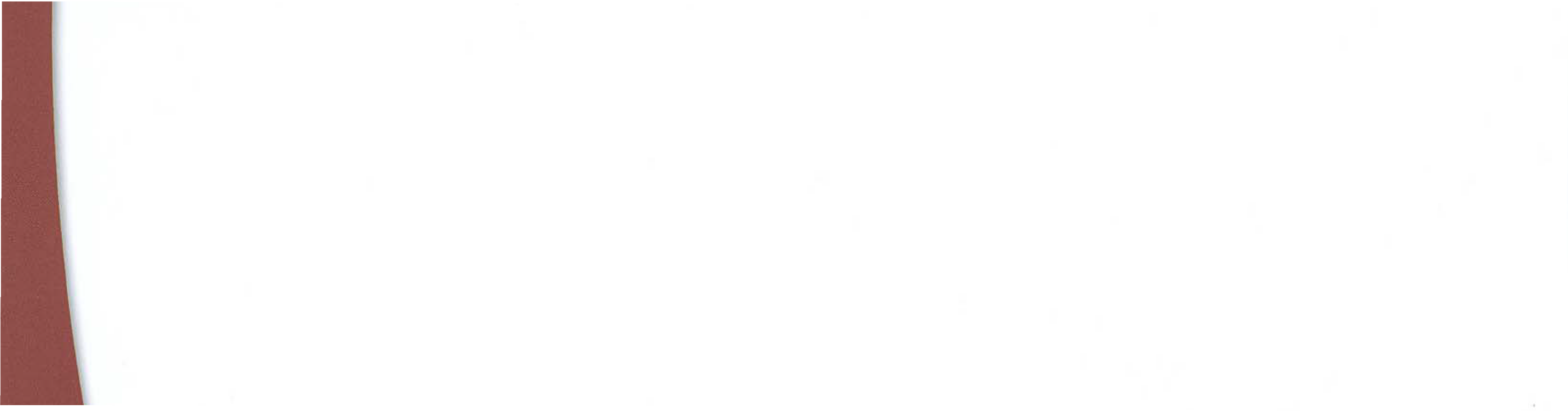
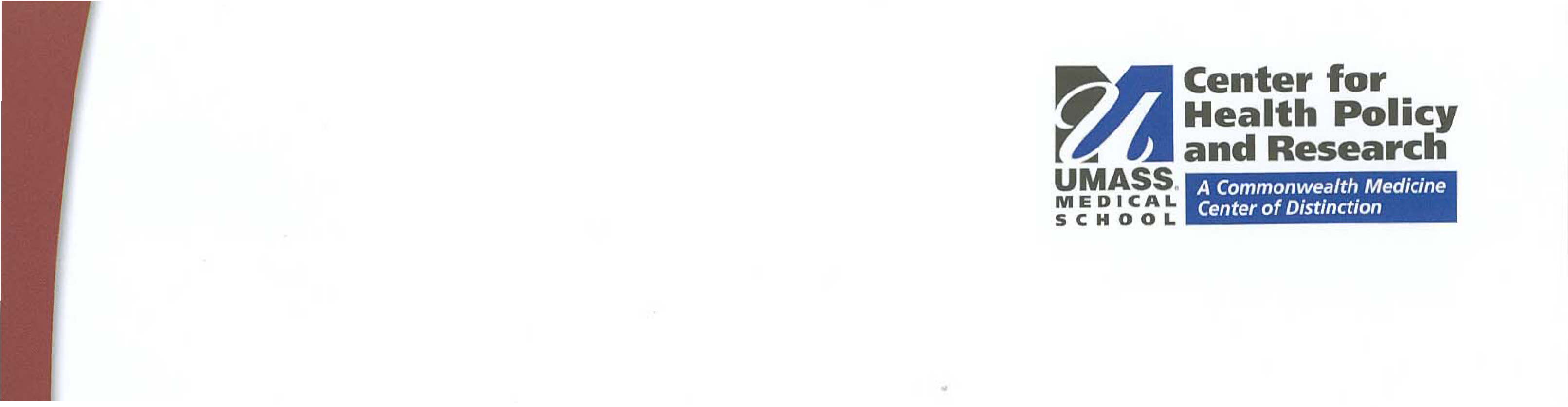
October 2006

MassHealth Managed Care HEDIS® 2006 Final Report

## Prepared by: Project Team:

Center for Health Policy and Research (CHPR) in collaboration with the Mass- Health Office of Acute and Ambulatory Care (OAAC), the MassHealth Behav- ioral Health Program (MHBH), and the MassHealth Office of Clinical Affairs (OCA)



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**Table of Contents**

Executive Summary 2

Introduction 7

Organization of the MassHealth Managed Care HEDIS 2006 Report 9

Health Plan Profiles 11

Data Collection and Analysis Methods 13

Staying Healthy 17

[Childhood Immunization Status 18](#_TOC_250004)

[Adolescent Immunization Status 22](#_TOC_250003)

Well-Child Visits for Infants and Young Children 24

Adolescent Well-Care Visits 26

Children and Adolescent’s Access to Primary Care Practitioners. 28

Living With Illness 33

[Comprehensive Diabetes Care 34](#_TOC_250002)

[Use of Appropriate Medications for People with Asthma 42](#_TOC_250001)

Use of Services 47

Mental Health Utilization 48

Identification of Alcohol and Other Drug Services and Chemical Dependency Utilization 49

Appendix A: MassHealth Regions and Service Areas 51

**Appendix B:** Antigen-Specific Childhood and Adolescent Immunization Rates. 53

**Appendix C:** Well-Child Visits in the First Fifteen Months of Life (0, 1, 2, 3, 4 and 5 visits). 57

**Appendix D:** Comprehensive Diabetes Care—PCC Plan Members with Essential Coverage 59

**Appendix E:** Use of Appropriate Medication for People with Asthma—PCC Plan Members with Essential Coverage 63

**Appendix F:** Mental Health Utilization Rates, Age and Gender Stratifications, All Plans 65

**Appendix G:** Chemical Dependency Utilization Rates, Age and Gender Stratifications, All Plans 75

**Appendix H:** PCC Plan Mental Health Utilization Rates for Members with Basic, Essential, and

[Non-Basic/Non-Essential Coverage 79](#_TOC_250000)

**Appendix I:** PCC Plan Chemical Dependency Utilization Rates for Members with Basic, Essential,

and Non-Basic/Non-Essential Coverage 83

References 85

October 2006| MassHealth Managed Care HEDIS 2006 Final Report

#### Background

The MassHealth Managed Care HEDIS® 2006 Re- port presents information on the quality of care pro- vided by the five health plans serving the Mass- Health managed care population (Boston Medical Center HealthNet Plan, Fallon Community Health Plan, Neighborhood Health Plan, Network Health and the Primary Care Clinician Plan). This assess- ment was conducted by the Center for Health Pol- icy and Research (CHPR), the MassHealth Office of Acute and Ambulatory Care (OAAC), the Mass- Health Behavioral Health Program (MHBH), and the MassHealth Office of Clinical Affairs (OCA) by using a subset of HEDIS (Health Plan Employer Data and Information Set) measures. HEDIS was developed by the National Committee for Quality Assurance (NCQA) and is the most widely used set of standardized performance measures to measure and report on the quality of care delivered by health care organizations. Through this collabora- tive project, CHPR, OAAC, MHBH and OCA have evaluated a broad range of clinical and service ar- eas that are of importance to MassHealth mem- bers, policy makers and program staff.

#### Measures Selected for HEDIS 2006

The MassHealth measurement set for 2006 fo- cused on three domains: “staying healthy” (e.g., well-child visits, adolescent well-care visits, child- hood and adolescent immunization, and children and adolescent’s access to primary care practitio- ners), “living with illness” (e.g., comprehensive dia- betes care and use of appropriate medications for people with asthma), and the utilization of services (e.g., the use of mental health and chemical de- pendency services).

#### Summary of Overall Results

Results from the MassHealth Managed Care HE- DIS 2006 project demonstrate that MassHealth plans performed well overall when compared to the

2006 rates for other Medicaid plans around the country. For the purpose of this report, we con- ducted tests of statistical significance and com- pared the performance of the individual Mass- Health plans with that of the top 25% of all Medi- caid plans in the country for 2006 (represented by the 2006 national Medicaid 75th percentile, ob- tained from NCQA’s Quality Compass® database).

MassHealth plans generally reported rates that were significantly better than the 2006 national Medicaid 75th percentile for the measures assess- ing childhood and adolescent immunization status, well-child and adolescent well-care visits, and chil- dren and adolescent’s access to primary care prac- titioners. Results were mixed for the Comprehen- sive Diabetes Care measure, with some plans per- forming above the benchmark, some plans per- forming below the benchmark, and some plans with rates that were statistically no different from the benchmark. Performance on the Use of Appropri- ate Medications for People with Asthma measure was least favorable in relation to the 2006 national Medicaid 75th percentile benchmark, as compared to the other HEDIS 2006 measures. However, sig- nificant changes to the eligible population criteria for this measure since HEDIS 2005 make it difficult to interpret 2006 performance.

**MassHealth HEDIS 2006 Report Highlights**

* MassHealth plans generally reported rates that were significantly better than the 2006 national Medicaid 75th percentile for the measures as- sessing childhood and adolescent immuniza- tion status, well-child and adolescent well-care visits, and children and adolescent’s access to primary care practitioners. The 2006 national Medicaid 75th percentile represents a level of performance that was exceeded by only the top 25% of all Medicaid plans reporting HEDIS 2006 data.
* Results were mixed for the Comprehensive Diabetes Care measure, with some plans per- forming above the benchmark, some plans per- forming below the benchmark, and some plans with rates that were statistically no different from the benchmark.
* Performance on the Use of Appropriate Medi- cations for People with Asthma measure was least favorable in relation to the 2006 national Medicaid 75th percentile benchmark, as com- pared to the other HEDIS 2006 measures.

Results for most measures showed statistically significant variation between plans (i.e., in many cases plans had rates that were statistically differ- ent from each other). The exception was the LDL testing rate of the Comprehensive Diabetes Care measure and the Use of Appropriate Medications for People with Asthma measure (5-9 and 10-17 year old rates only). The cause of variation in HE- DIS rates across MassHealth plans is unknown.

CHPR and MassHealth are undertaking additional analyses of HEDIS 2006 data to begin to under- stand what member, provider-group, and health plan characteristics influence MassHealth plan HE- DIS rates. The results of these analyses may be included in future HEDIS reports.

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

**Executive Summary**

*Quality Compass® is a registered trademark of the National Committee for Quality Assurance (NCQA).*

**Executive Summary (*continued*)**

#### Childhood Immunization Status

* For Combination 2 (4 diptheria-tetanus- pertussis, 3 injectable polio, 1 measles- mumps-rubella, 3 H influenza type B, 3 hepati- tis B and 1 chicken pox vaccine by age 2), three MassHealth plans (NHP, FCHP and BMCHP) performed significantly better than the 2006 national Medicaid 75th percentile.
* Three plans (NHP, NH and BMCHP) reported Combination 2 rates that were significantly better than their HEDIS 2004 rates. (NCQA has made several changes to this measure that should be considered when comparing HEDIS 2006 and HEDIS 2004 rates. See page 18 for more information.)
* MassHealth rates for Combination 3 (all Com- bination 2 immunizations plus 4 pneumococcal conjugate vaccines) ranged from 51.3% to 72.3%. The Combination 3 rate was a new to the HEDIS measurement set for HEDIS 2006. NCQA does not release benchmark data for the first year a measure is collected. There- fore, no benchmark data for this measure is included in the report.

#### Adolescent Immunization Status

* For Combination 2 (2nd dose of measles- mumps-rubella, 3 hepatitis B and 1 chicken pox vaccine by age 13), four MassHealth plans (NHP, NH, FCHP and BMCHP) per- formed significantly better than the 2006 na- tional Medicaid 75th percentile.
* Two plans (FCHP and BMCHP) reported Combination 2 rates that were significantly better than their HEDIS 2004 rates.

#### Well-Child Visits in the First Fifteen Months of Life (0, 1, 2, 3, 4, 5, and 6 or more visits)

* For the six or more visit rate, all five Mass- Health plans performed significantly better than the 2006 national Medicaid 75th percen- tile.
* Three plans (PCC Plan, FCHP and BMCHP) reported rates of six or more visits that were

significantly better than their HEDIS 2004 rates.

#### Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life (at least one visit during 2005)

* All five MassHealth plans performed signifi- cantly better than the 2006 national Medicaid 75th percentile.
* One plan (PCC Plan) reported a rate that was significantly better than its HEDIS 2004 rate.

#### Adolescent Well-Care Visits (at least one visit during 2005)

* All five MassHealth plans performed signifi- cantly better than the 2006 national Medicaid 75th percentile.
* One plan (PCC Plan) reported a rate that was significantly better than its HEDIS 2004 rate.

#### Children and Adolescent’s Access to Primary Care Practitioners (at least one visit during 2005 for the 12-24 month and 25 month-6 year age groups; at least one visit during 2004 or 2005 for 7-11 and 12-19 age groups)

* Fewer plans had rates for the 12-24 month and 25 month-6 year measures that were sig- nificantly better than the 2006 national Medi- caid 75th percentile compared to the 7-11 and 12-19 year old rates (for which all five Mass- Health plans performed significantly better than the 2006 national 75th percentile).
* Several plans had rates that were significantly better than their HEDIS 2004 rates (PCC Plan for all four age-stratified rates, BMCHP for the 12-24 month rate, and NHP for the 12-19 year rate).

#### Comprehensive Diabetes Care

* This measure assesses seven areas of diabe- tes care: HbA1c testing, HbA1c control, LDL testing, LDL control (2 rates), eye exams, and screening for kidney disease.
* Performance on the seven rates comprising this measure was mixed, particularly for the HbA1c control and two LDL control measures.
* Four of the five plans (NHP, NH, FCHP and BMCHP) had at least one rate of the seven rates that was significantly better than their HEDIS 2004 rate. There was one rate (HbA1c testing) for which no MassHealth plan per- formed significantly better or worse than the HEDIS 2004 rates.

#### Use of Appropriate Medications for People with Asthma

* There were no plans that performed signifi- cantly better than the 2006 national Medicaid 75th percentile for any of the measure’s age stratified rates (5-9 year, 10-17 year, and 18- 56 year) or the combined rate (18-56 year).
* NCQA made a significant change to the defini- tion of the eligible population for this measure for HEDIS 2006. Due to the significance of this change, comparisons to HEDIS 2004 are inappropriate.

#### Mental Health Utilization—Percentage of Mem- bers Using Services

* Between 15.4% and 28.0% of MassHealth plan members received some type of mental health service from their plan. The percentage of members who received inpatient services ranged from 0.6% to 1.7%, intermediate ser- vices from 0.1% to 1.4%, and ambulatory ser- vices from 15.3% to 27.5%.

#### Mental Health Utilization—Inpatient Discharges and ALOS

* Inpatient discharge rates per 1,000 members ranged from 0.7 to 2.3.
* The average length of stay (ALOS) for inpa- tient discharges ranged from 7.8 to 13.0 days.

*(continued on next page)*

**Executive Summary (*continued*)**

#### Identification of Alcohol and Other Drug Ser- vices

* Between 2.2% and 5.5% of MassHealth plan members received some type of chemical de- pendency service from their plan. The per- centage of members who received inpatient services ranged from 0.2% to 1.6%, intermedi- ate services from 0.0% to 1.8%, and ambula- tory services from 1.9% to 4.6%.

#### Chemical Dependency Utilization—Inpatient Discharges and ALOS

* Inpatient discharge rates per 1,000 members ranged from 0.8 to 2.4.
* The average length of stay (ALOS) for inpa- tient discharges ranged from 3.8 to 5.3 days.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Summary of MassHealth Managed Care HEDIS 2006 Results** | | | | | | | | |
|  | **HEDIS 2006 Measure** | **2006 National Medicaid 75**th **Percentile** | **PCC Plan** | **NHP** | **NH** | **FCHP** | **BMCHP** |  |
|  | **Childhood Immunization** |  | | | | | |
| Combination 2\* | 78.5% | 69.8%↓ | 87.1%↑ | 77.9% | 86.9%↑ | 84.2%↑ |
| Combination 3\* | n/a | 51.3% | 68.1% | 61.6% | 72.3% | 66.4% |
| **Adolescent Immunization (Combination 2\*)** | 58.2% | 60.8% | 76.7%↑ | 71.5%↑ | 89.5%↑ | 84.7%↑ |
| **Well-Child Visits in the First Fifteen Months of Life (6+ Visits)** | 59.2% | 90.8%↑ | 79.4%↑ | 69.1%↑ | 70.7%↑ | 83.5%↑ |
| **Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life (one visit in 2005)** | 70.8% | 87.3%↑ | 83.5%↑ | 81.0%↑ | 79.2%↑ | 81.3%↑ |
| **Adolescent Well-Care Visits (one visit in 2005)** | 47.9% | 61.1%↑ | 65.4%↑ | 60.1%↑ | 53.2%↑ | 69.1%↑ |
| **Children and Adolescent's Access to Primary Care Practitioners** |  | | | | | |
| Ages 12-24 Months (one visit in 2005) | 97.5% | 99.6%↑ | 97.7% | 89.9%↓ | 98.0% | 96.0%↓ |
| Ages 25 Months-6 Years (one visit in 2005) | 88.6% | 98.7%↑ | 93.2%↑ | 87.7%↓ | 93.9%↑ | 91.1%↑ |
| Ages 7-11 Years (one visit in 2004 or 2005) | 89.3% | 97.8%↑ | 95.6%↑ | 92.7%↑ | 97.6%↑ | 93.4%↑ |
| Ages 12-19 Years (one visit in 2004 or 2005) | 87.7% | 96.0%↑ | 93.8%↑ | 91.0%↑ | 96.0%↑ | 90.6%↑ |
| **Comprehensive Diabetes Care** |  | | | | | |
| HbA1c Testing (annual) | 84.9% | 86.4% | 91.2%↑ | 85.2% | 94.0%↑ | 90.8%↑ |
| Poor HbA1c Control (>9.0%)\*\* | 37.3% | 48.7%↓ | 32.6% | 51.3%↓ | 27.2%↑ | 33.8% |
| Eye Exams (annual) | 61.5% | 54.3%↓ | 65.5% | 59.9% | 56.3% | 69.8%↑ |
| Monitoring Kidney Disease (annual) | 59.7% | 57.4% | 63.7% | 60.8% | 60.9% | 70.6%↑ |
| LDL Testing (past 2 years) | 88.1% | 90.5% | 91.5%↑ | 88.1% | 90.1% | 91.2%↑ |
| LDL Control (<130 mg/dL) | 61.8% | 48.2%↓ | 63.5% | 46.2%↓ | 70.2%↑ | 70.6%↑ |
| LDL Control (<100 mg/dL) | 41.0% | 30.7%↓ | 38.2% | 25.8%↓ | 43.7% | 46.2%↑ |
| **Use of Appropriate Medications for People with Asthma (5-56 Years)\*\*\*** | 89.7% | 82.9%↓ | 87.6%↓ | 85.8%↓ | 75.3%↓ | 89.2%↓ |

\* See page 3 for a list of the immunizations that comprise each combination rate.

\*\* This measure is the percentage of members whose HbA1c was in poor control. Therefore, a lower rate indicates better performance.

\*\*\* Benchmarks are not available for this measure.

**Key:** PCC Plan—Primary Care Clinician Plan FCHP—Fallon Community Health Plan NHP—Neighborhood Health Plan BMCHP—Boston Medical Center HealthNet Plan NH—Network Health

↑ Indicates a rate that is significantly better than the 2006 national Medicaid 75th percentile.

↓ Indicates a rate that is significantly worse the 2006 national Medicaid 75th percentile.

**Summary of MassHealth Managed Care HEDIS 2006 Results (continued)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **HEDIS 2006 Measure** | **2006 National Medicaid 75**th **Percentile** | **PCC Plan** | **NHP** | **NH** | **FCHP** | **BMCHP** |
| **Mental Health Utilization: Percentage of Members Using Services** |  | | | | | |
| Inpatient services | 0.9% | 1.7% | 0.6% | 1.0% | 1.1% | 1.0% |
| Intermediate services | 0.0% | 1.4% | 0.6% | 0.1% | 0.1% | 0.2% |
| Ambulatory services | 10.4% | 27.5% | 15.3% | 19.9% | 21.2% | 20.0% |
| Any service | 10.6% | 28.0% | 15.4% | 20.0% | 21.3% | 20.1% |
| **Mental Health Utilization: Inpatient Discharges and ALOS** |  | | | | | |
| Days\* | n/a | 86,863 | 8,039 | 8,756 | 1,406 | 18,452 |
| Average length of stay (ALOS) | 8.5 | 13.0 | 9.4 | 8.3 | 8.5 | 7.8 |
| Discharges\* | n/a | 6,681 | 857 | 1,049 | 165 | 2,368 |
| Discharges/1000 Members | 1.0 | 2.3 | 0.7 | 1.2 | 1.5 | 1.4 |
| **Identification of Alcohol and Other Drug Services** |  | | | | | |
| Inpatient services | 1.0% | 0.2% | 0.6% | 1.5% | 1.5% | 1.6% |
| Intermediate services | 0.0% | 1.8% | 0.2% | 0.0%\*\* | 0.5% | 0.1% |
| Ambulatory services | 2.1% | 4.6% | 1.9% | 3.2% | 3.5% | 4.0% |
| Any service | 2.6% | 5.5% | 2.2% | 3.7% | 4.0% | 4.5% |
| **Chemical Dependency Utilization: Inpatient Dis- charges and ALOS** |  | | | | | |
| Days\* | n/a | 38,260 | 3,731 | 6,170 | 445 | 8,290 |
| Average length of stay (ALOS) | 6.2 | 5.3 | 4.0 | 4.3 | 3.8 | 3.8 |
| Discharges\* | n/a | 7,217 | 925 | 1,448 | 118 | 2,189 |
| Discharges/1000 Members | 0.4 | 2.4 | 0.8 | 1.7 | 1.0 | 1.3 |

* Benchmarks are not available for this measure

\*\* actual rate is 0.0004%

|  |  |  |
| --- | --- | --- |
| **Key:** | PCC Plan—Primary Care Clinician Plan | FCHP—Fallon Community Health Plan |
|  | NHP—Neighborhood Health Plan | BMCHP—Boston Medical Center HealthNet Plan |
|  | NH—Network Health |  |

Introduction

**Introduction**

#### Purpose of the Report

This report presents the results of the Mass- Health Managed Care HEDIS 2006 project. This report was designed to be used by MassHealth program managers and by managed care organi- zation (MCO) managers to identify plan perform- ance on select HEDIS measures, compare per- formance with that of other MassHealth managed care plans and with national benchmarks, identify opportunities for improvement, and set quality improvement goals.

#### Project Background

The Center for Health Policy and Research (CHPR) collaborated with the MassHealth Office of Acute and Ambulatory Care (OAAC), the MassHealth Behavioral Health Program (MHBH), and the MassHealth Office of Clinical Affairs (OCA) to conduct an annual assessment of the performance of all MassHealth managed care organizations (MCOs) and the Primary Care Cli- nician Plan (PCC Plan), the primary care case management program administered by the Ex- ecutive Office of Health and Human Services (EOHHS). CHPR, OAAC, MHBH and OCA con-

duct this annual assessment by using a subset of HEDIS measures. Developed by the National Committee for Quality Assurance (NCQA), HE- DIS is the most widely used set of standardized performance measures to measure and report on the quality of care delivered by health care or- ganizations. HEDIS includes clinical measures, as well as measures of access to care and utili- zation of services.

The measures selected for the MassHealth Man- aged Care HEDIS 2006 project assess the per- formance of the five MassHealth plans that pro-

vided health care services to MassHealth man- aged care members during the 2005 calendar year. The five MassHealth plans included in this report are the Primary Care Clinician Plan (PCC Plan), Neighborhood Health Plan (NHP), Net- work Health (NH), Fallon Community Health Plan (FCHP), and Boston Medical Center HealthNet Plan (BMCHP). Descriptive information about each health plan can be found in the Health Plan Profiles section on page 11.

