

Comparative Analysis of Audited
Results from TennCare MCOs



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HEDIS/ CAHPS Report



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Acronyms and Initialisms

AAB	Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis
AAP	Adults' Access to Preventive/Ambulatory Health Services
ABA	Adult BMI Assessment
ABX	Antibiotic Utilization
ACE	Angiotensin Converting Enzyme
ADD	Follow-Up Care for Children Prescribed ADHD Medication
ADHD	Attention-Deficit/Hyperactivity Disorder
AHRQ	Agency for Healthcare Research and Quality
AMB	Ambulatory Care
AG	Amerigroup Community Care, Inc. d.b.a. Amerigroup in the Tennessee Middle Grand Region
AMI	Acute Myocardial Infarction
AMM	Antidepressant Medication Management
AMR	Asthma Medication Ratio
AOD	Alcohol or Other Drug
ARB	Angiotensin Receptor Blocker
ART	Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis
ASM	Use of Appropriate Medications for People With Asthma
AWC	Adolescent Well-Care Visits
BCS	Breast Cancer Screening
BCE/BCW	Volunteer State Health Plan, Inc, d.b.a. BlueCare Tennessee, BlueCare-East in the Tennessee East Grand Region and BlueCare-West in the Tennessee West Grand Region
BMI	Body Mass Index
BP	Blood Pressure
CABG	Coronary Artery Bypass Graft
CAHPS	Consumer Assessment of Healthcare Providers and Systems
CAP	Children and Adolescents' Access to Primary Care Practitioners
CAT	Call Answer Timeliness
CBP	Controlling High Blood Pressure
CCC	Children With Chronic Conditions
CCS	Cervical Cancer Screening
CDC	Comprehensive Diabetes Care
CHL	Chlamydia Screening in Women

Acronyms and Initialisms

CIS	Childhood Immunization Status
CMC	Cholesterol Management for Patients With Cardiovascular Conditions
CPA	CAHPS Health Plan Survey 5.0H Adult Version
CPC	CAHPS Health Plan Survey 5.0H Child Version
COPD	Chronic Obstructive Pulmonary Disease
CT	Computed Tomography
CWP	Appropriate Testing for Children With Pharyngitis
CY	Calendar Year
d.b.a.	doing business as
DMARD	Disease-Modifying Anti-Rheumatic Drug
DTaP	Diphtheria, Tetanus and Acellular Pertussis Vaccination
ED	Emergency Department
Flu	Influenza
FPC	Frequency of Ongoing Prenatal Care
FSP	Frequency of Selected Procedure
FUH	Follow-Up After Hospitalization for Mental Illness
HbA1c	Hemoglobin A1c, also called Glycosylated Hemoglobin, Glycohemoglobin
HEDIS	Healthcare Effectiveness Data and Information Set
HepA	Hepatitis A
HepB	Hepatitis B
HiB	H Influenza Type B Vaccination
HPV	Human Papillomavirus Vaccine (also, HPV for Female Adolescents measure)
HTN	Hypertension
IAD	Identification of Alcohol and Other Drug Services
IET	Initiation and Engagement of AOD Dependence Treatment
IMA	Immunizations for Adolescents
IP; IPU	Inpatient; IP Utilization – General Hospital/Acute Care
IPV	Polio Vaccination
IVD	Ischemic Vascular Disease
LBP	Use of Imaging Studies for Low Back Pain
LDL-C	Low Density Lipoprotein-Cholesterol
LSC	Lead Screening in Children
MCO	Managed Care Organization
MMA	Medication Management for People With Asthma
MMR	Measles, Mumps and Rubella Vaccination
MPM	Annual Monitoring for Patients on Persistent Medications

MPT	Mental Health Utilization
MRI	Magnetic Resonance Imaging
MSC	Medical Assistance With Smoking and Tobacco Use Cessation
NA	Not Applicable
NCQA	National Committee for Quality Assurance
NCS	Non-Recommended Cervical Cancer Screening in Adolescent Females
OB/GYN	Obstetrician/Gynecologist
PBH	Persistence of Beta-Blocker Treatment After a Heart Attack
PCE	Pharmacotherapy Management of COPD Exacerbation
PCI	Percutaneous Coronary Interventions
PCP	Primary Care Practitioner
PCV	Pneumococcal Conjugate Vaccination
PMPY	Per Member Per Year
PPC	Prenatal and Postpartum Care
RV	Rotavirus
SAA	Adherence to Antipsychotic Medications for Individuals With Schizophrenia
SMC	Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia
SMD	Diabetes Monitoring for People With Diabetes and Schizophrenia
SPR	Use of Spirometry Testing in the Assessment and Diagnosis of COPD
SSD	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications
Strep	Streptococcus
Td; Tdap	Tetanus, Diphtheria Toxoids Vaccine; Td and Acellular Pertussis Vaccine
TennCare	Tennessee Department of Finance and Administration, Bureau of TennCare
TCS	Volunteer State Health Plan, Inc. d.b.a. <i>TennCareSelect</i> in all three of Tennessee's Grand Regions
UHCE/UHCM/UHCW	UnitedHealthcare Plan of the River Valley, Inc. d.b.a. UnitedHealthcare-East in the Tennessee East Grand Region d.b.a. UnitedHealthcare-Middle in the Tennessee Middle Grand Region d.b.a. UnitedHealthcare-West in the Tennessee West Grand Region
URI	Appropriate Treatment for Children With Upper Respiratory Infection
VZV	Chicken Pox Vaccination
W15	Well-Child Visits in the First 15 Months of Life
W34	Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life
WCC	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

Executive Summary

Medicaid managed care organizations (MCOs) are required to report a full Healthcare Effectiveness Data and Information Set (HEDIS) as a part of the accreditation mandates in Tennessee. The HEDIS requirement is an integral part of the accreditation process of the National Committee for Quality Assurance (NCQA). In 2006, Tennessee became the first state in the nation requiring all MCOs to become accredited by NCQA, an independent, nonprofit organization that assesses and scores MCO performance in the areas of quality improvement, utilization management, provider credentialing, and member rights and responsibilities.

HEDIS standardized measures of MCO performance allow comparisons to national averages/benchmarks and between Tennessee's MCOs, as well as tracking over time. The Consumer Assessment of Healthcare Providers and Systems (CAHPS) set of standardized surveys is included in HEDIS to measure members' satisfaction with their care. This report summarizes the results of the HEDIS 2014 reporting year for HEDIS/CAHPS by the MCOs contracting with the Tennessee Department of Finance and Administration, Bureau of TennCare (TennCare). TennCare uses the information contained herein to help assess health plan performance and to reward, via pay-for-performance initiatives, those that are demonstrating significant improvement.

For an overview of the performance of Tennessee's MCOs, a calculated weighted average of the scores of all those reporting is provided alongside national averages in the [Statewide Performance](#) section. MCO-specific measures are presented in the [Individual Plan Performance](#) section for cross-comparison with color-coding for national and state benchmark comparison where available/applicable. The weighted average performances of Tennessee's MCOs on certain measures are presented in the [HEDIS Trending Since 2006](#) section. [Appendix A](#) contains a comprehensive table of plan-specific results for the HEDIS 2014 Utilization Measures and HEDIS 2013 national benchmarks. The table in [Appendix B](#) contains the HEDIS 2013 National Medicaid Means and Percentiles for reference to these benchmarks, and the table in [Appendix C](#) reveals MCO populations reported by health plans in member months by age and sex for 2014. [Appendix D](#) presents the reporting options for each measure, whether administrative, hybrid or both.

Background

HEDIS Measures—Domains of Care

The Healthcare Effectiveness Data and Information Set (HEDIS) is an important tool designed to ensure that purchasers and consumers have the information they need to reliably compare the performance of managed healthcare plans. Standardized methodologies ensure the integrity of measure reporting and help purchasers make more reliable, relevant comparisons between health plans. HEDIS measures are subject to a National Committee for Quality Assurance (NCQA) HEDIS Compliance Audit that must be conducted by an NCQA-certified HEDIS Compliance Auditor under the auspices of an NCQA-licensed organization. This ensures the integrity of the HEDIS collection and calculation process at each managed care organization (MCO) through an overall information systems capabilities assessment, followed by an evaluation of the ability to comply with HEDIS specifications.

The HEDIS rates presented in this report refer to data collected during the review period of the previous calendar year (CY), from January 1 to December 31. For HEDIS 2014 results, CY2013 was the review period. Similarly, the comparative data presented in this report from the HEDIS 2013 Medicaid Means and Percentiles reflect data procured during CY2012.

For HEDIS 2014, there were a total of 81 measures (Commercial, Medicare and Medicaid) across five domains of care:

- ◆ Effectiveness of Care
- ◆ Access/Availability of Care
- ◆ Utilization and Relative Resource Use
- ◆ Experience of Care [Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey Results]
- ◆ Health Plan Descriptive Information

The following brief descriptions of selected HEDIS measures were extracted from NCQA's *HEDIS 2014 Volume 2: Technical Specifications*, which includes additional information related to each measure. The measures presented in this report reflect data submitted from the following domains of care: Effectiveness of Care, Access/Availability of Care, Utilization and Relative Resource Use, and Experience of Care (CAHPS Survey Results).

Effectiveness of Care Measures

The Effectiveness of Care domain contains measures that look at the clinical quality of care delivered within an MCO. Measures in this domain address four aspects of care:

1. How well the MCO delivers preventive services and keeps its members healthy
2. Whether the most up-to-date treatments are being offered to treat acute episodes of illness and help members get better

3. The process by which care is delivered to people with chronic diseases and how well the MCO's healthcare delivery system helps members cope with illness
4. Whether appropriate treatment and/or testing was provided to members

Starting with HEDIS 2008 reporting, Effectiveness of Care measures were grouped into more specific clinical categories: Prevention and Screening, Respiratory Conditions, Cardiovascular Conditions, Diabetes, Musculoskeletal Conditions, Behavioral Health, Medication Management, and measures collected through the CAHPS Health Plan Survey. Only certain measures from these categories are presented in this report. Select Utilization Measures are included in [Appendix A](#).

Prevention and Screening

Adult BMI Assessment (ABA)

The percentage of members 18 to 74 years of age who had an outpatient visit and who had their body mass index (BMI) documented during the measurement year or the year prior to the measurement year.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)

The percentage of members 3 to 17 years of age who had an outpatient visit with a primary care practitioner (PCP) or obstetrician/gynecologist (OB/GYN) and who had evidence of BMI percentile documentation, counseling for nutrition and counseling for physical activity during the measurement year. *Note: Because BMI norms for youth vary with age and gender, this measure evaluated whether BMI percentile is assessed rather than an absolute BMI value.*

Childhood Immunization Status (CIS)

The percentage of children two years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three H influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); two hepatitis A (HepA); two or three rotavirus (RV); and two influenza (Flu) vaccines by the second birthday. The measure calculates a rate for each vaccine and nine separate combination rates. The following is the list of Combination vaccinations for CIS:

- ◆ Combination 2: DTaP, IPV, MMR, HiB, HepB and VZV
- ◆ Combination 3: DTaP, IPV, MMR, HiB, HepB, VZV and PCV
- ◆ Combination 4: DTaP, IPV, MMR, HiB, HepB, VZV, PCV and HepA
- ◆ Combination 5: DTaP, IPV, MMR, HiB, HepB, VZV, PCV and RV
- ◆ Combination 6: DTaP, IPV, MMR, HiB, HepB, VZV, PCV and Flu
- ◆ Combination 7: DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA and RV
- ◆ Combination 8: DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA and Flu
- ◆ Combination 9: DTaP, IPV, MMR, HiB, HepB, VZV, PCV, RV and Flu
- ◆ Combination 10: DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA, RV and Flu

Immunizations for Adolescents (IMA)

The percentage of adolescents 13 years of age who had one dose of meningococcal vaccine and one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or one tetanus, diphtheria

toxoids vaccine (Td) by the 13th birthday. The measure calculates a rate for each vaccine and one combination (Meningococcal, Tdap/Td) rate.

Human Papillomavirus Vaccine for Female Adolescents (HPV)

The percentage of female adolescents 13 years of age who had three doses of Human Papillomavirus Vaccine (HPV) by the 13th birthday.

Lead Screening in Children (LSC)

The percentage of children two years of age who had one or more capillary or venous lead blood tests for lead poisoning by the second birthday.

Breast Cancer Screening (BCS)

The percentage of women 50 to 74 years of age who had a mammogram to screen for breast cancer during the measurement year or the year prior to the measurement year.

Cervical Cancer Screening (CCS)

The percentage of women 21 to 64 years of age who received a screening test for cervical cancer meeting either of the following criteria:

- ◆ Women age 21–64 who had cervical cytology performed every three years
- ◆ Women age 30–64 who had cervical cytology/HPV co-testing performed every five years

Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)

The percentage of adolescent females 16 to 20 years of age who were screened unnecessarily for cervical cancer. A lower rate indicates better performance.

Chlamydia Screening in Women (CHL)

The percentage of women 16 to 24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year. This measure calculates a total rate as well as two age stratifications: 16- to 20- and 21- to 24-year-old women.

Respiratory Conditions

Appropriate Testing for Children With Pharyngitis (CWP)

The percentage of children 2 to 18 years of age who were diagnosed with pharyngitis, were dispensed an antibiotic and received a group A streptococcus (strep) test for the episode. A higher rate represents better performance (i.e., appropriate testing).

Appropriate Treatment for Children With Upper Respiratory Infection (URI)

The percentage of children three months to 18 years of age who were given a diagnosis of upper respiratory infection and were not dispensed an antibiotic prescription. This measure is reported as an inverted rate $[1 - (\text{numerator}/\text{eligible population})]$, with a higher rate indicating appropriate treatment of children with URI (i.e., the proportion for whom antibiotics were not prescribed).

Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)

The percentage of adults 18 to 64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription; reported as an inverted rate [1 - (numerator/eligible population)], with a higher rate indicating appropriate treatment of adults with acute bronchitis (i.e., the proportion for whom antibiotics were not prescribed).

Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

The percentage of members 40 years of age and older with a new diagnosis or newly active chronic obstructive pulmonary disease (COPD) who received appropriate spirometry testing to confirm the diagnosis.

Pharmacotherapy Management of COPD Exacerbation (PCE)

The percentage of COPD exacerbation for members 40 years of age and older who had an acute inpatient (IP) discharge or emergency department (ED) encounter between January 1 and November 30 of the measurement year and who were dispensed appropriate medication. Two rates are reported:

- ◆ Dispensed a systemic corticosteroid within 14 days of the event
- ◆ Dispensed a bronchodilator within 30 days of the event

Note: The eligible population for this measure is based on acute IP discharge and ED visits, not on members. The denominator may include multiple events for the same individual.

Use of Appropriate Medications for People With Asthma (ASM)

The percentage of members 5 to 64 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year. This measure calculates a total rate as well as four age stratifications: 5- to 11-, 12- to 18-, 19- to 50- and 51- to 64-year-olds.

Medication Management for People With Asthma (MMA)

The percentage of members 5 to 64 years of age during the measurement year who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period. Two rates are reported:

- ◆ The percentage of members who remained on an asthma controller medication for at least 50 percent of their treatment period
- ◆ The percentage of members who remained on an asthma controller medication for at least 75 percent of their treatment period

Asthma Medication Ratio (AMR)

The percentage of members 5 to 64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year. This measure calculates a total rate as well as four age stratifications: 5- to 11-, 12- to 18-, 19- to 50- and 51- to 64-year-olds.

Cardiovascular Conditions

Cholesterol Management for Patients With Cardiovascular Conditions (CMC)

The percentage of members 18 to 75 years of age who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI) in the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year, who had each of the following during the measurement year:

- ◆ Low density lipoprotein-cholesterol (LDL-C) screening
- ◆ LDL-C control (<100 mg/dL)

Controlling High Blood Pressure (CBP)

The percentage of members 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90) during the measurement year.

Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)

The percentage of members 18 years of age and older during the measurement year who were hospitalized and discharged alive from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of AMI and who received persistent beta-blocker treatment for six months after discharge.

Diabetes

Comprehensive Diabetes Care (CDC)

The percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had each of the following during the measurement year:

- ◆ Hemoglobin A1c (HbA1c) testing
- ◆ HbA1c poor control (>9.0 percent) for the most recent HbA1c test²
- ◆ HbA1c control (<7.0 percent) for the most recent HbA1c test
- ◆ HbA1c control (<8.0 percent) for the most recent HbA1c test
- ◆ An eye exam (retinal or dilated) for diabetic retinal disease performed [or a negative retinal exam (no evidence of retinopathy) in the year prior to the measurement year]
- ◆ LDL-C screening performed
- ◆ LDL-C control (<100 mg/dL) for the most recent LDL-C screening
- ◆ Medical attention for nephropathy that includes a nephropathy screening test or evidence of nephropathy
- ◆ Blood pressure control (<140/80 mm Hg) for the most recent reading
- ◆ Blood pressure control (<140/90 mm Hg) for the most recent reading

Musculoskeletal Conditions

Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)

The percentage of members who were diagnosed with rheumatoid arthritis and were dispensed at least one ambulatory prescription for a disease modifying anti-rheumatic drug (DMARD).

² For this indicator, a lower rate indicates better performance (i.e., low rates of poor control indicate better care).

Use of Imaging Studies for Low Back Pain (LBP)

The percentage of members with primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI [Magnetic Resonance Imaging], CT [Computed Tomography] scan) within 28 days of the diagnosis; reported as an inverted rate [1 - (numerator/eligible population)]. A higher rate indicates appropriate treatment of low back pain (i.e., the proportion for whom imaging studies did not occur).

Behavioral Health

Antidepressant Medication Management (AMM)

The percentage of members 18 years of age and older with a diagnosis of major depression and treated with antidepressant medication, and remained on an antidepressant medication treatment. Two rates are reported:

- ◆ *Effective Acute Phase Treatment* (on medication for at least 84 days/12 weeks)
- ◆ *Effective Continuation Phase Treatment* (for at least 180 days/6 months)

Follow-Up Care for Children Prescribed ADHD Medication (ADD)

The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period (where members diagnosed with narcolepsy are excluded from the denominator if optional exclusions are applied). One of these visits must have been within 30 days of the earliest ambulatory prescription dispensed for ADHD medication, at which time the member must have been 6 to 12 years of age. Two rates are reported:

- ◆ *Initiation Phase*—The percentage of members who had one follow-up visit with a practitioner with prescribing authority during the 30-day Initiation Phase
- ◆ *Continuation and Maintenance Phase*—The percentage of members who remained on the medication at least 210 days and who, in addition to the Initiation Phase follow-up, had at least two follow-up visits with a practitioner within 270 days (nine months) of the end of the Initiation Phase

Follow-Up After Hospitalization for Mental Illness (FUH)

The percentage of discharges for members six years of age and older who were hospitalized for treatment of selected mental health disorders and had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported as the percentage of discharges for which the member received follow-up within:

- ◆ seven days of discharge
- ◆ 30 days of discharge

Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

The percentage of members 18 to 64 years of age with schizophrenia or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.

Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)

The percentage of members 18 to 64 years of age with schizophrenia and diabetes, who had both an LDL-C test and an HbA1c test during the measurement year.

Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)

The percentage of members 18 to 64 years of age with schizophrenia and cardiovascular disease, who had an LDL-C test during the measurement year.

Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)

The percentage of members 19 to 64 years of age during the measurement year with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.

Medication Management

Annual Monitoring for Patients on Persistent Medications (MPM)

The percentage of members 18 years of age and older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least one therapeutic monitoring event for the therapeutic agent in the measurement year. For each product line, four separate rates and a total are reported:

- ◆ Annual monitoring for members on angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blocker (ARB)
- ◆ Annual monitoring for members on digoxin
- ◆ Annual monitoring for members on diuretics
- ◆ Annual monitoring for members on anticonvulsants
- ◆ Total rate (the sum of the four numerators divided by the sum of the four denominators)

Measures Collected Through CAHPS Health Plan Survey

Medical Assistance With Smoking and Tobacco Use Cessation (MSC)

This measure is collected using the survey methodology to arrive at a rolling average that represents the percentage of members 18 years of age and older who are current smokers or tobacco users seen by the MCO during the measurement year. For these members, the following facets of providing medical assistance with cessation are assessed:

- ◆ *Advising Smokers and Tobacco Users to Quit*—Those who received advice to quit
- ◆ *Discussing Cessation Medications*—Those for whom cessation medications were recommended or discussed
- ◆ *Discussing Cessation Strategies*—Those for whom cessation methods or strategies were provided or discussed

Access/Availability of Care Measures

The measures in the Access/Availability of Care domain evaluate how members access important and basic services of their MCO. Included are measures of overall access, how many members are actually using basic MCO services, and the use and availability of specific services.

Adults' Access to Preventive/Ambulatory Health Services (AAP)

The percentage of members 20 years and older who had an ambulatory or preventive care visit during the measurement year. The MCO reports three age stratifications and a total rate. Rates for adults 65 years of age and older, however, are not included in this report as those services would be provided by Medicare. Because the total rate would include this age group, it has been excluded from this report as well.

- ◆ 20 to 44 years of age
- ◆ 45 to 64 years of age
- ◆ 65 years of age and older
- ◆ Total

Children and Adolescents' Access to Primary Care Practitioners (CAP)

The percentage of members 12 months to six years who had a visit with a PCP during the measurement year, and members 7–19 years who had a visit with a PCP during the measurement year or the year prior. The MCO reports four separate percentages:

- ◆ 12 to 24 months
- ◆ 25 months to 6 years
- ◆ 7 to 11 years
- ◆ 12 to 19 years

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)

The percentage of adolescent and adult members age 13 and older who demonstrated a new episode of alcohol or other drug (AOD) dependence and received the following:

- ◆ *Initiation of AOD Treatment*—Percentage who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or patient hospitalization within 14 days of diagnosis
- ◆ *Engagement of AOD Treatment*—Percentage who, in addition to initiating treatment, had two or more services with an AOD diagnosis within 30 days of the initiation visit

The MCO reports three separate percentages: 13 to 17; ≥18; and a Total rate.

Prenatal and Postpartum Care (PPC)

The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care:

- ◆ *Timeliness of Prenatal Care*—The percentage of deliveries that received a prenatal care visit as a member of the MCO in the first trimester *or* within 42 days of enrollment in the MCO
- ◆ *Postpartum Care*—The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery

Call Answer Timeliness (CAT)

The percentage of calls received by the MCO's Member Services call centers (during operating hours) during the measurement year that were answered by a live voice within 30 seconds.

Utilization and Relative Resource Use

Utilization

Utilization measures are designed to capture the frequency of certain services provided by the organization.

Frequency of Ongoing Prenatal Care (FPC)

The percentage of members who delivered a child between November 6 of the year prior to the measurement year and November 5 of the measurement year and who received the expected number of prenatal care visits, adjusted for gestational age and the month of pregnancy that the member enrolled in the MCO. This measure uses the same denominator as the Prenatal and Postpartum Care measure. Rates are reported by the percentage of expected visits:

- ◆ < 21 percent
- ◆ 21 to 40 percent
- ◆ 41 to 60 percent
- ◆ 61 to 80 percent
- ◆ ≥ 81 percent

Well-Child Visits in the First 15 Months of Life (W15)

The percentage of members who turned 15 months old during the measurement year and who had the following number of well-child visits with a PCP during their first 15 months of life: zero, one, two, three, four, five, or six or more.

Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)

The percentage of members who were three to six years of age who received one or more well-child visits with a PCP during the measurement year.

Adolescent Well-Care Visits (AWC)

The percentage of enrolled members who were 12 to 21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.

Relative Resource Use

These measures are detailed in a separate annual *Relative Resource Use Report*.

Experience of Care

The CAHPS Health Plan Survey 5.0H Adult Version (CPA) and 5.0H Child Version (CPC) are tools for measuring consumer healthcare satisfaction with the quality of care and customer service provided by their health plans. Topics include the following:

- ◆ Getting Needed Care
- ◆ Customer Service
- ◆ Getting Care Quickly
- ◆ How Well Doctors Communicate
- ◆ Shared Decision Making
- ◆ Rating of Personal Doctor
- ◆ Rating of Specialist Seen Most Often
- ◆ Rating of All Health Care³
- ◆ Rating of Health Plan

The CAHPS Consortium decided in 2002 to integrate a new set of items in the 3.0H version of the CAHPS Health Plan Survey child questionnaires (now 5.0H) to better address the needs of children with chronic conditions, who are commonly referred to as children with special healthcare needs. Known as the Children With Chronic Conditions (CCC) Survey set, these items include supplemental questions focused on topics with special relevance to children with chronic conditions. The CCC set is designed for children who have a chronic physical, developmental,

³ While healthcare is the standard usage adopted for this report, health care is used when it follows AHRQ measure names.

behavioral or emotional condition and who also require health and related services of a type or amount beyond that generally required by children.

All CAHPS surveys must be administered by an NCQA-certified survey vendor using an NCQA-approved protocol of administration to ensure that results are collected in a standardized way and can be compared across plans. Standard NCQA protocols for administering CAHPS surveys include a mixed-model mail/telephone protocol and a mail-only protocol. The surveys contained within this domain are designed to provide standardized information about members' experiences with their MCOs. NCQA worked with the Agency for Healthcare Research and Quality (AHRQ) to develop these surveys.

For a plan's results to be considered reliable, the Medicaid MCO must follow one of the standard CAHPS protocols or an enhanced protocol approved by NCQA, or must achieve a 45-percent response rate using an alternative protocol. For more detail regarding this calculation methodology and the questions used in each composite, see *HEDIS 2014, Volume 3: Specifications for Survey Measures*. MCO results from the CPA, CPC and CCC surveys were evaluated for this report.

CAHPS Health Plan Survey 5.0H Adult Version (CPA)

The CPA includes five composite categories: Getting Needed Care, Customer Service, Getting Care Quickly, How Well Doctors Communicate and Shared Decision Making. Each composite category represents an overall aspect of plan quality and is comprised of similar questions. For each composite, an overall score is computed. Composites are comprised of two or more questions about a similar topic, measured on one of the two scales:

1. For Getting Needed Care, Customer Service, Getting Care Quickly and How Well Doctors Communicate
 - ◆ Never
 - ◆ Sometimes
 - ◆ Usually
 - ◆ Always
2. For Shared Decision Making
 - ◆ Different
 - ◆ Not at All
 - ◆ A Little
 - ◆ Some
 - ◆ A Lot

For any given question used in a composite, the percentage of respondents answering in a certain way is calculated for each plan. Summary rates represent the percentage of members who responded in the most positive way, as defined by NCQA. The following descriptions provide a brief explanation of the four composite categories and additional questions.

Getting Needed Care

The Getting Needed Care Composite measures the ease with which members were able to access care needed in the last six months. The summary rate represents the percentage of members who responded 'Always' or 'Usually' to specified questions.

Getting Care Quickly

The Getting Care Quickly Composite measures the ease with which members were able to access care quickly, including office waiting room experiences, in the last six months. The summary rate

represents the percentage of members who responded ‘Always’ or ‘Usually’ to specified questions.

How Well Doctors Communicate

The How Well Doctors Communicate Composite evaluates provider-patient communications for the last six months by asking members how often their personal doctor listens carefully, explain things in a way to easily understand, show respect for what they have to say and spend enough time with them. The summary rate represents the percentage of members who responded ‘Always’ or ‘Usually’ to specified questions.

Customer Service

The Customer Service Composite measures how often members were able to get information and help from a plan and how well they were treated by a plan’s customer service in the last six months. The summary rate represents the percentage of members who responded ‘Always’ or ‘Usually’ to specified questions.

Shared Decision Making

The Shared Decision Making Composite measures how often doctors offered choices regarding healthcare, mentioned the good and bad things associated with each treatment option, the extent to which doctors requested input regarding healthcare preferences, and how often doctors involved members in the decision-making process, according to their preference. The summary rate represents the percentage of members who responded ‘A Lot’ to specified questions.

Additional Questions

There are four additional questions with responses scaled 0–10 in the CPA: *Rating of All Health Care*, *Rating of Personal Doctor*, *Rating of Specialist Seen Most Often* and *Rating of Health Plan*. For these, a response of 0 represents the ‘worst possible’ and 10 represents the ‘best possible’ healthcare received in the last six months. For each of these questions, the summary rate represents the percentage of members who responded with a 9 or 10.

CAHPS Health Plan Survey 5.0H Child Version: General Population (CPC)

The CPC set includes five composite categories. Each composite category represents an overall aspect of plan quality and is comprised of similar questions. For each composite, an overall score is computed. Composites are comprised of two or more questions about a similar topic, on one of the two scales:

1. For Getting Needed Care, Customer Service, Getting Care Quickly and How Well Doctors Communicate

◆ Never	◆ Usually
◆ Sometimes	◆ Always

2. For Shared Decision Making

◆ Different	◆ A Little	◆ A Lot
◆ Not at All	◆ Some	

For any given question used in a composite, the percentage of respondents answering in a certain way is calculated for each plan. Summary rates represent the percentage of members who responded in the most positive way, as defined by NCQA. The following provides a brief description of the four composite categories and additional questions, as well as the scoring methodology for each.

Getting Needed Care

The Getting Needed Care Composite measures the ease with which child members were able to access care needed in the last six months. The summary rate represents the percentage of child members' family/caregivers who responded 'Always' or 'Usually' to specified questions.

Getting Care Quickly

The Getting Care Quickly Composite measures the ease with which child members were able to access care quickly, including office waiting room experiences, in the last six months. The summary rate represents the percentage of child members' family/caregivers who responded 'Always' or 'Usually' to specified questions.

How Well Doctors Communicate

The How Well Doctors Communicate Composite evaluates provider-patient communication for the last six months by asking family/caregivers of child members how often their child's doctors listen carefully, explain things in a way to easily understand, show respect for what they have to say and spend enough time with them. The summary rate represents the percentage of child members' family/caregivers who responded 'Always' or 'Usually' to specified questions.

Customer Service

The Customer Service Composite measures how often child members' family/caregivers were able to get information and help from a plan and how well they were treated by a plan's customer service in the last six months. The summary rate represents the percentage of child members' family/caregivers who responded 'Always' or 'Usually' to specified questions.

Shared Decision Making

The Shared Decision Making Composite measures how often doctors offered choices regarding healthcare, mentioned the good and bad things associated with each treatment option, the extent to which doctors requested input regarding healthcare preferences, and how often doctors involved child members' family/caregivers in the decision-making process, according to their preference. The summary rate represents the percentage of child members' family/caregivers who responded 'A Lot' to specified questions.

Additional Questions

There are four additional questions with responses scaled 0–10 in the CPC: *Rating of All Health Care*, *Rating of Personal Doctor*, *Rating of Specialist Seen Most Often* and *Rating of Health Plan*. For these, a response of 0 represents the 'worst possible' and 10 represents the 'best possible.' The summary rate represents the percentage of members' family/caregivers who responded with a 9 or 10.

CAHPS Health Plan Survey 5.0H Child Version: Children With Chronic Conditions (CCC)

The CCC Survey set includes supplemental questions focused on topics with special relevance to children with chronic conditions. Results include the same ratings, composites and individual question summary rates as those reported for the CPC. Additionally, five CCC composites summarize satisfaction with basic components of care essential for successful treatment, management and support of children with chronic conditions. These topics are reflected in the following composite measures presented in this report:

1. Access to Specialized Services
2. Family-Centered Care: Personal Doctor Who Knows Child
3. Coordination of Care for Children With Chronic Conditions
4. Family-Centered Care: Getting Needed Information
5. Access to Prescription Medicines

The first three composites for CCC are responded to as:

- | | |
|-------------|-----------|
| ◆ Never | ◆ Usually |
| ◆ Sometimes | ◆ Always |

The last two composites for CCC are responded to as:

- | | |
|-------|------|
| ◆ Yes | ◆ No |
|-------|------|

Access to Specialized Services

This Composite measures how often in the last six months that child members were able to obtain special medical equipment or devices, therapy, and treatment or counseling, and assistance if they experienced an access problem. The summary rate represents the percentage of child members' family/caregivers who responded 'Always' or 'Usually.'

Family Centered Care: Personal Doctor Who Knows Child

This Composite measures whether or not in the last six months providers discussed the child member's feelings, growth and behavior; and if the provider understands how the child's medical or behavioral conditions affect both the child's and family's day-to-day life. The summary rate represents the percentage of child members' family/caregivers who responded 'Yes.'

Coordination of Care for Children With Chronic Conditions

This Composite measures whether or not in the last six months doctors or other health providers assisted family/ caregivers, if needed, in contacting a child member's school or daycare and if anyone from the health plan, doctor's office or clinic assisted in coordinating the child's care among different providers or services. The summary rate represents the percentage of child members' family/caregivers who responded 'Always' or 'Usually.'

Family Centered Care: Getting Needed Information

This Composite measures how often in the last six months that family/caregivers questions were answered by their children’s doctors or health providers. The summary rate represents the percentage of child members’ family/caregivers who responded ‘Always’ or ‘Usually.’

Access to Prescription Medicines

This Composite measures how often in the last six months child members were easily able to obtain prescription medicines through their plans. The summary rate represents the percentage of child members’ family/caregivers who responded ‘Always’ or ‘Usually.’

Results

Statewide Performance

In conjunction with NCQA accreditation, MCOs are required to submit a full set of audited HEDIS measures to NCQA and TennCare each year. For HEDIS 2014, this included the health plans in all three Grand Regions: Amerigroup Community Care, Inc. (AG); Volunteer State Health Plan, Inc. (BCE, BCW and TCS); and UnitedHealthcare Plan of the River Valley, Inc. (UHCE, UHCM and UHCW).

Tables 1 (a and b), 2 and 3 summarize the weighted average TennCare score for each of the selected HEDIS 2013 and HEDIS 2014 measures as well as the HEDIS 2013 Medicaid National Average. The Medicaid National Average represents the sum of the reported rates divided by the total number of health plans reporting the rate. Weighted state rates are determined by applying the size of the eligible population within each plan to their overall results. Using this methodology, plan-specific findings contribute to the TennCare statewide estimate, proportionate to eligible population size. Where possible in Tables 1 (a and b), 2 and 3, the statewide changes for each measure reported during both HEDIS 2013 and HEDIS 2014 are presented. The column titled 'Change 2013 to 2014' indicates whether there was an improvement (▲) or a decline (▼) in statewide performance for the measure from HEDIS 2013 to HEDIS 2014.

Table 1a. HEDIS 2014 State to National Rates: Effectiveness of Care Measures

Measure	Weighted State Rate		HEDIS 2013 Medicaid National Avg.	Change 2013 to 2014
	2013	2014		
Prevention and Screening				
Adult BMI Assessment (ABA)	70.95%	78.50%	67.63%	▲
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC):				
BMI Percentile: 3–11 years	49.42%	56.08%	51.48%	▲
12–17 years	49.74%	58.27%	52.31%	▲
Total	49.52%	56.80%	51.78%	▲
Counseling for Nutrition: 3–11 years	59.90%	63.76%	56.68%	▲
12–17 years	55.01%	54.24%	51.34%	▼
Total	58.28%	60.62%	55.01%	▲
Counseling for Physical Activity: 3–11 years	45.54%	52.77%	42.81%	▲
12–17 years	48.02%	52.67%	47.30%	▲
Total	46.36%	52.70%	44.23%	▲
Childhood Immunization Status (CIS):				
DTaP/DT	80.17%	79.00%	80.95%	▼
IPV	93.86%	93.07%	91.61%	▼
MMR	91.44%	91.10%	91.60%	▼
HiB	93.73%	92.62%	92.01%	▼
HepB	93.33%	93.15%	89.51%	▼
VZV	90.72%	91.47%	91.10%	▲
PCV	82.42%	81.13%	80.07%	▼

Table 1a. HEDIS 2014 State to National Rates: Effectiveness of Care Measures

Measure	Weighted State Rate		HEDIS 2013 Medicaid National Avg.	Change 2013 to 2014
	2013	2014		
HepA	89.55%	89.93%	76.36%	↑
RV	68.43%	69.66%	66.00%	↑
Influenza	43.74%	43.73%	49.51%	↓
Combination 2	76.28%	75.24%	75.74%	↓
Combination 3	73.02%	72.12%	72.08%	↓
Combination 4	71.63%	71.18%	60.89%	↓
Combination 5	56.98%	57.66%	55.27%	↑
Combination 6	37.88%	38.24%	41.76%	↑
Combination 7	56.13%	56.88%	48.73%	↑
Combination 8	37.24%	38.07%	37.28%	↑
Combination 9	31.99%	33.02%	34.72%	↑
Combination 10	31.53%	32.89%	31.38%	↑
Immunizations for Adolescents (IMA):				
Meningococcal	65.69%	66.27%	69.37%	↑
Tdap/Td	83.31%	83.57%	81.33%	↑
Combination 1	64.40%	65.48%	67.19%	↑
Human Papillomavirus Vaccine for Female Adolescents (HPV) *	16.78%	17.47%		↑
Lead Screening in Children (LSC)	72.18%	73.44%	67.49%	↑
Breast Cancer Screening (BCS) **	44.27%	52.47%	51.82%	↑
Cervical Cancer Screening (CCS) ***		66.25%		
Chlamydia Screening in Women (CHL):				
16–20 years	53.62%	51.54%	53.50%	↓
21–24 years	62.58%	62.56%	63.66%	↓
Total	57.39%	56.03%	57.10%	↓
Respiratory Conditions				
Appropriate Testing for Children With Pharyngitis (CWP)	76.03%	77.75%	68.03%	↑
Appropriate Treatment for Children With Upper Respiratory Infection (URI)	74.84%	75.05%	85.08%	↑
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)	24.39%	24.58%	24.22%	↑
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	34.40%	34.34%	31.52%	↓
Pharmacotherapy Management of COPD Exacerbation (PCE):				
Systemic Corticosteroid	47.81%	50.91%	65.30%	↑
Bronchodilator	73.48%	76.34%	81.48%	↑
Use of Appropriate Medications for People With Asthma (ASM):				
5–11 years	92.78%	93.11%	89.65%	↑
12–18 years	87.59%	88.30%	85.59%	↑
19–50 years	58.73%	62.36%	73.87%	↑
51–64 years	52.84%	49.48%	71.32%	↓
Total	84.68%	84.91%	83.88%	↑

Table 1a. HEDIS 2014 State to National Rates: Effectiveness of Care Measures

Measure	Weighted State Rate		HEDIS 2013 Medicaid National Avg.	Change 2013 to 2014
	2013	2014		
Medication Management for People With Asthma (MMA):				
Medication Compliance 50%: 5-11 years*	54.30%	53.87%		↓
12–18 years*	51.55%	51.45%		↓
19–50 years*	48.18%	52.81%		↑
51–64 years*	59.02%	59.49%		↑
Total*	52.85%	53.06%		↑
Medication Compliance 75%: 5-11 years	30.45%	29.90%	25.35%	↓
12–18 years	29.09%	27.06%	25.11%	↓
19–50 years	27.46%	31.39%	34.14%	↑
51–64 years	36.10%	35.86%	50.16%	↓
Total	29.79%	29.29%	28.70%	↓
Asthma Medical Ratio (AMR): †				
5–11 years	74.99%	82.62%		↑
12–18 years	64.33%	70.68%		↑
19–50 years	30.97%	39.81%		↑
51–64 years	32.81%	33.05%		↑
Total	63.66%	69.93%		↑
Cardiovascular Conditions				
Cholesterol Management for Patients With Cardiovascular Conditions (CMC):				
LDL-C Screening	83.10%	80.29%	81.62%	↓
LDL-C Control (<100 mg/dL)	38.65%	40.16%	41.37%	↑
Controlling High Blood Pressure (CBP)	55.82%	56.98%	56.36%	↑
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	74.54%	83.10%	82.05%	↑
Diabetes				
Comprehensive Diabetes Care (CDC):				
HbA1c Testing	80.32%	79.76%	82.98%	↓
HbA1c Control (<7.0%)	38.54%	38.43%	34.03%	↓
HbA1c Control (<8.0%)	48.58%	49.22%	46.60%	↑
Retinal Eye Exam Performed	37.66%	38.69%	53.17%	↑
LDL-C Screening	76.44%	75.56%	75.56%	↓
LDL-C Control (<100 mg/dL)	31.36%	32.40%	33.93%	↑
Medical Attention for Nephropathy	76.22%	76.19%	78.38%	↓
Blood Pressure Control (<140/80 mm Hg)	36.97%	37.99%	37.91%	↑
Blood Pressure Control (<140/90 mm Hg)	59.03%	60.25%	59.02%	↑
Musculoskeletal Conditions				
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)	58.91%	63.93%	69.96%	↑
Use of Imaging Studies for Low Back Pain (LBP)	66.91%	67.71%	75.55%	↑
Behavioral Health				
Antidepressant Medication Management (AMM):				
Effective Acute Phase Treatment	49.10%	46.48%	52.79%	↓
Effective Continuation Phase Treatment	30.78%	30.31%	36.65%	↓

Table 1a. HEDIS 2014 State to National Rates: Effectiveness of Care Measures

Measure	Weighted State Rate		HEDIS 2013 Medicaid National Avg.	Change 2013 to 2014
	2013	2014		
Follow-Up Care for Children Prescribed ADHD Medication (ADD):				
Initiation Phase	46.02%	45.82%	39.05%	↓
Continuation and Maintenance Phase	57.54%	54.98%	45.29%	↓
Follow-Up After Hospitalization for Mental Illness (FUH):				
7-day follow-up	48.03%	54.70%	43.83%	↑
30-day follow-up	68.80%	71.85%	63.75%	↑
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD) †	80.40%	79.85%		↓
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD) †	67.69%	67.65%		↓
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC) †	80.00%	78.69%		↓
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA) †	61.91%	62.93%		↑
Medication Management				
Annual Monitoring for Patients on Persistent Medications (MPM):				
ACE Inhibitors or ARBs	90.61%	89.98%	86.30%	↓
Digoxin	92.31%	94.06%	90.15%	↑
Diuretics	91.00%	90.59%	85.96%	↓
Anticonvulsants	72.89%	72.75%	65.70%	↓
Total	88.86%	88.48%	84.47%	↓
Measures Collected Through CAHPS Health Plan Survey				
Medical Assistance With Smoking and Tobacco Use Cessation (MSC): † †				
Advising Smokers and Tobacco Users to Quit	74.87%	76.23%	75.56%	↑
Discussing Cessation Medications	42.11%	44.12%	45.81%	↑
Discussing Cessation Strategies	36.87%	37.01%	41.14%	↑

* Measure deemed first-year status again in 2013.

