

# 2007 Annual Report

Children's Mercy Family Health Partners  
and  
UniCare Health Plan of Kansas

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# 2007 Annual EQR Final Report

## **INTRODUCTION**

The Kansas Foundation for Medical Care, Inc. (KFMC), under contract with the Kansas Health Policy Authority (KHPA) as the External Quality Review Organization (EQRO), has completed the 2007/2008 evaluation of Children's Mercy Family Health Partners (CMFHP) and UniCare Health Plan of Kansas (UniCare). This report incorporates the results of external quality review activities completed by KFMC during 2008 to assess MCO care delivered to Kansas Medicaid and State Children's Health Insurance Plan (SCHIP) consumers in 2007.

The full annual report, available upon request, includes a review of each MCO's

- Encounter Data Validation
- Health Plan Transition Focused Study
- Childhood Immunization Focused Study
- Validation and Comparison of Consumer Assessment of Healthcare Providers and Systems (CAHPS) Surveys
- Validation and Administration of Provider Surveys
- Validation of Performance Improvement Projects (PIPs)
- Validation of Performance Measures.

## **BACKGROUND/OBJECTIVES**

The Balanced Budget Act of 1997 added Section 1932, which pertains to Medicaid Managed Care, to the Social Security Act. Section 1932 requires state Medicaid agencies to provide for an annual external quality review of the quality of, timeliness of and access to services covered under each MCO delivering Medicaid services. KHPA contracts with KFMC to complete external quality review activities for Kansas Medicaid.

KFMC is a not-for-profit organization with a mission to facilitate the improvement of healthcare. KFMC has held the Kansas EQRO contract since 1995, when the State of Kansas implemented Medicaid Managed Care.

Annually, KFMC provides a summary of conclusions and recommendations, synthesizing the strengths, enhancements and weaknesses related to access, quality and timeliness of care delivered to Kansas Medicaid and SCHIP consumers by MCOs. KFMC provides recommendations to improve performance where opportunities for improvement are identified. In addition, the annual report incorporates the results of KHPA's annual review of each MCO that measures health plan compliance with managed care standards and requirements.

The following CMS protocols were implemented for this external quality review (EQR):

- Information Systems Capability Assessment (ISCA) for MCOs.
- Validating Encounter Data
- Validating Performance Measures
- Validating Performance Improvement Projects (PIPs)
- Administering Surveys
- Conducting Focused Studies

Reports were provided to KHPA throughout the year as each review activity was completed. This allowed KHPA to address findings with each MCO as results were available. The detailed reports for each review activity included an explanation of the objectives for the activity; technical methods of data collection and analysis used to collect and assess data for the review activity; a description of data (findings); conclusions; and recommendations. This annual report combines the findings from each review activity into a single report that focuses on strengths, enhancements, areas for improvement and recommendations and provides a higher level review for each MCO. Comparative information for CMFHP and UniCare is provided, as appropriate. Where appropriate, results are reported separately for HealthWave 19, the Kansas Medicaid managed care program, and HealthWave 21, the Kansas State Children's Health Insurance Program. In some instances, the reports also contain data for HealthConnect Kansas, the Kansas primary care case management program.