



Overview of 2010 Quality Assurance Activities

Maryland Department of
Health and Mental Hygiene
November 17, 2011



Overview

□ **CY2010 Quality review activities:**

- 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)



Systems Performance Review

- A Systems Performance Review 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 SPR.
- The 2010 SPR consisted of 11 standards with 9 scored. The Department exempted two standards- Systematic Process and Governing Body- because the MCOs had achieved compliance ratings of 100% for the past three years.



System Performance Review (cont'd)

- ❑ The minimum compliance rate for all standards is 100%.
- ❑ For any standard, or components of a standard, that did not meet the minimum compliance level, the MCO was required to develop and implement an approved Corrective Action Plan (CAP).

Systems Performance Review

Performance Standard	Description	MD MCO Compliance CY 2009	MD MCO Compliance CY 2010	ACC CY 2010	DIA CY 2010	JMS CY 2010	MPC CY 2010	MSFC CY 2010	PPMCO CY 2010	UHC CY 2010
1	Systematic Process	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt
2	Governing Body	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt	Exempt
3	Oversight of Delegated Entities	88%*	89%*	83%*	93%*	100%	100%	100%	100%	50%*
4	Credentialing	98%*	99%*	99%*	100%	100%	99%*	100%	97%*	100%
5	Enrollee Rights	100%	100%	100%	100%	100%	100%	100%	100%	100%
6	Availability and Access	100%	100%	100%	100%	100%	100%	100%	100%	100%
7	Utilization Review	92%*	94%*	86%*	96%*	98%*	98%*	100%	93%*	89%*
8	Continuity of Care	100%	100%	100%	100%	100%	100%	100%	100%	100%
9	Health Education Plan	100%	100%	100%	100%	100%	100%	100%	100%	100%
10	Outreach Plan	99%*	100%	100%	100%	100%	100%	100%	100%	100%
11	Fraud and Abuse	100%	99%*	100%	95%*	100%	100%	100%	100%	100%

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



EPSDT Record Reviews

- ❑ Delmarva Foundation performed 2,661 medical record reviews for children with a preventive care visit in CY2010. Nurse reviewers went onsite to 323 provider offices.
- ❑ MCOs must demonstrate a 75% compliance by component; otherwise, a CAP is required. All MCOs met the minimum compliance rate in each of the five components.

EPSDT Record Reviews (continued)

Component	Aggregate Scores CY2009	Aggregate Scores CY2010
Health and Developmental History	86%	89%
Comprehensive Physical Exam	93%	88%
Laboratory Tests/At Risk Screenings (PKU, lead, anemia, risk assts. For TB, cholesterol, STI, etc.)	80%	82%
Immunizations	85%	89%
Health Education and Anticipatory Guidance	88%	90%



Enrollee Satisfaction Surveys

- ❑ WB&A, DHMH's contractor, conducts an enrollee satisfaction survey annually to evaluate member's satisfaction with their MCO. Surveys are conducted for both HealthChoice and PAC.
- ❑ Response rates increased by 1% for all populations.

Enrollee Satisfaction Surveys (cont'd)

□ Results

	Surveys Mailed	Surveys Returned	Response Rate	Compared to CY2009
HC ADULTS	12,285	3,973	33%	+1%
HC CHILDREN	19,441	5,314	38%	+1%
PAC	8,775	3,813	45%	+1%

□ Most Significant Measures

COMPOSITE MEASURES	ADULT		CHILDREN		PAC	
	CY 2009	CY 2010	CY 2009	CY 2010	CY 2009	CY 2010
How Well Doctors Communicate	87%	87%	93%	92%	84%	83%
Getting Care Quickly	82%	80%	90%	90%	78%	76%
Customer Service	78%	77%	77%	76%	75%	73%
Getting Needed Care	74%	74%	75%	75%	71%	69%

Provider Satisfaction Surveys

- WB&A conducted the CY2010 annual Provider Satisfaction Survey of the HealthChoice program.

	Surveys Mailed	Surveys Returned	Response Rate	Compared to CY2009
Primary Care Providers (PCPs)	4,892	1,427	30%	+5%

- Satisfaction Survey topics included:

Composite Measure	CY2009	CY2010
No-Show Appointments	82%	84%
Overall Satisfaction	75%	80%
Finance Issues	34%	38%
Customer Service/Provider Relations	36%	37%
Coordination of Care/Case Management	32%	34%
Utilization Management	25%	26%



HEDIS Performance Measures

- 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

- ❑ For CY2010, HealthChoice MCOs were required to report their performance on 21 HEDIS measures and PAC MCOs reported on 4.

