



# Drive improved care quality and outcomes for your members

With today's heightened focus on care quality, equity, affordability and member satisfaction, health plans are seeking visibility into plan and network performance to improve member care and outcomes.

MedeAnalytics Quality Insights helps payers assess member risk and utilization and quality of care opportunities through HEDIS® and other quality standards. By aggregating clinical and claims data, payers can better target at-risk members for care management, reduce costs, and strengthen plan reputation.

## With MedeAnalytics Quality Insights, you can:

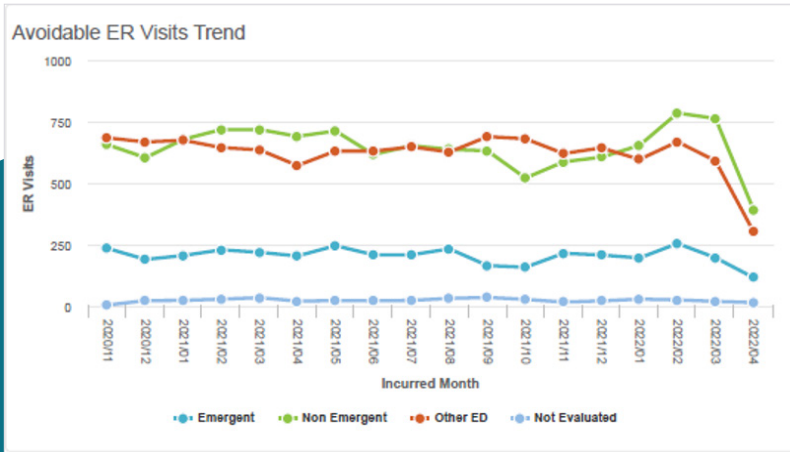
- Monitor quality measure performance and compliance
- Segment populations to surface at-risk members for care management interventions and engagement
- Track and trend cost and utilization and their drivers impacting member care
- Identify members and providers to target for satisfaction score improvement
- Analyze providers compared to their peers to determine performance improvement actions

## Why you need Quality Insights

The rise of value-based payment models, consumerism and policy initiatives have all contributed to the need for improved insights into plan performance, member outcomes and satisfaction. Having the ability to analyze clinical and claims data through robust dashboards and scorecards helps plans enhance population health and value-based care initiatives.

## Potential returns

- **60%** reduction in quality reporting and submission times
- **95%** reduction in temp and third-party vendor costs
- **5%** reduction in annual medical/pharma costs



Track and trend potentially avoidable ER visits



Identify and address member gaps in care



Boost quality scores and health plan ratings



Improve member outcomes and satisfaction



Engage providers in year-round quality improvement

### Analyze population health outcomes

Rapid report generation and flexible drill-down capabilities enable you to understand the trends and drivers impacting cost and utilization across populations. The solution combines clinical and claims data with predictive models, quality measure calculations, gaps in care, and best practice models and rules. With high-level insight, you can monitor expenses, medical and pharmacy costs, for chronic diseases and accountable care initiatives.

### Improve scores with effective measurement and reporting

The flexibility of Quality Insights enables you to evaluate and report scores according to strict national standards as well as custom and state-specific measures. These include NCQA HEDIS® Certified Measures™ and Quality Benchmarks, AHRQ Measures, the Medicare Advantage Star Rating System, and CAHPS® Survey Results.

### Identify chronic conditions and actionable areas

Detailed population health analytics take the guesswork out of care management by quickly identifying which patients are at risk, why they're at risk, and who would benefit from outreach and education. With these capabilities, you can more effectively monitor medication non-compliance, pre-diabetic and hypertension indications, conflicting or duplicative care, and potential admissions and readmissions.

### Engage providers in outcome improvement initiatives

The provider scorecards available in Quality Insights are essential to engaging providers in performance review and improvement. Equipped with reliable data and actionable insights, providers will be more motivated to focus on member care outcomes and quality improvement (e.g., utilization, medical/pharmacy compliance).



The Healthcare Effectiveness Data and Information Set (HEDIS®) is a registered trademark of NCQA.

[Learn more](#)



**Optional add-on:**  
Quality Benchmarks



Learn more about MedeAnalytics Payer Solutions at [www.MedeAnalytics.com](http://www.MedeAnalytics.com)