

Quality at Freedom Health

We are committed to promoting healthy lifestyles and improving the health status of enrollees. As such, Freedom Health's Board of Directors directed the company to establish a Quality Management Program designed to promote quality care and service excellence.

Program Overview

The Program is based on the quality principle that performance improvement results from ongoing and systematic measurement, intervention, and follow-up of key clinical and non-clinical aspects of care. Primary responsibility for administration of the Program is vested in the Medical Director and quality committees; however, all employees share in the responsibility to define and implement improvements in processes that enhance clinical efficiency, provide effective utilization and focus on improved outcome management achieving the highest level of success.

The Program includes the use of performance data available through standardized measures, including State and national information; including performance measures, benchmarks and root cause analyses that relate measuring outcomes and identifying opportunities for improvement. Analytical resources are available through Quality Management staffing and on basis through the employment of project-specific consultants. Staff have access to end-user data-systems for claims/encounter data, enrollment and UM data; grievance and administrative services to provide information for performance measures and quality improvement activities.

The QM Program is available, upon request, to Freedom Health providers and members.

Use of Performance Indicators

A major focus of the Quality Management Program is the establishment of clinical improvement initiatives involving quality improvement projects, focus studies, and interventions designed to improve selected HEDIS and other performance

measures.

Freedom Health will be undergoing measurement of our baseline HEDIS report; for care rendered in 2006. Once available, audited information relevant to Freedom Health's baseline HEDIS project will be published through the following sources; newsletters, website, Choosing A Quality Health Plan: Florida HMO Report; published annually by the Agency For Healthcare Administration and the www.medicare.gov website.

Program Guidelines & Standards

Medical care management activities are an important component of the Program, and key elements include practice guidelines and standards, over and under utilization monitoring, use of review criteria, and clinical peer review of medical appropriateness.

Other Resources

If you're looking for other helpful resources, we suggest the following:

- [Clinical Preventive Services for Normal-Health Adults](#): Recommendations of the US Preventive Services Task Force, Department of Health and Human Services
- [The Guide to Clinical Preventive Services 2005](#): Recommendations of the US Preventive Services Task Force, Department of Health and Human Services
- [Freedom HEDIS Data](#), as and when available