



## Quality Improvement Department: Program Overview and Goals

We are excited to share insights into our Quality Improvement Department's collective goals, processes, and outcomes related to member care and services.

Our aim is to offer you practical information that will enable us to collaboratively enhance care quality and achieve positive outcomes for our members. By fostering a cooperative partnership with our health plan, you can help us in our mission to provide affordable, high-quality, patient-centered care to our members.

### WHAT YOU CAN DO TO HELP:

- » Remind patients to evaluate their experiences with health care by completing their CAHPS surveys. It supports our **Medicare STARS Rating** by allowing us to measure, analyze, evaluate and improve the administrative services of the health plan.
- » » Patients are receiving surveys now (March-June 2026)
- » » Patients often don't differentiate between care from providers versus the health plan
- » » Learn how your interaction with patients impacts **CAHPS Survey Scores**

#### Encourage patients to learn about their plan benefits:

- » The **MyDHMP Member Portal** is a go-to resource for managing members' health insurance from their desktop, tablet or smartphone. **The Member Portal User Guide** can help walk them through the steps to create their portal account.
- » Members can view their plan benefits on our website: [DenverHealthMedicalPlan.org](https://DenverHealthMedicalPlan.org)

#### Invite patients to join our **DHMP Member Advisory Council** and/or our **Coffee Talks**:

- » Insights from our members will have an impact on plan policies, future plan benefits and the overall member experience.

#### Share **YOUR** feedback as a provider – participate on managed care committees and reach out:

- » Provider surveys will be conducted in summer/fall 2026! Help us focus on things that matter to you.
- » Join work groups to support us with Quality Improvement projects: Email [DL\\_QualityImprovementDepartment@dhha.org](mailto:DL_QualityImprovementDepartment@dhha.org)
- » If you encounter challenges or have questions about working with our health plan, please reach out to our Provider Relations Dept. for assistance. We are here to support you and ensure that you have the resources and information you need to deliver exceptional care to our members.

Email [ManagedCare.ProviderRelations@dhha.org](mailto:ManagedCare.ProviderRelations@dhha.org)

### QUALITY IMPROVEMENT DEPARTMENT GOALS:

**The Quality Improvement Dept. plays a crucial role at DHMP to ensure that the services provided by our plan meet or exceed established standards of quality, safety and effectiveness. Our department is a dynamic network of teams dedicated to enhancing our performance in Quality Improvement, Population Health, HEDIS measures and NCQA standards.**

- » Quality Improvement focuses on the level of care provided to our members.
- » Population Health concentrates on the broader health outcomes and needs of our population.
- » HEDIS provides a standardized set of measures to evaluate the quality of care and services within our health plan.
- » NCQA ensures compliance with National Committee for Quality Assurance standards, ensuring the highest level of quality and performance.

#### Together, we strive to ensure accessible, high-quality, population-centered health care delivery for all our members.

- » Goals of the Quality Improvement Dept.: Continuously assess and improve the level of care and services delivered to our members.
- » Processes to achieve our goals: Leverage data analytics to track performance metrics, identify areas for improvement, collaborate with our provider network to implement quality improvement initiatives, and monitor progress toward our project goals.
- » Outcomes and impact: Through our collective efforts, we have been able to improve in key clinical outcomes, increased member engagement with healthcare services, cost savings and overall member experience.

#### Key functions and responsibilities:

- » Performance reporting: DHMP supports member health improvement through population health and care coordination activities tailored to member needs and program eligibility. Providers may receive information or outreach, as appropriate, regarding select members to support preventive care, care coordination, and other applicable interventions.
- » » Quality Improvement initiatives: Based on performance data and identified areas for improvement, the Quality Improvement Dept. leads or participates in improvement initiatives aimed at enhancing the overall quality of care and services provided by our health plan through developing new processes, protocols or other interventions to address deficiencies.
- » » Compliance and accreditation: We ensure our health plan complies with regulatory requirements and standards set by accrediting organizations like the National Committee for Quality Assurance (NCQA).
- » » Collaboration: We also partner with various departments on provider network management, member engagement/education, utilization management and risk management.

As we continue to pursue our quality improvement goals, we are grateful for the ongoing partnership and collaboration of our dedicated provider network. Together, we are making meaningful strides towards ensuring the health and well-being of our members. Thank you for your continued commitment to excellence in health care delivery.