- ❑ **Significant HealthChoice performance increases include:**
 - Immunizations for Adolescents -- 6.0%
 - Cervical Cancer Screening -- 5.0%
 - Appropriate Treatment for Children with Upper Respiratory Infection – 2.0%
 - Prenatal and Postpartum Care -- 4.4%

- ❑ **Significant PAC performance increases include:**
 - Breast Cancer Screening -- 3.0%
 - Adults' Access to Preventive/Ambulatory Health Services – Age 20-44 – 3.5%
 - Adults' Access to Preventive/Ambulatory Health Services – Age 45-64 – 4.0%

Table A – HealthChoice Organizations HEDIS 2011 Results, page one of three	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2011	HEDIS 2010
	ACC			DIA			JMS			MPC			MSFC			PP			UHC			MARR	NMH			
Children's Prevention and Screening																										
Childhood Immunization Status (CIS) – Combination 2 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV)	82.1%	78.4%	79.4%	73.0%	76.0%	65.7%	87.1%	81.9%	88.4%	74.7%	80.0%	84.9%	89.2%	86.6%	86.6%	82.1%	74.7%	83.0%	84.8%	83.9%	71.0%	79.9%	74.3%			
Childhood Immunization Status (CIS) – Combination 3 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate)	74.6%	73.5%	73.8%	69.4%	71.4%	62.2%	80.6%	80.8%	85.9%	70.1%	76.2%	81.3%	87.8%	83.7%	84.7%	77.4%	68.4%	79.8%	78.7%	78.3%	66.7%	76.3%	69.4%			
Childhood Immunization Status (CIS) – Combination 4 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A)	*	40.0%	28.9%	*	29.0%	29.9%	*	39.0%	36.1%	*	26.0%	30.2%	*	28.0%	29.2%	*	27.5%	25.8%	*	52.1%	34.3%	30.6%	30.4%			
Childhood Immunization Status (CIS) – Combination 5 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, rotavirus)	*	45.9%	54.4%	*	33.6%	40.2%	*	55.4%	58.9%	*	40.1%	53.8%	*	48.2%	53.5%	*	46.2%	37.5%	*	56.4%	47.4%	49.4%	41.6%			
Childhood Immunization Status (CIS) – Combination 6 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, influenza)	*	35.1%	40.5%	*	36.4%	34.6%	*	27.7%	40.2%	*	34.5%	37.5%	*	40.9%	49.1%	*	40.1%	47.4%	*	48.4%	36.5%	40.9%	33.8%			
Childhood Immunization Status (CIS) – Combination 7 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A, rotavirus)	*	27.4%	23.1%	*	16.1%	20.9%	*	29.4%	28.5%	*	16.1%	21.2%	*	19.2%	21.9%	*	19.5%	14.6%	*	38.7%	24.6%	22.1%	20.6%			
Childhood Immunization Status (CIS) – Combination 8 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A, influenza)	*	21.9%	17.8%	*	16.6%	17.3%	*	15.8%	20.7%	*	15.6%	16.3%	*	15.1%	18.0%	*	19.2%	17.3%	*	34.3%	21.7%	18.4%	17.2%			
Childhood Immunization Status (CIS) – Combination 9 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, rotavirus, influenza)	*	23.8%	32.4%	*	18.0%	25.2%	*	19.8%	27.8%	*	20.0%	25.1%	*	25.5%	33.1%	*	26.8%	25.5%	*	38.0%	27.7%	28.1%	23.2%			
