

*Michigan Department
of Community Health*



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Michigan Medicaid HEDIS 2014 Results Statewide Aggregate Report

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Introduction

During 2013, the Michigan Department of Community Health (MDCH) contracted with 13 health plans to provide managed care services to Michigan Medicaid enrollees. MDCH expects its contracted Medicaid Health Plans (MHPs) to support health care claims systems, membership and provider files, and hardware/software management tools that facilitate accurate and reliable reporting of the Healthcare Effectiveness Data and Information Set (HEDIS[®])¹⁻¹ measures. MDCH has contracted with Health Services Advisory Group, Inc. (HSAG), to calculate statewide rates based on the MHPs' rates and evaluate each MHP's current performance level as well as the statewide performance relative to national Medicaid percentiles. MDCH uses HEDIS rates for the annual Medicaid consumer guide as well as for the annual performance assessment.

To evaluate performance levels, MDCH implemented a system to provide an objective, comparative review of health plan quality-of-care outcomes and performance measures. One component of the evaluation system was based on HEDIS. MDCH selected 31 HEDIS measures from the standard Medicaid HEDIS reporting set to evaluate performance of the Michigan Medicaid health plans. These 31 measures were grouped under eight dimensions:

- ◆ Child and Adolescent Care
- ◆ Women—Adult Care
- ◆ Access to Care
- ◆ Obesity
- ◆ Pregnancy Care
- ◆ Living With Illness
- ◆ Health Plan Diversity
- ◆ Utilization

Performance levels for Michigan MHPs have been established for 55 rates for measures under the majority of the dimensions.¹⁻² The performance levels have been set at specific, attainable rates and are based on national percentiles. MHPs meeting the high performance level (HPL) exhibit rates that are among the top in the nation. The low performance level (LPL) has been set to identify MHPs with the greatest need for improvement. Details describing these performance levels are presented in Section 2, How to Get the Most From This Report.

In addition, Section 11 (HEDIS Reporting Capabilities) provides a summary of the HEDIS data collection processes used by the Michigan MHPs and the audit findings in relation to the National Committee for Quality Assurance's (NCQA's) information system (IS) standards.

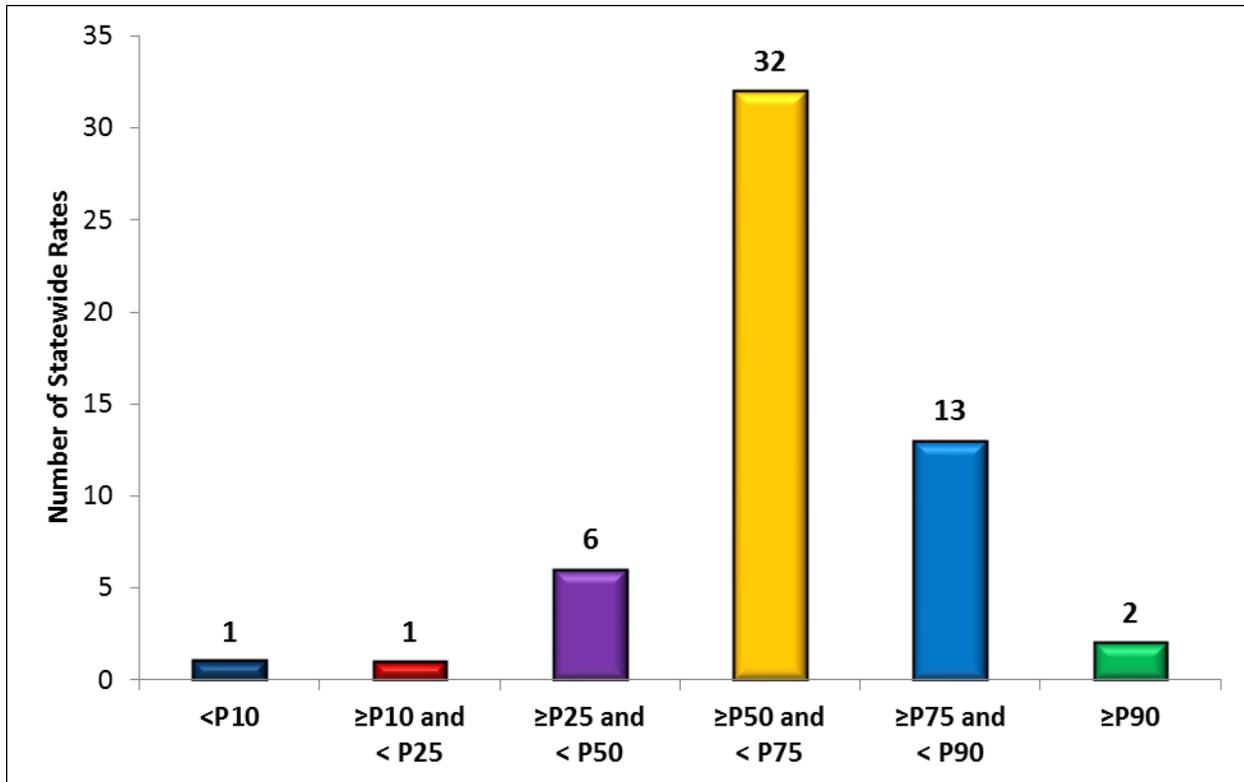
^{1.1} HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).

¹⁻² Performance levels were developed for all measures under *Child and Adolescent Care*, *Women—Adult Care*, *Access to Care*, *Obesity*, and *Living With Illness*, and for select measures under *Utilization* and *Pregnancy Care*. Performance levels were not developed for all measures under *Health Plan Diversity*.

Summary of Performance

Figure 1-1 compares the Michigan Medicaid program’s overall rates with the national HEDIS 2013 Medicaid percentiles. The bars represent the number of Michigan Medicaid statewide rates falling into each HEDIS percentile range.

Figure 1-1—Michigan Medicaid Statewide Averages Compared to National Medicaid Percentiles



Of the 55 statewide rates¹⁻³ where HEDIS 2013 national percentiles were available for benchmarking:

- ◆ One (or 1.82 percent) was below the 10th percentile (<P10).
- ◆ One (or 1.82 percent) was at or above the 10th percentile and below the 25th percentile (≥P10 and <P25).
- ◆ Six (or 10.91 percent) were at or above the 25th percentile and below the 50th percentile (≥P25 and <P50).

¹⁻³ With the exception of the *Ambulatory Care* measures, all statewide rates were weighted averages. For *Ambulatory Care*, straight average was reported throughout this report. The 55 rates identified in Figure 1-1 included all measures under *Child and Adolescent Care*, *Women—Adult Care*, *Access to Care*, *Obesity*, and *Living With Illness*, and select measures under *Utilization (Ambulatory Care measures)* and *Pregnancy Care (Prenatal and Postpartum Care, and Frequency of Ongoing Prenatal Care—≥81 Percent indicator)*. The three *Medical Assistance With Smoking and Tobacco Use Cessation* indicators were not included because they did not have national percentiles. It is important to note that for the *Comprehensive Diabetes Care—Poor HbA1c Control* indicator, where a lower rate represents higher performance, the percentiles were reversed to align with performance (e.g., if the *Comprehensive Diabetes Care—Poor HbA1c Control* rate was between the 10th and 25th percentiles, it would be inverted to be between the 75th and 90th percentiles to represent the level of performance).

- ◆ Thirty-two (or 58.18 percent) were at or above the 50th percentile and below the 75th percentile ($\geq P50$ and $< P75$).
- ◆ Thirteen (or 23.64 percent) were at or above the 75th percentile and below the 90th percentile ($\geq P75$ and $< P90$).
- ◆ Two (or 3.64 percent) were at or above the 90th percentile ($\geq P90$).

A summary of statewide performance for each dimension is presented below:

- ◆ **Child and Adolescent Care:** The HEDIS 2014 statewide performance showed general improvement from last year. Eleven measures reported a rate increase from HEDIS 2013 with statistically significant improvement noted in eight rates (i.e., *Appropriate Treatment for Children With Upper Respiratory Infection* and *Childhood Immunization Status--Combinations 4 through 10*). Statistically significant decline was noted in three rates (i.e., *Well-Child Visits in the First 15 Months of Life—6 or More Visits*; *Adolescent Well-Care Visits*; and *Appropriate Testing for Children With Pharyngitis*). All 18 rates but one ranked at or above the national HEDIS 2013 Medicaid 50th percentile, with one ranking at or above the 90th percentile and two ranking between the 75th and 90th percentile.
- ◆ **Women—Adult Care:** The HEDIS 2014 statewide performance saw a general decline compared to last year. Although one of the five measures (i.e., *Breast Cancer Screening*) demonstrated a statistically significant rate increase, three measures reported a statistically significant decrease. Nonetheless, all measures met or exceeded the national HEDIS 2013 Medicaid 50th percentile, with two rates (*Breast Cancer Screening* and *Chlamydia Screening in Women—Ages 16 to 20 Years*) met or exceeded the national 75th percentile. Since several changes in the HEDIS 2014 specifications for the *Breast Cancer Screening* measure have the potential to increase the rate, the observed significant improvement and the higher percentile ranking may not accurately reflect any performance improvement, but may be a result of both the specification changes and the MHPs' efforts to improve breast cancer screening.
- ◆ **Access to Care:** The HEDIS 2014 statewide performance declined compared to last year. Five of the eight rates (All four *Children and Adolescents' Access to Primary Care Practitioners* indicators, and *Adults' Access to Preventive/Ambulatory Health Services—Ages 65+ Years*) declined significantly from HEDIS 2013. Although two rates improved from last year, the increases were not statistically significant. Despite these declines, six statewide rates met or exceeded the national HEDIS 2013 Medicaid 50th percentile, with two at or above the national Medicaid 75th percentile.
- ◆ **Obesity:** The HEDIS 2014 statewide performance improved from last year. The rates for all measures increased when compared to last year's rates, and three of the four measures (*Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total* and *Counseling for Physical Activity—Total*, and *Adult BMI Assessment*) reported a statistically significant improvement. All statewide rates met or exceeded the national Medicaid 50th percentile, with one at or above the national Medicaid 75th percentile and one at or above the 90th percentile.
- ◆ **Pregnancy Care:** The HEDIS 2014 statewide performance remained stable compared to last year. The weighted averages of all measures ranked at or above the national Medicaid 50th percentile, with one at or above the national Medicaid 75th percentile.

- ◆ **Living With Illness:** The HEDIS 2014 statewide performance remained stable when compared to last year for many of the measures. Three indicators (*Comprehensive Diabetes Care—Eye Exam*; *Diabetes Monitoring for People With Diabetes and Schizophrenia*; and *Adherence to Antipsychotic Medications for Individuals With Schizophrenia*) exhibited a statistically significant rate increase, and only one (*Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia*) exhibited a statistically significant rate decrease. Twelve rates measured at or above the national Medicaid 50th percentile, and five at or above the 75th percentile. Two indicators measured at or above the 25th percentile but below the 50th percentile, and one indicator measured below the 10th percentile.
- ◆ **Health Plan Diversity:** Although measures under this dimension are not performance measures, changes observed in the results may provide insights into how select member characteristics affect the MHP’s provision of services and care. Comparing the HEDIS 2013 and 2014 statewide rates for the *Race/Ethnicity Diversity of Membership* measure, the 2014 rates exhibited a range of minor increases and decreases across every category reported by Michigan MHP members. For the *Language Diversity of Membership* measure at the statewide level, the percentages of members using *English* or *Non-English* as the spoken language for health care remained almost the same as the previous year’s percentages. The percentage of the Michigan members reporting *English* and *Non-English* as the language preferred for written materials increased slightly in HEDIS 2014. Regarding other language needs, there was a slight increase in the percentage of members reporting *Non-English* and *Unknown* in HEDIS 2014. When comparing the statewide rates with the national HEDIS 2013 Medicaid 50th percentiles, the percentages of Michigan MHP members in the *Unknown* category for the *Written Language* and *Other Language Needs* indicators are lower, indicating Michigan MHPs had been more successful in collecting this type of information than half of the Medicaid plans across the country.
- ◆ **Utilization:** For both *Outpatient* and *Emergency Department Visits*¹⁻⁴ the Michigan Medicaid unweighted averages for HEDIS 2014 demonstrated decreases in the number of visits from HEDIS 2013. Additionally, statewide rates for both visits were below the national HEDIS 2013 Medicaid 50th percentile. For the *Inpatient Utilization—General Hospital/Acute Care* measure, the discharges per 1,000 member months increased for three inpatient service types (*Total Inpatient*, *Medicine*, and *Surgery*). The average length of stay increased for *Total Inpatient* and *Surgery* but decreased slightly for *Medicine* and *Maternity* services.

¹⁻⁴ For this measure, a lower rate indicates better performance (i.e., low rates of emergency department visits suggest more appropriate service utilization).

2. How to Get the Most From This Report

Summary of Michigan Medicaid HEDIS 2014 Measures

HEDIS includes a standard set of measures that can be reported by health plans nationwide. MDCH selected 31 HEDIS measures from the standard Medicaid set. These measures are grouped into eight dimensions of care for Michigan Medicaid enrollees:

- ◆ Child and Adolescent Care
- ◆ Women—Adult Care
- ◆ Access to Care
- ◆ Obesity
- ◆ Pregnancy Care
- ◆ Living With Illness
- ◆ Health Plan Diversity
- ◆ Utilization

Categorizing the measures into different dimensions is designed to encourage MHPs to consider the measures as a whole rather than in isolation, and to consider the strategic and tactical changes required to improve overall performance. The measures and their corresponding dimensions are shown in Table 2-1.

Table 2-1—Michigan Medicaid HEDIS 2014 Measures by Dimension	
Dimension	MDCH HEDIS 2014 Measures
Child and Adolescent Care	<ol style="list-style-type: none"> 1. <i>Childhood Immunization Status (Combinations 2–10)</i> 2. <i>Immunizations for Adolescents (Combination 1)</i> 3. <i>Well-Child Visits in the First 15 Months of Life (Six or More Visits)</i> 4. <i>Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life</i> 5. <i>Adolescent Well-Care Visits</i> 6. <i>Lead Screening in Children</i> 7. <i>Appropriate Treatment for Children With Upper Respiratory Infection</i> 8. <i>Appropriate Testing for Children With Pharyngitis</i> 9. <i>Follow-Up Care for Children Prescribed ADHD Medication</i>
Women—Adult Care	<ol style="list-style-type: none"> 10. <i>Breast Cancer Screening</i> 11. <i>Cervical Cancer Screening</i> 12. <i>Chlamydia Screening in Women (16–20 Years, 21–24 Years, Total)</i>
Access to Care	<ol style="list-style-type: none"> 13. <i>Children and Adolescents’ Access to Primary Care Practitioners (12–24 Months, 25 Months–6 Years, 7–11 Years, 12–19 Years)</i> 14. <i>Adults’ Access to Preventive/Ambulatory Health Services (20–44 Years, 45–64 Years, 65+ Years, Total)</i>
Obesity	<ol style="list-style-type: none"> 15. <i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile (Total), Counseling for Nutrition (Total), Counseling for Physical Activity (Total)</i> 16. <i>Adult BMI Assessment</i>

Table 2-1—Michigan Medicaid HEDIS 2014 Measures by Dimension

Dimension	MDCH HEDIS 2014 Measures
Pregnancy Care	17. <i>Prenatal and Postpartum Care (Timeliness of Prenatal Care, Postpartum Care)</i> 18. <i>Weeks of Pregnancy at Time of Enrollment</i> 19. <i>Frequency of Ongoing Prenatal Care</i>
Living With Illness	20. <i>Comprehensive Diabetes Care (HbA1c Testing, HbA1c Poor Control, HbA1c Control [$<8.0\%$], Eye Exam, LDL-C Screening, LDL-C Control <100 mg/dL, Medical Attention for Nephropathy, Blood Pressure Control [$<140/80$ mm Hg], Blood Pressure Control [$<140/90$ mm Hg])</i> 21. <i>Use of Appropriate Medications for People With Asthma—Total</i> 22. <i>Controlling High Blood Pressure</i> 23. <i>Medical Assistance With Smoking and Tobacco Use Cessation (Advising Smokers and Tobacco Users to Quit, Discussing Cessation Medications, Discussing Cessation Strategies)</i> 24. <i>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications</i> 25. <i>Diabetes Monitoring for People With Diabetes and Schizophrenia</i> 26. <i>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia</i> 27. <i>Adherence to Antipsychotic Medications for Individuals With Schizophrenia</i>
Health Plan Diversity	28. <i>Race/Ethnicity Diversity of Membership</i> 29. <i>Language Diversity of Membership</i>
Utilization	30. <i>Ambulatory Care (Outpatient Visits per 1,000 Member Months, ED Visits per 1,000 Member Months)</i> 31. <i>Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months, Average Length of Stay for Total Inpatient, Medicine, Surgery, Maternity subcategories)</i>

Measure Audit Results

Through the audit process, each measure reported by an MHP is assigned an NCQA-defined audit result. Measures can receive one of four predefined audit results: *Reportable*, *Small Denominator (<30) (NA)*, *Not Reportable (NR)*, and *No Benefit (NB)*. An audit result of *Reportable* indicates that the MHP complied with all HEDIS specifications to produce an unbiased, reportable rate or rates, which can be released for public reporting. Although an MHP may have complied with all applicable specifications, the denominator identified may be considered too small (<30) to report a valid rate. In this case, the measure would be assigned an *NA* audit result. An audit result of *NR* indicates that the rate could not be publicly reported due to one of three reasons: (1) the measure deviated from HEDIS specifications such that the reported rate was significantly biased, (2) an MHP chose not to report the measure, or (3) an MHP was not required to report the measure. A *No Benefit* audit result indicates that the MHP did not offer the health benefit as described in the measure.

It should be noted that NCQA allows health plans to “rotate” select HEDIS measures in some circumstances. A “rotation” schedule enables health plans to use the audited and reportable rate from the prior year. This strategy allows health plans with higher rates for some measures to focus resources on other measures’ rates. Rotated measures must have been audited in the prior year and must have received a *Report* audit designation. Only hybrid measures are eligible to be rotated.

Health plans that meet the HEDIS criteria for hybrid measure rotation may exercise that option if they choose to do so. Eight of the thirteen MHPs chose to rotate at least one measure in HEDIS 2014. Following NCQA methodology, rotated measures were assigned the same reported rates from measurement year 2012 and were included in the calculations for the Michigan Medicaid weighted averages.²⁻¹

Changes to Measures

For HEDIS 2014, NCQA made modifications to some of the measures included in this report, outlined as follows:

Well-Child Visits in the First 15 Months of Life

- ◆ Revised example in continuous enrollment to account for leap year.
- ◆ Clarified that visits must be on different dates of service for the numerators in the Administrative Specification.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

- ◆ Clarified that ranges and thresholds do not meet numerator criteria for BMI percentile.
- ◆ Clarified that members must receive educational materials during a face-to-face visit in order to meet criteria for the hybrid specification for the counseling for nutrition and counseling for physical activity indicators.
- ◆ Added a note stating that a physical exam finding or observation alone is not compliant for counseling for physical activity.
- ◆ Clarified in the Note section that services specific to an acute or chronic condition do not count toward the counseling for nutrition and counseling for physical activity indicators.

Follow-Up Care for Children Prescribed ADHD Medication

- ◆ Revised dates in intake period and age criteria to account for a year that is not a leap year.

Breast Cancer Screening

- ◆ Revised the continuous enrollment time frame.
- ◆ Revised the age criterion to women 50–74 years of age.
- ◆ Revised the numerator time frame.

Cervical Cancer Screening

- ◆ Added the hybrid reporting method for commercial plans.
- ◆ Added steps to allow for two appropriate screening methods of cervical cancer screening: cervical cytology performed every three years in women 21–64 years of age and cervical cytology/HPV co-testing performed every five years in women 30–64 years of age.

²⁻¹ Key measures that were eligible for rotation in HEDIS 2014 were *Controlling High Blood Pressure, Frequency of Ongoing Prenatal Care, Prenatal and Postpartum Care, and Weeks of Pregnancy at Time of Enrollment.*

Adult BMI Assessment

- ◆ Clarified that ranges and thresholds do not meet numerator criteria.

Prenatal and Postpartum Care

- ◆ Removed Definition section.
- ◆ Moved steps to identify the eligible population (previously steps 1 and 2 under the Denominator section in the Administrative Specification) to the Eligible Population section.
- ◆ Removed references to “family practitioner” and “midwife” because these practitioners are included in the definitions of PCP and OB/GYN and other prenatal care practitioners, respectively.
- ◆ Consolidated the steps for identifying numerator events.
- ◆ Consolidated four decision rules (formerly in Table PPC-C) into three decision rules.

Frequency of Ongoing Prenatal Care

- ◆ Revised example in Step 2 of the numerator to account for a year that is not a leap year.

Controlling High Blood Pressure

- ◆ Removed “telephone call record” as an acceptable method for confirming the hypertension diagnosis.
- ◆ Clarified Step 2 of the numerator to state when a blood pressure reading is not compliant.
- ◆ Revised the Optional Exclusion criteria to allow exclusion of all members who had a nonacute inpatient encounter during the measurement year (previously, the exclusion was limited to nonacute inpatient admissions).

Comprehensive Diabetes Care

- ◆ Added canagliflozin to the description of “Sodium glucose cotransporter 2 (SGLT2) inhibitor” in Table CDC-A.
- ◆ Clarified requirements for using the HbA1c Level 7.0-9.0 Value Set for the HbA1c control (<8.0%) indicator.
- ◆ Clarified hybrid requirements for the HbA1c control indicators.
- ◆ Clarified medical record documentation requirements for a negative retinal or dilated eye exam.
- ◆ Clarified that a finding (e.g., normal, within normal limits) is acceptable for the LDL-C screening indicator.
- ◆ Clarified hybrid requirements for the LDL-C control (<100 mg/dL) indicator.
- ◆ Clarified Step 2 of the numerator for BP control indicators in the Hybrid Specifications to state when a BP reading is not compliant.
- ◆ Clarified in the Note section that organizations must use the most recent result for indicators that require it, regardless of data source.

Use of Appropriate Medications for People With Asthma

- ◆ Revised the definition of inhaler dispensing event.

Diabetes Monitoring for People With Diabetes and Schizophrenia

- ◆ Removed “Number of optional exclusions” from Table SMD-1: Data Elements for Diabetes Monitoring for People with Diabetes and Schizophrenia.

Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia

- ◆ Revised the allowable gap criteria.
- ◆ Revised the event/diagnosis criteria to allow both facility and professional claims when identifying AMI or CABG events.

Adherence to Antipsychotic Medications for Individuals With Schizophrenia

- ◆ Clarified in Step 4 of the numerator calculation that the PDC should be rounded to two decimal places, using the .5 rule.

Race/Ethnicity Diversity of Membership

- ◆ Clarified in the note below Table RDM-C that the Unknown category only includes members for whom the organization did not obtain race/ethnicity information or from whom the organization did not receive a “Declined” response.

Inpatient Utilization—General Hospital/Acute Care

- ◆ Revised the measure so that organizations identify all acute inpatient discharges (regardless of principal diagnosis code or DRG) and then apply required exclusions (based on diagnosis of DRGs not intended to be included in the measure).
- ◆ Removed inclusion codes (formerly Table IPU-A) from the measure and added required exclusion codes (IPU Exclusions Value Set). As a result, discharges previously included in the measure based on ungroupable DRGs, with a principal diagnosis code of mental health or chemical dependency, are no longer included in the measure.
- ◆ Removed the required exclusion for members with a principal diagnosis of poisoning in combination with a secondary diagnosis of chemical dependency.

Percentile Ranking

The Percentile Ranking tables presented depict each MHP's rank based on its rate as compared to the NCQA's national HEDIS 2013 Medicaid percentiles.

- ★★★★★ —indicates the MHP's rate is at or above the 90th percentile
- ★★★★ —indicates the MHP's rate is at or above the 75th percentile but below the 90th percentile
- ★★★ —indicates the MHP's rate is at or above the 50th percentile but below the 75th percentile
- ★★ —indicates the MHP's rate is at or above the 25th percentile but below the 50th percentile
- ★ —indicates the MHP's rate is below the 25th percentile
- NA —indicates Not Applicable (i.e., denominator size too small)
- NR —indicates Not Reportable (i.e., biased, or MHP chose not to report)
- NB —indicates No Benefit
- NC —indicates Not Comparable (i.e., measure not comparable to national percentiles or national percentiles not available)

For the *Comprehensive Diabetes Care—Poor HbA1c Control* rates, where lower rates represent higher performance, the percentiles were rotated. For example, if the *Comprehensive Diabetes Care—Poor HbA1c Control* rate fell between the 10th and 25th percentiles, the percentiles would be inverted so that the rate would fall between the 75th and 90th percentiles.

For all measures except those under *Health Plan Diversity*, as well as *Ambulatory Care* measures under *Utilization*, MHP percentile ranking results are suggestive of their performance level. An MHP's rate that was at or above the 90th percentile would suggest better performance and an MHP's rate below the 25th percentile suggests a poorer performance. For all other measures under *Utilization*, since high/low visit counts reported in the interactive data submission system (IDSS) files did not take into account the demographic and clinical conditions of an eligible population, an MHP's percentile ranking does not denote better or worse performance. MHP percentile ranking results for measures under *Health Plan Diversity* provide insight of how member race/ethnicity or language characteristics compared to national distribution and are not suggestive of plan performance.

Performance Levels

The purpose of identifying performance levels is to compare the quality of services provided to Michigan Medicaid managed care beneficiaries to national percentiles and ultimately improve the Michigan Medicaid statewide performance for the measures. Comparative information in this report is based on NCQA's national HEDIS 2013 Medicaid percentiles, which are the most recent data available from NCQA. For all measures except those under *Health Plan Diversity*, as well as *Ambulatory Care* measures under *Utilization*, the statewide rates were compared to the High Performance Level (HPL) and Low Performance Level (LPL). The HPL represents current high performance in national Medicaid managed care, and the LPL represents low performance nationally.

For most measures included in this report, the 90th percentile indicates the HPL and the 25th percentile represents the LPL. This means that Michigan MHPs with reported rates above the 90th percentile (HPL) rank in the top 10 percent of all MHPs nationally. Similarly, MHPs reporting rates below the 25th percentile (LPL) rank in the bottom 25 percent of all MHPs nationally.

For inverse measures such as *Comprehensive Diabetes Care—Poor HbA1c Control*, lower rates indicate better performance. The 10th percentile (rather than the 90th percentile) represents excellent performance and the 75th percentile (rather than the 25th percentile) represents below average performance.

The results displayed in this report were rounded to two decimal places to be consistent with the display of national percentiles. When the rounded rates are the same, the scores in the graph are displayed in alphabetical order based on the MHPs' acronyms.

MHPs should focus their efforts on reaching and/or maintaining the HPL for each measure based on their percentile rankings, rather than comparing themselves to other Michigan MHPs.

Performance Trend Analysis

Appendix C includes trend tables for each of the MHPs. Where applicable, each measure’s HEDIS 2012, 2013, and 2014 rates are presented along with trend analysis results comparing the HEDIS 2013 and 2014 rates. Statistically significant differences using Pearson’s Chi-square tests are displayed. The trends are shown in the following example with specific notations:

2013–2014 Health Plan Trend	Interpretation for measures other than <i>Ambulatory Care</i>
+2.5	The 2014 rate is 2.5 percentage points higher than the HEDIS 2013 rate.
-2.5	The 2014 rate is 2.5 percentage points lower than the HEDIS 2013 rate.
+2.5	The 2014 rate is 2.5 percentage points statistically significantly higher than the HEDIS 2013 rate.
-2.5	The 2014 rate is 2.5 percentage points statistically significantly lower than the HEDIS 2013 rate.

Please note that statistical tests across years were not performed for *Weeks of Pregnancy at Time of Enrollment* and *Frequency of Ongoing Prenatal Care* (except the ≥ 81 Percent indicator) under *Pregnancy Care*, as well as all measures under the *Health Plan Diversity* and *Utilization* dimensions. Nonetheless, differences in rates will still be reported without statistical test results.

Michigan Medicaid Overall Rates

For all measures except those under *Utilization*, the Michigan Medicaid weighted average (MWA) rate was used to represent Michigan Medicaid statewide performance. For measures in the *Utilization* dimension, an unweighted average rate was calculated. Comparatively, the use of a weighted average, based on an MHP’s eligible population for that measure, provides the most representative rate for the overall Michigan Medicaid population. Weighting the rate by an MHP’s eligible population size ensures that a rate for an MHP with 125,000 members in the eligible population for a measure, for example, has a greater impact on the overall Michigan Medicaid rate than a rate for an MHP with only 10,000 members. Rates reported as *NA* were included in the calculations of these averages; rates reported as *NR* or *NB* were not included.

Calculation Methods: Administrative Versus Hybrid

Administrative Method

The administrative method requires MHPs to identify the eligible population (i.e., the denominator) using administrative data, derived from claims and encounters (i.e., statistical claims). In addition, the numerator(s), or services provided to the members in the eligible population, are derived solely from administrative data. Medical records cannot be used to retrieve information. When using the administrative method, the entire eligible population becomes the denominator, and sampling is not allowed. There are measures in seven of the eight dimensions of care in which HEDIS methodology requires that the rates be derived using only the administrative method, and medical record review is not permitted.

The administrative method is cost-efficient but can produce lower rates due to incomplete data submission by capitated providers. For example, an MHP has 10,000 members who qualify for the *Prenatal and Postpartum Care* measure. The MHP chooses to perform the administrative method and finds that 4,000 members out of the 10,000 had evidence of a postpartum visit using administrative data. The final rate for this measure, using the administrative method, would be 4,000/10,000, or 40 percent.

Hybrid Method

The hybrid method requires MHPs to identify the eligible population using administrative data and then extract a systematic sample of members from the eligible population, which becomes the denominator. Administrative data are used to identify services provided to those members. Medical records must then be reviewed for those members who do not have evidence of a service being provided using administrative data.

The hybrid method generally produces higher rates because the completeness of documentation in the medical record exceeds what is typically captured in administrative data; however, the medical record review component of the hybrid method is considered more labor intensive. For example, an MHP has 10,000 members who qualify for the *Prenatal and Postpartum Care* measure. The MHP chooses to use the hybrid method. After randomly selecting 411 eligible members, the MHP finds that 161 members had evidence of a postpartum visit using administrative data. The MHP then obtains and reviews medical records for the 250 members who did not have evidence of a postpartum visit using administrative data. Of those 250 members, 54 were found to have a postpartum visit recorded in the medical record. Therefore, the final rate for this measure, using the hybrid method, would be $(161 + 54)/411$, or 52 percent.

Interpreting Results

HEDIS results can differ among MHPs and even across measures for the same MHP.

The following questions should be asked when examining these data:

1. How accurate are the results?
2. How do Michigan Medicaid rates compare to national percentiles?
3. How are Michigan MHPs performing overall?

1. How accurate are the results?

All Michigan MHPs are required by MDCH to have their HEDIS results confirmed through an NCQA HEDIS Compliance Audit^{TM, 2-2}. As a result, any rate included in this report has been verified as an unbiased estimate of the measure. NCQA's HEDIS protocol is designed so that the hybrid method produces results with a sampling error of ± 5 percent at a 95 percent confidence level.

To show how sampling error affects the accuracy of results, an example is provided. When an MHP uses the hybrid method to derive a *Postpartum Care* rate of 52 percent, the true rate is actually ± 5 percent of this rate, due to sampling error. For a 95 percent confidence level, the rate would be between 47 percent and 57 percent. If the target is a rate of 55 percent, it cannot be said with certainty whether the true rate between 47 percent and 57 percent meets or does not meet the target level.

To prevent such ambiguity, this report uses a standardized methodology that requires the reported rate to be at or above the threshold level to be considered as meeting the target. For internal purposes, MHPs should understand and consider the issue of sampling error when evaluating HEDIS results.

2. How do Michigan Medicaid rates compare to national percentiles?

For each measure, an MHP ranking presents the reported rate in order from highest to lowest, with bars representing the established HPL, LPL, and the national HEDIS 2013 Medicaid 50th percentile. In addition, the 2012, 2013, and 2014 Michigan Medicaid weighted averages are presented for comparison purposes.

Michigan MHPs with reported rates above the 90th percentile (HPL) rank in the top 10 percent of all MHPs nationally. Similarly, MHPs reporting rates below the 25th percentile (LPL) rank in the bottom 25 percent nationally for that measure.

3. How are Michigan MHPs performing overall?

For each dimension, a performance profile analysis compares the 2014 Michigan Medicaid weighted average for each rate with the 2012 and 2013 Michigan Medicaid weighted averages and the national HEDIS 2013 Medicaid 50th percentile.

²⁻² NCQA HEDIS Compliance AuditTM is a trademark of the National Committee for Quality Assurance (NCQA).

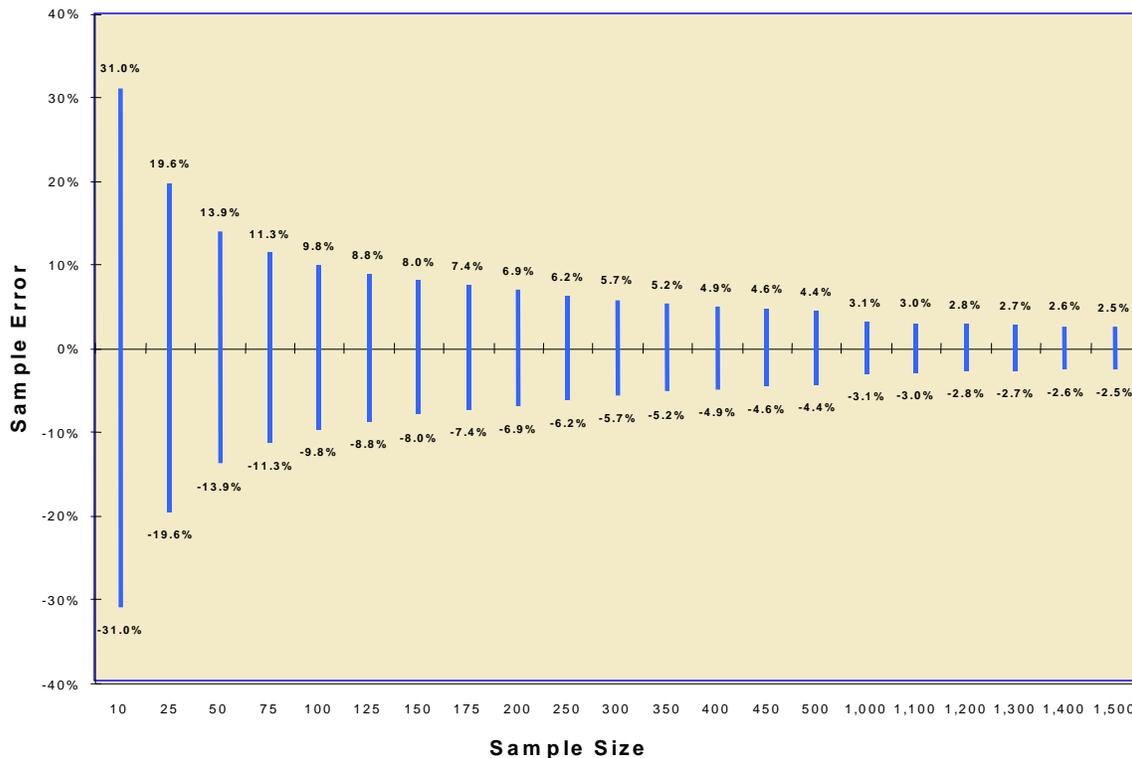
Understanding Sampling Error

Correct interpretation of results for measures collected using the HEDIS hybrid methodology requires an understanding of sampling error. It is rarely possible, logistically or financially, to perform medical record review for the entire eligible population for a given measure. Measures collected using the HEDIS hybrid method include only a sample from the eligible population, and statistical techniques are used to maximize the probability that the sample results reflect the experience of the entire eligible population.

For results to be generalized to the entire eligible population, the process of sample selection must be such that everyone in the eligible population has an equal chance of being selected. The HEDIS hybrid method prescribes a systematic sampling process selecting at least 411 members of the eligible population. MHPs may use a 5 percent, 10 percent, 15 percent, or 20 percent oversample to replace invalid cases (e.g., a male selected for *Postpartum Care*).

Figure 2-1 shows that if 411 MHP members are included in a measure, the margin of error is approximately ± 4.9 percentage points. Note that the data in this figure are based on the assumption that the size of the eligible population is greater than 2,000. The smaller the sample included in the measure, the larger the sampling error.

Figure 2-1—Relationship of Sample Size to Sample Error



As Figure 2-1 shows, sample error gets smaller as the sample size gets larger. Consequently, when sample sizes are very large and sampling errors are very small, almost any difference is statistically significant. This does not mean that all such differences are important. On the other hand, the

difference between two measured rates may not be statistically significant, but may, nevertheless, be important. The judgment of the reviewer is always a requisite for meaningful data interpretation.

Acronyms

Figures in the following sections of the report show overall health plan performance for each of the measures. Below is the name code for each of the health plan abbreviations used in the figures.

Table 2-2—2014 Michigan MHPs	
Acronym	Medicaid Health Plan Name
BCC	Blue Cross Complete of Michigan
COV	CoventryCares of Michigan, Inc.
HAR	Harbor Health Plan
HPP	HealthPlus Partners
MCL	McLaren Health Plan
MER	Meridian Health Plan of Michigan
MID	HAP Midwest Health Plan, Inc.
MOL	Molina Healthcare of Michigan
PHP	Physicians Health Plan—FamilyCare
PRI	Priority Health Choice, Inc.
THC	Total Health Care, Inc.
UNI	UnitedHealthcare Community Plan
UPP	Upper Peninsula Health Plan

Compared with last year’s plan list, ProCare Health Plan and Midwest Health Plan changed their names to Harbor Health Plan (HAR) and HAP Midwest Health Plan (MID), respectively.

In addition to the plans’ acronyms, the following are some additional abbreviations used in the tables or charts.

Table 2-3—Acronyms in Tables and Graphs	
Acronym	Description
MWA	Michigan Medicaid Weighted Average
MA	Michigan Medicaid Average
P50	National HEDIS Medicaid 50th Percentile
HPL	High Performance Level
LPL	Low Performance Level

Introduction

The Child and Adolescent Care dimension encompasses the following MDCH measures:

- ◆ *Childhood Immunization Status—Combination 2*
- ◆ *Childhood Immunization Status—Combination 3*
- ◆ *Childhood Immunization Status—Combination 4*
- ◆ *Childhood Immunization Status—Combination 5*
- ◆ *Childhood Immunization Status—Combination 6*
- ◆ *Childhood Immunization Status—Combination 7*
- ◆ *Childhood Immunization Status—Combination 8*
- ◆ *Childhood Immunization Status—Combination 9*
- ◆ *Childhood Immunization Status—Combination 10*
- ◆ *Immunizations for Adolescents—Combination 1*
- ◆ *Well-Child Visits in the First 15 Months of Life—Six or More Visits*
- ◆ *Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life*
- ◆ *Adolescent Well-Care Visits*
- ◆ *Lead Screening in Children*
- ◆ *Appropriate Treatment for Children With Upper Respiratory Infection*
- ◆ *Appropriate Testing for Children With Pharyngitis*
- ◆ *Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase*
- ◆ *Follow-Up Care for Children Prescribed ADHD Medication—Continuation and Maintenance Phase*

Summary of Findings

Table 3-1 presents statewide performance for the measures under the Child and Adolescent Care dimension. It lists the HEDIS 2014 weighted averages, the trended results, and a summary of the MHPs with rates showing significant changes from HEDIS 2013.

**Table 3-1—Michigan Medicaid HEDIS 2014 Statewide Rate Trend
Child and Adolescent Care**

Measure	Statewide Rate		Number of MHPs			
	HEDIS 2014 Weighted Average	2013–2014 Trend	With Significant Improvement in HEDIS 2014	With Significant Decline in HEDIS 2014		
<i>Childhood Immunization Status</i>						
<i>Combination 2</i>	80.90%	-0.58	0	4		
<i>Combination 3</i>	77.21%	+0.05	1	2		
<i>Combination 4</i>	70.61%	+14.47	8	0		
<i>Combination 5</i>	61.42%	+3.85	2	1		
<i>Combination 6</i>	42.17%	+4.40	5	0		
<i>Combination 7</i>	57.33%	+14.48	8	0		
<i>Combination 8</i>	40.22%	+10.06	9	0		
<i>Combination 9</i>	35.18%	+4.57	6	0		
<i>Combination 10</i>	33.87%	+9.08	9	0		
<i>Immunizations for Adolescents—Combination 1</i>	88.43%	-0.42	0	0		
<i>Well-Child Visits in the First 15 Months of Life—6 or More Visits</i>	73.09%	-4.74	1	5		
<i>Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life</i>	77.05%	-0.98	0	4		
<i>Adolescent Well-Care Visits</i>	57.80%	-3.66	1	3		
<i>Lead Screening in Children</i>	80.43%	-1.97	0	0		
<i>Appropriate Treatment for Children With Upper Respiratory Infection</i>	86.53%	+1.00	5	0		
<i>Appropriate Testing for Children With Pharyngitis</i>	59.19%	-2.09	1	4		
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>						
<i>Initiation Phase</i>	40.24%	+1.15	1	0		
<i>Continuation and Maintenance Phase</i>	47.04%	+0.11	1	1		
2013–2014 trend note: Rates shaded in green with a green font indicate a statistically significant improvement from the prior year. Rates shaded in red with a red font indicate a statistically significant decline from the prior year.						
Legend	<P10	≥P10 and < P25	≥P25 and < P50	≥P50 and < P75	≥P75 and < P90	≥P90

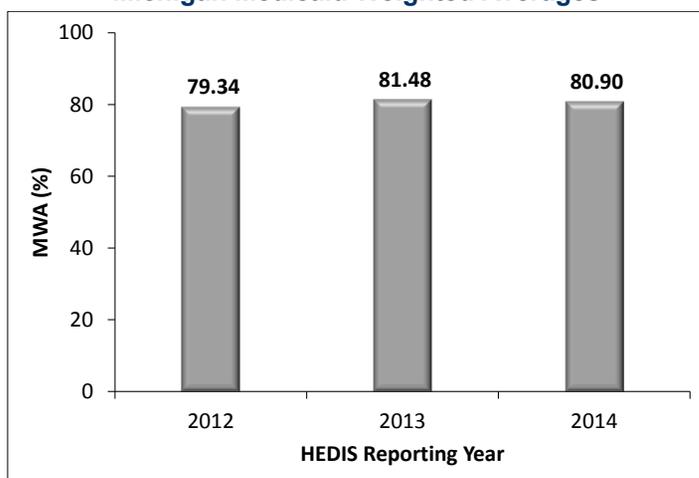
Table 3-1 shows that all but seven measures/indicators under the Child and Adolescent Care dimension reported a rate increase from last year. Eight of these rates (i.e., *Appropriate Treatment for Children With Upper Respiratory Infection* and *Childhood Immunization Status—Combos 4 through 10*) reported a statistically significant improvement. A statistically significant decrease was observed in three rates (i.e., *Well-Child Visits in the First 15 Months of Life—6 or More Visits*, *Adolescent Well-Care Visits*, and *Appropriate Testing for Children With Pharyngitis*). Overall, all but one rate ranked at or above the national HEDIS 2013 Medicaid 50th percentile. Of these, one rate benchmarked at or above the 90th percentile and two between the 75th and 90th percentile. *Appropriate Testing for Children With Pharyngitis* ranked between the 10th and 25th percentile.

Child and Adolescent Care Findings

Childhood Immunization Status—Combination 2

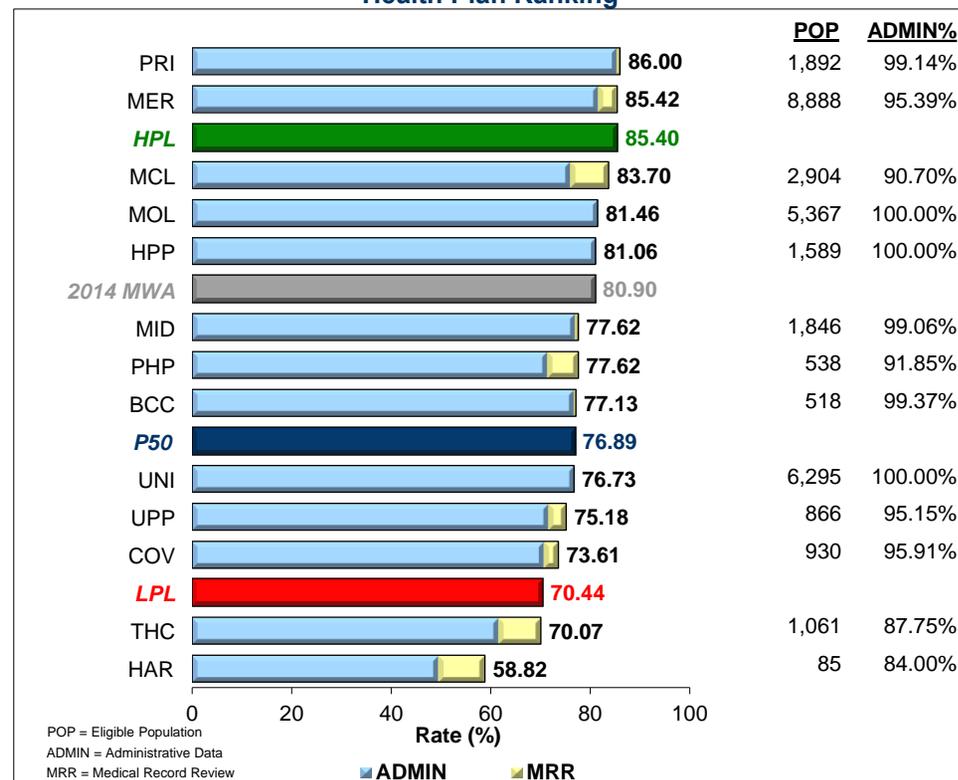
The percentage of children 2 years of age who had four diphtheria, tetanus, and acellular pertussis (DTaP); three polio (IPV); one measles, mumps, and rubella (MMR); three H influenza type B (HiB); three hepatitis B (HepB); and one chicken pox (VZV) vaccines by their second birthday.

**Figure 3-1—Childhood Immunization Status—Combination 2
Michigan Medicaid Weighted Averages**



Although the HEDIS 2014 weighted average decreased slightly from HEDIS 2013 (0.58 percentage points), it exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and two performed below the LPL. All plans used at least 80 percent of administrative data to calculate their rates.

**Figure 3-2—Childhood Immunization Status—Combination 2
Health Plan Ranking**

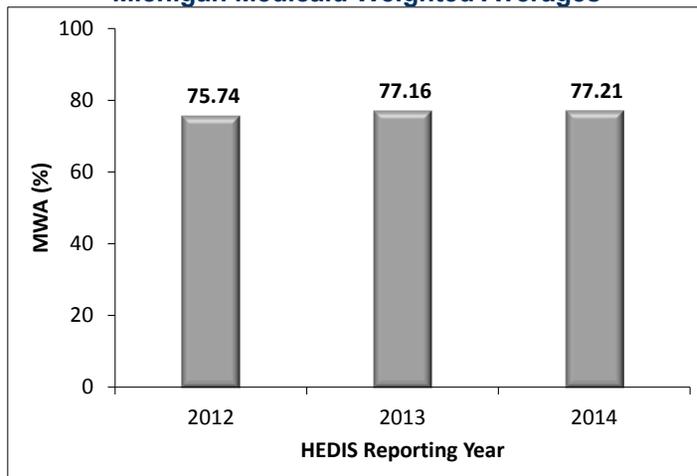


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 3

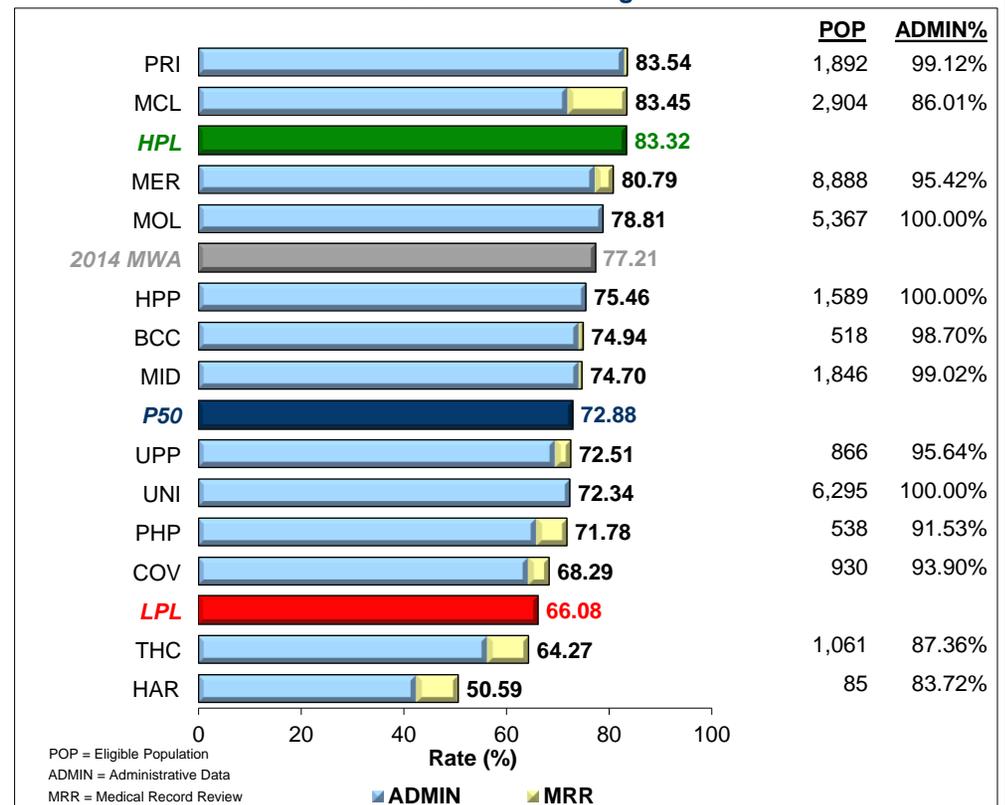
The percentage of children 2 years of age who had four diphtheria, tetanus, and acellular pertussis (DTaP); three polio (IPV); one measles, mumps, and rubella (MMR); three H influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); and four pneumococcal conjugate (PCV) vaccines by their second birthday.

**Figure 3-3—Childhood Immunization Status—Combination 3
Michigan Medicaid Weighted Averages**



The HEDIS 2014 weighted average increased slightly from HEDIS 2013 (0.05 percentage points) and exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and two performed below the LPL. All plans used at least 80 percent of administrative data to calculate their rates.

**Figure 3-4—Childhood Immunization Status—Combination 3
Health Plan Ranking**

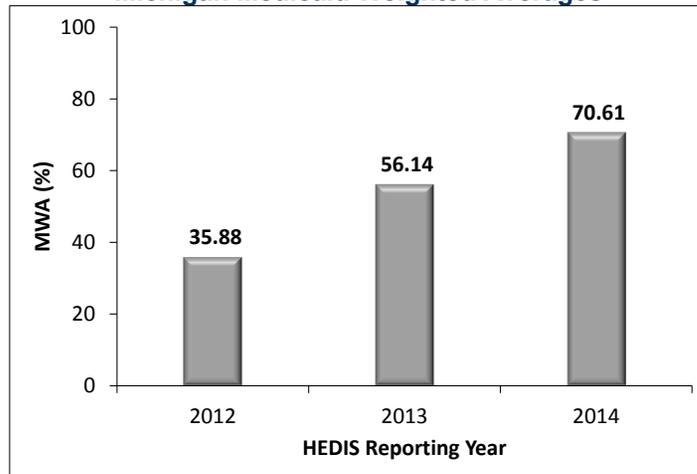


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 4

The percentage of children 2 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); and one hepatitis A (HepA) vaccine by their second birthday.

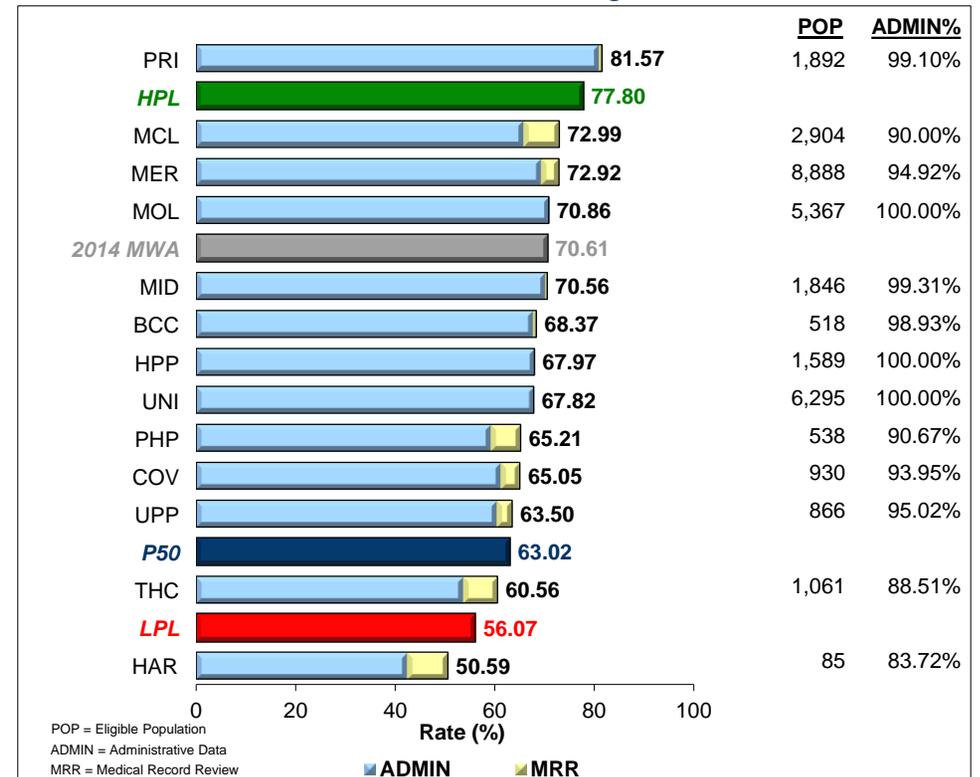
**Figure 3-5—Childhood Immunization Status—Combination 4
Michigan Medicaid Weighted Averages**



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 14.47 percentage points. The year-over-year MWA trend should be interpreted with caution due to the specification change from HEDIS 2012 to HEDIS 2013. One MHP performed above the HPL, and one performed below the LPL. All plans used at least 80 percent of administrative data to calculate their rates.

**Figure 3-6—Childhood Immunization Status—Combination 4
Health Plan Ranking**

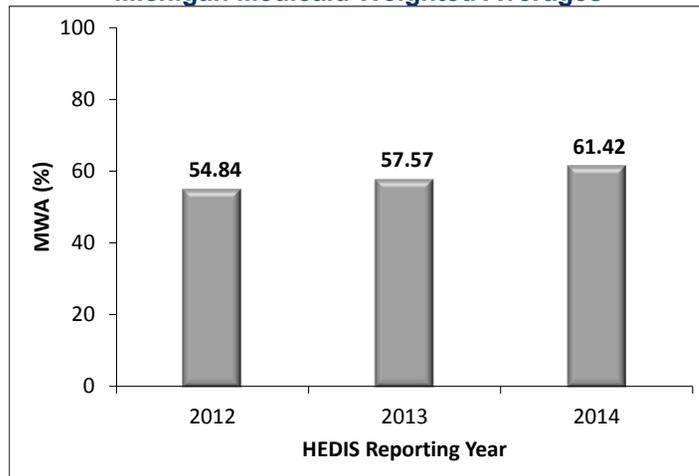


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 5

The percentage of children 2 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); and two or three rotavirus (RV) vaccines by their second birthday.

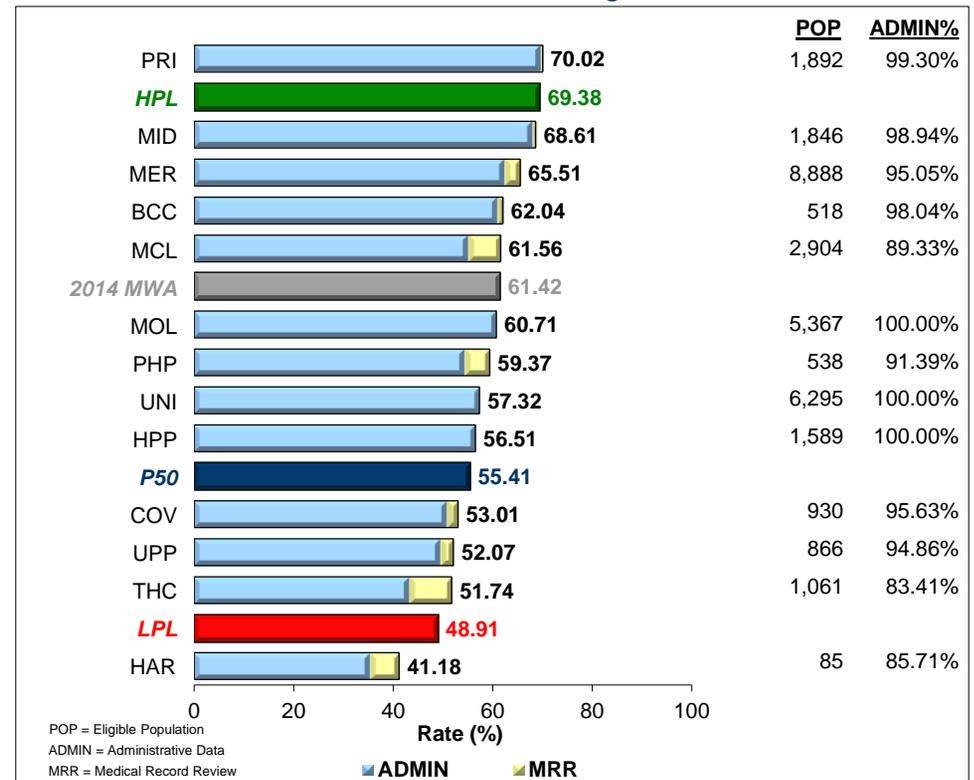
Figure 3-7—Childhood Immunization Status—Combination 5 Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 3.85 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and one performed below the LPL. All plans used at least 80 percent of administrative data to calculate their rates.

Figure 3-8—Childhood Immunization Status—Combination 5 Health Plan Ranking

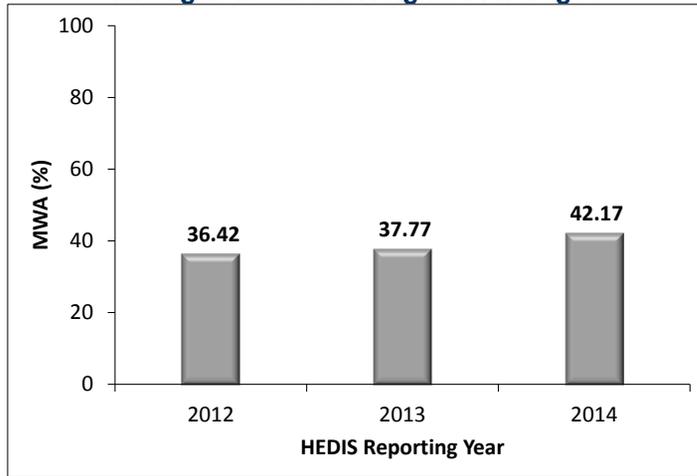


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 6

The percentage of children 2 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); and two influenza (flu) vaccines by their second birthday.

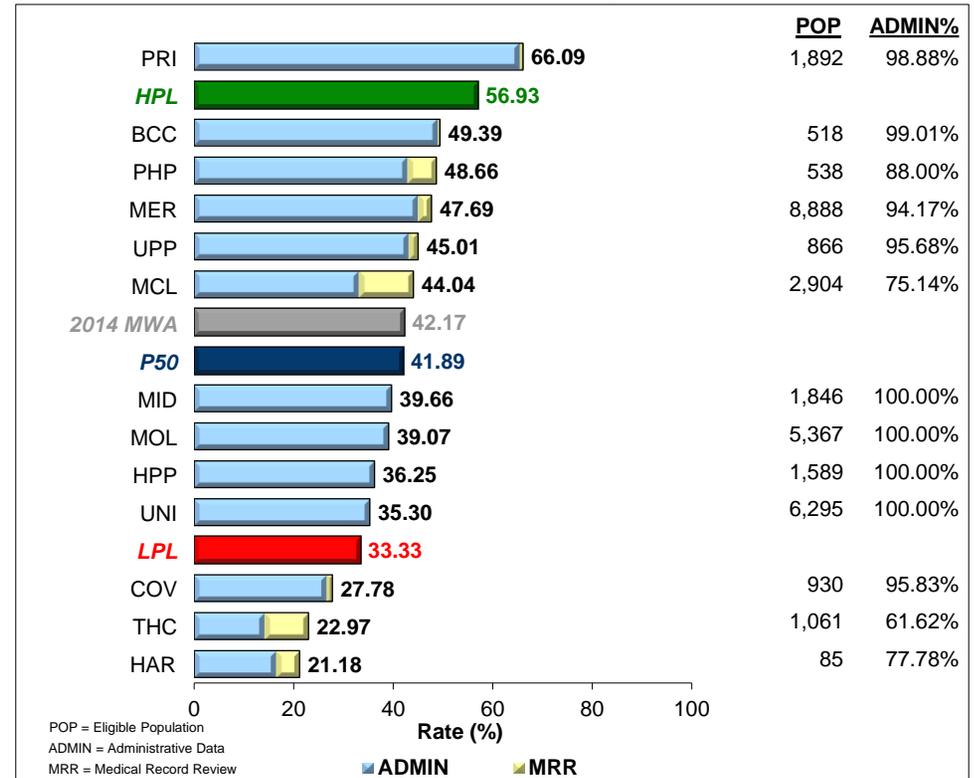
Figure 3-9—Childhood Immunization Status—Combination 6 Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 4.40 percentage points and was above the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and three performed below the LPL. All plans but three used at least 80 percent of administrative data to calculate their rates.

Figure 3-10—Childhood Immunization Status—Combination 6 Health Plan Ranking

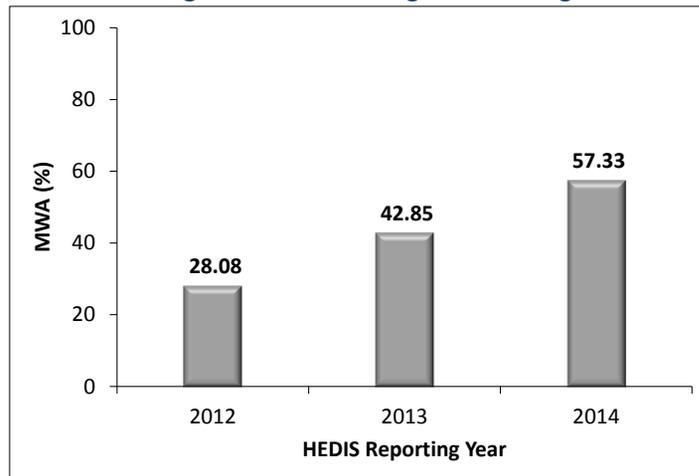


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 7

The percentage of children 2 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); one hepatitis A (HepA) vaccine; and two or three rotavirus (RV) vaccines by their second birthday.

