



The Office of Financial and Insurance Services *presents the* 2002 Michigan HMO Consumer Guide

Welcome to the Michigan Office of Financial and Insurance Services (OFIS) Health Maintenance Organization (HMO) Consumer Guide - 2002. This guide is designed to provide you with information about HMOs in Michigan. Specifically, the OFIS HMO Consumer Guide:

- provides information about the quality of care at HMOs,
- provides information about HMO enrollment and profit or non-profit status of HMOs
- lists complaint information about HMOs
- and provides additional informational resources about HMOs.

The categories of information on the consumer guide are NCQA Accreditation; Access & Service; Doctor Communication & Services; Staying Healthy; and Getting Better & Living with Illness. The definitions for each of these categories (a detailed explanation of the comparison information) and definitions for the HMO ratings can be found at the top of the consumer guide.

The information used in parts of this report was compiled in conjunction with the Coordinated Auto/UAW Reporting System project and the National Committee for Quality Assurance (NCQA). The full report from that project, including the methodology used to calculate this information, is available by e-mailing OFIS at ofis-ins-info@michigan.gov.

The toll free number to reach the Michigan Office of Financial and Insurance Services is (877) 999-6442. If you are unable to print information from this site, or know someone who does not have access to this site, you can obtain the consumer guide information by calling OFIS toll free.

This consumer guide information is based on HMO commercial populations. For Medicaid information, an HMO consumer guide is available on the [Michigan Department of Community Health](#) web site.

Please note ... HMOs that have a commercial population under 3,000 or a Medicaid-only population are not included.

Criteria Definition	
NCQA Accreditation	<p>An independent group of health professionals - the National Committee for Quality Assurance (NCQA) - developed quality standards and ways to measure the quality of HMOs. The accreditation status is based on information obtained at the end of the 2001 calendar year.</p> <p>NCQA accreditation applies to HMOs and is considered to be one measure of a health plan's performance. The levels of NCQA accreditations are as follows:</p> <p><i>Excellent</i> - NCQA's highest accreditation status is granted only to those HMO plans that meet or exceed the requirement for consumer protection and quality improvement. HMO plans also must achieve HEDIS results that are in the highest range of national or regional performance.</p> <p><i>Commendable</i> - This next level of accreditation is granted to those HMO plans that meet or exceed the requirement for consumer protection and quality improvement.</p> <p><i>Accredited</i> - HMO plans that earn this level of accreditation have met most of the NCQA's basic requirements.</p> <p><i>Provisional</i> - HMO plans that earn this level of accreditation have met some but not all of the NCQA's basic requirements.</p> <p><i>Denied</i> - Denied is an indication that an HMO did not meet NCQA's requirements during its review.</p> <p><i>Expired</i> - Expired denotes an HMO that has allowed its provisional, one-year or full accreditation status to lapse without scheduling another accreditation survey. Plans receiving a denial do not revert to "expired".</p> <p><i>No (Not Accredited)</i> - This category included HMO plans that (1) have not sought accreditation from NCQA, (2) are scheduled for or are currently undergoing NCQA review or (3) were denied accreditation.</p>
Access and Service	<p>Measures how easy it is for patients to get the care they need quickly, and how helpful and informative the plan's customer service functions are and how well complaints are handled.</p> <p>Access and Service also includes an overall rating of the plan to help determine member satisfaction.</p>
Doctor Communication and Service	<p>Measures how well the plan's doctors communicate, whether service in the doctor's office is courteous and helpful, and how patients rate the overall care they receive from their personal doctor and specialists.</p>
Staying Healthy	<p>Measures how well the health plan helps people avoid illness through preventative care, reduction in health risks and early detection of serious illnesses.</p> <p>Staying health includes measurements on immunizations, child and adolescent care, maternity care and women's health (breast and cervical cancer).</p>

Getting Better / Living with Illness	<p>Measures how well the health plan helps people recover when they're sick or injured and how well it helps the quality-of-life or people with chronic conditions (such as diabetes or heart disease).</p> <p>Getting better / living with illness also includes measurements on mental health care and advice to quit smoking.</p>
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Rating Scale

- ***** Highest 10%
- **** Significantly above average
- *** Average
- ** Significantly below average
- * Lowest 10%

Source: 2001 Health Plan Employer Data and Information Set (HEDIS) and Consumer Assessment of Health Plans Study (CAHPS) data.

