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HEDIS 2003

Final Report

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Purpose

This report presents the MassHealth 2003 HEDIS results. The report is designed to be used by MassHealth program managers and by managed care plan managers in identifying their Plan's performance and planning for future improvement activities. Benchmark comparisons highlight how well a Plan performs relative to other Plans and to national comparisons (shown on Summary Pages). Charts with the performance rate values help managers identify opportunities for improvement and set internal quality improvement goals (pages with charts). The detail tables and appendices provide the background information necessary for more in-depth analyses.

Organization of This Report

This report has two major sections: "Health Care for Women" and "Behavioral Health Care."

Each section begins with a Statistical Summary, showing how each Plan's performance on a specific measure compares to Benchmarks.

Pages following the Statistical Summary show Plan results charted side-by-side with selected Benchmarks. Plans whose performance is significantly better than the MassHealth mean have white bars. All other Plan results are depicted as gray bars. Benchmarks are depicted with black bars.

Each section concludes with detailed data tables for the measures and the associated benchmarks. The report also includes several Appendices showing breakouts of data for the Basic and non-Basic populations for selected Behavioral Health measures.

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Executive Summary

The National Committee for Quality Assurance (NCQA) developed the Health Plan Employer Data and Information Set (HEDIS®) to standardize the measurement and reporting of health plan performance. NCQA's goal has been to develop a set of measures that will be consistent over time and that will be specified in sufficient detail so that the results will be comparable among health plans. HEDIS is part of NCQA's integrated system to establish accountability in managed care.

HEDIS Measurement Domains

HEDIS measures have been developed across a number of domains that include: Effectiveness of Care, Access/Availability of Care, and Use of Services. These categories are described immediately below.

- Effectiveness of care measures are intended to demonstrate the impact of health care delivered during the designated reporting period. These measures allow both purchasers and consumers to draw inferences about the clinical effectiveness of health care interventions delivered by the plan.

- Access/availability of care measures estimate the extent to which covered services are obtainable. Measures in this domain provide evidence of the extent to which members do in fact access specified health services. Highly motivated members may overcome substantial barriers to obtain desired care, while even minor barriers to receiving care may deter others. These measures offer some insight into how well health plans meet the population's need for access.

- Use of services measures are intended to provide insight into plan performance by describing the utilization of services in a manner that focuses on what services are obtained by populations that can expect to need them, such as frequency of prenatal care for pregnant women. These measures also include the rate

of use, generally expressed in terms of either percentage of services having a particular characteristic, or as the number of services delivered for every 1000 months of membership (e.g. the rate of mental health services). Utilization measures can suggest how efficiently a plan delivers services to the population. Utilization rates that are very low may suggest barriers to care.

MassHealth HEDIS 2003 Data Collection

The Division of Medical Assistance (the Division) used a subset of HEDIS measures to assess the performance of the five health plans that provided health care services to MassHealth Managed Care members. This report presents HEDIS 2003 performance data based on care provided during calendar year 2002 by Boston Medical Center HealthNet Plan (BMC HealthNet Plan), Fallon Community Health Plan (FCHP), Neighborhood Health Plan (NHP) and Network Health (NH) as well as the Primary Care Clinician (PCC) Plan, the primary care case management program administered by the Division.

The HEDIS data offer useful information as to the performance of the health plans. The results provide the Division with a means for assessing whether the health plans are performing satisfactorily, and contribute information about potential areas for improvement. As the Division continues to work with its health plans to improve the quality of health care delivered to members, these data will contribute towards this process.

Measures Collected for HEDIS 2003

Health Care for Women

Cancer Screening

- Breast Cancer Screening
- Cervical Cancer Screening

Measures Collected for HEDIS 2003

Perinatal Care

- Prenatal and Postpartum Care
- Frequency of Ongoing Prenatal Care
- Weeks of Pregnancy at Time of Enrollment

Behavioral Health

Follow-up After Hospitalization for Mental Illness

- 7 Day (combined, non-Basic, and Basic population)
- 30 Day (combined, non-Basic, and Basic population)

Antidepressant Medication Management

- Effective Acute Phase Treatment
- Effective Continuation Phase Treatment
- Optimal Practitioner Contacts for Medication Management

Chemical Dependency Inpatient Discharges and Average Length of Stay

Chemical Dependency Utilization

Mental Health Inpatient Discharges and Average Length of Stay

Mental Health Utilization

Summary of Performance

Overall, the performance across MassHealth plans generally exceeds 2003 Medicaid benchmarks and in some cases meets or exceeds commercial HEDIS benchmarks. In the results section of this report, comparisons to benchmarks and potential opportunities for improvement are noted for each individual or groups of measures. The Summary Tables on the following page presents the overall results for MassHealth Plans for HEDIS 2003.



Executive Summary

Table A: Summary of Women's Health and Behavioral Health Effectiveness Measures

HEDIS Measures	MassHealth Weighted Mean	MassHealth Median	MA Commercial Mean 2003	National Commercial Mean 2003	National Medicaid Mean 2003
Breast Cancer Screening	65.1%	66.1%	80.3%	74.9%	55.9%
Cervical Cancer Screening	78.5%	77.9%	85.4%	80.5%	62.2%
Timeliness of Prenatal Care	82.8%	85.6%	91.8%	86.7%	70.4%
Postpartum Care	52.8%	58.6%	82.2%	77.0%	52.1%
Frequency of Ongoing Prenatal Care (Greater than or equal to 81% of Expected visits)	65.4%	64.2%	NA	NA	41.0%
Weeks of Pregnancy at Time of Enrollment (Greater than or equal to 28 weeks pregnant)	20.2%	18.4%	NA	NA	NA
Antidepressant Medication Management					
Effective Acute Phase Treatment	48.6%	49.3%	63.6%	59.8%	47.5%
Effective Continuation Phase Treatment	32.7%	32%	45.9%	42.8%	32.4%
Optimal Practitioner Contacts for Medication Management	27.1%	22.5%	30.8%	19.1%	18.4%
Follow-up After Hospitalization for Mental Illness					
7 Day Follow-up	48.6%	44.4%	59.1%	52.6%	37.2%
30 Day Follow-up	68.9%	62.8%	81.0%	73.5%	56.7%

Table B: Summary of Behavioral Health Utilization Measures

HEDIS Measures	MassHealth Weighted Mean	MassHealth Median	MA Commercial Mean 2003	National Commercial Mean 2003	National Medicaid Mean 2003
Mental Health Utilization					
% with any MH Service	21.2%	15.9%	8.7%	5.3%	7.1%
% with Inpatient MH Services	1.4%	0.9%	0.3%	0.2%	0.8%
% with Day/Night MH Services	0.6%	0.2%	0.1%	0.1%	0.1%
% with Ambulatory MH Services	20.8%	15.7%	8.6%	5.2%	7.0%
Inpatient Discharges per 1,000 member months	2.0	1.1	3.6	2.8	0.9
Average Length of Stay	10.9	8.9	7.7	6.0	6.8
Chemical Dependency Utilization					
% with any CD Service	4.6%	3.7%	0.5%	0.4%	0.9%
% with Inpatient CD Services	2.2%	1.7%	0.2%	0.1%	0.3%
% with Day/Night CD Services	0.9%	0.2%	0.1%	0.0%	0.1%
% with Ambulatory CD Services	3.1%	2.7%	0.4%	0.3%	0.7%
Inpatient Discharges per 1,000 member months	5.2	3.0	2.3	1.2	0.5
Average Length of Stay	4.4	4.4	4.1	5.1	5.5



Introduction

HEDIS 2003 Participant Profiles

The following five health Plans submitted data for this report.

Boston Medical Center HealthNet Plan (BMCHP)

The Boston Medical Center HealthNet Plan (BMCHP) began operations in July 1997 as a provider-sponsored health plan, owned and operated by Boston Medical Center, the largest public safety net hospital in Boston. As of December 2002, BMCHP served 95,819 MassHealth members.

By the end of calendar year 2002, BMCHP's membership was spread throughout much of the state, with two-thirds of its membership located outside of the metropolitan Boston area. Beyond Boston, BMCHP includes members living in the Brockton and Quincy Medicaid service areas, where the Plan has been operating since 1998 and 1999 respectively. During the latter part of calendar year 2000, the Plan expanded to the service areas of Springfield, Holyoke, Northampton, Greenfield, and Westfield. BMCHP continues to be the fastest growing Plan serving MassHealth members, with a 44% growth rate during calendar year 2002. BMCHP's provider network includes community health centers and hospital outpatient departments, as well as many group and individual practices.

Fallon Community Health Plan (FCHP)

Fallon Community Health Plan (FCHP) is a non-profit MCO that serves commercial, Medicare, and Medicaid members. As of December 2002, FCHP served approximately 9,698 MassHealth members, about 1,000 fewer than in 2001. FCHP's provider network is primarily based at the 24 Fallon Clinic sites, which are group practices in Central Massachusetts.

Network Health (NH)

Network Health (NH) is a growing MassHealth managed care organization that was started by the Cambridge Health Alliance in July 1997. With approximately 46,236 MassHealth members as of December 2002, Network Health grew 32% during calendar year 2002. By year's end, roughly 84% of Network Health's membership resided outside its traditional service area of Cambridge, Somerville, Arlington, Malden and Revere. Network Health's provider network includes community health centers, group practices, and hospital outpatient departments.

Neighborhood Health Plan (NHP)

Neighborhood Health Plan (NHP), a non-profit MCO serving primarily Medicaid members, had approximately 102,627 MassHealth members enrolled as of December 2002, a decrease of about 5,600 members compared to enrollment for 2001. NHP has enrollment statewide with a large portion of its membership residing in the greater Boston area. The majority of NHP's membership receives their health care services at community health centers, Harvard Vanguard Medical Associates, group practices and hospital-based clinics.

Primary Care Clinician Plan (PCCP)

The Primary Care Clinician (PCC) Plan is a primary care case management program for MassHealth members, administered by the Division. As of December 2002 there were approximately 359,600 members in the PCC Plan. Each member who chooses or is assigned to the PCC Plan is enrolled with a PCC who delivers primary and preventive care services, and coordinates most other health care services. The PCC provider network operates statewide and includes individual physicians, group practices, community health centers, outpatient departments, and independent nurse practitioners. Behavioral health services for PCC Plan members are managed through a carve-out contract with the Massachusetts Behavioral Health Partnership (MBHP).

Data Collection and Analysis Methods

Plans were notified of the measures to be collected for HEDIS 2003 by the Division of Medical Assistance in December of 2002. Each Plan was responsible for collecting and reporting the data according to the HEDIS specifications. The Plans submitted data to NCQA using NCQA's DST (Data Submission Tool) and forwarded a copy of the DST to the Center for Health Policy and Research (CHPR).

MassHealth Mean

The MassHealth Mean is a weighted average of the 5 managed care Plans participating in HEDIS 2003. This is calculated by multiplying the performance rate for each Plan by the number of individuals who were enrolled in the MassHealth portion of that Plan during the year and who met the eligibility criteria for the measure. The values are then summed across Plans, and divided by the total eligible population for all the Plans.

MassHealth Median

The median value for the Plans was identified and reported as the MassHealth Median. The median is defined as the middle value of a set of values. If there are an even number of values, the median is the arithmetic mean of the values on either side of the midpoint.

