



The results are in..

Amerigroup Community Care is pleased to present the annual Quality Improvement summary of clinical performance and service satisfaction. Throughout each year, we evaluate data trends related to how our members receive health care and preventive care services and compare that data to national practice guidelines. We also recognize that collaboration with our network physicians, and their office staff and managers is the key to quality performance by our health plan. Thank you for participating in our network, for providing quality health care to our members and for your cooperation in our annual review process.

A copy of the completed Quality Improvement Program evaluation executive summary is available upon request by calling Provider Services at 1-800-454-3730.

Clinical performance and service satisfaction are based upon results from:

- **Medicaid Healthcare Effectiveness Data and Information Set (HEDIS) 2014**— a national program developed by the National Committee for Quality Assurance (NCQA) to measure how effectively health plans and providers deliver preventive care
- **Consumer Assessment of Healthcare Providers and Systems (CAHPS) 2014**— these surveys evaluate member satisfaction with care and services received over the past six months; a random sample of New Jersey plan members answered questions about their doctors and the health plan

The National Committee for Quality Assurance (NCQA) is a private, nonprofit group committed to improving health care.

We have achieved Commendable Accreditation status from the NCQA. This status is for health plan that meet or exceed NCQA's standards for service and quality.



Improving HEDIS scores is a team effort

We have a comprehensive plan to improve our HEDIS measures through member outreach, provider outreach, case management and data collection, but we also need your help. Collaboration with our providers is the key to quality improvement.

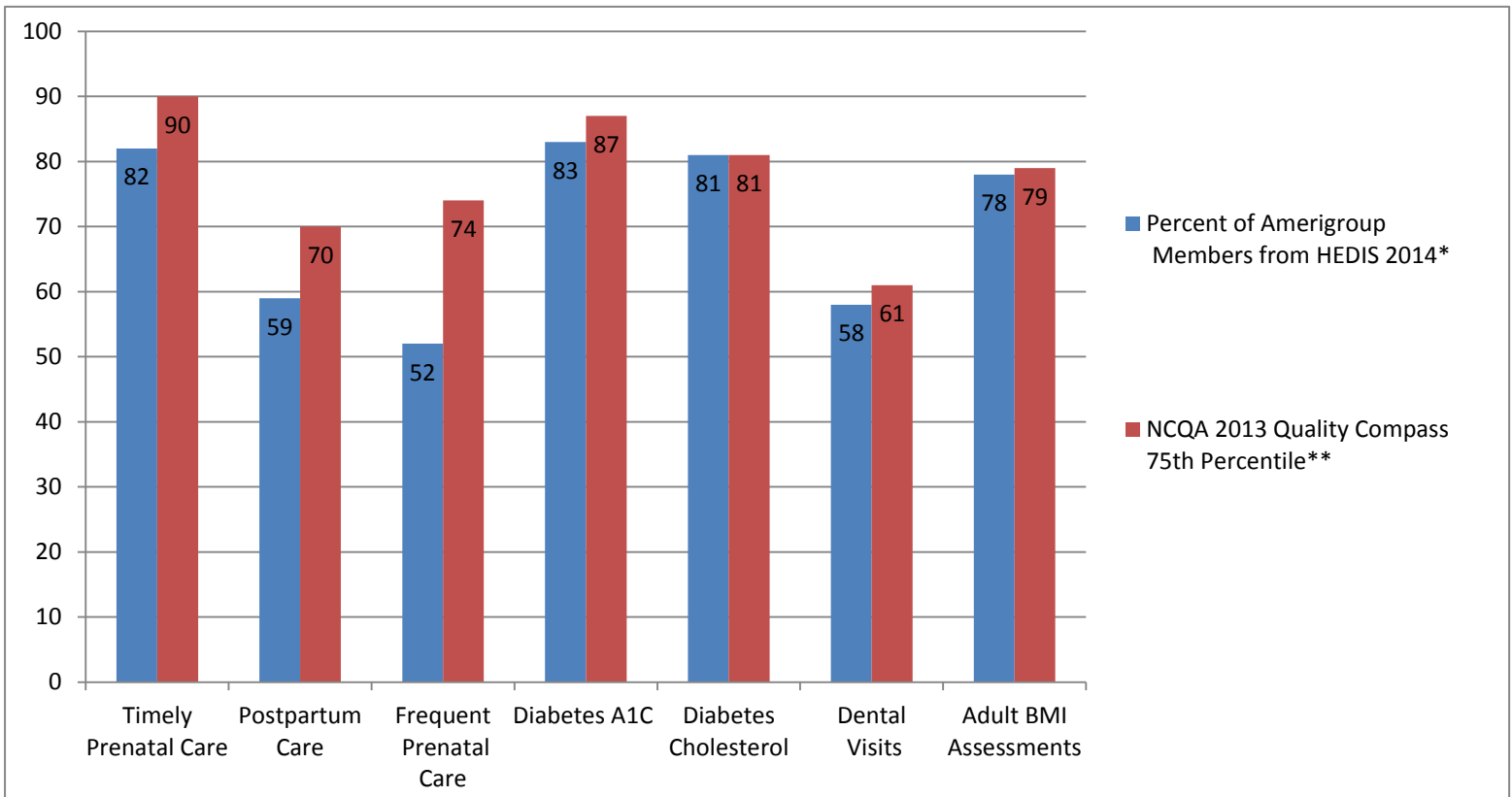
Thank you for your commitment and the care you give to our members – your patients.