Year	NCQA Accreditation	Access and Service	Dr. Communication and Service	Staying Healthy	Getting Better / Living With Illness
Aetna Health, Inc. - Michigan					
2001	No	***	***	*	**
2000	No	**	***	*	***
Blue Care Network of Michigan					
2001	Excellent	***	***	*****	***
2000	Excellent	***	***	***	***
Care Choices HMO					
2001	Excellent	****	****	****	****
2000	Excellent	****	***	****	****
Grand Valley Health Plan, Inc.					
2001	Excellent	*****	***	****	****
2000	Excellent	****	***	****	***
Health Alliance Plan of Michigan					
2001	Excellent	***	***	****	****
2000	Excellent	***	***	****	****
HealthPlus of Michigan, Inc.					
2001	Excellent	*****	****	*****	****
2000	Excellent	*****	****	****	****

M-CARE, Inc.

2001	Excellent	***	***	*****	****
2000	Excellent	***	***	****	****

OmniCare Health Plan

2001	Provisional	**	***	*	*
2000	Commendable	**	***	*	*

Physicians Health Plan of Mid-Michigan

2001	Excellent	*****	****	*****	***
2000	Excellent	****	****	****	***

Physicians Health Plan of South Michigan

2001	No	*****	****	*	*
2000	No	****	***	**	***

Physicians Health Plan of Southwest Michigan, Inc.

2001	No	***	***	*****	*
2000	No	***	***	****	***

Priority Health

2001	Excellent	****	***	*****	****
2000	Excellent	****	****	****	****

The Wellness Plan

2001	No	*	**	*	***
2000	No	**	***	*	***

Total Health Care, Inc.

2001	No	**	*	*	*
2000	No	*	*	*	*

The information listed for Total Health Care, Inc. for the year 2000 is based on unaudited information.

* The scoring data for the 2000 calendar year was provided by RAND Corporation. The scoring data for the 2001 calendar year was provided by the National Committee for Quality Assurance (NCQA). Accreditation ratings for HMOs are also provided by other accrediting organizations. See our website for more information.

HMO's In Your Area

The following areas are the geographical areas in which health services are generally available and accessible from an HMO and where an HMO may contract with employers. This information does not include Medicaid service areas. That information can be viewed at the [Michigan Department of Community Health](http://www.michigan.gov/communityhealth) web site.

Aetna U.S. HealthCare, Inc. - Michigan

(Approval for the entire county)

Macomb	St. Clair	Wayne
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(Approval for part of the county)

Monroe	Oakland	
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Blue Care Network of Michigan

(Approval for the entire county)

Alcona	Allegan	Alpena	Antrim	Arenac
Barry	Bay	Benzie	Calhoun	Cass
Charlevoix	Cheboygan	Clinton	Crawford	Eaton
Emmet	Genesee	Grand Traverse	Gratiot	Ingham
Iosco	Isabella	Jackson	Kalamazoo	Kalkaska
Kent	Lapeer	Leelanau	Livingston	Mackinac
Macomb	Midland	Monroe	Montmorency	Muskegon
Oakland	Oceana	Ogemaw	Oscoda	Otsego
Ottawa	Presque Isle	Roscommon	Saginaw	St. Joseph
Shiawassee	Tuscola	Van Buren	Washtenaw	Wayne

(Approval for part of the county)

Berrien	Clare	Gladwin	Hillsdale	Huron
Ionia	Manistee	Mecosta	Montcalm	Newaygo
St. Clair	Wexford			

Care Choices HMO

(Approval for the entire county)

Clinton	Eaton	Kent	Livingston	Muskegon
Ottawa	Washtenaw			

(Approval for part of the county)

Allegan	Barry	Calhoun	Ionia	Lapeer
Macomb	Oakland	Saginaw	St. Clair	Shiawassee
Wayne				

Grand Valley Health Plan, Inc.

