



Behavioral and Physical Health and
Aging Services Administration

Medicaid Health Equity Project Report on MY 2022 Data All Medicaid Health Plans

December 2024

**Quality Improvement and Program Development Section
Medicaid Managed Care Plan Division**

This report was produced by
Center for Precision Public Health (CPPH), previously Center for Data
Management and Translational Research (CDMTR) at
Michigan Public Health Institute (MPHI)

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Introduction

Health and health care disparities refer to differences in health and health care between groups that stem from broader social and economic inequities. The United States has a long history of exclusionary policies and events that have driven and continue to contribute to racial and ethnic disparities in health today. Reducing racial and ethnic disparities in health and health care is important from an equity standpoint and for improving the nation's overall health and economic prosperity.¹

The Kellogg Foundation's 2018 report "The Business Case for Racial Equity: Michigan" estimates that disparities in health in Michigan represent \$2.2 billion in excess medical care costs, \$1.9 billion in untapped productivity, and 140,000 lost life years associated with premature death per year. By 2050, 40% of the workforce and consumers in Michigan will be people of color. Eliminating health disparities by 2050 would reduce the need for \$2.5 billion in medical care costs, reduce lost productivity by \$2.6 billion, and save 170,000 life years. Achieving health equity requires eliminating gaps in access to healthcare, the quality of care, and, most importantly, the social and environmental determinants of health.²

This commitment to reducing disparities is codified in federal and state law. Michigan Medicaid is required to monitor the quality and appropriateness of the healthcare services delivered by the participating Medicaid Health Plans (MHPs) to their Medicaid enrollees. Both federal and state laws address the need to reduce racial and ethnic disparities in healthcare and outcomes. 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."³ The Affordable Care Act (ACA) includes language that prohibits discrimination under any health program or activity that is receiving federal financial assistance.⁴ The ACA also includes improved federal data collection efforts by ensuring that federal healthcare programs collect and report data on race, ethnicity, sex, primary language, and disability status.⁵ On a state level, Michigan Public Act 653 of 2006 directs the Michigan Department of Health and Human Services (MDHHS) to develop strategies to reduce racial and ethnic disparities, including the compilation of racial and ethnic-specific data.⁶

Background

Michigan Medicaid has prioritized identifying and reducing disparity for many years. In 2005, Michigan Medicaid participated in the Center for Health Care Strategies' (CHCS) Practice Size Exploratory Project, with MHPs and providers identifying racial/ethnic disparities in several measures. In 2008, Michigan Medicaid received a grant by CHCS (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 introducing the Patient Centered Medical Home. Diabetic-related HEDIS (Healthcare Effectiveness Data and Information Set) measures were tracked by race/ethnicity across time at the participating practices. Between 2008 and 2010, MHPs were required to conduct annual Performance Improvement Projects (PIPs) aimed at reducing identified disparity in one quality measure. Since 2015, all MHPs have focused their PIP efforts on reducing racial/ethnic disparities in timely prenatal care. The Medicaid Health Equity Project is the next step in the state's strategy to identify and reduce health disparities in Medicaid.

The Medicaid Health Equity Project was developed by the Quality Improvement and Program Development Section of the Medicaid Managed Care Plan Division. In early 2010, all MHPs participated in conference calls to frame the problem of disparities in care and plan the project. MHPs provided input and advice in developing the methodology. Initially, eight measures were agreed upon, and specifications were developed. MHPs submitted data in 2011 for measurement year 2010. The data were analyzed and reported in both all-plan and plan-specific reports. Six more measures were added the next year, totaling 14 measures across four health domains. One measure (Appropriate Asthma Medications-Combined) was retired from HEDIS 2016 reporting. The remaining 13 measures were reported for measurement years 2015 to 2019. Starting from measurement year 2020, two measures (Children and Adolescents' Access to PCP 25 Months-6 Years and Comprehensive Diabetes Care-Medical Attention for Nephropathy) were removed due to low-level disparity since measurement year 2011; one measure (Well Child Visits 3-6 Years) was replaced by Child and Adolescent Well-Care Visits 3-11 years. Starting from measurement year 2022, the Comprehensive Diabetes Care-HbA1c testing measure was replaced by two diabetes measures: Hemoglobin A1c Control for Diabetes and Hemoglobin A1c Poor Control for Diabetes.

Methods

Measures and Data Submission

To ensure consistent quality of care measurement across Medicaid Health Plans (MHPs) and facilitate state comparisons, MHPs submit audited HEDIS data to MDHHS for each measure that pertains to Medicaid-covered benefits. MHPs submit the HEDIS measures broken down by race/ethnicity using a standardized template to ensure consistency across all plan submissions. While the total numerators and denominators for each measure are audited, the race/ethnicity breakdowns are not. All template totals match those reported in the HEDIS Interactive Data Submission System (IDSS).

Starting from measurement year 2020, the measurement year (MY) is used throughout the Health Equity reports instead of the data submission year (the year following the measurement year) used in prior years.

Race/ethnicity data are collected from Medicaid enrollment forms, which use self-identification to determine race and ethnicity. This information is shared with MHPs in the monthly eligibility file that transmits the new members assigned to each plan. MHPs may also use supplementary systems to acquire this information, such as retrieving it from Electronic Medical Records systems in their provider network. However, the majority of these data are obtained during the Medicaid enrollment process and provided to MHPs by MDHHS.

Measures are stratified for four racial populations: Asian American/Native Hawaiian/Other Pacific Islander (AANHUPI), African American, American Indian/Alaska Native (AIAN), and white, along with one ethnicity: Hispanic. Any reference to Hispanic, except when race is AANHUPI or AIAN, is categorized into the Hispanic population. Unknown, declined, other race/ethnicity, or multiracial population is categorized as unknown due to inconsistent use across MHPs.

All HEDIS measures are calculated in accordance with specifications provided by the National Committee for Quality Assurance (NCQA).⁷ [Table 1](#) lists the twelve HEDIS measures included in this report.

Table 1: List of HEDIS Measures Reported

Health Domain	Measure	Abbreviation	Reported Since
Women - Adult Care and Pregnancy Care	Breast Cancer Screening	BCS	2010
Women - Adult Care and Pregnancy Care	Cervical Cancer Screening	CCS	2010
Women - Adult Care and Pregnancy Care	Chlamydia Screening in Women - Total	CHL	2010
Women - Adult Care and Pregnancy Care	Postpartum Care	PPC	2011
Child and Adolescent Care	Childhood Immunization Status - Combination 3	CIS	2010
Child and Adolescent Care	Immunizations for Adolescents - Combination 1	IMA	2011
Child and Adolescent Care	Lead Screening in Children	LSC	2011
Child and Adolescent Care	Child and Adolescent Well-Care Visits (3-11 years)	WCV	2020
Access to Care	Adults' Access to Preventive/Ambulatory Health Services (20-44 years)	AAP	2010
Living with Illness	Hemoglobin A1c Control for Diabetes	HBD8	2022
Living with Illness	Hemoglobin A1c Poor Control for Diabetes	HBD9	2022
Living with Illness	Eye Exam for Patients with Diabetes	EED	2011
Health Plan Diversity	Race/Ethnicity Diversity of Membership	RDM	2010

Data Suppression

Data are considered insufficient, and results are suppressed if:

- *The Numerator*: Number of those who received services is less than 5, or
- *The Remainder*: Number of those who did not receive services is less than 5, or
- *The Denominator*: Size of the population under consideration is less than 30

Pairwise Disparity

Pairwise disparities are measured between a subpopulation and the reference population,

calculated on both absolute and relative scales using the following formulas:

Absolute Disparity (Difference) = Subpopulation Estimate - Reference Estimate

Relative Disparity (Ratio) = Subpopulation Estimate/Reference Estimate

The white population is chosen as the reference population due to its size and sufficient data availability across all MHPs. Additionally, each racial/ethnic population is compared to the HEDIS national Medicaid 50th percentiles for the measurement year.

Two rates are declared significantly different if their 95% confidence intervals (CIs) do not overlap. A rate is significantly different from the HEDIS national Medicaid 50th percentile if the percentile falls outside the 95% CI of the rate. The 95% CIs are calculated using the following formula:

$$p \pm 1.96 * \sqrt{p(1 - p)/n}$$

p = proportion of the eligible population who received the service (numerator), n = number of people in the eligible population (denominator)

White, African American, and Hispanic beneficiaries make up more than 80% of the total Michigan Medicaid managed care population. Rates for these three populations, along with the total population, are tabled and charted for 2015-2022. Rates for a population in two adjacent years are considered significantly different if their 95% CIs do not overlap.

Population Disparity

Population disparity measures the overall disparity in the entire population for a specific measure by combining the disparities experienced by all subpopulations. This is estimated using the Index of Disparity (ID),⁸ which describes the average variation of subpopulation rates around the total population rate. The formula for ID is:

$$ID = (\sum|r(i) - R| / k) / R$$

r(i) = rate for subpopulation i, i=1 to k, R = rate for total population, k = number of subpopulations

ID is expressed as a percentage, with 0% indicating no disparity and higher values indicating greater disparity. An ID of 5% or less is considered a low-level disparity.

Results

Race/Ethnicity Diversity of Membership

The race/ethnicity diversity of the Michigan Medicaid managed care population (RDM) is presented in [Table 2](#). Data is drawn from the annual HEDIS Aggregate Report for Michigan Medicaid.⁹ Individuals included are Medicaid eligible and enrolled in Medicaid managed care for at least 11 months in the measurement year. In 2022, 55.14% of the population identified as white, 25.81% as African American, and 3.63% as Hispanic. All other racial/ethnic populations made up 2.4% of the population, and race/ethnicity was unknown for 16.65%.

Table 2: Racial/Ethnic Characteristics of Michigan Medicaid Managed Care Population

Category	Characteristic	Percentage of Managed Care Population
Race	American Indian/Alaska Native (AIAN)	0.86%
Race	Asian American/Native Hawaiian & Other Pacific Islander (AANHUPI)	1.54%
Race	African American	25.81%
Race	White	55.14%
Race	Unknown/Other/Declined	16.65%
Ethnicity	Hispanic	3.63%

Pairwise Disparity

Two types of comparisons are made: one between each non-white population and the white population (Table 3), and one between each racial/ethnic population and the HEDIS MY2022 national Medicaid 50th percentile (Table 4). In all measures, the African American population had significant disparities from the white population, as well as from the HEDIS 50th percentile. The comparison results with the white population are discussed in more detail below.

Women - Adult Care and Pregnancy Care

This domain contained two measures where African Americans had significantly higher rates than Whites in Cervical Cancer Screening (CCS) and Chlamydia Screening in Women (CHL) (Tables 5-8 and Figures 1-4). Significant differences for the measures in this domain are described below:



BCS (Breast Cancer Screening):
Lower for African Americans by 2.8 percentage points, but higher for Hispanics by 2.29 percentage points



CHL: Higher for African Americans by 18.49, for Hispanics by 8.2, and for AIAN by 5.41 percentage points



CCS: Higher for Hispanics by 5.27, for African Americans by 1.42, and for AANHUPI by 1.35 percentage points



PPC (Postpartum Care): Lower for African Americans by 11.52 percentage points

Child and Adolescent Care

The rate for African Americans was lower in every measure in this domain: Childhood Immunizations Status (CIS), Immunizations for Adolescents (IMA), Lead Screening for Children (LSC), and Child and Adolescent Well-Care Visits 3-11 years (WCV) (Tables 9-12 and Figures 5-8). Significant differences for these measures are described below:



CIS: Lower for African Americans by 11.25, but higher for AANHUPI by 11.73 and for Hispanics by 2.93 percentage points



WCV: Lower for African Americans by 7.22 and for AIAN by 3.01, but higher for AANHUPI by 5.15 percentage points



IMA: Lower for African Americans by 4.26, but higher for Hispanics by 5.46 percentage points



LSC: Lower for African Americans by 3.15, but higher for Hispanics by 9.01 and for AANHUPI by 7.56 percentage points

Access to Care

The rate for African Americans was lower in Adult Access to Care 20-44 years (AAP) ([Tables 13](#) and [Figures 9](#)). Significant differences for this measure are described below:



AAP: Lower for African Americans by 6.69 and for Hispanics by 2.73 percentage points

Living with Illness

African Americans had worse rates in all three Diabetes measures. Significant differences for these measures are described below ([Tables 14-16](#) and [Figures 10-12](#)):



HBD8 (Hemoglobin A1c Control for Diabetes): Lower for African Americans by 4.15 and for AIAN by 3.88 percentage points



EED (Eye Exam for Patients with Diabetes): Lower for African Americans by 5.08 percentage points



HBD9 (Hemoglobin A1c Poor Control for Diabetes): Worse for African Americans by 5.36, for AIAN by 4.48, and for AANHUPI by 2.55 percentage points

Measuring Inequity

Table 177 presents an absolute measure of disparity for the African American and Hispanic populations compared to the white population. Significant disparities were observed for African Americans across all twelve measures. African Americans exhibited significantly worse rates in ten measures, with the largest gaps in PPC and CIS, by 11.52 and 11.25 percentage points, respectively. However, African Americans had significantly higher rates in CCS and CHL, by 1.42 and 18.49 percentage points, respectively. The Hispanic population demonstrated significantly better rates in six measures, including three measures in the women-adult and pregnancy care domain (BCS by 2.29, CCS by 5.27, and CHL by 8.2 percentage points) and three measures in the child and adolescent care domain (CIS by 2.93, IMA by 5.46, and LSC by 9.01 percentage points). In one measure, Adult Access to Care, Hispanics had a significantly lower rate by 2.73 percentage points.

Trends in Health Equity

Table 18 presents the rates from 2015-2022 for the white, African American, Hispanic and total Medicaid managed care populations (see Appendix B for rates from 2011-2022). These tables also indicate whether there was a significant increase or decrease from year to year. Figures 13-24 graph the rates over time for these populations, along with the HEDIS MY2022 national Medicaid 50th percentiles. Notably, in 2022:

- There was either a significant increase or no change from 2011 in six measures reported in 2021, including BCS, PPC, CHL, IMA, WCV, and EED across all the four populations.
- There was a significant decrease from 2021 in CCS and AAP across all four populations.