** The age group for this measure changed; NCOA has yet to determine if results are trendable with the previous year.

*** The measure's specification changed and results cannot be trended with previous years.

† Benchmarks are not reported by Quality Compass for 2013 first year measures.

†† The denominator was not available; hence, the average is not weighted.

For the Effectiveness of Care Measures presented in **Table 1b**, a lower rate (particularly one below the national average) is an indication of better performance (↑). A decrease in rates from the prior year also indicates improvement.

Table 1b. HEDIS 2014 State to National Rates: Effectiveness of Care Measures Where Lower Rates Indicate Better Performance

Measure	Weighted State Rate		HEDIS 2013 Medicaid National Avg.	Change 2013 to 2014
	2013	2014		
Prevention and Screening				
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS) ‡		11.91%		
Diabetes				
Comprehensive Diabetes Care (CDC): HbA1c Poor Control (>9.0%)	43.22%	42.22%	44.63%	↑

‡Measure is first-year in 2014.

Table 2 summarizes results for the Access/Availability Domain of Care.

Table 2. HEDIS 2014 State to National Rates: Access/Availability of Care Measures				
Measure	Weighted State Rate		HEDIS 2013 Medicaid National Avg.	Change 2013 to 2014
	2013	2014		
Adults' Access to Preventive/Ambulatory Health Services (AAP):				
20–44 years	80.66%	82.21%	80.37%	↑
45–64 years	87.27%	89.28%	86.54%	↑
Children and Adolescents' Access to Primary Care Practitioners (CAP):				
12–24 months	96.94%	97.27%	95.97%	↑
25 months–6 years	90.51%	90.26%	88.32%	↓
7–11 years	93.47%	93.96%	89.88%	↑
12–19 years	90.38%	90.91%	88.38%	↑
Initiation and Engagement of Alcohol and Other Drug (AOD) Dependence Treatment (IET):				
Initiation of AOD Treatment: 13–17 years	48.57%	51.05%	39.14%	↑
≥18 years	36.78%	35.69%	39.38%	↓
Total	37.62%	36.65%	39.35%	↓
Engagement of AOD Treatment: 13–17 years	27.90%	29.92%	16.53%	↑
≥18 years	9.82%	9.62%	10.18%	↓
Total	11.10%	10.88%	10.84%	↓
Prenatal and Postpartum Care (PPC):				
Timeliness of Prenatal Care	79.51%	80.70%	82.93%	↑
Postpartum Care	59.90%	58.77%	63.05%	↓
Call Answer Timeliness (CAT)	89.18%	89.86%	83.83%	↑

Table 3 summarizes results for the Utilization measures included in the Utilization and Relative Resource Domain of Care.

Table 3. HEDIS 2014 State to National Rates: Utilization Measures				
Measure	Weighted State Rate		HEDIS 2013 Medicaid National Avg.	Change 2013 to 2014
	2013	2014		
Frequency of Ongoing Prenatal Care (FPC): ≥ 81 %	61.60%	63.08%	60.45%	↑
Well-Child Visits in the First 15 Months of Life (W15): 6 or More Visits	62.32%	65.41%	63.65%	↑
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	71.68%	70.80%	72.00%	↓
Adolescent Well-Care Visits (AWC)	44.53%	50.27%	49.69%	↑

Individual Plan Performance

This section is intended to provide an overview of individual plan performance using appropriate and available comparison data. The results highlight those areas where each MCO is performing in relation to the HEDIS 2013 National Medicaid Means and Percentiles for select MCO-reported HEDIS measures. Qsource uses these data to determine overall TennCare plan performance in a distribution of statistical values that represent the lowest to highest percentiles achieved. For example, the 50th percentile represents the point at which half of the reported rates are below and half of the reported rates are above that value.

Tables 5 (a and b), 6 and 7 display the plan-specific performance rates for each measure selected from the Effectiveness of Care and Access/Availability of Care domains and Utilization measures. Table 4 details the color-coding used in Tables 5a through 7 to indicate the rating of the MCO percentile achieved, and provides additional related comments. HEDIS measure results with an 'NA' indicate that there were fewer than 30 people in the denominator and hence results are not presented. While Medical Assistance With Smoking and Tobacco Use Cessation is an Effectiveness of Care measure, results are reported through the CPA as noted in Tables 1a and 5a.

Color Designation	Percentile MCO Achieved	Additional Comments
	Greater than 75th	No additional comments
	25th to 75th	No additional comments
	Less than 25th	No additional comments
NA	Not Applicable	The measure was not applicable (NA) because there were fewer than 30 people in the denominator.
	No Rating Available	Benchmarking data were not available.

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Prevention and Screening								
Adult BMI Assessment (ABA)	87.70%	71.54%	73.26%	65.43%	78.96%	82.62%	80.73%	72.09%
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)								
BMI Percentile:								
3-11 years (yrs)	71.04%	52.04%	58.87%	49.56%	49.65%	49.28%	58.04%	52.88%
12-17 yrs	57.78%	52.11%	63.57%	58.47%	51.18%	63.91%	61.60%	53.66%
Total	66.90%	52.07%	60.34%	53.53%	50.12%	54.01%	59.12%	52.31%
Counseling for Nutrition:								
3-11 yrs	69.70%	57.62%	59.22%	56.14%	64.44%	65.47%	70.28%	60.19%
12-17 yrs	45.19%	45.77%	61.24%	51.37%	58.27%	59.40%	59.20%	55.29%
Total	62.04%	53.53%	59.85%	54.01%	62.53%	63.50%	66.91%	59.11%

Table 5a. HEDIS 2014 Plan-Specific Rates: Effectiveness of Care Measures

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Counseling for Physical Activity: 3-11 yrs	57.91%	44.61%	43.97%	38.16%	55.99%	60.79%	60.14%	43.51%
12-17 yrs	42.22%	41.55%	54.26%	43.17%	60.63%	64.66%	61.60%	50.00%
Total	53.01%	43.55%	47.20%	40.39%	57.42%	62.04%	60.58%	46.23%
Childhood Immunization Status (CIS):								
DTaP/DT	81.94%	84.18%	74.45%	79.81%	80.05%	78.59%	74.21%	81.51%
IPV	93.98%	95.38%	91.97%	93.43%	94.89%	92.70%	89.29%	92.70%
MMR	91.44%	94.89%	89.29%	92.70%	92.70%	89.78%	88.08%	92.21%
HiB	93.52%	94.65%	91.24%	93.67%	93.92%	92.94%	89.05%	93.16%
HepB	93.75%	94.89%	92.46%	91.73%	95.62%	92.94%	89.54%	91.39%
VZV	93.06%	93.67%	88.56%	92.70%	93.19%	91.48%	88.56%	91.59%
PCV	85.19%	86.13%	76.89%	81.51%	80.29%	81.75%	75.67%	81.13%
HepA	91.44%	91.73%	88.56%	91.48%	91.48%	88.08%	88.08%	80.79%
RV	75.69%	74.70%	64.72%	50.36%	67.40%	73.48%	64.96%	66.67%
Flu	55.56%	49.39%	24.82%	54.01%	44.53%	53.77%	30.66%	50.00%
Combination 2	78.47%	81.51%	71.53%	76.89%	77.13%	72.99%	69.10%	76.89%
Combination 3	75.46%	79.08%	67.88%	73.72%	72.51%	71.29%	65.45%	72.88%
Combination 4	74.77%	76.89%	67.88%	72.51%	71.29%	70.32%	64.96%	63.02%
Combination 5	64.12%	63.02%	52.07%	45.01%	55.23%	61.80%	51.09%	55.41%
Combination 6	47.69%	43.55%	22.63%	44.28%	39.90%	46.72%	26.52%	41.89%
Combination 7	63.66%	61.07%	52.07%	44.28%	54.50%	60.83%	50.61%	50.33%
Combination 8	47.69%	43.31%	22.63%	43.55%	39.42%	46.47%	26.52%	38.66%
Combination 9	42.36%	37.47%	20.44%	27.74%	32.60%	42.09%	22.87%	34.38%
Combination 10	42.36%	37.23%	20.44%	27.25%	32.36%	41.85%	22.87%	31.39%
Immunization for Adolescents (IMA):								
Meningococcal	69.87%	65.50%	63.03%	61.27%	66.58%	72.78%	61.22%	71.07%
Tdap/Td	89.09%	82.16%	85.11%	77.72%	83.42%	85.28%	78.29%	85.19%
Combination 1	69.61%	63.74%	61.70%	60.76%	66.08%	72.78%	60.24%	68.59%
Human Papillomavirus Vaccine for								
Female Adolescents (HPV)*	16.47%	23.84%	16.06%	16.06%	19.95%	16.79%	10.95%	
Lead Screening in Children (LSC)	73.84%	75.18%	72.51%	76.89%	70.80%	75.18%	71.78%	72.26%
Breast Cancer Screening (BCS)**	49.07%	58.29%	55.33%	67.61%	52.43%	49.61%	46.37%	51.32%
Cervical Cancer Screening (CCS)***	68.24%	67.15%	70.32%	58.69%	60.64%	65.98%	64.84%	
Chlamydia Screening in Women (CHL):								
16-20 years old	54.27%	42.54%	58.92%	49.96%	46.45%	53.72%	55.02%	53.80%
21-24 years old	63.19%	56.18%	69.14%	35.29%	57.78%	63.17%	63.99%	64.58%
Total	58.09%	47.93%	63.49%	49.74%	50.78%	57.77%	59.17%	57.30%

Table 5a. HEDIS 2014 Plan-Specific Rates: Effectiveness of Care Measures

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Respiratory Conditions								
Appropriate Testing for Children with Pharyngitis (CWP)	82.22%	75.83%	77.06%	74.20%	72.22%	82.84%	75.11%	70.30%
Appropriate Treatment for Children with Upper Respiratory Infection (URI)	80.28%	71.14%	69.55%	73.11%	70.34%	81.14%	73.30%	85.86%
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)	24.62%	22.50%	25.76%	22.45%	20.58%	26.95%	28.48%	22.18%
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	31.83%	35.13%	41.94%	NA	29.90%	32.32%	39.92%	31.31%
Pharmacotherapy Management of COPD Exacerbation (PCE):								
Systemic Corticosteroid	47.78%	44.76%	48.27%	NA	57.33%	50.82%	52.06%	67.00%
Bronchodilator	74.72%	76.41%	79.22%	NA	77.73%	73.58%	78.00%	83.24%
Use of Appropriate Medications for People with Asthma (ASM):								
5-11 years old	92.36%	95.81%	91.39%	95.36%	93.77%	91.97%	90.03%	90.31%
12-18 years old	86.57%	89.51%	88.31%	88.74%	89.58%	85.24%	89.14%	85.88%
19-50 years old	60.51%	60.88%	66.34%	81.18%	62.95%	58.62%	61.23%	74.76%
51-64 years old	44.30%	45.26%	48.89%	NA	54.79%	51.14%	54.72%	72.50%
Total	82.84%	87.18%	84.51%	91.37%	85.34%	81.33%	82.76%	84.70%
Medication Management for People With Asthma (MMA)								
Medication Compliance 50%: 5-11 years*								
5-11 years*	54.23%	57.78%	43.93%	61.57%	58.13%	55.43%	47.30%	
12-18 years*	50.19%	54.62%	42.57%	61.35%	56.29%	51.58%	41.38%	
19-50 years*	59.54%	55.91%	44.02%	59.42%	62.82%	52.60%	39.74%	
51-64 years*	65.71%	53.49%	63.64%	NA	77.50%	51.11%	NA	
Total*	54.06%	56.50%	43.88%	61.37%	58.59%	53.77%	44.29%	
Medication Compliance 75%: 5-11 years								
5-11 years	28.15%	32.91%	19.89%	38.96%	36.90%	31.37%	23.77%	24.40%
12-18 years	26.63%	30.60%	17.57%	39.81%	29.25%	27.00%	16.78%	23.92%
19-50 years	33.59%	34.29%	24.49%	47.83%	38.27%	32.87%	19.65%	33.15%
51-64 years	40.00%	37.21%	36.36%	NA	45.00%	31.11%	NA	48.91%
Total	28.72%	32.37%	20.13%	39.83%	34.78%	30.33%	21.10%	27.62%
Asthma Medical Ratio (AMR): †								
5-11 years	80.09%	86.42%	78.07%	85.83%	85.26%	81.59%	80.44%	
12-18 years	66.56%	73.26%	70.28%	74.96%	70.70%	67.73%	68.93%	
19-50 years	39.24%	40.74%	39.29%	63.10%	43.55%	37.34%	33.15%	
51-64 years	29.11%	35.79%	28.89%	NA	39.73%	32.95%	30.77%	
Total	66.67%	73.97%	67.04%	79.35%	71.30%	66.39%	66.10%	
Cardiovascular Conditions								
Cholesterol Management for Patients with Cardiovascular Conditions (CMC):								
LDL-C Screening	79.58%	78.35%	77.86%	NA	80.78%	80.78%	84.91%	82.42%
LDL-C Control (<100 mg/dL)	39.21%	36.50%	35.77%	NA	43.55%	41.36%	43.07%	41.82%

Table 5a. HEDIS 2014 Plan-Specific Rates: Effectiveness of Care Measures

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Controlling High Blood Pressure (CBP)	57.78%	59.35%	52.68%	68.73%	61.52%	53.83%	55.01%	56.20%
Persistence of Beta-Blocker Treatment after a Heart Attack (PBH)								
	76.60%	88.89%	75.93%	NA	86.36%	86.36%	80.00%	82.98%
Diabetes								
Comprehensive Diabetes Care (CDC):								
HbA1c Testing	81.20%	77.55%	76.28%	79.26%	81.03%	83.60%	78.80%	83.16%
HbA1c Control (<7.0%)	33.10%	41.44%	35.22%	45.22%	43.50%	38.24%	33.49%	34.76%
HbA1c Control (<8.0%)	44.49%	51.46%	42.70%	54.18%	52.31%	52.80%	47.73%	48.57%
Retinal Eye Exam Performed	40.97%	39.05%	39.05%	66.22%	38.46%	36.93%	36.67%	54.31%
LDL-C Screening	77.09%	77.19%	68.25%	68.90%	78.46%	77.87%	72.93%	76.28%
LDL-C Control (<100 mg/dL)	29.22%	34.49%	26.46%	37.46%	36.03%	34.13%	30.67%	34.89%
Medical Attention for Nephropathy	78.12%	75.36%	72.63%	57.19%	79.36%	74.93%	77.47%	79.23%
Blood Pressure Control (<140/80 mm Hg)	40.09%	38.32%	33.76%	51.84%	38.59%	41.07%	34.67%	38.89%
Blood Pressure Control (<140/90 mm Hg)	61.23%	61.13%	57.30%	73.58%	61.79%	62.53%	55.47%	61.03%
Musculoskeletal Conditions								
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)								
	60.27%	64.41%	61.97%	NA	72.25%	58.98%	60.11%	69.46%
Use of Imaging Studies for Low Back Pain (LBP)								
	69.39%	65.23%	69.86%	75.00%	64.24%	68.22%	69.34%	75.14%
Behavioral Health								
Antidepressant Medication Management (AMM) Treatment:								
Effective Acute Phase	49.01%	45.96%	43.23%	48.81%	49.78%	44.57%	44.23%	51.47%
Effective Continuation Phase	34.92%	28.51%	27.30%	30.95%	33.52%	27.40%	29.09%	35.26%
Follow-Up Care for Children Prescribed ADHD Medication (ADD):								
Initiation Phase	60.59%	42.07%	35.61%	34.56%	52.26%	51.23%	42.51%	39.76%
Continuation and Maintenance Phase	69.92%	47.64%	50.70%	38.04%	59.81%	61.65%	54.09%	46.76%
Follow-Up After Hospitalization for Mental Illness (FUH):								
7-day follow-up	58.19%	46.90%	63.21%	50.32%	48.37%	51.67%	65.92%	44.66%
30-day follow-up	76.07%	68.27%	75.50%	67.22%	70.31%	69.38%	76.29%	65.85%
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD) †								
	82.01%	79.50%	76.89%	77.84%	81.41%	84.12%	74.67%	
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD) †								
	75.76%	62.09%	58.05%	71.43%	67.30%	75.86%	67.35%	
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC) †								
	87.50%	78.05%	64.58%	NA	82.86%	83.78%	82.22%	
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA) †								
	61.81%	68.48%	59.21%	71.09%	61.62%	63.80%	61.72%	

Table 5a. HEDIS 2014 Plan-Specific Rates: Effectiveness of Care Measures

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Medication Management								
Annual Monitoring for Patients on Persistent Medications (MPM):								
ACE Inhibitors or ARBs	88.40%	85.51%	91.26%	89.01%	92.63%	90.31%	92.10%	86.98%
Digoxin	91.00%	93.10%	95.51%	NA	93.05%	97.41%	94.81%	90.91%
Diuretics	88.75%	86.95%	89.80%	96.43%	93.39%	91.87%	91.71%	86.68%
Anticonvulsants	72.52%	72.04%	69.78%	77.98%	75.55%	73.25%	69.21%	65.98%
Total	87.28%	84.63%	88.59%	83.41%	91.35%	89.38%	89.55%	85.39%
Measures Collected Through CAHPS Health Plan Survey								
Medical Assistance with Smoking and Tobacco Use Cessation (MSC):								
Advising Smokers and Tobacco Users to Quit	78.38%	80.04%	80.97%	61.32%	78.25%	78.04%	76.60%	76.20%
Discussing Cessation—Medications	41.98%	48.78%	52.59%	37.38%	45.17%	45.41%	37.50%	45.18%
Strategies	36.08%	42.28%	41.57%	32.38%	37.09%	34.94%	34.75%	40.25%

* Measure deemed first-year status again in 2013.

** The age group for this measure changed; NCOA has yet to determine if results are trendable with the previous year.

*** The measure's specification changed and results cannot be trended with previous years.

† Benchmarks are not reported by Quality Compass for 2013 first year measures.

For the Effectiveness of Care Measures presented in **Table 5b**, a lower rate (particularly one below the national 50th percentile) is an indication of better performance. For example, a rate in the 10th percentile is better than a rate in the 90th percentile.

Table 5b. HEDIS 2014 Plan-Specific Rates: Effectiveness of Care Measures Where Lower Rates Indicate Better Performance

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Prevention and Screening								
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS) ‡								
	12.34%	11.84%	12.74%	9.28%	12.70%	12.75%	10.43%	
Diabetes								
Comprehensive Diabetes Care (CDC):								
HbA1c Poor Control (>9.0%)	48.02%	40.15%	47.99%	41.47%	38.97%	38.27%	43.73%	43.02%

‡Measure is first-year in 2014.

Table 6. HEDIS 2014 Plan-Specific Rates: Access/Availability of Care Measures

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Adults' Access to Preventive/Ambulatory Health Services (AAP):								
20-44 year-olds	81.95%	84.29%	82.11%	73.68%	80.97%	86.16%	77.68%	82.39%
45-64 year-olds	87.31%	91.68%	88.41%	79.42%	89.14%	91.92%	86.14%	87.50%

Table 6. HEDIS 2014 Plan-Specific Rates: Access/Availability of Care Measures

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Children and Adolescents' Access to Primary Care Practitioners (CAP):								
12-24 months	97.45%	98.36%	96.84%	97.98%	97.12%	97.34%	96.23%	96.89%
25 months-6 years	90.61%	91.38%	89.14%	93.26%	88.59%	91.44%	89.27%	89.39%
7-11 years	93.88%	94.75%	94.69%	95.13%	91.85%	94.06%	93.68%	90.88%
12-19 years	91.59%	92.17%	91.26%	90.48%	89.08%	91.96%	89.00%	89.58%
Initiation and Engagement of Alcohol and Other Drug (AOD) Dependence Treatment (IET):								
Initiation of Treatment:								
13-17 years	55.70%	46.31%	43.28%	57.24%	43.05%	52.24%	54.26%	40.00%
18 + years	39.71%	31.76%	35.33%	48.31%	37.05%	32.42%	40.03%	39.14%
Total	40.66%	32.46%	35.76%	52.95%	37.29%	33.33%	40.72%	39.16%
Engagement of Treatment:								
13-17 years	39.47%	34.23%	16.42%	35.86%	21.08%	35.07%	14.89%	16.61%
18 + years	13.31%	8.78%	8.72%	16.91%	7.77%	9.93%	9.58%	8.90%
Total	14.86%	9.99%	9.14%	26.77%	8.31%	11.09%	9.83%	10.19%
Prenatal and Postpartum Care (PPC):								
Timeliness of Prenatal Care	87.96%	89.17%	70.24%	72.90%	84.90%	80.68%	67.40%	85.88%
Postpartum Care	65.74%	63.61%	51.95%	45.04%	59.90%	57.95%	51.58%	63.99%
Call Answer Timeliness (CAT)	94.53%	89.78%	89.84%	89.95%	88.79%	88.79%	88.79%	86.16%

Table 7. HEDIS 2014 Plan-Specific Rates: Use of Services Measures

Measure	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid 50th Percentile
Frequency of Ongoing Prenatal Care (FPC): ≥ 81 %	70.14%	75.28%	51.71%	41.60%	68.23%	61.37%	47.45%	64.70%
Well-Child Visits in the First 15 Months of Life (W15)								
6 or More Visits	66.20%	69.77%	51.82%	45.50%	73.98%	75.47%	57.32%	65.16%
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)								
	73.84%	71.19%	67.99%	71.65%	69.17%	72.60%	69.25%	72.26%
Adolescent Well-Care Visits (AWC)	54.29%	49.64%	49.88%	49.39%	49.88%	52.80%	45.50%	48.18%

Tables 9 through 11 display the plan-specific performance rates for the CAHPS survey results. Table 8 details the color-coding and the MCO rating scale, as well as any additional comments, used in Tables 9 through 11 to indicate the rating achieved. CAHPS measure results with an 'NA' indicate that there were fewer than 100 valid responses and, hence, results are not presented. For all CAHPS survey results, performance is measured against the calculated statewide average. The 2013 National Medicaid CAHPS Benchmarking data were obtained from Quality Compass.

Color Designation	Rating Scale	Additional Comments
	Greater than one standard deviation above the statewide average	No additional comments
	Within one standard deviation above or below the statewide average	No additional comments
	Greater than one standard deviation below the statewide average	No additional comments
NA	Not Applicable	The survey question was not applicable (NA) because there were less than 100 valid responses.
	No Rating Available	Benchmarking data were not available.

AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	Statewide Average	2013 National Medicaid CAHPS Benchmarking
1. Getting Needed Care (Always + Usually)								
84.11%	81.78%	86.22%	86.45%	83.78%	84.89%	80.41%	83.95%	80.62%
2. Getting Care Quickly (Always + Usually)								
83.75%	87.28%	87.15%	81.54%	80.74%	84.33%	79.86%	83.52%	81.16%
3. How Well Doctors Communicate (Always + Usually)								
87.55%	85.08%	87.82%	89.77%	86.17%	88.40%	89.76%	87.79%	89.27%
4. Customer Service (Always + Usually)								
91.67%	85.66%	NA	NA	90.00%	88.43%	84.34%	88.02%	86.16%
5. Shared Decision Making (A lot/Yes)								
46.96%	42.45%	47.99%	NA	45.12%	50.40%	43.67%	46.10%	
6. Rating of All Health Care (9+10)								
50.92%	44.51%	49.06%	51.72%	51.66%	53.15%	53.70%	50.67%	50.91%
7. Rating of Personal Doctor (9+10)								
60.87%	58.63%	65.15%	64.81%	63.09%	59.18%	61.18%	61.84%	63.14%
8. Rating of Specialist Seen Most Often (9+10)								
68.75%	64.53%	62.99%	71.07%	72.69%	61.57%	64.24%	66.55%	64.38%
9. Rating of Health Plan (9+10)								
58.82%	55.47%	60.14%	56.81%	58.41%	57.66%	59.12%	58.06%	56.29%

In Tables 10 and 11, the National Medicaid CAHPS Benchmarking data for the 5.0H Child Medicaid Survey aggregate results from the surveys for General Population (CPC) and Children With Chronic Conditions (CCC) and are acceptable as benchmarks for both. There are no benchmarking data specific to the supplemental questions in the CCC Survey set.

Table 10. 2014 CAHPS 5.0H Child Medicaid Survey Results (General Population)

AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	Statewide Average	2013 National Medicaid CAHPS Benchmarking
1. Getting Needed Care (Always + Usually)								
87.49%	92.48%	86.79%	91.69%	90.71%	85.42%	87.41%	88.86%	84.38%
2. Getting Care Quickly (Always + Usually)								
90.05%	93.81%	92.64%	93.65%	91.52%	92.31%	90.92%	92.13%	89.18%
3. How Well Doctors Communicate (Always + Usually)								
93.38%	95.57%	95.61%	92.50%	94.67%	93.62%	93.02%	94.05%	92.61%
4. Customer Service (Always + Usually)								
87.40%	NA	NA	91.59%	91.11%	87.98%	89.69%	89.55%	87.61%
5. Shared Decision Making (A lot/Yes)								
54.86%	NA	NA	60.48%	54.50%	52.76%	58.30%	56.18%	
6. Rating of All Health Care (9+10)								
71.74%	67.19%	70.88%	69.60%	70.38%	69.30%	66.83%	69.42%	64.33%
7. Rating of Personal Doctor (9+10)								
79.86%	72.63%	74.37%	77.16%	73.68%	73.75%	70.99%	74.63%	72.92%
8. Rating of Specialist Seen Most Often (9+10)								
NA	NA	NA	77.27%	63.24%	69.90%	NA	70.14%	69.72%
9. Rating of Health Plan (9+10)								
79.13%	75.48%	76.96%	73.65%	68.90%	73.35%	68.75%	73.75%	66.79%

Table 11. 2014 CAHPS 5.0H Child Medicaid Survey Results (Children with Chronic Conditions)

AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	Statewide Average	2013 National Medicaid CAHPS Benchmarking
1. Getting Needed Care (Always + Usually)								
86.32%	90.41%	90.34%	90.78%	89.39%	85.97%	86.33%	88.51%	86.43%
2. Getting Care Quickly (Always + Usually)								
93.59%	95.13%	93.81%	94.78%	94.17%	93.87%	93.07%	94.06%	91.81%
3. How Well Doctors Communicate (Always + Usually)								
93.01%	92.51%	96.90%	93.19%	93.96%	94.48%	91.46%	93.64%	93.06%
4. Customer Service (Always + Usually)								
NA	NA	NA	91.37%	86.71%	87.26%	86.69%	88.01%	88.74%
5. Shared Decision Making (A lot/Yes)								
64.34%	56.84%	60.79%	62.80%	60.90%	59.75%	63.84%	61.32%	
6. Rating of All Health Care (9+10)								
68.17%	64.65%	74.44%	66.15%	64.27%	66.33%	64.47%	66.93%	63.22%
7. Rating of Personal Doctor (9+10)								
75.57%	73.08%	78.38%	74.63%	71.62%	74.02%	69.40%	73.81%	73.35%

**Table 11. 2014 CAHPS 5.0H Child Medicaid Survey Results
(Children with Chronic Conditions)**

AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	Statewide Average	2013 National Medicaid CAHPS Benchmarking
8. Rating of Specialist Seen Most Often (9+10)								
69.35%	69.81%	NA	74.05%	69.96%	67.34%	63.64%	69.03%	69.18%
9. Rating of Health Plan (9+10)								
70.46%	70.14%	76.11%	70.89%	65.66%	70.22%	65.71%	69.88%	64.69%
10. Access to Specialized Services (Always + Usually)								
NA	NA	NA	81.09%	79.87%	82.43%	74.85%	79.56%	76.70%
11. Family-Centered Care: Personal Doctor or Nurse Who Knows Child (Yes)								
91.17%	91.04%	92.33%	91.29%	91.35%	90.40%	89.18%	90.97%	89.26%
12. Coordination of Care With Chronic Conditions (Yes)								
NA	NA	NA	80.49%	78.14%	78.14%	80.54%	79.33%	77.19%
13. Family-Centered Care: Getting Needed Information (Always + Usually)								
89.31%	90.51%	90.99%	90.93%	93.08%	93.08%	89.37%	91.04%	90.26%
14. Access to Prescription Medicines (Always + Usually)								
90.37%	93.83%	93.16%	92.53%	91.86%	92.59%	93.25%	92.51%	90.55%

HEDIS Trending Since 2006— Statewide Weighted Rates

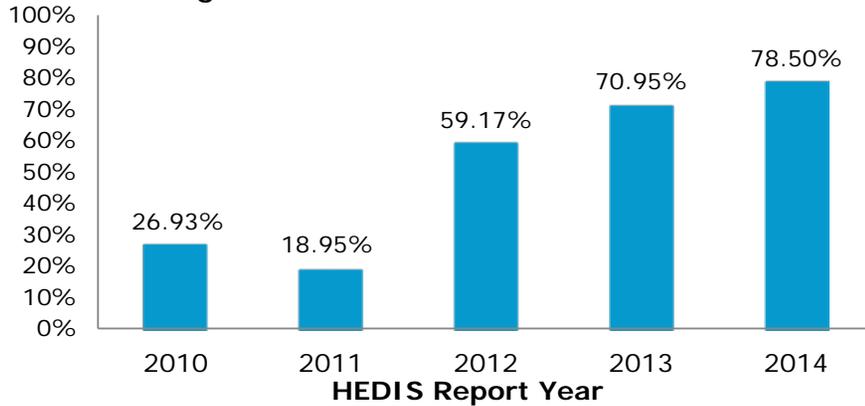
Each year of HEDIS reporting, Qsource has calculated statewide weighted averages for each measure by applying the size of the eligible population for each measure within a health plan to its reported rate. Using this methodology, plan-specific findings can be estimated from an overall TennCare statewide level, with each reporting health plan contributing to the statewide estimate proportionate to its eligible population size.

Trending for first-time measures—those reported for the first time in this year’s HEDIS/CAHPS report—is not possible and, therefore, not presented in this section. Remaining measures are plotted to reflect the statewide performance of TennCare MCOs since reporting began in 2006, except where measures were not reported for a particular year as stated in footnotes. In 2008 new health plans were implemented in the Middle Grand Region that were not required to be NCQA accredited until December 2009. Similarly, new health plans were implemented in 2009 in the West Grand Region that were not required to be accredited until December 2010. The data would not have been reported by these MCOs for 2008 or 2009, respectively; hence, no 2008 or 2009 statewide weighted rates are presented.

Effectiveness of Care Measures—Prevention and Screening

Fig. 1. Adult BMI Assessment (ABA)

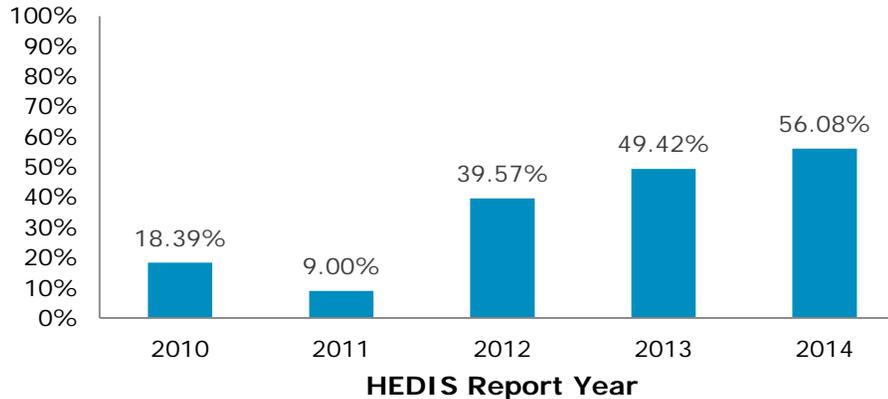
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009.

Fig. 2. Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)—BMI Percentile: 3–11 years

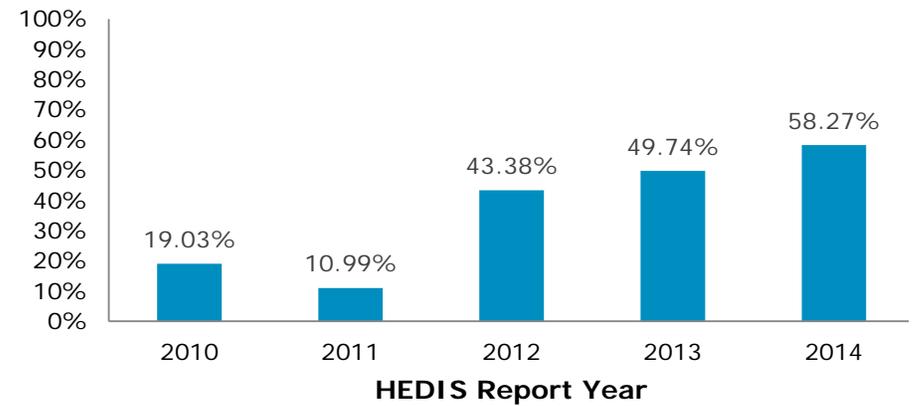
Statewide Weighted Rate



Footnote: First year data collection implemented in 2009.

Fig. 3. WCC—BMI Percentile: 12–17 years

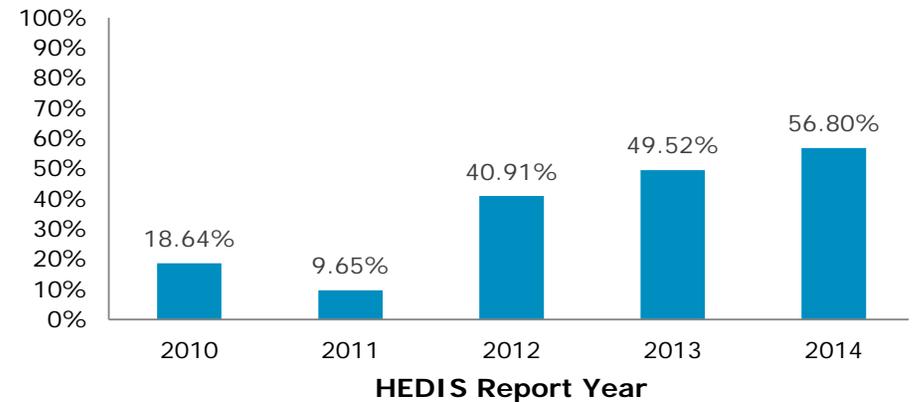
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009.

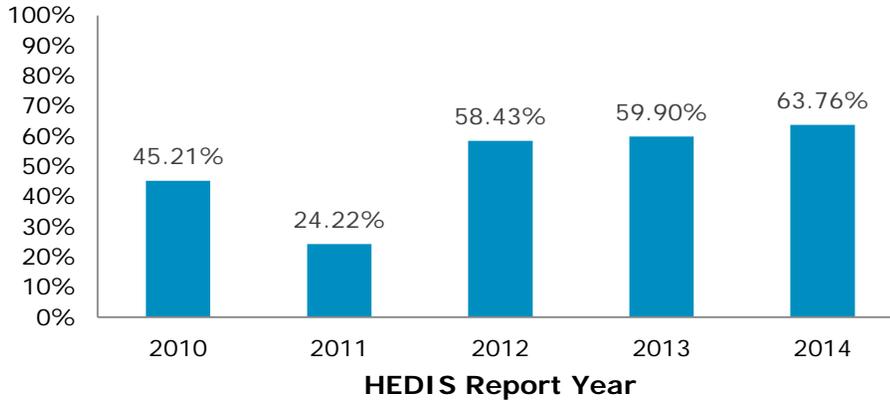
Fig. 4. WCC—BMI Percentile: Total

Statewide Weighted Rates



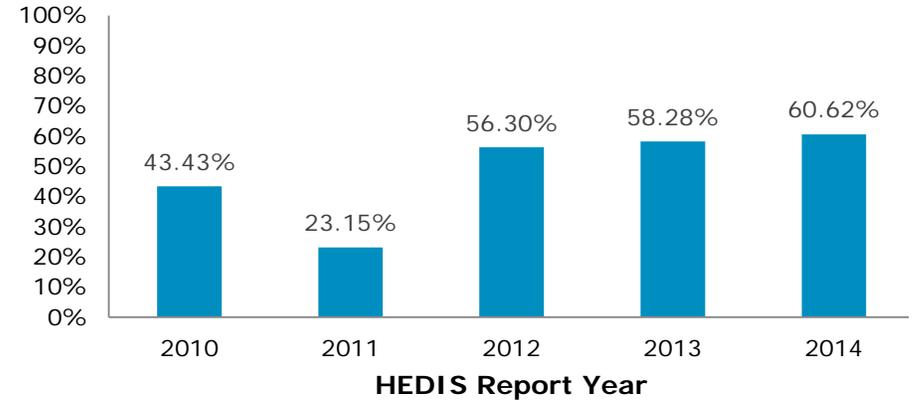
Footnote: First year data collection implemented in 2009.

Fig. 5. WCC—Counseling for Nutrition: 3–11 years
Statewide Weighted Rates



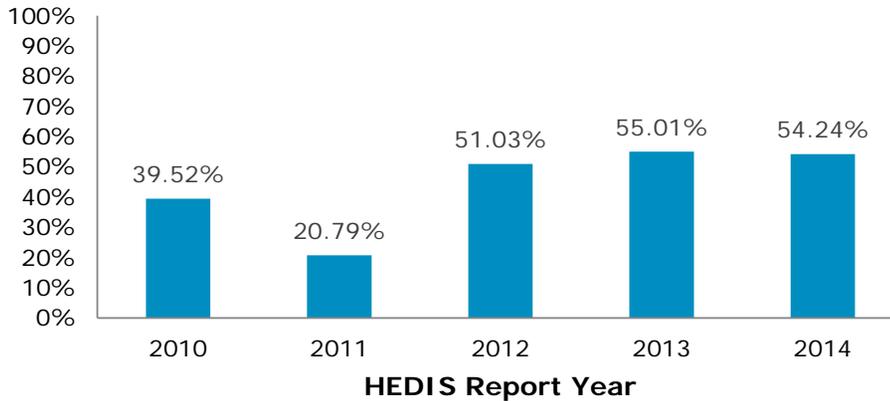
Footnote: First year data collection implemented in 2009.

Fig. 7. WCC—Counseling for Nutrition: Total
Statewide Weighted Rates



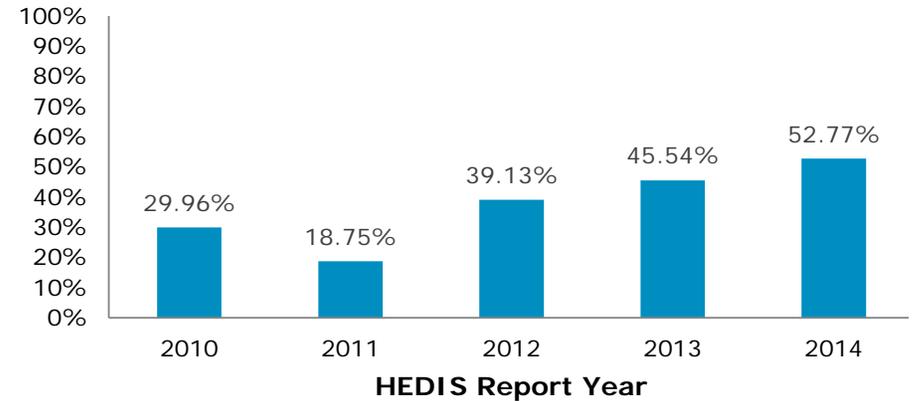
Footnote: First year data collection implemented in 2009.