(Approval for the entire county)

None

(Approval for part of the county)

Allegan Ionia Kent Ottawa

Health Alliance Plan of Michigan

(Approval for the entire county)

Genesee Livingston Oakland Macomb Monroe
St. Clair Washtenaw Wayne

(Approval for part of the county)

Lapeer Saginaw Sanilac Shiawassee

HealthPlus of Michigan

(Approval for the entire county)

Arenac Bay Genesee Iosco Lapeer
Livingston Saginaw Shiawassee Tuscola

(Approval for part of the county)

Huron Midland Oakland St. Clair Sanilac

M-Care, Inc.

(Approval for the entire county)

Antrim Benzie Charlevoix Clinton Eaton
Genesee Grand Traverse Ingham Jackson Leelanau
Livingston Macomb Manistee Oakland Otsego
Shiawassee Washtenaw Wayne

(Approval for part of the county)

Cheboygan Crawford Emmet Hillsdale Kalkaska
Lapeer Monroe Montmorency St. Clair Wexford

OmniCare Health Plan

(Approval for the entire county)

Monroe Oakland Wayne

(Approval for part of the county)

None

Paramount Care of Michigan, Inc.

(Approval for the entire county)

Lenawee

(Approval for part of the county)

Monroe Washtenaw

Physicians Health Plan of Mid-Michigan

(Approval for the entire county)

Clinton Eaton Gratiot Ionia Montcalm

Muskegon Newaygo Oceana Shiawassee

(Approval for part of the county)

Ingham Isabella Ottawa Saginaw

Physicians Health Plan of South Michigan

(Approval for the entire county)

Hillsdale Jackson Washtenaw

(Approval for part of the county)

Calhoun Ingham Lenawee Livingston

Physicians Health Plan of Southwest Michigan, Inc.

(Approval for the entire county)

Allegan Barry Berrien Branch Cass

Kalamazoo St. Joseph Van Buren

(Approval for part of the county)

Calhoun

Priority Health

(Approval for the entire county)

Antrim	Benzie	Charlevoix	Grand Traverse	Kent
Leelanau	Manistee	Montcalm	Muskegon	Newaygo
Oceana	Ottawa			

(Approval for part of the county)

Allegan	Barry	Cheboygan	Clinton	Crawford
Eaton	Emmet	Gratiot	Ionia	Kalkaska
Lake	Mason	Mecosta	Osceola	Wexford

ProCare

(Approval for the entire county)

None

(Approval for part of the county)

Wayne

The Wellness Plan

(Approval for the entire county)

Genesee	Macomb	Oakland	Oceana	Washtenaw
Wayne				

(Approval for part of the county)

Lapeer	Livingston	Monroe	Muskegon	Ottawa
St. Clair	Tuscola			

Total Health Care, Inc.

(Approval for the entire county)

Macomb	Oakland	Wayne
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(Approval for part of the county)

Genesee	Lapeer	St. Clair
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Ultimed HMO of MI

(Approval for the entire county)

None

(Approval for part of the county)

Macomb	Oakland	St. Clair	Wayne
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HMO Complaint Information

The following information is Michigan HMO Complaint Data for the year 2001.

Complaints can range from a consumer disagreeing with a denial of service to dissatisfaction with the service they received. An HMO is responsible for reviewing and responding to all complaints.

Please note that Medicaid members also have an external complaint process with the Michigan Department of Community Health (MDCH). This chart does not contain information from MDCH.

Definitions:

Internal	The first formal review process conducted by the HMO
External	The review process conducted by OFIS after a consumer has completed the HMOs internal review process. This process is called the Patients Right to Independent Review Act (PRIRA).
Upheld	The decision of the HMO was upheld by the process.
Overturned	The decision of the HMO was overturned by the process.
Compromise	A mutually agreeable decision was reached.

If you have questions, please contact the Office of Financial and Insurance Services toll free at 877-999-6442.