Childhood Immunization Status (CIS) – Combination 10 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A, rotavirus, and influenza)	*	16.3%	15.5%	*	9.2%	13.8%	*	12.4%	17.0%	*	10.0%	10.9%	*	10.7%	13.9%	*	13.9%	10.7%	*	27.3%	15.8%	13.9%	12.6%			
Immunizations for Adolescents (IMA) – Combination 1 (Meningococcal, Tdap/Td)	*	41.7%	46.1%	*	32.1%	40.0%	*	67.3%	71.6%	*	45.7%	52.1%	*	45.7%	57.2%	*	41.6%	56.9%	*	42.3%	36.6%	51.8%	42.5%			
Well-Child Visits in the First 15 months of Life (W15) – Zero visits ¹	2.4%	1.2%	0.8%	2.6%	4.4%	4.3%	2.6%	2.8%	2.4%	0.7%	1.5%	1.1%	1.1%	1.4%	2.2%	1.5%	0.6%	0.9%	1.8%	1.8%	2.0%	2.0%	2.3%			
Well-Child Visits in the First 15 months of Life (W15) – DHMH Five or Six-or-more visits rates (additive)	83.0%	84.2%	87.2%	77.1%	66.7%	64.7%	81.8%	89.4%	83.4%	87.3%	84.2%	86.8%	81.0%	86.2%	84.7%	86.4%	86.9%	87.1%	86.0%	85.1%	83.6%	82.4%	75.8%			
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	74.2%	76.0%	86.5%	70.0%	70.4%	75.9%	89.9%	92.3%	89.3%	73.1%	85.7%	86.3%	79.4%	79.2%	73.5%	75.3%	86.6%	78.3%	75.4%	82.4%	75.2%	80.7%	71.6%			
Adolescent Well-Care Visits (AWC)	54.1%	52.2%	63.1%	49.7%	50.6%	51.4%	76.1%	79.9%	79.7%	49.5%	64.7%	72.1%	52.8%	61.1%	63.5%	53.4%	64.9%	60.0%	47.3%	64.7%	49.8%	62.8%	47.7%			
Respiratory Conditions																										
Appropriate Testing for Children with Pharyngitis (CWP)	66.4%	61.9%	61.5%	69.4%	62.4%	64.7%	67.3%	70.9%	76.3%	75.6%	77.4%	74.0%	78.9%	82.7%	81.0%	72.0%	73.5%	69.5%	69.8%	68.8%	70.8%	71.1%	62.3%			
Appropriate Treatment for Children with Upper Respiratory Infection (URI)	85.0%	84.9%	87.0%	82.9%	80.6%	85.3%	95.5%	95.2%	93.8%	84.0%	84.1%	85.6%	86.3%	85.7%	88.6%	84.4%	87.2%	88.5%	80.6%	79.6%	83.3%	87.5%	86.0%			
Use of Appropriate Medications for People With Asthma (ASM) – Ages 5-11 (Note: HEDIS 2008-2009 age is 5-9)	90.0%	91.0%	91.9%	NA	NA	87.5%	NA	85.1%	91.9%	91.5%	94.9%	93.1%	94.0%	92.9%	92.8%	91.9%	92.2%	93.6%	91.8%	91.3%	93.2%	92.0%	91.8%			
Use of Appropriate Medications for People With Asthma (ASM) – Ages 12-50 (Note: HEDIS 2008-2009 had two age groups, 10-17 and 18-56)	88.7%	86.8%	87.7%	NA	95.2%	91.2%	72.5%	91.6%	93.8%	88.7%	88.3%	88.9%	93.4%	92.4%	89.4%	88.2%	88.4%	87.6%	89.8%	83.0%	86.8%	89.3%	86.0%			
Use of Appropriate Medications for People With Asthma (ASM) (Note: This age group was discontinued for HEDIS 2010)	86.0%			92.3%			91.7%			84.0%			92.9%			88.8%			88.6%							
Use of Appropriate Medications for People With Asthma (ASM) – Total combined ages 5-50 (Note: HEDIS 2008-2009 age group is 5-56)	88.6%	89.2%	90.1%	91.6%	94.5%	89.8%	87.3%	89.5%	93.3%	87.9%	91.2%	90.6%	93.4%	92.7%	91.1%	89.5%	90.3%	90.4%	90.1%	87.4%	90.2%	90.8%	86.6%			

