



Welcome Aetna Better Health Providers! We hope you enjoy this on-line newsletter designed **especially** for you. We have created this publication to support our ongoing commitment to providing education and information about Aetna Better Health. We hope you find it helpful. You are a critical member of our team! In this edition you will find several articles on our Quality Improvement Program, including our onsite medical record review. In future publications you can anticipate information on Member Rights and Responsibilities, Quality Improvement Activities, Access to Care, Aetna Better Health Information Nurse Line and more.

Let your voice be heard! In an effort to support our collaboration efforts, please contact your Network Account Manager for suggested topics for future Provider Newsletters.

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## Aetna Better Health® of Illinois Prepares for NCQA Accreditation and Our Quality Assessment Performance Improvement Program

The purpose of Aetna Better Health of Illinois' Quality Assessment Performance Improvement (QAPI) Program is to ensure that all services meet the highest standards of quality care and member safety. It provides a framework for promoting and achieving excellence in the delivery of services to our members through continuous quality improvement. A key focus of our quality program is improving the member's biological, psychological and social well-being with an emphasis on quality of care and the non-clinical aspects of all services. The program provides an ongoing evaluation process that lends itself to improving identified opportunities for improving health care outcomes for members and monitoring for continued effectiveness.

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## Our Quality Assessment Performance Improvement Program When it comes to quality, we're guided by:

- Results-based studies conducted by our Quality Management Department
- Sound advice from internal and external experts
- National standards and guidance set by Healthcare and Family Services (HFS), the Centers for Medicare and Medicaid Services (CMS), and the National Committee for Quality Assurance (NCQA)
- Current research that informs the criteria we use
- First-hand experience of case managers who know our members' needs

## Aetna Better Health Welcomes a New Chief Medical Officer



Aetna Better Health is pleased to announce the recent addition of Bruce Himmelstein, MD, FAAP as Chief Medical Officer for the health plan. Dr. Himmelstein's responsibilities include assuring appropriate health care delivery, overseeing accreditation and clinical quality improvement endeavors along with promoting wellness and prevention, education and outreach programs.

Aetna Better Health is very fortunate to have Dr. Himmelstein's rich experience in health care. He is very committed to Aetna's mission in doing the right thing for the right reason and focusing on patient participation and provider engagement.

Dr. Himmelstein graduated cum laude from Harvard with a BA in chemistry. He received his Medical Doctorate from the New York University School of Medicine and is currently completing his Executive MBA from the University of South Florida Muma College of Business. Bruce comes to us from WellCare® of Florida where he was Medical Director, but has ties to the Midwest. He was previously the CMO for a managed Medicaid plan in Milwaukee Wisconsin, and urgent care physician at the Children's Hospital of Wisconsin, and a pediatrician for the Wheaton Franciscan Medical Group in Milwaukee. Dr. Himmelstein received his first faculty appointment as Assistant Professor, Department of Pediatrics, Division of Oncology at the prestigious University of Pennsylvania School of Medicine in Philadelphia, was an Associate Professor at the Medical College of Wisconsin, and is currently on the Voluntary Pediatric Faculty at the University of South Florida School of Medicine.

Dr. Himmelstein is a sought after speaker and prolific writer having presented seven international lectures/workshops, 28 national presentations, and 44 regional presentations. He has also been granted 15 peer reviewed research grants, contracts and awards totaling more than \$6.1 million along with 3 non-peer reviewed grants totaling more than \$386 thousand. His work has been referenced or produced in 33 original papers and referenced in more than 35 other printed works.

"I am very excited about joining Aetna Better Health," said Dr. Himmelstein. "Welcome to Volume 1 of our Provider Newsletter, a newsletter for our Integrated Care Program (Medicaid) provider partners. We value our provider partners and want to make it easy for you to care for our members and guide them down the path to better health. This is a terrific opportunity to serve you. As the health plan grows and receives recognition among its peers, my focus is on continuing to make the health of our members our first consideration. Thank you for your participation in our programs and initiatives. I look forward to our collaboration in delivering exceptional patient care."

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## 2015 Provider Satisfaction Survey

Aetna Better Health is currently conducting a Provider Satisfaction Survey. The survey is administered by SPH Analytics and targets health care providers to measure their satisfaction with our health plan, as well as to support NCQA Standards for Health Plan Accreditation. It is important that we understand how our health plan impacts your offices and practices on a daily basis and point out areas that might need improvement. PCPs, specialists and behavioral health providers are randomly selected and surveyed by mail and phone. The survey will begin in November and will wrap up in December.