Population Disparity

The Index of Disparity (ID) (Table 199 and Figure 25) indicates that seven measures achieved low-level disparity ($ID \leq 5\%$) in 2022, three of which (CCS, IMA, and AAP) have maintained low-level disparity since 2015. The five measures with high-level ID ($>5\%$) in 2022 include CIS at 17.22%, LSC at 8.57%, CHL at 8.11%, PPC at 6.32%, and WCV at 6.08% (see Appendix C for Index of Disparity from 2011-2022).

Discussion

In 2022, the African American Medicaid managed care population had significantly worse rates than the white population in all measures except for Cervical Cancer Screening and Chlamydia Screening, where the African American population had significantly higher rates. The largest gaps between African American and white populations were in Chlamydia Screening (18.70 percentage points), Postpartum Care (-11.52 percentage points), and Childhood Immunization Status (-11.25 percentage points).

Limitations

The rates in this report may differ slightly from HEDIS rates published elsewhere in MDHHS documents as **this report is based solely on administrative data** from MHPs. Other HEDIS rates published by MDHHS may include rates derived using the hybrid method that allows for sampling and medical record abstraction. Additionally, due to refinements in the categorization of Asian American, Native Hawaiian/Other Pacific Islander, and Unknown/Declined populations for 2013, it is not possible to compare the Index of Disparity results for 2013 and later with earlier years.

This report uses the method of comparing 95% confidence intervals to determine whether there is a significant difference between two rates. This method is conservative in detecting statistically significant difference; when the two confidence intervals overlap (considered no disparity in this report), there may still be a statistically significant difference between the two rates. Therefore, the method benefits MHPs when used to detect disparities between minority populations and the white population. However, it may fail to show statistically significant year-to-year improvements or declines for the same population.

Future Directions

The disparity between African American and white Medicaid beneficiaries across all twelve measures corresponds to broader social and economic inequities, known as social determinants of health (SDOH). These include education, employment, income and wealth, housing, physical environment, public safety, social environment, and transportation. Studies have shown that these factors alone do not fully account for all racial/ethnic health disparities. Eliminating health disparities also requires addressing the role of race, discrimination, and structural racism.¹⁰

Response to Documented Health Disparities in Michigan Medicaid Managed Care

Despite improvements in the postpartum care rate across all populations over the years, a significant and persistent disparity remains, with the African American rate consistently lower than the white rate since 2011. A postpartum care visit is crucial for monitoring the mother's recovery after childbirth, supporting breastfeeding, infant safety, childhood immunizations, reproductive life planning and pregnancy spacing, and transitioning to primary care for any pre-existing chronic conditions. The Managed Care Plan Division of MDHHS has emphasized this measure for many years by incorporating it into various performance monitoring and incentive tools. The extension of Michigan Medicaid postpartum coverage to 12 months after pregnancy will further support the state's efforts to improve access to care and address persistent health disparities.¹¹

MHPs will continue to be contractually required to develop a Health Equity Program with an annual workplan to narrow disparities. Health equity measures have been given increased weight and priority in determining MHP performance bonuses and incentives.

The MDHHS SDOH Strategy identifies Community Health Workers (CHWs) as a strategic imperative to improve health outcomes and advance health equity.¹¹ Since 2016, MHPs have been contractually required to implement a CHW program in collaboration with community-based organizations to reduce barriers to care and address members' needs. These CHW programs will continue efforts to reduce health disparities and improve the health of all Michigan Medicaid beneficiaries through outreach, health and health literacy promotion, and connecting individuals to community resources to address health-related social needs.

Health Equity Summary

Michigan Medicaid Managed Care All Plans



Please note that the tables in this report use color coding in addition to labeling. For all measures other except HBD9, “below” is in red and “above” is in green. For HBD9, the only inverse measure, “above” is in orange, indicating a worse rate. A legend is provided below the table for further clarification.

Table 3: Summary Table - Difference from White

Race/Ethnicity	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening in Women	Postpartum Care	Childhood Immunizations - Combination 3	Immunizations for Adolescents - Combination 1	Lead Screening in Children
Asian American/ Native Hawaiian/ Pacific Islander	NS	Above	NS	NS	Above	NS	Above
African American	Below	Above	Above	Below	Below	Below	Below
White	Ref	Ref	Ref	Ref	Ref	Ref	Ref
Hispanic	Above	Above	Above	NS	Above	Above	Above
American Indian/ Alaska Native	NS	NS	Above	NS	NS	NS	NS
All Plans	NS	Above	Above	Below	Below	Below	NS

■ Rate is significantly higher than the Reference

■ Rate is significantly lower than the Reference

NS = Not significantly different from the Reference

Ref = Reference

Health Equity Summary

Michigan Medicaid Managed Care All Plans



Table 3: Summary Table - Difference from White - continued

Race/Ethnicity	Child and Adolescent Well-Care Visits (3-11 Years)	Adults' Access to Preventive/Ambulatory Health Services (20-44 Years)	Hemoglobin A1c Control for Diabetes	Hemoglobin A1c Poor Control for Diabetes	Eye Exam for Patients with Diabetes
Asian American/ Native Hawaiian/ Pacific Islander	Above	NS	NS	Above	NS
African American	Below	Below	Below	Above	Below
White	Ref	Ref	Ref	Ref	Ref
Hispanic	NS	Below	NS	NS	NS
American Indian/ Alaska Native	Below	NS	Below	Above	NS
All Plans	Below	Below	Below	Above	Below

■ Rate is significantly higher than the Reference

■ Rate is significantly lower than the Reference

■ Inverse rate (a higher rate indicates worse performance): Rate is significantly higher than the Reference

NS = Not significantly different from the Reference

Ref = Reference

Health Equity Summary

Michigan Medicaid Managed Care All Plans



Table 4: Summary Table - Difference from HEDIS MY2022 National Medicaid 50th Percentile

Race/Ethnicity	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening in Women	Postpartum Care	Childhood Immunizations - Combination 3	Immunizations for Adolescents - Combination 1	Lead Screening in Children
Asian American/ Native Hawaiian/ Pacific Islander	NS	Below	NS	Below	NS	Below	NS
African American	Below	Below	Above	Below	Below	Below	Below
White	Above	Below	NS	Below	Below	Below	Below
Hispanic	Above	Below	Above	Below	Below	NS	NS
American Indian/ Alaska Native	NS	Below	Above	Below	Below	Below	Below
All Plans	Above	Below	Above	Below	Below	Below	Below

■ Rate is significantly higher than the HEDIS national Medicaid 50th percentile

■ Rate is significantly lower than the HEDIS national Medicaid 50th percentile

NS = Not significantly different from the HEDIS national Medicaid 50th percentile

Health Equity Summary

Michigan Medicaid Managed Care All Plans



Table 4: Summary Table - Difference from HEDIS MY2022 National Medicaid 50th Percentile - continued

Race/Ethnicity	Child and Adolescent Well-Care Visits (3-11 Years)	Adults' Access to Preventive/ Ambulatory Health Services (20-44 Years)	Hemoglobin A1c Control for Diabetes	Hemoglobin A1c Poor Control for Diabetes	Eye Exam for Patients with Diabetes
Asian American/ Native Hawaiian/ Pacific Islander	Above	Above	Below	Above	NS
African American	Below	Below	Below	Above	Below
White	Above	Above	Below	Above	Below
Hispanic	Above	Above	Below	Above	NS
American Indian/ Alaska Native	Above	Above	Below	Above	NS
All Plans	Above	Above	Below	Above	Below

- Rate is significantly higher than the HEDIS national Medicaid 50th percentile
- Rate is significantly lower than the HEDIS national Medicaid 50th percentile
- Inverse rate (a higher rate indicates worse performance): Rate is significantly higher than the HEDIS national Medicaid 50th percentile

NS = Not significantly different from the HEDIS national Medicaid 50th percentile

Breast Cancer Screening (BCS)

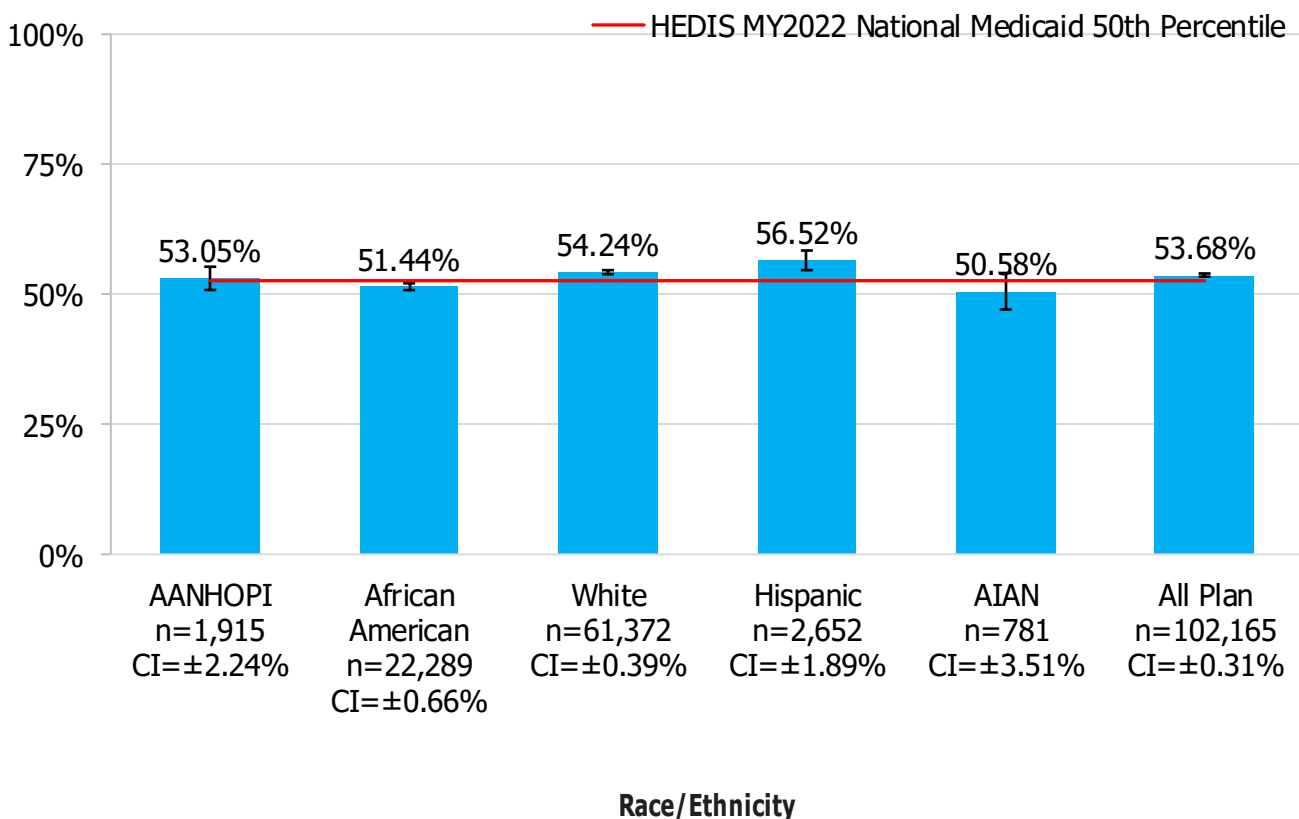
Michigan Medicaid Managed Care All Plans

Table 5: Breast Cancer Screening by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	1,016	1,915	53.05%	-1.18%	0.98	NS	NS
African American	11,466	22,289	51.44%	-2.80%	0.95	Below	Below
White	33,287	61,372	54.24%	Ref	Ref	Ref	Above
Hispanic	1,499	2,652	56.52%	2.29%	1.04	Above	Above
American Indian/Alaska Native	395	781	50.58%	-3.66%	0.93	NS	NS
All Plans	54,847	102,165	53.68%	-0.55%	0.99	NS	Above

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above/Below** = Significantly higher/lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 1: Breast Cancer Screening by Race/Ethnicity



Cervical Cancer Screening (CCS)

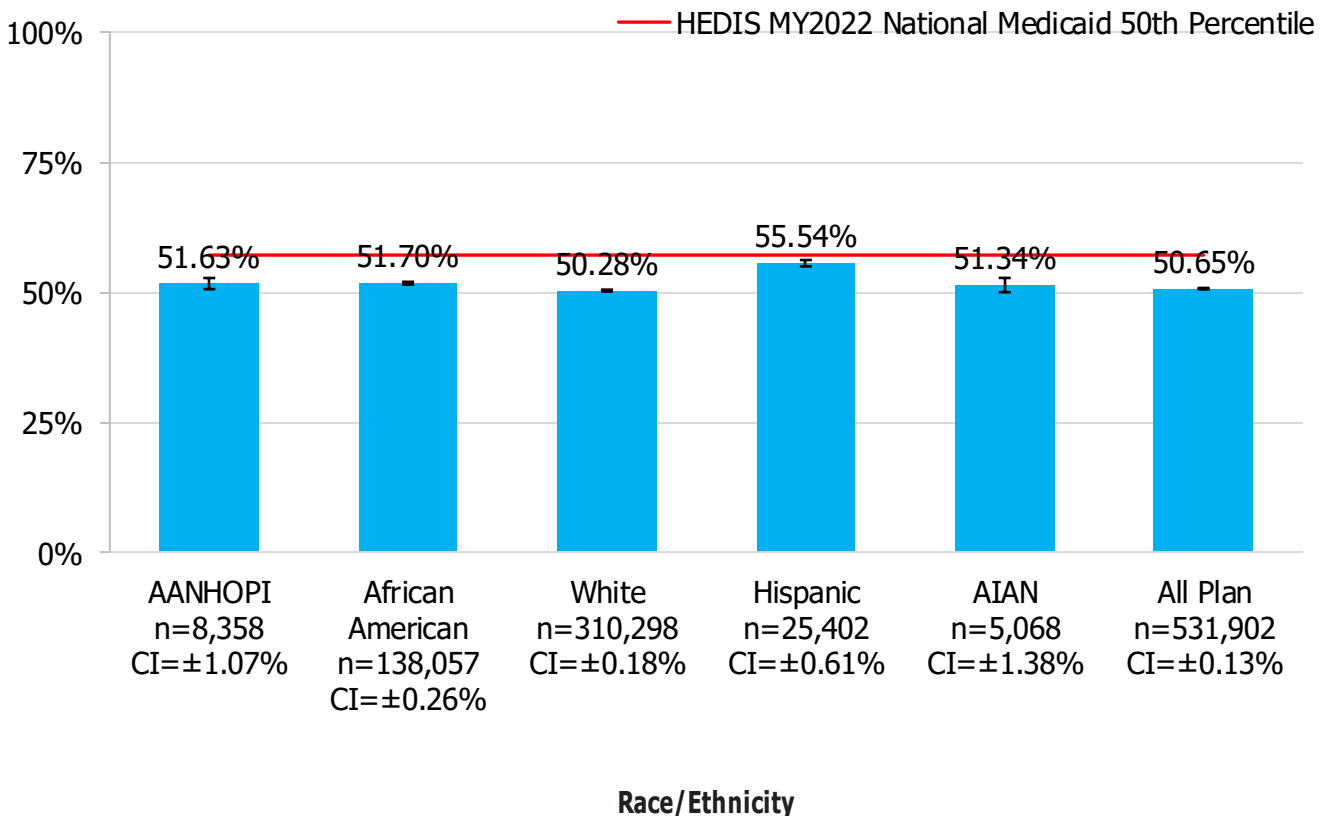
Michigan Medicaid Managed Care - All Plans