Confidence Intervals

A 95% confidence interval was calculated for each measure. The 95% confidence interval defines a range that would be expected to contain the actual population mean 95% of the time, if the measurement were repeated using the same sample size. Confidence intervals reported here are used to test whether the observed performance rate for a Plan is the same as the benchmark rate. If a Plan's confidence interval includes the benchmark rate, we conclude with 95% certainty that there is no difference between the benchmark rate and the Plan rate. That is, they are statistically the same. The width of the confidence interval varies by the observed rate and by the sample size. Large samples generate narrower confidence intervals; small samples generate broader ones.

Benchmarks

Most of the benchmarks in this report were obtained from the 2003 NCQA Quality Compass®. NCQA releases Quality Compass in July of each year with the rates for commercial Plans. Medicaid rates are released in late fall, and are included in this report.

We also compared each Plan's performance to their prior HEDIS rate, where applicable. Some rates, such as the 2000 MassHealth Breast Cancer Screening rate, could not be compared to the 2003 data because the methods of calculation differed between years. For the 2000 HEDIS cycle, DMA deviated from the HEDIS specifications and measured the rate at which women received annual mammograms.

For the Cervical Cancer Screening rate, we did historical comparisons only for those Plans that used the Hybrid data collection method in both 2000 and 2003.

Quality Compass

Quality Compass® is a registered trademark of NCQA. The source for national and Massachusetts 2003 data contained in this publication is Quality Compass and is used with the permission of the National Committee for Quality Assurance ("NCQA"). Any analysis, interpretation, or conclusion based on these data are solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion.

Statistical Summaries

Statistical Summary Pages - These pages compare individual Plan performance to National and Massachusetts commercial benchmarks for 2003, National Medicaid Benchmarks for 2003, and the Plan's own prior performance on the measure (as feasible).

Each Plan's rate was compared to the benchmark and assigned a statistical rating as follows:

- * = Rate is significantly better than the average, that is, the Plan's 95% confidence interval exceeds the comparison rate
- = Rate is not significantly different from the average, that is, the Plan's 95% confidence interval includes the comparison rate
- = Rate is significantly worse than the average, that is, the Plan's 95% confidence interval is below the comparison rate

Note: Two health plans may have identical scores, but due to different sample sizes, produce different results on the statistical significance tests. This is because smaller sample sizes at the Plan level yield less precise measures of performance and may be insufficient to achieve statistical significance. Therefore, readers should take sample size into account when interpreting the results of the statistical table above.



Data Collection and Analysis Methods

Administrative vs Hybrid data collection

The data used in this report were acquired using two data collection methodologies, administrative and hybrid.

The administrative methodology requires Plans to identify their member population using transaction data or other administrative databases, such as appointment scheduling software and case management databases.

The hybrid methodology requires that Plans identify their member population through both administrative data and medical record data. The medical record is the collective accumulation of notes kept by all practitioners who treat a member – it constitutes the official record of patient visits and treatment.

Continuous enrollment

Some measures specify continuous enrollment, the minimum amount of time a member must be enrolled in the Plan before becoming eligible to be counted in the measure. The intent of continuous enrollment is to ensure that the Plan has a sufficient amount of time to render service(s) to its members and be held accountable for providing those services. The continuous enrollment period is specified for each measure along with an allowable gap for that continuous enrollment period. For the majority of measures, a member is considered continuously enrolled if the member was enrolled in the Plan during the measurement year and had no more than one gap in enrollment of up to 45 days during any time from January 1 through December 31, 2002.

Caveats for the Interpretation of Results

Before presenting the results, the reader must be cautioned against over-interpretation of the findings. All data analyses have limitations and those presented here are no exception.

Comparability of results across Plans

Measures may not be fully comparable across Plans. HEDIS does not provide for risk adjustment across populations in terms of social risk, existing comorbidities or severity of condition. Thus, statistically significant differences in these measures may reflect differences in the populations served and not in the quality or use of services offered or delivered.

Sample Sizes

Plan sample sizes vary, thereby affecting the comparability of data between Plans. Large sample sizes lead to more precise estimates and generate narrower confidence intervals. If a sample size is large enough, even a small difference in performance may be statistically significant. However, statistical significance should not be confused with clinical significance. Small sample sizes (less than 30 members) yield less precise performance estimates with wide confidence intervals. Confidence intervals for smaller Plans may be so wide as to prevent comparison between health Plans.

Overlapping provider networks

Many of the providers caring for MassHealth members have contracts with more than one Plan. Other providers will deliver care to MassHealth members in only a single Plan. The presence of overlapping contractual arrangements dilute the ability of any one Plan to substantially influence a provider's behavior. HEDIS rates for any one Plan may not entirely be due to that Plan's activities.

Utilization is not the same as quality

Some HEDIS measures, especially the Mental Health and Chemical Dependency Utilization Measures, reflect the use of and access to services rather than the technical quality of service delivery. Access to service is necessary but not a sufficient condition for good quality care.

Availability of benchmarks

The limited availability of benchmarks for the Medicaid population makes interpretation of these results challenging. A benchmark can be defined as a goal to be achieved. Sometimes a benchmark is set at the highest achievable performance for a Plan; in other situations a benchmark may be defined as the usual or average performance, which is the manner benchmarks will be used in the report.

One important source of these benchmarks, as discussed under the Methods section of this report, is the NCQA Quality Compass 2003. This data allow the use of national and regional averages for commercial populations as benchmarks.

Variation in data quality

HEDIS data are collected and supplied by the Plans. Although there are standard specifications and definitions for the measures, the Division does not monitor the uniformity of the actual systems and methods used to calculate the rates. Factors that may affect the comparability of individual Plan results from year to year include staffing changes, internal systems changes and use of the HEDIS administrative or hybrid methodology. Although Plans may audit data for their commercial populations to submit to the Quality Compass® and/or for NCQA accreditation, the Division does not require data submitted by Plans to be audited.

"What Gets Measured, Gets Improved"

Because there are a limited number of standardized measures for evaluating health plan performance, it has been suggested that health plans may concentrate performance improvement efforts in only those areas measured by HEDIS. Therefore, it is important not to extrapolate from the measures contained in this report to more general aspects of overall health plan performance.

Unmeasured aspects of care

Some aspects of the health plan's performance will not be captured directly by these measures. For example, member surveys and other activities to measure the member's experience of care are ongoing at the Division, but are not a part of this report.



Caveats for the Interpretation of Results

PCC Plan enrollment relative to other Plan enrollment

Interpretation of the MassHealth Weighted Mean requires careful consideration. Because the PCC Plan is so large compared to the other Plans, it contributes more to the weighted mean (when the administrative data collection methodology is used) than does the performance of other Plans. The MassHealth weighted mean describes care for the average enrollee who is eligible for the measure, but does not necessarily describe the performance of the typical MassHealth Plan. The median value describes 'middle of the road' performance within the MassHealth managed care plans. It is less sensitive to extreme variations within a sample, and is a better measure of 'skewed' populations.



Health Care for Women

Health Care for Women

Statistical Summary

This page summarizes each Plan's performance on the 2003 MassHealth HEDIS measures targeting women, as compared to benchmarks. This year's measurement slate included two Effectiveness measures (Breast Cancer Screening and Cervical Cancer Screening), the perinatal Access measures (Prenatal and Postpartum Care), the Frequency of Ongoing Prenatal Care Measure (a utilization measure) and Weeks of Pregnancy at Time of Enrollment (a descriptive measure). Weeks of Pregnancy is not presented on this page due to a lack of comparable benchmarks at this time.

	Breast Cancer Screening				Cervical Cancer Screening					Timeliness of Prenatal Care					Postpartum Care					Frequency of Prenatal Care =81%+ Expected Visits		
	2003 Rate Compared To:				2003 Rate Compared To:					2003 Rate Compared To:					2003 Rate Compared To:					2003 Rate Compared To:		
	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Plan's 2000 Rate	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Plan's 2001 Rate	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Plan's 2001 Rate	Nat'l Mcaid 2003	Mass Health Mean	Plan's 2001 Rate
PCCP	●	●	☆	○	○	●	☆	○	○	●	●	☆	○	○	●	●	○	○	☆	☆	○	☆
NHP	○	●	☆	☆	○	○	☆	○	○	●	●	☆	○	○	●	●	☆	☆	○	☆	☆	○
NH	●	●	☆	○	●	●	☆	○		○	●	☆	○	○	●	●	○	○	○	☆	●	○
FCHP	●	●	☆	○	○	○	☆	○		○	○	☆	☆	○	●	●	☆	☆	○	☆	☆	○
BMCHP	●	●	☆	○	○	●	☆	○	○	○	●	☆	☆	○	●	●	☆	☆	○	☆	○	○

Legend

- 2003 rate is significantly below the comparison rate, that is, the Plan's 95% upper confidence level is below the comparison rate
- 2003 rate is not significantly different from the comparison rate, that is, the Plan's 95% confidence interval includes the comparison rate
- ☆ 2003 rate is significantly above the comparison rate, that is, the Plan's 95% lower confidence level exceeds the comparison rate

PCCP: Primary Care Clinician Plan NHP: Neighborhood Health Plan NH: Network Health

FCHP: Fallon Community Health Plan BMCHP: Boston Medical Center HealthNet Plan

Notes:

For Breast Cancer Screening, 2003 rates are not compared to the 2000 rates. The 2000 rates were calculated using a deviation from the HEDIS specifications (annual rather than biannual mammogram) making direct comparisons between 2000 and 2003 impossible.

For Cervical Cancer Screening, the 2003 rates were only compared to the 2000 rates if a Plan used the same data collection methodology each year (e.g. Hybrid)

Health Care for Women

Breast and Cervical Cancer Screening

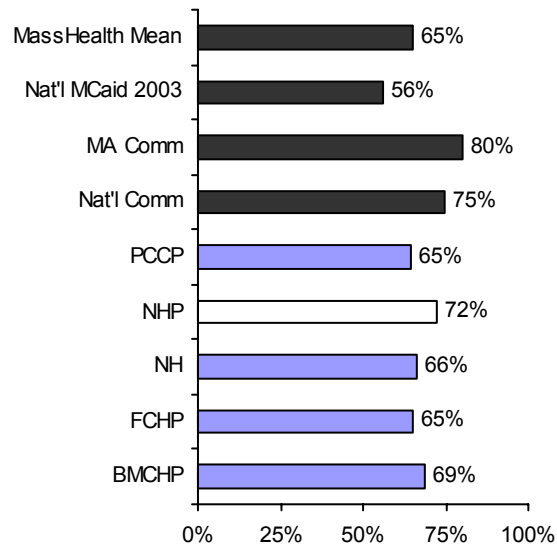
Nationally, breast cancer survival rates have improved substantially since 1950 with current five-year survival rates of about 88% (1). Women whose breast cancer is detected in the early stages have more treatment options available to them and thus increase their likelihood of long-term survival. Important risk factors associated with breast cancer include family history of disease, hormone replacement therapy and obesity (2,3).

Survival rates for cervical cancer have also improved, but not quite as much as for breast cancer (4). The current five-year survival rate for cervical cancer is 73%. Cervical cancer can be detected in its early stages with regular Pap testing. Risk factors for cervical cancer include low socio-economic status as well as infection with HPV (human papillomavirus) or chlamydia bacteria (5,6).