#### MassHealth HEDIS 2006 Measures

MassHealth selected twelve measures for the HEDIS 2006 project. The twelve measures in- cluded in this report assess health care quality in three key areas: clinical quality, access and availability of care, and use of services.

The clinical quality measures included in this re- port provide information about preventive ser- vices and the management of chronic illness.

The specific topics evaluated in this report are childhood and adolescent immunization, compre- hensive diabetes care, and the use of appropri- ate medications for people with asthma.

The access and availability of care measures included in this report provide information about the ability of members to get the basic and im- portant services they need. The specific topics evaluated include well-child visits in the first fif- teen months of life; well-child visits in the third, fourth, fifth, and sixth years of life; adolescent well-care visits; and children and adolescent’s access to primary care practitioners.

The use of service data included in this report are stratified by age and gender, but are not ad- justed for any other member characteristic such

as comorbidity. Use of service measures provide information about what services health plan members utilize. Health care utilization is af- fected by member characteristics such as age, sex, comorbidities, and socioeconomic status, all of which could vary across plans. The specific services evaluated in this report are mental health service and chemical dependency service utilization.

**Note:** MassHealth assesses member satisfac- tion through the biennial administration of the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey. Results of the MassHealth CAHPS measurement effort can be found in the biennial MassHealth CAHPS report produced by the UMASS Center for Survey Re- search (CSR).

**Organization of the MassHealth Managed Care HEDIS 2006 Report**

This report presents the results of the MassHealth Managed Care HEDIS 2006 project in three sections. Two of the sections are based on the consumer reporting domains used in NCQA’s health plan report cards (i.e., Staying Healthy and Living with Illness). These two domains group clinical and access to care HEDIS measures with similar characteristics. The third section (i.e., Use of Services) includes data on the utilization of mental health and chemical dependency services.

|  |  |  |
| --- | --- | --- |
| **REPORT SECTION** | **DEFINITION** | **MEASURES SELECTED BY MASSHEALTH FOR HEDIS 2006 REPORTING** |
| Staying Healthy | These measures provide information about how well a plan provides ser- vices that maintain good health and prevent illness. | Childhood Immunization Status Adolescent Immunization Status  Well-Child Visits in the First 15 Months of Life  Well-Child Visits in the 3rd, 4th, 5th and 6th Years of Life Adolescent Well-Care Visits  Children and Adolescent’s Access to Primary Care Practitioners |
| Living with Illness | These measures provide information about how well a plan helps people manage chronic illness. | Comprehensive Diabetes Care  Use of Appropriate Medications for People with Asthma |
| Use of Services | These measures provide information about what services health plan members utilize. | Mental Health Utilization– Percentage of Members Using Services  Mental Health Utilization– Inpatient Discharges and Average Length of Stay Identification of Alcohol and Other Drug Services  Chemical Dependency Utilization– Inpatient Discharges and Average Length of Stay |

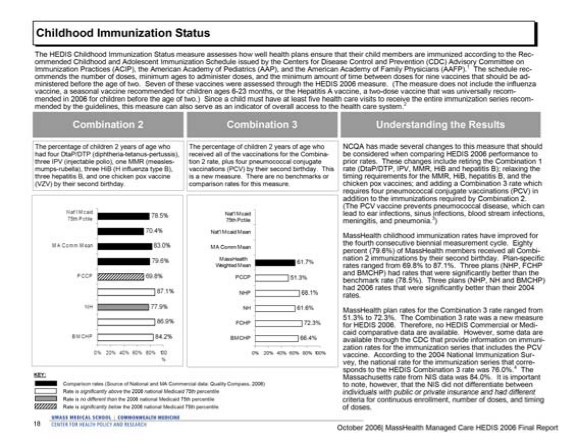
This report also includes appendices that provide more detailed results:

* + **Appendix A** includes a list of the MassHealth regions and the service areas the regions cover.
  + **Appendix B** includes Childhood and Adolescent Immunization rates for individual immunizations (e.g., MMR, DTaP, hepatitis B, etc.).
  + **Appendix C** includes the 0 visit, 1 visit, 2 visit, 3 visit, 4 visit and 5 visit rates for the Well-Child Visit in the First 15 Months of Life measure.
  + **Appendix D** presents data for the Comprehensive Diabetes Care measure for PCC Plan members with Essential coverage.
  + **Appendix E** presents data for the Use of Appropriate Medications for People with Asthma measure for PCC Plan members with Essential coverage.
  + **Appendix F** presents age and gender stratified rates for the Mental Health Utilization measures (percentage of members using services, inpatient dis- charges, and average length of stay).
  + **Appendix G** includes age and gender stratified rates for the Identification of Alcohol and Other Drug Services and Chemical Dependency Utilization measures (inpatient discharges and average length of stay).
  + **Appendix H** includes age and gender stratified rates for the Mental Health Utilization measure (percentage of member using services, inpatient dis- charges, and average length of stay) measures for PCC Plan members with Basic, Essential, or Non-Basic/Non-Essential coverage.
  + **Appendix I** presents age and gender stratified rates fo**r** the Identification of Alcohol and Other Drug Services and Chemical Dependency Utilization measures (inpatient discharges and average length of stay) for PCC Plan members with Basic, Essential, and Non-Basic/Non-Essential coverage.

**Organization of the MassHealth Managed Care HEDIS 2006 Report**

Name of measure

Information on the intent of each measure, including any clinical guidelines on which it is based



Statistical summary comparing plan rates to comparison rates named at the top of each column.

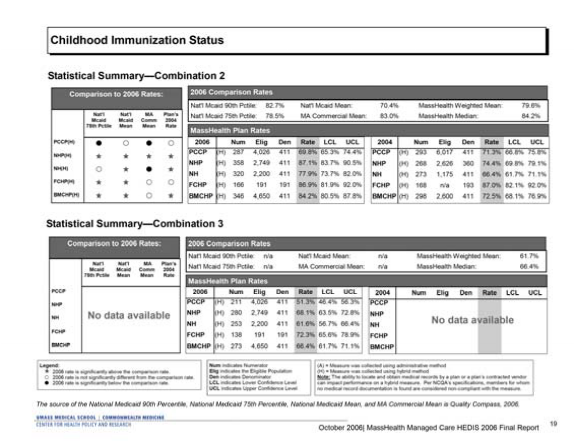
**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

Individual HEDIS 2006 plan data including numerator, eligible population (where applica- ble) denominator, reported rate, and upper and lower confidence intervals

The 2006 national Medicaid 75th percentile is listed as an benchmark. The 2006 national Medi- caid 90th percentile, 2006 national Medicaid mean, 2006 Massachusetts Commercial mean, and 2006 MassHealth weighted mean and me- dian are listed as comparison rates



Comparison of plan rates with the comparison and benchmark data.

Analysis of results, including opportunities for improvement

Historical data from HEDIS 2004, if available and if there were no sig- nificant changes to the measure’s specifications that prohibited com- parisons to HEDIS 2004

**Health Plan Profiles**

MassHealth managed care plans provided care to over 638,000 Massachusetts residents as of De- cember 31, 2005. The MassHealth Managed Care HEDIS 2006 report includes data from the five MassHealth plans serving members enrolled in managed care. This report does not reflect care provided to MassHealth members receiving their health care services outside of the five managed care plans. The following profiles provide some basic information about each plan and its mem- bers. The data chart on the next page provides a statistical summary of the demographic character- istics of each plan’s population. Appendix A lists the service areas that are located within each MassHealth geographic region listed below. (Note: The term “MCOs” is used throughout the report to indicate the four capitated managed care plans serving MassHealth members—Neighborhood Health Plan, Network Health, Fallon Community Health Plan, and Boston Medical Center HeatlhNet Plan.)

#### Primary Care Clinician Plan (PCC Plan)

 Primary care case management program ad- ministered by the Executive Office of Health and Human Services (EOHHS).

 Statewide managed care option for Mass- Health members eligible for managed care.

 295,972 MassHealth members as of Decem- ber 31, 2005.

 Provider network includes group practices, community health centers, hospital outpatient departments, hospital-licensed health centers, and individual practitioners.

 Behavioral health services are managed through a carve-out contract with the Massa- chusetts Behavioral Health Partnership (MBHP).

 HEDIS data for select measures were col- lected separately for PCC Plan members with Essential coverage. MassHealth Essential covers individuals ages 19-64 who are long- term unemployed and ineligible for MassHealth Basic (certain individuals with non-citizen status are also eligible). The PCC Plan is the only MassHealth plan serving members with Essential coverage. Approximately thirteen

percent (13%) of the PCC Plan’s membership has MassHealth Essential coverage.

#### Neighborhood Health Plan (NHP)

* Non-profit managed care organization that serves primarily Medicaid members.
* 104,559 MassHealth members as of Decem- ber 31, 2005.
* Service areas throughout the State (Western, Central, Northern and Southern Massachusetts as well as Greater Boston).
* Provider network includes mostly community health centers in addition to Harvard Vanguard Medical Associates, group practices, and hos- pital-based clinics.
* Behavioral health services are managed through a carve-out contract with Beacon Health Strategies.

#### Network Health (NH)

* Medicaid-only provider-sponsored health plan owned and operated by Cambridge Health Alli- ance.
* 73,856 MassHealth members as of December 31, 2005.
* Primary service areas in Western, Northern and Central Massachusetts, and Greater Bos- ton.
* Provider network includes community health centers, group practices, hospital outpatient departments, and individual practitioners.
* Behavioral health services are provided by Network Health providers.

#### Fallon Community Health Plan (FCHP)

* Non-profit managed care organization that serves the commercial, Medicare, and Medi- caid populations.
* 10,109 MassHealth members as of December 31, 2005.
* Service area is in Central Massachusetts.
* Behavioral health services are managed through a carve-out contract with Beacon Health Services.
* Provider network for MassHealth members is exclusively through Fallon Clinic sites.

#### Boston Medical Center HealthNet Plan (BMCHP)

* Medicaid-only provider-sponsored health plan, owned and operated by Boston Medical Cen- ter, the largest public safety-net hospital in Boston.
* 154,016 MassHealth members as of Decem- ber 31, 2005.
* Primary service areas in Western and South- ern Massachusetts and Greater Boston.
* Provider network includes community health centers, hospital outpatient departments, and group and individual practices.
* Behavioral health services are provided by Boston Medical Center HealthNet Plan provid- ers.

#### Differences in Populations Served by Mass- Health Plans

Demographic characteristics and membership health status, including factors such as age, gen- der, geographic residence and disability status, vary across the five MassHealth plans. These variations are most visible in the differences be- tween the four MCOs and the PCC Plan. Because HEDIS measures are not designed for case-mix adjustment, rates presented here do not take into account the physical and mental health status (including disability status) of the members in- cluded in the measures. CHPR and MassHealth are undertaking additional analyses of HEDIS 2006 data to begin to understand what member, pro- vider-group, and health plan characteristics may influence MassHealth plan HEDIS rates. The re- sults of these analyses may be included in future HEDIS reports.

The data on the next page describe each plan’s population in terms of age, gender, disability status, and those also served by the Department of Mental Health. It is important for readers to con- sider the differences in the characteristics of each plan’s population when reviewing and comparing the HEDIS 2006 performance of the five plans.

**Health Plan Profiles: Demographic Characteristics of the Plan Populations**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan** | **Total MassHealth Members as of**  **12/31/05** | **Female** | **Disabled** | **DMH\*\*** | **Mean Age** | **0-11 yrs** | **12-17 yrs** | **18-39 yrs** | **40-64 yrs** | **65+ yrs\*\*\*** |
| Primary Care Clinician Plan |  | | | | | | | | | |
| Without Essential population\* | 258,590 | 56.7% | 29.6% | 2.2% | 25.4 | 28.1% | 18.1% | 26.9% | 26.6% | 0.3% |
| Essential population only | 37,382 | 33.9% | 0.0% | 0.1% | 38.8 | 0.0% | 0.0% | 52.2% | 47.2% | 0.6% |
| Neighborhood Health Plan | 104,559 | 60.8% | 2.3% | 0.2% | 17.7 | 42.6% | 18.7% | 27.7% | 11.0% | 0.0% |
| Network Health | 73,856 | 58.0% | 7.5% | 0.4% | 17.6 | 44.9% | 16.6% | 26.6% | 11.7% | 0.1% |
| Fallon Community Health Plan | 10,109 | 60.5% | 9.8% | 0.2% | 20.4 | 37.1% | 16.2% | 31.5% | 15.1% | 0.1% |
| Boston Medical Center HealthNet Plan | 154,016 | 58.8% | 9.0% | 0.3% | 17.7 | 44.4% | 17.40% | 26.5% | 11.6% | 0.1% |
| **Total MassHealth**  **Managed Care** | **638,512** | **58.2%** | **16.5%** | **1.1%** | **21** | **37.0%** | **17.8%** | **27.0%** | **18.0%** | **0.2%** |

**MassHealth members enrolled on 12/31/2005 (Source: MMIS)**

\* HEDIS results based on this PCC Plan population are compared to MCO results throughout the main body of the report.

\*\* These data represent the percentage of members who were also served by the Massachusetts Department of Mental Health (DMH).

\*\*\* MassHealth managed care plans generally serve members under the age of 65. A small number of MassHealth managed care members were 65 years of age or older as of 12/31/2005 and had not yet had their coverage terminated. MassHealth members 65 years and older were included in the eligible populations for the HEDIS 2006 measures whenever the specifica- tions for the measure included the 65 and older population, the members’ coverage was not yet terminated, and the members met all eligible population criteria such as the continuous en- rollment and enrollment anchor date requirements.

#### Statistically Significant Differences Among the Plans

**Female:** All four MCOs had a significantly higher proportion of female members than the PCC Plan (p<.005). NH and BMCHP both had a significantly lower proportion of female members than NHP and FCHP (p<.005).

**Disabled:** The PCC Plan has a significantly higher proportion of disabled members compared to the four MCOs (p<.005). FCHP and BMCHP both had a significantly higher proportion of disabled members than NH and NHP (p<.005). In addition, NH had a significantly higher proportion of disabled members than NHP (p<.005).

**DMH:** The PCC Plan has a significantly higher proportion of members also served by the Department of Mental Health (DMH) compared to the four MCOs (p<.005). NH and BMCHP both had a significantly higher proportion of members also served by DMH than did NHP (p<.005).

**Age:** The mean age of PCC Plan's population is significantly older compared to the other four MCOs (p<.005). In addition, the mean age of FCHP’s popu- lation is significantly older compared to BMCHP, NH and NHP (p<.005).

Note: Generally, a p-value of 0.05 indicates statistical significance. For this analysis, however, the p-value was adjusted because multiple comparisons were made between plans (a total of 10 comparisons for each demographic characteristic). Therefore, a p-value that is less than .005 is considered signifi- cant for this analysis.

**Data Collection and Analysis Methods**

#### Data Collection and Submission

In December 2005, the MassHealth Office of Acute and Ambulatory Care (OAAC) provided plans with a list of measures to be collected for HEDIS 2006. The list of measures was devel- oped by key stakeholders within MassHealth, including stakeholders within OAAC, the Office of Clinical Affairs (OCA), and the MassHealth Be- havioral Health Program (MHBH). In general, each plan was responsible for collecting the measures according to the HEDIS 2006 Techni- cal Specifications and for reporting the results using NCQA’s Data Submission Tool (DST).

Each plan submitted its results to both NCQA and CHPR.

MassHealth does not require plans to undergo an NCQA HEDIS Compliance Audit™. NCQA HE- DIS Compliance Audits are independent reviews conducted by organizations or individuals li- censed or certified by NCQA. The purpose of the audit is to validate a plan’s HEDIS results by veri- fying the integrity of the plan’s data collection and calculation processes. All plans undergoing NCQA Accreditation must have their HEDIS data audited (none of the MassHealth plans are cur- rently NCQA-Accredited). NCQA reports only audited data in Quality Compass, a database of regional and national Medicaid, Medicare and Commercial performance benchmarks. Two plans, NHP and FCHP, voluntarily submitted au- dited HEDIS 2006 data to NCQA and CHPR.

#### Eligible Population

For each HEDIS measure, NCQA specifies the eligible population by defining the age, continu-

ous enrollment, enrollment gap, and diagnosis or event criteria that a member must meet to be eligible for a measure.

Age: The age requirements for Medicaid HEDIS measures vary by measure. The MassHealth managed care program serves members under the age of 65. Occasionally, members 65 and older appear in the denominator of a MassHealth plan’s HEDIS rates. This may occur for several valid reasons, including instances where a mem- ber turns 65 during the measurement year and did not yet have their coverage terminated as of the measure’s anchor date. MassHealth plans are responsible for a member’s care until his or her coverage is terminated. Therefore, Mass- Health members 65 years and older were in- cluded in the eligible populations for the HEDIS 2006 measures whenever the specifications for the measure included the 65 and older popula- tion, the members’ coverage had not yet been terminated, and the members met all eligible population criteria such as the continuous enroll- ment and enrollment anchor date requirements.

Continuous enrollment: The continuous enroll- ment criteria varies for each measure and speci- fies the minimum amount of time that a member must be enrolled in a MassHealth plan before becoming eligible for that plan’s HEDIS measure. Continuous enrollment ensures that a plan has had adequate time to deliver services to the member before being held accountable for pro- viding those services.

Enrollment gap: The specifications for most measures allow members to have a gap in enroll- ment during the continuous enrollment period

and still be eligible for the measure. The allow- able gap is specified for each measure but is generally defined for the Medicaid population as one gap of up to 45 days.

Diagnosis/event criteria: Some measures require a member to have a specific diagnosis or health care event to be included in the denominator.

Diagnoses are defined by specific administrative codes (e.g., ICD-9, CPT). Other health care events may include prescriptions, hospitaliza- tions, or outpatient visits.

The measure descriptions included in this report do not include every requirement for the eligible populations (e.g., enrollment gaps). For com- plete specifications for each measure included in this report, please see *HEDIS 2006 Volume 2: Technical Specifications*.

#### MassHealth Coverage Types Included in HEDIS 2006

MassHealth has several Medicaid coverage types whose members are eligible to enroll in any of the five MassHealth plans including Basic, Standard, CommonHealth, and Family Assis- tance. One coverage type, MassHealth Essential may only enroll in the PCC Plan. MassHealth Essential covers individuals ages 19-64 who are long-term unemployed and ineligible for Mass- Health Basic (certain individuals with non-citizen status are also eligible). Approximately thirteen percent (13%) of the PCC Plan’s membership has MassHealth Essential coverage.

During the planning for the MassHealth Managed Care HEDIS 2006 project, it was decided that the

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PCC Plan would submit two sets of HEDIS 2006 data—one submission for the PCC Plan popula- tion without members with Essential coverage and one submission for members with Essential coverage. The data for the PCC Plan population without members with Essential coverage is used in all tables and charts in the main body of the report. Separate rates for PCC Plan mem- bers with Essential coverage are included in the appendices for several adult measures (Comprehensive Diabetes Care, Use of Appro- priate Medications for People with Asthma, Men- tal Health Utilization, Chemical Dependency Utili- zation, and Identification of Alcohol and Other Drug Services).

#### Administrative vs. Hybrid Data Collection

HEDIS measures are collected through one of two data collection methods—the administrative method or the hybrid method.

The ***administrative method*** requires plans to identify the denominator and numerator using claims or encounter data, or data from other ad- ministrative databases. Plans calculated the administrative measures using programs devel- oped by plan staff or Certified HEDIS SoftwareSM purchased from a vendor. For measures col- lected through the administrative method, the denominator includes all members who satisfy all criteria specified in the measure including any age and continuous enrollment requirements (these members are known as the “eligible popu- lation”). The plan’s HEDIS rate is based on all members in the denominator who are found through administrative data to have received the service reported in the numerator (e.g., visit, treatment, etc.).

The ***hybrid method*** requires plans to identify the numerator through both administrative and medi- cal record data. Plans may collect medical re- cord data using plan staff and a plan-developed data collection tool. Plans may also contract with a vendor for the tool, staffing, or both. For meas- ures collected using the hybrid method, the de- nominator consists of a systematic sample of members drawn from the measure’s eligible population. This systematic sample generally consists of a minimum required sample size of 411 members plus an over sample determined by the plan to account for valid exclusions and contraindications. The measure’s rate is based on members in the sample (411) who are found through either administrative or medical record data to have received the service reported in the numerator. Plans may report data with denomi- nators smaller than 411 for two reasons: 1) the plan had a small eligible population or 2) the plan reduced its sample size based on its current year’s administrative rate or the previous year’s audited rate, according to NCQA’s specifications.

It is important to note that performance on a hy- brid measure can be impacted by the ability of a plan or its contracted vendor to locate and obtain member medical records. Per NCQA’s specifica- tions, members for whom no medical record documentation is found are considered non- compliant with the measure.

#### Data Analysis

Throughout this report, HEDIS 2006 results from each plan are compared to several benchmarks and comparison rates, including the 2006 na- tional Medicaid 75th percentile, 2006 national Medicaid mean, and 2006 Massachusetts Com-

mercial mean. In addition, MassHealth medians and weighted means were calculated from 2006 data.

2006 National Medicaid 75th Percentile

For this report, the 2006 national Medicaid 75th percentile serves as the primary benchmark to

which plan performance is compared (including statistical significance).

CHPR obtained the 2006 national Medicaid data through NCQA’s Quality Compass. NCQA re- leases Quality Compass in July of each year with the rates for Commercial and Medicare plans.

NCQA provides the national Medicaid data in a supplement that is released in late Fall.

Other Comparison Rates Included in this Report The other comparison rates included in the data tables of this report are the 2006 national Medi- caid mean, 2006 national Medicaid 90th percen- tile, 2006 Massachusetts Commercial mean, 2006 MassHealth weighted mean, and 2006 MassHealth median.

The 2006 national Medicaid mean is the average performance of all Medicaid plans that submitted HEDIS 2006 data. The 2006 national Medicaid 90th percentile represents a level of performance that was exceeded by only the top 10% of all Medicaid plans that submitted HEDIS 2006 data. The 2006 national Medicaid 90th percentile was included as a future goal for MassHealth plans. The 2006 Massachusetts Commercial mean is the average performance of all Massachusetts Commercial plans that submitted HEDIS 2006 data. Although the populations served by Massa- chusetts Commercial plans differ from the popu- lation served by MassHealth, the Massachusetts

*Certified HEDIS SoftwareSM is a service mark of the National Committee for Quality Assurance (NCQA).*

**Data Collection and Analysis Methods (*continued*)**

Commercial mean may be an appropriate future goal for measures where MassHealth plans are nearing or exceeding the national Medicaid 90th percentile.

The 2006 MassHealth weighted mean is a weighted average of the rates of the five Mass- Health plans. The weighted average was calcu- lated by multiplying the performance rate for each plan by the number of individuals who met the eli- gibility criteria for the measure. The values were then summed across plans and divided by the to- tal eligible population for all the plans. Because the MassHealth mean is a weighted average, the effect of a plan’s performance on the mean de- pends on the size of that plan. The largest Mass- Health plan (PCC Plan) serves 46.4% of all Mass- Health members and the smallest (FCHP) serves only 1.6%. Because of the differences in the size of the populations served by the plans, the Mass- Health weighted mean was not used for tests of statistical significance.

The 2006 MassHealth median is also provided and is the middle value of the set of values repre- sented by the individual plan rates.

#### Caveats for the Interpretation of Results

All data analyses have limitations and those pre- sented here are no exception.

Medical Record Procurement

A plan’s ability (or that of its contracted vendor) to locate and obtain medical records as well as the quality of medical record documentation can affect performance on hybrid measures. Per NCQA’s specifications, members for whom no medical re- cord documentation was found were considered non-compliant with the measure. This applied for

records that could not be located and obtained as well as for medical records that contained incom- plete documentation (e.g., indication of a test but no date or result).

