PrimeWest Health is a health plan owned by 13 counties in rural Minnesota. It is governed by a Joint Powers Board made up of one county commissioner from each of the counties we serve. These counties are Beltrami, Big Stone, Clearwater, Douglas, Grant, Hubbard, McLeod, Meeker, Pipestone, Pope, Renville, Stevens, and Traverse.

PrimeWest Health is the county-owned health insurance plan for local residents enrolled in Minnesota Health Care Programs. It coordinates and pays for the health care of more than 10,000 people who are eligible for Medical Assistance (MA), Prepaid General Assistance Medical Care (PGAMC), MinnesotaCare, Minnesota Senior Health Options (MSHO), Minnesota Senior Care Plus (MSC+), and Special Needs BasicCare (SNBC). PrimeWest Health began health coverage operations in July 2003.

Because PrimeWest Health is a locally-owned health plan, it is sensitive and responsive to the health care needs of its members. PrimeWest Health does this by coordinating public and private health and human services around the specific health care needs of each member.

Enrollment
PrimeWest Health began health coverage operations on July 1, 2003, and now provides coverage under contracts with the Minnesota Department of Human Services (DHS) and the federal Centers for Medicare & Medicaid Services (CMS). Calendar 2007 was the fourth full year of operations and enrollment was stable at an average level of 10,300. Members are enrolled in one of several state and federally funded health programs with various PrimeWest Health start-up dates, including the following:

• **Medical Assistance (MA) – effective July 2003**
  For children under age 21, parents or relative caretakers of dependent children, pregnant women, people who are age 65 or older, and people who have a certified disability

• **Prepaid General Assistance Medical Care (PGAMC) – effective July 2003**
  For adults without children

• **Minnesota Senior Care Plus (MSC+) – effective June 2005**
  For people age 65 or older

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PrimeWest Health realized positive financial results for the year, with total expenses less than total revenues. The primary revenues are premiums paid by DHS and CMS on behalf of health program members. The primary expenses are for hospital, physician, pharmacy, dental, and other health care and social services used by PrimeWest Health members. General administrative expenses represented approximately 9.1 percent of revenues. As of December 31, 2007, PrimeWest Health is in compliance with the statutory net worth requirement under MN Stat. sec. 62N.28.
PrimeWest Health is here to meet the needs of our members and health care partners. We strive to meet the highest quality and safety standards. To reach this goal, we follow standards developed by the National Committee for Quality Assurance (NCQA). NCQA requires us to tell our members and health care providers each year about our work to improve quality. Below we describe our quality improvement activities for 2007. We also include some that we are working on for 2008.

**Quality Objectives**
- To improve the health status of PrimeWest Health members
- To ensure access to high quality and safe health care services in the PrimeWest Health service area

**Quality Plan and Work Plan**
PrimeWest Health has a Quality Plan to help us meet our objectives. We also have an annual Work Plan to help us carry out each year’s quality improvement activities. These plans are designed by the Quality and Care Coordination Committee (QCCC). They are approved by the Joint Powers Board (JPB). Some things included in the Work Plan are as follows:
- Performance Improvement Projects (PIPs) – projects that focus on improving member outcomes for a specific health concern
- Focus studies
- Surveys

These activities focus on improving and building on already-existing best practices.

**Quality Improvement Activities**
Quality improvement activities can aim to improve any of the following:
- Clinical components
- Organizational components – aspects of PrimeWest Health that affect accessibility, availability, comprehensiveness, and continuity of health care
- Member components – members’ perceptions about the quality of PrimeWest Health’s services

PrimeWest Health staff members who specialize in each area are in charge of the activity.
- Performance Improvement Projects (PIPs)
  - Asthma – Aims to improve members’ self-management of asthma, ensure that they have an Asthma Action Plan, and that their medications are being well-managed; started in 2005 and will be done in 2008
  - Hypertension – Focuses on improving primary care access and use for members at risk for hypertension (high blood pressure); started in 2006 and will be done in 2008
  - Statins – Works to improve primary care providers’ use of statins to lower the risk of cardiovascular (heart) disease for members with diabetes; started in 2007 and will be done in 2008
  - HPV Vaccination – Promotes the HPV (human papillomavirus) vaccine for members 11 and 12 years old to protect against cervical cancer; started January 1, 2008
  - Aspirin – Asks members to talk to their health care providers about using aspirin therapy to reduce the risk of a heart attack or stroke; started January 1, 2008