1. A lower rate indicates better performance. MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean ACC = AMERIGROUP Community Care DIA = Diamond Plan JMS = Jai Medical Systems
 * New measure. No data for prior years. *Italics denote age group changed from previous year's specifications.* MSFC = MedStar Family Choice PP = Priority Partners MPC = Maryland Physicians Care UHC = UnitedHealthcare

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	ACC			DIA			JMS			MPC			MSFC			PP			UHC			MARR	NMH
Member Access																							
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 12-24 months	97.4%	97.6%	97.7%	91.8%	91.5%	94.4%	88.3%	95.1%	94.3%	96.6%	97.3%	96.5%	96.8%	97.2%	95.2%	97.8%	98.1%	97.9%	96.3%	96.7%	96.8%	96.1%	85.2%
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 25 months to 6 years	91.7%	92.7%	92.7%	85.5%	85.3%	88.1%	89.5%	90.3%	90.6%	91.1%	91.8%	89.8%	91.6%	90.5%	88.9%	91.7%	93.1%	92.3%	92.2%	92.4%	91.7%	90.6%	88.3%
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 7-11 years	92.6%	93.3%	93.6%	84.6%	85.0%	86.7%	93.7%	94.1%	94.5%	91.6%	92.6%	92.8%	92.2%	93.4%	93.4%	92.9%	93.8%	94.1%	92.2%	93.2%	93.1%	92.6%	90.3%
Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 12-19 years	87.3%	87.7%	88.6%	81.0%	86.4%	86.1%	91.9%	90.9%	92.0%	88.4%	89.0%	89.5%	88.7%	90.6%	92.0%	89.0%	89.5%	90.8%	87.6%	88.6%	89.9%	89.9%	87.9%
Adults' Access to Preventive/ Ambulatory Health Services (AAP) – Age 20-44	77.3%	79.4%	79.6%	75.2%	76.6%	76.9%	77.2%	78.6%	79.0%	81.7%	80.9%	79.2%	78.7%	79.2%	79.3%	82.4%	83.0%	75.7%	79.2%	79.2%	79.7%	80.5%	
Adults' Access to Preventive/ Ambulatory Health Services (AAP) – Age 45-64	83.9%	85.0%	85.0%	78.6%	77.0%	76.4%	86.9%	88.5%	89.2%	87.5%	87.3%	87.4%	85.5%	84.6%	84.6%	87.5%	88.3%	88.5%	85.6%	87.1%	85.9%	85.3%	85.3%
Women's Health																							
Breast Cancer Screening (BCS)	41.3%	43.7%	46.0%	39.9%	40.8%	39.3%	64.4%	60.8%	62.3%	46.1%	44.5%	42.8%	57.6%	63.4%	54.6%	42.2%	45.4%	46.0%	51.2%	46.2%	45.3%	48.3%	52.4%
Cervical Cancer Screening (CCS)	67.9%	67.3%	76.6%	62.7%	65.6%	70.2%	78.0%	76.4%	79.7%	66.3%	67.9%	69.7%	66.4%	67.7%	76.4%	63.0%	67.7%	69.4%	66.1%	64.4%	70.3%	73.2%	65.8%
Chlamydia Screening in Women (CHL) – Age 16-20 years	58.3%	63.2%	62.8%	46.4%	58.9%	54.4%	81.0%	84.9%	89.2%	58.6%	61.3%	60.6%	52.0%	57.1%	56.2%	58.1%	61.0%	62.1%	50.3%	57.9%	55.9%	63.0%	54.4%
Chlamydia Screening in Women (CHL) – Age 21-24 years (Note: Rates for 2008 and prior year were for ages 21-25.)	68.7%	71.3%	69.8%	56.8%	68.5%	71.1%	73.9%	75.4%	78.6%	68.2%	66.1%	65.1%	63.4%	62.8%	67.2%	63.6%	67.9%	68.8%	59.3%	64.2%	62.1%	69.0%	61.6%
Chlamydia Screening in Women (CHL) – Total, 16-24 years of age (Note: Rates for 2008 and prior year were for ages 16-25.)	61.3%	66.2%	65.5%	50.2%	63.7%	63.1%	78.7%	81.4%	85.3%	61.1%	63.0%	62.4%	55.1%	58.8%	60.1%	59.4%	63.2%	64.6%	52.5%	59.9%	58.2%	65.6%	56.7%