Lack of Case-Mix Adjustment

The specifications for collecting HEDIS measures do not allow case-mix adjustment or risk- adjustment for existing co-morbidities, disability (physical or mental), or severity of disease.

Therefore, it is difficult to determine whether differ- ences among plan rates were due to differences in the quality of care or use of services, or differ- ences in the health of the populations served by the plans. CHPR and MassHealth are working on new methodologies for analyzing MassHealth HE- DIS results which may clarify this issue for future reports.

Demographic Differences in Plan Membership In addition to disability status, the populations served by each plan may have differed in other

demographic characteristics such as age, gender, and geographic residence. As shown through the plan profile chart on page 12, the PCC Plan has a higher proportion of members who are male, dis- abled, or served by the Department of Mental Health (DMH) as well as an older mean member age. Other differences among the plans are noted on page 12. The impact of these differences on MassHealth HEDIS rates is unknown.

Overlapping Provider Networks

Many providers caring for MassHealth members have contracts with multiple plans. Overlapping provider networks may affect the ability of any one plan to influence provider behavior.

Variation in Data Collection Procedures

Each plan collects and reports its own HEDIS

data. Although there are standard specifications for collecting HEDIS measures, MassHealth does not audit the plans’ data collection methods. Fac- tors that may influence the collection of HEDIS data by plan include:

* Use of software to calculate the administrative measures,
* Use of a tool and/or abstractors from an external medical record review vendor,
* Completeness of administrative data due to claims lags,
* Amount of time in the field collecting medical re- cord data,
* The overall sample size for medical record re- view (plans with small eligible populations could have samples smaller than 411 members),
* Staffing changes among the plan’s HEDIS team,
* Voluntary review by an NCQA-Certified HEDIS auditor,
* Choice of administrative or hybrid data collection method for measures that allow either method.

Limitations of Certain HEDIS Measures

Some measures, such as the Mental Health Utili- zation, Identification of Alcohol and Other Drug Services, and Chemical Dependency Utilization measures provide information on the services MassHealth members utilized and not on the con- tent or quality of the care the members received. MassHealth HEDIS mental health utilization data are not case-mix or risk adjusted. Differences in plan utilization rates cannot be interpreted as good or bad quality (i.e., it cannot be determined whether a plan with a higher discharge rate or longer average length of stay is providing good or bad quality care). Therefore, readers are cau- tioned against using utilization data to make judg- ments about the quality of the care delivered by a plan or its providers.

In addition, MassHealth HEDIS mental health and chemical dependency utilization data differ from utilization data calculated through other methods used by MassHealth. Readers are cau- tioned against making direct comparisons be- tween HEDIS mental health and chemical de- pendency utilization data and mental health utili- zation data obtained from other sources.

Staying Healthy

**Childhood Immunization Status**

The HEDIS Childhood Immunization Status measure assesses how well health plans ensure that their child members are immunized according to the Rec- ommended Childhood and Adolescent Immunization Schedule issued by the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP).1 The schedule rec- ommends the number of doses, minimum ages to administer doses, and the minimum amount of time between doses for nine vaccines that should be ad- ministered before the age of two. Seven of these vaccines were assessed through the HEDIS 2006 measure. (The measure does not include the influenza vaccine, a seasonal vaccine recommended for children ages 6-23 months, or the Hepatitis A vaccine, a two-dose vaccine that was universally recom- mended in 2006 for children before the age of two.) Since a child must have at least five health care visits to receive the entire immunization series recom- mended by the guidelines, this measure can also serve as an indicator of overall access to the health care system.2

**Combination 2**

**Combination 3**

|  |
| --- |
| **Understanding the Results** |

The percentage of children 2 years of age who had four DtaP/DTP (diphtheria-tetanus-pertussis), three IPV (injectable polio), one MMR (measles- mumps-rubella), three HiB (H influenza type B), three hepatitis B, and one chicken pox vaccine (VZV) by their second birthday.

**KEY:**



Nat'l Mcaid 75th Pctile

78.5%

Nat'l Mcaid Mean

70.4%

MA Comm Mean

83.0%

MassHealth Weighted Mean

79.6%

PCCP

69.8%

NHP

87.1%

NH

77.9%

FCHP

86.9%

BMCHP

84.2%

0% 20% 40% 60% 80% 100%

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

NCQA has made several changes to this measure that should be considered when comparing HEDIS 2006 performance to prior rates. These changes include retiring the Combination 1 rate (DtaP/DTP, IPV, MMR, HiB and hepatitis B); relaxing the timing requirements for the MMR, HiB, hepatitis B, and the chicken pox vaccines; and adding a Combination 3 rate which requires four pneumococcal conjugate vaccinations (PCV) in addition to the immunizations required by Combination 2.

(The PCV vaccine prevents pneumococcal disease, which can lead to ear infections, sinus infections, blood stream infections, meningitis, and pneumonia.3)

The percentage of children 2 years of age who received all of the vaccinations for the Combina- tion 2 rate, plus four pneumococcal conjugate vaccinations (PCV) by their second birthday. This is a new measure. There are no benchmarks or comparison rates for this measure.

Nat'l Mcaid 75th Pctile

Nat'l Mcaid Mean

MA Comm Mean M assHealth

Weighted Mean

61.7%

PCCP

51.3%

NHP

68.1%

NH

61.6%

FCHP

72.3%

BMCHP

66.4%

0% 20% 40% 60% 80% 100%

MassHealth childhood immunization rates have improved for the fourth consecutive biennial measurement cycle. Eighty percent (79.6%) of MassHealth members received all Combi- nation 2 immunizations by their second birthday. Plan-specific rates ranged from 69.8% to 87.1%. Three plans (NHP, FCHP and BMCHP) had rates that were significantly better than the benchmark rate (78.5%). Three plans (NHP, NH and BMCHP) had 2006 rates that were significantly better than their 2004 rates.

MassHealth plan rates for the Combination 3 rate ranged from 51.3% to 72.3%. The Combination 3 rate was a new measure for HEDIS 2006. Therefore, no HEDIS Commercial or Medi- caid comparative data are available. However, some data are available through the CDC that provide information on immuni- zation rates for the immunization series that includes the PCV vaccine. According to the 2004 National Immunization Sur- vey, the national rate for the immunization series that corre- sponds to the HEDIS Combination 3 rate was 76.0%.4 The Massachusetts rate from NIS data was 84.0%. It is important to note, however, that the NIS did not differentiate between individuals with public or private insurance and had different criteria for continuous enrollment, number of doses, and timing of doses.

## Statistical Summary—Combination 2

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 82.7% | Nat'l Mcaid Mean: | 70.4% | MassHealth Weighted Mean: | 79.6% |
| Nat'l Mcaid 75th Pctile: | 78.5% | MA Commercial Mean: | 83.0% | MassHealth Median: | 84.2% |

|  |  |  |  |
| --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | |
|  | **Nat’l Nat’l**  **Mcaid Mcaid 75th Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | * O | **•**  **\***  **•** O O | O |
| **NHP(H)** | **\* \*** | **\*** |
| **NH(H)** | O **\*** | **\*** |
| **FCHP(H)** | **\* \*** | O |
| **BMCHP(H)** | **\* \*** | **\*** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (H) | 287 | 4,026 | 411 | 69.8% | 65.3% | 74.4% | **PCCP** | (H) | 293 | 6,017 | 411 | 71.3% | 66.8% | 75.8% |
| **NHP** | (H) | 358 | 2,749 | 411 | 87.1% | 83.7% | 90.5% | **NHP** | (H) | 268 | 2,626 | 360 | 74.4% | 69.8% | 79.1% |
| **NH** | (H) | 320 | 2,200 | 411 | 77.9% | 73.7% | 82.0% | **NH** | (H) | 273 | 1,175 | 411 | 66.4% | 61.7% | 71.1% |
| **FCHP** | (H) | 166 | 191 | 191 | 86.9% | 81.9% | 92.0% | **FCHP** | (H) | 168 | n/a | 193 | 87.0% | 82.1% | 92.0% |
| **BMCHP** | (H) | 346 | 4,650 | 411 | 84.2% | 80.5% | 87.8% | **BMCHP** | (H) | 298 | 2,600 | 411 | 72.5% | 68.1% | 76.9% |

**Statistical Summary—Combination 3**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP** | **No data available** | | | |
| **NHP** |
| **NH** |
| **FCHP** |
| **BMCHP** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | n/a | Nat'l Mcaid Mean: | n/a | MassHealth Weighted Mean: | 61.7% |
| Nat'l Mcaid 75th Pctile: | n/a | MA Commercial Mean: | n/a | MassHealth Median: | 66.4% |

**b**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** | **Num** | **Elig Den** | **Rate** | **LCL UCL** |
| **PCCP** | (H) | 211 | 4,026 | 411 | 51.3% | 46.4% | 56.3% | **PCCP** |  | |  |  |
| **NHP**  **NH** | (H)  (H) | 280  253 | 2,749  2,200 | 411  411 | 68.1%  61.6% | 63.5%  56.7% | 72.8%  66.4% | **NHP**  **NH** | **No data a** | | **vaila** | **le** |
| **FCHP** | (H) | 138 | 191 | 191 | 72.3% | 65.6% | 78.9% | **FCHP** |  | |  |  |
| **BMCHP** | (H) | 273 | 4,650 | 411 | 66.4% | 61.7% | 71.1% | **BMCHP** |  | |  |  |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Elig** indicates the Eligible Population

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Childhood Immunization Status**

**Understanding the Results (continued)**

Vaccine shortages, which can be widespread or localized, have the potential to impact HEDIS immunization rates. (Although the exact impact of vaccine shortages on MassHealth plan rates is unknown, NCQA has acknowledged the potential impact of vaccine shortages on overall HEDIS rates during previous measurement years.5,6) There was one shortage during the look-back period for the HEDIS 2006 measure (i.e., the 2004 and 2005 calendar years). Between Febru- ary and September 2004, there was a shortage of PCV, during which time the CDC recom- mended that all providers suspend routine use of both the third and fourth doses while the sole manufacturer of the vaccine increased produc- tion.7 After the shortage, the CDC recommended that providers focus their efforts for catch-up vac- cination on high-risk children under the age of five, followed by healthy children who were not yet fully immunized.8 It is possible that the short- age and subsequent delay in routine immuniza- tion of healthy children impacted HEDIS 2006 PCV rates and the Combination 3 rate.

HEDIS 2006 is the first measurement year to in- clude a rate that requires the PCV vaccine, al- though the vaccine was added to the Recom- mended Childhood Immunization Schedule in 2001.9 With the addition of the PCV vaccine to the immunization schedule, there was some con- cern that the new requirement could lead to missed shots as providers moved other vaccines to later ages; recent research suggests, however, that the addition of the PCV vaccine to the immu- nization schedule has not had an impact on up- to-date status for the overall immunization cover- age.10

Although the HEDIS childhood immunization measure is an important indicator of the quality of preventive care delivered by a health plan, the measure does have some weaknesses. For ex- ample, HEDIS does not assess the timeliness of immunization with regard to the recommended age intervals for vaccination. In fact, some re- search suggests that many children who are compliant with the HEDIS Childhood Immuniza- tion Status measure do not receive immuniza- tions on-time.11 Another major criticism is that, in order to be included in the eligible population of the measure, members must be continuously enrolled in a plan for twelve months. Members who are excluded because they do not meet the continuous enrollment criteria were not captured by this measure and may have been at risk for low immunization rates and missed immuniza- tions.12 Therefore, this measure may not be a good indicator of the quality of care delivered to MassHealth members who are most vulnerable for poor immunization coverage.

HEDIS childhood immunization rates are usually lower than state and national childhood immuni- zation rates reported through other data sources such as the National Immunization Survey (NIS) and National Health Information Survey (NHIS).13 The difference in rates is believed to be due in part to different continuous enrollment criteria and different requirements for the number and timing of doses. (For example, when HEDIS cri- teria are applied to NIS data, immunization cov- erage rates fall by approximately 20%.14)

**Opportunities for Improvement**

Although Massachusetts has some of the highest immunization coverage rates in the United States,15 opportunity for improvement still exists. The immunizations required by the Combination 2 rate are consistent with those defined by Healthy People 2010. The Healthy People 2010 childhood immunization goal of 90% may repre- sent a target for continued improvement on this measure. It is important to note, however, that increased attention to areas measured by HEDIS at the expense of other non-measured preven- tive services, such as those addressed in other Healthy People 2010 goals, could have the unin- tended effect of reducing the overall quality of preventive care (i.e., if non-measured services are neglected).16 Nonetheless, since childhood and adolescent immunization are two of the most cost-effective practices of all areas assessed through HEDIS17, increased attention to improv- ing immunization rates could yield benefits to both plans and the members they serve.

Opportunities for improvement may also exist with regard to specific antigens (see Appendix B for antigen-specific rates for each plan). For most plans, the DtaP/DTP rate was significantly lower than the rates for other antigens, such as the MMR, HiB, hepatitis B and VZV rates. Al- though there was a shortage of DtaP vaccine (as well as the MMR vaccine) between 2000 and mid-2002 18, it is unclear whether the shortage and subsequent efforts to catch-up children could have impacted HEDIS 2006 rates (the

look-back period for HEDIS 2006 went only as far back as January 2003). Some research sug- gests that only children vaccinated in public clin-

ics, rural areas or the Southern U.S. were af- fected by the recent DtaP/DTP and MMR short- ages.19

**Adolescent Immunization Status**

The HEDIS Adolescent Immunization Status measure assesses how well health plans ensure that their adolescent members are immunized according to the Recommended Childhood Immunization Schedule. Specifically, this measure assesses whether adolescents received the booster shots needed to maintain adequate coverage against mumps, measles, rubella, hepatitis B, and chicken pox. There are a number of barriers to maintaining adequate im- munization coverage in adolescents, including the adolescent population’s general lack of contact with the health care system.20

**Combination 2**

**Understanding the Results**

Adolescent immunization rates for the Combination 2 series have improved steadily since the meas- ure was first collected by MassHealth plans through HEDIS 1998. For HEDIS 2006, 71.3% of Mass- Health members were fully immunized by their thirteenth birthday. MassHealth plan rates for Combi- nation 2 ranged from 60.8% to 89.5%. Four plans (NHP, NH, FCHP and BMCHP) had rates that were significantly better than the benchmark rate (58.2%). Two plans (FCHP and BMCHP) had rates that were significantly better than their 2004 rates.

NCQA made no major changes to this measure after HEDIS 2004, except that NCQA retired the Com- bination 1 rate (MMR and hepatitis B) with the HEDIS 2006 reporting year.

|  |  |  |  |
| --- | --- | --- | --- |
| The percentage of adolescents 13 years of age who had a second dose of the MMR vaccine, three hepati- tis B vaccines, and one chicken pox (VZV) vaccine by their 13th birthday. | | | |
| Nat'l Mcaid |  |  | 58.2% |
| 75th Pctile |  |  |  |
| Nat'l Mcaid M ean |  |  | 42.4% |
| MA Comm Mean |  |  | 85.5% |
| MassHealth |  |  | 71.3% |
| Weighted Mean |  |  |  |
| PCCP |  |  | 60.8% |
| NHP |  |  | 76.7% |
| NH |  |  | 71.5% |
| FCHP |  |  | 89.5% |
| BMCHP |  |  | 84.7% |
|  | 0% | 20% | 40% 60% 80% 100% |

There are some factors that are known to influence HEDIS adolescent immunization rates. Research- ers from the CDC and NCQA reviewed data from HEDIS 1996 through HEDIS 1999 and found that larger plans, those with the highest NCQA Accreditation status (i.e., “Excellent”), those in New Eng- land, and those in states with middle school immunization requirements had higher rates of vaccina- tion for the two-dose MMR and three-dose hepatitis B requirements.21 None of the MassHealth plans are currently NCQA-Accredited, however Massachusetts law requires all children attending public school to have 2 doses of MMR and 3 doses of Hepatitis B as well as one dose of VZV before enter- ing first grade.22

**KEY:**

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

**Adolescent Immunization Status**

## Statistical Summary—Combination 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | O | **\*** | **•** | O |
| **NHP(H)** | **\*** | **\*** | **•** | O |
| **NH(H)** | **\*** | **\*** | **•** | O |
| **FCHP(H)** | **\*** | **\*** | O | **\*** |
| **BMCHP(H)** | **\*** | **\*** | O | **\*** |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 69.8% | | Nat'l Mcaid Mean: | | | | 42.4% | | MassHealth Weighted Mean: 71.3% | | |
| Nat'l Mcaid 75th Pctile: 58.2% | | MA Commercial Mean: | | | | 85.5% | | MassHealth Median: 76.7% | | |
| **MassHealth Plan Rates** | | | | | | | | | | |
| **2006** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |  | **2004** | **Num Elig Den** | | **Rate** | **LCL UCL** |
| **PCCP** | (H) 250 4,948 411 | 60.8% | 56.0% | 65.7% | **PCCP** | (H) | 247 6,510 411 | 60.1% | 55.2% 65.0% |
| **NHP** | (H) 276 2,253 360 | 76.7% | 72.2% | 81.2% | **NHP** | (H) | 247 2,282 360 | 68.6% | 63.7% 73.5% |
| **NH** | (H) 294 1,184 411 | 71.5% | 67.0% | 76.0% | **NH** | (H) | 287 831 411 | 69.8% | 65.3% 74.4% |
| **FCHP** | (H) 171 191 191 | 89.5% | 84.9% | 94.1% | **FCHP** | (H) | 135 n/a 179 | 75.4% | 68.8% 82.0% |
| **BMCHP** | (H) 348 2,806 411 | 84.7% | 81.1% | 88.3% | **BMCHP** | (H) | 268 1740 411 | 65.2% | 60.5% 69.9% |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Elig** indicates the Eligible Population

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Opportunities for Improvement**

Healthy People 2010 has set the goal of achieving an adolescent immunization rate of 90% for the MMR, hepatitis B, and VZV vaccines.23 Two health plans (FCHP and BMCHP) have already met or exceeded the Healthy People 2010 goal for the MMR and hepatitis B vaccines (see Appendix B for anti- gen-specific rates for each plan). For the other MassHealth plans, the Healthy People 2010 goal offers a potential target for improvement. In addition, immunization rates for the VZV vaccine were the lowest of the three adolescent antigens, indicating more potential room for improvement for the VZV vaccine for this population than for the MMR or hepatitis B vaccines.

Recently, there has been increased attention to adolescent immunization issues due to the introduction of the human papilloma virus (HPV) vaccine as well as new universal recommendations for meningococcal vaccination.24,25 Although these vaccines are not currently assessed through the HEDIS Ado- lescent Immunization Status measure, increased attention to vaccination for the adolescent population may offer additional opportunities for members to become up-to-date on the other universally-recommended immunizations assessed in this measure.

**Well-Child Visits for Infants and Young Children**

The HEDIS well-child measures assess whether infants and young children receive a minimum number of the well-child visits recommended by current clini- cal guidelines. The American Academy of Pediatrics (AAP) recommends a schedule of at least eight well-child visits between birth and the 15th month of life.26 The AAP also recommends a schedule of annual well-child visits during the 3rd, 4th, 5th and 6th years of life. These well-child visits offer the opportu- nity for evaluation of growth and development, the administration of immunizations, the assessment of behavioral issues, and the delivery of anticipatory guidance on issues such as injury prevention, violence prevention, sleep position and nutrition. The HEDIS well-child visit measures assess only the fre- quency of well-child visits and do not provide information on the content or quality of the care received during those visits. However, compliance with preven- tive care guidelines, including the recommended number of visits, can improve health outcomes; for example, Medicaid-enrolled children under the age of 2 who receive well-child visits according to the frequency prescribed by AAP have fewer avoidable hospitalizations.27

**Well-Child Visits in the First 15 Months of Life (6 or more visits\*)**

**Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life**

**Understanding the Results**

The HEDIS 2006 rate of MassHealth members who turned 15 months who had six or more well-child visits was 82.3%, an increase of nearly 15 percentage points since HEDIS 2004. Plan-specific rates ranged from 69.1% to 90.8%. All five MassHealth plans had rates that were significantly bet- ter than the benchmark rate (59.2%). Three plans (PCC Plan, FCHP and BMCHP) had 2006 rates that were signifi- cantly better than their 2004 rates.

Eighty-four percent (83.6%) of MassHealth members who were three, four, five or six years old had a well-child visit during 2005. MassHealth rates for this measure have shown less improvement than for the 15 month measure (3 percentage points since HEDIS 2004). Plan-specific rates ranged from 79.2% to 87.3%. All five MassHealth plans had rates that were significantly better than the benchmark rate (70.8%). One plan (PCC Plan) had a 2006 rate that was significantly better than its 2004 rate.

**Opportunities for Improvement**

Nat'l M caid 75th P ctile

59.2%

Nat'l Mcaid M ean

48.6%

M A Co mm M ean

86.8%

M ass Health Weighted M ean

82.3%

PCCP

90.8%

NHP

79.4%

NH

69.1%

FCHP

70.7%

BM CHP

83.5%

0% 20% 40% 60% 80% 100%

Nat'l M caid 75th P ctile

70.8%

Nat'l Mcaid M ean

63.3%

M A Co mm M ean

87.2%

M ass Health Weighted M ean

83.6%

PCCP

87.3%

NHP

83.5%

NH

81.0%

FCHP

79.2%

BM CHP

81.3%

0% 20% 40% 60% 80% 100

%

The percentage of children who turned 15 months old during 2005 and who had six or more well-child visits with a primary care practitioner during the first 15 months of life.

The percentage of members who were three, four, five or six years old during 2005 who received one or more well-child visits with a primary care practi- tioner during 2005.

\* Data for the zero through five visit rates are in Appendix C.

**KEY:**

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

MassHealth well-child visit rates continue to improve. Three plans (PCC Plan, NHP and BMCHP) reported 2006 rates for the measure for 15 month old children that were significantly better than the 2006 national Medicaid 90th percentile (68.6%). Two plans (PCC Plan and NHP) reported 2006 rates on the measures for 3-6 year olds that were signifi- cantly better than the 2006 national Medicaid 90th percentile (77.5%). The 2006 national Medicaid 90th percentile is a rate that was exceeded by only 10% of the Medicaid plans that submitted HEDIS 2006 data. Plans should seek to maintain the high rates for both the 15-month and 3-6 year rates, and improve their rates where possible.

