

Select Health Quality Provider Program: Corrective Action Plan

Requirement: Provider must complete two continuous process improvement projects during 2024, both of which must be approved by Select Health and be related to the Quality Provider Program. Submittal deadlines for 2024 are:

- **February 28:** First project plan
- **June 30:** Provider evaluation and results of first project
- **August 31:** Second project plan
- **December 31:** Provider evaluation and results of second project

Clinic Name _____ Project Facilitator _____

Project Title: Select Health Quality Provider Program Corrective Action Plan Duration: 6 months*

*If compliance is not met, the Select Health Steering Committee will determine the clinic is no longer eligible for program participation.

Provider Quality Improvement Champion _____

Quality Improvement Lead _____

Quality Improvement Team _____

Step 1: Identify Issue/Deficiency/Concern and Impact on SelectHealth Members

Approximate # of Select Health members attributing to clinic _____

Participation in Select Health Quality Provider Program (formerly Medical Home) since _____

Final Rates for: 2023 _____ 2022 _____ 2021 _____

Step 2: Define Action Plan and Monitoring

Instructions: Identify action plan elements (select all that apply).

Educate staff and providers on Select Health Quality Provider Program participation.

Develop and implement a process to improve staff and provider engagement within the clinic.

Hold provider-to-provider meeting to discuss deficiencies and plan of action by (date) _____

Other action (please describe): _____

Instructions: Identify monitoring process for action plan described above.

Notes from monthly provider/staff meetings discussing Select Health Quality Provider Program.

Select Health Quality Provider Program Dashboard: Monitor and evaluate monthly rates by provider and clinic. (Use rates by product—Medicare, Commercial, and Medicaid—to identify potential barriers in clinic processes and close gaps.)

Written monthly update from _____ briefing on progress/barriers.

Other monitoring process: _____

Other monitoring process: _____

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Corrective Action Plan, Continued

Step 3: Discuss Barriers and Process Improvement

Instructions: After identifying the perceived barriers, complete a root cause analysis in a staff meeting. In root cause analysis, you ask why an issue is occurring until the “why” question no longer makes sense. This is how you get to the root of an issue.

Root Cause Analysis — Presented in Staff Meeting on (date) _____	
What causes the barrier?	
What contributes to that cause?	
What deeper issues contribute to that cause?	
What deeper issues contribute to that cause?	
What deeper issues contribute to that cause?	

Instructions: Use staff meeting time to hold a team discussion about barriers and ideas for process improvement. Use the space below to record the results.

Did the team identify other barriers?	Yes	No	If yes, please describe below.
What suggestions does the team have to work through the barriers?			
Based on those suggestions, how will the team work to improve the process?			

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Corrective Action Plan, Continued

What are the roles of each team member in the process?	
Front Staff	
MA(s)	
Provider Liaison	
QI Champion	
Operations Rep	
Client Rep	
Other	
How will you measure the effectiveness of the proposed change?	
What is the performance target?	
When will it be measured?	