

# **AETNA BETTER HEALTH® OF MICHIGAN**

## Quality Report 2024

**The Quality Report is a focus on Population Health** on preventative care for children, pregnant women and adults. Aetna's goal is to promote wellness and prevention for all enrollees with the plan. This report is published to communicate rates related to the delivery of healthcare to Aetna Medicaid members at the provider level.

**Provider PCP reports:** These quarterly reports are delivered to PCPs to provide information on their performance with select HEDIS measures on preventative and chronic care conditions. These selected measures provide valuable information on your status in delivering quality health care and recommendations for improving rates in the PCP profile.

**Gaps in Care(GIC):** Each month, a refreshed listing of Aetna members assigned to a PCP panel is populated in the provider portal https://aetnabetterhealth.com/michigan. The report outlines HEDIS measures that a patient may be due for such as a well-child exam, preventive screening or Immunizations. The monthly GIC report is a useful tool for Providers when contacting members for overdue services as these metrics are also linked to pay for quality.

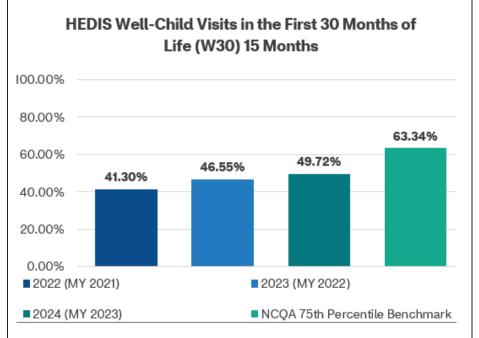
**HEDIS**: HMO industry tool used to compare the delivery of health care. Year over year HEDIS data is evaluated to identify trends and patterns with a focus on variances. Our overall goal is to meet the 75th NCQA percentile in every HEDIS measure. We recognize that partnering with our network physicians & their office staff is key to achieve better health outcomes for our members. Thank you for all your support and work in the transmission of medical records to support HEDIS reporting.

**Consumer Assessment of Healthcare Providers and System (CAHPS):** Evaluates a member's experiences and satisfaction with their Health Plan and the services rendered. The survey's goal is to understand and measure the patient's interactions with their Health Plan and health care providers in an effort to improve their overall experience.

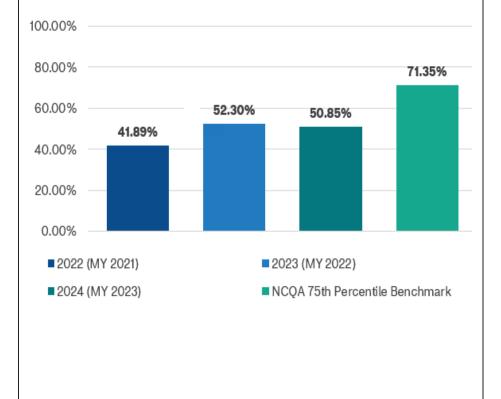
For more information, please visit our website <u>www.aetnabetterhealth.com/michigan</u>. Aetna thanks you for participating in our network, for the quality health care you provide our members and for your cooperation in our annual review process.



#### HEDIS 2024 ANNUAL REPORT DATA (MY2023)



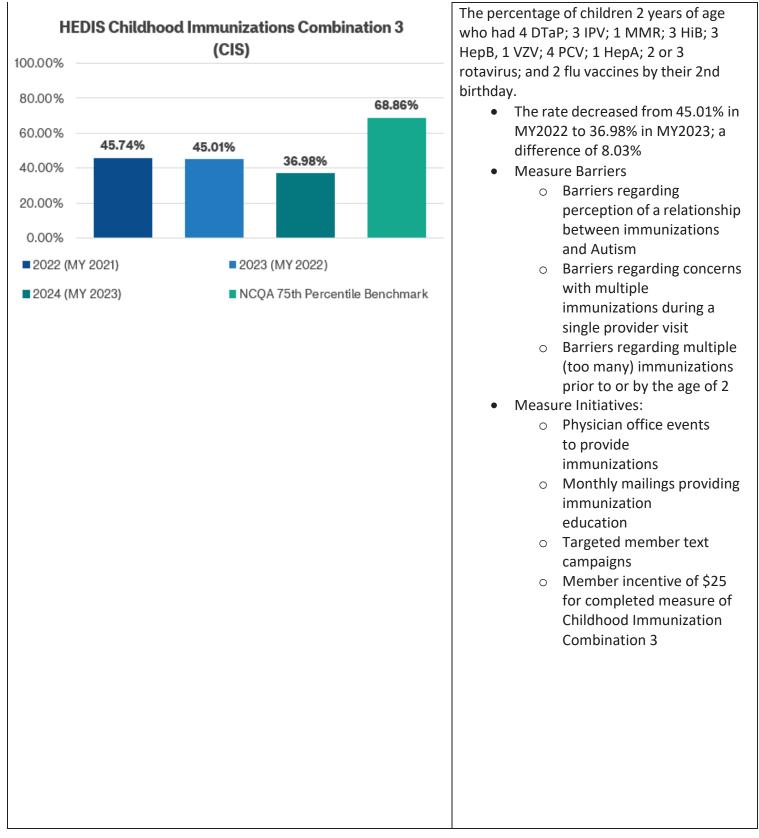
### HEDIS Well-Child Visits in the First 30 Months of Life (W30) 15-30 Months