**Well-Child Visits for Infants and Young Children**

## Statistical Summary: Well-Child Visits in the First 15 Months of Life (6 or more visits)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | **\*** | **\*** | **\*** | **\*** |
| **NHP(H)** | **\*** | **\*** | **•** | O |
| **NH(H)** | **\*** | **\*** | **•** | **•** |
| **FCHP(H)** | **\*** | **\*** | **•** | **\*** |
| **BMCHP(H)** | **\*** | **\*** | O | **\*** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 68.6% | Nat'l Mcaid Mean: | 48.6% | MassHealth Weighted Mean: | 82.3% |
| Nat'l Mcaid 75th Pctile: | 59.2% | MA Commercial Mean: | 86.8% | MassHealth Median: | 79.4% |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (H) | 236 | 2,838 | 260 | 90.8% | 87.1% | 94.5% | **PCCP** | (A) | 3,870 | 6,263 | 6,263 | 61.8% | 60.6% | 63.0% |
| **NHP** | (H) | 235 | 2,285 | 296 | 79.4% | 74.6% | 84.2% | **NHP** | (H) | 303 | 2,223 | 392 | 77.3% | 73.0% | 81.6% |
| **NH** | (H) | 284 | 1,512 | 411 | 69.1% | 64.5% | 73.7% | **NH** | (H) | 349 | 998 | 411 | 84.9% | 81.3% | 88.5% |
| **FCHP** | (H) | 130 | 184 | 184 | 70.7% | 63.8% | 77.5% | **FCHP** | (A) | 63 | 154 | 154 | 40.9% | 32.8% | 49.0% |
| **BMCHP** | (H) | 343 | 3,630 | 411 | 83.5% | 79.7% | 87.2% | **BMCHP** | (H) | 284 | 1,873 | 411 | 69.1% | 64.5% | 73.7% |

**Statistical Summary: Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life**

|  |  |  |  |
| --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | |
|  | **Nat’l Nat’l Mcaid 75th Mcaid**  **Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | **\* \***  **\* \***  **\* \***  **\* \***  **\* \*** | O O  **•**  **•**  **•** | **\***  O  **•**  **•** O |
| **NHP(H)** |
| **NH(H)** |
| **FCHP(A)** |
| **BMCHP(H)** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 77.5% | | Nat'l Mcaid Mean: | | | 63.3% | | MassHealth Weighted Mean: | | | |  | 83.6% |
| Nat'l Mcaid 75th Pctile: 70.8% | | MA Commercial Mean: | | | 87.2% | | MassHealth Median: | | | | 81.3% |
| **MassHealth Plan Rates** | | | | | | | | | | | | |
| **2006** | **Num Elig Den** | **Rate** | **LCL UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL UCL** | |
| **PCCP** | (H) 200 15,209 229 | 87.3% | 82.8% 91.9% | **PCCP** | (A) | 16,898 21,819 21,819 | | | 77.4% | 76.9% 78.0% | |
| **NHP** | (H) 217 10,536 260 | 83.5% | 78.8% 88.2% | **NHP** | (H) | 260 | 9,809 | 321 | 81.0% | 76.5% 85.4% | |
| **NH** | (H) 282 7,188 348 | 81.0% | 76.8% 85.3% | **NH** | (H) | 296 | 4,410 | 328 | 90.2% | 86.9% 93.6% | |
| **FCHP** | (A) 605 764 764 | 79.2% | 76.2% 82.1% | **FCHP** | (A) | 731 | 776 | 776 | 94.2% | 92.5% 95.9% | |
| **BMCHP** | (H) 334 15,272 411 | 81.3% | 77.4% 85.2% | **BMCHP** | (H) | 341 | 10,843 | 411 | 83.0% | 79.2% 86.7% | |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Elig** indicates the Eligible Population

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Adolescent Well-Care Visits**

The Adolescent Well-Care Visits measure assesses whether adolescents had at least one well-care visit with a primary care provider or OB/GYN during 2005, as recommended by clinical guidelines set forth by the American Medical Association (AMA), American Academy of Pediatrics (AAP), and Bright Fu- tures.28 Annual visits during adolescence allow providers to conduct physical examinations of growth, assess behavior, and deliver anticipatory guidance on issues related to violence, injury prevention and nutrition and to screen for sexual activity, smoking and depression. Adolescents are more likely than younger children to have no well-care visits at all; this gap is more pronounced for adolescents in publicly-funded managed care.29

**Adolescent Well-Care Visits**

**Understanding the Results**

MassHealth rates of adolescent well-care visits have improved with each measurement cycle since HEDIS 1999. For HEDIS 2006, 63.7% of MassHealth adolescent members who were 12 to 21 years of age had at least one well-care visit with a primary care practitioner or OB/GYN during 2005. Plan-specific rates ranged from 53.2% to 69.1%. All five MassHealth plans had 2006 rates that were significantly better than the benchmark rate (47.9%). One plan (PCCP) had a 2006 rate that was significantly better than its 2004 rate.

One caveat to be kept in mind for both this measure and the well-child measures is that the measures are calculated using administrative and medical record data as opposed to data ob- tained by survey. Well-care rates generated from parent surveys and adolescent self-reported surveys yield significantly higher rates of visits compared to the HEDIS well-care measures.30 In fact, the national rate of children meeting the AAP guidelines for the number of well-care visits is as high as 77% when calculated from parent surveys.31 However, whether administrative and medical record data actually under-report well-care visit rates or survey data over-report the oc- currence of well-care visits is unknown. In addition, the miscoding of well-child visits for infants and young children and well-care visits for adolescents affects the results of this measure. Re- search comparing Medicaid administrative data with child medical records has documented sub- stantial misclassification of well-child visits as sick visits.32

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| The percentage of adolescents who were 12-21 years of age during 2005 and who had at least one comprehensive well-care visit with a primary care practitioner or OB/GYN during 2005. | | | | |
| Nat'l M caid 75th P ctile  Nat'l Mcaid M ean  M A Co mm M ean M ass Health  Weighted M ean  PCCP  NHP  NH  FCHP  BM CHP |  |  | 47.9% |  |
|  |  | 40.6% |  |
|  |  | 63.6% |  |
|  |  | 63.7% |  |
|  |  | 61.1% |  |
|  |  | 65.4% |  |
|  |  | 60.1% |  |
|  |  | 53.2% |  |
|  |  | 69.1% |  |
| 0% | 20% | 40% 60% 80% | 100% |

**Opportunities for Improvement**

**KEY:**

MassHealth HEDIS 2006 adolescent well-care rates for all five plans met or exceeded both the 2006 national Medicaid 75th percentile (47.9%) and national Medicaid 90th percentile (54.5%). One plan (BMCHP) had an adolescent well-care rate that was significantly better than the 2006 Massachusetts Commercial mean (63.6%). Three other plans (PCC Plan, NHP and NH) had rates that were not statistically different from the 2006 Massachusetts Commercial mean. The Massachusetts Commercial mean may be an appropriate target for future improvement for some plans.

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

## Statistical Summary: Adolescent Well-Care Visits

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | |  | **2006 Comparison Rates** | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 54.5% Nat'l Mcaid Mean: 40.6% MassHealth Weighted Mean: 63.7%  Nat'l Mcaid 75th Pctile: 47.9% MA Commercial Mean: 63.6% MassHealth Median: 61.1% | | | | | | | | |
|  | **Nat’l Nat’l Mcaid 75th Mcaid**  **Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
|  | **MassHealth Plan Rates** | | | | | | | | |
| **PCCP(H)** | **\* \***  **\* \***  **\* \***  **\* \***  **\* \*** | O O O  **•**  **\*** | **\***  O  **•**  O O | **2006** | **Num Elig Den** | **Rate** | **LCL UCL** |  | **2004** | **Num Elig Den** | **Rate** | **LCL UCL** |
| **NHP(H)** | **PCCP** | (H) 237 35,842 388 | 61.1% | 56.1% 66.1% | **PCCP** | (A) 24,362 44,461 44,461 | 54.8% | 54.3% 55.3% |
| **NH(H)** | **NHP**  **NH** | (H) 265 17,118 405  (H) 247 9,624 411 | 65.4%  60.1% | 60.7% 70.2%  55.2% 65.0% | **NHP**  **NH** | (H) 234 15,052 411  (H) 290 6,332 411 | 56.9%  70.6% | 52.0% 61.8%  66.0% 75.1% |
| **FCHP(A)** | **FCHP** | (A) 697 1,311 1,311 | 53.2% | 50.4% 55.9% | **FCHP** | (A) 671 1,277 1,277 | 52.5% | 49.8% 55.3% |
| **BMCHP(H)** | **BMCHP** | (H) 284 21,147 411 | 69.1% | 64.5% 73.7% | **BMCHP** | (H) 288 15,718 411 | 70.1% | 65.5% 74.6% |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Elig** indicates the Eligible Population

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

The age-stratified rates of the Children and Adolescent’s Access to Primary Care Practitioners measure reflect general access to care by indicating whether children had a preventive or ambulatory care visit with a primary care provider in 2005 (for children ages 12 to 24 months and 25 months to 6 years) or during 2004 or 2005 (for children ages 7 to 11 years and 12 to 19 years). Any type of visit with a primary care practitioner counts toward this measure. This measure does not assess whether children have the appropriate number of visits recommended by clinical guidelines (e.g., children ages 12 to 24 months should have 3-4 well-child visits during the measure’s timeframe), nor does the measure assess the quality or the content of the well-care visits counted by the measure.

**Ages 12 to 24 Months**

**Ages 25 Months to 6 Years**

**Understanding the Results**

Ninety-six percent (96.2%) of MassHealth members aged 12 to 24 months had a preventive or ambulatory care visit with a primary care provider in 2005. Plan-specific rates ranged from 89.9% to 99.6%. One MassHealth plan (PCC Plan) had a 2006 rate that was significantly better than the benchmark rate (97.5%). Two plans (PCCP and BMCHP) had 2006 rates that were significantly better than their 2004 rate.



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| The percentage of children 12 to 24 months of age who had a visit with a primary care practitio- ner during 2005. | | |
| Nat'l M caid |  |  |
| 75th P ctile |  | 97.5% |
| Nat'l M caid M ean |  | 92.4% |
| MA Co mm M ean |  | 98.5% |
| M ass Health |  | 96.2% |
| Weighted M ean |  |  |
| PCCP |  | 99.6% |
| NHP |  | 97.7% |
| NH |  | 9.9% |
| FCHP |  | 98.0% |
| BM CHP |  | 96.0% |
|  | 0% | 20% 40% 60% 80% 100% |

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| --- | --- | --- | --- |
| The percentage of children 25 months to 6 years of age who had a visit with a primary care practi- tioner during 2005. | | | |
| Nat'l M caid 75th P ctile  Nat'l Mcaid M ean  M A Co mm M ean M ass Health  Weighted M ean  PCCP  NHP NH  FCHP  BM CHP | 0% | 20% 40% | 88.6%  82.8%  95.4%  93.3%  98.7%  93.2%  87.7%  93.9%  91.1%  60% 80% 100% |

Slightly fewer MassHealth members ages 25 months to 6 years had a preventive or ambulatory care visit with a primary care provider in 2005 (93.3%). Plan-specific rates ranged from 87.7% to 98.7%. Four MassHealth plans (PCC Plan, NHP, FCHP and BMCHP) had 2006 rates that were significantly better than the benchmark rate (88.6%). One plan (PCC Plan) had a 2006 rate that was significantly better than its 2004 rate.

**Opportunities for Improvement**

**KEY:**

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile

Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

Overall MassHealth plan rates for these two age-stratified measures have been at or approaching 90% since this measure was first reported with HEDIS 1997. As of HE- DIS 2006, some MassHealth plan rates for this access to care measure were nearing 100%, indicating little addi- tional room for improvement. (A goal of 100% utilization is appropriate for this measure since children in this age group should be receiving annual well-visits.) Opportu- nity for improvement may exist for any plan that per- formed below the benchmark or that had a 2006 rate that was significantly lower than its 2004 rate (possibly indi- cating reduced access).

## Statistical Summary: Ages 12 to 24 Months

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 98.2% | Nat'l Mcaid Mean: | 92.4% | MassHealth Weighted Mean: | 96.2% |
| Nat'l Mcaid 75th Pctile: | 97.5% | MA Commercial Mean: | 98.5% | MassHealth Median: | 97.7% |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |  | | | | | | | | | | | | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
|  |  | **MassHealth Plan Rates** | | | | | | | | | | | | | | |
| **PCCP(A)** | **\***  O  **•** O  **•** | **\*** | **\***  **•**  **•** O  **•** | **\*** | **2006** | |  | **Num** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Den** | **Rate** | **LCL** | **UCL** |
| **NHP(A)** | **\*** | O | **PCCP** | | (A) | 3,967 | 3,981 | 99.6% | 99.5% | 99.8% | **PCCP** | (A) | 5,956 | 6,143 | 97.0% | 96.5% | 97.4% |
| **NH(A)** | **NHP**  **NH** | | (A)  (A) | 3,322  2,518 | 3,400  2,802 | 97.7%  89.9% | 97.2%  88.7% | 98.2%  91.0% | **NHP**  **NH** | (A)  (A) | 2,821  1,569 | 2,913  1,734 | 96.8%  90.5% | 96.2%  89.1% | 97.5%  91.9% |
| **•** | O |
| **FCHP(A)** | **\*** | O | **FCHP** | | (A) | 239 | 244 | 98.0% | 96.0% | 99.9% | **FCHP** | (A) | 196 | 201 | 97.5% | 95.1% | 99.9% |
| **BMCHP(A)** | **\*** | **\*** | **BMCHP** | | (A) | 5,013 | 5,223 | 96.0% | 95.4% | 96.5% | **BMCHP** | (A) | 3,753 | 4,045 | 92.8% | 92.0% | 93.6% |

**Statistical Summary: Ages 25 Months to 6 Years**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | **2006 Comparison Rates** | | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 91.5% Nat'l Mcaid Mean: 82.8% MassHealth Weighted Mean: 93.3%  Nat'l Mcaid 75th Pctile: 88.6% MA Commercial Mean: 95.4% MassHealth Median: 93.2% | | | | | | | | | |
|  | **Nat’l Nat’l Mcaid 75th Mcaid**  **Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
|  | **MassHealth Plan Rates** | | | | | | | | |  |
| **PCCP(A)** | **\* \***  **\* \***   * **\***   **\* \***  **\* \*** | **\***  **•**  **•** O  **•** | **\***  O  **•** O O | **2006** | **Num Den** | **Rate** | **LCL UCL** |  | **2004** | **Num Den** | **Rate** | **LCL UCL** |
| **NHP(A)** | **PCCP** | (A) 17,746 17,972 | 98.7% | 98.6% 98.9% | **PCCP** | (A) 24,891 26,854 | 92.7% | 92.4% 93.0% |
| **NH(A)** | **NHP**  **NH** | (A) 12,263 13,163  (A) 8,238 9,389 | 93.2%  87.7% | 92.7% 93.6%  87.1% 88.4% | **NHP**  **NH** | (A) 11,197 12,148  (A) 5091 5,689 | 92.2%  89.5% | 91.7% 92.7%  88.7% 90.3% |
| **FCHP(A)** | **FCHP** | (A) 882 939 | 93.9% | 92.3% 95.5% | **FCHP** | (A) 914 959 | 95.3% | 93.9% 96.7% |
| **BMCHP(A)** | **BMCHP** | (A) 17,869 19,607 | 91.1% | 90.7% 91.5% | **BMCHP** | (A) 12,591 13,943 | 90.3% | 89.8% 90.8% |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Ages 7 to 11 Years**

**Ages 12 to 19 Years**

**Understanding the Results**

Ninety-six percent (95.6%) of MassHealth members ages 7 to 11 years had a visit with a primary care practitioner during 2004 or 2005. Plan-specific rates ranged from 92.7% to 97.8%. All five MassHealth plans had 2006 rates that were significantly better than the benchmark rate (89.3%). Two MassHealth plans (PCC Plan and FCHP) had 2006 rates that met or ex- ceeded the Massachusetts Commercial mean (96.6%). One plan (PCC Plan) had a 2006 rate that was significantly better than its 2004 rate.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The percentage of children 7 to 11 years of age who had at least one visit with a primary care practitioner in 2004 or 2005. | | | | | |
| Nat'l M caid 75th P ctile  Nat'l M caid M ean  MA Co mm M ean M ass Health  Weighted M ean  P CCP  NHP  NH  FCHP  B M CHP | 0% | 20% | 40% | 60% | 89.3%  82.9%  96.6%  95.6%  97.8%  95.6%  92.7%  97.6%  93.4%  80% 100% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The percentage of adolescents 12 to 19 years of age who had at least one visit with a primary care practitioner in 2004 or 2005. | | | | | |
| Nat'l M caid |  |  |  |  | 87.7% |
| 75th P ctile |  |  |  |  |  |
| Nat'l Mcaid M ean |  |  |  |  | 80.5% |
| M A Co mm M ean |  |  |  |  | 94.1% |
| M ass Health |  |  |  |  | 93.7% |
| Weighted M ean |  |  |  |  |  |
| PCCP |  |  |  |  | 96.0% |
| NHP |  |  |  |  | 93.8% |
| NH |  |  |  |  | 91.0% |
| FCHP |  |  |  |  | 96.0% |
| BM CHP |  |  |  |  | 90.6% |
|  | 0% | 20% | 40% | 60% | 80% 100% |

Access to primary care practitioners for MassHealth members aged 12 to 19 was also high (93.7%). Mass- Health plan rates ranged from 90.6% to 96.0%. All five MassHealth plans had 2006 rates that were sig- nificantly better than the benchmark rate (87.7%).

Three MassHealth plans (PCC Plan, NHP and FCHP) had 2006 rates that met or exceeded the Massachu- setts Commercial mean (94.1%). Two plans (PCC Plan and NHP) had 2006 rates that were significantly better than their 2004 rate.

**Opportunities for Improvement**

**KEY:**

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

HEDIS 2006 rates for both the 7 to 11 year and 12 to 19 year age stratifications dipped slightly since HEDIS 2004, although only two plans had rates that were sig- nificantly lower than their HEDIS 2004 rates. Plans should continue to monitor these age groups for any reduction in visit rates. Plans with rates that are near- ing 100% should focus on continued maintenance of the high rates. A goal of 100% access is appropriate for this measure since children in this age group should have visits with their primary care providers on an an- nual basis.

## Statistical Summary: Ages 7-11 Years

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(A)** | **\*** | **\*** | **\*** | **\*** |
| **NHP(A)** | **\*** | **\*** | **•** | O |
| **NH(A)** | **\*** | **\*** | **•** | **•** |
| **FCHP(A)** | **\*** | **\*** | O | O |
| **BMCHP(A)** | **\*** | **\*** | **•** | **•** |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 92.0%  Nat'l Mcaid 75th Pctile: 89.3% | | | Nat'l Mcaid Mean:  MA Commercial Mean: | | 82.9%  96.6% | | MassHealth Weighted Mean:  MassHealth Median: | | | 95.6%  95.6% | |
| **MassHealth Plan Rates** | | | | | | | | | | |  |
| **2006** | **Num Den** | **Rate** | **LCL UCL** |  | **2004** | **Num Den** | | **Rate** | **LCL** | **UCL** |
| **PCCP** | (A) 14,834 15,161 | 97.8% | 97.6% 98.1% | **PCCP** | (A) | 21,170 21,910 | 96.6% | 96.4% | 96.9% |
| **NHP** | (A) 7,552 7,897 | 95.6% | 95.2% 96.1% | **NHP** | (A) | 7,197 7,582 | 94.9% | 94.4% | 95.4% |
| **NH** | (A) 3,857 4,161 | 92.7% | 91.9% 93.5% | **NH** | (A) | 2,699 2,847 | 94.8% | 94.0% | 95.6% |
| **FCHP** | (A) 617 632 | 97.6% | 96.4% 98.9% | **FCHP** | (A) | 663 680 | 97.5% | 96.3% | 98.7% |
| **BMCHP** | (A) 10,085 10,796 | 93.4% | 92.9% 93.9% | **BMCHP** | (A) | 5,142 5,420 | 94.9% | 94.3% | 95.5% |

**Statistical Summary: Ages 12-19 Years**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 90.2% | Nat'l Mcaid Mean: | 80.5% | MassHealth Weighted Mean: | 93.7% |
| Nat'l Mcaid 75th Pctile: | 87.7% | MA Commercial Mean: | 94.1% | MassHealth Median: | 93.8% |

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| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(A)** | **\***  **\***  **\***  **\***  **\*** | **\***  **\***  **\***  **\***  **\*** | **\***  O  **•**  **\***  **•** | **\***  **\*** O O  **•** |
| **NHP(A)** |
| **NH(A)** |
| **FCHP(A)** |
| **BMCHP(A)** |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (A) | 24,520 | 25,546 | 96.0% | 95.7% | 96.2% | **PCCP** | (A) | 31,680 | 33,492 | 94.6% | 94.3% | 94.8% |
| **NHP** | (A) | 10,774 | 11,491 | 93.8% | 93.3% | 94.2% | **NHP** | (A) | 9,285 | 10,056 | 92.3% | 91.8% | 92.9% |
| **NH** | (A) | 4,928 | 5,418 | 91.0% | 90.2% | 91.7% | **NH** | (A) | 3,089 | 3,348 | 92.3% | 91.3% | 93.2% |
| **FCHP** | (A) | 847 | 882 | 96.0% | 94.7% | 97.4% | **FCHP** | (A) | 884 | 945 | 93.5% | 91.9% | 95.2% |
| **BMCHP** | (A) | 12,625 | 13,937 | 90.6% | 90.1% | 91.1% | **BMCHP** | (A) | 6,481 | 7,000 | 92.6% | 92.0% | 93.2% |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

Living With Illness

**Comprehensive Diabetes Care**

This composite HEDIS measure evaluates seven aspects of diabetes care using a single sample of members ages 18-75\* who have type 1 or type 2 dia- betes. This measure is based on the work of the Diabetes Quality Improvement Project (DQIP). Formed in 1997 and federally funded, DQIP is a coalition of public and private entities that sought to establish a set of quality measures that assessed diabetes care at the health plan level. The specific rates com- prising this measure are based in part on the guidelines of the American Diabetes Association (ADA)33 and include hemoglobin A1c (HbA1c) testing, HbA1c poor control (>9.0%), eye exams performed, screening for kidney disease, LDL-C (cholesterol) screening, and LDL-C control. Future versions of this HEDIS measure will include rates of blood pressure control (<130/80 and <140/90) and a more stringent measure of HbA1c control (<7.0%).34

**HbA1c Testing**

**Poor HbA1c Control**

**Understanding the Results**

Eighty-seven percent (87.4%) of MassHealth members 18-75 years of age\* with diabetes had a HbA1c test dur- ing 2005. Plan-specific rates ranged from 85.2% to 94.0%. Three plans (NHP, FCHP and BMCHP) had rates that were significantly better than the benchmark rate (84.9%). All five plans had 2006 rates that were statistically no different than their 2004 rates.

Forty-five percent (45.2%) of MassHealth members 18- 75 years of age\* with diabetes had poor HbA1c control. Plan-specific rates ranged from 27.2% to 51.3%. (For this measure, a lower rate means better performance.) One plan (FCHP) had a rate that was significantly better than the benchmark rate (37.3%). One plan (NHP) had a 2006 rate that was significantly better than its 2004 rate.



|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The percentage of adults 18 to 75 years of age\* with type 1 or type 2 diabetes who had at least one hemo- globin A1c (HbA1c) test during 2005. | | | | | |
| Nat'l Mcaid |  |  |  |  | 84.9% |
| 75th Pctile |  |  |  |  |  |
| Nat'l Mcaid Mean |  |  |  |  | 76.2% |
| MA Comm M ean |  |  |  |  | 91.4% |
| MassHealth |  |  |  |  | 87.4% |
| Weighted Mean |  |  |  |  |  |
| PCCP |  |  |  |  | 86.4% |
| NHP |  |  |  |  | 91.2% |
| NH |  |  |  |  | 85.2% |
| FCHP |  |  |  |  | 94.0% |
| BMCHP |  |  |  |  | 90.8% |
|  | 0% | 20% | 40% | 60% | 80% 100% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| The percentage of adults 18 to 75 years of age\* with type 1 or type 2 diabetes whose most recent HbA1c test dur- ing 2005 was >9.0%, indicating poor control. ***For this measure, a lower rate means better performance.*** | | | | |
| Nat'l Mcaid |  |  | 37.3% |  |
| 75th Pctile |  |  |  |  |
| Nat'l Mcaid M ean |  |  | 49.1% |  |
| MA Comm M ean |  |  | 29.7% |  |
| MassHealth |  |  | 45.2% |  |
| Weighted M ean |  |  |  |  |
| PCCP |  |  | 48.7% |  |
| NHP |  |  | 32.6% |  |
| NH |  |  | 51.3% |  |
| FCHP |  |  | 27.2% |  |
| BMCHP |  |  | 33.8% |  |
|  | 0% | 20% | 40% 60% 80% | 100% |

**KEY:**

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly better* than the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile

Rate is *significantly worse t*han the 2006 national Medicaid 75th percentile

Although this measure is based on clinical practice guidelines such as those of the ADA, the measure’s cur- rent specifications do not directly correspond to all of those guidelines’ recommendations. For example, the ADA recommends twice yearly HbA1c screenings whereas HEDIS requires one annual screening.35 The HEDIS diabetes measure is an indicator of health plan performance and is not intended to reflect “the minimum or maximum level of care that should be provided to a person with diabetes.”36 However, future versions of this measure will be more closely aligned with current clinical guidelines (e.g., a new measure will define good HbA1c

\* This measure’s age range is 18-75. The MassHealth managed care program generally serves members under the age of

65. Members 65 and older occasionally appear in the denominator of a plan’s HEDIS rate due to a number of valid reasons (see page 13 for more information). MassHealth members 65 and older were included in the eligible population for this measure if the member met all eligible population criteria, including enrollment criteria.

control as<7.0%.)