Fig. 6. WCC—Counseling for Nutrition: 12–17 years
Statewide Weighted Rates



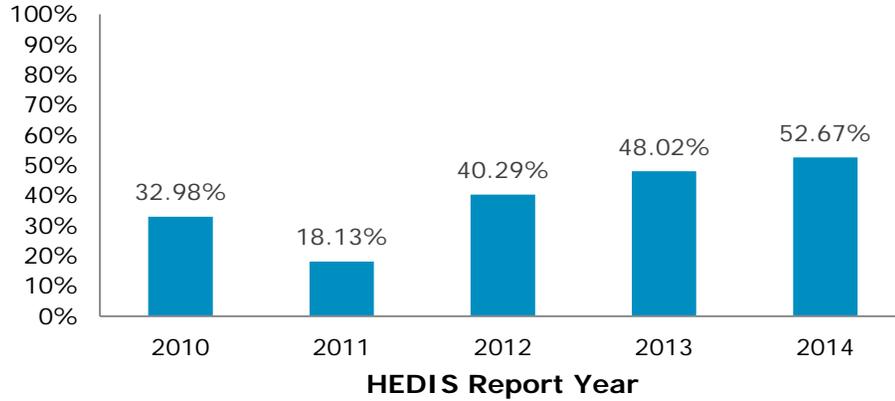
Footnote: First year data collection implemented in 2009.

Fig. 8. WCC—Counseling for Physical Activity: 3–11 years
Statewide Weighted Rates



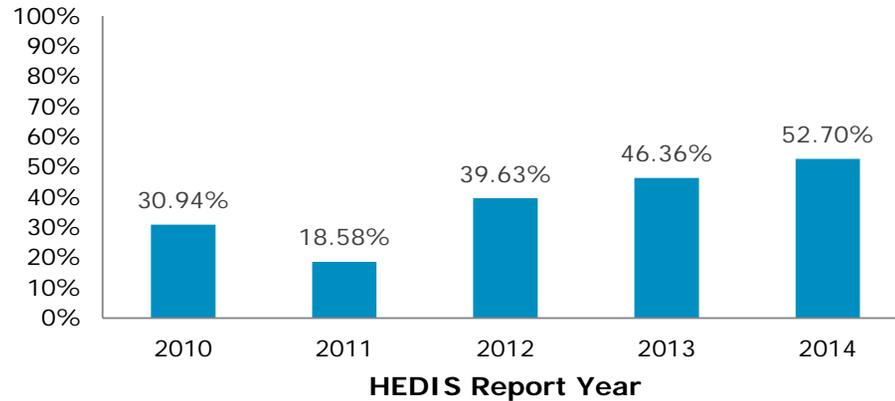
Footnote: First year data collection implemented in 2009.

Fig. 9. WCC—Counseling for Physical Activity: 12–17 years
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009.

Fig. 10. WCC—Counseling for Physical Activity: Total
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009.

Fig. 11. Childhood Immunization Status (CIS)—DTaP
Statewide Weighted Rates

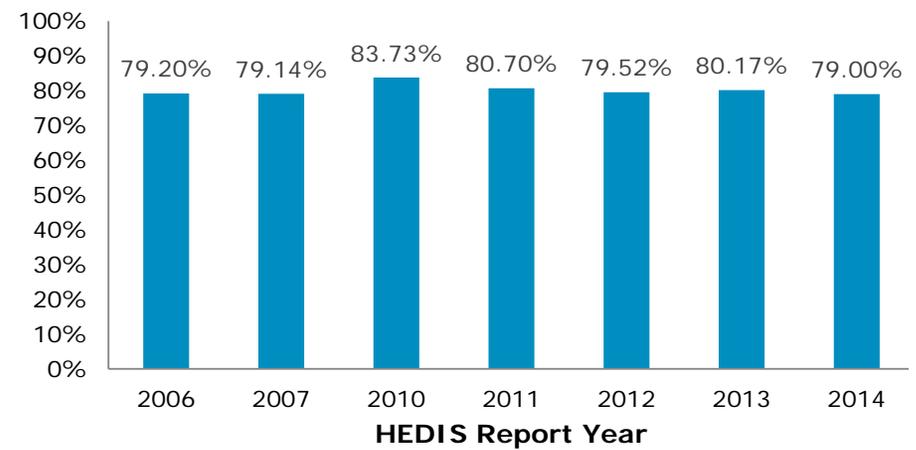


Fig. 12. CIS—IPV
Statewide Weighted Rates

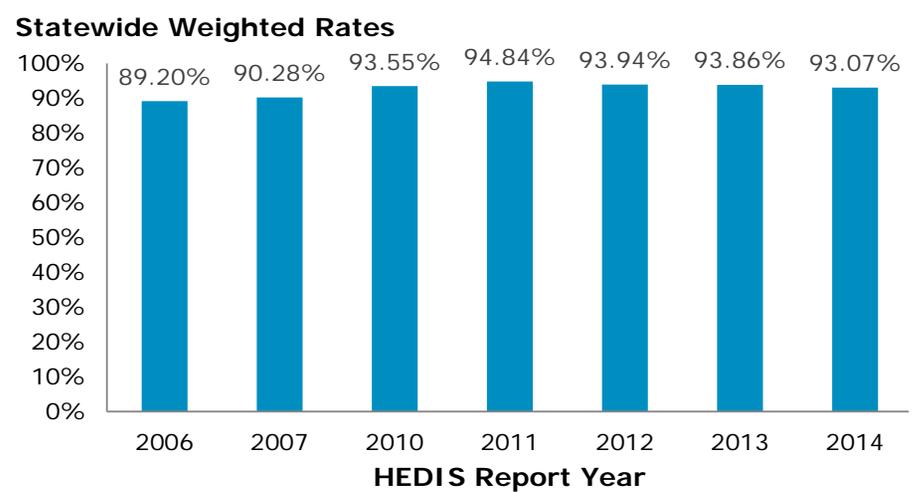


Fig. 13. CIS—MMR

Statewide Weighted Rates

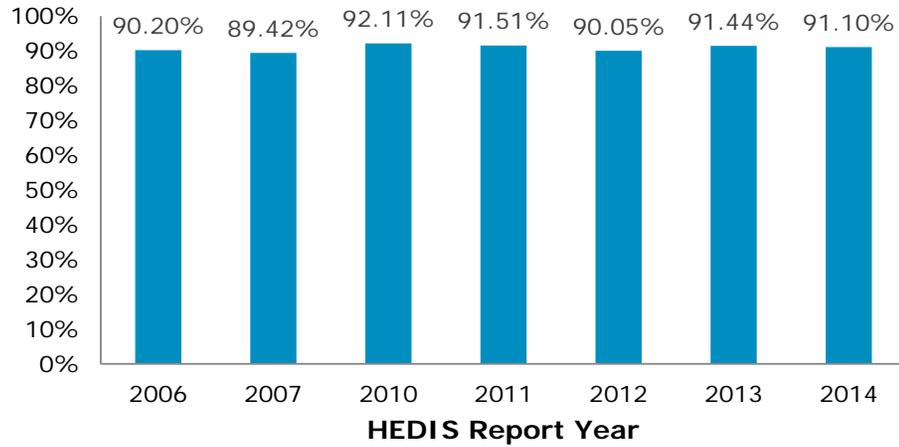


Fig. 15. CIS—HepB

Statewide Weighted Rates

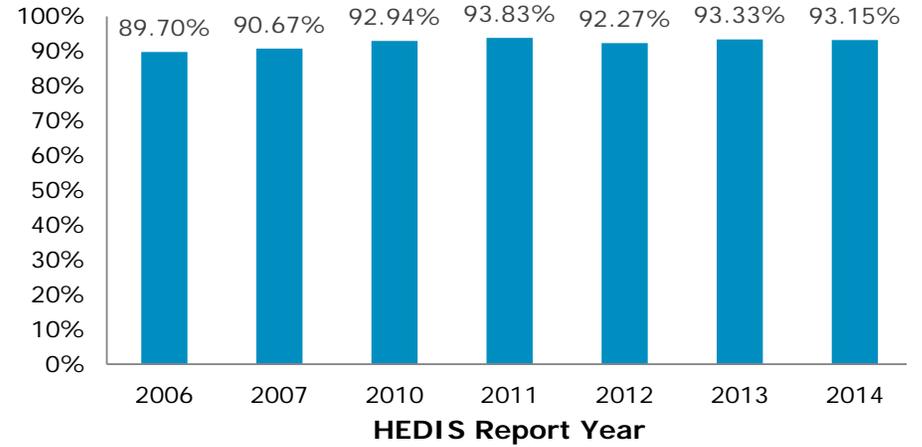


Fig. 14. CIS—HiB

Statewide Weighted Rates

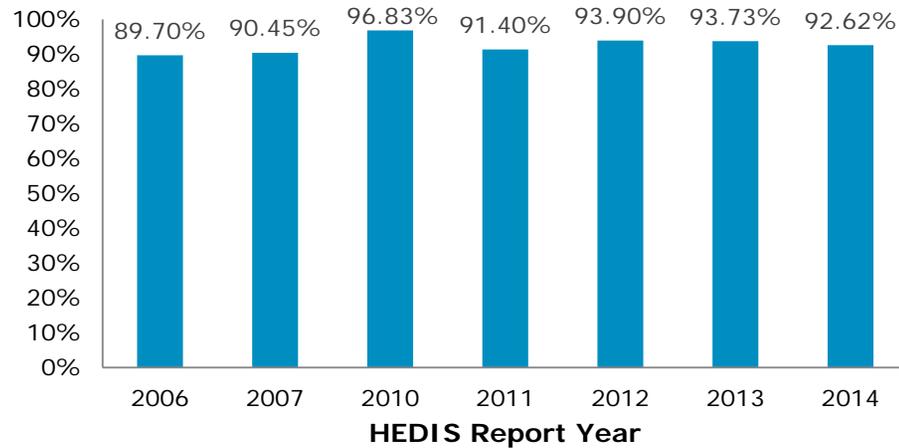


Fig. 16. CIS—VZV

Statewide Weighted Rates

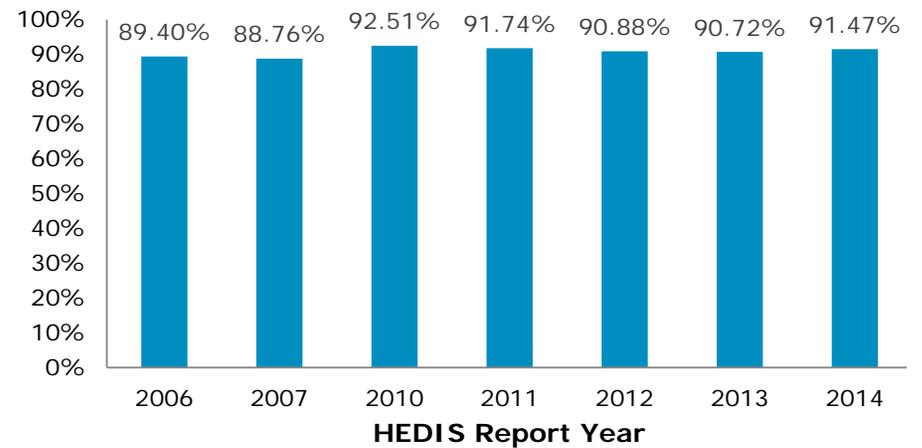


Fig. 17. CIS—PCV

Statewide Weighted Rates

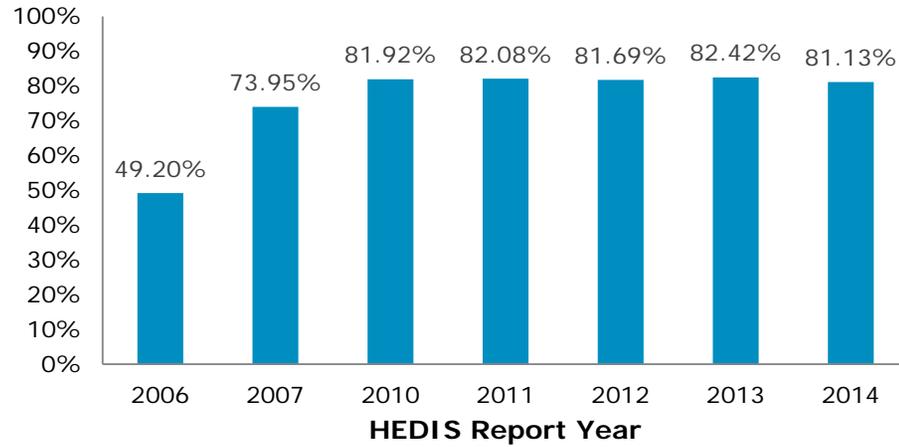
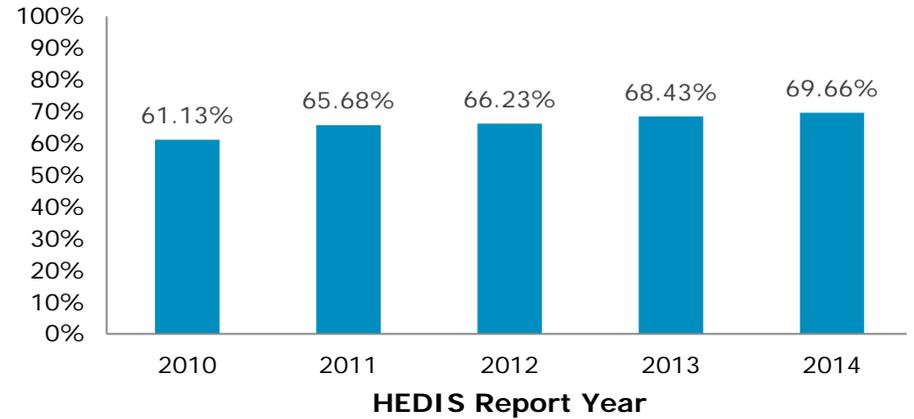


Fig. 19. CIS—RV

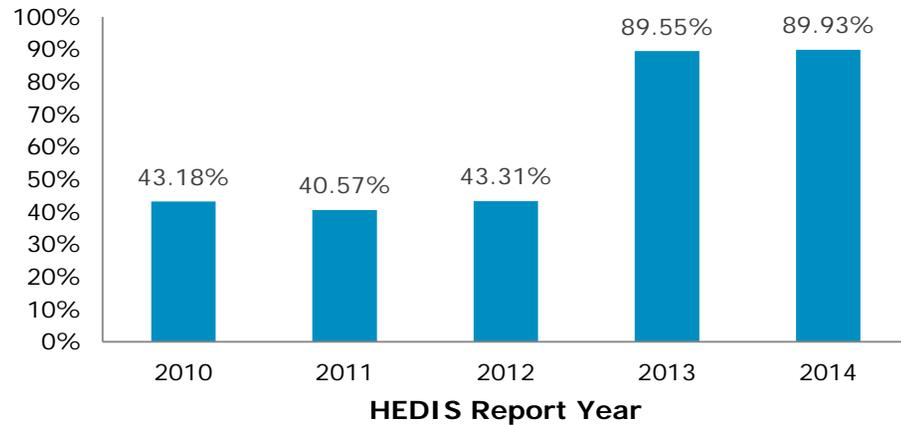
Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 18. CIS—HepA

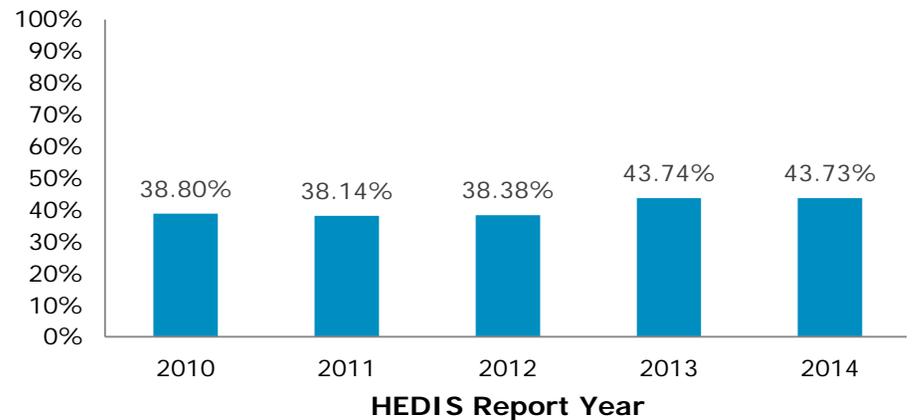
Statewide Weighted Rates



Footnote: First year measurement data collection implemented in 2009. Hep A dose requirements changed in 2013 from two doses to at least one dose; hence, trend with caution.

Fig. 20. CIS—Influenza

Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 21. CIS—Combination 2

Statewide Weighted Rates

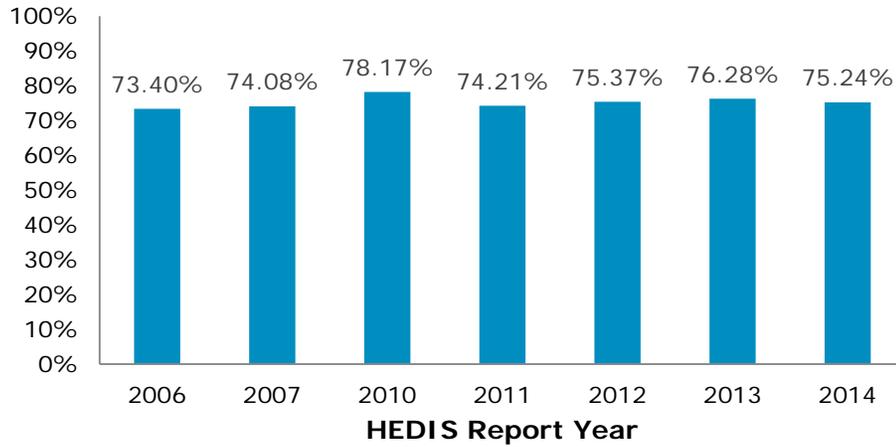


Fig. 22. CIS—Combination 3

Statewide Weighted Rates

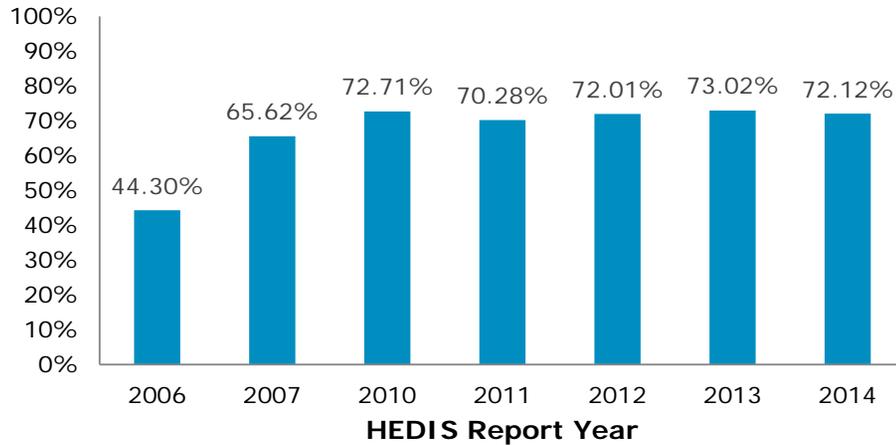
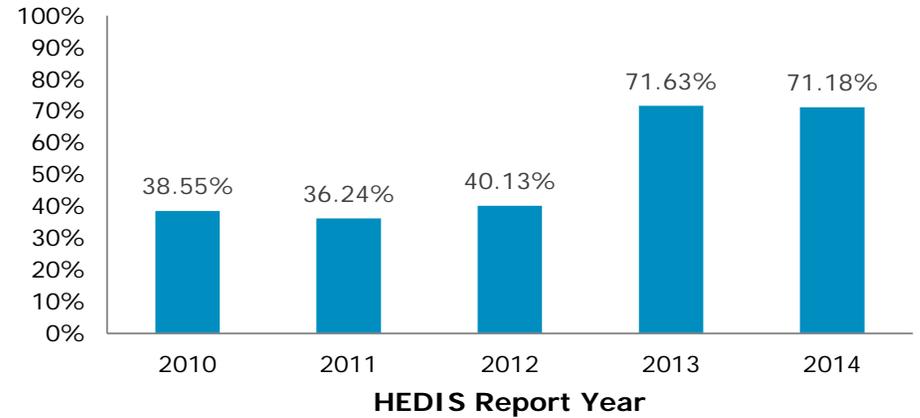


Fig. 23. CIS—Combination 4

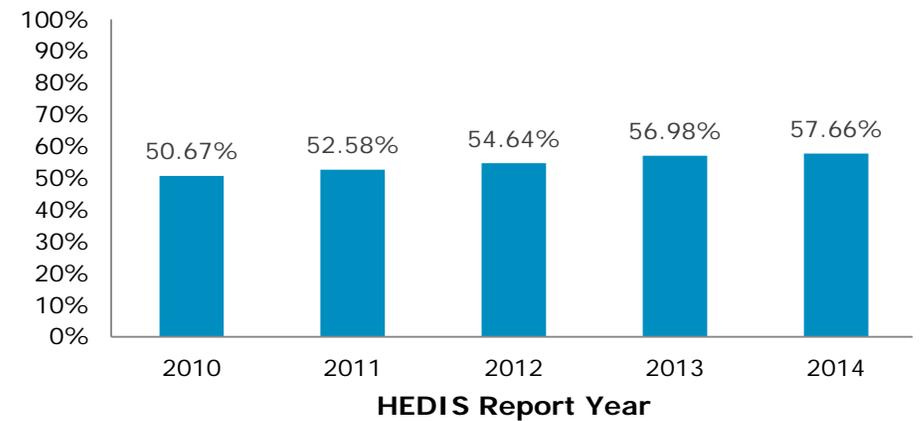
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009. HepA dose requirements changed in 2013 from two doses to at least one dose; hence, trend with caution.

Fig. 24. CIS—Combination 5

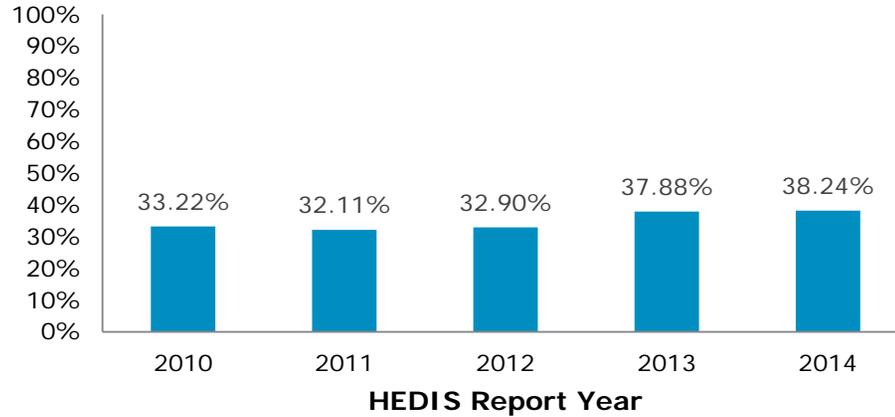
Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 25. CIS—Combination 6

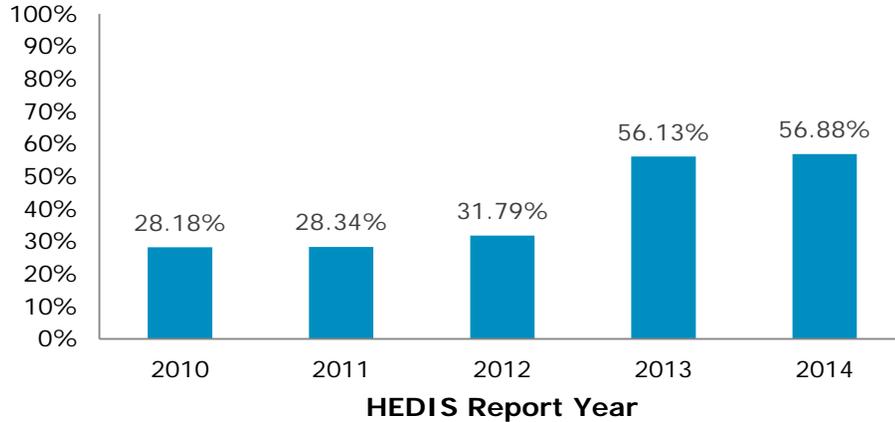
Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 26. CIS—Combination 7

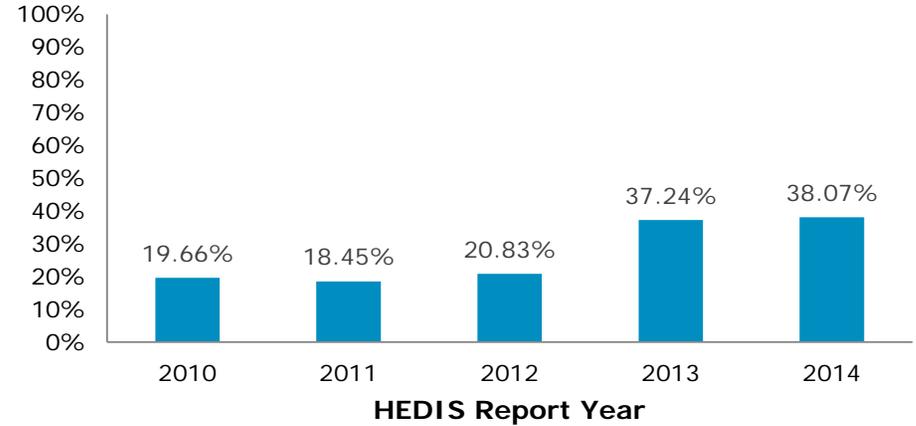
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009. HepA dose requirements changed in 2013 from two doses to at least one dose; hence, trend with caution.

Fig. 27. CIS—Combination 8

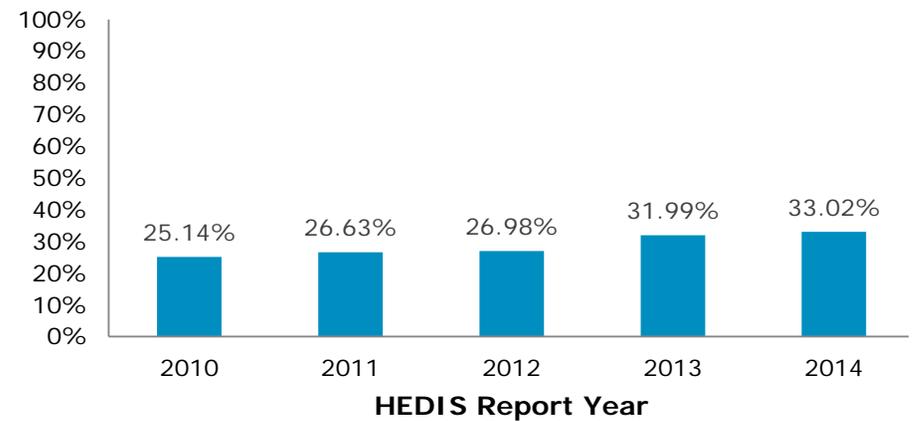
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009. HepA dose requirements changed in 2013 from two doses to at least one dose; hence, trend with caution.

Fig. 28. CIS—Combination 9

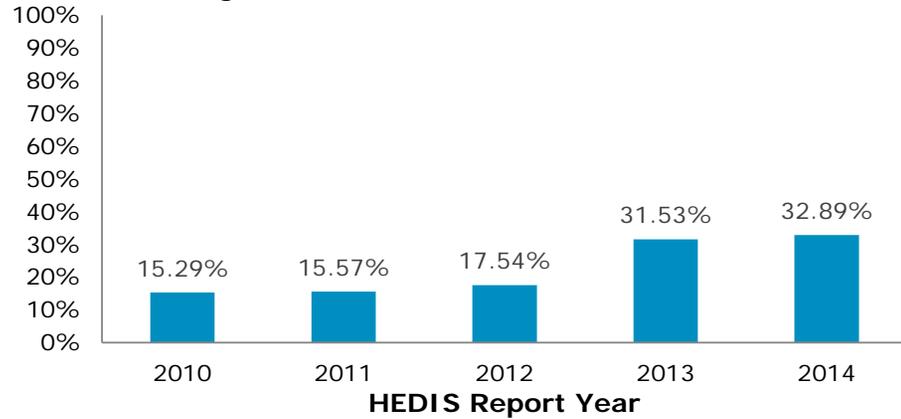
Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 29. CIS—Combination 10

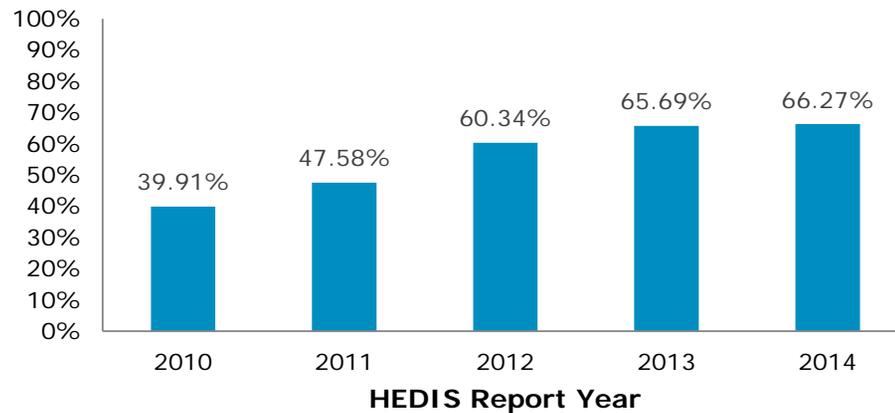
Statewide Weighted Rates



Footnote: First year data collection implemented in 2009. HepA dose requirements changed in 2013 from two doses to at least one dose; hence, trend with caution.

Fig. 30. Immunizations for Adolescents (IMA)—Meningococcal

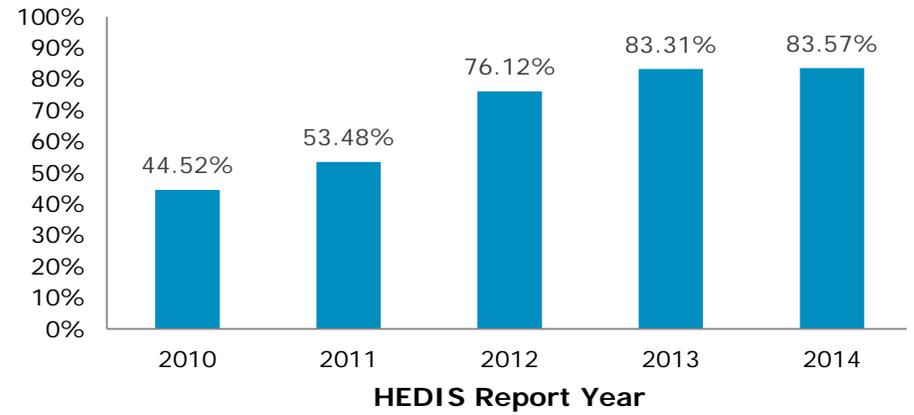
Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 31. IMA—Tdap/Td

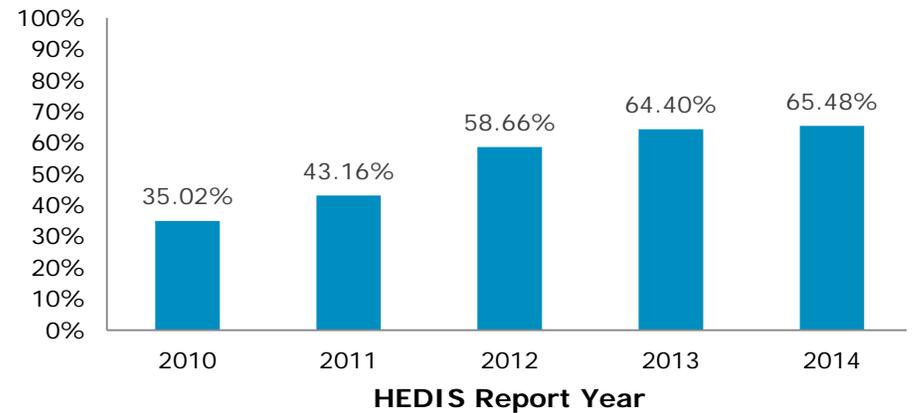
Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 32. IMA—Combination 1

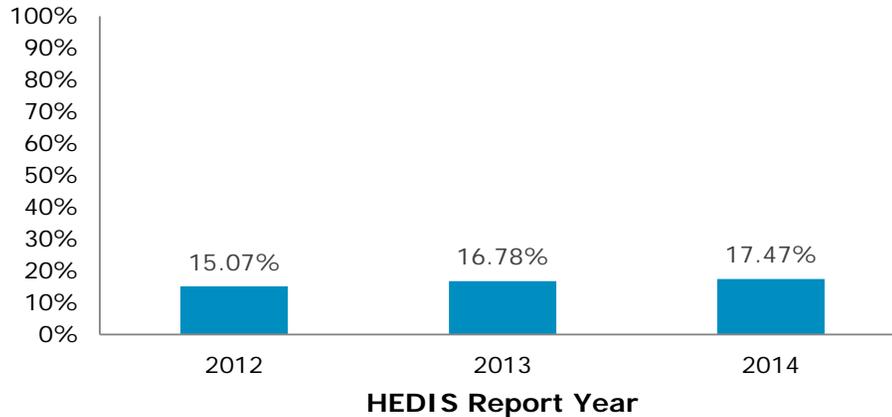
Statewide Weighted Rates



Footnote: First year data collection implemented in 2010.

Fig. 33. Human Papillomavirus Vaccine for Female Adolescents (HPV)

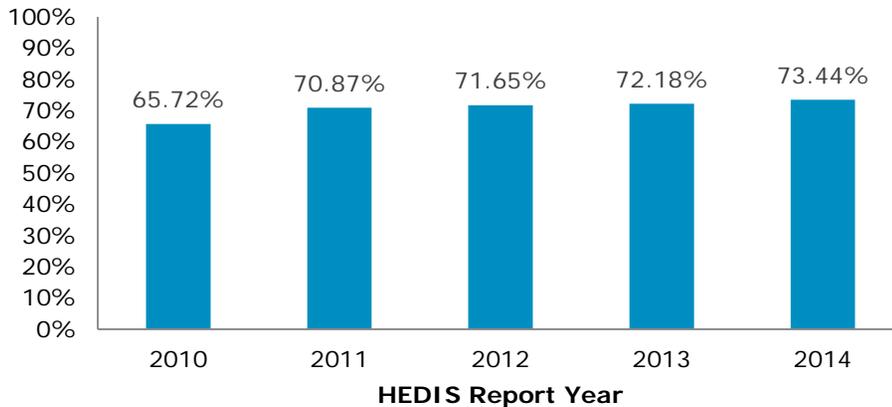
Statewide Weighted Rates



Footnote: First year data collection implemented in 2012.

Fig. 34. Lead Screening in Children (LSC)

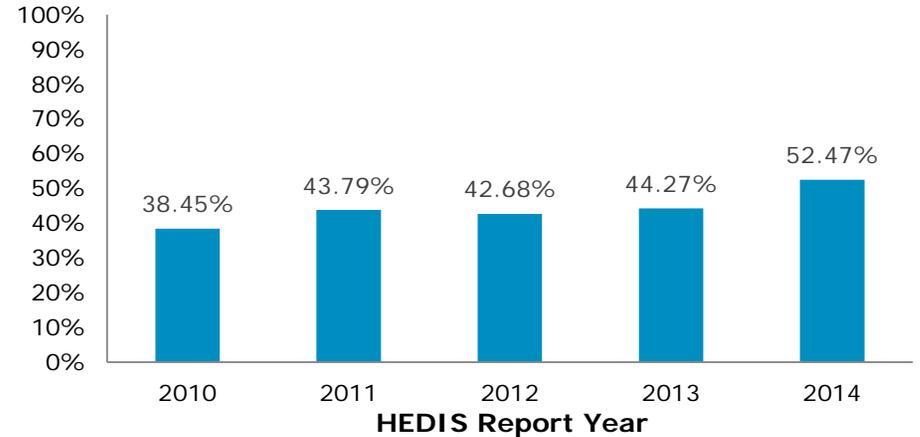
Statewide Weighted Rates



Footnote: First year data collection implemented in 2008.

Fig. 35. Breast Cancer Screening (BCS)

Statewide Weighted Rates



Footnote: Age stratification changed in 2009; as such, no comparative data are available from previous years. Age stratification changed again in 2014; however trending determinations were not finalized by NCQA before HEDIS 2014 reporting.

Fig. 36. Chlamydia Screening in Women (CHL)—16–20 years

Statewide Weighted Rates

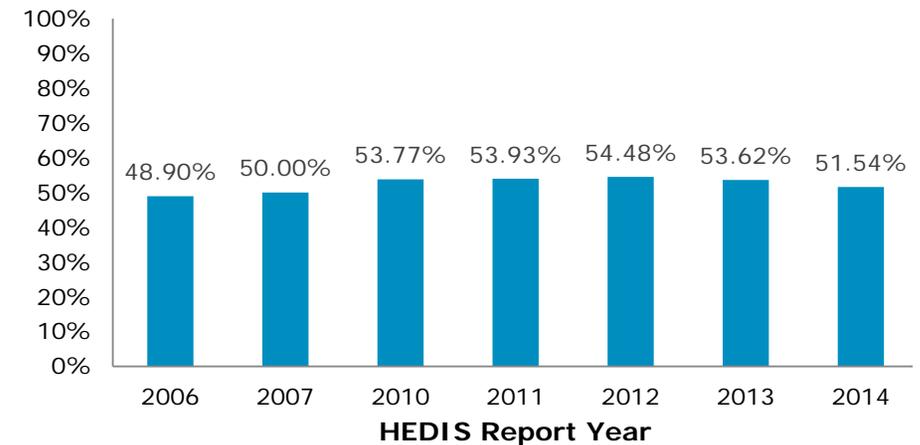
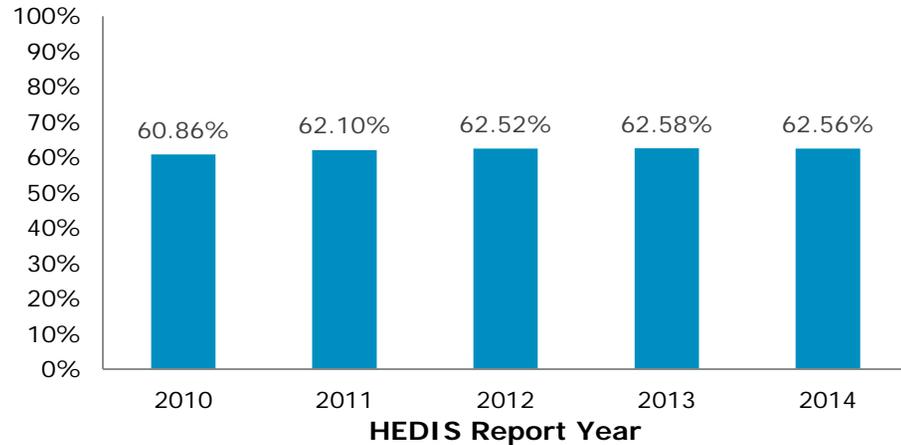


Fig. 37. CHL—21–24 years

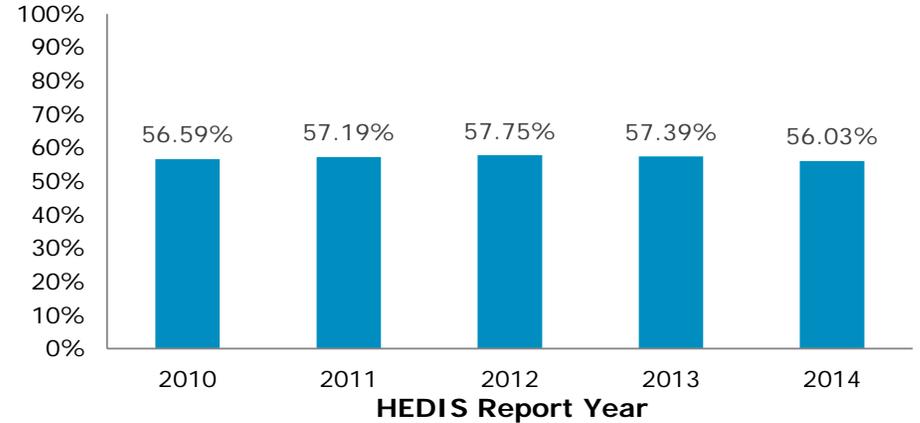
Statewide Weighted Rates



Footnote: Age stratification changed in 2009; as such, no comparative data are available from previous years.