Table 6: Cervical Cancer Screening by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	4,315	8,358	51.63%	1.35%	1.03	Above	Below
African American	71,373	138,057	51.70%	1.42%	1.03	Above	Below
White	156,006	310,298	50.28%	Ref	Ref	Ref	Below
Hispanic	14,109	25,402	55.54%	5.27%	1.10	Above	Below
American Indian/Alaska Native	2,602	5,068	51.34%	1.07%	1.02	NS	Below
All Plans	269,401	531,902	50.65%	0.37%	1.01	Above	Below

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above/Below** = Significantly higher/lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 2: Cervical Cancer Screening by Race/Ethnicity



Chlamydia Screening in Women – Total (CHL)

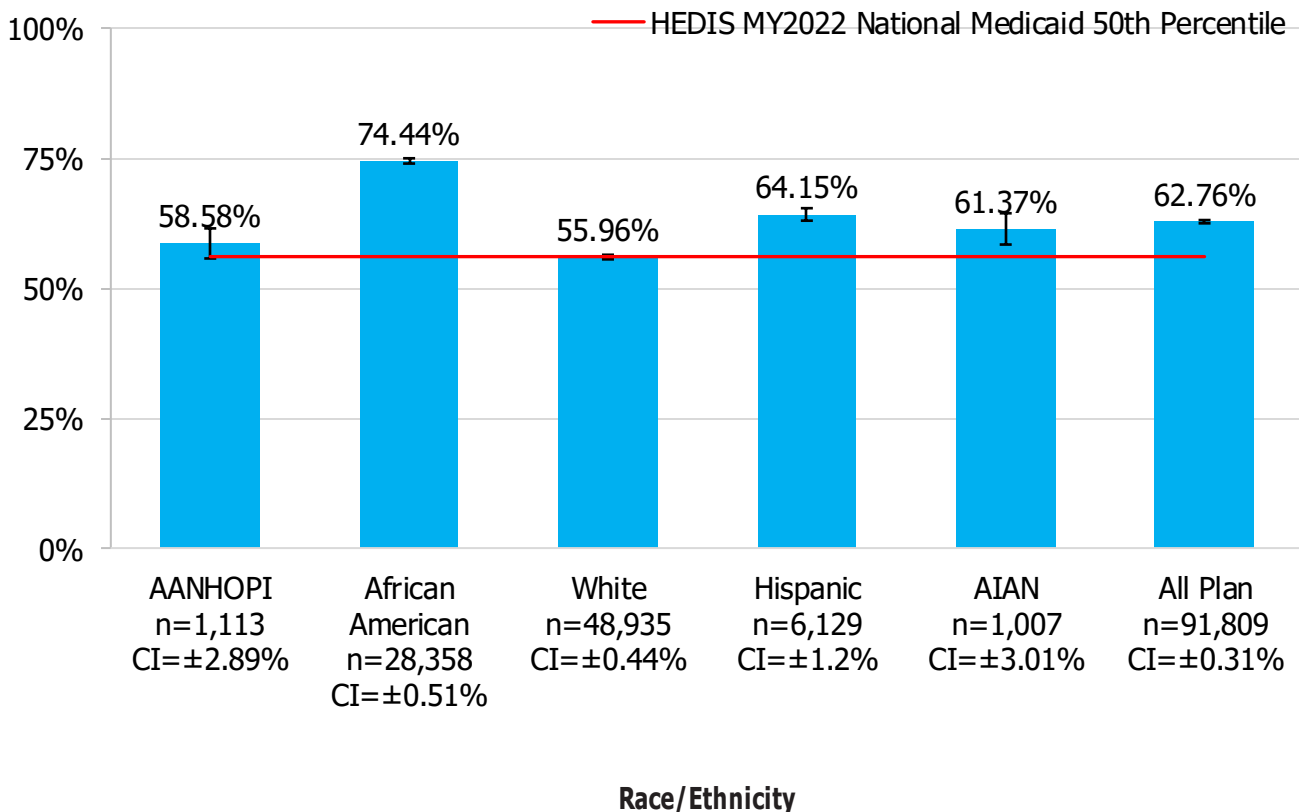
Michigan Medicaid Managed Care All Plans

Table 7: Chlamydia Screening in Women by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	652	1,113	58.58%	2.62%	1.05	NS	NS
African American	21,111	28,358	74.44%	18.49%	1.33	Above	Above
White	27,383	48,935	55.96%	Ref	Ref	Ref	NS
Hispanic	3,932	6,129	64.15%	8.20%	1.15	Above	Above
American Indian/Alaska Native	618	1,007	61.37%	5.41%	1.10	Above	Above
All Plans	57,618	91,809	62.76%	6.80%	1.12	Above	Above

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **Above** = Significantly higher than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 3: Chlamydia Screening in Women by Race/Ethnicity



Postpartum Care (PPC)

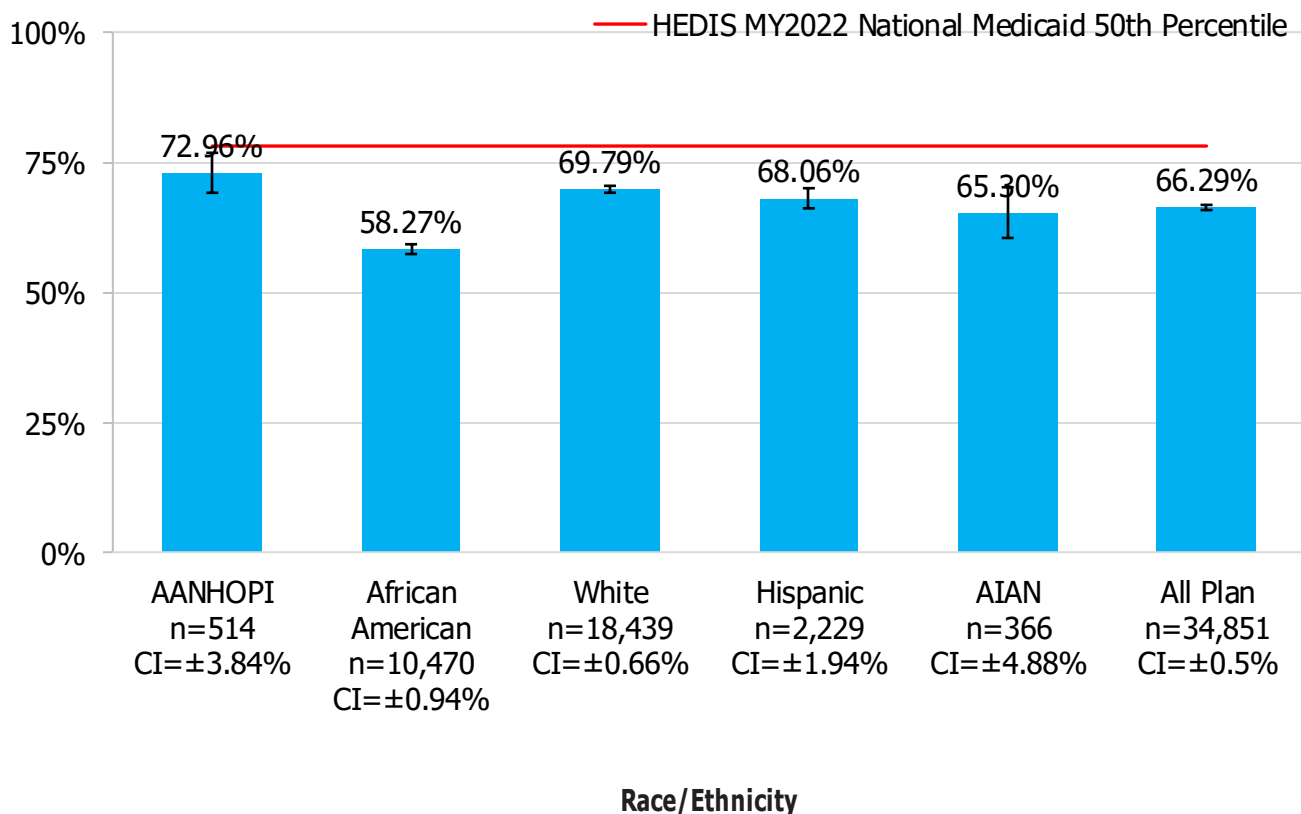
Michigan Medicaid Managed Care All Plans

Table 8: Postpartum Care by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	375	514	72.96%	3.17%	1.05	NS	Below
African American	6,101	10,470	58.27%	-11.52%	0.83	Below	Below
White	12,868	18,439	69.79%	Ref	Ref	Ref	Below
Hispanic	1,517	2,229	68.06%	-1.73%	0.98	NS	Below
American Indian/Alaska Native	239	366	65.30%	-4.49%	0.94	NS	Below
All Plans	23,102	34,851	66.29%	-3.50%	0.95	Below	Below

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Below** = Significantly lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 4: Postpartum Care by Race/Ethnicity



Childhood Immunization Status – Combination 3 (CIS)



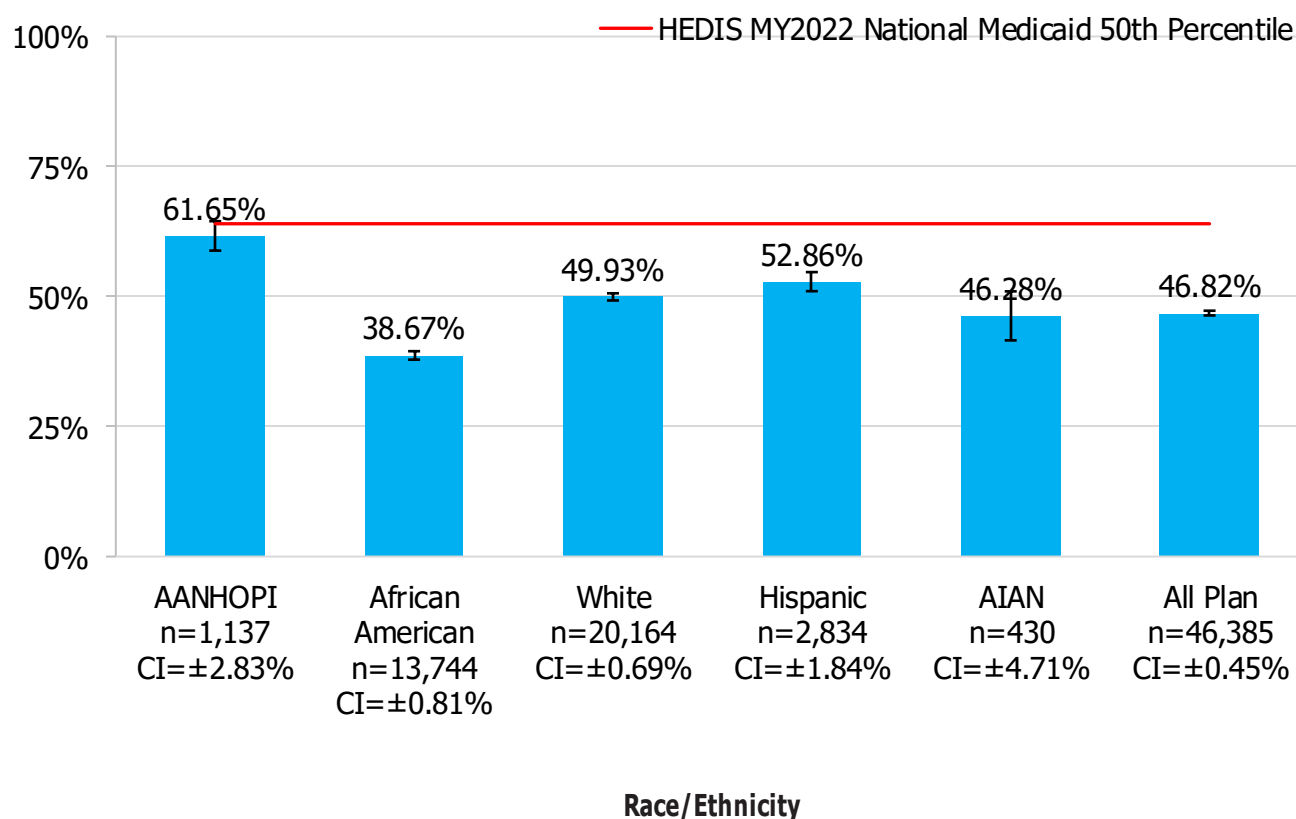
Michigan Medicaid Managed Care All Plans