Breast Cancer Screening

This chart shows the percentage of women aged 52-64, continuously enrolled for the past 2 years, who had at least 1 mammogram in the 2 year period. The PCC Plan collected this measure using administrative data, while the other four Plans used the hybrid data collection method.

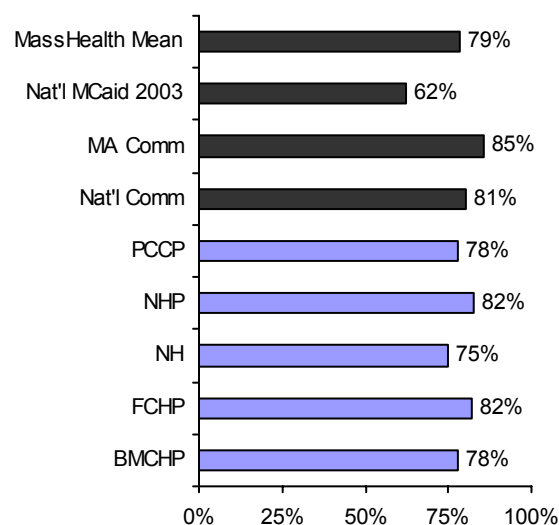
Black bars are benchmarks
White bars represent rates significantly above the MassHealth mean



Cervical Cancer Screening

This chart shows the percentage of women aged 21 - 64, continuously enrolled in the measurement year, who had at least 1 Pap test in a 3 year period. All Plans collected data using the hybrid method.

Black bars are benchmarks
White bars represent rates significantly above the MassHealth mean



Understanding the Results

BREAST CANCER SCREENING

About 65% of MassHealth women between the ages of 52 and 64 had at least one mammogram in the past 2 years. For Breast Cancer Screening, although the majority of MassHealth Plans performed statistically below commercial benchmarks (with the exception of NHP), all MassHealth Plans did significantly better than the National Medicaid 2003 rate (see Statistical Summary Page). This year's Breast Cancer Screening rates cannot be compared to the 2000 rates because the Division deviated from HEDIS specifications in 2000 and measured rates of annual mammograms.

Determining the barriers to breast cancer screening would require additional analyses of HEDIS data, for example to identify specific patient or practice characteristics associated with completed screening. Alternatively, a survey of members could provide information on cultural or other barriers to accepting screening recommendations or not following through with recommendations.

CERVICAL CANCER SCREENING

79% of eligible MassHealth women received a Pap test within the past 3 years. Four of the five Plans performed statistically equivalent to the national commercial average and all performed better than the national Medicaid average. For Plans using the hybrid methodology in both years, screening rates remained unchanged. As for breast cancer screening, a survey of members could provide useful information on barriers to receiving a Pap test.

Health Care for Women

Perinatal Care

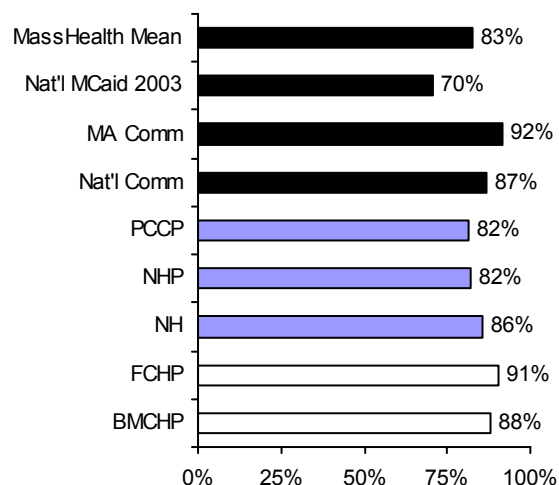
Early and consistent prenatal care contributes to reducing premature births and ensuring a healthy baby (7). Prenatal care typically includes diet/nutritional counseling, risk assessment, patient education and other preventive services, which have maximum impact when applied early in the pregnancy.

Follow-up care after delivery is just as important as prenatal care. The post-partum period includes substantial physical, emotional, and social changes for the mother. However barriers to keeping postpartum visits such as lack of day-care, lack of transportation, and inadequate social supports continue to exist for many women (8).

Timeliness of Prenatal Care

This chart shows the percentage of women with a live birth between November 6, 2001 and November 5, 2002, who were continuously enrolled at least 43 days prior to delivery through 56 days after delivery AND who began prenatal care within the first 13 weeks of pregnancy, or within 42 days of enrollment if more than 13 weeks pregnant at the time of enrollment.

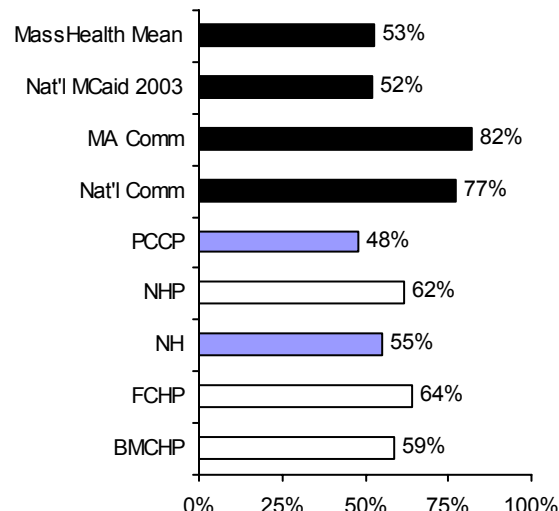
Black bars are benchmarks
White bars represent rates significantly above the MassHealth mean



Postpartum Care

This chart shows the percentage of women who had a live birth (see description for Timeliness of Prenatal Care chart) and a subsequent postpartum visit between 21 and 56 days after delivery.

Black bars are benchmarks
White bars represent rates significantly above the MassHealth mean



Understanding the Results

TIMELINESS OF PRENATAL CARE

Almost 83% of pregnant MassHealth women received timely prenatal care. Three of the five Plans performed at the same level as national commercial Plans (see Statistical Summary page). Relative to Massachusetts commercial Plans, all MassHealth Plans, except for Fallon, had statistically lower HEDIS scores. Compared to the Medicaid 2003 benchmark, all Plan scores were statistically better. All Plans had HEDIS 2003 scores that were not different statistically from their HEDIS 2001 scores.

Barriers to early prenatal care may include limited formal education, teen or unplanned pregnancy, or lack of a routine source of care prior to conception, all of which contribute to delayed care-seeking once pregnant.

POSTPARTUM CARE

53% of MassHealth women received Postpartum care. For all MassHealth Plans, scores were statistically below national and Massachusetts commercial benchmarks. Three of the five Plans (BMCHP, FCHP and NHP) had scores statistically better than the National Medicaid 2003 scores. The PCC Plan's postpartum visit rate improved considerably over their 2001 rate.

Barriers to keeping the postpartum visit include lack of child care, lack of transportation, cultural and/or language barriers, or other social support limitations.

Health Care for Women

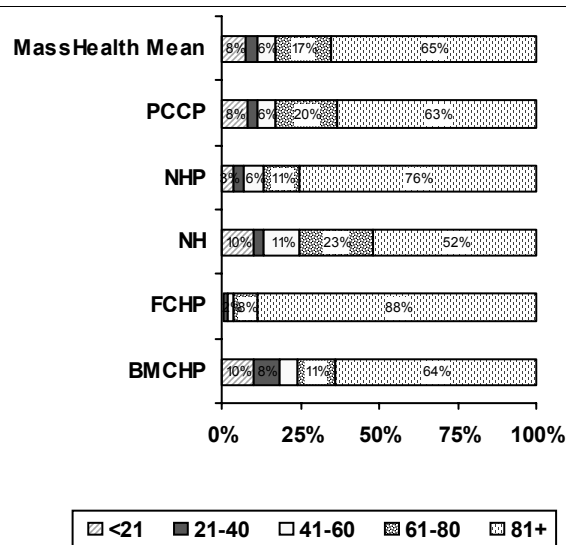
Prenatal Care

The American College of Obstetricians and Gynecologists (ACOG) recommends that prenatal care begin as early in the first trimester of pregnancy as possible. Visits should continue, every four weeks, for the first 28 weeks of pregnancy; then every two weeks until week 36, then weekly until delivery.

The Weeks of Pregnancy at Time of Enrollment measure looks at the time of enrollment in a plan and the beginning of prenatal care. For some women, pregnancy signals the beginning of Medicaid eligibility. Women who enroll in a Plan late in their pregnancy miss receiving recommended care, and also miss having their recommended care included in the HEDIS prenatal measures.

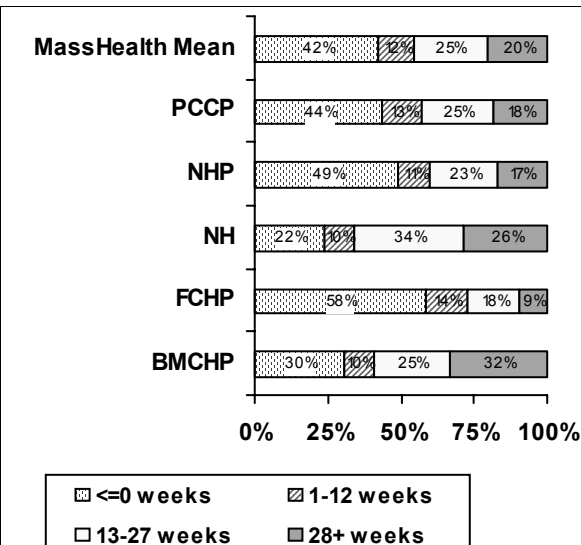
Frequency of Ongoing Prenatal Care

This chart shows the percentage of pregnant women who received <21%, 21%-40%, 41%-60%, 61%-80%, or greater-than-or-equal-to 81% of the expected number of prenatal care visits. The frequency is adjusted based on the time at which the member enrolled.



Weeks of Pregnancy at Time of Enrollment

This chart displays the stage of pregnancy at which expectant mothers enrolled in their health plan. The stages are - prior to pregnancy (<=0 weeks), within the first 12 weeks, during the 13th-27th week of pregnancy, and finally, 28 weeks and after.



Understanding the Results

FREQUENCY OF ONGOING PRENATAL CARE

Overall, 65% of pregnant MassHealth women received 81% (range : 52% to 88%) or more of their expected prenatal visits. All Plans had rates significantly higher than the National 2003 Medicaid benchmark. One plan, the PCC Plan, had a statistically significant improvement in their 2003 rate over their 2001 rate for those expectant mothers who attended 81% or more of their prenatal visits.

WEEKS OF PREGNANCY AT TIME OF ENROLLMENT

Since 2001, there has been an increase in the percentage of women enrolled before 28 weeks of pregnancy. The percent of pregnant women enrolled late (28+ weeks) in their pregnancies declined for all Plans, with NHP and NH showing statistically significant decreases in the number of women who enroll late. The largest improvement was for NH (42% in 2001 to 26% in 2003).