Fig. 38. CHL—Total

Statewide Weighted Rates



Footnote: Age stratification changed in 2009; as such, no comparative data are available from previous years.

Effectiveness of Care Measures—Respiratory Conditions

Fig. 39. Appropriate Testing for Children With Pharyngitis (CWP)

Statewide Weighted Rates

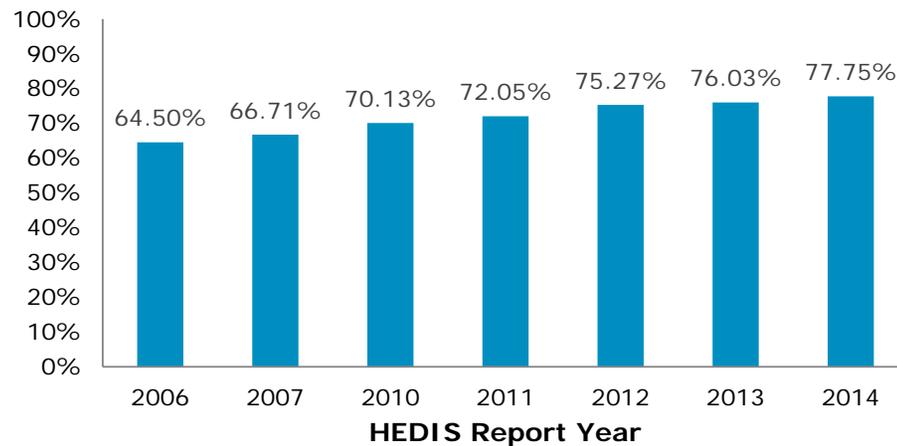


Fig. 40. Appropriate Treatment for Children With Upper Respiratory Infection (URI)

Statewide Weighted Rates

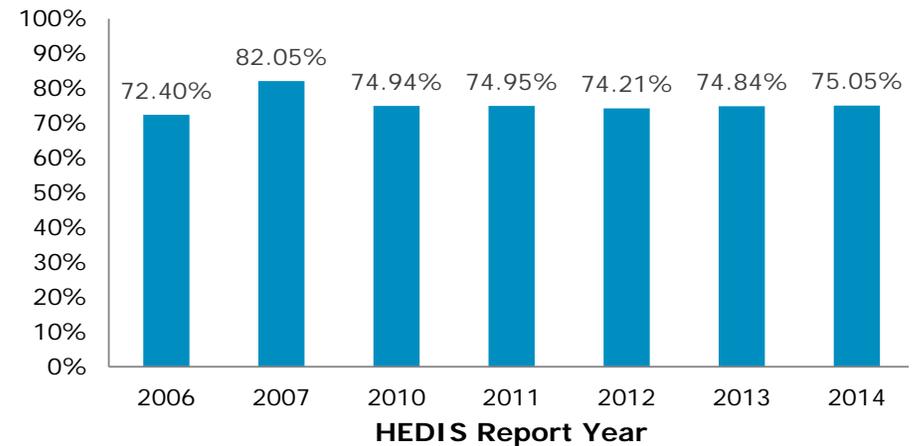
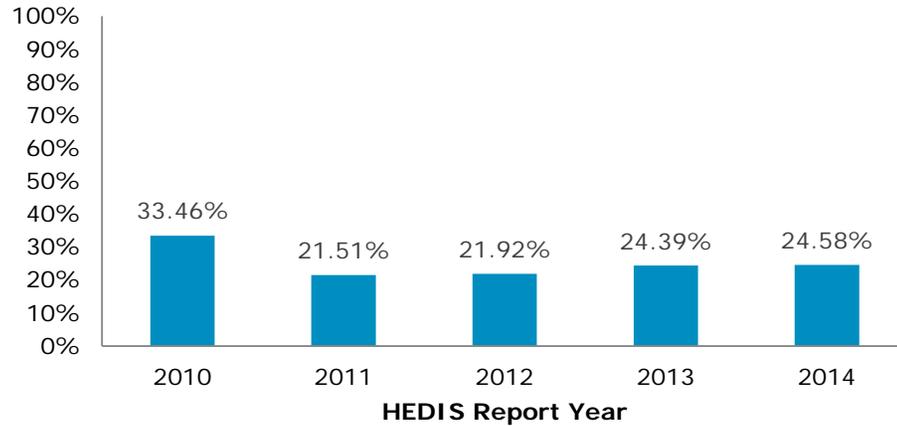


Fig. 41. Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)

Statewide Weighted Rates



Footnote: The measure rate was inverted in 2008; as such, no comparative data are available from previous years.

Fig. 42. Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

Statewide Weighted Rates

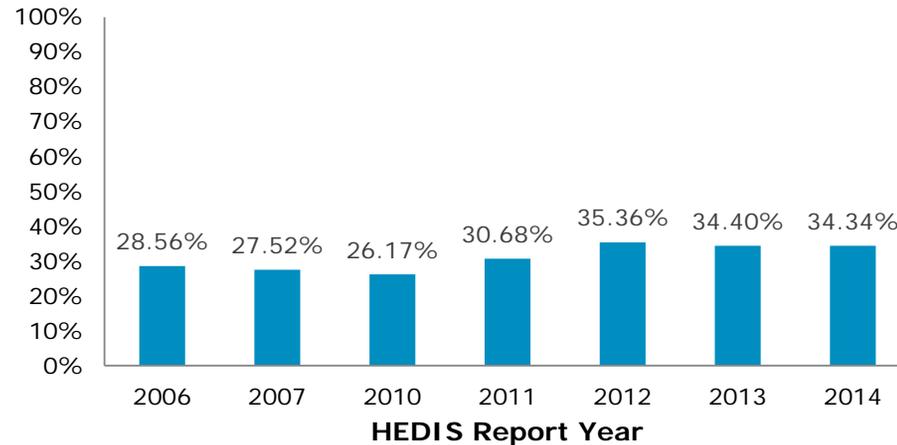
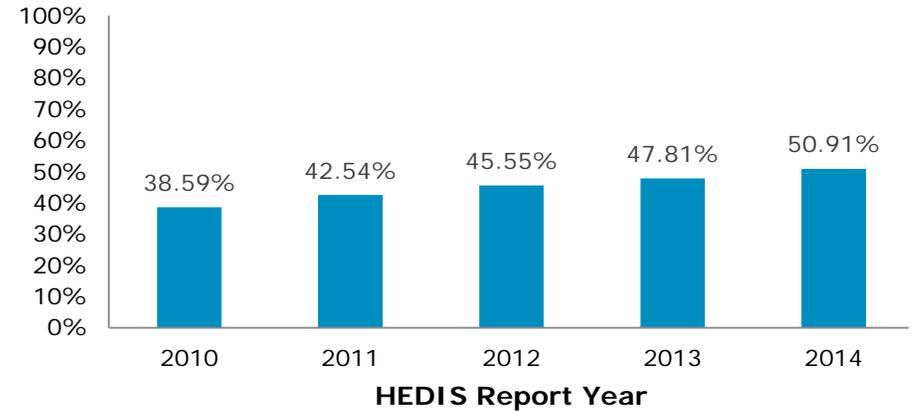


Fig. 43. Pharmacotherapy Management of COPD Exacerbation (PCE)—Systemic Corticosteroid

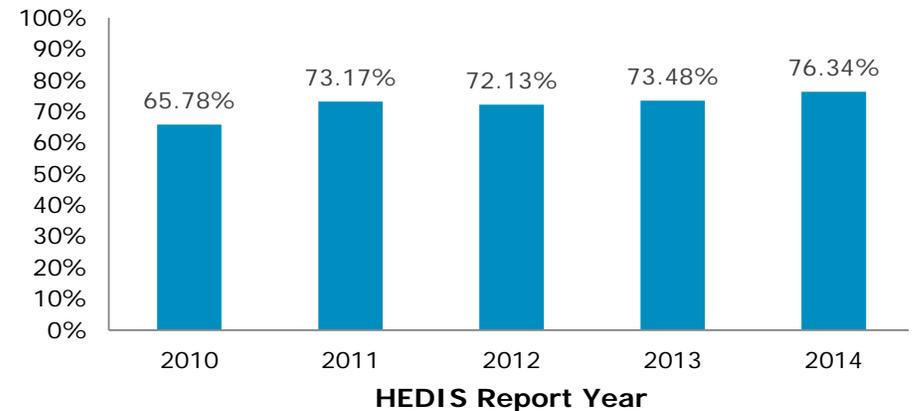
Statewide Weighted Rates



Footnote: First year data collection implemented in 2008.

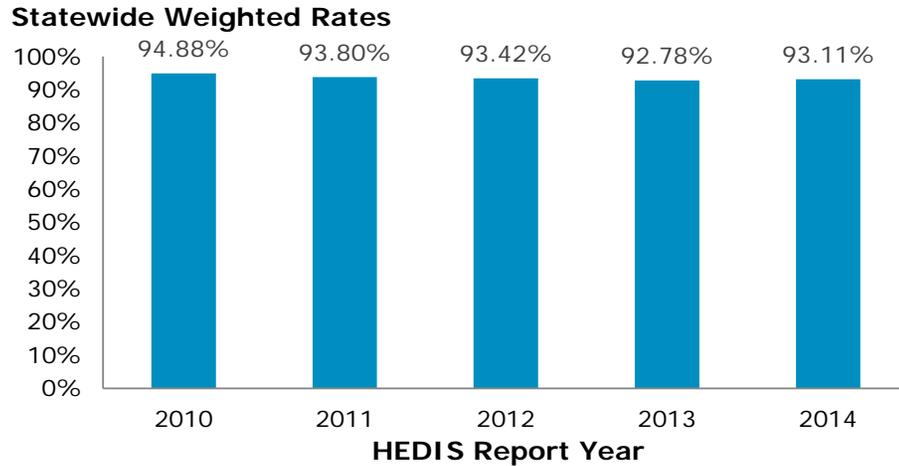
Fig. 44. PCE—Bronchodilator

Statewide Weighted Rates



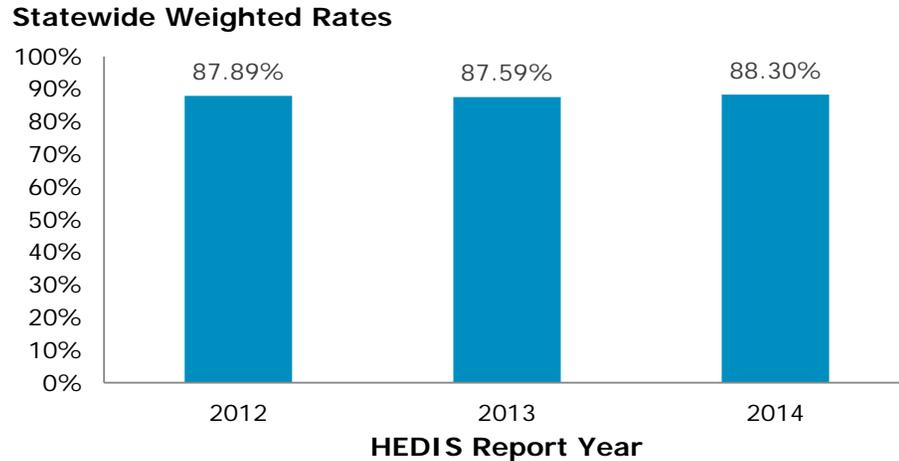
Footnote: First year data collection implemented in 2008.

Fig. 45. Use of Appropriate Medications for People With Asthma (ASM)—5–11 years



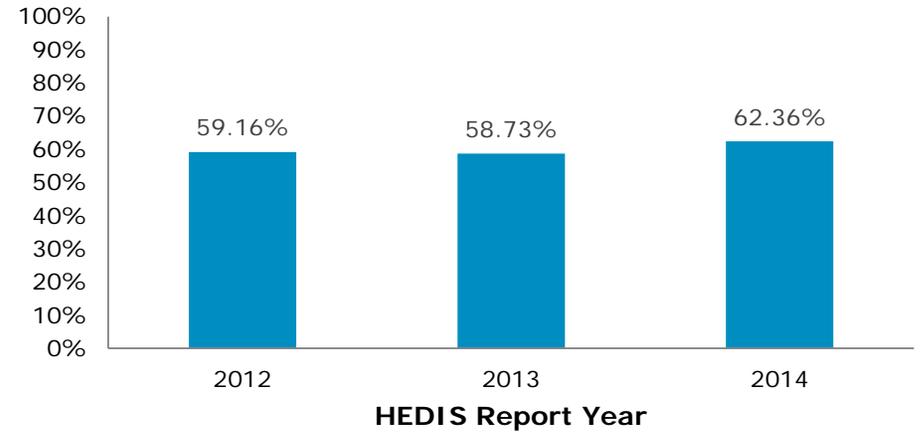
Footnote: Measure specification changed in 2010; as such, no comparative data are available from previous years.

Fig. 46. ASM—12–18 years



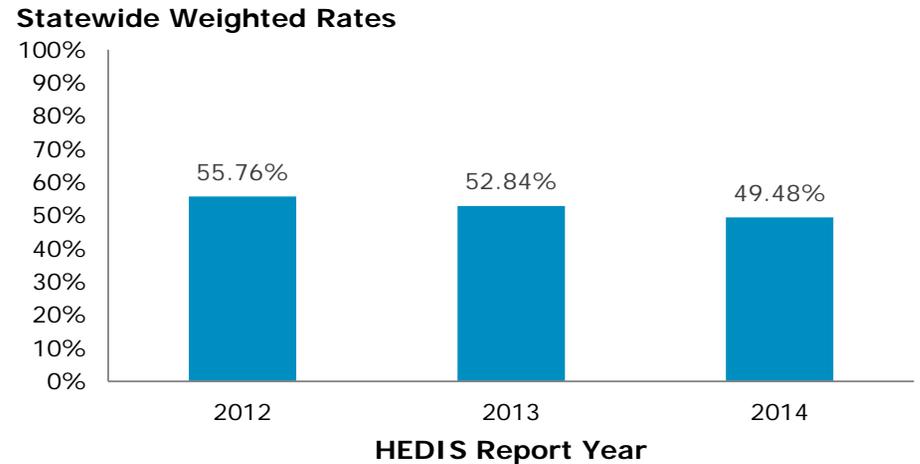
Footnote: Age stratification changed in 2012; as such, no comparative data are available from previous years.

Fig. 47. ASM—19–50 years



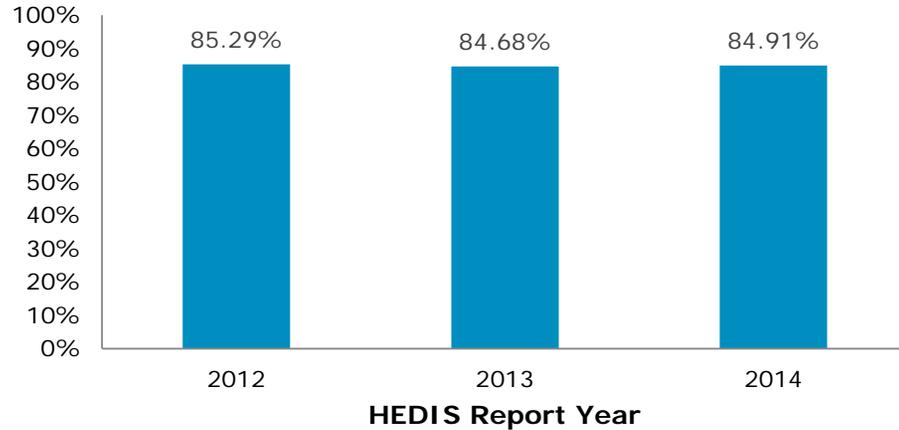
Footnote: Age stratification changed in 2012; as such, no comparative data are available from previous years.

Fig. 48. ASM—51–64 years



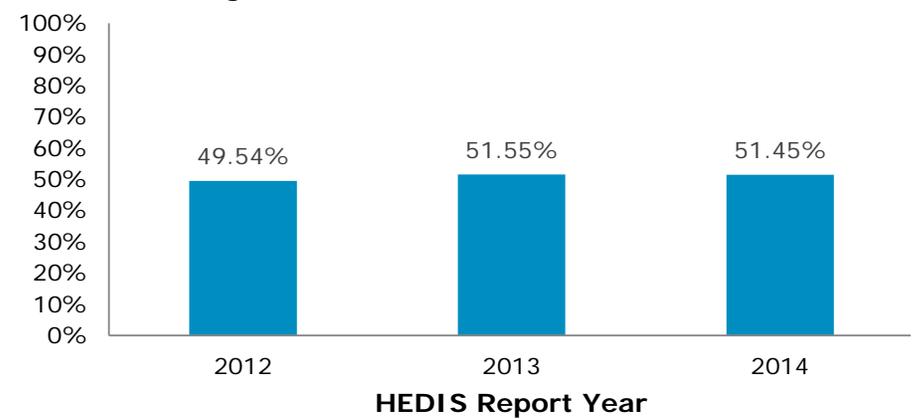
Footnote: Age stratification changed in 2012; as such, no comparative data are available from previous years.

Fig. 49. ASM—Total years Statewide Weighted Rates



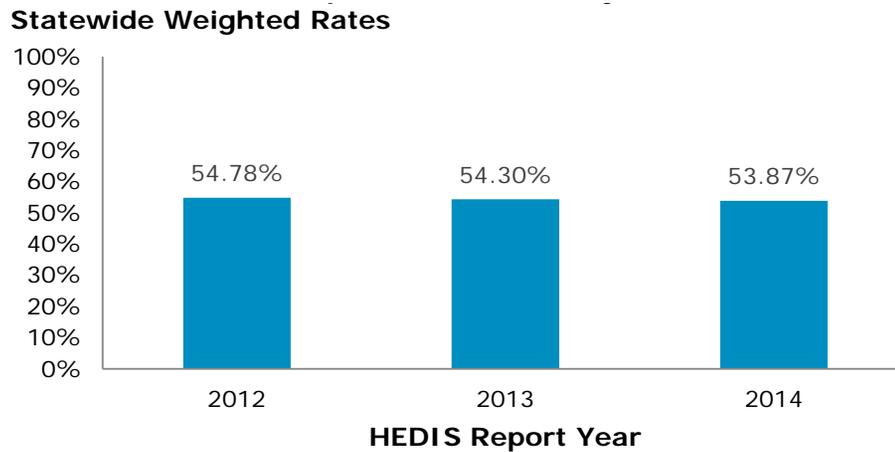
Footnote: Age stratification changed in 2012; as such, no comparative data are available from previous years.

Fig. 51. MMA—Medication Compliance 50%: 12–18 years Statewide Weighted Rates



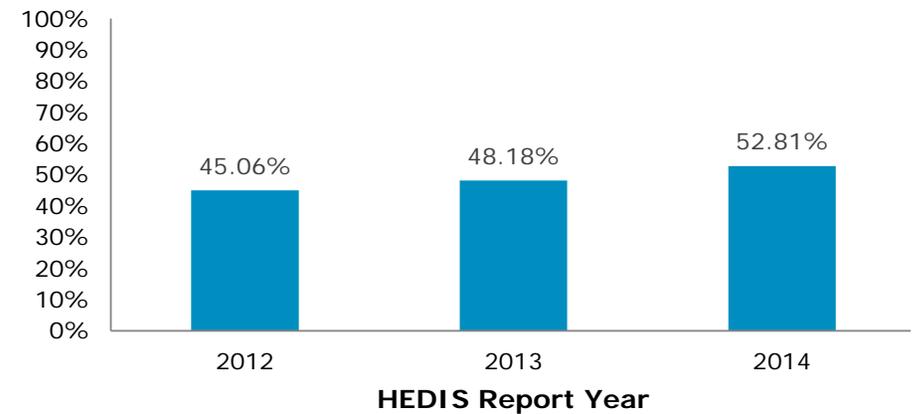
Footnote: First year data collection implemented in 2012.

Fig. 50. Medication Management for People With Asthma (MMA)—Medication Compliance 50%: 5–11 years Statewide Weighted Rates



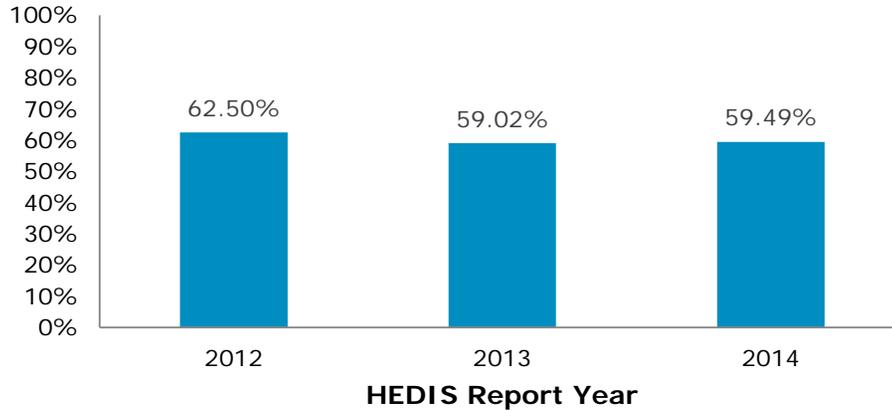
Footnote: First year data collection implemented in 2012.

Fig. 52. MMA—Medication Compliance 50%: 19–50 years Statewide Weighted Rates



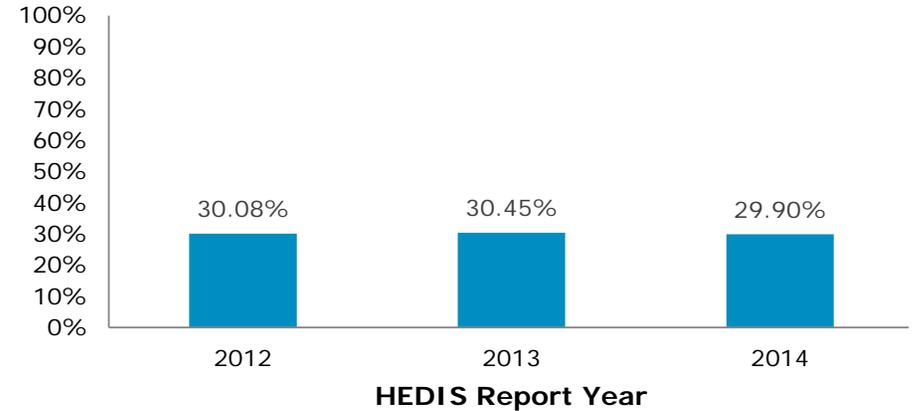
Footnote: First year data collection implemented in 2012.

Fig. 53. MMA—Medication Compliance 50%: 51–64 years
Statewide Weighted Rates



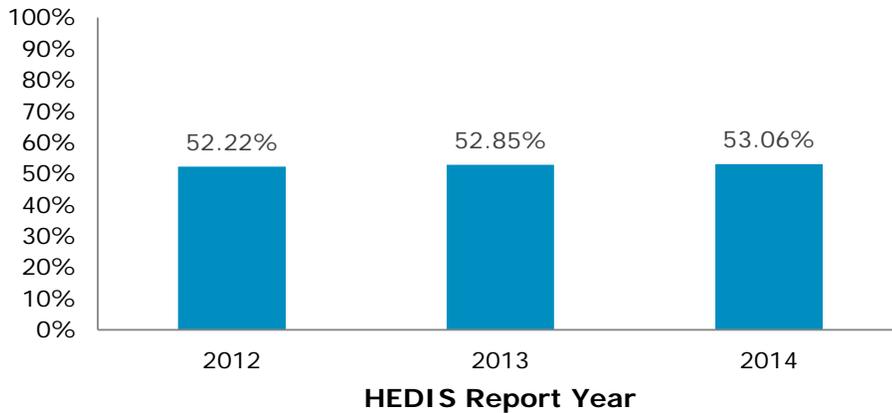
Footnote: First year data collection implemented in 2012.

Fig. 55. MMA—Medication Compliance 75%: 5–11 years
Statewide Weighted Rates



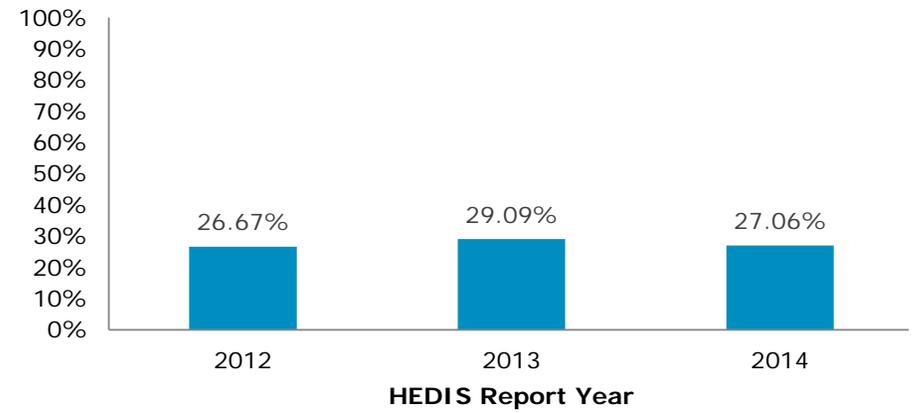
Footnote: First year data collection implemented in 2012.

Fig. 54. MMA—Medication Compliance 50%: Total
Statewide Weighted Rates



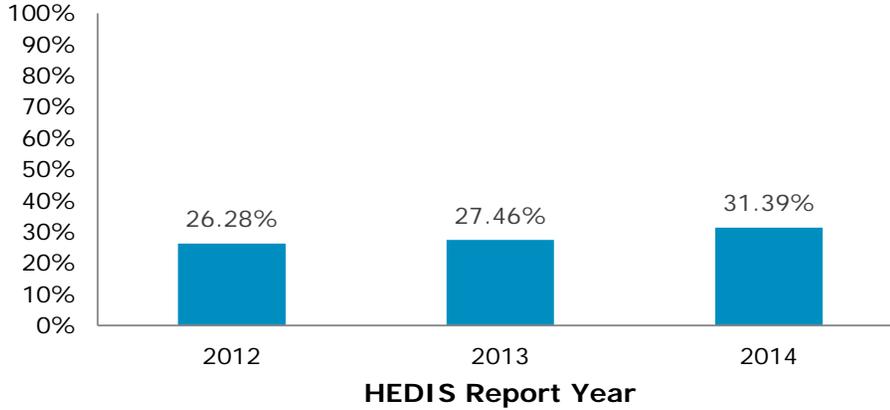
Footnote: First year data collection implemented in 2012.

Fig. 56. MMA—Medication Compliance 75%: 12–18 years
Statewide Weighted Rates



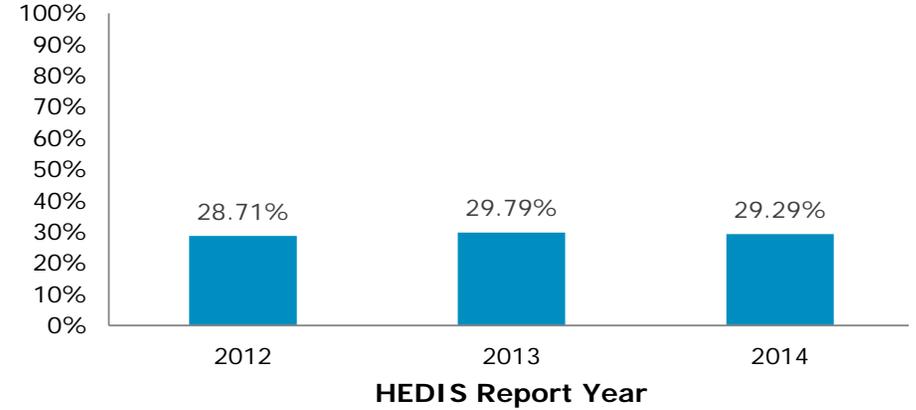
Footnote: First year data collection implemented in 2012.

Fig. 57. MMA—Medication Compliance 75%: 19–50 years
Statewide Weighted Rates



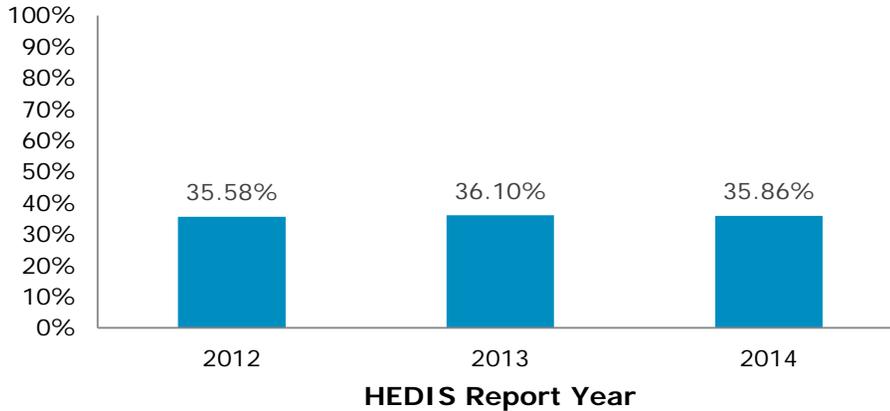
Footnote: First year data collection implemented in 2012.

Fig. 59. MMA—Medication Compliance 75%: Total
Statewide Weighted Rates



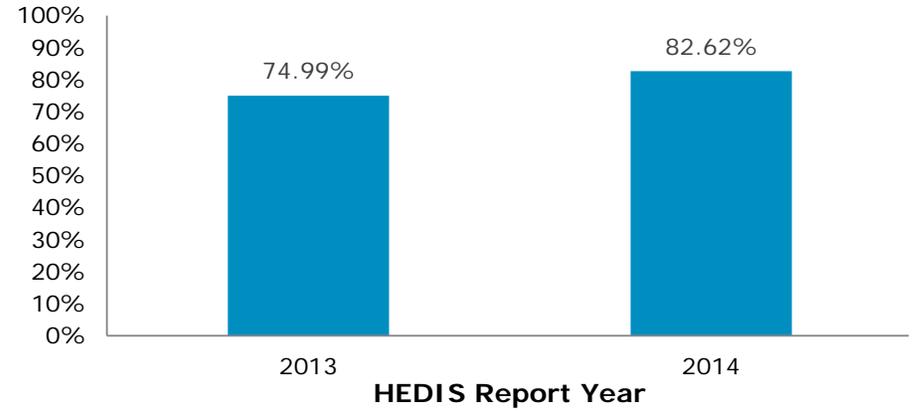
Footnote: First year data collection implemented in 2012.

Fig. 58. MMA—Medication Compliance 75%: 51–64 years
Statewide Weighted Rates



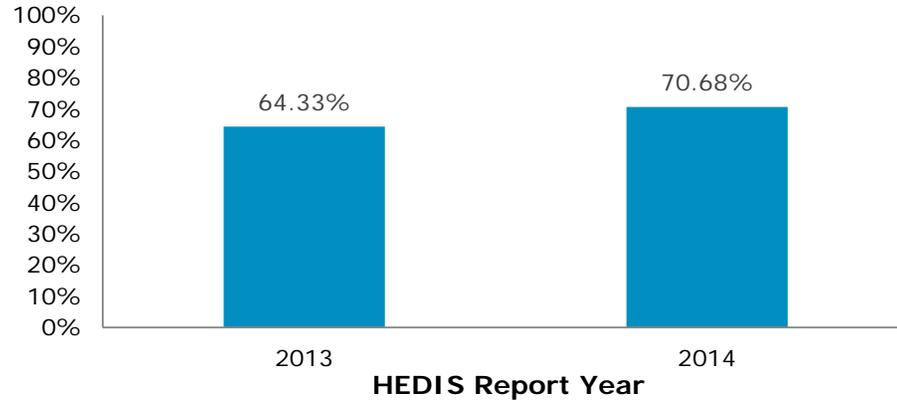
Footnote: First year data collection implemented in 2012.

Fig. 60. Asthma Medical Ratio (AMR): 5–11 years
Statewide Weighted Rates



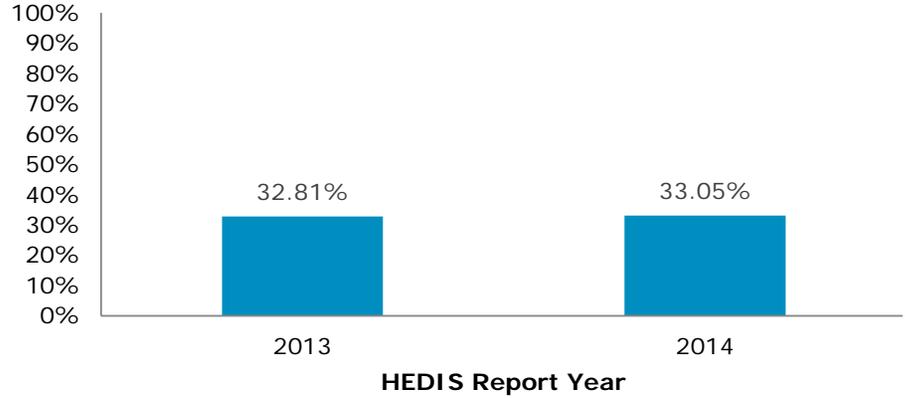
Footnote: First year data collection implemented in 2013.

Fig. 61. AMR: 12–18 years
Statewide Weighted Rates



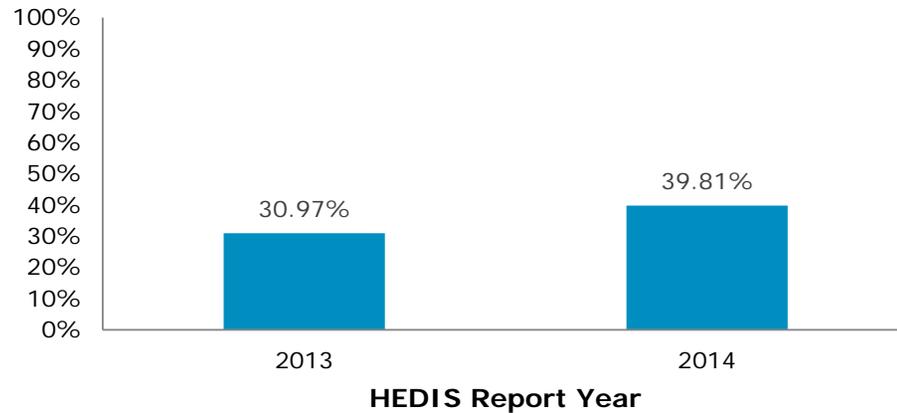
Footnote: First year data collection implemented in 2013.

Fig. 63. AMR: 51–64 years
Statewide Weighted Rates



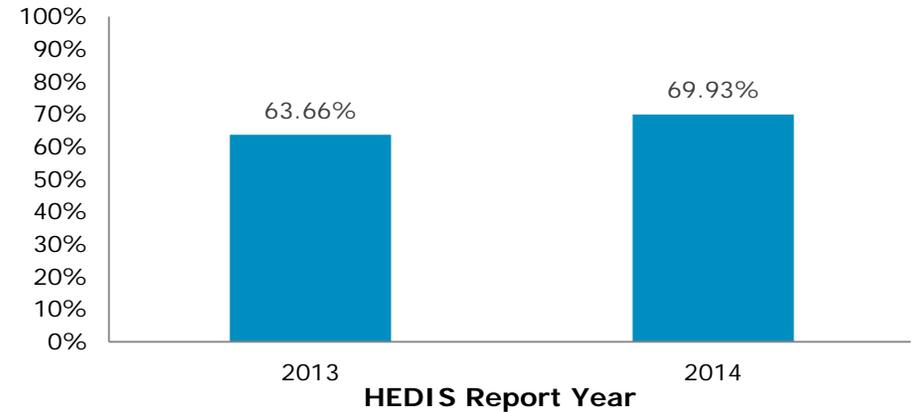
Footnote: First year data collection implemented in 2013.

Fig. 62. AMR: 19–50 years
Statewide Weighted Rates



Footnote: First year data collection implemented in 2013.

Fig. 64. AMR: Total
Statewide Weighted Rates



Footnote: First year data collection implemented in 2013.