Table 9: Childhood Immunization Status by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	701	1,137	61.65%	11.73%	1.23	Above	NS
African American	5,315	13,744	38.67%	-11.25%	0.77	Below	Below
White	10,067	20,164	49.93%	Ref	Ref	Ref	Below
Hispanic	1,498	2,834	52.86%	2.93%	1.06	Above	Below
American Indian/Alaska Native	199	430	46.28%	-3.65%	0.93	NS	Below
All Plans	21,716	46,385	46.82%	-3.11%	0.94	Below	Below

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above/Below** = Significantly higher/lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 5: Childhood Immunization Status by Race/Ethnicity



Immunizations for Adolescents – Combination 1 (IMA)



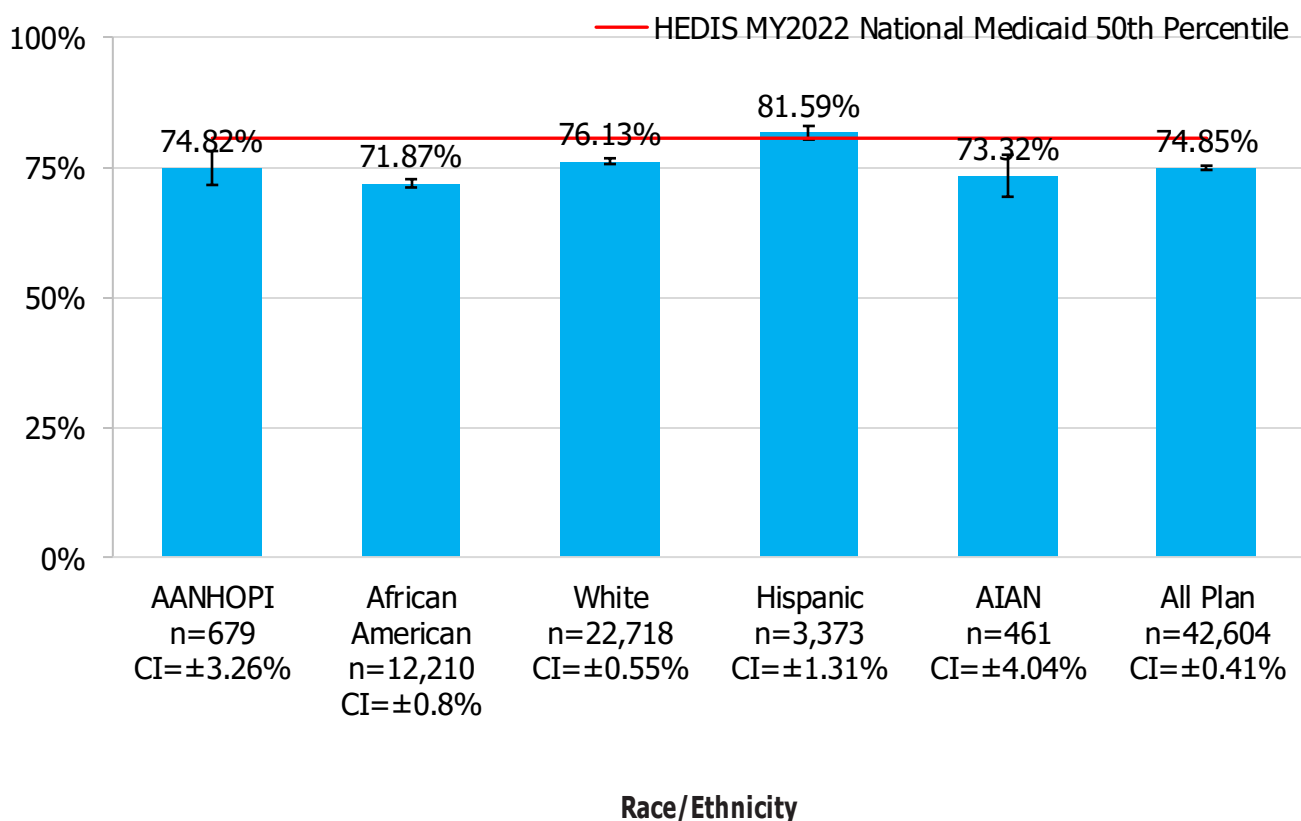
Michigan Medicaid Managed Care All Plans

Table 10: Immunizations for Adolescents by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	508	679	74.82%	-1.31%	0.98	NS	Below
African American	8,775	12,210	71.87%	-4.26%	0.94	Below	Below
White	17,295	22,718	76.13%	Ref	Ref	Ref	Below
Hispanic	2,752	3,373	81.59%	5.46%	1.07	Above	NS
American Indian/Alaska Native	338	461	73.32%	-2.81%	0.96	NS	Below
All Plans	31,889	42,604	74.85%	-1.28%	0.98	Below	Below

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above/Below** = Significantly higher/lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 6: Immunizations for Adolescents by Race/Ethnicity



Lead Screening in Children (LSC)

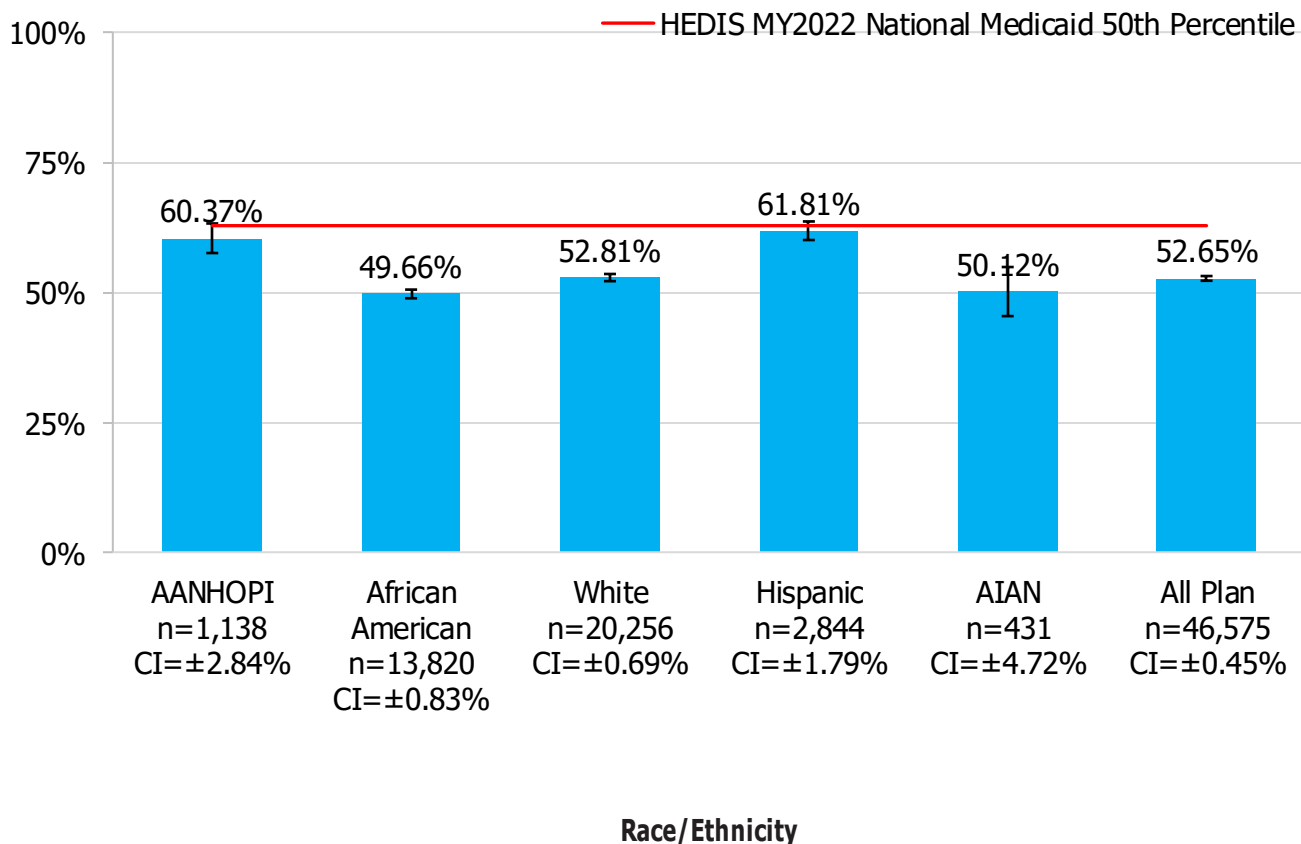
Michigan Medicaid Managed Care All Plans

Table 11: Lead Screening in Children by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	687	1,138	60.37%	7.56%	1.14	Above	NS
African American	6,863	13,820	49.66%	-3.15%	0.94	Below	Below
White	10,697	20,256	52.81%	Ref	Ref	Ref	Below
Hispanic	1,758	2,844	61.81%	9.01%	1.17	Above	NS
American Indian/Alaska Native	216	431	50.12%	-2.69%	0.95	NS	Below
All Plans	24,522	46,575	52.65%	-0.16%	1.00	NS	Below

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above/Below** = Significantly higher/lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 7: Lead Screening in Children by Race/Ethnicity



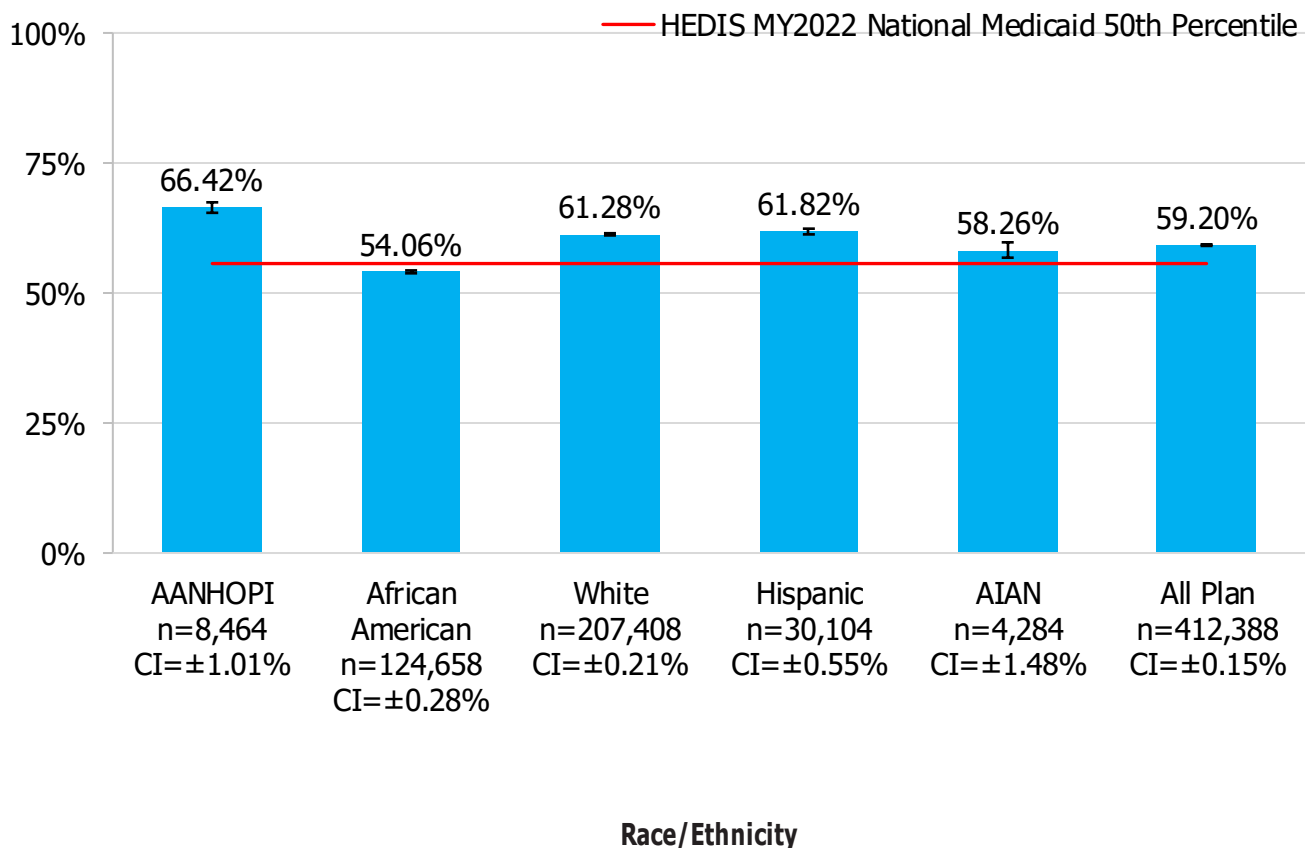
Michigan Medicaid Managed Care - All Plans

Table 12: Child and Adolescent Well-Care Visits 3-11 Years by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	5,622	8,464	66.42%	5.15%	1.08	Above	Above
African American	67,392	124,658	54.06%	-7.22%	0.88	Below	Below
White	127,093	207,408	61.28%	Ref	Ref	Ref	Above
Hispanic	18,609	30,104	61.82%	0.54%	1.01	NS	Above
American Indian/Alaska Native	2,496	4,284	58.26%	-3.01%	0.95	Below	Above
All Plans	244,143	412,388	59.20%	-2.07%	0.97	Below	Above

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above/Below** = Significantly higher/lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 8: Child and Adolescent Well-Care Visits 3-11 Years by Race/Ethnicity



Adults' Access to Care 20-44 Years (AAP)