Health Care for Women

Measure and Benchmark Details

Breast Cancer Screening

Breast Cancer Screening

Benchmarks 2003

Nat'l Comm:	74.9%
MA Comm:	80.3%
Nat'l MCaid 2003:	55.9%
MassHealth Weighted Mean:	65.1%
MassHealth Median:	66.1%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP (A)	9,350	14,489	64.5%	63.7%	65.3%
NHP (H)	247	342	72.2%	67.3%	77.1%
NH (H)	185	280	66.1%	60.3%	71.8%
FCHP (H)	130	200	65.0%	58.1%	71.9%
BMCHP (H)	283	411	68.9%	64.3%	73.5%

Cervical Cancer Screening

Cervical Cancer Screening

Benchmarks 2003

Nat'l Comm:	80.5%
MA Comm:	85.4%
Nat'l MCaid 2003:	62.2%
MassHealth Weighted Mean:	78.5%
MassHealth Median:	77.9%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP (H)	261	335	77.9%	73.3%	82.5%
NHP (H)	258	313	82.4%	78.1%	86.8%
NH (H)	270	360	75.0%	70.4%	79.6%
FCHP (H)	214	260	82.3%	77.5%	87.1%
BMCHP (H)	320	411	77.9%	73.7%	82.0%

Rates For: 2000

	Num	Den	Rate	LCL	UCL
PCCP (H)	222	296	79.7%	75.1%	84.3%
NHP (H)	152	196	77.6%	71.7%	83.4%
NH (A)	570	1,067	53.4%	50.4%	56.4%
FCHP (A)	2,149	3,198	67.2%	65.5%	68.8%
BMCHP (H)	330	411	80.3%	76.4%	84.1%

Prenatal and Postpartum Care

Timeliness of Prenatal Care

Benchmarks 2003

Nat'l Comm:	86.7%
MA Comm:	91.8%
Nat'l MCaid 2003:	70.4%
MassHealth Weighted Mean:	82.8%
MassHealth Median:	85.6%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP (H)	335	411	81.5%	77.6%	85.4%
NHP (H)	328	401	81.8%	77.9%	85.7%
NH (H)	352	411	85.6%	82.1%	89.2%
FCHP (H)	220	243	90.5%	86.6%	94.4%
BMCHP (H)	363	411	88.3%	85.1%	91.5%

Rates For: 2001

	Num	Den	Rate	LCL	UCL
PCCP (H)	302	411	73.5%	69.1%	77.9%
NHP (H)	355	410	86.6%	83.2%	90.0%
NH (H)	181	223	81.2%	75.8%	86.5%
FCHP (H)	244	271	90.0%	86.3%	93.8%
BMCHP (H)	350	411	85.2%	81.6%	88.7%



Health Care for Women

Measure and Benchmark Details

Prenatal and Postpartum Care

Postpartum Care

Benchmarks 2003

Nat'l Comm:	77%
MA Comm:	82.2%
Nat'l MCaid 2003:	52.1%
MassHealth Weighted Mean:	52.8%
MassHealth Median:	58.6%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP (H)	198	411	48.2%	43.2%	53.1%
NHP (H)	247	401	61.6%	56.7%	66.5%
NH (H)	227	411	55.2%	50.3%	60.2%
FCHP (H)	155	243	63.8%	57.5%	70.0%
BMCHP (H)	241	411	58.6%	53.8%	63.5%

Rates For: 2001

	Num	Den	Rate	LCL	UCL
PCCP (H)	139	411	33.8%	29.1%	38.5%
NHP (H)	240	410	58.5%	53.6%	63.4%
NH (H)	114	223	51.1%	44.3%	57.9%
FCHP (H)	166	271	61.3%	55.3%	67.2%
BMCHP (H)	220	411	53.5%	48.6%	58.5%

Frequency of Ongoing Prenatal Care

81% or more of expected visits

Benchmarks 2003

Nat'l Comm:	N/A
MA Comm:	N/A
Nat'l MCaid 2003:	41%
MassHealth Weighted Mean:	65.4%
MassHealth Median:	64.2%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP (H)	259	411	63.0%	58.2%	67.8%
NHP (H)	303	401	75.6%	71.2%	79.9%
NH (H)	213	411	51.8%	46.9%	56.8%
FCHP (H)	215	243	88.5%	84.3%	92.7%
BMCHP (H)	264	411	64.2%	59.5%	69.0%

Rates For: 2001

	Num	Den	Rate	LCL	UCL
PCCP (H)	228	411	42.8%	37.9%	47.7%
NHP (H)	299	411	72.7%	68.3%	77.2%
NH (H)	150	343	43.7%	38.3%	49.1%
FCHP (H)	247	305	81.0%	76.4%	85.6%
BMCHP (H)	296	411	72.0%	67.6%	76.5%

Weeks of Pregnancy at Time of Enrollment

Enrolled at 28 or greater weeks pregnant

Benchmarks 2003

Nat'l Comm:	N/A
MA Comm:	N/A
Nat'l MCaid 2003:	N/A
MassHealth Weighted Mean:	20.2%
MassHealth Median:	18.4%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP (A)	1,790	9,747	18.4%	17.6%	19.1%
NHP (A)	633	3,716	17.0%	15.8%	18.3%
NH (A)	347	1,331	26.1%	23.7%	28.5%
FCHP (A)	29	306	9.5%	6.0%	12.9%
BMCHP (A)	717	2,263	31.7%	29.7%	33.6%

Rates For: 2001

	Num	Den	Rate	LCL	UCL
PCCP (A)	2,243	11,784	19.0%	18.3%	19.7%
NHP (H)	102	411	24.8%	20.5%	29.1%
NH (A)	149	357	41.7%	36.5%	47.0%
FCHP (H)	43	305	14.1%	10.0%	18.2%
BMCHP (H)	146	411	35.5%	30.8%	40.3%



Health Care for Women

Measure and Benchmark Details

Weeks of Pregnancy at Time of Enrollment

Year: 2003

	Den	<= 0 weeks	1-12 weeks	13-27 weeks	>=28 weeks
PCCP	9,747	43.7%	13.2%	24.8%	18.4%
NHP	3,716	48.7%	11.0%	23.3%	17.0%
NH	1,331	21.7%	9.5%	34.3%	26.1%
FCHP	306	58.5%	14.4%	17.6%	9.5%
BMCHP	2,263	29.6%	9.7%	24.7%	31.7%

Year: 2001

	Den	<= 0 weeks	1-12 weeks	13-27 weeks	>=28 weeks
PCCP	11,784	42.9%	11.4%	26.6%	19.0%
NHP	411	34.8%	12.2%	28.2%	24.8%
NH	357	16.5%	6.7%	35.0%	41.7%
FCHP	305	50.8%	8.2%	24.6%	14.1%
BMCHP	411	23.6%	7.1%	32.4%	35.5%

Frequency of Ongoing Prenatal Care

Year: 2003

	Den	< 21% of expected visits	21% to <=40% of visits	41% to <=60% of visits	61% to <=80% of visits	>=81% of expected visits
PCCP	411	8.3%	2.9%	5.6%	20.2%	63.0%
NHP	401	3.5%	3.2%	6.5%	11.2%	75.6%
NH	411	10.2%	2.9%	11.2%	23.4%	51.8%
FCHP	243	0.8%	0.8%	2.1%	7.8%	88.5%
BMCHP	411	10.2%	8.3%	5.8%	11.4%	64.2%

Year: 2001

	Den	< 21% of expected visits	21% to <=40% of visits	41% to <=60% of visits	61% to <=80% of visits	>=81% of expected visits
PCCP	411	22.4%	7.3%	10.7%	16.8%	42.8%
NHP	411	9.5%	3.2%	2.7%	11.9%	72.7%
NH	343	24.2%	8.5%	9.9%	13.7%	43.7%
FCHP	305	3.3%	2.0%	3.9%	9.8%	81.0%
BMCHP	411	6.8%	3.9%	4.6%	12.7%	72.0%

Behavioral Health Care

Behavioral Health Care

Statistical Summary

This page summarizes the performance of MassHealth Plans on the HEDIS 2003 effectiveness measures related to Behavioral Health Care. These measures included the Follow-up After Hospitalization measure and the Antidepressant Medication Management measure.

	Follow-Up After Hospitalization for Mental Illness										Antidepressant Medication Management											
	7 Days					30 Days					Effective Acute Phase Treatment				Effective Continuation Phase Treatment				Optimal Practitioner Contacts			
	2003 Rate Compared To:					2003 Rate Compared To:					2003 Rate Compared To:				2003 Rate Compared To:				2003 Rate Compared To:			
	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Plan's 2001 Rate	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Plan's 2001 Rate	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean	Nat'l Comm	MA Comm	Nat'l Mcaid 2003	Mass Health Mean
PCCP	●	●	☆	○	○	●	●	☆	○	○	●	●	○	○	●	●	○	○	☆	○	☆	☆
NHP	○	●	☆	○	○	○	●	☆	☆	○	●	●	○	○	●	●	○	○	☆	●	☆	●
NH	●	●	○	●	●	●	●	●	●	●	●	●	○	○	●	●	○	○	●	●	●	●
FCHP	●	●	○	○	○	○	●	○	○	○	☆	☆	☆	☆	☆	☆	☆	☆	☆	☆	☆	☆
BMCHP	●	●	☆	○	○	●	●	☆	●	○	●	●	●	●	●	●	●	●	○	●	○	●

Legend

- 2003 rate is significantly below the comparison rate, that is, the Plan's 95% upper confidence level is below the comparison rate
- 2003 rate is not significantly different from the comparison rate, that is, the Plan's 95% confidence interval includes the comparison rate
- ☆ 2003 rate is significantly above the comparison rate, that is, the Plan's 95% lower confidence level exceeds the comparison rate

PCCP: Primary Care Clinician Plan NHP: Neighborhood Health Plan NH: Network Health

FCHP: Fallon Community Health Plan BMCHP: Boston Medical Center Healthnet Plan

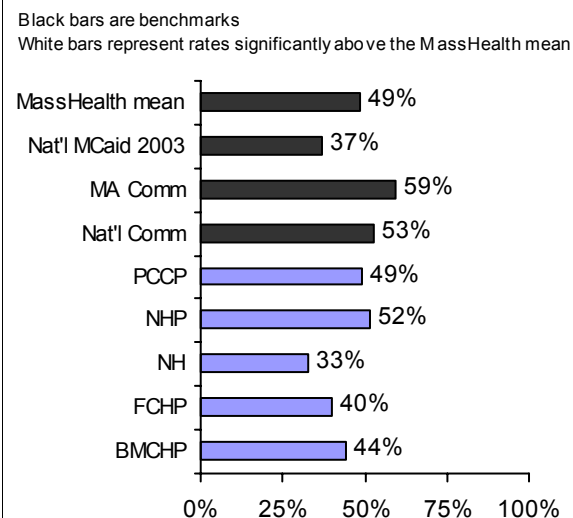
Behavioral Health

Follow-up After Hospitalization for Mental Illness

Follow-up after a hospital stay with a mental health diagnosis provides a critical bridge between the inpatient and outpatient settings (9). This transition, when successfully managed, allows providers to monitor the mental status of the individual, review and fine-tune medication regimes, as well as ensure patient safety. Early follow-up maximizes coordination between settings.