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QUALITY INITIATIVES (continued)

- Focus Studies
  - New Medical Technology Review
  - High Tech Imaging
  - Predictive Modeling for Depression

- Surveys
  - Member satisfaction – The Consumer Assessment of Health Plans Survey (CAHPS)
  - Provider satisfaction and availability
  - Health Effectiveness Data Information Set (HEDIS)

Working Together
PrimeWest Health works with our county partners to assess member health care needs. We work together to develop goals for improvement. For example, in 2007 PrimeWest Health worked with Public Health and Human Services departments in our 10 counties to provide chronic disease management training to county case managers. We also worked to increase access to mental health services using telehealth services and to increase ways that providers could work together to promote, protect, and improve mental health services for our members. Finally, we worked with our county partners to develop disease management programs for diabetes and optimal vascular care (OVC). These programs help our members manage their health care needs more easily and get the care they need when they need it.

For more information about the PrimeWest Health 2008 Quality Plan, go to the PrimeWest Health website at www.primewest.org. Click on Partners & Providers>Pertinent PrimeWest Policies and then Quality Assurance Plan.
2007 was a busy year for PrimeWest Health. We started with 10 counties, five programs, and one central office location in Alexandria. By March 2008, we were able to welcome members in three new counties, Beltrami, Clearwater, and Hubbard. We opened two new offices, in Bemidji and Pipestone, to serve our growing membership. And, on January 1, 2008, we added the Special Needs BasicCare (SNBC) program to better meet the needs of members with disabilities.

Because we are planning for significant growth in our membership in 2008, our staff has grown from 37 to 95. This has allowed us to continue to provide the high-quality service our members deserve as well as move all of our day-to-day operations to our local offices. Member and provider Contact Centers are now on-site, claims are processed locally, and member materials are produced by our own staff. We truly are here to serve you!

PRIMEWEST HEALTH FACILITIES

ALEXANDRIA, MN

BEMIDJI, MN

PIPESTONE, MN

MISSION

• To improve the health of our local communities by integrating publicly funded health and social services and private health care services

• To create a quality system of care that emphasizes prevention and early identification of risks while allowing our members maximum choice by assuring access to local providers

GOALS

• To ensure access to quality health care services for our members

• To improve the health status of our members

• To operate PrimeWest Health as a model business while embracing and fulfilling the public service responsibilities of a government agency
PrimeWest Health
ANNUAL REPORT 2007

Member Services 1-866-431-0801
Attention. If you want free help translating this information, call the above number.

Atención. Si desea recibir asistencia gratuita para traducir esta información, llame al número que aparece más arriba.

Ogow. Haddii aad dooneyso in lagaa kaalmeeyo tarjama dda macluumaadkani oo lacag la’aan ah, wac lambarka kore.

член срвичес 1-866-431-0801

Ceeb toom. Yog koj xav tau kev pab txhais cov xov no dawb, thov hu rau tus xov tooj saud.

Hubaddhu. Yoo akka odeeuffannoon kun sii hiikamu gargaarsa tolaa feeta ta’e, lakkoofsa armaa ollii bilibili.

Внимание. Если вам нужна бесплатная помощь в переводе этой информации, позвоните по указанному выше телефону.

Chú Ý. Nếu quý vị cần dịch thông tin này miễn phí, xin gọi số nêu trên.

This information is available in other forms to people with disabilities. Call PrimeWest Health Member Services at 1-866-431-0801 (toll free), TTY 1-800-627-3529 or 711 (toll free), or through the Minnesota Relay Service at 1-877-627-3848 (toll free speech-to-speech relay service).