Michigan Department of Community Health Medical Services Administration Managed Care Plan Division Quality Improvement and Program Development Section

Medicaid Health Equity Project Year 2 Report (HEDIS 2012) October 2013

Monica Kwasnik, MA

Meta Kreiner, MSc

And

Carly Gerould

Monica Kwasnik, Manager
Quality Improvement and Program Development Section
Managed Care Plan Division
Michigan Department of Community Health
kwasnikm@michigan.gov
(517) 373-6096

Background

Racial and ethnic disparities in healthcare and health outcomes exist in both publicly and privately funded health programs. Racial and ethnic minority populations experience worse outcomes than the general population for almost every health condition. The combined costs of these racial and ethnic health disparities and premature death in the United States between 2003 and 2006 were estimated by the Joint Center for Political and Economic Studies to be \$1.24 trillion. It is projected that eliminating these health disparities would have reduced *direct medical care expenditures* in the US by \$229.4 billion for the same time period ¹. Michigan Medicaid has both an ideological and financial interest in determining what, if any, racial/ethnic disparities exist in the health care services we provide and/or the outcomes to beneficiaries.

Introduction

Disparities identification and reduction have been priorities for Michigan Medicaid for several years. Between 2008 and 2010, Medicaid Health Plans (MHPs) were required to conduct an annual Performance Improvement Project (PIP) specifically aimed at reducing an identified disparity in one of their quality measures. In 2005, Michigan Medicaid participated in the Center for Health Care Strategies' Practice Size Exploratory Project (PSEP) where racial/ethnic disparities in a number of measures were identified by health plan, and by provider. Results were disseminated to health plans and to providers for their information. In 2008, Michigan Medicaid was awarded a grant by the Center for Health Care Strategies (funded by the Robert Wood Johnson Foundation) to participate in the three year, Reducing Disparities at the Practice Site Project. This project focused on six high volume Medicaid practices in Detroit/Wayne County and facilitated the introduction of the Patient Centered Medical Home into the practice. Diabetic-related HEDIS measures were tracked by race/ethnicity across time at the participating practices. The Medicaid Health Equity Project is the next step in the state's strategy to identify and reduce health disparities in Medicaid.

This commitment to reducing disparities is also codified in federal and state law. Michigan Medicaid is required to monitor the quality and appropriateness of the healthcare services delivered by our fourteen participating MHPs to the 1.2 million beneficiaries in their care². Federal regulations require that MHPs provide services "in a culturally competent manner to all enrollees, including those with limited English proficiency and diverse cultural and ethnic backgrounds." Both federal and state laws address the need to reduce racial/ethnic disparities in healthcare and outcomes. The Affordable Care Act (ACA) includes language that prohibits discrimination under any health program or activity that is receiving federal financial assistance⁴. The ACA also includes improved federal data collection efforts by ensuring that federal health care programs collect and report data on race, ethnicity, sex, primary language, and disability status⁵. On a state level, Michigan Public Act 653 of 2006 directs the Michigan Department of Community Health (MDCH) to develop strategies to reduce racial and ethnic disparities, including the compilation of racial and ethnic specific data including, but not limited to, morbidity and mortality⁶.

¹ LaVeist RA, Gaskin DJ, Richard P. The Economic Burden of health Inequalities in the United States. Washington, DC: Joint Center for Political and Economic Studies; September 2009

² Michigan Medicaid Managed Care Enrollment Report, January 2012

³ Balanced Budget Act of 1997. 42 CFR 438.206(e)(2). Cultural Considerations.

⁴ Patient Protection and Affordable Care Act, PUBLIC LAW 111–148, Sec. 1557

⁵ Patient Protection and Affordable Care Act, PUBLIC LAW 111–148, Sec. 4302

⁶ Michigan Compiled Laws, 2006 PA 653. Signed by Gov. Jennifer M. Granholm on January 8, 2006

In an effort to comply with federal and state law, and toward the end of ensuring high quality healthcare for all Medicaid Managed Care beneficiaries, the Quality Improvement and Program Development Section of the Medicaid Managed Care Plan Division developed the *Medicaid Health Equity Project*. In early 2010, all Medicaid health plans were asked to participate in a series of conference calls to frame the problem of disparities in care and to plan the project. During those calls, Michigan Medicaid solicited MHPs for input and advice in the development of the methodology. A set of initial measures was agreed upon and specifications were developed. All fourteen Michigan MHPs submitted data in reporting year 1 (2011). These data were analyzed, and reported in both plan-specific and state-wide reports. In reporting year 2 (2012), six additional measures were added for a total of fourteen measures, and data were again submitted by all health plans. Reporting year 3 (2013) will include the same fourteen measures and the submission process will remain unchanged.

Methods

Data Collection

As a means of measuring quality consistently across plans, and to facilitate comparison across states, MHPs submit audited Health Effectiveness Data and Information Set (HEDIS) data to MDCH for each measure that pertains to Medicaid covered benefits⁷. All Medicaid Managed Care Plans were asked to submit the following subset of HEDIS measures broken down by race/ethnicity to MDCH (measures marked with an asterisk were added in 2012):

- Breast Cancer Screening (BCS)
- Cervical Cancer Screening (CCS)
- Chlamydia Screening (Combined) (CHL)
- HbA1c Testing (CDC1)
- Childhood Immunizations Combo 3 (CIS)
- Appropriate Asthma Medications (Combined) (ASM)
- Child Access to Care (25 months to 6 years) (CAP)
- Adult Access to Care (20-44 years) (AAP)
- Adolescent Immunizations Combo 1 (IMA)*
- Blood Lead Screening (LSC)*
- Well Child Visits 3-6 years (W34)*
- Post-Partum Care (PPC)*
- Diabetic Eye Exam (CDC2)*
- Diabetic Nephropathy (CDC3)*

These measures were broken down by seven racial/ethnic populations (American Indian/Alaska Native, Asian American, African American, Hispanic, Native Hawaiian/Other Pacific Islander, Other/Multiracial, White, and Unknown/Declined) and one ethnicity (Hispanic).

⁷ For a detailed discussion of HEDIS data specifications see HEDIS 2012 Technical Specification created and maintained by the National Committee for Quality Assurance (NCQA)

Any reference to Hispanic was categorized into the Hispanic group and the numbers represented by the racial categories were assumed to be Non-Hispanic. Race/ethnicity data are taken from Medicaid enrollment forms, which use self-identification to determine race and ethnicity. This information is shared with MHPs on the monthly eligibility file that transmits the new members assigned to their plan. Health Plans may also have supplementary systems in place to acquire and store this information (i.e. retrieving it from EMR systems in their provider network). However, the majority of these data are obtained during the Medicaid enrollment process and provided to the MHPs by MDCH.

Plans submitted administrative data for this report. Medicaid Health Plans were provided a blank template to ensure consistency across all plan submissions (see Appendix A). Plans used their audited HEDIS data to draw the initial numbers (total numerators and denominators), but the final data broken down by race/ethnicity was not audited. All total numbers matched totals reported in the HEDIS Interactive Data Submission System (IDSS). The data submitted by Priority Health Government Programs was complete for seven of the fourteen measures (BCS, CHL, CIS, ASM, IMA, LSC, W34), and the data for these measures are included in this report. After Year 2 data were submitted, CareSource Health Plan and McLaren Health Plan merged. Both submitted data independently, and the data from both submissions are included in this report.

Data Analysis

All HEDIS measures were calculated in accordance with definitions provided by the National Committee for Quality Assurance (NCQA). When calculating HEDIS measures, data were considered insufficient and therefore suppressed if those who received services was less than 5 (the numerator), those who did not receive services was less than 5 (the remainder) and/or the population under consideration was less than 30 (the denominator). In these cases, data were not presented in plan-specific reports but were included in this aggregate report for the Michigan Medicaid Managed Care Program.