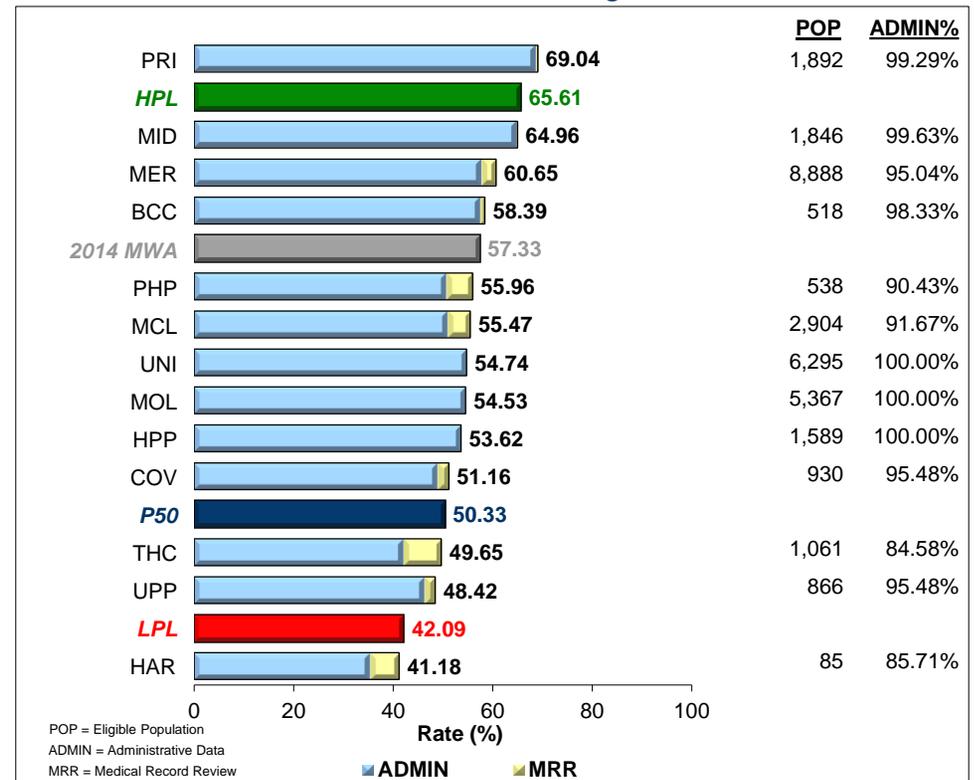
**Figure 3-11—Childhood Immunization Status—Combination 7
Michigan Medicaid Weighted Averages**



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 14.48 percentage points. The year-over-year MWA trend should be interpreted with caution due to the specification change from HEDIS 2012 to HEDIS 2013 for this indicator. One MHP performed above the HPL, and one performed below the LPL. All plans used at least 80 percent of administrative data to calculate their rates.

**Figure 3-12—Childhood Immunization Status—Combination 7
Health Plan Ranking**

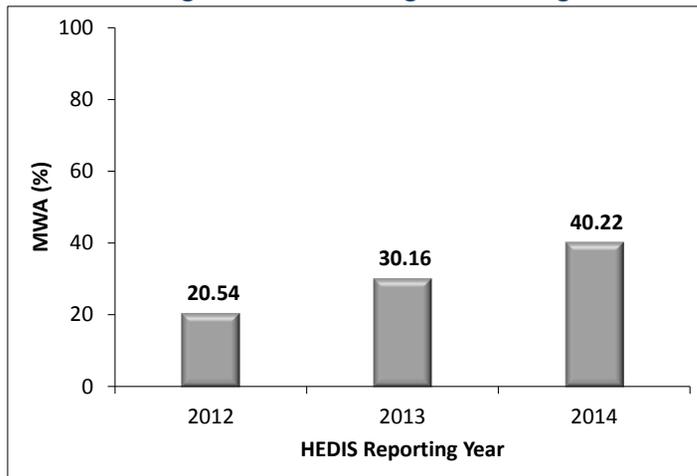


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 8

The percentage of children 2 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); one hepatitis A (HepA) vaccine; and two influenza (flu) vaccines by their second birthday.

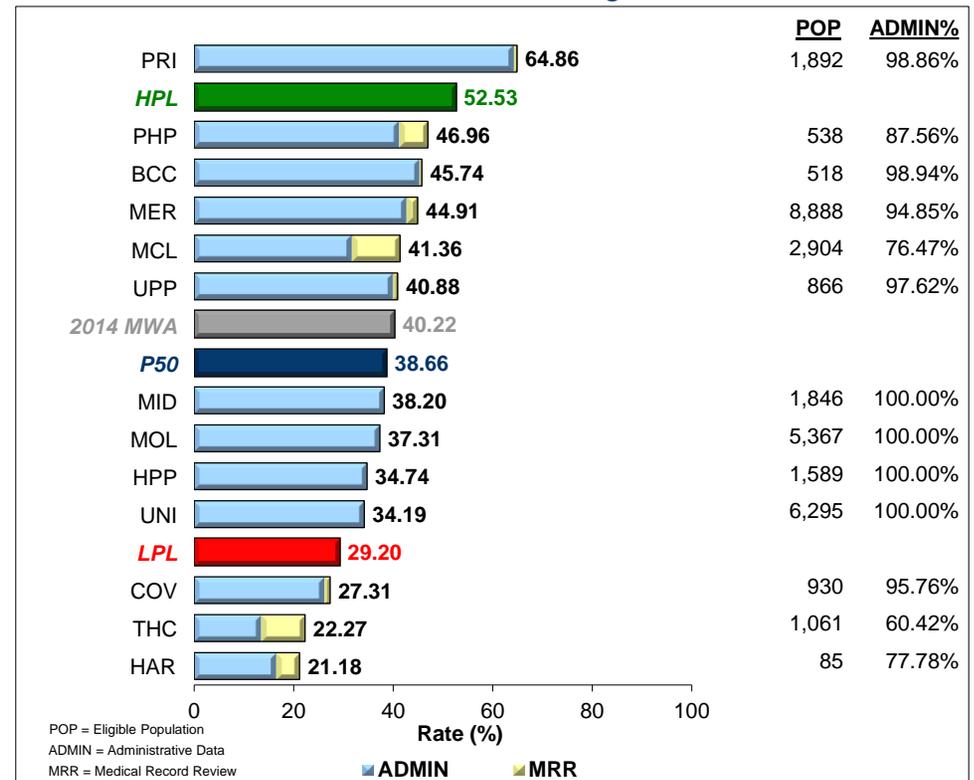
Figure 3-13—Childhood Immunization Status—Combination 8 Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 10.06 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. The year-over-year MWA trend should be interpreted with caution due to the specification change from HEDIS 2012 to HEDIS 2013 for this indicator. One MHP performed above the HPL, and three performed below the LPL. All plans but three used at least 80 percent of administrative data to calculate their rates.

Figure 3-14—Childhood Immunization Status—Combination 8 Health Plan Ranking

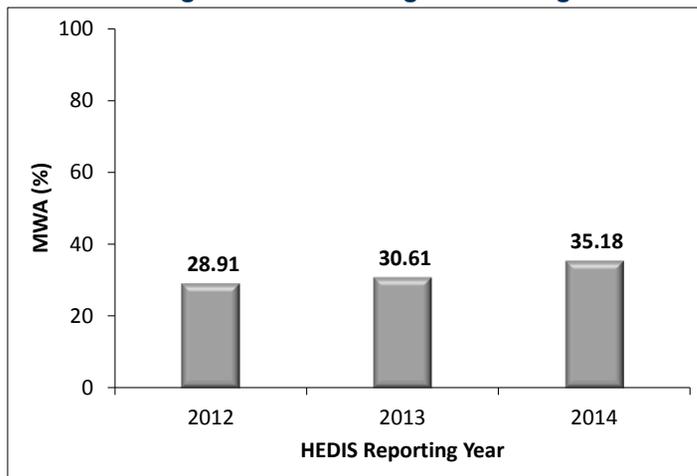


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 9

The percentage of children 2 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 or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.

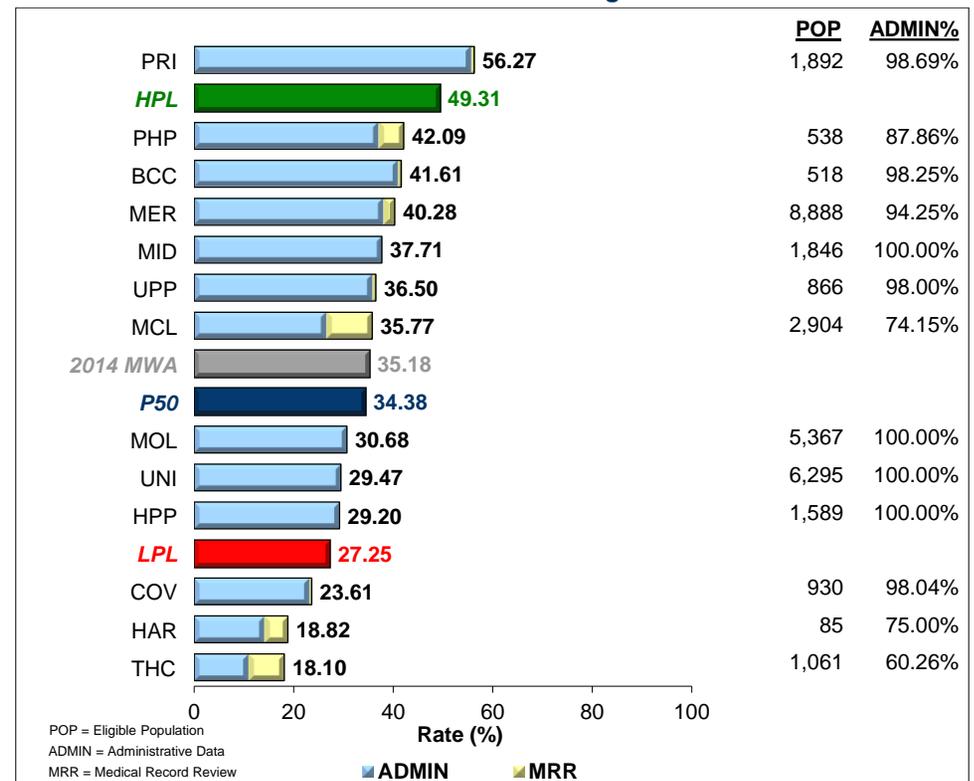
**Figure 3-15—Childhood Immunization Status—Combination 9
Michigan Medicaid Weighted Averages**



Rate increase from HEDIS 2013 to HEDIS 2014 was statistically significant

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 4.57 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and three performed below the LPL. All plans but three used at least 80 percent of administrative data to calculate their rates.

**Figure 3-16—Childhood Immunization Status—Combination 9
Health Plan Ranking**

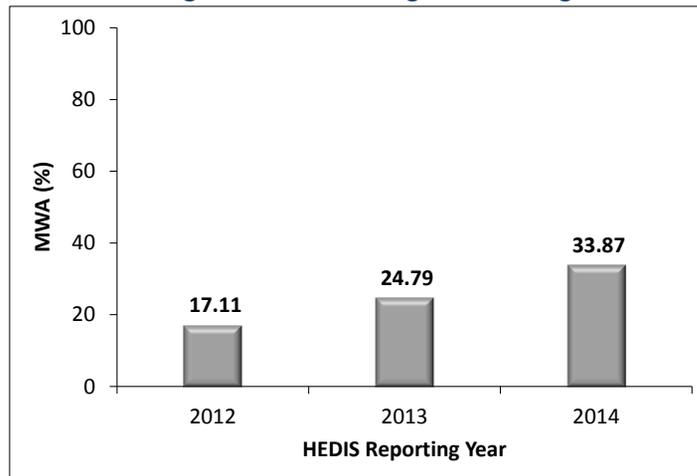


HPP and UNI chose to use the administrative method for this hybrid indicator.

Childhood Immunization Status—Combination 10

The percentage of children 2 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); one hepatitis A (HepA) vaccine; two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.

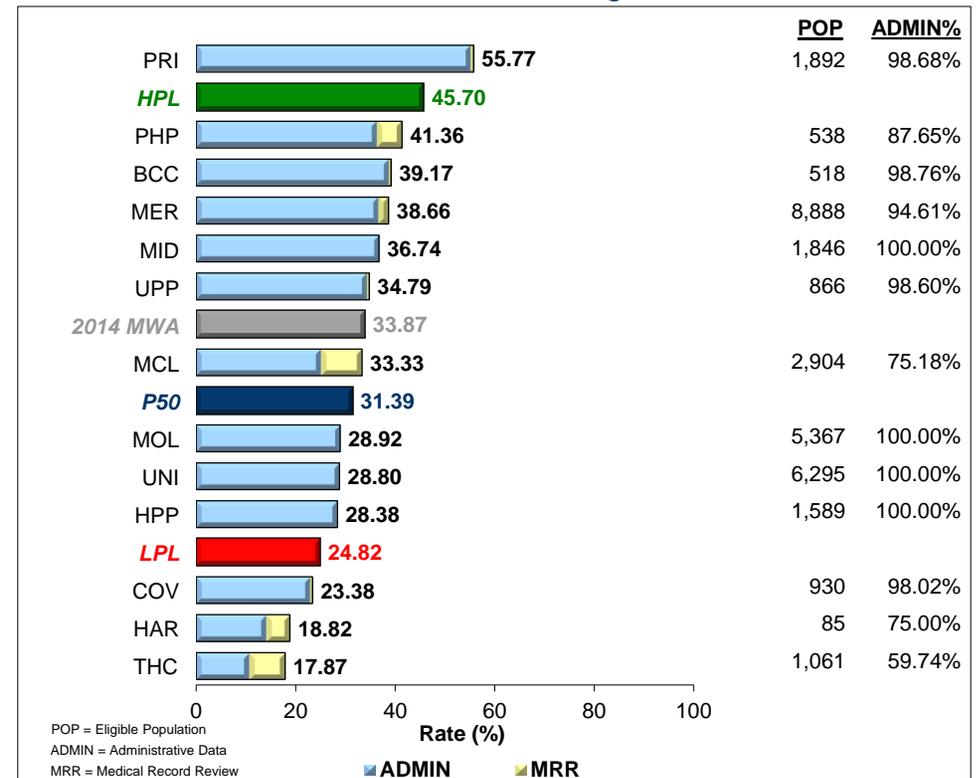
Figure 3-17—Childhood Immunization Status—Combination 10 Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 9.08 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. The year-over-year MWA trend should be interpreted with caution due to the specification change from HEDIS 2012 to HEDIS 2013 for this indicator. One MHP performed above the HPL, and three performed below the LPL. All plans but three used at least 80 percent of administrative data to calculate their rates.

Figure 3-18—Childhood Immunization Status—Combination 10 Health Plan Ranking

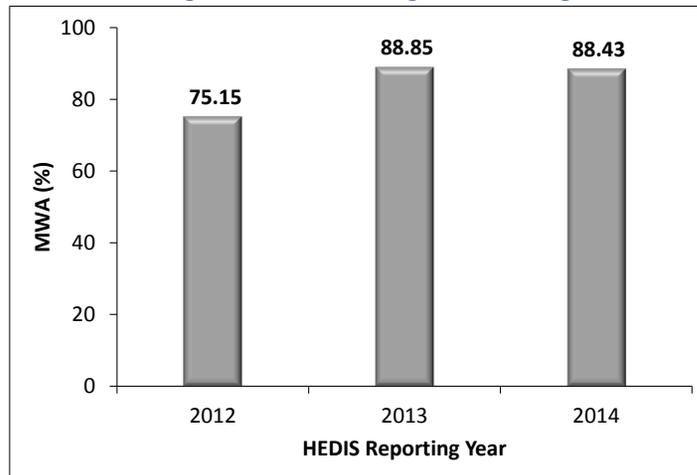


HPP and UNI chose to use the administrative method for this hybrid indicator.

Immunizations for Adolescents—Combination 1

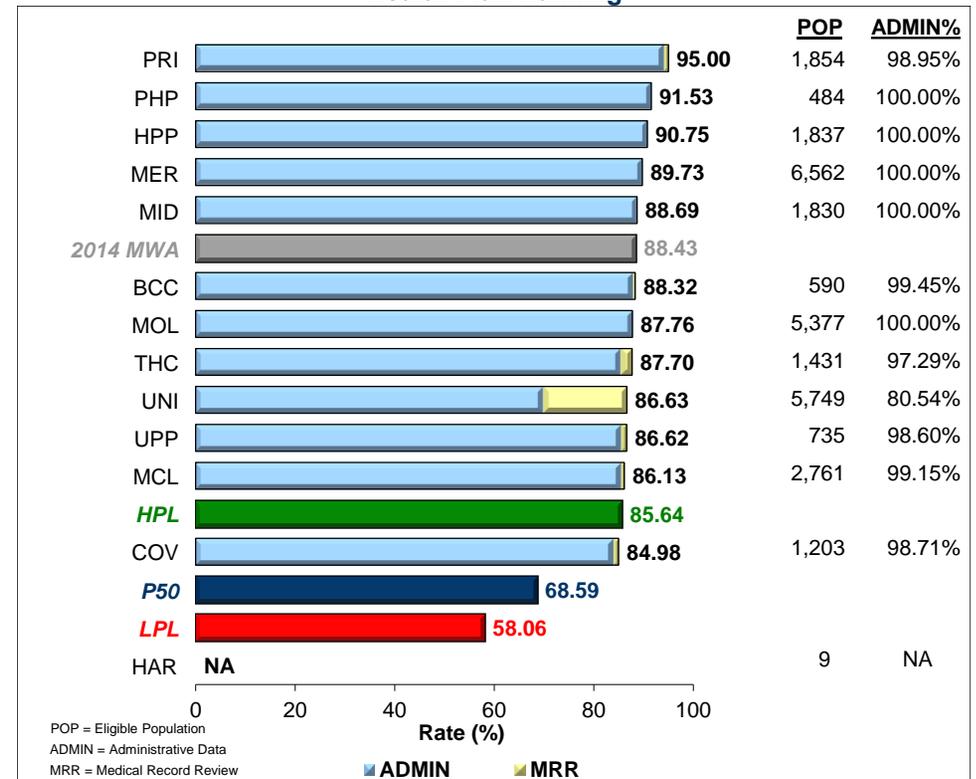
The percentage of adolescents 13 years of age who had one dose of meningococcal vaccine and one tetanus, diphtheria, and acellular pertussis vaccine (DTap) or one tetanus and diphtheria toxoids vaccine (Td) by their 13th birthday.

Figure 3-19—Immunizations for Adolescents—Combination 1 Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased slightly from HEDIS 2013 (0.42 percentage points), it exceeded the HPL. Eleven MHPs with valid rates performed above the HPL. All plans with valid rates used at least 80 percent of administrative data to calculate their rates.

Figure 3-20—Immunizations for Adolescents—Combination 1 Health Plan Ranking

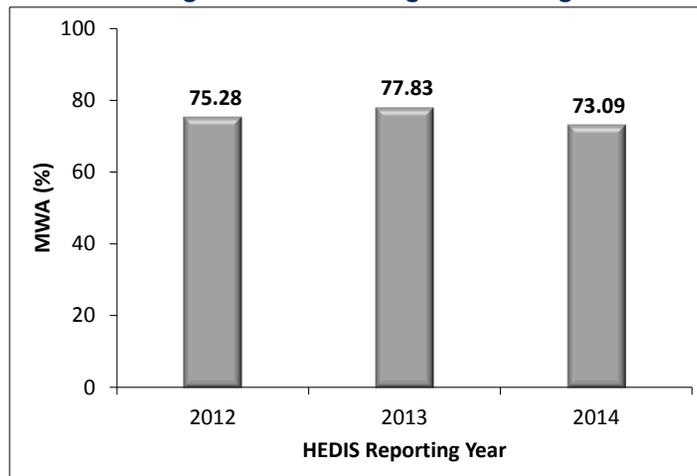


HPP, MID, MER, MOL, and PHP chose to use the administrative method for this hybrid indicator.

Well-Child Visits in the First 15 Months of Life—Six or More Visits

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 primary care practitioner (PCP) during their first 15 months of life: no well-child visits; one well-child visit; two well-child visits; three well-child visits; four well-child visits; five well-child visits; and six or more well-child visits.

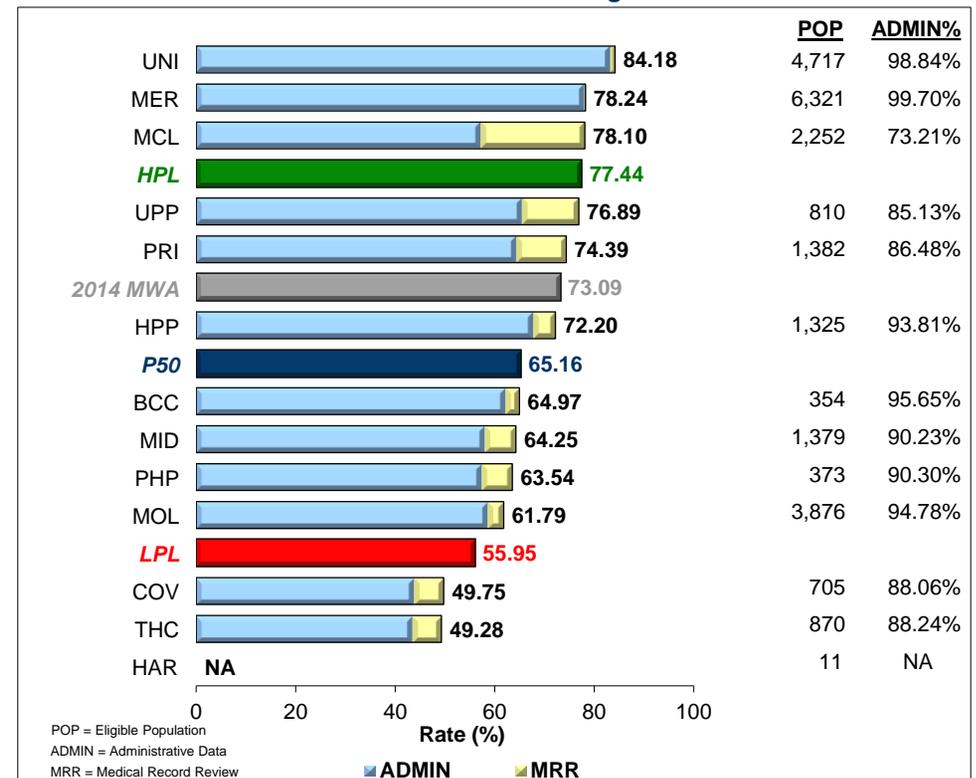
**Figure 3-21—Well-Child Visits in the First 15 Months of Life—Six or More Visits
Michigan Medicaid Weighted Averages**



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

Although the HEDIS 2014 weighted average declined significantly from HEDIS 2013 by 4.74 percentage points, it exceeded the HEDIS 2013 Medicaid 50th percentile. Three MHPs with valid rates performed above the HPL, and two performed below the LPL. All plans with valid rates (except one plan) used at least 80 percent of administrative data to calculate their rates.

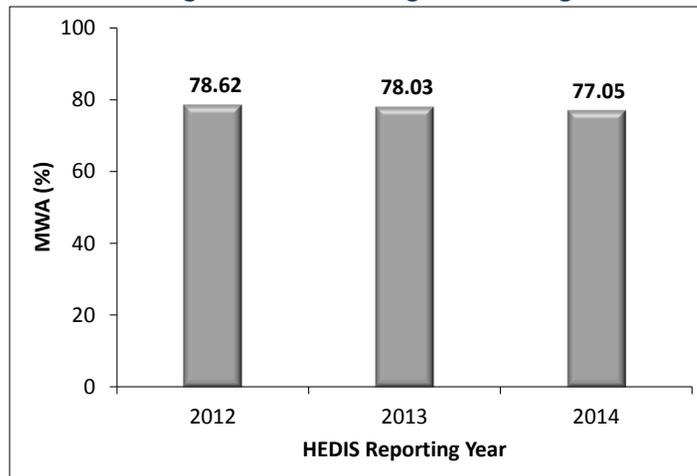
**Figure 3-22—Well-Child Visits in the First 15 Months of Life—Six or More Visits
Health Plan Ranking**



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

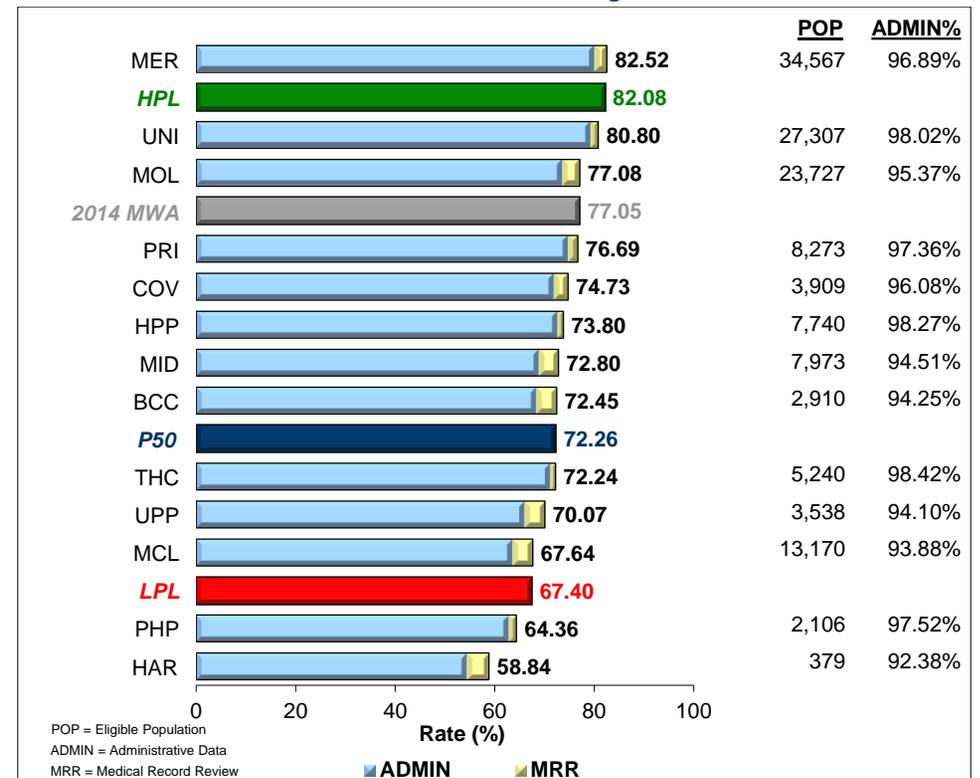
The percentage of members 3–6 years of age who had one or more well-child visits with a PCP during the measurement year.

**Figure 3-23—Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life
Michigan Medicaid Weighted Averages**



Although the HEDIS 2014 weighted average decreased slightly from HEDIS 2013 (0.98 percentage points), it exceeded the national HEDIS Medicaid 50th percentile. One MHP performed above the HPL, and two performed below the LPL. All plans used at least 90 percent of administrative data to calculate their rates.

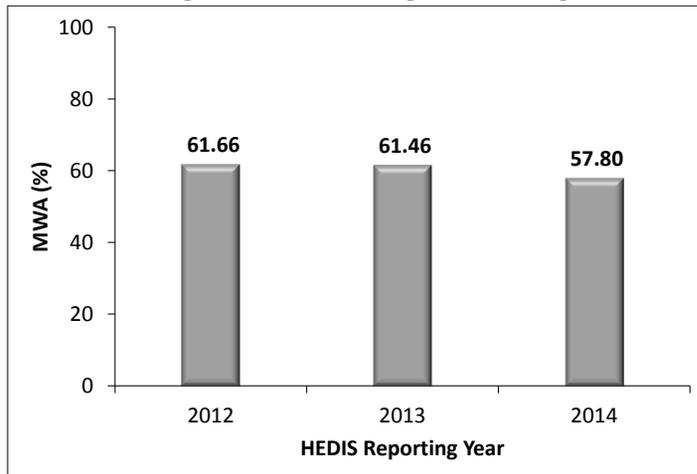
**Figure 3-24—Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life
Health Plan Ranking**



Adolescent Well-Care Visits

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

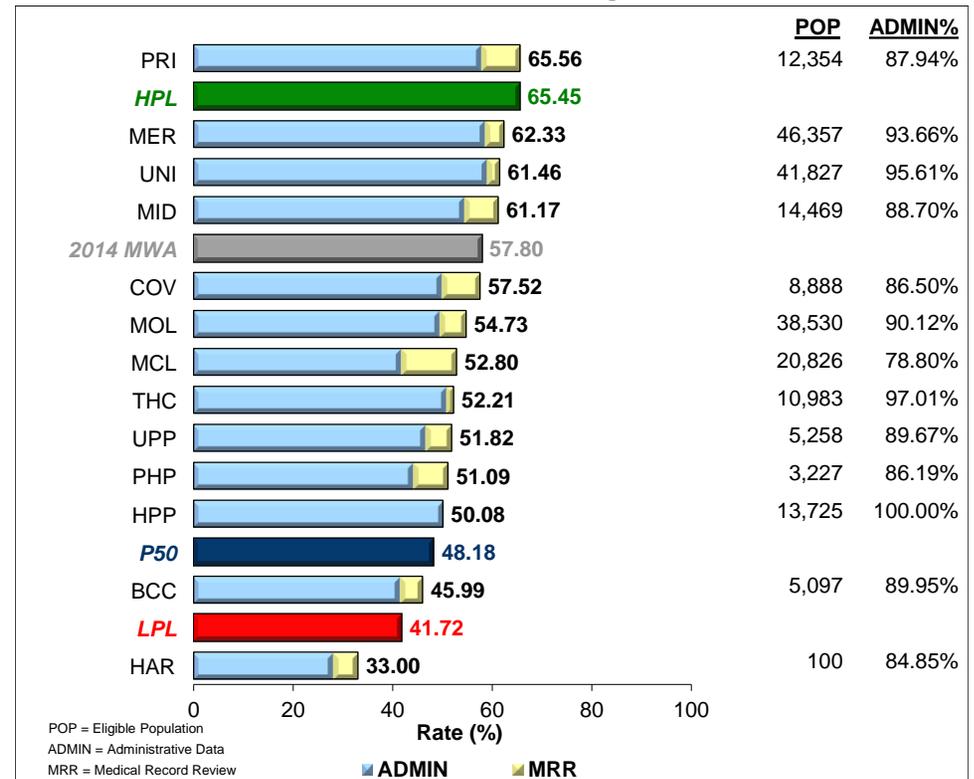
**Figure 3-25—Adolescent Well-Care Visits
Michigan Medicaid Weighted Averages**



Rate decrease from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average declined significantly from HEDIS 2013 by 3.66 percentage points but exceeded the national HEDIS Medicaid 50th percentile. One MHP performed above the HPL, and one performed below the LPL. All plans but one used at least 80 percent of administrative data to calculate their rates.

**Figure 3-26—Adolescent Well-Care Visits
Health Plan Ranking**

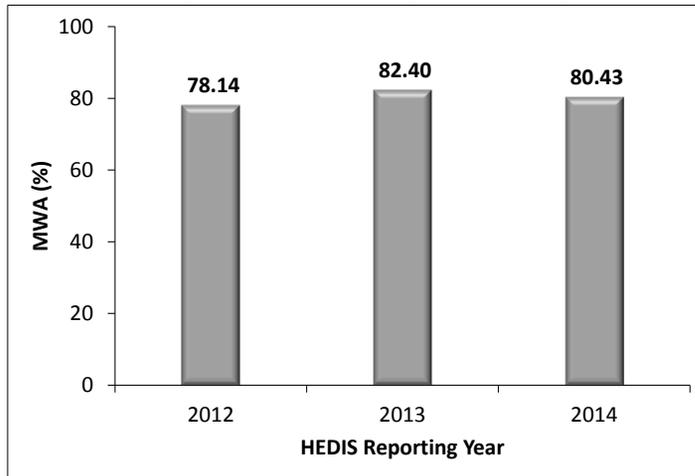


HPP chose to use the administrative method for this hybrid indicator

Lead Screening in Children

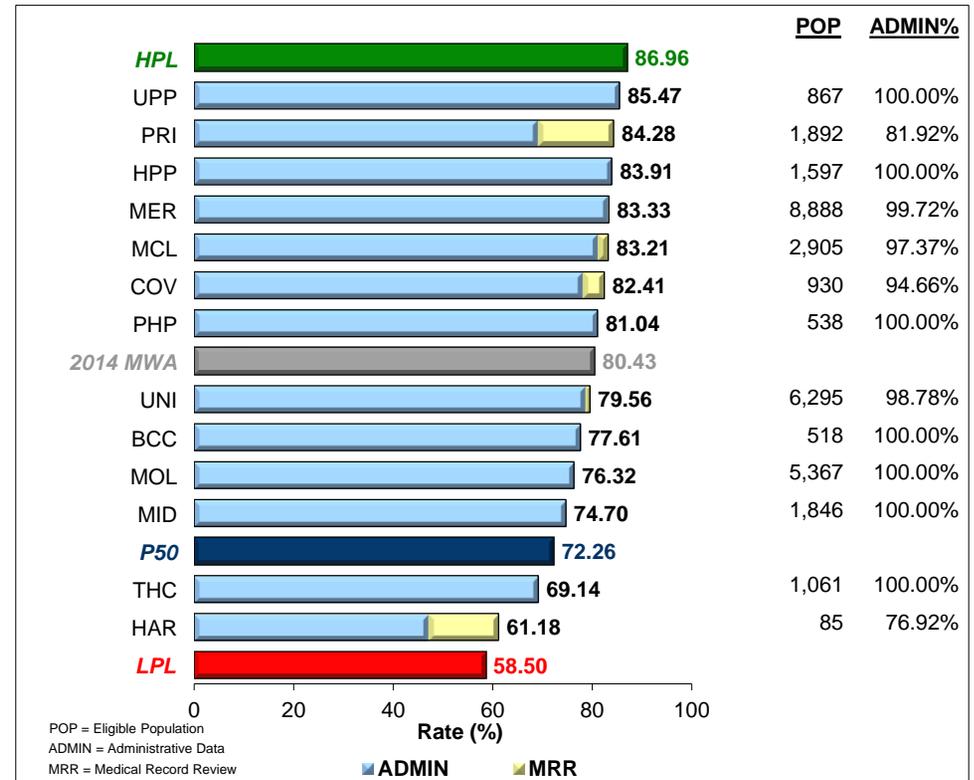
The percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.

**Figure 3-27—Lead Screening in Children
Michigan Medicaid Weighted Averages**



Although the HEDIS 2014 weighted average decreased from HEDIS 2013 by 1.97 percentage points, it exceeded the national HEDIS Medicaid 50th percentile. No MHPs performed above the HPL, and none performed below the LPL. All plans but one used at least 80 percent of administrative data to calculate their rates.

**Figure 3-28—Lead Screening in Children
Health Plan Ranking**

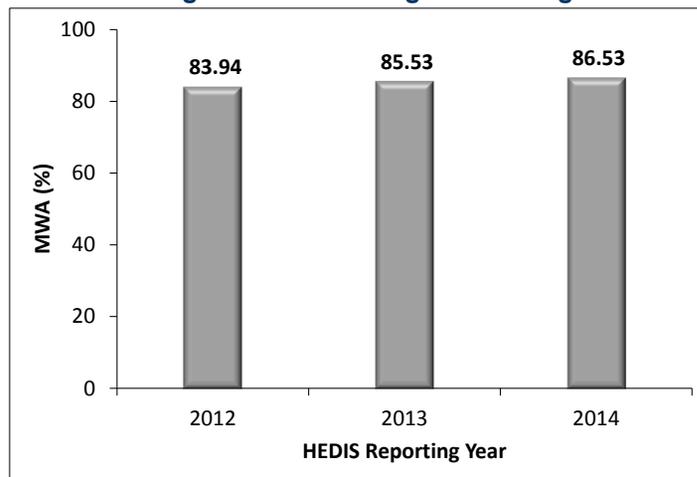


BCC, HPP, MOL, PHP, and UPP chose to use the administrative method for this hybrid measure.

Appropriate Treatment for Children With Upper Respiratory Infection

The percentage of children 3 months to 18 years of age who were given a diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic prescription.

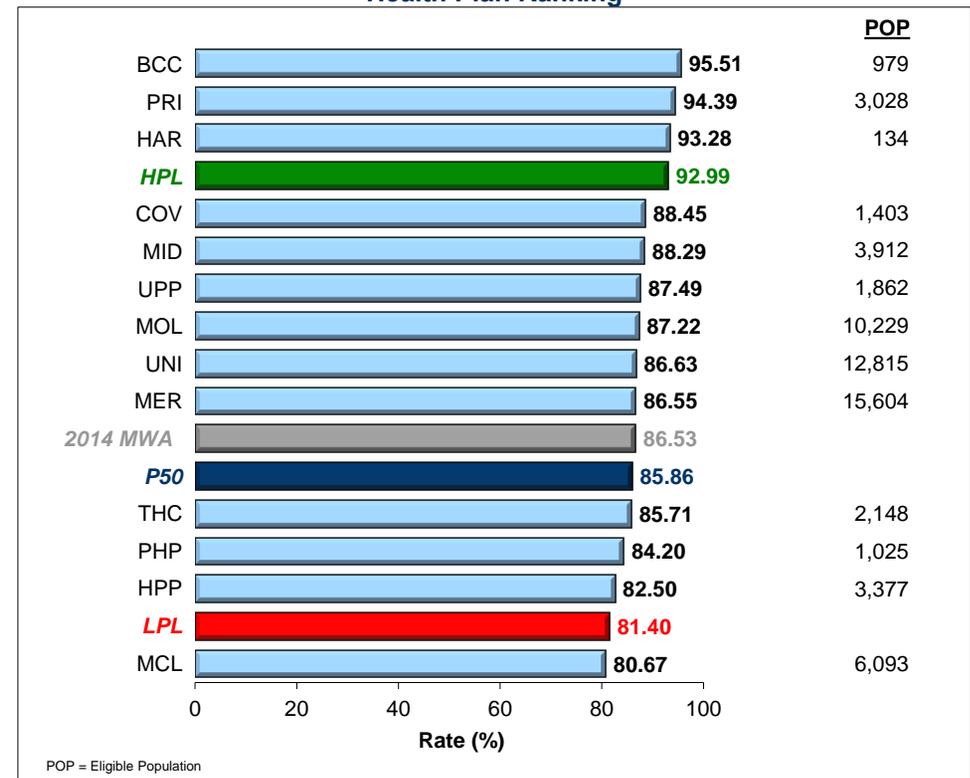
Figure 3-29—Appropriate Treatment for Children With Upper Respiratory Infection Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 1.00 percentage point and exceeded the national HEDIS Medicaid 50th percentile. Three MHPs performed above the HPL, and one performed below the LPL.

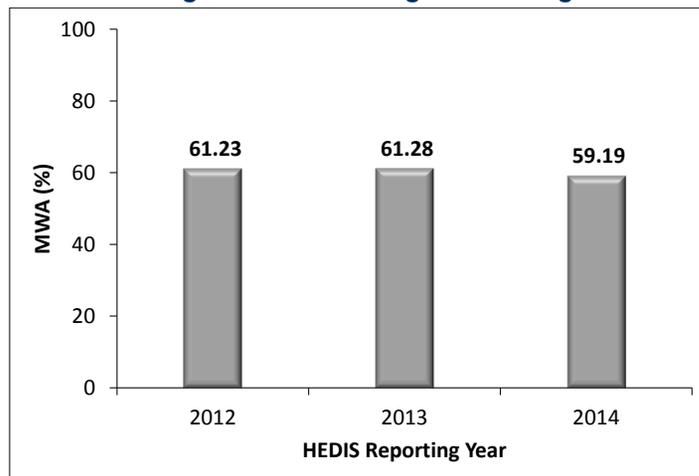
Figure 3-30—Appropriate Treatment for Children With Upper Respiratory Infection Health Plan Ranking



Appropriate Testing for Children With Pharyngitis

The percentage of children 2–18 years of age who were diagnosed with pharyngitis, were dispensed an antibiotic, and received a group A streptococcus (strep) test for the episode.

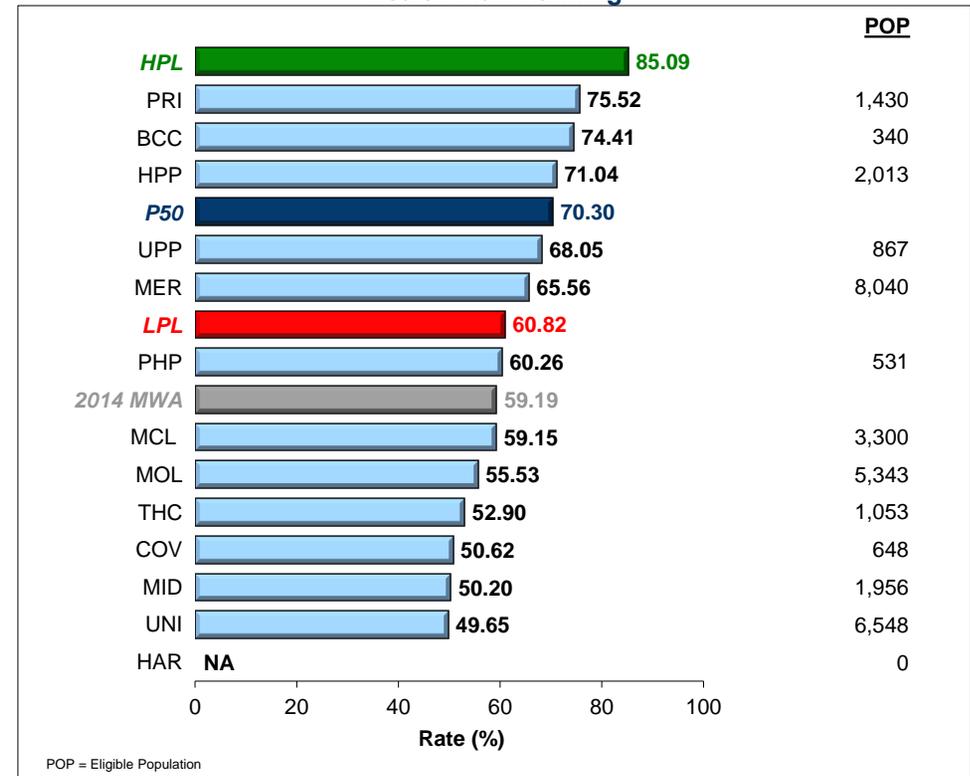
**Figure 3-31—Appropriate Testing for Children With Pharyngitis
Michigan Medicaid Weighted Averages**



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average declined significantly from HEDIS 2013 by 2.09 percentage points and fell below the LPL. None of the MHPs performed above the HPL, and seven performed below the LPL.

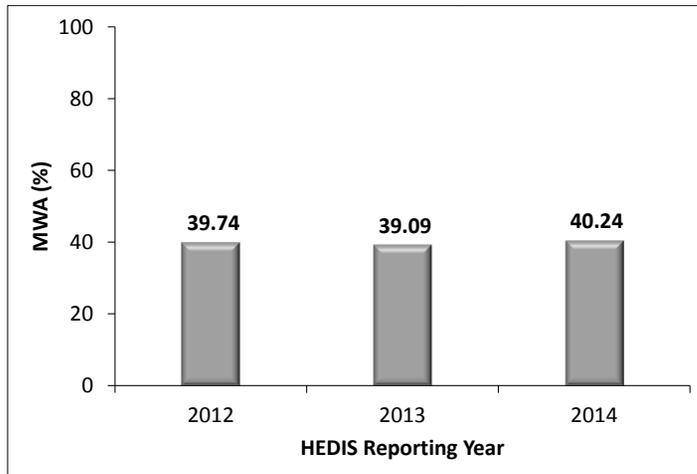
**Figure 3-32—Appropriate Testing for Children With Pharyngitis
Health Plan Ranking**



Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase

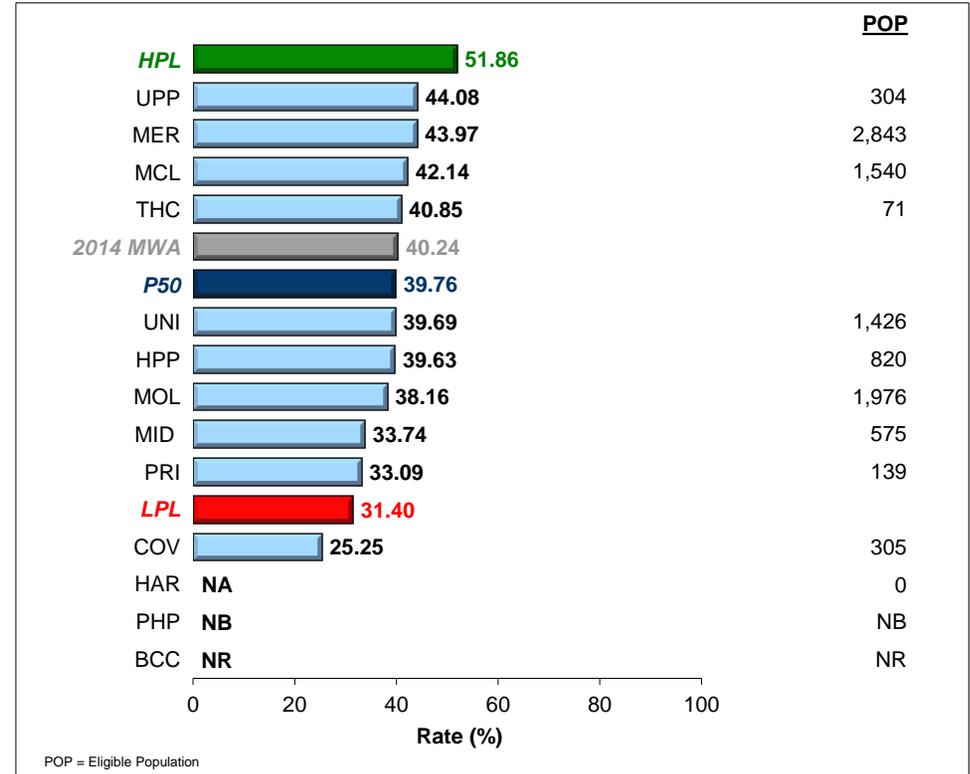
The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed, and who had one follow-up visit with a practitioner with prescribing authority during the 30-day initiation phase.

**Figure 3-33—Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase
Michigan Medicaid Weighted Averages**



The HEDIS 2014 weighted average increased by 1.15 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. No MHPs performed above the HPL, and one performed below the LPL.

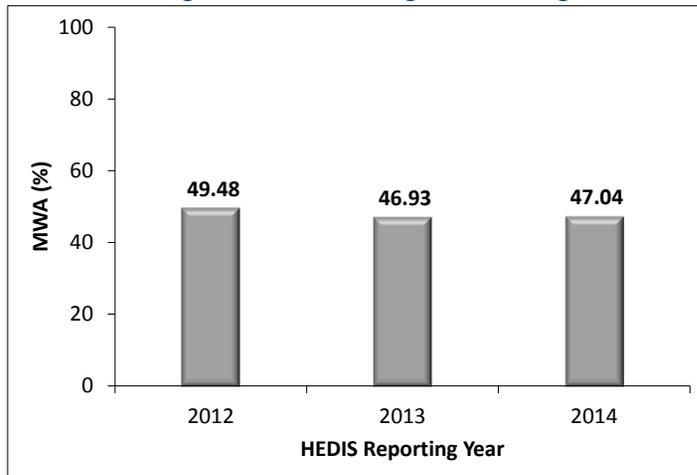
**Figure 3-34—Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase
Health Plan Ranking**



Follow-Up Care for Children Prescribed ADHD Medication—Continuation and Maintenance Phase

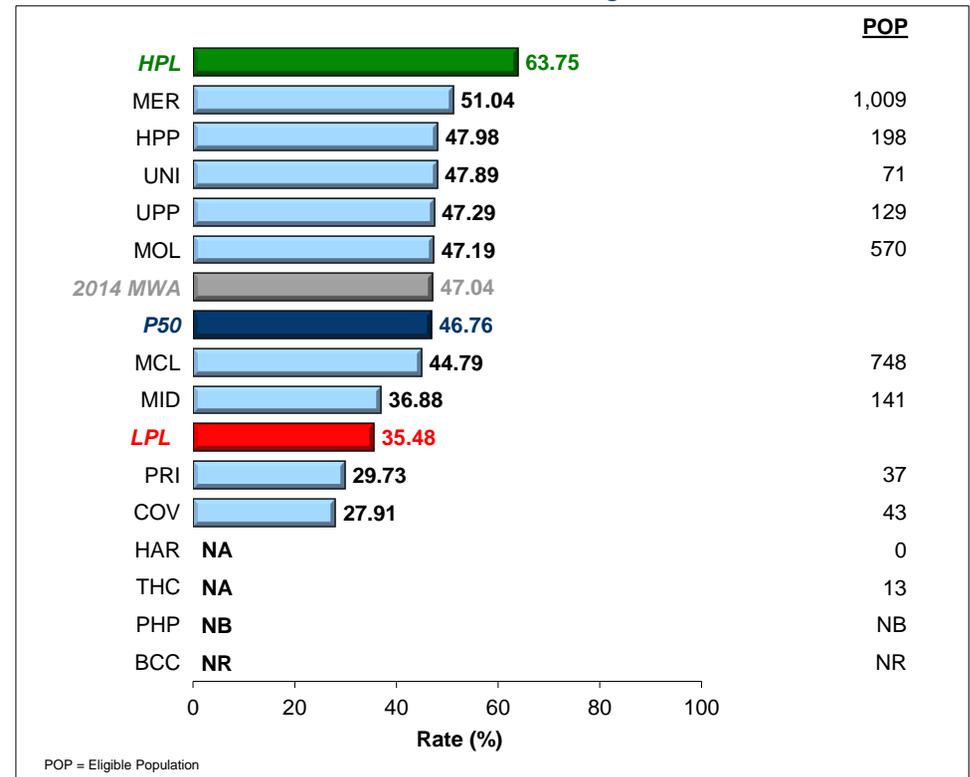
The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed; who remained on the medication for at least 210 days; and who, in addition to the visit in the initiation phase, had at least two follow-up visits with a practitioner within 270 days (nine months) after the initiation phase ended.

**Figure 3-35—Follow-Up Care for Children Prescribed ADHD Medication—Continuation and Maintenance Phase
Michigan Medicaid Weighted Averages**



The HEDIS 2014 weighted average increased slightly from HEDIS 2013 (0.11 percentage points) and exceeded the national HEDIS 2013 Medicaid 50th percentile by 0.28 percentage points. None of the MHPs performed above the HPL, and two performed below the LPL.

**Figure 3-36—Follow-Up Care for Children Prescribed ADHD Medication—Continuation and Maintenance Phase
Health Plan Ranking**



Introduction

The Women—Adult Care dimension encompasses the following MDCH measures:

- ◆ *Breast Cancer Screening*
- ◆ *Cervical Cancer Screening*
- ◆ *Chlamydia Screening in Women—16 to 20 Years*
- ◆ *Chlamydia Screening in Women—21 to 24 Years*
- ◆ *Chlamydia Screening in Women—Total*

Summary of Findings

Table 4-1 presents the statewide performance for the measures under the Women—Adult Care dimension. It lists the HEDIS 2014 weighted averages, the trended results, and a summary of the MHPs with rates showing significant changes from HEDIS 2013.

Table 4-1—Michigan Medicaid HEDIS 2014 Statewide Rate Trend Women—Adult Care				
Measure	Statewide Rate		Number of MHPs	
	HEDIS 2014 Weighted Average	2013–2014 Trend	With Significant Improvement in HEDIS 2014	With Significant Decline in HEDIS 2014
<i>Breast Cancer Screening</i> ¹	62.56%	+5.15	9	0
<i>Cervical Cancer Screening</i> ²	71.34%	-1.26	0	1
<i>Chlamydia Screening in Women</i>				
<i>Ages 16 to 20 Years</i>	60.15%	-2.35	1	3
<i>Ages 21 to 24 Years</i>	69.44%	-2.23	0	2
<i>Total</i>	63.40%	-2.44	1	3

2013–2014 trend note: Rates shaded in green with a green font indicate a statistically significant improvement from the prior year. Rates shaded in red with a red font indicate a statistically significant decline from the prior year.

¹ There were several changes in the HEDIS 2014 specifications for this measure, including updated age ranges from 40–69 years to 50–74 years and an extended numerator time frame from 24 months to 27 months. These changes have the potential to increase the HEDIS 2014 rates. Consequently, the observed significant increase in the statewide rate may be due to both measure specification changes and the MHPs’ efforts to improve breast cancer screening.

² It should be noted that due to significant measure specification changes, any rate change for the *Cervical Cancer Screening* measure may not accurately reflect any performance improvement or decline. HSAG suggests that the HEDIS 2014 rates be treated as baseline rates for future trending. Performance ranking based on HEDIS 2013 percentiles should be used for information only.

Legend	<P10	≥P10 and < P25	≥P25 and < P50	≥P50 and < P75	≥P75 and < P90	≥P90
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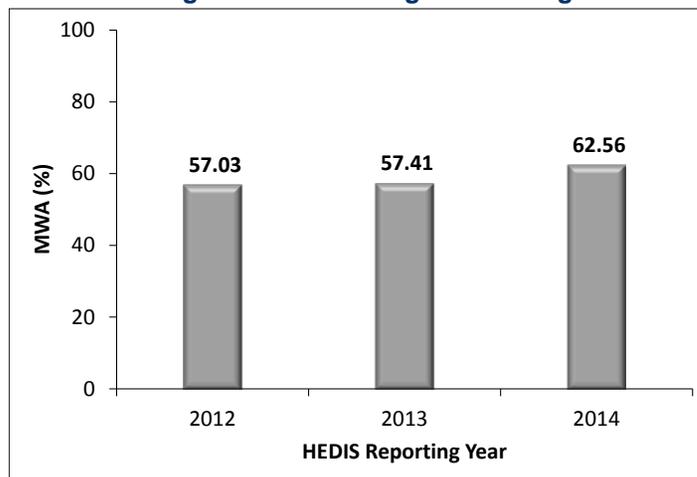
Table 4-1 shows that three rates, all under *Chlamydia Screening in Women*, reported statistically significant decreases from HEDIS 2013. One measure (*Breast Cancer Screening*) showed a statistically significant rate increase. Since several changes in the HEDIS 2014 specifications for this measure have the potential to increase the rate, the observed significant improvement and the higher percentile ranking may not accurately reflect any performance improvement, but may be a result of both the specification changes and the MHPs' efforts to improve breast cancer screening. All statewide rates were at or above the national Medicaid 50th percentile, with two between the 75th and 90th percentiles.

Women—Adult Care Findings

Breast Cancer Screening

The *Breast Cancer Screening* measure is reported using only the administrative rate. This measure represents the percentage of women 40–69 years of age who had a mammogram to screen for breast cancer during the measurement year and the year prior to the measurement year. There were several changes in the HEDIS 2014 specifications for this measure, including updated age ranges from 40–69 years to 50–74 years and an extended numerator time frame from 24 months to 27 months. These changes have the potential to increase the HEDIS 2014 rates.

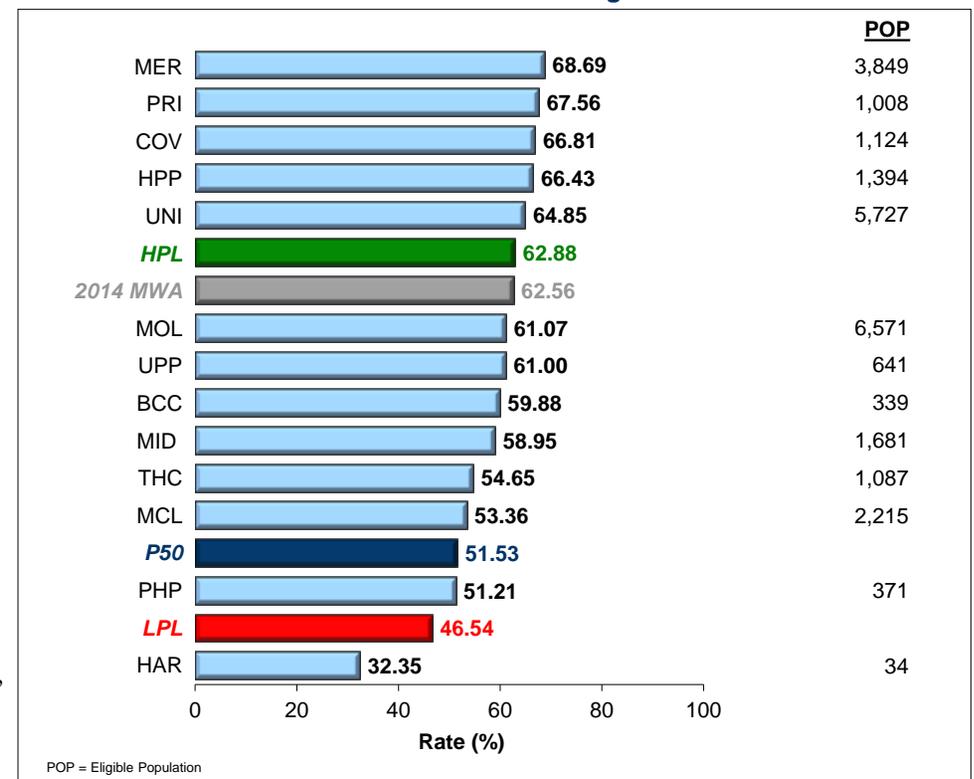
Figure 4-1—Breast Cancer Screening Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 5.15 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. Five MHPs exceeded the HPL, and one performed below the LPL. The observed significant rate increase may be related to changes in the HEDIS 2014 specifications as well as the MHPs’ efforts to improve breast cancer screening.

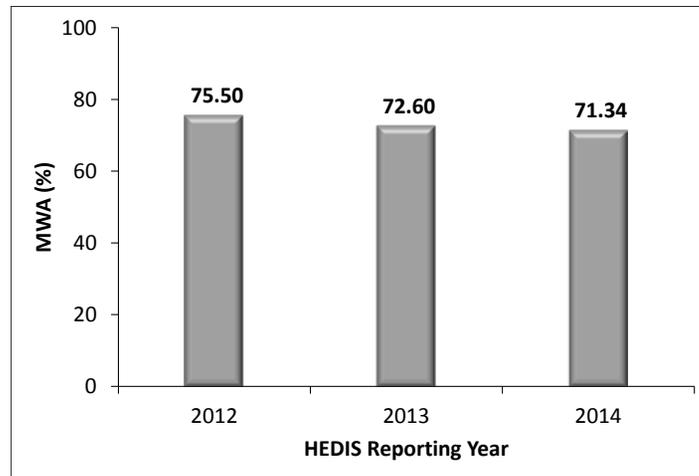
Figure 4-2—Breast Cancer Screening Health Plan Ranking



Cervical Cancer Screening

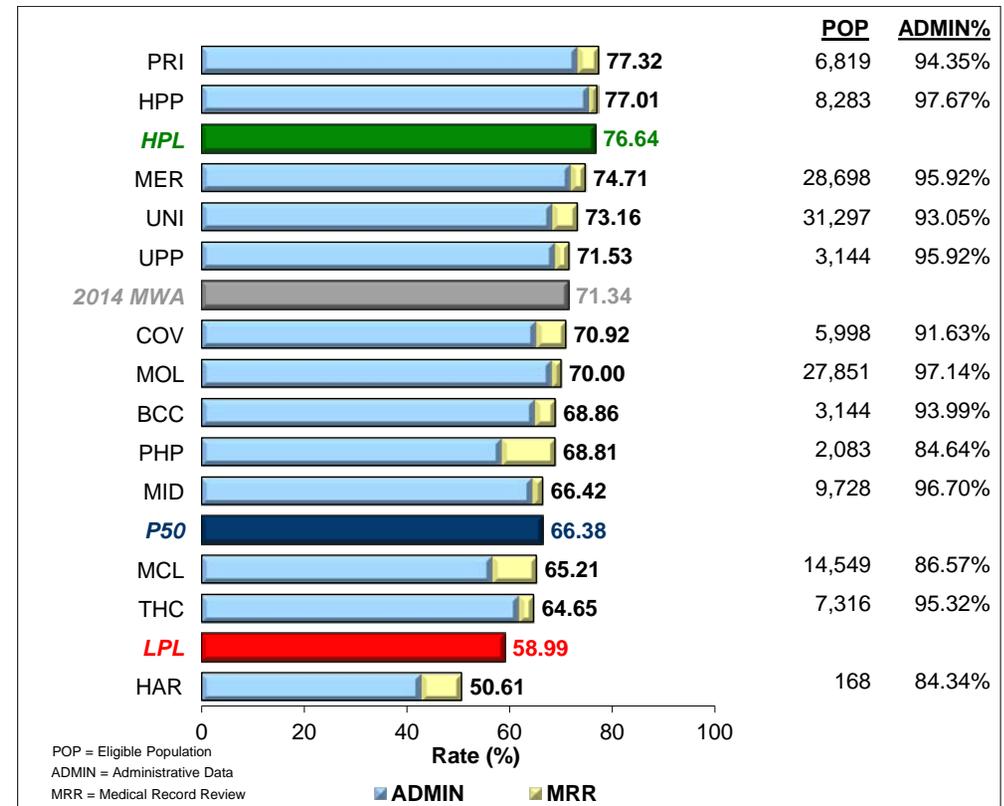
The *Cervical Cancer Screening* measure represents the percentage of women 21–64 years of age who received one or more Pap tests to screen for cervical cancer. It should be noted that due to significant measure specification changes, any rate change for the *Cervical Cancer Screening* measure may not accurately reflect any performance improvement or decline. NCQA indicates that due to significant specification changes, the measure is not publicly reported for HEDIS 2014 and cannot be compared to prior years’ rates. HSAG suggests that the HEDIS 2014 rates be treated as baseline rates for future trending. Performance ranking based on HEDIS 2013 percentiles should be used for information only.

Figure 4-3—Cervical Cancer Screening Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased from HEDIS 2013 by 1.26 percentage points, it exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and one performed below the LPL. All plans used at least 80 percent of administrative data to calculate their rates.

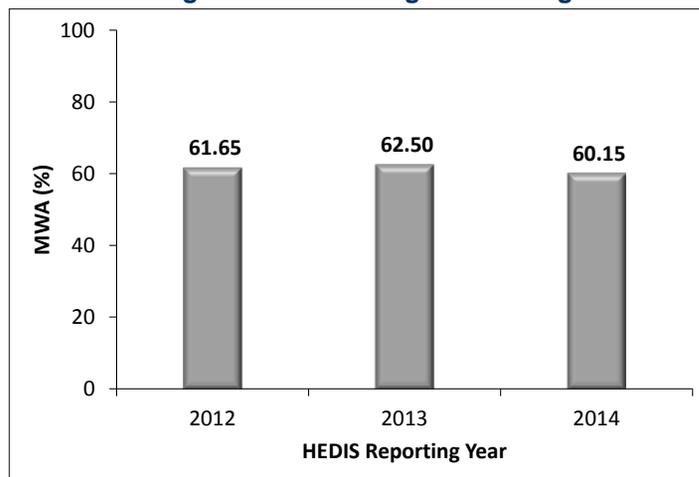
Figure 4-4—Cervical Cancer Screening Health Plan Ranking



Chlamydia Screening in Women—16–20 Years

The *Chlamydia Screening in Women—16–20 Years* measure represents the percentage of women 16–20 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

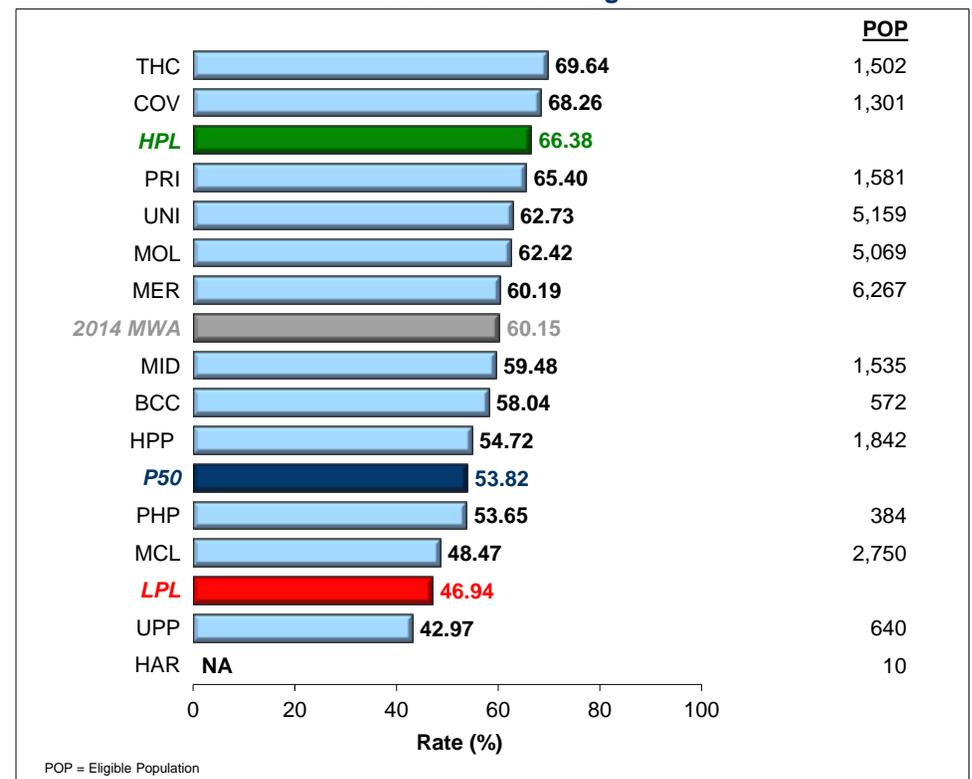
**Figure 4-5—Chlamydia Screening in Women—16–20 Years
Michigan Medicaid Weighted Averages**



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

Although the HEDIS 2014 weighted average declined significantly from HEDIS 2013 by 2.35 percentage points, it exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and one performed below the LPL.

