HEALTH PLAN POLICY					
Policy Title: Practitioner and Provider Education		Policy Number: OPND05			
		<b>Revision:</b> E			
<b>Department:</b> Operations	Sub-Department: Network Development				
<b>Applicable Lines of Business:</b> □ Children's Health Insurance Plan ⊠ Medicare					
☐ Commerci	al Insured	☐ Non Insured Business			
		e 🗵 USFHP			
☐ Medicaid					
<b>Effective Date:</b> 09/28/2017					
<b>Revision Date(s):</b> 05/22/2019, 06/01/2020, 06/02/2021, 06/06/2022, 08/21/2023					

#### **PURPOSE:**

The health plan uses practitioner/provider education materials and tools to improve the practitioner and provider's knowledge and skills to manage member care and support them with meeting the plans contractual and quality requirements. By doing so, the education materials are provided as part of an overall effort to improve the quality, safety and cost-effectiveness of services and care provided for members.

#### **DEFINITIONS AND ACRONYMS:**

- Consumer Assessment of Health Plans Survey (CAHPS®) A set of standardized surveys for a patient's experience with ambulatory and facility level care.
- Healthcare Effectiveness Data and Information Set (HEDIS®) A widely used set of performance measures in the managed care industry established by the National Committee for Quality Assurance (NCQA).
- **Practitioner** Considered to be a professional appropriately qualified to provide medical or behavioral health care services.
- **Practitioner/Provider Education** Activities designed to improve practitioners'/providers' performance by providing education, training, tools, and provision of data relevant to patient clinical care management and systems development to enhance their understanding and skills related to the health plan's clinical requirements, expectations, and administrative policies and procedures.
- **Provider** An institution or organization (such as a hospital or home health agency) that provides services for health plan members.

### **POLICY:**

The objectives of this policy are to:

- Identify areas for improvement that can be addressed through educational activities or enhanced tools.
- Identify education strategies, materials and tools to support increased knowledge and performance in the areas selected for provider performance reporting.
- Plan, implement, or participate in educational or outreach activities that will lead to practitioner's and provider's better understanding of the health plan's clinical expectations or administrative processes.
- Provide comprehensive education in quality and safety in healthcare and continuous quality

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improvement processes.

- Provide timely and consistent educational updates to practitioners and providers.
- Assess the effectiveness of educational or outreach activities.
- Reinforce relevant provisions and requirements of the Provider Manual.

The health plan provides training to participating practitioners/providers and their staff regarding the health plan's policies, procedures, requirements and expectations. These policies, procedures, requirements and expectations are described in the practitioner/provider's contract, the health plan's Provider Manual and notices/alerts/newsletters that are disseminated to practitioners/providers from time to time. One of the health plan's practitioner/provider training priorities is to encourage and improve the practitioner/provider understanding of the special needs of our members.

Practitioner/provider educational activities and interventions may include any of the following:

- Distribution of materials (e.g., mass mailing and posting information regarding clinical practice guidelines or the Provider Manuals)
- Site visits
- Web site information
- Newsletter articles addressing or updating an identified topic
- Provider forums
- Provider Portal

### Responsibilities

The health plan's Provider Relations, Quality Management and Medical Management Department managers assist the chief medical officer in identifying and prioritizing practitioner/provider educational activities. The health plan's quality improvement committee (QIC) also supports this activity through their analysis of data and reports and a part of the overall continuous quality improvement process. The health plan's provider services, quality management and medical management departments are responsible for carrying out the practitioner/provider educational activities, such as defining, developing, and, if applicable, implementing strategies to address the issues identified.

The health plan analyzes CAHPS and other conducted survey results, tracks grievances from members, complaints from practitioners/providers, and trend data (utilization, adherence to clinical practice guidelines, etc.,) in the identification of educational opportunities. Areas to be addressed by education are additionally identified as a part of the health plan continuous quality improvement activities from a variety of sources. These sources may include but are not limited to, the system claims module, the pharmacy benefits manager's database, state or federal regulatory standards or requirements, such as the Healthcare Effectiveness Data and Information Set (HEDIS®), Consumer Assessment of Health Plan Survey (CAHPS), National Committee for Quality Assurance (NCQA), the health plan policies, feedback from the health plan staff, practitioners/providers or state Medicaid regulators.

Summaries of educational activities are reported to the health plan quality improvement committee quarterly.

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## **REFERENCES:**

None

# **RELATED DOCUMENTS:**

None

# **REVISION HISTORY:**

Revision	Date	Description of Change	Committee
New	09/28/2017	Initial Release.	Board of Directors
A	05/22/2019	Annual review. Updated lines of business. Corrected	Executive Leadership
		minor typos.	
В	06/01/2020	Annual review. No change to policy content.	Executive Leadership
С	06/02/2021	Annual review. Updated minor verbiage.	Executive Leadership
D	06/06/2022	Annual review. No change to policy content.	Executive Leadership
Е	08/21/2023	Annual review. Updated template and definitions.	Executive Leadership