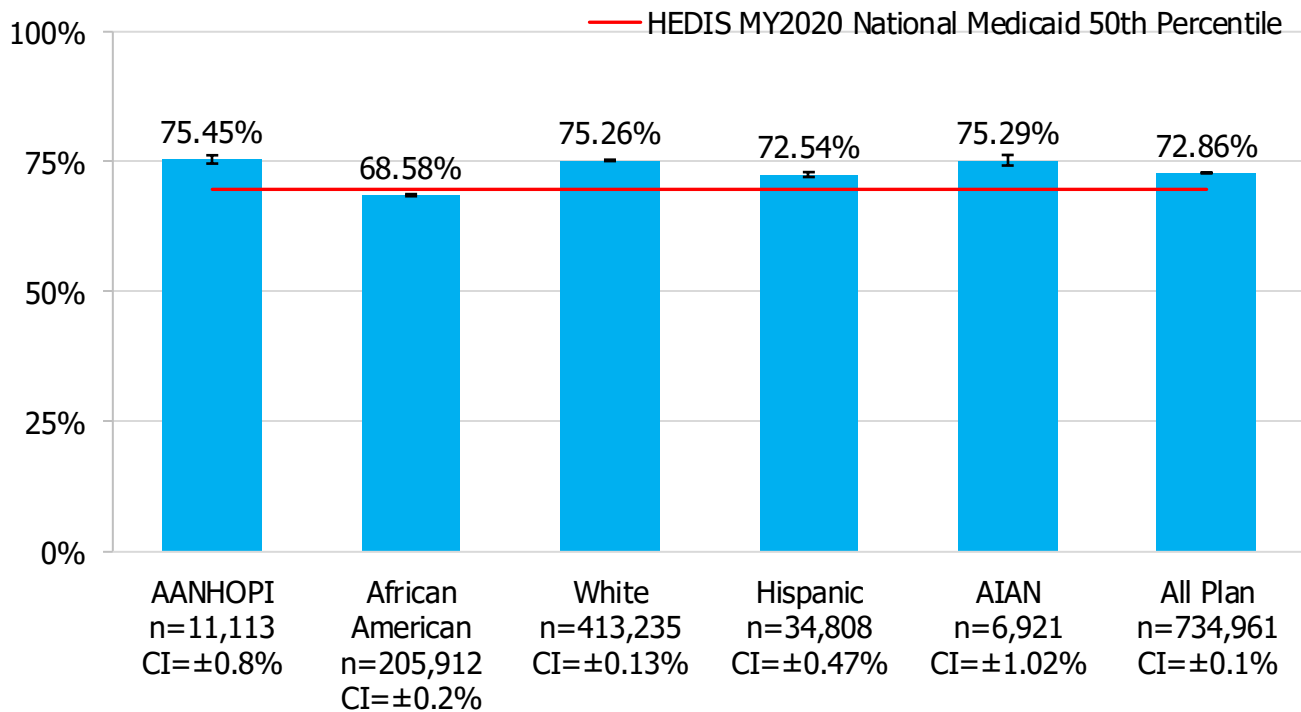
Michigan Medicaid Managed Care All Plans

Table 13: Adult Access to Care 20-44 Years by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	8,385	11,113	75.45%	0.19%	1.00	NS	Above
African American	141,207	205,912	68.58%	-6.69%	0.91	Below	Below
White	311,018	413,235	75.26%	Ref	Ref	Ref	Above
Hispanic	25,249	34,808	72.54%	-2.73%	0.96	Below	Above
American Indian/Alaska Native	5,211	6,921	75.29%	0.03%	1.00	NS	Above
All Plans	535,514	734,961	72.86%	-2.40%	0.97	Below	Above

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above/Below** = Significantly higher/lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 9: Adult Access to Care 20-44 Years by Race/Ethnicity



Hemoglobin A1c Control for Diabetes (HBD8)



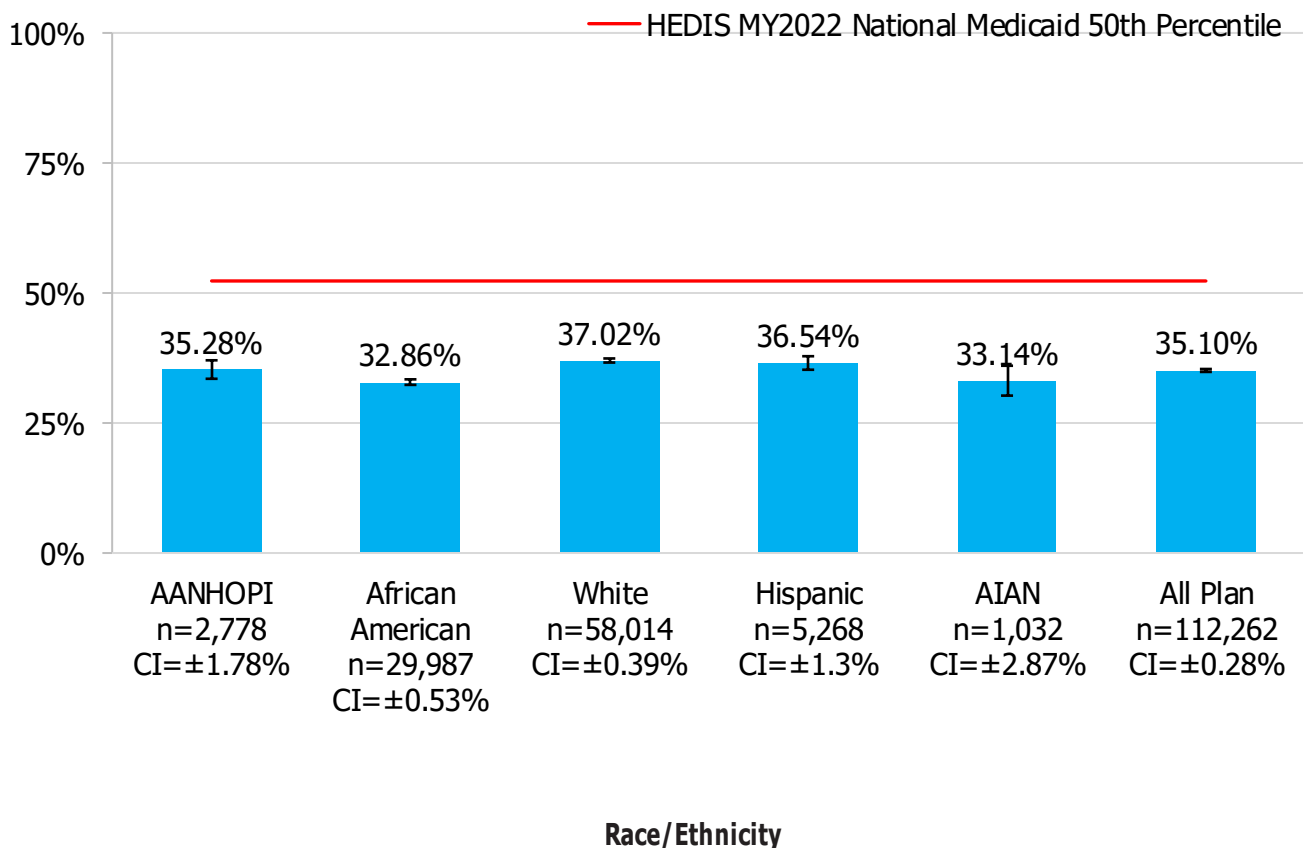
Michigan Medicaid Managed Care All Plans

Table 14: Hemoglobin A1c Control for Diabetes by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	980	2,778	35.28%	-1.74%	0.95	NS	Below
African American	9,855	29,987	32.86%	-4.15%	0.89	Below	Below
White	21,475	58,014	37.02%	Ref	Ref	Ref	Below
Hispanic	1,925	5,268	36.54%	-0.48%	0.99	NS	Below
American Indian/Alaska Native	342	1,032	33.14%	-3.88%	0.90	Below	Below
All Plans	39,409	112,262	35.10%	-1.91%	0.95	Below	Below

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Below** = Significantly lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 10: Hemoglobin A1c Control for Diabetes by Race/Ethnicity



Hemoglobin A1c Poor Control for Diabetes (HBD9)



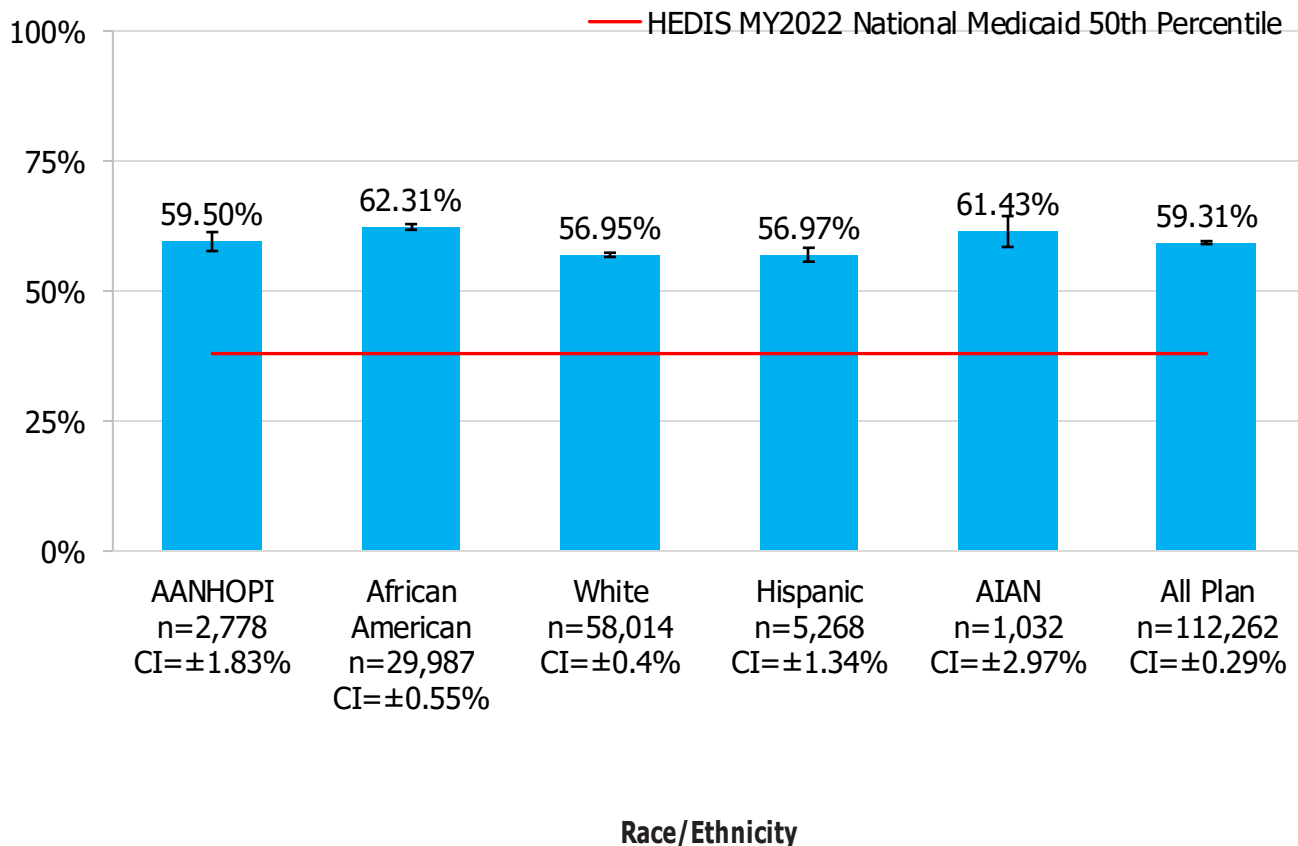
Michigan Medicaid Managed Care All Plans

Table 15: Hemoglobin A1c Poor Control for Diabetes by Race/Ethnicity

Race/Ethnicity	Num	Den	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	1,653	2,778	59.50%	2.55%	1.04	Above	Above
African American	18,685	29,987	62.31%	5.36%	1.09	Above	Above
White	33,041	58,014	56.95%	Ref	Ref	Ref	Above
Hispanic	3,001	5,268	56.97%	0.01%	1.00	NS	Above
American Indian/Alaska Native	634	1,032	61.43%	4.48%	1.08	Above	Above
All Plans	66,577	112,262	59.31%	2.35%	1.04	Above	Above

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Above** = Significantly higher (worse performance) than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 11: Hemoglobin A1c Poor Control for Diabetes by Race/Ethnicity



Eye Exam for Patients with Diabetes (EED)

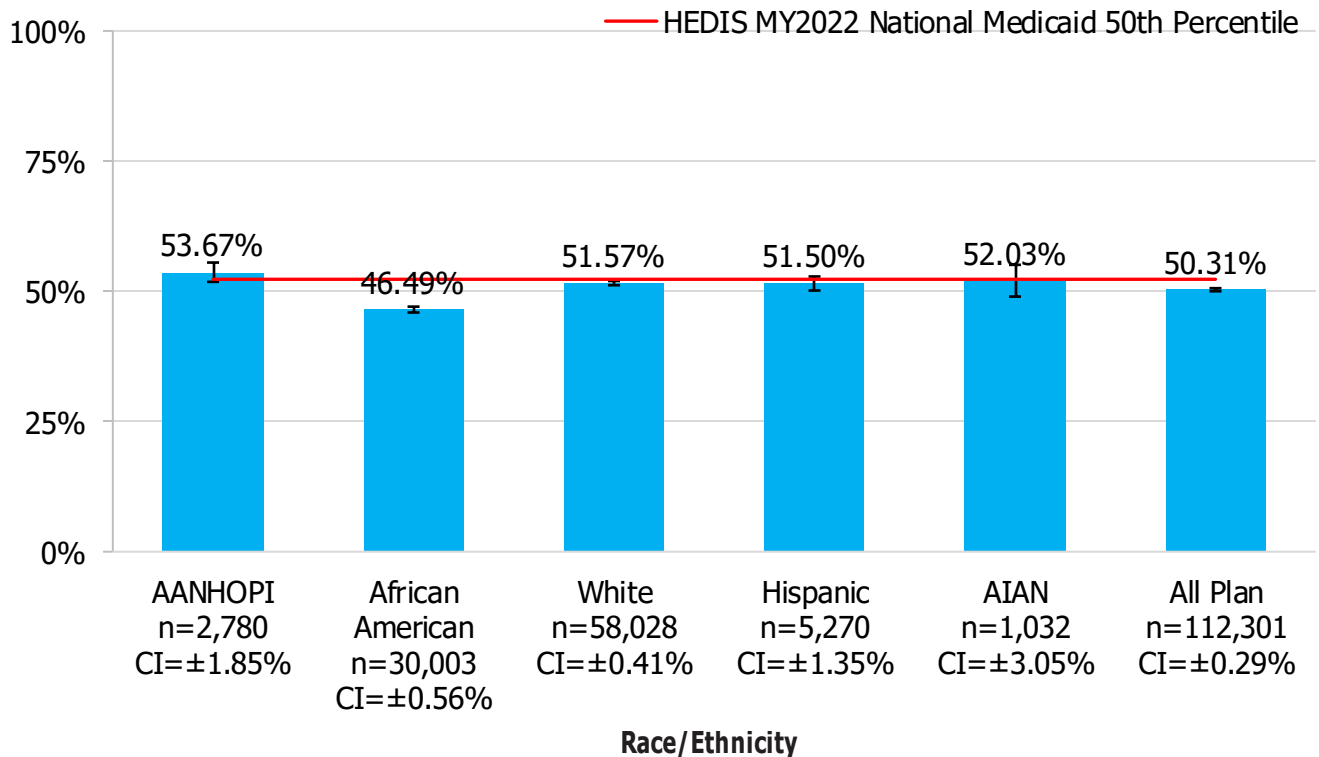
Michigan Medicaid Managed Care All Plans

