

<b>Policy Number &amp; Title:</b>	09-01 Quality Improvement and Management
<b>Responsible Department:</b>	Quality
<b>Author:</b>	Josiah Mueller, Director, Value Based Care
<b>Original Implementation Date:</b>	July 20, 2021
<b>Revision Effective Date</b>	July 20, 2021

I. **Purpose:** To define and outline key requirements of quality improvement and management efforts at OneCare Vermont (OneCare).

II. **Scope:** Applicable to the OneCare Workforce, Board of Managers, Committees, and Network.

III. **Definitions:** Capitalized terms have the same definition as defined in *OneCare's Policy and Procedure Glossary*. For purposes of this policy, the terms below have the following meanings:

Quality Improvement Project means a strategy, plan, and associated tasks to address improvements in performance of the quality of care provided by Participating Providers to Attributed Lives.

Quality Improvement Workgroup means a Subcommittee of Utilization Review Committee (URC), charged with developing, approving, monitoring and evaluation of quality improvement work.

OneCare Quality Team means the OneCare team responsible for supporting quality improvement and management operational efforts within the OneCare ACO Network.


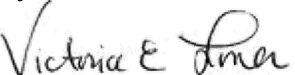

IV. **Policy:** This Quality Improvement and Management Policy serves as a guide for strategic implementation of efforts to improve quality of care provided to Attributed Lives. The policy is described by several key focus areas which are outlined below, and is guided by OneCare's ACO Program Agreements with Payers.

- A. **Annual Quality Improvement Strategy Work Plan:** OneCare Quality Team shall annually define OneCare's quality improvement and management priorities.
  - 1. The work plan will include specific, measureable, time-bound performance goals and ongoing assessments of progress toward these goals.
  - 2. The work plan shall be reviewed by OneCare's Director of Value Based Care and Chief Medical Officer, subsequently presented to the Population Health Strategy Committee for approval.
- B. **Quality Measurement:** In accordance with applicable law and respective ACO Program Agreements with Payers, OneCare shall annually evaluate and report on quality of care against defined measures and standards.
- C. **Monitoring and Quality Assurance:** OneCare will engage in monthly review of subsets of available quality performance data via the Quality Improvement Workgroup. This review will include assessment and evaluation of performance (including gaps and variations in care), determination of need for intervention, implementation of necessary intervention, and ongoing monitoring of these efforts.
- D. **Engagement:** The OneCare Quality Team will gather feedback from the Patient and Family Advisory Committee and Network members to identify opportunities to facilitate and support ACO Network engagement of Attributed Lives and/or other supportive parties in quality improvement and management efforts.

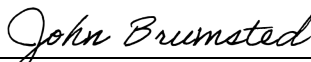
- E. **Reporting:** OneCare shall adhere to quality and utilization reporting requirements as outlined in respective ACO Program Agreements with Payers and as required by law.
- F. **Right to Inspection:** In accordance with the terms in ACO Program Agreements with Payers, OneCare shall provide reasonable support to Payer requests for inspection of quality improvement related books, records, or contracts.
- V. **Review Process:** This policy shall be reviewed annually and updated to be consistent with requirements set forth by OneCare Board of Managers, OneCare leadership, ACO Program Agreements with Payers, and regulatory bodies.
- VI. **References:**
- OneCare's ACO Program Agreements with DVHA
  - OneCare's ACO Program Agreement with Medicare
  - OneCare's ACO Program with Blue Cross Blue Shield of Vermont (Primary and QHP)
  - OneCare's ACO Program with MVP
  - GMCB Rule 5.000: Oversight of Accountable Care Organizations
  - OneCare's Policy and Procedure Glossary
- VII. **Related Policies/Procedures:**
- 03-03 Data Use Policy
  - 03-05 Data Transparency Policy
  - 04-13-PY21 Value Based Incentive Fund PY 2021 Policy

**Location on Shared Drive:** S:\Groups\Managed Care Ops\OneCare Vermont\Policy and Procedures

**Management Approval:**

 Director, Value Based Care	7/21/2021 Date
 Chief Executive Officer on behalf of Chief Medical Officer	08/09/2021 Date
 Chief Operating Officer	08/03/2021 Date

**Board of Managers Approval:**

 Chair, OneCare Vermont Board of Managers	8/17/2021 Date
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