Prenatal and Postpartum Care																							
Prenatal and Postpartum Care (PPC) – Timeliness of Prenatal Care	90.9%	87.7%	87.7%	87.3%	81.4%	83.1%	88.4%	86.7%	89.2%	87.0%	89.7%	83.9%	87.2%	89.6%	90.7%	91.4%	91.0%	87.9%	89.7%	86.6%	85.7%	86.9%	83.4%
Prenatal and Postpartum Care (PPC) – Postpartum Care	64.3%	66.7%	66.3%	52.8%	59.3%	59.4%	72.6%	79.2%	80.2%	62.1%	72.2%	75.2%	71.9%	78.5%	71.7%	63.5%	66.7%	68.2%	67.6%	63.4%	62.5%	69.1%	64.1%
Frequency of Ongoing Prenatal Care (FPC) – Less than 21% of expected visits ¹	2.4%	2.9%	3.5%	7.1%	11.1%	7.9%	2.3%	4.6%	1.4%	3.3%	3.9%	4.2%	2.7%	2.1%	1.8%	4.3%	3.4%	3.5%	4.5%	8.7%	3.6%	3.7%	10.3%
Frequency of Ongoing Prenatal Care (FPC) – Greater than or equal to 81% of expected visits	74.3%	71.0%	71.4%	62.2%	58.1%	58.3%	81.9%	80.4%	82.4%	71.6%	77.5%	74.0%	92.1%	81.8%	79.6%	76.6%	80.7%	77.9%	78.2%	73.8%	75.8%	74.2%	61.6%
Diabetes Care																							
Comprehensive Diabetes (CDC) – Hemoglobin A1c Testing	78.8%	74.0%	76.2%	67.8%	59.8%	62.9%	90.7%	91.6%	89.4%	74.2%	78.6%	79.6%	85.1%	85.7%	83.7%	77.7%	78.3%	78.5%	71.0%	71.8%	73.2%	77.6%	80.6%
Comprehensive Diabetes (CDC) – HbA1c Poor Control (>9.0%) ¹	49.6%	49.5%	49.3%	52.1%	57.4%	55.9%	30.3%	34.4%	38.0%	57.9%	53.0%	51.1%	33.8%	27.6%	37.0%	47.3%	44.8%	46.0%	56.4%	51.6%	56.2%	47.6%	44.9%
Comprehensive Diabetes (CDC) – HbA1c Adequate Control (< 8.0%)	43.6%	42.8%	41.1%	42.1%	36.1%	37.1%	57.8%	54.2%	52.7%	36.4%	41.1%	41.6%	54.6%	50.0%	52.8%	45.8%	48.2%	46.2%	37.2%	43.6%	37.5%	44.1%	45.7%
Comprehensive Diabetes (CDC) – Eye Exam (Retinal) Performed	50.1%	51.4%	62.3%	52.1%	51.6%	55.9%	77.2%	77.8%	79.7%	65.8%	74.0%	74.5%	72.2%	75.1%	73.7%	54.6%	65.0%	62.2%	85.9%	71.3%	66.7%	67.9%	52.7%
Comprehensive Diabetes (CDC) – LDL-C Screening	74.5%	69.3%	71.6%	66.9%	62.3%	61.8%	93.3%	93.1%	91.2%	73.9%	72.5%	74.9%	81.7%	81.5%	79.3%	73.9%	74.5%	70.4%	71.5%	70.8%	71.0%	74.3%	74.2%
Comprehensive Diabetes (CDC) – LDL-C Control (<100 mg/dL)	34.9%	33.3%	38.2%	28.1%	35.2%	24.7%	47.2%	52.7%	47.8%	28.9%	32.4%	32.4%	43.8%	42.1%	39.2%	42.5%	39.4%	37.2%	29.2%	31.1%	27.0%	35.2%	33.5%
Comprehensive Diabetes (CDC) – Medical Attention for Nephropathy	78.8%	74.4%	78.8%	75.2%	69.7%	67.1%	93.3%	93.1%	93.6%	75.8%	78.6%	77.6%	86.6%	86.9%	85.6%	78.3%	77.6%	80.1%	73.7%	74.2%	73.5%	79.5%	76.9%
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/80 mm Hg)**	27.2%	28.8%	41.3%	25.6%	32.8%	28.8%	23.6%	29.1%	27.4%	25.6%	22.9%	31.1%	36.3%	36.0%	37.7%	33.6%	31.4%	37.6%	28.2%	30.9%	19.2%	31.9%	
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg)	54.7%	53.5%	63.0%	45.5%	62.3%	51.8%	47.2%	54.0%	43.2%	51.2%	50.1%	51.3%	65.7%	67.2%	59.6%	58.8%	61.3%	59.1%	55.7%	54.3%	32.8%	51.6%	59.8%

