

**Attachment I-A**

**HEDIS 2015 Measures Contributing to Exemplary and Most Improved Statuses**

Breast Cancer Screening – BCS
Follow-up After Hospitalization for Mental Illness (7 Day Follow-up After Discharge) – FUH
Comprehensive Diabetes Care (Hemoglobin-A1c Testing) – CDC
Prenatal and Postpartum Care (Timeliness of Prenatal Care) – PPC
Use of Imaging Studies for Low Back Pain – LBP
Well-Child Visits in the First 15 Months of Life (6 or More Visits) – W15
Controlling High Blood Pressure – CBP
Medication Management for People with Asthma (Medication Compliance 75% - total) – MMA
Plan All-Cause Readmissions (Observed to Expected Ratio) – PCR

## Attachment I-B

### Quality Improvement Corrective Action Plan Template for 2015

Carriers must submit a Corrective Action Plan (CAP) using this template for each FEHB Plan Performance Assessment Priority Level 1 measure below the 25<sup>th</sup> percentile. Within the CAP, please specify a 90 day implementation plan to improve care associated with measure performance.

In the table below, please indicate the measure(s) that require a CAP.

Measures	CAP Submission (check all that apply)
Prenatal and Postpartum Care (Timeliness of Prenatal Care) – PPC	<input type="checkbox"/>
Controlling High Blood Pressure – CBP	<input type="checkbox"/>
Plan All-Cause Readmissions - PCR	<input type="checkbox"/>

#### Corrective Action Plan Submission (Page 1 of 2)

For each CAP, provide the following information in 750 words or less.

1. **HEDIS Measure:** \_\_\_\_\_

2. **Plan Analysis**

- Analysis: Strengths and weaknesses of current quality practices related to this measure.
- Barriers: Identify potential barriers to improvement in results. If this is a second or third CAP for this measure, include an evaluation of why you have not achieved expected results to date.
- Outreach: Estimate the number of health plan members that need to be engaged to increase the score to at least the 25<sup>th</sup> percentile.

3. **Action Steps**

- Action Outline: List in-depth steps in your Corrective Action Plan to raise the score to at least the minimum threshold. If your score has fallen below the threshold for 2 or more years, discuss new or different actions this year to improve performance to the minimum threshold.
- Classification: OPM strongly encourages Carriers with performance below the 10<sup>th</sup> percentile benchmark to develop *novel*<sup>1</sup> actions, rather than *reinforcement*<sup>2</sup> actions, to increase quality performance.
- Action Timeline: Identify the start date, and if applicable, end date of each action step.
- Progress Projection: Identify the projected improvement results including a timeline of when improvement can be expected.

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<sup>1</sup> Introduction of a new practice.

<sup>2</sup> Modification of an existing practice.

**Corrective Action Plan Template Submission (Page 2 of 2)**

**Each Carrier submitting one or more CAPs needs to complete the below information one time.**

**CAP Point of Contact:** \_\_\_\_\_

**Certification**

The undersigned have read the attached Corrective Action Plan(s) and agree to the terms.

*FEHB Carrier Quality Improvement POC:*

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Printed Name	Signature	Date
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The undersigned have read the attached Corrective Action Plan(s) and agree to the terms.

The undersigned have read the attached Corrective Action Plan(s) and do not agree to the terms. Further clarification may be required; the Contract Specialist will schedule a meeting to discuss the resolution of issues.

*OPM Contract Specialist:*

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Printed Name	Signature	Date
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*OPM Health Insurance Chief:*

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Printed Name	Signature	Date
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**Attachment I-C**

**HEDIS Measures Associated with FEHB Plan Performance Assessment**

<b>Collected and Scored in 2016 FEHB Plan Performance Assessment</b>
Breast Cancer Screening – BCS
Comprehensive Diabetes Care (Hemoglobin-A1c Testing) <sup>3</sup> – CDC
Follow-up After Hospitalization for Mental Illness (7 Day Follow-up After Discharge) – FUH
Follow-up After Hospitalization for Mental Illness (30 Day Follow-up after Discharge) – FUH
Prenatal and Postpartum Care (Timeliness of Prenatal Care) <sup>3</sup> – PPC
Use of Imaging Studies for Low Back Pain – LBP
Well-Child Visits in the First 15 Months of Life (6 or more Visits) – W15
Controlling High Blood Pressure <sup>4</sup> – CBP
Medication Management for People with Asthma (Medication Compliance 75%) – MMA
Plan All-Cause Readmissions (Observed to Expected Ratio) – PCR
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis – AAB
Flu Vaccinations for Adults Ages 18-64 <sup>5</sup> - FVA
Medical Assistance with Smoking and Tobacco Use Cessation (Advising Smokers and Tobacco Users to Quit) <sup>5</sup> – MSC

<b>Collected and Not Scored in 2016 FEHB Plan Performance Assessment</b>
Comprehensive Diabetes Care (Hemoglobin-A1c Control <8%) <sup>3</sup> – CDC
Asthma Medication Ratio (Total) – AMR
Inpatient Hospital Utilization – IPU
Emergency Department Utilization – EDU
Cervical Cancer Screening <sup>3</sup> – CCS

<sup>3</sup> Hybrid method is available.

<sup>4</sup> Hybrid method is required. Note the two BP thresholds used for this measure are reported as one rate.

<sup>5</sup> Consumer Assessment of Healthcare Providers and Systems (CAHPS) Effectiveness of Care measures.