Disparities were calculated in accordance with the methods used by the Michigan Health Equity Data Project⁸. Pairwise disparities were measured between the non-white population of interest and the reference population. For each plan-specific report and the all-plan report, pairwise disparities were calculated for each racial/ethnic population for each HEDIS measure on the absolute and relative scales using the following formulas:

Absolute Disparity = Non-White Estimate – Reference Estimate Relative Disparity = Non-White Estimate / Reference Estimate

The White population served as the reference group for all pairwise comparisons because, in Michigan, it is the only population large enough to provide a stable comparison over time.

For each population and each measure, comparisons were made to the White (reference) population and the 2012 HEDIS National Medicaid 50th Percentile. Two measures were declared

⁸ www.michigan.gov/minorityheatlh

statistically different at the alpha=0.05 level if the 95% confidence intervals did not overlap. 95% confidence intervals were calculated for each HEDIS measure using the binomial formula:

$$p \pm (1.96 *\sqrt{(p(1-p))/n}))$$
 p=estimate n=number of people in the population of interest

These comparisons are summarized as either Above (population rate is higher than the comparison rate), Below (population rate is lower than the comparison rate), or NS (there is no statistically significant difference between the rates in the two populations).

Results

There were 14 measures collected in the 2012 Project Year:

- Breast Cancer Screening (BCS)
- Cervical Cancer Screening (CCS)
- Chlamydia Screening Combined (CHL)
- HbA1c Testing (CDC1)
- Childhood Immunizations Combo 3 (CIS)
- Appropriate Asthma Medications Combined (ASM)
- Child Access to Care 24 months to 6 years (CAP)
- Adult Access to Care 20-44 years (AAP)
- Adolescent Immunizations Combo 1(IMA)
- Blood Lead Screening (LSC)
- Well Child Visits 3-6 years (W34)
- Post-Partum Care (PPC)
- Diabetic Eye Exam (CDC2)
- Diabetic Nephropathy (CDC3)

Comparisons were made between each non-White racial/ethnic population and the White reference population as well as each racial/ethnic population and the 2012 HEDIS 50th percentile for that measure (see Tables 1 and 2). Population size and the rates for each measure by racial/ethnic group can be found in Table 3 (rates are in the shaded column).

It should be noted that for all measures, the Native Hawaiian/Other Pacific Islander Population was too small to test for significance, and data from this population are not included in either the tables or the figures in this report. However, Native Hawaiian/Other Pacific Islander beneficiaries are still included in the totals for all measures.

For all fourteen measures, at least one non-White racial/ethnic population showed a statistically significant difference from the White reference population:

- The African American population was below the White reference population for nine measures, BCS (by 2.3 percentage points), CDC1 (by 6.7 percentage points), CIS (by 11.0 percentage points), ASM (by 5.2 percentage points), CAP (by 6.8 percentage points), AAP (by 6.0 percentage points), IMA (by 2.3 percentage points), W34 (by 1.6 percentage points) and CDC2 (by 6.2 percentage points).
- o For five of these ten measures, other racial/ethnic populations were also below the White reference population:
 - Breast Cancer Screening (BCS) rates were also lower for the American Indian/Alaska Native population by 12.6 percentage points.
 - HbA1C Testing (CDC1) rates were also lower for the Hispanic population by 5.5 percentage points.
 - Childhood Access to Care 25 months to 6 years (CAP) rates were also lower for the Unknown/Declined population by 1.2 percentage points.
 - Adult Access to Care 20-44 years (AAP) rates were also lower for the Asian American (5.1 percentage points), Hispanic (4.0 percentage points) and Unknown/Declined (4.6 percentage points) populations.
 - Diabetic Eye Exam (CDC2) rates were also lower for the Hispanic population by 5.2 percentage points.
- o For three of the fourteen measures, non-White racial/ethnic populations were higher than the White reference population:
 - Chlamydia Screening (CHL) rates were higher for the African American (17.4 percentage points), Hispanic (8.5 percentage points) and Unknown/Declined (5.4 percentage points) populations.
 - Blood Lead Screening (LSC) rates were higher for the African American (2.1 percentage points), Hispanic (8.7 percentage points) and Other/Multiracial (10.8 percentage points) populations.
 - Diabetic Nephropathy (CDC3) rates were higher for the American Indian/Alaska Native population by 9.5 percentage points.
- o For six of the fourteen measures, some racial/ethnic populations were below the White reference population, while others were above it:
 - Cervical Cancer Screening (CCS) rates for were higher for the African American (0.8 percentage points) and Hispanic (3.4 percentage points) populations, but lower for the American Indian/Alaska Native (7.7 percentage points), Other/Multiracial (4.4 percentage points) and Unknown/Declined (11.3 percentage points) populations.
 - Childhood Immunizations Combo 3 (CIS) rates were lower for the African American (11.0 percentage points), Other/Multiracial (9.3 percentage points) and Unknown/Declined (4.0 percentage points)

- populations, but higher for the Hispanic population by 4.4 percentage points.
- Appropriate Asthma Medications Combined (ASM) rates were lower for the African American population by 5.2 percentage points, but higher for the Other/Multiracial (8.0 percentage points) and Unknown/Declined (4.8 percentage points) populations.
- Adolescent Immunizations Combo 1(IMA) rates were lower for the African American (2.3 percentage points) and Unknown/Declined (3.4 percentage points) populations, but higher for the Hispanic population by 6.1 percentage points.
- Well Child Visits 3-6 years (WC34) rates were lower for the African American (1.6 percentage points) and American Indian/Alaska Native (7.8 percentage points) populations, but higher for the Asian American (4.1 percentage points), Hispanic (2.5 percentage points), Other/Multiracial (7.2 percentage points) and Unknown/Declined (1.9 percentage points) populations.
- Post-Partum Care (PPC) rates were lower for the African American (16.3 percentage points) and Hispanic (3.8 percentage points) populations, but higher for the Unknown/Declined population by 3.7 percentage points.
- For nine of the fourteen measures, at least one non-White racial/ethnic population was below the HEDIS 50th percentile. For six of these measures, (CCS, CDC1, ASM, PPC, CDC2 and CDC3) the White population and the All Plans populations were also below the HEDIS 50th percentile. For three of these measures, at least one non-White racial/ethnic population was below the HEDIS 50th percentile, while other populations were above it:
 - Childhood Immunizations Combo 3 (CIS) rates were below the HEDIS 50th percentile for the African American population, while the Hispanic, Other/Multiracial and White populations were above it.
 - Child Access to Care 24 months to 6 years (CAP) rates were below the HEDIS 50th percentile for the African American population, while the Asian American, Hispanic, Other/Multiracial, White and Unknown/Declined populations were above it.
 - Adult Access to Care 20-44 years (AAP) rates were below the HEDIS 50th percentile for the African American and Unknown/Declined populations, while the Other/Multiracial and White populations were above it.
- For one measure, Chlamydia Screening (CHL) rates were above the HEDIS 50th percentile for the African American, Hispanic and Unknown/Declined populations, while the White population was below it.

Tables 4-17 and figures 1-14 illustrate the results of the quality measures by race/ethnicity for all populations enrolled in Medicaid Managed Care except Native Hawaiian/Other Pacific Islander.

Measuring Inequity

For the measures in this report, African American, Hispanic/Latino and White beneficiaries make up over 90% of the eligible population. Table 18 is the same as Table 3, except that it shows only the African American, Hispanic/Latino and White populations.