## Statistical Summary—HbA1c Testing

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **2004**  **Rate** |
| **PCCP(H)** | O | **\*** | **•** | O |
| **NHP(H)** | **\*** | **\*** | O | O |
| **NH(H)** | O | **\*** | **•** | O |
| **FCHP(H)** | **\*** | **\*** | O | O |
| **BMCHP(H)** | **\*** | **\*** | O | O |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 88.8% | Nat'l Mcaid Mean: | 76.2% | MassHealth Weighted Mean: | 87.4% |
| Nat'l Mcaid 75th Pctile: | 84.9% | MA Commercial Mean: | 91.4% | MassHealth Median: | 90.8% |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (H) | 355 | 11,659 | 411 | 86.4% | 82.9% | 89.8% | **PCCP** | (H) | 356 | 11,446 | 411 | 86.6% | 83.2% | 90.0% |
| **NHP** | (H) | 375 | 1,054 | 411 | 91.2% | 88.4% | 94.1% | **NHP** | (H) | 356 | 894 | 411 | 86.6% | 83.2% | 90.0% |
| **NH** | (H) | 350 | 1,105 | 411 | 85.2% | 81.6% | 88.7% | **NH** | (H) | 366 | 757 | 411 | 89.1% | 85.9% | 92.2% |
| **FCHP** | (H) | 142 | 155 | 151 | 94.0% | 89.9% | 98.1% | **FCHP** | (H) | 126 | n/a | 143 | 88.1% | 82.5% | 93.8% |
| **BMCHP** | (H) | 373 | 2,793 | 411 | 90.8% | 87.8% | 93.7% | **BMCHP** | (H) | 356 | 1,735 | 411 | 86.6% | 83.2% | 90.0% |

**Statistical Summary—Poor HbA1c Control (>9.0%)\***

|  |  |  |  |
| --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | |
|  | **Nat’l Nat’l Mcaid 75th Mcaid**  **Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | * O | **•** | O |
| **NHP(H)** | O **\*** | O | **\*** |
| **NH(H)** | * O | **•** | O |
| **FCHP(H)** | **\* \*** | O | O |
| **BMCHP(H)** | O **\*** | O | O |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | | | | | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 30.3% Nat'l Mcaid Mean: 49.1% MassHealth Weighted Mean: 45.2%  Nat'l Mcaid 75th Pctile: 37.3% MA Commercial Mean: 29.7% MassHealth Median: 33.8% | | | | | | | | | | | | | | | | |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (H) | 200 | 11,659 | 411 | 48.7% | 43.7% | 53.6% | **PCCP** | (H) | 193 | 11,446 | 411 | 47.0% | 42.0% | 51.9% |
| **NHP** | (H) | 134 | 1,054 | 411 | 32.6% | 27.9% | 37.3% | **NHP** | (H) | 174 | 894 | 411 | 42.3% | 37.4% | 47.2% |
| **NH** | (H) | 211 | 1,105 | 411 | 51.3% | 46.4% | 56.3% | **NH** | (H) | 209 | 757 | 411 | 50.9% | 45.9% | 55.8% |
| **FCHP** | (H) | 41 | 155 | 151 | 27.2% | 19.7% | 34.6% | **FCHP** | (H) | 48 | n/a | 143 | 33.6% | 25.5% | 41.7% |
| **BMCHP** | (H) | 139 | 2,793 | 411 | 33.8% | 29.1% | 38.5% | **BMCHP** | (H) | 153 | 1,735 | 411 | 37.2% | 32.4% | 42.0% |

\* This measure is the percentage of a plan’s members who have poor HbA1c control; therefore, a lower rate indicates better performance.

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Elig** indicates the Eligible Population

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

**Eye Exams**

**Monitoring Kidney Disease**

**Understanding the Results**

NCQA has relaxed the criteria for identifying adults with diabetes who are at low risk for eye disease. Plans no longer need to document the lack of an insu- lin prescription or an HbA1c level <8.0% during the measurement year in order to accept a negative eye exam in the year prior to the measurement year.

|  |  |  |  |
| --- | --- | --- | --- |
| The percentage of adults 18 to 75 years of age\* with type 1 or type 2 diabetes who had a dilated eye exam\*\* by an eye care professional in 2005 (adults with diabetes who had a negative dilated eye exam in 2004 were also considered compliant). | | | |
| Nat'l M caid |  |  | 61.5% |
| 75th P ctile |  |  |  |
| Nat'l Mcaid M ean |  |  | 48.6% |
| MA Co mm M ean |  |  | 69.6% |
| M assHealth |  |  | 57.9% |
| Weighted M ean |  |  |  |
| P CCP |  |  | 54.3% |
| NHP |  |  | 65.5% |
| NH |  |  | 59.9% |
| FCHP |  |  | 56.3% |
| B M CHP |  |  | 69.8% |
|  | 0% | 20% 40% | 60% 80% 100% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| The percentage of adults 18 to 75 years of age\* with type 1 or type 2 diabetes who were screened for kid- ney disease (nephropathy) during 2005 (adults with a history of the disease were also considered compli- ant). | | | | |
| Nat'l M caid |  |  |  | 59.7% |
| 75th P ctile |  |  |  |  |
| Nat'l M caid M ean |  |  |  | 48.8% |
| M A Co mm M ean |  |  |  | 65.0% |
| M assHealth |  |  |  | 60.3% |
| Weighted M ean |  |  |  |  |
| PCCP |  |  |  | 57.4% |
| NHP |  |  |  | 63.7% |
| NH |  |  |  | 60.8% |
| FCHP |  |  |  | 60.9% |
| BM CHP |  |  |  | 70.6% |
|  | 0% | 20% | 40% | 60% 80% 100% |

Fifty-eight percent (57.9%) of MassHealth members 18-75 years of age\* with diabetes had a eye exam in 2005 or a negative eye exam in 2004. Plan-specific rates ranged from 54.3% to 69.8%. One plan (BMCHP) had a rate that was significantly better than the benchmark rate (61.5%). Two plans (NHP and BMCHP) had 2006 rates that were significantly better than their 2004 rates.



Sixty percent (60.3%) of MassHealth members 18-75 years of age\* with diabetes were either screened for kidney disease (nephropathy) during 2005 or had evi- dence of the disease. Plan-specific rates ranged from 57.4% to 70.6%. One plan (BMCHP) had a rate that was significantly better than the benchmark rate (59.7%). Two plans (NH and BMCHP) had 2006 rates that were significantly better than their 2004 rates.

**KEY:**

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

As noted for other measures included in this report, rates of diabetes care, particularly eye exams, may be higher when calculated through other data sources.

For example, state-specific eye exam rates for people with diabetes are consistently and substantially lower when calculated through HEDIS criteria than when reported through the Behavioral Risk Factor Surveil- lance System (BRFSS).37

\* This measure’s age range is 18-75. The MassHealth managed care program generally serves members under the age of 65. Members 65 and older occasionally appear in the denominator of a plan’s HEDIS rate due to a number of valid reasons (see page 13 for more information). MassHealth members 65 and older were included in the eligible population for this measure if the member met all eligible population criteria, including enrollment criteria.

\*\* Eye exams provided by eye care professionals are a proxy for dilated eye exams because there is no administrative way to determine that a dilated eye exam was performed.

## Statistical Summary—Eye Exams

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | **•** O O O  **\*** | **\*** | **•** | O |
| **NHP(H)** | **\*** | O | **\*** |
| **NH(H)** | **\*** | **•** | O |
| **FCHP(H)** | O | **•** | O |
| **BMCHP(H)** | **\*** | O | **\*** |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 68.1%  Nat'l Mcaid 75th Pctile: 61.5% | | Nat'l Mcaid Mean:  MA Commercial Mean: | | | 48.6%  69.6% | | MassHealth Weighted Mean:  MassHealth Median: | | 57.9%  59.9% |
| **MassHealth Plan Rates** | | | | | | | | | |
| **2006** | **Num Elig Den** | **Rate** | **LCL UCL** |  | **2004** | **Num Elig Den** | | **Rate** | **LCL UCL** |
| **PCCP** | (H) 223 11,659 411 | 54.3% | 49.3% 59.2% | **PCCP** | (H) | 208 11,446 411 | 50.6% | 45.7% 55.6% |
| **NHP** | (H) 269 1,054 411 | 65.5% | 60.7% 70.2% | **NHP** | (H) | 215 894 411 | 52.3% | 47.4% 57.3% |
| **NH** | (H) 246 1,105 411 | 59.9% | 55.0% 64.7% | **NH** | (H) | 211 757 411 | 51.3% | 46.4% 56.3% |
| **FCHP** | (H) 85 155 151 | 56.3% | 48.0% 64.5% | **FCHP** | (H) | 83 n/a 143 | 58.0% | 49.6% 66.5% |
| **BMCHP** | (H) 287 2,793 411 | 69.8% | 65.3% 74.4% | **BMCHP** | (H) | 209 1,735 411 | 50.9% | 45.9% 55.8% |

**Statistical Summary—Monitoring Kidney Disease**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | O | **\*** | **•** O O O  **\*** | O |
| **NHP(H)** | O | **\*** | O |
| **NH(H)** | O | **\*** | **\*** |
| **FCHP(H)** | O | **\*** | O |
| **BMCHP(H)** | **\*** | **\*** | **\*** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 65.6% | Nat'l Mcaid Mean: | 48.8% | MassHealth Weighted Mean: | 60.3% |
| Nat'l Mcaid 75th Pctile: | 59.7% | MA Commercial Mean: | 65.0% | MassHealth Median: | 60.9% |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (H) | 236 | 11,659 | 411 | 57.4% | 52.5% | 62.3% | **PCCP** | (H) | 213 | 11,446 | 411 | 51.8% | 46.9% | 56.8% |
| **NHP** | (H) | 262 | 1,054 | 411 | 63.7% | 59.0% | 68.5% | **NHP** | (H) | 233 | 894 | 411 | 56.7% | 51.8% | 61.6% |
| **NH** | (H) | 250 | 1,105 | 411 | 60.8% | 56.0% | 65.7% | **NH** | (H) | 201 | 757 | 411 | 48.9% | 44.0% | 53.9% |
| **FCHP** | (H) | 92 | 155 | 151 | 60.9% | 52.8% | 69.0% | **FCHP** | (H) | 87 | n/a | 143 | 60.8% | 52.5% | 69.2% |
| **BMCHP** | (H) | 290 | 2,793 | 411 | 70.6% | 66.0% | 75.1% | **BMCHP** | (H) | 241 | 1,735 | 411 | 58.6% | 53.8% | 63.5% |

**LDL-C Testing**

**LDL-C Control (<130mg/dL)**

**LDL-C Control (<100mg/dL)**

The percentage of adults 18 to 75 years of age\* with type 1 or type 2 diabetes who had an LDL-C test during 2004 or 2005.

The percentage of adults 18 to 75 years of age\* with type 1 or type 2 diabetes whose most recent LDL-C test during 2004 or 2005 was <130 mg/dL.

The percentage of adults 18 to 75 years of age\* with type 1 or type 2 diabetes whose most recent LDL-C test during 2004 or 2005 was <100 mg/dL.

Nat'l M caid 75th P ctile

88.1%

Nat'l M caid M ean

80.5%

M A Co mm M ean

94.0%

M assHealth Weighted M ean

90.5%

PCCP

90.5%

NHP

91.5%

NH

88.1%

FCHP

90.1%

BM CHP

91.2%

0% 20% 40% 60% 80% 100%



Nat'l M caid 75th P ctile

61.8%

Nat'l Mcaid M ean

51.3%

M A Co mm M ean

70.6%

M assHealth Weighted M ean

52.9%

PCCP

48.2%

NHP

63.5%

NH

46.2%

FCHP

70.2%

BM CHP

70.6%

0% 20% 40% 60% 80% 100%

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 41.0%  32.6%  45.0%  33.5% | | | | |
|  | | 30.7% | | |
|  | | | | |
|  | | | 38.2% | |
|  | 25.8% | | | |
|  |
|  |
|  | | | | 43.7% |
|  | | | |
|  | | | | 46.2% |
|  | | | |

**KEY:**



Nat'l M caid 75th P ctile

Nat'l M caid M ean

MA Co mm M ean M assHealth

Weighted M ean

P CCP NHP NH

FCHP

B M CHP

0% 20% 40% 60% 80% 100%

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

## Understanding the Results

Ninety-one percent (90.5%) of MassHealth members 18-75 years of age\* with diabetes had an LDL-C test in 2005. Plan-specific rates ranged from 88.1% to 91.5%. Two plans (NHP and BMCHP) had rates that were significantly better than the benchmark rate (88.1%). Two plans (NHP and BMCHP) had 2006 rates that were significantly better than their 2004 rates. Fifty-three percent (52.9%) of MassHealth members 18-75 years of age\* with diabetes had their most recent cholesterol level in 2005 controlled to <130 mg/dL. Plan-specific rates ranged from 48.2% to 70.6%. Two plans (FCHP and BMCHP) had rates that were significantly better than the benchmark rate (61.8%) and two plans (NHP and BMCHP) had 2006 rates that were significantly better than their 2004 rates. The LDL <130mg/dL measure will be retired for HEDIS 2007.

\* This measure’s age range is 18-75. The MassHealth managed care program generally serves members under the age of 65. Members 65 and older occasionally appear in the denominator of a plan’s HEDIS rate due to a number of valid reasons (see page 13 for more information). MassHealth members 65 and older were included in the eligible population for this measure if the member met all eligible population criteria, including enrollment criteria.

## Statistical Summary—LDL-C Testing

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 90.8% | Nat'l Mcaid Mean: | 80.5% | MassHealth Weighted Mean: | 90.5% |
| Nat'l Mcaid 75th Pctile: | 88.1% | MA Commercial Mean: | 94.0% | MassHealth Median: | 90.5% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | O | **\*** | **•** | O |
| **NHP(H)** | **\*** | **\*** | O | **\*** |
| **NH(H)** | O | **\*** | **•** | O |
| **FCHP(H)** | O | **\*** | O | O |
| **BMCHP(H)** | **\*** | **\*** | O | **\*** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (H) | 372 | 11,659 | 411 | 90.5% | 87.6% | 93.5% | **PCCP** | (H) | 364 | 11,446 | 411 | 88.6% | 85.4% | 91.8% |
| **NHP** | (H) | 376 | 1,054 | 411 | 91.5% | 88.7% | 94.3% | **NHP** | (H) | 338 | 894 | 411 | 82.2% | 78.4% | 86.1% |
| **NH** | (H) | 362 | 1,105 | 411 | 88.1% | 84.8% | 91.3% | **NH** | (H) | 348 | 757 | 411 | 84.7% | 81.1% | 88.3% |
| **FCHP** | (H) | 136 | 155 | 151 | 90.1% | 85.0% | 95.2% | **FCHP** | (H) | 126 | n/a | 143 | 88.1% | 82.5% | 93.8% |
| **BMCHP** | (H) | 375 | 2,793 | 411 | 91.2% | 88.4% | 94.1% | **BMCHP** | (H) | 335 | 1,735 | 411 | 81.5% | 77.6% | 85.4% |

## Statistical Summary—LDL-C Control (<130mg/dL)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 69.3% | Nat'l Mcaid Mean: | 51.3% | MassHealth Weighted Mean: | 52.9% |
| Nat'l Mcaid 75th Pctile: | 61.8% | MA Commercial Mean: | 70.6% | MassHealth Median: | 63.5% |

|  |  |  |  |
| --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | |
|  | **Nat’l Nat’l Mcaid 75th Mcaid**  **Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
| **PCCP(H)** | * O | **•** | O |
| **NHP(H)** | O **\*** | **•** | **\*** |
| **NH(H)** | **• •** | **•** | O |
| **FCHP(H)** | **\* \*** | O | O |
| **BMCHP(H)** | **\* \*** | O | **\*** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (H) | 198 | 11,659 | 411 | 48.2% | 43.2% | 53.1% | **PCCP** | (H) | 179 | 11,446 | 411 | 43.6% | 38.6% | 48.5% |
| **NHP** | (H) | 261 | 1,054 | 411 | 63.5% | 58.7% | 68.3% | **NHP** | (H) | 207 | 894 | 411 | 50.4% | 45.4% | 55.3% |
| **NH** | (H) | 190 | 1,105 | 411 | 46.2% | 41.3% | 51.2% | **NH** | (H) | 168 | 757 | 411 | 40.9% | 36.0% | 45.8% |
| **FCHP** | (H) | 106 | 155 | 151 | 70.2% | 62.6% | 77.8% | **FCHP** | (H) | 82 | n/a | 143 | 57.3% | 48.9% | 65.8% |
| **BMCHP** | (H) | 290 | 2,793 | 411 | 70.6% | 66.0% | 75.1% | **BMCHP** | (H) | 207 | 1,735 | 411 | 50.4% | 45.4% | 55.3% |

**Comprehensive Diabetes Care**

## Statistical Summary—LDL-C Control (<100mg/dL)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |  | **2006 Comparison Rates** | | | | | | | | | | | | | | | | |
| Nat'l Mcaid 90th Pctile: 46.5% Nat'l Mcaid Mean: 32.6% MassHealth Weighted Mean: 33.5%  Nat'l Mcaid 75th Pctile: 41.0% MA Commercial Mean: 45.0% MassHealth Median: 38.2% | | | | | | | | | | | | | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate** |
|  | **MassHealth Plan Rates** | | | | | | | | | | | | | | | | |
| **PCCP(H)** | * O | | **•** | O | **2006** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |  | **2004** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **NHP(H)** | O | **\*** | **•** | **\*** | **PCCP** | (H) | 126 | 11,659 | 411 | 30.7% | 26.1% 35.2% | | **PCCP** | (H) | 115 | 11,446 | 411 | 28.0% | 23.5% 32.4% | |
| **NH(H)** | **NHP**  **NH** | (H)  (H) | 157  106 | 1,054  1,105 | 411  411 | 38.2%  25.8% | 33.4% 43.0%  21.4% 30.1% | | **NHP**  **NH** | (H)  (H) | 115  96 | 894  757 | 411  411 | 28.0%  23.4% | 23.5% 32.4%  19.1% 27.6% | |
| **•** | **•** | **•** | O |
| **FCHP(H)** | O | **\*** | O | **\*** | **FCHP** | (H) | 66 | 155 | 151 | 43.7% | 35.5% 52.0% | | **FCHP** | (H) | 34 | n/a | 143 | 23.8% | 16.4% 31.1% | |
| **BMCHP(H)** | **\*** | **\*** | O | **\*** | **BMCHP** | (H) | 190 | 2,793 | 411 | 46.2% | 41.3% 51.2% | | **BMCHP** | (H) | 122 | 1,735 | 411 | 29.7% | 25.1% 34.2% | |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Elig** indicates the Eligible Population

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

\* This measure’s age range is 18-75. The MassHealth managed care program generally serves members under the age of 65. Members 65 and older occasionally appear in the denominator of a plan’s HEDIS rate due to a number of valid reasons (see page 13 for more information). MassHealth members 65 and older were included in the eligible population for this measure if the mem- ber met all eligible population criteria, including enrollment criteria.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Understanding the Results**

The primary goal of cholesterol management in people with diabetes is an LDL<100 mg/dL.38 MassHealth rates for the LDL<100 mg/dL measure were con- siderably lower than the LDL<130 mg/dL measure. Thirty-four percent (33.5%) of MassHealth members 18-75 years of age\* with diabetes had their most recent cholesterol level in 2005 controlled to <100mg/dL. Plan-specific rates ranged from 25.8% to 46.2%. One plan (BMCHP) had a rate that was signifi- cantly better than the benchmark rate (41.0%). Three plans (NHP, FCHP and BMCHP) had 2006 rates that were significantly better than their 2004 rates.

**Comprehensive Diabetes Care**

**Opportunities for Improvement**

Healthy People 2010 includes several goals for diabetes care that are related to the HEDIS Com- prehensive Diabetes Care measure.39 These goals may help to identify opportunities for im- provement related to this measure. For example, Healthy People 2010 seeks to increase the rate of dilated eye exams for people with diabetes to a target rate of 75% from a 1998 baseline rate of 47% (age adjusted to year 2000 standard popula- tion).

Similarly, Healthy People 2010 calls for an in- crease in the rate of nephropathy screening (i.e., urine microalbumin measurement) in adults with diabetes. Although Healthy People 2010 does not specify a target rate for this increase, it does note that such an increase would improve the quality of life for people with diabetes and reduce costs to the health system related to the microvascular and metabolic complications of diabetes.

One of the Healthy People 2010 diabetes goals has already been exceeded by the MassHealth plans. Healthy People 2010 seeks to increase the proportion of adults with diabetes who have an- nual HbA1c screenings to 50% from a 1998 base- line of 24% (age adjusted to year 2000 standard population). The MassHealth plan rates for HbA1c screenings is 87.4%. In addition, several Mass- Health plans have HbA1c screening rates that have met or exceeded both the 2006 national Medicaid 90th percentile and 2006 Massachusetts Commercial mean.

The greatest opportunities for improvement of MassHealth HEDIS diabetes rates may be to im-

prove HbA1c control and cholesterol (LDL) control rates. MassHealth plan performance for the HE- DIS 2006 HbA1c poor control measure (>9.0%), was mixed, with one plan performing favorably compared to the benchmark and two plans not performing favorably compared to the benchmark. Due to the format in which HEDIS data are submit- ted to NCQA and CHPR, it is not known what per- centage of members who were found to have HbA1c controlled to <9.0% also would have had HbA1c controlled to <7.0%, and therefore would have been compliant with the new measure that NCQA will introduce for HEDIS 2007.

Since clinical guidelines recommend that people with diabetes control their cholesterol to <100 mg/ dL, the HEDIS 2006 <130 mg/dL measure was an intermediate measure of plan performance. The transition to reporting only the <100 mg/dL meas- ure beginning with HEDIS 2007 highlights the im- portance of improving LDL control rates.

This measure evaluates whether members with persistent asthma are prescribed mediations that are acceptable as primary therapy for long-term asthma control according to the National Heart, Lung, and Blood Institute’s (NHLBI) *Guidelines for the Diagnosis and Management of Asthma*.40 The guidelines, first issued in 1991 and updated in 1997 and 2002, recommend the use of daily, long-term control medication for patients with persistent asthma symp- toms. Long-term control medications, such as inhaled corticosteroids, reduce airway inflammation41,42 and decrease the asthma exacerbations43 that can increase the risk of emergency department visits, hospitalization, and death.44 Several studies have documented underuse of asthma control medications in Medicaid populations45,46,47 and lower prescription rates for control medications compared to privately insured children.48

The percentage of members 5 to 9 years of age with persistent asthma who were appropriately prescribed control medication (inhaled corticosteroids, or long- acting beta-agonists in conjunction with inhaled corti- costeroids) during 2005.