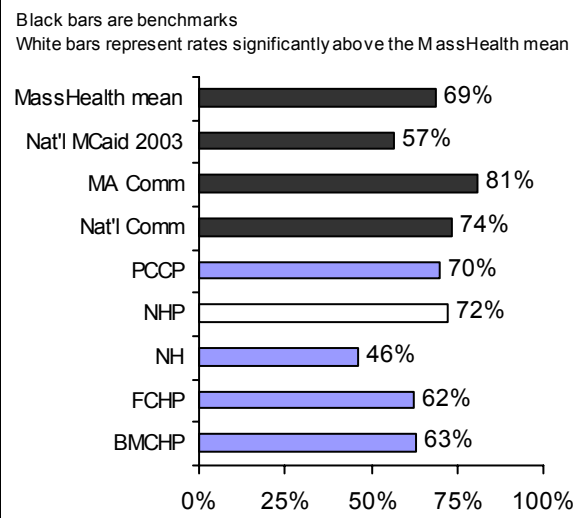
Follow-Up Within 7 Days

This chart shows the percentage of members aged 6+ years who were hospitalized for selected mental health disorders, and then had an ambulatory or day/night mental health visit within 7 days of discharge. To be eligible for this measure, members had to be enrolled continuously for 30 days after discharge. All MassHealth members (Basic and non-Basic) are represented in this chart.



Follow-Up Within 30 Days

This chart displays the percentage of members aged 6+ years who were hospitalized for selected mental health disorders, and then had an ambulatory or day/night mental health visit within 30 days of discharge. To be eligible for this measure, members had to be enrolled continuously for 30 days after discharge. All MassHealth members (Basic and non-Basic) are represented in this chart.



Understanding the Results

49% of MassHealth members with a hospitalization for mental health had a visit within 7 days of discharge. By thirty days, the average had risen to almost 70% (range 46% to 72%).

Three of the five Plans had 7 and 30 day rates statistically above the National Medicaid benchmark. Relative to commercial benchmarks, NHP had both 7 and 30 day follow-up rates that were statistically comparable to the national commercial rate.

All Plans had rates similar to their 2001 rates, with the exception of NH, whose rates for 2003 were statistically lower than in 2001 (Statistical Summary Page).

Improving follow-up after hospitalization begins during the hospitalization. Effective programs transition patients by having them meet outpatient staff prior to discharge. Exploration of low MassHealth follow-up rates may hinge on an analysis of additional data, such as prevalence of other diagnoses, including substance abuse diagnoses.

Behavioral Health

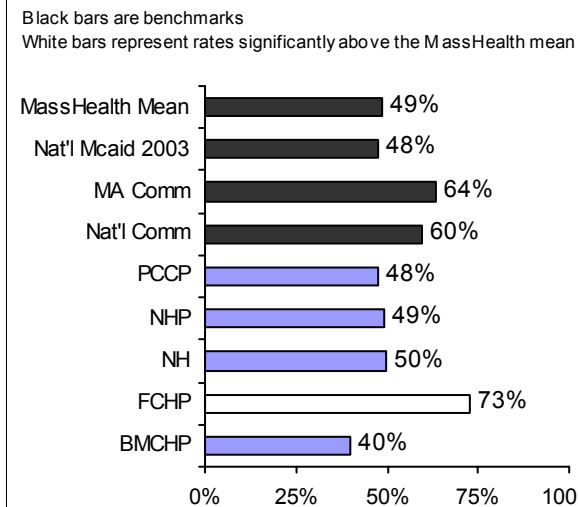
Antidepressant Medication Management

In the U.S., the National Institute of Mental Health reports that depression affects about 9.5 percent of Americans ages 18 and over in a given year, or about 18.8 million people (10). Furthermore, nearly twice as many women (12 percent) as men (7 percent) are affected by a depressive disorder each year.

Antidepressant medication has been repeatedly shown to be effective in treating depression with about 75% of depressed individuals taking antidepressants in 1997 (11). Data from the 2001 MassHealth Clinical Topic Review showed that among MassHealth members with a hospitalization for depression in 2000, 80% took antidepressants post-discharge.

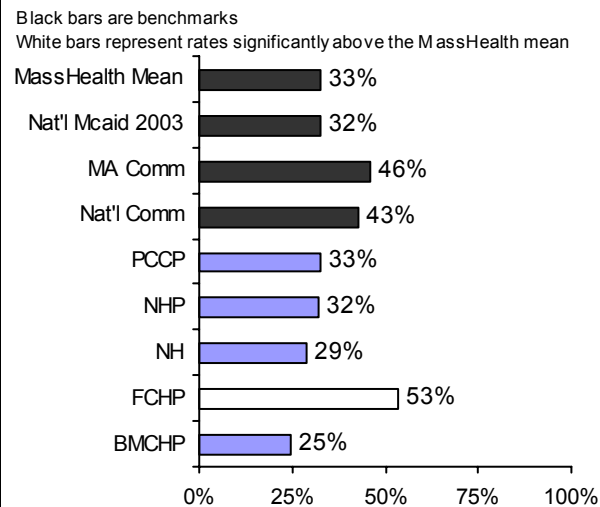
Effective Acute Phase Treatment

This chart shows the percentage of members aged 18+ diagnosed with new Depression, treated with an antidepressant, and who remained on an antidepressant for the entire Acute Treatment Phase (84 days).



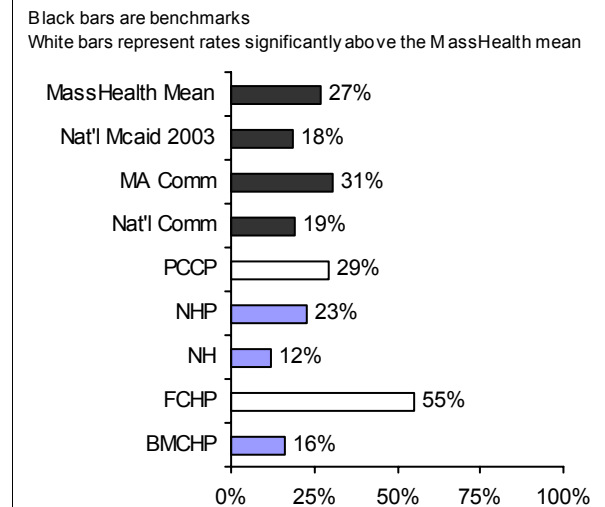
Effective Continuation Phase Treatment

This chart displays the percentage of members aged 18+ diagnosed with new Depression, treated with an antidepressant, and who remained on an antidepressant for at least 180 days. Continuous enrollment for all three antidepressant medication management measures was 365 days encompassing the new episode of medication therapy.



Optimal Practitioner Contacts for Medication Management

This chart presents the percentage of members aged 18+ diagnosed with new Depression, treated with an antidepressant, and who had at least 3 follow-up office visits with a Primary Care Physician or mental health worker during the 84 day Acute Phase.



Understanding the Results

2003 marked the first year that MassHealth Plan data were collected for the Antidepressant Medication Management measure. Among MassHealth members with a new diagnosis of depression and prescribed an antidepressant, 49% remained on the medication for at least 12 weeks, 33% for 180 days. Only 27% of members with depression and medication received at least 3 follow-up office visits during the acute phase. FCHP's performance exceeded all benchmarks for antidepressant medication management.

Improving compliance with medication therapy may require first understanding the barriers to increasing the rate of optimal practitioner contacts. Regular and frequent contact with prescribers in the early days of treatment may be instrumental to helping patients understand expected side effects and the time delay before medication benefit is typically experienced.

Behavioral Health Care

Mental Health Services

These data measure both access to care (members with at least one service) and utilization of services (discharges per member).

Numerous epidemiological studies have documented that vulnerable populations are at particular risk of mental health or chemical dependency issues. When inpatient services are constrained, the use of day/night and ambulatory services may prevent the need for inpatient stays.

Use of Services

This table displays the number (N) and percentage of members who received Mental Health services during the measurement year. Mental Health services are broken down by Inpatient, Day/Night, Ambulatory, and then Any Service.

All MassHealth members (Basic and non-Basic) are represented in this chart.

	<u>Member Months</u>	<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>		<u>Any Service</u>	
		N	%	N	%	N	%	N	%
PCCP	4,654,378	6,575	1.7%	3,099	0.8%	94,284	24.3%	95,813	24.7%
NHP	1,361,704	1,185	1.0%	588	0.5%	18,609	16.4%	18,933	16.7%
NH	488,473	307	0.8%	21	0.1%	5,259	12.9%	5,344	13.1%
FCHP	120,981	94	0.9%	16	0.2%	1,579	15.7%	1,602	15.9%
BMCHP	928,051	533	0.7%	160	0.2%	11,387	14.7%	11,520	14.9%

National Medicaid 2003 0.8% 0.1% 7.0% 7.1%

Inpatient Discharges and ALOS

This table shows the number of inpatient discharges associated with the use of Mental Health services, and the average length of stay (ALOS) for those admissions.

All MassHealth members (Basic and non-Basic) are represented in this chart.

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	4,654,378	138,971	11.4	12,209	2.6
NHP	1,361,704	15,422	9.3	1,659	1.2
NH	488,473	3,426	8.3	413	0.8
FCHP	120,981	1,056	7.7	137	1.1
BMCHP	928,051	6,780	8.9	765	0.8

National Medicaid 2003 6.8 0.9

Behavioral Health Care

Chemical Dependency Services

These data measure both access to care (members with at least one service) and utilization of services (discharges per member).

Numerous epidemiological studies have documented that vulnerable populations are at particular risk of mental health or chemical dependency issues. When inpatient services are constrained, the use of day/night and ambulatory services may prevent the need for inpatient stays.

Use of Services

This table shows the number (N) and percentage of members who received Chemical Dependency services during the measurement year. Chemical Dependency services are broken down by Inpatient, Day/Night, Ambulatory, and then Any Service.

All MassHealth members (Basic and non-Basic) are represented in this table.

	<u>Member Months</u>	<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>		<u>Any Service</u>	
		N	%	N	%	N	%	N	%
PCCP	4,654,378	9,645	2.5%	5,560	1.4%	13,679	3.5%	20,119	5.2%
NHP	1,361,704	1,910	1.7%	223	0.2%	3,023	2.7%	4,176	3.7%
NH	488,473	376	0.9%	3	0.0%	740	1.8%	990	2.4%
FCHP	120,981	142	1.4%	38	0.4%	214	2.1%	300	3.0%
BMCHP	928,051	1,581	2.0%	76	0.1%	2,097	2.7%	3,216	4.2%
National Medicaid 2003			0.3%		0.1%		0.7%		0.9%

Inpatient Discharges and Average Length of Stay

This table displays the number of inpatient discharges associated with the use of Chemical Dependency services, and the average length of stay (ALOS) for those admissions.

All MassHealth members (Basic and non-Basic) are represented in this table.