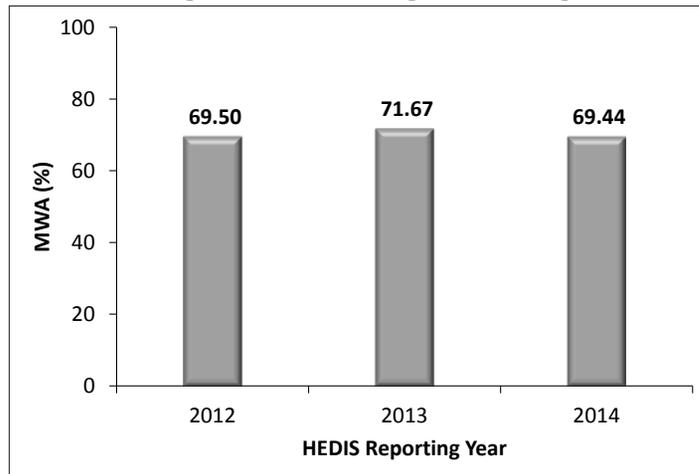
**Figure 4-6—Chlamydia Screening in Women—16–20 Years
Health Plan Ranking**



Chlamydia Screening in Women—21–24 Years

The *Chlamydia Screening in Women—21–24 Years* measure represents the percentage of women 21–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

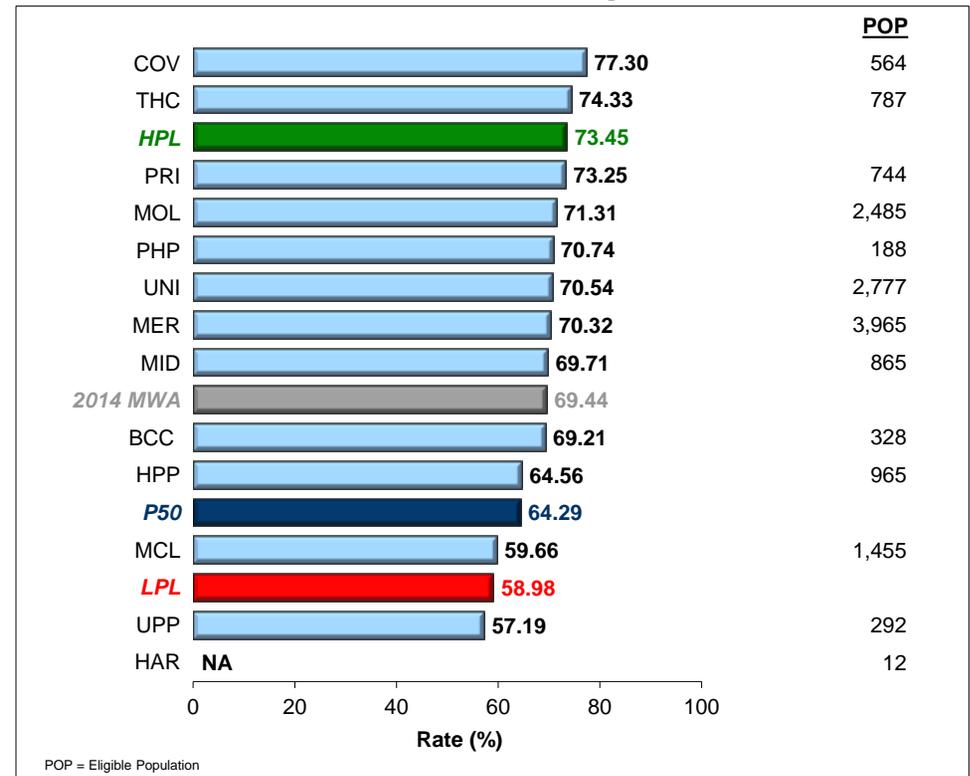
**Figure 4-7—Chlamydia Screening in Women—21–24 Years
Michigan Medicaid Weighted Averages**



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

Although the HEDIS 2014 weighted average declined significantly from HEDIS 2013 by 2.23 percentage points, it exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and one performed below the LPL.

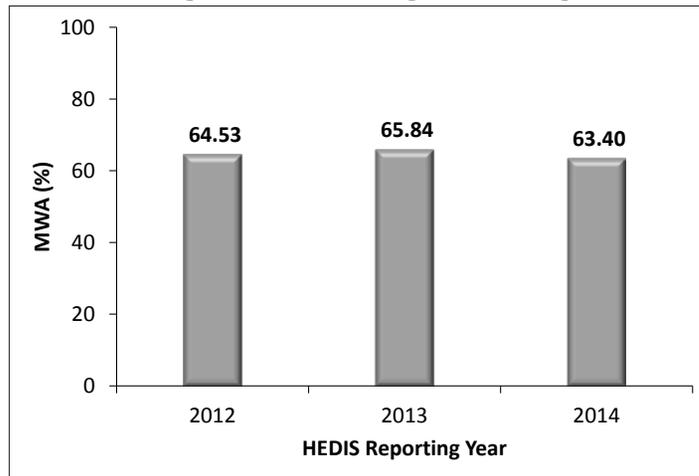
**Figure 4-8—Chlamydia Screening in Women—21–24 Years
Health Plan Ranking**



Chlamydia Screening in Women—Total

The *Chlamydia Screening in Women—Total* measure represents the percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

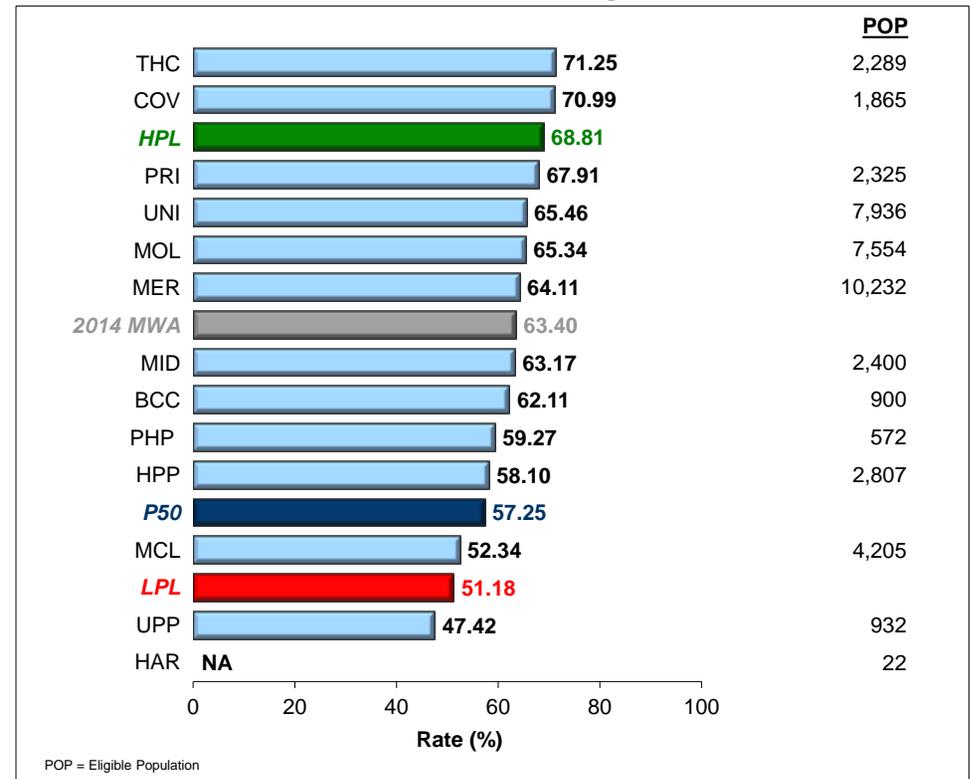
Figure 4-9—Chlamydia Screening in Women—Total Michigan Medicaid Weighted Averages



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

Although the HEDIS 2014 weighted average declined significantly from HEDIS 2013 by 2.44 percentage points, it exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and one performed below the LPL.

Figure 4-10—Chlamydia Screening in Women—Total Health Plan Ranking



Introduction

The Access to Care dimension encompasses the following MDCH measures:

- ◆ *Children and Adolescents’ Access to Primary Care Practitioners—12 to 24 Months*
- ◆ *Children and Adolescents’ Access to Primary Care Practitioners—25 Months to 6 Years*
- ◆ *Children and Adolescents’ Access to Primary Care Practitioners—7 to 11 Years*
- ◆ *Children and Adolescents’ Access to Primary Care Practitioners—12 to 19 Years*
- ◆ *Adults’ Access to Preventive/Ambulatory Health Services—20 to 44 Years*
- ◆ *Adults’ Access to Preventive/Ambulatory Health Services—45 to 64 Years*
- ◆ *Adults’ Access to Preventive/Ambulatory Health Services—65+ Years*
- ◆ *Adults’ Access to Preventive/Ambulatory Health Services—Total*

Summary of Findings

Table 5-1 presents statewide performance for the measures under the Access to Care dimension. It lists the HEDIS 2014 weighted averages, the trended results, and a summary of the MHPs with rates showing significant changes from HEDIS 2013.

Table 5-1—Michigan Medicaid HEDIS 2014 Statewide Rate Trend Access to Care						
Measure	Statewide Rate		Number of MHPs			
	HEDIS 2014 Weighted Average	2013–2014 Trend	With Significant Improvement in HEDIS 2014	With Significant Decline in HEDIS 2014		
<i>Children and Adolescents’ Access to Primary Care Practitioners</i>						
<i>Ages 12 to 24 Months</i>	96.73%	-0.57	0	4		
<i>Ages 25 Months to 6 Years</i>	88.91%	-1.23	0	5		
<i>Ages 7 to 11 Years</i>	91.68%	-0.47	1	3		
<i>Ages 12 to 19 Years</i>	90.48%	-0.41	0	2		
<i>Adults’ Access to Preventive/Ambulatory Health Services</i>						
<i>Ages 20 to 44 Years</i>	84.30%	-0.23	4	2		
<i>Ages 45 to 64 Years</i>	90.93%	+0.16	2	2		
<i>Ages 65+ Years</i>	90.29%	-1.83	0	3		
<i>Total</i>	86.75%	+0.07	5	2		
2013–2014 trend note: Rates shaded in green with a green font indicate a statistically significant improvement from the prior year. Rates shaded in red with a red font indicate a statistically significant decline from the prior year.						
Legend	<P10	≥P10 and < P25	≥P25 and < P50	≥P50 and < P75	≥P75 and < P90	≥P90

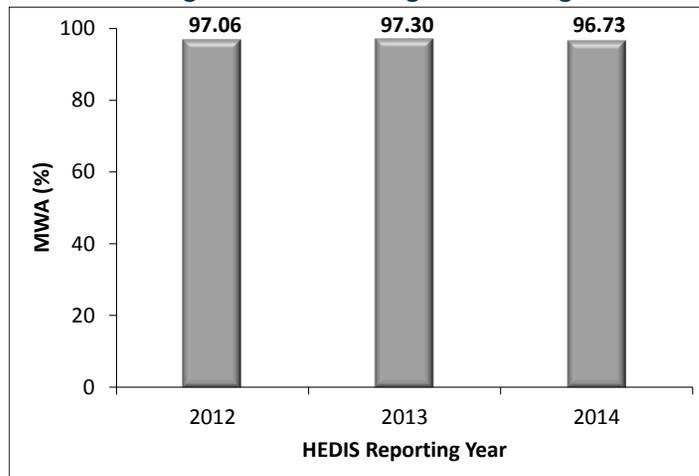
Table 5-1 shows that five indicators under Access to Care had statistically significant decreases between HEDIS 2013 and HEDIS 2014. The other indicators in this dimension had rate changes within +/- 0.25 percentage points. Six statewide rates were at or above the national Medicaid 50th percentile, with two between the 75th and 90th percentiles. Two statewide rates ranked between the 25th and 50th percentiles.

Access to Care Findings

Children and Adolescents' Access to Primary Care Practitioners—12 to 24 Months

The *Children and Adolescents' Access to Primary Care Practitioners—12 to 24 Months* measure represents the percentage of children 12 to 24 months of age who had a visit with a PCP during the measurement year.

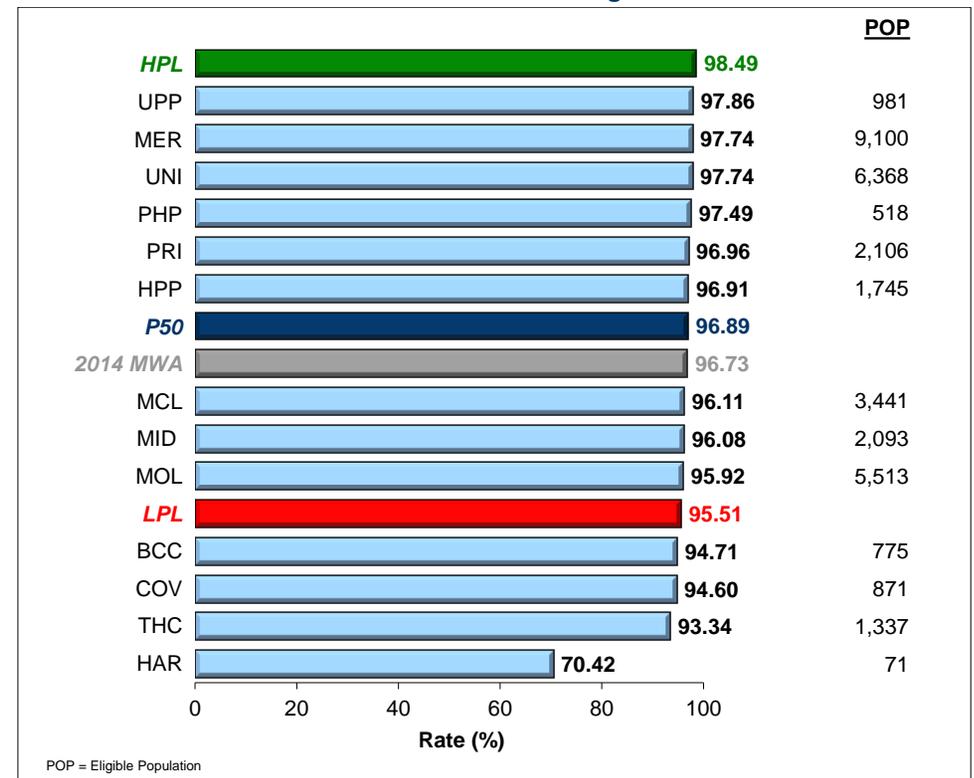
Figure 5-1—Children and Adolescents' Access to Primary Care Practitioners—12 to 24 Months Michigan Medicaid Weighted Averages



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 Michigan Medicaid weighted average had a statistically significant decrease of 0.57 percentage points and fell below the national HEDIS 2013 Medicaid 50th percentile by 0.16 percentage points. No MHPs performed above the HPL, and four performed below the LPL.

Figure 5-2—Children and Adolescents' Access to Primary Care Practitioners—12 to 24 Months Health Plan Ranking

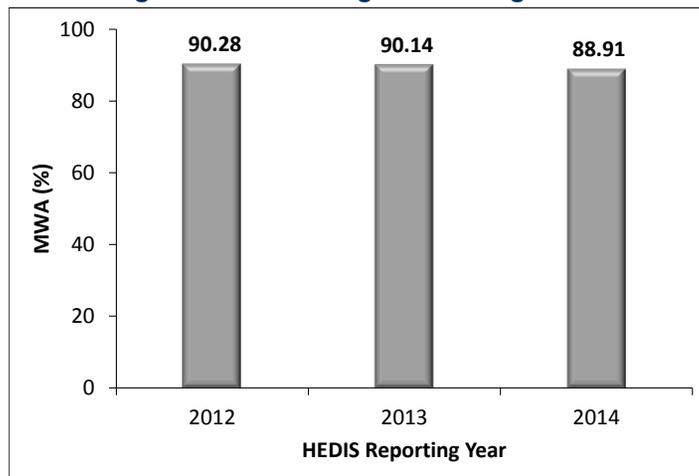


POP = Eligible Population

Children and Adolescents' Access to Primary Care Practitioners—25 Months to 6 Years

The *Children and Adolescents' Access to Primary Care Practitioners—25 Months to 6 Years* measure represents the percentage of children 25 months to 6 years of age who had a visit with a PCP during the measurement year.

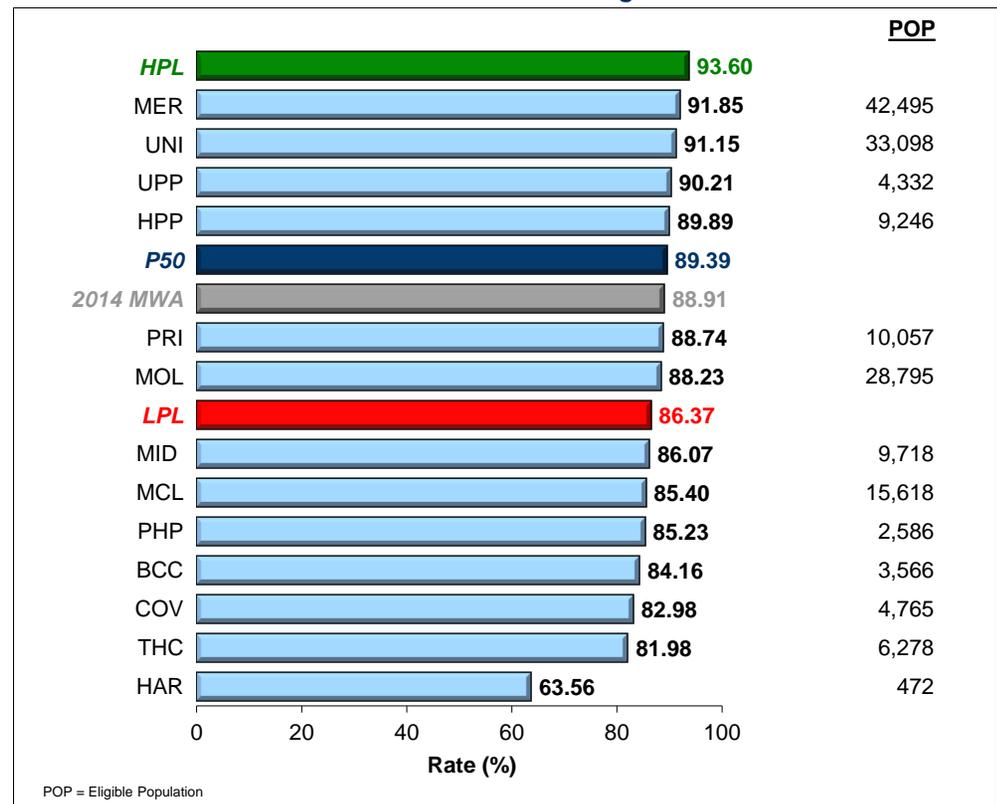
Figure 5-3—Children and Adolescents' Access to Primary Care Practitioners—25 Months to 6 Years Michigan Medicaid Weighted Averages



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 Michigan Medicaid weighted average had a statistically significant decrease of 1.23 percentage points and fell below the national HEDIS 2013 Medicaid 50th percentile by 0.48 percentage points. No MHPs performed above the HPL, and seven performed below the LPL.

Figure 5-4—Children and Adolescents' Access to Primary Care Practitioners—25 Months to 6 Years Health Plan Ranking

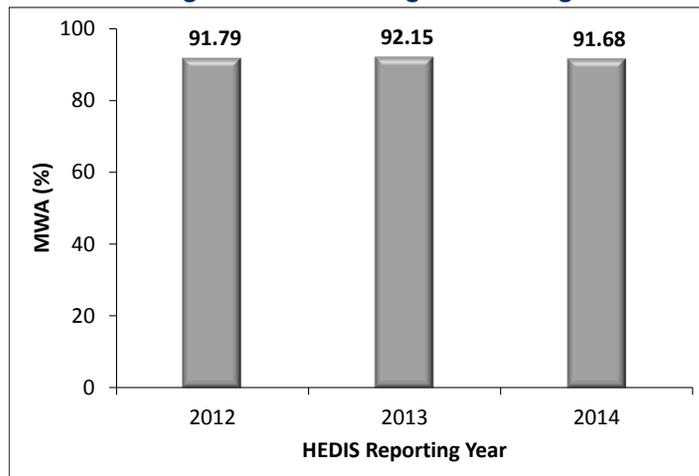


POP = Eligible Population

Children and Adolescents' Access to Primary Care Practitioners—7 to 11 Years

The *Children and Adolescents' Access to Primary Care Practitioners—7 to 11 Years* measure represents the percentage of children 7 to 11 years of age who had a visit with a PCP during the measurement year or the year prior to the measurement year.

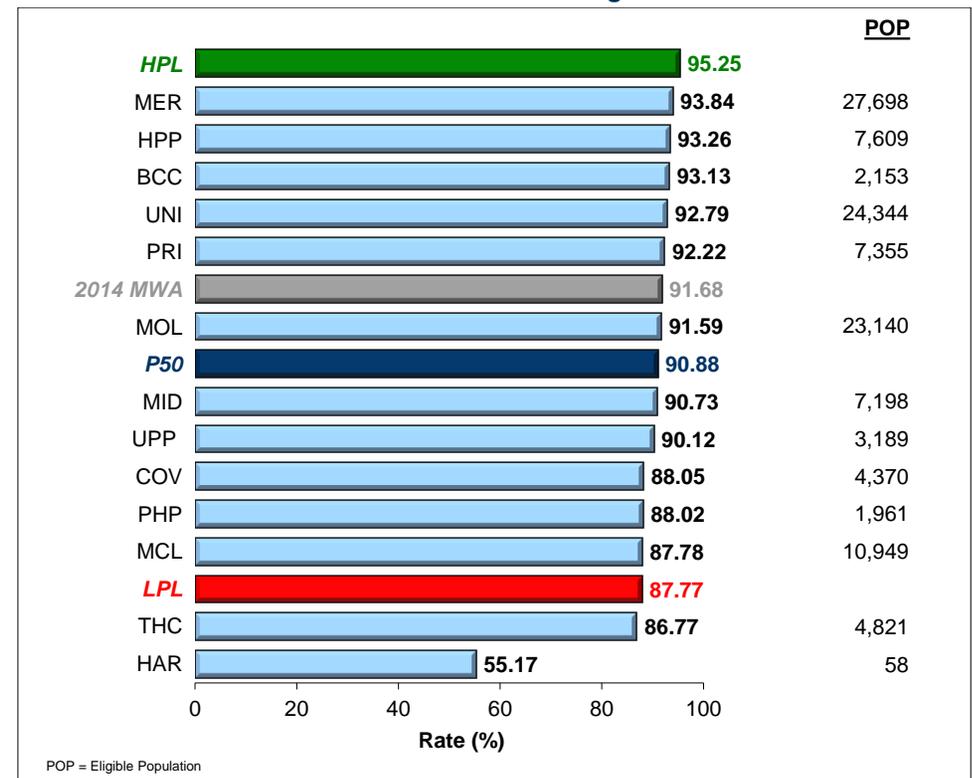
**Figure 5-5—Children and Adolescents' Access to Primary Care Practitioners—7 to 11 Years
Michigan Medicaid Weighted Averages**



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 Michigan Medicaid weighted average had a statistically significant decrease of 0.47 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile by 0.80 percentage points. No MHPs exceeded the HPL, and two performed below the LPL.

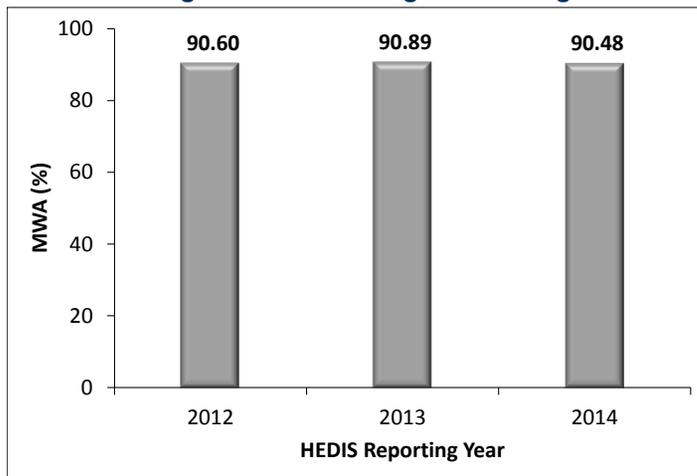
**Figure 5-6—Children and Adolescents' Access to Primary Care Practitioners—7 to 11 Years
Health Plan Ranking**



Children and Adolescents' Access to Primary Care Practitioners—12 to 19 Years

The *Children and Adolescents' Access to Primary Care Practitioners—12 to 19 Years* measure represents the percentage of adolescents 12 to 19 years of age who had a visit with a PCP during the measurement year or the year prior to the measurement year.

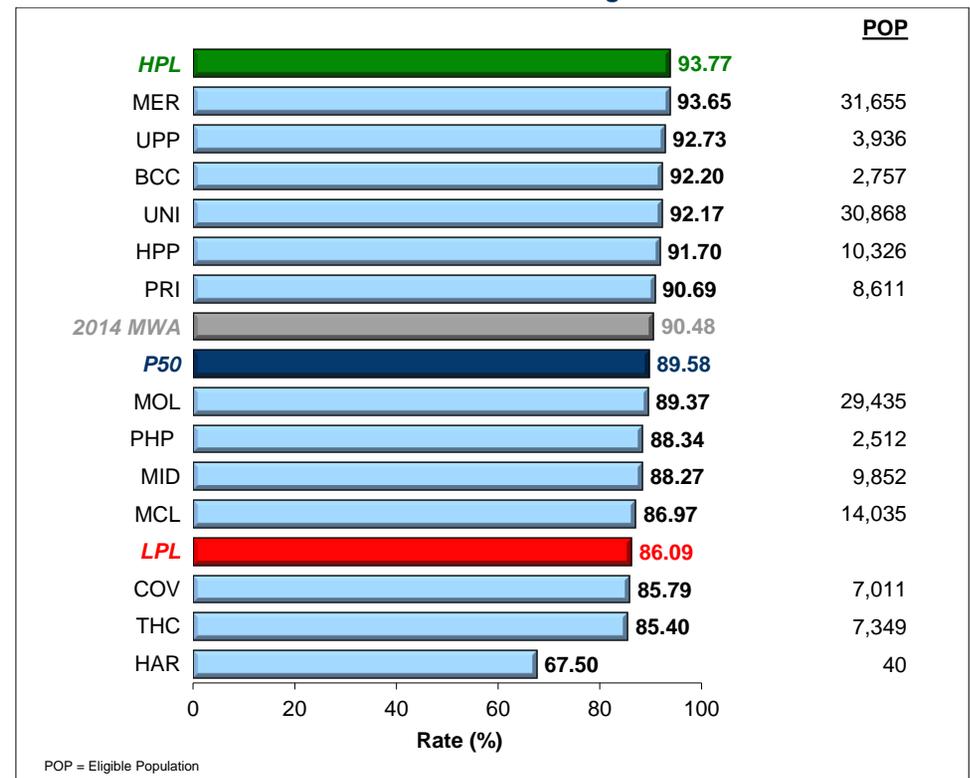
**Figure 5-7—Children and Adolescents' Access to Primary Care Practitioners—12 to 19 Years
Michigan Medicaid Weighted Averages**



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 Michigan Medicaid weighted average showed a statistically significant decrease of 0.41 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile by 0.90 percentage points. No MHPs performed above the HPL, and three performed below the LPL.

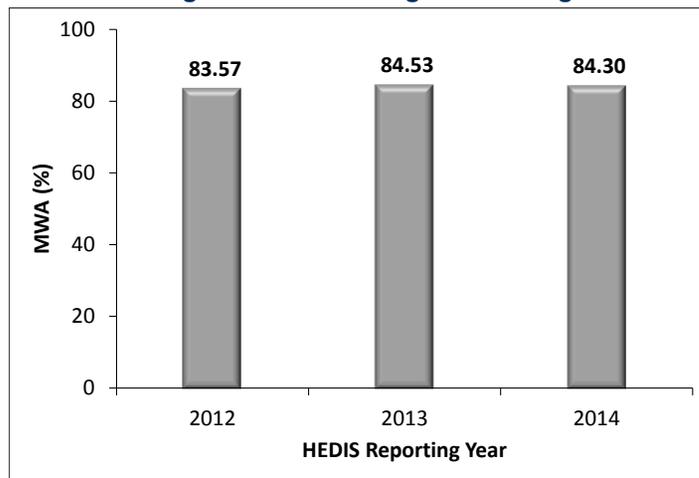
**Figure 5-8—Children and Adolescents' Access to Primary Care Practitioners—12 to 19 Years
Health Plan Ranking**



Adults' Access to Preventive/Ambulatory Health Services—20 to 44 Years

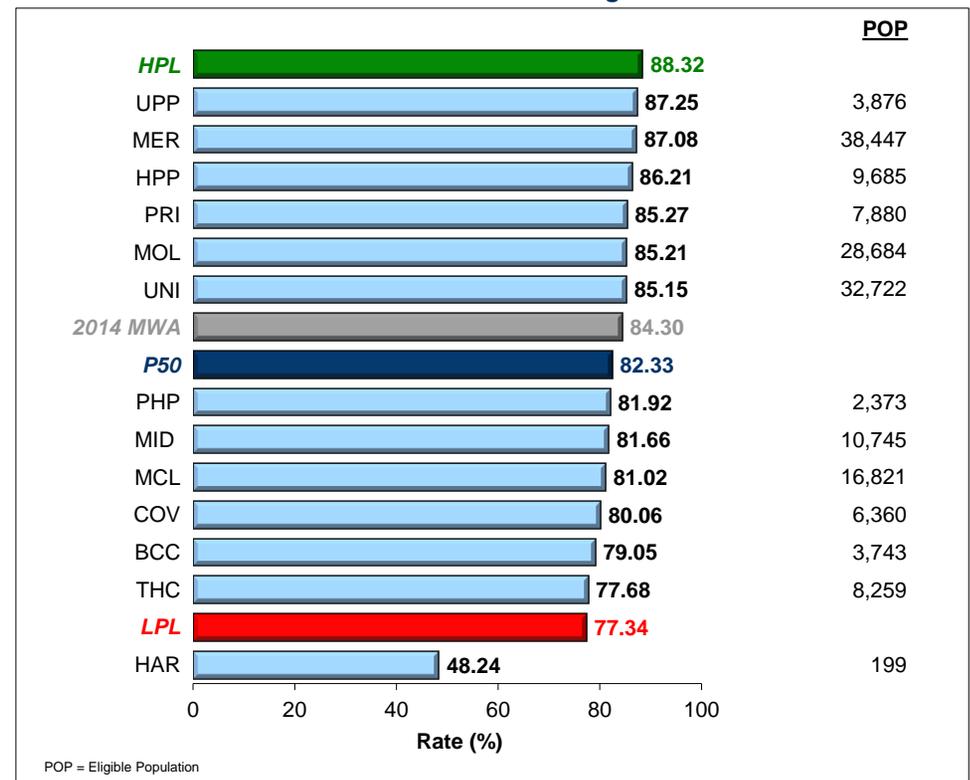
The *Adults' Access to Preventive/Ambulatory Health Services—20 to 44 Years* measure represents the percentage of members 20 to 44 years of age who had an ambulatory or preventive care visit.

Figure 5-9—Adults' Access to Preventive/Ambulatory Health Services—20 to 44 Years
Michigan Medicaid Weighted Averages



The HEDIS 2014 Michigan Medicaid weighted average showed a decrease of 0.23 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile by 1.97 percentage points. No MHPs performed above the HPL, and one MHP performed below the LPL.

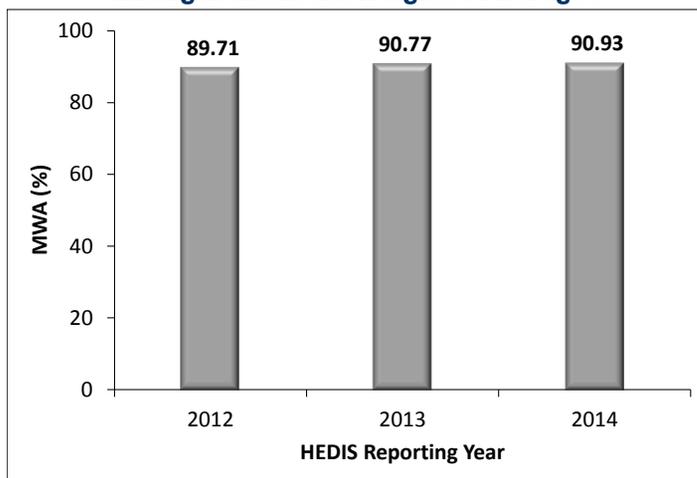
Figure 5-10—Adults' Access to Preventive/Ambulatory Health Services—20 to 44 Years
Health Plan Ranking



Adults' Access to Preventive/Ambulatory Health Services—45 to 64 Years

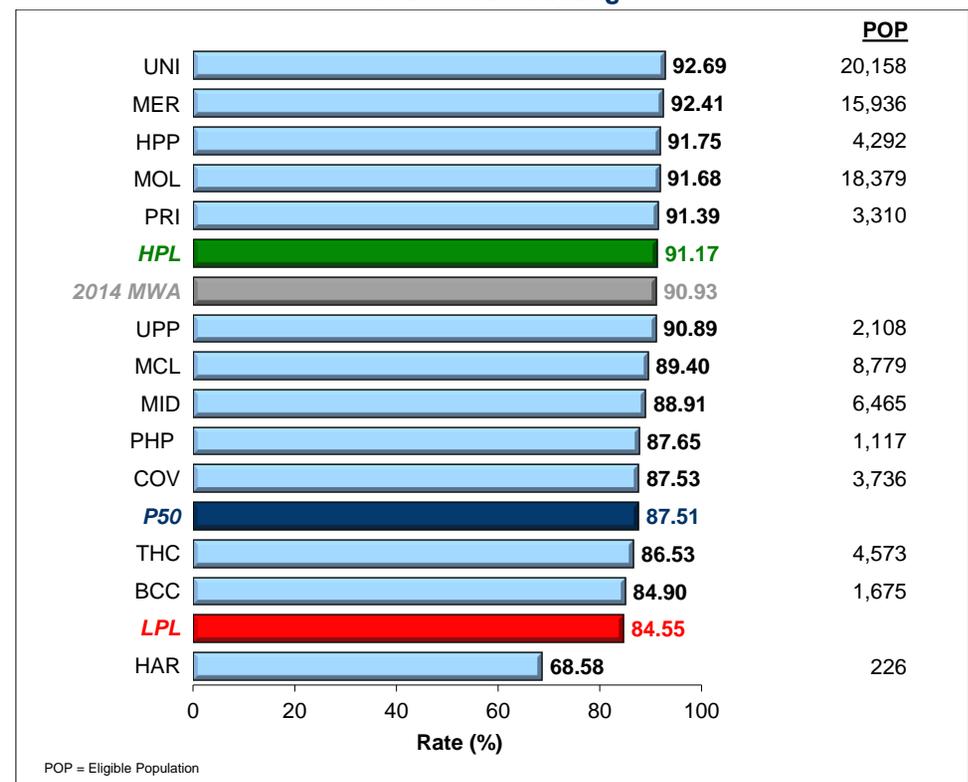
The Adult's Access to Preventive/Ambulatory Health Services—45 to 64 Years measure represents the percentage of members 45 to 64 years of age who had an ambulatory or preventive care visit.

Figure 5-11—Adults' Access to Preventive/Ambulatory Health Services—45 to 64 Years
Michigan Medicaid Weighted Averages



The HEDIS 2014 Michigan Medicaid weighted average increased by 0.16 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile by 3.42 percentage points. Five MHPs exceeded the HPL, and one performed below the LPL.

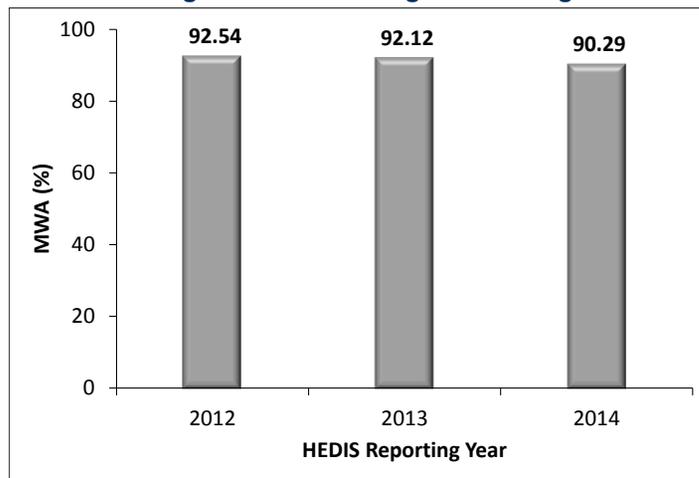
Figure 5-12—Adults' Access to Preventive/Ambulatory Health Services—45 to 64 Years
Health Plan Ranking



Adults' Access to Preventive/Ambulatory Health Services—65+ Years

The *Adults' Access to Preventive/Ambulatory Health Services—65+ Years* measure represents the percentage of members 65 years of age or older who had an ambulatory or preventive care visit.

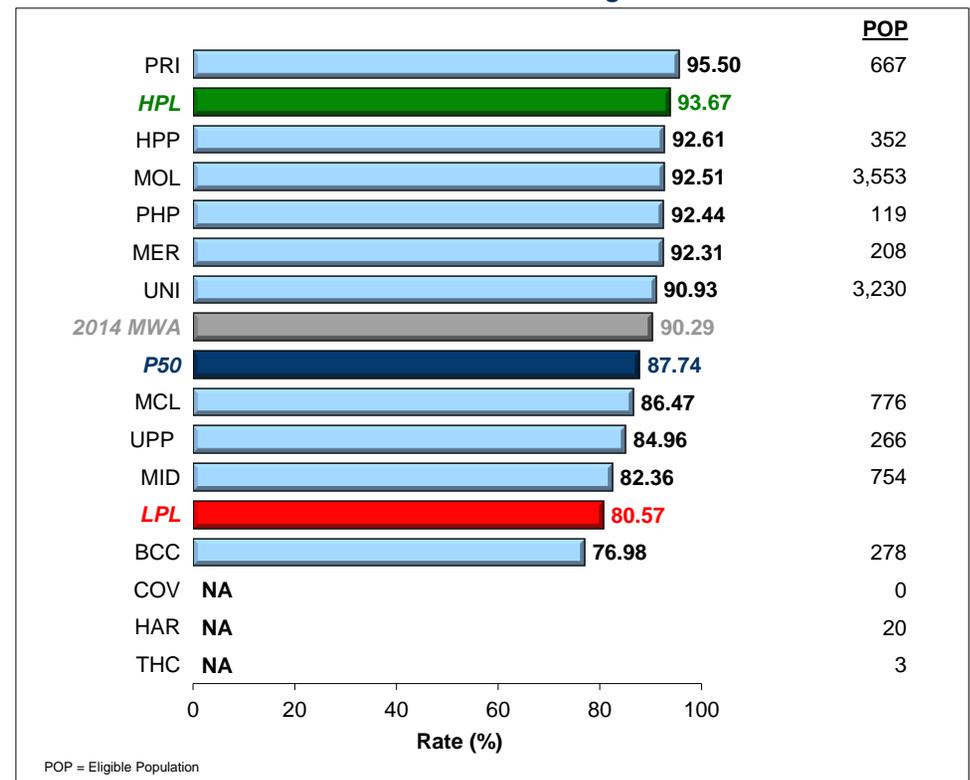
Figure 5-13—Adults' Access to Preventive/Ambulatory Health Services—65+ Years
Michigan Medicaid Weighted Averages



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 Michigan Medicaid weighted average showed a statistically significant decrease of 1.83 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile by 2.55 percentage points. One MHP exceeded the HPL, and one performed below the LPL. Populations for three MHPs were too small (less than 30) to report valid rates for this indicator.

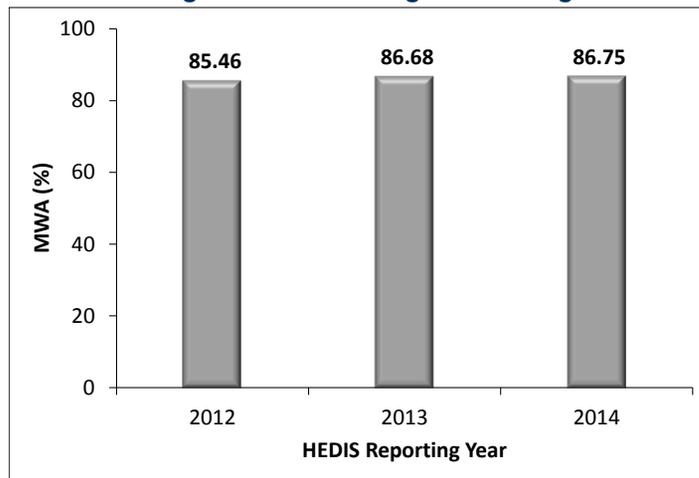
Figure 5-14—Adults' Access to Preventive/Ambulatory Health Services—65+ Years
Health Plan Ranking



Adults' Access to Preventive/Ambulatory Health Services—Total

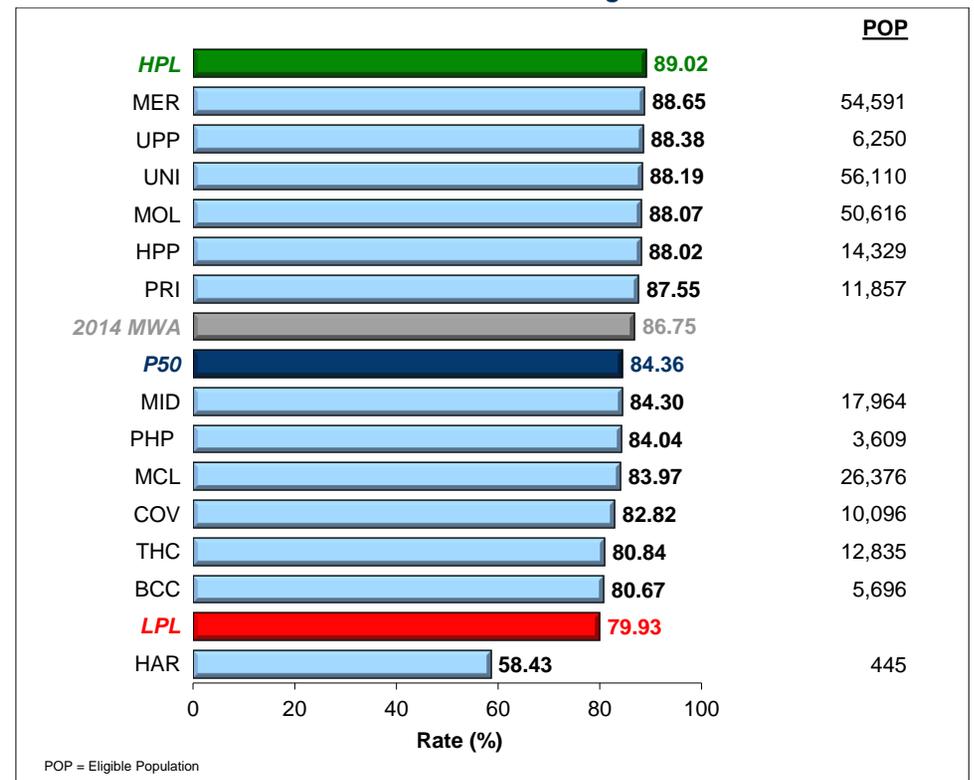
The *Adults' Access to Preventive/Ambulatory Health Services—Total* measure represents the percentage of total adult members who had an ambulatory or preventive care visit.

Figure 5-15—Adults' Access to Preventive/Ambulatory Health Services—Total
Michigan Medicaid Weighted Averages



The HEDIS 2014 Michigan Medicaid weighted average increased by 0.07 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile by 2.39 percentage points. No MHPs performed above the HPL, and one performed below the LPL.

Figure 5-16—Adults' Access to Preventive/Ambulatory Health Services—Total
Health Plan Ranking



Introduction

The Obesity dimension encompasses the following MDCH measures:

- ◆ *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total*
- ◆ *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total*
- ◆ *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total*
- ◆ *Adult BMI Assessment*

Summary of Findings

Table 6-1 presents statewide performance for the measures under the Obesity dimension. It lists the HEDIS 2014 weighted averages, the trended results, and a summary of the MHPs with rates showing significant changes from HEDIS 2013.

Measure	Statewide Rate		Number of MHPs			
	HEDIS 2014 Weighted Average	2013–2014 Trend	With Significant Improvement in HEDIS 2014	With Significant Decline in HEDIS 2014		
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>						
<i>BMI Percentile—Total</i>	70.07%	+0.45	6	1		
<i>Counseling for Nutrition—Total</i>	64.72%	+5.33	3	0		
<i>Counseling for Physical Activity—Total</i>	52.99%	+4.01	5	1		
<i>Adult BMI Assessment</i>	86.05%	+5.66	6	0		
2013–2014 trend note: Rates shaded in green with a green font indicate a statistically significant improvement from the prior year. Rates shaded in red with a red font indicate a statistically significant decline from the prior year.						
Legend	<P10	≥P10 and < P25	≥P25 and < P50	≥P50 and < P75	≥P75 and < P90	≥P90

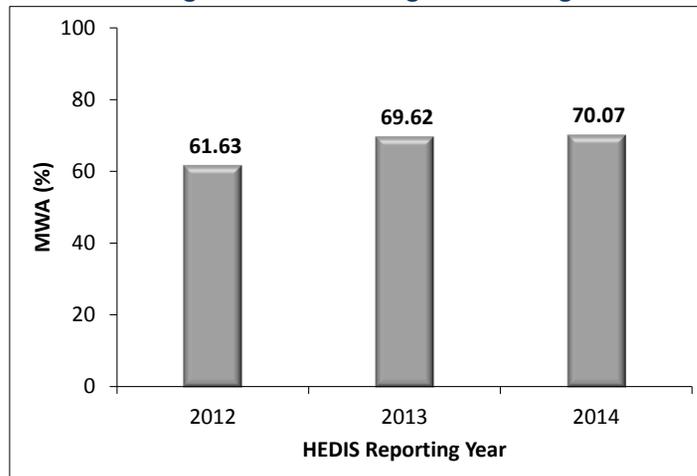
Table 6-1 shows that all measures under the Obesity dimension improved from last year, with three measures reporting a statistically significant improvement of at least 4 percentage points. All measures ranked at or above the national HEDIS 2013 Medicaid 50th percentile, with one ranking between the 75th and 90th percentile (*BMI Percentile—Total*) and one ranking above the 90th percentile (*Adult BMI Assessment*).

Obesity Findings

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total

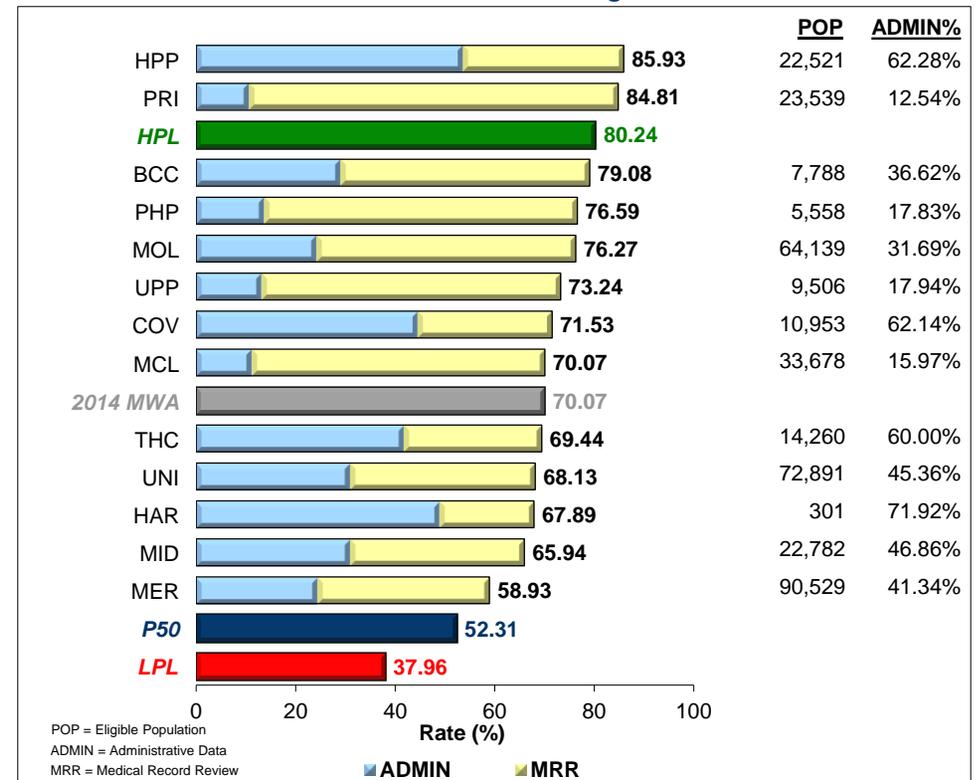
The *BMI Percentile* indicator reports the percentage of members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of BMI percentile documentation during the measurement year.

Figure 6-1—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total Michigan Medicaid Weighted Averages



The HEDIS 2014 weighted average increased slightly from HEDIS 2013 (0.45 percentage points) and exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs exceeded the HPL, and none fell below the LPL. MHPs varied widely in the use of administrative data to calculate their rates (from 12.54 percent to 71.92 percent).

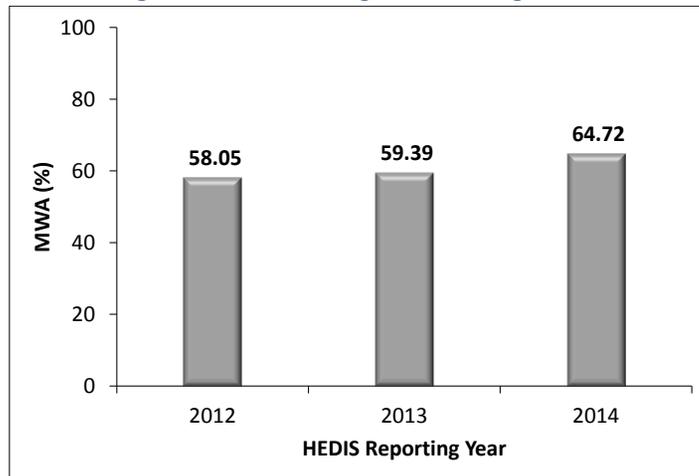
Figure 6-2—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total Health Plan Ranking



Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total

The *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total* indicator reports the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of counseling for nutrition during the measurement year.

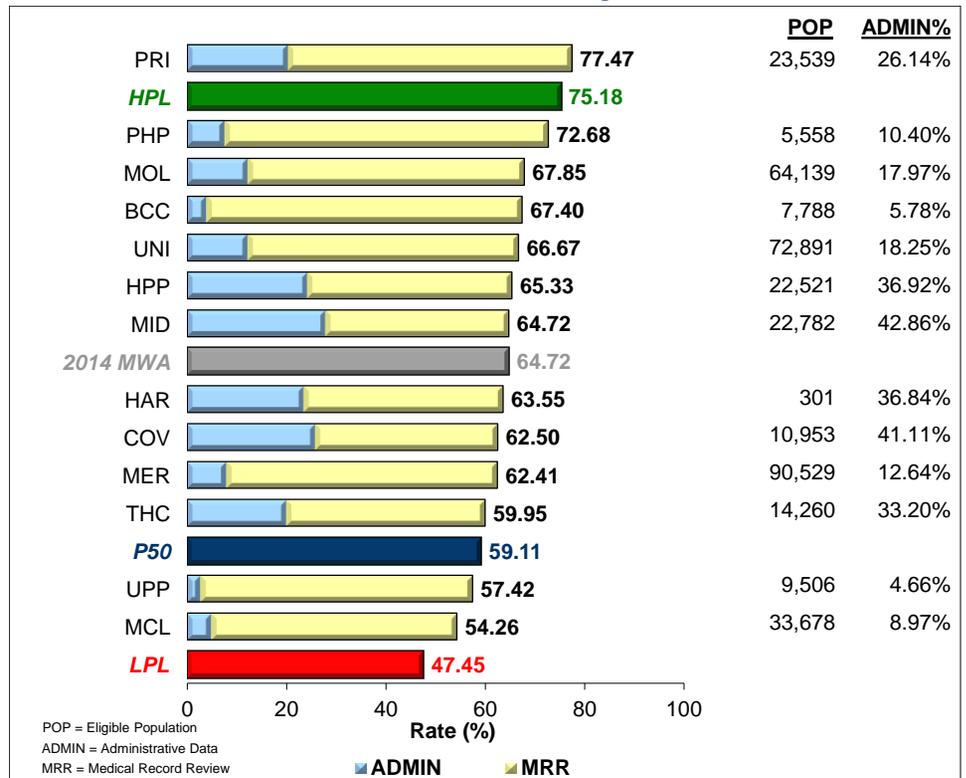
Figure 6-3—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 5.33 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP exceeded the HPL, and none fell below the LPL. MHPs varied widely in the use of administrative data to calculate their rates (from 4.66 percent to 42.86 percent).

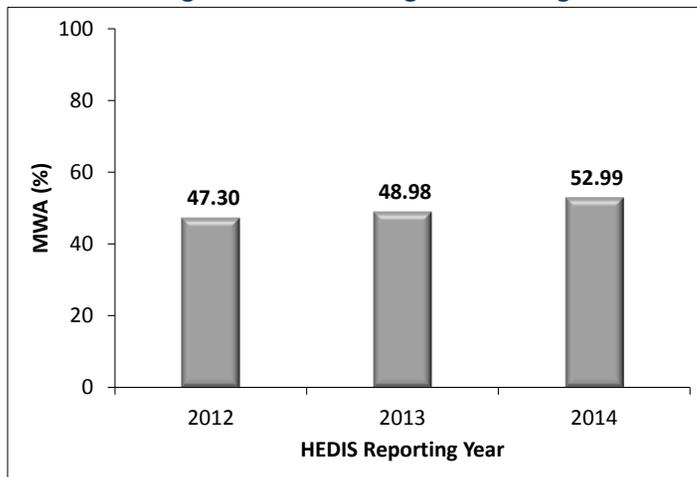
Figure 6-4—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total Health Plan Ranking



Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total

The *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total* indicator reports the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of counseling for physical activity during the measurement year.

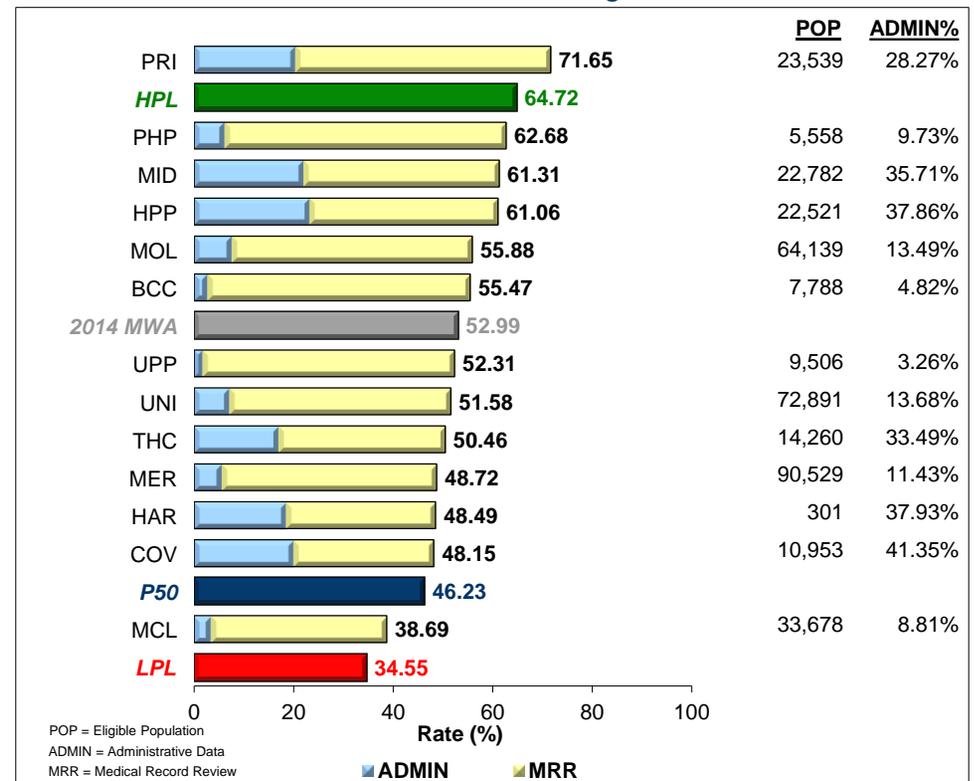
Figure 6-5—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total Michigan Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 4.01 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP exceeded the HPL, and no plans fell below the LPL. MHPs varied widely in the use of administrative data to calculate their rates (from 3.26 percent to 41.35 percent).

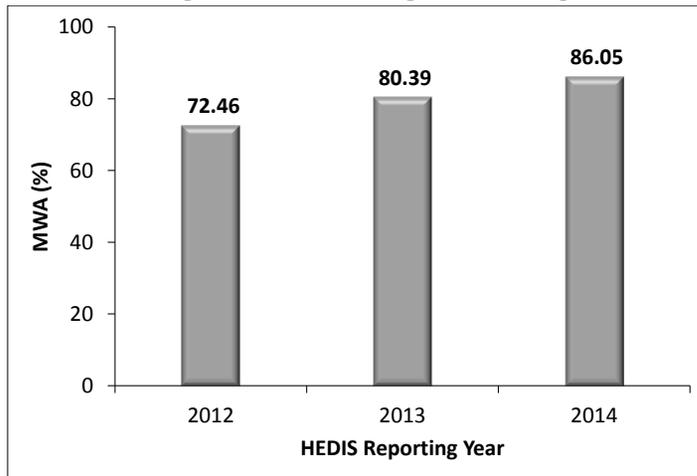
Figure 6-6—Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total Health Plan Ranking



Adult BMI Assessment

The *Adult BMI Assessment* measure reports the percentage of members 18 to 74 years of age who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

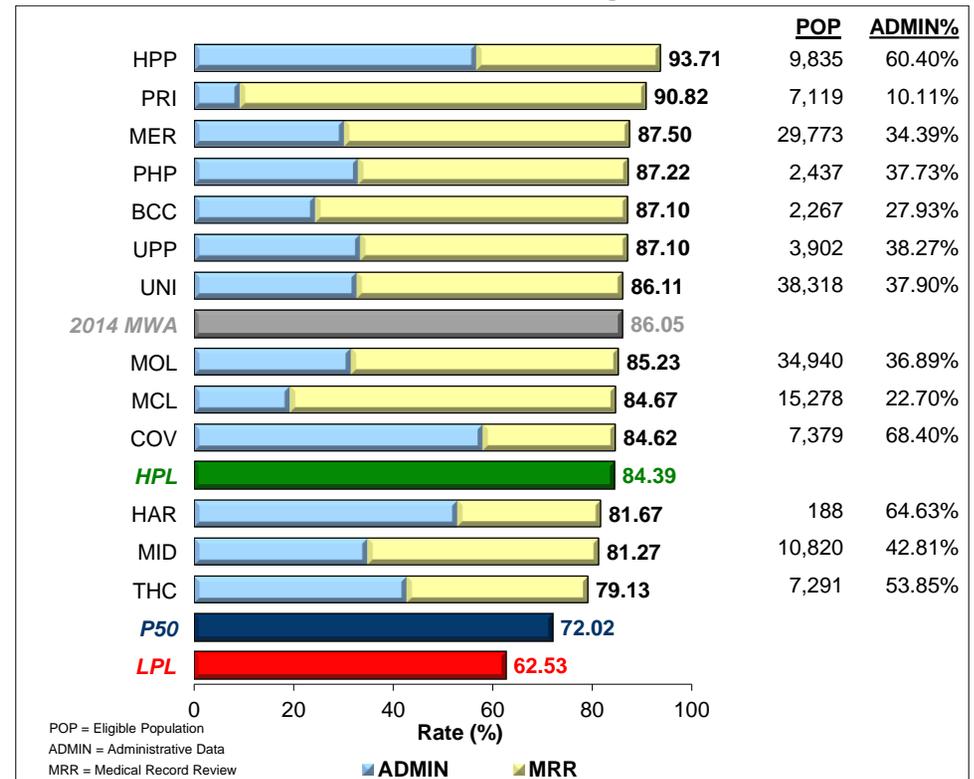
**Figure 6-7—Adult BMI Assessment
Michigan Medicaid Weighted Averages**



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 5.66 percentage points and exceeded the HPL. Ten MHPs exceeded the HPL, and none fell below the LPL. MHPs varied widely in the use of administrative data to calculate their rates (from 10.11 percent to 68.40 percent).

**Figure 6-8—Adult BMI Assessment
Health Plan Ranking**



Introduction

The Pregnancy Care dimension encompasses the following MDCH measures:

- ◆ Prenatal and Postpartum Care—Timeliness of Prenatal Care
- ◆ Prenatal and Postpartum Care—Postpartum Care
- ◆ Weeks of Pregnancy at Time of Enrollment
- ◆ Frequency of Ongoing Prenatal Care

Summary of Findings

Table 7-1 presents the statewide performance for the *Prenatal and Postpartum Care* measures under the Pregnancy Care dimension. It lists the HEDIS 2014 weighted averages, the trended results, and a summary of the MHPs with rates showing significant changes from HEDIS 2013. Performance for *Weeks of Pregnancy at Time of Enrollment* is not presented in the table because high or low rates for this measure may not indicate good or bad performance for the MHPs.