¹ A lower rate indicates better performance

MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean ACC = AMERIGROUP Community Care DIA = Diamond Plan JMS = Jai Medical Systems
 ** New measure for HEDIS 2011. Data for prior years 130/80. *Italics denote age group changed from previous year's specifications.* MSFC = MedStar Family Choice PP = Priority Partners MPC = Maryland Physicians Care UHC = UnitedHealthcare

Table A – HealthChoice Organizations HEDIS 2011 Results, page three of three	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2009	2010	2011	2011	HEDIS 2010
	ACC			DIA			JMS			MPC			MSFC			PP			UHC			MARR	NMH
Behavioral Health																							
Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Initiation 13-17 Years	41.6%	38.9%	47.6%	NA	NA	NA	NA	NA	NA	37.9%	25.3%	49.5%	17.8%	23.1%	19.6%	45.7%	46.9%	50.0%	46.8%	41.3%	52.0%	43.7%	42.5%
Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Initiation 18+ years	52.0%	51.1%	51.5%	41.5%	41.9%	41.1%	48.3%	44.2%	48.9%	49.8%	46.9%	50.8%	36.4%	36.5%	33.1%	49.0%	46.8%	48.4%	56.8%	50.7%	50.1%	46.3%	44.7%
Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Initiation Overall	50.4%	49.4%	50.9%	41.9%	40.9%	40.8%	48.1%	44.4%	48.8%	48.4%	44.7%	50.6%	34.4%	35.6%	32.2%	48.5%	46.8%	48.6%	55.5%	49.7%	50.3%	46.0%	44.3%
Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Engagement 13-17 Yrs	26.5%	23.7%	33.3%	NA	NA	NA	NA	NA	NA	21.0%	26.7%	33.6%	4.4%	10.3%	8.7%	23.9%	26.7%	32.4%	8.9%	13.1%	25.4%	26.7%	17.7%
Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Engagement 18+ Years	20.7%	21.0%	23.8%	15.2%	22.2%	25.2%	22.1%	15.7%	21.7%	19.0%	13.3%	25.0%	4.6%	7.0%	10.4%	15.6%	16.6%	22.3%	10.1%	10.5%	14.7%	20.4%	11.8%
Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Engagement Overall	21.5%	21.4%	25.3%	15.3%	21.1%	25.5%	22.1%	16.0%	22.0%	19.2%	12.7%	25.9%	4.6%	7.2%	10.3%	16.7%	17.9%	23.6%	10.0%	10.8%	16.0%	21.2%	12.3%
Identification of Alcohol and Other Drug Services (IAD) – Any	2.5%	2.3%	2.5%	5.7%	5.8%	5.9%	17.0%	17.6%	17.1%	4.4%	4.9%	6.0%	4.1%	3.8%	4.4%	4.3%	4.6%	5.3%	2.9%	3.3%	3.9%	6.4%	3.3%
Identification of Alcohol and Other Drug Services (IAD) – Inpatient	0.7%	0.7%	0.6%	1.7%	1.6%	1.1%	4.9%	4.9%	4.4%	1.5%	1.6%	1.4%	1.7%	1.3%	1.5%	1.3%	1.3%	1.2%	1.0%	0.9%	0.9%	1.6%	1.1%
Identification of Alcohol and Other Drug Services (IAD) – Intensive	0.4%	0.3%	0.3%	0.6%	0.2%	0.5%	2.9%	2.7%	3.1%	0.6%	0.7%	0.9%	0.1%	0.0%	0.4%	0.8%	0.8%	0.9%	0.3%	0.4%	0.6%	1.0%	0.2%
Identification of Alcohol and Other Drug Services (IAD) – Outpatient/ED	1.8%	1.9%	2.2%	4.6%	5.0%	5.4%	15.3%	15.9%	15.4%	3.6%	4.1%	5.4%	3.8%	3.6%	3.9%	3.6%	4.0%	4.7%	2.3%	2.8%	3.4%	5.8%	2.9%
Ambulatory Care (Utilization)																							
Ambulatory Care (AMB) – Outpatient Visits ¹	374.0	388.5	366.8	330.5	330.1	321.5	364.2	385.8	347.4	375.2	400.4	373.9	360.0	389.5	364.4	382.2	415.9	395.0	365.1	391.2	361.1	361.4	367.2
Ambulatory Care (AMB) – Emergency Department ²	60.3	66.1	59.0	88.0	94.6	84.3	78.8	92.1	88.8	71.8	81.4	72.5	76.6	80.1	70.3	62.4	70.0	64.0	59.3	68.9	63.7	71.8	67.4
Ambulatory Care (AMB) – Ambulatory Surgery	6.5	6.5	*	13.5	11.3	*	14.0	14.9	*	9.0	8.9	*	13.3	14.4	*	10.8	12.3	*	9.1	9.8	*	*	*
Ambulatory Care (AMB) – Observation Room Stays	2.0	1.6	*	1.8	1.9	*	2.4	1.7	*	1.5	1.2	*	0.3	0.4	*	3.7	0.6	*	1.4	1.2	*	*	*
Call Services																							
Call Answer Timeliness (CAT)	75.8%	85.3%	76.1%	91.4%	88.0%	92.3%	89.9%	87.5%	86.6%	82.7%	85.5%	85.7%	94.3%	96.1%	94.8%	68.2%	76.5%	84.4%	81.5%	82.3%	79.6%	85.6%	82.2%
Call Abandonment (CAB) ³	3.6%	3.8%	6.0%	0.8%	1.4%	2.5%	3.3%	3.5%	3.8%	2.0%	1.4%	1.3%	1.6%	1.1%	1.2%	4.2%	2.4%	1.5%	3.1%	2.8%	3.1%	2.8%	3.0%