For more information on any of the topics we've covered, please visit our website at providers.amerigroup.com.
Need a paper copy of this information? Call Provider Services at 1-800-454-3730.

HEDIS®

The HEDIS report below is provided as a service and reference for you and the rest of our provider network. We compare HEDIS 2014 measures against 2013 performance data. We produce this report to share key findings regarding our quality improvement activities and progress toward meeting our quality goal – to reach the 75th percentile for all measures as defined by NCQA.

The graph below denotes the rate of Amerigroup members who received services for the following HEDIS measures:



Data obtained from the **NJ Medicaid Workbook 2013* and from ***NCQA 2013 Quality Compass HEDIS Percentiles*

Postpartum care: Refers to women who had a postpartum visit on or between 21 and 56 days after delivery.

Rationale of importance: The American College of Obstetricians and Gynecologists (ACOG) recommends that women see their health care provider at least once between four and six weeks after giving birth. The first postpartum visit should include a physical examination and is an opportunity for the health care provider to answer parents' questions, give family planning guidance and counsel on nutrition.

Timeliness and frequency of prenatal care: Timeliness refers to the percentage of Amerigroup deliveries that received prenatal care visits in the first trimester or within 42 days of enrollment in the organization. It is important for the pregnant woman to receive the recommended number of prenatal visits during the course of the pregnancy.

Frequency and adequacy of ongoing prenatal visits are important factors in minimizing pregnancy problems. Complications can arise at any time during pregnancy and continued monitoring throughout pregnancy is necessary.

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Rationale of importance: Preventive medicine is the basis to prenatal care. Health promotion in the early stages of pregnancy can have an optimal effect on the outcome. Some women enroll in an organization at a later stage of pregnancy; in this case, it is essential for the organization to begin providing prenatal care as quickly as possible.

82% of Amerigroup members had timely prenatal care and 52% had frequent prenatal care

Source: <http://www.qualitymeasures.ahrq.gov/content.aspx?id=47232&search=prenatal+care>
<http://www.qualitymeasures.ahrq.gov/content.aspx?id=47265&search=postpartum+care>

59% of Amerigroup members had postpartum visits between 21 and 56 days after delivery.

Source: <http://www.qualitymeasures.ahrq.gov/content.aspx?id=47234&search=postpartum+care>

Dental visits two times a year

Dental care: Amerigroup encourages all members under 21 years old to have **two** dental visits a year. A referral to a dentist at **one year of age or soon after the eruption of the first primary tooth** is recommended. Thereafter there must be, at a minimum, **a dental visit twice a year** with confirmation by the PCP during well child visits to ensure that all needed dental preventive and treatment services are provided.

