



# **Overview of HealthChoice Quality Assurance Activities**

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Maryland Department of  
Health and Mental Hygiene  
October 23, 2014



## **Overview of Quality Review Activities**

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### **The following activities reviewed services provided in calendar year (CY) 2013:**

- Systems Performance Review
- Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Record Reviews
- Enrollee Satisfaction Surveys
- Provider Satisfaction Surveys
- Healthcare Effectiveness Data and Information Set (HEDIS) Reporting
- Value-Based Purchasing Initiative
- Consumer Report Card
- Performance Improvement Projects (PIP)
- Annual Technical Review Report



## Systems Performance Review

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- Systems Performance Review (SPR) is performed annually to determine Managed Care Organization (MCO) compliance with regulations and provide quality assurance oversight.
- The Department contracts with Delmarva Foundation to conduct the annual SPR.



## Systems Performance Review

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- The minimum compliance rate for all standards is 100% for established MCOs.
- For new MCO Riverside Health of Maryland, the minimum compliance rate is 80% for its first review year.
- For any standard, or components of a standard, that did not meet the minimum compliance rate, the MCO was required to develop and implement an approved Corrective Action Plan (CAP).

# Systems Performance Review

Performance Standard	Description	MD MCO Compliance CY 2013	ACC CY 2013	JMS CY 2013	MPC CY 2013	MSFC CY 2013	PPMCO CY 2013	RHMD** CY 2013	UHC CY 2013
1	Systematic Process	100%	Exempt	Exempt	Exempt	Exempt	Exempt	100%	Exempt
2	Governing Body	100%	100%	100%	100%	100%	100%	100%	100%
3	Oversight of Delegated Entities	83%*	100%	100%	100%	100%	100%	36%*	71%*
4	Credentialing	98%*	100%	100%	100%	100%	100%	98%	100%
5	Enrollee Rights	96%*	100%	100%	100%	100%	90%*	94%	90%*
6	Availability and Access	96%*	100%	100%	100%	100%	95%*	80%	100%
7	Utilization Review	90%*	100%	100%	100%	100%	80%*	67%*	85%*
8	Continuity of Care	100%	100%	100%	100%	100%	100%	100%	100%
9	Health Education Plan	88%*	Exempt	Exempt	Exempt	Exempt	Exempt	88%	Exempt
10	Outreach Plan	93%*	Exempt	Exempt	Exempt	Exempt	Exempt	93%	Exempt
11	Fraud and Abuse	98%*	100%	100%	100%	100%	100%	89%	100%

\*Denotes that the minimum compliance rate of 100% was unmet.

\*\*RHMD's minimum compliance threshold is set at 80%, as this was the MCO's first SPR.



## EPSDT Record Reviews

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- Delmarva Foundation performed 2,366 medical record reviews for children/adolescents under the age of 21 with a preventive care visit in CY 2013. Nurse reviewers went onsite to 241 provider offices.
- MCOs must demonstrate a 75% compliance rate for each component; otherwise, a CAP is required.
- One MCO was required to do CAPs for CY 2013. The remaining six met the minimum compliance rate in all five components.

# EPSDT Record Reviews

<b>Component</b>	<b>Aggregate Scores CY2013</b>
<b>Health and Developmental History</b>	89%
<b>Comprehensive Physical Exam</b>	91%
<b>Laboratory Tests/At Risk Screenings (PKU, lead, anemia, risk assts. for TB, cholesterol, STI, etc.)</b>	77%
<b>Immunizations</b>	84%
<b>Health Education and Anticipatory Guidance</b>	89%



## Enrollee Satisfaction Surveys

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- WBA, DHMH's contractor, conducts annual enrollee satisfaction surveys to evaluate member's satisfaction with their MCO. The Surveys are conducted for HealthChoice members only. WBA no longer conducts a Primary Adult Care (PAC) satisfaction survey. The PAC program ended December 31, 2013 as a result of the implementation of the Affordable Care Act (ACA), which transferred former PAC participants to HealthChoice.
- Response rates increased by 1% and 2% for the adult and child satisfaction survey respectively, when compared to last year's survey results.



# Enrollee Satisfaction Surveys

## Results

	Surveys Mailed	Surveys Returned	Response Rate	Compared to CY2012
HC ADULTS	11,421	3,600	32%	+1%
HC CHILDREN	13,179	4,489	34%	+2%

## Satisfaction Survey Scores:

COMPOSITE MEASURES	ADULT		CHILDREN	
	CY 2012	CY 2013	CY 2012	CY 2013
How Well Doctors Communicate	89%	89%	94%	94%
Getting Care Quickly	80%	79%	91%	90%
Customer Service	81%	85%	87%	87%
Getting Needed Care	79%	80%	82%	84%

## Provider Satisfaction Surveys

- WBA conducted the CY 2013 annual Provider Satisfaction Survey for the HealthChoice program.

