
FEHB Program Carrier Letter

All Carriers

U.S. Office of Personnel Management
Insurance Services Program

Letter No. 2003-20

Date: May 9, 2003

Fee-for-service [19] Experience-rated HMO [19] Community-rated HMO[18]

SUBJECT: Patient Safety Information on the FEHB Web Site

In our annual call letter, [Carrier Letter 2003-15 of April 18, 2003](#), we discussed bringing patient safety information directly to consumers by adding information on your patient safety initiatives and programs to the FEHB web site. That letter asked you to submit a description of your patient safety efforts using the following framework:

1. Describe the activity you want FEHB consumers to know about.
2. Explain the goal or expected outcome you anticipate from this activity.
3. Describe the specific tools you will use to evaluate the results of this activity.

Your narrative should also cover the following points:

1. Do you have a specific patient safety officer? What office/position oversees this?
2. Drug utilization reviews. In non-technical terms, explain the systems you have in place to identify (retrospective) and prevent (concurrent) prescription drug errors.
3. Disease management programs. What programs do you offer, and what could a prospective patient expect to receive generally in terms of education, treatment, and follow-up?
4. Do you issue evidence-based guidelines to doctors for treatment recommendations?
5. Do you share individual patient prescription drug profiles or patient disease profiles with the patient's doctors?
6. Do you routinely include patient safety information in physician newsletters?
7. Do you have a physician or hospital quality service or recognition program?
8. In addition to these seven questions, you may also opt to discuss any other area or component of your patient safety efforts you want the public to know about.

We recognize that to answer this properly will require a bit of work. You **do not** have to submit this information along with your benefit and rate proposals. **The due date for these patient safety descriptions is August 29, 2003.**

We will post your description on the open season web site as submitted. Therefore, it should be written to provide useful information to help your current and potential FEHB enrollees judge for themselves your commitment to their safety. We believe you can greatly enhance the readability of your responses by writing in

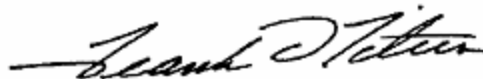
plain language, using the active voice, and remembering that the intended audience is FEHB enrollees. Please limit your submissions to two pages, if possible.

Also, observe the following when submitting your responses:

- The information should come in as a Word document with your health plan name and your FEHB-issued enrollment code(s) typed at the top of the document.
- The Word document should be saved to a file name of: the 2-letter or number enrollment code, followed by an underscore, followed by PS.doc, i.e., XX_PS.doc. If you have more than one enrollment code just use one.

Please e-mail your response to jwarren@opm.gov by August 29. If you have any questions, contact Dean Schleicher at ndschlei@opm.gov or (202) 606-0745.

Sincerely,

A handwritten signature in black ink, appearing to read "Frank D. Titus". The signature is fluid and cursive, with a long horizontal stroke at the beginning.

Frank D. Titus
Assistant Director
for Insurance Services