Table 7-1—Michigan Medicaid HEDIS 2014 Statewide Rate Trend Pregnancy Care						
Measure	Statewide Rate		Number of MHPs			
	HEDIS 2014 Weighted Average	2013–2014 Trend	With Significant Improvement in HEDIS 2014	With Significant Decline in HEDIS 2014		
<i>Prenatal and Postpartum Care</i>						
<i>Timeliness of Prenatal Care</i>	88.92%	-0.69	0	1		
<i>Postpartum Care</i>	70.84%	+0.28	0	1		
<i>Frequency of Ongoing Prenatal Care— ≥81 Percent</i>	66.36%	-2.38	1	2		
2013–2014 trend note: Rates shaded in green with a green font indicate a statistically significant improvement from the prior year. Rates shaded in red with a red font indicate a statistically significant decline from the prior year.						
Legend	<P10	≥P10 and <P25	≥P25 and < P50	≥P50 and < P75	≥P75 and < P90	≥P90

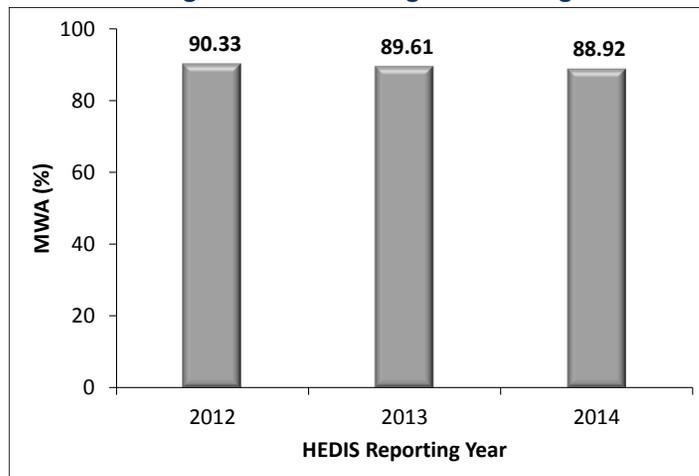
Table 7-1 shows that all measures had statistically non-significant changes in the statewide rates from HEDIS 2013, although a few plans had statistically significant changes. The weighted averages of all measures ranked at or above the national Medicaid 50th percentile, with one at or above the 75th percentile.

Pregnancy Care Findings

Prenatal and Postpartum Care—Timeliness of Prenatal Care

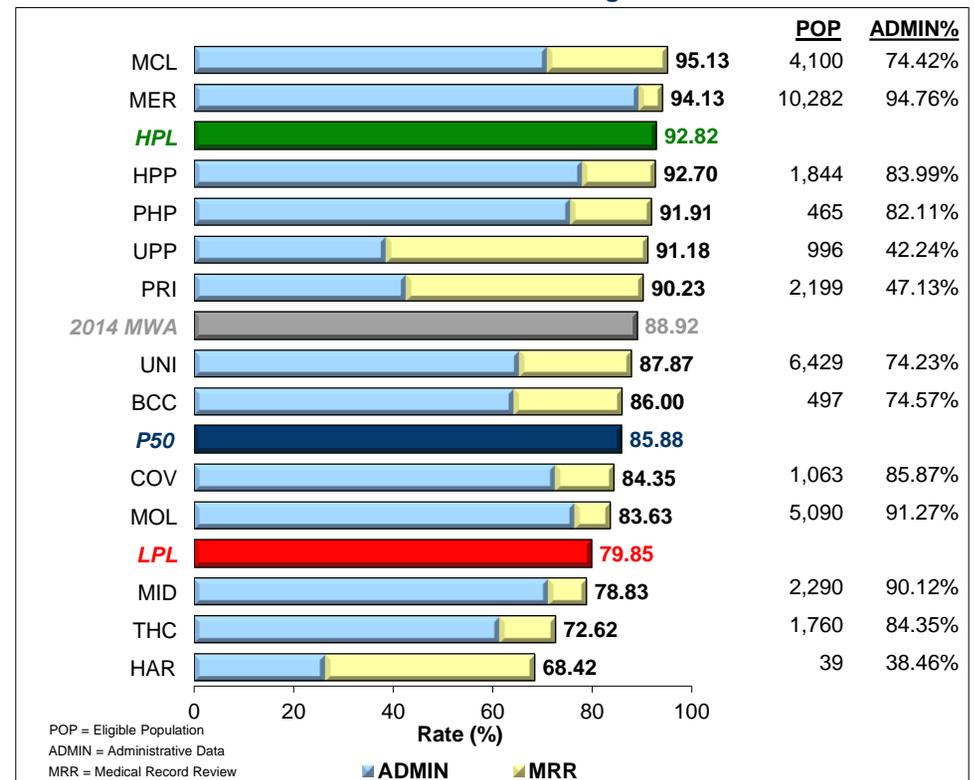
The *Prenatal and Postpartum Care—Timeliness of Prenatal Care* measure represents the percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester or within 42 days of enrollment in the organization.

Figure 7-1—Prenatal and Postpartum Care—Timeliness of Prenatal Care Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased slightly from HEDIS 2013 (0.69 percentage points), it exceeded the national HEDIS 2013 50th percentile. Two health plans exceeded the HPL, and three performed below the LPL. MHPs varied widely in the use of administrative data to calculate their rates (from 38.46 percent to 94.76 percent).

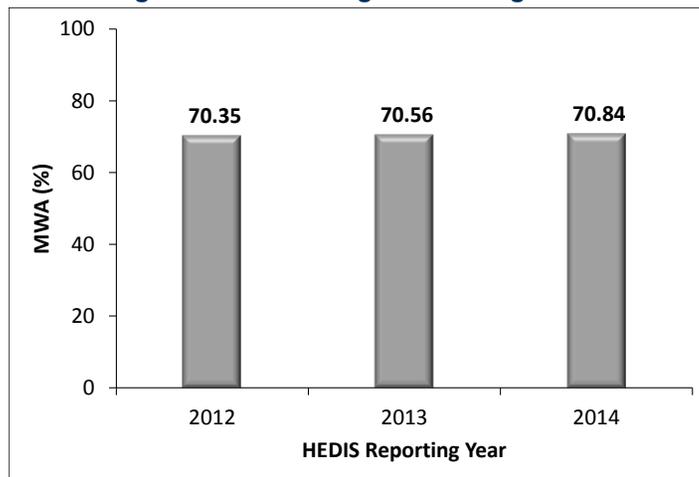
Figure 7-2—Prenatal and Postpartum Care—Timeliness of Prenatal Care Health Plan Ranking



Prenatal and Postpartum Care—Postpartum Care

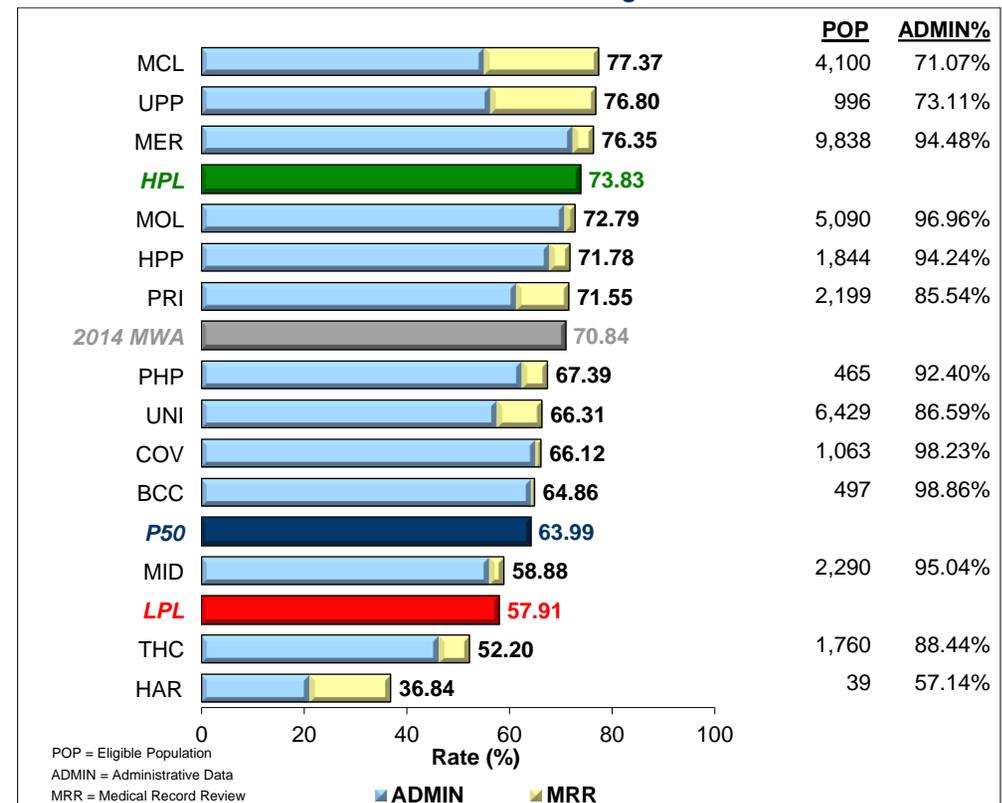
The *Prenatal and Postpartum Care—Postpartum Care* measure represents the percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.

Figure 7-3—Prenatal and Postpartum Care—Postpartum Care Michigan Medicaid Weighted Averages



The HEDIS 2014 weighted average increased slightly from HEDIS 2013 (0.28 percentage points) and exceeded the national HEDIS 2013 50th percentile. Three health plans exceeded the HPL, and two performed below the LPL. MHPs varied widely in the use of administrative data to calculate their rates (from 57.14 percent to 98.86 percent).

Figure 7-4—Prenatal and Postpartum Care—Postpartum Care Health Plan Ranking



Weeks of Pregnancy at Time of Enrollment

The *Weeks of Pregnancy at Time of Enrollment* measure represents the percentage of women who delivered a live birth during the measurement year displayed by the weeks of pregnancy at the time of their enrollment in the organization.

Plan	Eligible Population	≤ 0 Weeks Rate	1 to 12 Weeks Rate	13 to 27 Weeks Rate	28 or More Weeks Rate	Unknown Rate
Blue Cross Complete of Michigan	411	21.41%	15.09%	39.90%	20.92%	2.68%
CoventryCares of Michigan, Inc.	1,200	47.83%	4.83%	26.00%	16.58%	4.75%
HAP Midwest Health Plan, Inc.	2,615	27.84%	8.37%	40.38%	18.55%	4.86%
Harbor Health Plan	52	51.92%	19.23%	17.31%	11.54%	0.00%
HealthPlus Partners	1,960	35.61%	8.47%	35.66%	14.95%	5.31%
McLaren Health Plan	4,645	23.01%	10.18%	43.85%	17.95%	4.99%
Meridian Health Plan of Michigan	11,024	26.74%	9.88%	45.50%	17.72%	0.15%
Molina Healthcare of Michigan	5,708	34.20%	8.37%	37.18%	16.56%	3.70%
Physicians Health Plan—FamilyCare	526	35.17%	8.75%	38.40%	15.59%	2.09%
Priority Health Choice, Inc.	411	26.03%	12.65%	44.77%	16.55%	0.00%
Total Health Care, Inc.	2,070	30.29%	8.70%	38.02%	16.86%	6.14%
UnitedHealthcare Community Plan	7,389	32.20%	8.07%	37.76%	16.92%	5.06%
Upper Peninsula Health Plan	1,061	21.68%	18.19%	42.32%	13.10%	4.71%
2014 MWA	—	29.72%	9.27%	40.51%	17.12%	3.38%
2013 MWA	—	30.12%	9.12%	40.23%	17.02%	3.50%
2012 MWA	—	27.93%	9.25%	40.82%	18.49%	3.51%

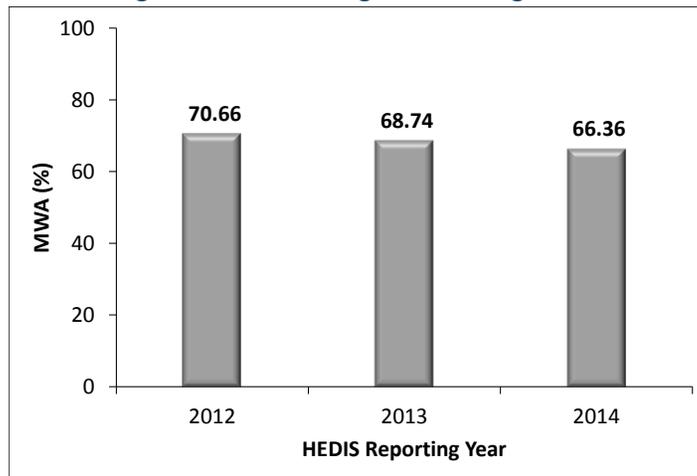
The National HEDIS 2013 Medicaid 50th percentiles were not available for this measure.

There are no national benchmarks established for this measure. Year-to-year comparison of the Michigan Medicaid weighted averages shows that women are enrolling with the health plan earlier in their pregnancy or even before they become pregnant.

Frequency of Ongoing Prenatal Care

The *Frequency of Ongoing Prenatal Care* measure represents the percentage of deliveries between November 6 of the year prior to the measurement year and November 5 of the measurement year and had the expected prenatal visits. Figure 7-5 and Figure 7-6 display the percentage of deliveries that had ≥ 81 percent of expected prenatal visits.

Figure 7-5—Frequency of Ongoing Prenatal Care— ≥ 81 Percent Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased from HEDIS 2013 by 2.38 percentage points, it exceeded the national HEDIS 2013 50th percentile. Two health plans exceeded the HPL, and five performed below the LPL. MHPs varied widely in the use of administrative data to calculate their rates (from 0 percent to 86.79 percent).

Figure 7-6—Frequency of Ongoing Prenatal Care— ≥ 81 Percent Health Plan Ranking

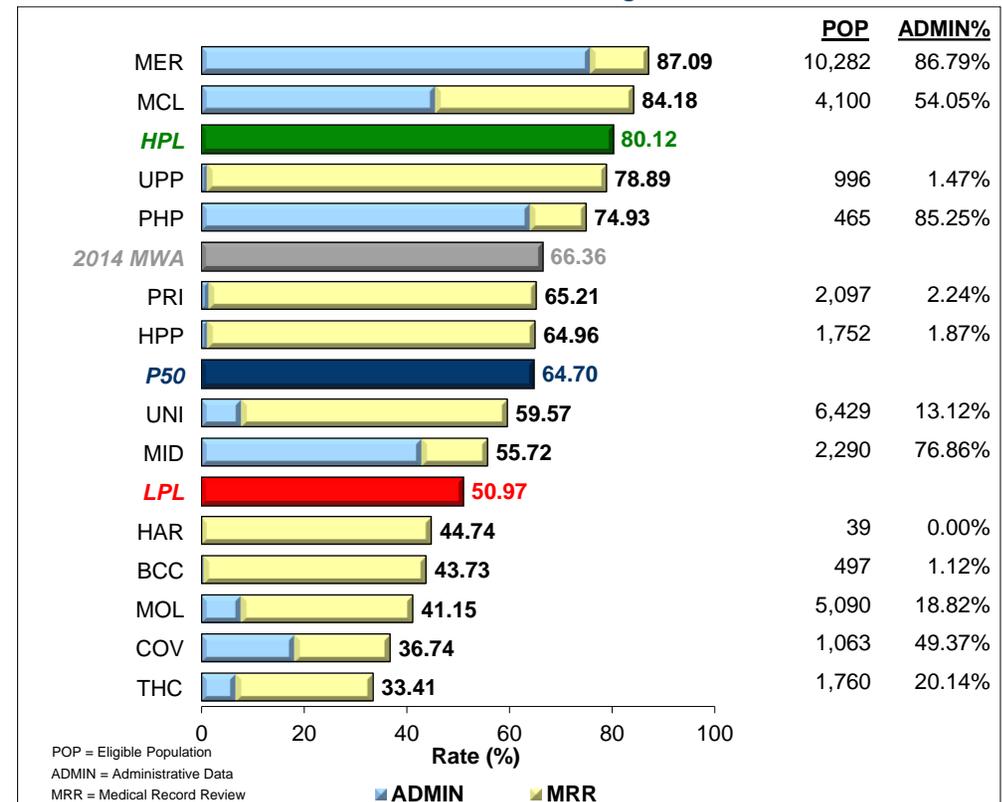


Table 7-3—Frequency of Ongoing Prenatal Care

Plan	Eligible Population	<21 Percent*	21–40 Percent	41–60 Percent	61–80 Percent	≥81 Percent
Blue Cross Complete of Michigan	497	12.78%	6.88%	11.30%	25.31%	43.73%
CoventryCares of Michigan, Inc.	1,063	20.23%	13.95%	12.79%	16.28%	36.74%
HAP Midwest Health Plan, Inc.	2,290	10.22%	7.30%	11.19%	15.57%	55.72%
Harbor Health Plan	39	18.42%	15.79%	13.16%	7.89%	44.74%
HealthPlus Partners	1,752	2.92%	2.68%	8.52%	20.92%	64.96%
McLaren Health Plan	4,100	1.22%	0.97%	3.65%	9.98%	84.18%
Meridian Health Plan of Michigan	10,282	0.70%	1.64%	2.82%	7.75%	87.09%
Molina Healthcare of Michigan	5,090	12.61%	15.27%	13.27%	17.70%	41.15%
Physicians Health Plan—FamilyCare	465	0.81%	2.16%	8.09%	14.02%	74.93%
Priority Health Choice, Inc.	2,097	6.57%	4.38%	8.03%	15.82%	65.21%
Total Health Care, Inc.	1,760	22.74%	17.40%	11.14%	15.31%	33.41%
UnitedHealthcare Community Plan	6,429	8.36%	7.82%	8.09%	16.17%	59.57%
Upper Peninsula Health Plan	996	1.39%	1.39%	4.64%	13.69%	78.89%
2014 MWA	—	6.59%	6.28%	7.29%	13.49%	66.36%
2013 MWA	—	8.67%	4.43%	6.26%	11.90%	68.74%
2012 MWA	—	7.07%	6.36%	5.78%	10.13%	70.66%
2013 P50	—	8.27%	4.25%	6.83%	13.53%	64.70%

* For this indicator, a lower rate indicates better performance (i.e., low rates of less than 21 percent of expected visits indicate better care).

Year-to-year comparison of the Michigan Medicaid weighted averages shows that the percentage of members with at least 81 percent of expected prenatal visits steadily declined. Nonetheless, the decline was not statistically significant, and the 2014 weighted average still benchmarked above the national HEDIS 2013 national 50th percentile.

Introduction

The Living With Illness dimension encompasses the following MDCH measures:

- ◆ *Comprehensive Diabetes Care—HbA1c Testing*
- ◆ *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)*
- ◆ *Comprehensive Diabetes Care—HbA1c Control (<8.0%)*
- ◆ *Comprehensive Diabetes Care—Eye Exam*
- ◆ *Comprehensive Diabetes Care—LDL-C Screening*
- ◆ *Comprehensive Diabetes Care—LDL-C Control (<100 mg/dL)*
- ◆ *Comprehensive Diabetes Care—Medical Attention for Nephropathy*
- ◆ *Comprehensive Diabetes Care—Blood Pressure Control (<140/80 mm Hg)*
- ◆ *Comprehensive Diabetes Care—Blood Pressure Control (<140/90 mm Hg)*
- ◆ *Use of Appropriate Medications for People With Asthma—Total*
- ◆ *Controlling High Blood Pressure*
- ◆ *Medical Assistance With Smoking and Tobacco Use Cessation—Advising Smokers and Tobacco Users to Quit*
- ◆ *Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Medications*
- ◆ *Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Strategies*
- ◆ *Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications*
- ◆ *Diabetes Monitoring for People With Diabetes and Schizophrenia*
- ◆ *Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia*
- ◆ *Adherence to Antipsychotic Medications for Individuals With Schizophrenia*

Summary of Findings

Table 8-1 presents statewide performance for the measures under the Living With Illness dimension. It lists the HEDIS 2014 weighted averages, the trended results, and a summary of the MHPs with rates showing significant changes from HEDIS 2013.

**Table 8-1—Michigan Medicaid HEDIS 2014 Statewide Rate Trend
Living With Illness**

Measure	Statewide Rate		Number of MHPs	
	HEDIS 2014 Weighted Average	2013–2014 Trend	With Significant Improvement in HEDIS 2014	With Significant Decline in HEDIS 2014
<i>Comprehensive Diabetes Care</i>				
<i>HbA1c Testing</i>	85.45%	+0.24	3	2
<i>HbA1c Poor Control (>9.0%)¹</i>	37.23%	+1.17	4	2
<i>HbA1c Control (<8.0%)</i>	53.74%	-0.83	2	2

**Table 8-1—Michigan Medicaid HEDIS 2014 Statewide Rate Trend
Living With Illness**

Measure	Statewide Rate		Number of MHPs	
	HEDIS 2014 Weighted Average	2013–2014 Trend	With Significant Improvement in HEDIS 2014	With Significant Decline in HEDIS 2014
<i>Eye Exam</i>	63.01%	+3.59	2	2
<i>LDL-C Screening</i>	78.67%	-1.24	0	1
<i>LDL-C Control (<100 mg/dL)</i>	40.83%	+1.67	1	1
<i>Medical Attention for Nephropathy</i>	82.00%	-0.41	1	4
<i>Blood Pressure Control (<140/80 mm Hg)</i>	41.41%	-2.32	0	2
<i>Blood Pressure Control (<140/90 mm Hg)</i>	63.56%	-2.66	1	3
<i>Use of Appropriate Medications for People With Asthma—Total</i>	81.19%	-0.94	1	1
<i>Controlling High Blood Pressure</i>	63.58%	-2.13	0	2
<i>Medical Assistance With Smoking and Tobacco Use Cessation</i>				
<i>Advising Smokers and Tobacco Users to Quit</i>	80.35%	+0.38	0	0
<i>Discussing Cessation Medications</i>	53.75%	+1.37	0	0
<i>Discussing Cessation Strategies</i>	46.12%	+1.05	0	1
<i>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications</i>	83.54%	+0.07	0	1
<i>Diabetes Monitoring for People With Diabetes and Schizophrenia</i>	72.60%	+8.33	1	0
<i>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia</i>	60.14%	-10.82	0	0
<i>Adherence to Antipsychotic Medications for Individuals With Schizophrenia</i>	60.49%	+7.78	2	0

2013–2014 Trend: Rates shaded in green with a green font indicate a statistically significant improvement from the prior year. Rates shaded in red with a red font indicate a statistically significant decline from the prior year.

Legend <P10 ≥P10 and < P25 ≥P25 and < P50 ≥P50 and < P75 ≥P75 and < P90 ≥P90 Not compared

¹ For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with yellow shade).

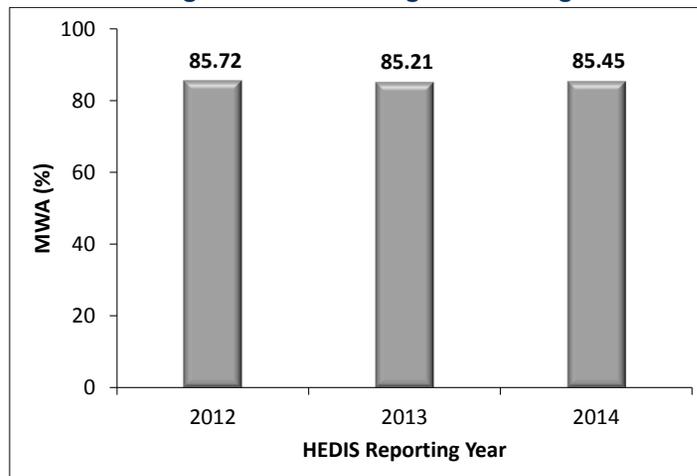
Table 8-1 shows that most measures under the Living With Illness dimension reported only slight changes from HEDIS 2013. Three measures (*Comprehensive Diabetes Care—Eye Exam*, *Diabetes Monitoring for People With Diabetes and Schizophrenia*, and *Adherence to Antipsychotic Medications for Individuals With Schizophrenia*) exhibited a statistically significant increase, and one measure (*Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia*) exhibited a statistically significant decrease in rate. Twelve of the 15 rates with national benchmarks ranked at or above the national Medicaid 50th percentile, with five at or above the 75th percentile. Two rates fell between the 25th and 50th percentile, while one fell below the 10th percentile.

Living With Illness Findings

Comprehensive Diabetes Care—HbA1c Testing

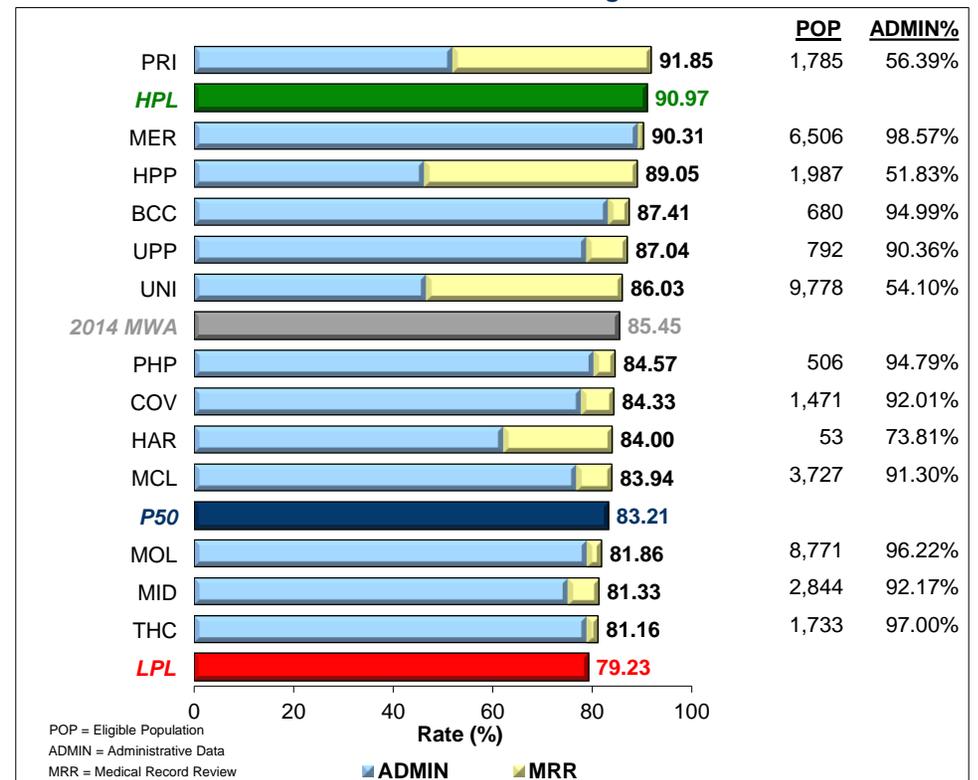
The *Comprehensive Diabetes Care—HbA1c Testing* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had Hemoglobin A1c (HbA1c) testing.

**Figure 8-1—Comprehensive Diabetes Care—HbA1c Testing
Michigan Medicaid Weighted Averages**



The HEDIS 2014 weighted average increased slightly from HEDIS 2013 (0.24 percentage points) and exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and none performed below the LPL. All plans but four used at least 90 percent of administrative data to calculate their rates.

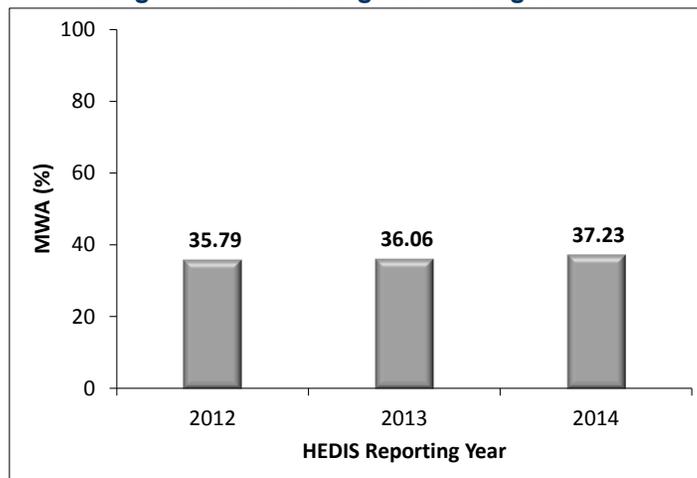
**Figure 8-2—Comprehensive Diabetes Care—HbA1c Testing
Health Plan Ranking**



Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)

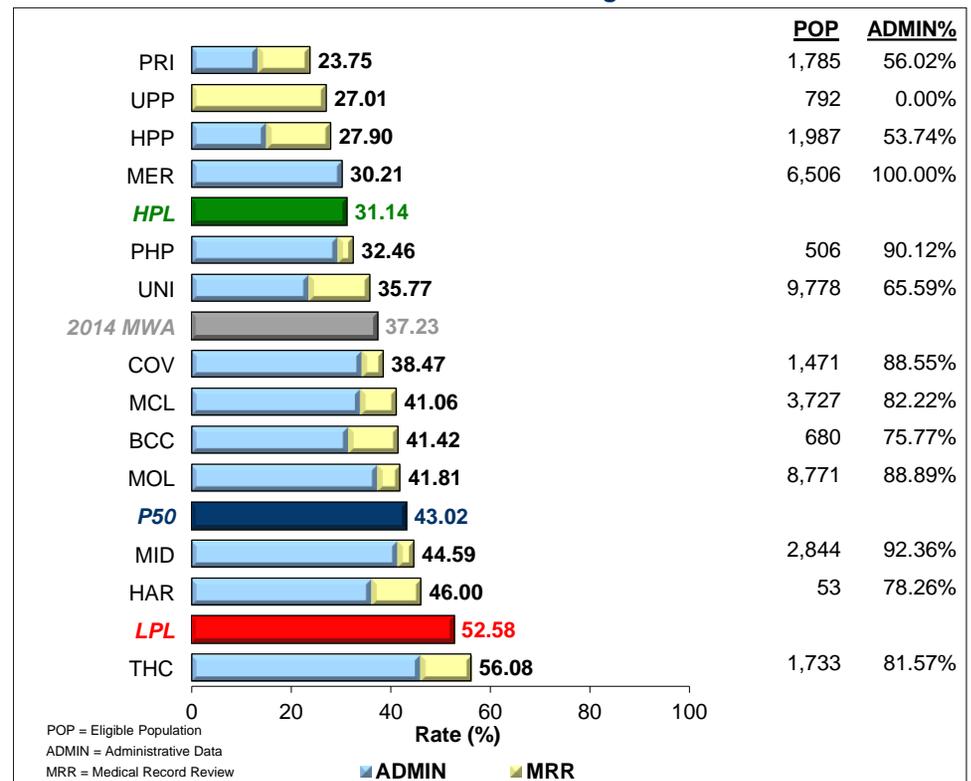
The *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had HbA1c poor control.

Figure 8-3—Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%) Michigan Medicaid Weighted Averages



A lower rate indicates better performance for this indicator. The HEDIS 2014 Michigan statewide performance declined slightly with the weighted average increasing by 1.17 percentage points from HEDIS 2013. Nonetheless, statewide performance exceeded the national HEDIS 2013 Medicaid 50th percentile. Four MHPs performed better than the HPL, and one performed below the LPL. MHPs varied in the use of administrative data to calculate their rates (from 0 percent to 100 percent).

Figure 8-4—Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%) Health Plan Ranking

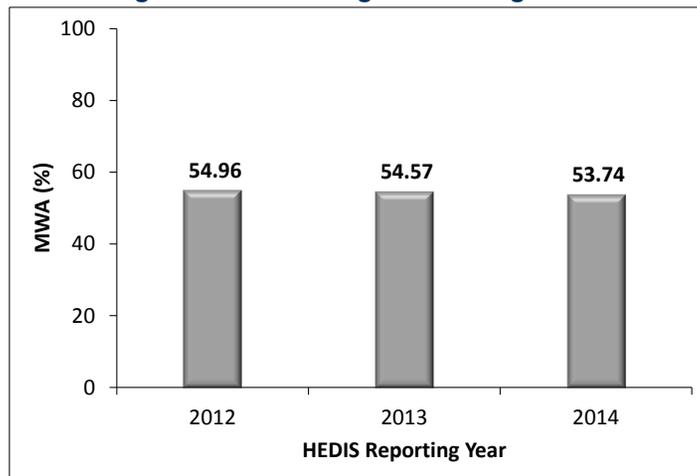


For this indicator, a lower rate indicates better performance (i.e., low rates of poor HbA1c control indicate better care).

Comprehensive Diabetes Care—HbA1c Control (<8.0%)

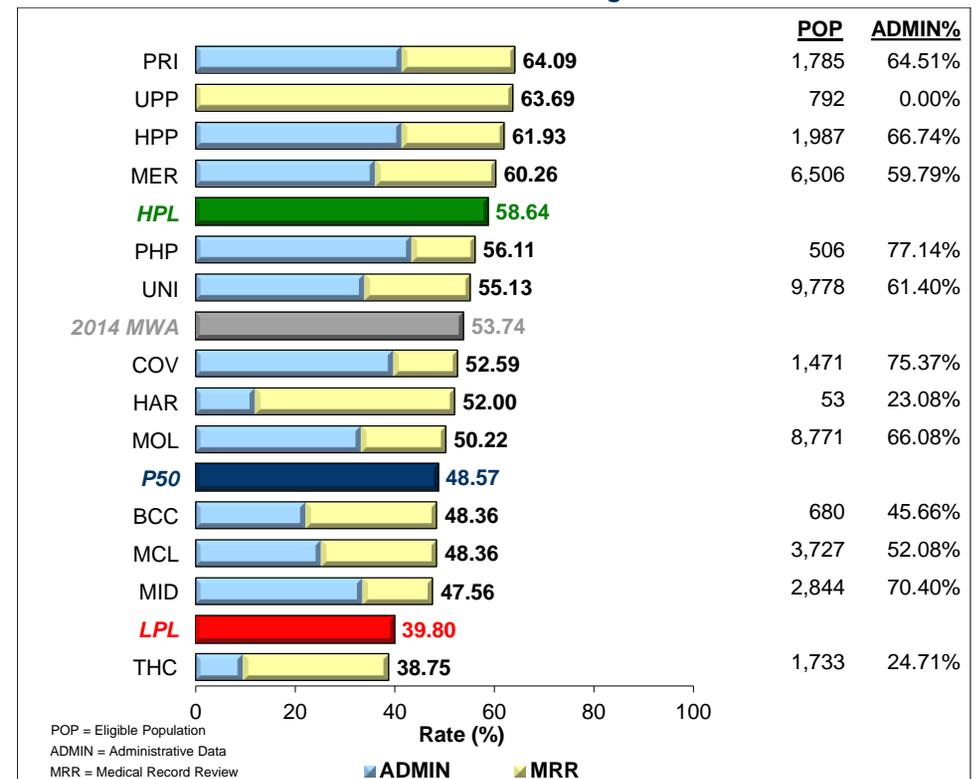
The *Comprehensive Diabetes Care—HbA1c Control (<8.0%)* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had HbA1c control (<8.0%).

Figure 8-5—Comprehensive Diabetes Care—HbA1c Control (<8.0%) Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased slightly from HEDIS 2013 (0.83 percentage points), it ranked above the national HEDIS 2013 Medicaid 50th percentile. Four MHPs performed above the HPL, and one performed below the LPL. MHPs varied in the use of administrative data to calculate their rates (from 0 percent to 77.14 percent).

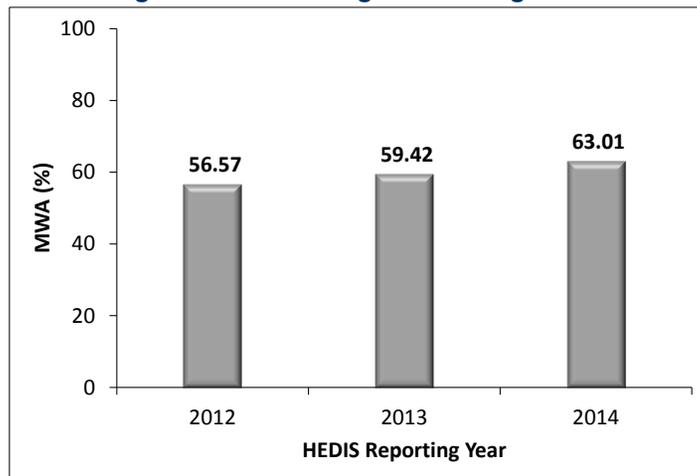
Figure 8-6—Comprehensive Diabetes Care—HbA1c Control (<8.0%) Health Plan Ranking



Comprehensive Diabetes Care—Eye Exam

The *Comprehensive Diabetes Care—Eye Exam* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had an eye exam (retinal) performed.

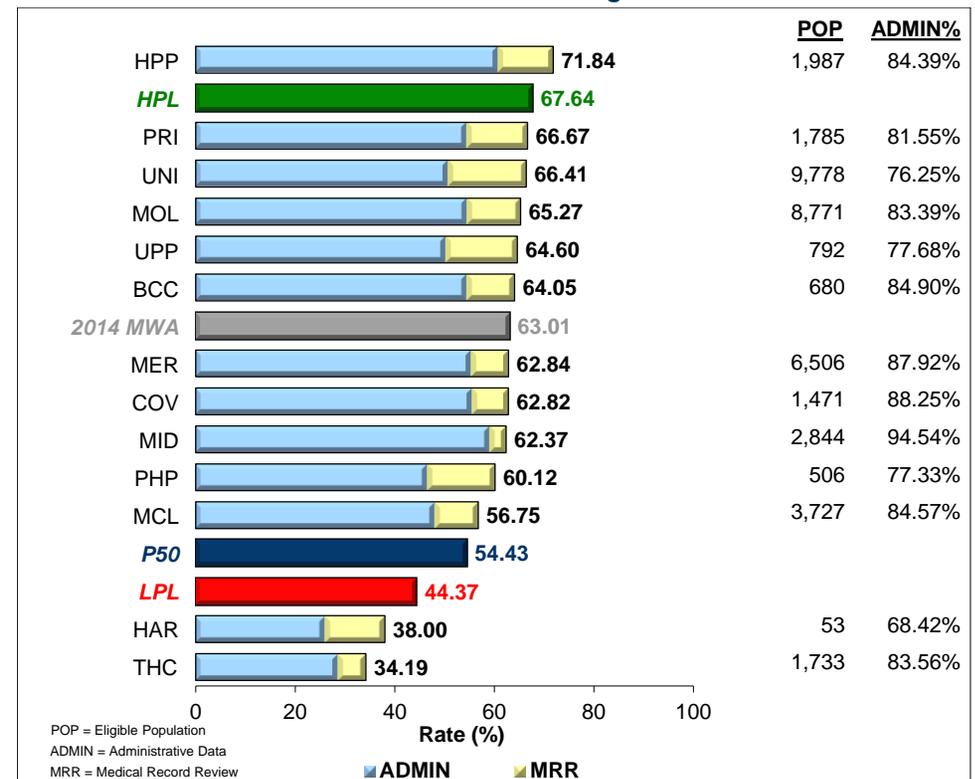
**Figure 8-7—Comprehensive Diabetes Care—Eye Exam
Michigan Medicaid Weighted Averages**



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 3.59 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and two performed below the LPL. All plans but four used at least 80 percent of administrative data to calculate their rates.

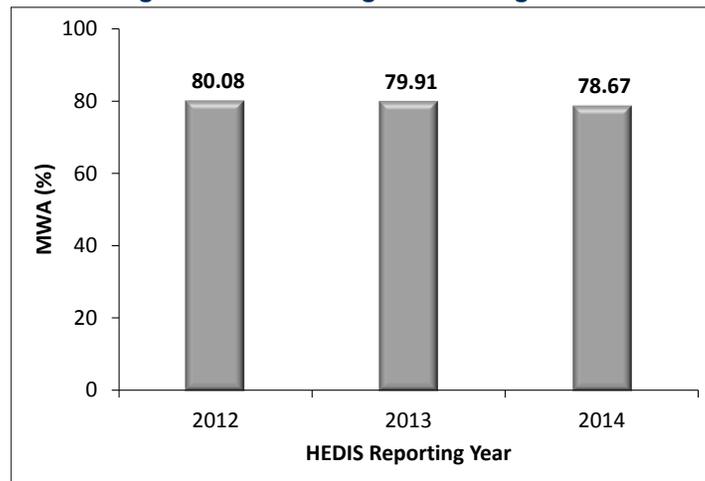
**Figure 8-8—Comprehensive Diabetes Care—Eye Exam
Health Plan Ranking**



Comprehensive Diabetes Care—LDL-C Screening

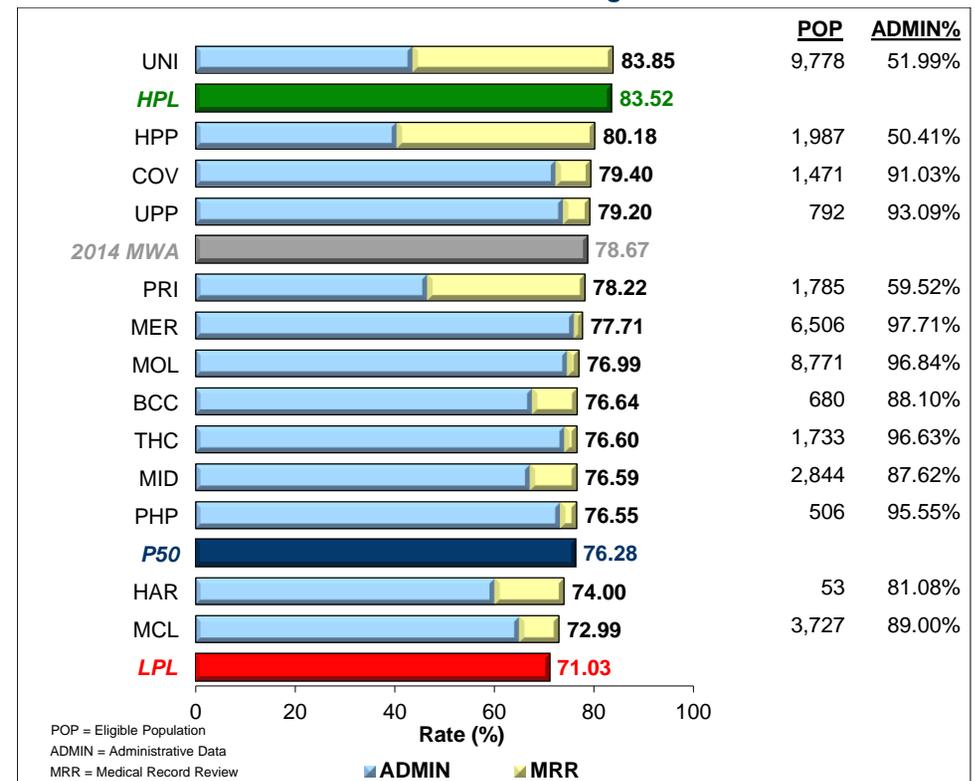
The *Comprehensive Diabetes Care—LDL-C Screening* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had LDL-C Screening.

Figure 8-9—Comprehensive Diabetes Care—LDL-C Screening Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased slightly from HEDIS 2013 by 1.24 percentage points, it ranked above the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and none performed below the LPL. All plans but three used at least 80 percent of administrative data to calculate their rates.

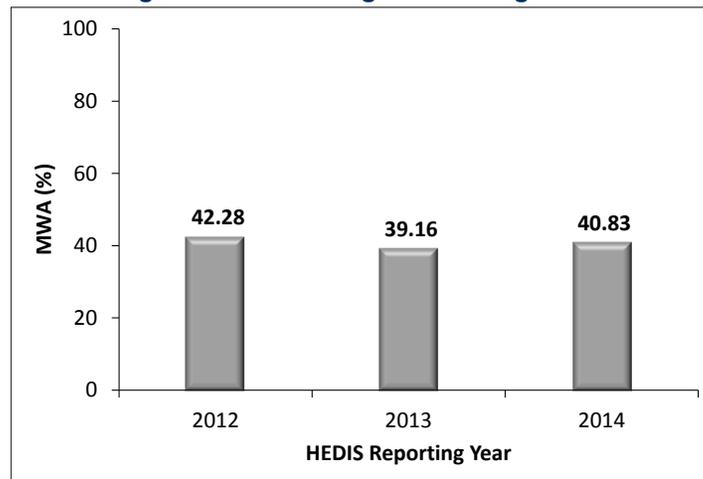
Figure 8-10—Comprehensive Diabetes Care—LDL-C Screening Health Plan Ranking



Comprehensive Diabetes Care—LDL-C Control (<100 mg/dL)

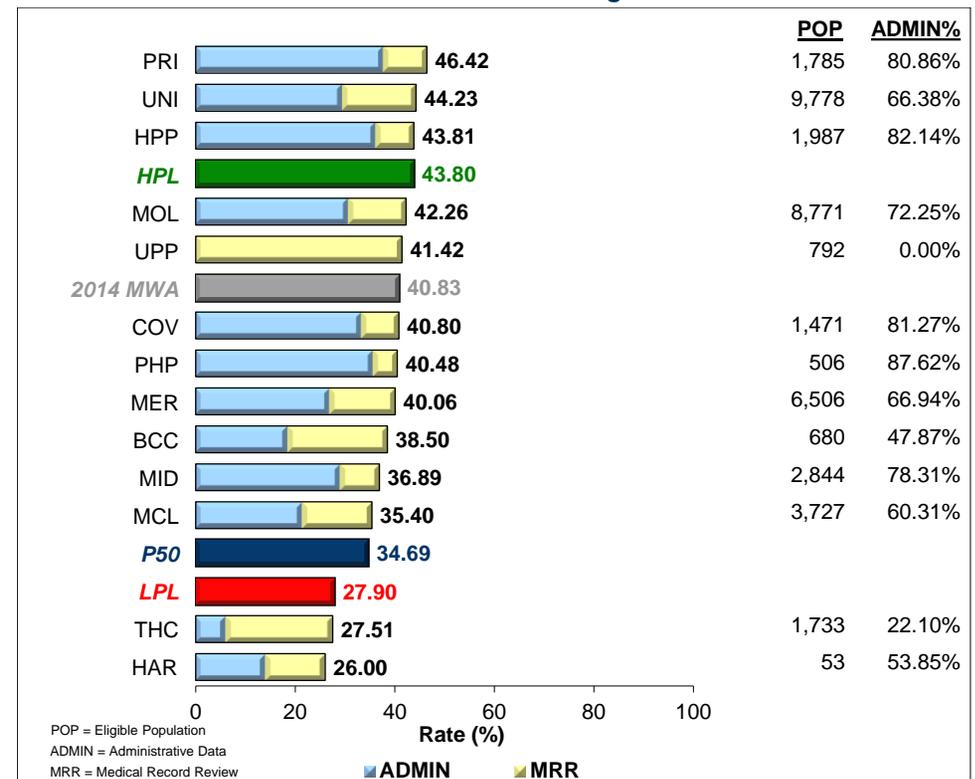
The *Comprehensive Diabetes Care—LDL-C Control (<100 mg/dL)* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had LDL-C control (<100 mg/dL).

Figure 8-11—Comprehensive Diabetes Care—LDL-C Control <100 mg/dL Michigan Medicaid Weighted Averages



The HEDIS 2014 weighted average increased slightly from HEDIS 2013 by 1.67 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. Three MHPs performed above the HPL and two below the LPL. MHPs varied notably in the use of administrative data to calculate their rates (from 0 percent to 87.62 percent).

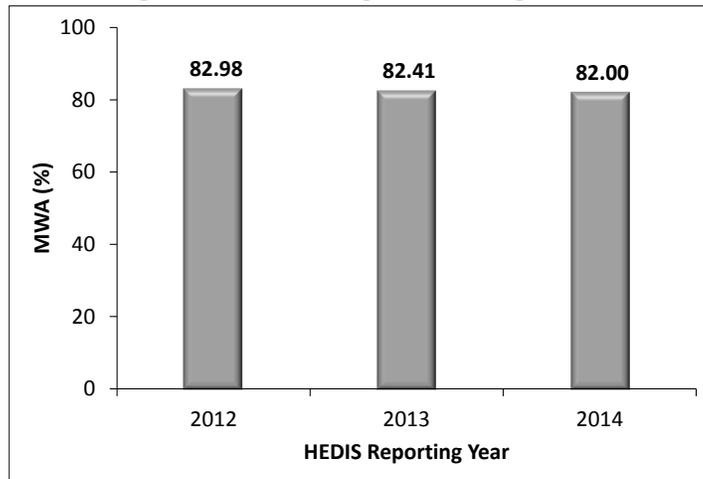
Figure 8-12—Comprehensive Diabetes Care—LDL-C Control <100 mg/dL Health Plan Ranking



Comprehensive Diabetes Care—Medical Attention for Nephropathy

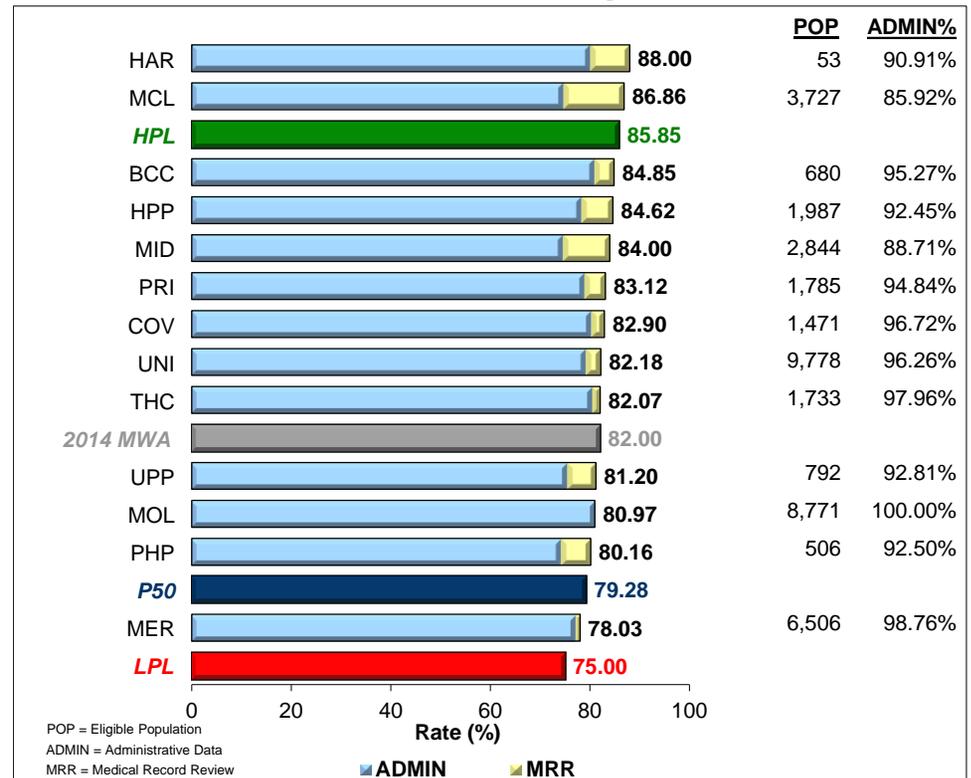
The *Comprehensive Diabetes Care—Medical Attention for Nephropathy* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had medical attention for nephropathy.

**Figure 8-13—Comprehensive Diabetes Care—
Medical Attention for Nephropathy
Michigan Medicaid Weighted Averages**



Although the HEDIS 2014 weighted average decreased slightly from HEDIS 2013 (0.41 percentage points), it ranked above the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and none performed below the LPL. All plans used at least 80 percent of administrative data to calculate their rates.

**Figure 8-14—Comprehensive Diabetes Care—
Medical Attention for Nephropathy
Health Plan Ranking**

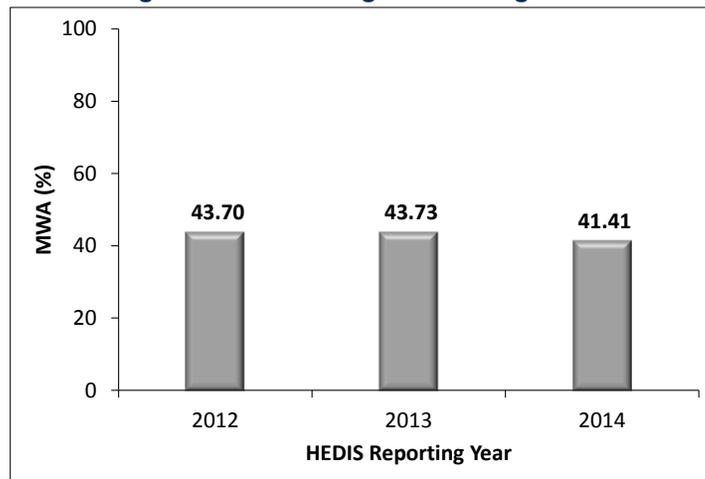


MOL chose to use the administrative method for this hybrid indicator.

Comprehensive Diabetes Care—Blood Pressure Control (<140/80 mm Hg)

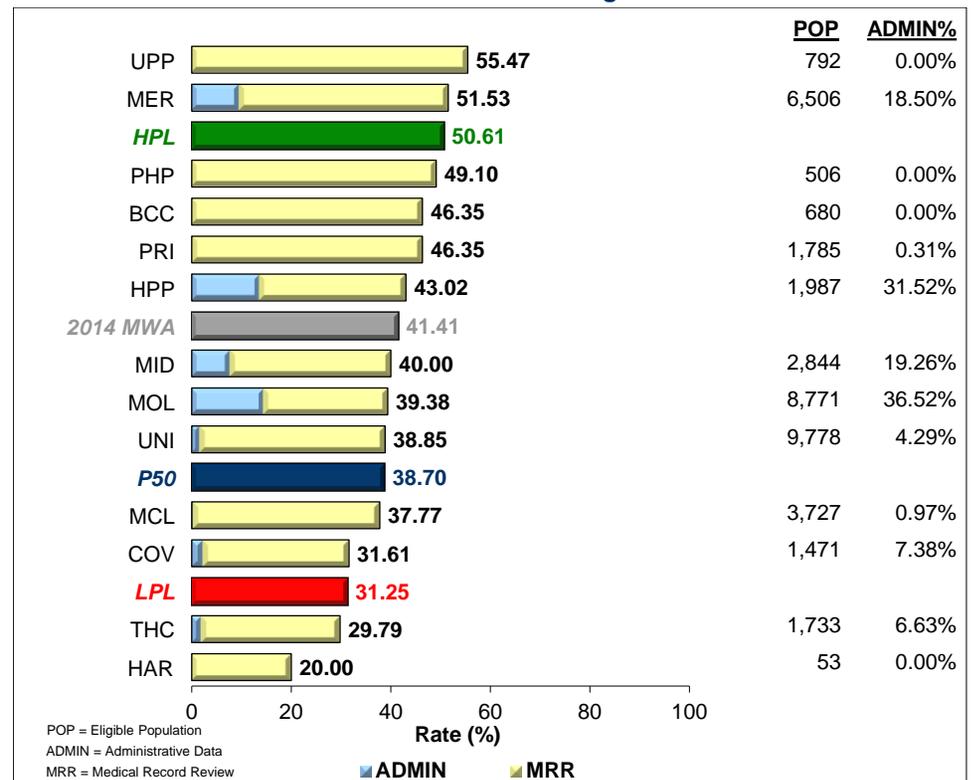
The *Comprehensive Diabetes Care—Blood Pressure Control (<140/80 mm Hg)* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had blood pressure control (<140/80 mm Hg).

Figure 8-15—Comprehensive Diabetes Care—Blood Pressure Control (<140/80 mm Hg) Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased by 2.32 percentage points, it exceeded the national HEDIS 2013 Medicaid 50th percentile. Two of the MHPs performed above the HPL, and two performed below the LPL. MHPs varied notably in the use of administrative data to calculate their rates (from 0 percent to 36.52 percent).

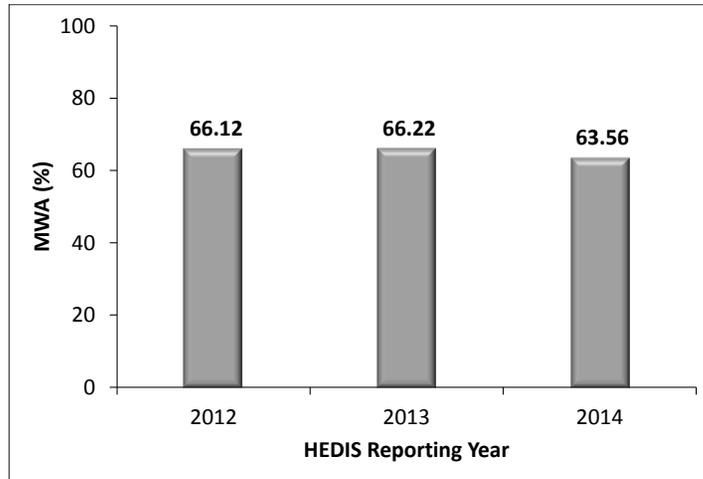
Figure 8-16—Comprehensive Diabetes Care—Blood Pressure Control (<140/80 mm Hg) Health Plan Ranking



Comprehensive Diabetes Care—Blood Pressure Control (<140/90 mm Hg)

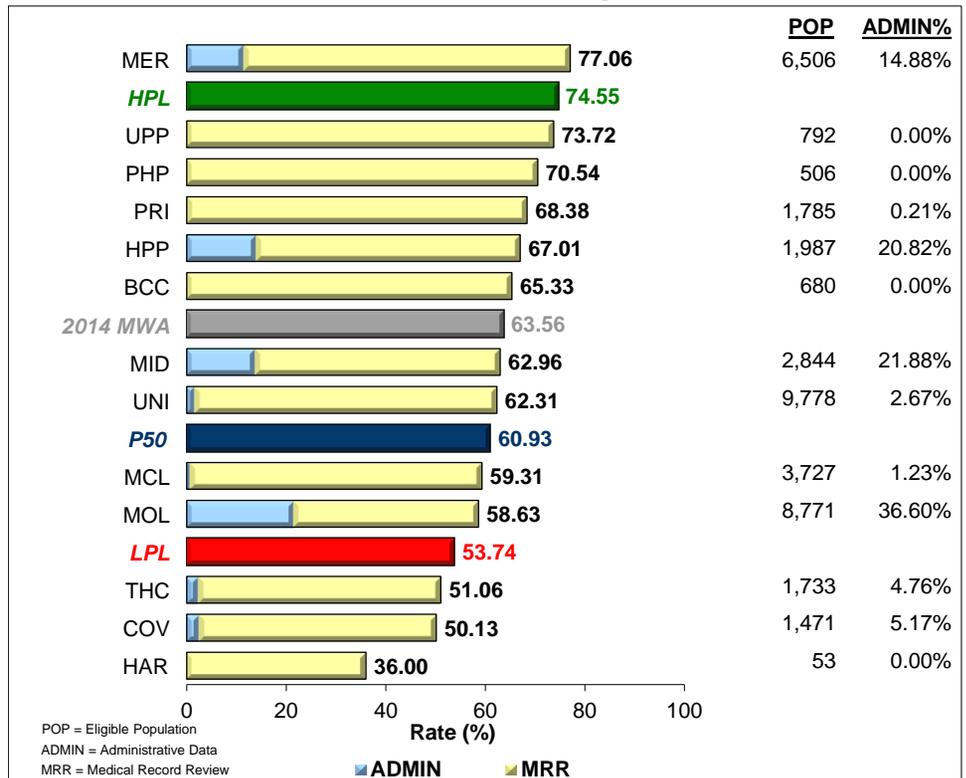
The *Comprehensive Diabetes Care—Blood Pressure Control (<140/90 mm Hg)* rate reports the percentage of members 18 to 75 years of age with diabetes (type 1 and type 2) who had blood pressure control (<140/90 mm Hg).

Figure 8-17—Comprehensive Diabetes Care—Blood Pressure Control (<140/90 mm Hg) Michigan Medicaid Weighted Averages



Although the HEDIS 2014 weighted average decreased from HEDIS 2013 by 2.66 percentage points, it exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and three performed below the LPL. MHPs varied notably in the use of administrative data to calculate their rates (from 0 percent to 36.60 percent).

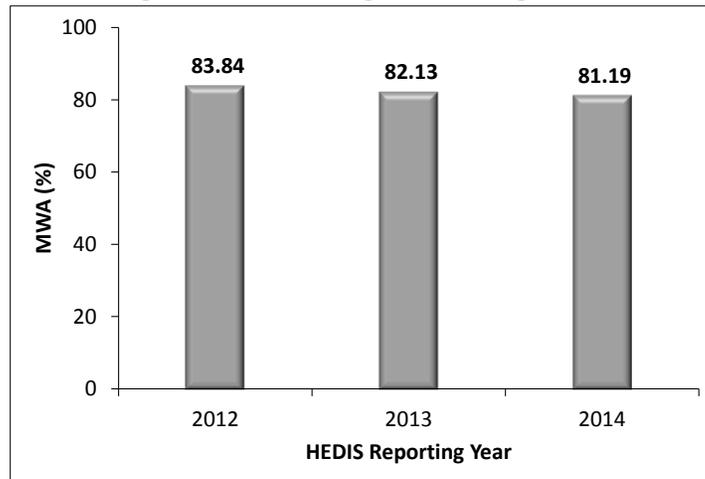
Figure 8-18—Comprehensive Diabetes Care—Blood Pressure Control (<140/90 mm Hg) Health Plan Ranking



Use of Appropriate Medications for People With Asthma—Total

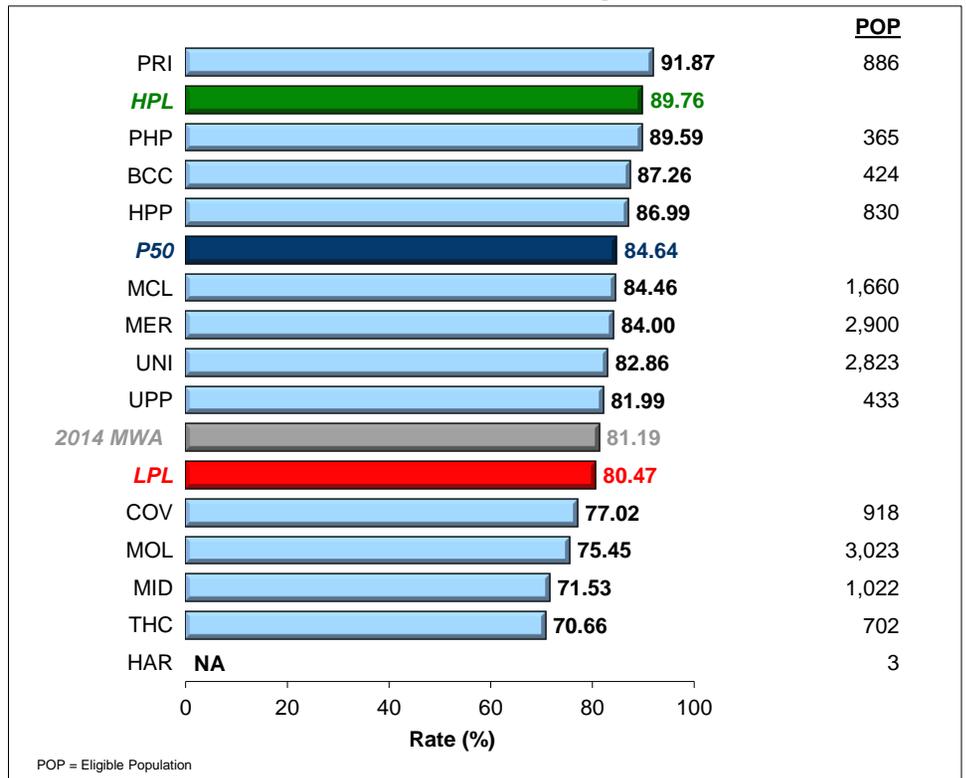
Use of Appropriate Medication for People With Asthma—Total reports the percentage of members 5 to 64 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year.

Figure 8-19—Use of Appropriate Medications for People With Asthma—Total Michigan Medicaid Weighted Averages



The HEDIS 2014 weighted average decreased slightly from HEDIS 2013 (0.94 percentage points) and ranked below the HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and four fell below the LPL.

