

## MERCER GOVERNMENT HUMAN SERVICES CONSULTING

HELPING GOVERNMENTS SHAPE TOMORROW'S HEALTH PROGRAMS

### CLINICAL QUALITY CONSULTING

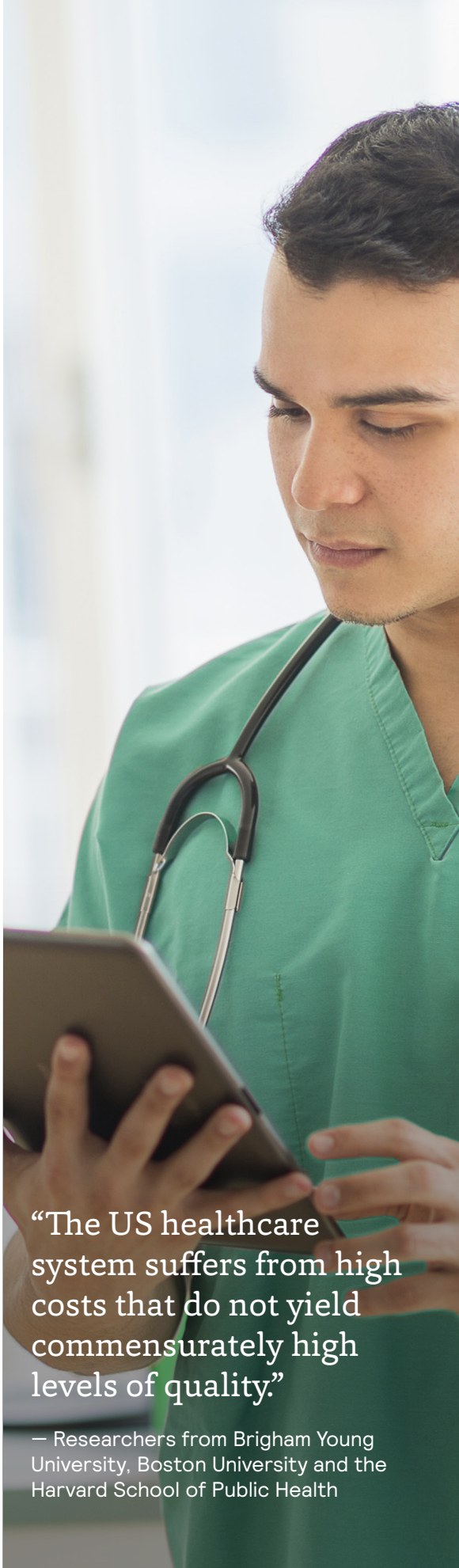
The delivery of high-quality, cost-effective healthcare is crucial to ensure our healthcare delivery system remains viable not just for today but for the future.

Providing government-sponsored healthcare to some of the sickest and most vulnerable populations — in a cost-efficient manner — can be especially challenging for states, and Medicaid agencies are often tasked with defining value and measuring clinical quality. Yet poor clinical quality can have lasting adverse effects on a Medicaid program. Delivery system fragmentation, poor care coordination, a lack of integrated care that supports both medical and physical health, and inconsistency in coordinating supports for those with functional, intellectual and developmental disabilities have resulted in many states turning to Managed Care Organizations (MCOs) to develop cost-efficient and coordinated high-quality healthcare models. States functioning under a managed care model now have an urgent need to understand if their managed care program and their MCO contractors are truly producing the best value.

High-quality healthcare should be cost-effective and utilize evidenced-based medicine to produce healthy outcomes. When you partner with Mercer, we ask the right questions to help you define the quality and value you desire in your program. We develop evidenced-based strategies to improve clinical quality and provide customized technical assistance to help you bridge learning gaps and teach your team to perform program evaluations that determine program effectiveness. Below are some of the questions we pose to help states improve and realize their goal of delivering clinical quality:

#### MANAGED CARE OPERATIONS

- Though your MCOs are passing their compliance reviews, do you still have questions about the efficiency and effectiveness of their operations?
- Have the interventions implemented by the MCOs driven measurable and meaningful improvement in outcomes?
- Are your MCOs building, engaging and leveraging community-based organizations and partnerships to address social factors that influence poor health outcomes (social determinants of health for your members)?
- Are perceived gains in quality clearly real and sustainable?



“The US healthcare system suffers from high costs that do not yield commensurately high levels of quality.”

— Researchers from Brigham Young University, Boston University and the Harvard School of Public Health

## VALUE-BASED MODELS OF CARE

- Do you use the carrots and sticks available to you to manage your MCO contractors to the best extent possible (that is, pay for performance and sanctions)?
- Are MCOs driving real innovation and developing strong provider partnerships?
- Do your providers feel a true partnership with your MCOs?
- Do your MCOs design value models that are sensitive to provider burden?
- Is your value-based purchasing model targeting the true drivers of healthcare quality?

## QUALITY STRATEGY

- What story would you like to tell through your program's healthcare outcomes?
- Are your members really receiving person-centered care that empowers them to make the right healthcare choices and be engaged in their care?
- Are your quality activities and your MCO quality activities aligned to achieve the goals and objectives of the state's quality strategy?
- Is your monitoring and oversight program streamlined such that you can do more with less and can quickly allocate limited resources to the most problematic areas to ensure the greatest success?

## PERFORMANCE MEASUREMENT

- Are you measuring what matters or making what you measure matter?
- Are the reports your team reviews giving you actionable information on the successes and opportunity areas of your program?
- Do your selected performance indicators measure compliance or performance improvement?
- Are all your performance measures meeting established benchmarks and targets?
- Are your performance measures aligned across your quality strategy and your value-based purchasing model?

If you have answered "no" or "I'm not sure" to any of these questions, Mercer can help.

For more information, please contact a Mercer representative at one of the following offices:

Atlanta  
+1 404 442 3100

Minneapolis  
+1 612 642 8600

Phoenix  
+1 602 522 6500

Washington DC  
+1 202 331 5200

[www.mercer-government.mercer.com](http://www.mercer-government.mercer.com)

## OUR EXPERTISE

Mercer's value is in our strong, multidisciplinary team, which includes licensed clinicians (registered nurses, clinical social workers and psychologists, etc.) physicians, healthcare analysts and certified coders. We can assist in developing and implementing clinical quality-monitoring strategies, evaluating program achievements and assessing the value each managed care contractor contributes to program goal attainment. To support our analyses, our clinical team taps into the vast knowledge of our Mercer colleagues, including pharmacists, government policy experts, statisticians, informatics specialists, certified public accountants and actuarial experts.

Mercer can assist in the end-to-end process of overseeing and evaluating your program. We believe in using rapid-cycle quality improvement methodology to allow for real-time evaluation and interventions. We have more than 20 years of experience developing tools to create efficiencies, and we can help you move the needle on your clinical quality outcome goals.

**Mercer can help you focus on quality in the following areas:**

- Preventive care
- Disease/chronic-care-specific programs
- Accessibility and availability of services
- MCO oversight
- Delivery system performance
- Member satisfaction
- Utilization strategy
- Integrated services
- Compliance with federal and state rules
- Performance vs. compliance measures
- Provider satisfaction
- Evidenced-based practices

**We can provide the following support:**

- Technical assistance to revise your quality strategy and your program evaluation criteria
- Performance measure selection, calculation and validation
- Development and implementation of value-based purchasing strategies
- Managed care plan reviews
- Survey administration
- Running of focused studies
- Development of monitoring and oversight tools and reports
- Provision of technical assistance to state staff and MCO contractors
- Evaluation of and recommendations for managed care contract revisions to support clinical quality activities