Table 19 provides an absolute measure of inequity for the African American and Hispanic populations. The African American rate is subtracted from the White rate and the difference is the "Rate Difference". The same process was undertaken for the Hispanic/Latino population. In most instances, rates for minority populations fell below White rates and the resulting rate difference is a negative number. Where this negative difference is significant, it is shaded in yellow. The African American rate is significantly below the White rate for ten of the fourteen measures. The Hispanic rate is significantly below the White rate for four of the fourteen measures. Where rates for minority populations exceeded White rates significantly, the cells are shaded orange. Rates were significantly higher for both the African American and Hispanic population for Cervical Cancer Screening (CCS), Chlamydia Screening (CHL) and Lead Screening (LSC). Where minority rates are not significantly different from the White rate, the cells are unshaded. The only measure which is not statistically different for both the African American and the Hispanic population is Diabetic Nephropathy (CDC3).

Within this set of fourteen measures, the largest negative difference can be found in Post-Partum Care (PPC), where the gap between African American women and White women is 16.3 percentage points. It should also be noted that the difference between African American women and White women for Chlamydia Screening (CHL) is 17.4 percentage points, with African American women being screened at significantly higher rates.

Discussion

All fourteen of the Year 2 measures collected exhibited racial/ethnic differences to varying degrees. Rates for African American Medicaid beneficiaries fell below that of White beneficiaries for ten measures, and for eight of these measures, the African American population had the lowest rate of all the populations considered. A consistent pattern of disparity was not identified with the other racial/ethnic populations, but this may be due to the greater variability of their rate from year to year due to their much smaller population size. For three measures, Chlamydia Screening, Blood Lead Screening and Cervical Cancer Screening, the African American population had a rate that was higher than the White population.

This information is important to decipher what lies behind the Michigan aggregate rate for each measure. For nine of the fourteen quality measures, some racial/ethnic populations fell significantly above the HEDIS 2012 50th percentile, while others fell significantly below. For example, the All Plan rate (all races/ethnicities combined) for Childhood Immunization Combo 3 was not significantly different from the HEDIS National Medicaid 50th percentile. This indicates that as a state, the overall Michigan Managed Care rate is keeping up with the national rate on this measure. However, the Michigan African American rate for this same measure is below the 50th percentile, while the rates for the White and Hispanic populations are significantly above.

As we begin to track these rate differences over time, we can determine if advances in quality healthcare are being made across all racial/ethnic populations. It is important to note that changes in the equity status of a measure do not indicate an improvement in overall quality for a particular racial/ethnic category; it just means that the gap between the minority population and the White reference population is getting smaller.

Limitations

The rates in this report may differ slightly from HEDIS rates published elsewhere in MDCH documents. These tables are based only on administrative data from managed care plans, HEDIS Year 2012 (Calendar Year 2011). The MDCH published rates may reflect rates derived using hybrid methodology that allows for sampling and medical record abstraction, therefore the rates in this report may be lower than other published rates. One health plan submitted complete data for seven of the fourteen measures for this reporting year. All other plans submitted complete data for all measures.

Future Directions

In 2013, analysis will include a snapshot of the equity of these measures for each plan for the 2013 reporting year, and it will include a comparison of changes in the racial/ethnic gaps in care from 2012 to 2013. This report will also present an Index of Disparity, which describes the average racial/ethnic subpopulation difference compared to the total population rate. This information will help inform our understanding of change in equity over time in the individual Medicaid Health Plans, as well as in Michigan Medicaid Managed Care Program overall.

Health Equity Summary Michigan Medicaid Managed Care All Plans

Table 1. Difference from Reference (White)

Race/Ethnicity*	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening	HbA1C Testing	Childhood Immuni- zations Combo 3	Appropriate Asthma Medication (Combined)	Child Access to Care (25 Months to 6 Years)	Adult Access to Care (20-44 Years)	Adolescent Immuni- zations	Blood Lead Screening	Well Child Visits 3-6 Years	Post-Partum Care	Diabetic Eye Exam	Diabetic Nephropathy
American Indian/ Alaska Native	Below	Below	NS	NS	NS	NS	NS	NS	NS	NS	Below	NS	NS	Above
Asian American	NS	NS	NS	NS	NS	NS	NS	Below	NS	NS	Above	NS	NS	NS
African American	Below	Above	Above	Below	Below	Below	Below	Below	Below	Above	Below	Below	Below	NS
Hispanic	NS	Above	Above	Below	Above	NS	NS	Below	Above	Above	Above	Below	Below	NS
Other/Multiracial	NS	Below	NS	NS	Above	Above	NS	NS	NS	Above	Above	NS	NS	NS
White	Reference	Reference	Reference	Reference	Reference	Reference	Reference	Reference	Reference	Reference	Reference	Reference	Reference	Reference
Unknown/Declined	NS	Below	Above	NS	Below	Above	Below	Below	Below	NS	Above	Above	NS	NS
All Plan	NS	NS	Above	Below	Below	Below	Below	Below	NS	Above	NS	Below	Below	NS

Table 2. Difference from 2012 HEDIS National Medicaid 50th Percentile

Race/Ethnicity	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening	HbA1C Testing	Childhood Immuni- zations Combo 3	Appropriate Asthma Medication (Combined)	Child Access to Care (25 Months to 6 Years)	Adult Access to Care (20-44 Years)	Adolescent Immuni- zations	Blood Lead Screening	Well Child Visits 3-6 Years	Post-Partum Care	Diabetic Eye Exam	Diabetic Nephropathy
American Indian/ Alaska Native	NS	Below	NS	NS	NS	NS	NS	NS	Above	NS	NS	NS	NS	NS
Asian American	NS	NS	NS	NS	NS	NS	Above	NS	Above	Above	Above	Below	Below	NS
African American	Above	Below	Above	Below	Below	Below	Below	Below	Above	Above	NS	Below	Below	Below
Hispanic	Above	NS	Above	Below	Above	NS	Above	NS	Above	Above	Above	Below	Below	Below
Other/Multiracial	Above	Below	NS	NS	Above	NS	Above	Above	Above	Above	Above	NS	NS	NS
White	Above	Below	Below	Below	Above	Below	Above	Above	Above	Above	Above	Below	Below	Below
Unknown/Declined	Above	Below	Above	Below	NS	NS	Above	Below	Above	Above	Above	Above	Below	NS
All Plan	Above	Below	Above	Below	NS	Below	Above	Above	Above	Above	Above	Below	Below	Below

^{*}In the HEDIS data collection process, members are identified first with a race, than an ethnicity of Hispanic, Non-Hispanic, Unknown, or Declined.

For this study, all Hispanic beneficiaries, regardless of race, were moved into the category Hispanic. They are not duplicated in the race categories.

Data was collected for the Native Hawaiian/Other Pacific Islander population, but data from this population was too small to be tested for significance and it is not included in tables and figures.

Above: Percent is higher than comparison group Below: Percent is lower than comparison group

NS: There is no statistical difference from the comparison group (p<0.05)
--- Insufficient Data (Fewer than 5 who received services (Numerator) or Fewer than 5 who did not receive services (Remainder) or Fewer than 30 in total population (Denominator)).

Table 3. Michigan Medicaid Managed Care Select HEDIS 2012 Measures by Race/Ethnicity. All Populations except Native Hawaiian/Other Pacific Islander (Insufficient data).