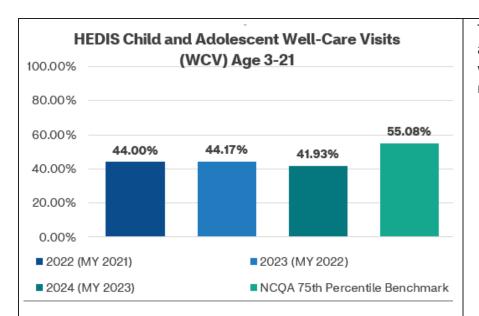
## The percentage of members who -

- First 15 Months: Turned 15 months old during the measurement year and had six or more well-child visits with a PCP
- 15 Months-30 Months: Turned 30 months during the measurement year and had two or more well-child visits with a PCP
- First 15 Months: The rate increased from 46.55% in MY2022 to 49.72% in MY2023; a difference of 3.17%
- 15 Months-30 Months: The rate decreased from 52.30% in MY2022 to 50.85% in MY2023; a difference of1.45%
- Measure Initiatives:
  - Communication to members and providers regarding the necessity of completing all needed visits
  - Scheduled clinic days at provider offices to encourage Well-Child Visits
  - Timely distribution of the member and provider incentives
  - Member incentive for completed Well-Child
    Visit First 30 Months of Life at 15 months
  - Member incentive for completed Well-Child Visit First 30 Months of Life at 15-30 months









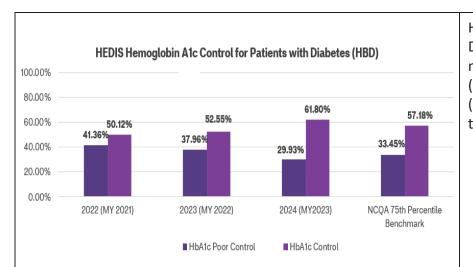
HEDIS Breast Cancer Screening (BCS) 100.00% 80.00% 58.35% 60.00% 49.59% 47.70% 46.79% 40.00% 20.00% 0.00% 2022 (MY 2021) 2023 (MY 2022) 2024 (MY 2023) NCQA 75th Percentile Benchmark The percentage of children 3-21 years of age who had at least one comprehensive well-care visit with a PCP during the measurement year.

- The rate decreased 44.17% in MY2022 to 41.93% in MY2023; a decreased of 2.24%.
- Measure Initiatives:
  - Physician office events to provide well child visits
  - Educate parents on importance of seeking regular preventative care for children
  - Targeted member outreach including text campaigns, member mailings, and live outreach calls

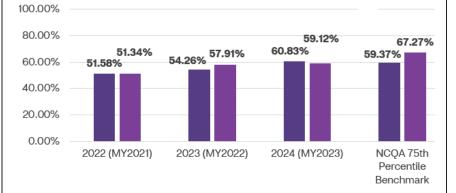
The percentage of women 50–74 years of age who had a mammogram to screen for breast cancer.

- The rate increased from 47.70% in MY2022 to 49.59%; a difference of 1.89%
- Measure Initiatives:
  - Increase focus on engaging women at community events to complete a mammogram screenings
  - Partnership with mobile mammogram units, so members can complete screenings
  - Member incentive of \$50 for completed mammogram
  - Targeted member outreach and mailers





#### Eye Exam for Patients with Diabetes (EED) and Blood Pressure Control for Patients with Diabetes (BPD)



Eye Exam (Retinal) Blood Pressure Control (<140/90 mm Hg)</p>

Hemoglobin A1c Control for Patients with Diabetes (HBD): The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose hemoglobin A1c (HbA1c) was at the following levels during the measurement year:

- NCQA removed the Hemoglobin A1c (HbA1c) Testing indicator.
- HbA1c Poor Control (HbA1c>9): MY 2023 rate 29.93% decreased (inverse measure) in comparison to MY2022 rate of 37.96; a decrease of 8.03%
- HbA1c Control (HbA1c<8): MY2023 rate of 61.80% increased in comparison to MY2022 rate of 52.55% an increase of 9.25%

Eye Exam (Retinal): The percentage of members 18-75 years of age with diabetes (types 1 and 2) who had a retinal eye exam.

• MY2023 rate of 60.83% increased in comparison to MY2022 rate of 54.26%

Blood Pressure Control for Patients with Diabetes (BPD): The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.

- Blood Pressure Control: MY2023 rate of 59.12% increased in comparison to MY2022 rate of 57.91%; an increase of 1.21%
  - Targeted member mailings to educate member on diabetes diagnosis
  - Vendor relationships to develop healthy food delivery options
  - Providing in home screening and education
  - Nutrition and physical activity Value Added Benefits offered to members