



Health Care
Guidance Program

Coordinating with you for better care!

Results: Program Year One June, 2014 to June, 2015

Presented by:

Cheri Glockner, Executive Director

Dr. Thomas McCrorey, Medical Director

Overview of program goals



- **CMS Waiver identified four goals and aligned tools to measure progress:**
 - **Budget neutrality and/or cost savings**
 - *Measurement: Return on Investment (ROI)*
 - **Improved quality/Improved health outcomes**
 - *Measurement: 89 performance measures*
 - *29 Pay for Performance*
 - *60 Non Pay for Performance*
 - **Improved beneficiary satisfaction**
 - *Measurement: Annual member satisfaction survey*

Goal #1

Cost Savings/Budget Neutrality (ROI)



As the actuarial vendor for Nevada, Milliman reported:

The total savings in Program Year One:

\$9,918,243 *after fees.*

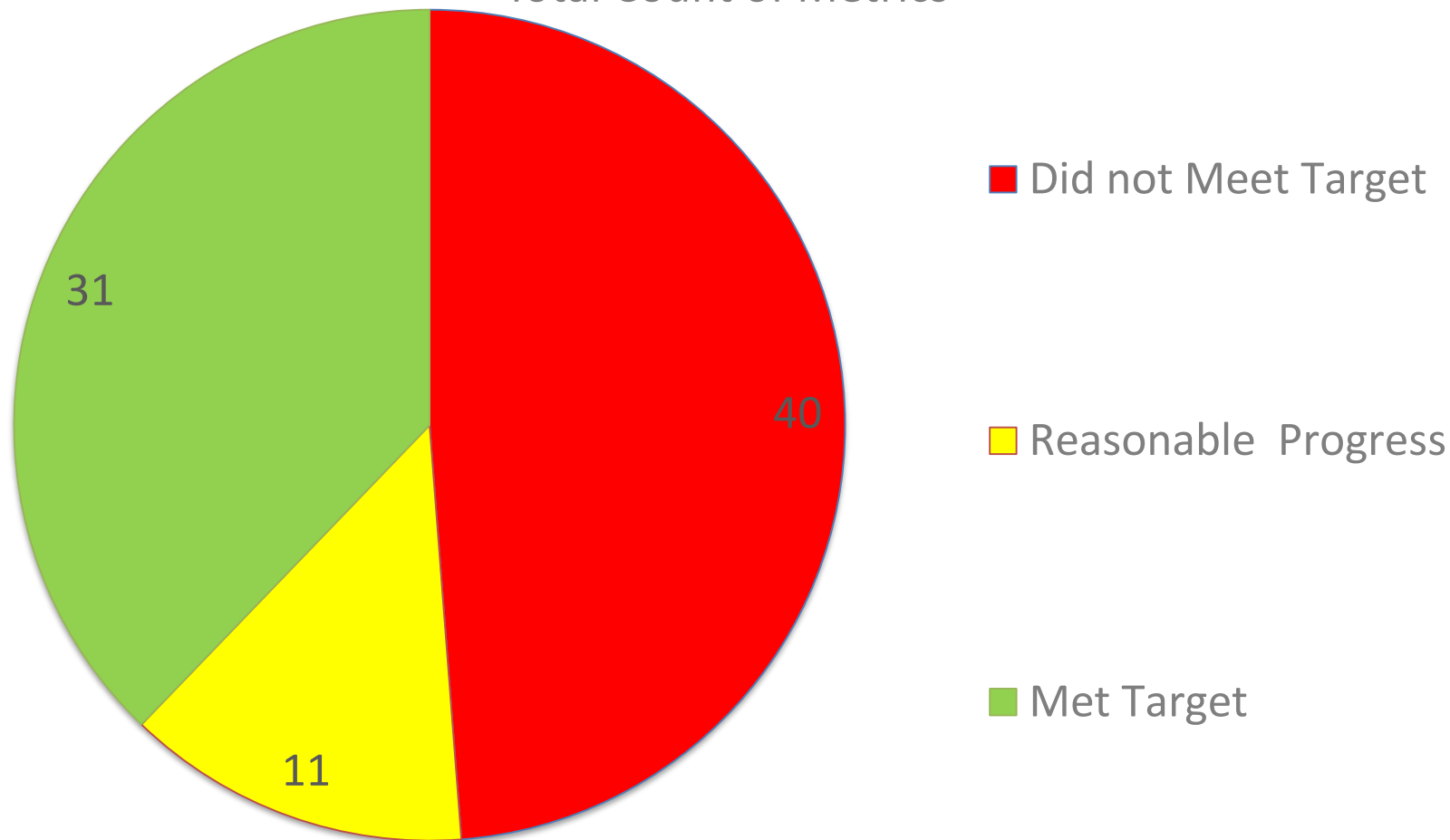
Goal #2 and #3 – Improved quality and Health outcomes



