

2018 PrimeWest Health ANNUAL REPORT

PrimeWest Health is a County-Based Purchasing (CBP) health plan. This means we have contracts with the Minnesota Department of Human Services (DHS) and the Federal Centers for Medicare & Medicaid Services (CMS). These contracts allow us to purchase and manage health care services for Minnesota Health Care Programs (MHCP)-eligible people who live in the counties we serve. PrimeWest Health is owned by the 13 rural Minnesota counties we serve. These counties are Beltrami, Big Stone, Clearwater, Douglas, Grant, Hubbard, McLeod, Meeker, Pipestone, Pope, Renville, Stevens, and Traverse. The governing body of PrimeWest Health is called the Joint Powers Board (JPB). The JPB includes 2 county commissioners (1 voting and 1 alternate) from each PrimeWest Health county.

We have contracts with DHS and CMS to offer the following programs in our 13 counties:

- **Families and Children**

For children under age 21, parents or relative caretakers of dependent children, adults without children, and pregnant women who have Medical Assistance

- **MinnesotaCare**

For adults without children, parents or relative caretakers of dependent children, and children who are eligible for the State MinnesotaCare program; members pay a monthly premium to the State

- **Minnesota Senior Care Plus (MSC+)**

For people age 65 or over who have Medical Assistance

- **Special Needs BasicCare (SNBC)**

For people who have a certified disability, are ages 18 – 64, and have Medical Assistance but do not have Medicare through PrimeWest Health

- **PrimeWest Senior Health Complete (HMO SNP) (PWSHC)**

For people age 65 or over who have both Medical Assistance and Medicare through PrimeWest Health (*a Minnesota Senior Health Options [MSHO] program*)

- **Prime Health Complete (HMO SNP) (PHC)**

For people who have a certified disability, are ages 18 – 64, and have both Medical Assistance and Medicare through PrimeWest Health (*an SNBC program*)

GROWTH

PrimeWest Health's monthly enrollment reached an all-time high in 2018, our 15th year of operations. The chart that follows shows the average monthly enrollment each year since 2003. In addition, an average of 63.2 percent of our members received health care services from one of 6 local health care systems that are part of PrimeWest Health's Accountable Rural Community Health (ARCH) program. ARCH is our person-centered, local provider-based approach for coordinating care and services for our members' health care and wellness needs. Through ARCH, PrimeWest Health and our outstanding providers are improving the quality and outcomes of care for our members, improving our members' satisfaction with the care they get, improving the overall health of our member population, and reducing health care spending.

Average Members per Year



In July 2003, PrimeWest Health began serving members in Big Stone, Douglas, Grant, McLeod, Meeker, Pipestone, Pope, Renville, Stevens, and Traverse counties. In March 2008, we expanded and began serving members in Beltrami, Clearwater, and Hubbard counties.



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SUMMARY OF FINANCIAL STATEMENTS, JANUARY – DECEMBER 2018

ACCESS

To serve our members, PrimeWest Health contracts with almost 12,000 providers and over 2,450 facilities. This large provider network ensures our members have optimal access to health care services and a choice of providers. Our network includes nearly every health care provider of covered services in and around our 13 counties. This includes medical, behavioral, social/human/family services, and allied health care providers. Our network also includes a full range of specialists and facilities in all metropolitan areas in Minnesota and eastern North Dakota and South Dakota.

PrimeWest Health continues to work hard to improve member access for all services, including dental care. Our dental provider network has grown from 3 providers in 2003 to more than 230 providers and 119 clinics today. PrimeWest Health has helped fund new dental clinics and upgraded equipment for members in Alexandria, Bemidji, Montevideo, and Hutchinson. We are currently working to expand access in Park Rapids by providing funding for building upgrades and dental equipment. We have also increased the number of dental outreach clinics available to serve rural communities and provide allied oral health professionals for services that don't require a dentist.

FINANCIALS

This is an overview of PrimeWest Health's financial position and performance for calendar year 2018. It is published in accordance with the requirements of MN Stat. sec. 62D.09, subd. 3. This is not a full financial statement, but a summary provided for our members' information.

PrimeWest Health's primary expenses are for hospital, physician, pharmacy, dental, and other health care and social services used by PrimeWest Health members. Our primary revenues are premiums paid by DHS (State) and CMS (Federal) on behalf of our members.