Bood/Ethnicity	Breast	Cancer Sc	reening	Cervica	al Cancer So	reening	Chlar	nydia Scre	ening	H	bA1C Testi	ng	Childho	od Immns	Combo 3	Appropriate Asthma Meds Total Access to Care 25 months-6 y				onths-6 yrs	
Race/Ethnicity	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%
AI/AN	59	130	45.4%	162	276	58.7%	30	57	52.6%	73	95	76.8%	45	60	75.0%	26	31	83.9%	199	215	92.6%
Asian American	115	195	59.0%	205	317	64.7%	71	133	53.4%	161	200	80.5%	143	190	75.3%	69	76	90.8%	979	1061	92.3%
African American	9260	16629	55.7%	36466	54194	67.3%	17486	23762	73.6%	9069	12337	73.5%	6734	10682	63.0%	5049	6269	80.5%	45441	52886	85.9%
Hispanic	456	785	58.1%	2372	3398	69.8%	1256	1943	64.6%	647	866	74.7%	2046	2609	78.4%	527	606	87.0%	9775	10600	92.2%
Other/Multiracial	186	303	61.4%	695	1121	62.0%	93	150	62.0%	295	352	83.8%	695	1121	62.0%	89	95	93.7%	986	1053	93.6%
White	12439	21438	58.0%	47416	71364	66.4%	13978	24898	56.1%	12188	15193	80.2%	47416	71364	66.4%	6665	7777	85.7%	84270	90894	92.7%
Unknown/Declined	429	753	57.0%	1861	3374	55.2%	875	1421	61.6%	858	1107	77.5%	1861	3374	55.2%	390	431	90.5%	5794	6334	91.5%
Total	22954	40250	57.0%	89177	134044	66.5%	33789	52365	64.5%	23296	30158	77.2%	24624	34819	70.7%	12815	15285	83.8%	147451	163050	90.4%
Race/Ethnicity		s to Care 2	2-44 yrs		cent Immun	izations		ad Screen	ing		hild Visits	3-6 yrs		t-Partum C	are		etic Eye E	xam		tic Nephro	
	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%
AI/AN	251	303	82.8%	44	54	81.5%	48	60	80.0%	109	165	66.1%	20	37	54.1%	50	95	52.6%	74	88	84.1%
Asian American	663	818	81.1%	139	185	75.1%	149	190	78.4%	682	875	77.9%	113	198	57.1%	84	200	42.0%	146	202	72.3%
African American	51667	64456	80.2%	7350	10156	72.4%	8059	10717	75.2%	32347	44815	72.2%	5260	11356	46.3%	5062	12347	41.0%	9000	11867	75.8%
Hispanic	3914	4762	82.2%	1450	1797	80.7%	2137	2613	81.8%	6934	9087	76.3%	757	1287	58.8%	364	866	42.0%	576	808	71.3%
Other/Multiracial	775	891	87.0%	135	186	72.6%	167	199	83.9%	707	873	81.0%	93	152	61.2%	194	352	55.1%	281	355	79.2%
White	76926	89256	86.2%	11473	15373	74.6%	13344	18262	73.1%	58505	79254	73.8%	12703	20282	62.6%	7173	15193	47.2%	10816	14509	74.5%
Unknown/Declined	3959	4850	81.6%	868	1218	71.3%	2108	2830	74.5%	4381	5783	75.8%	3306	4984	66.3%	526	1107	47.5%	840	1092	76.9%
Total	138165	165350	83.6%	21460	28970	74.1%	26015	34875	74.6%	103671	140858	73.6%	22255	38304	58.1%	13456	30168	44.6%	21738	28928	75.1%

Table 4. Breast Cancer Screening by Race/Ethnicity

Race	Michigan M	edicaid Manaç Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	59	130	45.4%	-12.6%	0.78	Below	NS	
Asian American	115	195	59.0%	1.0%	1.02	NS	NS	
African American	9260	16629	55.7%	-2.3%	0.96	Below	Above	
Hispanic	456	785	58.1%	0.1%	1.00	NS	Above	
Other/Multiracial	186	303	61.4%	3.4%	1.06	NS	Above	
White	12439	21438	58.0%	Reference	Reference	Reference	Above	
Unknown/Declined	429	753	57.0%	-1.1%	0.98	NS	Above	
All Plan	22954	40250	57.0%	-1.0%	0.98	NS	Above	

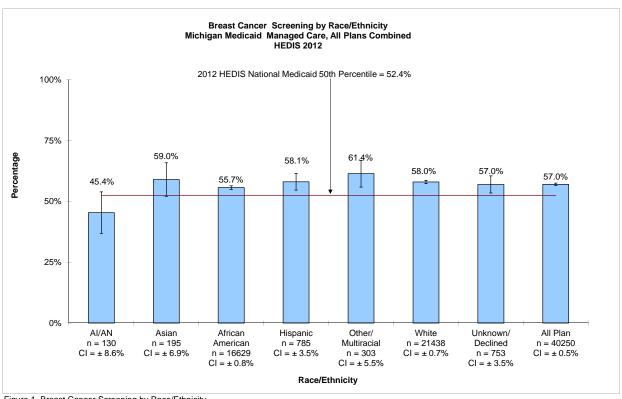


Figure 1. Breast Cancer Screening by Race/Ethnicity

Race	Michigan M	edicaid Manag Plans	ged Care All	Ref=\	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	162	276	58.7%	-7.7%	0.88	Below	Below	
Asian American	205	317	64.7%	-1.8%	0.97	NS	NS	
African American	36466	54194	67.3%	0.8%	1.01	Above	Below	
Hispanic	2372	3398	69.8%	3.4%	1.05	Above	NS	
Other/Multiracial	695	1121	62.0%	-4.4%	0.93	Below	Below	
White	47416	71364	66.4%	Reference	Reference	Reference	Below	
Unknown/Declined	1861	3374	55.2%	-11.3%	0.83	Below	Below	
All Plan	89177	134044	66.5%	0.1%	1.00	NS	Below	

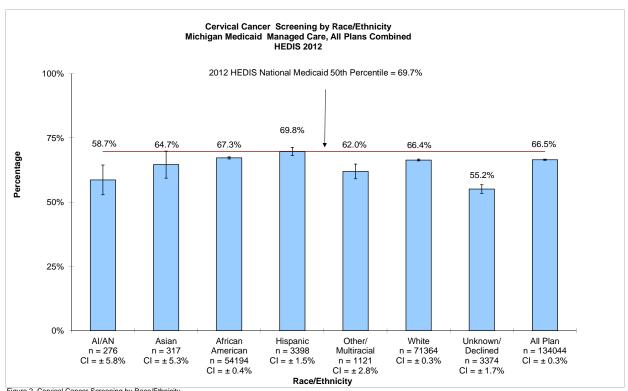


Figure 2. Cervical Cancer Screening by Race/Ethnicity

Table 6. Chlamydia Screening by Race/Ethnicity

Race	Michigan M	edicaid Manaç Plans	ged Care All	Ref=\	White	Statistically Significant Difference		
Nace	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	30	57	52.6%	-3.5%	0.94	NS	NS	
Asian American	71	133	53.4%	-2.8%	0.95	NS	NS	
African American	17486	23762	73.6%	17.4%	1.31	Above	Above	
Hispanic	1256	1943	64.6%	8.5%	1.15	Above	Above	
Other/Multiracial	93	150	62.0%	5.9%	1.10	NS	NS	
White	13978	24898	56.1%	Reference	Reference	Reference	Below	
Unknown/Declined	875	1421	61.6%	5.4%	1.10	Above	Above	
All Plan	33789	52365	64.5%	8.4%	1.15	Above	Above	