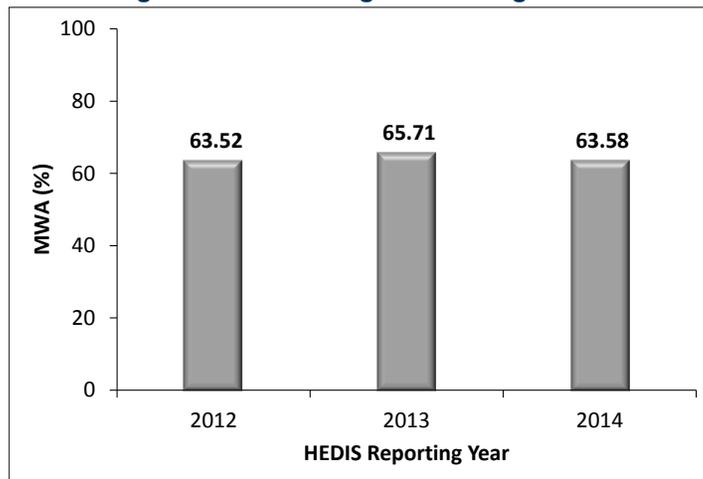
Figure 8-20—Use of Appropriate Medications for People With Asthma—Total Health Plan Ranking



Controlling High Blood Pressure

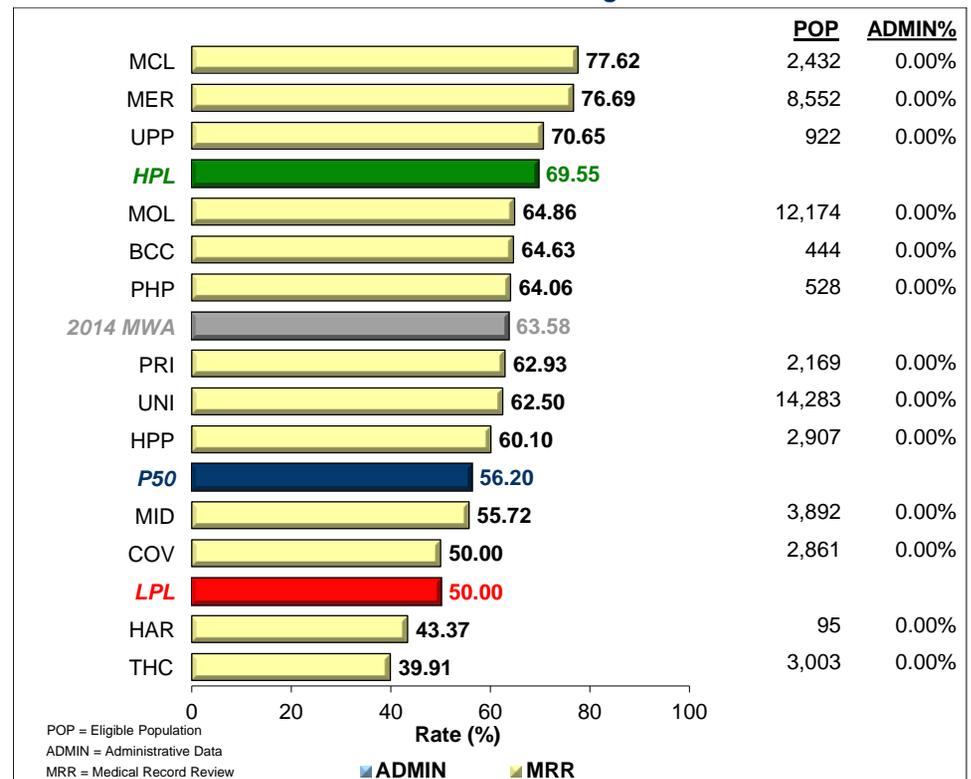
The *Controlling High Blood Pressure* measure is used to report the percentage of members 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90) during the measurement year.

**Figure 8-21—Controlling High Blood Pressure
Michigan Medicaid Weighted Averages**



Although the HEDIS 2014 weighted average decreased from HEDIS 2013 by 2.13 percentage points, it exceeded the national HEDIS 2013 Medicaid 50th percentile. Three MHPs performed above the HPL, and two performed below the LPL. Since this measure must be reported via medical record data according to NCQA specifications, all plan rates were derived from medical records.

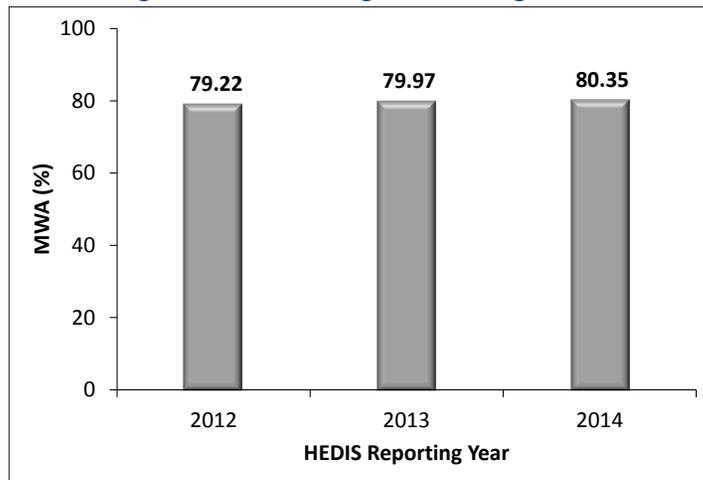
**Figure 8-22—Controlling High Blood Pressure
Health Plan Ranking**



Medical Assistance With Smoking and Tobacco Use Cessation—Advising Smokers and Tobacco Users to Quit

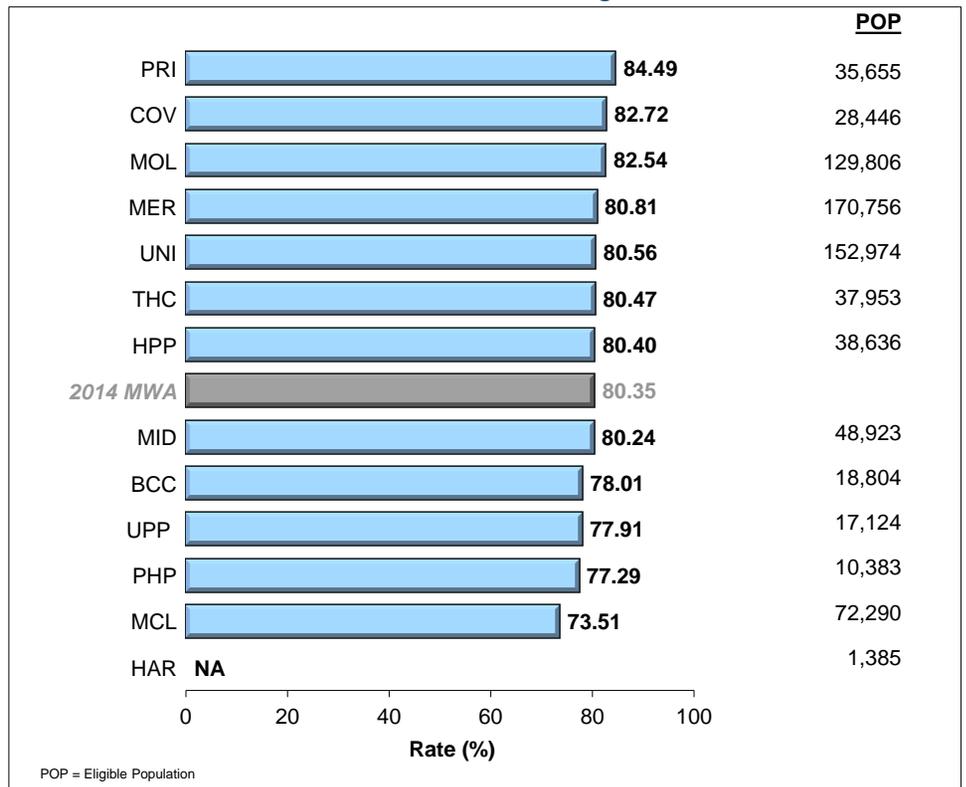
Medical Assistance With Smoking and Tobacco Use Cessation—Advising Smokers and Tobacco Users to Quit reports the percentage of members 18 years of age and older who are current smokers or tobacco users and who received cessation advice during the measurement year.

Figure 8-23—Medical Assistance With Smoking and Tobacco Use Cessation—Advising Smokers and Tobacco Users to Quit Michigan Medicaid Weighted Averages



The HEDIS 2014 weighted average increased slightly from HEDIS 2013 (0.38 percentage points). Seven MHPs performed above the 2014 Medicaid weighted average, and five performed below.

Figure 8-24—Medical Assistance With Smoking and Tobacco Use Cessation—Advising Smokers and Tobacco Users to Quit Health Plan Ranking

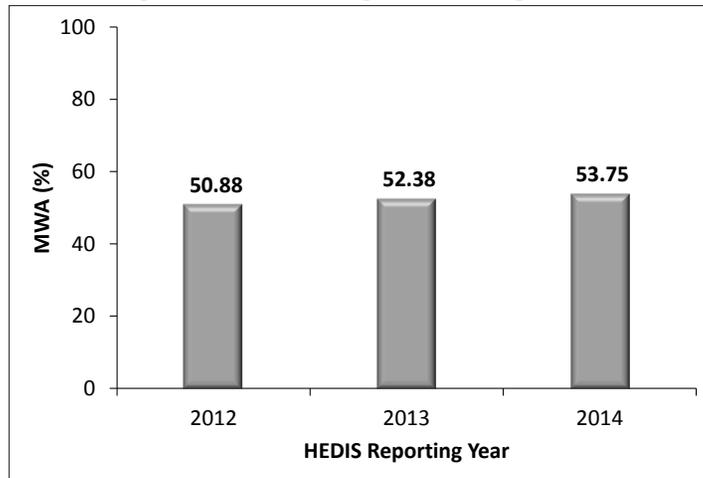


The eligible population for each health plan displayed here was the sum of the CAHPS sample frame sizes from 2013 and 2014 and did not represent the exact eligible population (i.e., smokers) for this indicator.

Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Medication

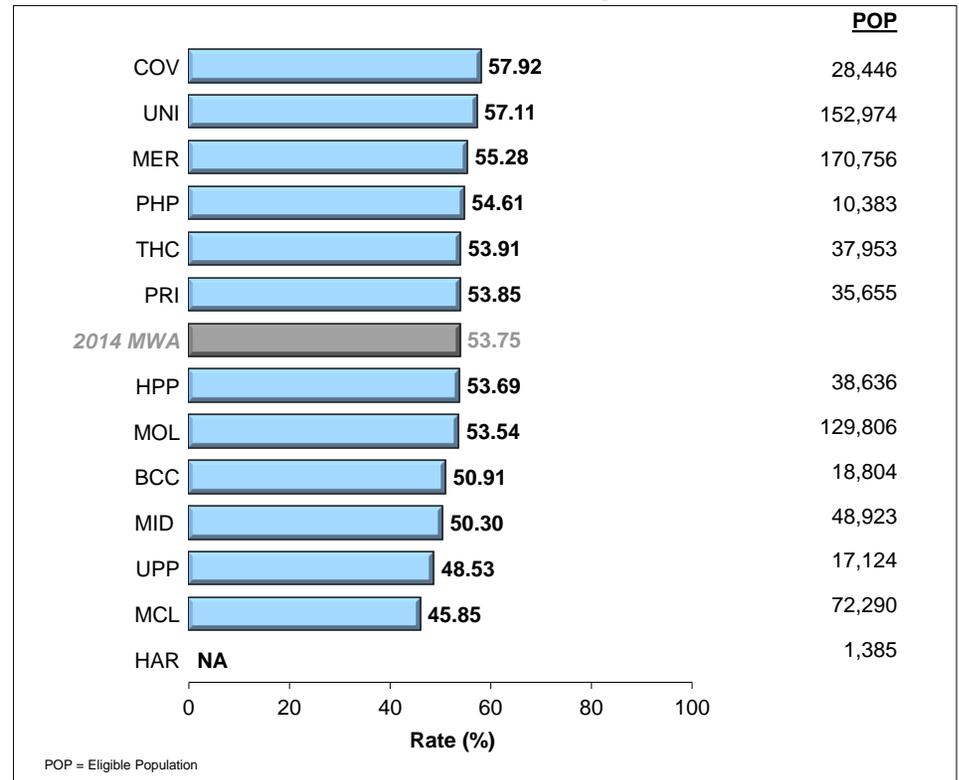
Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Medication reports the percentage of members 18 years of age and older who are current smokers or tobacco users and who discussed or were recommended cessation medications during the measurement year.

Figure 8-25—Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Medication Michigan Medicaid Weighted Averages



The HEDIS 2014 weighted average increased from HEDIS 2013 by 1.37 percentage points. Six MHPs performed above the 2014 Medicaid weighted average, and six performed below.

Figure 8-26—Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Medication Health Plan Ranking

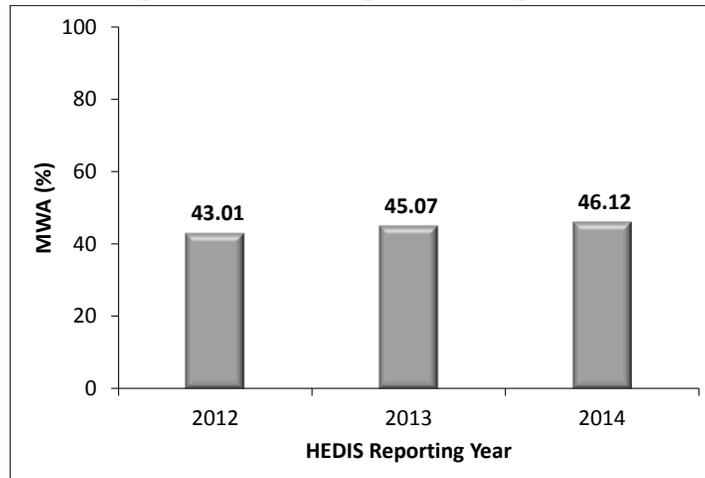


The eligible population for each health plan displayed here was the sum of the CAHPS sample frame sizes from 2013 and 2014 and did not represent the exact eligible population (i.e., smokers) for this indicator.

Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Strategies

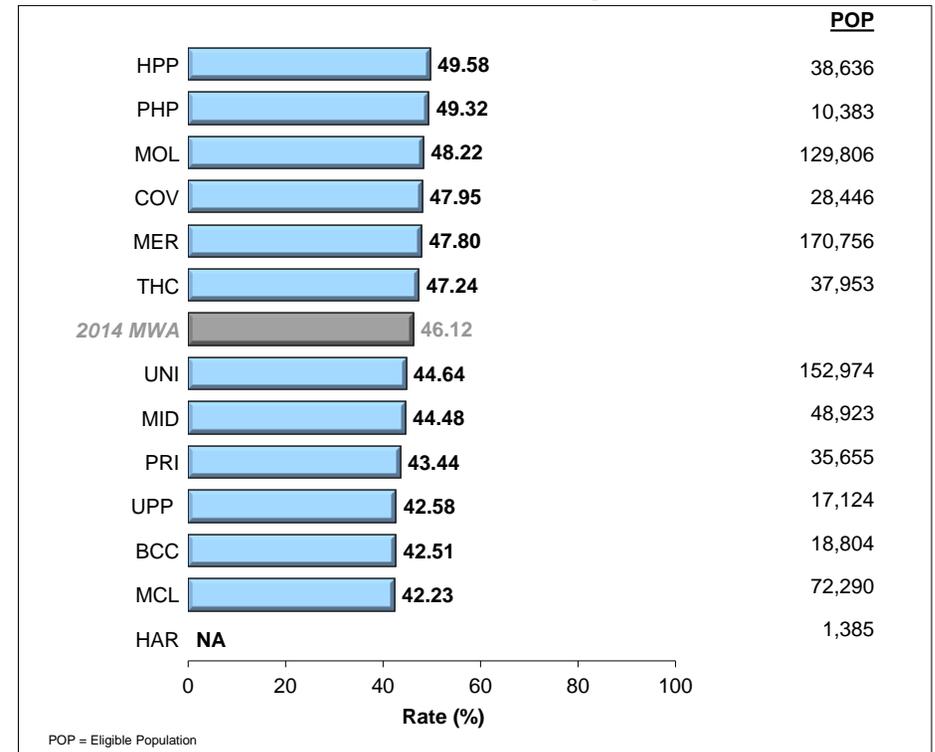
Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Strategies reports the percentage of members 18 years of age and older who are current smokers or tobacco users and who discussed or were provided cessation methods or strategies during the measurement year.

Figure 8-27—Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Strategies Michigan Medicaid Weighted Averages



The HEDIS 2014 weighted average exceeded HEDIS 2013 by 1.05 percentage points. Six MHPs performed above the 2014 Medicaid weighted average, and six performed below.

Figure 8-28—Medical Assistance With Smoking and Tobacco Use Cessation—Discussing Cessation Strategies Health Plan Ranking

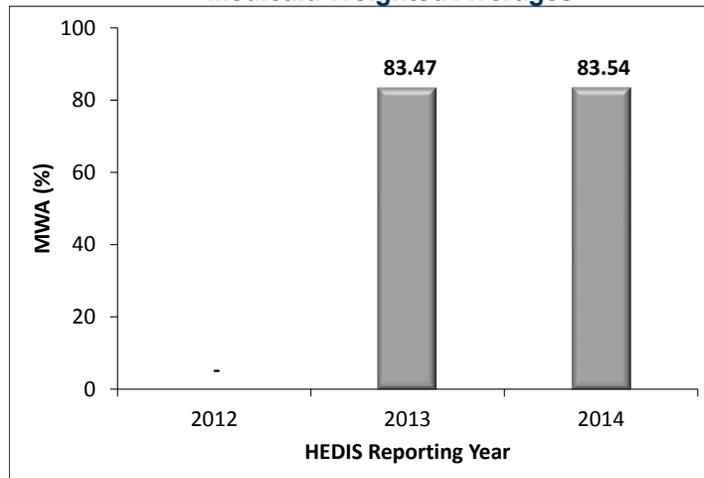


The eligible population for each health plan displayed here was the sum of the CAHPS sample frame sizes from 2013 and 2014 and did not represent the exact eligible population (i.e., smokers) for this indicator.

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

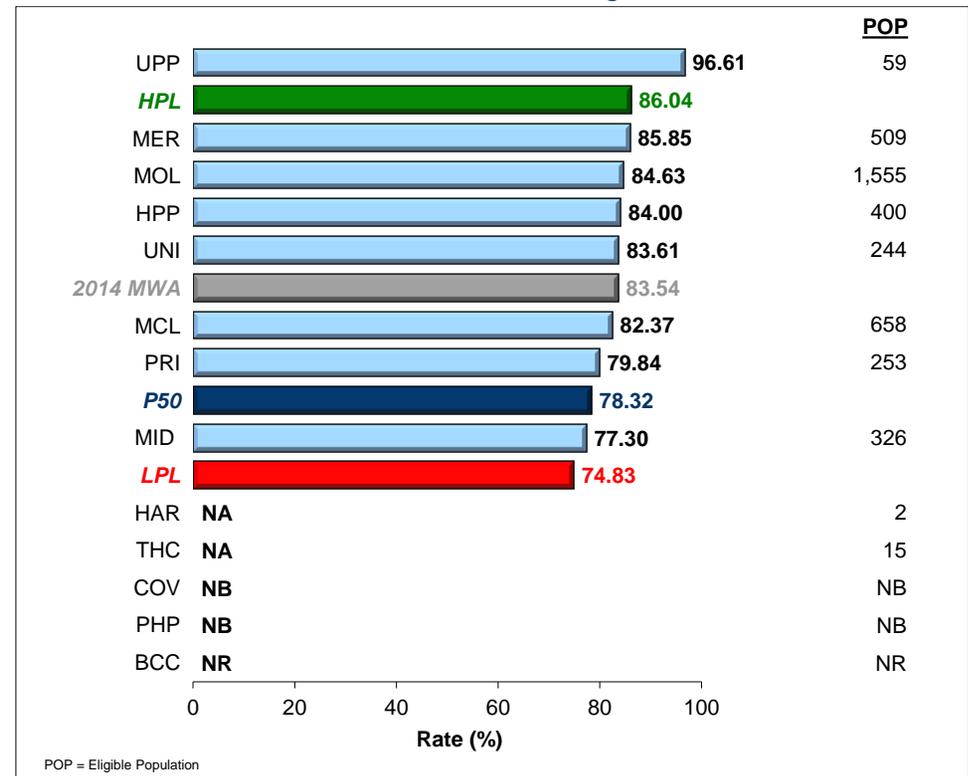
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications reports the percentage of members between 18 years and 64 years of age identified with schizophrenia or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.

Figure 8-29—Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications Medicaid Weighted Averages



This was a new measure for HEDIS 2013; therefore, the HEDIS 2012 weighted average was not available. The HEDIS 2014 weighted average increased slightly from HEDIS 2013 (0.07 percentage points) and exceeded the national HEDIS 2013 Medicaid 50th percentile. One MHP performed above the HPL, and none performed below the LPL.

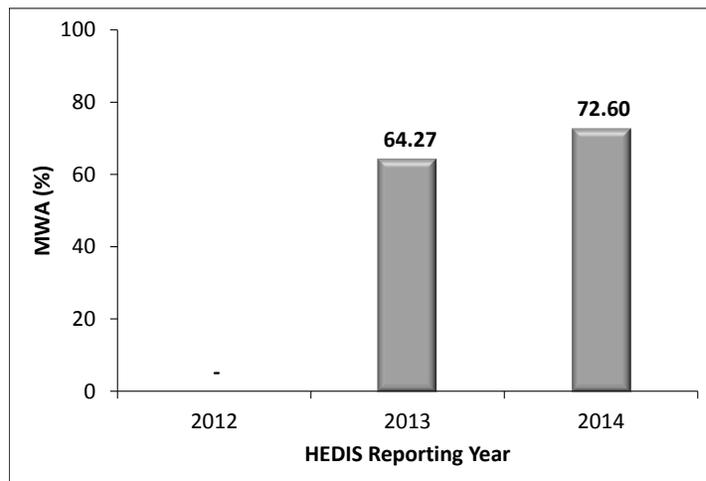
Figure 8-30—Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications Health Plan Ranking



Diabetes Monitoring for People With Diabetes and Schizophrenia

Diabetes Monitoring for People With Diabetes and Schizophrenia reports the percentage of members between 18 years and 64 years of age identified with schizophrenia and diabetes, who had both an LDL-C test and an HbA1c test during the measurement year.

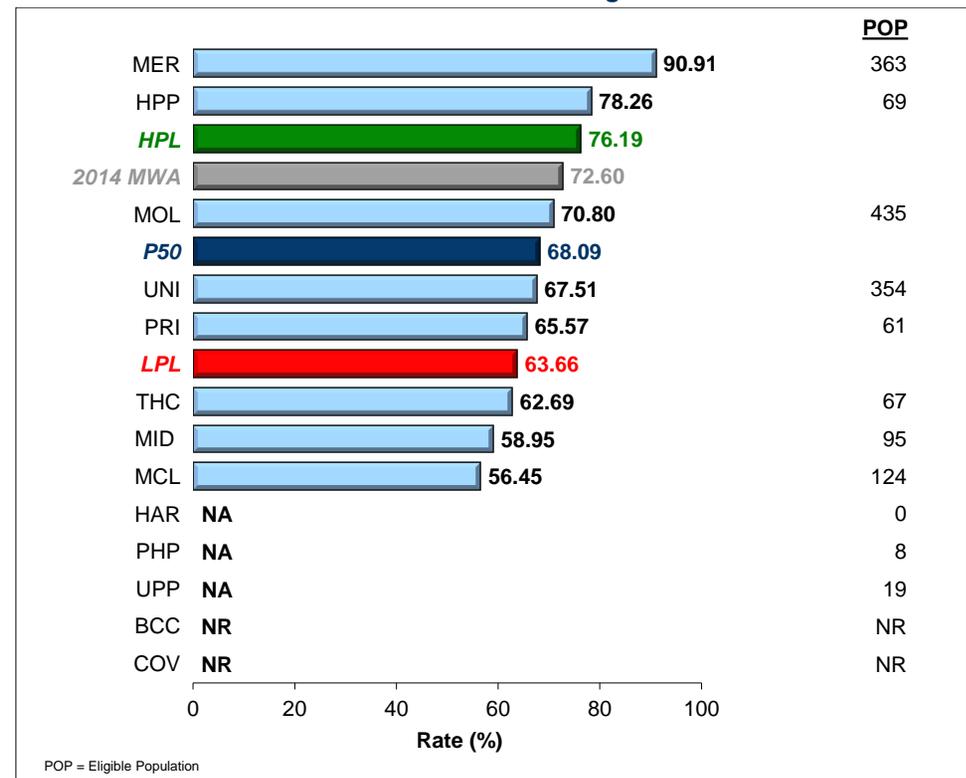
Figure 8-31—Diabetes Monitoring for People With Diabetes and Schizophrenia Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

This was a new measure for HEDIS 2013; therefore, the HEDIS 2012 weighted average was not available. The HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 8.33 percentage points and exceeded the national HEDIS 2013 Medicaid 50th percentile. Two MHPs performed above the HPL, and three performed below the LPL.

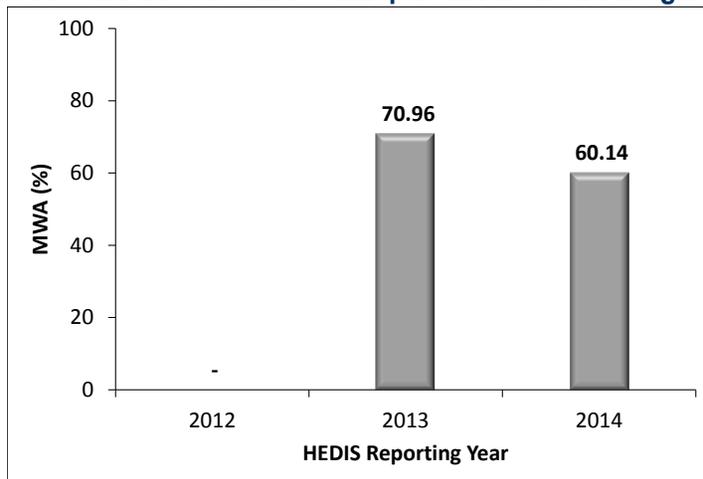
Figure 8-32—Diabetes Monitoring for People With Diabetes and Schizophrenia Health Plan Ranking



Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia

Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia shows the percentage of members between 18 years and 64 years of age with schizophrenia and cardiovascular disease, who had an LDL-C test during the measurement year.

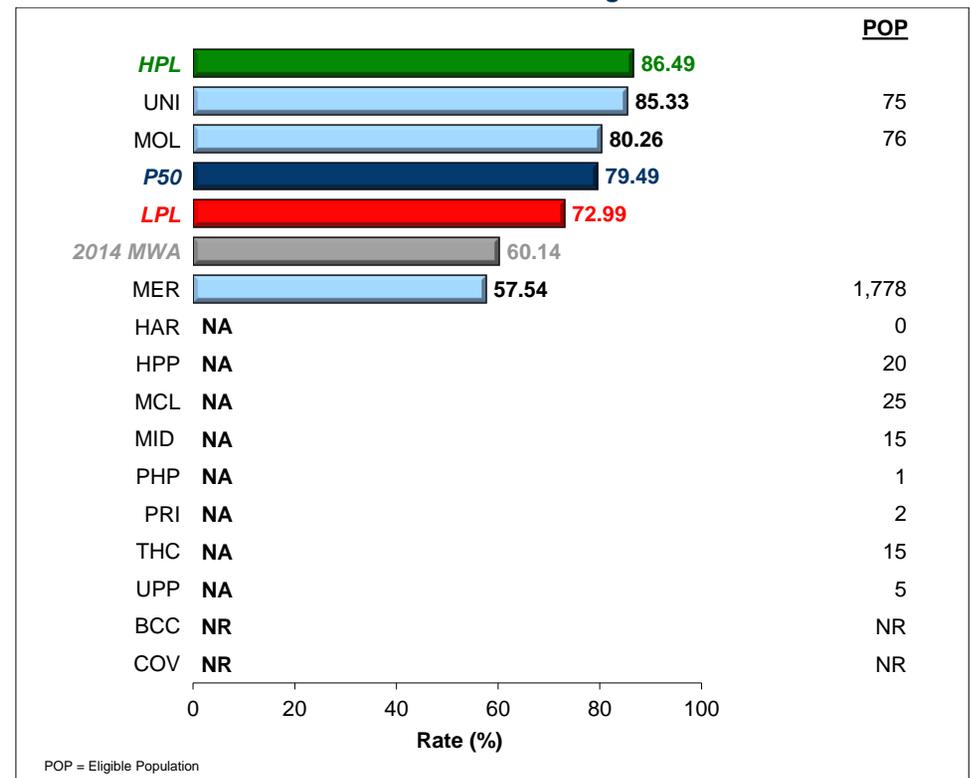
Figure 8-33—Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia Medicaid Weighted Averages



Decline from HEDIS 2013 to HEDIS 2014 was statistically significant.

This was a new measure for HEDIS 2013; therefore, the HEDIS 2012 weighted average was not available. The HEDIS 2014 weighted average decreased significantly from HEDIS 2013 by 10.82 percentage points and fell below the LPL. Of the three MHPs reporting a valid rate, none performed above the HPL, and one performed below the LPL.

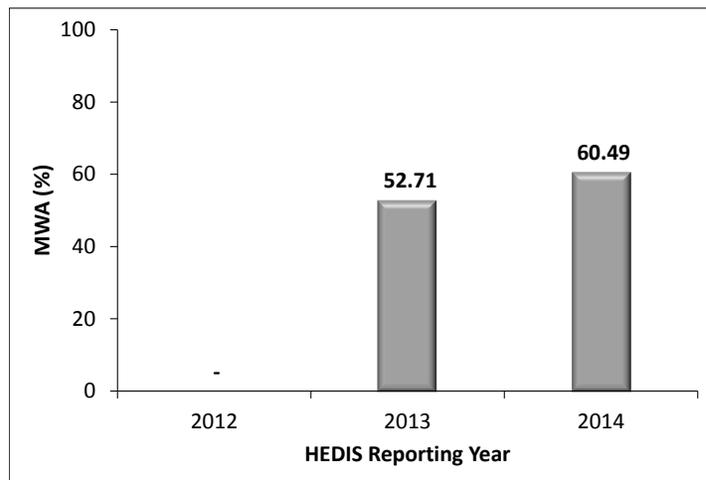
Figure 34—Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia Health Plan Ranking



Adherence to Antipsychotic Medications for Individuals With Schizophrenia

Adherence to Antipsychotic Medications for Individuals With Schizophrenia shows the percentage of members between 19 years and 64 years of age with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.

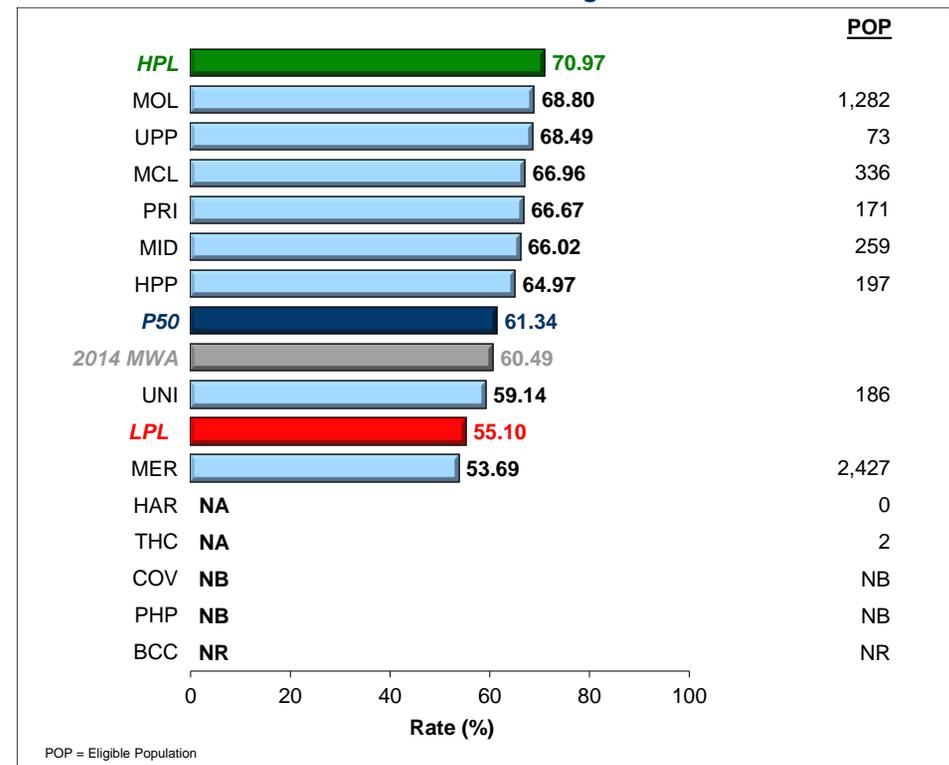
Figure 8-35—Adherence to Antipsychotic Medications for Individuals With Schizophrenia Medicaid Weighted Averages



Improvement from HEDIS 2013 to HEDIS 2014 was statistically significant.

This was a new measure for HEDIS 2013; therefore, the HEDIS 2012 weighted average was not available. Although the HEDIS 2014 weighted average increased significantly from HEDIS 2013 by 7.78 percentage points, it ranked below the national HEDIS 2013 Medicaid 50th percentile. No MHPs performed above the HPL, and one performed below the LPL.

Figure 8-36—Adherence to Antipsychotic Medications for Individuals With Schizophrenia Health Plan Ranking



Introduction

The Health Plan Diversity dimension encompasses the following MDCH measures:

- ◆ *Race/Ethnicity Diversity of Membership*
- ◆ *Language Diversity of Membership*

Summary of Findings

When comparing the HEDIS 2013 and HEDIS 2014 statewide rates for the *Race/Ethnicity Diversity of Membership* measure, the 2014 rates exhibited a range of minor increases and decreases across every category reported by Michigan MHP members.

For the *Language Diversity of Membership* measure at the statewide level, the percentages of members using *English* or *Non-English* as the spoken language for health care remain almost the same as the previous year. The percentage of the Michigan members reporting *English* and *Non-English* as the language preferred for written materials and other language needs increased slightly in HEDIS 2014. Regarding other language needs, there was a slight increase in the percentage of members reporting *Non-English* and *Unknown* in HEDIS 2014. When comparing the statewide rates with the national HEDIS 2013 Medicaid 50th percentiles, the percentages of Michigan MHP members in the *Unknown* category for the *Written Language* and *Other Language Needs* indicators are lower, indicating Michigan MHPs had been more successful in collecting this type of information than half of the Medicaid plans across the country.

Race/Ethnicity Diversity of Membership

Measure Definition

Race/Ethnicity Diversity of Membership is an unduplicated count and percentage of members enrolled at any time during the measurement year, by race and ethnicity.

Results

Tables 9-1a and 9-1b show that the statewide rates for different racial/ethnic groups were fairly stable when compared to 2013.

Table 9-1a—Race/Ethnicity Diversity of Membership						
Plan Name	Eligible Population	White	Black or African American	American-Indian and Alaska Native	Asian	Native Hawaiian and Other Pacific Islanders
Blue Cross Complete of Michigan	59,073	0.00%	0.00%	0.00%	0.00%	0.00%
CoventryCares of Michigan, Inc.	53,653	14.64%	76.62%	0.09%	0.77%	0.00%
HAP Midwest Health Plan, Inc.	107,054	43.49%	36.09%	0.06%	2.32%	0.22%
Harbor Health Plan	4,689	13.41%	35.36%	0.04%	0.00%	0.00%
HealthPlus Partners	84,123	58.86%	30.41%	0.17%	0.41%	0.01%
McLaren Health Plan	173,549	68.59%	17.92%	0.21%	1.05%	0.07%
Meridian Health Plan of Michigan	377,453	64.87%	21.47%	0.15%	1.03%	0.07%
Molina Healthcare of Michigan	262,310	45.86%	35.17%	0.14%	0.81%	0.00%
Physicians Health Plan—FamilyCare	23,838	51.34%	23.98%	0.18%	4.92%	0.04%
Priority Health Choice, Inc.	96,605	57.80%	16.09%	0.13%	0.75%	0.01%
Total Health Care, Inc.	77,066	28.94%	61.86%	0.08%	1.36%	0.10%
UnitedHealthcare Community Plan	228,685	49.94%	36.00%	0.13%	0.00%	0.00%
Upper Peninsula Health Plan	39,406	88.82%	1.57%	1.82%	0.45%	0.06%
2014 MWA	—	52.18%	29.18%	0.18%	0.89%	0.05%
2013 MWA	—	52.64%	30.30%	0.17%	0.69%	0.04%
2012 MWA	—	54.68%	31.14%	0.17%	0.59%	0.04%
2013 P50	—	40.23%	21.26%	0.17%	1.01%	0.00%

Table 9-1b—Race/Ethnicity Diversity of Membership (continued)

Plan Name	Eligible Population	Some Other Race	Two or More Races	Unknown	Declined	Hispanic*
Blue Cross Complete of Michigan	59,073	0.00%	0.00%	100.00%	0.00%	0.00%
CoventryCares of Michigan, Inc.	53,653	0.00%	0.00%	7.88%	0.00%	2.06%
HAP Midwest Health Plan, Inc.	107,054	0.09%	0.00%	17.73%	0.00%	4.73%
Harbor Health Plan	4,689	2.32%	0.00%	48.86%	0.00%	2.32%
HealthPlus Partners	84,123	<0.01%	0.00%	10.14%	0.00%	4.69%
McLaren Health Plan	173,549	<0.01%	0.00%	12.13%	0.03%	5.22%
Meridian Health Plan of Michigan	377,453	0.00%	0.00%	5.92%	6.49%	5.92%
Molina Healthcare of Michigan	262,310	0.00%	<0.01%	18.02%	0.00%	7.32%
Physicians Health Plan—FamilyCare	23,838	9.49%	0.00%	10.05%	0.00%	9.49%
Priority Health Choice, Inc.	96,605	0.00%	0.00%	25.22%	0.00%	10.24%
Total Health Care, Inc.	77,066	2.39%	0.00%	5.27%	0.00%	2.39%
UnitedHealthcare Community Plan	228,685	1.17%	0.00%	12.76%	0.00%	5.45%
Upper Peninsula Health Plan	39,406	0.00%	0.00%	7.27%	0.00%	1.07%
2014 MWA	—	0.44%	<0.01%	15.54%	1.55%	5.52%
2013 MWA	—	0.59%	<0.01%	14.17%	1.41%	5.45%
2012 MWA	—	1.33%	0.00%	10.94%	1.10%	5.44%
2013 P50	—	0.05%	0.00%	16.01%	0.00%	—

* Starting from HEDIS 2011, the rates associated with members of Hispanic origin were not based on the total number of members in the health plan. Therefore, the rates presented here were calculated by HSAG using the total number of members reported from the Hispanic or Latino column divided by the total number of members in the health plan reported in the MHP IDSS files. Please note that the HEDIS 2013 Medicaid 50th percentile associated with the Hispanic group was not listed in this table since it was not comparable with the plans' calculated rates.

Language Diversity of Membership

Measure Definition

Language Diversity of Membership is an unduplicated count and percentage of members enrolled at any time during the measurement year by spoken language preferred for health care and the preferred language for written materials.

Results

Table 9-2 shows that the percentages of members using *English* or *Non-English* as their preferred spoken language for health care remained almost the same as the previous year’s percentages.

Table 9-2—Language Diversity of Membership—Spoken Language Preferred for Health Care

Plan	Eligible Population	English	Non-English	Unknown	Declined
Blue Cross Complete of Michigan	59,073	99.01%	0.39%	0.60%	0.00%
CoventryCares of Michigan, Inc.	53,653	99.20%	0.00%	0.80%	0.00%
HAP Midwest Health Plan, Inc.	107,054	99.76%	0.09%	0.14%	0.00%
Harbor Health Plan	4,689	100.00%	0.00%	0.00%	0.00%
HealthPlus Partners	84,123	99.88%	0.11%	<0.01%	0.00%
McLaren Health Plan	173,549	99.25%	0.73%	0.02%	<0.01%
Meridian Health Plan of Michigan	377,453	97.73%	2.27%	0.00%	0.00%
Molina Healthcare of Michigan	262,310	98.69%	1.10%	0.20%	0.00%
Physicians Health Plan—FamilyCare	23,838	97.84%	0.63%	1.53%	0.00%
Priority Health Choice, Inc.	96,605	0.00%	0.00%	100.00%	0.00%
Total Health Care, Inc.	77,066	99.51%	0.49%	0.00%	0.00%
UnitedHealthcare Community Plan	228,685	82.65%	4.81%	12.55%	0.00%
Upper Peninsula Health Plan	39,406	99.96%	0.03%	0.01%	0.00%
2014 MWA	—	90.43%	1.55%	8.01%	<0.01%
2013 MWA	—	90.91%	1.34%	7.75%	<0.01%
2012 MWA	—	90.99%	1.17%	7.83%	<0.01%
2013 P50	—	77.07%	2.46%	5.19%	0.00%

Table 9-3 shows that the percentage of Michigan members reporting *English* and *Non-English* as the language preferred for written materials increased slightly in HEDIS 2014. There was a corresponding decrease in the percentage of members in the *Unknown* category. When comparing the statewide rates with the national HEDIS 2013 Medicaid 50th percentiles, the percentages of Michigan MHP members in the *Unknown* category was lower, indicating Michigan MHPs have been more successful in collecting this type of information than half of the Medicaid plans across the country.

Table 9-3—Language Diversity of Membership—Language Preferred for Written Materials

Plan	Eligible Population	English	Non-English	Unknown	Declined
Blue Cross Complete of Michigan	59,073	99.01%	0.39%	0.60%	0.00%
CoventryCares of Michigan, Inc.	53,653	99.20%	0.00%	0.80%	0.00%
HAP Midwest Health Plan Inc.	107,054	0.00%	0.00%	100.00%	0.00%
Harbor Health Plan	4,689	0.00%	0.00%	100.00%	0.00%
HealthPlus Partners	84,123	0.00%	0.00%	100.00%	0.00%
McLaren Health Plan	173,549	0.00%	0.00%	100.00%	0.00%
Meridian Health Plan of Michigan	377,453	97.73%	2.27%	0.00%	0.00%
Molina Healthcare of Michigan	262,310	98.69%	1.10%	0.20%	0.00%
Physicians Health Plan—FamilyCare	23,838	97.84%	0.63%	1.53%	0.00%
Priority Health Choice, Inc.	96,605	0.00%	0.00%	100.00%	0.00%
Total Health Care, Inc.	77,066	99.51%	0.49%	0.00%	0.00%
UnitedHealthcare Community Plan	228,685	0.00%	0.00%	100.00%	0.00%
Upper Peninsula Health Plan	39,406	99.96%	0.03%	0.01%	0.00%
2014 MWA	—	55.36%	0.77%	43.87%	0.00%
2013 MWA	—	53.59%	0.47%	45.94%	0.00%
2012 MWA	—	60.47%	0.44%	39.10%	0.00%
2013 P50	—	44.10%	1.24%	46.59%	0.00%

Table 9-4 shows that the percentage of Michigan members reporting *Non-English* and *Unknown* as the other language needs increased slightly in HEDIS 2014. When comparing the statewide rates with the national HEDIS 2013 Medicaid 50th percentiles, the percentages of Michigan MHP members in the *Unknown* category was lower, indicating Michigan MHPs have been more successful in collecting this type of information than half of the Medicaid plans across the country.

Table 9-4—Language Diversity of Membership—Other Language Needs

Plan	Eligible Population	English	Non-English	Unknown	Declined
Blue Cross Complete of Michigan	59,073	0.00%	0.00%	100.00%	0.00%
CoventryCares of Michigan, Inc.	53,653	0.00%	0.00%	100.00%	0.00%
HAP Midwest Health Plan, Inc.	107,054	0.00%	0.00%	100.00%	0.00%
Harbor Health Plan	4,689	0.00%	0.00%	100.00%	0.00%
HealthPlus Partners	84,123	0.00%	0.00%	100.00%	0.00%
McLaren Health Plan	173,549	0.00%	0.00%	100.00%	0.00%
Meridian Health Plan of Michigan	377,453	97.73%	2.27%	0.00%	0.00%
Molina Healthcare of Michigan	262,310	98.69%	1.10%	0.20%	0.00%
Physicians Health Plan—FamilyCare	23,838	97.84%	0.63%	1.53%	0.00%
Priority Health Choice, Inc.	96,605	0.00%	0.00%	100.00%	0.00%
Total Health Care, Inc.	77,066	99.51%	0.49%	0.00%	0.00%
UnitedHealthcare Community Plan	228,685	0.00%	0.00%	100.00%	0.00%
Upper Peninsula Health Plan	39,406	0.00%	0.00%	100.00%	0.00%
2014 MWA	—	45.84%	0.75%	53.40%	0.00%
2013 MWA	—	47.77%	0.47%	51.76%	0.00%
2012 MWA	—	53.98%	0.44%	45.58%	0.00%
2013 P50	—	0.00%	0.00%	100.00%	0.00%

Introduction

The Utilization dimension encompasses the following MDCH measures:

- ◆ *Ambulatory Care: Total—Outpatient Visits*
- ◆ *Ambulatory Care: Total—Emergency Department Visits*
- ◆ *Inpatient Utilization—General Hospital/Acute Care: Total—Total Inpatient*
- ◆ *Inpatient Utilization—General Hospital/Acute Care: Total—Medicine*
- ◆ *Inpatient Utilization—General Hospital/Acute Care: Total—Surgery*
- ◆ *Inpatient Utilization—General Hospital/Acute Care: Total—Maternity*

For all measures in this dimension, HEDIS methodology requires that the rates be derived using only the administrative method. While the national HEDIS 2013 Medicaid 50th percentiles are provided for reference, it is important to assess utilization based on the characteristics of each health plan's population.

Summary of Findings

For both *Outpatient* and *Emergency Department Visits*,¹⁰⁻¹ the Michigan Medicaid unweighted averages for HEDIS 2014 demonstrated decreases in the number of visits from HEDIS 2013. The *Outpatient* and *Emergency Department Visits* statewide averages performed below the national HEDIS 2013 Medicaid 50th percentiles. For the *Inpatient Utilization—General Hospital/Acute Care* measure, the discharges per 1,000 member months increased for three inpatient service types (*Total Inpatient*, *Medicine*, and *Surgery*). The average length of stay increased for *Total Inpatient* and *Surgery* but decreased slightly for *Medicine* and *Maternity* services.

¹⁰⁻¹ For this measure, a lower rate indicates better performance (i.e., low rates of emergency department visits indicate better utilization of services).

Ambulatory Care

Measure Definition

Ambulatory Care: Total summarizes utilization of ambulatory care in *Outpatient Visits* and *Emergency Department Visits*.

Results

Table 10-1—Ambulatory Care: Total Medicaid Outpatient and Emergency Department Visits Per 1,000 MM for the Total Age Group			
Plan	Member Months	Outpatient Visits	Emergency Department Visits*
Blue Cross Complete of Michigan	426,396	256.20	63.82
CoventryCares of Michigan, Inc.	474,456	308.37	87.58
HAP Midwest Health Plan, Inc.	938,890	391.56	64.86
Harbor Health Plan	30,735	166.78	60.06
HealthPlus Partners	787,435	339.07	64.88
McLaren Health Plan	1,477,536	312.85	79.75
Meridian Health Plan of Michigan	3,367,960	368.55	78.89
Molina Healthcare of Michigan	2,446,708	394.93	77.49
Physicians Health Plan—FamilyCare	207,809	335.61	75.56
Priority Health Choice, Inc.	829,537	340.92	79.95
Total Health Care, Inc.	667,004	289.31	73.94
UnitedHealthcare Community Plan	2,770,871	381.96	76.22
Upper Peninsula Health Plan	354,649	342.08	71.39
2014 MA	—	325.25	73.41
2013 MA	—	344.16	74.85
2012 MA	—	323.50	72.59
2013 P50	—	362.60	65.70
MM = Member Months			
* For this measure, a lower rate indicates better performance (i.e., low rates of emergency department visits indicate better utilization of services). Though the statewide rate is higher than the national HEDIS 2013 percentile value, it denotes a worse performance.			

For both *Outpatient* and *Emergency Department Visits*, the HEDIS 2014 unweighted averages decreased from HEDIS 2013. Both statewide averages also were below the national HEDIS 2013 Medicaid 50th percentiles.

Inpatient Utilization—General Hospital/Acute Care

Measure Definition

Inpatient Utilization—General Hospital/Acute Care: Total summarizes utilization of acute inpatient care and services in the *Inpatient, Medicine, Surgery, and Maternity* categories.

Results

Table 10-2—Inpatient Utilization: General Hospital/Acute Care: Total Medicaid Discharges Per 1,000 MM for the Total Age Group					
Plan	Member Months	Total Inpatient	Medicine	Surgery	Maternity*
Blue Cross Complete of Michigan	426,396	10.07	4.66	1.95	5.59
CoventryCares of Michigan, Inc.	474,456	8.90	4.86	1.68	3.55
HAP Midwest Health Plan, Inc.	938,890	9.03	4.68	1.33	4.83
Harbor Health Plan	30,735	7.81	4.59	1.30	3.99
HealthPlus Partners	787,435	6.95	2.88	1.50	4.17
McLaren Health Plan	1,477,536	9.29	4.43	1.49	5.48
Meridian Health Plan of Michigan	3,367,972	7.40	3.15	0.92	5.71
Molina Healthcare of Michigan	2,446,708	7.91	3.77	1.70	4.01
Physicians Health Plan—FamilyCare	207,809	9.33	5.06	1.29	5.05
Priority Health Choice, Inc.	829,537	7.25	2.93	1.10	5.69
Total Health Care, Inc.	667,004	10.18	4.99	1.77	5.16
UnitedHealthcare Community Plan	2,770,871	7.92	3.60	1.64	4.40
Upper Peninsula Health Plan	354,649	6.90	2.84	1.18	4.81
2014 MA	—	8.38	4.03	1.45	4.80
2013 MA	—	8.14	3.96	1.24	4.86
2012 MA	—	7.89	3.72	1.23	4.87
2013 P50	—	7.84	3.34	1.38	4.59

MM = Member Months
 *The maternity category is calculated using member months for members 10 to 64 years of age.

Overall, the HEDIS 2014 unweighted averages for three of the four types of services showed a small increase in the number of discharges from HEDIS 2012 and 2013. All four statewide averages were above the national HEDIS 2013 Medicaid 50th percentiles.

Table 10-3—Inpatient Utilization: General Hospital/Acute Care: Total Medicaid Average Length of Stay for the Total Age Group				
Plan	Total Inpatient	Medicine	Surgery	Maternity
Blue Cross Complete of Michigan	3.67	3.41	5.88	2.79
CoventryCares of Michigan, Inc.	4.19	3.73	7.68	2.63
HAP Midwest Health Plan, Inc.	3.92	3.98	6.51	2.68
Harbor Health Plan	4.32	3.87	8.95	2.27
HealthPlus Partners	4.32	4.08	7.58	2.67
McLaren Health Plan	3.86	4.17	5.80	2.60
Meridian Health Plan of Michigan	3.62	4.16	6.04	2.44
Molina Healthcare of Michigan	4.33	4.08	7.38	2.57
Physicians Health Plan—FamilyCare	3.71	3.71	6.19	2.64
Priority Health Choice, Inc.	3.37	3.77	4.71	2.54
Total Health Care, Inc.	3.72	3.44	6.84	2.53
UnitedHealthcare Community Plan	3.91	3.73	6.66	2.46
Upper Peninsula Health Plan	3.57	4.23	4.46	2.56
2014 MA	3.89	3.87	6.51	2.57
2013 MA	3.72	3.89	5.71	2.60
2012 MA	3.75	3.92	5.75	2.58
2013 P50	3.70	3.58	6.43	2.63

Overall, the HEDIS 2014 unweighted averages showed a decrease in the number of days from HEDIS 2013 for two of the four types of services. The HEDIS 2014 unweighted average length of stay for *Surgery* increased by nearly a day. Three of the HEDIS 2014 statewide averages were above the national HEDIS 2013 Medicaid 50th percentiles.

Key Information Systems Findings

NCQA's IS standards are the guidelines used by certified HEDIS compliance auditors to assess a health plan's ability to report HEDIS data accurately and reliably. Compliance with the guidelines also helps an auditor to understand a health plan's HEDIS reporting capabilities. For HEDIS 2014, health plans were assessed on seven IS standards. To assess an MHP's adherence to the IS standards, HSAG reviewed several documents for the Michigan MHPs. These included the MHPs' final audit reports, IS compliance tools, and the interactive data submission system (IDSS) files approved by an NCQA-licensed audit organization (LO).

Each of the Michigan MHPs contracted with an LO to perform the NCQA HEDIS Compliance Audit. Health plans can select the LO they want to perform the HEDIS audit. Overall, the Michigan MHPs have consistently maintained the same LOs across reporting years.

All but one MHP contracted with external software vendors to produce the HEDIS measures. These vendors developed measures which passed the NCQA's measure certification process. Most MHPs purchase software from vendors with certified measures and manage it internally to generate the HEDIS measures. Others provide all data to the software vendors to generate the HEDIS measures for them. Either way, using NCQA certified measures reduces a health plan's burden to report HEDIS measures and also helps to ensure the validity of the rates.

Overall, HSAG found that all MHPs but two were fully compliant with all IS standards as they related to the key Michigan Medicaid measures for HEDIS 2014. Noncompliance issues found in a few standards for the two MHPs were not applicable to Medicaid submissions, or the impact was minimal-to-none. Since the MHPs have been collecting and reporting HEDIS measures for over 10 years, this finding was expected. MHPs should have resolved any systems issues in the first several years of reporting.

IS 1.0—Medical Service Data—Sound Coding Methods and Data Capture, Transfer, and Entry

This standard assesses whether:

- ◆ Industry standard codes are used and all characters are captured.
- ◆ Principal codes are identified and secondary codes are captured.
- ◆ Nonstandard coding schemes are fully documented and mapped back to industry standard codes.
- ◆ Standard submission forms are used and capture all fields relevant to measure reporting; all proprietary forms capture equivalent data; and electronic transmission procedures conform to industry standards.
- ◆ Data entry processes are timely and accurate and include sufficient edit checks to ensure the accurate entry of submitted data in transaction files for measure reporting.
- ◆ The organization continually assesses data completeness and takes steps to improve performance.

- ◆ The organization regularly monitors vendor performance against expected performance standards.

All of the MHPs were fully compliant with *IS 1.0, Medical Service Data—Sound Coding Methods and Data Capture, Transfer, and Entry*. The MHPs captured standard codes to the appropriate level of specificity and required data to be submitted on standard forms. Sufficient edits checks and monitoring were in place to ensure complete and accurate claims and encounter data for HEDIS reporting.

IS 2.0—Enrollment Data—Data Capture, Transfer, and Entry

This standard assesses whether:

- ◆ The organization has procedures for submitting measure-relevant information for data entry, and whether electronic transmissions of membership data have necessary procedures to ensure accuracy.
- ◆ Data entry processes are timely and accurate and include sufficient edit checks to ensure accurate entry of submitted data in transaction files.
- ◆ The organization continually assesses data completeness and takes steps to improve performance.
- ◆ The organization regularly monitors vendor performance against expected performance standards.

HSAG found that all MHPs but one were fully compliant with *IS 2.0, Enrollment Data—Data Capture, Transfer, and Entry*. One MHP did not achieve full compliance with this standard and had significant impact on HEDIS reporting because it did not collect the *Controlling High Blood Pressure* measure using hybrid methodology. However, since this issue was related to the MHP's Medicare submission, the noncompliance bore no impact on the MHP's Medicaid reporting. Overall, for all MHPs, Medicaid enrollment data were received from the State, and all MHPs processed files accurately and timely. Reconciliation of enrollment data against files provided by the State was conducted.

IS 3.0—Practitioner Data—Data Capture, Transfer, and Entry

This standard assesses whether:

- ◆ Provider specialties are fully documented and mapped to HEDIS provider specialties necessary for measure reporting.
- ◆ The organization has effective procedures for submitting measure-relevant information for data entry, and whether electronic transmissions of practitioner data are checked to ensure accuracy.
- ◆ Data entry processes are timely and accurate and include edit checks to ensure accurate entry of submitted data in transaction files.
- ◆ The organization continually assesses data completeness and takes steps to improve performance.
- ◆ The organization regularly monitors vendor performance against expected performance standards.

HSAG found that 12 of 13 MHPs were fully compliant with *IS 3.0, Practitioner Data—Data Capture, Transfer, and Entry*. One MHP had issues with the board certification measure (which was not a Medicaid HEDIS measure), and MDCH does not require the MHPs to report board certification. All of the MHPs accurately and completely captured provider data and were able to identify the rendering provider type for those measures where this was required.

IS 4.0—Medical Record Review Processes—Training, Sampling, Abstraction, and Oversight

This standard assesses whether:

- ◆ Forms capture all fields relevant to measure reporting, and whether electronic transmission procedures conform to industry standards and have necessary checking procedures to ensure data accuracy (logs, counts, receipts, hand-off and sign-off).
- ◆ Retrieval and abstraction of data from medical records are reliably and accurately performed.
- ◆ Data entry processes are timely and accurate and include sufficient edit checks to ensure accurate entry of submitted data in the files for measure reporting.
- ◆ The organization continually assesses data completeness and takes steps to improve performance.
- ◆ The organization regularly monitors vendor performance against expected performance standards.

All MHPs were fully compliant with *IS 4.0, Medical Record Review Processes—Training, Sampling, Abstraction, and Oversight*. All of the MHPs used medical record data to report hybrid measures. Whether through a vendor or by internal staff, all medical record data collection processes were sufficient.

IS 5.0—Supplemental Data—Capture, Transfer, and Entry

This standard assesses whether:

- ◆ Nonstandard coding schemes are fully documented and mapped to industry standard codes.
- ◆ The organization has effective procedures for submitting measure-relevant information for data entry, and whether electronic transmissions of data have checking procedures to ensure accuracy.
- ◆ Data entry processes are timely and accurate and include edit checks to ensure accurate entry of submitted data in transaction files.
- ◆ The organization continually assesses data completeness and takes steps to improve performance.
- ◆ The organization regularly monitors vendor performance against expected performance standards.

All of the MHPs were fully compliant with *IS 5.0, Supplemental Data—Capture, Transfer, and Entry*. All supplemental data sources used by the MHPs for HEDIS reporting were validated and approved by the auditors. There were no issues with the use of these data, and it was recommended that the MHPs continue to explore ways to increase the use of supplemental data.

IS 6.0—Member Call Center Data—Capture, Transfer, and Entry

This standard assesses whether:

- ◆ Member call center data are reliably and accurately captured.

IS 6.0, Member Call Center Data—Capture, Transfer, and Entry was not applicable to the measures required to be reported by the MHPs. The call center measures were not part of the required MDCH Medicaid HEDIS set of performance measures.

IS 7.0—Data Integration—Accurate HEDIS Reporting, Control Procedures That Support HEDIS Reporting Integrity

This standard assesses whether:

- ◆ Nonstandard coding schemes are fully documented and mapped to industry standard codes.
- ◆ Data transfers to repository from transaction files are accurate.
- ◆ File consolidations, extracts, and derivations are accurate.
- ◆ Repository structure and formatting are suitable for measures and enable required programming efforts.
- ◆ Report production is managed effectively and operators perform appropriately.
- ◆ Measure reporting software is managed properly with regard to development, methodology, documentation, revision control, and testing.
- ◆ Physical control procedures ensure measure data integrity such as physical security, data access authorization, disaster recovery facilities, and fire protection.

HSAG found that all MHPs but one were fully compliant with *IS 7.0, Data Integration—Accurate HEDIS Reporting, Control Procedures That Support HEDIS Reporting Integrity*. All but one MHP contracted with a software vendor with NCQA-certified measures to calculate the HEDIS rates. All data consolidation and transfers were tracked and monitored to ensure no data were lost. The MHPs had sufficient data security and control procedures in place. One MHP was partially compliant with this standard due to the absence of a fully tested disaster recovery plan. Nonetheless, the partial compliance did not pose any impact on HEDIS reporting.

Appendix A presents tables showing results for all the measures, by MHP. Where applicable, the results provided for each measure include the eligible population and the rate for each MHP; the 2012, 2013, and 2014 Michigan Medicaid weighted averages or averages; and the national HEDIS 2013 Medicaid 50th percentile. The following is a list of the tables and the measures presented for each health plan.

- ◆ Table A-1—*Childhood Immunization Status—Combination 2 to Combination 10*
- ◆ Table A-2—*Immunizations for Adolescents—Combination 1*
- ◆ Table A-3—*Well-Child Visits in the First 15 Months of Life; Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life; and Adolescent Well-Care Visits*
- ◆ Table A-4—*Lead Screening in Children*
- ◆ Table A-5—*Appropriate Treatment for Children With Upper Respiratory Infection*
- ◆ Table A-6—*Appropriate Testing for Children With Pharyngitis*
- ◆ Table A-7—*Follow-Up Care for Children Prescribed Attention Deficit/Hyperactivity Disorder (ADHD) Medication*
- ◆ Table A-8—*Breast and Cervical Cancer Screening in Women*
- ◆ Table A-9—*Chlamydia Screening in Women*
- ◆ Table A-10—*Children and Adolescents' Access to Primary Care Practitioners*
- ◆ Table A-11—*Adults' Access to Preventive/Ambulatory Health Services*
- ◆ Table A-12—*Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile*
- ◆ Table A-13—*Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition*
- ◆ Table A-14—*Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity*
- ◆ Table A-15—*Adult BMI Assessment*
- ◆ Table A-16—*Prenatal and Postpartum Care*
- ◆ Table A-17—*Weeks of Pregnancy at Time of Enrollment*
- ◆ Table A-18—*Frequency of Ongoing Prenatal Care*
- ◆ Table A-19—*Comprehensive Diabetes Care*
- ◆ Table A-20—*Comprehensive Diabetes Care (continued)*
- ◆ Table A-21—*Use of Appropriate Medications for People With Asthma*
- ◆ Table A-22—*Controlling High Blood Pressure*
- ◆ Table A-23—*Medical Assistance With Smoking and Tobacco Use Cessation—Advising Smokers and Tobacco Users to Quit, Discussing Cessation Medication, and Discussing Cessation Strategies*
- ◆ Table A-24—*Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications*

- ◆ Table A-25—*Diabetes Monitoring for People With Diabetes and Schizophrenia*
- ◆ Table A-26—*Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia*
- ◆ Table A-27—*Adherence to Antipsychotic Medications for Individuals With Schizophrenia*
- ◆ Table A-28—*Race/Ethnicity Diversity of Membership*
- ◆ Table A-29—*Language Diversity of Membership—Spoken Language Preferred for Health Care*
- ◆ Table A-30—*Language Diversity of Membership—Language Preferred for Written Materials*
- ◆ Table A-31—*Language Diversity of Membership—Other Language Needs*
- ◆ Table A-32—*Ambulatory Care*
- ◆ Table A-33—*Inpatient Utilization: General Hospital/Acute Care—Discharges*
- ◆ Table A-34—*Inpatient Utilization: General Hospital/Acute Care—Average Length of Stay*

Table A-1 Childhood Immunization Status										
Plan	Eligible Population	Combo 2 Rate	Combo 3 Rate	Combo 4 Rate	Combo 5 Rate	Combo 6 Rate	Combo 7 Rate	Combo 8 Rate	Combo 9 Rate	Combo 10 Rate
Blue Cross Complete of Michigan	518	77.13%	74.94%	68.37%	62.04%	49.39%	58.39%	45.74%	41.61%	39.17%
CoventryCares of Michigan, Inc.	930	73.61%	68.29%	65.05%	53.01%	27.78%	51.16%	27.31%	23.61%	23.38%
HAP Midwest Health Plan, Inc.	1,846	77.62%	74.70%	70.56%	68.61%	39.66%	64.96%	38.20%	37.71%	36.74%
Harbor Health Plan	85	58.82%	50.59%	50.59%	41.18%	21.18%	41.18%	21.18%	18.82%	18.82%
HealthPlus Partners	1,589	81.06%	75.46%	67.97%	56.51%	36.25%	53.62%	34.74%	29.20%	28.38%
McLaren Health Plan	2,904	83.70%	83.45%	72.99%	61.56%	44.04%	55.47%	41.36%	35.77%	33.33%
Meridian Health Plan of Michigan	8,888	85.42%	80.79%	72.92%	65.51%	47.69%	60.65%	44.91%	40.28%	38.66%
Molina Healthcare of Michigan	5,367	81.46%	78.81%	70.86%	60.71%	39.07%	54.53%	37.31%	30.68%	28.92%
Physicians Health Plan—FamilyCare	538	77.62%	71.78%	65.21%	59.37%	48.66%	55.96%	46.96%	42.09%	41.36%
Priority Health Choice, Inc.	1,892	86.00%	83.54%	81.57%	70.02%	66.09%	69.04%	64.86%	56.27%	55.77%
Total Health Care, Inc.	1,061	70.07%	64.27%	60.56%	51.74%	22.97%	49.65%	22.27%	18.10%	17.87%
UnitedHealthcare Community Plan	6,295	76.73%	72.34%	67.82%	57.32%	35.30%	54.74%	34.19%	29.47%	28.80%
Upper Peninsula Health Plan	866	75.18%	72.51%	63.50%	52.07%	45.01%	48.42%	40.88%	36.50%	34.79%
2014 Medicaid weighted average (MWA)	—	80.90%	77.21%	70.61%	61.42%	42.17%	57.33%	40.22%	35.18%	33.87%
2013 MWA	—	81.48%	77.16%	56.14%	57.57%	37.77%	42.85%	30.16%	30.61%	24.79%
2012 MWA	—	79.34%	75.74%	35.88%	54.84%	36.42%	28.08%	20.54%	28.91%	17.11%
2013 P50	—	76.89%	72.88%	63.02%	55.41%	41.89%	50.33%	38.66%	34.38%	31.39%

Note: Please use caution when interpreting the weighted average trends from HEDIS 2012 to HEDIS 2013 for this measure. The dosing requirements listed in the HEDIS 2013 specifications for hepatitis A, a vaccine associated with *Combination 4, 7, 8, and 10*, were changed from “two hepatitis A vaccinations” to “at least one hepatitis A vaccination.”