	Surveys Mailed	Surveys Returned	Response Rate	Compared to CY2012
<b>Primary Care Providers (PCPs)</b>	5,793	1,346	24%	+2%

- Satisfaction Survey Scores

Composite Measures	CY2012	CY2013
<b>No-Show Appointments</b>	81%	84%
<b>Overall Satisfaction</b>	82%	83%
<b>Finance Issues</b>	43%	47%
<b>Customer Service/Provider Relations</b>	41%	44%
<b>Coordination of Care/Case Management</b>	38%	42%
<b>Utilization Management</b>	29%	34%



## HEDIS Performance Measures

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- HEDIS is a standardized set of performance measures developed by the National Committee for Quality Assurance (NCQA) to measure health plan performance for comparison among health systems.
- This standardized tool is used by more than 90% of health plans across the country.



## **HEDIS Performance Measures**

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- ❑ For CY 2013, HealthChoice MCOs were required to report their performance on 32 HEDIS measures and the four PAC MCOs reported on 5 HEDIS measures.
- ❑ Five additional measures were reported by HealthChoice MCOs for CY 2013:
  - Asthma Medication Ratio (AMR)
  - Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)
  - Pharmacotherapy Management of COPD Exacerbation (PCE)
  - Persistence of Beta Blocker Treatment after a Heart Attack (PBH)
  - Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents (WCC)



## HEDIS Performance Measures

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- **Significant HealthChoice performance increases include:**
  - Adult BMI Assessment increased 11 percentage points.
  - Breast Cancer Screening increased 7.3 percentage points.
  - Childhood Immunization Status (Combination 10) increased 3.5 percentage points.
  - Immunizations for Adolescents (Combination 1) increased 3.5 percentage points.
  
- **Significant PAC performance increase:**
  - Breast Cancer Screening increased 10.7 percentage points.