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	4,654,378	135,124	4.4	30,465	6.5
NHP	1,361,704	20,635	5.0	4,101	3.0
NH	488,473	2,478	4.1	603	1.2
FCHP	120,981	1,182	4.6	259	2.1
BMCHP	928,051	14,163	3.8	3,738	4.0
National Medicaid 2003			5.5		0.5

Behavioral Health Care

Measure and Benchmark Details

Follow-Up After Hospitalization for Mental Illness

7 Days

Benchmarks 2003

Nat'l Comm:	52.6%
MA Comm:	59.1%
Nat'l MCaid 2003:	37.2%
MassHealth Weighted Mean:	48.6%
MassHealth Median:	44.4%

30 Days

Benchmarks 2003

Nat'l Comm:	73.5%
MA Comm:	81%
Nat'l MCaid 2003:	56.7%
MassHealth Weighted Mean:	68.9%
MassHealth Median:	62.8%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP	3,168	6,447	49.1%	47.9%	50.4%
NHP	429	831	51.6%	48.2%	55.1%
NH	86	263	32.7%	26.8%	38.6%
FCHP	31	77	40.3%	28.7%	51.9%
BMCHP	160	360	44.4%	39.2%	49.7%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP	4,503	6,447	69.8%	68.7%	71.0%
NHP	601	831	72.3%	69.2%	75.4%
NH	122	263	46.4%	40.2%	52.6%
FCHP	48	77	62.3%	50.9%	73.8%
BMCHP	226	360	62.8%	57.6%	67.9%

Rates For: 2001

	Num	Den	Rate	LCL	UCL
PCCP	3,573	6,992	51.1%	49.9%	52.2%
NHP	270	476	56.7%	52.2%	61.3%
NH	67	140	47.9%	39.2%	56.5%
FCHP	42	68	61.8%	49.5%	74.1%
BMCHP	39	103	37.9%	28.0%	47.7%

Rates For: 2001

	Num	Den	Rate	LCL	UCL
PCCP	4,908	6,992	70.2%	69.2%	71.3%
NHP	361	476	75.8%	71.9%	79.8%
NH	97	140	69.3%	61.3%	77.3%
FCHP	55	68	80.9%	70.8%	91.0%
BMCHP	60	103	58.3%	48.2%	68.3%



Behavioral Health Care

Measure and Benchmark Details

Antidepressant Medication Management

Effective Acute Phase Treatment

Benchmarks 2003	
Nat'l Comm:	59.8%
MA Comm:	63.6%
Nat'l MCaid 2003:	47.5%
MassHealth Weighted Mean:	48.6%
MassHealth Median:	49.3%

Effective Continuation Phase Treatment

Benchmarks 2003	
Nat'l Comm:	42.8%
MA Comm:	45.9%
Nat'l MCaid 2003:	32.4%
MassHealth Weighted Mean:	32.7%
MassHealth Median:	32%

Optimal Practitioner Contacts for Medication Management

Benchmarks 2003	
Nat'l Comm:	19.1%
MA Comm:	30.8%
Nat'l MCaid 2003:	18.4%
MassHealth Weighted Mean:	27.1%
MassHealth Median:	22.5%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP	1,039	2,186	47.5%	45.4%	49.6%
NHP	385	781	49.3%	45.7%	52.9%
NH	87	175	49.7%	42.0%	57.4%
FCHP	136	187	72.7%	66.1%	79.4%
BMCHP	136	340	40.0%	34.6%	45.4%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP	714	2,186	32.7%	30.7%	34.7%
NHP	250	781	32.0%	28.7%	35.3%
NH	51	175	29.1%	22.1%	36.2%
FCHP	100	187	53.5%	46.1%	60.9%
BMCHP	84	340	24.7%	20.0%	29.4%

Rates For: 2003

	Num	Den	Rate	LCL	UCL
PCCP	642	2,186	29.4%	27.4%	31.3%
NHP	176	781	22.5%	19.5%	25.5%
NH	21	175	12.0%	6.9%	17.1%
FCHP	103	187	55.1%	47.7%	62.5%
BMCHP	54	340	15.9%	11.9%	19.9%

Appendix One

Follow-Up After Hospitalization

Basic and Non-Basic

Behavioral Health Care Follow-Up After Hospitalization

Basic

7 Days

	Num	Den	Rate	LCL	UCL
PCCP	259	677	38.3%	34.5%	42.0%
NHP	82	168	48.8%	41.0%	56.7%
NH	16	71	22.5%	12.1%	33.0%
FCHP	7	17	0.0%	0.0%	0.0%
BMCHP	32	89	36.0%	25.4%	46.5%

30 Days

	Num	Den	Rate	LCL	UCL
PCCP	379	677	56.0%	52.2%	59.8%
NHP	111	168	66.1%	58.6%	73.5%
NH	29	71	40.8%	28.7%	53.0%
FCHP	10	17	0.0%	0.0%	0.0%
BMCHP	45	89	50.6%	39.6%	61.5%

Non-Basic

7 Days

	Num	Den	Rate	LCL	UCL
PCCP	2,909	5,770	50.4%	49.1%	51.7%
NHP	347	663	52.3%	48.5%	56.2%
NH	70	192	36.5%	29.4%	43.5%
FCHP	24	60	40.0%	26.8%	53.2%
BMCHP	128	271	47.2%	41.1%	53.4%

30 Days

	Num	Den	Rate	LCL	UCL
PCCP	4,124	5,770	71.5%	70.3%	72.6%
NHP	490	663	73.9%	70.5%	77.3%
NH	93	192	48.4%	41.1%	55.8%
FCHP	38	60	63.3%	50.3%	76.4%
BMCHP	181	271	66.8%	61.0%	72.6%

NOTE: 'Basic' population members are defined as long term unemployed adults. 'Non-Basic' population members are adults who fall outside of that category.

Appendix Two

Mental Health Service Use

Basic and Non-Basic

Behavioral Health Care Mental Health Services

Basic
Ages 18-64

Use of Services

18-64 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	141,580	3,622	30.7%	332	2.8%	162	1.4%	3,508	29.7%
NHP	38,427	723	22.6%	62	1.9%	30	0.9%	695	21.7%
NH	14,229	230	19.4%	26	2.2%	0	0.0%	220	18.6%
FCHP	3,362	78	27.8%	6	2.1%	3	1.1%	78	27.8%
BMCHP	29,336	585	23.9%	52	2.1%	16	0.2%	568	23.2%

18-64 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	227,646	4,989	26.3%	658	3.5%	239	1.3%	4,671	24.6%
NHP	59,191	1,111	22.5%	162	3.3%	60	1.2%	1,011	20.5%
NH	24,284	320	15.8%	63	3.1%	2	0.1%	300	14.8%
FCHP	5,435	104	23.0%	19	4.2%	0	0.0%	104	23.0%
BMCHP	64,664	926	17.2%	121	2.2%	23	0.4%	881	16.3%

18-64 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	369,226	8,611	28.0%	990	3.2%	401	1.3%	8,179	26.6%
NHP	97,618	1,834	22.5%	224	2.8%	90	1.1%	1,706	21.0%
NH	38,513	550	17.1%	89	2.8%	2	0.1%	520	16.2%
FCHP	8,797	182	24.8%	25	3.4%	3	0.4%	182	24.8%
BMCHP	94,000	1,511	19.3%	173	2.2%	39	0.5%	1,449	18.5%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	141,580	3,736	7.2	522	3.7
NHP	38,427	650	8.2	79	2.1
NH	14,229	308	9.9	31	2.2
FCHP	3,362	34	4.3	8	2.4
BMCHP	29,336	496	7.3	68	2.3

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	227,646	7,919	6.9	1,154	5.1
NHP	59,191	1,293	6.6	197	3.3
NH	24,284	540	6.8	79	3.3
FCHP	5,435	140	5.8	24	4.4
BMCHP	64,664	1,231	6.8	181	2.8

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	369,226	11,655	7.0	1,676	4.5
NHP	97,618	1,943	7.0	276	2.8
NH	38,513	848	7.7	110	2.9
FCHP	8,797	174	5.4	32	3.6
BMCHP	94,000	1,727	6.9	249	2.6



Behavioral Health Care Mental Health Services

Basic
Ages total

Use of Services

Female Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	141,580	3,622	30.7%	332	2.8%	162	1.4%	3,508	29.7%
NHP	38,427	723	22.6%	62	1.9%	30	0.9%	695	21.7%
NH	14,229	230	19.4%	26	2.2%	0	0.0%	220	18.6%
FCHP	3,362	78	27.8%	6	2.1%	3	1.1%	78	27.8%
BMCHP	29,336	585	23.9%	52	2.1%	16	0.7%	568	23.2%

Male Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	227,646	4,989	26.3%	658	3.5%	239	1.3%	4,671	24.6%
NHP	59,191	1,111	22.5%	162	3.3%	60	1.2%	1,011	20.5%
NH	24,284	320	15.8%	63	3.1%	2	0.1%	300	14.8%
FCHP	5,435	104	23.0%	19	4.2%	0	0.0%	104	23.0%
BMCHP	64,664	926	17.2%	121	2.2%	23	0.4%	881	16.3%

Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	369,226	8,611	28.0%	990	3.2%	401	1.3%	8,179	26.6%
NHP	97,618	1,834	22.5%	224	2.8%	90	1.1%	1,706	21.0%
NH	38,513	550	17.1%	89	2.8%	2	0.1%	520	16.2%
FCHP	8,797	182	24.8%	25	3.4%	3	0.4%	182	24.8%
BMCHP	94,000	1,511	19.3%	173	2.2%	39	0.5%	1,449	18.5%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	141,580	3,736	7.2	522	3.7
NHP	38,427	650	8.2	79	2.1
NH	14,229	308	9.9	31	2.2
FCHP	3,362	34	4.3	8	2.4
BMCHP	29,336	496	7.3	68	2.3

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	227,646	7,919	6.9	1,154	5.1
NHP	59,191	1,293	6.6	197	3.3
NH	24,284	540	6.8	79	3.3
FCHP	5,435	140	5.8	24	4.4
BMCHP	64,664	1,231	6.8	181	2.8

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	369,226	11,655	7.0	1,676	4.5
NHP	97,618	1,943	7.0	276	2.8
NH	38,513	848	7.7	110	2.9
FCHP	8,797	174	5.4	32	3.6
BMCHP	94,000	1,727	6.9	249	2.6



Behavioral Health Care Mental Health Services

**Non-Basic
Ages 0-12**

Use of Services

0-12 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	796,811	7,398	11.1%	115	0.2%	84	0.1%	7,378	11.1%
NHP	274,957	1,640	7.2%	29	0.1%	5	0.0%	1,637	7.1%
NH	113,982	579	6.1%	6	0.1%	0	0.0%	577	6.1%
FCHP	23,086	150	7.8%	2	0.1%	0	0.0%	150	7.8%
BMCHP	213,902	1,336	7.5%	18	0.1%	10	0.1%	1,335	7.5%

0-12 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	844,610	12,342	17.5%	315	0.4%	271	0.4%	12,309	17.5%
NHP	284,002	2,805	11.9%	77	0.3%	9	0.0%	2,795	11.8%
NH	120,092	971	9.7%	19	0.2%	2	0.0%	968	9.7%
FCHP	24,141	226	11.2%	5	0.2%	0	0.0%	225	11.2%
BMCHP	214,985	2,185	12.2%	32	0.2%	14	0.1%	2,181	12.2%