HMO Complaint Information									
HMO	Internal					External			
	Upheld	Overturned	Compromised	Total	Complaints per 1000 Members	Upheld	Overturned	Compromised	Total
Aetna Health, Inc. - Michigan	21	58	6	85	4.42	0	0	0	0
Blue Care Network of Michigan	438	871	0	1309	2.24	6	5	1	12
Botsford Health Plan	70	0	0	70	10.47	0	0	0	0
Cape Health Plan, Inc.	0	0	194	194	4.83	0	0	0	0
Care Choices HMO	110	49	0	159	1.22	9	8	1	18
Community Care Plan	0	4	1	5	0.18	0	0	0	0
Community Choice Michigan	2	6	1	9	0.13	0	0	0	0
Grand Valley Health Plan, Inc.	21	5	5	31	1.45	1	1	1	3
Great Lakes Health Plan, Inc.	3	2	2	7	0.09	0	0	0	0
Health Alliance Plan of Michigan	295	409	0	704	1.55	6	5	1	12
Health Plan of Michigan, Inc.	3	5	110	118	4.05	1	0	0	1
HealthPlus of Michigan, Inc.	116	290	100	506	3.25	1	0	0	1
M-Care, Inc.	101	724	0	825	4.21	2	0	1	3
McLaren Health Plan, Inc.	23	0	0	23	1.58	0	0	0	0
Midwest Health Plan, Inc.	0	0	131	131	3.92	0	0	0	0

Molina Healthcare of Michigan, Inc.	79	0	0	79	3.22	0	0	0	0
Omnicare Health Plan	4	0	0	4	0.04	0	1	0	1
Paramount Care of Michigan, Inc.	0	34	0	34	11.22	0	0	0	0
Physicians Health Plan of Mid-Michigan, Inc.	190	418	1	609	4.77	12	11	3	26
Physicians Health Plan of South Michigan	43	14	0	57	1.88	0	2	0	2
Physicians Health Plan of Southwest Michigan, Inc.	15	37	6	58	1.5	1	1	0	2
Priority Health	212	105	5	322	1.25	6	1	2	9
Pro Care Health Plan, Inc.	0	0	0	0	0	0	0	0	0
The Wellness Plan	133	116	307	556	4.18	0	0	0	0
Total Health Care, Inc.	8	29	39	76	1.40	0	0	0	0
Ultimed HMO of MI, Inc.	0	1	0	1	2.65	0	0	0	0
Upper Peninsula Health Plan, Inc.	96	7	0	103	5.85	0	0	0	0
Total	1,983	3,184	908	6,075	2.30	45	35	10	90

* The source of Internal Complaint Information is data submitted by the HMOs to the Office of Financial and Insurance Services.

* The source of External Complaint Information is the Office of Financial and Insurance Services.

HMO Enrollment Information

This page displays HMO open enrollment dates for the 2002 calendar year during which time individuals (non-groups) may apply to become members of a commercial HMO. Those HMOs listed as "Medicaid only" do not have open enrollment periods except for Medicaid eligible consumers. This chart also lists HMO enrollment, profit or non-profit status of the HMO, and the date the HMO was issued its license.

If you have questions, please contact the Health Plans Division toll free at (877) 999-6442.