Rationale of importance: Oral health is important to the overall health and well-being of all Americans and dental caries is the most common chronic disease in children in the United States. Poor oral health can significantly affect a child's overall health, growth and development and learning.

58% of Amerigroup members aged 2 to 21 years had at least one dental service in 2013.

Source: <http://www.qualitymeasures.ahrq.gov/content.aspx?id=47297&search=dental>

Comprehensive diabetes care: Members 18 to 75 years of age with diabetes (type 1 and type 2) who had hemoglobin A1c (HbA1c) testing, a recent low-density lipoprotein cholesterol (LDL-C) level less than 100 mg/dL., had a retinal eye exam, during the year and who received screening for nephropathy.

Rationale of importance: Diabetes is one of the most costly and highly prevalent chronic diseases in the United States. Approximately 20.8 million Americans have diabetes, and half these cases are undiagnosed (Centers for Disease Control and Prevention [CDC], 2005). Many complications, such as amputation, blindness and kidney failure, can be prevented if detected and addressed in early stages.

83% of members had A1C blood test and 81% had LDL cholesterol screenings last year.

Body mass index (BMI): Percentage of patients 18 years and older who have a BMI documented at least every two years.

Rationale of importance: BMI is considered the most efficient and effective method for assessing excess body fat; it is a starting point for assessing the relationship between weight and height. Obesity is the second leading cause of preventable death in the United States (U.S.). It increases both morbidity and mortality rates and the risk of conditions such as diabetes, coronary heart disease (CHD) and cancer. Overweight and obesity are also contributing causes to more than 50 percent of all-cause mortality among American adults aged 20-74.

78% of Amerigroup members had BMI documented in their medical record.

Source: <http://www.qualitymeasures.ahrq.gov/content.aspx?id=47123&search=aba>

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Amerigroup has a comprehensive plan to improve the above HEDIS measures through member outreach, provider outreach, case management and data collection but we also need your help. Collaboration with our providers is the key to quality improvement.

Did you know?

Amerigroup will send you \$10 for every documented encounter record for an Early and Periodic Screening, Diagnosis and Treatment (EPSDT) screening examination you perform!

The incentive payment shall be reimbursed only for EPSDT encounter records submitted:

1. With procedure codes specified by Division of Medical Assistance and Health Services (DMAHS)
2. According to the EPSDT periodicity schedule