Effectiveness of Care Measures—Cardiovascular Conditions

Fig. 65. Cholesterol Management for Patients With Cardiovascular Conditions (CMC)—LDL-C Screening
Statewide Weighted Rates

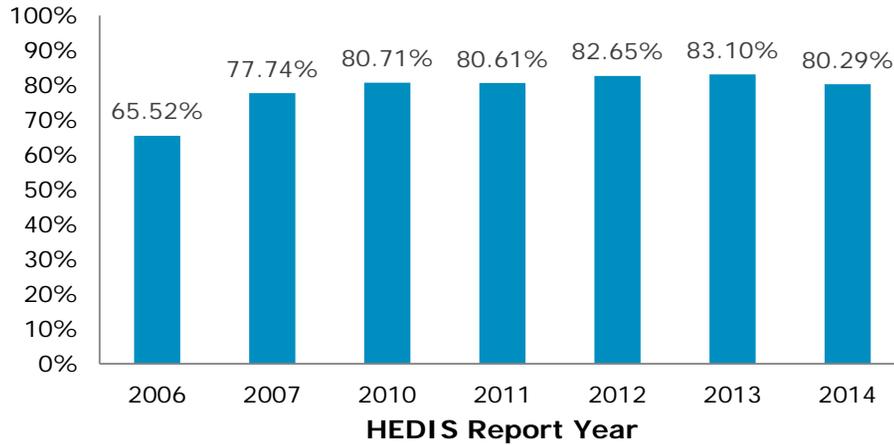


Fig. 67. Controlling High Blood Pressure (CBP)
Statewide Weighted Rates

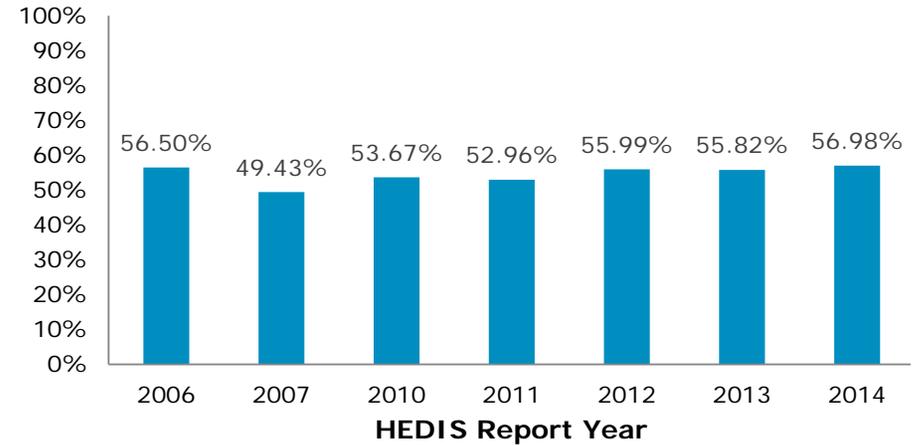


Fig. 66. CMC—LDL-C Control (<100 mg/dL)
Statewide Weighted Rates

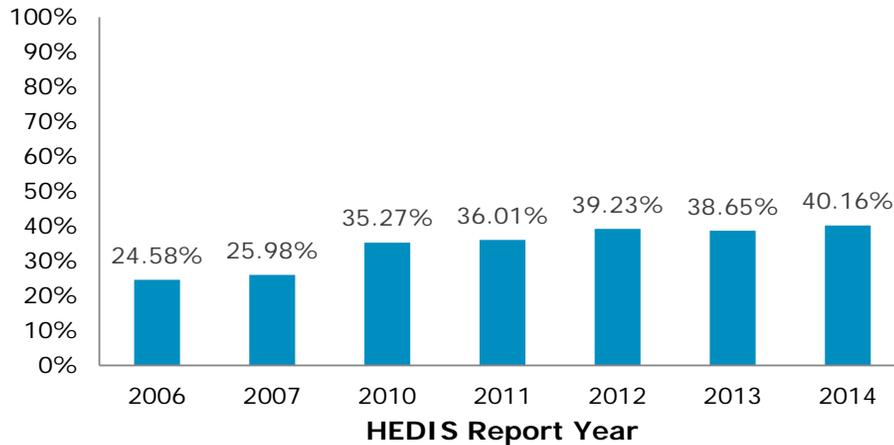
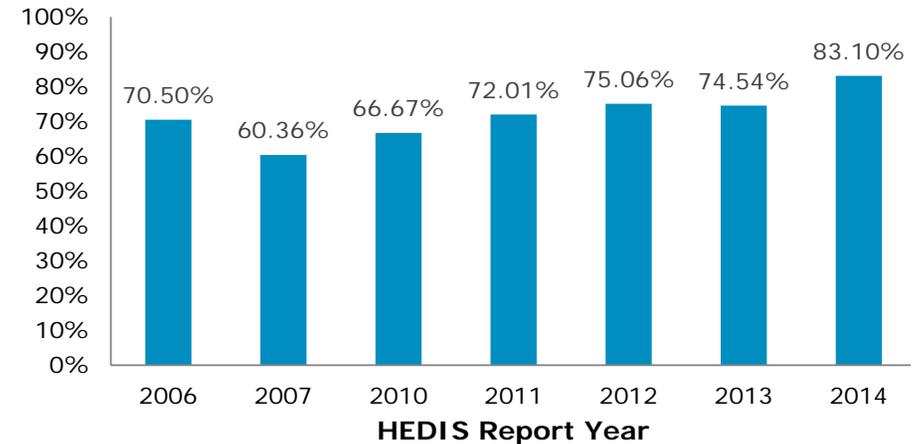


Fig. 68. Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)
Statewide Weighted Rates



Effectiveness of Care Measures—Diabetes

Fig. 69. Comprehensive Diabetes Care (CDC)—HbA1c Testing

Statewide Weighted Rates

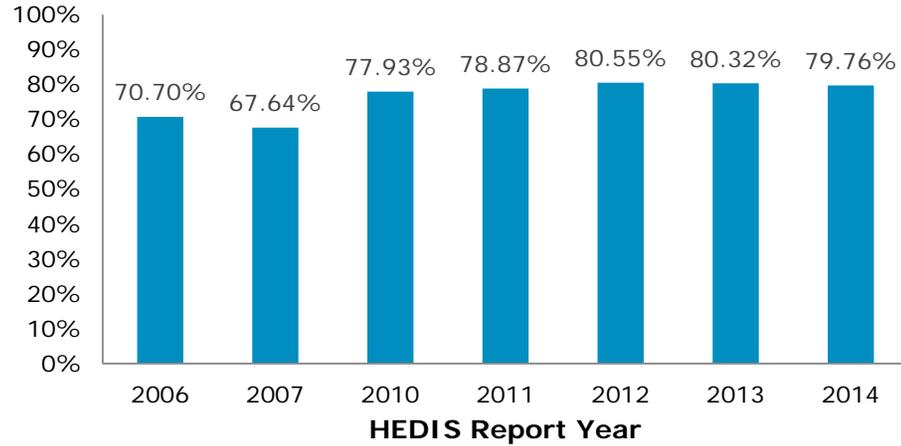
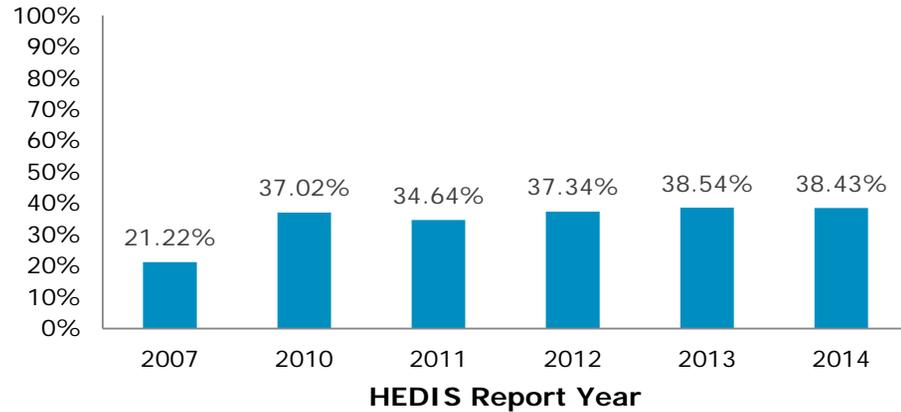


Fig. 70. CDC—HbA1c Control (<7.0%)

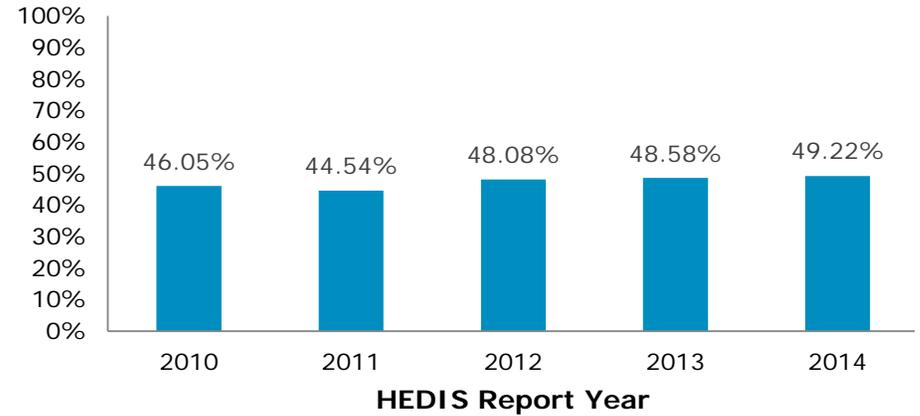
Statewide Weighted Rates



Footnote: First year data collection implemented in 2007.

Fig. 71. CDC—HbA1c Control (<8.0%)

Statewide Weighted Rates



Footnote: First year data collection implemented in 2009.

Fig. 72. CDC—Retinal Eye Exam Performed

Statewide Weighted Rates

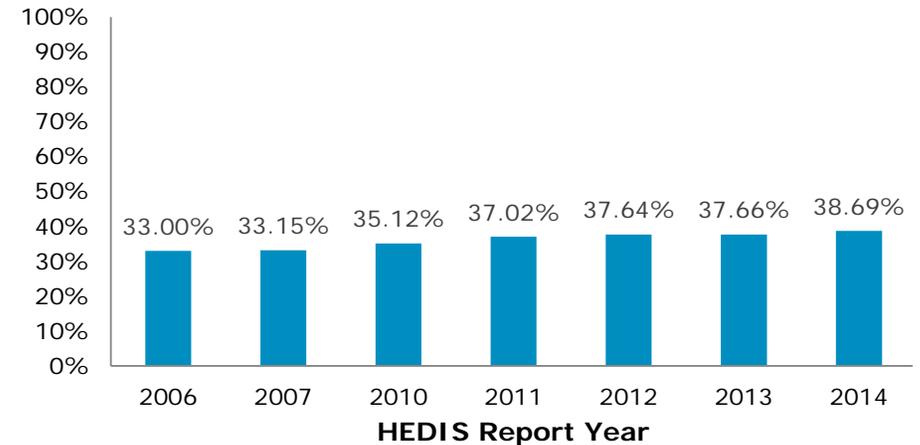


Fig. 73. CDC—LDL-C Screening
Statewide Weighted Rates

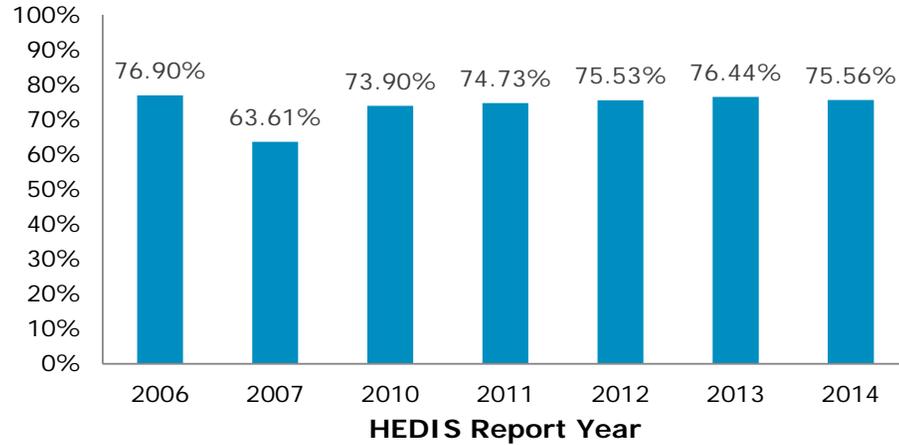


Fig. 75. CDC—Medical Attention for Nephropathy
Statewide Weighted Rates

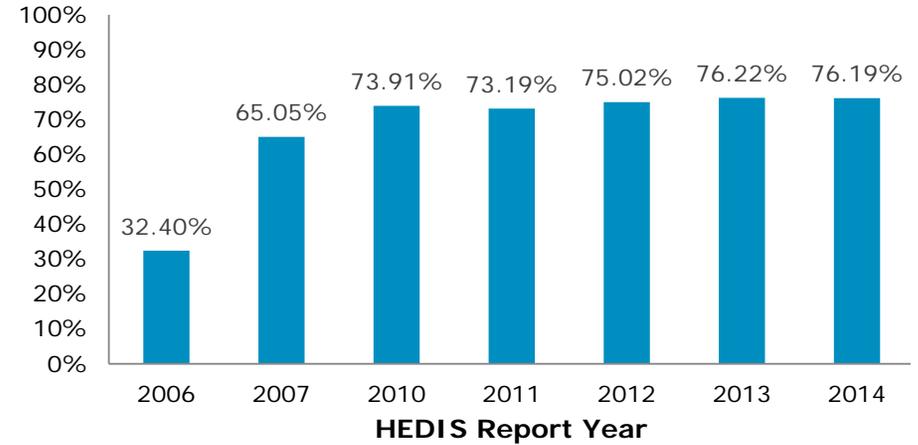


Fig. 74. CDC—LDL-C Control (<100 mg/dL)
Statewide Weighted Rates

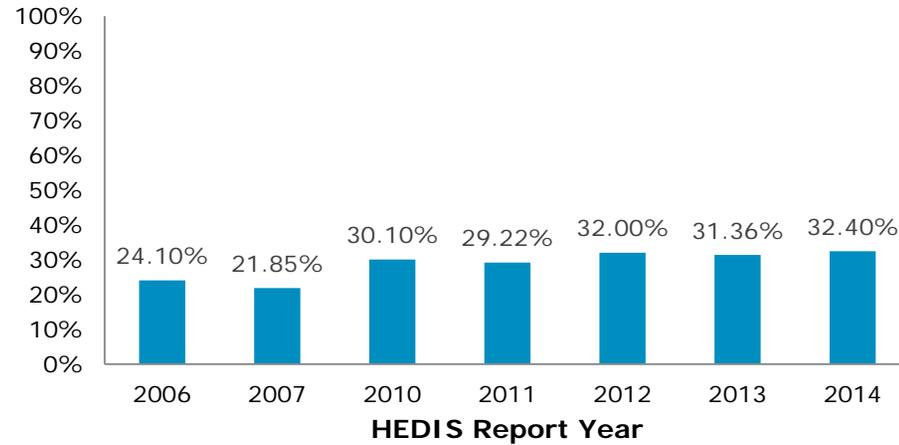
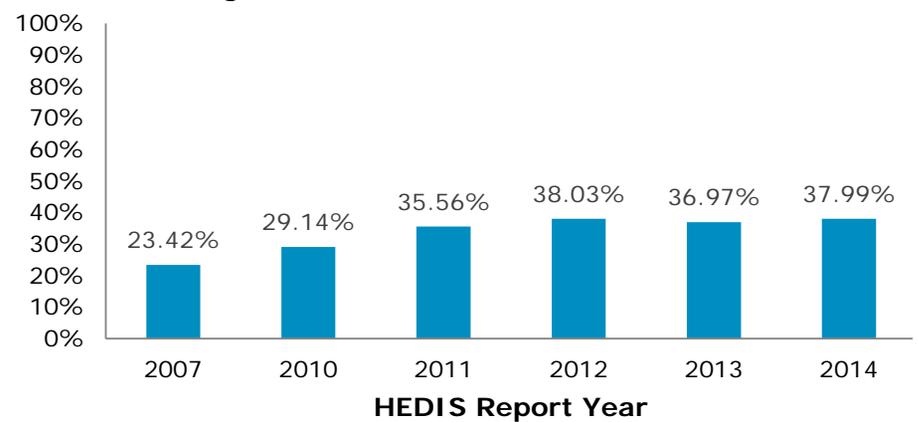
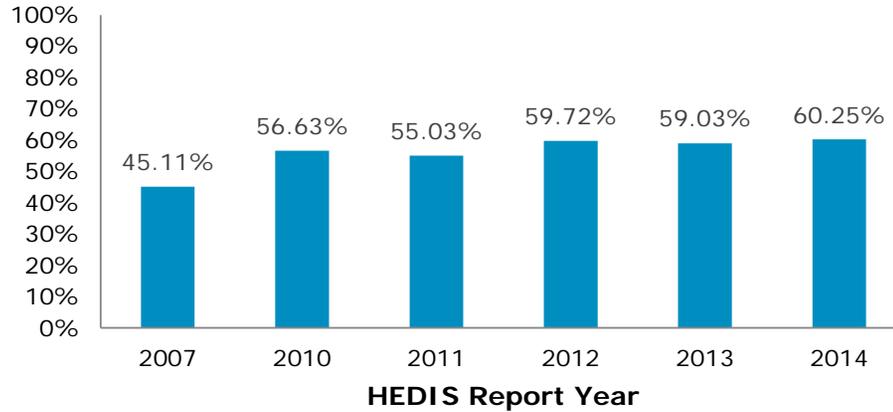


Fig. 76. CDC—Blood Pressure Control (<140/80 mm Hg)
Statewide Weighted Rates



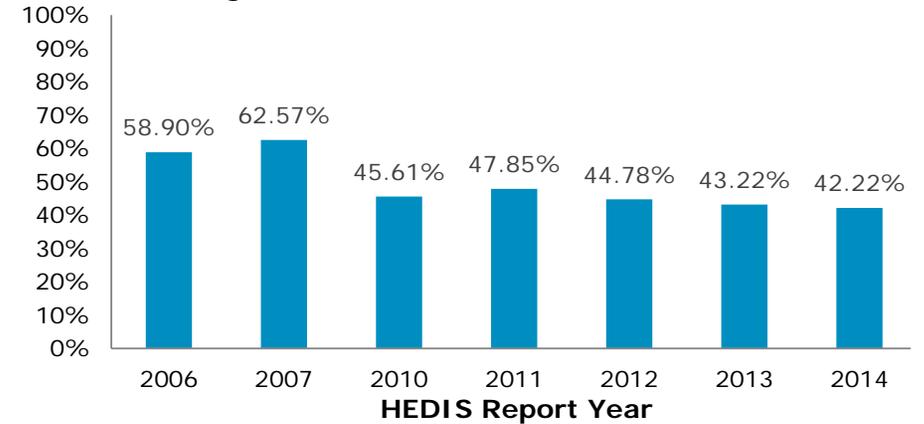
Footnote: First year data collection implemented in 2007.

Fig. 77. CDC: Blood Pressure Control (<140/90 mm Hg) Statewide Weighted Rates



Footnote: First year data collection implemented in 2007.

Fig. 78. CDC—HbA1c Poor Control (>9.0%)* Statewide Weighted Rates*



*Lower rates for this measure indicate better performance.

Effectiveness of Care Measures—Musculoskeletal Conditions

Fig. 79. Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART) Statewide Weighted Rates

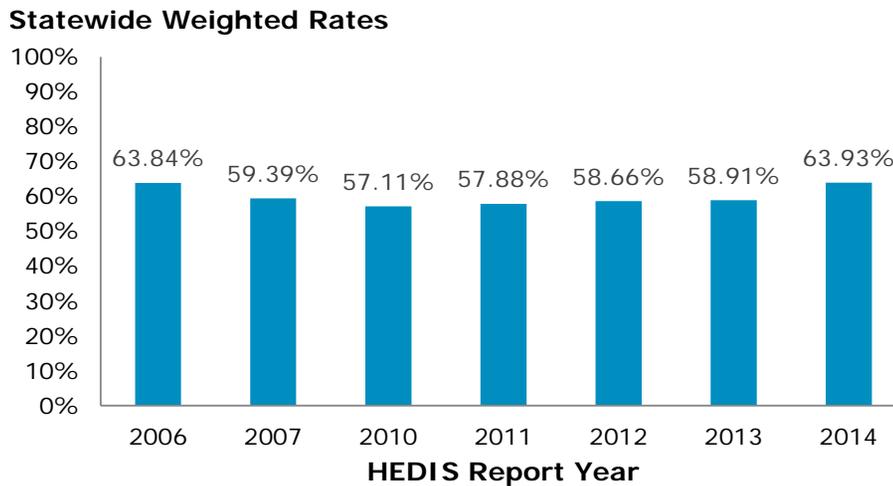
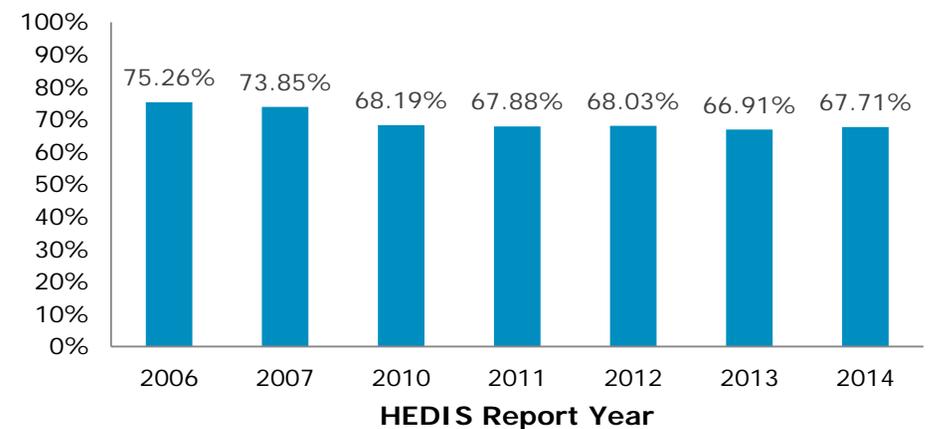


Fig. 80. Use of Imaging Studies for Low Back Pain (LBP) Statewide Weighted Rates

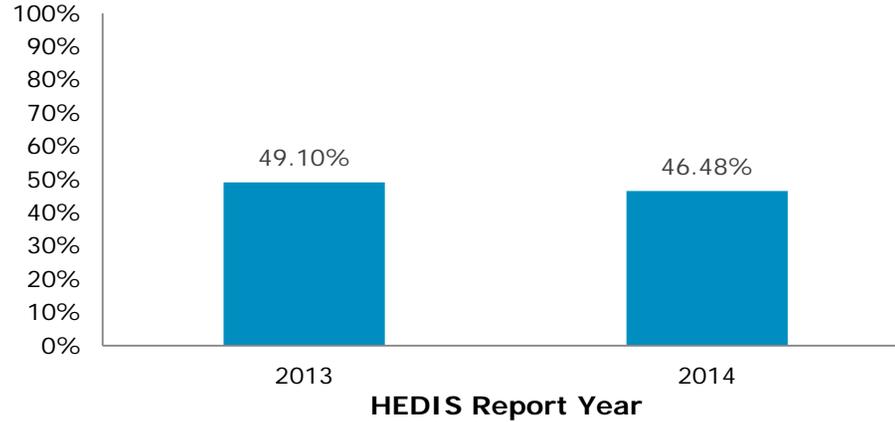


Footnote: United American Healthcare Corporation did not report this measure in 2007; hence, it was excluded from the statewide weighted average calculation for that year.

Effectiveness of Care Measures—Behavioral Health

Fig. 81. Antidepressant Medication Management (AMM)—Effective Acute Phase Treatment

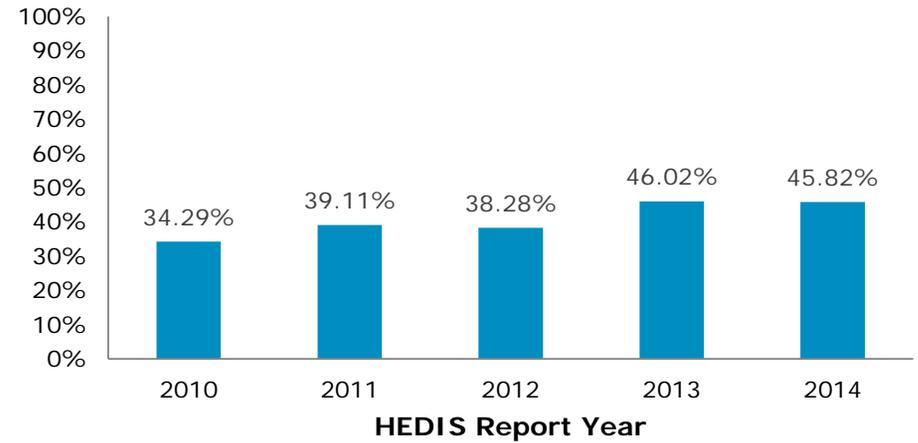
Statewide Weighted Rates



Footnote: Measure specification changed in 2013; as such, no comparative data are available from previous years.

Fig. 83. Follow-Up Care for Children Prescribed ADHD Medication (ADD)—Initiation Phase

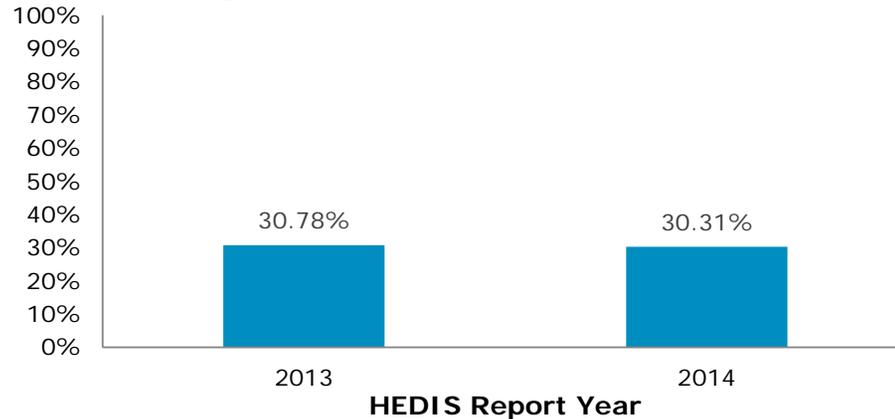
Statewide Weighted Rates



Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 82. AMM—Effective Continuation Phase Treatment

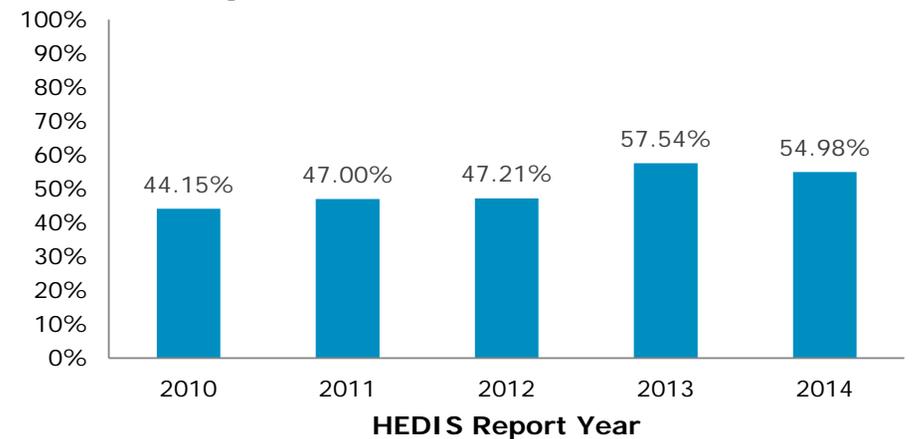
Statewide Weighted Rates



Footnote: Measure specification changed in 2013; as such, no comparative data are available from previous years.

Fig. 84. ADD—Continuation and Maintenance Phase

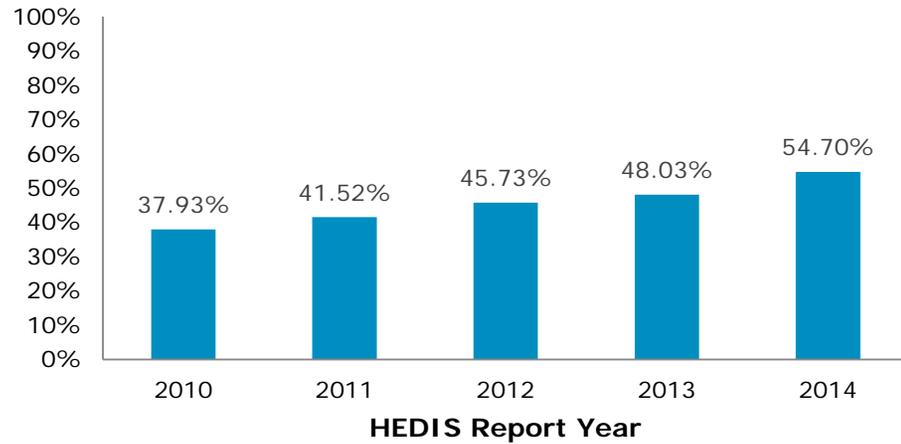
Statewide Weighted Rates



Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 85. Follow-Up After Hospitalization for Mental Illness (FUH)—7-day follow-up

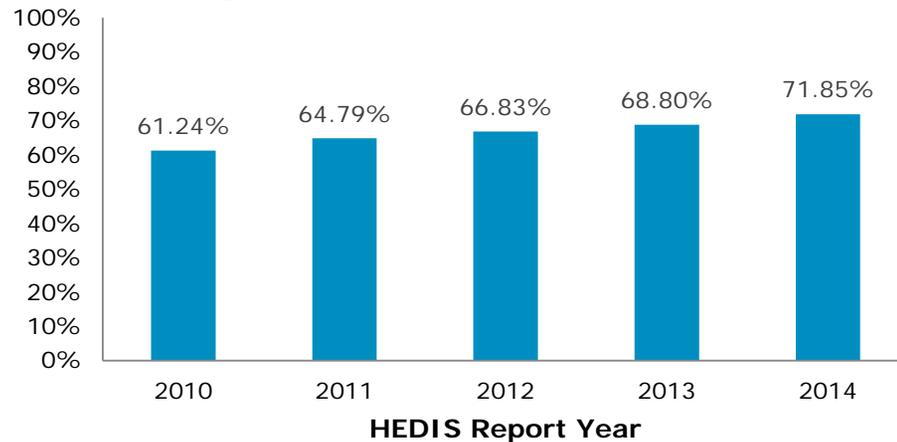
Statewide Weighted Rates



Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 86. FUH—30-day follow-up

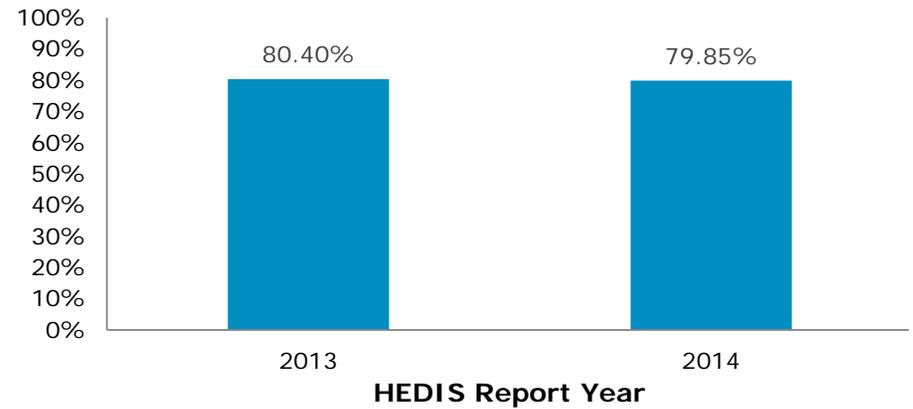
Statewide Weighted Rates



Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 87. Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD)

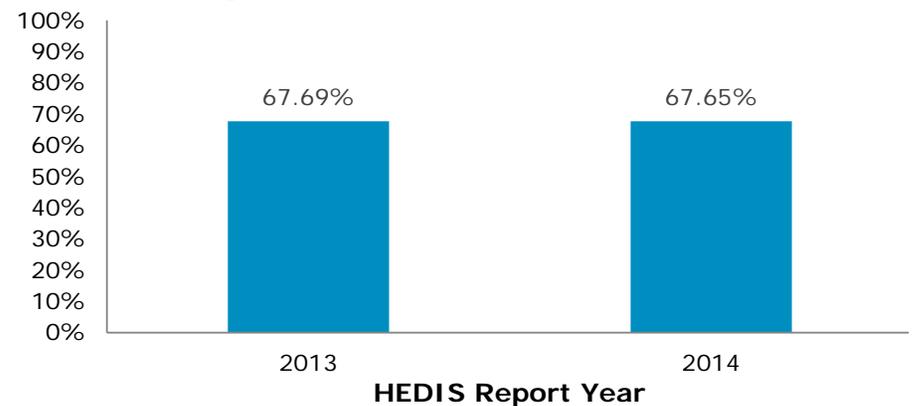
Statewide Weighted Rates



Footnote: First year data collection implemented in 2013.

Fig. 88. Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)

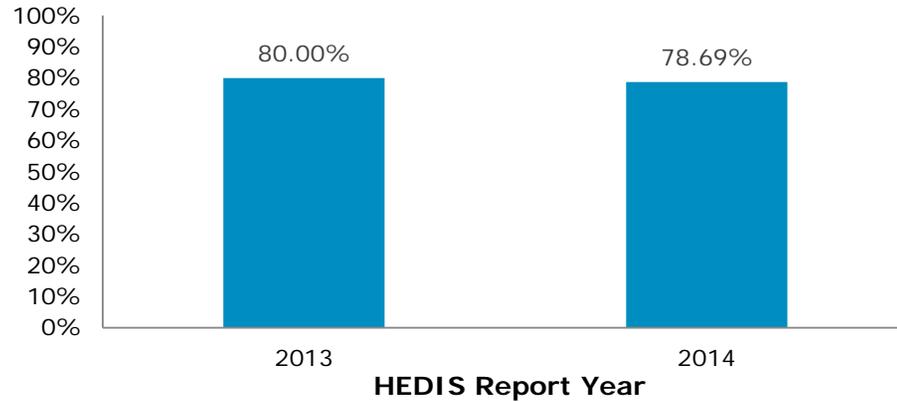
Statewide Weighted Rates



Footnote: First year data collection implemented in 2013.

Fig. 89. Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)

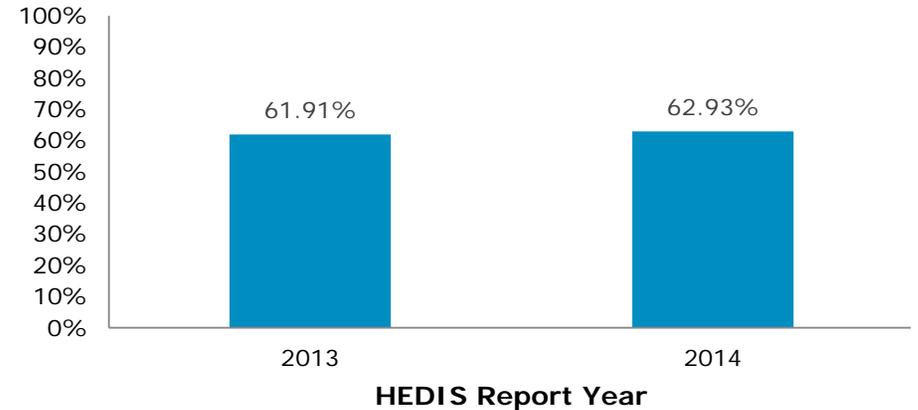
Statewide Weighted Rates



Footnote: First year data collection implemented in 2013.

Fig. 90. Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)

Statewide Weighted Rates



Footnote: First year data collection implemented in 2013.

Effectiveness of Care Measures—Medication Management

Fig. 91. Annual Monitoring for Patients on Persistent Medications (MPM)—ACE Inhibitors or ARBs

Statewide Weighted Rates

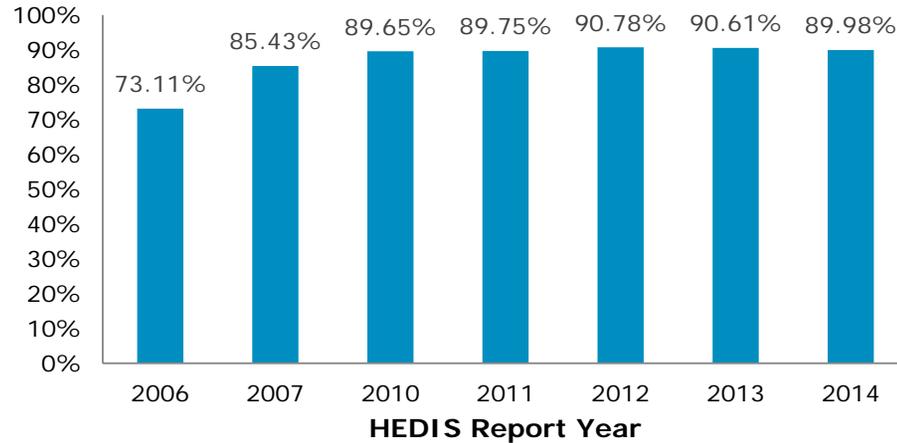


Fig. 92. MPM—Digoxin

Statewide Weighted Rates

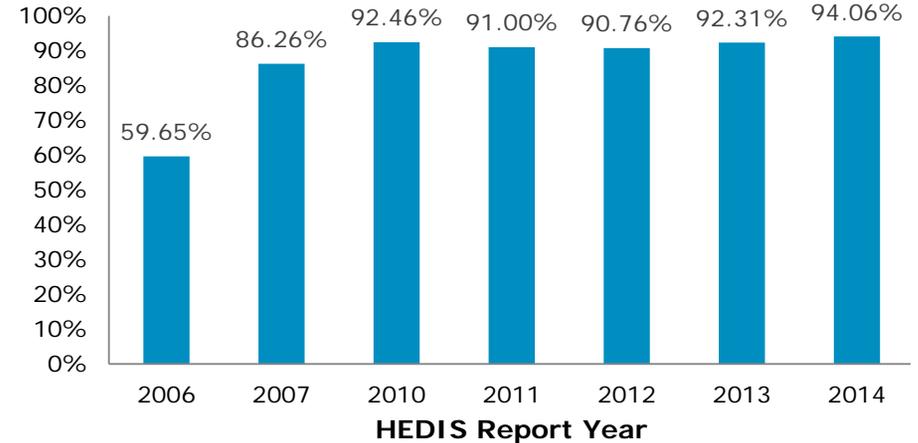


Fig. 93. MPM—Diuretics

Statewide Weighted Rates

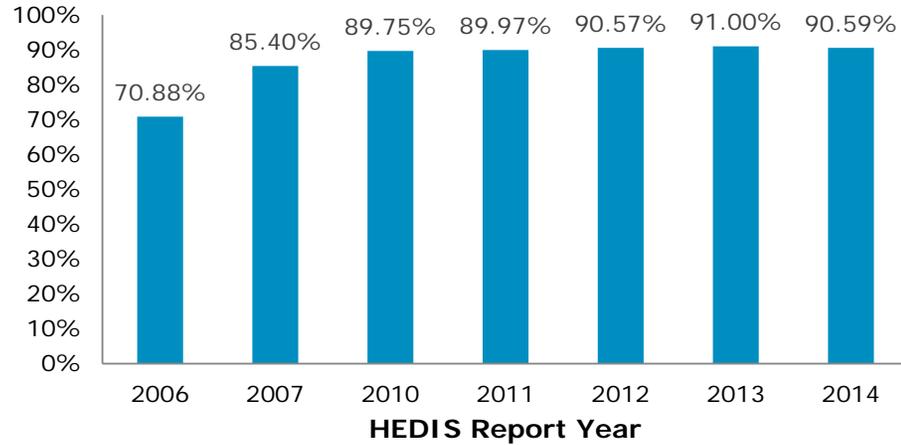


Fig. 95. MPM—Total

Statewide Weighted Rates

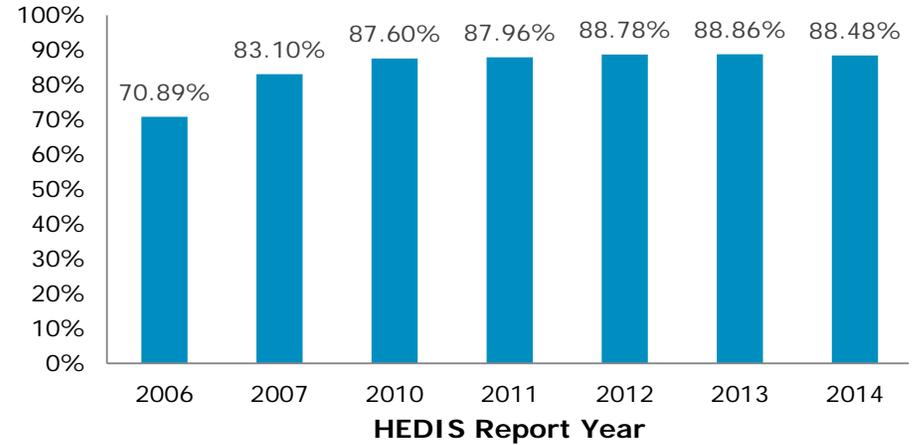
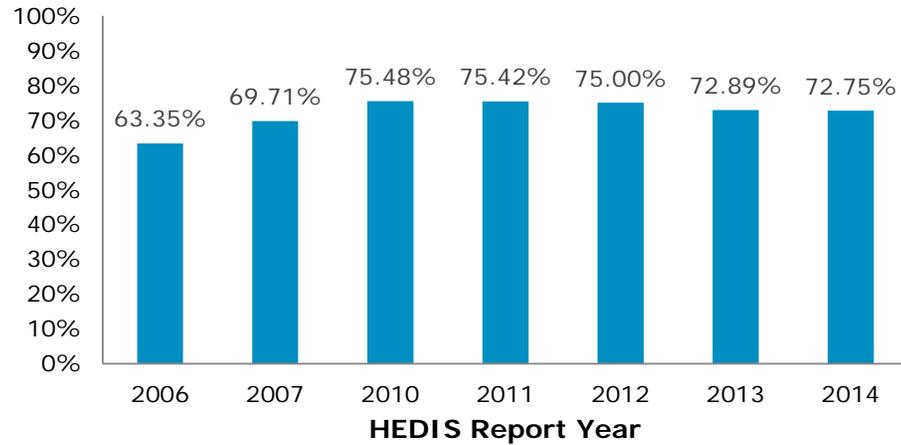


Fig. 94. MPM—Anticonvulsants

Statewide Weighted Rates



Access/Availability of Care Measures

Fig. 96. Adults' Access to Preventive/Ambulatory Health Services (AAP)—20–44 years

Statewide Weighted Rates

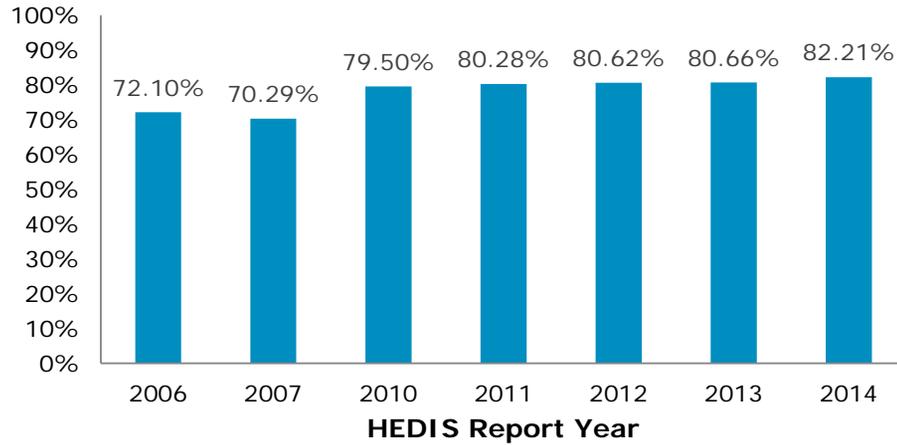


Fig. 97. AAP—45–64 years

Statewide Weighted Rates

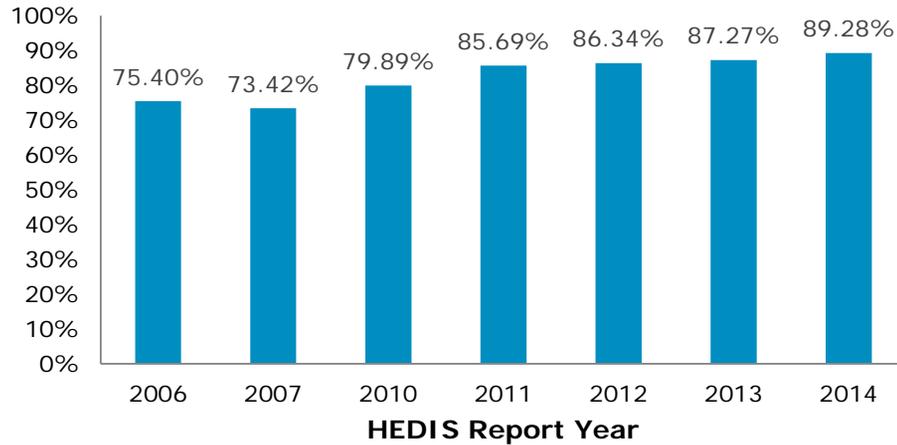


Fig. 98. Children and Adolescents' Access to Primary Care Practitioners (CAP)—12–24 months