# HealthChoice Organizations HEDIS CY2013 Results

Table A – HealthChoice Organizations HEDIS 2014 Results, page two of four	ACC		JMS		MPC		MSFC		PP		RHP		UHC		MARR					
	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2014				
Use of Appropriate Medications for People with Asthma (ASM) – Ages 5-11	91.4%	88.7%	90.3%	94.2%	91.4%	93.59%	93.0%	92.3%	91.4%	96.7%	93.7%	93.62%	91.7%	92.3%	91.6%	NA <sup>2</sup>	95.7%	96.1%	91.9%	92.1%
Use of Appropriate Medications for People with Asthma (ASM) – Total Ages 12-18	88.2%	86.2%	87.8%	100.0%	92.9%	86.0%	91.1%	92.3%	90.4%	93.3%	90.2%	94.2%	90.8%	89.6%	88.5%	NA <sup>2</sup>	96.6%	93.4%	88.0%	89.1%
Use of Appropriate Medications for People with Asthma (ASM) – Total Ages 19-50	78.0%	79.5%	73.7%	91.3%	93.3%	81.3%	82.8%	81.8%	80.4%	85.2%	76.8%	75.2%	77.9%	80.7%	76.8%	NA <sup>2</sup>	95.1%	88.0%	72.9%	76.7%
Use of Appropriate Medications for People with Asthma (ASM) – Total Ages 51-64	71.2%	77.7%	68.6%	83.7%	82.0%	71.43%	81.7%	78.5%	76.3%	NA	77.1%	NA	69.2%	77.0%	73.0%	NA <sup>2</sup>	95.0%	94.1%	79.0%	73.7%
Use of Appropriate Medications for People with Asthma (ASM) – Total Ages 5-50*	89.1%	86.5%	86.29%	95.7%	90.7%	83.6%	90.7%	88.7%	86.97%	95.5%	88.8%	90.1%	89.3%	88.9%	87.02%	NA <sup>2</sup>	96.7%	94.0%	86.28%	86.7%
Use of Appropriate Medications for People with Asthma (ASM) – Total 50% of treatment period	88.5%	86.7%	86.8%	93.9%	92.5%	86.4%	89.8%	89.2%	87.53%	93.6%	89.4%	90.1%	88.9%	89.3%	87.6%	NA <sup>2</sup>	95.9%	94.0%	86.6%	87.51%
Medication Management for People With Asthma (MMA) – Total 75% of treatment period	44.8%	45.8%	45.8%	49.4%	53.2%	49.4%	49.4%	49.4%	57.9%	52.4%	52.4%	51.9%	40.3%	43.3%	43.3%	NA <sup>2</sup>	47.3%	49.9%	49.9%	49.7%
Medication Management for People With Asthma (MMA) – Total 175% of treatment period	24.1%	22.9%	22.9%	28.9%	28.9%	24.5%	26.6%	26.6%	32.9%	28.7%	28.7%	26.6%	19.7%	20.0%	20.0%	NA <sup>2</sup>	26.7%	27.8%	27.8%	25.8%
Appropriate Treatment for Children with Upper Respiratory Infection (URI)	86.13%	85.1%	86.5%	89.8%	85.2%	83.0%	86.08%	86.06%	86.6%	89.0%	86.13%	84.3%	86.01%	85.0%	86.0%	NA <sup>2</sup>	80.2%	80.1%	82.0%	84.7%
Asthma Medication Ratio (AMR)			68.59%			60.5%			69.1%			73.7%			69.6%	NA <sup>2</sup>			69.8%	68.56%
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)			25.8%			26.3%			21.1%			34.5%			23.7%	NA <sup>2</sup>			25.6%	26.2%
Pharmacotherapy Management of COPD Exacerbation (PCE) – Systemic Corticosteroid Rate			73.6%			69.2%			72.6%			76.3%			69.7%	NA <sup>2</sup>			78.2%	73.3%
Pharmacotherapy Management of COPD Exacerbation (PCE) – Bronchodilator Rate			87.5%			82.5%			84.93%			90.3%			84.0%	NA <sup>2</sup>			84.88%	85.7%
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 12-24 months	97.45%	97.5%	97.8%	92.9%	91.1%	94.7%	96.8%	97.1%	96.5%	96.6%	96.6%	96.4%	91.4%	90.3%	89.8%	NA <sup>2</sup>	97.41%	96.7%	96.3%	96.6%
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 25 months-6 years	92.6%	92.6%	92.8%	89.3%	90.4%	88.7%	90.7%	89.0%	90.0%	91.4%	90.3%	89.8%	92.9%	92.5%	93.5%	NA <sup>2</sup>	92.1%	91.1%	91.1%	90.8%
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 7-11 years	93.6%	93.9%	94.3%	94.0%	93.3%	93.8%	92.0%	91.5%	92.1%	92.9%	92.5%	93.5%	90.9%	92.5%	92.7%	NA <sup>2</sup>	93.0%	93.3%	93.1%	93.5%
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 12-19 years	89.3%	89.5%	90.5%	92.4%	91.7%	90.8%	88.4%	87.7%	88.5%	90.9%	92.5%	92.7%	91.6%	92.0%	91.9%	NA <sup>2</sup>	88.5%	89.2%	90.1%	90.7%
Adults' Access to Preventive/Ambulatory Health Services (AAP) – Age 20-44 years	80.4%	79.7%	79.4%	75.5%	74.8%	72.9%	81.2%	81.4%	81.1%	79.6%	79.9%	79.7%	83.7%	83.5%	81.7%	NA <sup>2</sup>	80.3%	80.2%	80.36%	79.2%
Adults' Access to Preventive/Ambulatory Health Services (AAP) – Age 45-64 years	87.0%	86.4%	87.2%	88.8%	87.8%	86.58%	87.28%	86.8%	87.8%	85.9%	86.2%	86.9%	0.0%	0.0%	0.0%	NA <sup>2</sup>	87.31%	87.5%	87.8%	87.5%
Breast Cancer Screening (BCS)	48.5%	49.1%	58.1%	63.9%	60.8%	69.4%	43.6%	43.9%	48.5%	54.5%	56.8%	64.4%	49.9%	51.5%	57.0%	NA <sup>2</sup>	46.8%	48.4%	52.7%	58.3%
Cervical Cancer Screening (CCS)	75.71%	73.6%	79.64%	78.5%	80.9%	79.5%	73.6%	74.0%	79.58%	75.74%	70.9%	74.0%	73.9%	75.0%	75.9%	NA <sup>2</sup>	69.5%	69.8%	62.8%	75.2%
Chlamydia Screening in Women (CHL) – Age 16-20 years	61.1%	62.6%	62.4%	84.0%	81.1%	86.7%	58.5%	58.1%	58.2%	57.4%	59.6%	54.8%	62.6%	61.8%	61.5%	NA <sup>2</sup>	57.1%	56.9%	55.4%	63.2%

New measure for HEDIS 2013

\*When denominator is less than 30 eligible members, NA is automatically assigned as the performance score

<sup>2</sup>A lower rate indicates better performance.