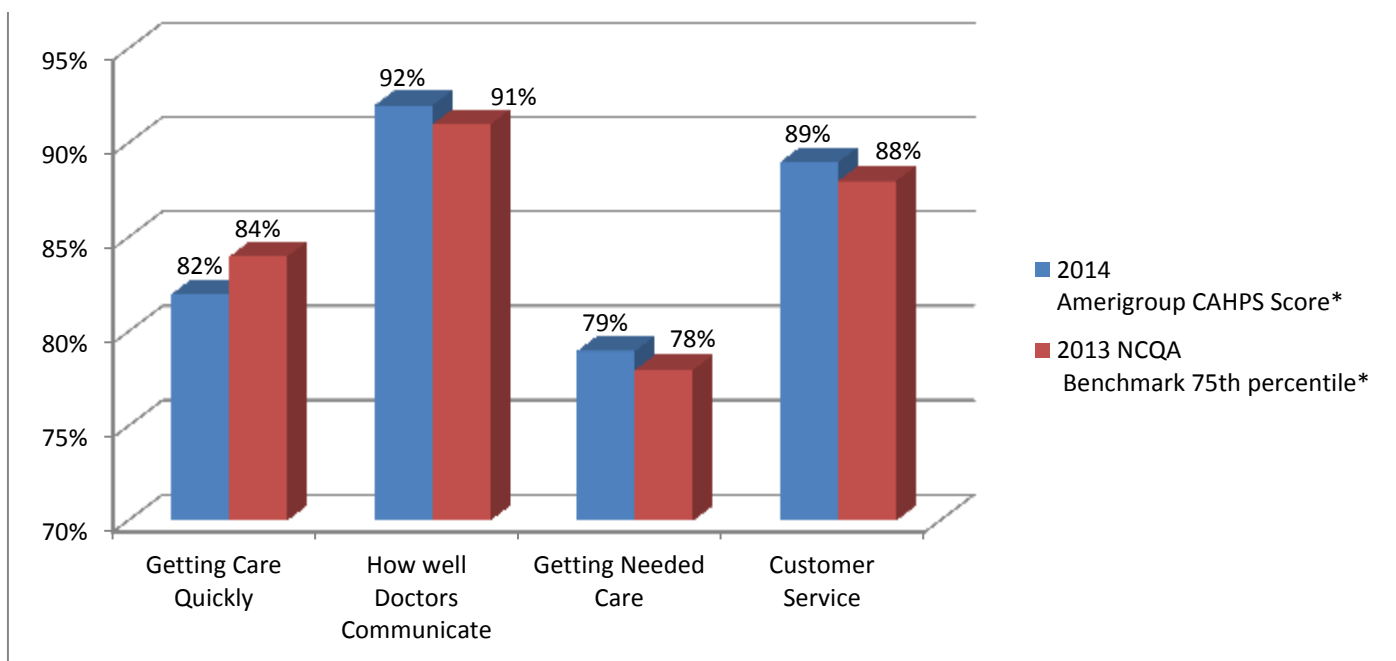
The State, DMAHS, sends the payments to us and then we send it to you.

Reimbursement for services will be paid only if encounter records are submitted no later than 12 months from the date of service.

Consumer Assessment of Healthcare Providers and Systems

In an effort to serve our members better, we conduct a member satisfaction survey each year. The **Consumer Assessment of Healthcare Providers and Systems (CAHPS)** tool asks our members to rate their experiences with their doctors and/or specialists and with the health plan within the previous six months. We rate our CAHPS performance by measuring against benchmarks set by the National Committee for Quality Assurance (NCQA).

This graph denotes a summary of results from the 2014 Amerigroup CAHPS.



*Data obtained from 2014 CAHPS 5.0H Adult Medicaid Member Satisfaction Results

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How did we do?

Member ratings for our customer service reflect a high satisfaction. Overall, Amerigroup members are satisfied with the care and services they receive from their providers and their health plan. The survey results show that we can improve and continue to strive to exceed the national benchmarks. Amerigroup has developed and distributed a Provider Communication Guide to all of our network providers. If you did not receive a copy, please call Provider Services at 1-800-454-3730.

Amerigroup continuously strives to reach the highest percentile benchmark set by the NCQA. Like NCQA, we are dedicated to improving health care quality.

Amerigroup also offers providers the opportunity to participate on committees aimed at improving services and clinical outcomes for our members. These activities include the review of policies, procedures and clinical practice guidelines and the ability to advise the health plan administration in any aspect of health plan policy or operation affecting network providers or members. If you would like to participate in the medical advisory committee or the credentialing subcommittee, please call Provider Services at 1-800-454-3730.

Thank you for your commitment and the care you give to our members – your patients. We hope you find the above reports to be beneficial.

Pharmacy management information

Need up-to-date pharmacy information? Log in to our website providers.amerigroup.com/nj to access our formulary, prior authorization form, processes and preferred drug list. Have questions about the formulary or need a paper copy? Call our pharmacy department at 1-800-454-3730. Pharmacy technicians are available Monday through Friday from 8 a.m. to 8 p.m. Eastern time and Saturday from 10 a.m. to 2 p.m. Eastern time.

Member rights and responsibilities

We want to keep you informed of our members' defined rights and responsibilities. These can be found in your provider manual and on our website providers.amerigroup.com. If you'd like us to mail you a copy, call Provider Services at 1-800-454-3730.

General

The most current provider manual is on the provider website providers.amerigroup.com.

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