2002 - 2nd Quarter Enrollment Information

HMO and Date of Original License	Open Enrollment Dates	Status	Groups	Medicare Supplement	Medicare	Medicaid	Individual	Other	Total Membership
Aetna Health, Inc. - Michigan (248) 208-8702 2/6/1998	November 1 - November 30, 2002 Effective Date: February 1, 2003	Profit	14,574	0	0	0	2	0	14,576
Blue Care Network of Michigan (800) 662-6667 5/13/1981	All year Effective Date: 30-45 days after application	Non-Profit	488,032	20,323	0	0	3,214	17,390	528,959
Botsford Health Plan (800) 479-5122 3/1/2000	Medicaid Only	Non-Profit	0	0	0	8,525	0	0	8,525
Cape Health Plan, Inc. (248) 386-3000 (888) 354-2273 9/4/1998	Medicaid Only	Profit	0	0	0	46,488	0	0	46,488
Care Choices HMO (810) 489-6203 (800) 852-9780 12/1/1986	November 1 - November 30, 2002 Effective Date: January 1, 2003	Non-Profit	122,986	0	7,978	0	0	0	130,964
Community Care Plan (800) 807-5244 6/29/2000	Medicaid Only	Non-Profit	0	0	0	35,142	0	0	35,142
Community Choice Michigan (517) 336-5900 6/24/1996	Medicaid Only	Non-Profit	0	0	0	78,481	0	0	78,481
Grand Valley Health Plan, Inc. (800) 949-2410 4/5/1982	August 1 - August 31, 2002 Effective Date: September 1, 2002	Profit	19,457	0	0	0	180	0	19,637
Great Lakes Health Plan, Inc. (800) 903-5253 7/12/1996	Medicaid Only	Profit	0	0	0	88,618	0	0	88,618
Health Alliance Plan of Michigan (313) 872-8100 2/8/1979	July 1 - July 31, 2002 Effective Date: August 1, 2002	Non-Profit	450,507	18,747	17,177	0	6,054	16	492,501
Health Plan of Michigan, Inc. (888) 437-0606 12/22/1999	Medicaid Only	Profit	0	0	0	37,515	0	0	37,515
HealthPlus of Michigan, Inc. (800) 332-9161 9/1/1979	January 1 - January 30, 2002 Effective Date: February 1, 2002	Non-Profit	91,892	0	2,788	59,248	509	9,389	163,826
M-Care, Inc. (800) 658-8878 9/26/1986	May 1 - May 31, 2002 Effective Date: July 1, 2002	Non-Profit	177,847	0	11,548	13,830	309	0	203,534
McLaren Health Plan, Inc. (888) 327-0671 12/14/1999	Medicaid Only	Profit	0	0	0	17,757	0	0	17,757
Midwest Health Plan, Inc. (313) 581-2600 11/25/1998	Medicaid Only	Profit	0	0	0	37,463	0	0	37,463
Molina Healthcare of Michigan, Inc. (888) 898-7969 9/7/2000	Medicaid Only	Profit	0	0	0	28,593	0	0	28,593
Omnicare Health Plan (313) 259-4000 12/23/1975	Waived for 2002	Non-Profit	15,579	0	0	62,189	217	3,787	81,772

Paramount Care of Michigan, Inc. (734) 529-7800 6/7/1996	Waived for 2002	Profit	2,922	0	1,048	0	0	0	3,970
Physicians Health Plan of Mid-Michigan, Inc. (800) 832-9186 3/19/1981	July 1 - July 31, 2002 Effective Date: August 1, 2002	Non-Profit	83,105	0	0	24,179	239	0	107,523
Physicians Health Plan of South Michigan (800) 394-7569 3/13/2000	November 1 - November 30, 2002 Effective Date: December 1, 2002	Non-Profit	30,212	0	0	0	102	0	30,314
Physicians Health Plan of Southwest Michigan, Inc. (800) 548-6574 3/31/2000	July 1 - July 31, 2002 Effective Date: August 1, 2002	Non-Profit	7,648	0	0	24,944	69	0	32,661
Priority Health (800) 446-5674 9/17/1986	April 1 - April 30, 2002 Effective Date: May 1, 2002	Non-Profit	263,185	0	0	25,651	208	888	289,932
Pro Care Health Plan, Inc. (313) 925-4607 12/19/2000	No Open Enrollment in 2002	Profit	0	0	0	0	0	0	0
The Wellness Plan (313) 875-4200 12/13/1975	November 1 - December 31, 2002 Effective Date: January 1, 2003	Non-Profit	14,389	0	0	114,798	25	1,083	130,295
Total Health Care, Inc. (313) 871-7808 3/22/1976	July 1 - July 30, 2002 Effective Date: September 1, 2002	Non-Profit	10,083	0	0	46,912	0	614	57,609
Ultimed HMO of MI, Inc. (313) 961-1717 (800) 242-7955 5/15/1995	July 1 - July 31, 2002 Effective Date: September 1, 2002	Profit	235	0	0	0	0	14,558	14,793
Upper Peninsula Health Plan, Inc. (800) 835-2556 6/21/2000	Medicaid Only	Non-Profit	0	0	0	18,810	0	313	19,123
	Totals	11 Profit 16 Non-Profit	1,792,653	39,070	40,539	769,143	11,128	48,038	2,700,571

Note: **Other** enrollment includes Federal Employee Health Benefit Plan Enrollees, MICHild, and Wayne County PlusCare.

Visit OFIS on the Web at:
www.michigan.gov/ofis



Michigan Department of Consumer & Industry Services
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1-877-999-6442

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