<sup>3</sup>HEDIS specifications changed in 2012, and this age range is no longer reported. For 2013 and 2014, this rate is being calculated by HDC.

<sup>4</sup>New measure for HEDIS 2014.

MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean

ACC = AMERIGROUP Community Care JMS = Jai Medical Systems MPC = MedStar Family Choice PP = Priority Partners RHP = Riverside Health Plan/UHC = UnitedHealthcare

# HealthChoice Organizations HEDIS CY2013 Results

Table A – HealthChoice Organizations HEDIS 2014 Results page three of four	ACC		JMS		MPC		MSFC		PP		RHP		UHC		MARR					
	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013		2014				
Chlamydia Screening in Women (CHL) – Age 21–24 years	70.6%	72.5%	71.9%	77.4%	63.9%	72.3%	66.6%	67.6%	67.1%	70.5%	74.0%	68.4%	69.8%	68.9%	69.9%	64.8%	63.7%	64.8%	69.1%	
Chlamydia Screening in Women (CHL) – Total (16–24) years	64.8%	66.4%	66.0%	81.3%	74.2%	81.2%	62.0%	62.3%	62.0%	62.5%	65.0%	60.1%	65.4%	64.6%	64.8%	NA <sup>2</sup>	NA <sup>2</sup>	NA <sup>2</sup>	65.5%	
Prenatal and Postpartum Care (PPC) – Timeliness of Prenatal Care	90.4%	87.8%	84.2%	86.2%	82.9%	85.8%	82.1%	86.279%	84.9%	87.7%	86.280%	85.4%	87.1%	89.3%	90.9%	52.2%	83.8%	84.7%	81.1%	81.5%
Prenatal and Postpartum Care (PPC) – Postpartum Care	70.7%	71.5%	71.6%	78.1%	83.7%	78.5%	71.3%	68.4%	71.9%	74.0%	74.4%	72.0%	73.0%	72.5%	75.6%	43.5%	64.7%	60.3%	63.8%	68.1%
Frequency of Ongoing Prenatal Care (FPC) – Less than 21% of expected visits <sup>1</sup>	3.4%	4.2%	8.2%	2.8%	3.6%	2.2%	5.7%	10.6%	5.6%	2.9%	2.7%	4.4%	7.7%	4.4%	4.4%	37.0%	5.4%	12.1%	5.8%	9.7%
Frequency of Ongoing Prenatal Care (FPC) – Greater than or equal to 81% of expected visits	80.3%	72.2%	75.5%	76.9%	75.8%	70.8%	69.6%	60.1%	70.6%	82.7%	79.3%	71.3%	64.7%	78.8%	78.8%	21.7%	72.2%	70.8%	73.2%	66.0%
Controlling High Blood Pressures (CBP)	47.0%	49.0%	NA	52.3%	56.2%	23.9%	46.8%	70.5%	65.5%	59.1%	57.0%	86.1%	82.9%	85.5%	52.8%	NA <sup>2</sup>	43.1%	42.3%	52.8%	52.8%
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	78.8%	81.1%	83.4%	90.5%	89.8%	89.1%	77.1%	76.0%	79.5%	88.1%	83.5%	84.7%	81.9%	82.4%	78.1%	NA <sup>2</sup>	75.9%	78.1%	79.1%	82.3%
Comprehensive Diabetes (CDC) – Hemoglobin A1c (HbA1c) Testing	43.3%	44.0%	38.8%	33.6%	35.4%	31.0%	56.7%	52.6%	48.6%	27.5%	35.3%	37.2%	38.3%	41.7%	48.1%	NA <sup>2</sup>	51.1%	54.3%	45.5%	41.5%
Comprehensive Diabetes (CDC) – HbA1c Control (<9.0%) <sup>2</sup>	48.4%	47.1%	51.4%	56.2%	54.7%	61.5%	37.0%	39.9%	43.3%	57.7%	58.9%	54.0%	50.8%	49.1%	44.3%	NA <sup>2</sup>	42.1%	38.9%	46.47%	50.2%
Comprehensive Diabetes (CDC) – HbA1c Control (<8.0%)	62.2%	69.3%	65.4%	80.8%	80.1%	79.6%	76.2%	64.6%	72.0%	75.7%	72.8%	71.1%	71.6%	78.1%	71.0%	NA <sup>2</sup>	60.8%	57.7%	56.9%	69.3%
Comprehensive Diabetes (CDC) – Eye Exam (Retinal) Performed	77.4%	76.0%	76.9%	89.4%	88.5%	87.8%	71.3%	69.2%	72.9%	81.7%	77.4%	78.4%	74.9%	73.1%	70.1%	NA <sup>2</sup>	72.3%	74.2%	77.4%	77.2%
Comprehensive Diabetes (CDC) – LDL-C Screening (<100 mg/dL)	35.9%	36.2%	36.0%	48.7%	44.2%	45.26%	27.0%	28.0%	30.5%	44.6%	41.1%	39.9%	36.1%	44.5%	45.28%	NA <sup>2</sup>	35.0%	30.7%	35.0%	38.7%
Comprehensive Diabetes (CDC) – Medical Attention for Nephropathy	79.7%	73.6%	75.7%	94.7%	93.6%	93.1%	75.2%	74.4%	75.3%	89.6%	78.8%	82.7%	79.0%	77.6%	73.8%	NA <sup>2</sup>	72.7%	74.2%	75.9%	79.4%
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg)	31.1%	29.1%	34.4%	34.1%	38.0%	39.2%	24.1%	30.3%	32.0%	46.3%	55.7%	44.3%	42.2%	42.6%	44.1%	NA <sup>2</sup>	33.8%	25.3%	32.4%	37.7%
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg)	54.6%	48.4%	55.6%	54.74%	59.1%	60.4%	45.7%	47.1%	55.4%	73.3%	73.7%	70.1%	65.1%	63.3%	64.2%	NA <sup>2</sup>	54.74%	47.0%	51.6%	59.5%
Use of Imaging Studies for Low Back Pain (LBP)	78.5%	77.8%	76.7%	81.6%	70.9%	77.2%	76.8%	75.2%	76.6%	74.5%	73.1%	73.3%	74.7%	75.0%	75.2%	NA <sup>2</sup>	75.5%	74.8%	73.4%	75.4%
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)	61.8%	60.0%	NA	71.9%	73.8%	71.9%	73.8%	NA	NA	69.5%	67.6%	67.6%	67.6%	67.6%	67.6%	NA <sup>2</sup>	73.3%	67.7%	67.3%	67.3%
Annual Monitoring for Patients on Persistent Medications (MPM) – members on angiotensin converting enzymes (ACE) inhibitors or angiotensin receptor blockers (ARB)	90.1%	89.0%	95.1%	88.9%	87.0%	88.9%	90.2%	88.224%	88.1%	88.224%	88.1%	88.1%	88.1%	88.1%	88.1%	NA <sup>2</sup>	88.222%	88.6%	89.7%	89.7%