1. An error was discovered after the publication of this measure, which required the recalculation of the MARR of Outpatient Visits per 1,000 member months.
2. An error was discovered after the publication of this measure, which required the recalculation of the MARR of ED Visits per 1,000 member months.
3. A lower rate indicates better performance.

* For HEDIS 2011, removed Ambulatory Surgeries and Procedures and Observation Room stays per NQA.

MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean ACC = AMERIGROUP Community Care DIA = Diamond Plan JMS = Jai Medical Systems
MSFC = MedStar Family Choice PP = Priority Partners MPC = Maryland Physicians Care UHC = UnitedHealthcare

Italics denote age group changed from previous year's specifications.

Table A1 – HealthChoice Organizations Reporting PAC HEDIS 2011 Results	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011
	ACC PAC		JMS PAC		MPC PAC		PP PAC		UHC PAC		MARR	MARR
Adults' Access to Preventive/Ambulatory Health Services (AAP) – Age 20-44	*	77.1%	71.9%	74.9%	65.7%	67.6%	59.4%	65.1%	67.4%	68.5%	66.1%	70.6%
Adults' Access to Preventive/Ambulatory Health Services (AAP) – Age 45-64	*	82.9%	79.8%	82.1%	75.3%	78.0%	70.3%	75.7%	75.9%	79.3%	75.3%	79.6%
Breast Cancer Screening (BCS)	*	NA	47.2%	55.6%	38.4%	40.7%	*	33.8%	29.7%	36.7%	36.4%	41.7%
Cervical Cancer Screening (CCS)	*	33.8%	59.5%	62.6%	37.4%	38.8%	29.8%	38.1%	41.4%	40.2%	42.0%	42.7%
Comprehensive Diabetes (CDC) – Hemoglobin A1c Testing	*	71.4%	85.8%	87.4%	79.1%	75.4%	66.0%	76.7%	75.2%	72.7%	77.0%	76.7%
Comprehensive Diabetes (CDC) – HbA1c: Poor Control (>9.1%)*	*	55.4%	38.4%	39.0%	41.6%	47.9%	97.9%	58.4%	49.5%	59.9%	56.9%	52.1%
Comprehensive Diabetes (CDC) – HbA1c: Control (<8.0%)	*	33.8%	50.4%	49.2%	47.7%	43.3%	2.1%	35.5%	43.6%	32.4%	35.9%	38.7%
Comprehensive Diabetes (CDC) – Eye Exam/Retinal Performed	*	36.6%	69.2%	60.5%	43.1%	42.3%	27.8%	38.8%	39.9%	32.4%	44.6%	40.5%
Comprehensive Diabetes (CDC) – LDL-C Screening	*	70.5%	89.1%	67.1%	72.3%	69.3%	59.8%	68.1%	69.1%	69.2%	72.6%	72.6%
Comprehensive Diabetes (CDC) – LDL-C Control (<100 mg/dL)	*	29.5%	42.2%	43.5%	35.5%	31.6%	0.0%	25.1%	29.2%	24.3%	26.7%	30.6%
Comprehensive Diabetes (CDC) – Medical Attention for Nephropathy	*	72.3%	91.0%	91.5%	83.0%	79.1%	54.6%	74.9%	79.6%	74.6%	77.0%	78.6%
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg)**	*	0.0%	24.3%	26.1%	23.1%	25.8%	0.0%	3.2%	21.2%	0.0%	17.1%	11.0%
Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg)	*	0.0%	49.0%	48.4%	51.1%	46.8%	0.0%	6.5%	45.5%	0.0%	36.4%	29.2%

* Organization did not report for PAC

MARR = Maryland Average Reportable Rate

JMS = Jai Medical Systems

MPC = Maryland Physicians Care

1. A lower rate indicates better performance.

ACC = AMERIGROUP Community Care

PP = Priority Partners

UHC = UnitedHealthcare

** New measure for HEDIS 2011. Data for prior years (3068)



Value-Based Purchasing

- ❑ 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 1/10th 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.