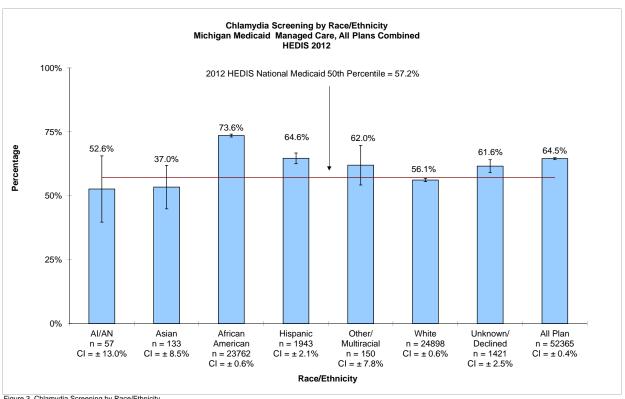


Figure 3. Chlamydia Screening by Race/Ethnicity

Table 7. HbA1C Testing by Race/Ethnicity

Race	Michigan M	edicaid Manag Plans	ged Care All	Ref=\	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	73	95	76.8%	-3.4%	0.96	NS	NS	
Asian American	161	200	80.5%	0.3%	1.00	NS	NS	
African American	9069	12337	73.5%	-6.7%	0.92	Below	Below	
Hispanic	647	866	74.7%	-5.5%	0.93	Below	Below	
Other/Multiracial	295	352	83.8%	3.6%	1.04	NS	NS	
White	12188	15193	80.2%	Reference	Reference	Reference	Below	
Unknown/Declined	858	1107	77.5%	-2.7%	0.97	NS	Below	
All Plan	23296	30158	77.2%	-3.0%	0.96	Below	Below	

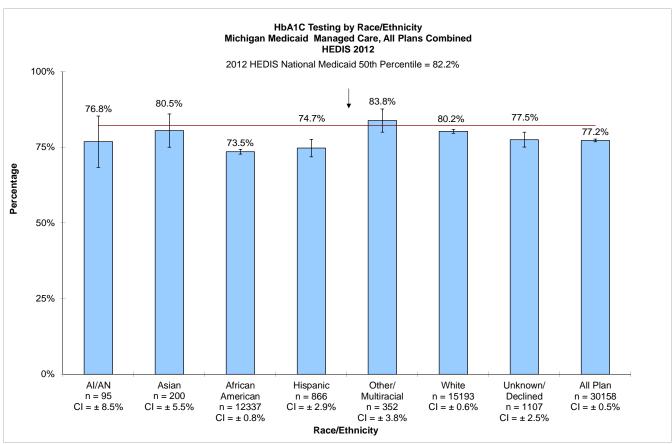


Figure 4. HbA1C Testing by Race/Ethnicity

Table 8. Childhood Immunization Combo 3 by Race/Ethnicity

Race	Michigan M	edicaid Manag Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	45	60	75.0%	1.0%	1.01	NS	NS	
Asian American	143	190	75.3%	1.2%	1.02	NS	NS	
African American	6734	10682	63.0%	-11.0%	0.85	Below	Below	
Hispanic	2046	2609	78.4%	4.4%	1.06	Above	Above	
Other/Multiracial	165	198	83.3%	9.3%	1.13	Above	Above	
White	13508	18248	74.0%	Reference	Reference	Reference	Above	
Unknown/Declined	1981	2828	70.0%	-4.0%	0.95	Below	NS	
All Plan	24624	34819	70.7%	-3.3%	0.96	Below	NS	

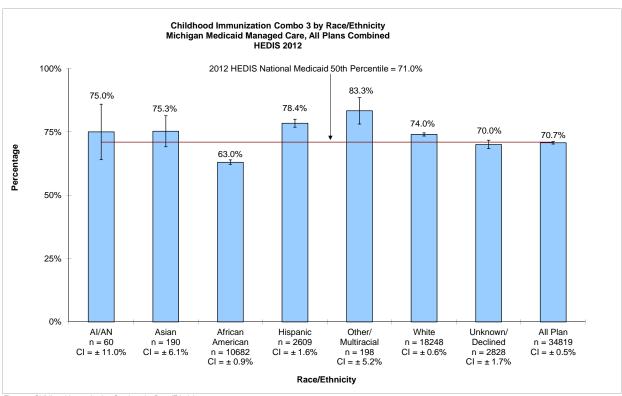


Figure 5. Childhood Immunization Combo 3 by Race/Ethnicity

Race	,	edicaid Manag	•	Ref=\	White	Statistically Significant Difference		
Nace	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	26	31	83.9%	-1.8%	0.98	NS	NS	
Asian American	69	76	90.8%	5.1%	1.06	NS	NS	
African American	5049	6269	80.5%	-5.2%	0.94	Below	Below	
Hispanic	527	606	87.0%	1.3%	1.01	NS	NS	
Other/Multiracial	89	95	93.7%	8.0%	1.09	Above	NS	
White	6665	7777	85.7%	Reference	Reference	Reference	Below	
Unknown/Declined	390	431	90.5%	4.8%	1.06	Above	NS	
All Plan	12815	15285	83.8%	-1.9%	0.98	Below	Below	

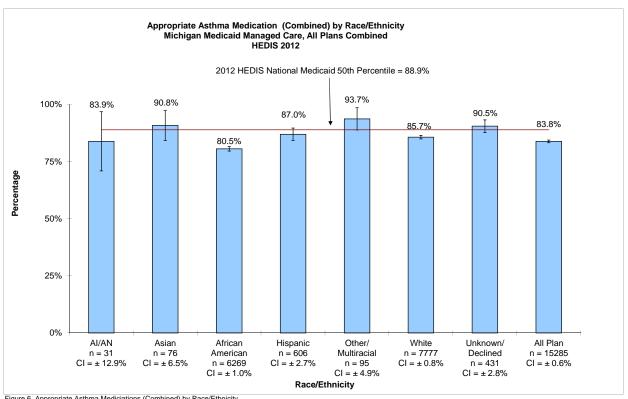


Table 10. Childhood Access to Care (25 months to 6 years) by Race/Ethnicity

Race	Michigan M	edicaid Manag Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	199	215	92.6%	-0.2%	1.00	NS	NS	
Asian American	979	1061	92.3%	-0.4%	1.00	NS	Above	
African American	45441	52886	85.9%	-6.8%	0.93	Below	Below	
Hispanic	9775	10600	92.2%	-0.5%	0.99	NS	Above	
Other/Multiracial	986	1053	93.6%	0.9%	1.01	NS	Above	
White	84270	90894	92.7%	Reference	Reference	Reference	Above	
Unknown/Declined	5794	6334	91.5%	-1.2%	0.99	Below	Above	
All Plan	147451	163050	90.4%	-2.3%	0.98	Below	Above	

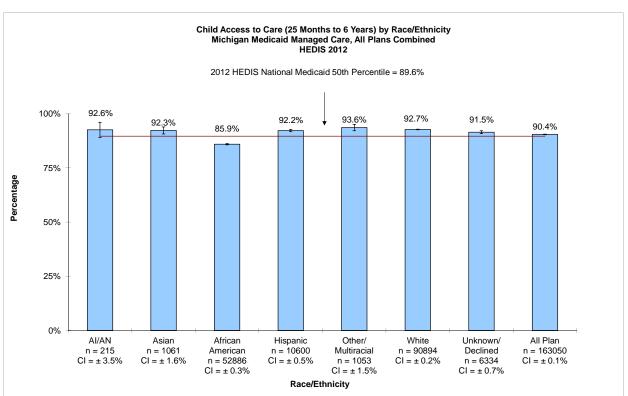


Figure 7. Childhood Access to Care (25 months to 6 years) by Race/Ethnicity

Race	Michigan M	edicaid Manag Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	251	303	82.8%	-3.3%	0.96	NS	NS	
Asian American	663	818	81.1%	-5.1%	0.94	Below	NS	
African American	51667	64456	80.2%	-6.0%	0.93	Below	Below	
Hispanic	3914	4762	82.2%	-4.0%	0.95	Below	NS	
Other/Multiracial	775	891	87.0%	0.8%	1.01	NS	Above	
White	76926	89256	86.2%	Reference	Reference	Reference	Above	
Unknown/Declined	3959	4850	81.6%	-4.6%	0.95	Below	Below	
All Plan	138165	165350	83.6%	-2.6%	0.97	Below	Above	