- *Milliman reported a 2.4% quality score for PY1 Pay-for-Performance (P4P) measures.*
- *This is based on a small minority of metrics and differential weighting*
- *Non pay-for-performance (non P4P) results were significantly better than Pay for performance measures.*
 - *Non P4P results almost 50% were met or exceeded.*
- ***Seven metrics did not yield interpretable data***

Goal #2 and #3 Improved Quality and Improved Health Outcomes

Total Count of Metrics



Goal # 4 – Improve Beneficiary Satisfaction



Bi-Lingual Beneficiary Satisfaction Survey

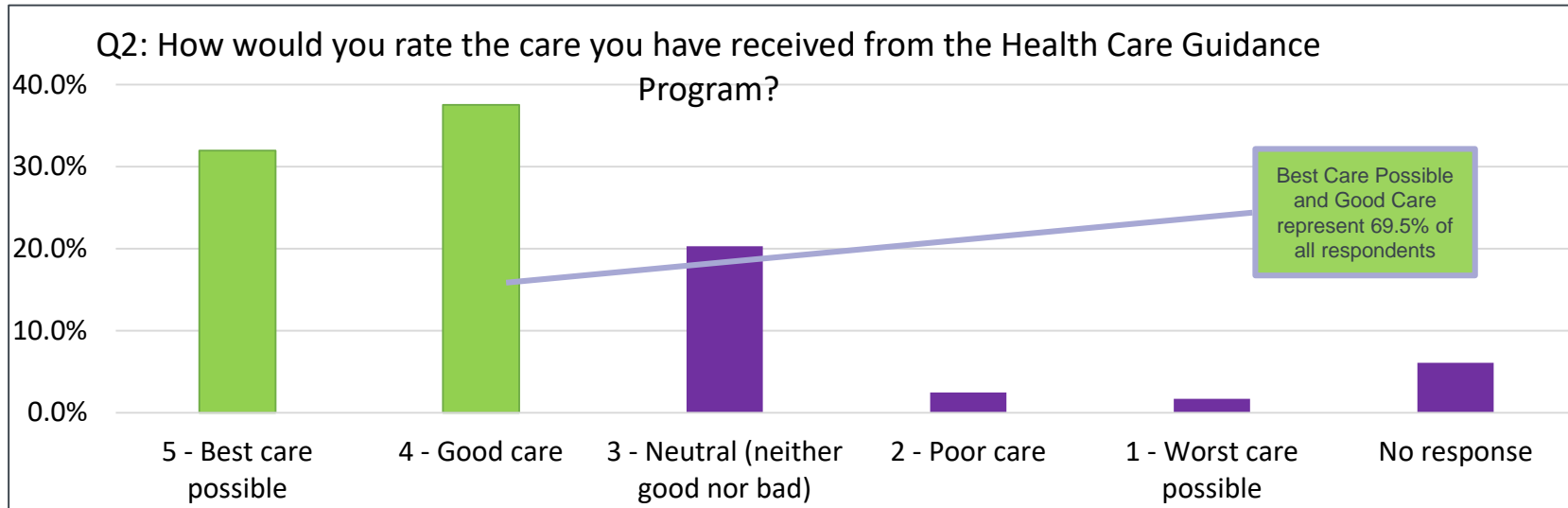
The Medicaid pre/post health plan satisfaction survey has been updated to include two questions which focus on program

