

Board Members Diana S. Dooley, Chair Kimberly Belshé Paul Fearer Susan Kennedy Robert Ross, MD

> Executive Director Peter V. Lee

January 10, 2013

Centers for Medicare & Medicaid Services Department of Health and Human Services Attention: CMS-9962-NC P.O. Box 8010 Baltimore, MD 21244-8010

Re: Request for Information (RFI) (CMS-9962-NC) Qualified Health Plan (QHP) quality management

Covered California appreciates the opportunity to respond to this Request for Information (RFI) and to share policies it has adopted relative to Qualified Health Plan (QHP) quality management. Covered California appreciates the opportunity to respond to the Request for Information (RFI) (CMS-9962-NC) Regarding Health Care Quality for Exchanges and share policies it has adopted relative to Qualified Health Plan (QHP) quality management.

California legislation authorizes Covered California to function an active purchaser that selectively contracts with QHPs so as to provide health care coverage choices that offer the optimal combination of choice, value, quality, and service and to establish and use a competitive process to select the participating health plan issuers.

In August 2012, Covered California adopted policy guidelines for the selection and oversight of QHPs including requiring QHPs assure access to quality care for consumers presenting with a range of health statuses and conditions. The guidelines were adopted by the Covered California Board as part of comprehensive set of staff recommendations, *Qualified Health Plan Policies and Strategies to Improve Care, Prevention and Affordability*. Among the recommendations are *Strategies to Promote Better Quality and More Affordable Care* detailed in a Board Recommendation Brief beginning at page 152 of this document. The brief outlines a five-part strategy to achieve the National Strategy for Quality Improvement in Health Care goals of better health, quality care and lower costs:

- Promote alignment with other purchasers to foster better care, lower costs and improved health.
- Collect standardized information on health plans performance and care delivery/payment practices to inform future work.
- Require certain health plan practices that promote better care or standards of performance for participation in the Exchange.

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- Use value-elements in its Qualified Health Plan selection process considering a combination of outcomes (e.g. HEDIS and/or CAHPS scores) and practices (e.g. participation and support for pay-for-performance or medical home initiatives).
- Adhere to the Patient Charter for Physician Performance Measurement, Reporting and Tiering.

Covered California believes this brief generally addresses the questions presented in the RFI relative to the health insurance exchange marketplace and is pleased to share it with the federal government and other state exchanges and stakeholders.

Sincerely,

Peter V. Lee Executive Director