0-12 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	1,641,421	19,740	14.4%	430	0.3%	355	0.3%	19,687	14.4%
NHP	558,959	4,445	9.5%	106	0.2%	14	0.0%	4,432	9.5%
NH	234,074	1,550	7.9%	25	0.1%	2	0.0%	1,545	7.9%
FCHP	47,227	376	9.6%	7	0.2%	0	0.0%	375	9.5%
BMCHP	428,887	3,521	9.9%	50	0.1%	24	0.1%	3,516	9.8%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	796,811	4,167	17.8	234	0.3
NHP	274,957	496	13.8	36	0.1
NH	113,982	92	11.5	8	0.1
FCHP	23,086	45	15.0	3	0.1
BMCHP	213,902	499	17.8	28	0.1

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	844,610	18,706	22.7	823	1.0
NHP	284,002	1,044	11.5	91	0.3
NH	120,092	307	12.3	25	0.2
FCHP	24,141	87	17.4	5	0.2
BMCHP	214,985	864	18.4	47	0.2

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	1,641,421	22,873	21.6	1,057	0.6
NHP	558,959	1,540	12.1	127	0.2
NH	234,074	399	12.1	33	0.1
FCHP	47,227	132	16.5	8	0.2
BMCHP	428,887	1,363	18.2	75	0.2



Behavioral Health Care Mental Health Services

**Non-Basic
Ages 13-17**

Use of Services

13-17 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	259,670	6,002	27.7%	302	1.4%	230	1.1%	5,936	27.4%
NHP	88,782	1,267	17.1%	89	1.2%	26	0.4%	1,249	16.9%
NH	29,712	388	15.7%	22	0.9%	0	0.0%	382	15.4%
FCHP	6,723	91	16.2%	6	1.1%	0	0.0%	90	16.1%
BMCHP	56,650	877	18.6%	38	0.8%	9	0.2%	874	18.5%

13-17 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	272,574	6,719	29.6%	251	1.1%	148	0.7%	6,664	29.3%
NHP	82,746	1,149	16.7%	46	0.7%	14	0.2%	1,141	16.5%
NH	28,191	378	16.1%	12	0.5%	2	0.1%	374	15.9%
FCHP	7,193	94	15.7%	1	0.2%	0	0.0%	94	15.7%
BMCHP	58,031	794	16.4%	23	0.5%	10	0.2%	791	16.4%

13-17 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	532,244	12,721	28.7%	553	1.2%	378	0.9%	12,600	28.4%
NHP	171,528	2,416	16.9%	135	0.9%	40	0.3%	2,390	16.7%
NH	57,903	766	15.9%	34	0.7%	2	0.0%	756	15.7%
FCHP	13,916	185	16.0%	7	0.6%	0	0.0%	184	15.9%
BMCHP	114,681	1,671	17.5%	61	0.6%	19	0.2%	1,665	17.4%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	259,670	14,025	20.3	692	2.7
NHP	88,782	1,269	11.4	111	1.3
NH	29,712	170	5.5	31	1.0
FCHP	6,723	17	2.8	6	0.9
BMCHP	56,650	503	10.1	50	0.9

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	272,574	12,405	23.0	540	2.0
NHP	82,746	860	13.7	63	0.8
NH	28,191	181	11.3	16	0.6
FCHP	7,193	7	7.0	1	0.1
BMCHP	58,031	362	10.6	34	0.6

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	532,244	26,430	21.5	1,232	2.3
NHP	171,528	2,129	12.2	174	1.0
NH	57,903	351	7.5	47	0.8
FCHP	13,916	24	3.4	7	0.5
BMCHP	114,681	865	10.3	84	0.7



Behavioral Health Care Mental Health Services

**Non-Basic
Ages 18-64**

Use of Services

18-64 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	1,468,181	40,483	33.1%	2,916	2.4%	1,291	1.1%	39,956	32.7%
NHP	404,324	8,050	23.9%	452	1.3%	299	0.9%	7,961	23.6%
NH	117,024	1,960	20.1%	110	1.1%	10	0.1%	1,933	19.8%
FCHP	38,031	672	21.2%	40	1.3%	11	0.3%	672	21.2%
BMCHP	216,748	3,920	21.7%	160	0.9%	56	0.3%	3,883	21.5%

18-64 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	643,306	15,827	29.5%	1,755	3.3%	686	1.3%	15,371	28.7%
NHP	129,275	2,188	20.3%	268	2.5%	145	1.3%	2,120	19.7%
NH	40,959	518	15.2%	49	1.4%	5	0.1%	505	14.8%
FCHP	13,010	193	17.8%	16	1.5%	2	0.2%	192	17.7%
BMCHP	73,735	897	14.6%	89	1.4%	22	0.4%	874	14.2%

18-64 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	2,111,487	56,310	32.0%	4,671	2.7%	1,977	1.1%	55,327	31.4%
NHP	533,599	10,238	23.0%	720	1.6%	444	1.0%	10,081	22.7%
NH	157,983	2,478	18.8%	159	1.2%	15	0.1%	2,438	18.5%
FCHP	51,041	865	20.3%	56	1.3%	13	0.3%	864	20.3%
BMCHP	290,483	4,817	19.9%	249	1.0%	78	0.3%	4,757	19.7%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	1,468,181	46,316	9.1	5,079	3.5
NHP	404,324	5,951	9.3	640	1.6
NH	117,024	1,170	7.7	152	1.3
FCHP	38,031	543	8.0	68	1.8
BMCHP	216,748	1,449	6.9	211	1.0

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	643,306	31,697	10.0	3,165	4.9
NHP	129,275	3,859	8.7	442	3.4
NH	40,959	658	9.3	71	1.7
FCHP	13,010	183	8.3	22	1.7
BMCHP	73,735	1,376	9.4	146	2.0

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	2,111,487	78,013	9.5	8,244	3.9
NHP	533,599	9,810	9.1	1,082	2.0
NH	157,983	1,828	8.2	223	1.4
FCHP	51,041	726	8.1	90	1.8
BMCHP	290,483	2,825	7.9	357	1.2



Behavioral Health Care Mental Health Services

Non-Basic
Ages total

Use of Services

Female Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	2,524,662	53,883	25.6%	3,333	1.6%	1,605	0.8%	53,270	25.3%
NHP	768,063	10,957	17.1%	570	0.9%	330	0.5%	10,847	16.9%
NH	260,718	2,927	13.5%	138	0.6%	10	0.0%	2,892	13.3%
FCHP	67,840	913	16.1%	48	0.8%	11	0.2%	912	16.1%
BMCHP	487,300	6,133	15.1%	216	0.5%	75	0.2%	6,092	15.0%

Male Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	1,760,490	34,888	23.8%	2,321	1.6%	1,105	0.8%	34,344	23.4%
NHP	496,023	6,142	14.9%	391	0.9%	168	0.4%	6,056	14.7%
NH	189,242	1,867	11.8%	80	0.5%	9	0.1%	1,847	11.7%
FCHP	44,344	513	13.9%	22	0.6%	2	0.1%	511	13.8%
BMCHP	346,751	3,876	13.4%	144	0.5%	46	0.2%	3,846	13.3%

Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	4,285,152	88,771	24.9%	5,654	1.6%	2,710	0.8%	87,614	24.5%
NHP	1,264,086	17,099	16.2%	961	0.9%	498	0.5%	16,903	16.0%
NH	449,960	4,794	12.8%	218	0.6%	19	0.1%	4,739	12.6%
FCHP	112,184	1,426	15.3%	70	0.7%	13	0.1%	1,423	15.2%
BMCHP	834,051	10,009	14.4%	360	0.5%	121	0.2%	9,938	14.3%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	2,524,662	64,508	10.7	6,005	2.4
NHP	768,063	7,716	9.8	787	1.0
NH	260,718	1,432	7.5	191	0.7
FCHP	67,840	605	7.9	77	1.1
BMCHP	487,300	2,451	8.5	289	0.6

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	1,760,490	62,808	13.9	4,528	2.6
NHP	496,023	5,763	9.7	596	1.2
NH	189,242	1,146	10.2	112	0.6
FCHP	44,344	277	9.9	28	0.6
BMCHP	346,751	2,602	11.5	227	0.7

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	4,285,152	127,316	12.1	10,533	2.5
NHP	1,264,086	13,479	9.7	1,383	1.1
NH	449,960	2,578	8.5	303	0.7
FCHP	112,184	882	8.4	105	0.9
BMCHP	834,051	5,053	9.8	516	0.6



Appendix Three

Chemical Dependency Service Use

Behavioral Health Care Chemical Dependency Services

**Basic
Ages 18-64**

Use of Services

18-64 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	141,580	1,960	16.6%	1,025	8.7%	636	5.4%	1,339	11.3%
NHP	38,427	390	12.2%	199	6.2%	35	1.1%	270	8.4%
NH	14,229	113	9.5%	46	3.9%	3	0.3%	77	6.5%
FCHP	3,362	27	9.6%	12	4.3%	5	1.8%	20	7.1%
BMCHP	29,336	339	13.9%	191	7.8%	14	0.6%	211	8.6%

18-64 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	227,646	6,489	34.2%	3,898	20.5%	2,051	10.8%	3,728	19.7%
NHP	59,191	1,539	31.2%	878	17.8%	70	1.4%	963	19.5%
NH	24,284	391	19.3%	213	10.5%	0	0.0%	243	12.0%
FCHP	5,435	138	30.5%	78	17.2%	13	2.9%	90	19.9%
BMCHP	64,664	1,469	27.3%	926	17.2%	24	0.4%	789	14.6%

18-64 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	369,226	8,449	27.5%	4,923	16.0%	2,687	8.7%	5,067	16.5%
NHP	97,618	1,929	23.7%	1,077	13.2%	105	1.3%	1,233	15.2%
NH	38,513	504	15.7%	259	8.1%	3	0.1%	320	10.0%
FCHP	8,797	165	22.5%	90	12.3%	18	2.5%	110	15.0%
BMCHP	94,000	1,808	23.1%	1,117	14.3%	38	0.5%	1,000	12.8%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	141,580	14,243	4.4	3,213	22.7
NHP	38,427	1,943	4.5	433	11.3
NH	14,229	326	4.2	77	5.4
FCHP	3,362	88	4.9	18	5.4
BMCHP	29,336	1,624	4.2	390	13.3

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	227,646	57,127	4.3	13,330	58.6
NHP	59,191	9,373	4.6	2,038	34.4
NH	24,284	1,317	3.7	352	14.5
FCHP	5,435	700	4.3	161	29.6
BMCHP	64,664	8,245	3.5	2,325	36.0

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	369,226	71,370	4.3	16,543	44.8
NHP	97,618	11,316	4.6	2,471	25.3
NH	38,513	1,643	3.8	429	11.1
FCHP	8,797	788	4.4	179	20.3
BMCHP	94,000	9,869	3.6	2,715	28.9



Behavioral Health Care Chemical Dependency Services

Basic
Ages total

Use of Services

Female Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	141,580	1,960	16.6%	1,025	8.7%	636	5.4%	1,339	11.3%
NHP	38,427	390	12.2%	199	6.2%	35	1.1%	270	8.4%
NH	14,229	113	9.5%	46	3.9%	3	0.3%	77	6.5%
FCHP	3,362	27	9.6%	12	4.3%	5	1.8%	20	7.1%
BMCHP	29,336	339	13.9%	191	7.8%	14	0.6%	211	8.6%