2010 Value Based Purchasing Scores Department of Health and Mental Hygiene

Performance Measures	CY 2010 Targets	ACC	DIA	JMS	MPC	MSFC	PPMCO	UHC
		Incentive (I); Neutral (N); Disincentive (D)						
Adolescent Well Care	Incentive: ≥71% Neutral: 61%–70% Disincentive: ≤60%	63% (N)	51% (D)	80% (I)	72% (I)	64% (N)	60% (D)	50% (D)
Ambulatory Care Services for SSI Adults	Incentive: ≥85% Neutral: 80%–84% Disincentive: ≤79%	79% (D)	70% (D)	87% (I)	83% (N)	81% (N)	83% (N)	78% (D)
Ambulatory Care Services for SSI Children	Incentive: ≥80% Neutral: 74%–79% Disincentive: ≤73%	74% (N)	70% (D)	84% (I)	78% (N)	77% (N)	79% (N)	73% (D)
Cervical Cancer Screening for Women Ages 21–64	Incentive: ≥77% Neutral: 69%–76% Disincentive: ≤68%	77% (I)	70% (N)	80% (I)	70% (N)	76% (N)	69% (N)	70% (N)
Childhood Immunization Status—Combo 3	Incentive: ≥85% Neutral: 81%–84% Disincentive: ≤80%	74% (D)	62% (D)	86% (I)	81% (N)	85% (I)	80% (D)	67% (D)
Eye Exams for Diabetics Ages 18-75	Incentive: ≥74% Neutral: 66%–73% Disincentive: ≤65%	62% (D)	56% (D)	80% (I)	74% (I)	74% (I)	62% (D)	67% (N)
Lead Screenings for Children Ages 12–23 Months	Incentive: ≥67% Neutral: 56%–66% Disincentive: ≤55%	60% (N)	50% (D)	68% (I)	57% (N)	55% (D)	57% (N)	55% (D)
Postpartum Care	Incentive: ≥73% Neutral: 65%–72% Disincentive: ≤64%	66% (N)	59% (D)	80% (I)	75% (I)	72% (N)	68% (N)	63% (D)
Use of Appropriate Meds for Asthma	Incentive: ≥93% Neutral: 89%–92% Disincentive: ≤88%	90% (N)	90% (N)	93% (I)	91% (N)	91% (N)	90% (N)	90% (N)
Well-Child Visits for Children Ages 3–6	Incentive: ≥86% Neutral: 82%–85% Disincentive: ≤81%	87% (I)	76% (D)	89% (I)	86% (I)	73% (D)	78% (D)	75% (D)



Consumer Report Card

- ❑ This is the eleventh 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 in the each of the above domains. 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

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

PERFORMANCE AREAS

 HealthChoice <small>MARYLAND'S MEDICAID 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
HEALTH PLANS	AMERIGROUP	☆☆	☆	☆	☆☆	☆☆	☆
	DIAMOND PLAN	☆	☆	☆	Not Rated By Researchers	☆	☆
	JAI MEDICAL SYSTEMS	☆☆	☆☆☆	☆☆☆	☆☆	☆☆☆	☆☆☆
	MARYLAND PHYSICIANS CARE	☆☆☆	☆☆	☆☆☆	☆☆	☆☆	☆☆
	MEDSTAR FAMILY CHOICE	☆☆	☆☆	☆☆☆	☆☆	☆☆☆	☆☆☆
	PRIORITY PARTNERS	☆☆☆	☆☆☆	☆☆	☆☆	☆☆	☆☆
	UNITED HEALTHCARE	☆☆	☆☆	☆☆	☆	☆	☆

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 in competition. "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

- The MCOs are currently responsible for 2 Performance Improvement Projects. Each PIP is at least 3 years in duration. The CY2010 PIPs were:
 - Cervical Cancer Screening
 - Initiation and Engagement of Alcohol and Other Drug Dependence Treatment – Baseline measure

- Activities must be designed by each MCO that are intended to achieve measurable improvement in processes and, subsequently, outcomes of care.

	CY 2010						
	ACC	DIA	JMS	MPC	MSFC	PP	UH
Cervical Cancer Screening (CCS)	76.6%	70.2%	79.7%	69.7%	76.4%	69.4%	70.3%
Initiation & Engagement of Alcohol and Other Drug Dependence Treatment (IET)	50.9%	40.8%	48.8%	50.6%	32.2%	48.6%	50.3%

Where to find complete information ?



DEPARTMENT OF HEALTH AND MENTAL HYGIENE

<http://www.dhmf.state.md.us/>

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