Table A-2 Immunizations for Adolescents		
Plan	Eligible Population	Combination 1 Rate
Blue Cross Complete of Michigan	590	88.32%
CoventryCares of Michigan, Inc.	1,203	84.98%
HAP Midwest Health Plan, Inc.	1,830	88.69%
Harbor Health Plan	9	NA
HealthPlus Partners	1,837	90.75%
McLaren Health Plan	2,761	86.13%
Meridian Health Plan of Michigan	6,562	89.73%
Molina Healthcare of Michigan	5,377	87.76%
Physicians Health Plan—FamilyCare	484	91.53%
Priority Health Choice, Inc.	1,854	95.00%
Total Health Care, Inc.	1,431	87.70%
UnitedHealthcare Community Plan	5,749	86.63%
Upper Peninsula Health Plan	735	86.62%
2014 MWA	—	88.43%
2013 MWA	—	88.85%
2012 MWA	—	75.15%
2013 P50	—	68.59%
<p>NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of <i>Not Applicable (NA.)</i>.</p>		

**Table A-3
Well-Child Visits and Adolescent Well-Care Visits**

Plan	First 15 Months of Life—Six or More Visits		3rd–6th Years of Life		Adolescent	
	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	354	64.97%	2,910	72.45%	5,097	45.99%
CoventryCares of Michigan, Inc.	705	49.75%	3,909	74.73%	8,888	57.52%
HAP Midwest Health Plan, Inc.	1,379	64.25%	7,973	72.80%	14,469	61.17%
Harbor Health Plan	11	NA	379	58.84%	100	33.00%
HealthPlus Partners	1,325	72.20%	7,740	73.80%	13,725	50.08%
McLaren Health Plan	2,252	78.10%	13,170	67.64%	20,826	52.80%
Meridian Health Plan of Michigan	6,321	78.24%	34,567	82.52%	46,357	62.33%
Molina Healthcare of Michigan	3,876	61.79%	23,727	77.08%	38,530	54.73%
Physicians Health Plan—FamilyCare	373	63.54%	2,106	64.36%	3,227	51.09%
Priority Health Choice, Inc.	1,382	74.39%	8,273	76.69%	12,354	65.56%
Total Health Care, Inc.	870	49.28%	5,240	72.24%	10,983	52.21%
UnitedHealthcare Community Plan	4,717	84.18%	27,307	80.80%	41,827	61.46%
Upper Peninsula Health Plan	810	76.89%	3,538	70.07%	5,258	51.82%
2014 MWA	—	73.09%	—	77.05%	—	57.80%
2013 MWA	—	77.83%	—	78.03%	—	61.46%
2012 MWA	—	75.28%	—	78.62%	—	61.66%
2013 P50	—	65.16%	—	72.26%	—	48.18%

NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*

Table A-4 Lead Screening in Children		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	518	77.61%
CoventryCares of Michigan, Inc.	930	82.41%
HAP Midwest Health Plan, Inc.	1,846	74.70%
Harbor Health Plan	85	61.18%
HealthPlus Partners	1,597	83.91%
McLaren Health Plan	2,905	83.21%
Meridian Health Plan of Michigan	8,888	83.33%
Molina Healthcare of Michigan	5,367	76.32%
Physicians Health Plan—FamilyCare	538	81.04%
Priority Health Choice, Inc.	1,892	84.28%
Total Health Care, Inc.	1,061	69.14%
UnitedHealthcare Community Plan	6,295	79.56%
Upper Peninsula Health Plan	867	85.47%
2014 MWA	—	80.43%
2013 MWA	—	82.40%
2012 MWA	—	78.14%
2013 P50	—	72.26%

Table A-5 Appropriate Treatment for Children With Upper Respiratory Infection		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	979	95.51%
CoventryCares of Michigan, Inc.	1,403	88.45%
HAP Midwest Health Plan, Inc.	3,912	88.29%
Harbor Health Plan	134	93.28%
HealthPlus Partners	3,377	82.50%
McLaren Health Plan	6,093	80.67%
Meridian Health Plan of Michigan	15,604	86.55%
Molina Healthcare of Michigan	10,229	87.22%
Physicians Health Plan—FamilyCare	1,025	84.20%
Priority Health Choice, Inc.	3,028	94.39%
Total Health Care, Inc.	2,148	85.71%
UnitedHealthcare Community Plan	12,815	86.63%
Upper Peninsula Health Plan	1,862	87.49%
2014 MWA	—	86.53%
2013 MWA	—	85.53%
2012 MWA	—	83.94%
2013 P50	—	85.86%

Table A-6 Appropriate Testing for Children With Pharyngitis		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	340	74.41%
CoventryCares of Michigan, Inc.	648	50.62%
HAP Midwest Health Plan, Inc.	1,956	50.20%
Harbor Health Plan	0	NA
HealthPlus Partners	2,013	71.04%
McLaren Health Plan	3,300	59.15%
Meridian Health Plan of Michigan	8,040	65.56%
Molina Healthcare of Michigan	5,343	55.53%
Physicians Health Plan—FamilyCare	531	60.26%
Priority Health Choice, Inc.	1,430	75.52%
Total Health Care, Inc.	1,053	52.90%
UnitedHealthcare Community Plan	6,548	49.65%
Upper Peninsula Health Plan	867	68.05%
2014 MWA	—	59.19%
2013 MWA	—	61.28%
2012 MWA	—	61.23%
2013 P50	—	70.30%
NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of <i>Not Applicable (NA)</i> .		

Table A-7 Follow-Up Care for Children Prescribed Attention Deficit/Hyperactivity Disorder (ADHD) Medication				
Plan	Initiation Phase		Continuation Phase	
	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	NR	NR	NR	NR
CoventryCares of Michigan, Inc.	305	25.25%	43	27.91%
HAP Midwest Health Plan, Inc.	575	33.74%	141	36.88%
Harbor Health Plan	0	NA	0	NA
HealthPlus Partners	820	39.63%	198	47.98%
McLaren Health Plan	1,540	42.14%	748	44.79%
Meridian Health Plan of Michigan	2,843	43.97%	1,009	51.04%
Molina Healthcare of Michigan	1,976	38.16%	570	47.19%
Physicians Health Plan—FamilyCare	NB	NB	NB	NB
Priority Health Choice, Inc.	139	33.09%	37	29.73%
Total Health Care, Inc.	71	40.85%	13	NA
UnitedHealthcare Community Plan	1,426	39.69%	71	47.89%
Upper Peninsula Health Plan	304	44.08%	129	47.29%
2014 MWA	—	40.24%	—	47.04%
2013 MWA	—	39.09%	—	46.93%
2012 MWA	—	39.74%	—	49.48%
2013 P50	—	39.76%	—	46.76%

NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.
 NR denotes an audit designation of *Not Report*, indicating that either the health plan calculated the measure but the rate was materially biased, or the health plan chose not to report the measure.
 NB denotes an audit designation of *No Benefit*, indicating that the MHP did not offer the benefit required by the measure.

**Table A-8
Breast and Cervical Cancer Screening in Women**

Plan	Breast Cancer Screening ¹		Cervical Cancer Screening ²	
	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	339	59.88%	3,144	68.86%
CoventryCares of Michigan, Inc.	1,124	66.81%	5,998	70.92%
HAP Midwest Health Plan, Inc.	1,681	58.95%	9,728	66.42%
Harbor Health Plan	34	32.35%	168	50.61%
HealthPlus Partners	1,394	66.43%	8,283	77.01%
McLaren Health Plan	2,215	53.36%	14,549	65.21%
Meridian Health Plan of Michigan	3,849	68.69%	28,698	74.71%
Molina Healthcare of Michigan	6,571	61.07%	27,851	70.00%
Physicians Health Plan—FamilyCare	371	51.21%	2,083	68.81%
Priority Health Choice, Inc.	1,008	67.56%	6,819	77.32%
Total Health Care, Inc.	1,087	54.65%	7,316	64.65%
UnitedHealthcare Community Plan	5,727	64.85%	31,297	73.16%
Upper Peninsula Health Plan	641	61.00%	3,144	71.53%
2014 MWA	—	62.56%	—	71.34%
2013 MWA	—	57.41%	—	72.60%
2012 MWA	—	57.03%	—	75.50%
2013 P50	—	51.53%	—	66.38%

¹ There were several changes in the HEDIS 2014 specifications for this measure, including updated age ranges from 40–69 years to 50–74 years and an extended numerator time frame from 24 months to 27 months. These changes have the potential to increase the HEDIS 2014 rates. Consequently, the observed significant increase in the statewide rate may be due to both measure specification changes and the MHPs’ efforts to improve breast cancer screening.

² It should be noted that due to significant measure specification changes, rate change for this measure may not accurately reflect any performance improvement or decline. NCQA indicates that the rate is not publicly reported for HEDIS 2014 and cannot be compared to prior years’ rates.. HSAG suggests that the HEDIS 2014 rates be treated as baseline rates for future trending. Performance ranking based on HEDIS 2013 percentiles should be used for information only.

Table A-9 Chlamydia Screening in Women						
Plan	Ages 16 to 20 Years		Ages 21 to 24 Years		Total	
	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	572	58.04%	328	69.21%	900	62.11%
CoventryCares of Michigan, Inc.	1,301	68.26%	564	77.30%	1,865	70.99%
HAP Midwest Health Plan, Inc.	1,535	59.48%	865	69.71%	2,400	63.17%
Harbor Health Plan	10	NA	12	NA	22	NA
HealthPlus Partners	1,842	54.72%	965	64.56%	2,807	58.10%
McLaren Health Plan	2,750	48.47%	1,455	59.66%	4,205	52.34%
Meridian Health Plan of Michigan	6,267	60.19%	3,965	70.32%	10,232	64.11%
Molina Healthcare of Michigan	5,069	62.42%	2,485	71.31%	7,554	65.34%
Physicians Health Plan—FamilyCare	384	53.65%	188	70.74%	572	59.27%
Priority Health Choice, Inc.	1,581	65.40%	744	73.25%	2,325	67.91%
Total Health Care, Inc.	1,502	69.64%	787	74.33%	2,289	71.25%
UnitedHealthcare Community Plan	5,159	62.73%	2,777	70.54%	7,936	65.46%
Upper Peninsula Health Plan	640	42.97%	292	57.19%	932	47.42%
2014 MWA	—	60.15%	—	69.44%	—	63.40%
2013 MWA	—	62.50%	—	71.67%	—	65.84%
2012 MWA	—	61.65%	—	69.50%	—	64.53%
2013 P50	—	53.82%	—	64.29%	—	57.25%

NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.

Table A-10
Children and Adolescents' Access to Primary Care Practitioners

Plan	Ages 12 to 24 Months		Ages 25 Months to 6 Years		Ages 7 to 11 Years		Ages 12 to 19 Years	
	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	775	94.71%	3,566	84.16%	2,153	93.13%	2,757	92.20%
CoventryCares of Michigan, Inc.	871	94.60%	4,765	82.98%	4,370	88.05%	7,011	85.79%
HAP Midwest Health Plan, Inc.	2,093	96.08%	9,718	86.07%	7,198	90.73%	9,852	88.27%
Harbor Health Plan	71	70.42%	472	63.56%	58	55.17%	40	67.50%
HealthPlus Partners	1,745	96.91%	9,246	89.89%	7,609	93.26%	10,326	91.70%
McLaren Health Plan	3,441	96.11%	15,618	85.40%	10,949	87.78%	14,035	86.97%
Meridian Health Plan of Michigan	9,100	97.74%	42,495	91.85%	27,698	93.84%	31,655	93.65%
Molina Healthcare of Michigan	5,513	95.92%	28,795	88.23%	23,140	91.59%	29,435	89.37%
Physicians Health Plan—FamilyCare	518	97.49%	2,586	85.23%	1,961	88.02%	2,512	88.34%
Priority Health Choice, Inc.	2,106	96.96%	10,057	88.74%	7,355	92.22%	8,611	90.69%
Total Health Care, Inc.	1,337	93.34%	6,278	81.98%	4,821	86.77%	7,349	85.40%
UnitedHealthcare Community Plan	6,368	97.74%	33,098	91.15%	24,344	92.79%	30,868	92.17%
Upper Peninsula Health Plan	981	97.86%	4,332	90.21%	3,189	90.12%	3,936	92.73%
2014 MWA	—	96.73%	—	88.91%	—	91.68%	—	90.48%
2013 MWA	—	97.30%	—	90.14%	—	92.15%	—	90.89%
2012 MWA	—	97.06%	—	90.28%	—	91.79%	—	90.60%
2013 P50	—	96.89%	—	89.39%	—	90.88%	—	89.58%

Table A-11 Adults' Access to Preventive/Ambulatory Health Services								
Plan	Ages 20 to 44 Years		Ages 45 to 64 Years		Ages 65+ Years		Total	
	Eligible Population	Rate						
Blue Cross Complete of Michigan	3,743	79.05%	1,675	84.90%	278	76.98%	5,696	80.67%
CoventryCares of Michigan, Inc.	6,360	80.06%	3,736	87.53%	0	NA	10,096	82.82%
HAP Midwest Health Plan, Inc.	10,745	81.66%	6,465	88.91%	754	82.36%	17,964	84.30%
Harbor Health Plan	199	48.24%	226	68.58%	20	NA	445	58.43%
HealthPlus Partners	9,685	86.21%	4,292	91.75%	352	92.61%	14,329	88.02%
McLaren Health Plan	16,821	81.02%	8,779	89.40%	776	86.47%	26,376	83.97%
Meridian Health Plan of Michigan	38,447	87.08%	15,936	92.41%	208	92.31%	54,591	88.65%
Molina Healthcare of Michigan	28,684	85.21%	18,379	91.68%	3,553	92.51%	50,616	88.07%
Physicians Health Plan—FamilyCare	2,373	81.92%	1,117	87.65%	119	92.44%	3,609	84.04%
Priority Health Choice, Inc.	7,880	85.27%	3,310	91.39%	667	95.50%	11,857	87.55%
Total Health Care, Inc.	8,259	77.68%	4,573	86.53%	3	NA	12,835	80.84%
UnitedHealthcare Community Plan	32,722	85.15%	20,158	92.69%	3,230	90.93%	56,110	88.19%
Upper Peninsula Health Plan	3,876	87.25%	2,108	90.89%	266	84.96%	6,250	88.38%
2014 MWA	—	84.30%	—	90.93%	—	90.29%	—	86.75%
2013 MWA	—	84.53%	—	90.77%	—	92.12%	—	86.68%
2012 MWA	—	83.57%	—	89.71%	—	92.54%	—	85.46%
2013 P50	—	82.33%	—	87.51%	—	87.74%	—	84.36%

NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.

Table A-12 Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile						
Plan	3–11 Years		12–17 Years		Total	
	Eligible Population	BMI Rate	Eligible Population	BMI Rate	Eligible Population	BMI Rate
Blue Cross Complete of Michigan	5,030	77.61%	2,758	81.82%	7,788	79.08%
CoventryCares of Michigan, Inc.	6,536	70.72%	4,417	72.78%	10,953	71.53%
HAP Midwest Health Plan, Inc.	14,572	63.60%	8,210	71.09%	22,782	65.94%
Harbor Health Plan	276	66.91%	25	NA	301	67.89%
HealthPlus Partners	14,273	84.30%	8,248	88.46%	22,521	85.93%
McLaren Health Plan	21,975	71.89%	11,703	66.15%	33,678	70.07%
Meridian Health Plan of Michigan	60,856	57.89%	29,673	60.96%	90,529	58.93%
Molina Healthcare of Michigan	42,123	73.56%	22,016	81.41%	64,139	76.27%
Physicians Health Plan—FamilyCare	3,612	74.22%	1,946	80.52%	5,558	76.59%
Priority Health Choice, Inc.	15,531	83.82%	8,008	86.99%	23,539	84.81%
Total Health Care, Inc.	8,707	69.55%	5,553	69.28%	14,260	69.44%
UnitedHealthcare Community Plan	48,150	66.79%	24,741	70.47%	72,891	68.13%
Upper Peninsula Health Plan	6,140	72.32%	3,366	75.00%	9,506	73.24%
2014 MWA	—	68.76%	—	72.49%	—	70.07%
2013 MWA	—	68.90%	—	70.99%	—	69.62%
2012 MWA	—	61.81%	—	61.36%	—	61.63%
2013 P50	—	52.88%	—	53.66%	—	52.31%

NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.

Table A-13 Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition						
Plan	3–11 Years		12–17 Years		Total	
	Eligible Population	BMI Rate	Eligible Population	BMI Rate	Eligible Population	BMI Rate
Blue Cross Complete of Michigan	5,030	67.16%	2,758	67.83%	7,788	67.40%
CoventryCares of Michigan, Inc.	6,536	61.22%	4,417	64.50%	10,953	62.50%
HAP Midwest Health Plan, Inc.	14,572	64.31%	8,210	65.63%	22,782	64.72%
Harbor Health Plan	276	63.27%	25	NA	301	63.55%
HealthPlus Partners	14,273	68.18%	8,248	60.90%	22,521	65.33%
McLaren Health Plan	21,975	57.30%	11,703	47.69%	33,678	54.26%
Meridian Health Plan of Michigan	60,856	65.26%	29,673	56.85%	90,529	62.41%
Molina Healthcare of Michigan	42,123	66.78%	22,016	69.87%	64,139	67.85%
Physicians Health Plan—FamilyCare	3,612	71.48%	1,946	74.68%	5,558	72.68%
Priority Health Choice, Inc.	15,531	77.21%	8,008	78.05%	23,539	77.47%
Total Health Care, Inc.	8,707	63.53%	5,553	54.22%	14,260	59.95%
UnitedHealthcare Community Plan	48,150	68.70%	24,741	63.09%	72,891	66.67%
Upper Peninsula Health Plan	6,140	59.04%	3,366	54.29%	9,506	57.42%
2014 MWA	—	66.15%	—	62.09%	—	64.72%
2013 MWA	—	59.60%	—	59.02%	—	59.39%
2012 MWA	—	58.62%	—	57.06%	—	58.05%
2013 P50	—	60.19%	—	55.29%	—	59.11%

NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.

Table A-14 Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity						
Plan	3–11 Years		12–17 Years		Total	
	Eligible Population	BMI Rate	Eligible Population	BMI Rate	Eligible Population	BMI Rate
Blue Cross Complete of Michigan	5,030	50.37%	2,758	65.03%	7,788	55.47%
CoventryCares of Michigan, Inc.	6,536	47.91%	4,417	48.52%	10,953	48.15%
HAP Midwest Health Plan, Inc.	14,572	59.01%	8,210	66.41%	22,782	61.31%
Harbor Health Plan	276	47.27%	25	NA	301	48.49%
HealthPlus Partners	14,273	58.68%	8,248	64.74%	22,521	61.06%
McLaren Health Plan	21,975	36.30%	11,703	43.85%	33,678	38.69%
Meridian Health Plan of Michigan	60,856	46.32%	29,673	53.42%	90,529	48.72%
Molina Healthcare of Michigan	42,123	51.86%	22,016	63.46%	64,139	55.88%
Physicians Health Plan—FamilyCare	3,612	59.38%	1,946	68.18%	5,558	62.68%
Priority Health Choice, Inc.	15,531	67.65%	8,008	80.49%	23,539	71.65%
Total Health Care, Inc.	8,707	49.62%	5,553	51.81%	14,260	50.46%
UnitedHealthcare Community Plan	48,150	49.24%	24,741	55.70%	72,891	51.58%
Upper Peninsula Health Plan	6,140	50.55%	3,366	55.71%	9,506	52.31%
2014 MWA	—	50.27%	—	58.17%	—	52.99%
2013 MWA	—	47.04%	—	52.69%	—	48.98%
2012 MWA	—	46.03%	—	49.74%	—	47.30%
2013 P50	—	43.51%	—	50.00%	—	46.23%

NA indicates that the health plan followed the specifications, but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.

Table A-15 Adult BMI Assessment		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	2,267	87.10%
CoventryCares of Michigan, Inc.	7,379	84.62%
HAP Midwest Health Plan, Inc.	10,820	81.27%
Harbor Health Plan	188	81.67%
HealthPlus Partners	9,835	93.71%
McLaren Health Plan	15,278	84.67%
Meridian Health Plan of Michigan	29,773	87.50%
Molina Healthcare of Michigan	34,940	85.23%
Physicians Health Plan—FamilyCare	2,437	87.22%
Priority Health Choice, Inc.	7,119	90.82%
Total Health Care, Inc.	7,291	79.13%
UnitedHealthcare Community Plan	38,318	86.11%
Upper Peninsula Health Plan	3,902	87.10%
2014 MWA	—	86.05%
2013 MWA	—	80.39%
2012 MWA	—	72.46%
2013 P50	—	72.02%

Table A-16 Prenatal and Postpartum Care				
Plan	Timeliness of Prenatal Care		Postpartum Care	
	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	497	86.00% †	497	64.86% †
CoventryCares of Michigan, Inc.	1,063	84.35% †	1,063	66.12% †
HAP Midwest Health Plan, Inc.	2,290	78.83%	2,290	58.88%
Harbor Health Plan	39	68.42%	39	36.84%
HealthPlus Partners	1,844	92.70% †	1,844	71.78% †
McLaren Health Plan	4,100	95.13%	4,100	77.37%
Meridian Health Plan of Michigan	10,282	94.13% †	9,838	76.35%
Molina Healthcare of Michigan	5,090	83.63%	5,090	72.79%
Physicians Health Plan—FamilyCare	465	91.91%	465	67.39%
Priority Health Choice, Inc.	2,199	90.23%	2,199	71.55%
Total Health Care, Inc.	1,760	72.62%	1,760	52.20%
UnitedHealthcare Community Plan	6,429	87.87%	6,429	66.31%
Upper Peninsula Health Plan	996	91.18% †	996	76.80% †
2014 MWA	—	88.92%	—	70.84%
2013 MWA	—	89.61%	—	70.56%
2012 MWA	—	90.33%	—	70.35%
2013 P50	—	85.88%	—	63.99%

† Plan chose to rotate the measure. Measure rotation allows the health plan to use the audited and reportable rate from the previous year as specified by NCQA in the *HEDIS 2014 Technical Specifications for Health Plans, Volume 2*.

Table A-17 Weeks of Pregnancy at Time of Enrollment						
Plan	Eligible Population	≤ 0 Weeks Rate	1 to 12 Weeks Rate	13 to 27 Weeks Rate	28 or More Weeks Rate	Unknown Rate
Blue Cross Complete of Michigan	411	21.41%	15.09%	39.90%	20.92%	2.68%
CoventryCares of Michigan, Inc. †	1,200	47.83%	4.83%	26.00%	16.58%	4.75%
HAP Midwest Health Plan, Inc.	2,615	27.84%	8.37%	40.38%	18.55%	4.86%
Harbor Health Plan	52	51.92%	19.23%	17.31%	11.54%	0.00%
HealthPlus Partners	1,960	35.61%	8.47%	35.66%	14.95%	5.31%
McLaren Health Plan	4,645	23.01%	10.18%	43.85%	17.95%	4.99%
Meridian Health Plan of Michigan	11,024	26.74%	9.88%	45.50%	17.72%	0.15%
Molina Healthcare of Michigan	5,708	34.20%	8.37%	37.18%	16.56%	3.70%
Physicians Health Plan—FamilyCare	526	35.17%	8.75%	38.40%	15.59%	2.09%
Priority Health Choice, Inc. †	411	26.03%	12.65%	44.77%	16.55%	0.00%
Total Health Care, Inc.	2,070	30.29%	8.70%	38.02%	16.86%	6.14%
UnitedHealthcare Community Plan	7,389	32.20%	8.07%	37.76%	16.92%	5.06%
Upper Peninsula Health Plan	1,061	21.68%	18.19%	42.32%	13.10%	4.71%
2014 MWA	—	29.72%	9.27%	40.51%	17.12%	3.38%
2013 MWA	—	30.12%	9.12%	40.23%	17.02%	3.50%
2012 MWA	—	27.93%	9.25%	40.82%	18.49%	3.51%
The National HEDIS 2013 Medicaid 50th Percentiles were not available for this measure.						
† Plan chose to rotate the measure. Measure rotation allows the health plan to use the audited and reportable rate from the previous year as specified by NCQA in the <i>HEDIS 2014 Technical Specifications for Health Plans, Volume 2</i> .						

Table A-18 Frequency of Ongoing Prenatal Care						
Plan	Eligible Population	<21 Percent*	21–40 Percent	41–60 Percent	61–80 Percent	≥81 Percent
Blue Cross Complete of Michigan†	497	12.78%	6.88%	11.30%	25.31%	43.73%
CoventryCares of Michigan, Inc. †	1,063	20.23%	13.95%	12.79%	16.28%	36.74%
HAP Midwest Health Plan, Inc.	2,290	10.22%	7.30%	11.19%	15.57%	55.72%
Harbor Health Plan	39	18.42%	15.79%	13.16%	7.89%	44.74%
HealthPlus Partners	1,752	2.92%	2.68%	8.52%	20.92%	64.96%
McLaren Health Plan	4,100	1.22%	0.97%	3.65%	9.98%	84.18%
Meridian Health Plan of Michigan†	10,282	0.70%	1.64%	2.82%	7.75%	87.09%
Molina Healthcare of Michigan	5,090	12.61%	15.27%	13.27%	17.70%	41.15%
Physicians Health Plan—FamilyCare	465	0.81%	2.16%	8.09%	14.02%	74.93%
Priority Health Choice, Inc. †	2,097	6.57%	4.38%	8.03%	15.82%	65.21%
Total Health Care, Inc.	1,760	22.74%	17.40%	11.14%	15.31%	33.41%
UnitedHealthcare Community Plan	6,429	8.36%	7.82%	8.09%	16.17%	59.57%
Upper Peninsula Health Plan†	996	1.39%	1.39%	4.64%	13.69%	78.89%
2014 MWA	—	6.59%	6.28%	7.29%	13.49%	66.36%
2013 MWA	—	8.67%	4.43%	6.26%	11.90%	68.74%
2012 MWA	—	7.07%	6.36%	5.78%	10.13%	70.66%
2013 P50	—	8.27%	4.25%	6.83%	13.53%	64.70%

* For this measure, a lower rate indicates better performance (i.e., low rates of less than 21 percent of expected visits indicate better care).
 † Plan chose to rotate the measure. Measure rotation allows the health plan to use the audited and reportable rate from the previous year as specified by NCQA in the *HEDIS 2014 Technical Specifications for Health Plans, Volume 2*.

Table A-19 Comprehensive Diabetes Care								
Plan	HbA1C Testing		Poor HbA1C Control (>9.0%)*		HbA1C Control (<8.0%)		Eye Exam	
	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	680	87.41%	680	41.42%	680	48.36%	680	64.05%
CoventryCares of Michigan, Inc.	1,471	84.33%	1,471	38.47%	1,471	52.59%	1,471	62.82%
HAP Midwest Health Plan, Inc.	2,844	81.33%	2,844	44.59%	2,844	47.56%	2,844	62.37%
Harbor Health Plan	53	84.00%	53	46.00%	53	52.00%	53	38.00%
HealthPlus Partners	1,987	89.05%	1,987	27.90%	1,987	61.93%	1,987	71.84%
McLaren Health Plan	3,727	83.94%	3,727	41.06%	3,727	48.36%	3,727	56.75%
Meridian Health Plan of Michigan	6,506	90.31%	6,506	30.21%	6,506	60.26%	6,506	62.84%
Molina Healthcare of Michigan	8,771	81.86%	8,771	41.81%	8,771	50.22%	8,771	65.27%
Physicians Health Plan—FamilyCare	506	84.57%	506	32.46%	506	56.11%	506	60.12%
Priority Health Choice, Inc.	1,785	91.85%	1,785	23.75%	1,785	64.09%	1,785	66.67%
Total Health Care, Inc.	1,733	81.16%	1,733	56.08%	1,733	38.75%	1,733	34.19%
UnitedHealthcare Community Plan	9,778	86.03%	9,778	35.77%	9,778	55.13%	9,778	66.41%
Upper Peninsula Health Plan	792	87.04%	792	27.01%	792	63.69%	792	64.60%
2014 MWA	—	85.45%	—	37.23%	—	53.74%	—	63.01%
2013 MWA	—	85.21%	—	36.06%	—	54.57%	—	59.42%
2012 MWA	—	85.72%	—	35.79%	—	54.96%	—	56.57%
2013 P50	—	83.21%	—	43.02%	—	48.57%	—	54.43%

* For this measure, a lower rate indicates better performance (i.e., low rates of poor HbA1c control indicate better care).

**Table A-20
Comprehensive Diabetes Care (continued)**

Plan	LDL-C Screening		LDL-C Control (<100 mg/dL)		Medical Attention for Nephropathy		Blood Pressure Control (<140/80 mm Hg)		Blood Pressure Control (<140/90 mm Hg)	
	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate	Eligible Population	Rate
Blue Cross Complete of Michigan	680	76.64%	680	38.50%	680	84.85%	680	46.35%	680	65.33%
CoventryCares of Michigan, Inc.	1,471	79.40%	1,471	40.80%	1,471	82.90%	1,471	31.61%	1,471	50.13%
HAP Midwest Health Plan, Inc.	2,844	76.59%	2,844	36.89%	2,844	84.00%	2,844	40.00%	2,844	62.96%
Harbor Health Plan	53	74.00%	53	26.00%	53	88.00%	53	20.00%	53	36.00%
HealthPlus Partners	1,987	80.18%	1,987	43.81%	1,987	84.62%	1,987	43.02%	1,987	67.01%
McLaren Health Plan	3,727	72.99%	3,727	35.40%	3,727	86.86%	3,727	37.77%	3,727	59.31%
Meridian Health Plan of Michigan	6,506	77.71%	6,506	40.06%	6,506	78.03%	6,506	51.53%	6,506	77.06%
Molina Healthcare of Michigan	8,771	76.99%	8,771	42.26%	8,771	80.97%	8,771	39.38%	8,771	58.63%
Physicians Health Plan—FamilyCare	506	76.55%	506	40.48%	506	80.16%	506	49.10%	506	70.54%
Priority Health Choice, Inc.	1,785	78.22%	1,785	46.42%	1,785	83.12%	1,785	46.35%	1,785	68.38%
Total Health Care, Inc.	1,733	76.60%	1,733	27.51%	1,733	82.07%	1,733	29.79%	1,733	51.06%
UnitedHealthcare Community Plan	9,778	83.85%	9,778	44.23%	9,778	82.18%	9,778	38.85%	9,778	62.31%
Upper Peninsula Health Plan	792	79.20%	792	41.42%	792	81.20%	792	55.47%	792	73.72%
2014 MWA	—	78.67%	—	40.83%	—	82.00%	—	41.41%	—	63.56%
2013 MWA	—	79.91%	—	39.16%	—	82.41%	—	43.73%	—	66.22%
2012 MWA	—	80.08%	—	42.28%	—	82.98%	—	43.70%	—	66.12%
2013 P50	—	76.28%	—	34.69%	—	79.28%	—	38.70%	—	60.93%

Table A-21
Use of Appropriate Medications for People With Asthma

Plan	Ages 5 to 11 Years		Ages 12 to 18 Years		Ages 19 to 50 Years		Ages 51 to 64 Years		Total	
	Eligible Population	Rate								
Blue Cross Complete of Michigan	173	92.49%	127	88.19%	86	83.72%	38	68.42%	424	87.26%
CoventryCares of Michigan, Inc.	274	84.31%	257	83.66%	303	68.32%	84	64.29%	918	77.02%
HAP Midwest Health Plan, Inc.	291	82.82%	255	76.08%	343	67.06%	133	49.62%	1,022	71.53%
Harbor Health Plan	3	NA	0	NA	0	NA	0	NA	3	NA
HealthPlus Partners	305	93.77%	289	88.24%	193	78.24%	43	69.77%	830	86.99%
McLaren Health Plan	570	94.04%	512	86.72%	451	75.83%	127	62.99%	1,660	84.46%
Meridian Health Plan of Michigan	1,088	91.27%	804	86.32%	849	75.03%	159	70.44%	2,900	84.00%
Molina Healthcare of Michigan	945	86.46%	773	79.43%	993	67.47%	312	57.69%	3,023	75.45%
Physicians Health Plan—FamilyCare	152	94.08%	111	93.69%	74	77.03%	28	NA	365	89.59%
Priority Health Choice, Inc.	393	95.42%	256	94.92%	196	85.20%	41	70.73%	886	91.87%
Total Health Care, Inc.	186	75.27%	179	79.33%	244	65.57%	93	58.06%	702	70.66%
UnitedHealthcare Community Plan	929	87.51%	738	86.45%	903	77.74%	253	73.52%	2,823	82.86%
Upper Peninsula Health Plan	161	88.20%	120	83.33%	126	73.02%	26	NA	433	81.99%
2014 MWA	—	89.18%	—	84.94%	—	73.24%	—	64.40%	—	81.19%
2013 MWA	—	89.91%	—	83.56%	—	73.11%	—	64.67%	—	82.13%
2012 MWA	—	91.76%	—	84.90%	—	74.85%	—	66.35%	—	83.84%
2013 P50	—	90.31%	—	85.88%	—	74.90%	—	72.66%	—	84.64%

NA indicates the health plan followed the specifications but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable* (NA).

Table A-22 Controlling High Blood Pressure		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan†	444	64.63%
CoventryCares of Michigan, Inc. †	2,861	50.00%
HAP Midwest Health Plan, Inc.	3,892	55.72%
Harbor Health Plan	95	43.37%
HealthPlus Partners	2,907	60.10%
McLaren Health Plan†	2,432	77.62%
Meridian Health Plan of Michigan†	8,552	76.69%
Molina Healthcare of Michigan†	12,174	64.86%
Physicians Health Plan—FamilyCare	528	64.06%
Priority Health Choice, Inc.	2,169	62.93%
Total Health Care, Inc.	3,003	39.91%
UnitedHealthcare Community Plan	14,283	62.50%
Upper Peninsula Health Plan†	922	70.65%
2014 MWA	—	63.58%
2013 MWA	—	65.71%
2012 MWA	—	63.52%
2013 P50	—	56.20%
† Plan chose to rotate the measure. Measure rotation allows the health plan to use the audited and reportable rate from the previous year as specified by NCQA in the <i>HEDIS 2014 Technical Specifications for Health Plans, Volume 2</i> .		

**Table A-23
Medical Assistance With Smoking and Tobacco Use Cessation**

Plan	Eligible Population*	Advising Smokers and Tobacco Users to Quit Rate	Discussing Cessation Medications Rate	Discussing Cessation Strategies Rate
Blue Cross Complete of Michigan	18,804	78.01%	50.91%	42.51%
CoventryCares of Michigan, Inc.	28,446	82.72%	57.92%	47.95%
HAP Midwest Health Plan, Inc.	48,923	80.24%	50.30%	44.48%
Harbor Health Plan	1,385	NA	NA	NA
HealthPlus Partners	38,636	80.40%	53.69%	49.58%
McLaren Health Plan	72,290	73.51%	45.85%	42.23%
Meridian Health Plan of Michigan	170,756	80.81%	55.28%	47.80%
Molina Healthcare of Michigan	129,806	82.54%	53.54%	48.22%
Physicians Health Plan—FamilyCare	10,383	77.29%	54.61%	49.32%
Priority Health Choice, Inc.	35,655	84.49%	53.85%	43.44%
Total Health Care, Inc.	37,953	80.47%	53.91%	47.24%
UnitedHealthcare Community Plan	152,974	80.56%	57.11%	44.64%
Upper Peninsula Health Plan	17,124	77.91%	48.53%	42.58%
2014 MWA	—	80.35%	53.74%	46.12%
2013 MWA	—	79.97%	52.38%	45.07%
2012 MWA	—	79.22%	50.88%	43.01%

National percentiles were not available for this measure.

NA indicates that the health plan followed the specifications but the denominator was too small (<100) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.

*The eligible population for each health plan reported here was the sum of the CAHPS sample frame sizes from 2013 and 2014 and did not represent the exact eligible population (i.e., smokers) for this measure. However, assuming the proportion of smokers for all plans were the same, the sample frame size was used to derive an approximate weight when calculating the MWA.

Table A-24 Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	NR	NR
CoventryCares of Michigan, Inc.	NB	NB
HAP Midwest Health Plan, Inc.	326	77.30%
Harbor Health Plan	2	NA
HealthPlus Partners	400	84.00%
McLaren Health Plan	658	82.37%
Meridian Health Plan of Michigan	509	85.85%
Molina Healthcare of Michigan	1,555	84.63%
Physicians Health Plan—FamilyCare	NB	NB
Priority Health Choice, Inc.	253	79.84%
Total Health Care, Inc.	15	NA
UnitedHealthcare Community Plan	244	83.61%
Upper Peninsula Health Plan	59	96.61%
2014 MWA	—	83.54%
2013 MWA	—	83.47%
2013 P50	—	78.32%

Note: This was a new measure for HEDIS 2013; therefore, the 2012 MWA is not available.
NA indicates the health plan followed the specifications but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.
NB denotes an audit designation of *No Benefit*, indicating that the MHP did not offer the benefit required by the measure.
NR denotes an audit designation of *Not Report*, indicating that either the health plan calculated the measure but the rate was materially biased or the health plan chose not to report the measure.

Table A-25 Diabetes Monitoring for People With Diabetes and Schizophrenia		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	NR	NR
CoventryCares of Michigan, Inc.	NR	NR
HAP Midwest Health Plan, Inc.	95	58.95%
Harbor Health Plan	0	NA
HealthPlus Partners	69	78.26%
McLaren Health Plan	124	56.45%
Meridian Health Plan of Michigan	363	90.91%
Molina Healthcare of Michigan	435	70.80%
Physicians Health Plan—FamilyCare	8	NA
Priority Health Choice, Inc.	61	65.57%
Total Health Care, Inc.	67	62.69%
UnitedHealthcare Community Plan	354	67.51%
Upper Peninsula Health Plan	19	NA
2014 MWA	—	72.60%
2013 MWA	—	64.27%
2013 P50	—	68.09%

Note: This was a new measure for HEDIS 2013; therefore, the 2012 MWA is not available.
NA indicates the health plan followed the specifications but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.
NR denotes an audit designation of *Not Report*, indicating that either the health plan calculated the measure but the rate was materially biased or the health plan chose not to report the measure.

Table A-26 Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	NR	NR
CoventryCares of Michigan, Inc.	NR	NR
HAP Midwest Health Plan, Inc.	15	NA
Harbor Health Plan	0	NA
HealthPlus Partners	20	NA
McLaren Health Plan	25	NA
Meridian Health Plan of Michigan	1,778	57.54%
Molina Healthcare of Michigan	76	80.26%
Physicians Health Plan—FamilyCare	1	NA
Priority Health Choice, Inc.	2	NA
Total Health Care, Inc.	15	NA
UnitedHealthcare Community Plan	75	85.33%
Upper Peninsula Health Plan	5	NA
2014 MWA	—	60.14%
2013 MWA	—	70.96%
2013 P50	—	79.49%

Note: This was a new measure for HEDIS 2013; therefore, the 2012 MWA is not available.
NA indicates the health plan followed the specifications but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.
NR denotes an audit designation of *Not Report*, indicating that either the health plan calculated the measure but the rate was materially biased or the health plan chose not to report the measure.

Table A-27 Adherence to Antipsychotic Medications for Individuals With Schizophrenia		
Plan	Eligible Population	Rate
Blue Cross Complete of Michigan	NR	NR
CoventryCares of Michigan, Inc.	NB	NB
HAP Midwest Health Plan, Inc.	259	66.02%
Harbor Health Plan	0	NA
HealthPlus Partners	197	64.97%
McLaren Health Plan	336	66.96%
Meridian Health Plan of Michigan	2,427	53.69%
Molina Healthcare of Michigan	1,282	68.80%
Physicians Health Plan—FamilyCare	NB	NB
Priority Health Choice, Inc.	171	66.67%
Total Health Care, Inc.	2	NA
UnitedHealthcare Community Plan	186	59.14%
Upper Peninsula Health Plan	73	68.49%
2014 MWA	—	60.49%
2013 MWA	—	52.71%
2013 P50	—	61.34%

Note: This was a new measure for HEDIS 2013; therefore, the 2012 MWA is not available.
NA indicates the health plan followed the specifications but the denominator was too small (<30) to report a valid rate, resulting in an audit designation of *Not Applicable (NA)*.
NB denotes an audit designation of *No Benefit*, indicating that the MHP did not offer the benefit required by the measure.
NR denotes an audit designation of *Not Report*, indicating that either the health plan calculated the measure but the rate was materially biased or the health plan chose not to report the measure.

**Table A-28
Race/Ethnicity Diversity of Membership**

Plan Name	Eligible Population	White	Black or African American	American-Indian and Alaska Native	Asian	Native Hawaiian and Other Pacific Islanders	Some Other Race	Two or More Races	Unknown	Declined	Hispanic*
Blue Cross Complete of Michigan	59,073	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	100.00%	0.00%	0.00%
CoventryCares of Michigan, Inc.	53,653	14.64%	76.62%	0.09%	0.77%	0.00%	0.00%	0.00%	7.88%	0.00%	2.06%
HAP Midwest Health Plan, Inc.	107,054	43.49%	36.09%	0.06%	2.32%	0.22%	0.09%	0.00%	17.73%	0.00%	4.73%
Harbor Health Plan	4,689	13.41%	35.36%	0.04%	0.00%	0.00%	2.32%	0.00%	48.86%	0.00%	2.32%
HealthPlus Partners	84,123	58.86%	30.41%	0.17%	0.41%	0.01%	<0.01%	0.00%	10.14%	0.00%	4.69%
McLaren Health Plan	173,549	68.59%	17.92%	0.21%	1.05%	0.07%	<0.01%	0.00%	12.13%	0.03%	5.22%
Meridian Health Plan of Michigan	377,453	64.87%	21.47%	0.15%	1.03%	0.07%	0.00%	0.00%	5.92%	6.49%	5.92%
Molina Healthcare of Michigan	262,310	45.86%	35.17%	0.14%	0.81%	0.00%	0.00%	<0.01%	18.02%	0.00%	7.32%
Physicians Health Plan—FamilyCare	23,838	51.34%	23.98%	0.18%	4.92%	0.04%	9.49%	0.00%	10.05%	0.00%	9.49%
Priority Health Choice, Inc.	96,605	57.80%	16.09%	0.13%	0.75%	0.01%	0.00%	0.00%	25.22%	0.00%	10.24%
Total Health Care, Inc.	77,066	28.94%	61.86%	0.08%	1.36%	0.10%	2.39%	0.00%	5.27%	0.00%	2.39%
UnitedHealthcare Community Plan	228,685	49.94%	36.00%	0.13%	0.00%	0.00%	1.17%	0.00%	12.76%	0.00%	5.45%
Upper Peninsula Health Plan	39,406	88.82%	1.57%	1.82%	0.45%	0.06%	0.00%	0.00%	7.27%	0.00%	1.07%
2014 MWA	—	52.18%	29.18%	0.18%	0.89%	0.05%	0.44%	<0.01%	15.54%	1.55%	5.52%
2013 MWA	—	52.64%	30.30%	0.17%	0.69%	0.04%	0.59%	<0.01%	14.17%	1.41%	5.45%
2012 MWA	—	54.68%	31.14%	0.17%	0.59%	0.04%	1.33%	0.00%	10.94%	1.10%	5.44%
2013 P50	—	40.23%	21.26%	0.17%	1.01%	0.00%	0.05%	0.00%	16.01%	0.00%	—

* Starting from HEDIS 2011, the rates associated with members of Hispanic origin were not based on the total number of members in the health plan. Therefore, the rates presented here were calculated by HSAG using the total number of members reported from the Hispanic or Latino column divided by the total number of members in the health plan reported in the MHP IDSS files. Please note that, due to reporting changes, HEDIS 2013 Medicaid 50th percentile associated with the Hispanic group was not available.

Table A-29 Language Diversity of Membership—Spoken Language Preferred for Health Care					
Plan	Eligible Population	English	Non-English	Unknown	Declined
Blue Cross Complete of Michigan	59,073	99.01%	0.39%	0.60%	0.00%
CoventryCares of Michigan, Inc.	53,653	99.20%	0.00%	0.80%	0.00%
HAP Midwest Health Plan, Inc.	107,054	99.76%	0.09%	0.14%	0.00%
Harbor Health Plan	4,689	100.00%	0.00%	0.00%	0.00%
HealthPlus Partners	84,123	99.88%	0.11%	<0.01%	0.00%
McLaren Health Plan	173,549	99.25%	0.73%	0.02%	<0.01%
Meridian Health Plan of Michigan	377,453	97.73%	2.27%	0.00%	0.00%
Molina Healthcare of Michigan	262,310	98.69%	1.10%	0.20%	0.00%
Physicians Health Plan—FamilyCare	23,838	97.84%	0.63%	1.53%	0.00%
Priority Health Choice, Inc.	96,605	0.00%	0.00%	100.00%	0.00%
Total Health Care, Inc.	77,066	99.51%	0.49%	0.00%	0.00%
UnitedHealthcare Community Plan	228,685	82.65%	4.81%	12.55%	0.00%
Upper Peninsula Health Plan	39,406	99.96%	0.03%	0.01%	0.00%
2014 MWA	—	90.43%	1.55%	8.01%	<0.01%
2013 MWA	—	90.91%	1.34%	7.75%	<0.01%
2012 MWA	—	90.99%	1.17%	7.83%	<0.01%
2013 P50	—	77.07%	2.46%	5.19%	0.00%

Table A-30 Language Diversity of Membership—Language Preferred for Written Materials					
Plan	Eligible Population	English	Non-English	Unknown	Declined
Blue Cross Complete of Michigan	59,073	99.01%	0.39%	0.60%	0.00%
CoventryCares of Michigan, Inc.	53,653	99.20%	0.00%	0.80%	0.00%
HAP Midwest Health Plan, Inc.	107,054	0.00%	0.00%	100.00%	0.00%
Harbor Health Plan	4,689	0.00%	0.00%	100.00%	0.00%
HealthPlus Partners	84,123	0.00%	0.00%	100.00%	0.00%
McLaren Health Plan	173,549	0.00%	0.00%	100.00%	0.00%
Meridian Health Plan of Michigan	377,453	97.73%	2.27%	0.00%	0.00%
Molina Healthcare of Michigan	262,310	98.69%	1.10%	0.20%	0.00%
Physicians Health Plan—FamilyCare	23,838	97.84%	0.63%	1.53%	0.00%
Priority Health Choice, Inc.	96,605	0.00%	0.00%	100.00%	0.00%
Total Health Care, Inc.	77,066	99.51%	0.49%	0.00%	0.00%
UnitedHealthcare Community Plan	228,685	0.00%	0.00%	100.00%	0.00%
Upper Peninsula Health Plan	39,406	99.96%	0.03%	0.01%	0.00%
2014 MWA	—	55.36%	0.77%	43.87%	0.00%
2013 MWA	—	53.59%	0.47%	45.94%	0.00%
2012 MWA	—	60.47%	0.44%	39.10%	0.00%
2013 P50	—	44.10%	1.24%	46.59%	0.00%

Table A-31 Language Diversity of Membership—Other Language Needs					
Plan	Eligible Population	English	Non-English	Unknown	Declined
Blue Cross Complete of Michigan	59,073	0.00%	0.00%	100.00%	0.00%
CoventryCares of Michigan, Inc.	53,653	0.00%	0.00%	100.00%	0.00%
HAP Midwest Health Plan, Inc.	107,054	0.00%	0.00%	100.00%	0.00%
Harbor Health Plan	4,689	0.00%	0.00%	100.00%	0.00%
HealthPlus Partners	84,123	0.00%	0.00%	100.00%	0.00%
McLaren Health Plan	173,549	0.00%	0.00%	100.00%	0.00%
Meridian Health Plan of Michigan	377,453	97.73%	2.27%	0.00%	0.00%
Molina Healthcare of Michigan	262,310	98.69%	1.10%	0.20%	0.00%
Physicians Health Plan—FamilyCare	23,838	97.84%	0.63%	1.53%	0.00%
Priority Health Choice, Inc.	96,605	0.00%	0.00%	100.00%	0.00%
Total Health Care, Inc.	77,066	99.51%	0.49%	0.00%	0.00%
UnitedHealthcare Community Plan	228,685	0.00%	0.00%	100.00%	0.00%
Upper Peninsula Health Plan	39,406	0.00%	0.00%	100.00%	0.00%
2014 MWA	—	45.84%	0.75%	53.40%	0.00%
2013 MWA	—	47.77%	0.47%	51.76%	0.00%
2012 MWA	—	53.98%	0.44%	45.58%	0.00%
2013 P50	—	0.00%	0.00%	100.00%	0.00%

Table A-32 Ambulatory Care: Total Medicaid Outpatient and Emergency Department Visits Per 1,000 MM for the Total Age Group			
Plan	Member Months	Outpatient Visits	Emergency Department Visits*
Blue Cross Complete of Michigan	426,396	256.20	63.82
CoventryCares of Michigan, Inc.	474,456	308.37	87.58
HAP Midwest Health Plan, Inc.	938,890	391.56	64.86
Harbor Health Plan	30,735	166.78	60.06
HealthPlus Partners	787,435	339.07	64.88
McLaren Health Plan	1,477,536	312.85	79.75
Meridian Health Plan of Michigan	3,367,960	368.55	78.89
Molina Healthcare of Michigan	2,446,708	394.93	77.49
Physicians Health Plan—FamilyCare	207,809	335.61	75.56
Priority Health Choice, Inc.	829,537	340.92	79.95
Total Health Care, Inc.	667,004	289.31	73.94
UnitedHealthcare Community Plan	2,770,871	381.96	76.22
Upper Peninsula Health Plan	354,649	342.08	71.39
2014 MA	—	325.25	73.41
2013 MA	—	344.16	74.85
2012 MA	—	323.50	72.59
2013 P50	—	362.60	65.70
MM = Member Months			
* For this measure, a lower rate indicates better performance (i.e., low rates of emergency department visits indicate better utilization of services).			

Table A-33 Inpatient Utilization: General Hospital/Acute Care: Total Medicaid Discharges Per 1,000 MM for the Total Age Group					
Plan	Member Months	Total Inpatient	Medicine	Surgery	Maternity*
Blue Cross Complete of Michigan	426,396	10.07	4.66	1.95	5.59
CoventryCares of Michigan, Inc.	474,456	8.90	4.86	1.68	3.55
HAP Midwest Health Plan, Inc.	938,890	9.03	4.68	1.33	4.83
Harbor Health Plan	30,735	7.81	4.59	1.30	3.99
HealthPlus Partners	787,435	6.95	2.88	1.50	4.17
McLaren Health Plan	1,477,536	9.29	4.43	1.49	5.48
Meridian Health Plan of Michigan	3,367,972	7.40	3.15	0.92	5.71
Molina Healthcare of Michigan	2,446,708	7.91	3.77	1.70	4.01
Physicians Health Plan—FamilyCare	207,809	9.33	5.06	1.29	5.05
Priority Health Choice, Inc.	829,537	7.25	2.93	1.10	5.69
Total Health Care, Inc.	667,004	10.18	4.99	1.77	5.16
UnitedHealthcare Community Plan	2,770,871	7.92	3.60	1.64	4.40
Upper Peninsula Health Plan	354,649	6.90	2.84	1.18	4.81
2014 MA	—	8.38	4.03	1.45	4.80
2013 MA	—	8.14	3.96	1.24	4.86
2012 MA	—	7.89	3.72	1.23	4.87
2013 P50	—	7.84	3.34	1.38	4.59
MM = Member Months					
*The maternity category is calculated using member months for members 10–64 years.					

Table A-34 Inpatient Utilization: General Hospital/Acute Care: Total Medicaid Average Length of Stay for the Total Age Group				
Plan	Total Inpatient	Medicine	Surgery	Maternity
Blue Cross Complete of Michigan	3.67	3.41	5.88	2.79
CoventryCares of Michigan, Inc.	4.19	3.73	7.68	2.63
HAP Midwest Health Plan, Inc.	3.92	3.98	6.51	2.68
Harbor Health Plan	4.32	3.87	8.95	2.27
HealthPlus Partners	4.32	4.08	7.58	2.67
McLaren Health Plan	3.86	4.17	5.80	2.60
Meridian Health Plan of Michigan	3.62	4.16	6.04	2.44
Molina Healthcare of Michigan	4.33	4.08	7.38	2.57
Physicians Health Plan—FamilyCare	3.71	3.71	6.19	2.64
Priority Health Choice, Inc.	3.37	3.77	4.71	2.54
Total Health Care, Inc.	3.72	3.44	6.84	2.53
UnitedHealthcare Community Plan	3.91	3.73	6.66	2.46
Upper Peninsula Health Plan	3.57	4.23	4.46	2.56
2014 MA	3.89	3.87	6.51	2.57
2013 MA	3.72	3.89	5.71	2.60
2012 MA	3.75	3.92	5.75	2.58
2013 P50	3.70	3.58	6.43	2.63

Appendix B. National HEDIS 2013 Medicaid Percentiles

Appendix B provides the national HEDIS Medicaid percentiles published by NCQA using prior-year rates. This information is helpful to evaluate the current rates of the MHPs. The rates are presented for the 10th, 25th, 50th, 75th, and 90th percentiles and are presented by dimension.

Measure	P10	P25	P50	P75	P90
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
<i>Combination 2</i>	65.97%	70.44%	76.89%	81.74%	85.40%
<i>Combination 3</i>	61.95%	66.08%	72.88%	78.30%	83.32%
<i>Combination 4</i>	36.25%	56.07%	63.02%	71.78%	77.80%
<i>Combination 5</i>	44.53%	48.91%	55.41%	61.81%	69.38%
<i>Combination 6</i>	25.93%	33.33%	41.89%	49.57%	56.93%
<i>Combination 7</i>	27.04%	42.09%	50.33%	58.06%	65.61%
<i>Combination 8</i>	19.91%	29.20%	38.66%	45.13%	52.53%
<i>Combination 9</i>	19.68%	27.25%	34.38%	41.50%	49.31%
<i>Combination 10</i>	16.06%	24.82%	31.39%	38.43%	45.70%
<i>Immunizations for Adolescents—Combination 1</i>	50.93%	58.06%	68.59%	77.08%	85.64%
<i>Well-Child Visits in the First 15 Months of Life—6 or More Visits</i>	49.70%	55.95%	65.16%	70.90%	77.44%
<i>Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life</i>	60.81%	67.40%	72.26%	78.51%	82.08%
<i>Adolescent Well-Care Visits</i>	37.27%	41.72%	48.18%	57.40%	65.45%
<i>Lead Screening in Children</i>	36.57%	58.50%	72.26%	82.24%	86.96%
<i>Appropriate Treatment for Children With Upper Respiratory Infection</i>	77.03%	81.40%	85.86%	90.29%	92.99%
<i>Appropriate Testing for Children With Pharyngitis</i>	50.84%	60.82%	70.30%	77.97%	85.09%
<i>Follow-up Care for Children Prescribed ADHD Medication</i>					
<i>Initiation Phase</i>	23.89%	31.40%	39.76%	45.65%	51.86%
<i>Continuation and Maintenance Phase</i>	25.00%	35.48%	46.76%	56.84%	63.75%
Women—Adult Care					
<i>Breast Cancer Screening</i>	41.72%	46.54%	51.53%	57.85%	62.88%
<i>Cervical Cancer Screening</i>	47.22%	58.99%	66.38%	71.91%	76.64%
<i>Chlamydia Screening in Women</i>					
<i>Ages 16 to 20 Years</i>	41.05%	46.94%	53.82%	59.35%	66.38%
<i>Ages 21 to 24 Years</i>	51.52%	58.98%	64.29%	70.68%	73.45%
<i>Total</i>	46.22%	51.18%	57.25%	63.42%	68.81%

Measure	P10	P25	P50	P75	P90
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
<i>Ages 12 to 24 Months</i>	92.37%	95.51%	96.89%	97.84%	98.49%
<i>Ages 25 Months to 6 Years</i>	82.76%	86.37%	89.39%	91.29%	93.60%
<i>Ages 7 to 11 Years</i>	83.43%	87.77%	90.88%	93.26%	95.25%
<i>Ages 12 to 19 Years</i>	81.35%	86.09%	89.58%	91.85%	93.77%
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
<i>Ages 20 to 44 Years</i>	68.53%	77.34%	82.33%	85.27%	88.32%
<i>Ages 45 to 64 Years</i>	79.52%	84.55%	87.51%	90.41%	91.17%
<i>Ages 65+ Years</i>	70.23%	80.57%	87.74%	90.85%	93.67%
<i>Total</i>	72.43%	79.93%	84.36%	86.70%	89.02%
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
<i>BMI Percentile—Ages 3 to 11 Years</i>	21.32%	36.42%	52.88%	69.86%	80.93%
<i>BMI Percentile—Ages 12 to 17 Years</i>	23.87%	39.86%	53.66%	68.75%	80.26%
<i>BMI Percentile—Total</i>	22.87%	37.96%	52.31%	69.68%	80.24%
<i>Nutrition—Ages 3 to 11 Years</i>	30.88%	48.93%	60.19%	69.35%	76.63%
<i>Nutrition—Ages 12 to 17 Years</i>	29.68%	41.41%	55.29%	64.34%	72.73%
<i>Nutrition—Total</i>	31.02%	47.45%	59.11%	67.91%	75.18%
<i>Physical Activity—Ages 3 to 11 Years</i>	18.38%	34.01%	43.51%	54.81%	65.75%
<i>Physical Activity—Ages 12 to 17 Years</i>	24.80%	38.27%	50.00%	58.91%	67.07%
<i>Physical Activity—Total</i>	20.92%	34.55%	46.23%	55.26%	64.72%
<i>Adult BMI Assessment</i>	48.73%	62.53%	72.02%	78.71%	84.39%
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
<i>Timeliness of Prenatal Care</i>	70.59%	79.85%	85.88%	89.72%	92.82%
<i>Postpartum Care</i>	50.69%	57.91%	63.99%	70.20%	73.83%
<i>Weeks of Pregnancy at Time of Enrollment</i>					
<i>≤ 0 Weeks</i>	—	—	—	—	—
<i>1 to 12 Weeks</i>	—	—	—	—	—
<i>13 to 27 Weeks</i>	—	—	—	—	—
<i>28 or More Weeks</i>	—	—	—	—	—
<i>Unknown</i>	—	—	—	—	—
<i>Frequency of Ongoing Prenatal Care</i>					
<i><21 Percent</i>	2.32%	4.24%	8.27%	13.83%	27.39%
<i>21 to 40 Percent</i>	1.64%	2.78%	4.25%	6.56%	12.27%
<i>41 to 60 Percent</i>	3.89%	4.92%	6.83%	9.51%	12.99%
<i>61 to 80 Percent</i>	7.55%	10.55%	13.53%	16.31%	20.77%
<i>≥81 Percent</i>	36.25%	50.97%	64.70%	73.97%	80.12%

Measure	P10	P25	P50	P75	P90
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
<i>HbA1c Testing</i>	75.91%	79.23%	83.21%	87.32%	90.97%
<i>HbA1c Poor Control (>9.0%)*</i>	31.14%	35.76%	43.02%	52.58%	59.48%
<i>HbA1c Control (<8.0%)</i>	34.58%	39.80%	48.57%	53.77%	58.64%
<i>Eye Exam</i>	37.14%	44.37%	54.43%	62.46%	67.64%
<i>LDL-C Screening</i>	66.79%	71.03%	76.28%	80.54%	83.52%
<i>LDL-C Control <100 mg/dL</i>	21.76%	27.90%	34.69%	40.03%	43.80%
<i>Medical Attention for Nephropathy</i>	69.76%	75.00%	79.28%	82.74%	85.85%
<i>Blood Pressure Control <140/80 mm Hg</i>	27.37%	31.25%	38.70%	44.53%	50.61%
<i>Blood Pressure Control <140/90 mm Hg</i>	45.67%	53.74%	60.93%	68.17%	74.55%
<i>Use of Appropriate Medications for People With Asthma</i>					
<i>Ages 5 to 11 Years</i>	83.77%	86.97%	90.31%	92.92%	94.92%
<i>Ages 12 to 18 Years</i>	78.88%	81.96%	85.88%	88.99%	92.16%
<i>Ages 19 to 50 Years</i>	61.67%	68.25%	74.90%	80.69%	84.32%
<i>Ages 51 to 64 Years</i>	56.00%	65.33%	72.66%	77.95%	82.61%
<i>Total</i>	77.30%	80.47%	84.64%	87.61%	89.76%
<i>Controlling High Blood Pressure</i>	44.77%	50.00%	56.20%	62.97%	69.55%
<i>Medical Assistance With Smoking and Tobacco Use Cessation</i>					
<i>Advising Smokers and Tobacco Users to Quit</i>	—	—	—	—	—
<i>Discussing Cessation Medications</i>	—	—	—	—	—
<i>Discussing Cessation Strategies</i>	—	—	—	—	—
<i>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications</i>	70.00%	74.83%	78.32%	81.99%	86.04%
<i>Diabetes Monitoring for People With Diabetes and Schizophrenia</i>	58.33%	63.66%	68.09%	71.88%	76.19%
<i>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia</i>	64.44%	72.99%	79.49%	83.78%	86.49%
<i>Adherence to Antipsychotic Medications for Individuals With Schizophrenia</i>	43.24%	55.10%	61.34%	66.67%	70.97%
Health Plan Diversity					
<i>Race/Ethnicity Diversity of Membership</i>					
<i>White</i>	10.74%	21.22%	40.23%	58.98%	75.13%
<i>Black or African-American</i>	0.91%	7.35%	21.26%	36.37%	47.85%
<i>American-Indian and Alaska Native</i>	0.00%	0.08%	0.17%	0.35%	1.33%
<i>Asian</i>	0.00%	0.45%	1.01%	2.30%	3.91%
<i>Native Hawaiian and Other Pacific Islanders</i>	0.00%	0.00%	0.00%	0.06%	0.83%
<i>Some Other Race</i>	0.00%	0.00%	0.05%	2.69%	11.06%
<i>Two or More Races</i>	0.00%	0.00%	0.00%	0.00%	0.54%

Measure	P10	P25	P50	P75	P90
<i>Unknown</i>	0.54%	7.30%	16.01%	39.34%	73.11%
<i>Declined</i>	0.00%	0.00%	0.00%	0.00%	0.10%
<i>Hispanic[^]</i>	—	—	—	—	—
Language Diversity of Membership					
<i>Spoken Language—English</i>	0.00%	27.73%	77.07%	95.05%	99.13%
<i>Spoken Language—Non-English</i>	0.00%	0.40%	2.46%	8.65%	23.02%
<i>Spoken Language—Unknown</i>	0.00%	0.16%	5.19%	70.48%	100.00%
<i>Spoken Language—Declined</i>	0.00%	0.00%	0.00%	0.00%	0.00%
<i>Written Language—English</i>	0.00%	0.00%	44.10%	88.69%	97.80%
<i>Written Language—Non-English</i>	0.00%	0.00%	1.24%	7.06%	19.45%
<i>Written Language—Unknown</i>	0.07%	0.66%	46.59%	100.00%	100.00%
<i>Written Language—Declined</i>	0.00%	0.00%	0.00%	0.00%	0.00%
<i>Other Language Needs—English</i>	0.00%	0.00%	0.00%	0.00%	92.70%
<i>Other Language Needs—Non-English</i>	0.00%	0.00%	0.00%	0.00%	4.14%
<i>Other Language Needs—Unknown</i>	0.28%	100.00%	100.00%	100.00%	100.00%
<i>Other Language Needs—Declined</i>	0.00%	0.00%	0.00%	0.00%	0.00%
Utilization					
<i>Ambulatory Care: Total (Visits per 1,000 Member Months)</i>					
<i>Outpatient—Total</i>	267.87	318.74	362.60	412.43	473.11
<i>ED—Total*</i>	44.56	53.98	65.70	75.56	86.63
<i>Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)</i>					
<i>Total Inpatient—Total</i>	5.88	6.79	7.84	9.06	11.81
<i>Medicine—Total</i>	1.66	2.57	3.34	4.30	6.46
<i>Surgery—Total</i>	0.78	0.99	1.38	1.71	2.87
<i>Maternity—Total</i>	1.43	3.50	4.59	6.46	8.53
<i>Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)</i>					
<i>Total Inpatient—Total</i>	2.98	3.35	3.70	4.08	4.49
<i>Medicine—Total</i>	2.95	3.25	3.58	3.85	4.22
<i>Surgery—Total</i>	4.37	5.23	6.43	7.14	8.19
<i>Maternity—Total</i>	2.32	2.47	2.63	2.75	2.95

— indicates the national HEDIS 2013 Medicaid percentiles are not available.