**Ages 5 to 9 Years**

**Ages 10 to 17 Years**

**Ages 18 to 56 Years**

**KEY:**

Nat'l M caid 75th P ctile

93.4%

Nat'l Mcaid M ean

88.0%

M A Co mm M ean

96.9%

M assHealth Weighted M ean

93.0%

PCCP

94.0%

NHP

93.0%

NH

89.9%

FCHP

BM CHP

94.9%

0% 20% 40% 60% 80% 100%



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| The percentage of members 10 to 17 years of age with persistent asthma who were appropriately prescribed control medication (inhaled corticosteroids, or long- acting beta-agonists in conjunction with inhaled corti- costeroids) during 2005. | | | | |
| Nat'l M caid |  |  |  |  |
| 75th P ctile |  |  |  | 91.1% |
| Nat'l M caid M ean |  |  |  | 85.6% |
| MA Co mm M ean |  |  |  | 92.4% |
| M ass Health |  |  |  |  |
| Weighted M ean |  |  |  | 88.9% |
| P CCP |  |  |  | 88.8% |
| NHP |  |  |  | 90.5% |
| NH |  |  |  | 89.9% |
| FCHP |  |  |  |  |
| B M CHP |  |  |  | 90.9% |
|  | 0% | 20% | 40% 60% | 80% 100% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The percentage of members 18 to 56 years of age with persistent asthma who were appropriately prescribed control medication (inhaled corticosteroids, or long- acting beta-agonists in conjunction with inhaled corti- costeroids) during 2005. | | | | | |
| Nat'l M caid |  |  |  |  | 88.0% |
| 75th P ctile |  |  |  |  |  |
| Nat'l Mcaid M ean |  |  |  |  | 83.4% |
| M A Co mm M ean |  |  |  |  | 88.5% |
| M ass Health |  |  |  |  | 80.4% |
| Weighted M ean |  |  |  |  |  |
| PCCP |  |  |  |  | 78.9% |
| NHP |  |  |  |  | 81.0% |
| NH |  |  |  |  | 82.1% |
| FCHP |  |  |  |  | 75.0% |
| BM CHP |  |  |  |  | 85.5% |
|  | 0% | 20% | 40% | 60% | 80% 100% |

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006) Rate is *significantly above* the 2006 national Medicaid 75th percentile



Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile

Note: FCHP’s denominators for the 5-9 and 10-17 year rates were less than 30. Per HEDIS specifications, any measure for which a plan has fewer than 30 members in the denominator is not reported as a rate. See page 43 for FCHP’s numerator and denomi- nator.

**Combined Ages (5 to 56 Years)**

**Understanding the Results**

NCQA made a significant change to the definition of the eligible population for this measure for HE- DIS 2006. Due to the extent of this change, comparisons of HEDIS 2006 results to HEDIS 2004 or HEDIS 2005 data, including benchmarks, are inappropriate. HEDIS 2004 rates for this measure are not included in this report.

The percentage of members 5 to 56 years of age with persis- tent asthma who were appropriately prescribed control medi- cation (inhaled corticosteroids, or long-acting beta-agonists in conjunction with inhaled corticosteroids) during 2005.

Eighty-five percent (84.9%) of MassHealth members 5-56 years of age with persistent asthma were appropriately prescribed control medication during 2005. Plan-specific rates ranged from 75.3% to 89.2%. No plan had a rate that was significantly better than the benchmark rate (89.7%). Details on the age stratified rates can be found on pages 44 and 45.



Nat'l M caid 75th P ctile

89.7%

Nat'l M caid M ean

85.7%

MA Co mm M ean

89.8%

M ass Health Weighted M ean

84.9%

P CCP

82.9%

NHP

87.6%

NH

85.8%

FCHP

75.3%

B M CHP

89.2%

0% 20% 40% 60% 80% 100%

In recent years, there was concern that the prior HEDIS definition of persistent asthma (which is based on prescriptions, ED visits, hospitalizations, or outpatient visits) led to a high number of “false positives” compared to other severity criteria such as those defined by the NHLBI (which categorizes severity based on daytime and nighttime symptoms and lung function).49 Some evi- dence suggested that the over-classification of persistent asthma using HEDIS criteria was more pronounced for urban and underserved populations.50 There was also concern that the one-year qualification for defining a member as having persistent asthma was not sensitive enough to cap- ture only those members with persistent asthma, and not those with intermittent symptoms.51 (This same study found that most children and adults included in the measure’s eligible population were defined as eligible through the use of asthma medications and not ED visits or outpatient visits).

Because an individual’s asthma status can change over time, measures like the HEDIS measure that identify asthma cases in one year and assess outcomes in a subsequent year may be bi- ased.52 The effect of the prior HEDIS definition for persistent asthma may have inflated the de- nominator for the measure and led to the appearance that providers were under-prescribing control medications. The change in the denominator for HEDIS 2006 (i.e., that members must meet the persistent asthma criteria for two years instead of one) was expected to increase HEDIS rates and reduce variation in the measure overall.53

**KEY:**

Comparison rates (Source of National and MA Commercial data: Quality Compass, 2006)

Rate is *significantly above* the 2006 national Medicaid 75th percentile Rate is *no different than* the 2006 national Medicaid 75th percentile Rate is *significantly below* the 2006 national Medicaid 75th percentile



This measure is reported in three age stratifications (5-9, 10-17, and 18-56 years) and as a com- bined rate (5-56 years). MassHealth plan rates for children and adolescents (i.e., the 5-9 year old and 10-17 year old stratifications) were significantly higher than rates for the adult population (i.e., 18-56 year old stratification). This difference was consistent across all plans. Interestingly, this trend seems to contradict some clinical literature that suggests that children are less likely than adults to receive prescriptions for asthma control medications.54 One reason for this apparent in- consistency may be that the change in specifications for the measure’s denominator differentially impacted the number of children who became eligible for the measure compared to adults (i.e., fewer children were defined as having persistent asthma according to the HEDIS 2006 criteria).

**Statistical Summary—Ages 5 to 9 Years**

**MassHealth Plan Rates**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate\*** |
| **PCCP(A)** | O | **\*** | **•** | n/a |
| **NHP(A)** | O | **\*** | **•** | n/a |
| **NH(A)** | O | O | **•** | n/a |
| **FCHP(A)** | n/a\*\* | n/a\*\* | n/a\*\* | n/a |
| **BMCHP(A)** | O | **\*** | **•** | n/a |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 95.8% | Nat'l Mcaid Mean: | 88.0% | MassHealth Weighted Mean: | 93.0% |
| Nat'l Mcaid 75th Pctile: | 93.4% | MA Commercial Mean: | 96.9% | MassHealth Median: | 93.5% |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **2006** | **Num** | | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (A) | 918 | 977 | 94.0% | 92.4% | 95.5% |
| **NHP** | (A) | 373 | 401 | 93.0% | 90.4% | 95.6% |
| **NH** | (A) | 222 | 247 | 89.9% | 85.9% | 93.8% |
| **FCHP** | (A) | 10 | 14 | n/a\*\* | n/a\*\* | n/a\*\* |
| **BMCHP** | (A) | 582 | 613 | 94.9% | 93.1% | 96.8% |

|  |  |
| --- | --- |
| **2004** | **Num Den Rate LCL UCL** |
| **PCCP NHP NH FCHP**  **BMCHP** | **N/A** |

**Statistical Summary—Ages 10 to 17 Years**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | | |
|  | **Nat’l Mcaid 75th Pctile** | **Nat’l Mcaid Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate\*** |
| **PCCP(A)** | **•** | **\*** | **•** | n/a |
| **NHP(A)** | O | **\*** | O | n/a |
| **NH(A)** | O | **\*** | O | n/a |
| **FCHP(A)** | n/a\*\* | n/a\*\* | n/a\*\* | n/a |
| **BMCHP(A)** | O | **\*** | O | n/a |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 93.5% | Nat'l Mcaid Mean: | 85.6% | MassHealth Weighted Mean: | 88.9% |
| Nat'l Mcaid 75th Pctile: | 91.1% | MA Commercial Mean: | 92.4% | MassHealth Median: | 90.2% |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MassHealth Plan Rates** | | | | | | | | | | | | |
| **2006** |  | **Num** | **Den** | **Rate** | **LCL** | **UCL** | **2004** | **Num** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (A) | 1,151 | 1,296 | 88.8% | 87.1% | 90.6% | **PCCP** |  |  |  |  |  |
| **NHP** | (A) | 446 | 493 | 90.5% | 87.8% | 93.2% | **NHP** |  |  |  |  |  |
| **NH** | (A) | 222 | 247 | 89.9% | 85.9% | 93.8% | **NH** |  |  | **N/A** |  |  |
| **FCHP** | (A) | 18 | 23 | n/a\*\* | n/a\*\* | n/a\*\* | **FCHP** |  |  |  |  |  |
| **BMCHP** | (A) | 518 | 570 | 90.9% | 88.4% | 93.3% | **BMCHP** |  |  |  |  |  |

|  |  |
| --- | --- |
|  |  |
|  |  |

**Legend:**

**\*** 2006 rate is significantly above the comparison rate.

O 2006 rate is not significantly different from the comparison rate.

* 2006 rate is significantly below the comparison rate.

**Num** indicates Numerator

**Den** indicates Denominator

**LCL** indicates Lower Confidence Level

**UCL** indicates Upper Confidence Level

(A) = Measure was collected using administrative method

(H) = Measure was collected using hybrid method

**Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure.

\* NCQA made a significant change to the definition of the eligible population for this measure after HEDIS 2005; comparison to previous benchmarks/rates is inappropriate.

\*\* Per HEDIS specifications, plans with denominators less than 30 do not report rates or confidence intervals.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Statistical Summary—Ages 18 to 56 Years**

**MassHealth Plan Rates**

|  |  |  |  |
| --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | |
|  | **Nat’l Nat’l Mcaid 75th Mcaid Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate\*** |
| **PCCP(A)** | **• •** | **•** | n/a |
| **NHP(A)** | * O | **•** | n/a |
| **NH(A)** | * O | **•** | n/a |
| **FCHP(A)** | * O | **•** | n/a |
| **BMCHP(A)** | * **\*** | **•** | n/a |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 90.9% | Nat'l Mcaid Mean: | 83.4% | MassHealth Weighted Mean: | 80.4% |
| Nat'l Mcaid 75th Pctile: | 88.0% | MA Commercial Mean: | 88.5% | MassHealth Median: | 81.0% |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **2006** | **Num** | | **Den** | **Rate** | **LCL** | **UCL** |
| **PCCP** | (A) | 3,711 | 4,703 | 78.9% | 77.7% | 80.1% |
| **NHP** | (A) | 449 | 554 | 81.0% | 77.7% | 84.4% |
| **NH** | (A) | 446 | 543 | 82.1% | 78.8% | 85.5% |
| **FCHP** | (A) | 45 | 60 | 75.0% | 63.2% | 86.8% |
| **BMCHP** | (A) | 1,008 | 1,179 | 85.5% | 83.4% | 87.5% |

|  |  |
| --- | --- |
| **2004** | **Num Den Rate LCL UCL** |
| **PCCP NHP NH FCHP BMCHP** | **N/A** |

**Statistical Summary—Combined Ages (5 to 56 Years)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Comparison to 2006 Rates:** | | | |
|  | **Nat’l Nat’l Mcaid 75th Mcaid Pctile Mean** | **MA**  **Comm Mean** | **Plan’s 2004**  **Rate\*** |
| **PCCP(A)** | **• •** | **•** | n/a |
| **NHP(A)** | * **\*** | **•** | n/a |
| **NH(A)** | * O | **•** | n/a |
| **FCHP(A)** | **• •** | **•** | n/a |
| **BMCHP(A)** | O **\*** | O | n/a |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates** | | | | | |
| Nat'l Mcaid 90th Pctile: | 92.5% | Nat'l Mcaid Mean: | 85.7% | MassHealth Weighted Mean: | 84.9% |
| Nat'l Mcaid 75th Pctile: | 89.7% | MA Commercial Mean: | 89.8% | MassHealth Median: | 85.8% |

**MassHealth Plan Rates**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2006** | | | **Num Den** | **Rate** | **LCL UCL** | | |  | **2004** | **Num Den Rate LCL UCL** |  |
| **PCCP NHP NH FCHP BMCHP** | | | (A) 5,780 6,976  (A) 12,68 1,448  (A) 890 1,037  (A) 73 97  (A) 2,108 2,362 | 82.9%  87.6%  85.8%  75.3%  89.2% | 82.0% 83.7%  85.8% 89.3%  83.7% 88.0%  66.2% 84.4%  88.0% 90.5% | | | **PCCP NHP NH FCHP BMCHP** | **N/A** |
| **Legend:**  **\*** 2006 rate is significantly above the comparison rate.  O 2006 rate is not significantly different from the comparison rate.   * 2006 rate is significantly below the comparison rate. | |  | **Num** indicates Numerator  **Den** indicates Denominator  **LCL** indicates Lower Confidence Level  **UCL** indicates Upper Confidence Level | | | |  | (A) = Measure was collected using administrative method  (H) = Measure was collected using hybrid method  **Note:** The ability to locate and obtain medical records by a plan or a plan’s contracted vendor can impact performance on a hybrid measure. Per NCQA’s specifications, members for whom no medical record documentation is found are considered non-compliant with the measure. | | | | |
|  | |  | | | |

\* NCQA made a significant change to the definition of the eligible population for this measure after HEDIS 2005; comparison to previous benchmarks/rates is inappropriate.

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Opportunities for Improvement**

Healthy People 2010 has a number of goals related to asthma (e.g., reduction in deaths, hospitalizations, ER visits, activity limitations and missed school/ work days) that are indirectly affected by improved performance on the asthma HEDIS measure.55 The use of control medication, as measured through the HEDIS measure, is associated with lower risk of subsequent emergency department (ED) visits, although the lower ED utilization may be the result of other aspects of care received by recipients of control medication and not solely the effectiveness of the control medication itself.56 One Healthy People 2010 goal that is directly related to this measure is the effort to increase the proportion of persons with asthma who receive appropriate asthma care according to the NHLBI guidelines. This goal specifically recommends providing individuals with asthma with medication regimens that prevent the need for excessive use of short-acting beta agonists for symptom relief. The medications assessed through the asthma HEDIS measure (e.g., inhaled corticosteroids) are medication regimens that can reduce the need for short-acting beta agonists for symptom relief. For these reasons, it is appropriate for MassHealth plans to focus on increasing rates of appropriate medication for MassHealth members with asthma, with a particular focus on adults with asthma, since Mass- Health plan rates for this population are significantly lower than rates for children (ages 5 to 9 years) and adolescents (ages 10 to 17 years).

Improving the management of asthma could help to contain costs. It is estimated that even small plans (those with approximately 50,000 members) have approximately 2,000 members with asthma who create annual medical care costs in excess of 1.5 million dollars.57

Use of Services

**Mental Health Utilization**

The Mental Health Utilization measure provides information about the utilization of mental health services during 2005. These data do not provide informa- tion on the quality of the mental health services utilized (i.e., the appropriateness or effectiveness of care) nor on potential over- or under-utilization of ser- vices. The relationship between utilization and quality is not well-understood. However, plans with low levels of outpatient and inpatient mental health utili- zation have been shown to have increased odds of poor results on other HEDIS behavioral health measures, such as the 7-day and 30-day follow-up rates after hospitalization for mental illness and the acute, continuation and provider measures of antidepressant medication management (these two clinical HE- DIS measures were last collected by MassHealth plans for HEDIS 2005).58

According to the 2004 National Survey on Drug Use and Health, 7.1% of U.S. adults received outpatient treatment and 0.9% received inpatient treatment for mental health problems in the year prior to the survey.59 Chemical dependency services are not included in this measure. Chemical dependency services are reported in the Identification of Alcohol and Other Drug Services and the Chemical Dependency Utilization measures.

#### Note: MassHealth HEDIS mental health utilization data are not case-mix or risk adjusted. In addition, MassHealth HEDIS mental health utilization data differ from utilization data calculated through other methods used by MassHealth. Readers are cautioned against making direct compari- sons between HEDIS mental health utilization data and mental health utilization data obtained from other sources.

**Percentage of Members Using Services**

**Inpatient Discharge and ALOS**

The number and percentage of members who received mental health services during 2005. Mental health services are broken down by inpatient, ambulatory, intermediate, and any service. (Intermediate services include day treatment and partial hospitaliza- tion programs.) The denominator used to calculate the percentages is member years (i.e., member months divided by 12). Data stratified by gender and age (0-12, 13-17, 18-64, and 65+) appear in Appendix F.

The total number of inpatient discharges with mental health as the pri- mary diagnosis during 2005 and the average length of stay (ALOS) for those admissions. Data stratified by gender and age (0-12, 13-17, 18-64, and 65+) appear in Appendix F.

**Member Inpatient Intermediate Ambulatory Any Service**

**Member**

**Discharges /**

**Months N % N % N % N %**

**Months Days ALOS Discharges 1000 Member**

**PCCP NHP NH FCHP BMCHP**

2,949,108 4,149 1.7% 3,417 1.4% 67,637 27.5% 68,757 28.0%

1,199,181 620 0.6% 574 0.6% 15,299 15.3% 15,390 15.4%

849,659 682 1.0% 44 0.1% 14,066 19.9% 14,164 20.0%

113,697 100 1.1% 7 0.1% 2,012 21.2% 2,018 21.3%

1,738,856 1,512 1.0% 258 0.2% 28,916 20.0% 29,094 20.1%

**2006 National Medicaid 75th Percentile**

**PCCP NHP**

**NH FCHP**

2,949,108

1,199,181

849,659

113,697

1,738,856

86,863

8,039

8,756

13

9.4

8.3

6,681

857

1,049

2.3

0.7

1.2

|  |  |  |  |
| --- | --- | --- | --- |
| 1,406 | 8.5 | 165 | 1.5 |
| 18,452 | 7.8 | 2,368 | 1.4 |
|  | 8.5 |  | 1.0 |

**BMCHP**

0.9% 0.0% 10.4% 10.6% **2006 National**

**Medicaid 75th**

**Percentile**

*The source of the National Medicaid 75th Percentile is Quality Compass, 2006.*

**Identification of Alcohol and Other Drug Services & Chemical Dependency Utilization**

These two measures provide information on the extent to which chemical dependency services were used during 2005. Like the data reported for the Mental Health Utilization measure, these data do not provide information on the quality of the chemical dependency services utilized (i.e., the appro- priateness or effectiveness of care) nor on the potential over- or under-utilization of services. NCQA introduced the Identification of Alcohol and Other Drug Services (AOD) measure into the HEDIS measurement set in 2004 as a replacement to the Chemical Dependency Utilization Percentage of Members Receiving Inpatient, Day/Night Care and Ambulatory Services measure, which MassHealth had reported since 1997 and which NCQA fully retired in 2005. The new measure focuses on the identification of people in need of AOD services as the first step toward providing access to appro- priate care.60 The Identification of Alcohol and Other Drug Services measure uses a broader definition of chemical dependency than the previous measure through the addition of procedure codes to the measure’s specifications as well as the removal of the requirement that chemical dependency practitioners perform certain procedures in order for them to be counted.

According to the 2004 National Survey on Drug Use and Health, 1.6% of the US population (aged 12 or older) received some type of substance abuse treatment in the year prior to the survey.61

#### Note: MassHealth HEDIS chemical dependency utilization data are not case-mix or risk-adjusted. In addition, MassHealth HEDIS chemical dependency utilization data differ from utilization data calculated through other methods used by MassHealth. Readers are cautioned against making direct comparisons between HEDIS chemical dependency utilization data and chemical dependency utilization data ob- tained from other sources.

**Identification of Alcohol and Other Drug Services**

**Chemical Dependency Inpatient Discharge and ALOS**

The number and percentage of members who received chemical dependency services during 2005. Chemical dependency services are broken down by inpatient, intermediate, ambulatory, and any service. (Intermediate services include day treatment and partial hospitalization programs. Inpatient services include detoxification, at either a hospital or a treatment facility.) The denominator used to calculate the percentages is member years (i.e., member months divided by 12). Data stratified by gender and age (0-12, 13-17, 18- 64, and 65+) appear in Appendix G.

The number of inpatient discharges with chemical dependency as the primary diagnosis during 2005 and the average length of stay (ALOS) for those ad- missions. Inpatient discharges include detoxification, at either a hospital or a treatment facility. Data stratified by gender and age (0-12, 13-17, 18-64, and 65+) appear in Appendix G.

**Member Inpatient Intermediate Ambulatory Any Service**

**Member**

**Discharges /**

**Months**

**N % N % N % N %**

**Months Days ALOS Discharges 1000 Members**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PCCP** | 2,949,108 | 510 | 0.2% | 4,383 | 1.8% | 11,227 | 4.6% | 13,558 | 5.5% | **PCCP** 2,949,108 38,260 5.3 7,217 2.4 | | | | | |
| **NHP** | 1,199,181 | 566 | 0.6% | 175 | 0.2% | 1,916 | 1.9% | 2,159 | 2.2% | **NHP** 1,199,181 3,731 4 925 0.8 | | | | | |
| **NH** | 849,659 | 1,030 | 1.5% | 30 | 0.0%\* | 2,277 | 3.2% | 2,634 | 3.7% | **NH** | 849,659 | 6,170 | 4.3 | 1,448 | 1.7 |
| **FCHP** | 113,697 | 143 | 1.5% | 44 | 0.5% | 328 | 3.5% | 376 | 4.0% | **FCHP** | 113,697 | 445 | 3.8 | 118 | 1.0 |
| **BMCHP** | 1,738,856 | 2,278 | 1.6% | 87 | 0.1% | 5,816 | 4.0% | 6,591 | 4.5% | **BMCHP** | 1,738,856 | 8,290 | 3.8 | 2,189 | 1.3 |

**2006 National Medicaid 75th Percentile**

1.0% 0.0% 2.1% 2.6% **2006 National**

**Medicaid 75th**

**Percentile**

\* actual rate is 0.0004% *The source of the National Medicaid 75th Percentile is Quality Compass, 2006.*

6.2 0.4

Appendix A:

MassHealth Regions and Service Areas

## MassHealth Service Areas and Regions

#### Region Service Areas\*

Western Adams, Greenfield, Holyoke, Northampton, Pittsfield, Springfield, and Westfield

Central Athol, Framingham, Gardner-Fitchburg, Southbridge, Waltham, and Worcester

Northern Beverly, Gloucester, Haverhill, Lawrence, Lowell, Lynn, Malden, Salem, and Woburn Boston-Greater Boston Boston, Revere, Somerville, and Quincy

Southern Attleboro, Barnstable, Brockton, Fall River, Falmouth, Nantucket, New Bedford, Oak Bluffs, Orleans, Plymouth, Taunton, Wareham

\* each service area includes multiple cities and towns.