Program Year	2014	2015	2016
Survey Candidates	33,866	34,857	38,554
Survey Completions	3,031	3,205	2,153
Rate	9.00%	9.19%	5.59%

Observations:

Reduction in response rate is due to larger number of returned surveys due to erroneous demographics vs PY1

Goal # 4 – Improve Beneficiary Satisfaction



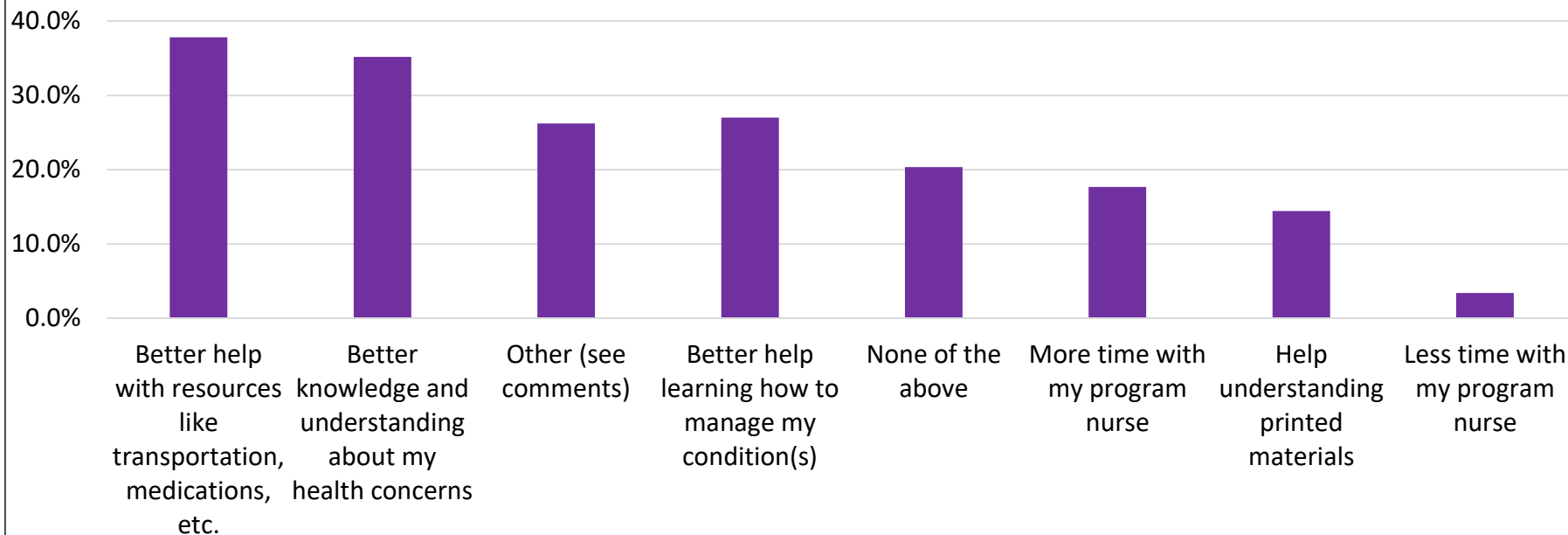
- Q2 added in 2016 survey to measure member satisfaction with HCGP services

Goal #4 – Improve Beneficiary Satisfaction (cont.)



Question # 3 (below) represents revised content added for this year's survey

Q3: If you rated the health care you received as 1,2 or 3, how could it have been better?
(Please mark all answers that apply.)



Thank You!
Public Comments About the
Progress of
The Health Care Guidance
Program are Welcomed!



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