* For this measure, a lower rate indicates better performance; therefore, the 10th percentile indicates better performance than the 90th percentile.

[^] Starting from HEDIS 2011, the rates associated with members of Hispanic origin were not based on the total number of members in the health plan. The rates presented in this report for each plan were calculated by HSAG using the total number of members reported from the Hispanic or Latino column divided by the total number of members in the health plan reported in the IDSS files. Therefore, the HEDIS 2013 Medicaid benchmarks associated with the Hispanic group were not listed in this table, since they were not comparable with the plans' calculated rates.

Appendix C includes trend tables for each of the MHPs. Where applicable, each measure’s HEDIS 2012, 2013, and 2014 rates are presented along with trend analysis results. Statistically significant differences using Pearson’s Chi-square tests are presented where appropriate. The trends are shown in the following example with specific notations:

2013–2014 Health Plan Trend	Interpretations for Measures Not Under Utilization Dimension
+2.5	The 2014 rate is 2.5 percentage points higher than the 2013 rate.
- 2.5	The 2014 rate is 2.5 percentage points lower than the 2013 rate.
+2.5	The 2014 rate is 2.5 percentage points statistically significantly higher than the 2013 rate.
- 2.5	The 2014 rate is 2.5 percentage points statistically significantly lower than the 2013 rate.

Statistical tests across years were not performed on the *Weeks of Pregnancy at Time of Enrollment* and *Frequency of Ongoing Prenatal Care* measures (except the ≥ 81 Percent indicator) under Pregnancy Care and all measures under the *Utilization* and *Health Plan Diversity* dimensions. Nonetheless, differences in the reported rates for these measures were reported without statistical test results.

It should be noted that for all tables, due to measure specification changes, rate change for the *Breast Cancer Screening* and *Cervical Cancer Screening* measures from HEDIS 2013 to HEDIS 2014 may not accurately reflect any performance improvement or decline. For the *Breast Cancer Screening* measure, changes in the HEDIS 2014 specifications, such as updated age ranges from 40–69 years to 50–74 years and an extended numerator time frame from 24 months to 27 months, have the potential to increase the HEDIS 2014 rates. Rate increases observed at the plan level may be due to both measure specification changes and the MHPs’ efforts to improve breast cancer screening.

For the *Cervical Cancer Screening* measure, NCQA indicates that due to significant specification changes, the measure is not publicly reported for HEDIS 2014 and cannot be compared to prior years’ rates. HSAG suggests that the HEDIS 2014 *Cervical Cancer Screening* rates be treated as baseline rates for future trending. Performance ranking based on HEDIS 2013 percentiles should be used for information only.

The Star Rating Symbol column depicts the MHP’s rank based on its rate as compared to the NCQA’s national HEDIS 2013 Medicaid percentiles.

Star Rating Symbol	Description
★★★★★	The MHP’s rate is at or above the 90th percentile.
★★★★	The MHP’s rate is at or above the 75th percentile but below the 90th percentile.
★★★	The MHP’s rate is at or above the 50th percentile but below the 75th percentile.
★★	The MHP’s rate is at or above the 25th percentile but below the 50th percentile.
★	The MHP’s rate is below the 25th percentile.
NA	Not Applicable (i.e., denominator size too small)
NR	Not Report (i.e., biased, or MHP chose not to report)
NB	No Benefit
NC	Not Comparable (i.e., measure not comparable to national percentiles)
—	The national HEDIS 2013 Medicaid percentiles are not available.

The MHP trend tables are presented as follows:

- ◆ Table C-1—Blue Cross Complete of Michigan
- ◆ Table C-2—CoventryCares of Michigan, Inc.
- ◆ Table C-3—HAP Midwest Health Plan, Inc.
- ◆ Table C-4—Harbor Health Plan
- ◆ Table C-5—HealthPlus Partners
- ◆ Table C-6—McLaren Health Plan
- ◆ Table C-7—Meridian Health Plan of Michigan
- ◆ Table C-8—Molina Healthcare of Michigan
- ◆ Table C-9—Physicians Health Plan—FamilyCare
- ◆ Table C-10—Priority Health Choice, Inc.
- ◆ Table C-11—Total Health Care, Inc.
- ◆ Table C-12—UnitedHealthcare Community Plan
- ◆ Table C-13—Upper Peninsula Health Plan

Table C-1 Blue Cross Complete of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	85.40%	85.40%	77.13%	-8.27	★★★
Combination 3	82.73%	82.73%	74.94%	-7.79	★★★
Combination 4	23.60%	23.60%	68.37%	+44.77	★★★
Combination 5	68.86%	68.86%	62.04%	-6.82	★★★★
Combination 6	56.20%	56.20%	49.39%	-6.81	★★★
Combination 7	19.95%	19.95%	58.39%	+38.44	★★★★
Combination 8	15.82%	15.82%	45.74%	+29.92	★★★★
Combination 9	48.18%	48.18%	41.61%	-6.57	★★★★
Combination 10	13.38%	13.38%	39.17%	+25.79	★★★★
Immunizations for Adolescents—Combination 1	81.36%	88.27%	88.32%	+0.05	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	71.19%	72.43%	64.97%	-7.46	★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	80.74%	80.74%	72.45%	-8.29	★★★
Adolescent Well-Care Visits	60.10%	60.10%	45.99%	-14.11	★★
Lead Screening in Children	74.21%	74.21%	77.61%	+3.40	★★★
Appropriate Treatment for Children With Upper Respiratory Infection	94.57%	94.58%	95.51%	+0.93	★★★★★
Appropriate Testing for Children With Pharyngitis	85.08%	83.64%	74.41%	-9.23	★★★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	39.79%	43.50%	NR	—	NR
Continuation and Maintenance Phase	56.82%	51.28%	NR	—	NR
Women—Adult Care					
Breast Cancer Screening	61.91%	60.32%	59.88%	-0.44	★★★★
Cervical Cancer Screening	79.53%	74.91%	68.86%	-6.05	★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	54.53%	47.88%	58.04%	+10.16	★★★
Ages 21 to 24 Years	68.14%	62.14%	69.21%	+7.07	★★★
Total	58.49%	52.21%	62.11%	+9.90	★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	97.75%	97.32%	94.71%	-2.61	★
Ages 25 Months to 6 Years	93.15%	89.84%	84.16%	-5.68	★
Ages 7 to 11 Years	93.91%	94.03%	93.13%	-0.90	★★★
Ages 12 to 19 Years	93.69%	92.82%	92.20%	-0.62	★★★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	84.35%	84.73%	79.05%	-5.68	★★

Table C-1 Blue Cross Complete of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	86.59%	88.04%	84.90%	-3.14	★★
Ages 65+ Years	86.67%	90.24%	76.98%	-13.26	★
Total	85.01%	85.90%	80.67%	-5.23	★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	80.74%	80.74%	77.61%	-3.13	★★★★
BMI Percentile—Ages 12 to 17 Years	74.47%	74.47%	81.82%	+7.35	★★★★★
BMI Percentile—Total	78.59%	78.59%	79.08%	+0.49	★★★★
Nutrition—Ages 3 to 11 Years	70.37%	70.37%	67.16%	-3.21	★★★
Nutrition—Ages 12 to 17 Years	63.12%	63.12%	67.83%	+4.71	★★★★
Nutrition—Total	67.88%	67.88%	67.40%	-0.48	★★★
Physical Activity—Ages 3 to 11 Years	54.81%	54.81%	50.37%	-4.44	★★★
Physical Activity—Ages 12 to 17 Years	58.87%	58.87%	65.03%	+6.16	★★★★
Physical Activity—Total	56.20%	56.20%	55.47%	-0.73	★★★★
Adult BMI Assessment	81.75%	81.75%	87.10%	+5.35	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	92.70%	86.00%	86.00%	Rotated	★★★
Postpartum Care	71.53%	64.86%	64.86%	Rotated	★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	27.85%	20.98%	21.41%	+0.43	—
1-12 Weeks	10.65%	5.73%	15.09%	+9.36	—
13-27 Weeks	40.19%	38.74%	39.90%	+1.16	—
28 or More Weeks	17.76%	24.76%	20.92%	-3.84	—
Unknown	3.55%	9.79%	2.68%	-7.11	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	4.38%	12.78%	12.78%	Rotated	—
21-40 Percent†	3.41%	6.88%	6.88%	Rotated	—
41-60 Percent†	8.27%	11.30%	11.30%	Rotated	—
61-80 Percent†	28.22%	25.31%	25.31%	Rotated	—
≥81 Percent	55.72%	43.73%	43.73%	Rotated	★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	91.92%	91.92%	87.41%	-4.51	★★★★
HbA1c Poor Control (>9.0%)*	27.84%	27.84%	41.42%	+13.58	★★★
HbA1c Control (<8.0%)	58.38%	58.38%	48.36%	-10.02	★★
Eye Exam	73.65%	73.65%	64.05%	-9.60	★★★★
LDL-C Screening	81.74%	81.74%	76.64%	-5.10	★★★
LDL-C Control (<100 mg/dL)	46.41%	46.41%	38.50%	-7.91	★★★

Table C-1 Blue Cross Complete of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Medical Attention for Nephropathy	90.72%	90.72%	84.85%	-5.87	★★★★
Blood Pressure Control (<140/80 mm Hg)	52.99%	52.99%	46.35%	-6.64	★★★★
Blood Pressure Control (<140/90 mm Hg)	74.55%	74.55%	65.33%	-9.22	★★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	95.60%	94.59%	92.49%	-2.10	★★★
Ages 12 to 18 Years	95.50%	85.71%	88.19%	+2.48	★★★
Ages 19 to 50 Years	75.82%	81.05%	83.72%	+2.67	★★★★
Ages 51 to 64 Years	NA	60.00%	68.42%	+8.42	★☆☆
Total	89.85%	86.67%	87.26%	+0.59	★★★
Controlling High Blood Pressure	65.28%	64.63%	64.63%	Rotated	★★★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	81.68%	82.20%	78.01%	-4.19	—
Discussing Cessation Medications	55.94%	57.10%	50.91%	-6.19	—
Discussing Cessation Strategies	50.66%	50.86%	42.51%	-8.35	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	85.25%	NR	—	NR
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	NA	NR	—	NR
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NR	—	NR
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	65.79%	NR	—	NR
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	56.13%	38.28%	0.00%	-38.28	—
Black or African-American	32.99%	36.93%	0.00%	-36.93	—
American-Indian and Alaska Native	0.10%	0.21%	0.00%	-0.21	—
Asian	0.64%	1.01%	0.00%	-1.01	—
Native Hawaiian and Other Pacific Islanders	0.00%	0.04%	0.00%	-0.04	—
Some Other Race	0.64%	<0.01%	0.00%	0.00	—
Two or More Races	0.00%	0.12%	0.00%	-0.12	—
Unknown	9.50%	23.41%	100.00%	+76.59	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	3.72%	3.57%	0.00%	-3.57	—

Table C-1 Blue Cross Complete of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	99.42%	82.71%	99.01%	+16.30	—
Spoken Language—Non-English	0.48%	5.24%	0.39%	-4.85	—
Spoken Language—Unknown	<0.01%	12.05%	0.60%	-11.45	—
Spoken Language—Declined	0.10%	0.00%	0.00%	0.00	—
Written Language—English	0.00%	0.00%	99.01%	+99.01	—
Written Language—Non-English	0.00%	0.00%	0.39%	+0.39	—
Written Language—Unknown	100.00%	100.00%	0.60%	-99.40	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	321.42	304.21	256.20	-48.01	★
ED—Total*	64.40	63.54	63.82	+0.28	★★★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	6.47	6.76	10.07	+3.31	—
Medicine—Total	2.93	3.08	4.66	+1.58	—
Surgery—Total	0.88	0.90	1.95	+1.05	—
Maternity—Total	4.37	4.64	5.59	+0.95	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.45	3.59	3.67	+0.08	—
Medicine—Total	3.63	3.85	3.41	-0.44	—
Surgery—Total	5.07	5.90	5.88	-0.02	—
Maternity—Total	2.39	2.56	2.79	+0.23	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-2 CoventryCares of Michigan, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	77.31%	77.31%	73.61%	-3.70	☆☆
Combination 3	73.38%	73.38%	68.29%	-5.09	☆☆
Combination 4	33.56%	33.56%	65.05%	+31.49	★★★★
Combination 5	46.99%	46.99%	53.01%	+6.02	☆☆
Combination 6	22.22%	22.22%	27.78%	+5.56	★
Combination 7	21.76%	21.76%	51.16%	+29.40	★★★★
Combination 8	11.81%	11.81%	27.31%	+15.50	★
Combination 9	16.90%	16.90%	23.61%	+6.71	★
Combination 10	7.64%	7.64%	23.38%	+15.74	★
Immunizations for Adolescents—Combination 1	69.37%	81.94%	84.98%	+3.04	★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	61.72%	63.66%	49.75%	-13.91	★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	81.31%	81.31%	74.73%	-6.58	★★★★
Adolescent Well-Care Visits	59.15%	61.96%	57.52%	-4.44	★★★★
Lead Screening in Children	78.47%	84.49%	82.41%	-2.08	★★★★
Appropriate Treatment for Children With Upper Respiratory Infection	87.01%	87.34%	88.45%	+1.11	★★★★
Appropriate Testing for Children With Pharyngitis	50.69%	54.63%	50.62%	-4.01	★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	22.65%	22.67%	25.25%	+2.58	★
Continuation and Maintenance Phase	26.47%	27.27%	27.91%	+0.64	★
Women—Adult Care					
Breast Cancer Screening	58.71%	60.12%	66.81%	+6.69	★★★★★
Cervical Cancer Screening	73.48%	74.05%	70.92%	-3.13	★★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	70.21%	72.21%	68.26%	-3.95	★★★★★
Ages 21 to 24 Years	80.59%	79.56%	77.30%	-2.26	★★★★★
Total	73.40%	74.45%	70.99%	-3.46	★★★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	92.46%	96.54%	94.60%	-1.94	★
Ages 25 Months to 6 Years	82.39%	83.56%	82.98%	-0.58	★
Ages 7 to 11 Years	85.06%	86.61%	88.05%	+1.44	☆☆
Ages 12 to 19 Years	84.33%	85.91%	85.79%	-0.12	★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	76.62%	80.90%	80.06%	-0.84	☆☆

Table C-2 CoventryCares of Michigan, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	85.94%	87.12%	87.53%	+0.41	★★★★
Ages 65+ Years	91.11%	NA	NA	—	NA
Total	79.73%	83.05%	82.82%	-0.23	☆☆
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	50.19%	68.22%	70.72%	+2.50	★★★★★
BMI Percentile—Ages 12 to 17 Years	45.51%	71.10%	72.78%	+1.68	★★★★★
BMI Percentile—Total	48.37%	69.37%	71.53%	+2.16	★★★★★
Nutrition—Ages 3 to 11 Years	57.03%	50.78%	61.22%	+10.44	★★★★
Nutrition—Ages 12 to 17 Years	51.50%	54.91%	64.50%	+9.59	★★★★★
Nutrition—Total	54.88%	52.44%	62.50%	+10.06	★★★★
Physical Activity—Ages 3 to 11 Years	41.06%	41.47%	47.91%	+6.44	★★★★
Physical Activity—Ages 12 to 17 Years	42.51%	52.60%	48.52%	-4.08	☆☆
Physical Activity—Total	41.63%	45.94%	48.15%	+2.21	★★★★
Adult BMI Assessment	71.29%	81.67%	84.62%	+2.95	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	86.25%	84.35%	84.35%	Rotated	☆☆
Postpartum Care	55.71%	66.12%	66.12%	Rotated	★★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	52.76%	47.83%	47.83%	Rotated	—
1-12 Weeks	6.25%	4.83%	4.83%	Rotated	—
13-27 Weeks	25.13%	26.00%	26.00%	Rotated	—
28 or More Weeks	11.32%	16.58%	16.58%	Rotated	—
Unknown	4.56%	4.75%	4.75%	Rotated	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	11.19%	20.23%	20.23%	Rotated	—
21-40 Percent†	15.85%	13.95%	13.95%	Rotated	—
41-60 Percent†	11.89%	12.79%	12.79%	Rotated	—
61-80 Percent†	14.69%	16.28%	16.28%	Rotated	—
≥81 Percent	46.39%	36.74%	36.74%	Rotated	★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	82.35%	82.35%	84.33%	+1.98	★★★★
HbA1c Poor Control (>9.0%)*	44.28%	44.28%	38.47%	-5.81	★★★★
HbA1c Control (<8.0%)	50.33%	50.33%	52.59%	+2.26	★★★★
Eye Exam	60.78%	60.78%	62.82%	+2.04	★★★★★
LDL-C Screening	80.88%	80.88%	79.40%	-1.48	★★★★
LDL-C Control (<100 mg/dL)	38.73%	38.73%	40.80%	+2.07	★★★★★
Medical Attention for Nephropathy	86.93%	86.93%	82.90%	-4.03	★★★★★

Table C-2 CoventryCares of Michigan, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	32.68%	34.34%	31.61%	-2.73	★★
Blood Pressure Control (<140/90 mm Hg)	53.59%	53.95%	50.13%	-3.82	★
<i>Use of Appropriate Medications for People With Asthma</i>					
Ages 5 to 11 Years	78.43%	78.18%	84.31%	+6.13	★
Ages 12 to 18 Years	77.53%	82.89%	83.66%	+0.77	★★
Ages 19 to 50 Years	72.41%	74.02%	68.32%	-5.70	★★
Ages 51 to 64 Years	64.71%	53.75%	64.29%	+10.54	★
Total	75.07%	76.42%	77.02%	+0.60	★
Controlling High Blood Pressure	56.52%	50.00%	50.00%	Rotated	★★
<i>Medical Assistance With Smoking and Tobacco Use Cessation</i>					
Advising Smokers and Tobacco Users to Quit	79.41%	82.17%	82.72%	+0.55	—
Discussing Cessation Medications	47.26%	53.74%	57.92%	+4.18	—
Discussing Cessation Strategies	43.46%	48.47%	47.95%	-0.52	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	NB	NB	—	NB
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	NR	NR	—	NR
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NR	NR	—	NR
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	NB	NB	—	NB
Health Plan Diversity					
<i>Race/Ethnicity Diversity of Membership†</i>					
White	10.60%	10.13%	14.64%	+4.51	—
Black or African-American	83.36%	82.80%	76.62%	-6.18	—
American-Indian and Alaska Native	0.04%	0.04%	0.09%	+0.05	—
Asian	0.49%	0.62%	0.77%	+0.15	—
Native Hawaiian and Other Pacific Islanders	0.00%	0.00%	0.00%	0.00	—
Some Other Race	0.19%	0.00%	0.00%	0.00	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	5.31%	6.41%	7.88%	+1.47	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	0.00%	1.53%	2.06%	+0.53	—

Table C-2 CoventryCares of Michigan, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
<i>Language Diversity of Membership†</i>					
Spoken Language—English	99.59%	99.13%	99.20%	+0.07	—
Spoken Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Spoken Language—Unknown	0.41%	0.87%	0.80%	-0.07	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	99.59%	99.13%	99.20%	+0.07	—
Written Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Written Language—Unknown	0.41%	0.87%	0.80%	-0.07	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
<i>Ambulatory Care: Total (Visits per 1,000 Member Months)†</i>					
Outpatient—Total	288.42	316.99	308.37	-8.62	★
ED—Total*	83.84	86.63	87.58	+0.95	★
<i>Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†</i>					
Total Inpatient—Total	8.31	8.71	8.90	+0.19	—
Medicine—Total	4.24	4.68	4.86	+0.18	—
Surgery—Total	1.50	1.54	1.68	+0.14	—
Maternity—Total	3.82	3.71	3.55	-0.16	—
<i>Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†</i>					
Total Inpatient—Total	4.14	4.05	4.19	+0.14	—
Medicine—Total	3.89	3.68	3.73	+0.05	—
Surgery—Total	7.19	7.08	7.68	+0.60	—
Maternity—Total	2.77	2.86	2.63	-0.23	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-3 HAP Midwest Health Plan, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	77.86%	85.40%	77.62%	-7.78	★★★
Combination 3	73.48%	79.08%	74.70%	-4.38	★★★
Combination 4	40.39%	73.72%	70.56%	-3.16	★★★
Combination 5	60.58%	64.48%	68.61%	+4.13	★★★★
Combination 6	37.23%	33.82%	39.66%	+5.84	★★
Combination 7	33.82%	60.10%	64.96%	+4.86	★★★★
Combination 8	20.92%	32.12%	38.20%	+6.08	★★
Combination 9	32.12%	28.95%	37.71%	+8.76	★★★
Combination 10	17.76%	27.49%	36.74%	+9.25	★★★
Immunizations for Adolescents—Combination 1	76.40%	85.64%	88.69%	+3.05	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	82.00%	86.37%	64.25%	-22.12	★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	85.40%	82.97%	72.80%	-10.17	★★★
Adolescent Well-Care Visits	68.86%	65.94%	61.17%	-4.77	★★★★
Lead Screening in Children	73.72%	77.37%	74.70%	-2.67	★★★
Appropriate Treatment for Children With Upper Respiratory Infection	86.03%	85.87%	88.29%	+2.42	★★★
Appropriate Testing for Children With Pharyngitis	68.61%	62.25%	50.20%	-12.05	★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	39.74%	38.24%	33.74%	-4.50	★★
Continuation and Maintenance Phase	50.00%	50.43%	36.88%	-13.55	★★
Women—Adult Care					
Breast Cancer Screening	57.48%	57.55%	58.95%	+1.40	★★★★
Cervical Cancer Screening	80.78%	71.29%	66.42%	-4.87	★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	63.13%	61.52%	59.48%	-2.04	★★★★
Ages 21 to 24 Years	71.21%	71.15%	69.71%	-1.44	★★★
Total	65.98%	64.84%	63.17%	-1.67	★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	98.35%	98.56%	96.08%	-2.48	★★
Ages 25 Months to 6 Years	92.62%	94.27%	86.07%	-8.20	★
Ages 7 to 11 Years	93.62%	94.18%	90.73%	-3.45	★★
Ages 12 to 19 Years	92.12%	93.98%	88.27%	-5.71	★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	87.68%	91.02%	81.66%	-9.36	★★

Table C-3 HAP Midwest Health Plan, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	91.35%	92.93%	88.91%	-4.02	★★★
Ages 65+ Years	93.10%	NA	82.36%	—	★★
Total	88.97%	91.71%	84.30%	-7.41	★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	81.44%	67.52%	63.60%	-3.92	★★★
BMI Percentile—Ages 12 to 17 Years	80.95%	74.45%	71.09%	-3.36	★★★★
BMI Percentile—Total	81.27%	69.83%	65.94%	-3.89	★★★
Nutrition—Ages 3 to 11 Years	81.06%	64.96%	64.31%	-0.65	★★★
Nutrition—Ages 12 to 17 Years	84.35%	66.42%	65.63%	-0.79	★★★★
Nutrition—Total	82.24%	65.45%	64.72%	-0.73	★★★
Physical Activity—Ages 3 to 11 Years	80.30%	61.31%	59.01%	-2.30	★★★★
Physical Activity—Ages 12 to 17 Years	80.95%	59.12%	66.41%	+7.29	★★★★
Physical Activity—Total	80.54%	60.58%	61.31%	+0.73	★★★★
Adult BMI Assessment	76.40%	75.67%	81.27%	+5.60	★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	95.13%	95.86%	78.83%	-17.03	★
Postpartum Care	72.26%	73.24%	58.88%	-14.36	★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	19.95%	22.87%	27.84%	+4.97	—
1-12 Weeks	8.03%	7.79%	8.37%	+0.58	—
13-27 Weeks	48.66%	43.07%	40.38%	-2.69	—
28 or More Weeks	23.36%	24.33%	18.55%	-5.78	—
Unknown	0.00%	1.95%	4.86%	+2.91	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	5.84%	2.43%	10.22%	+7.79	—
21-40 Percent†	4.62%	2.92%	7.30%	+4.38	—
41-60 Percent†	3.65%	4.87%	11.19%	+6.32	—
61-80 Percent†	2.92%	9.73%	15.57%	+5.84	—
≥81 Percent	82.97%	80.05%	55.72%	-24.33	★★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	92.70%	92.70%	81.33%	-11.37	★★
HbA1c Poor Control (>9.0%)*	35.04%	35.04%	44.59%	+9.55	★★
HbA1c Control (<8.0%)	54.56%	54.56%	47.56%	-7.00	★★
Eye Exam	61.50%	61.50%	62.37%	+0.87	★★★
LDL-C Screening	84.67%	84.67%	76.59%	-8.08	★★★
LDL-C Control (<100 mg/dL)	40.51%	40.51%	36.89%	-3.62	★★★
Medical Attention for Nephropathy	97.81%	97.81%	84.00%	-13.81	★★★★

**Table C-3
HAP Midwest Health Plan, Inc. Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	46.72%	46.72%	40.00%	-6.72	★★★
Blood Pressure Control (<140/90 mm Hg)	67.88%	67.88%	62.96%	-4.92	★★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	96.91%	96.98%	82.82%	-14.16	★
Ages 12 to 18 Years	98.79%	97.89%	76.08%	-21.81	★
Ages 19 to 50 Years	98.02%	99.05%	67.06%	-31.99	★
Ages 51 to 64 Years	98.73%	100.00%	49.62%	-50.38	★
Total	97.80%	97.97%	71.53%	-26.44	★
Controlling High Blood Pressure	67.64%	67.88%	55.72%	-12.16	★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	78.01%	78.08%	80.24%	+2.16	—
Discussing Cessation Medications	45.55%	47.75%	50.30%	+2.55	—
Discussing Cessation Strategies	40.55%	39.76%	44.48%	+4.72	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	79.94%	77.30%	-2.64	★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	58.33%	58.95%	+0.62	★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	62.00%	66.02%	+4.02	★★★
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	30.98%	23.92%	43.49%	+19.57	—
Black or African-American	22.26%	17.09%	36.09%	+19.00	—
American-Indian and Alaska Native	0.02%	0.02%	0.06%	+0.04	—
Asian	0.00%	0.00%	2.32%	+2.32	—
Native Hawaiian and Other Pacific Islanders	0.00%	0.00%	0.22%	+0.22	—
Some Other Race	4.99%	1.36%	0.09%	-1.27	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	41.75%	57.61%	17.73%	-39.88	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	3.22%	2.54%	4.73%	+2.19	—

**Table C-3
HAP Midwest Health Plan, Inc. Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	97.79%	99.17%	99.76%	+0.59	—
Spoken Language—Non-English	0.42%	0.42%	0.09%	-0.33	—
Spoken Language—Unknown	1.80%	0.41%	0.14%	-0.27	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	97.79%	0.00%	0.00%	0.00	—
Written Language—Non-English	0.42%	0.00%	0.00%	0.00	—
Written Language—Unknown	1.80%	100.00%	100.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	97.79%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.42%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	1.80%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	388.71	392.62	391.56	-1.06	★★★
ED—Total*	64.02	65.14	64.86	-0.28	★★★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	8.93	8.79	9.03	+0.24	—
Medicine—Total	4.41	4.14	4.68	+0.54	—
Surgery—Total	1.32	1.33	1.33	0.00	—
Maternity—Total	5.08	5.27	4.83	-0.44	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.83	3.71	3.92	+0.21	—
Medicine—Total	4.15	3.90	3.98	+0.08	—
Surgery—Total	5.73	5.92	6.51	+0.59	—
Maternity—Total	2.60	2.58	2.68	+0.10	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-4 Harbor Health Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	26.83%	51.43%	58.82%	+7.39	★
Combination 3	19.51%	8.57%	50.59%	+42.02	★
Combination 4	12.20%	8.57%	50.59%	+42.02	★
Combination 5	14.63%	7.14%	41.18%	+34.04	★
Combination 6	4.88%	1.43%	21.18%	+19.75	★
Combination 7	9.76%	7.14%	41.18%	+34.04	★
Combination 8	4.88%	1.43%	21.18%	+19.75	★
Combination 9	4.88%	1.43%	18.82%	+17.39	★
Combination 10	4.88%	1.43%	18.82%	+17.39	★
Immunizations for Adolescents—Combination 1	NA	NA	NA	—	NA
Well-Child Visits in the First 15 Months of Life—6 or More Visits	NA	NA	NA	—	NA
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	56.83%	67.01%	58.84%	-8.17	★
Adolescent Well-Care Visits	24.29%	27.87%	33.00%	+5.13	★
Lead Screening in Children	70.73%	68.57%	61.18%	-7.39	☆☆
Appropriate Treatment for Children With Upper Respiratory Infection	88.37%	90.16%	93.28%	+3.12	★★★★★
Appropriate Testing for Children With Pharyngitis	NA	43.90%	NA	—	NA
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	NA	NA	NA	—	NA
Continuation and Maintenance Phase	NA	NA	NA	—	NA
Women—Adult Care					
Breast Cancer Screening	NA	4.08%	32.35%	+28.27	★
Cervical Cancer Screening	41.67%	43.26%	50.61%	+7.35	★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	NA	NA	NA	—	NA
Ages 21 to 24 Years	NA	NA	NA	—	NA
Total	58.33%	NA	NA	—	NA
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	77.22%	80.77%	70.42%	-10.35	★
Ages 25 Months to 6 Years	60.81%	73.44%	63.56%	-9.88	★
Ages 7 to 11 Years	NA	57.45%	55.17%	-2.28	★
Ages 12 to 19 Years	NA	73.08%	67.50%	-5.58	★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	49.19%	50.48%	48.24%	-2.24	★

Table C-4 Harbor Health Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	78.26%	75.00%	68.58%	-6.42	★
Ages 65+ Years	NA	NA	NA	—	NA
Total	61.61%	61.39%	58.43%	-2.96	★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	53.08%	53.08%	66.91%	+13.83	★★★★
BMI Percentile—Ages 12 to 17 Years	43.75%	43.75%	NA	—	NA
BMI Percentile—Total	51.23%	51.23%	67.89%	+16.66	★★★★
Nutrition—Ages 3 to 11 Years	65.38%	65.78%	63.27%	-2.51	★★★★
Nutrition—Ages 12 to 17 Years	50.00%	NA	NA	—	NA
Nutrition—Total	62.35%	63.75%	63.55%	-0.20	★★★★
Physical Activity—Ages 3 to 11 Years	63.08%	34.67%	47.27%	+12.60	★★★★
Physical Activity—Ages 12 to 17 Years	40.63%	NA	NA	—	NA
Physical Activity—Total	58.64%	35.06%	48.49%	+13.43	★★★★
Adult BMI Assessment	NA	16.33%	81.67%	+65.34	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	NA	NA	68.42%	—	★
Postpartum Care	NA	NA	36.84%	—	★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	4.55%	22.58%	51.92%	+29.34	—
1-12 Weeks	15.91%	9.68%	19.23%	+9.55	—
13-27 Weeks	40.91%	35.48%	17.31%	-18.17	—
28 or More Weeks	38.64%	32.26%	11.54%	-20.72	—
Unknown	0.00%	0.00%	0.00%	0.00	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	NA	NA	18.42%	—	—
21-40 Percent†	NA	NA	15.79%	—	—
41-60 Percent†	NA	NA	13.16%	—	—
61-80 Percent†	NA	NA	7.89%	—	—
≥81 Percent	NA	NA	44.74%	—	★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	63.41%	71.70%	84.00%	+12.30	★★★★
HbA1c Poor Control (>9.0%)*	73.17%	49.06%	46.00%	-3.06	☆☆
HbA1c Control (<8.0%)	19.51%	43.40%	52.00%	+8.60	★★★★
Eye Exam	34.15%	47.17%	38.00%	-9.17	★
LDL-C Screening	58.54%	75.47%	74.00%	-1.47	☆☆
LDL-C Control (<100 mg/dL)	12.20%	32.08%	26.00%	-6.08	★
Medical Attention for Nephropathy	73.17%	83.02%	88.00%	+4.98	★★★★★

**Table C-4
Harbor Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	19.51%	30.19%	20.00%	-10.19	★
Blood Pressure Control (<140/90 mm Hg)	36.59%	54.72%	36.00%	-18.72	★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	NA	NA	NA	—	NA
Ages 12 to 18 Years	NA	NA	NA	—	NA
Ages 19 to 50 Years	NA	NA	NA	—	NA
Ages 51 to 64 Years	NA	NA	NA	—	NA
Total	NA	NA	NA	—	NA
Controlling High Blood Pressure	42.22%	56.72%	43.37%	-13.35	★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	NA	NA	NA	—	—
Discussing Cessation Medications	NA	NA	NA	—	—
Discussing Cessation Strategies	NA	NA	NA	—	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	NA	NA	—	NA
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	NA	NA	—	NA
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	NA	NA	—	NA
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	27.24%	24.75%	13.41%	-11.34	—
Black or African-American	58.17%	59.30%	35.36%	-23.94	—
American-Indian and Alaska Native	0.03%	0.03%	0.04%	+0.01	—
Asian	0.00%	0.00%	0.00%	0.00	—
Native Hawaiian and Other Pacific Islanders	0.00%	0.00%	0.00%	0.00	—
Some Other Race	0.84%	4.51%	2.32%	-2.19	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	13.73%	11.41%	48.86%	+37.45	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic‡	4.75%	4.51%	2.32%	-2.19	—

**Table C-4
Harbor Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	100.00%	100.00%	100.00%	0.00	—
Spoken Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Spoken Language—Unknown	0.00%	0.00%	0.00%	0.00	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	0.00%	0.00%	0.00%	0.00	—
Written Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Written Language—Unknown	100.00%	100.00%	100.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	180.38	341.65	166.78	-174.87	★
ED—Total*	70.52	71.22	60.06	-11.16	★★★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	8.07	9.07	7.81	-1.26	—
Medicine—Total	4.51	5.87	4.59	-1.28	—
Surgery—Total	1.50	1.53	1.30	-0.23	—
Maternity—Total	4.04	3.50	3.99	+0.49	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	4.10	3.91	4.32	+0.41	—
Medicine—Total	3.94	3.67	3.87	+0.20	—
Surgery—Total	6.77	6.18	8.95	+2.77	—
Maternity—Total	2.50	2.65	2.27	-0.38	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

‡ Rate was calculated by HSAG.

**Table C-5
HealthPlus Partners Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	80.68%	85.89%	81.06%	-4.83	★★★
Combination 3	76.71%	79.08%	75.46%	-3.62	★★★
Combination 4	32.37%	69.83%	67.97%	-1.86	★★★★
Combination 5	50.58%	55.23%	56.51%	+1.28	★★★★
Combination 6	24.73%	30.66%	36.25%	+5.59	★★
Combination 7	23.67%	52.55%	53.62%	+1.07	★★★
Combination 8	13.86%	28.95%	34.74%	+5.79	★★
Combination 9	18.65%	24.57%	29.20%	+4.63	★★
Combination 10	11.06%	23.84%	28.38%	+4.54	★★
Immunizations for Adolescents—Combination 1	76.13%	91.14%	90.75%	-0.39	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	75.61%	75.61%	72.20%	-3.41	★★★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	75.56%	75.56%	73.80%	-1.76	★★★
Adolescent Well-Care Visits	56.46%	56.46%	50.08%	-6.38	★★★
Lead Screening in Children	79.90%	83.97%	83.91%	-0.06	★★★★
Appropriate Treatment for Children With Upper Respiratory Infection	79.41%	81.93%	82.50%	+0.57	★★
Appropriate Testing for Children With Pharyngitis	65.36%	68.30%	71.04%	+2.74	★★★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	40.61%	42.38%	39.63%	-2.75	★★
Continuation and Maintenance Phase	51.27%	51.33%	47.98%	-3.35	★★★
Women—Adult Care					
Breast Cancer Screening	62.10%	63.94%	66.43%	+2.49	★★★★★
Cervical Cancer Screening	75.73%	76.64%	77.01%	+0.37	★★★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	58.11%	55.61%	54.72%	-0.89	★★★
Ages 21 to 24 Years	72.10%	66.35%	64.56%	-1.79	★★★
Total	62.92%	59.35%	58.10%	-1.25	★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	97.44%	97.05%	96.91%	-0.14	★★★
Ages 25 Months to 6 Years	90.00%	89.93%	89.89%	-0.04	★★★
Ages 7 to 11 Years	91.55%	93.20%	93.26%	+0.06	★★★★
Ages 12 to 19 Years	90.38%	91.75%	91.70%	-0.05	★★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	83.79%	85.41%	86.21%	+0.80	★★★★

**Table C-5
HealthPlus Partners Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	89.99%	91.14%	91.75%	+0.61	★★★★★
Ages 65+ Years	97.67%	93.60%	92.61%	-0.99	★★★★
Total	85.50%	87.12%	88.02%	+0.90	★★★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	67.59%	77.99%	84.30%	+6.31	★★★★★
BMI Percentile—Ages 12 to 17 Years	62.03%	82.64%	88.46%	+5.82	★★★★★
BMI Percentile—Total	65.45%	79.65%	85.93%	+6.28	★★★★★
Nutrition—Ages 3 to 11 Years	69.57%	71.04%	68.18%	-2.86	★★★
Nutrition—Ages 12 to 17 Years	65.82%	64.58%	60.90%	-3.68	★★★
Nutrition—Total	68.13%	68.73%	65.33%	-3.40	★★★
Physical Activity—Ages 3 to 11 Years	53.75%	57.14%	58.68%	+1.54	★★★★
Physical Activity—Ages 12 to 17 Years	63.29%	63.89%	64.74%	+0.85	★★★★
Physical Activity—Total	57.42%	59.55%	61.06%	+1.51	★★★★
Adult BMI Assessment	82.46%	90.40%	93.71%	+3.31	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	87.35%	92.70%	92.70%	Rotated	★★★★
Postpartum Care	71.78%	71.78%	71.78%	Rotated	★★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	40.10%	37.76%	35.61%	-2.15	—
1-12 Weeks	8.16%	7.09%	8.47%	+1.38	—
13-27 Weeks	32.95%	35.42%	35.66%	+0.24	—
28 or More Weeks	12.85%	13.75%	14.95%	+1.20	—
Unknown	5.94%	5.98%	5.31%	-0.67	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	11.44%	34.79%	2.92%	-31.87	—
21-40 Percent†	18.25%	2.92%	2.68%	-0.24	—
41-60 Percent†	9.49%	4.14%	8.52%	+4.38	—
61-80 Percent†	11.92%	9.98%	20.92%	+10.94	—
≥81 Percent	48.91%	48.18%	64.96%	+16.78	★★★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	85.84%	87.69%	89.05%	+1.36	★★★★
HbA1c Poor Control (>9.0%)*	33.63%	33.29%	27.90%	-5.39	★★★★★
HbA1c Control (<8.0%)	58.26%	58.18%	61.93%	+3.75	★★★★★
Eye Exam	66.52%	72.31%	71.84%	-0.47	★★★★★
LDL-C Screening	79.79%	79.79%	80.18%	+0.39	★★★
LDL-C Control (<100 mg/dL)	43.07%	43.07%	43.81%	+0.74	★★★★★
Medical Attention for Nephropathy	86.28%	86.28%	84.62%	-1.66	★★★★

**Table C-5
HealthPlus Partners Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	38.94%	43.78%	43.02%	-0.76	★★★
Blood Pressure Control (<140/90 mm Hg)	64.60%	68.11%	67.01%	-1.10	★★★
<i>Use of Appropriate Medications for People With Asthma</i>					
Ages 5 to 11 Years	94.09%	93.30%	93.77%	+0.47	★★★★
Ages 12 to 18 Years	86.59%	83.68%	88.24%	+4.56	★★★★
Ages 19 to 50 Years	78.17%	77.17%	78.24%	+1.07	★★★
Ages 51 to 64 Years	75.76%	62.16%	69.77%	+7.61	★★
Total	87.60%	85.30%	86.99%	+1.69	★★★
Controlling High Blood Pressure	62.89%	58.77%	60.10%	+1.33	★★★
<i>Medical Assistance With Smoking and Tobacco Use Cessation</i>					
Advising Smokers and Tobacco Users to Quit	74.94%	79.44%	80.40%	+0.96	—
Discussing Cessation Medications	46.91%	50.55%	53.69%	+3.14	—
Discussing Cessation Strategies	43.28%	44.44%	49.58%	+5.14	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	78.74%	84.00%	+5.26	★★★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	81.13%	78.26%	-2.87	★★★★★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	63.84%	64.97%	+1.13	★★★
Health Plan Diversity					
<i>Race/Ethnicity Diversity of Membership†</i>					
White	60.38%	59.36%	58.86%	-0.50	—
Black or African-American	31.01%	30.87%	30.41%	-0.46	—
American-Indian and Alaska Native	0.13%	0.15%	0.17%	+0.02	—
Asian	0.33%	0.40%	0.41%	+0.01	—
Native Hawaiian and Other Pacific Islanders	0.05%	0.06%	0.01%	-0.05	—
Some Other Race	0.06%	<0.01%	<0.01%	0.00	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	8.05%	9.17%	10.14%	+0.97	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	4.52%	4.61%	4.69%	+0.08	—

**Table C-5
HealthPlus Partners Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
<i>Language Diversity of Membership†</i>					
Spoken Language—English	99.94%	99.90%	99.88%	-0.02	—
Spoken Language—Non-English	0.06%	0.09%	0.11%	+0.02	—
Spoken Language—Unknown	<0.01%	<0.01%	<0.01%	0.00	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	0.00%	0.00%	0.00%	0.00	—
Written Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Written Language—Unknown	100.00%	100.00%	100.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
<i>Ambulatory Care: Total (Visits per 1,000 Member Months)†</i>					
Outpatient—Total	335.41	341.92	339.07	-2.85	★★
ED—Total*	63.79	66.58	64.88	-1.70	★★★
<i>Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†</i>					
Total Inpatient—Total	6.68	6.90	6.95	+0.05	—
Medicine—Total	2.99	3.21	2.88	-0.33	—
Surgery—Total	1.03	1.06	1.50	+0.44	—
Maternity—Total	4.38	4.27	4.17	-0.10	—
<i>Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†</i>					
Total Inpatient—Total	4.05	3.91	4.32	+0.41	—
Medicine—Total	4.49	4.40	4.08	-0.32	—
Surgery—Total	6.33	5.76	7.58	+1.82	—
Maternity—Total	2.68	2.56	2.67	+0.11	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

**Table C-6
McLaren Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	83.70%	85.16%	83.70%	-1.46	★★★★
Combination 3	82.97%	84.67%	83.45%	-1.22	★★★★★
Combination 4	39.17%	72.51%	72.99%	+0.48	★★★★
Combination 5	55.72%	58.39%	61.56%	+3.17	★★★★
Combination 6	40.39%	39.90%	44.04%	+4.14	★★★★
Combination 7	30.66%	54.74%	55.47%	+0.73	★★★★
Combination 8	23.36%	38.93%	41.36%	+2.43	★★★★
Combination 9	30.17%	33.33%	35.77%	+2.44	★★★★
Combination 10	18.25%	32.60%	33.33%	+0.73	★★★★
Immunizations for Adolescents—Combination 1	67.64%	89.05%	86.13%	-2.92	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	78.35%	74.70%	78.10%	+3.40	★★★★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	78.35%	68.13%	67.64%	-0.49	★★
Adolescent Well-Care Visits	57.42%	40.15%	52.80%	+12.65	★★★★
Lead Screening in Children	75.43%	85.64%	83.21%	-2.43	★★★★
Appropriate Treatment for Children With Upper Respiratory Infection	74.96%	76.15%	80.67%	+4.52	★
Appropriate Testing for Children With Pharyngitis	58.50%	60.22%	59.15%	-1.07	★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	43.16%	41.43%	42.14%	+0.71	★★★★
Continuation and Maintenance Phase	56.36%	45.31%	44.79%	-0.52	★★
Women—Adult Care					
Breast Cancer Screening	50.08%	48.02%	53.36%	+5.34	★★★★
Cervical Cancer Screening	74.70%	72.99%	65.21%	-7.78	★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	50.48%	49.47%	48.47%	-1.00	★★
Ages 21 to 24 Years	63.44%	63.71%	59.66%	-4.05	★★
Total	55.33%	54.66%	52.34%	-2.32	★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	95.56%	95.47%	96.11%	+0.64	★★
Ages 25 Months to 6 Years	87.15%	85.78%	85.40%	-0.38	★
Ages 7 to 11 Years	88.72%	88.99%	87.78%	-1.21	★★
Ages 12 to 19 Years	87.12%	86.94%	86.97%	+0.03	★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	80.87%	81.49%	81.02%	-0.47	★★

**Table C-6
McLaren Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	88.27%	89.58%	89.40%	-0.18	★★★
Ages 65+ Years	92.98%	85.53%	86.47%	+0.94	★★
Total	82.98%	83.97%	83.97%	0.00	★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	61.15%	61.15%	71.89%	+10.74	★★★★★
BMI Percentile—Ages 12 to 17 Years	60.90%	60.90%	66.15%	+5.25	★★★★
BMI Percentile—Total	61.07%	61.07%	70.07%	+9.00	★★★★★
Nutrition—Ages 3 to 11 Years	61.87%	61.87%	57.30%	-4.57	★★
Nutrition—Ages 12 to 17 Years	48.87%	48.87%	47.69%	-1.18	★★
Nutrition—Total	57.66%	57.66%	54.26%	-3.40	★★
Physical Activity—Ages 3 to 11 Years	60.79%	60.79%	36.30%	-24.49	★★
Physical Activity—Ages 12 to 17 Years	48.87%	48.87%	43.85%	-5.02	★★
Physical Activity—Total	56.93%	56.93%	38.69%	-18.24	★★
Adult BMI Assessment	66.42%	69.10%	84.67%	+15.57	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	94.89%	96.59%	95.13%	-1.46	★★★★★
Postpartum Care	83.21%	81.02%	77.37%	-3.65	★★★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	27.45%	20.55%	23.01%	+2.46	—
1-12 Weeks	9.73%	8.19%	10.18%	+1.99	—
13-27 Weeks	39.18%	43.14%	43.85%	+0.71	—
28 or More Weeks	17.65%	22.25%	17.95%	-4.30	—
Unknown	5.99%	5.87%	4.99%	-0.88	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	0.49%	1.95%	1.22%	-0.73	—
21-40 Percent†	1.22%	0.73%	0.97%	+0.24	—
41-60 Percent†	2.43%	2.68%	3.65%	+0.97	—
61-80 Percent†	6.08%	7.30%	9.98%	+2.68	—
≥81 Percent	89.78%	87.35%	84.18%	-3.17	★★★★★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	86.88%	78.47%	83.94%	+5.47	★★★★
HbA1c Poor Control (>9.0%)*	34.79%	41.24%	41.06%	-0.18	★★★★
HbA1c Control (<8.0%)	54.08%	49.82%	48.36%	-1.46	★★
Eye Exam	52.88%	57.48%	56.75%	-0.73	★★★★
LDL-C Screening	80.91%	69.71%	72.99%	+3.28	★★
LDL-C Control (<100 mg/dL)	75.35%	31.93%	35.40%	+3.47	★★★★
Medical Attention for Nephropathy	91.25%	81.39%	86.86%	+5.47	★★★★★

**Table C-6
McLaren Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	57.26%	43.25%	37.77%	-5.48	☆☆
Blood Pressure Control (<140/90 mm Hg)	80.12%	71.72%	59.31%	-12.41	☆☆
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	94.60%	89.66%	94.04%	+4.38	★★★★
Ages 12 to 18 Years	84.75%	82.83%	86.72%	+3.89	★★★
Ages 19 to 50 Years	73.84%	70.19%	75.83%	+5.64	★★★
Ages 51 to 64 Years	71.15%	65.75%	62.99%	-2.76	★
Total	86.28%	81.88%	84.46%	+2.58	☆☆
Controlling High Blood Pressure	77.62%	77.62%	77.62%	Rotated	★★★★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	80.36%	75.55%	73.51%	-2.04	—
Discussing Cessation Medications	42.90%	44.81%	45.85%	+1.04	—
Discussing Cessation Strategies	36.06%	39.10%	42.23%	+3.13	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	82.05%	82.37%	+0.32	★★★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	63.16%	56.45%	-6.71	★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	8.80%	66.96%	+58.16	★★★★
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	71.58%	69.69%	68.59%	-1.10	—
Black or African-American	18.08%	18.41%	17.92%	-0.49	—
American-Indian and Alaska Native	0.16%	0.21%	0.21%	0.00	—
Asian	0.79%	0.93%	1.05%	+0.12	—
Native Hawaiian and Other Pacific Islanders	0.00%	0.00%	0.07%	+0.07	—
Some Other Race	0.23%	<0.01%	<0.01%	0.00	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	9.05%	10.65%	12.13%	+1.48	—
Declined	0.09%	0.10%	0.03%	-0.07	—
Hispanic‡	4.53%	5.03%	5.22%	+0.19	—

**Table C-6
McLaren Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	99.73%	99.41%	99.25%	-0.16	—
Spoken Language—Non-English	0.26%	0.58%	0.73%	+0.15	—
Spoken Language—Unknown	0.00%	0.00%	0.02%	+0.02	—
Spoken Language—Declined	0.01%	0.01%	<0.01%	-0.01	—
Written Language—English	0.00%	0.00%	0.00%	0.00	—
Written Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Written Language—Unknown	100.00%	100.00%	100.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	327.79	318.25	312.85	-5.40	★
ED—Total*	72.77	75.48	79.75	+4.27	★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	8.45	8.23	9.29	+1.06	—
Medicine—Total	3.84	3.63	4.43	+0.80	—
Surgery—Total	1.28	1.23	1.49	+0.26	—
Maternity—Total	5.52	5.51	5.48	-0.03	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.70	3.70	3.86	+0.16	—
Medicine—Total	4.10	4.10	4.17	+0.07	—
Surgery—Total	5.36	5.17	5.80	+0.63	—
Maternity—Total	2.61	2.74	2.60	-0.14	—

Note: McLaren Health Plan purchased CareSource Michigan on August 1, 2012. Therefore, please use caution when comparing HEDIS 2013 rates with HEDIS 2012 rates.

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

‡ Rate was calculated by HSAG.

Table C-7 Meridian Health Plan of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	79.07%	81.54%	85.42%	+3.88	★★★★★
Combination 3	76.28%	77.57%	80.79%	+3.22	★★★★
Combination 4	34.19%	64.95%	72.92%	+7.97	★★★★
Combination 5	56.74%	59.11%	65.51%	+6.40	★★★★
Combination 6	40.93%	40.42%	47.69%	+7.27	★★★
Combination 7	28.84%	49.77%	60.65%	+10.88	★★★★
Combination 8	22.56%	36.21%	44.91%	+8.70	★★★
Combination 9	33.49%	33.18%	40.28%	+7.10	★★★
Combination 10	20.00%	30.61%	38.66%	+8.05	★★★★
<i>Immunizations for Adolescents—Combination 1</i>					
Well-Child Visits in the First 15 Months of Life—6 or More Visits	77.31%	77.31%	78.24%	+0.93	★★★★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	78.24%	78.24%	82.52%	+4.28	★★★★★
Adolescent Well-Care Visits	67.91%	67.91%	62.33%	-5.58	★★★★
Lead Screening in Children	80.75%	84.19%	83.33%	-0.86	★★★★
Appropriate Treatment for Children With Upper Respiratory Infection	83.67%	86.81%	86.55%	-0.26	★★★
Appropriate Testing for Children With Pharyngitis	65.25%	64.95%	65.56%	+0.61	★★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	42.58%	39.66%	43.97%	+4.31	★★★
Continuation and Maintenance Phase	50.32%	44.95%	51.04%	+6.09	★★★
Women—Adult Care					
Breast Cancer Screening	62.76%	62.88%	68.69%	+5.81	★★★★★
Cervical Cancer Screening	78.07%	75.18%	74.71%	-0.47	★★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	63.23%	64.63%	60.19%	-4.44	★★★★
Ages 21 to 24 Years	68.61%	72.84%	70.32%	-2.52	★★★
Total	65.49%	67.98%	64.11%	-3.87	★★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	97.65%	98.01%	97.74%	-0.27	★★★
Ages 25 Months to 6 Years	92.40%	92.19%	91.85%	-0.34	★★★★
Ages 7 to 11 Years	93.29%	93.76%	93.84%	+0.08	★★★★
Ages 12 to 19 Years	93.31%	93.53%	93.65%	+0.12	★★★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	86.07%	86.14%	87.08%	+0.94	★★★★

Table C-7 Meridian Health Plan of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	91.38%	91.63%	92.41%	+0.78	★★★★★
Ages 65+ Years	87.91%	93.33%	92.31%	-1.02	★★★★
Total	87.41%	87.65%	88.65%	+1.00	★★★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	71.38%	71.38%	57.89%	-13.49	★★★
BMI Percentile—Ages 12 to 17 Years	74.24%	74.24%	60.96%	-13.28	★★★
BMI Percentile—Total	72.26%	72.26%	58.93%	-13.33	★★★
Nutrition—Ages 3 to 11 Years	48.82%	48.82%	65.26%	+16.44	★★★
Nutrition—Ages 12 to 17 Years	51.52%	51.52%	56.85%	+5.33	★★★
Nutrition—Total	49.65%	49.65%	62.41%	+12.76	★★★
Physical Activity—Ages 3 to 11 Years	34.01%	34.01%	46.32%	+12.31	★★★
Physical Activity—Ages 12 to 17 Years	43.94%	43.94%	53.42%	+9.48	★★★
Physical Activity—Total	37.06%	37.06%	48.72%	+11.66	★★★
Adult BMI Assessment	77.39%	82.83%	87.50%	+4.67	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	93.94%	94.13%	94.13%	Rotated	★★★★★
Postpartum Care	71.10%	72.07%	76.35%	+4.28	★★★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	25.08%	28.17%	26.74%	-1.43	—
1-12 Weeks	10.53%	10.59%	9.88%	-0.71	—
13-27 Weeks	47.98%	45.10%	45.50%	+0.40	—
28 or More Weeks	16.32%	16.07%	17.72%	+1.65	—
Unknown	0.09%	0.06%	0.15%	+0.09	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	1.87%	0.70%	0.70%	Rotated	—
21-40 Percent†	2.34%	1.64%	1.64%	Rotated	—
41-60 Percent†	3.50%	2.82%	2.82%	Rotated	—
61-80 Percent†	4.21%	7.75%	7.75%	Rotated	—
≥81 Percent	88.08%	87.09%	87.09%	Rotated	★★★★★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	90.93%	90.93%	90.31%	-0.62	★★★★
HbA1c Poor Control (>9.0%)*	31.32%	31.32%	30.21%	-1.11	★★★★★
HbA1c Control (<8.0%)	57.83%	57.83%	60.26%	+2.43	★★★★★
Eye Exam	53.20%	53.20%	62.84%	+9.64	★★★★
LDL-C Screening	81.49%	81.49%	77.71%	-3.78	★★★
LDL-C Control (<100 mg/dL)	41.64%	41.64%	40.06%	-1.58	★★★★
Medical Attention for Nephropathy	79.89%	79.89%	78.03%	-1.86	★★

**Table C-7
Meridian Health Plan of Michigan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	48.58%	48.58%	51.53%	+2.95	★★★★★
Blood Pressure Control (<140/90 mm Hg)	68.51%	68.51%	77.06%	+8.55	★★★★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	94.20%	93.37%	91.27%	-2.10	★★★
Ages 12 to 18 Years	88.09%	86.51%	86.32%	-0.19	★★★
Ages 19 to 50 Years	76.13%	73.13%	75.03%	+1.90	★★★
Ages 51 to 64 Years	70.43%	72.66%	70.44%	-2.22	★★
Total	86.80%	85.25%	84.00%	-1.25	★★
Controlling High Blood Pressure	69.50%	76.69%	76.69%	Rotated	★★★★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	79.25%	79.30%	80.81%	+1.51	—
Discussing Cessation Medications	53.57%	51.64%	55.28%	+3.64	—
Discussing Cessation Strategies	42.41%	44.98%	47.80%	+2.82	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	91.22%	85.85%	-5.37	★★★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	49.75%	90.91%	+41.16	★★★★★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	57.43%	57.54%	+0.11	★
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	58.00%	53.69%	-4.31	★
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	66.89%	65.94%	64.87%	-1.07	—
Black or African-American	21.71%	21.60%	21.47%	-0.13	—
American-Indian and Alaska Native	0.15%	0.15%	0.15%	0.00	—
Asian	0.86%	1.02%	1.03%	+0.01	—
Native Hawaiian and Other Pacific Islanders	0.08%	0.10%	0.07%	-0.03	—
Some Other Race	0.24%	0.00%	0.00%	0.00	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	5.81%	5.88%	5.92%	+0.04	—
Declined	4.26%	5.33%	6.49%	+1.16	—
Hispanic [£]	5.81%	5.88%	5.92%	+0.04	—

**Table C-7
Meridian Health Plan of Michigan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	99.00%	98.85%	97.73%	-1.12	—
Spoken Language—Non-English	1.00%	1.15%	2.27%	+1.12	—
Spoken Language—Unknown	0.00%	0.00%	0.00%	0.00	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	99.00%	98.85%	97.73%	-1.12	—
Written Language—Non-English	1.00%	1.15%	2.27%	+1.12	—
Written Language—Unknown	0.00%	0.00%	0.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	99.00%	98.85%	97.73%	-1.12	—
Other Language Needs—Non-English	1.00%	1.15%	2.27%	+1.12	—
Other Language Needs—Unknown	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	369.77	368.04	368.55	+0.51	★★★
ED—Total*	79.34	80.96	78.89	-2.07	★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	10.68	10.67	7.40	-3.27	—
Medicine—Total	6.05	6.46	3.15	-3.31	—
Surgery—Total	0.41	0.36	0.92	+0.56	—
Maternity—Total	7.08	6.52	5.71	-0.81	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.90	3.79	3.62	-0.17	—
Medicine—Total	4.72	4.58	4.16	-0.42	—
Surgery—Total	3.82	4.17	6.04	+1.87	—
Maternity—Total	2.74	2.43	2.44	+0.01	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-8 Molina Healthcare of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	78.01%	82.35%	81.46%	-0.89	★★★
Combination 3	73.38%	77.65%	78.81%	+1.16	★★★★
Combination 4	30.56%	69.65%	70.86%	+1.21	★★★★
Combination 5	48.61%	57.88%	60.71%	+2.83	★★★★
Combination 6	31.48%	39.76%	39.07%	-0.69	★★
Combination 7	21.53%	51.76%	54.53%	+2.77	★★★★
Combination 8	15.28%	37.65%	37.31%	-0.34	★★
Combination 9	22.22%	30.82%	30.68%	-0.14	★★
Combination 10	11.57%	28.94%	28.92%	-0.02	★★
Immunizations for Adolescents—Combination 1	74.72%	87.05%	87.76%	+0.71	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	60.42%	67.40%	61.79%	-5.61	★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	76.39%	76.39%	77.08%	+0.69	★★★★
Adolescent Well-Care Visits	57.64%	57.64%	54.73%	-2.91	★★★★
Lead Screening in Children	74.31%	80.00%	76.32%	-3.68	★★★★
Appropriate Treatment for Children With Upper Respiratory Infection	84.06%	85.31%	87.22%	+1.91	★★★★
Appropriate Testing for Children With Pharyngitis	57.77%	59.27%	55.53%	-3.74	★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	35.60%	35.95%	38.16%	+2.21	★★
Continuation and Maintenance Phase	43.33%	43.18%	47.19%	+4.01	★★★★
Women—Adult Care					
Breast Cancer Screening	53.75%	55.61%	61.07%	+5.46	★★★★
Cervical Cancer Screening	72.86%	72.80%	70.00%	-2.80	★★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	61.56%	66.32%	62.42%	-3.90	★★★★
Ages 21 to 24 Years	68.50%	73.19%	71.31%	-1.88	★★★★
Total	63.89%	68.67%	65.34%	-3.33	★★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	96.42%	97.03%	95.92%	-1.11	★★
Ages 25 Months to 6 Years	90.12%	90.56%	88.23%	-2.33	★★
Ages 7 to 11 Years	92.06%	92.66%	91.59%	-1.07	★★★★
Ages 12 to 19 Years	89.13%	89.99%	89.37%	-0.62	★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	81.68%	83.77%	85.21%	+1.44	★★★★

Table C-8 Molina Healthcare of Michigan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	88.02%	90.51%	91.68%	+1.17	★★★★★
Ages 65+ Years	88.33%	93.44%	92.51%	-0.93	★★★★
Total	83.75%	86.63%	88.07%	+1.44	★★★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	56.98%	79.23%	73.56%	-5.67	★★★★
BMI Percentile—Ages 12 to 17 Years	56.89%	78.72%	81.41%	+2.69	★★★★★
BMI Percentile—Total	56.94%	79.06%	76.27%	-2.79	★★★★
Nutrition—Ages 3 to 11 Years	57.74%	61.27%	66.78%	+5.51	★★★★
Nutrition—Ages 12 to 17 Years	56.29%	63.12%	69.87%	+6.75	★★★★
Nutrition—Total	57.18%	61.88%	67.85%	+5.97	★★★★
Physical Activity—Ages 3 to 11 Years	45.66%	45.66%	51.86%	+6.20	★★★★
Physical Activity—Ages 12 to 17 Years	49.10%	49.10%	63.46%	+14.36	★★★★
Physical Activity—Total	46.99%	46.99%	55.88%	+8.89	★★★★
Adult BMI Assessment	72.92%	83.19%	85.23%	+2.04	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	80.42%	80.38%	83.63%	+3.25	★★
Postpartum Care	64.10%	72.49%	72.79%	+0.30	★★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	NR	35.07%	34.20%	-0.87	—
1-12 Weeks	NR	8.16%	8.37%	+0.21	—
13-27 Weeks	NR	35.79%	37.18%	+1.39	—
28 or More Weeks	NR	15.80%	16.56%	+0.76	—
Unknown	NR	5.17%	3.70%	-1.47	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	19.11%	16.51%	12.61%	-3.90	—
21-40 Percent†	11.66%	11.48%	15.27%	+3.79	—
41-60 Percent†	6.99%	11.48%	13.27%	+1.79	—
61-80 Percent†	15.62%	16.03%	17.70%	+1.67	—
≥81 Percent	46.62%	44.50%	41.15%	-3.35	★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	80.87%	82.84%	81.86%	-0.98	★★
HbA1c Poor Control (>9.0%)*	36.80%	37.47%	41.81%	+4.34	★★★★
HbA1c Control (<8.0%)	54.96%	53.72%	50.22%	-3.50	★★★★
Eye Exam	47.46%	56.66%	65.27%	+8.61	★★★★
LDL-C Screening	78.69%	81.49%	76.99%	-4.50	★★★★
LDL-C Control (<100 mg/dL)	38.98%	39.95%	42.26%	+2.31	★★★★
Medical Attention for Nephropathy	77.48%	79.23%	80.97%	+1.74	★★★★