Your participation is encouraged and appreciated, as together we strive to positively impact our members' overall quality of care.

## Our comprehensive program:

- Adheres to Healthcare Effectiveness Data and Information Set (HEDIS®) standards and measures our progress to meet annual goals
- Objectively monitors and evaluates the care and services our members receive
- Plans studies across the continuum of care and service to ensure ongoing, proactive evaluation and refinement of our program
- Reflects the demographic and epidemiological needs of each population we serve
- Encourages both members and providers to recommend improvements
- Identifies ways we can promote and improve member safety

Aetna Better Health® of Illinois is currently in the process of preparing for NCQA accreditation. Aetna Better Health has much experience in this area and has developed a quality organization model which will help to achieve NCQA accreditation for our Medicaid business, improve our HEDIS and Medicare Five-Star Quality Rating results, and support a “Best in Class” quality organization.

The QAPI program monitors the review, identification and follow-up for all clinical and access issues. The program is evaluated each year and/or as needed to ensure it meets NCQA standards. NCQA accreditation is the most rigorous and comprehensive in the health insurance industry. NCQA Health Plan Accreditation verifies scores and publicly reports quality results, allowing “apples - to - apples” comparison among health plans. NCQA is the only assessment program whose accreditation scores are based on a health plan’s policies and procedures, as well as on a set of HEDIS measures and consumer experience measures such as the Consumer Assessment of Healthcare Providers and Systems (CAHPS) program. CAHPS evaluates members’ experience with health care organizations through member surveys.

## The goals and objectives of the QAPI program are to:

- Ensure that quality and safety of clinical care and services are measured using reliable methods
- Take actions that result in improvements that can be measured
- Involve administrative and clinical staff in support of the on-going quality improvement process
- Focus always on quality issues of high importance
- Ensure that all state and national requirements are met, and that NCQA accreditation is earned



## Our Quality Management department is excited to announce the launch of onsite medical record review starting October 2015.

We believe in delivering the best care through a collaborative approach. We are eager to meet our practitioners and to support them with their journey to offer quality outcomes to our members, as well as to:

- Provide Aetna Better Health® of Illinois documentation standards for participating providers;
- Facilitate communication and coordination of care; and
- Promote effective and confidential patient care.

We will review medical records for members of Aetna Better Health® of Illinois every two years. We base our review on the National Committee for Quality Assurance (NCQA) standards; selected HEDIS® measures, and clinical practice guidelines. The review requires us to establish medical record criteria and documentation standards for participating practitioners.

Our team will select and review a sample of primary care physician (PCP) medical record charts/electronic medical records. All practitioners who function as a PCP, including Internal Medicine, General Practice, Family Practice Physicians, Pediatricians, Nurse Practitioners and OB/GYNs acting as PCPs, will be part of the universe for selection. Up to ten (10) records will be selected.

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### The medical record review process

There will be two options available for the onsite medical record review process. The providers selected will be required to choose one of the two options below:

- Option 1: Send copies of the selected 10 members medical records into the Aetna Better Health® of Illinois office via fax, or mail; or
- Option 2: Provide the Aetna Better Health of Illinois Quality Team access to medical records for onsite review.

A medical record review tool will be used for the purpose of assessing and documenting the medical records review. Scores will be calculated and compiled to determine results. An overall score of 85% or better meets Aetna Better Health® of Illinois' medical records documentation standard. Providers who do not achieve the performance goal of 85% will receive a written communication identifying opportunities for improvement and a request for a corrective action plan. All written communications will be sent to the provider's office communicating their score results within 30 business days of their review.

A communication letter detailing the process in full was mailed or faxed to all the providers selected on October 9, 2015. We would like to thank you for your cooperation and support.

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### Clinical Practice and Preventive Health Guidelines

A copy of Aetna Better Health's Preventive Health and Clinical Practice Guidelines are available at: <http://www.aetnabetterhealth.com/illinois/providers/resources/clinical-practice>.



Please share with your patients:



# Play it Safe

**— Shop Smart this Holiday Season!**

**Keep deflated balloons away from children younger than 8 years old. Discard broken balloons at once.**  
**Avoid small balls and toys with small parts for children younger than age 3.**

**Get the right size helmets and safety gear for children using bikes, scooters, skateboards and skates. Ensure they are worn properly while riding or skating.**

**High powered magnet sets are dangerous and should be kept away from children under 14. Building & play sets with small magnets should also be kept away from small children.**



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NSN 13-3

**December is National Safe Toys and Gifts Month!**

(<http://www.cpsc.gov/en/Safety-Education/Neighborhood-Safety-Network/>)