A net loss of 3.5 percent of total revenue was realized in 2018, compared to a net gain of 1.4 percent in 2017. The unfavorable results in 2018 are due to expense trends greater than projected combined with a greater than average occurrence of large claims. The average net gain for 2009 – 2018 is 2.4 percent. From 2017 to 2018, PrimeWest Health revenues increased 3.4 percent from 2017 to 2018, primarily as a result of a 2.9 percent increase in enrollment; total health care expenses increased 7.3 percent; and average health care expenses per member per month increased 4.3 percent. The increase in reserves for health contracts is due to projected 2019 expenses being greater than 2019 revenues. As of December 31, 2018, PrimeWest Health is in compliance with statutory net worth requirements under MN Stat. Chap. 62D and MN Stat. secs. 60A.60 – 696.

Balance Sheet as of December 31, 2018	
Assets	\$ 110,908,980
Liabilities	\$ 54,126,565
Statutorily Required Net Worth	\$ 56,782,415
2018 Statement of Revenues and Expenses	
Revenues	\$ 305,078,585
Expenses	
Hospital and Skilled Nursing Facility Services	\$ 126,331,882
Physician and Allied Health Services	\$ 116,476,119
Pharmacy	\$ 39,746,681
Dental Services	\$ 8,567,594
Claims Adjustment and Cost Containment	\$ 12,299,766
Non-Claim Expenses	\$ 10,596,822
Total Expenses	\$ 314,018,864
Change in Reserves for Health Contracts	\$ \$1,642,248
Net Gain (Loss)	\$ (10,582,527)

QUALITY INITIATIVES

PrimeWest Health strives to meet the highest quality and safety standards. We follow standards developed by the National Committee for Quality Assurance (NCQA). NCQA requires us to tell our members each year about our work to improve quality. Below we describe our quality improvement activities for 2018 and some initiatives that we are working on for 2019.

Quality Goals

1. To achieve high member satisfaction; improved quality of care, care outcomes, and population health; and reduce health care spending
2. To fully realize our unique strength and potential as a county-owned health plan that serves our counties' residents in MHCPs
3. To develop an organizational culture that focuses on core values, performance excellence, teamwork, and shared success to better serve our members
4. To effectively govern and manage PrimeWest Health operations to effectively carry out our mission
5. To be viewed as an effective alternative model for managed care in the State of Minnesota

Quality Improvement Activities

Quality improvement activities 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

Quality Plan and Work Plan

PrimeWest Health has a Quality Plan and 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) and approved by the JPB. Some of the activities included in the Work Plan are as follows:

- **Performance Improvement Projects (PIPs)** – projects that focus on improving member health outcomes or business processes for member service initiatives

- **Healthcare Effectiveness Data and Information Set (HEDIS®)**¹ – the measurement tool used by the nation's health plans to evaluate their clinical quality and customer service
- **Member and provider surveys**

PIPs

Current PIPs include:

- **Reducing New Chronic Opioid Use with a Special Focus on Native American Members**

Goals:

- Maintain or continue decreasing the number of new chronic opioid users across all PrimeWest Health members.
- Close the gap of chronic use between Native American members and all other ethnic populations.

This project began in 2018. The first measurement data will be available in the 2nd quarter of 2019.

HEDIS Performance Measures

For more information on HEDIS, go to www.primewest.org/hedis. Our goal is to remain at or above the national mean.

Surveys

- **Member Satisfaction Survey – Consumer Assessment of Healthcare Providers and Systems (CAHPS®)**²

2018 results show that PrimeWest Health has both strengths and opportunities for improvement. Some strengths are as follows:

- Personal doctor listened carefully
- Getting care/test/treatments needed

Some areas for continued improvement are as follows:

- Doctor talked about reasons you may want to take a medication and involved member in decisions as much as member wanted
- Doctor discussed tobacco cessation methods/strategies
- Member had flu shot on/after July 1 of the measurement year
- Member got care/tests/treatments as quickly as needed

¹HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA)

²CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ)

To follow up on the feedback received from this survey, PrimeWest Health took the following actions in 2018:

- Encouraged the use of shared decision-making tools/models among our providers
- Encouraged providers to share tobacco cessation methods with members
- Addressed smoking cessation in member outreach calls and monitored whether providers are discussing it with members
- Shared results of member surveys on our website and in print publications
- Promoted services PrimeWest Health offers, such as care coordination, disease management, and the member web portal
- Educated members about the reason for surveys to encourage responses

• **Health Outcomes Survey (HOS)**

Members' perception that providers discussed and addressed certain problems with them showed mixed results from 2014 – 2018. PrimeWest Health continues to encourage providers to discuss and address the following topics with members:

- Fall risk management
- Urinary incontinence
- Osteoporosis testing
- Physical activity in older adults
- Depression screening

• **County Case Manager Satisfaction Surveys**

MSC+/PWSHC/SNBC/PHC Satisfaction Surveys: Surveys were mailed and the combined response rate for all programs was 26 percent. This is a slight decrease from the previous year.

