members who had a postpartum visit with an OB/GYN practitioner or PCP between 21 and 56 days after delivery.

HEDIS® Measure	2012 Rate	2013 Rate	Goal*
Postpartum Care	61.42%	56.64%	71.05%

Strategies for Improvement

- Schedule your patient for a postpartum visit within 21 to 56 days from delivery. (Please note that staple removal following a cesarean section does not count as a postpartum visit for HEDIS®.)
- Use Molina Healthcare's postpartum calendar to ensure the visit is within the correct time frame.

GETTING CARE QUICKLY

One area of satisfaction that is measured is how quickly members can receive care when they need care right away. On a composite three-point scale, the provider survey question results are as follows:

- ✓ *In the last 12 months, when you needed care right away, how often did you get care as soon as you thought you needed?*
- ✓ *In the last 12 months, not counting the times you needed care right away, how often did you get an appointment for your health care at a doctor's office or clinic as soon as you thought you needed?*

CAHPS® Measure – Getting Care Quickly	2013 Result	2014 Result	Goal*
Adult – Combined	79.54%	81.55%	81%
Child	90.70%	90.56%	88.6%

By continuing to provide quality assistance to your patients, you can help improve patient satisfaction and experience rates. Thank you for taking care of your patient's health care needs and keeping them satisfied to ensure their health care experience is a positive one.

* National NCQA 75th percentile for Medicaid HMO plans.

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