<sup>1</sup> New measure for HEDIS 2013.

<sup>2</sup> When denominator is less than 30 eligible members, NA is automatically assigned as the performance score.

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# HealthChoice Organizations HEDIS CY2013 Results

Table A – HealthChoice Organizations HEDIS 2014 Results – page four of four	2012		2013		2014		2012		2013		2014		2012		2013		2014		2012		2013		2014		2012		2013		2014		2012		2013		2014		2012		2013		2014		2012		2013		2014		2012		2013		2014	
	ACC	JMS	MPC	MSFC	PP	RHP	UHC	MARR																																														
Annual Monitoring for Patients on Persistent Medications (MPM) - members on digoxin	95.8%	95.7%	91.4%	92.2%	91.5%	88.9%	90.8%																																															
Annual Monitoring for Patients on Persistent Medications (MPM) - members on diuretics	88.2%	86.9%	88.04%	86.2%	87.2%	87.4%	88.4%																																															
Annual Monitoring for Patients on Persistent Medications (MPM) - members on anticonvulsants	66.0%	66.3%	69.9%	70.42%	73.3%	68.3%	70.44%																																															
Annual Monitoring for Patients on Persistent Medications (MPM) - Total rate	86.2%	85.4%	88.0%	86.3%	87.3%	87.3%	87.9%																																															
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Initiation 13-17 Years	41.0%	37.7%	42.3%	38.9%	38.4%	41.8%	38.7%																																															
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Initiation 18+ Years	47.4%	38.8%	43.1%	37.3%	38.5%	37.0%	41.2%																																															
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Initiation Overall Ages	46.4%	38.6%	43.0%	37.45%	38.5%	37.49%	41.0%																																															
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Engagement 13-17 Years	26.5%	24.1%	26.5%	22.1%	22.6%	27.6%	24.8%																																															
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Engagement 18+ Years	20.7%	17.9%	20.5%	19.8%	17.0%	17.2%	19.1%																																															
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) - Engagement Overall Ages	21.6%	18.8%	21.0%	20.0%	17.6%	18.4%	19.5%																																															
Identification of Alcohol and Other Drug Services (IAD) - Any	2.5%	2.7%	6.3%	6.0%	5.2%	5.0%	7.9%																																															
Identification of Alcohol and Other Drug Services (IAD) - Inpatient	0.6%	0.5%	1.3%	0.95%	1.1%	0.94%	1.4%																																															
Identification of Alcohol and Other Drug Services (IAD) - Intensive Outpatient/Partial Hospitalization	0.33%	0.3%	0.82%	0.7%	0.7%	0.6%	1.0%																																															
Identification of Alcohol and Other Drug Services (IAD) - Outpatient/ED	2.2%	2.5%	5.8%	5.6%	4.9%	4.6%	6.9%																																															
Ambulatory Care (AMB) - Outpatient visits per 1,000 member months	370.88	363.6	347.4	373.9	340.8	386.8	349.3																																															
Ambulatory Care (AMB) - Emergency department (ED) visits per 1,000 member months <sup>1</sup>	60.7	59.8	91.3	93.4	90.1	78.8	67.8																																															
Call Answer Timeliness (CAT)	78.9%	81.9%	93.1%	93.4%	91.1%	87.7%	87.3%																																															