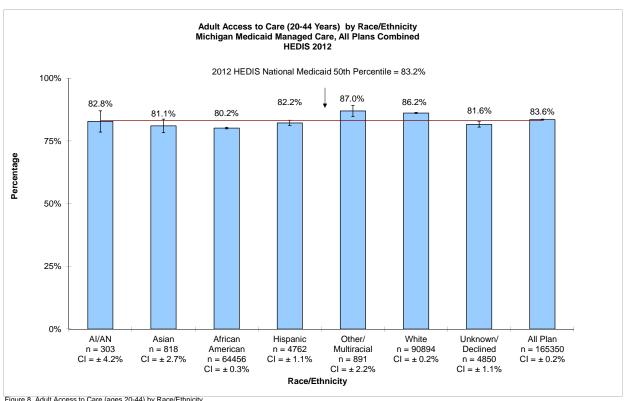


Figure 8. Adult Access to Care (ages 20-44) by Race/Ethnicity

Table 12. Adolescent Immunizations by Race/Ethnicity

Race	Michigan M	ledicaid Manag Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	44	54	81.5%	6.9%	1.09	NS	Above	
Asian American	139	185	75.1%	0.5%	1.01	NS	Above	
African American	7350	10156	72.4%	-2.3%	0.97	Below	Above	
Hispanic	1450	1797	80.7%	6.1%	1.08	Above	Above	
Other/Multiracial	135	186	72.6%	-2.1%	0.97	NS	Above	
White	11473	15373	74.6%	Reference	Reference	Reference	Above	
Unknown/Declined	868	1218	71.3%	-3.4%	0.95	Below	Above	
All Plan	21460	28970	74.1%	-0.6%	0.99	NS	Above	

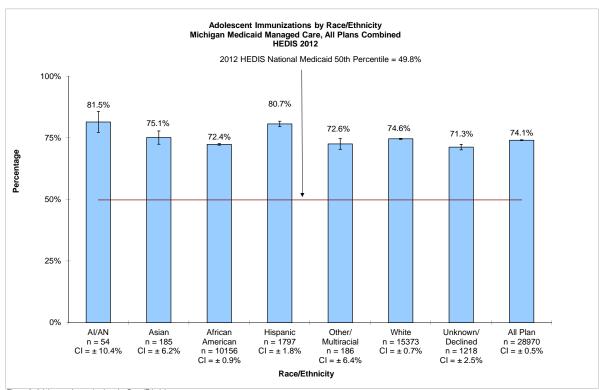


Table 13. Lead Screening by Race/Ethnicity

Race	Michigan M	ledicaid Manaç Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	48	60	80.0%	6.9%	1.09	NS	NS	
Asian American	149	190	78.4%	5.4%	1.07	NS	Above	
African American	8059	10717	75.2%	2.1%	1.03	Above	Above	
Hispanic	2137	2613	81.8%	8.7%	1.12	Above	Above	
Other/Multiracial	167	199	83.9%	10.8%	1.15	Above	Above	
White	13344	18262	73.1%	Reference	Reference	Reference	Above	
Unknown/Declined	2108	2830	74.5%	1.4%	1.02	NS	Above	
All Plan	26015	34875	74.6%	1.5%	1.02	Above	Above	

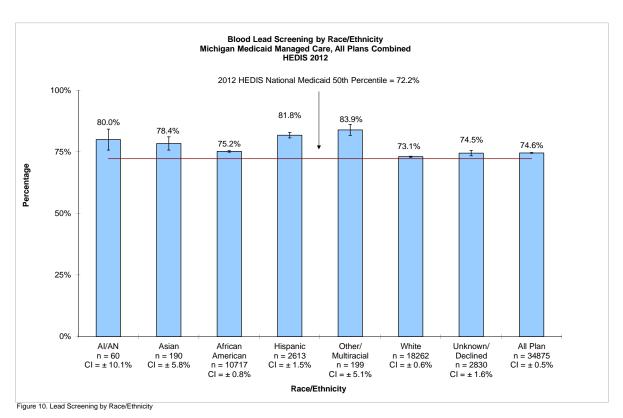


table 14. Well Child Visits (3-6 years) by Race/Ethnicity

Race	Michigan M	edicaid Manag Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	109	165	66.1%	-7.8%	0.89	Below	NS	
Asian American	682	875	77.9%	4.1%	1.06	Above	Above	
African American	32347	44815	72.2%	-1.6%	0.98	Below	NS	
Hispanic	6934	9087	76.3%	2.5%	1.03	Above	Above	
Other/Multiracial	707	873	81.0%	7.2%	1.10	Above	Above	
White	58505	79254	73.8%	Reference	Reference	Reference	Above	
Unknown/Declined	4381	5783	75.8%	1.9%	1.03	Above	Above	
All Plan	103671	140858	73.6%	-0.2%	1.00	NS	Above	

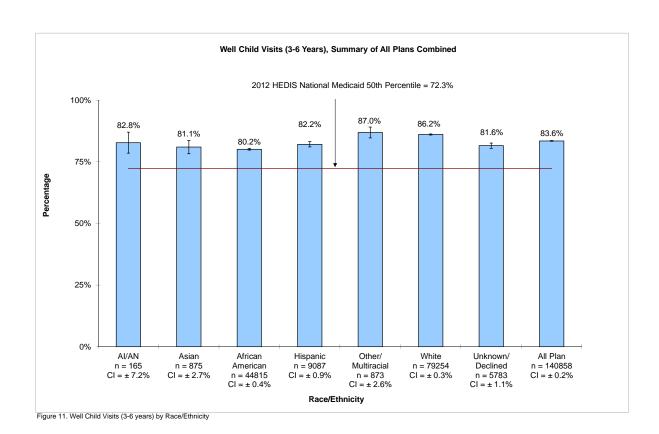


Table 15. Post-Partum Care by Race/Ethnicity

Race	Michigan M	ledicaid Manaç Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num Den %		Diffe- rence	Ratio	From White	From 50th Percentile		
American Indian/ Alaska Native	20	37	54.1%	-8.6%	0.86	NS	NS	
Asian American	113	198	57.1%	-5.6%	0.91	NS	Below	
African American	5260	11356	46.3%	-16.3%	0.74	Below	Below	
Hispanic	757	1287	58.8%	-3.8%	0.94	Below	Below	
Other/Multiracial	93	152	61.2%	-1.4%	0.98	NS	NS	
White	12703	20282	62.6%	Reference	Reference	Reference	Below	
Unknown/Declined	3306	4984	66.3%	3.7%	1.06	Above	Above	
All Plan	22255	38304	58.1%	-4.5%	0.93	Below	Below	