Table 16: Eye Exam for Patients with Diabetes by Race/Ethnicity

Race/Ethnicity	Num	Den*	Rate	Diff	Ratio	From White	From 50th
Asian American/Native Hawaiian/Pacific Islander	1,492	2,780	53.67%	2.10%	1.04	NS	NS
African American	13,949	30,003	46.49%	-5.08%	0.90	Below	Below
White	29,926	58,028	51.57%	Ref	Ref	Ref	Below
Hispanic	2,714	5,270	51.50%	-0.07%	1.00	NS	NS
American Indian/Alaska Native	537	1,032	52.03%	0.46%	1.01	NS	NS
All Plans	56,495	112,301	50.31%	-1.26%	0.98	Below	Below

Num = Numerator; **Den** = Denominator; **Diff** = Difference from White; **Ratio** = Non-white estimate/White estimate; **From White** = Significant difference from White; **From 50th** = Significant difference from HEDIS MY2022 national Medicaid 50th percentile; **NS** = Not significantly different; **Below** = Significantly lower than Reference or HEDIS MY2022 national Medicaid 50th percentile; **Ref** = Reference

Figure 12: Eye Exam for Patients with Diabetes by Race/Ethnicity



* The differences in denominators between EED and the other diabetes measures are due to MHP removing members qualified for optional exclusions for administrative measures, as per HEDIS MY2022 specifications.

Table 17: Rate Differences for African American and Hispanic from White

Measure	2022 White Rate	2022 African American Rate	Rate Difference	2022 Hispanic Rate	Rate Difference
Breast Cancer Screening	54.24%	51.44%	-2.80%	56.52%	2.29%
Cervical Cancer Screening	50.28%	51.70%	1.42%	55.54%	5.27%
Chlamydia Screening in Women	55.96%	74.44%	18.49%	64.15%	8.20%
Postpartum Care	69.79%	58.27%	-11.52%	68.06%	-1.73%
Childhood Immunization Status - Combination 3	49.93%	38.67%	-11.25%	52.86%	2.93%
Immunizations for Adolescents - Combination 1	76.13%	71.87%	-4.26%	81.59%	5.46%
Lead Screening in Children	52.81%	49.66%	-3.15%	61.81%	9.01%
Child and Adolescent Well-Care Visits (3-11 Years)	61.28%	54.06%	-7.22%	61.82%	0.54%
Adults' Access to Preventive/Ambulatory Health Services (20-44 Years)	75.26%	68.58%	-6.69%	72.54%	-2.73%
Hemoglobin A1c Control for Diabetes	37.02%	32.86%	-4.15%	36.54%	-0.48%
Hemoglobin A1c Poor Control for Diabetes	56.95%	62.31%	5.36%	56.97%	0.01%
Eye Exam for Patients with Diabetes	51.57%	46.49%	-5.08%	51.50%	-0.07%

- Rate significantly above the white population
- Rate significantly below the white population
- Inverse rate (a higher rate indicates worse performance): Rate is significantly above the white population

Table 18: MY2015-MY2022 Rates for White, African American, Hispanic, and Medicaid Managed Care All Plans

White Rate %									African American Rate %								
Measure	2015	2016	2017	2018	2019	2020	2021	2022	Measure	2015	2016	2017	2018	2019	2020	2021	2022
BCS	58.91	63.23	62.77	61.99	61.51	56.78	53.53	54.24	BCS	58.54	60.68	60.42	59.19	58.33	54.06	50.75	51.44
CCS	56.42	58.60	59.06	60.54	57.95	56.46	53.44	50.28	CCS	60.84	63.07	63.12	63.79	61.62	58.31	55.72	51.70
CHL	56.83	58.54	59.04	60.19	59.28	53.36	54.48	55.96	CHL	70.50	75.73	76.31	76.33	75.40	71.79	73.18	74.44
PPC	61.73	63.31	64.14	64.32	69.27	67.84	69.99	69.79	PPC	48.55	54.14	54.06	50.53	59.37	54.96	57.27	58.27
CIS	70.57	73.26	72.52	69.27	70.57	66.24	53.19	49.93	CIS	58.28	64.60	63.40	59.17	57.69	50.53	39.66	38.67
IMA	84.74	85.64	83.53	83.92	83.83	82.03	76.56	76.13	IMA	80.74	83.86	82.68	81.28	83.43	79.86	68.53	71.87
LSC	78.91	80.69	79.79	78.49	77.65	75.15	55.16	52.81	LSC	76.33	77.92	78.10	74.43	73.83	67.72	50.46	49.66
WCV						54.61	60.20	61.28	WCV						42.46	52.98	54.06
AAP	85.92	84.58	81.88	81.61	81.84	77.57	77.12	75.26	AAP	77.17	76.69	73.50	72.90	74.15	69.79	71.67	68.58
HBD8								37.02	HBD8								32.86
HBD9								56.95	HBD9								62.31
EED	51.78	55.56	59.99	61.81	61.84	51.87	51.12	51.57	EED	46.19	49.17	53.75	53.06	53.87	46.32	46.93	46.49

■ Significant increase from previous year

■ Significant decrease from previous year

Table 18: MY2015-MY2022 Rates for the White, African American, Hispanic, and Medicaid Managed Care All Plans - continued

Hispanic Rate %

Michigan Medicaid Managed Care All-Plan Rate %

Measure	2015	2016	2017	2018	2019	2020	2021	2022	Measure	2015	2016	2017	2018	2019	2020	2021	2022
BCS	63.84	65.79	67.82	66.55	63.87	59.32	57.19	56.52	BCS	59.30	62.60	62.13	61.37	60.83	56.31	52.30	53.68
CCS	60.20	62.27	62.63	64.55	62.64	58.67	58.52	55.54	CCS	57.48	59.64	59.97	60.90	58.90	56.40	53.65	50.65
CHL	62.48	65.37	65.17	66.92	67.13	61.12	62.17	64.15	CHL	62.50	65.36	65.65	66.27	65.42	60.20	61.00	62.76
PPC	60.41	62.76	60.99	60.85	68.06	65.02	71.88	68.06	PPC	57.22	60.62	60.87	59.63	66.02	63.39	65.94	66.29
CIS	76.57	79.35	78.23	76.09	74.81	69.16	65.43	52.86	CIS	66.82	71.43	70.71	67.12	67.31	61.54	49.15	46.82
IMA	91.17	91.15	88.50	89.45	89.70	86.81	81.86	81.59	IMA	83.90	85.60	83.48	83.62	83.99	81.56	73.89	74.85
LSC	83.17	87.66	85.18	83.27	81.75	79.95	61.68	61.81	LSC	78.57	80.74	79.68	77.63	76.84	72.99	53.95	52.65
WCV						54.04	62.58	61.82	WCV						50.92	58.13	59.20
AAP	81.94	81.73	77.89	78.88	79.57	74.76	77.49	72.54	AAP	82.76	81.64	78.64	78.26	79.02	74.60	74.68	72.86
HBD8								36.54	HBD8								35.10
HBD9								56.97	HBD9								59.31
EED	51.36	53.73	58.90	58.12	59.61	51.86	52.85	51.50	EED	50.21	53.26	58.03	58.85	59.37	49.91	49.67	50.31