<sup>1</sup> New measure for HEDIS 2013.

<sup>2</sup> When denominator is less than 30 eligible members, NA is automatically assigned as the performance score.

<sup>3</sup> A lower rate indicates better performance.

MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean

ACC = AMER/GROUP Community Care JMS = Jai Medical Systems MPC = Maryland Physicians Care/MSFC = MedStar Family Choice PP = Priority Partners RHP = Riverside Health Plan/UHC = UnitedHealthcare

# PAC Organizations Reporting HEDIS CY 2013 Results

Table A1 HealthChoice Organizations Reporting PAC HEDIS 2014 Results

Table A1 – HealthChoice Organizations Reporting PAC HEDIS 2014 Results – page one of one	ACC PAC		JMS PAC		PP PAC		UHC PAC		MARR PAC						
	2012	2013	2014	2012	2013	2014	2012	2013	2014	2012	2013	2014			
Adult BMI Assessment (ABA)	32.6%	23.2%	25.0%	15.2%	NA <sup>2</sup>	NA <sup>2</sup>	30.7%	39.7%	23.9%	19.9%	22.9%	27.6%	24.4%	27.3%	25.5%
Adults Access to Preventive/Ambulatory Health Services (AAP) – Age 20–44 years	70.6%	71.5%	65.1%	72.8%	71.8%	65.3%	65.2%	64.0%	63.6%	69.8%	71.4%	67.2%	68.1%	66.7%	65.3%
Adults Access to Preventive/Ambulatory Health Services (AAP) – Age 45–64 years	80.5%	81.1%	79.6%	82.1%	82.6%	77.6%	76.8%	78.2%	79.3%	81.4%	82.5%	81.5%	78.7%	76.9%	79.5%
Breast Cancer Screening (BCS)	41.2%	42.5%	49.5%	52.6%	52.5%	63.2%	34.4%	37.5%	43.3%	38.0%	41.1%	48.0%	40.8%	40.3%	51.0%
Cervical Cancer Screening (CCS)	37.8%	39.8%	32.8%	66.1%	61.7%	52.6%	40.3%	40.2%	43.5%	38.9%	39.0%	34.3%	44.5%	42.8%	40.8%
Comprehensive Diabetes (CDC) – Hemoglobin A1c (HbA1c) Testing	80.9%	82.0%	81.9%	91.5%	86.6%	84.9%	78.5%	78.6%	79.2%	77.4%	78.8%	79.8%	81.6%	79.9%	81.5%
Comprehensive Diabetes (CDC) – HbA1c Poor Control (>9.0%) <sup>1</sup>	49.8%	50.3%	53.0%	32.1%	38.1%	40.8%	52.2%	58.2%	57.6%	44.0%	57.5%	61.9%	45.5%	51.8%	53.4%
Comprehensive Diabetes (CDC) – HbA1c Control (<8.0%)	44.0%	42.5%	37.8%	58.6%	52.2%	49.8%	40.3%	35.8%	34.6%	47.4%	36.6%	31.1%	46.7%	41.0%	53.4%
Comprehensive Diabetes (CDC) – Eye Exam (Retinal) Performed	34.9%	31.7%	37.7%	66.2%	62.1%	49.1%	31.0%	33.4%	33.2%	42.3%	35.1%	35.6%	40.7%	37.6%	38.9%
Comprehensive Diabetes (CDC) – LDL-C Screening	74.6%	74.5%	76.4%	90.5%	87.3%	82.1%	68.1%	70.2%	71.1%	73.2%	75.0%	72.4%	76.2%	74.5%	75.5%
Comprehensive Diabetes (CDC) – LDL-C Control (<100 mg/dL)	29.7%	30.4%	29.7%	45.7%	44.9%	41.0%	26.3%	45.9%	46.0%	40.1%	28.1%	22.2%	34.5%	35.1%	34.7%
Comprehensive Diabetes (CDC) – Medical Attention for Nephropathy	80.4%	76.1%	80.9%	94.4%	90.7%	89.3%	73.5%	77.3%	79.0%	79.5%	79.1%	77.3%	81.5%	79.4%	81.7%
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/80 mm Hg)	0.0%	0.0%	43.7%	33.8%	34.2%	30.5%	2.4%	0.0%	1.6%	24.8%	0.2%	0.1%	17.5%	8.6%	11.5%
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg)	0.0%	0.0%	21.1%	56.4%	53.5%	52.9%	4.4%	0.0%	2.4%	42.8%	0.2%	0.1%	29.6%	17.0%	19.1%