Statewide Weighted Rates

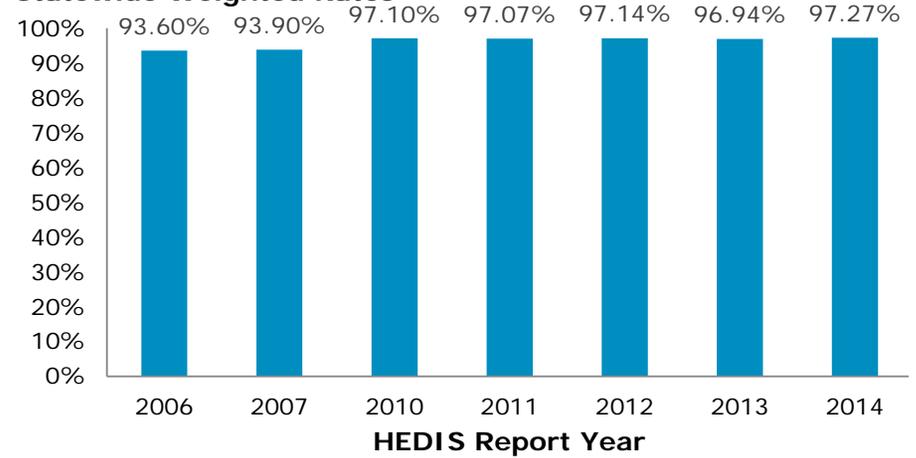


Fig. 99. CAP—25 months–6 years

Statewide Weighted Rates

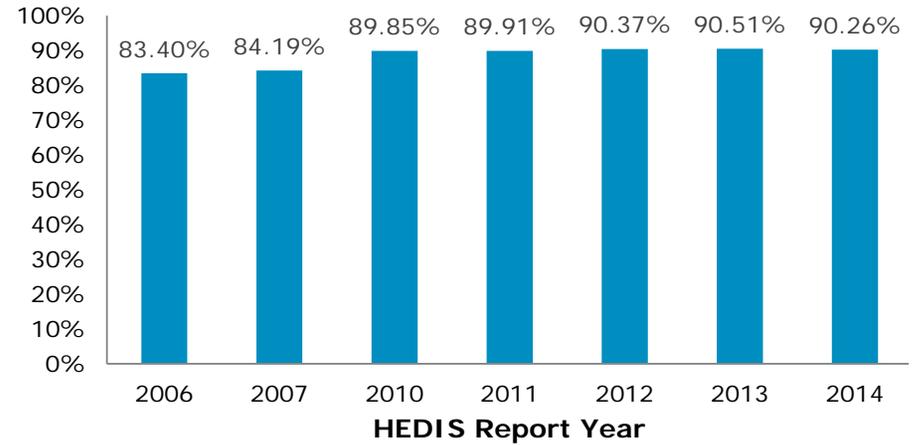


Fig. 100. CAP—7–11 years
Statewide Weighted Rates

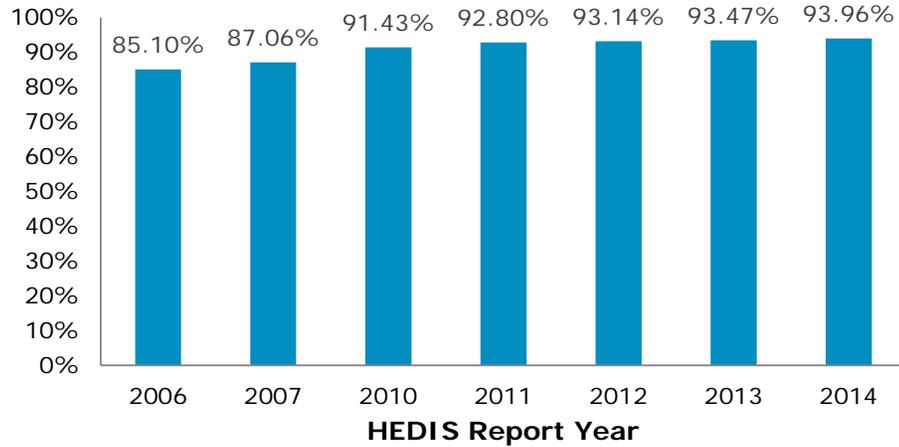


Fig. 101. CAP—12–19 years
Statewide Weighted Rates

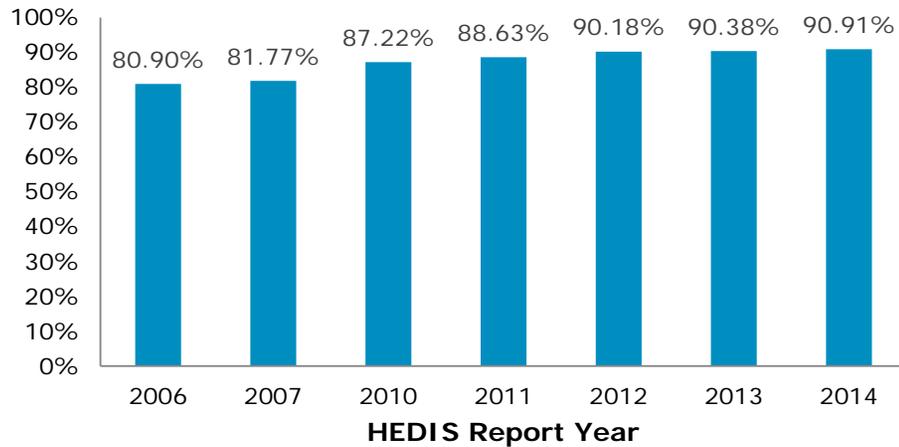
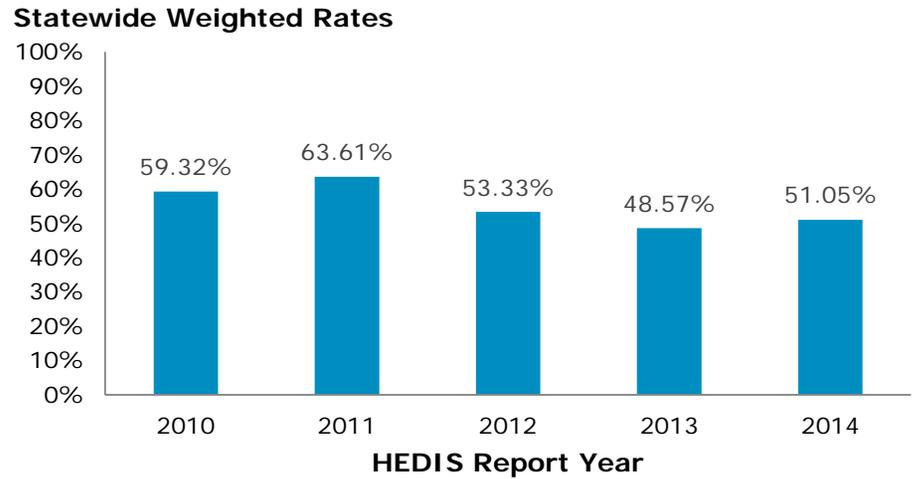
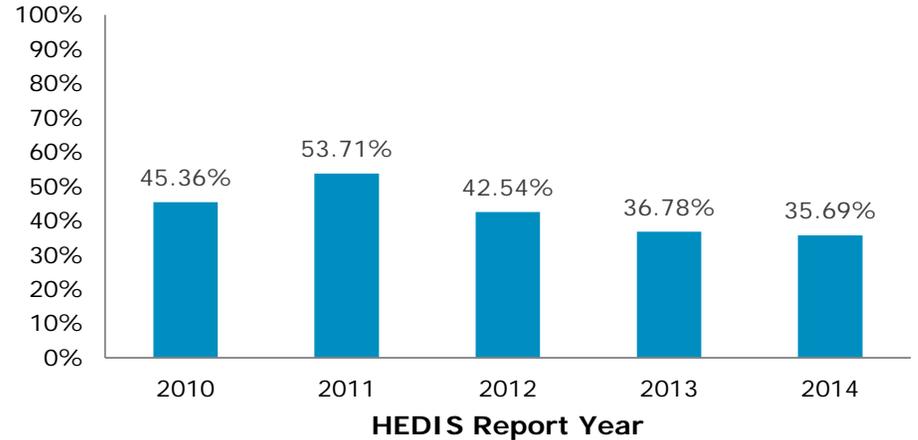


Fig. 102. Initiation and Engagement of Alcohol and Other Drug (AOD) Dependence Treatment (IET)—Initiation of AOD Treatment: 13–17 years
Statewide Weighted Rates



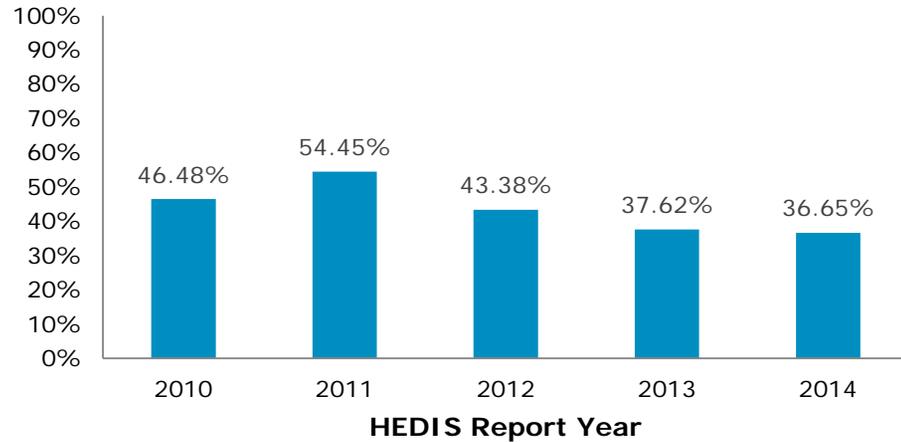
Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 103. IET—Initiation of AOD Treatment: ≥18 years
Statewide Weighted Rates



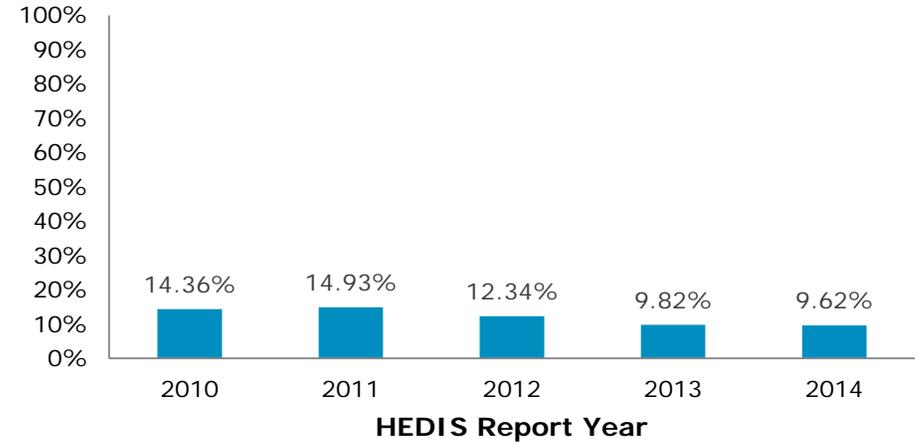
Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 104. IET—Initiation of AOD Treatment: Total Statewide Weighted Rates



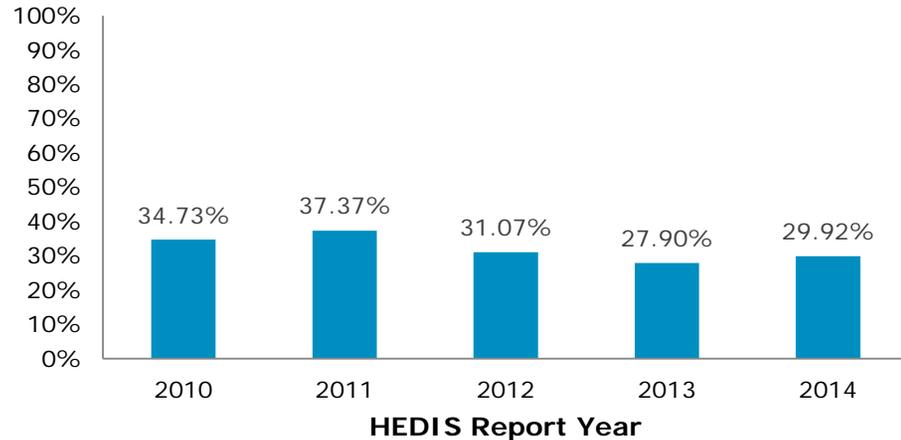
Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 106. IET—Engagement of AOD Treatment: ≥18 years Statewide Weighted Rates



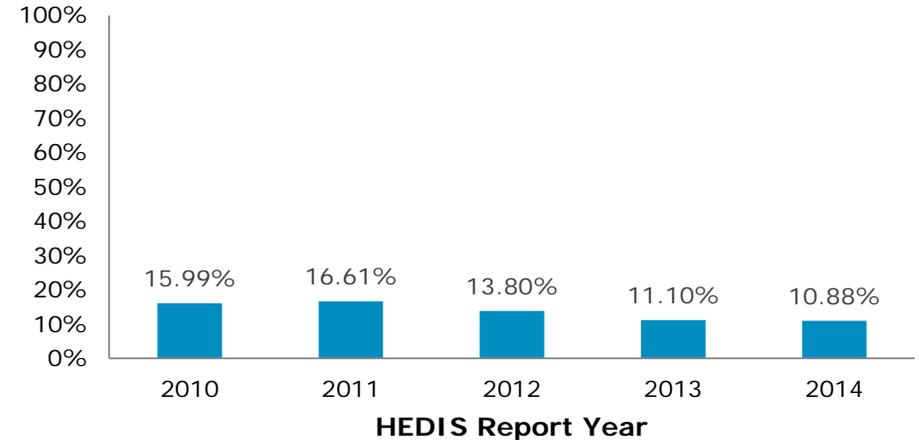
Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 105. IET—Engagement of AOD Treatment: 13–17 years Statewide Weighted Rates



Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 107. IET—Engagement of AOD Treatment: Total Statewide Weighted Rates



Footnote: Behavioral Health was carved out prior to HEDIS 2009; as such, no comparative data are available from previous years.

Fig. 108. Prenatal and Postpartum Care (PPC)—Timeliness of Prenatal Care

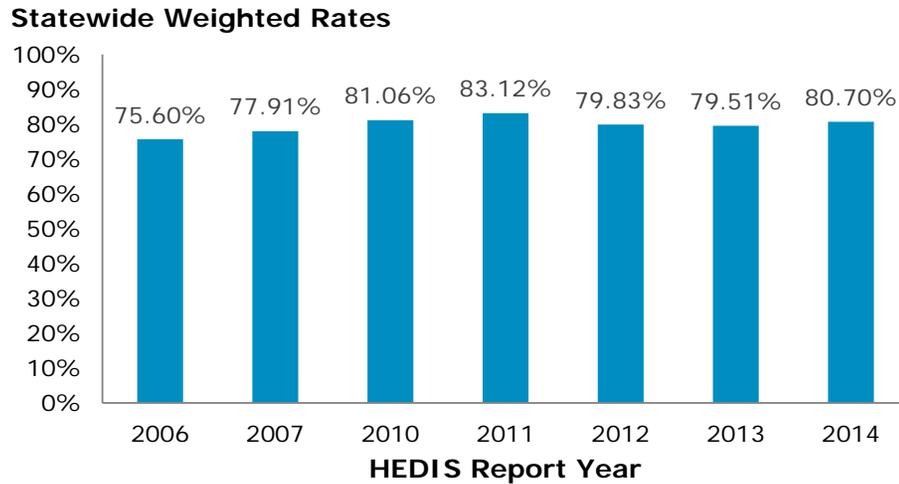


Fig. 109. PPC—Postpartum Care

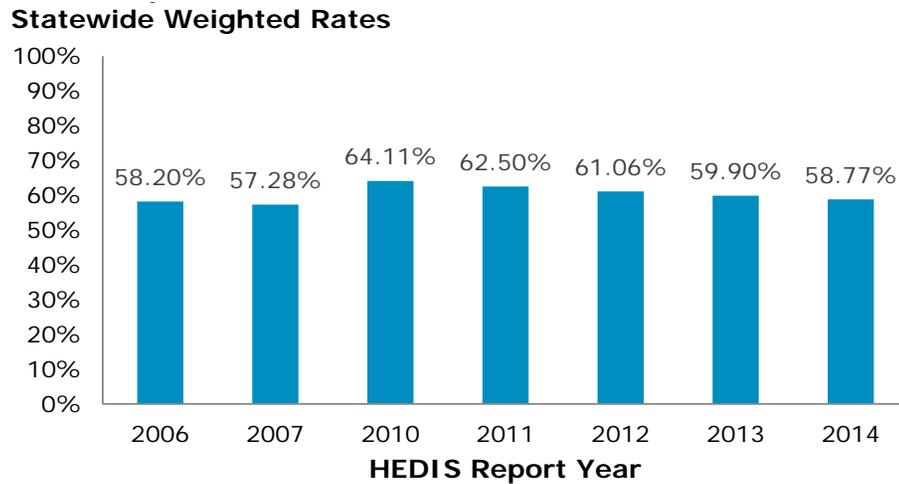
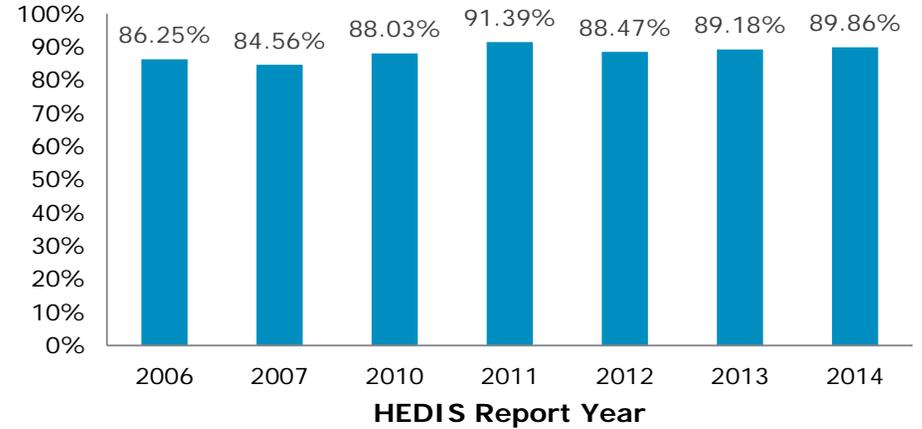


Fig. 110. Call Answer Timeliness (CAT) Statewide Weighted Rates



Footnote: United American Healthcare Corporation, Unison and Windsor did not report this measure in 2006; hence, these health plans were excluded from statewide weighted average calculation.

Utilization and Relative Resource Use

Fig. 111. Frequency of Ongoing Prenatal Care (FPC) ≥ 81 % Statewide Weighted Rates

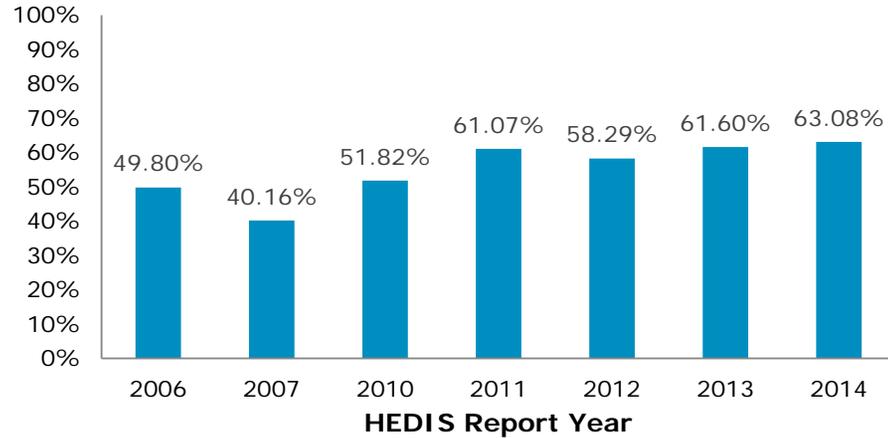


Fig. 112. Well-Child Visits in the First 15 Months of Life (W15)—6 or More Visits

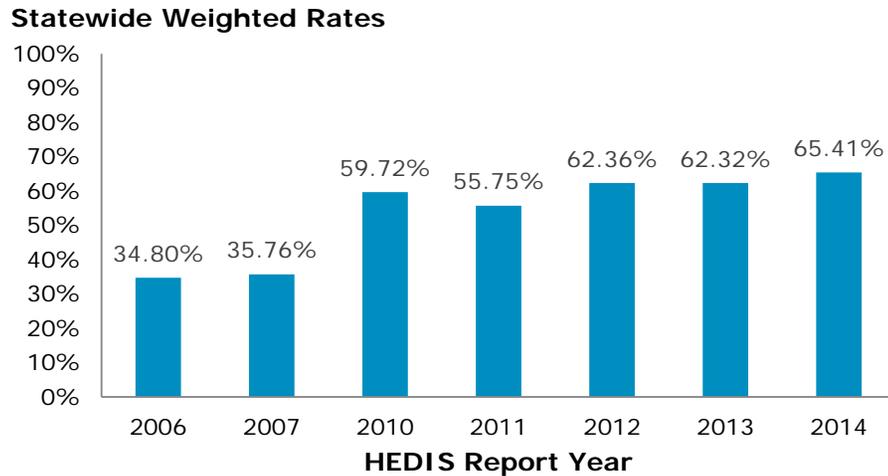


Fig. 113. Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)

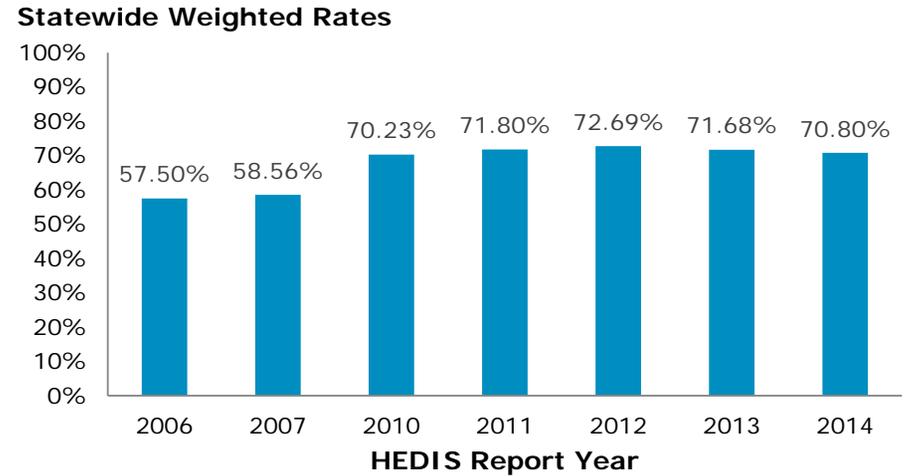
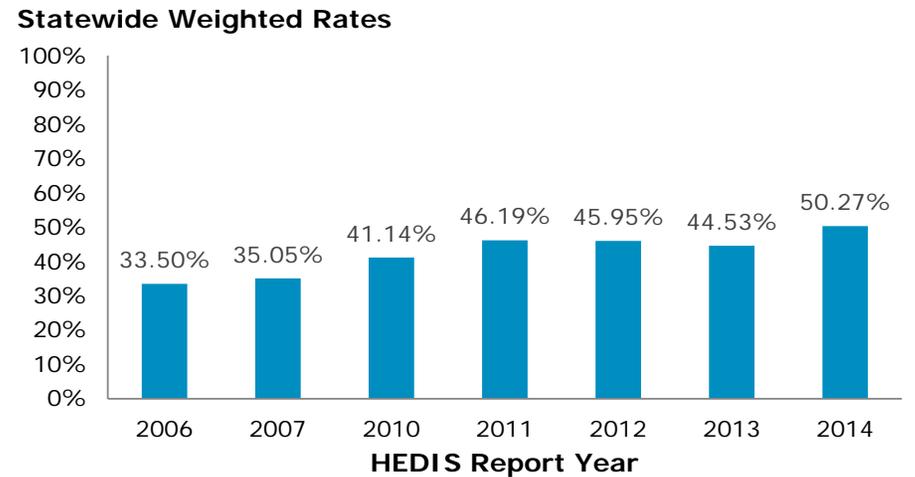


Fig. 114. Adolescent Well-Care Visits (AWC)



APPENDIX A | 2014 HEDIS Additional Measures, Rates and Benchmarks

Utilization Measures

Added Initially in 2009 Reporting

Frequency of Selected Procedure (FSP)

This measure summarized the utilization of frequently performed procedures that often show wide regional variation and have generated concern regarding potentially inappropriate utilization.

Ambulatory Care (AMB)

This measure summarizes utilization of ambulatory care in the following categories:

- ◆ Outpatient Visits
- ◆ Emergency Department (ED) Visits

Inpatient Utilization – General Hospital/Acute Care (IPU)

This measure summarizes utilization of acute inpatient (IP) care and services in the following categories:

- ◆ Total IP
- ◆ Surgery
- ◆ Medicine
- ◆ Maternity

Identification of Alcohol and Other Drug Services (IAD)

This measure summarizes the number and percentage of members with an alcohol and drug (AOD) claim who received the following chemical dependency services during the measurement year:

- ◆ Any services
- ◆ Intensive outpatient or partial hospitalization
- ◆ IP
- ◆ Outpatient or ED

Mental Health Utilization (MPT)

The number and percentage of members receiving the following mental health services during the measurement year:

- ◆ Any services
- ◆ Intensive outpatient or partial hospitalization
- ◆ IP
- ◆ Outpatient or ED

Antibiotic Utilization (ABX)

This measure summarizes the following data on outpatient utilization of antibiotic prescriptions during the measurement year, stratified by age and gender:

- ◆ Average number of antibiotic prescription per member per year (PMPY)
- ◆ Average days supplied per antibiotic prescription
- ◆ Average number of prescription PMPY for antibiotic of concern
- ◆ Percentage of antibiotic of concern for all antibiotic prescriptions
- ◆ Average number of antibiotics PMPY reported by drug class:
 - For selected 'antibiotics of concern'
 - For all other antibiotics

Utilization Measures: Plan-Specific Rates/National Benchmarks

In Table A, cells are shaded gray for those measures where age and/or sex segregation data were not available, and 'NA' is used for Not Applicable.

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Frequency of Ongoing Prenatal Care (FPC):														
<21%	NA	4.63%	2.50%	9.76%	8.78%	5.21%	10.76%	10.95%	12.32%	2.32%	4.24%	8.27%	13.83%	27.39%
21–40%	NA	3.01%	4.72%	9.51%	7.63%	7.29%	5.13%	8.03%	5.94%	1.64%	2.78%	4.25%	6.56%	12.27%
41–60%	NA	9.26%	5.83%	11.95%	17.18%	6.51%	8.31%	15.33%	7.68%	3.89%	4.92%	6.83%	9.51%	12.99%
61–80%	NA	12.96%	11.67%	17.07%	24.81%	12.76%	14.43%	18.25%	13.62%	7.55%	10.55%	13.53%	16.31%	20.77%
≥81%	NA	70.14%	75.28%	51.71%	41.60%	68.23%	61.37%	47.45%	60.45%	36.25%	50.97%	64.70%	73.97%	80.12%
Well-Child Visits in the First 15 Months of Life (W15):														
0 Visits	NA	1.39%	0.28%	1.46%	3.41%	1.17%	1.35%	1.22%	1.80%	0.29%	0.73%	1.22%	2.13%	3.55%
1 Visits	NA	1.39%	1.13%	1.46%	2.68%	1.46%	0.00%	3.17%	1.81%	0.58%	1.01%	1.55%	2.26%	3.31%
2 Visits	NA	0.69%	1.41%	3.89%	6.08%	1.46%	1.08%	2.68%	2.91%	1.10%	2.03%	2.73%	3.64%	4.74%
3 Visits	NA	5.32%	7.06%	7.06%	8.27%	4.97%	4.31%	7.32%	5.01%	2.14%	3.58%	4.66%	6.12%	7.79%
4 Visits	NA	9.26%	6.78%	14.36%	15.82%	5.26%	5.93%	9.76%	8.98%	4.68%	6.70%	8.61%	10.95%	12.96%
5 Visits	NA	15.74%	13.56%	19.95%	18.25%	11.70%	11.86%	18.54%	15.51%	9.15%	12.24%	15.34%	18.73%	21.65%
6 or More Visits	NA	66.20%	69.77%	51.82%	45.50%	73.98%	75.47%	57.32%	63.65%	49.70%	55.95%	65.16%	70.90%	77.44%
Frequency of Selected Procedures (FSP)														
Bariatric weight loss surgery: Procedures /1,000 Member Years														
0–19	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
20–44		0.00	0.00	0.00	0.00	0.01	0.01	0.00	0.03	0.00	0.00	0.01	0.04	0.07
45–64		0.01	0.00	0.00	0.00	0.00	0.04	0.00	0.03	0.00	0.00	0.00	0.04	0.07
0–19	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
20–44		0.01	0.01	0.00	0.00	0.06	0.06	0.01	0.10	0.00	0.02	0.07	0.15	0.24
45–64		0.06	0.02	0.00	0.00	0.06	0.08	0.01	0.11	0.00	0.00	0.08	0.16	0.26
Tonsillectomy: Procedures /1,000 Member Years														
0–9	M&F	0.94	1.27	0.64	1.04	1.22	0.99	0.66	0.73	0.26	0.51	0.74	0.93	1.16
10–19		0.45	0.58	0.28	0.27	0.54	0.47	0.34	0.35	0.11	0.22	0.35	0.48	0.59

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Hysterectomy—Abdominal (A) and Vaginal (V): Procedures /1,000 Member Years														
A 15–44	F	0.16	0.15	0.15	0.03	0.20	0.30	0.15	0.19	0.06	0.14	0.18	0.24	0.32
A 45–64		0.31	0.23	0.28	0.00	0.23	0.36	0.34	0.37	0.21	0.27	0.35	0.45	0.59
V 15–44	F	0.26	0.32	0.06	0.00	0.41	0.22	0.10	0.18	0.03	0.09	0.16	0.24	0.31
V 45–64		0.19	0.33	0.09	0.00	0.22	0.22	0.09	0.22	0.05	0.12	0.19	0.29	0.41
Cholecystectomy—Open (O) and Closed (C)/Laparoscopic: Procedures /1,000 Member Years														
O 30–64	M	0.03	0.03	0.01	0.53	0.05	0.03	0.06	0.04	0.00	0.00	0.03	0.06	0.08
O 15–44	F	0.01	0.01	0.02	0.01	0.02	0.01	0.02	0.02	0.00	0.01	0.01	0.02	0.03
O 45–64		0.05	0.03	0.03	0.32	0.07	0.07	0.07	0.05	0.00	0.01	0.05	0.08	0.11
C 30–64	M	0.51	0.53	0.29	1.06	0.64	0.41	0.22	0.35	0.16	0.22	0.30	0.41	0.55
C 15–44	F	0.93	1.04	0.60	1.27	1.14	1.13	0.52	0.79	0.44	0.58	0.78	0.95	1.21
C 45–64		0.89	1.03	0.52	3.19	0.77	0.86	0.60	0.72	0.39	0.55	0.72	0.86	1.09
Back Surgery: Procedures /1,000 Member Years														
20–44	M	0.40	0.46	0.24	0.05	0.50	0.49	0.31	0.34	0.07	0.17	0.30	0.45	0.61
	F	0.36	0.29	0.11	0.00	0.34	0.44	0.09	0.31	0.07	0.12	0.19	0.29	0.38
45–64	M	0.83	0.78	0.49	0.00	0.90	1.39	0.29	0.66	0.19	0.36	0.59	0.91	1.10
	F	0.90	0.70	0.40	0.32	0.94	1.32	0.44	0.62	0.26	0.37	0.57	0.80	0.95
Mastectomy: Procedures /1,000 Member Years														
15–44	F	0.02	0.04	0.03	0.04	0.03	0.05	0.02	0.03	0.00	0.01	0.02	0.04	0.05
45–64		0.40	0.68	0.59	0.00	0.27	0.63	0.19	0.19	0.00	0.09	0.14	0.23	0.37
Lumpectomy: Procedures /1,000 Member Years														
15–44	F	0.18	0.18	0.14	0.04	0.14	0.17	0.13	0.15	0.09	0.12	0.15	0.18	0.22
45–64		0.65	0.68	1.11	0.00	0.39	0.99	0.47	0.48	0.25	0.35	0.43	0.55	0.74
Ambulatory Care: Total (AMB)														
Outpatient Visits: Visits/1,000 Member Months														
<1	NA	792.71	830.53	701.45	815.15	715.98	748.36	636.52						
1–9	NA	315.20	331.34	302.89	363.72	280.16	318.40	265.27						
10–19	NA	249.28	278.98	234.92	250.59	230.75	245.24	196.63						
20–44	NA	385.23	417.33	381.54	225.33	374.92	469.39	338.57						
45–64	NA	722.46	766.73	670.18	353.59	683.46	851.54	599.31						
65–74	NA	536.89	433.88	471.30	750.00	823.91	870.86	660.60						
75–84	NA	357.95	163.77	208.71	0.00	718.96	612.50	536.15						
≥85	NA	267.07	76.19	58.93	0.00	530.58	356.46	378.25						
Total	NA	369.68	404.12	349.61	306.91	366.06	409.59	314.44	376.06	267.87	318.74	361.58	410.96	469.74

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
ED Visits: Visits/1,000 Member Months														
<1	NA	96.45	119.13	115.86	77.72	124.46	94.44	113.20						
1-9	NA	52.29	69.33	55.62	50.59	67.58	55.03	54.10						
10-19	NA	48.57	64.40	42.43	45.63	64.70	52.61	43.13						
20-44	NA	123.00	138.96	107.24	75.64	141.81	135.07	109.99						
45-64	NA	101.43	113.12	98.43	61.25	117.96	114.78	100.45						
65-74	NA	47.12	51.88	48.18	164.29	83.62	78.28	69.80						
75-84	NA	29.74	5.80	13.51	142.86	73.50	67.29	46.69						
≥85	NA	31.71	8.33	0.00	0.00	51.31	40.80	36.95						
Total	NA	75.25	93.20	71.55	50.19	93.92	82.27	72.52	65.58	44.56	53.98	65.65	75.53	85.99
Inpatient Utilization—General Hospital/Acute Care: Total (IPU)														
Total Inpatient														
Discharges: Discharges/1,000 Member Months														
<1	NA	10.18	9.30	9.06	26.56	10.64	8.57	8.90						
1-9	NA	1.22	1.45	1.48	7.31	1.22	1.25	1.30						
10-19	NA	3.03	3.02	2.85	4.72	3.08	3.13	3.03						
20-44	NA	16.35	16.63	15.13	22.77	15.38	18.17	15.39						
45-64	NA	27.10	23.61	24.35	33.08	25.15	27.96	23.86						
65-74	NA	18.15	19.84	20.53	321.43	33.72	33.76	27.47						
75-84	NA	17.44	2.90	18.02	685.71	34.22	33.83	34.05						
≥85	NA	8.54	7.14	6.93	900.00	35.32	24.12	29.56						
Total	NA	7.95	8.40	7.49	7.72	9.14	9.08	8.02	8.75	5.88	6.79	7.84	9.05	11.30
Days: Days/1,000 Member Months														
<1	NA	69.28	64.68	59.62	399.65	94.40	56.84	84.38						
1-9	NA	3.98	4.52	5.48	46.13	4.02	3.55	4.43						
10-19	NA	9.00	9.79	8.51	27.01	9.31	10.32	10.80						
20-44	NA	51.25	54.42	51.20	97.62	52.70	54.69	50.62						
45-64	NA	137.55	124.60	159.77	210.61	124.98	125.10	137.86						
65-74	NA	101.97	163.78	173.02	1757.14	160.85	166.49	142.56						
75-84	NA	82.05	60.87	150.15	4428.57	153.03	143.88	194.67						
≥85	NA	69.51	88.10	140.38	4400.00	172.52	96.78	140.39						
Total	NA	30.63	33.46	32.20	50.85	38.67	33.06	34.65	35.23	20.43	22.82	28.28	35.08	46.07

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Length of Stay: Average # of Days														
<1	NA	6.80	6.96	6.58	15.05	8.87	6.63	9.48						
1-9	NA	3.27	3.12	3.70	6.31	3.29	2.84	3.41						
10-19	NA	2.97	3.25	2.99	5.72	3.03	3.30	3.57						
20-44	NA	3.14	3.27	3.38	4.29	3.43	3.01	3.29						
45-64	NA	5.08	5.28	6.56	6.37	4.97	4.47	5.78						
65-74	NA	5.62	8.26	8.43	5.47	4.77	4.93	5.19						
75-84	NA	4.71	21.00	8.33	6.46	4.47	4.25	5.72						
≥85	NA	8.14	12.33	20.25	4.89	4.88	4.01	4.75						
Unknown	NA	NA	NA	NA	NA	NA	NA	NA						
Total	NA	3.85	3.98	4.30	6.59	4.23	3.64	4.32	3.77	2.98	3.35	3.70	4.06	4.43
Medicine														
Discharges: Discharges/1,000 Member Months														
<1	NA	8.32	8.15	7.72	19.99	9.02	7.20	6.31						
1-9	NA	0.87	1.26	1.25	5.83	0.92	0.93	0.97						
10-19	NA	0.80	0.82	0.75	3.27	0.83	0.79	0.67						
20-44	NA	3.32	4.20	3.75	10.71	4.13	3.85	3.64						
45-64	NA	18.00	18.40	19.08	22.93	16.64	18.28	15.48						
65-74	NA	11.97	15.26	17.60	207.14	24.90	23.45	17.88						
75-84	NA	13.33	2.90	13.51	371.43	25.81	25.53	27.30						
≥85	NA	4.88	5.95	6.93	900.00	28.63	20.25	23.22						
Total	NA	3.13	3.85	3.37	5.38	4.39	3.68	3.27	4.19	1.66	2.57	3.32	4.30	6.05
Days: Days/1,000 Member Months														
<1	NA	38.30	52.36	33.12	180.38	73.65	42.49	26.12						
1-9	NA	1.99	3.70	3.95	31.12	2.33	2.04	2.58						
10-19	NA	2.42	2.96	2.40	18.03	2.41	2.66	2.22						
20-44	NA	11.30	18.72	18.14	49.19	15.07	12.17	12.56						
45-64	NA	69.92	89.38	110.10	111.86	63.88	63.59	66.37						
65-74	NA	52.53	116.48	137.83	814.29	97.35	92.93	72.30						
75-84	NA	54.36	60.87	90.09	2628.57	101.78	90.81	135.18						
≥85	NA	28.05	82.14	140.38	4400.00	126.79	82.19	95.36						
Total	NA	11.36	17.87	16.42	30.43	17.74	13.02	12.49	16.20	5.40	9.02	11.82	15.68	22.11