• **Disease Management/Chronic Care Improvement Program (DM/CCIP) Satisfaction Survey**

In 2018, the DM/CCIP was revised and new benchmarks were set. The satisfaction survey was mailed to 1,381 members, with a response rate of 23 percent. The results show that members found the information they received useful and that it helped them learn more about their condition.

PrimeWest Health wants your feedback to help us improve. Please call Member Services at **1-866-431-0801** (toll free) to share your ideas with us. TTY users call **1-800-627-3529** or **711** (toll free).

Lessons Learned

PrimeWest Health identified the following lessons learned based on our 2018 quality activities:

- To build an effective quality program, staff from the entire organization should be involved
- Member outreach should be attempted via multiple avenues
- Members may need additional education about the role of PrimeWest Health to increase satisfaction and better understand our processes

Working Together

PrimeWest Health works with our county partners to assess member health care needs. All of our members in MSC+, PWSHC, and PHC have a county case manager to help them meet their health care goals, if they choose.

In 2018, we continued to work with Public Health and Social/Human/Family Services departments in our 13 counties to improve health outcomes in the following areas:

- **Combat obesity** by increasing the percentage of providers who document and address body mass index (BMI) with patients. The 2018 rate was 83 percent. The 2017 rate was just below 73 percent.
- **Reduce tobacco use** by ensuring that 100 percent of providers have access to approved smoking cessation guidelines. This goal was met and remains at 100 percent at the end of 2018.
- **Increase Child and Teen Checkups (C&TCs)** among adolescents. The HEDIS 2018 Medicaid rate was 59.61 percent. The 2017 rate was 44.77 percent.
- **Ensure that our members are assessed for exposure to violence.** We verify that 100 percent of contracted clinics include this assessment in their protocols. We also ensure that 100 percent of Public Health agencies assess families for signs/symptoms of interpersonal violence during interventions. This goal has been met and remains at 100 percent.
- **Reduce the incidence of low birth weight** by ensuring that 100 percent of Public Health agencies assess and educate families about low birth weight during interventions. This goal has been met and remains at 100 percent.
- **Ensure collaboration plans are developed and used** by Public Health agencies 100 percent of the time. This goal has been met and remains at 100 percent at the end of 2018.

1-866-431-0801 (toll free); TTY 1-800-627-3529 or 711

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤစာရွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

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請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သျှပ်ဟ်သးဘဉ်တက့ၢ်. ဖဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလိလၢတၢ်ကကျိးထံဝဲဒၣ်လံာ် တိလံာ်မိတခါအံၤန့ၣ်, ကိးဘဉ်လိတဲစိနီၣ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ, ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງໂທໄປທີ່ໝາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

Civil Rights Notice

Discrimination is against the law. PrimeWest Health does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

Auxiliary Aids and Services: PrimeWest Health provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact PrimeWest Health at memberservices@primewest.org, or call Member Services at 1-866-431-0801 (toll free) or TTY 1-800-627-3529 or 711.**

Language Assistance Services: PrimeWest Health provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact PrimeWest Health at memberservices@primewest.org, or call Member Services at 1-866-431-0801 (toll free) or TTY 1-800-627-3529 or 711.**

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by PrimeWest Health. You may contact any of the following four agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services' Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex

Contact the **OCR** directly to file a complaint:

Director
U.S. Department of Health and Human Services' Office for Civil Rights
200 Independence Avenue SW
Room 509F
HHH Building
Washington, DC 20201
800-368-1019 (voice)
800-537-7697 (TDD)
Complaint Portal: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
Freeman Building, 625 North Robert Street
St. Paul, MN 55155
651-539-1100 (voice)
800-657-3704 (toll free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. After we get your complaint, we will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal the outcome if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

PrimeWest Health Complaint Notice

You have the right to file a complaint with PrimeWest Health if you believe you have been discriminated against because of any of the following:

- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information
- disability (including mental or physical impairment)
- marital status
- age
- sex (including sex stereotypes and gender identity)
- sexual orientation
- national origin
- race
- color
- religion
- creed
- public assistance status
- political beliefs

You can file a complaint and ask for help in filing a complaint in person or by mail, phone, fax, or email at:

Rebecca Fuller
Civil Rights Coordinator
PrimeWest Health
3905 Dakota St
Alexandria, MN 56308
Toll Free: 1-866-431-0801
TTY: 1-800-627-3529 or 711
Fax: 1-320-762-8750
Email: rebecca.fuller@primewest.org

American Indian Health Statement

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.