<sup>1</sup> When denominator is less than 30 eligible members, NA is automatically assigned as the performance score.

<sup>2</sup> A lower rate indicates better performance.

MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean  
 ACC = AMERIGROUP Community Care JMS = Jai Medical Systems PP = Priority Partners UHC = UnitedHealthcare



# Value-Based Purchasing

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- Value-Based Purchasing is a set of performance measures selected from current HealthChoice monitoring activities.
- The goal of our Value-Based Purchasing strategy is to improve MCO performance by providing monetary incentives and disincentives. The MCO can earn or lose 1/10<sup>th</sup> of 1% of their capitation for each measure depending on their score.
- 7 of the 10 measures are HEDIS measures and 3 are selected by the Department and calculated from encounter data.

# CY 2013 Value-Based Purchasing Scores

Performance Measure	CY 2013 Target	ACC	JMS	MPC	MSFC	PPMCO	RHMD*	UHC
Adolescent Well Care	Incentive: ≥ 77% Neutral: 68%–76% Disincentive: ≤ 67%	68% (N)	77% (I)	69% (N)	68% (N)	62% (D)	NA	61% (D)
Ambulatory Care Services for SSI Children	Incentive: ≥ 83% Neutral: 78%–82% Disincentive: ≤ 77%	80% (N)	86% (I)	84% (I)	81% (N)	83% (I)	NA	77% (D)
Childhood Immunization Status—Combo 3	Incentive: ≥ 86% Neutral: 82%–85% Disincentive: ≤ 81%	78% (D)	86% (I)	72% (D)	86% (I)	81% (D)	NA	71% (D)
Lead Screenings for Children Ages 12–23 Months	Incentive: ≥ 72% Neutral: 63%–71% Disincentive: ≤ 62%	63% (N)	79% (I)	58% (D)	63% (N)	57% (D)	NA	53% (D)
Well-Child Visits for Children Ages 3–6	Incentive: ≥ 89% Neutral: 84%–88% Disincentive: ≤ 83%	84% (N)	89% (I)	89% (I)	84% (N)	84% (N)	NA	75% (D)
Ambulatory Care Services for SSI Adults	Incentive: ≥ 86% Neutral: 82%–85% Disincentive: ≤ 81%	81% (D)	85% (N)	84% (N)	83% (N)	84% (N)	NA	82% (N)
Cervical Cancer Screening for Women Ages 21–64	Incentive: ≥ 80% Neutral: 74%–79% Disincentive: ≤ 73%	80% (I)	80% (I)	80% (I)	74% (N)	76% (N)	NA	63% (D)
Eye Exams for Diabetics Ages 18–75	Incentive: ≥ 80% Neutral: 71%–79% Disincentive: ≤ 70%	65% (D)	80% (I)	72% (N)	71% (N)	71% (N)	NA	57% (D)
Postpartum Care	Incentive: ≥ 78% Neutral: 72%–77% Disincentive: ≤ 71%	72% (N)	79% (I)	72% (N)	72% (N)	76% (N)	NA	64% (D)
Immunizations for Adolescents	Incentive: ≥ 71% Neutral: 61%–70% Disincentive: ≤ 60%	69% (N)	76% (I)	63% (N)	71% (I)	75% (I)	NA	63% (D)

\*RHMD joined the HealthChoice program in February 2013.