■ Significant increase from previous year

■ Significant decrease from previous year

Figure 13: MY2015-MY2022 Breast Cancer Screening

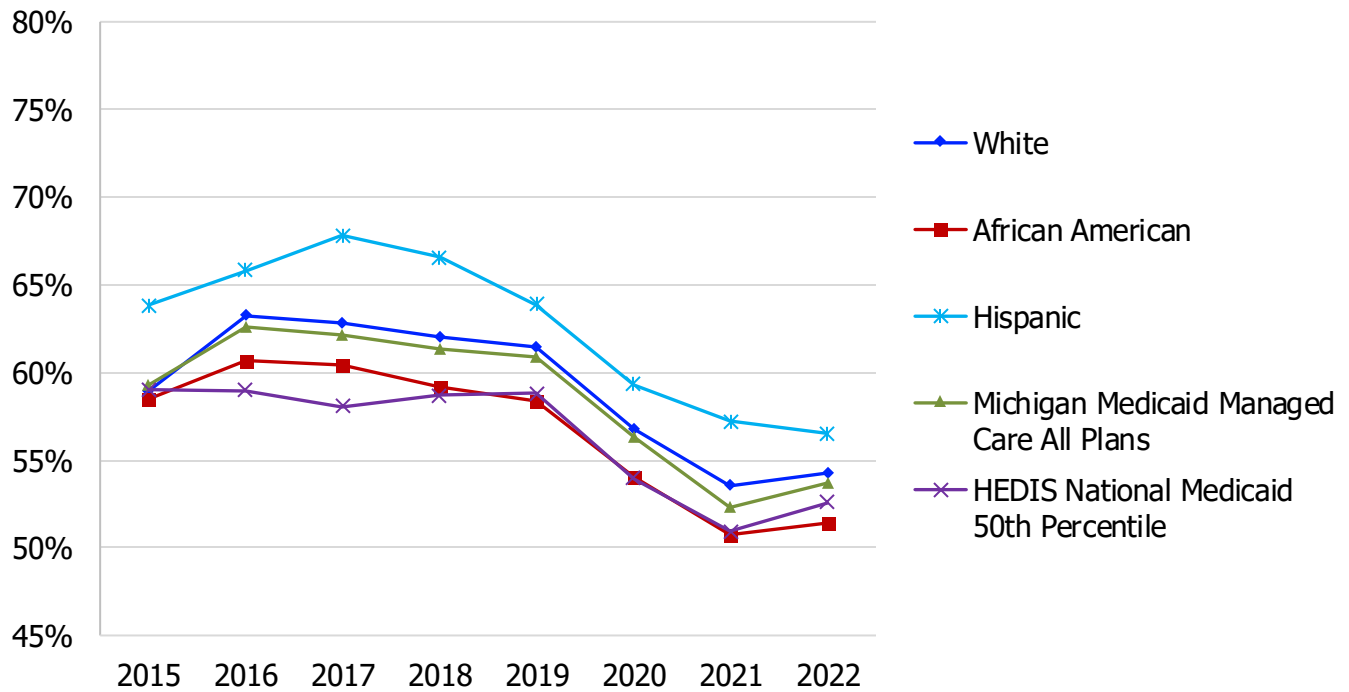


Figure 14: MY2015-MY2022 Cervical Cancer Screening

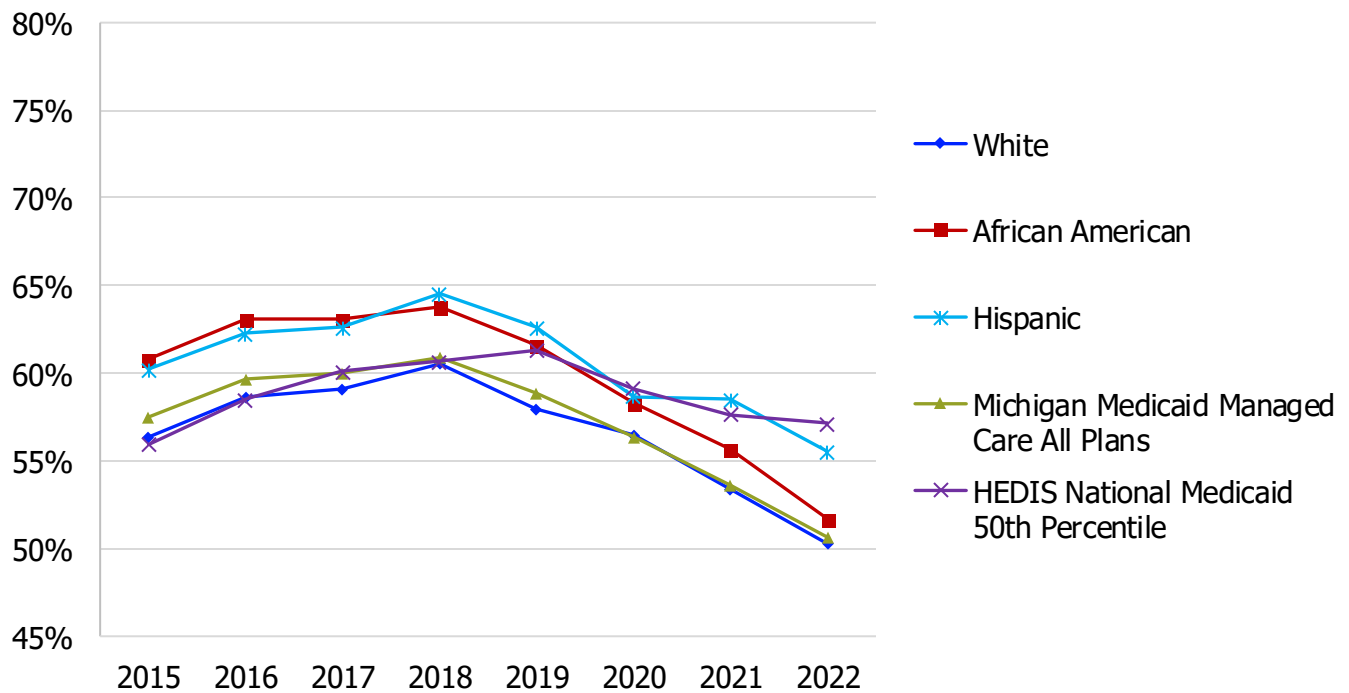


Figure 15: MY2015-MY2022 Chlamydia Screening in Women

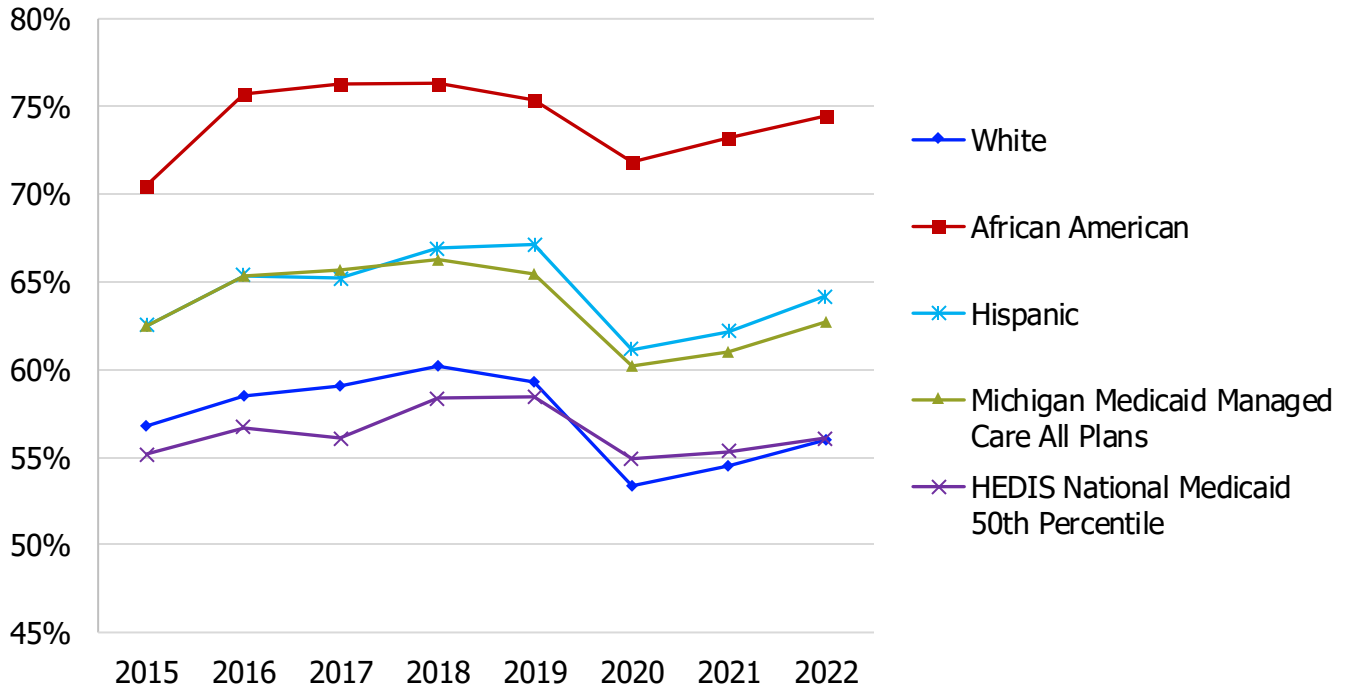


Figure 16: MY2015-MY2022 Postpartum Care

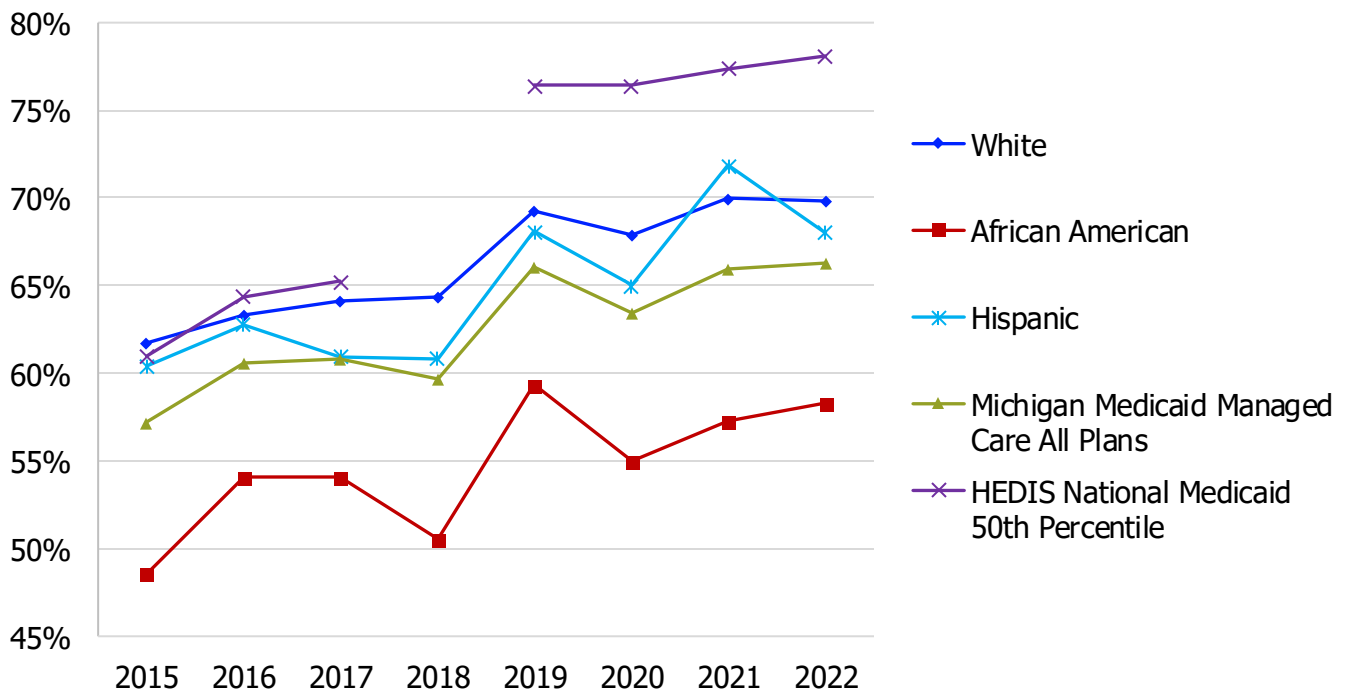


Figure 17: MY2015-MY2022 Childhood Immunization Status

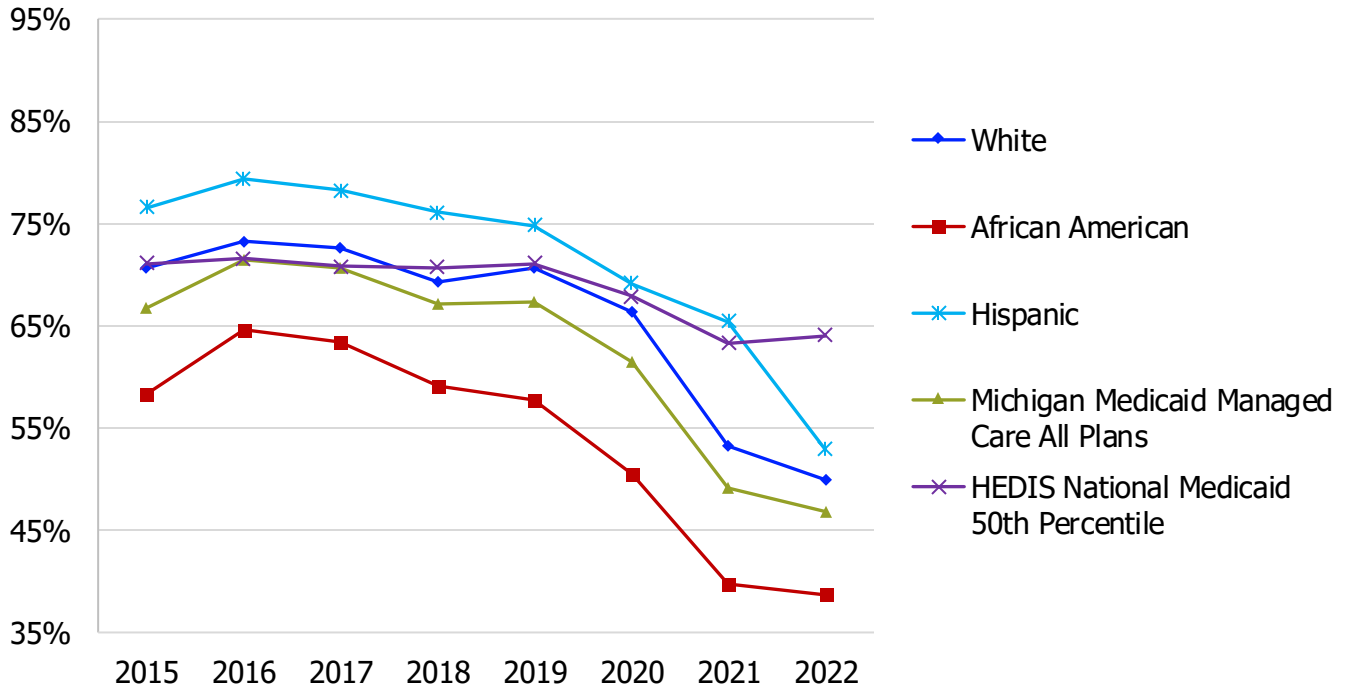


Figure 18: MY2015-MY2022 Immunizations for Adolescents