Appendix B:

Antigen-Specific Childhood and Adolescent Immunization Rates

**2006 Comparison Rates—3 HepB**

Nat'l Medicaid 90th Percentile: Nat'l Medicaid 75th Percentile: Nat'l Medicaid Mean:

MA Commercial Mean: MassHealth Weighted Mean:

MassHealth Median:

95.2%

92.2%

85.2%

93.1%

89.3%

92.2%

**Antigen-Specific Childhood and Adolescent Immunization Rates**

**Childhood Immunization Rates**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2006 Comparison Rates— 4 DTAP/DT** | | | | |
| Nat'l Medicaid 90th Percentile: | | 88.9% | |  |
| Nat'l Medicaid 75th Percentile: | | 84.1% | |
| Nat'l Medicaid Mean: | | 76.8% | |
| MA Commercial Mean: | | 85.2% | |
| MassHealth Weighted Mean: | | 85.9% | |
| MassHealth Median: | | 89.1% | |
| **DTAP** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 330 4,026 411 | 80.3% | 76.3% | 84.3% |
| NHP | (H) 374 2,749 411 | 91.0% | 88.1% | 93.9% |
| NH | (H) 339 2,200 411 | 82.5% | 78.7% | 86.3% |
| FCHP | (H) 178 191 191 | 93.2% | 89.4% | 97.0% |
| BMCHP | (H) 366 4,650 411 | 89.1% | 85.9% | 92.2% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2006 Comparison Rates— 3 IPV** | | | | |
| Nat'l Medicaid 90th Percentile: | | 94.7% | |  |
| Nat'l Medicaid 75th Percentile: | | 91.7% | |
| Nat'l Medicaid Mean: | | 84.5% | |
| MA Commercial Mean: | | 93.7% | |
| MassHealth Weighted Mean: | | 89.3% | |
| MassHealth Median: | | 92.9% | |
| **IPV** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 337 4,026 411 | 82.0% | 78.2% | 85.8% |
| NHP | (H) 392 2,749 411 | 95.4% | 93.2% | 97.5% |
| NH | (H) 358 2,200 411 | 87.1% | 83.7% | 90.5% |
| FCHP | (H) 183 191 191 | 95.8% | 92.7% | 98.9% |
| BMCHP | (H) 382 4,650 411 | 92.9% | 90.3% | 95.5% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2006 Comparison Rates—1 MMR** | | | | |
| Nat'l Medicaid 90th Percentile: | | 95.3% | |  |
| Nat'l Medicaid 75th Percentile: | | 93.4% | |
| Nat'l Medicaid Mean: | | 89.5% | |
| MA Commercial Mean: | | 94.6% | |
| MassHealth Weighted Mean: | | 92.0% | |
| MassHealth Median: | | 96.4% | |
| **MMR** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 346 4,026 411 | 84.2% | 80.5% | 87.8% |
| NHP | (H) 396 2,749 411 | 96.4% | 94.4% | 98.3% |
| NH | (H) 374 2,200 411 | 91.0% | 88.1% | 93.9% |
| FCHP | (H) 186 191 191 | 97.4% | 94.9% | 99.9% |
| BMCHP | (H) 397 4,650 411 | 96.6% | 94.7% | 98.5% |

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2006 Comparison Rates—3 HiB** | | | | |
| Nat'l Medicaid 90th Percentile: 95.1%  Nat'l Medicaid 75th Percentile: 92.4%  Nat'l Medicaid Mean: 86.7%  MA Commercial Mean: 95.9%  MassHealth Weighted Mean: 93.3%  MassHealth Median: 96.8% | | | | |
| **HIB** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 356 4,026 411 | 86.6% | 83.2% | 90.0% |
| NHP | (H) 404 2,749 411 | 98.3% | 96.9% | 99.7% |
| NH | (H) 376 2,200 411 | 91.5% | 88.7% | 94.3% |
| FCHP | (H) 186 191 191 | 97.4% | 94.9% | 99.9% |
| BMCHP | (H) 398 4,650 411 | 96.8% | 95.0% | 98.7% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2006 Comparison Rates—1 VZV** | | | | |
| Nat'l Medicaid 90th Percentile: | | 93.8% | |  |
| Nat'l Medicaid 75th Percentile: | | 92.0% | |
| Nat'l Medicaid Mean: | | 86.4% | |
| MA Commercial Mean: | | 92.3% | |
| MassHealth Weighted Mean: | | 90.5% | |
| MassHealth Median: | | 93.7% | |
| **VZV** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 334 4,026 411 | 81.3% | 77.4% | 85.2% |
| NHP | (H) 391 2,749 411 | 95.1% | 92.9% | 97.3% |
| NH | (H) 371 2,200 411 | 90.3% | 87.3% | 93.3% |
| FCHP | (H) 179 191 191 | 93.7% | 90.0% | 97.4% |
| BMCHP | (H) 394 4,650 411 | 95.9% | 93.8% | 97.9% |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **HepB** | **Num** | | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) | 336 | 4,026 | 411 | 81.8% | 77.9% | 85.6% |
| NHP | (H) | 395 | 2,749 | 411 | 96.1% | 94.1% | 98.1% |
| NH | (H) | 361 | 2,200 | 411 | 87.8% | 84.6% | 91.1% |
| FCHP | (H) | 183 | 191 | 191 | 95.8% | 92.7% | 98.9% |
| BMCHP | (H) | 379 | 4,650 | 411 | 92.2% | 89.5% | 94.9% |

**Antigen-Specific Childhood and Adolescent Immunization Rates**

### Childhood Immunization Rates (continued)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates—4 PCV** | | | | | | | |
| Nat'l Medicaid 90th Percentile: | | | |  | n/a | |  |
| Nat'l Medicaid 75th Percentile: | | | | n/a | |
| Nat'l Medicaid Mean: | | | | n/a | |
| MA Commercial Mean: | | | | n/a | |
| MassHealth Weighted Mean: | | | | 67.6% | |
| MassHealth Median: | | | | 71.5% | |
| **PCV** |  | **Num** | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) | 245 | 4,026 | 411 | 59.6% | 54.7% | 64.5% |
| NHP | (H) | 298 | 2,749 | 411 | 72.5% | 68.1% | 76.9% |
| NH | (H) | 274 | 2,200 | 411 | 66.7% | 62.0% | 71.3% |
| FCHP | (H) | 148 | 191 | 191 | 77.5% | 71.3% | 83.7% |
| BMCHP | (H) | 294 | 4,650 | 411 | 71.5% | 67.0% | 76.0% |

**Adolescent Immunization Rates**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **2006 Comparison Rates—1 MMR** |  |  | **2006 Comparison Rates—3 HepB** |  |  | **2006 Comparison Rates—1 VZV** |  |
| Nat'l Medicaid 90th Percentile: | 91.2% |  | Nat'l Medicaid 90th Percentile: | 85.4% |  | Nat'l Medicaid 90th Percentile: | 75.2% |
| Nat'l Medicaid 75th Percentile: | 84.5% |  | Nat'l Medicaid 75th Percentile: | 79.4% |  | Nat'l Medicaid 75th Percentile: | 64.5% |
| Nat'l Medicaid Mean: | 70.7% |  | Nat'l Medicaid Mean: | 63.6% |  | Nat'l Medicaid Mean: | 48.3% |
| MA Commercial Mean: | 91.4% |  | MA Commercial Mean: | 91.6% |  | MA Commercial Mean: | 89.9% |
| MassHealth Weighted Mean: | 87.4% |  | MassHealth Weighted Mean: | 85.7% |  | MassHealth Weighted Mean: | 75.8% |
| MassHealth Median: | 88.3% |  | MassHealth Median: | 89.2% |  | MassHealth Median: | 83.6% |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **MMR** | **Num** | | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) | 344 | 4,948 | 411 | 83.7% | 80.0% | 87.4% |
| NHP | (H) | 318 | 2,253 | 360 | 88.3% | 84.9% | 91.8% |
| NH | (H) | 356 | 1,184 | 411 | 86.6% | 83.2% | 90.0% |
| FCHP | (H) | 182 | 191 | 191 | 95.3% | 92.0% | 98.6% |
| BMCHP | (H) | 384 | 2,806 | 411 | 93.4% | 90.9% | 95.9% |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **HepB** | **Num** | | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) | 334 | 4,948 | 411 | 81.3% | 77.4% | 85.2% |
| NHP | (H) | 321 | 2,253 | 360 | 89.2% | 85.8% | 92.5% |
| NH | (H) | 338 | 1,184 | 411 | 82.2% | 78.4% | 86.1% |
| FCHP | (H) | 178 | 191 | 191 | 93.2% | 89.4% | 97.0% |
| BMCHP | (H) | 378 | 2,806 | 411 | 92.0% | 89.2% | 94.7% |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **VZV** | **Num** | | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) | 263 | 4,948 | 411 | 64.0% | 59.2% | 68.8% |
| NHP | (H) | 301 | 2,253 | 360 | 83.6% | 79.6% | 87.6% |
| NH | (H) | 324 | 1,184 | 411 | 78.8% | 74.8% | 82.9% |
| FCHP | (H) | 175 | 191 | 191 | 91.6% | 87.4% | 95.8% |
| BMCHP | (H) | 363 | 2,806 | 411 | 88.3% | 85.1% | 91.5% |

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

Appendix C:

Well-Child Visit in the First 15 Months of Life (Rates for 0, 1, 2, 3, 4 and 5 Visits)

Well-Child rates (0,1,2,3,4 and 5 Visits)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2005/2006 Comparison Rates—0 visits** | | | | |
| Nat'l Medicaid 90th Percentile: 10.0%  Nat'l Medicaid 75th Percentile: 3.9%  Nat'l Medicaid Mean: 5.0%  MA Commercial Mean: 0.7%  MassHealth Weighted Mean: 1.5%  MassHealth Median: 1.0% | | | | |
| **0 visits** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 1 2,838 260 | 0.4% | 0.0% | 1.3% |
| NHP | (H) 2 2,285 296 | 0.7% | 0.0% | 1.8% |
| NH | (H) 25 1,512 411 | 6.1% | 3.7% | 8.5% |
| FCHP | (H) 3 184 184 | 1.6% | 0.0% | 3.7% |
| BMCHP | (H) 4 3,630 411 | 1.0% | 0.0% | 2.0% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2005/2006 Comparison Rates—1 visit** | | | | |
| Nat'l Medicaid 90th Percentile: 6.7%  Nat'l Medicaid 75th Percentile: 4.0%  Nat'l Medicaid Mean: 3.5%  MA Commercial Mean: 0.2%  MassHealth Weighted Mean: 0.3%  MassHealth Median: 0.5% | | | | |
| **1 visit** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 0 2,838 260 | 0.0% | 0.0% | 0.2% |
| NHP | (H) 2 2,285 296 | 0.7% | 0.0% | 1.8% |
| NH | (H) 4 1,512 411 | 1.0% | 0.0% | 2.0% |
| FCHP | (H) 1 184 184 | 0.5% | 0.0% | 1.9% |
| BMCHP | (H) 0 3,630 411 | 0.0% | 0.0% | 0.1% |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2005/2006 Comparison Rates—2 visits** | | | | |
| Nat'l Medicaid 90th Percentile: 7.7%  Nat'l Medicaid 75th Percentile: 5.7%  Nat'l Medicaid Mean: 4.5%  MA Commercial Mean: 0.4%  MassHealth Weighted Mean: 0.6%  MassHealth Median: 1.1% | | | | |
| **2 visits** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 0 2,838 260 | 0.0% | 0.0% | 0.2% |
| NHP | (H) 5 2,285 296 | 1.7% | 0.1% | 3.3% |
| NH | (H) 5 1,512 411 | 1.2% | 0.0% | 2.4% |
| FCHP | (H) 2 184 184 | 1.1% | 0.0% | 2.9% |
| BMCHP | (H) 1 3,630 411 | 0.2% | 0.0% | 0.8% |

**2005/2006 Comparison Rates—3 visits**

Nat'l Medicaid 90th Percentile: Nat'l Medicaid 75th Percentile: Nat'l Medicaid Mean:

MA Commercial Mean:

MassHealth Weighted Mean: MassHealth Median:

11.1%

8.8%

7.1%

1.2%

1.4%

1.7%

**2005/2006 Comparison Rates—4 visits**

Nat'l Medicaid 90th Percentile: Nat'l Medicaid 75th Percentile: Nat'l Medicaid Mean:

MA Commercial Mean:

MassHealth Weighted Mean: MassHealth Median:

17.5%

15.1%

12.6%

3.2%

4.0%

5.4%

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2005/2006 Comparison Rates—5 visits** | | | | |
| Nat'l Medicaid 90th Percentile: 25.3%  Nat'l Medicaid 75th Percentile: 22.6%  Nat'l Medicaid Mean: 18.8%  MA Commercial Mean: 7.6%  MassHealth Weighted Mean: 10.0%  MassHealth Median: 10.3% | | | | |
| **5 visits** | **Num Elig Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) 15 2,838 260 | 5.8% | 2.7% | 8.8% |
| NHP | (H) 34 2,285 296 | 11.5% | 7.7% | 15.3% |
| NH | (H) 61 1,512 411 | 14.8% | 11.3% | 18.4% |
| FCHP | (H) 19 184 184 | 10.3% | 5.7% | 15.0% |
| BMCHP | (H) 42 3,630 411 | 10.2% | 7.2% | 13.3% |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **3 visits** | **Num** | | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) | 2 | 2,838 | 260 | 0.8% | 0.0% | 2.0% |
| NHP | (H) | 2 | 2,285 | 296 | 0.7% | 0.0% | 1.8% |
| NH | (H) | 10 | 1,512 | 411 | 2.4% | 0.8% | 4.0% |
| FCHP | (H) | 9 | 184 | 184 | 4.9% | 1.5% | 8.3% |
| BMCHP | (H) | 7 | 3,630 | 411 | 1.7% | 0.3% | 3.1% |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **4 visits** | **Num** | | **Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| PCCP | (H) | 6 | 2,838 | 260 | 2.3% | 0.3% | 4.3% |
| NHP | (H) | 16 | 2,285 | 296 | 5.4% | 2.7% | 8.2% |
| NH | (H) | 22 | 1,512 | 411 | 5.4% | 3.1% | 7.7% |
| FCHP | (H) | 20 | 184 | 184 | 10.9% | 6.1% | 15.6% |
| BMCHP | (H) | 14 | 3,630 | 411 | 3.4% | 1.5% | 5.3% |

Appendix D:

Comprehensive Diabetes Care—PCC Plan Members with Essential Coverage

**Comprehensive Diabetes Care—PCC Plan Members with Essential Coverage**

|  |
| --- |
| **HbA1c Testing** |
| **2006 Comparison Rates** |
| Nat'l Medicaid 90th Percentile: 88.8%  Nat'l Medicaid 75th Percentile: 84.9%  Nat'l Medicaid Mean: 76.2%  MA Commercial Mean: 91.4% |

|  |
| --- |
| **Eye Exam** |
| **2006 Comparison Rates** |
| Nat'l Medicaid 90th Percentile: 68.1%  Nat'l Medicaid 75th Percentile: 61.5%  Nat'l Medicaid Mean: 48.6%  MA Commercial Mean: 69.6% |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Num Elig Den** | **Rate** | **LCL UCL** |
| **PCC Plan w/o Essential** | (H) 355 11,659 411 | 86.4% | 82.9% 89.8% |
| **Essential Only** | (H) 343 1,404 411 | 83.5% | 79.7% 87.2% |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Num Elig Den** | **Rate** | **LCL UCL** |
| **PCC Plan w/o Essential** | (H) 223 11,659 411 | 54.3% | 49.3% 59.2% |
| **Essential Only** | (H) 181 1,404 411 | 44.0% | 39.1% 49.0% |

Note: Essential members are restricted to eye exams performed by ophthalmologists only. PCC Plan members who do not have Essen- tial coverage can have eye exams performed by an optometrist or ophthalmologist.

|  |
| --- |
| **Poor HbA1c Control\*** |
| **2006 Comparison Rates** |

|  |
| --- |
| **LDL-C Testing** |
| **2006 Comparison Rates** |
| Nat'l Medicaid 90th Percentile: 90.8%  Nat'l Medicaid 75th Percentile: 88.1%  Nat'l Medicaid Mean: 80.5%  MA Commercial Mean: 94.0% |

|  |
| --- |
| Nat'l Medicaid 90th Percentile: 30.3%  Nat'l Medicaid 75th Percentile: 37.3%  Nat'l Medicaid Mean: 49.1%  MA Commercial Mean: 29.7% |

\* This measure is the percentage of a plan’s members who have poor HbA1c control; therefore, a lower rate indicates better perform- ance.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Num Elig Den** | **Rate** | **LCL UCL** |
| **PCC Plan w/o Essential** | (H) 200 11,659 411 | 48.7% | 43.7% 53.6% |
| **Essential Only** | (H) 194 1,404 411 | 47.2% | 42.3% 52.2% |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Num Elig Den** | **Rate** | **LCL UCL** |
| **PCC Plan w/o Essential** | (H) 372 11,659 411 | 90.5% | 87.6% 93.5% |
| **Essential Only** | (H) 349 1,404 411 | 84.9% | 81.3% 88.5% |

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

**Comprehensive Diabetes Care—PCC Plan Members with Essential Coverage**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **LDL-C Control (<130 mg/dL)** | | | | | |
| **2006 Comparison Rates** | | | | | |
| Nat'l Medicaid 90th Percentile: | |  | 69.3% | |  |
| Nat'l Medicaid 75th Percentile: | | 61.8% | |
| Nat'l Medicaid Mean: | | 51.3% | |
| MA Commercial Mean: | | 70.6% | |
|  | **Num Elig** | **Den** | **Rate** | **LCL** | **UCL** |
| **PCC Plan w/o Essential** | (H) 198 11,659 | 411 | 48.2% | 43.2% | 53.1% |
| **Essential Only** | (H) 215 1,404 | 411 | 52.3% | 47.4% | 57.3% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **LDL-C Control (<100 mg/dL)** | | | | | |
| **2006 Comparison Rates** | | | | | |
| Nat'l Medicaid 90th Percentile: | |  | 46.5% | |  |
| Nat'l Medicaid 75th Percentile: | | 41.0% | |
| Nat'l Medicaid Mean: | | 32.6% | |
| MA Commercial Mean: | | 45.0% | |
|  | **Num Den** | **Elig** | **Rate** | **LCL** | **UCL** |
| **PCC Plan w/o Essential** | (H) 126 411 | 11,659 | 30.7% | 26.1% | 35.2% |
| **Essential Only** | (H) 148 411 | 1,404 | 36.0% | 31.2% | 40.8% |

|  |
| --- |
| **Monitoring Kidney Disease** |
| **2006 Comparison Rates** |
| Nat'l Medicaid 90th Percentile: 65.6%  Nat'l Medicaid 75th Percentile: 59.7%  Nat'l Medicaid Mean: 48.8%  MA Commercial Mean: 65.0% |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Num Elig Den** | **Rate** | **LCL UCL** |
| **PCC Plan w/o Essential** | (H) 236 11,659 411 | 57.4% | 52.5% 62.3% |
| **Essential Only** | (H) 223 1,404 411 | 54.3% | 49.3% 59.2% |

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

Appendix E:

Use of Appropriate Medications for People with Asthma—PCC Plan Members with Essential Coverage

**Use of Appropriate Medications for People with Asthma—PCC Plan Members with Essential Coverage**

|  |
| --- |
| **Use of Appropriate Medications for People with Asthma—18 to 56 Years** |
| **2006 Comparison Rates** |
| Nat'l Medicaid 90th Percentile: 92.5%  Nat'l Medicaid 75th Percentile: 89.7%  Nat'l Medicaid Mean: 85.7%  MA Commercial Mean: 89.8% |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Num Den** | **Rate** | **LCL UCL** |
| **PCC Plan w/o Essential** | (A) 3,711 4,703 | 78.9% | 77.7% 80.1% |
| **Essential Only** | (A) 201 253 | 79.5% | 74.3% 84.6% |

*The source of the National Medicaid 90th Percentile, National Medicaid 75th Percentile, National Medicaid Mean, and MA Commercial Mean is Quality Compass, 2006.*

Appendix F:

Mental Health Utilization Rates, Age and Gender Stratifications, All Plans

### Ages 0-12

Male Female

**Member Inpatient Intermediate Ambulatory Any Service Member Inpatient Intermediate Ambulatory Any Service**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| **PCCP** | 493,321 | 205 | 0.5% | 559 | 1.4% | 7,770 | 18.9% | 7,857 | 19.1% | **PCCP** | 452,068 | 82 | 0.2% | 207 | 0.5% | 4,483 | 11.9% | 4,513 | 12.0% |
| **NHP** | 286,692 | 57 | 0.2% | 131 | 0.5% | 2,763 | 11.6% | 2,775 | 11.6% | **NHP** | 281,444 | 13 | 0.1% | 46 | 0.2% | 1,794 | 7.6% | 1,796 | 7.7% |
| **NH** | 213,115 | 47 | 0.3% | 1 | 0.0%\* | 3,040 | 17.1% | 3,046 | 17.2% | **NH** | 205,650 | 24 | 0.1% | 1 | 0.0%\* | 1,819 | 10.6% | 1,824 | 10.6% |
| **FCHP** | 232,08 | 4 | 0.2% | 0 | 0.0% | 363 | 18.8% | 363 | 18.8% | **FCHP** | 23,549 | 1 | 0.1% | 0 | 0.0% | 233 | 11.9% | 233 | 11.9% |
| **BMCHP** | 429,679 | 103 | 0.3% | 21 | 0.1% | 5,898 | 16.5% | 5,906 | 16.5% | **BMCHP** | 415,955 | 50 | 0.1% | 10 | 0.0% | 3,608 | 10.4% | 3613 | 10.4% |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Member** | **Inpatient** | Male  **Intermediate** | **Ambulatory** | **Ages 13-17**  **Any Service** | **Member** | **Inpatient** | Female  **Intermediate** | **Ambulatory** | **Any Service** |
| **Months** | **N %** | **N %** | **N %** | **N %** | **Months** | **N %** | **N %** | **N %** | **N %** |
| **PCCP** | 199,564 | 210 1.3% | 285 1.7% | 4,904 29.5% | 4,971 29.9% **PCCP** | 184,524 | 226 1.5% | 345 2.2% | 4,180 27.2% | 4,238 27.6% |
| **NHP** | 89,545 | 52 0.7% | 74 1.0% | 1,349 18.1% | 1,361 18.2% **NHP** | 95,249 | 92 1.2% | 88 1.1% | 1,569 19.8% | 1,581 19.9% |
| **NH** | 56,216 | 48 1.0% | 8 0.2% | 946 20.2% | 952 20.3% **NH** | 56,497 | 49 1.0% | 3 0.1% | 1,055 22.4% | 1,060 22.5% |
| **FCHP** | 7,689 | 8 1.2% | 0 0.0% | 133 20.8% | 134 20.9% **FCHP** | 7,488 | 6 1.0% | 0 0.0% | 147 23.6% | 148 23.7% |
| **BMCHP** | 120,056 | 62 0.6% | 6 0.1% | 1,895 18.9% | 1,899 19.0% **BMCHP** | 121,766 | 113 1.1% | 15 0.1% | 2,092 20.6% | 2,104 20.7% |

### Ages 18-64

Male Female

**Member Inpatient Intermediate Ambulatory Any Service Member Inpatient Intermediate Ambulatory Any Service**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| **PCCP** | 553,448 | 1,496 | 3.2% | 845 | 1.8% | 15,087 | 32.7% | 15,536 | 33.7% | **PCCP** | 1,066,183 | 1,930 | 2.2% | 1,176 | 1.3% | 31,213 | 35.1% | 31,642 | 35.6% |
| **NHP** | 93,423 | 109 | 1.4% | 54 | 0.7% | 1,261 | 16.2% | 1,281 | 16.5% | **NHP** | 352,591 | 297 | 1.0% | 181 | 0.6% | 6,563 | 22.3% | 6,596 | 22.4% |
| **NH** | 87,502 | 171 | 2.3% | 12 | 0.2% | 1,645 | 22.6% | 1,678 | 23.0% | **NH** | 230,678 | 343 | 1.8% | 19 | 0.1% | 5,561 | 28.9% | 5,604 | 29.2% |
| **FCHP** | 13,930 | 26 | 2.2% | 3 | 0.3% | 246 | 21.2% | 248 | 21.4% | **FCHP** | 37,833 | 55 | 1.7% | 4 | 0.1% | 890 | 28.2% | 892 | 28.3% |
| **BMCHP** | 163,481 | 399 | 2.9% | 47 | 0.3% | 3,428 | 25.2% | 3,486 | 25.6% | **BMCHP** | 487,899 | 785 | 1.9% | 159 | 0.4% | 11,994 | 29.5% | 12,085 | 29.7% |

# Male

### Ages 65+ \*

Female

**Member Inpatient Intermediate Ambulatory Any Service Member Inpatient Intermediate Ambulatory Any Service**

**PCCP NHP NH**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **PCCP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| 125 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **NHP** | 112 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| 1 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **NH** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **FCHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| 1 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **BMCHP** | 10 | 0 | 0.0% | 0 | 0.0% | 1 | 120.0% | 1 | 120.0% |

**FCHP BMCHP**

\* The MassHealth managed care program serves members under the age of 65. MassHealth members 65 years and older were included in the eligible populations for the HE- DIS 2006 measures whenever the specifications for the measure included the 65 and older population, the members’ coverage had not yet been terminated, and the members met all eligible population criteria such as the continuous enrollment and enrollment anchor date requirements.