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Length of Stay: Average # of Days														
<1	NA	4.61	6.42	4.29	9.02	8.17	5.90	4.14						
1-9	NA	2.28	2.93	3.17	5.34	2.55	2.20	2.65						
10-19	NA	3.00	3.63	3.19	5.51	2.89	3.37	3.31						
20-44	NA	3.41	4.46	4.83	4.59	3.65	3.16	3.45						
45-64	NA	3.88	4.86	5.77	4.88	3.84	3.48	4.29						
65-74	NA	4.39	7.63	7.83	3.93	3.91	3.96	4.04						
75-84	NA	4.08	21.00	6.67	7.08	3.94	3.56	4.95						
≥85	NA	5.75	13.80	20.25	4.89	4.43	4.06	4.11						
Unknown	NA	NA	NA	NA	NA	NA	NA	NA						
Total	NA	3.63	4.64	4.88	5.65	4.04	3.54	3.82	3.59	2.95	3.25	3.57	3.80	4.20
Surgery														
Discharges: Discharges/1,000 Member Months														
<1	NA	1.87	1.13	1.34	6.57	1.50	1.30	2.57						
1-9	NA	0.35	0.19	0.23	1.48	0.29	0.32	0.33						
10-19	NA	0.46	0.32	0.35	0.79	0.44	0.46	0.47						
20-44	NA	2.12	1.56	1.15	4.57	2.29	2.32	1.79						
45-64	NA	9.05	5.20	5.24	10.15	8.35	9.60	8.32						
65-74	NA	6.18	4.58	2.93	114.29	8.47	10.26	9.60						
75-84	NA	4.10	0.00	4.50	314.29	8.05	8.30	6.74						
≥85	NA	3.66	1.19	0.00	0.00	6.51	3.87	6.33						
Total	NA	1.55	1.10	0.92	1.56	1.98	1.80	1.61	1.67	0.78	0.99	1.38	1.71	2.81
Days: Days/1,000 Member Months														
<1	NA	30.98	12.31	26.51	219.27	20.43	14.24	58.21						
1-9	NA	1.99	0.82	1.53	15.01	1.65	1.50	1.85						
10-19	NA	2.04	1.73	1.67	7.13	2.20	2.59	3.36						
20-44	NA	11.09	8.72	7.32	31.71	14.28	11.43	13.12						
45-64	NA	67.51	35.19	49.62	98.76	60.16	61.26	71.32						
65-74	NA	49.44	47.30	35.19	942.86	62.56	73.39	70.26						
75-84	NA	27.69	0.00	60.06	1800.00	49.95	53.08	59.50						
≥85	NA	41.46	5.95	0.00	0.00	45.18	14.59	45.04						
Total	NA	10.66	6.94	7.71	18.49	13.64	10.65	14.15	11.48	4.11	5.72	8.31	11.75	18.01

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Length of Stay: Average # of Days														
<1	NA	16.59	10.86	19.74	33.36	13.61	10.92	22.69						
1-9	NA	5.77	4.39	6.58	10.11	5.68	4.64	5.66						
10-19	NA	4.42	5.39	4.72	9.09	5.00	5.63	7.10						
20-44	NA	5.24	5.60	6.38	6.94	6.24	4.93	7.34						
45-64	NA	7.46	6.77	9.47	9.73	7.20	6.38	8.57						
65-74	NA	8.00	10.33	12.00	8.25	7.39	7.15	7.32						
75-84	NA	6.75	NA	13.33	5.73	6.21	6.39	8.83						
≥85	NA	11.33	5.00	NA	NA	6.94	3.77	7.11						
Total	NA	6.86	6.29	8.38	11.84	6.90	5.93	8.79	6.34	4.37	5.23	6.42	7.12	8.18
Maternity (calculated using member months for members 10-64 years)														
Discharges: Discharges/1,000 Member Months														
10-19	NA	1.77	1.88	1.74	0.67	1.80	1.88	1.88						
20-44	NA	10.91	10.88	10.23	7.49	8.96	12.00	9.97						
45-64	NA	0.05	0.01	0.03	0.00	0.16	0.08	0.06						
Total	NA	5.52	5.52	5.27	1.28	4.44	6.09	5.17	5.05	1.96	3.54	4.63	6.46	8.53
Days: Days/1,000 Member Months														
10-19	NA	4.54	5.10	4.44	1.84	4.71	5.07	5.23						
20-44	NA	28.86	26.98	25.74	16.72	23.35	31.10	24.94						
45-64	NA	0.13	0.03	0.05	0.00	0.95	0.25	0.18						
Total	NA	14.54	13.87	13.29	3.17	11.67	15.88	13.16	13.11	4.58	9.50	11.90	16.37	23.11
Average Length of Stay: Average # of Days														
10-19	NA	2.57	2.71	2.55	2.76	2.61	2.69	2.78						
20-44	NA	2.64	2.48	2.52	2.23	2.61	2.59	2.50						
45-64	NA	2.86	2.33	1.75	NA	5.97	2.93	3.11						
Unknown	NA	NA	NA	NA	NA	NA	NA	NA						
Total	NA	2.63	2.51	2.52	2.48	2.63	2.61	2.55	2.66	2.32	2.47	2.63	2.74	2.95

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Identification of Alcohol and Other Drug Services: Total (IAD)														
Any Services														
0-12	M	0.04%	0.05%	0.05%	0.14%	0.05%	0.06%	0.03%						
	F	0.03%	0.06%	0.05%	0.13%	0.05%	0.05%	0.02%						
	M&F	0.03%	0.06%	0.05%	0.14%	0.05%	0.06%	0.03%						
13-17	M	2.06%	2.59%	2.03%	5.15%	2.19%	2.34%	1.80%						
	F	1.17%	1.44%	0.97%	5.11%	1.41%	1.27%	0.95%						
	M&F	1.61%	2.02%	1.50%	5.13%	1.80%	1.81%	1.36%						
18-24	M	5.20%	4.51%	3.86%	3.78%	5.99%	5.00%	4.75%						
	F	4.52%	7.16%	3.78%	3.42%	6.52%	5.14%	3.63%						
	M&F	4.73%	6.36%	3.81%	3.65%	6.33%	5.10%	3.97%						
25-34	M	9.33%	11.60%	10.96%	1.37%	11.30%	12.22%	11.15%						
	F	7.34%	12.38%	7.03%	2.47%	9.92%	10.38%	6.22%						
	M&F	7.75%	12.21%	7.59%	1.84%	10.25%	10.75%	6.99%						
35-64	M	13.86%	14.95%	15.82%	4.67%	15.13%	16.76%	16.58%						
	F	8.52%	11.31%	8.89%	4.75%	9.34%	13.70%	8.17%						
	M&F	10.43%	12.52%	10.76%	4.71%	11.63%	14.74%	11.06%						
≥65	M	3.81%	6.75%	8.38%	0.00%	6.28%	9.55%	9.77%						
	F	1.44%	2.47%	0.97%	0.00%	2.53%	6.02%	3.66%						
	M&F	2.46%	3.78%	3.31%	0.00%	3.77%	7.18%	5.50%						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	2.97%	3.60%	2.72%	2.25%	4.31%	3.72%	3.46%						
	F	3.31%	5.45%	3.43%	2.07%	4.42%	5.06%	3.11%						
	M&F	3.17%	4.67%	3.15%	2.18%	4.37%	4.50%	3.26%	4.59%	1.20%	2.26%	2.94%	5.65%	7.87%
Inpatient														
0-12	M	0.01%	0.00%	0.01%	0.04%	0.00%	0.01%	0.00%						
	F	0.00%	0.00%	0.01%	0.02%	0.00%	0.01%	0.00%						
	M&F	0.01%	0.00%	0.01%	0.03%	0.00%	0.01%	0.00%						
13-17	M	0.46%	0.46%	0.53%	0.83%	0.44%	0.46%	0.60%						
	F	0.38%	0.29%	0.29%	1.03%	0.36%	0.34%	0.48%						
	M&F	0.42%	0.38%	0.41%	0.90%	0.40%	0.40%	0.54%						

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
18–24	M	2.16%	0.97%	1.15%	1.20%	1.86%	2.04%	1.62%						
	F	1.77%	2.90%	1.05%	1.02%	2.95%	2.30%	1.18%						
	M&F	1.90%	2.32%	1.09%	1.13%	2.57%	2.22%	1.32%						
25–34	M	3.90%	2.80%	2.76%	0.46%	4.24%	4.22%	4.10%						
	F	2.89%	3.92%	1.61%	1.24%	3.74%	3.39%	1.88%						
	M&F	3.10%	3.67%	1.77%	0.79%	3.86%	3.56%	2.23%						
35–64	M	6.42%	4.69%	6.23%	1.65%	6.33%	6.57%	7.02%						
	F	2.97%	2.78%	2.30%	1.85%	3.10%	3.82%	2.58%						
	M&F	4.20%	3.41%	3.36%	1.75%	4.38%	4.75%	4.11%						
≥65	M	2.54%	2.25%	5.24%	0.00%	2.57%	3.67%	3.97%						
	F	0.48%	0.99%	0.00%	0.00%	0.88%	1.51%	1.08%						
	M&F	1.37%	1.37%	1.65%	0.00%	1.44%	2.22%	1.95%						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	1.26%	0.98%	0.92%	0.48%	1.64%	1.35%	1.37%						
	F	1.23%	1.62%	0.86%	0.49%	1.61%	1.59%	0.99%						
	M&F	1.24%	1.35%	0.89%	0.48%	1.62%	1.49%	1.15%	1.39%	0.36%	0.59%	0.94%	1.61%	2.36%
Intensive Outpatient/Partial Hospitalization														
0–12	M	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%						
	F	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%						
	M&F	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%						
13–17	M	1.03%	1.19%	0.65%	1.64%	0.58%	1.13%	0.29%						
	F	0.31%	0.58%	0.21%	2.12%	0.32%	0.30%	0.09%						
	M&F	0.67%	0.89%	0.43%	1.81%	0.45%	0.72%	0.19%						
18–24	M	1.04%	1.11%	0.72%	0.81%	0.68%	1.18%	0.38%						
	F	1.09%	1.71%	0.77%	0.71%	0.80%	0.97%	0.45%						
	M&F	1.08%	1.53%	0.75%	0.78%	0.76%	1.03%	0.43%						
25–34	M	1.59%	2.70%	1.57%	0.00%	0.91%	1.71%	0.87%						
	F	1.26%	2.85%	1.26%	0.00%	1.20%	1.40%	0.71%						
	M&F	1.33%	2.82%	1.31%	0.00%	1.13%	1.46%	0.73%						
35–64	M	1.11%	1.85%	1.32%	0.00%	0.51%	0.97%	0.79%						
	F	0.83%	1.68%	0.99%	0.00%	0.46%	0.74%	0.47%						
	M&F	0.93%	1.74%	1.08%	0.00%	0.48%	0.82%	0.58%						

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
≥65	M	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%						
	F	0.00%	0.00%	0.00%	0.00%	0.00%	0.06%	0.00%						
	M&F	0.00%	0.00%	0.00%	0.00%	0.00%	0.04%	0.00%						
Unknown	M	NA	NA	NA	NA	NA	NA	NA						
	F	NA	NA	NA	NA	NA	NA	NA						
	M&F	NA	NA	NA	NA	NA	NA	NA						
Total	M	0.46%	0.70%	0.37%	0.61%	0.29%	0.48%	0.22%						
	F	0.52%	1.10%	0.52%	0.67%	0.40%	0.51%	0.27%						
	M&F	0.49%	0.93%	0.46%	0.63%	0.35%	0.50%	0.25%	0.83%	0.00%	0.01%	0.08%	0.38%	0.70%
Outpatient/ED														
0–12	M	0.03%	0.05%	0.04%	0.11%	0.04%	0.06%	0.02%						
	F	0.02%	0.06%	0.03%	0.11%	0.05%	0.04%	0.02%						
	M&F	0.03%	0.05%	0.04%	0.11%	0.05%	0.05%	0.02%						
13–17	M	0.98%	1.63%	1.56%	3.68%	1.61%	1.31%	1.16%						
	F	0.70%	0.90%	0.64%	3.72%	1.00%	0.80%	0.53%						
	M&F	0.84%	1.27%	1.09%	3.69%	1.30%	1.06%	0.83%						
18–24	M	3.17%	3.37%	2.94%	2.64%	4.69%	3.15%	3.29%						
	F	2.90%	4.43%	2.83%	2.36%	4.36%	3.37%	2.50%						
	M&F	2.99%	4.11%	2.86%	2.54%	4.48%	3.30%	2.74%						
25–34	M	6.80%	8.54%	9.04%	1.37%	8.30%	9.35%	8.06%						
	F	5.47%	9.04%	5.62%	1.24%	7.24%	8.12%	4.74%						
	M&F	5.75%	8.93%	6.11%	1.31%	7.49%	8.37%	5.26%						
35–64	M	10.30%	11.47%	12.51%	3.85%	11.57%	13.06%	12.85%						
	F	6.38%	9.06%	7.56%	3.43%	7.46%	11.33%	6.43%						
	M&F	7.79%	9.86%	8.90%	3.64%	9.09%	11.92%	8.64%						
≥65	M	1.27%	4.50%	5.24%	0.00%	4.21%	6.73%	7.28%						
	F	1.44%	1.98%	0.97%	0.00%	1.76%	5.00%	2.94%						
	M&F	1.37%	2.75%	2.31%	0.00%	2.57%	5.57%	4.25%						
Unknown	M	NA	NA	NA	NA	NA	NA	NA						
	F	NA	NA	NA	NA	NA	NA	NA						
	M&F	NA	NA	NA	NA	NA	NA	NA						
Total	M	2.06%	2.68%	2.15%	1.61%	3.27%	2.75%	2.59%						
	F	2.39%	4.02%	2.78%	1.49%	3.31%	3.98%	2.35%						
	M&F	2.25%	3.46%	2.53%	1.57%	3.29%	3.46%	2.45%	‡‡	0.99%	1.98%	2.77%	5.76%	8.18%

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Mental Health Utilization: Total (MPT)														
Any Services														
0-12	M	8.25%	11.33%	5.98%	24.85%	8.30%	7.80%	4.81%						
	F	4.83%	7.48%	3.71%	18.60%	5.16%	4.47%	2.71%						
	M&F	6.57%	9.45%	4.85%	22.38%	6.76%	6.15%	3.77%						
13-17	M	12.71%	17.68%	9.90%	38.87%	13.82%	12.30%	8.19%						
	F	12.85%	17.98%	9.74%	39.64%	13.97%	11.82%	7.00%						
	M&F	12.78%	17.83%	9.82%	39.15%	13.89%	12.06%	7.58%						
18-64	M	15.02%	15.77%	12.30%	20.67%	16.19%	13.35%	12.79%						
	F	16.51%	19.62%	11.95%	21.38%	18.66%	15.39%	9.73%						
	M&F	16.06%	18.50%	12.04%	20.94%	17.81%	14.80%	10.58%						
≥65	M	15.89%	30.37%	16.75%	19.05%	6.28%	5.75%	3.97%						
	F	32.21%	31.67%	17.40%	12.00%	9.92%	9.45%	5.59%						
	M&F	25.18%	31.27%	17.19%	14.72%	8.72%	8.23%	5.10%						
Unknown	M	NA	NA	NA	NA	NA	NA	NA						
	F	NA	NA	NA	NA	NA	NA	NA						
	M&F	NA	NA	NA	NA	NA	NA	NA						
Total	M	10.69%	13.58%	8.08%	28.20%	11.59%	9.89%	7.45%						
	F	11.13%	14.71%	8.43%	24.74%	12.69%	10.41%	6.61%						
	M&F	10.94%	14.23%	8.29%	26.87%	12.21%	10.19%	6.96%	11.90%	4.02%	7.20%	10.83%	14.96%	22.03%
Inpatient														
0-12	M	0.09%	0.10%	0.13%	1.11%	0.10%	0.12%	0.08%						
	F	0.06%	0.09%	0.08%	0.63%	0.08%	0.05%	0.09%						
	M&F	0.07%	0.10%	0.10%	0.92%	0.09%	0.09%	0.09%						
13-17	M	0.93%	0.85%	0.83%	2.81%	0.92%	0.98%	0.99%						
	F	1.35%	1.11%	1.11%	4.17%	1.28%	1.29%	1.33%						
	M&F	1.14%	0.98%	0.98%	3.30%	1.10%	1.13%	1.16%						
18-64	M	2.39%	1.47%	1.95%	2.44%	2.45%	2.31%	2.94%						
	F	1.61%	1.44%	1.21%	2.79%	1.83%	1.81%	1.49%						
	M&F	1.84%	1.45%	1.38%	2.57%	2.04%	1.96%	1.89%						
≥65	M	13.35%	25.87%	12.57%	19.05%	1.50%	1.35%	0.83%						
	F	26.44%	27.71%	9.67%	0.00%	1.93%	2.47%	2.44%						
	M&F	20.80%	27.15%	10.58%	7.36%	1.79%	2.10%	1.95%						

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Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.84%	0.63%	0.68%	1.85%	1.00%	0.83%	0.99%						
	F	0.97%	0.93%	0.77%	1.96%	1.10%	1.04%	0.94%						
	M&F	0.91%	0.80%	0.73%	1.89%	1.05%	0.95%	0.96%	0.97%	0.36%	0.57%	0.86%	1.19%	1.36%
Intensive Outpatient/Partial Hospitalization														
0-12	M	0.02%	0.03%	0.05%	0.18%	0.02%	0.00%	0.08%						
	F	0.00%	0.01%	0.03%	0.08%	0.02%	0.00%	0.04%						
	M&F	0.01%	0.02%	0.04%	0.14%	0.02%	0.00%	0.06%						
13-17	M	0.12%	0.34%	0.22%	0.62%	0.25%	0.05%	0.26%						
	F	0.01%	0.17%	0.40%	1.03%	0.24%	0.01%	0.34%						
	M&F	0.06%	0.26%	0.31%	0.77%	0.25%	0.03%	0.30%						
18-64	M	0.12%	0.13%	0.17%	0.50%	0.09%	0.03%	0.18%						
	F	0.11%	0.17%	0.22%	0.52%	0.15%	0.06%	0.29%						
	M&F	0.11%	0.16%	0.21%	0.51%	0.13%	0.05%	0.25%						
≥65	M	0.00%	1.12%	0.00%	19.05%	0.00%	0.00%	0.00%						
	F	0.00%	0.49%	0.00%	0.00%	0.00%	0.00%	0.07%						
	M&F	0.00%	0.69%	0.00%	7.36%	0.00%	0.00%	0.05%						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.06%	0.11%	0.11%	0.37%	0.07%	0.02%	0.13%						
	F	0.05%	0.11%	0.17%	0.41%	0.10%	0.03%	0.19%						
	M&F	0.05%	0.11%	0.14%	0.39%	0.09%	0.02%	0.17%	3.61%	0.00%	0.02%	0.12%	0.40%	1.77%
Outpatient/ED														
0-12	M	8.24%	9.29%	5.24%	20.85%	8.29%	7.79%	4.79%						
	F	4.83%	5.82%	3.13%	14.07%	5.15%	4.47%	2.69%						
	M&F	6.56%	7.60%	4.20%	18.17%	6.75%	6.15%	3.75%						
13-17	M	12.50%	14.87%	8.43%	33.79%	13.62%	12.13%	7.92%						
	F	12.65%	13.97%	8.02%	31.82%	13.75%	11.50%	6.67%						
	M&F	12.58%	14.43%	8.22%	33.07%	13.68%	11.82%	7.28%						
18-64	M	14.35%	12.99%	10.10%	17.48%	15.40%	12.52%	12.17%						
	F	16.11%	16.24%	10.00%	18.56%	18.15%	14.87%	9.33%						
	M&F	15.58%	15.30%	10.02%	17.89%	17.20%	14.19%	10.12%						

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
≥65	M	3.18%	4.50%	5.24%	19.05%	4.92%	4.53%	3.64%						
	F	7.21%	3.46%	8.22%	12.00%	8.41%	7.65%	3.80%						
	M&F	5.47%	3.78%	7.27%	14.72%	7.26%	6.62%	3.75%						
Unknown	M	NA	NA	NA	NA	NA	NA	NA						
	F	NA	NA	NA	NA	NA	NA	NA						
	M&F	NA	NA	NA	NA	NA	NA	NA						
Total	M	10.45%	11.19%	6.87%	24.02%	11.28%	9.63%	7.23%						
	F	10.87%	11.89%	7.03%	19.63%	12.37%	10.10%	6.35%						
	M&F	10.69%	11.60%	6.97%	22.34%	11.90%	9.90%	6.71%	11.57%	3.65%	6.88%	10.60%	14.77%	21.48%

Antibiotic Utilization: Total (ABX)

Antibiotic Utilization

Average Scripts PMPY for Antibiotics

0-9	M	1.26	1.58	1.16	1.39	1.37	1.28	1.00						
	F	1.29	1.61	1.17	1.58	1.40	1.34	1.00						
	M&F	1.27	1.60	1.17	1.47	1.39	1.31	1.00						
10-17	M	0.77	0.99	0.65	0.83	0.85	0.76	0.57						
	F	1.06	1.31	0.93	1.24	1.17	1.05	0.80						
	M&F	0.91	1.15	0.79	0.98	1.01	0.90	0.69						
18-34	M	0.92	0.98	0.81	0.79	0.84	0.88	0.73						
	F	2.00	2.02	2.04	1.58	1.81	1.90	1.70						
	M&F	1.71	1.75	1.77	1.08	1.52	1.64	1.47						
35-49	M	1.12	1.18	1.18	0.74	1.07	1.19	1.05						
	F	1.87	1.90	1.97	0.95	1.76	1.85	1.67						
	M&F	1.65	1.68	1.80	0.85	1.52	1.65	1.51						
50-64	M	1.25	1.17	1.20	1.00	1.10	1.30	1.11						
	F	1.77	1.78	1.77	0.80	1.78	1.92	1.69						
	M&F	1.53	1.55	1.55	0.90	1.47	1.67	1.42						
65-74	M	1.22	0.89	0.78	1.53	1.59	1.52	1.23						
	F	1.23	1.42	1.09	1.03	2.20	2.26	1.75						
	M&F	1.22	1.23	1.00	1.20	1.98	1.99	1.57						
75-84	M	0.72	0.33	0.48	0.00	1.62	1.23	1.26						
	F	1.15	0.57	1.37	0.00	2.13	1.93	1.30						
	M&F	0.97	0.50	1.06	0.00	1.98	1.72	1.29						

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
≥85	M	1.67	0.00	1.16	0.00	1.38	1.05	0.84						
	F	1.31	0.59	0.44	0.00	1.61	1.26	1.19						
	M&F	1.43	0.47	0.64	0.00	1.57	1.22	1.15						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	1.07	1.29	0.98	1.03	1.12	1.09	0.87	0.93	0.66	0.76	0.88	1.07	1.26
	F	1.54	1.73	1.53	1.43	1.56	1.55	1.30	1.29	0.91	1.06	1.25	1.41	1.69
	M&F	1.34	1.54	1.31	1.18	1.37	1.36	1.12	1.13	0.80	0.93	1.09	1.23	1.49
Average Days Supplied per Antibiotic Script														
0-9	M	9.27	9.19	9.32	10.50	9.10	9.31	9.24						
	F	9.43	9.31	9.38	10.94	9.23	9.41	9.28						
	M&F	9.35	9.25	9.35	10.69	9.17	9.36	9.26						
10-17	M	9.51	9.96	9.64	11.36	9.90	9.59	9.63						
	F	9.07	9.48	9.10	10.38	9.43	9.12	9.09						
	M&F	9.25	9.69	9.32	10.91	9.63	9.32	9.31						
18-34	M	9.46	9.52	9.06	12.41	9.54	9.46	9.41						
	F	8.15	8.38	7.94	10.09	8.35	8.25	7.89						
	M&F	8.34	8.54	8.05	11.16	8.55	8.41	8.07						
35-49	M	9.99	9.77	10.14	14.76	9.69	10.02	10.25						
	F	8.77	8.85	8.79	11.20	8.83	8.77	8.73						
	M&F	9.02	9.04	8.98	12.73	9.04	9.04	9.01						
50-64	M	10.06	9.89	10.73	9.97	9.89	9.89	10.27						
	F	8.88	8.84	9.08	11.70	8.92	9.11	8.97						
	M&F	9.33	9.14	9.57	10.76	9.25	9.36	9.45						
65-74	M	10.82	12.04	8.73	8.00	9.69	9.94	9.51						
	F	9.56	9.36	9.62	10.63	9.43	8.88	8.66						
	M&F	10.14	10.07	9.40	9.50	9.51	9.18	8.90						
75-84	M	8.83	11.80	6.11	NA	9.28	9.70	8.53						
	F	10.84	7.58	7.78	NA	10.29	9.74	8.11						
	M&F	10.23	8.31	7.53	NA	10.05	9.73	8.21						
≥85	M	7.85	NA	5.19	NA	8.35	10.80	7.48						
	F	7.21	9.18	6.07	NA	9.58	8.24	9.56						
	M&F	7.47	9.18	5.61	NA	9.38	8.68	9.38						

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Unknown	M	NA	NA	NA	NA	NA	NA	NA						
	F	NA	NA	NA	NA	NA	NA	NA						
	M&F	NA	NA	NA	NA	NA	NA	NA						
Total	M	9.44	9.46	9.48	11.07	9.43	9.48	9.49	9.70	9.22	9.37	9.62	10.01	10.31
	F	8.77	8.91	8.63	10.60	8.92	8.85	8.58	8.98	8.57	8.71	8.91	9.20	9.43
	M&F	9.00	9.11	8.89	10.85	9.10	9.06	8.87	9.24	8.85	8.97	9.16	9.47	9.76
Average Scripts PMPY for Antibiotics of Concern														
0-9	M	0.58	0.84	0.56	0.68	0.74	0.61	0.47						
	F	0.57	0.80	0.54	0.71	0.71	0.61	0.44						
	M&F	0.57	0.82	0.55	0.69	0.72	0.61	0.46						
10-17	M	0.35	0.50	0.32	0.37	0.43	0.38	0.28						
	F	0.46	0.61	0.42	0.53	0.56	0.49	0.35						
	M&F	0.41	0.55	0.37	0.43	0.50	0.43	0.31						
18-34	M	0.39	0.44	0.38	0.32	0.38	0.41	0.34						
	F	0.80	0.83	0.82	0.62	0.78	0.80	0.68						
	M&F	0.69	0.73	0.73	0.43	0.66	0.70	0.60						
35-49	M	0.53	0.59	0.58	0.24	0.54	0.63	0.54						
	F	0.88	0.97	0.95	0.38	0.92	0.94	0.80						
	M&F	0.77	0.85	0.87	0.31	0.78	0.84	0.73						
50-64	M	0.63	0.64	0.65	0.42	0.62	0.67	0.57						
	F	0.94	1.00	0.98	0.37	1.02	1.07	0.90						
	M&F	0.80	0.86	0.85	0.40	0.83	0.91	0.74						
65-74	M	0.51	0.54	0.35	1.28	0.93	0.82	0.68						
	F	0.63	0.85	0.76	0.52	1.28	1.26	0.93						
	M&F	0.57	0.73	0.63	0.77	1.15	1.10	0.84						
75-84	M	0.45	0.13	0.37	0.00	0.97	0.71	0.65						
	F	0.36	0.36	0.93	0.00	1.15	1.06	0.73						
	M&F	0.39	0.30	0.74	0.00	1.10	0.95	0.71						
≥85	M	0.67	0.00	0.36	0.00	0.91	0.68	0.44						
	F	0.65	0.30	0.20	0.00	0.90	0.71	0.59						
	M&F	0.66	0.24	0.25	0.00	0.90	0.70	0.57						
Unknown	M	NA	NA	NA	NA	NA	NA	NA						
	F	NA	NA	NA	NA	NA	NA	NA						
	M&F	NA	NA	NA	NA	NA	NA	NA						

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Total	M	0.50	0.66	0.47	0.48	0.59	0.53	0.42	0.41	0.25	0.31	0.38	0.47	0.60
	F	0.67	0.81	0.68	0.62	0.76	0.72	0.57	0.54	0.35	0.43	0.50	0.59	0.73
	M&F	0.59	0.75	0.60	0.53	0.69	0.64	0.51	0.48	0.30	0.38	0.45	0.54	0.67
Percentage of Antibiotics of Concern of All Antibiotic Scripts														
0-9	M	46.16%	52.82%	48.02%	49.05%	53.77%	47.72%	47.11%						
	F	43.94%	49.51%	45.94%	44.77%	50.31%	45.51%	44.08%						
	M&F	45.06%	51.19%	46.99%	47.15%	52.06%	46.60%	45.61%						
10-17	M	46.19%	49.95%	49.04%	44.56%	50.93%	49.96%	48.43%						
	F	43.62%	46.57%	45.48%	42.90%	47.94%	46.41%	43.92%						
	M&F	44.69%	48.05%	46.92%	43.80%	49.19%	47.93%	45.76%						
18-34	M	42.79%	45.18%	47.29%	40.27%	45.32%	46.58%	46.71%						
	F	39.87%	40.90%	40.35%	39.46%	42.95%	42.04%	40.03%						
	M&F	40.28%	41.52%	41.04%	39.83%	43.34%	42.65%	40.80%						
35-49	M	47.79%	49.76%	49.44%	32.14%	50.50%	52.68%	51.05%						
	F	46.89%	50.97%	48.04%	39.67%	52.11%	50.70%	47.49%						
	M&F	47.07%	50.71%	48.23%	36.42%	51.71%	51.13%	48.15%						
50-64	M	50.53%	54.30%	54.09%	41.90%	55.78%	51.40%	51.49%						
	F	53.15%	56.36%	55.26%	46.36%	57.11%	55.71%	53.02%						
	M&F	52.15%	55.78%	54.92%	43.94%	56.65%	54.33%	52.45%						
65-74	M	41.80%	60.38%	44.90%	83.33%	58.82%	53.73%	55.23%						
	F	51.41%	59.46%	69.13%	50.00%	58.00%	55.68%	52.90%						
	M&F	46.97%	59.70%	63.13%	64.29%	58.24%	55.13%	53.55%						
75-84	M	62.50%	40.00%	77.78%	NA	60.04%	57.79%	51.25%						
	F	30.91%	62.50%	68.00%	NA	53.88%	54.80%	56.16%						
	M&F	40.51%	58.62%	69.49%	NA	55.36%	55.44%	54.93%						
≥85	M	40.00%	NA	31.25%	NA	65.49%	64.41%	52.17%						
	F	50.00%	51.52%	46.67%	NA	55.74%	55.83%	49.20%						
	M&F	45.92%	51.52%	38.71%	NA	57.30%	57.31%	49.45%						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	46.15%	51.26%	48.56%	46.21%	52.35%	48.73%	48.06%	43.94%	36.89%	40.06%	44.27%	47.93%	50.47%
	F	43.28%	46.84%	44.46%	43.18%	48.82%	46.10%	43.72%	41.43%	35.05%	38.54%	41.09%	44.92%	47.88%
	M&F	44.27%	48.39%	45.69%	44.81%	50.08%	46.99%	45.09%	42.08%	35.76%	39.02%	42.37%	45.94%	48.33%

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Antibiotics of Concern Utilization														
Average Scripts PMPY for Quinolones														
0-9	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
10-17	M	0.01	0.01	0.01	0.02	0.01	0.01	0.01						
	F	0.03	0.03	0.02	0.04	0.03	0.02	0.02						
	M&F	0.02	0.02	0.01	0.03	0.02	0.01	0.01						
18-34	M	0.08	0.08	0.08	0.06	0.06	0.07	0.06						
	F	0.21	0.18	0.20	0.13	0.17	0.18	0.16						
	M&F	0.17	0.15	0.17	0.09	0.14	0.15	0.14						
35-49	M	0.16	0.15	0.17	0.07	0.15	0.18	0.14						
	F	0.28	0.27	0.29	0.10	0.26	0.26	0.22						
	M&F	0.24	0.23	0.26	0.09	0.22	0.24	0.20						
50-64	M	0.26	0.21	0.25	0.17	0.23	0.26	0.21						
	F	0.39	0.35	0.39	0.15	0.35	0.40	0.32						
	M&F	0.33	0.30	0.34	0.16	0.30	0.35	0.26						
65-74	M	0.24	0.29	0.27	0.51	0.36	0.38	0.35						
	F	0.31	0.36	0.38	0.52	0.59	0.54	0.37						
	M&F	0.28	0.33	0.35	0.51	0.50	0.48	0.36						
75-84	M	0.21	0.07	0.21	0.00	0.46	0.42	0.32						
	F	0.21	0.24	0.27	0.00	0.55	0.52	0.36						
	M&F	0.21	0.19	0.25	0.00	0.52	0.49	0.35						
≥85	M	0.33	0.00	0.14	0.00	0.53	0.54	0.25						
	F	0.32	0.18	0.09	0.00	0.44	0.31	0.32						
	M&F	0.32	0.14	0.10	0.00	0.45	0.36	0.32						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.04	0.04	0.03	0.02	0.05	0.04	0.04	0.03	0.01	0.02	0.03	0.04	0.05
	F	0.12	0.12	0.12	0.05	0.13	0.12	0.10	0.09	0.05	0.06	0.07	0.09	0.12
	M&F	0.08	0.09	0.09	0.03	0.09	0.09	0.07	0.06	0.03	0.04	0.05	0.07	0.09

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Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Cephalosporins 2nd–4th Generation														
0–9	M	0.22	0.29	0.19	0.23	0.24	0.23	0.15						
	F	0.23	0.29	0.19	0.26	0.25	0.25	0.14						
	M&F	0.22	0.29	0.19	0.24	0.25	0.24	0.15						
10–17	M	0.07	0.10	0.06	0.08	0.08	0.08	0.05						
	F	0.09	0.13	0.08	0.12	0.12	0.11	0.06						
	M&F	0.08	0.12	0.07	0.09	0.10	0.09	0.05						
18–34	M	0.03	0.03	0.03	0.03	0.03	0.04	0.02						
	F	0.06	0.06	0.05	0.07	0.06	0.06	0.04						
	M&F	0.05	0.06	0.05	0.05	0.05	0.06	0.04						
35–49	M	0.04	0.04	0.04	0.02	0.03	0.05	0.03						
	F	0.07	0.08	0.06	0.04	0.07	0.08	0.05						
	M&F	0.06	0.06	0.05	0.03	0.06	0.07	0.05						
50–64	M	0.05	0.06	0.04	0.02	0.04	0.06	0.03						
	F	0.09	0.08	0.05	0.01	0.09	0.09	0.06						
	M&F	0.07	0.07	0.05	0.01	0.07	0.08	0.05						
65–74	M	0.03	0.03	0.00	0.00	0.10	0.10	0.04						
	F	0.03	0.05	0.03	0.00	0.13	0.13	0.07						
	M&F	0.03	0.04	0.02	0.00	0.12	0.12	0.06						
75–84	M	0.03	0.00	0.11	0.00	0.09	0.09	0.03						
	F	0.02	0.00	0.27	0.00	0.15	0.15	0.06						
	M&F	0.02	0.00	0.22	0.00	0.13	0.13	0.05						
≥85	M	0.00	0.00	0.14	0.00	0.07	0.02	0.07						
	F	0.11	0.04	0.06	0.00	0.19	0.14	0.06						
	M&F	0.07	0.03	0.08	0.00	0.17	0.11	0.06						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.13	0.17	0.12	0.13	0.13	0.14	0.09	0.07	0.02	0.03	0.05	0.09	0.15
	F	0.13	0.15	0.10	0.17	0.14	0.14	0.08	0.07	0.02	0.03	0.05	0.09	0.14
	M&F	0.13	0.16	0.11	0.14	0.13	0.14	0.08	0.07	0.02	0.03	0.05	0.09	0.14

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Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Azithromycins and Clarithromycins														
0-9	M	0.20	0.32	0.19	0.23	0.29	0.20	0.17						
	F	0.19	0.31	0.18	0.22	0.27	0.20	0.16						
	M&F	0.20	0.31	0.19	0.22	0.28	0.20	0.16						
10-17	M	0.17	0.24	0.15	0.15	0.22	0.18	0.13						
	F	0.22	0.29	0.20	0.21	0.27	0.22	0.17						
	M&F	0.19	0.26	0.17	0.18	0.25	0.20	0.15						
18-34	M	0.15	0.16	0.15	0.12	0.15	0.16	0.14						
	F	0.32	0.32	0.34	0.26	0.31	0.32	0.29						
	M&F	0.27	0.28	0.30	0.17	0.26	0.28	0.26						
35-49	M	0.17	0.19	0.19	0.05	0.17	0.21	0.18						
	F	0.31	0.34	0.34	0.12	0.33	0.34	0.30						
	M&F	0.27	0.29	0.31	0.08	0.27	0.30	0.27						
50-64	M	0.17	0.18	0.16	0.08	0.17	0.19	0.17						
	F	0.27	0.33	0.29	0.10	0.32	0.35	0.28						
	M&F	0.22	0.28	0.24	0.09	0.25	0.28	0.23						
65-74	M	0.13	0.10	0.05	0.00	0.27	0.19	0.13						
	F	0.20	0.30	0.18	0.00	0.35	0.35	0.29						
	M&F	0.17	0.23	0.14	0.00	0.32	0.29	0.24						
75-84	M	0.12	0.07	0.00	0.00	0.23	0.14	0.17						
	F	0.06	0.12	0.16	0.00	0.26	0.22	0.18						
	M&F	0.09	0.10	0.11	0.00	0.25	0.20	0.18						
≥85	M	0.04	0.00	0.00	0.00	0.17	0.09	0.00						
	F	0.14	0.04	0.03	0.00	0.17	0.18	0.11						
	M&F	0.10	0.03	0.02	0.00	0.17	0.16	0.10						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.18	0.26	0.17	0.17	0.23	0.19	0.15	0.19	0.12	0.14	0.19	0.23	0.25
	F	0.25	0.31	0.26	0.22	0.29	0.26	0.23	0.25	0.16	0.19	0.24	0.28	0.32
	M&F	0.22	0.29	0.22	0.19	0.27	0.23	0.20	0.22	0.14	0.18	0.22	0.25	0.28

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Amoxicillin/Clavulanates														
0-9	M	0.14	0.21	0.14	0.18	0.19	0.15	0.12						
	F	0.13	0.19	0.13	0.18	0.17	0.14	0.11						
	M&F	0.13	0.20	0.13	0.18	0.18	0.15	0.12						
10-17	M	0.08	0.12	0.07	0.08	0.10	0.09	0.06						
	F	0.09	0.13	0.08	0.10	0.11	0.10	0.07						
	M&F	0.09	0.12	0.07	0.09	0.11	0.09	0.06						
18-34	M	0.08	0.10	0.07	0.06	0.08	0.08	0.06						
	F	0.12	0.14	0.13	0.09	0.13	0.13	0.11						
	M&F	0.11	0.13	0.12	0.07	0.11	0.12	0.10						
35-49	M	0.10	0.12	0.11	0.05	0.10	0.10	0.11						
	F	0.14	0.17	0.17	0.08	0.16	0.15	0.14						
	M&F	0.13	0.16	0.15	0.07	0.14	0.14	0.13						
50-64	M	0.10	0.11	0.13	0.06	0.11	0.10	0.09						
	F	0.13	0.16	0.16	0.06	0.15	0.13	0.15						
	M&F	0.11	0.14	0.15	0.06	0.13	0.12	0.12						
65-74	M	0.06	0.08	0.02	0.77	0.16	0.10	0.10						
	F	0.07	0.11	0.12	0.00	0.15	0.14	0.14						
	M&F	0.06	0.10	0.09	0.26	0.15	0.12	0.13						
75-84	M	0.03	0.00	0.05	0.00	0.17	0.04	0.07						
	F	0.06	0.00	0.14	0.00	0.11	0.11	0.08						
	M&F	0.05	0.00	0.11	0.00	0.13	0.09	0.08						
≥85	M	0.21	0.00	0.07	0.00	0.11	0.04	0.11						
	F	0.09	0.05	0.03	0.00	0.08	0.04	0.07						
	M&F	0.13	0.04	0.04	0.00	0.08	0.04	0.07						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.11	0.16	0.11	0.12	0.14	0.12	0.10	0.09	0.05	0.07	0.09	0.12	0.14
	F	0.12	0.16	0.13	0.13	0.14	0.13	0.11	0.10	0.06	0.07	0.10	0.11	0.14
	M&F	0.12	0.16	0.12	0.12	0.14	0.13	0.10	0.10	0.06	0.07	0.09	0.11	0.14

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Ketolides														
0-9	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
10-17	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
18-34	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
35-49	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
50-64	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
65-74	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
75-84	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
≥85	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.00	0.00	0.00	0.00	0.00	0.00							
	F	0.00	0.00	0.00	0.00	0.00	0.00							
	M&F	0.00	0.00	0.00	0.00	0.00	0.00							