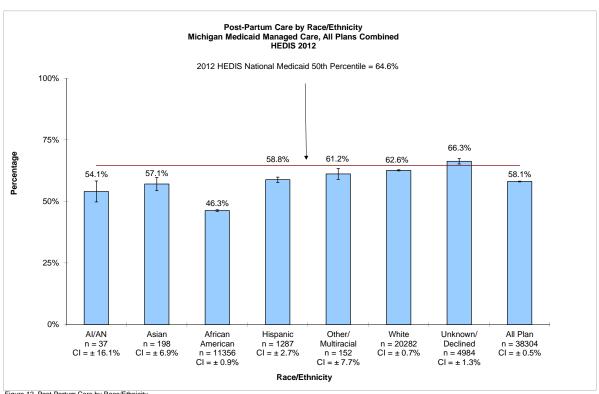


Table 16. Diabetic Eye Exam by Race/Ethnicity

Race	Michigan M	edicaid Manaç Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	50	95	52.6%	5.4%	1.11	NS	NS	
Asian American	84	200	42.0%	-5.2%	0.89	NS	Below	
African American	5062	12347	41.0%	-6.2%	0.87	Below	Below	
Hispanic	364	866	42.0%	-5.2%	0.89	Below	Below	
Other/Multiracial	194	352	55.1%	7.9%	1.17	NS	NS	
White	7173	15193	47.2%	Reference	Reference	Reference	Below	
Unknown/Declined	526	1107	47.5%	0.3%	1.01	NS	Below	
All Plan	13456	30168	44.6%	-2.6%	0.94	Below	Below	

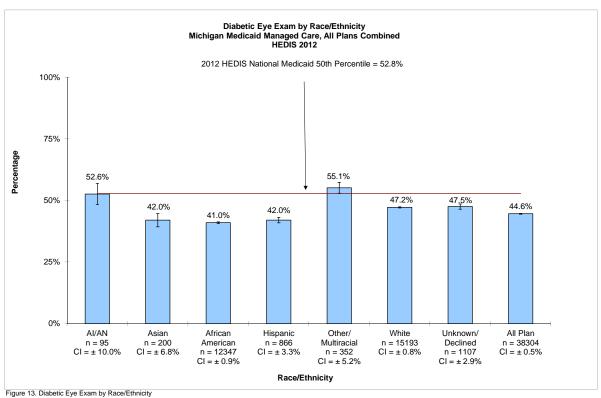


Table 17. Diabetic Nephropathy by Race/Ethnicity

Race	Michigan M	ledicaid Manaç Plans	ged Care All	Ref=	White	Statistically Significant Difference		
Race	Num	Den	%	Diffe- rence	Ratio	From White	From 50th Percentile	
American Indian/ Alaska Native	74	88	84.1%	9.5%	1.13	Above	NS	
Asian American	146	202	72.3%	-2.3%	0.97	NS	NS	
African American	9000	11867	75.8%	1.3%	1.02	NS	Below	
Hispanic	576	808	71.3%	-3.3%	0.96	NS	Below	
Other/Multiracial	281	355	79.2%	4.6%	1.06	NS	NS	
White	10816	14509	74.5%	Reference	Reference	Reference	Below	
Unknown/Declined	840	1092	76.9%	2.4%	1.03	NS	NS	
All Plan	21738	28928	75.1%	0.6%	1.01	NS	Below	

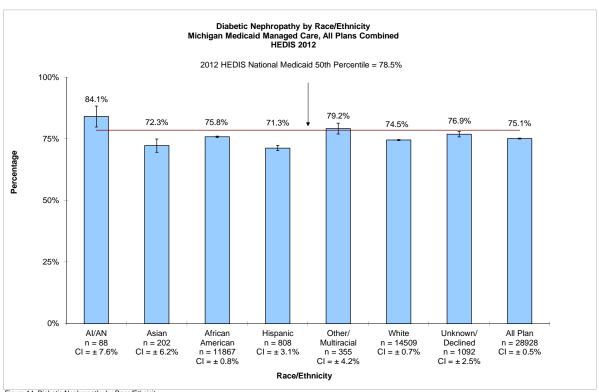


Figure 14. Diabetic Nephropathy by Race/Ethnicity

Table 18. Michigan Medicaid Managed Care Select HEDIS 2012 Measures for Race/Ethnicity. African American, Hispanic/Latino, White only.

Race/Ethnicity*	Breast	Cancer Sc	reening	Cervica	I Cancer Sc	reening	Chlar	nydia Scre	ening	Н	bA1C Testi	ng	Childho	od Immns	Combo 3	Appropriat	e Asthma	Meds Total	Access to	Care 25 mo	onths-6 yrs
Race/Ethinicity	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%
African American	9260	16629	55.7%	36466	54194	67.3%	17486	23762	73.6%	9069	12337	73.5%	6734	10682	63.0%	5049	6269	80.5%	45441	52886	85.9%
Hispanic	456	785	58.1%	2372	3398	69.8%	1256	1943	64.6%	647	866	74.7%	2046	2609	78.4%	527	606	87.0%	9775	10600	92.2%
White	12439	21438	58.0%	47416	71364	66.4%	13978	24898	56.1%	12188	15193	80.2%	47416	71364	66.4%	6665	7777	85.7%	84270	90894	92.7%
Race/Ethnicity	Access	s to Care 22	2-44 yrs	Adoleso	ent Immun	izations	Le	ad Screeni	ing	Well C	hild Visits	3-6 yrs	Pos	t-Partum C	are	Diak	etic Eye E	xam	Diabe	tic Nephro	pathy
Race/Etillicity	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%	Num	Den	%
African American	51667	64456	80.2%	7350	10156	72.4%	8059	10717	75.2%	32347	44815	72.2%	5260	11356	46.3%	5062	12347	41.0%	9000	11867	75.8%
Hispanic	3914	4762	82.2%	1450	1797	80.7%	2137	2613	81.8%	6934	9087	76.3%	757	1287	58.8%	364	866	42.0%	576	808	71.3%
White	76926	89256	86.2%	11473	15373	74.6%	13344	18262	73.1%	58505	79254	73.8%	12703	20282	62.6%	7173	15193	47.2%	10816	14509	74.5%

Table 19. Rate Differences. White, African American, and Hispanic/Latino.

Measure	2012 White Rate	2012 African American Rate	Rate Difference	2012 Hispanic/ Latino Rate	Rate Difference
Breast Cancer Screening	58.0%	55.7%	-2.3%	58.1%	0.1%
Cervical Cancer Screening	66.4%	67.3%	0.8%	69.8%	3.4%
Chlamydia Screening	56.1%	73.6%	17.4%	64.6%	8.5%
HbA1C Testing for Diabetes	80.2%	73.5%	-6.7%	74.7%	-5.5%
Childhood Immns Combo 3	74.0%	63.0%	-11.0%	78.4%	4.4%
Appropriate Asthma Meds	85.7%	80.5%	-5.2%	87.0%	1.3%
Access to Care 25 months-6 yrs	92.7%	85.9%	-6.8%	92.2%	-0.5%
Access to Care 22-44 yrs	86.2%	80.2%	-6.0%	82.2%	-4.0
Adolescent Immunizations	74.6%	72.4%	-2.3%	80.7%	6.1%
Lead Screening	73.1%	75.2%	2.1%	81.8%	8.7%
Well Child Visits 3-6 yrs	73.8%	72.2%	-1.6%	76.3%	2.5%
Post-Partum Care	62.6%	46.3%	-16.3%	58.8%	-3.8%
Diabetic Eye Exam	47.2%	41.0%	-6.2%	42.0%	-5.2%
Diabetic Nephropathy	74.5%	75.8%	1.3%	71.3%	-3.3%

Yellow = Rate is significantly below White population Orange = Rate is significantly above White population Notes: Confidence Intervals

