



QUALITY OVERVIEW

Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey

The CAHPS survey is an annual member satisfaction survey that assesses member experience with the health plan, health care providers, and the services you receive. The survey is sent out every year from February through May to randomly selected members. The results are collected by an external vendor and reviewed by the health plan to find opportunities for improvement in our service to you.

The CAHPS survey includes the following measures of member experience:

- Getting needed care.
- Getting care quickly.
- How well doctors communicate.
- Health plan customer service.
- Health plan overall rating.

If you receive a CAHPS survey, please complete it. It is important to the health plan to receive this feedback so that we can identify strengths and weaknesses and target areas for improvement.

For more information on the CAHPS survey, please see <https://www.ahrq.gov/cahps/about-cahps/index.html>

Healthcare Effectiveness Data and Information Set (HEDIS®)

HEDIS is a tool that is used by Health Plan of Nevada and Sierra Health and Life to measure quality. HEDIS results assist health plans in demonstrating improvement in both clinical and non-clinical care and allows both state and federal government entities to compare health plans to each other. Data is collected through a review of medical records and claims data and provides information for more than 90 measures across six domains such as effectiveness of care and access and availability of care.

Some examples of HEDIS measures that the health plan focuses on include, but are not limited to:

- Immunizations for children and adolescents.
- Well visits for children and adolescents.
- Screening for breast, cervical and colorectal cancers.
- Prenatal and postpartum care.
- Chronic disease measures including controlling high blood pressure, comprehensive diabetes care and asthma medication use.
- Inappropriate use of imaging and antibiotics.
- Behavioral health measures including alcohol and other drug dependence treatment, diabetes and cardiovascular monitoring for people with schizophrenia and follow-up after hospitalization for mental illness.

For more information about HEDIS, please see <https://www.ncqa.org/hedis/measures/>

National Committee for Quality Assurance (NCQA) Health Plan Accreditation

Health Plan of Nevada (HPN) and Sierra Health and Life (SHL) are accredited by NCQA, confirming that standards of quality are met within the commercial, Exchange and Medicaid plans. Each HPN and SHL plan goes through the accreditation process every three years and is required to meet over 100 elements to earn accreditation.

The NCQA accreditation standards assess the following across both medical and behavioral health care:

- Quality Management and Improvement
- Population Health Management
- Network Management
- Credentialing and Recredentialing of Providers
- Utilization Management
- Member Experience

Health Plan of Nevada Medicaid has achieved a Distinction in Multicultural Health Care from NCQA. This distinction highlights the efforts within the health plan to improve culturally and linguistically appropriate services and reduce care deficiencies related to race, ethnicity and language within the Medicaid population.

For more information about NCQA Health Plan Accreditation, please see

<https://www.ncqa.org/programs/health-plans/health-plan-accreditation-hpa/>

Quality of Care (QOC)

Health Plan of Nevada and Sierra Health and Life monitor quality of care within our provider network to protect our members. Quality of care is monitored on an ongoing basis by a medical director and team of nurses to identify possible substandard or inappropriate care or inappropriate professional behavior by a provider. If a potential issue is identified, HPN or SHL will take appropriate action to address this.