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Clindamycins														
0-9	M	0.02	0.02	0.04	0.03	0.01	0.02	0.03						
	F	0.02	0.01	0.04	0.04	0.01	0.02	0.03						
	M&F	0.02	0.02	0.04	0.03	0.01	0.02	0.03						
10-17	M	0.02	0.02	0.03	0.04	0.02	0.03	0.03						
	F	0.03	0.03	0.04	0.05	0.03	0.03	0.04						
	M&F	0.03	0.03	0.04	0.04	0.03	0.03	0.03						
18-34	M	0.05	0.08	0.05	0.04	0.06	0.06	0.05						
	F	0.09	0.11	0.10	0.06	0.11	0.10	0.08						
	M&F	0.08	0.10	0.09	0.05	0.09	0.09	0.07						
35-49	M	0.05	0.08	0.07	0.04	0.08	0.08	0.07						
	F	0.08	0.11	0.09	0.05	0.10	0.10	0.09						
	M&F	0.07	0.10	0.09	0.04	0.09	0.09	0.08						
50-64	M	0.05	0.07	0.06	0.08	0.06	0.05	0.06						
	F	0.06	0.07	0.08	0.06	0.09	0.08	0.08						
	M&F	0.05	0.07	0.07	0.07	0.08	0.07	0.07						
65-74	M	0.05	0.03	0.02	0.00	0.05	0.05	0.05						
	F	0.02	0.04	0.04	0.00	0.05	0.08	0.05						
	M&F	0.03	0.04	0.03	0.00	0.05	0.07	0.05						
75-84	M	0.06	0.00	0.00	0.00	0.04	0.02	0.06						
	F	0.00	0.00	0.00	0.00	0.05	0.05	0.05						
	M&F	0.02	0.00	0.00	0.00	0.04	0.04	0.05						
≥85	M	0.00	0.00	0.00	0.00	0.02	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.02	0.03	0.02						
	M&F	0.00	0.00	0.00	0.00	0.02	0.02	0.02						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.03	0.04	0.04	0.03	0.03	0.03	0.04	0.02	0.01	0.02	0.02	0.03	0.04
	F	0.05	0.06	0.07	0.05	0.06	0.06	0.06	0.04	0.02	0.03	0.04	0.05	0.06
	M&F	0.04	0.05	0.06	0.04	0.05	0.05	0.05	0.03	0.02	0.02	0.03	0.04	0.05

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Misc. Antibiotics of Concern														
0-9	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00					
10-17	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
18-34	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
35-49	M	0.01	0.01	0.00	0.01	0.01	0.01	0.01						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.01	0.00						
50-64	M	0.01	0.00	0.00	0.00	0.01	0.01	0.01						
	F	0.01	0.01	0.01	0.00	0.01	0.01	0.01						
	M&F	0.01	0.01	0.01	0.00	0.01	0.01	0.01						
65-74	M	0.00	0.00	0.00	0.00	0.00	0.01	0.00						
	F	0.01	0.00	0.00	0.00	0.01	0.01	0.00						
	M&F	0.00	0.00	0.00	0.00	0.01	0.01	0.00						
75-84	M	0.00	0.00	0.00	0.00	0.00	0.02	0.00						
	F	0.00	0.00	0.08	0.00	0.03	0.00	0.01						
	M&F	0.00	0.00	0.05	0.00	0.02	0.01	0.00						
≥85	M	0.08	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.03	0.00	0.00	0.00	0.00	0.00	0.00						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.00	0.00	0.00	0.00	0.00	0.00							
	F	0.00	0.00	0.00	0.00	0.00	0.00							
	M&F	0.00	0.00	0.00	0.00	0.00	0.00							

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
All Other Antibiotics Utilization														
Average Scripts PMPY for Absorbable Sulfonamides														
0-9	M	0.06	0.08	0.07	0.12	0.07	0.06	0.06						
	F	0.10	0.13	0.10	0.17	0.11	0.10	0.09						
	M&F	0.08	0.11	0.08	0.14	0.09	0.08	0.07						
10-17	M	0.07	0.08	0.05	0.09	0.07	0.05	0.04						
	F	0.14	0.14	0.10	0.18	0.12	0.11	0.09						
	M&F	0.11	0.11	0.08	0.12	0.10	0.08	0.07						
18-34	M	0.15	0.13	0.09	0.10	0.11	0.11	0.08						
	F	0.28	0.22	0.21	0.22	0.20	0.21	0.17						
	M&F	0.25	0.20	0.18	0.14	0.17	0.19	0.15						
35-49	M	0.20	0.17	0.17	0.10	0.15	0.16	0.13						
	F	0.29	0.22	0.21	0.10	0.20	0.22	0.17						
	M&F	0.26	0.21	0.20	0.10	0.18	0.20	0.16						
50-64	M	0.23	0.15	0.16	0.13	0.14	0.19	0.13						
	F	0.25	0.19	0.18	0.07	0.17	0.23	0.17						
	M&F	0.24	0.17	0.17	0.10	0.16	0.21	0.15						
65-74	M	0.15	0.08	0.06	0.00	0.18	0.19	0.10						
	F	0.13	0.13	0.10	0.26	0.21	0.27	0.17						
	M&F	0.14	0.12	0.09	0.17	0.20	0.24	0.14						
75-84	M	0.03	0.13	0.00	0.00	0.14	0.17	0.11						
	F	0.36	0.05	0.11	0.00	0.17	0.20	0.11						
	M&F	0.22	0.07	0.07	0.00	0.16	0.19	0.11						
≥85	M	0.29	0.00	0.36	0.00	0.06	0.20	0.18						
	F	0.18	0.05	0.03	0.00	0.16	0.11	0.12						
	M&F	0.22	0.04	0.12	0.00	0.15	0.13	0.13						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.09	0.10	0.08	0.10	0.09	0.08	0.07	0.06	0.04	0.04	0.06	0.07	0.09
	F	0.19	0.18	0.15	0.18	0.15	0.16	0.13	0.11	0.07	0.09	0.11	0.13	0.16
	M&F	0.15	0.14	0.12	0.13	0.13	0.12	0.10	0.09	0.06	0.07	0.09	0.10	0.13

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Aminoglycosides														
0-9	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
10-17	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
18-34	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
35-49	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
50-64	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.01	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
65-74	M	0.02	0.00	0.00	0.00	0.01	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.01	0.00	0.00	0.00	0.00	0.00	0.00						
75-84	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.02	0.00	0.00	0.00	0.01	0.02	0.00						
	M&F	0.01	0.00	0.00	0.00	0.00	0.02	0.00						
≥85	M	0.04	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.01	0.00	0.03						
	M&F	0.01	0.00	0.00	0.00	0.01	0.00	0.03						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	F	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	M&F	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for 1st Generation Cephalosporins														
0-9	M	0.06	0.06	0.05	0.05	0.05	0.06	0.04						
	F	0.07	0.08	0.06	0.07	0.07	0.07	0.04						
	M&F	0.06	0.07	0.06	0.06	0.06	0.06	0.04						
10-17	M	0.07	0.08	0.05	0.06	0.06	0.06	0.05						
	F	0.08	0.09	0.06	0.07	0.08	0.08	0.06						
	M&F	0.07	0.08	0.06	0.07	0.07	0.07	0.05						
18-34	M	0.09	0.09	0.07	0.06	0.07	0.09	0.07						
	F	0.14	0.16	0.13	0.12	0.13	0.14	0.11						
	M&F	0.13	0.14	0.12	0.08	0.12	0.13	0.10						
35-49	M	0.10	0.12	0.11	0.05	0.10	0.11	0.09						
	F	0.14	0.14	0.13	0.13	0.13	0.14	0.13						
	M&F	0.13	0.14	0.13	0.09	0.12	0.13	0.12						
50-64	M	0.12	0.11	0.09	0.08	0.10	0.12	0.11						
	F	0.15	0.14	0.14	0.05	0.14	0.17	0.15						
	M&F	0.13	0.13	0.12	0.06	0.12	0.15	0.13						
65-74	M	0.05	0.08	0.03	0.00	0.11	0.15	0.11						
	F	0.07	0.15	0.07	0.00	0.16	0.15	0.18						
	M&F	0.06	0.13	0.06	0.00	0.14	0.15	0.16						
75-84	M	0.00	0.00	0.00	0.00	0.21	0.12	0.16						
	F	0.04	0.02	0.14	0.00	0.18	0.18	0.19						
	M&F	0.02	0.02	0.09	0.00	0.19	0.16	0.18						
≥85	M	0.17	0.00	0.29	0.00	0.15	0.04	0.07						
	F	0.09	0.04	0.00	0.00	0.11	0.12	0.16						
	M&F	0.12	0.03	0.08	0.00	0.11	0.10	0.15						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.07	0.08	0.06	0.06	0.07	0.07	0.06	0.07	0.04	0.05	0.06	0.08	0.10
	F	0.10	0.12	0.10	0.08	0.10	0.11	0.08	0.09	0.06	0.07	0.09	0.11	0.14
	M&F	0.09	0.10	0.08	0.07	0.09	0.09	0.07	0.08	0.05	0.06	0.08	0.09	0.12

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Lincosamides														
0-9	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
10-17	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
18-34	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
35-49	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
50-64	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
65-74	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
75-84	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
≥85	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.00	0.00	0.00	0.00	0.00	0.00							
	F	0.00	0.00	0.00	0.00	0.00	0.00							
	M&F	0.00	0.00	0.00	0.00	0.00	0.00							

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Macrolides (not azith. or clarith.)														
0-9	M	0.00	0.00	0.00	0.02	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.02	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.02	0.00	0.00	0.00						
10-17	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
18-34	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	F	0.01	0.01	0.01	0.01	0.01	0.01	0.00						
	M&F	0.01	0.01	0.01	0.01	0.01	0.01	0.00						
35-49	M	0.00	0.01	0.00	0.07	0.00	0.00	0.00						
	F	0.01	0.01	0.01	0.01	0.01	0.01	0.01						
	M&F	0.01	0.01	0.01	0.04	0.01	0.01	0.00						
50-64	M	0.01	0.01	0.00	0.16	0.01	0.00	0.00						
	F	0.01	0.01	0.00	0.01	0.01	0.01	0.01						
	M&F	0.01	0.01	0.00	0.08	0.01	0.01	0.00						
65-74	M	0.00	0.00	0.00	0.00	0.01	0.01	0.00						
	F	0.00	0.00	0.01	0.00	0.01	0.01	0.00						
	M&F	0.00	0.00	0.01	0.00	0.01	0.01	0.00						
75-84	M	0.00	0.00	0.00	0.00	0.00	0.01	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.01						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
≥85	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.01	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.01	0.00	0.00						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01
	F	0.00	0.01	0.00	0.01	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.01	0.01
	M&F	0.00	0.01	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.01

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Penicillins														
0-9	M	0.55	0.60	0.48	0.50	0.51	0.55	0.43						
	F	0.55	0.59	0.46	0.57	0.51	0.55	0.42						
	M&F	0.55	0.60	0.47	0.53	0.51	0.55	0.43						
10-17	M	0.23	0.27	0.18	0.23	0.22	0.21	0.16						
	F	0.29	0.34	0.23	0.30	0.29	0.27	0.21						
	M&F	0.26	0.30	0.20	0.25	0.26	0.24	0.18						
18-34	M	0.20	0.23	0.18	0.17	0.20	0.18	0.16						
	F	0.34	0.36	0.34	0.28	0.32	0.30	0.28						
	M&F	0.30	0.33	0.30	0.21	0.29	0.27	0.25						
35-49	M	0.20	0.21	0.18	0.08	0.19	0.19	0.18						
	F	0.28	0.29	0.29	0.18	0.25	0.25	0.26						
	M&F	0.25	0.27	0.26	0.13	0.23	0.23	0.24						
50-64	M	0.17	0.16	0.18	0.07	0.14	0.17	0.16						
	F	0.21	0.20	0.22	0.07	0.18	0.20	0.23						
	M&F	0.19	0.19	0.20	0.07	0.16	0.19	0.20						
65-74	M	0.28	0.03	0.19	0.00	0.16	0.16	0.22						
	F	0.11	0.09	0.06	0.13	0.19	0.23	0.24						
	M&F	0.19	0.07	0.10	0.09	0.18	0.20	0.23						
75-84	M	0.15	0.07	0.11	0.00	0.13	0.12	0.13						
	F	0.02	0.00	0.11	0.00	0.16	0.14	0.10						
	M&F	0.07	0.02	0.11	0.00	0.15	0.13	0.11						
≥85	M	0.25	0.00	0.00	0.00	0.10	0.05	0.07						
	F	0.07	0.04	0.00	0.00	0.08	0.08	0.12						
	M&F	0.13	0.03	0.00	0.00	0.08	0.07	0.12						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.38	0.40	0.33	0.32	0.33	0.36	0.29	0.33	0.22	0.27	0.31	0.37	0.44
	F	0.39	0.41	0.35	0.41	0.35	0.37	0.31	0.35	0.25	0.30	0.34	0.39	0.44
	M&F	0.38	0.41	0.34	0.35	0.34	0.37	0.30	0.34	0.24	0.29	0.33	0.38	0.45

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Tetracyclines														
0-9	M	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
	M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00						
10-17	M	0.04	0.06	0.04	0.06	0.05	0.04	0.04						
	F	0.04	0.06	0.05	0.05	0.06	0.04	0.05						
	M&F	0.04	0.06	0.05	0.05	0.06	0.04	0.04						
18-34	M	0.05	0.05	0.06	0.11	0.05	0.05	0.06						
	F	0.06	0.07	0.10	0.08	0.07	0.07	0.08						
	M&F	0.05	0.06	0.09	0.10	0.06	0.06	0.07						
35-49	M	0.04	0.04	0.08	0.17	0.06	0.06	0.07						
	F	0.06	0.07	0.10	0.03	0.08	0.07	0.09						
	M&F	0.06	0.06	0.10	0.10	0.07	0.07	0.09						
50-64	M	0.05	0.06	0.07	0.03	0.07	0.08	0.08						
	F	0.07	0.08	0.08	0.01	0.11	0.08	0.09						
	M&F	0.06	0.07	0.08	0.02	0.09	0.08	0.09						
65-74	M	0.03	0.02	0.10	0.26	0.14	0.13	0.09						
	F	0.10	0.08	0.02	0.00	0.16	0.12	0.10						
	M&F	0.06	0.06	0.05	0.09	0.15	0.13	0.09						
75-84	M	0.06	0.00	0.00	0.00	0.11	0.07	0.13						
	F	0.06	0.05	0.05	0.00	0.19	0.11	0.07						
	M&F	0.06	0.03	0.04	0.00	0.17	0.10	0.09						
≥85	M	0.08	0.00	0.00	0.00	0.13	0.04	0.04						
	F	0.05	0.00	0.00	0.00	0.15	0.06	0.05						
	M&F	0.06	0.00	0.00	0.00	0.15	0.06	0.05						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.02	0.03	0.03	0.05	0.03	0.03	0.03	0.04	0.02	0.03	0.04	0.04	0.05
	F	0.04	0.05	0.06	0.03	0.05	0.04	0.05	0.06	0.04	0.05	0.06	0.07	0.08
	M&F	0.03	0.04	0.04	0.04	0.04	0.04	0.04	0.05	0.03	0.04	0.05	0.06	0.07

Table A. HEDIS 2014 Plan-Specific Rates with National Benchmarks: Utilization Measures														
Measure by Age/as Stated	Sex	AG	BCE	BCW	TCS	UHCE	UHCM	UHCW	HEDIS 2013 National Medicaid Means and Percentiles					
									Mean	P10	P25	P50	P75	P90
Average Scripts PMPY for Misc. Antibiotics														
0-9	M	0.00	0.00	0.00	0.01	0.00	0.00	0.00						
	F	0.01	0.01	0.00	0.03	0.01	0.01	0.00						
	M&F	0.01	0.01	0.00	0.02	0.01	0.01	0.00						
10-17	M	0.00	0.01	0.00	0.01	0.01	0.00	0.00						
	F	0.05	0.07	0.05	0.10	0.06	0.06	0.05						
	M&F	0.03	0.04	0.03	0.04	0.03	0.03	0.03						
18-34	M	0.03	0.02	0.02	0.02	0.02	0.02	0.02						
	F	0.37	0.37	0.44	0.24	0.31	0.37	0.37						
	M&F	0.28	0.28	0.35	0.10	0.22	0.28	0.29						
35-49	M	0.04	0.04	0.05	0.04	0.03	0.04	0.03						
	F	0.22	0.20	0.28	0.13	0.18	0.22	0.23						
	M&F	0.16	0.15	0.23	0.08	0.13	0.17	0.18						
50-64	M	0.05	0.05	0.05	0.11	0.04	0.06	0.05						
	F	0.14	0.16	0.16	0.22	0.15	0.17	0.14						
	M&F	0.10	0.12	0.12	0.17	0.10	0.12	0.10						
65-74	M	0.18	0.13	0.05	0.00	0.05	0.07	0.04						
	F	0.19	0.13	0.07	0.13	0.20	0.21	0.13						
	M&F	0.19	0.13	0.07	0.09	0.14	0.16	0.10						
75-84	M	0.03	0.00	0.00	0.00	0.06	0.04	0.08						
	F	0.29	0.09	0.03	0.00	0.27	0.22	0.09						
	M&F	0.18	0.07	0.02	0.00	0.21	0.16	0.08						
≥85	M	0.17	0.00	0.14	0.00	0.04	0.05	0.04						
	F	0.27	0.16	0.20	0.00	0.20	0.19	0.11						
	M&F	0.23	0.13	0.19	0.00	0.17	0.16	0.11						
Unknown	M	NA												
	F	NA												
	M&F	NA												
Total	M	0.01	0.00	0.01	0.01	0.01	0.02							
	F	0.15	0.16	0.19	0.09	0.14	0.16	0.16	0.13	0.08	0.09	0.12	0.15	0.16
	M&F	0.09	0.10	0.12	0.04	0.08	0.10	0.10	0.08	0.05	0.06	0.07	0.09	0.10

†† NCQA has yet to determine the mean.

APPENDIX B | HEDIS 2013 National Medicaid Means and Percentiles

Table B. HEDIS 2013 National Medicaid Means and Percentiles

Measure	Mean	Percentile				
		10th	25th	50th	75th	90th
HEDIS Effectiveness of Care Measures						
Prevention and Screening						
Adult BMI Assessment (ABA)	67.63%	49.15%	62.62%	72.09%	78.77%	84.39%
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC):						
BMI Percentile: 3–11 years	51.48%	21.32%	36.42%	52.88%	69.86%	80.93%
12–17 years	52.31%	23.87%	39.86%	53.66%	68.75%	80.26%
Total	51.78%	22.87%	37.96%	52.31%	69.68%	80.24%
Counseling for Nutrition: 3–11 years	56.68%	30.88%	48.93%	60.19%	69.35%	76.63%
12–17 years	51.34%	29.68%	41.41%	55.29%	64.34%	72.73%
Total	55.01%	31.02%	47.45%	59.11%	67.91%	75.18%
Counseling for Physical Activity: 3–11 years	42.81%	18.38%	34.01%	43.51%	54.81%	65.75%
12–17 years	47.30%	24.80%	38.27%	50.00%	58.91%	67.07%
Total	44.23%	20.92%	34.55%	46.23%	55.26%	64.72%
Childhood Immunization Status (CIS):						
DTaP/DT	80.95%	73.50%	77.08%	81.51%	85.89%	88.13%
IPV	91.61%	86.75%	89.29%	92.70%	94.65%	96.07%
MMR	91.60%	86.81%	89.81%	92.21%	94.29%	95.38%
HiB	92.01%	87.50%	90.27%	93.16%	94.79%	96.03%
HepB	89.51%	81.51%	87.22%	91.39%	93.81%	95.45%
VZV	91.10%	85.65%	89.54%	91.59%	93.75%	95.13%
PCV	80.07%	73.32%	76.16%	81.13%	84.95%	88.08%
HepA	76.36%	47.93%	72.99%	80.79%	88.32%	91.20%
RV	66.00%	56.45%	60.88%	66.67%	72.51%	77.20%
Influenza	49.51%	30.37%	41.36%	50.00%	58.64%	64.48%
Combination 2	75.74%	65.97%	70.44%	76.89%	81.74%	85.40%
Combination 3	72.08%	61.95%	66.08%	72.88%	78.30%	83.32%
Combination 4	60.89%	36.25%	56.07%	63.02%	71.78%	77.80%
Combination 5	55.27%	44.53%	48.91%	55.41%	61.81%	69.38%
Combination 6	41.76%	25.93%	33.33%	41.89%	49.57%	56.93%
Combination 7	48.73%	27.04%	42.09%	50.33%	58.06%	65.61%
Combination 8	37.28%	19.91%	29.20%	38.66%	45.13%	52.53%
Combination 9	34.72%	19.68%	27.25%	34.38%	41.50%	49.31%
Combination 10	31.38%	16.06%	24.82%	31.39%	38.43%	45.70%
Immunizations for Adolescents (IMA):						
Meningococcal	69.37%	52.31%	60.34%	71.07%	79.17%	89.06%
Tdap/Td	81.33%	66.00%	76.66%	85.19%	89.78%	93.19%
Combination 1	67.19%	50.93%	58.06%	68.59%	77.08%	85.64%

Table B. HEDIS 2013 National Medicaid Means and Percentiles						
Measure	Mean	Percentile				
		10th	25th	50th	75th	90th
Human Papillomavirus Vaccine for Female Adolescents (HPV)*						
Lead Screening in Children (LSC)	67.49%	36.57%	58.50%	72.26%	82.24%	86.96%
Breast Cancer Screening (BCS)**	51.82%	41.72%	46.51%	51.32%	57.71%	62.88%
Cervical Cancer Screening (CCS)***						
Chlamydia Screening in Women (CHL):						
16–20 years	53.50%	41.05%	46.93%	53.80%	59.48%	66.38%
21–24 years	63.66%	51.52%	58.98%	64.58%	70.71%	73.45%
Total	57.10%	46.22%	50.97%	57.30%	63.72%	68.81%
Respiratory Conditions						
Appropriate Testing for Children With Pharyngitis (CWP)	68.03%	50.84%	60.82%	70.30%	77.97%	85.09%
Appropriate Treatment for Children With Upper Respiratory Infection (URI)	85.08%	77.03%	81.40%	85.86%	90.29%	92.99%
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)	24.22%	14.88%	17.92%	22.18%	28.18%	35.45%
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	31.52%	19.05%	26.22%	31.31%	38.07%	42.80%
Pharmacotherapy Management of COPD Exacerbation (PCE):						
Systemic Corticosteroid	65.30%	48.43%	60.66%	67.00%	73.33%	77.17%
Bronchodilator	81.48%	71.65%	78.18%	83.24%	87.37%	90.29%
Use of Appropriate Medications for People With Asthma (ASM):						
5–11 years	89.65%	83.77%	86.97%	90.31%	92.92%	94.92%
12–18 years	85.59%	78.88%	81.96%	85.88%	88.99%	92.16%
19–50 years	73.87%	61.67%	68.25%	74.76%	80.69%	84.32%
51–64 years	71.32%	55.80%	65.03%	72.50%	77.89%	82.97%
Total	83.88%	77.30%	80.67%	84.70%	87.64%	89.76%
Medication Management for People With Asthma (MMA)						
Medication Compliance 50%: 5–11 years*						
12–18 years*						
19–50 years*						
51–64 years*						
Total*						
Medication Compliance 75%: 5–11 years						
12–18 years	25.35%	16.21%	18.52%	24.40%	29.46%	36.00%
19–50 years	25.11%	15.65%	18.36%	23.92%	30.11%	35.94%
51–64 years	34.14%	24.10%	28.30%	33.15%	38.78%	44.07%
Total	28.70%	19.20%	22.17%	27.62%	32.82%	38.62%
Asthma Medical Ratio (AMR)†						
5–11 years						
12–18 years						
19–50 years						
51–64 years						
Total						

Table B. HEDIS 2013 National Medicaid Means and Percentiles						
Measure	Mean	Percentile				
		10th	25th	50th	75th	90th
Cardiovascular Conditions						
Cholesterol Management for Patients With Cardiovascular Conditions (CMC):						
LDL-C Screening	81.62%	73.94%	78.72%	82.42%	85.25%	88.86%
LDL-C Control (<100 mg/dL)	41.37%	28.21%	34.94%	41.82%	47.52%	54.06%
Controlling High Blood Pressure (CBP)	56.36%	44.90%	50.33%	56.20%	62.97%	69.55%
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	82.05%	71.15%	78.90%	82.98%	87.93%	90.98%
Diabetes						
Comprehensive Diabetes Care (CDC):						
HbA1c Testing	82.98%	75.75%	79.21%	83.16%	87.33%	91.11%
HbA1c Control (<7.0%)	34.03%	23.95%	30.46%	34.76%	39.90%	43.24%
HbA1c Control (<8.0%)	46.60%	34.58%	39.93%	48.57%	53.77%	58.64%
Retinal Eye Exam Performed	53.17%	37.14%	44.37%	54.31%	62.46%	67.64%
LDL-C Screening	75.56%	66.71%	71.05%	76.28%	80.54%	83.52%
LDL-C Control (<100 mg/dL)	33.93%	21.76%	27.87%	34.89%	40.10%	43.80%
Medical Attention for Nephropathy	78.38%	69.76%	75.00%	79.23%	82.73%	85.85%
Blood Pressure Control (<140/80 mm Hg)	37.91%	27.69%	31.36%	38.89%	44.53%	50.61%
Blood Pressure Control (<140/90 mm Hg)	59.02%	46.29%	53.81%	61.03%	68.20%	74.55%
Musculoskeletal Conditions						
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)	69.96%	57.14%	64.96%	69.46%	75.80%	82.59%
Use of Imaging Studies for Low Back Pain (LBP)	75.55%	68.31%	71.52%	75.14%	79.06%	82.34%
Behavioral Health						
Antidepressant Medication Management (AMM):						
Effective Acute Phase Treatment	52.79%	45.12%	48.30%	51.47%	56.05%	61.03%
Effective Continuation Phase Treatment	36.65%	28.13%	32.07%	35.26%	40.06%	45.86%
Follow-Up Care for Children Prescribed ADHD Medication (ADD):						
Initiation Phase	39.05%	23.89%	31.40%	39.76%	45.65%	51.86%
Continuation and Maintenance Phase	45.29%	25.00%	35.48%	46.76%	56.84%	63.75%
Follow-Up After Hospitalization for Mental Illness (FUH):						
7-day follow-up	43.83%	21.33%	31.28%	44.66%	54.80%	68.79%
30-day follow-up	63.75%	38.13%	57.21%	65.85%	75.68%	82.01%
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD) †						
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD) †						
Cardiovascular Monitoring for People With Cardio-vascular Disease and Schizophrenia (SMC) †						
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA) †						
Medication Management						
Annual Monitoring for Patients on Persistent Medications (MPM):						
ACE Inhibitors or ARBs	86.30%	80.80%	84.58%	86.98%	89.17%	91.21%
Digoxin	90.15%	83.72%	87.50%	90.91%	93.15%	94.95%

Table B. HEDIS 2013 National Medicaid Means and Percentiles

Measure	Mean	Percentile				
		10th	25th	50th	75th	90th
Diuretics	85.96%	79.98%	83.76%	86.68%	89.05%	91.30%
Anticonvulsants	65.70%	55.56%	61.76%	65.98%	70.67%	73.58%
Total	84.47%	79.28%	82.38%	85.39%	87.27%	89.00%
Measures Collected Through CAHPS Health Plan Survey						
Medical Assistance With Smoking Cessation (MSC):						
Advising Smokers and Tobacco Users to Quit	75.56%	69.88%	72.09%	76.20%	79.55%	81.26%
Discussing Cessation Medications	45.81%	36.03%	40.46%	45.18%	51.38%	57.50%
Discussing Cessation Strategies	41.14%	33.44%	36.65%	40.25%	44.77%	50.69%
HEDIS Effectiveness of Care Measures Where Lower Rates Indicated Better Performance						
Prevention and Screening						
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS) ‡						
Diabetes						
Comprehensive Diabetes Care (CDC):						
HbA1c Poor Control (>9.0%)	44.63%	59.48%	52.31%	43.02%	35.76%	31.14%
HEDIS Access/Availability of Care Measures						
Adults' Access to Preventive/Ambulatory Health Services (AAP):						
20–44 years	80.37%	68.53%	77.34%	82.39%	85.27%	88.32%
45–64 years	86.54%	79.52%	84.55%	87.50%	90.30%	91.14%
Children and Adolescents' Access to Primary Care Practitioners (CAP):						
12–24 months	95.97%	92.37%	95.51%	96.89%	97.84%	98.49%
25 months–6 years	88.32%	82.76%	86.37%	89.39%	91.29%	93.60%
7–11 years	89.88%	83.43%	87.77%	90.88%	93.26%	95.25%
12–19 years	88.38%	81.35%	86.09%	89.58%	91.85%	93.77%
Initiation and Engagement of Alcohol and Other Drug (AOD) Dependence Treatment (IET):						
Initiation of AOD Treatment: 13–17 years	39.14%	23.22%	33.90%	40.00%	45.24%	50.72%
≥18 years	39.38%	28.68%	34.97%	39.14%	43.54%	48.03%
Total	39.35%	28.62%	36.03%	39.16%	43.43%	48.24%
Engagement of AOD Treatment: 13–17 years	16.53%	3.61%	9.60%	16.61%	23.23%	28.40%
≥18 years	10.18%	2.65%	5.03%	8.90%	15.63%	19.50%
Total	10.84%	2.85%	5.14%	10.19%	16.17%	19.84%
Prenatal and Postpartum Care (PPC):						
Timeliness of Prenatal Care	82.93%	70.59%	79.85%	85.88%	89.72%	92.82%
Postpartum Care	63.05%	50.69%	57.91%	63.99%	70.20%	73.83%
Call Answer Timeliness (CAT)	83.83%	70.34%	80.30%	86.16%	90.36%	94.66%
HEDIS Utilization and Relative Resource Use Measures						
Utilization						
Frequency of Ongoing Prenatal Care (FPC):						
<21%	12.32%	2.32%	4.24%	8.27%	13.83%	27.39%
21–40%	5.94%	1.64%	2.78%	4.25%	6.56%	12.27%
41–60%	7.68%	3.89%	4.92%	6.83%	9.51%	12.99%
61–80%	13.62%	7.55%	10.55%	13.53%	16.31%	20.77%
≥81%	60.45%	36.25%	50.97%	64.70%	73.97%	80.12%

Table B. HEDIS 2013 National Medicaid Means and Percentiles						
Measure	Mean	Percentile				
		10th	25th	50th	75th	90th
Well-Child Visits in the First 15 Months of Life (W15):						
0 Visits	1.80%	0.29%	0.73%	1.22%	2.13%	3.55%
1 Visits	1.81%	0.58%	1.01%	1.55%	2.26%	3.31%
2 Visits	2.91%	1.10%	2.03%	2.73%	3.64%	4.74%
3 Visits	5.01%	2.14%	3.58%	4.66%	6.12%	7.79%
4 Visits	8.98%	4.68%	6.70%	8.61%	10.95%	12.96%
5 Visits	15.51%	9.15%	12.24%	15.34%	18.73%	21.65%
6 or More Visits	63.65%	49.70%	55.95%	65.16%	70.90%	77.44%
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	72.00%	60.81%	67.40%	72.26%	78.51%	82.08%
Adolescent Well-Care Visits (AWC)	49.69%	37.27%	41.72%	48.18%	57.40%	65.45%

* Measure deemed first-year status again in 2013.

** The age group for this measure changed; NCQA has yet to determine if results are trendable with the previous year.

*** The measure's specification changed and results cannot be trended with previous years.

† Benchmarks are not reported by Quality Compass for 2013 first year measures.

‡ Measure is first-year in 2014.

APPENDIX C | MCO Population Reported in Member Months

Table C. HEDIS 2014 MCO Population Reported in Member Months by Age and Sex

Age Group	AG			BCE			BCW			TCS			UHCE			UHCM			UHCW		
Age	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
<1	55124	50920	106,044	52263	49172	101,435	43293	41581	84,874	7546	7212	14,758	44582	42697	87,279	53187	53417	106,604	42199	40033	82,232
1-4	183558	175177	358,735	173544	165942	339,486	161224	152484	313,708	42778	34897	77,675	156282	148928	305,210	180970	176496	357,466	155796	151680	307,476
5-9	202250	195325	397,575	196138	189845	385,983	172338	173197	345,535	74989	46042	121,031	187950	180777	368,727	202885	198950	401,835	170155	169743	339,898
10-14	158130	156194	314,324	163148	154887	318,035	139771	143528	283,299	87618	48043	135,661	151154	151620	302,774	158612	153500	312,112	132952	135349	268,301
15-17	74568	78848	153,416	80751	81231	161,982	71759	72739	144,498	63098	35962	99,060	75210	77530	152,740	74890	73633	148,523	68117	73536	141,653
18-19	39506	51967	91,473	41091	52102	93,193	37990	47005	84,995	38794	21939	60,733	39555	50690	90,245	38015	46233	84,248	38224	50818	89,042
0-19 Subtotal	713,136	708,431	1,421,567	706,935	693,179	1,400,114	626,375	630,534	1,256,909	314,823	194,095	508,918	654,733	652,242	1,306,975	708,559	702,229	1,410,788	607,443	621,159	1,228,602
0-19 Subtotal %	78.00%	58.36%	66.80%	76.31%	54.22%	63.50%	82.05%	55.27%	66.00%	93.63%	92.70%	93.27%	70.21%	53.89%	60.99%	76.91%	55.42%	64.47%	77.16%	54.78%	63.95%
20-24	37795	113830	151,625	30523	113041	143,564	28504	106585	135,089	14299	8592	22,891	41224	98556	139,780	31394	106182	137,576	36617	120544	157,161
25-29	23824	99929	123,753	28879	112510	141,389	17010	107685	124,695	1374	959	2,333	25117	86500	111,617	25164	109643	134,807	15815	95127	110,942
30-34	26082	89002	115,084	31110	98245	129,355	17384	96582	113,966	1271	1040	2,311	28943	85790	114,733	28074	99344	127,418	17228	84419	101,647
35-39	22871	67079	89,950	28181	76733	104,914	13645	66662	80,307	741	647	1,388	29590	69290	98,880	25377	71703	97,080	17620	64460	82,080
40-44	20957	45471	66,428	24907	53686	78,593	12137	41979	54,116	696	803	1,499	28746	51404	80,150	22488	50460	72,948	16147	42571	58,718
20-44 Subtotal	131,529	415,311	546,840	143,600	454,215	597,815	88,680	419,493	508,173	18,381	12,041	30,422	153,620	391,540	545,160	132,497	437,332	569,829	103,427	407,121	510,548
20-44 Subtotal %	14.39%	34.21%	25.69%	15.50%	35.53%	27.11%	11.62%	36.77%	26.69%	5.47%	5.75%	5.58%	16.47%	32.35%	25.44%	14.38%	34.51%	26.04%	13.14%	35.90%	26.57%
45-49	17864	30209	48,073	21806	41587	63,393	10900	29389	40,289	826	877	1,703	27071	38904	65,975	19943	35485	55,428	15922	29228	45,150
50-54	19439	24630	44,069	21268	35697	56,965	13226	24450	37,676	890	806	1,696	29728	36905	66,633	20203	29813	50,016	19516	24419	43,935
55-59	18968	19750	38,718	18882	28655	47,537	14064	20677	34,741	783	960	1,743	30317	32420	62,737	18382	24687	43,069	20248	21306	41,554
60-64	11501	13056	24,557	12848	22644	35,492	9006	13852	22,858	468	496	964	20182	24182	44,364	11866	17612	29,478	13443	14033	27,476
45-64 Subtotal	67,772	87,645	155,417	74,804	128,583	203,387	47,196	88,368	135,564	2,967	3,139	6,106	107,298	132,411	239,709	70,394	107,597	177,991	69,129	88,986	158,115
45-64 Subtotal %	7.41%	7.22%	7.30%	8.07%	10.06%	9.22%	6.18%	7.75%	7.12%	0.88%	1.50%	1.12%	11.51%	10.94%	11.19%	7.64%	8.49%	8.13%	8.78%	7.85%	8.23%
65-69	856	1007	1,863	549	1023	1,572	588	1254	1,842	36	57	93	7341	11550	18,891	4160	7097	11,257	3528	5513	9,041
70-74	344	382	726	165	225	390	165	379	544	11	36	47	4447	8424	12,871	2598	4567	7,165	1874	4300	6,174
75-79	215	291	506	80	232	312	133	230	363	23	10	33	2569	5952	8,521	1459	3121	4,580	971	2529	3,500
80-84	186	283	469	104	274	378	94	209	303	1	1	2	1483	3791	5,274	916	2455	3,371	547	1886	2,433
85-89	188	316	504	99	353	452	77	186	263	1	9	10	666	2616	3,282	470	1602	2,072	209	1272	1,481
≥90	99	217	316	70	318	388	89	225	314	0	0	0	314	1783	2,097	202	1084	1,286	121	1240	1,361
≥65 Subtotal	1,888	2,496	4,384	1,067	2,425	3,492	1,146	2,483	3,629	72	113	185	16,820	34,116	50,936	9,805	19,926	29,731	7,250	16,740	23,990
≥65 Subtotal: %	0.21%	0.21%	0.21%	0.12%	0.19%	0.16%	0.15%	0.22%	0.19%	0.02%	0.05%	0.03%	1.80%	2.82%	2.38%	1.06%	1.57%	1.36%	0.92%	1.48%	1.25%
Total	914,325	1,213,883	2,128,208	926,406	1,278,402	2,204,808	763,397	1,140,878	1,904,275	336,243	209,388	545,631	932,471	1,210,309	2,142,780	921,255	1,267,084	2,188,339	787,249	1,134,006	1,921,255

APPENDIX D | Measure Reporting Options

The reporting options are presented for each measure: administrative and/or hybrid. Currently, when the hybrid option is available, TennCare MCOs are required to use the hybrid method.

Table D. HEDIS Measure Reporting Options		
Measure	Administrative	Hybrid
HEDIS Effectiveness of Care		
Prevention and Screening		
Adult BMI Assessment (ABA)	✓	✓
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	✓	✓
Childhood Immunization Status (CIS)	✓	✓
Immunizations for Adolescents (IMA)	✓	✓
Human Papillomavirus Vaccine for Female Adolescents (HPV)	✓	✓
Lead Screening in Children (LSC)	✓	✓
Breast Cancer Screening (BCS)	✓	
Cervical Cancer Screening (CCS)	✓	✓
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)	✓	
Chlamydia Screening in Women (CHL)	✓	
Respiratory Conditions		
Appropriate Testing for Children With Pharyngitis (CWP)	✓	
Appropriate Treatment for Children With Upper Respiratory Infection (URI)	✓	
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)	✓	
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	✓	
Pharmacotherapy Management of COPD Exacerbation (PCE)	✓	
Use of Appropriate Medications for People With Asthma (ASM)	✓	
Medication Management for People With Asthma (MMA)	✓	
Asthma Medical Ratio (AMR)	✓	
Cardiovascular Conditions		
Cholesterol Management for Patients With Cardiovascular Conditions (CMC)	✓	✓
Controlling High Blood Pressure (CBP)		✓
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	✓	
Diabetes		
Comprehensive Diabetes Care (CDC)	✓	✓
Musculoskeletal Conditions		
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)	✓	
Use of Imaging Studies for Low Back Pain (LBP)	✓	
Behavioral Health		
Antidepressant Medication Management (AMM)	✓	
Follow-Up Care for Children Prescribed ADHD Medication (ADD)	✓	
Follow-Up After Hospitalization for Mental Illness (FUH)	✓	
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD)	✓	
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)	✓	
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)	✓	
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	✓	

Table D. HEDIS Measure Reporting Options		
Measure	Administrative	Hybrid
Medication Management		
Annual Monitoring for Patients on Persistent Medications (MPM)	✓	
Measures Collected Through CAHPS Health Plan Survey		
Medical Assistance With Smoking Cessation (MSC)		
HEDIS Access/Availability of Care Measures		
Adults' Access to Preventive/Ambulatory Health Services (AAP)	✓	
Children and Adolescents' Access to Primary Care Practitioners (CAP)	✓	
Initiation and Engagement of Alcohol and Other Drug (AOD) Dependence Treatment (IET)	✓	
Prenatal and Postpartum Care (PPC)	✓	✓
Call Answer Timeliness (CAT)	✓	
HEDIS Utilization and Relative Resource Use Measures		
Utilization		
Frequency of Ongoing Prenatal Care (FPC)	✓	✓
Well-Child Visits in the First 15 Months of Life (W15)	✓	✓
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	✓	✓
Adolescent Well-Care Visits (AWC)	✓	✓