Male Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	227,646	6,489	34.2%	3,898	20.5%	2,051	10.8%	3,728	19.7%
NHP	59,191	1,539	31.2%	878	17.8%	70	1.4%	963	19.5%
NH	24,284	391	19.3%	213	10.5%	0	0.0%	243	12.0%
FCHP	5,435	138	30.5%	78	17.2%	13	2.9%	90	19.9%
BMCHP	64,664	1,469	27.3%	926	17.2%	24	0.4%	789	14.6%

Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	369,226	8,449	27.5%	4,923	16.0%	2,687	8.7%	5,067	16.5%
NHP	97,618	1,929	23.7%	1,077	13.2%	105	1.3%	1,233	15.2%
NH	38,513	504	15.7%	259	8.1%	3	0.1%	320	10.0%
FCHP	8,797	165	22.5%	90	12.3%	18	2.5%	110	15.0%
BMCHP	94,000	1,808	23.1%	1,117	14.3%	38	0.5%	1,000	12.8%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	141,580	14,243	4.4	3,213	22.7
NHP	38,427	1,943	4.5	433	11.3
NH	14,229	326	4.2	77	5.4
FCHP	3,362	88	4.9	18	5.4
BMCHP	29,336	1,624	4.2	390	13.3

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	227,646	57,127	4.3	13,330	58.6
NHP	59,191	9,373	4.6	2,038	34.4
NH	24,284	1,317	3.7	352	14.5
FCHP	5,435	700	4.3	161	29.6
BMCHP	64,664	8,245	3.5	2,325	36.0

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	369,226	71,370	4.3	16,543	44.8
NHP	97,618	11,316	4.6	2,471	25.3
NH	38,513	1,643	3.8	429	11.1
FCHP	8,797	788	4.4	179	20.3
BMCHP	94,000	9,869	3.6	2,715	28.9



Behavioral Health Care Chemical Dependency Services

**Non-Basic
Ages 0-12**

Use of Services

0-12 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	796,811	8	0.0%	1	0.0%	1	0.0%	7	0.0%
NHP	274,957	3	0.0%	0	0.0%	0	0.0%	3	0.0%
NH	113,982	2	0.0%	0	0.0%	0	0.0%	2	0.0%
FCHP	23,086	0	0.0%	0	0.0%	0	0.0%	0	0.0%
BMCHP	213,902	3	0.0%	0	0.0%	0	0.0%	3	0.0%

0-12 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	844,610	21	0.0%	3	0.0%	0	0.0%	18	0.0%
NHP	284,002	5	0.0%	0	0.0%	0	0.0%	5	0.0%
NH	120,092	5	0.0%	0	0.0%	0	0.0%	5	0.0%
FCHP	24,141	0	0.0%	0	0.0%	0	0.0%	0	0.0%
BMCHP	214,985	4	0.0%	0	0.0%	0	0.0%	4	0.0%

0-12 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	1,641,421	29	0.0%	4	0.0%	1	0.0%	25	0.0%
NHP	558,959	8	0.0%	0	0.0%	0	0.0%	8	0.0%
NH	234,074	7	0.0%	0	0.0%	0	0.0%	7	0.0%
FCHP	47,227	0	0.0%	0	0.0%	0	0.0%	0	0.0%
BMCHP	428,887	7	0.0%	0	0.0%	0	0.0%	7	0.0%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	796,811	12	4.0	3	0.0
NHP	274,957	0	0.0	0	0.0
NH	113,982	0	0.0	0	0.0
FCHP	23,086	0	0.0	0	0.0
BMCHP	213,902	0	0.0	0	0.0

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	844,610	23	11.5	2	0.0
NHP	284,002	0	0.0	0	0.0
NH	120,092	0	0.0	0	0.0
FCHP	24,141	0	0.0	0	0.0
BMCHP	214,985	0	0.0	0	0.0

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	1,641,421	35	7.0	5	0.0
NHP	558,959	0	0.0	0	0.0
NH	234,074	0	0.0	0	0.0
FCHP	47,227	0	0.0	0	0.0
BMCHP	428,887	0	0.0	0	0.0



Behavioral Health Care Chemical Dependency Services

**Non-Basic
Ages 13-17**

Use of Services

13-17 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	259,670	166	0.8%	19	0.1%	15	0.1%	150	0.7%
NHP	88,782	32	0.4%	5	0.1%	2	0.0%	27	0.4%
NH	29,712	10	0.4%	0	0.0%	0	0.0%	10	0.4%
FCHP	6,723	1	0.2%	0	0.0%	0	0.0%	1	0.2%
BMCHP	56,650	19	0.4%	3	0.1%	0	0.0%	18	0.4%

13-17 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	272,574	337	1.5%	16	0.1%	43	0.2%	319	1.4%
NHP	82,746	40	0.6%	2	0.0%	3	0.0%	36	0.5%
NH	28,191	21	0.9%	1	0.0%	0	0.0%	20	0.9%
FCHP	7,193	4	0.7%	0	0.0%	1	0.2%	3	0.5%
BMCHP	58,031	45	0.9%	6	0.1%	0	0.0%	40	0.8%

13-17 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	532,244	503	1.1%	35	0.1%	58	0.1%	469	1.1%
NHP	171,528	72	0.5%	7	0.0%	5	0.0%	63	0.4%
NH	57,903	31	0.6%	1	0.0%	0	0.0%	30	0.6%
FCHP	13,916	5	0.4%	0	0.0%	1	0.1%	4	0.3%
BMCHP	114,681	64	0.7%	9	0.1%	0	0.0%	58	0.6%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	259,670	213	5.5	39	0.2
NHP	88,782	52	5.8	9	0.1
NH	29,712	0	0.0	0	0.0
FCHP	6,723	0	0.0	0	0.0
BMCHP	56,650	13	3.3	4	0.1

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	272,574	279	6.8	41	0.2
NHP	82,746	14	4.7	3	0.0
NH	28,191	4	4.0	1	0.0
FCHP	7,193	0	0.0	0	0.0
BMCHP	58,031	31	2.6	12	0.2

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	532,244	492	6.2	80	0.2
NHP	171,528	66	5.5	12	0.1
NH	57,903	4	4.0	1	0.0
FCHP	13,916	0	0.0	0	0.0
BMCHP	114,681	44	2.8	16	0.1



Behavioral Health Care Chemical Dependency Services

**Non-Basic
Ages 18-64**

Use of Services

18-64 Female

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	1,468,181	6,465	5.3%	2,474	2.0%	1,583	1.3%	4,897	4.0%
NHP	404,324	1,253	3.7%	407	1.2%	63	0.2%	1,047	3.1%
NH	117,024	275	2.8%	68	0.7%	0	0.0%	243	2.5%
FCHP	38,031	71	2.2%	26	0.8%	12	0.4%	62	2.0%
BMCHP	216,748	773	4.3%	224	1.2%	23	0.1%	636	3.5%

18-64 Male

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	643,306	5,311	9.9%	2,387	4.5%	1,292	2.4%	3,641	6.8%
NHP	129,275	914	8.5%	419	3.9%	50	0.5%	672	6.2%
NH	40,959	173	5.1%	48	1.4%	0	0.0%	140	4.1%
FCHP	13,010	59	5.4%	26	2.4%	7	0.6%	47	4.3%
BMCHP	73,735	564	9.2%	231	3.8%	15	0.2%	396	6.4%

18-64 Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	2,111,487	11,776	6.7%	4,861	2.8%	2,875	1.6%	8,538	4.9%
NHP	533,599	2,167	4.9%	826	1.9%	113	0.3%	1,719	3.9%
NH	157,983	448	3.4%	116	0.9%	0	0.0%	383	2.9%
FCHP	51,041	130	3.1%	52	1.2%	19	0.4%	109	2.6%
BMCHP	290,483	1,337	5.5%	455	1.9%	38	0.2%	1,032	4.3%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	1,468,181	31,777	4.7	6,703	4.6
NHP	404,324	4,231	5.8	728	1.8
NH	117,024	421	4.5	93	0.8
FCHP	38,031	205	5.9	35	0.9
BMCHP	216,748	1,984	4.3	462	2.1

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	643,306	31,450	4.4	7,134	11.1
NHP	129,275	5,022	5.6	890	6.9
NH	40,959	410	5.1	80	2.0
FCHP	13,010	189	4.2	45	3.5
BMCHP	73,735	2,266	4.2	545	7.4

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	2,111,487	63,227	4.6	13,837	6.6
NHP	533,599	9,253	5.7	1,618	3.0
NH	157,983	831	4.8	173	1.1
FCHP	51,041	394	4.9	80	1.6
BMCHP	290,483	4,250	4.2	1,007	3.5



Behavioral Health Care Chemical Dependency Services

Non-Basic
Ages total

Use of Services

Female Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	2,524,662	6,639	3.2%	2,494	1.2%	1,599	0.8%	5,054	2.4%
NHP	768,063	1,288	2.0%	412	0.6%	65	0.1%	1,077	1.7%
NH	260,718	287	1.3%	68	0.3%	0	0.0%	255	1.2%
FCHP	67,840	72	1.3%	26	0.5%	12	0.2%	63	1.1%
BMCHP	487,300	795	2.0%	227	0.6%	23	0.1%	657	1.6%

Male Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	1,760,490	5,669	3.9%	2,406	1.6%	1,335	0.9%	3,978	2.7%
NHP	496,023	959	2.3%	421	1.0%	53	0.1%	713	1.7%
NH	189,242	199	1.3%	49	0.3%	0	0.0%	165	1.0%
FCHP	44,344	63	1.7%	26	0.7%	8	0.2%	50	1.4%
BMCHP	346,751	613	2.1%	237	0.8%	15	0.1%	440	1.5%

Total

	<u>Member Months</u>	<u>Any Service</u>		<u>Inpatient</u>		<u>Day/Night</u>		<u>Ambulatory</u>	
		N	%	N	%	N	%	N	%
PCCP	4,285,152	12,308	3.4%	4,900	1.4%	2,934	0.8%	9,032	2.5%
NHP	1,264,086	2,247	2.1%	833	0.8%	118	0.1%	1,790	1.7%
NH	449,960	486	1.3%	117	0.3%	0	0.0%	420	1.1%
FCHP	112,184	135	1.4%	52	0.6%	20	0.2%	113	1.2%
BMCHP	834,051	1,408	2.0%	464	0.7%	38	0.1%	1,097	1.6%

Inpatient Discharges and ALOS

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	2,524,662	32,002	4.7	6,745	2.7
NHP	768,063	4,283	5.8	737	1.0
NH	260,718	421	4.5	93	0.4
FCHP	67,840	205	5.9	35	0.5
BMCHP	487,300	1,997	4.3	466	1.0

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	1,760,490	31,752	4.4	7,177	4.1
NHP	496,023	5,036	5.6	893	1.8
NH	189,242	414	5.1	81	0.4
FCHP	44,344	189	4.2	45	1.0
BMCHP	346,751	2,297	4.1	557	1.6

	<u>Member Months</u>	<u>Days</u>	<u>ALOS</u>	<u>Disch.</u>	<u>Disch /1000</u>
PCCP	4,285,152	63,754	4.6	13,922	3.2
NHP	1,264,086	9,319	5.7	1,630	1.3
NH	449,960	835	4.8	174	0.4
FCHP	112,184	394	4.9	80	0.7
BMCHP	834,051	4,294	4.2	1,023	1.2

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