All Plans

Table 20. Breast Cancer Screening by Race/Ethnicity

Race/Ethnicity	%	Confide	nce Interval		
Breast Cancer Screening		Lower Limit	Upper Limit		
American Indian/ Alaska Native	45.4%	36.8%	53.9%		
Asian American	59.0%	52.1%	65.9%		
African American	55.7%	54.9%	56.4%		
Hispanic	58.1%	54.6%	61.5%		
Other/Multiracial	61.4%	55.9%	66.9%		
White	58.0%	57.4%	58.7%		
Unknown/Declined	57.0%	53.4%	60.5%		
All Plan	57.0%	56.5%	57.5%		
2012 HEDIS National Medicaid 50th Percentile	52.4%		N/A		
Cervical Cancer Screening		Lower Limit	Upper Limit		
American Indian/ Alaska Native	58.7%	52.9%	64.5%		
Asian American	64.7%	59.4%	69.9%		
African American	67.3%	66.9%	67.7%		
Hispanic	69.8%	68.3%	71.3%		
Other/Multiracial	62.0%	59.2%	64.8%		
White	66.4%	66.1%	66.8%		
Unknown/Declined	55.2%	53.5%	56.8%		
All Plan	66.5%	66.3%	66.8%		
2012 HEDIS National Medicaid 50th Percentile	69.7%		N/A		
Chlamydia Screening		Lower Limit	Upper Limit		
American Indian/ Alaska Native	52.6%	39.7%	65.6%		
Asian American	53.4%	44.9%	61.9%		
African American	73.6%	73.0%	74.1%		
Hispanic	64.6%	62.5%	66.8%		
Other/Multiracial	62.0%	54.2%	69.8%		
White	56.1%	55.5%	56.8%		
Unknown/Declined	61.6%	59.0%	64.1%		
All Plan	64.5%	64.1%	64.9%		
2012 HEDIS National Medicaid 50th Percentile	57.2%		N/A		
HbA1C Testing		Lower Limit	Upper Limit		
American Indian/ Alaska Native	76.8%	68.4%	85.3%		
Asian American	80.5%	75.0%	86.0%		
African American	73.5%	72.7%	74.3%		
Hispanic	74.7%	71.8%	77.6%		
Other/Multiracial	83.8%	80.0%	87.7%		
White	80.2%	79.6%	80.9%		
Unknown/Declined	77.5%	75.0%	80.0%		
All Plan	77.2%	76.8%	77.7%		
2012 HEDIS National Medicaid 50th Percentile	82.2%	N/A			

Childhood Immunizations Combo 3		Lower Limit	Upper Limit
American Indian/ Alaska Native	75.0%	64.0%	86.0%
Asian American	75.3%	69.1%	81.4%
African American	63.0%	62.1%	64.0%
Hispanic	78.4%	76.8%	80.0%
Other/Multiracial	83.3%	78.1%	88.5%
White	74.0%	73.4%	74.7%
Unknown/Declined	70.0%	68.4%	71.7%
All Plan	70.7%	70.2%	71.2%
2012 HEDIS National Medicaid 50th Percentile	71.0%		l/A
Appropriate Asthma Medications		Lower Limit	Upper Limit
American Indian/ Alaska Native	83.9%	70.9%	96.8%
Asian American	90.8%	84.3%	97.3%
African American	80.5%	79.6%	81.5%
Hispanic	87.0%	84.3%	89.6%
Other/Multiracial	93.7%	88.8%	98.6%
White	85.7%	84.9%	86.5%
Unknown/Declined	90.5%	87.7%	93.3%
All Plan	83.8%	83.3%	84.4%
2012 HEDIS National Medicaid 50th Percentile	88.9%	N	I/A
Child Access to Care (25mos - 6yrs)		Lower Limit	Upper Limit
American Indian/ Alaska Native	92.6%	89.0%	96.1%
Asian American	92.3%	90.7%	93.9%
African American	85.9%	85.6%	86.2%
Hispanic	92.2%	91.7%	92.7%
Other/Multiracial	93.6%	92.2%	95.1%
White	92.7%	92.5%	92.9%
Unknown/Declined	91.5%	90.8%	92.2%
All Plan	90.4%	90.3%	90.6%
2012 HEDIS National Medicaid 50th Percentile	89.6%	N	I/A
Adult Access to Care (20-44 years)		Lower Limit	Upper Limit
American Indian/ Alaska Native	82.8%	78.6%	87.1%
Asian American	81.1%	78.4%	83.7%
African American	80.2%	79.9%	80.5%
Hispanic	82.2%	81.1%	83.3%
Other/Multiracial	87.0%	84.8%	89.2%
White	86.2%	86.0%	86.4%
Unknown/Declined	81.6%	80.5%	82.7%
All Plan	83.6%	83.4%	83.7%
2012 HEDIS National Medicaid 50th Percentile	83.2%		I/A
Adolescent Immunizations Combo 1		Lower Limit	Upper Limit
American Indian/ Alaska Native	81.5%	71.1%	91.8%
Asian American	75.1%	68.9%	81.4%
African American	72.4%	71.5%	73.2%
Hispanic	80.7%	78.9%	82.5%
Other/Multiracial	72.6%	66.2%	79.0%
White	74.6%	73.9%	75.3%
Unknown/Declined	71.3%	68.7%	73.8%
All Plan	74.1%	73.6%	74.6%
2012 HEDIS National Medicaid 50th Percentile	49.8%	l N	I/A

Blood Lead Screening		Lower Limit	Upper Limit
American Indian/ Alaska Native	80.0%	69.9%	90.1%
Asian American	78.4%	72.6%	84.3%
African American	75.2%	74.4%	76.0%
Hispanic	81.8%	80.3%	83.3%
Other/Multiracial	83.9%	78.8%	89.0%
White	73.1%	72.4%	73.7%
Unknown/Declined	74.5%	72.9%	76.1%
All Plan	74.6%	74.1%	75.1%
2012 HEDIS National Medicaid 50th Percentile	72.2%	N	l/A
Well Child Visits 3-6 years		Lower Limit	Upper Limit
American Indian/ Alaska Native	66.1%	58.8%	73.3%
Asian American	77.9%	75.2%	80.7%
African American	72.2%	71.8%	72.6%
Hispanic	76.3%	75.4%	77.2%
Other/Multiracial	81.0%	78.4%	83.6%
White	73.8%	73.5%	74.1%
Unknown/Declined	75.8%	74.7%	76.9%
All Plan	73.6%	73.4%	73.8%
2012 HEDIS National Medicaid 50th Percentile	72.3%	N	I/A
Post-Partum Care		Lower Limit	Upper Limit
American Indian/ Alaska Native	54.1%	38.0%	70.1%
Asian American	57.1%	50.2%	64.0%
African American	46.3%	45.4%	47.2%
Hispanic	58.8%	56.1%	61.5%
Other/Multiracial	61.2%	53.4%	68.9%
White	62.6%	62.0%	63.3%
Unknown/Declined	66.3%	65.0%	67.6%
All Plan	58.1%	57.6%	58.6%
2012 HEDIS National Medicaid 50th Percentile	64.6%	N	I/A
Diabetic Eye Exam		Lower Limit	Upper Limit
American Indian/ Alaska Native	52.6%	42.6%	62.7%
Asian American	42.0%	35.2%	48.8%
African American	41.0%	40.1%	41.9%
Hispanic	42.0%	38.7%	45.3%
Other/Multiracial	55.1%	49.9%	60.3%
White	47.2%	46.4%	48.0%
Unknown/Declined	47.5%	44.6%	50.5%
All Plan	44.6%	44.0%	45.2%
2012 HEDIS National Medicaid 50th Percentile	52.8%	N	I/A
Diabetic Nephropathy		Lower Limit	Upper Limit
American Indian/ Alaska Native	84.1%	76.4%	91.7%
Asian American	72.3%	66.1%	78.5%
African American	75.8%	75.1%	76.6%
Hispanic	71.3%	68.2%	74.4%
Other/Multiracial	79.2%	74.9%	83.4%
White	74.5%	73.8%	75.3%
Unknown/Declined	76.9%	74.4%	79.4%
All Plan	75.1%	74.6%	75.6%
2012 HEDIS National Medicaid 50th Percentile	78.5%	N	I/A