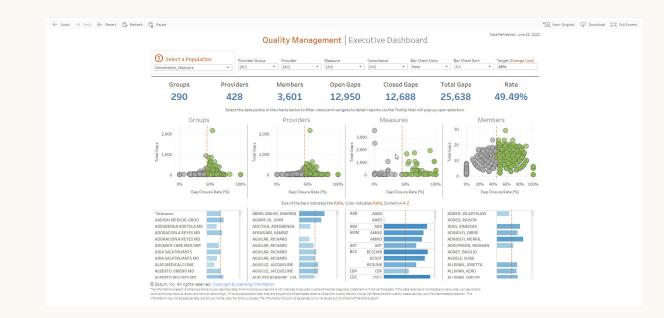# Quality measurement and reporting

Improve quality with a comprehensive, innovative approach to managing HEDIS®, AMP, QARR and other federal- and state-based rating program performance.

Rising medical costs, affordability pressure, new reimbursement models, increased regulatory requirements and public reporting tend to drive health plans to increase the focus given to quality metrics. Using multiple vendors can be costly, time-consuming and inconvenient. By enhancing clinical quality performance, health plans can improve health outcomes and reduce the cost of care. This helps position them as preferred health plans for both public sector enrollment as well as members and employers during annual coverage decisions.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

Our solution includes a cloud-based HEDIS-quality reporting system, medical record review support, quality analytics, supplemental data collection, audit management and performance assessment. Optum is committed to helping you maximize data and processes to increase the accuracy and completeness of HEDIS and other quality program scores and overall performance.

Optum

Leverage the power of an industry-leading quality measurement and reporting solution

By leveraging our comprehensive quality measures reporting solution, you can minimize data transfer, expedite the audit process and streamline all measures activity, including prospective runs, to maximize efficiency and help ensure successful NCQA/CMS/state submissions.

Customizable reporting

- Flexible file input formats enable data fields to be submitted in any order if header field names match the expected values. Decrease your IT administrative burden and help lower your costs.

- Custom fields give you the flexibility to add custom field names to both member demographic and eligibility files. Define populations to suit your unique business needs. Data loads into the Optum database and associates the population configuration logic.

- Population configuration provides you with the flexibility to build custom populations aligned with your specific needs for targeted population health management. For example, build populations for submissions, accountable care organization risk deals or clinical interventions.

- Organizational structure helps you build multi-tiered business hierarchies aligned with your organizational structure. You gain flexible internal management reporting and geographical comparison to help you identify opportunities. For example, a large Medicaid payer has multiple regions. The Western region could include: California, Nevada, Washington.

Robust measures catalog

A rich catalog of quality measures includes HEDIS, AMP, CMS Adult Core Set and Child Core Set, PQA, QARR and various other federal and state program measure sets.

New and custom measure build uses the Optum-enhanced fact-based architecture to facilitate faster build and turnaround of state-specific measure sets and client-specific custom measures.

Data processing

Processing speed increases because we are not running the entire data set on every data load. We have the ability to process only members who have had a change since the last data load.

Flexible data intake lets you take control of managing your data. Send corrections as they happen, according to your schedule instead of full data files with every run.

Intuitive visual interfaces

Navigate the enhanced dashboard and reporting capabilities more easily. Drill down through the entire client hierarchy to member-level claims details to help identify opportunities for rate improvement.

Processing and scalability

The cloud platform further supports scalable member-level processing, providing faster turnaround of measure outputs.

Data issue resolution

Field-level checks ensure your data is correct. If data issues are flagged, they are downloaded easily for faster resolution. If a member file is identified as missing one member, the member's claims data still loads. To resolve an issue, resend only that one member and Optum reprocesses the member's complete data files.

A personalized approach to improving quality performance

With Optum quality programs, you receive personal support from our team of quality experts. Your Quality Program Manager will serve as your single point of contact for activities such as testing and fielding auditor questions, as well as identifying potential issues before they become problems.

Contact Optum to learn more today

1-800-765-6807

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optum.com/risk

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