### Ages Unknown

Male Female

**Member Inpatient Intermediate Ambulatory Any Service Member Inpatient Intermediate Ambulatory Any Service**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| **PCCP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **PCCP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **NHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **NHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **NH** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **NH** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **FCHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **FCHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **BMCHP** | 9 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | **BMCHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |

### TOTAL Male/Female: Ages 0—12 TOTAL Male/Female: Ages 13-17

**Member Inpatient Intermediate Ambulatory Any Service Member Inpatient Intermediate Ambulatory Any Service**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| **PCCP** | 945,389 | 287 | 0.4% | 766 | 1.0% | 12,253 | 15.6% | 12,370 | 15.7% | **PCCP** | 384,088 | 436 | 1.4% | 630 | 2.0% | 9,084 | 28.4% | 9,209 | 28.8% |
| **NHP** | 568,136 | 70 | 0.1% | 177 | 0.4% | 4,557 | 9.6% | 4,571 | 9.7% | **NHP** | 184,794 | 144 | 0.9% | 162 | 1.1% | 2,918 | 18.9% | 2,942 | 19.1% |
| **NH** | 418,765 | 71 | 0.2% | 2 | 0.0%\* | 4,859 | 13.9% | 4,870 | 14.0% | **NH** | 112,713 | 97 | 1.0% | 11 | 0.1% | 2,001 | 21.3% | 2,012 | 21.4% |
| **FCHP** | 46,757 | 5 | 0.1% | 0 | 0.0% | 596 | 15.3% | 596 | 15.3% | **FCHP** | 15,177 | 14 | 1.1% | 0 | 0.0% | 280 | 22.1% | 282 | 22.3% |
| **BMCHP** | 845,634 | 153 | 0.2% | 31 | 0.0% | 9,506 | 13.5% | 9,519 | 13.5% | **BMCHP** | 241,822 | 175 | 0.9% | 21 | 0.1% | 3,987 | 19.8% | 4,003 | 19.9% |

### TOTAL Male/Female: Ages 18-64 TOTAL Male/Female: Ages 65+ \*

**Member Inpatient Intermediate Ambulatory Any Service Months N % N % N % N %**

1,619,631 3,426 2.5% 2,021 1.5% 46,300 34.3% 47,178 35.0%

446,014 406 1.1% 235 0.6% 7,824 21.1% 7,877 21.2%

318,180 514 1.9% 31 0.1% 7,206 27.2% 7,282 27.5%

51,763 81 1.9% 7 0.2% 1,136 26.3% 1,140 26.4%

651,380 1,184 2.2% 206 0.4% 15,422 28.4% 15,571 28.7%

**Member Inpatient Intermediate Ambulatory Any Service Months N % N % N % N %**

**PCCP NHP NH FCHP BMCHP**

**PCCP NHP NH**

**FCHP BMCHP**

0

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11

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1 109.1% 1 109.1%

\* The MassHealth managed care program serves members under the age of 65. MassHealth members 65 years and older were included in the eligible populations for the HE- DIS 2006 measures whenever the specifications for the measure included the 65 and older population, the members’ coverage had not yet been terminated, and the members met all eligible population criteria such as the continuous enrollment and enrollment anchor date requirements.

### TOTAL Male/Female: Ages Unknown

**Member Inpatient Intermediate Ambulatory Any Service**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| **PCCP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **NHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **NH** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **FCHP** | 0 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| **BMCHP** | 9 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |

### Ages 0-12

**Ages 13-17**

**Member**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MALE** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** | **MALE** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| **PCCP** | 493,321 | 10,000 | 26.5 | 378 | 0.8 | **PCCP** | 199,564 | 7,310 | 24.3 | 301 | 1.5 |
| **NHP** | 286,692 | 1,443 | 17.0 | 85 | 0.3 | **NHP** | 89,545 | 687 | 10.0 | 69 | 0.8 |
| **NH** | 213,115 | 557 | 9.8 | 57 | 0.3 | **NH** | 56,216 | 730 | 11.1 | 66 | 1.2 |
| **FCHP** | 23,208 | 28 | 7.0 | 4 | 0.2 | **FCHP** | 7,689 | 101 | 11.2 | 9 | 1.2 |
| **BMCHP** | 429,679 | 1,480 | 10.9 | 136 | 0.3 | **BMCHP** | 120,056 | 1,035 | 13.8 | 75 | 0.6 |
| **FEMALE** | **Member Months** | **Days** | **ALOS** | **Discharges** | **Discharges / 1000 Member** | **FEMALE** | **Member Months** | **Days** | **ALOS** | **Discharges** | **Discharges / 1000 Member** |
| **PCCP** | 452,068 | 3,373 | 26.4 | 128 | 0.3 | **PCCP** | 184,524 | 7,379 | 21.6 | 342 | 1.9 |
| **NHP** | 281,444 | 265 | 14.7 | 18 | 0.1 | **NHP** | 95,249 | 1,481 | 13.7 | 108 | 1.1 |
| **NH** | 205,650 | 229 | 7.9 | 29 | 0.1 | **NH** | 56,497 | 727 | 10.5 | 69 | 1.2 |
| **FCHP** | 23,549 | 5 | 5.0 | 1 | 0.0 | **FCHP** | 7,488 | 37 | 4.1 | 9 | 1.2 |
| **BMCHP** | 415,955 | 773 | 12.1 | 64 | 0.2 | **BMCHP** | 121,766 | 1,396 | 9.1 | 153 | 1.3 |

**Discharges /**

**Member**

**Discharges /**

### TOTAL

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| **PCCP** | 945,389 | 13,373 | 26.4 | 506 | 0.5 |
| **NHP** | 568,136 | 1,708 | 16.6 | 103 | 0.2 |
| **NH** | 418,765 | 786 | 9.1 | 86 | 0.2 |
| **FCHP** | 46,757 | 33 | 6.6 | 5 | 0.1 |
| **BMCHP** | 845,634 | 2,253 | 11.3 | 200 | 0.2 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| **PCCP** | 384,088 | 14,689 | 22.8 | 643 | 1.7 |
| **NHP** | 184,794 | 2,168 | 12.2 | 177 | 1.0 |
| **NH** | 112,713 | 1,457 | 10.8 | 135 | 1.2 |
| **FCHP** | 15,177 | 138 | 7.7 | 18 | 1.2 |
| **BMCHP** | 241,822 | 2,431 | 10.7 | 228 | 0.9 |

**Member**

**Discharges /**

### TOTAL

**Member**

**Discharges /**

**Mental Health Utilization—Inpatient Discharges and Average Length of Stay (ALOS)**

**Member**

### Ages 18-64

**Discharges /**

**Member**

### Ages 65+ \*

**Discharges /**

### MALE

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|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PCCP** | 553,448 | 27,009 | 10.9 | 2,475 | 4.5 |
| **NHP** | 93,423 | 1,145 | 7.2 | 159 | 1.7 |
| **NH** | 87,502 | 2,559 | 8.6 | 296 | 3.4 |
| **FCHP** | 13,930 | 367 | 9.7 | 38 | 2.7 |
| **BMCHP** | 163,481 | 5,552 | 7.4 | 750 | 4.6 |

**Months Days ALOS Discharges 1000 Member**

### MALE

**PCCP NHP**

**NH FCHP BMCHP**

**Months Days ALOS Discharges 1000 Member**

**Member**

**Discharges /**

**Member**

**Discharges /**

### FEMALE

**Months Days ALOS Discharges 1000 Member**

### FEMALE

**Months Days ALOS Discharges 1000 Member**

**PCCP NHP**

1,066,183 31,792 10.4

352,591 3,018 7.2

3,057

418

2.9

1.2

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **NH** | 230,678 | 3,954 | 7.4 | 532 | 2.3 |
| **FCHP** | 37,833 | 868 | 8.3 | 104 | 2.7 |
| **BMCHP** | 487,899 | 8,216 | 6.9 | 1,190 | 2.4 |

**PCCP NHP**

**NH FCHP BMCHP**

0

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**Member**

**Discharges /**

**Member**

**Discharges /**

### TOTAL

**Months Days ALOS Discharges 1000 Member**

### TOTAL

**Months Days ALOS Discharges 1000 Member**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PCCP** | 1,619,631 | 58,801 | 10.6 | 5,532 | 3.4 | **PCCP** | 0 | 0 . | 0 . |
| **NHP** | 446,014 | 4,163 | 7.2 | 577 | 1.3 | **NHP** | 237 | 0 . | 0 0.0 |
| **NH** | 318,180 | 6,513 | 7.9 | 828 | 2.6 | **NH** | 1 | 0 . | 0 0.0 |
| **FCHP** | 51,763 | 1,235 | 8.7 | 142 | 2.7 | **FCHP** | 0 | 0 . | 0 . |
| **BMCHP** | 651,380 | 13,768 | 7.1 | 1,940 | 3.0 | **BMCHP** | 11 | 0 . | 0 0.0 |
|  | | | | | | Note: Rates that cannot be calculated are represented by . | | | |

\* The MassHealth managed care program serves members under the age of 65. MassHealth members 65 years and older were included in the eligible populations for the HE- DIS 2006 measures whenever the specifications for the measure included the 65 and older population, the members’ coverage had not yet been terminated, and the members met all eligible population criteria such as the continuous enrollment and enrollment anchor date requirements.

**Member**

### Age Unknown

**Discharges /**

**Member**

### All Age Categories

**Discharges /**

### MALE

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PCCP** | . | . . . . | **PCCP** | 1,246,333 | 44,319 | 14.1 | 3,154 | 2.5 |
| **NHP** | 0 | 0 . 0 . | **NHP** | 469,785 | 3,275 | 10.5 | 313 | 0.7 |
| **NH** | 0 | 0 . 0 . | **NH** | 356,834 | 3,846 | 9.2 | 419 | 1.2 |
| **FCHP** | 0 | 0 . 0 . | **FCHP** | 44,827 | 496 | 9.7 | 51 | 1.1 |
| **BMCHP** | 9 | 0 . 0 . | **BMCHP** | 713,226 | 8,067 | 8.4 | 961 | 1.3 |
| **Member Discharges /** | | | **Member Discharge** | | | | | |

**FEMALE**

**Months Days ALOS Discharges 1000 Member**

### MALE

**Months Days ALOS Discharges 1000 Member**

**s/**

**PCCP NHP**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** | **FEMALE** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| . | . | . | . | . | **PCCP** | 1,702,775 | 42,544 | 12.1 | 3,527 | 2.1 |
| 0 | 0 | . | 0 | . | **NHP** | 729,396 | 4,764 | 8.8 | 544 | 0.7 |
| 0 | 0 | . | 0 | . | **NH** | 492,825 | 4,910 | 7.8 | 630 | 1.3 |
| 0 | 0 | . | 0 | . | **FCHP** | 68,870 | 910 | 8.0 | 114 | 1.7 |
| 0 | 0 | . | 0 | . | **BMCHP** | 1,025,630 | 10,385 | 7.4 | 1,407 | 1.4 |
| **Member Discharges /**  **Months Days ALOS Discharges 1000 Member** | | | | | **TOTAL** | **Member Discharges /**  **Months Days ALOS Discharges 1000 Member** | | | | |
| . | . . . . **PCCP** | | | | | 2,949,108 | 86,863 | 13.0 | 6,681 | 2.3 |
| 0 | 0 . 0 . **NHP** | | | | | 1,199,181 | 8,039 | 9.4 | 857 | 0.7 |
| 0 | 0 . 0 . **NH** | | | | | 849,659 | 8,756 | 8.3 | 1,049 | 1.2 |
| 0 | 0 . 0 . **FCHP** | | | | | 113,697 | 1,406 | 8.5 | 165 | 1.5 |
| 9 | 0 . 0 . **BMCHP** | | | | | 1,738,856 | 18,452 | 7.8 | 2,368 | 1.4 |

**NH FCHP BMCHP**

### TOTAL

**PCCP NHP**

**NH FCHP BMCHP**

Note: Rates that cannot be calculated are represented by .

Appendix G:

Chemical Dependency Utilization Rate, Age and Gender Stratifications, All Plans

### Ages 0-12

**Ages 13-17**

**Member**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MALE** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** | **MALE** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| **PCCP** | 493,321 | 0 | . | 0 | 0.0 | **PCCP** | 199,564 | 347 | 23.1 | 15 | 0.1 |
| **NHP** | 286,692 | 0 | . | 0 | 0.0 | **NHP** | 89,545 | 31 | 6.2 | 5 | 0.1 |
| **NH** | 213,115 | 0 | . | 0 | 0.0 | **NH** | 56,216 | 19 | 4.8 | 4 | 0.1 |
| **FCHP** | 23,208 | 0 | . | 0 | 0.0 | **FCHP** | 7,689 | 3 | 3.0 | 1 | 0.1 |
| **BMCHP** | 429,679 | 0 | . | 0 | 0.0 | **BMCHP** | 120,056 | 19 | 2.1 | 9 | 0.1 |
| **FEMALE** | **Member Months** | **Days** | **ALOS** | **Discharges** | **Discharges / 1000 Member** | **FEMALE** | **Member Months** | **Days** | **ALOS** | **Discharges** | **Discharges / 1000 Member** |
| **PCCP** | 452,068 | 0 | . | 0 | 0.0 | **PCCP** | 184,524 | 128 | 9.1 | 14 | 0.1 |
| **NHP** | 281,444 | 0 | . | 0 | 0.0 | **NHP** | 95,249 | 48 | 5.3 | 9 | 0.1 |
| **NH** | 205,650 | 0 | . | 0 | 0.0 | **NH** | 56,497 | 29 | 3.2 | 9 | 0.2 |
| **FCHP** | 23,549 | 0 | . | 0 | 0.0 | **FCHP** | 7,488 | 0 | . | 0 | 0.0 |
| **BMCHP** | 415,955 | 0 | . | 0 | 0.0 | **BMCHP** | 121,766 | 31 | 3.9 | 8 | 0.1 |

**Discharges /**

**Member**

**Discharges /**

### TOTAL

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** | **TOTAL** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| **PCCP** | 945,389 | 0 | . | 0 | 0.0 | **PCCP** | 384,088 | 475 | 16.4 | 29 | 0.1 |
| **NHP** | 568,136 | 0 | . | 0 | 0.0 | **NHP** | 184,794 | 79 | 5.6 | 14 | 0.1 |
| **NH** | 418,765 | 0 | . | 0 | 0.0 | **NH** | 112,713 | 48 | 3.7 | 13 | 0.1 |
| **FCHP** | 46,757 | 0 | . | 0 | 0.0 | **FCHP** | 15,177 | 3 | 3.0 | 1 | 0.1 |
| **BMCHP** | 845,634 | 0 | . | 0 | 0.0 | **BMCHP** | 241,822 | 50 | 2.9 | 17 | 0.1 |

**Member**

**Discharges /**

**Member**

**Discharges /**

**Chemical Dependency Utilization—Inpatient Discharges and Average Length of Stay**

**Member**

### Ages 18-64

**Discharges /**

**Member**

### Ages 65+ \*

**Discharges /**

### MALE

**Months Days ALOS Discharges 1000 Member**

### MALE

**Months Days ALOS Discharges 1000 Member**

|  |  |  |  |
| --- | --- | --- | --- |
| **PCCP** | 0 0 . 0 . | | |
| **NHP** | 125 | 0 . | 0 0.0 |
| **NH** | 1 | 0 . | 0 0.0 |
| **FCHP** | 0 | 0 . | 0 . |
| **BMCHP** | 1 | 0 . | 0 0.0 |

**Member Discharges /**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PCCP** | 553,448 | 22,571 | 5.2 | 4,365 | 7.9 |
| **NHP** | 93,423 | 1,393 | 3.8 | 363 | 3.9 |
| **NH** | 87,502 | 3,129 | 4.4 | 708 | 8.1 |
| **FCHP** | 13,930 | 240 | 4.0 | 60 | 4.3 |
| **BMCHP** | 163,481 | 4,580 | 3.7 | 1,244 | 7.6 |
|  | **Member** |  |  |  | **Discharges /** |

### FEMALE

**Months Days ALOS Discharges 1000 Member**

### FEMALE

**Months Days ALOS Discharges 1000 Member**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PCCP** | 1,066,183 | 15,214 | 5.4 | 2,823 | 2.6 | **PCCP** | 0 | 0 . | 0 . |
| **NHP** | 352,591 | 2,259 | 4.1 | 548 | 1.6 | **NHP** | 112 | 0 . | 0 0.0 |
| **NH** | 230,678 | 2,993 | 4.1 | 727 | 3.2 | **NH** | 0 | 0 . | 0 . |
| **FCHP** | 37,833 | 202 | 3.5 | 57 | 1.5 | **FCHP** | 0 | 0 . | 0 . |
| **BMCHP** | 487,899 | 3,660 | 3.9 | 928 | 1.9 | **BMCHP** | 10 | 0 . | 0 0.0 |

**Member**

**Discharges /**

**Member**

**Discharges /**

### TOTAL

**Months Days ALOS Discharges 1000 Member**

### TOTAL

**Months Days ALOS Discharges 1000 Member**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PCCP** | 1,619,631 | 37,785 | 5.3 | 7,188 | 4.4 | **PCCP** | 0 | 0 . | 0 . |
| **NHP** | 446,014 | 3,652 | 4.0 | 911 | 2.0 | **NHP** | 237 | 0 . | 0 0.0 |
| **NH** | 318,180 | 6,122 | 4.3 | 1,435 | 4.5 | **NH** | 1 | 0 . | 0 0.0 |
| **FCHP** | 51,763 | 442 | 3.8 | 117 | 2.3 | **FCHP** | 0 | 0 . | 0 . |
| **BMCHP** | 651,380 | 8,240 | 3.8 | 2,172 | 3.3 | **BMCHP** | 11 | 0 . | 0 0.0 |

Note: Rates that cannot be calculated are represented by .

\* The MassHealth managed care program serves members under the age of 65. MassHealth members 65 years and older were included in the eligible populations for the HEDIS 2006 measures whenever the specifications for the measure included the 65 and older population, the members’ coverage had not yet been terminated, and the members met all eligible population criteria such as the continuous enrollment and enrollment anchor date requirements.

### Age Unknown

**All Age Categories**

**Member**

**Discharges /**

**Member**

**Discharges /**

### MALE

**Months Days ALOS Discharges 1000 Member**

### MALE

**Months Days ALOS Discharges 1000 Member**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PCCP** | . | . . . . | **PCCP** | 1,246,333 | 22,918 | 5.2 | 4,380 | 3.5 |
| **NHP** | 0 | 0 . 0 . | **NHP** | 469,785 | 1,424 | 3.9 | 368 | 0.8 |
| **NH** | 0 | 0 . 0 . | **NH** | 356,834 | 3,148 | 4.4 | 712 | 2.0 |
| **FCHP** | 0 | 0 . 0 . | **FCHP** | 44,827 | 243 | 4.0 | 61 | 1.4 |
| **BMCHP** | 9 | 0 . 0 . | **BMCHP** | 713,226 | 4,599 | 3.7 | 1,253 | 1.8 |

**Member**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MALE** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** | **FEMALE** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| **PCCP** | . | . | . | . | . | **PCCP** | 1,702,775 | 15,342 | 5.4 | 2,837 | 1.7 |
| **NHP** | 0 | 0 | . | 0 | . | **NHP** | 729,396 | 2,307 | 4.1 | 557 | 0.8 |
| **NH** | 0 | 0 | . | 0 | . | **NH** | 492,825 | 3,022 | 4.1 | 736 | 1.5 |
| **FCHP** | 0 | 0 | . | 0 | . | **FCHP** | 68,870 | 202 | 3.5 | 57 | 0.8 |
| **BMCHP** | 0 | 0 | . | 0 | . | **BMCHP** | 1,025,630 | 3,691 | 3.9 | 936 | 0.9 |

### FE

**Discharges /**

**Member**

**Discharges /**

### TOTAL

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** | **TOTAL** | **Months** | **Days** | **ALOS** | **Discharges** | **1000 Member** |
| **PCCP** | . | . | . | . | . | **PCCP** | 2,949,108 | 38,260 | 5.3 | 7,217 | 2.4 |
| **NHP** | 0 | 0 | . | 0 | . | **NHP** | 1,199,181 | 3,731 | 4.0 | 925 | 0.8 |
| **NH** | 0 | 0 | . | 0 | . | **NH** | 849,659 | 6,170 | 4.3 | 1,448 | 1.7 |
| **FCHP** | 0 | 0 | . | 0 | . | **FCHP** | 113,697 | 445 | 3.8 | 118 | 1.0 |
| **BMCHP** | 9 | 0 | . | 0 | . | **BMCHP** | 1,738,856 | 8,290 | 3.8 | 2,189 | 1.3 |

**Member**

**Discharges /**

**Member**

**Discharges /**

Appendix H:

PCC Plan Mental Health Utilization Rates for Members with Basic, Essential, and Non-Basic/Non- Essential Coverage

### Members with Basic Coverage

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| Ages 18-64 | 68,122 | 352 | 6.2% | 250 | 4.4% | 3522 | 62.0% | 3653 | 64.3% |

**Member Inpatient Intermediate Ambulatory Any Service**

### Members with Essential Coverage

**Member Inpatient Intermediate Ambulatory Any Service Months N % N % N % N %**

Ages 18-64

431,961 811 2.3% 505 1.4% 6,090 16.9% 6,545 18.2%

### Members with

**Non-Basic/Non-Essential Coverage**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Months** | **N** | **%** | **N** | **%** | **N** | **%** | **N** | **%** |
| Ages 0-12 | 945,387 | 287 | 0.4% | 766 | 1.0% | 12,253 | 15.6% | 12,370 | 15.7% |
| Ages 13-17 | 384,088 | 436 | 1.4% | 630 | 2.0% | 9,084 | 28.4% | 9,209 | 28.8% |
| Ages 18-64 | 1,551,509 | 3,100 | 2.4% | 1,801 | 1.4% | 43,489 | 33.6% | 44,277 | 34.2% |
| Ages Total | 2,880,984 | 3,823 | 1.6% | 3,197 | 1.3% | 64,826 | 27.0% | 65,856 | 27.4% |

**Member Inpatient Intermediate Ambulatory Any Service**

**Mental Health Utilization—Inpatient Discharges and Average Length of Stay (ALOS)**

**Member Discharges /**

### Members with Basic Coverage

**Months Days ALOS Discharges 1000 Member**

Ages 18-64

68,122

5,130

9.1

565

8.3

**Member Discharges /**

### Members with Essential Coverage

**Months Days ALOS Discharges 1000 Member**

Ages 18-64

431,961

10,833

8.5

1,275

3.0

### Members with

**Non-Basic/Non-Essential Coverage**

**Member**

**Discharges /**

**Months Days ALOS Discharges 1000 Member**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Ages 0-12 | 945,387 | 13,373 | 26.4 | 506 | 0.5 |
| Ages 13-17 | 384,088 | 14,689 | 22.8 | 643 | 1.7 |
| Ages 18-64 | 1,551,509 | 53,671 | 10.8 | 4,967 | 3.2 |
| Ages Total | 2,880,984 | 81,733 | 13.4 | 6,116 | 2.1 |

Appendix I:

PCC Plan Chemical Dependency Utilization Rates for Members with Basic, Essential, and Non-Basic/Non- Essential Coverage

### Members with Basic Coverage

|  |  |  |  |
| --- | --- | --- | --- |
| **Member** |  |  | **Discharges /** |
| **Months** | **Days** | **ALOS** | **Discharges 1000 Member** |

Ages 18-64

68,122

9,712

5.1

1,895

27.8

**Member Discharges /**

### Members with Essential Coverage

**Months Days ALOS Discharges 1000 Member**

Ages 18-64

431,961

39,083

5.2

7,466

17.3

### Members with

**Member**

**Discharges /**

### Non-Basic/Non-Essential Coverage

**Months Days ALOS Discharges 1000 Member**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Ages 0-12 | 945,387 | 0 | . | 0 | 0.0 |
| Ages 13-17 | 384,088 | 475 | 16.4 | 29 | 0.1 |
| Ages 18-64 | 1,551,509 | 28,073 | 5.3 | 5,293 | 3.4 |
| Ages Total | 2,880,984 | 28,548 | 5.4 | 5,322 | 1.8 |

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