**Table C-8
Molina Healthcare of Michigan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	46.73%	47.40%	39.38%	-8.02	★★★
Blood Pressure Control (<140/90 mm Hg)	64.89%	67.27%	58.63%	-8.64	★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	88.10%	86.36%	86.46%	+0.10	★
Ages 12 to 18 Years	78.86%	77.08%	79.43%	+2.35	★
Ages 19 to 50 Years	67.88%	66.37%	67.47%	+1.10	★
Ages 51 to 64 Years	50.00%	54.33%	57.69%	+3.36	★
Total	77.12%	75.77%	75.45%	-0.32	★
Controlling High Blood Pressure	63.49%	64.86%	64.86%	Rotated	★★★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	80.56%	81.27%	82.54%	+1.27	—
Discussing Cessation Medications	52.60%	53.91%	53.54%	-0.37	—
Discussing Cessation Strategies	41.76%	45.62%	48.22%	+2.60	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	84.60%	84.63%	+0.03	★★★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	67.61%	70.80%	+3.19	★★★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	85.92%	80.26%	-5.66	★★★
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	65.61%	68.80%	+3.19	★★★★
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	49.47%	47.21%	45.86%	-1.35	—
Black or African-American	37.75%	36.33%	35.17%	-1.16	—
American-Indian and Alaska Native	0.14%	0.14%	0.14%	0.00	—
Asian	1.24%	0.97%	0.81%	-0.16	—
Native Hawaiian and Other Pacific Islanders	0.00%	0.00%	0.00%	0.00	—
Some Other Race	0.00%	0.00%	0.00%	0.00	—
Two or More Races	0.00%	<0.01%	<0.01%	0.00	—
Unknown	11.40%	15.35%	18.02%	+2.67	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	7.17%	7.25%	7.32%	+0.07	—

**Table C-8
Molina Healthcare of Michigan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	99.21%	98.95%	98.69%	-0.26	—
Spoken Language—Non-English	0.78%	0.91%	1.10%	+0.19	—
Spoken Language—Unknown	0.01%	0.15%	0.20%	+0.05	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	99.21%	98.95%	98.69%	-0.26	—
Written Language—Non-English	0.78%	0.91%	1.10%	+0.19	—
Written Language—Unknown	0.01%	0.15%	0.20%	+0.05	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	99.21%	98.95%	98.69%	-0.26	—
Other Language Needs—Non-English	0.78%	0.91%	1.10%	+0.19	—
Other Language Needs—Unknown	0.01%	0.15%	0.20%	+0.05	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	375.25	412.43	394.93	-17.50	★★★
ED—Total*	74.57	75.53	77.49	+1.96	★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	7.19	7.81	7.91	+0.10	—
Medicine—Total	3.00	3.53	3.77	+0.24	—
Surgery—Total	1.42	1.59	1.70	+0.11	—
Maternity—Total	4.55	4.42	4.01	-0.41	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.91	3.95	4.33	+0.38	—
Medicine—Total	3.85	3.76	4.08	+0.32	—
Surgery—Total	6.73	6.73	7.38	+0.65	—
Maternity—Total	2.52	2.55	2.57	+0.02	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-9 Physicians Health Plan-FamilyCare Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	73.97%	73.97%	77.62%	+3.65	★★★
Combination 3	68.13%	68.13%	71.78%	+3.65	★★
Combination 4	24.82%	24.82%	65.21%	+40.39	★★★
Combination 5	48.42%	48.42%	59.37%	+10.95	★★★
Combination 6	31.14%	31.14%	48.66%	+17.52	★★★
Combination 7	20.44%	20.44%	55.96%	+35.52	★★★
Combination 8	12.41%	12.41%	46.96%	+34.55	★★★★
Combination 9	22.87%	22.87%	42.09%	+19.22	★★★★
Combination 10	9.73%	9.73%	41.36%	+31.63	★★★★
Immunizations for Adolescents—Combination 1	77.37%	87.76%	91.53%	+3.77	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	53.44%	56.10%	63.54%	+7.44	★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	65.31%	65.31%	64.36%	-0.95	★
Adolescent Well-Care Visits	46.23%	46.47%	51.09%	+4.62	★★★
Lead Screening in Children	82.91%	77.20%	81.04%	+3.84	★★★
Appropriate Treatment for Children With Upper Respiratory Infection	80.09%	83.30%	84.20%	+0.90	★★
Appropriate Testing for Children With Pharyngitis	53.66%	60.82%	60.26%	-0.56	★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	36.99%	NB	NB	—	NB
Continuation and Maintenance Phase	47.22%	NB	NB	—	NB
Women—Adult Care					
Breast Cancer Screening	43.49%	43.51%	51.21%	+7.70	★★
Cervical Cancer Screening	68.64%	71.11%	68.81%	-2.30	★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	58.67%	52.74%	53.65%	+0.91	★★
Ages 21 to 24 Years	70.59%	70.35%	70.74%	+0.39	★★★★
Total	63.17%	58.73%	59.27%	+0.54	★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	94.18%	95.61%	97.49%	+1.88	★★★
Ages 25 Months to 6 Years	85.61%	85.18%	85.23%	+0.05	★
Ages 7 to 11 Years	86.88%	88.33%	88.02%	-0.31	★★
Ages 12 to 19 Years	85.51%	87.17%	88.34%	+1.17	★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	78.66%	80.86%	81.92%	+1.06	★★

Table C-9 Physicians Health Plan-FamilyCare Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	84.88%	87.66%	87.65%	-0.01	★★★
Ages 65+ Years	NA	86.44%	92.44%	+6.00	★★★★
Total	80.59%	83.03%	84.04%	+1.01	★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	68.54%	67.40%	74.22%	+6.82	★★★★
BMI Percentile—Ages 12 to 17 Years	59.72%	63.04%	80.52%	+17.48	★★★★★
BMI Percentile—Total	65.45%	65.94%	76.59%	+10.65	★★★★
Nutrition—Ages 3 to 11 Years	63.30%	64.10%	71.48%	+7.38	★★★★
Nutrition—Ages 12 to 17 Years	47.22%	63.77%	74.68%	+10.91	★★★★★
Nutrition—Total	57.66%	63.99%	72.68%	+8.69	★★★★
Physical Activity—Ages 3 to 11 Years	47.19%	46.15%	59.38%	+13.23	★★★★
Physical Activity—Ages 12 to 17 Years	47.92%	65.22%	68.18%	+2.96	★★★★★
Physical Activity—Total	47.45%	52.55%	62.68%	+10.13	★★★★
Adult BMI Assessment	66.67%	75.47%	87.22%	+11.75	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	92.70%	88.98%	91.91%	+2.93	★★★★
Postpartum Care	70.56%	66.67%	67.39%	+0.72	★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	3.29%	34.42%	35.17%	+0.75	—
1-12 Weeks	0.47%	8.95%	8.75%	-0.20	—
13-27 Weeks	3.92%	36.83%	38.40%	+1.57	—
28 or More Weeks	86.21%	16.35%	15.59%	-0.76	—
Unknown	6.11%	3.44%	2.09%	-1.35	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	6.81%	5.65%	0.81%	-4.84	—
21-40 Percent†	2.19%	2.54%	2.16%	-0.38	—
41-60 Percent†	3.89%	5.37%	8.09%	+2.72	—
61-80 Percent†	18.00%	8.19%	14.02%	+5.83	—
≥81 Percent	69.10%	78.25%	74.93%	-3.32	★★★★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	78.09%	81.10%	84.57%	+3.47	★★★
HbA1c Poor Control (>9.0%)*	37.74%	40.65%	32.46%	-8.19	★★★★
HbA1c Control (<8.0%)	51.84%	49.39%	56.11%	+6.72	★★★★
Eye Exam	48.37%	59.35%	60.12%	+0.77	★★★
LDL-C Screening	67.25%	72.76%	76.55%	+3.79	★★★
LDL-C Control (<100 mg/dL)	36.66%	35.98%	40.48%	+4.50	★★★★
Medical Attention for Nephropathy	76.36%	77.44%	80.16%	+2.72	★★★

**Table C-9
Physicians Health Plan-FamilyCare Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	39.05%	45.53%	49.10%	+3.57	★★★★
Blood Pressure Control (<140/90 mm Hg)	64.43%	71.14%	70.54%	-0.60	★★★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	94.97%	94.44%	94.08%	-0.36	★★★★
Ages 12 to 18 Years	88.06%	92.16%	93.69%	+1.53	★★★★★
Ages 19 to 50 Years	75.00%	78.13%	77.03%	-1.10	★★★
Ages 51 to 64 Years	NA	NA	NA	—	NA
Total	88.52%	89.13%	89.59%	+0.46	★★★★
Controlling High Blood Pressure					
55.80%	63.14%	64.06%	+0.92	★★★★	
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	78.55%	76.95%	77.29%	+0.34	—
Discussing Cessation Medications	51.59%	53.16%	54.61%	+1.45	—
Discussing Cessation Strategies	45.57%	47.87%	49.32%	+1.45	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	NB	NB	—	NB
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	NA	NA	—	NA
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	NB	NB	—	NB
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	53.20%	52.46%	51.34%	-1.12	—
Black or African-American	25.61%	24.91%	23.98%	-0.93	—
American-Indian and Alaska Native	0.21%	0.21%	0.18%	-0.03	—
Asian	0.00%	0.00%	4.92%	+4.92	—
Native Hawaiian and Other Pacific Islanders	0.75%	0.00%	0.04%	+0.04	—
Some Other Race	9.35%	9.46%	9.49%	+0.03	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	10.88%	12.96%	10.05%	-2.91	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	9.34%	9.46%	9.49%	+0.03	—

**Table C-9
Physicians Health Plan-FamilyCare Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	98.28%	98.49%	97.84%	-0.65	—
Spoken Language—Non-English	0.93%	0.85%	0.63%	-0.22	—
Spoken Language—Unknown	0.79%	0.66%	1.53%	+0.87	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	98.28%	98.49%	97.84%	-0.65	—
Written Language—Non-English	0.93%	0.85%	0.63%	-0.22	—
Written Language—Unknown	0.79%	0.66%	1.53%	+0.87	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	98.28%	98.49%	97.84%	-0.65	—
Other Language Needs—Non-English	0.93%	0.85%	0.63%	-0.22	—
Other Language Needs—Unknown	0.79%	0.66%	1.53%	+0.87	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	328.32	342.01	335.61	-6.40	★★
ED—Total*	74.57	79.83	75.56	-4.27	★★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	8.69	8.14	9.33	+1.19	—
Medicine—Total	4.07	3.84	5.06	+1.22	—
Surgery—Total	1.44	1.19	1.29	+0.10	—
Maternity—Total	5.36	5.15	5.05	-0.10	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.66	3.47	3.71	+0.24	—
Medicine—Total	3.82	3.71	3.71	0.00	—
Surgery—Total	5.29	4.37	6.19	+1.82	—
Maternity—Total	2.74	2.77	2.64	-0.13	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-10 Priority Health Choice, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	88.08%	88.08%	86.00%	-2.08	★★★★★
Combination 3	85.40%	85.40%	83.54%	-1.86	★★★★★
Combination 4	45.01%	45.01%	81.57%	+36.56	★★★★★
Combination 5	70.80%	70.80%	70.02%	-0.78	★★★★★
Combination 6	58.15%	58.15%	66.09%	+7.94	★★★★★
Combination 7	38.93%	38.93%	69.04%	+30.11	★★★★★
Combination 8	34.06%	34.06%	64.86%	+30.80	★★★★★
Combination 9	51.09%	51.09%	56.27%	+5.18	★★★★★
Combination 10	30.90%	30.90%	55.77%	+24.87	★★★★★
<i>Immunizations for Adolescents—Combination 1</i>					
Well-Child Visits in the First 15 Months of Life—6 or More Visits	70.02%	72.61%	74.39%	+1.78	★★★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	80.83%	76.95%	76.69%	-0.26	★★★
Adolescent Well-Care Visits	58.15%	61.07%	65.56%	+4.49	★★★★★
Lead Screening in Children	71.29%	82.93%	84.28%	+1.35	★★★★
Appropriate Treatment for Children With Upper Respiratory Infection	93.02%	92.12%	94.39%	+2.27	★★★★★
Appropriate Testing for Children With Pharyngitis	74.12%	78.16%	75.52%	-2.64	★★★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	38.10%	38.06%	33.09%	-4.97	★★
Continuation and Maintenance Phase	45.54%	45.62%	29.73%	-15.89	★
Women—Adult Care					
Breast Cancer Screening	62.76%	65.16%	67.56%	+2.40	★★★★★
Cervical Cancer Screening	72.22%	78.65%	77.32%	-1.33	★★★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	66.69%	64.43%	65.40%	+0.97	★★★★
Ages 21 to 24 Years	74.09%	72.79%	73.25%	+0.46	★★★★
Total	69.37%	67.32%	67.91%	+0.59	★★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	97.17%	96.80%	96.96%	+0.16	★★★
Ages 25 Months to 6 Years	88.71%	88.15%	88.74%	+0.59	★★
Ages 7 to 11 Years	91.14%	92.29%	92.22%	-0.07	★★★
Ages 12 to 19 Years	89.99%	90.39%	90.69%	+0.30	★★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	83.70%	83.88%	85.27%	+1.39	★★★★

Table C-10 Priority Health Choice, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	89.28%	90.67%	91.39%	+0.72	★★★★★
Ages 65+ Years	94.48%	NA	95.50%	—	★★★★★
Total	85.19%	85.58%	87.55%	+1.97	★★★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	70.25%	83.70%	83.82%	+0.12	★★★★★
BMI Percentile—Ages 12 to 17 Years	71.97%	81.56%	86.99%	+5.43	★★★★★
BMI Percentile—Total	70.80%	82.97%	84.81%	+1.84	★★★★★
Nutrition—Ages 3 to 11 Years	65.95%	74.07%	77.21%	+3.14	★★★★★
Nutrition—Ages 12 to 17 Years	63.64%	66.67%	78.05%	+11.38	★★★★★
Nutrition—Total	65.21%	71.53%	77.47%	+5.94	★★★★★
Physical Activity—Ages 3 to 11 Years	50.54%	57.41%	67.65%	+10.24	★★★★★
Physical Activity—Ages 12 to 17 Years	61.36%	65.96%	80.49%	+14.53	★★★★★
Physical Activity—Total	54.01%	60.34%	71.65%	+11.31	★★★★★
Adult BMI Assessment	85.77%	85.77%	90.82%	+5.05	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	91.24%	88.81%	90.23%	+1.42	★★★★
Postpartum Care	71.29%	70.07%	71.55%	+1.48	★★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	29.20%	26.03%	26.03%	Rotated	—
1-12 Weeks	9.00%	12.65%	12.65%	Rotated	—
13-27 Weeks	42.58%	44.77%	44.77%	Rotated	—
28 or More Weeks	19.22%	16.55%	16.55%	Rotated	—
Unknown	0.00%	0.00%	0.00%	Rotated	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	7.76%	6.57%	6.57%	Rotated	—
21-40 Percent†	3.74%	4.38%	4.38%	Rotated	—
41-60 Percent†	6.32%	8.03%	8.03%	Rotated	—
61-80 Percent†	12.93%	15.82%	15.82%	Rotated	—
≥81 Percent	69.25%	65.21%	65.21%	Rotated	★★★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	87.04%	88.40%	91.85%	+3.45	★★★★★
HbA1c Poor Control (>9.0%)*	29.56%	31.74%	23.75%	-7.99	★★★★★
HbA1c Control (<8.0%)	59.12%	57.68%	64.09%	+6.41	★★★★★
Eye Exam	67.70%	62.46%	66.67%	+4.21	★★★★
LDL-C Screening	78.47%	77.65%	78.22%	+0.57	★★★
LDL-C Control (<100 mg/dL)	44.34%	43.00%	46.42%	+3.42	★★★★★
Medical Attention for Nephropathy	81.39%	84.98%	83.12%	-1.86	★★★★

Table C-10 Priority Health Choice, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	43.80%	43.17%	46.35%	+3.18	★★★★
Blood Pressure Control (<140/90 mm Hg)	63.50%	66.55%	68.38%	+1.83	★★★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	96.26%	95.74%	95.42%	-0.32	★★★★★
Ages 12 to 18 Years	92.50%	93.05%	94.92%	+1.87	★★★★★
Ages 19 to 50 Years	82.18%	89.35%	85.20%	-4.15	★★★★★
Ages 51 to 64 Years	NA	NA	70.73%	—	★★
Total	91.73%	93.40%	91.87%	-1.53	★★★★★
Controlling High Blood Pressure	62.04%	69.83%	62.93%	-6.90	★★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	79.72%	79.57%	84.49%	+4.92	—
Discussing Cessation Medications	47.89%	50.71%	53.85%	+3.14	—
Discussing Cessation Strategies	41.23%	42.76%	43.44%	+0.68	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	77.52%	79.84%	+2.32	★★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	77.50%	65.57%	-11.93	★★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	59.85%	66.67%	+6.82	★★★★
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	60.24%	58.98%	57.80%	-1.18	—
Black or African-American	18.11%	17.24%	16.09%	-1.15	—
American-Indian and Alaska Native	0.12%	0.12%	0.13%	+0.01	—
Asian	0.15%	0.53%	0.75%	+0.22	—
Native Hawaiian and Other Pacific Islanders	0.01%	0.03%	0.01%	-0.02	—
Some Other Race	0.31%	0.00%	0.00%	0.00	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	21.05%	23.11%	25.22%	+2.11	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic‡	10.76%	10.60%	10.24%	-0.36	—

Table C-10 Priority Health Choice, Inc. Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	0.00%	0.00%	0.00%	0.00	—
Spoken Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Spoken Language—Unknown	100.00%	100.00%	100.00%	0.00	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	0.00%	0.00%	0.00%	0.00	—
Written Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Written Language—Unknown	100.00%	100.00%	100.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	326.88	328.44	340.92	+12.48	★★
ED—Total*	77.23	80.38	79.95	-0.43	★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	6.69	6.45	7.25	+0.80	—
Medicine—Total	2.41	2.26	2.93	+0.67	—
Surgery—Total	0.95	0.93	1.10	+0.17	—
Maternity—Total	5.83	5.75	5.69	-0.06	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.26	3.19	3.37	+0.18	—
Medicine—Total	3.75	3.70	3.77	+0.07	—
Surgery—Total	4.48	4.43	4.71	+0.28	—
Maternity—Total	2.56	2.48	2.54	+0.06	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

‡ Rate was calculated by HSAG.

**Table C-11
Total Health Care, Inc. Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	80.74%	80.74%	70.07%	-10.67	★
Combination 3	79.58%	79.58%	64.27%	-15.31	★
Combination 4	36.66%	36.66%	60.56%	+23.90	★★
Combination 5	48.26%	48.26%	51.74%	+3.48	★★
Combination 6	19.03%	19.03%	22.97%	+3.94	★
Combination 7	22.04%	22.04%	49.65%	+27.61	★★
Combination 8	10.90%	10.90%	22.27%	+11.37	★
Combination 9	12.99%	12.99%	18.10%	+5.11	★
Combination 10	7.66%	7.66%	17.87%	+10.21	★
Immunizations for Adolescents—Combination 1	70.83%	83.33%	87.70%	+4.37	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	73.15%	73.15%	49.28%	-23.87	★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	82.94%	82.94%	72.24%	-10.70	★★
Adolescent Well-Care Visits	67.08%	67.08%	52.21%	-14.87	★★★
Lead Screening in Children	65.91%	74.31%	69.14%	-5.17	★★
Appropriate Treatment for Children With Upper Respiratory Infection	83.95%	85.56%	85.71%	+0.15	★★
Appropriate Testing for Children With Pharyngitis	62.12%	51.38%	52.90%	+1.52	★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	46.94%	43.21%	40.85%	-2.36	★★★
Continuation and Maintenance Phase	NA	NA	NA	—	NA
Women—Adult Care					
Breast Cancer Screening	58.00%	49.96%	54.65%	+4.69	★★★
Cervical Cancer Screening	75.98%	63.87%	64.65%	+0.78	★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	68.99%	67.12%	69.64%	+2.52	★★★★★
Ages 21 to 24 Years	79.06%	75.89%	74.33%	-1.56	★★★★★
Total	72.24%	70.00%	71.25%	+1.25	★★★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	98.64%	93.78%	93.34%	-0.44	★
Ages 25 Months to 6 Years	91.36%	83.47%	81.98%	-1.49	★
Ages 7 to 11 Years	93.42%	87.02%	86.77%	-0.25	★
Ages 12 to 19 Years	92.69%	85.42%	85.40%	-0.02	★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	89.37%	76.24%	77.68%	+1.44	★★

**Table C-11
Total Health Care, Inc. Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	94.62%	85.79%	86.53%	+0.74	★★
Ages 65+ Years	93.44%	80.28%	NA	—	NA
Total	91.14%	79.64%	80.84%	+1.20	★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	62.27%	58.53%	69.55%	+11.02	★★★★
BMI Percentile—Ages 12 to 17 Years	62.26%	62.07%	69.28%	+7.21	★★★★
BMI Percentile—Total	62.27%	59.95%	69.44%	+9.49	★★★★
Nutrition—Ages 3 to 11 Years	64.47%	63.95%	63.53%	-0.42	★★★★
Nutrition—Ages 12 to 17 Years	61.64%	55.17%	54.22%	-0.95	★★
Nutrition—Total	63.43%	60.42%	59.95%	-0.47	★★★★
Physical Activity—Ages 3 to 11 Years	50.92%	50.92%	49.62%	-1.30	★★★★
Physical Activity—Ages 12 to 17 Years	55.35%	55.35%	51.81%	-3.54	★★★★
Physical Activity—Total	52.55%	52.55%	50.46%	-2.09	★★★★
Adult BMI Assessment	63.40%	73.61%	79.13%	+5.52	★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	88.46%	69.44%	72.62%	+3.18	★
Postpartum Care	70.19%	47.69%	52.20%	+4.51	★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	44.87%	32.65%	30.29%	-2.36	—
1-12 Weeks	5.54%	7.00%	8.70%	+1.70	—
13-27 Weeks	27.15%	35.98%	38.02%	+2.04	—
28 or More Weeks	16.48%	17.66%	16.86%	-0.80	—
Unknown	5.95%	6.72%	6.14%	-0.58	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	4.09%	28.70%	22.74%	-5.96	—
21-40 Percent†	11.06%	12.27%	17.40%	+5.13	—
41-60 Percent†	10.34%	10.19%	11.14%	+0.95	—
61-80 Percent†	3.85%	13.89%	15.31%	+1.42	—
≥81 Percent	70.67%	34.95%	33.41%	-1.54	★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	88.30%	76.75%	81.16%	+4.41	★★
HbA1c Poor Control (>9.0%)*	38.83%	54.56%	56.08%	+1.52	★
HbA1c Control (<8.0%)	48.23%	40.27%	38.75%	-1.52	★
Eye Exam	54.96%	46.66%	34.19%	-12.47	★
LDL-C Screening	85.46%	74.01%	76.60%	+2.59	★★★
LDL-C Control (<100 mg/dL)	41.49%	30.85%	27.51%	-3.34	★
Medical Attention for Nephropathy	88.12%	79.94%	82.07%	+2.13	★★★

**Table C-11
Total Health Care, Inc. Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	39.36%	33.74%	29.79%	-3.95	★
Blood Pressure Control (<140/90 mm Hg)	63.30%	53.19%	51.06%	-2.13	★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	92.03%	82.39%	75.27%	-7.12	★
Ages 12 to 18 Years	85.63%	76.50%	79.33%	+2.83	★
Ages 19 to 50 Years	89.95%	64.31%	65.57%	+1.26	★
Ages 51 to 64 Years	83.33%	61.45%	58.06%	-3.39	★
Total	89.20%	73.48%	70.66%	-2.82	★
Controlling High Blood Pressure	65.14%	46.28%	39.91%	-6.37	★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	77.88%	79.75%	80.47%	+0.72	—
Discussing Cessation Medications	48.40%	51.38%	53.91%	+2.53	—
Discussing Cessation Strategies	42.07%	47.17%	47.24%	+0.07	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	NA	NA	—	NA
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	65.79%	62.69%	-3.10	★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	NA	NA	—	NA
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	29.32%	29.80%	28.94%	-0.86	—
Black or African-American	63.93%	61.91%	61.86%	-0.05	—
American-Indian and Alaska Native	0.08%	0.08%	0.08%	0.00	—
Asian	1.00%	1.38%	1.36%	-0.02	—
Native Hawaiian and Other Pacific Islanders	0.09%	0.11%	0.10%	-0.01	—
Some Other Race	2.25%	2.15%	2.39%	+0.24	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	3.33%	4.55%	5.27%	+0.72	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	1.95%	2.15%	2.39%	+0.24	—

**Table C-11
Total Health Care, Inc. Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	99.72%	99.56%	99.51%	-0.05	—
Spoken Language—Non-English	0.26%	0.44%	0.49%	+0.05	—
Spoken Language—Unknown	0.01%	0.00%	0.00%	0.00	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	99.72%	99.56%	99.51%	-0.05	—
Written Language—Non-English	0.26%	0.44%	0.49%	+0.05	—
Written Language—Unknown	0.01%	0.00%	0.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	99.72%	99.56%	99.51%	-0.05	—
Other Language Needs—Non-English	0.26%	0.44%	0.49%	+0.05	—
Other Language Needs—Unknown	0.01%	0.00%	0.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	290.98	288.30	289.31	+1.01	★
ED—Total*	71.96	74.83	73.94	-0.89	★★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	8.92	9.84	10.18	+0.34	—
Medicine—Total	4.69	5.11	4.99	-0.12	—
Surgery—Total	1.63	1.74	1.77	+0.03	—
Maternity—Total	3.96	4.50	5.16	+0.66	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.87	3.88	3.72	-0.16	—
Medicine—Total	3.56	3.50	3.44	-0.06	—
Surgery—Total	6.67	7.23	6.84	-0.39	—
Maternity—Total	2.68	2.58	2.53	-0.05	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-12 UnitedHealthcare Community Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	77.37%	77.37%	76.73%	-0.64	☆☆
Combination 3	72.26%	72.26%	72.34%	+0.08	☆☆
Combination 4	35.52%	35.52%	67.82%	+32.30	★★★★
Combination 5	54.50%	54.50%	57.32%	+2.82	★★★
Combination 6	33.33%	33.33%	35.30%	+1.97	☆☆
Combination 7	27.49%	27.49%	54.74%	+27.25	★★★★
Combination 8	19.71%	19.71%	34.19%	+14.48	☆☆
Combination 9	26.52%	26.52%	29.47%	+2.95	☆☆
Combination 10	16.06%	16.06%	28.80%	+12.74	☆☆
Immunizations for Adolescents—Combination 1	71.64%	89.86%	86.63%	-3.23	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	93.19%	93.19%	84.18%	-9.01	★★★★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	82.40%	82.40%	80.80%	-1.60	★★★★
Adolescent Well-Care Visits	66.08%	66.85%	61.46%	-5.39	★★★★
Lead Screening in Children	82.24%	82.97%	79.56%	-3.41	★★★
Appropriate Treatment for Children With Upper Respiratory Infection	85.32%	85.75%	86.63%	+0.88	★★★
Appropriate Testing for Children With Pharyngitis	52.58%	52.88%	49.65%	-3.23	★
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	41.56%	39.62%	39.69%	+0.07	☆☆
Continuation and Maintenance Phase	54.92%	51.52%	47.89%	-3.63	★★★
Women—Adult Care					
Breast Cancer Screening	57.17%	57.47%	64.85%	+7.38	★★★★★
Cervical Cancer Screening	77.26%	69.59%	73.16%	+3.57	★★★★
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	61.13%	61.85%	62.73%	+0.88	★★★★
Ages 21 to 24 Years	68.76%	72.17%	70.54%	-1.63	★★★
Total	64.01%	65.76%	65.46%	-0.30	★★★★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	97.96%	97.91%	97.74%	-0.17	★★★
Ages 25 Months to 6 Years	91.15%	90.93%	91.15%	+0.22	★★★
Ages 7 to 11 Years	92.84%	92.64%	92.79%	+0.15	★★★
Ages 12 to 19 Years	92.28%	91.85%	92.17%	+0.32	★★★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	83.57%	85.13%	85.15%	+0.02	★★★

Table C-12 UnitedHealthcare Community Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	90.91%	92.31%	92.69%	+0.38	★★★★★
Ages 65+ Years	93.69%	92.66%	90.93%	-1.73	★★★★
Total	86.07%	87.83%	88.19%	+0.36	★★★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	48.50%	53.05%	66.79%	+13.74	★★★
BMI Percentile—Ages 12 to 17 Years	49.66%	57.72%	70.47%	+12.75	★★★★
BMI Percentile—Total	48.91%	54.74%	68.13%	+13.39	★★★
Nutrition—Ages 3 to 11 Years	57.14%	59.54%	68.70%	+9.16	★★★
Nutrition—Ages 12 to 17 Years	57.24%	61.07%	63.09%	+2.02	★★★
Nutrition—Total	57.18%	60.10%	66.67%	+6.57	★★★
Physical Activity—Ages 3 to 11 Years	42.86%	48.09%	49.24%	+1.15	★★★
Physical Activity—Ages 12 to 17 Years	41.38%	53.69%	55.70%	+2.01	★★★
Physical Activity—Total	42.34%	50.12%	51.58%	+1.46	★★★
Adult BMI Assessment	67.58%	78.42%	86.11%	+7.69	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	92.45%	89.72%	87.87%	-1.85	★★★
Postpartum Care	70.89%	66.94%	66.31%	-0.63	★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	26.12%	NR	32.20%	—	—
1-12 Weeks	8.75%	NR	8.07%	—	—
13-27 Weeks	42.26%	NR	37.76%	—	—
28 or More Weeks	16.58%	NR	16.92%	—	—
Unknown	6.29%	NR	5.06%	—	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	5.11%	7.78%	8.36%	+0.58	—
21-40 Percent†	5.35%	2.78%	7.82%	+5.04	—
41-60 Percent†	6.57%	7.22%	8.09%	+0.87	—
61-80 Percent†	14.11%	14.44%	16.17%	+1.73	—
≥81 Percent	68.86%	67.78%	59.57%	-8.21	☆☆
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	84.53%	84.70%	86.03%	+1.33	★★★
HbA1c Poor Control (>9.0%)*	36.20%	33.08%	35.77%	+2.69	★★★
HbA1c Control (<8.0%)	54.74%	56.59%	55.13%	-1.46	★★★★
Eye Exam	61.75%	63.93%	66.41%	+2.48	★★★★
LDL-C Screening	79.56%	80.22%	83.85%	+3.63	★★★★★
LDL-C Control (<100 mg/dL)	41.02%	38.81%	44.23%	+5.42	★★★★★
Medical Attention for Nephropathy	80.88%	80.88%	82.18%	+1.30	★★★

Table C-12 UnitedHealthcare Community Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	37.81%	39.18%	38.85%	-0.33	★★★
Blood Pressure Control (<140/90 mm Hg)	66.42%	64.93%	62.31%	-2.62	★★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	90.38%	87.54%	87.51%	-0.03	★★
Ages 12 to 18 Years	79.38%	78.74%	86.45%	+7.71	★★★
Ages 19 to 50 Years	68.53%	68.83%	77.74%	+8.91	★★★
Ages 51 to 64 Years	58.25%	62.22%	73.52%	+11.30	★★★
Total	78.83%	78.04%	82.86%	+4.82	★★
Controlling High Blood Pressure					
Controlling High Blood Pressure	59.61%	65.08%	62.50%	-2.58	★★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	80.52%	82.14%	80.56%	-1.58	—
Discussing Cessation Medications	54.81%	57.73%	57.11%	-0.62	—
Discussing Cessation Strategies	47.80%	48.21%	44.64%	-3.57	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	83.58%	83.61%	+0.03	★★★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	65.15%	67.51%	+2.36	★★
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	83.78%	85.33%	+1.55	★★★★
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	31.61%	59.14%	+27.53	★★
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	50.42%	49.44%	49.94%	+0.50	—
Black or African-American	36.24%	36.37%	36.00%	-0.37	—
American-Indian and Alaska Native	0.13%	0.13%	0.13%	0.00	—
Asian	0.00%	0.00%	0.00%	0.00	—
Native Hawaiian and Other Pacific Islanders	0.00%	0.00%	0.00%	0.00	—
Some Other Race	2.30%	1.45%	1.17%	-0.28	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	10.90%	12.61%	12.76%	+0.15	—
Declined	0.00%	0.00%	0.00%	0.00	—
Hispanic [£]	5.25%	5.17%	5.45%	+0.28	—

Table C-12 UnitedHealthcare Community Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	83.12%	85.42%	82.65%	-2.77	—
Spoken Language—Non-English	4.14%	4.33%	4.81%	+0.48	—
Spoken Language—Unknown	12.74%	10.25%	12.55%	+2.30	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	0.00%	0.00%	0.00%	0.00	—
Written Language—Non-English	0.00%	0.00%	0.00%	0.00	—
Written Language—Unknown	100.00%	100.00%	100.00%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	370.90	375.09	381.96	+6.87	★★★
ED—Total*	74.35	78.04	76.22	-1.82	★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	7.91	7.64	7.92	+0.28	—
Medicine—Total	3.09	3.11	3.60	+0.49	—
Surgery—Total	1.40	1.48	1.64	+0.16	—
Maternity—Total	5.57	4.97	4.40	-0.57	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.76	3.84	3.91	+0.07	—
Medicine—Total	3.94	3.80	3.73	-0.07	—
Surgery—Total	6.43	6.56	6.66	+0.10	—
Maternity—Total	2.50	2.55	2.46	-0.09	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Table C-13 Upper Peninsula Health Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Child and Adolescent Care					
<i>Childhood Immunization Status</i>					
Combination 2	83.35%	79.17%	75.18%	-3.99	☆☆
Combination 3	83.02%	74.56%	72.51%	-2.05	☆☆
Combination 4	62.38%	65.02%	63.50%	-1.52	☆☆☆
Combination 5	62.04%	55.04%	52.07%	-2.97	☆☆
Combination 6	50.50%	48.57%	45.01%	-3.56	☆☆☆
Combination 7	49.72%	50.33%	48.42%	-1.91	☆☆
Combination 8	41.62%	45.07%	40.88%	-4.19	☆☆☆
Combination 9	40.95%	39.69%	36.50%	-3.19	☆☆☆
Combination 10	34.96%	37.39%	34.79%	-2.60	☆☆☆
Immunizations for Adolescents—Combination 1	75.38%	87.29%	86.62%	-0.67	★★★★★
Well-Child Visits in the First 15 Months of Life—6 or More Visits	72.35%	72.35%	76.89%	+4.54	★★★★★
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	68.47%	72.75%	70.07%	-2.68	☆☆
Adolescent Well-Care Visits	50.69%	50.69%	51.82%	+1.13	☆☆☆
Lead Screening in Children	90.21%	90.21%	85.47%	-4.74	★★★★★
Appropriate Treatment for Children With Upper Respiratory Infection	83.13%	87.24%	87.49%	+0.25	☆☆☆
Appropriate Testing for Children With Pharyngitis	73.17%	71.30%	68.05%	-3.25	☆☆
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
Initiation Phase	45.94%	50.71%	44.08%	-6.63	☆☆☆
Continuation and Maintenance Phase	50.00%	57.28%	47.29%	-9.99	☆☆☆
Women—Adult Care					
Breast Cancer Screening	55.48%	55.54%	61.00%	+5.46	★★★★★
Cervical Cancer Screening	72.02%	74.77%	71.53%	-3.24	☆☆☆
<i>Chlamydia Screening in Women</i>					
Ages 16 to 20 Years	48.43%	47.28%	42.97%	-4.31	★
Ages 21 to 24 Years	54.91%	56.34%	57.19%	+0.85	★
Total	50.84%	50.50%	47.42%	-3.08	★
Access to Care					
<i>Children and Adolescents' Access to Primary Care Practitioners</i>					
Ages 12 to 24 Months	97.54%	98.00%	97.86%	-0.14	★★★★★
Ages 25 Months to 6 Years	89.22%	90.25%	90.21%	-0.04	☆☆☆
Ages 7 to 11 Years	90.70%	90.47%	90.12%	-0.35	☆☆
Ages 12 to 19 Years	92.05%	92.78%	92.73%	-0.05	★★★★★
<i>Adults' Access to Preventive/Ambulatory Health Services</i>					
Ages 20 to 44 Years	85.67%	87.00%	87.25%	+0.25	★★★★★

Table C-13 Upper Peninsula Health Plan Trend Table					
Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Ages 45 to 64 Years	89.32%	90.76%	90.89%	+0.13	★★★★★
Ages 65+ Years	NA	92.99%	84.96%	-8.03	☆☆
Total	86.81%	88.37%	88.38%	+0.01	★★★★★
Obesity					
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
BMI Percentile—Ages 3 to 11 Years	59.62%	70.18%	72.32%	+2.14	★★★★★
BMI Percentile—Ages 12 to 17 Years	54.22%	68.71%	75.00%	+6.29	★★★★★
BMI Percentile—Total	57.54%	69.68%	73.24%	+3.56	★★★★★
Nutrition—Ages 3 to 11 Years	54.34%	56.84%	59.04%	+2.20	☆☆
Nutrition—Ages 12 to 17 Years	46.39%	55.78%	54.29%	-1.49	☆☆
Nutrition—Total	51.28%	56.48%	57.42%	+0.94	☆☆
Physical Activity—Ages 3 to 11 Years	47.92%	43.16%	50.55%	+7.39	☆☆☆
Physical Activity—Ages 12 to 17 Years	53.01%	61.22%	55.71%	-5.51	☆☆☆
Physical Activity—Total	49.88%	49.31%	52.31%	+3.00	☆☆☆
Adult BMI Assessment	71.12%	77.44%	87.10%	+9.66	★★★★★
Pregnancy Care					
<i>Prenatal and Postpartum Care</i>					
Timeliness of Prenatal Care	93.67%	91.18%	91.18%	Rotated	★★★★★
Postpartum Care	81.51%	76.80%	76.80%	Rotated	★★★★★
<i>Weeks of Pregnancy at Time of Enrollment†</i>					
≤0 Weeks	17.50%	24.61%	21.68%	-2.93	—
1-12 Weeks	12.54%	16.41%	18.19%	+1.78	—
13-27 Weeks	29.86%	38.20%	42.32%	+4.12	—
28 or More Weeks	36.25%	13.58%	13.10%	-0.48	—
Unknown	3.85%	7.20%	4.71%	-2.49	—
<i>Frequency of Ongoing Prenatal Care</i>					
<21 Percent†	NR	1.39%	1.39%	Rotated	—
21-40 Percent†	NR	1.39%	1.39%	Rotated	—
41-60 Percent†	NR	4.64%	4.64%	Rotated	—
61-80 Percent†	NR	13.69%	13.69%	Rotated	—
≥81 Percent	NR	78.89%	78.89%	Rotated	★★★★★
Living With Illness					
<i>Comprehensive Diabetes Care</i>					
HbA1c Testing	88.95%	88.95%	87.04%	-1.91	☆☆☆
HbA1c Poor Control (>9.0%)*	29.30%	29.30%	27.01%	-2.29	★★★★★
HbA1c Control (<8.0%)	62.46%	62.46%	63.69%	+1.23	★★★★★
Eye Exam	67.72%	67.72%	64.60%	-3.12	★★★★★
LDL-C Screening	82.11%	82.11%	79.20%	-2.91	☆☆☆
LDL-C Control (<100 mg/dL)	36.32%	36.32%	41.42%	+5.10	★★★★★
Medical Attention for Nephropathy	93.33%	93.33%	81.20%	-12.13	☆☆☆

**Table C-13
Upper Peninsula Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Blood Pressure Control (<140/80 mm Hg)	52.46%	53.27%	55.47%	+2.20	★★★★★
Blood Pressure Control (<140/90 mm Hg)	73.51%	78.06%	73.72%	-4.34	★★★★
Use of Appropriate Medications for People With Asthma					
Ages 5 to 11 Years	93.83%	94.82%	88.20%	-6.62	★★
Ages 12 to 18 Years	83.97%	83.33%	83.33%	0.00	★★
Ages 19 to 50 Years	73.04%	73.23%	73.02%	-0.21	★★
Ages 51 to 64 Years	NA	NA	NA	—	NA
Total	84.21%	84.49%	81.99%	-2.50	★★
Controlling High Blood Pressure	69.11%	70.65%	70.65%	Rotated	★★★★★
Medical Assistance With Smoking and Tobacco Use Cessation					
Advising Smokers and Tobacco Users to Quit	77.14%	76.96%	77.91%	+0.95	—
Discussing Cessation Medications	45.84%	44.54%	48.53%	+3.99	—
Discussing Cessation Strategies	39.10%	39.06%	42.58%	+3.52	—
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	—	89.38%	96.61%	+7.23	★★★★★
Diabetes Monitoring for People With Diabetes and Schizophrenia	—	NA	NA	—	NA
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia	—	NA	NA	—	NA
Adherence to Antipsychotic Medications for Individuals With Schizophrenia	—	59.77%	68.49%	+8.72	★★★★
Health Plan Diversity					
Race/Ethnicity Diversity of Membership†					
White	92.85%	90.10%	88.82%	-1.28	—
Black or African-American	1.45%	1.65%	1.57%	-0.08	—
American-Indian and Alaska Native	1.80%	1.77%	1.82%	+0.05	—
Asian	0.30%	0.43%	0.45%	+0.02	—
Native Hawaiian and Other Pacific Islanders	0.09%	0.15%	0.06%	-0.09	—
Some Other Race	0.96%	0.00%	0.00%	0.00	—
Two or More Races	0.00%	0.00%	0.00%	0.00	—
Unknown	0.03%	0.92%	7.27%	+6.35	—
Declined	2.52%	4.97%	0.00%	-4.97	—
Hispanic [£]	0.75%	0.92%	1.07%	+0.15	—

**Table C-13
Upper Peninsula Health Plan Trend Table**

Measure	HEDIS 2012	HEDIS 2013	HEDIS 2014	Trend	Star Rating
Language Diversity of Membership†					
Spoken Language—English	99.95%	99.97%	99.96%	-0.01	—
Spoken Language—Non-English	0.02%	0.01%	0.03%	+0.02	—
Spoken Language—Unknown	0.03%	0.01%	0.01%	0.00	—
Spoken Language—Declined	0.00%	0.00%	0.00%	0.00	—
Written Language—English	99.95%	99.97%	99.96%	-0.01	—
Written Language—Non-English	0.02%	0.01%	0.03%	+0.02	—
Written Language—Unknown	0.03%	0.01%	0.01%	0.00	—
Written Language—Declined	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Non-English	0.00%	0.00%	0.00%	0.00	—
Other Language Needs—Unknown	100.00%	100.00%	100.00%	0.00	—
Other Language Needs—Declined	0.00%	0.00%	0.00%	0.00	—
Utilization					
Ambulatory Care: Total (Visits per 1,000 Member Months)†					
Outpatient—Total	347.76	344.14	342.08	-2.06	★★
ED—Total*	71.65	74.86	71.39	-3.47	★★
Inpatient Utilization—General Hospital/Acute Care: Total (Discharges per 1,000 Member Months)†					
Total Inpatient—Total	6.74	6.88	6.90	+0.02	—
Medicine—Total	2.93	2.57	2.84	+0.27	—
Surgery—Total	1.13	1.28	1.18	-0.10	—
Maternity—Total	4.44	5.03	4.81	-0.22	—
Inpatient Utilization—General Hospital/Acute Care: Total (Average Length of Stay)†					
Total Inpatient—Total	3.07	3.41	3.57	+0.16	—
Medicine—Total	3.36	3.91	4.23	+0.32	—
Surgery—Total	3.94	4.67	4.46	-0.21	—
Maternity—Total	2.39	2.45	2.56	+0.11	—

— indicates data were not available or data element was not applicable for the measure.

† Statistical tests across years were not performed for this measure/indicator.

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)* and *Ambulatory Care: Total—ED Visits—Total*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control or ED visits indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed.)

£ Rate was calculated by HSAG.

Appendix D. Performance Summary Stars

This appendix presents the MHP’s percentile ranking for each measure for the following dimensions of care:

- ◆ Child and Adolescent Care
- ◆ Women—Adult Care
- ◆ Access to Care
- ◆ Obesity
- ◆ Pregnancy Care
- ◆ Living With Illness
- ◆ Utilization

Each MHP’s percentile ranking result is based on its rate as compared to the NCQA’s national HEDIS 2013 Medicaid percentiles.

Symbol	Description
★★★★★	The MHP’s rate is at or above the 90th percentile.
★★★★	The MHP’s rate is at or above the 75th percentile but below the 90th percentile.
★★★	The MHP’s rate is at or above the 50th percentile but below the 75th percentile.
★★	The MHP’s rate is at or above the 25th percentile but below the 50th percentile.
★	The MHP’s rate is below the 25th percentile.
NA	Not Applicable (i.e., denominator size too small)
NR	Not Report (i.e., biased, or MHP chose not to report)
NB	No Benefit

Please note that *Medical Assistance With Smoking and Tobacco Use Cessation* is not listed in the performance table because the HEDIS 2013 Medicaid percentiles are not available.

Table D-1—Child and Adolescent Care Performance Summary

MHP Name	Childhood Immunization, Combo 2	Childhood Immunization, Combo 3	Childhood Immunization, Combo 4	Childhood Immunization, Combo 5	Childhood Immunization, Combo 6	Childhood Immunization, Combo 7	Childhood Immunization, Combo 8
Blue Cross Complete of Michigan	★★★★	★★★★	★★★★	★★★★★	★★★★	★★★★★	★★★★★
CoventryCares of Michigan, Inc.	★★	★★	★★★★	★★	★	★★★★	★
HAP Midwest Health Plan, Inc.	★★★★	★★★★	★★★★	★★★★★	★★	★★★★★	★★
Harbor Health Plan	★	★	★	★	★	★	★
HealthPlus Partners	★★★★	★★★★	★★★★	★★★★	★★	★★★★	★★
McLaren Health Plan	★★★★★	★★★★★★	★★★★★	★★★★	★★★★	★★★★	★★★★
Meridian Health Plan of Michigan	★★★★★★	★★★★★	★★★★★	★★★★★	★★★★	★★★★★	★★★★
Molina Healthcare of Michigan	★★★★	★★★★★	★★★★	★★★★	★★	★★★★	★★
Physicians Health Plan—FamilyCare	★★★★	★★	★★★★	★★★★	★★★★	★★★★	★★★★★
Priority Health Choice, Inc.	★★★★★★	★★★★★★	★★★★★★	★★★★★★	★★★★★★	★★★★★★	★★★★★★
Total Health Care, Inc.	★	★	★★	★★	★	★★	★
UnitedHealthcare Community Plan	★★	★★	★★★★	★★★★	★★	★★★★	★★
Upper Peninsula Health Plan	★★	★★	★★★★	★★	★★★★	★★	★★★★

Table D-2—Child and Adolescent Care Performance Summary (continued)

MHP Name	Childhood Immunization, Combo 9	Childhood Immunization, Combo 10	Immunizations for Adolescents, Combo 1	Well-Child 1st 15 Months, 6+ Visits	Well-Child 3rd–6th Years of Life	Adolescent Well-Care Visits
Blue Cross Complete of Michigan	★★★★	★★★★	★★★★★	★★	★★★	★★
CoventryCares of Michigan, Inc.	★	★	★★★★	★	★★★	★★★★
HAP Midwest Health Plan, Inc.	★★★	★★★	★★★★★	★★	★★★	★★★★
Harbor Health Plan	★	★	NA	NA	★	★
HealthPlus Partners	★★	★★	★★★★★	★★★★	★★★	★★★
McLaren Health Plan	★★★	★★★	★★★★★	★★★★★	★★	★★★
Meridian Health Plan of Michigan	★★★	★★★★	★★★★★	★★★★★	★★★★★	★★★★
Molina Healthcare of Michigan	★★	★★	★★★★★	★★	★★★	★★★
Physicians Health Plan—FamilyCare	★★★★	★★★★	★★★★★	★★	★	★★★
Priority Health Choice, Inc.	★★★★★	★★★★★	★★★★★	★★★★	★★★	★★★★★
Total Health Care, Inc.	★	★	★★★★★	★	★★	★★★
UnitedHealthcare Community Plan	★★	★★	★★★★★	★★★★★	★★★★	★★★★
Upper Peninsula Health Plan	★★★	★★★	★★★★★	★★★★	★★	★★★

Table D-3—Child and Adolescent Care Performance Summary (continued)					
MHP Name	Lead Screening in Children	Appropriate Treatment URI	Children With Pharyngitis	F/U Care for ADHD Meds, Initiation	F/U Care for ADHD Meds, Continuation
Blue Cross Complete of Michigan	★★★	★★★★★	★★★	NR	NR
CoventryCares of Michigan, Inc.	★★★★	★★★	★	★	★
HAP Midwest Health Plan, Inc.	★★★	★★★	★	★★	★★
Harbor Health Plan	★★	★★★★★	NA	NA	NA
HealthPlus Partners	★★★★	★★	★★★	★★	★★★
McLaren Health Plan	★★★★	★	★	★★★	★★
Meridian Health Plan of Michigan	★★★★	★★★	★★	★★★	★★★
Molina Healthcare of Michigan	★★★	★★★	★	★★	★★★
Physicians Health Plan—FamilyCare	★★★	★★	★	NB	NB
Priority Health Choice, Inc.	★★★★	★★★★★	★★★	★★	★
Total Health Care, Inc.	★★	★★	★	★★★	NA
UnitedHealthcare Community Plan	★★★	★★★	★	★★	★★★
Upper Peninsula Health Plan	★★★★	★★★	★★	★★★	★★★

Table D-4—Women—Adult Care Performance Summary					
MHP Name	Breast Cancer Screening ¹	Cervical Cancer Screening ²	Chlamydia Screening, 16–20 Years	Chlamydia Screening, 21–24 Years	Chlamydia Screening, Total
Blue Cross Complete of Michigan	★★★★	★★★	★★★	★★★	★★★
CoventryCares of Michigan, Inc.	★★★★★	★★★	★★★★★	★★★★★	★★★★★
HAP Midwest Health Plan, Inc.	★★★★	★★★	★★★★	★★★	★★★
Harbor Health Plan	★	★	NA	NA	NA
HealthPlus Partners	★★★★★	★★★★★	★★★	★★★	★★★
McLaren Health Plan	★★★	★★	★★	★★	★★
Meridian Health Plan of Michigan	★★★★★	★★★★	★★★★	★★★	★★★★
Molina Healthcare of Michigan	★★★★	★★★	★★★★	★★★★	★★★★
Physicians Health Plan—FamilyCare	★★	★★★	★★	★★★★	★★★
Priority Health Choice, Inc.	★★★★★	★★★★★	★★★★	★★★★	★★★★
Total Health Care, Inc.	★★★	★★	★★★★★	★★★★★	★★★★★
UnitedHealthcare Community Plan	★★★★★	★★★★	★★★★	★★★	★★★★
Upper Peninsula Health Plan	★★★★	★★★	★	★	★

¹ Changes in the HEDIS 2014 specifications, such as updated age ranges from 40–69 years to 50–74 years and an extended numerator time frame from 24 months to 27 months, have the potential to increase the HEDIS 2014 rates. Plans may achieve a higher percentile ranking as a result of both measure specification changes and the MHPs’ efforts to improve breast cancer screening.

² It should be noted that due to significant measure specification changes, rate change for this measure may not accurately reflect any performance improvement or decline. NCQA indicates that due to significant specification changes, the measure is not publicly reported for HEDIS 2014 and cannot be compared to prior years’ rates. HSAG suggests that the HEDIS 2014 rates be treated as baseline rates for future trending. Performance ranking based on HEDIS 2013 percentiles should be used for information only.

Table D-5—Access to Care Performance Summary

MHP Name	Children's Access, 12–24 Months	Children's Access, 25 Months to 6 Years	Children's Access, 7–11 Years	Adolescents' Access, 12–19 Years	Adults' Access, 20–44 Years	Adults' Access, 45–64 Years	Adults' Access, 65+ Years	Adults' Access, Total
Blue Cross Complete of Michigan	★	★	★★★	★★★★	★★	★★	★	★★
CoventryCares of Michigan, Inc.	★	★	★★	★	★★	★★★	NA	★★
HAP Midwest Health Plan, Inc.	★★	★	★★	★★	★★	★★★	★★	★★
Harbor Health Plan	★	★	★	★	★	★	NA	★
HealthPlus Partners	★★★	★★★	★★★★	★★★	★★★★	★★★★★	★★★★	★★★★
McLaren Health Plan	★★	★	★★	★★	★★	★★★	★★	★★
Meridian Health Plan of Michigan	★★★	★★★★	★★★★	★★★★	★★★★	★★★★★	★★★★	★★★★
Molina Healthcare of Michigan	★★	★★	★★★	★★	★★★	★★★★★	★★★★	★★★★
Physicians Health Plan—FamilyCare	★★★	★	★★	★★	★★	★★★	★★★★	★★
Priority Health Choice, Inc.	★★★	★★	★★★	★★★	★★★★	★★★★★	★★★★★	★★★★
Total Health Care, Inc.	★	★	★	★	★★	★★	NA	★★
UnitedHealthcare Community Plan	★★★	★★★	★★★	★★★★	★★★	★★★★★	★★★★	★★★★
Upper Peninsula Health Plan	★★★★	★★★	★★	★★★★	★★★★	★★★★	★★	★★★★

Table D-6—Obesity Performance Summary						
MHP Name	Weight Assessment BMI Percentile, 3–11 Years	Weight Assessment BMI Percentile, 12–17 Years	Weight Assessment BMI Percentile, Total	Counseling for Nutrition, 3–11 Years	Counseling for Nutrition, 12–17 Years	Counseling for Nutrition, Total
Blue Cross Complete of Michigan	★★★★	★★★★★★	★★★★	★★★	★★★★	★★★
CoventryCares of Michigan, Inc.	★★★★	★★★★	★★★★	★★★	★★★★	★★★
HAP Midwest Health Plan, Inc.	★★★	★★★★	★★★	★★★	★★★★	★★★
Harbor Health Plan	★★★	NA	★★★	★★★	NA	★★★
HealthPlus Partners	★★★★★★	★★★★★★	★★★★★★	★★★	★★★	★★★
McLaren Health Plan	★★★★	★★★	★★★★	★★	★★	★★
Meridian Health Plan of Michigan	★★★	★★★	★★★	★★★	★★★	★★★
Molina Healthcare of Michigan	★★★★	★★★★★★	★★★★	★★★	★★★★	★★★
Physicians Health Plan—FamilyCare	★★★★	★★★★★★	★★★★	★★★★	★★★★★★	★★★★
Priority Health Choice, Inc.	★★★★★★	★★★★★★	★★★★★★	★★★★★★	★★★★★★	★★★★★★
Total Health Care, Inc.	★★★	★★★★	★★★	★★★	★★	★★★
UnitedHealthcare Community Plan	★★★	★★★★	★★★	★★★	★★★	★★★
Upper Peninsula Health Plan	★★★★	★★★★	★★★★	★★	★★	★★

Table D-7—Obesity Performance Summary (continued)

MHP Name	Counseling for Physical Activity, 3–11 Years	Counseling for Physical Activity, 12–17 Years	Counseling for Physical Activity, Total	Adult BMI Assessment
Blue Cross Complete of Michigan	★★★	★★★★	★★★★	★★★★★
CoventryCares of Michigan, Inc.	★★★	★★	★★★	★★★★★
HAP Midwest Health Plan, Inc.	★★★★	★★★★	★★★★	★★★★
Harbor Health Plan	★★★	NA	★★★	★★★★
HealthPlus Partners	★★★★	★★★★	★★★★	★★★★★
McLaren Health Plan	★★	★★	★★	★★★★★
Meridian Health Plan of Michigan	★★★	★★★	★★★	★★★★★
Molina Healthcare of Michigan	★★★	★★★★	★★★★	★★★★★
Physicians Health Plan—FamilyCare	★★★★	★★★★★	★★★★	★★★★★
Priority Health Choice, Inc.	★★★★★	★★★★★	★★★★★	★★★★★
Total Health Care, Inc.	★★★	★★★	★★★	★★★★
UnitedHealthcare Community Plan	★★★	★★★	★★★	★★★★★
Upper Peninsula Health Plan	★★★	★★★	★★★	★★★★★

Table D-8—Pregnancy Care Performance Summary

MHP Name	Timeliness of Prenatal Care	Postpartum Care	Ongoing Prenatal Care, ≥81 Percent
Blue Cross Complete of Michigan	★★★	★★★	★
CoventryCares of Michigan, Inc.	★★	★★★	★
HAP Midwest Health Plan, Inc.	★	★★	★★
Harbor Health Plan	★	★	★
HealthPlus Partners	★★★★	★★★★	★★★
McLaren Health Plan	★★★★★	★★★★★	★★★★★
Meridian Health Plan of Michigan	★★★★★	★★★★★	★★★★★
Molina Healthcare of Michigan	★★	★★★★	★
Physicians Health Plan—FamilyCare	★★★★	★★★	★★★★
Priority Health Choice, Inc.	★★★★	★★★★	★★★
Total Health Care, Inc.	★	★	★
UnitedHealthcare Community Plan	★★★	★★★	★★
Upper Peninsula Health Plan	★★★★	★★★★★	★★★★

Table D-9—Living With Illness Performance Summary

MHP Name	Diabetes Care, HbA1c Testing	Diabetes Care, HbA1c Poor Control (>9.0%)*	Diabetes Care, HbA1c Control (<8.0%)	Diabetes Care, Eye Exam	Diabetes Care, LDL-C Screening	Diabetes Care, LDL-C Level<100
Blue Cross Complete of Michigan	★★★★	★★★	★★	★★★★	★★★	★★★
CoventryCares of Michigan, Inc.	★★★	★★★	★★★	★★★★	★★★	★★★★
HAP Midwest Health Plan, Inc.	★★	★★	★★	★★★	★★★	★★★
Harbor Health Plan	★★★	★★	★★★	★	★★	★
HealthPlus Partners	★★★★	★★★★★	★★★★★	★★★★★	★★★	★★★★★
McLaren Health Plan	★★★	★★★	★★	★★★	★★	★★★
Meridian Health Plan of Michigan	★★★★	★★★★★	★★★★★	★★★★	★★★	★★★★
Molina Healthcare of Michigan	★★	★★★	★★★	★★★★	★★★	★★★★
Physicians Health Plan—FamilyCare	★★★	★★★★	★★★★	★★★	★★★	★★★★
Priority Health Choice, Inc.	★★★★★	★★★★★	★★★★★	★★★★	★★★	★★★★★
Total Health Care, Inc.	★★	★	★	★	★★★	★
UnitedHealthcare Community Plan	★★★	★★★	★★★★	★★★★	★★★★★	★★★★★
Upper Peninsula Health Plan	★★★	★★★★★	★★★★★	★★★★	★★★	★★★★

* For indicator *Comprehensive Diabetes Care—HbA1c Poor Control (>9.0%)*, a lower rate indicates better performance (i.e., low rates of poor HbA1c control indicate better care). Therefore, the percentiles were reversed to align with performance (e.g., if the *HbA1c Poor Control* rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed).

Table D-10—Living With Illness Performance Summary (continued)

MHP Name	Diabetes Care, Nephropathy	Diabetes Care, Blood Pressure Control <140/80 mmHg	Diabetes Care, Blood Pressure Control <140/90 mmHg	Asthma, 5–11 Years	Asthma, 12–18 Years	Asthma, 19–50 Years	Asthma, 51–64 Years	Asthma, Total	Controlling High Blood Pressure
Blue Cross Complete of Michigan	★★★★★	★★★★★	★★★★	★★★★	★★★★	★★★★★	★★	★★★★	★★★★★
CoventryCares of Michigan, Inc.	★★★★★	★★	★	★	★★	★★	★	★	★★
HAP Midwest Health Plan, Inc.	★★★★★	★★★★	★★★★	★	★	★	★	★	★★
Harbor Health Plan	★★★★★	★	★	NA	NA	NA	NA	NA	★
HealthPlus Partners	★★★★★	★★★★	★★★★	★★★★★	★★★★	★★★★	★★	★★★★	★★★★
McLaren Health Plan	★★★★★	★★	★★	★★★★★	★★★★	★★★★	★	★★	★★★★★
Meridian Health Plan of Michigan	★★	★★★★★	★★★★★	★★★★	★★★★	★★★★	★★	★★	★★★★★
Molina Healthcare of Michigan	★★★★	★★★★	★★	★	★	★	★	★	★★★★★
Physicians Health Plan—FamilyCare	★★★★	★★★★★	★★★★★	★★★★★	★★★★★	★★★★	NA	★★★★★	★★★★★
Priority Health Choice, Inc.	★★★★★	★★★★★	★★★★★	★★★★★	★★★★★	★★★★★	★★	★★★★★	★★★★
Total Health Care, Inc.	★★★★	★	★	★	★	★	★	★	★
UnitedHealthcare Community Plan	★★★★	★★★★	★★★★	★★	★★★★	★★★★	★★★★	★★	★★★★
Upper Peninsula Health Plan	★★★★	★★★★★	★★★★★	★★	★★	★★	NA	★★	★★★★★

Table D-11 Living with Illness Performance Summary (continued)

MHP Name	Adherence to Antipsychotic Meds for Schizophrenia	Cardiovascular Monitoring for Schizophrenia & Cardiovascular Disease	Diabetes Monitoring for Schizophrenia & Diabetes	Diabetes Screening for Schizophrenia, Bipolar Disorder Using Antipsychotic Meds
Blue Cross Complete of Michigan	NR	NR	NR	NR
CoventryCares of Michigan, Inc.	NB	NR	NR	NB
HAP Midwest Health Plan, Inc.	★★★	NA	★	★★
Harbor Health Plan	NA	NA	NA	NA
HealthPlus Partners	★★★	NA	★★★★★	★★★★★
McLaren Health Plan	★★★★★	NA	★	★★★★★
Meridian Health Plan of Michigan	★	★	★★★★★	★★★★★
Molina Healthcare of Michigan	★★★★★	★★★	★★★	★★★★★
Physicians Health Plan—FamilyCare	NB	NA	NA	NB
Priority Health Choice, Inc.	★★★★★	NA	★★	★★★
Total Health Care, Inc.	NA	NA	★	NA
UnitedHealthcare Community Plan	★★	★★★★★	★★	★★★★★
Upper Peninsula Health Plan	★★★★★	NA	NA	★★★★★

Table D-12—Utilization Performance Summary		
MHP Name	Ambulatory Care, Outpatient Visits	Ambulatory Care, Emergency Department Visits*
Blue Cross Complete of Michigan	★	★★★
CoventryCares of Michigan, Inc.	★	★
HAP Midwest Health Plan, Inc.	★★★	★★★
Harbor Health Plan	★	★★★
HealthPlus Partners	★★	★★★
McLaren Health Plan	★	★
Meridian Health Plan of Michigan	★★★	★
Molina Healthcare of Michigan	★★★	★
Physicians Health Plan—FamilyCare	★★	★★
Priority Health Choice, Inc.	★★	★
Total Health Care, Inc.	★	★★
UnitedHealthcare Community Plan	★★★	★
Upper Peninsula Health Plan	★★	★★

* For this indicator, a lower rate indicates better performance (i.e., low rates of emergency department visits indicate better utilization of services). Therefore, the percentiles were reversed to align with performance (e.g., if the ED Visits rate was between the 25th and 50th percentiles, it would be inverted to be between the 50th and 75th percentiles with a three-star performance displayed).