## Consumer Report Card

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- This is the fourteenth year of production for our HealthChoice Consumer Report Card.
- A 1-3 star rating system (below average, average, above average) is used to represent how an MCO performed.
- The Consumer Report Card is included in all enrollment packets to assist enrollees in selecting a plan most appropriate to their needs.

# Consumer Report Card 2013

## LOOKING AT HEALTH PLAN PERFORMANCE

All health plans in HealthChoice received high satisfaction ratings from the majority of their members.

This Report Card shows how the health plans in HealthChoice compare to each other in key areas. You should use this Report Card along with other items in the enrollment packet to help you choose a health plan.

To choose a health plan, call 1-800-977-7388. If you are hearing impaired, you can call the TDD line 1-800-977-7389.

Key	
☆☆☆	Above HealthChoice Average
☆☆	HealthChoice Average
☆	Below HealthChoice Average

HEALTH PLANS		PERFORMANCE AREAS						
	HealthChoice <small>MARYLAND'S MEDICARE HEALTH PLAN PROGRAM</small>	Access to Care	Doctor Communication and Service	Keeping Kids Healthy	Care for Kids with Chronic Illness	Taking Care of Women	Diabetes Care	
	AMERIGROUP MARYLAND, INC.	☆	☆☆	☆☆	☆☆	☆☆	☆☆	
	COVENTRY HEALTH CARE OF DELAWARE, INC.	☆	☆☆	☆	☆☆	☆	☆	
	JAI MEDICAL SYSTEMS MANAGED CARE ORGANIZATION, INC.	☆☆	☆☆	☆☆	☆☆	☆☆	☆☆	
	MARYLAND PHYSICIANS CARE	☆☆	☆☆	☆☆	☆☆	☆	☆☆	
	MEDSTAR FAMILY CHOICE, INC.	☆☆	☆☆	☆☆	☆☆	☆☆	☆☆	
	PRIORITY PARTNERS	☆☆☆	☆☆	☆☆	☆☆	☆☆	☆☆	
	UNITED HEALTHCARE OF THE MID-ATLANTIC, INC.	☆☆	☆☆	☆	☆☆	☆	☆	

This information was collected from health plans and their members and is the most current performance data available. The information reported was reviewed for accuracy by independent organizations. Health plan performance scores have not been adjusted for differences in service regions or member composition. "Not Rated by Researchers" does not describe the performance or quality of care provided by the health plan. It should not affect your choice of health plan.



## Performance Improvement Projects

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- The MCOs are currently responsible for 2 Performance Improvement Projects. Each PIP is at least 3 years in duration and based on HEDIS measurement scores. The CY 2013 PIPs were:
  - Adolescent Well Care (Started CY 2011)
  - Substance Abuse (CY 2010 – CY 2013)
    - Initiation of Alcohol and Other Drug Dependence Treatment
    - Engagement of Alcohol and Other Drug Dependence Treatment
  
- Activities must be designed by each MCO that are intended to achieve measurable improvement in processes and, subsequently, outcomes of care.

# Performance Improvement Projects

CY 2013						
	ACC	JMS	MPC	MSFC	PP	UHC
<b>Adolescent Well Care</b> (Start: CY 2011 Ongoing)	68.1%	76.9%	60.2%	69.4%	67.6%	59.7%
<b>Substance Abuse</b> (Start: CY 2010; End: CY 2013) Initiation of Alcohol and Other Drug Dependence Treatment	41.9%	36.8%	43.0%	27.4%	36.5%	47.3%
<b>Substance Abuse</b> (Start: CY 2010; End: CY 2013) Engagement of Alcohol and Other Drug Dependence Treatment	19.7%	15.4%	21.0%	5.3%	17.6%	18.5%





## 2013 Annual Technical Report

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- DHMH is required annually to evaluate the quality of care provided to HealthChoice enrollees by MCOs through an independent review conducted by our EQRO.
- The 2013 Annual Technical Report was prepared by Delmarva Foundation. It is a summary of all quality assurance activities conducted for CY 2012.
- This report can be found on the Quality Assurance Activities website and CMS website.

# Completed Reports and More Information

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## DEPARTMENT OF HEALTH AND MENTAL HYGIENE

<http://www.dhmh.maryland.gov/>

Select “Medical Care Programs”, “HealthChoice Managed Care”,  
“HealthChoice Quality Assurance Activities”