

NATIONAL

Quality decoder – health plans

There's a lot to consider when evaluating the quality of a health plan – from the network of available providers to cost-effectiveness and member satisfaction. A plan that performs well in all of these areas can help employers control costs and keep employees healthy, happy, and productive. But it's not easy to find comprehensive quality information. It's even more difficult to make sense of it.

Our quality decoder breaks down how the most credible industry organizations rate and rank health plans – helping employers choose the right plan for their business.

Breaking down health plan quality

Clinical care

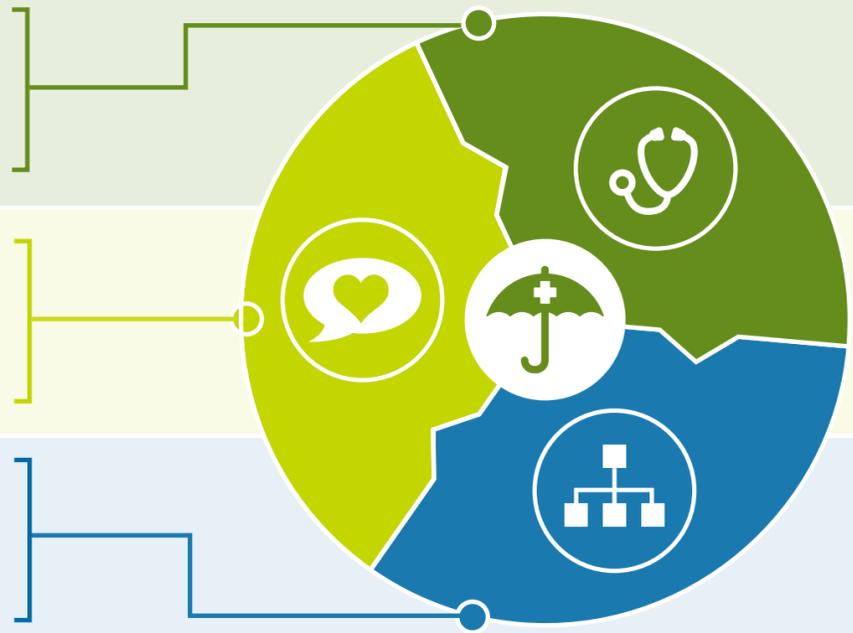
Includes data about the care members receive in the health plan's network, including preventive tests and screenings, recommended treatment protocols, and care outcomes.

Member satisfaction

Based on how happy members are with the care they have access to in their network and their health plan's services (for example, the handling of insurance claims).

Organizational structure

Looks at the day-to-day and long-term operational structure of health plans (proper allocation of resources, overall financial stability, etc.).



Health plan rankings/reports

How quality is measured

Information to consider

<p>HEDIS® (Healthcare Effectiveness Data and Information Set)</p> <p>HEDIS is a tool that measures health plan performance based on 81 measures across five areas of care. The results are collected in Quality Compass®, an online database that health plans use to establish national benchmarks and measure their performance against them.* The data is also used in many other quality ratings, but it isn't easily accessible for employers.</p>		<ul style="list-style-type: none"> ✓ There's an extensive 28-month process to develop new quality measures. ✓ You have to pay to access Quality Compass. <p>Go to HEDIS</p>
<p>NCQA's Health Insurance Plan Rankings</p> <p>The National Committee for Quality Assurance (NCQA) is a private nonprofit that accredits and certifies a wide range of health care organizations. The Health Insurance Plan Rankings evaluate and rank private, Medicaid, and Medicare health plans on a 100-point scale.</p>	  	<ul style="list-style-type: none"> ✓ A detailed report about how scores are calculated is available online. ✓ Only plans with complete data are ranked, but those with partial data still receive a score. <p>Go to NCQA</p>
<p>Medicare star quality ratings</p> <p>The Centers for Medicare & Medicaid Services (CMS) evaluates plans using a 5-star rating system. Plan performance is based on 46 measures across nine categories, including preventive care, chronic condition management, pharmacy services, customer service, and member satisfaction. CMS reviews the measures and methodology each year and updates them as needed based on clinical information and industry feedback.†</p>	  	<ul style="list-style-type: none"> ✓ Using the online Plan Finder at Medicare.gov, you can compare the star ratings for a maximum of three plans at a time. ✓ If a plan gets an overall rating of 5 stars (the highest rating), a person can switch to that plan at any time during the year – not just during open enrollment or a qualifying event. <p>Go to Medicare</p>
<p>eValue8™ report</p> <p>Created by business coalitions and employers to evaluate health plan performance, this report takes a whole-picture approach to care. An annual survey asks health plans questions about how they control costs, reduce and eliminate waste, ensure patient safety, and close gaps in care.</p>	  	<ul style="list-style-type: none"> ✓ A limited number of plans participate and many states aren't represented. <p>Go to eValue8</p>
<p>Hewitt Health Value Initiative™ benchmarking study</p> <p>Each health plan is compared to consulting firm Aon Hewitt's database of hundreds of plans and given an overall score for performance and financial efficiency. The scores are designed to help employers better understand the cost and value of health plans.</p>	 	<ul style="list-style-type: none"> ✓ Information about how plans are scored is given to the health plans. Since it's not available publicly, ask your health plan representative for a copy. <p>Go to Aon Hewitt</p>

* HEDIS® and Quality Compass® are registered trademarks of the National Committee for Quality Assurance (NCQA).

† Medicare evaluates plans based on a 5-star rating system. Star ratings are calculated each year and may change from one year to the next.