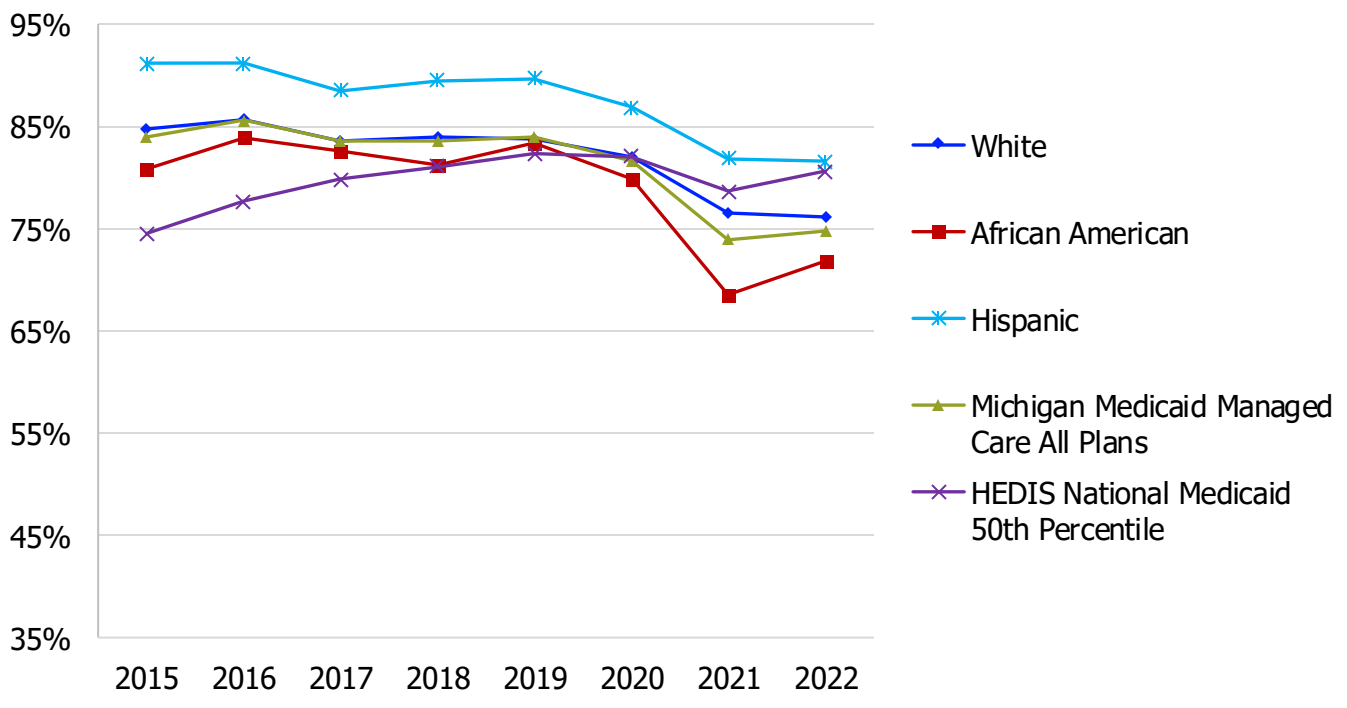


Figure 19: MY2015-MY2022 Lead Screening in Children

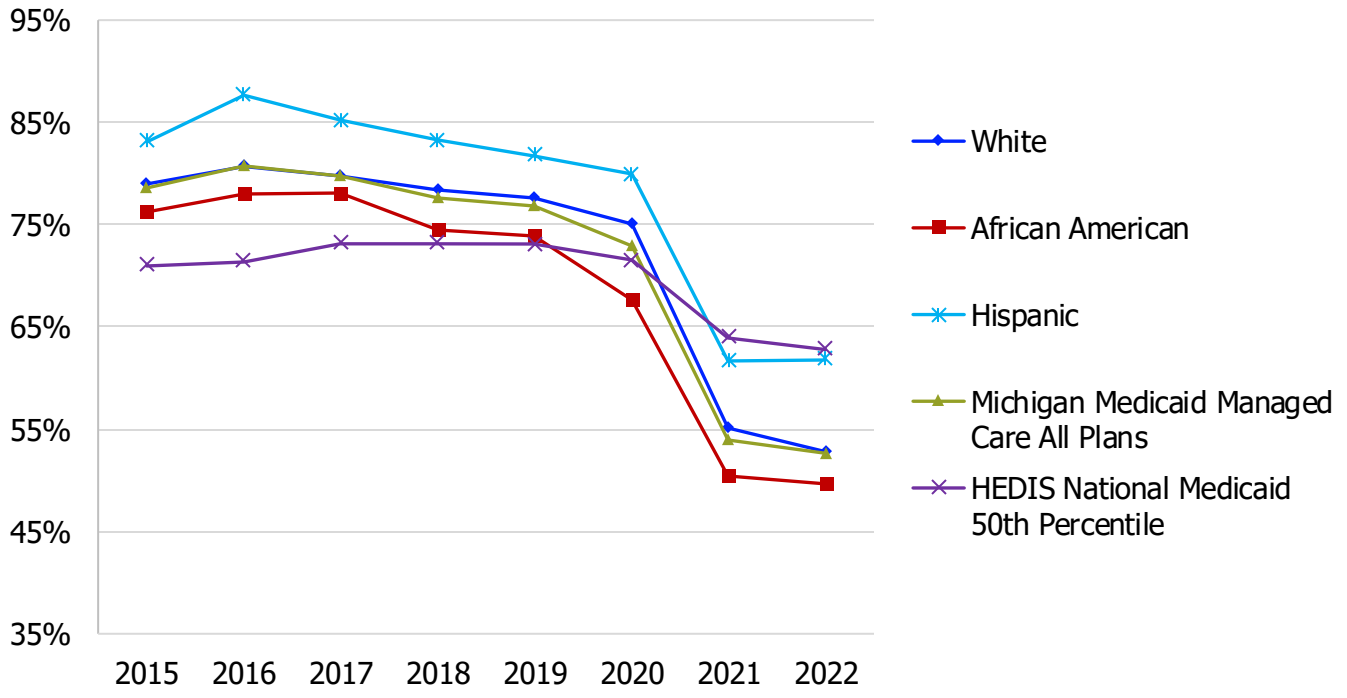


Figure 20: MY2020-MY2022 Child and Adolescent Well-Care Visits 3-11Years

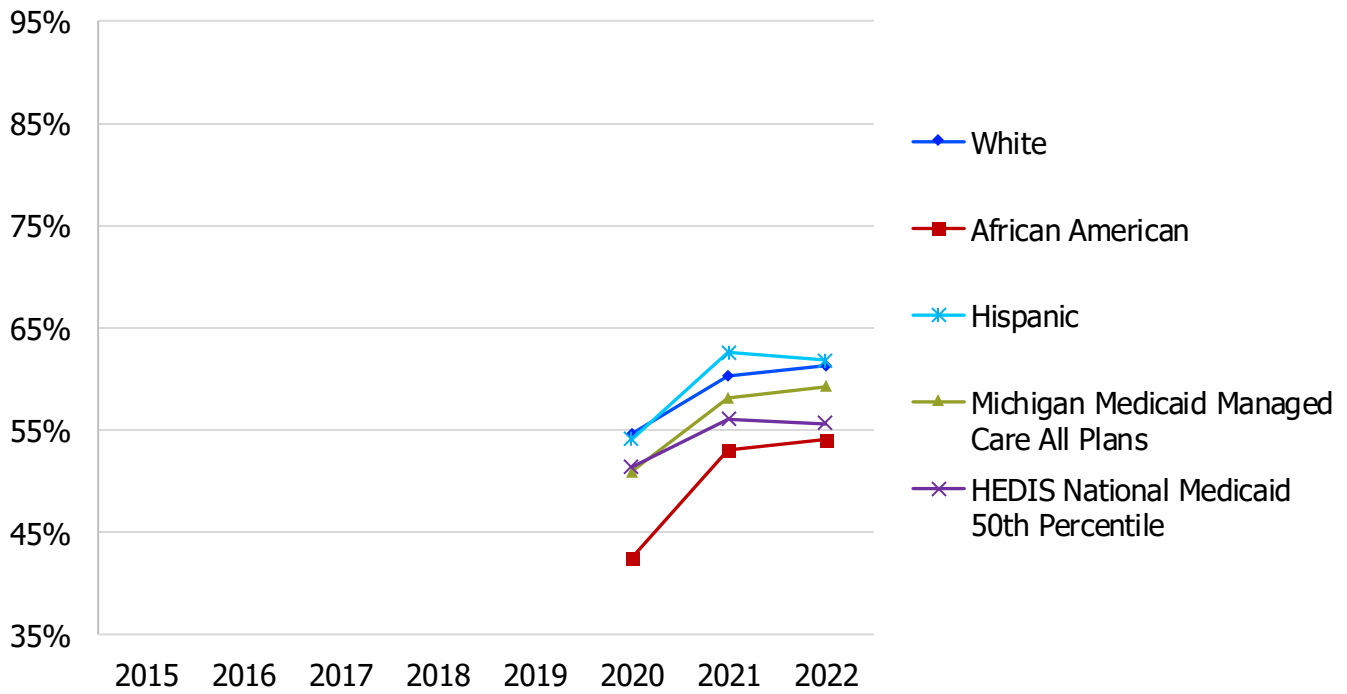


Figure 21: MY2015-MY2022 Adult Access to Care 20-44 Years

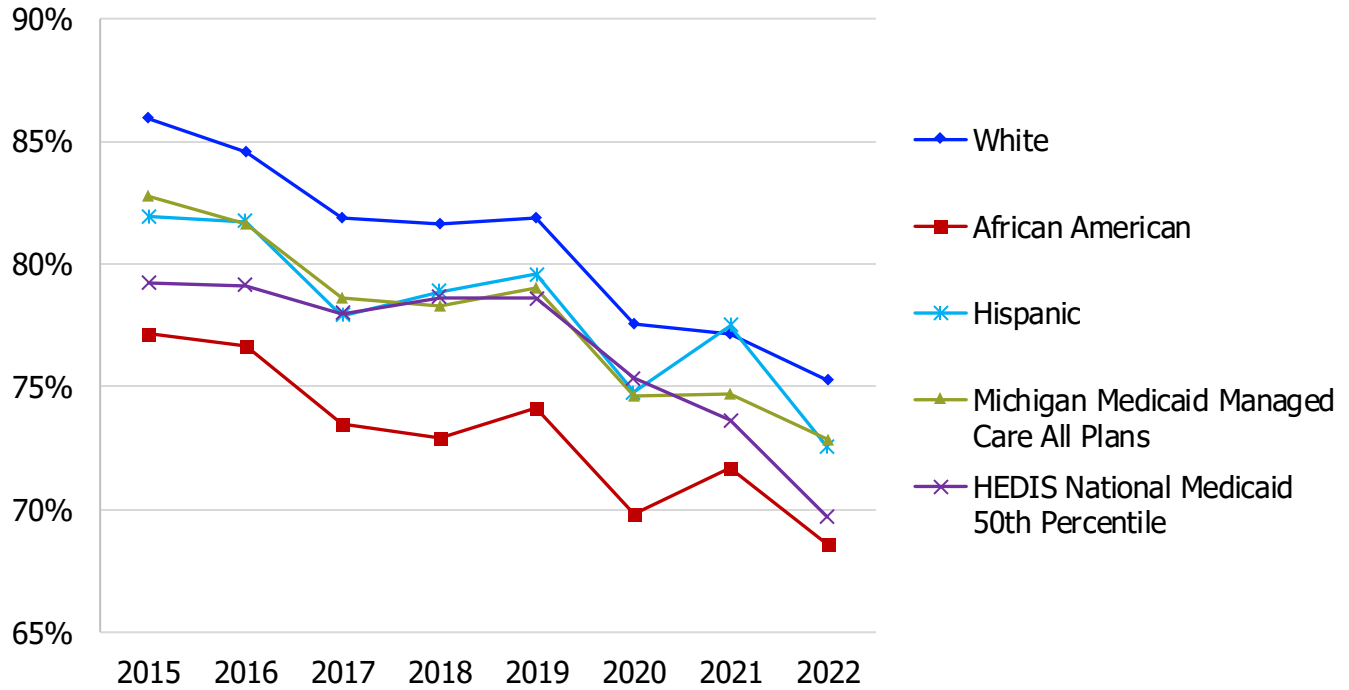


Figure 22: MY2022 Hemoglobin A1c Control for Diabetes

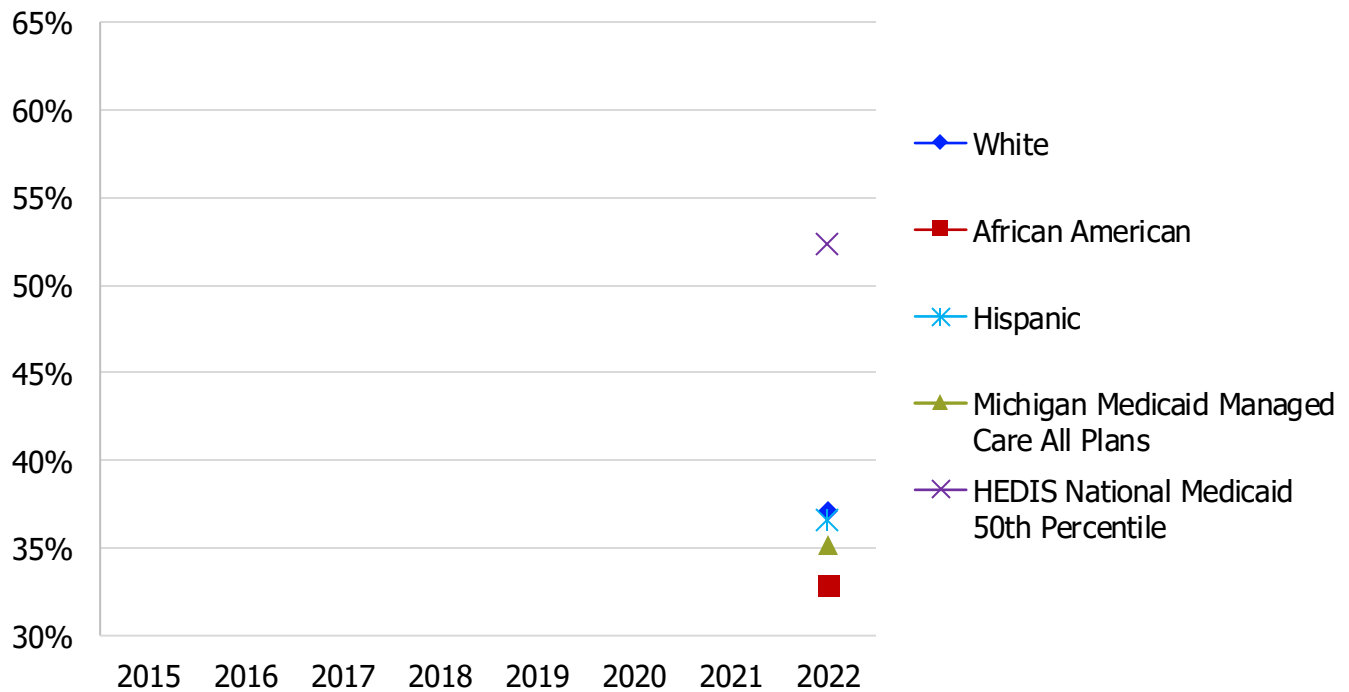


Figure 23: MY2022 Hemoglobin A1c Poor Control for Diabetes

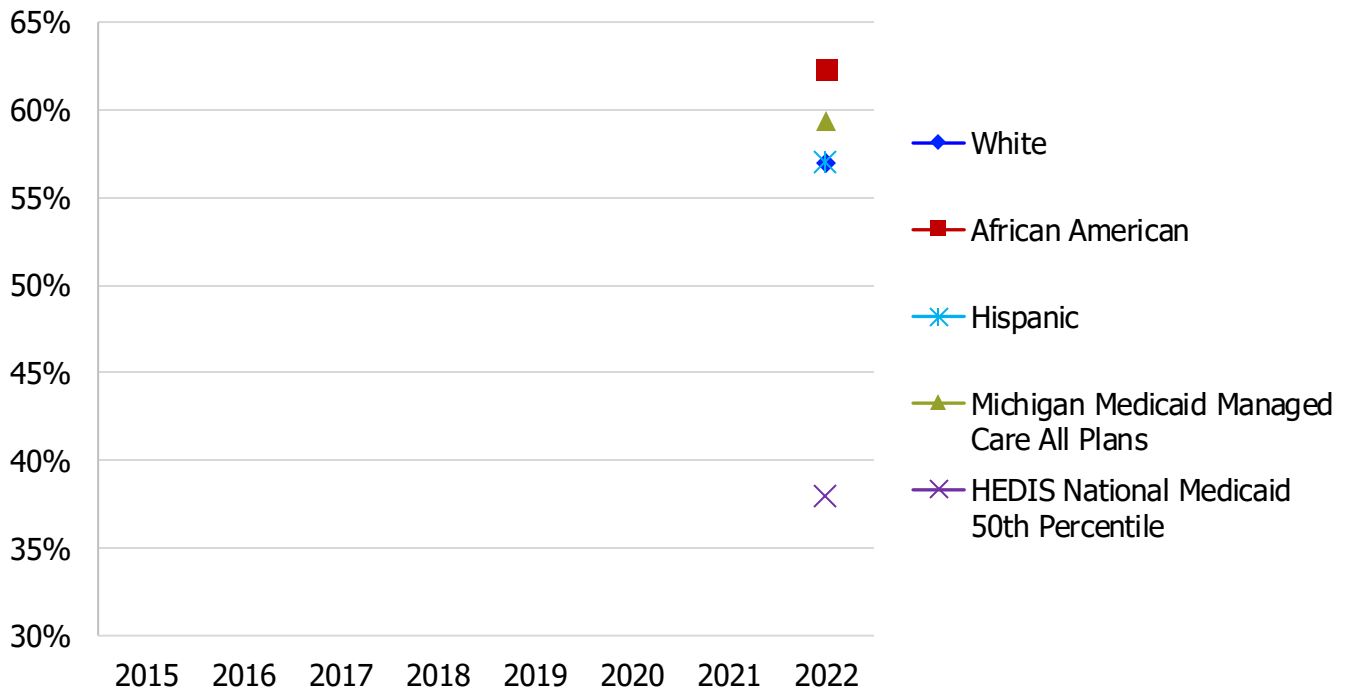
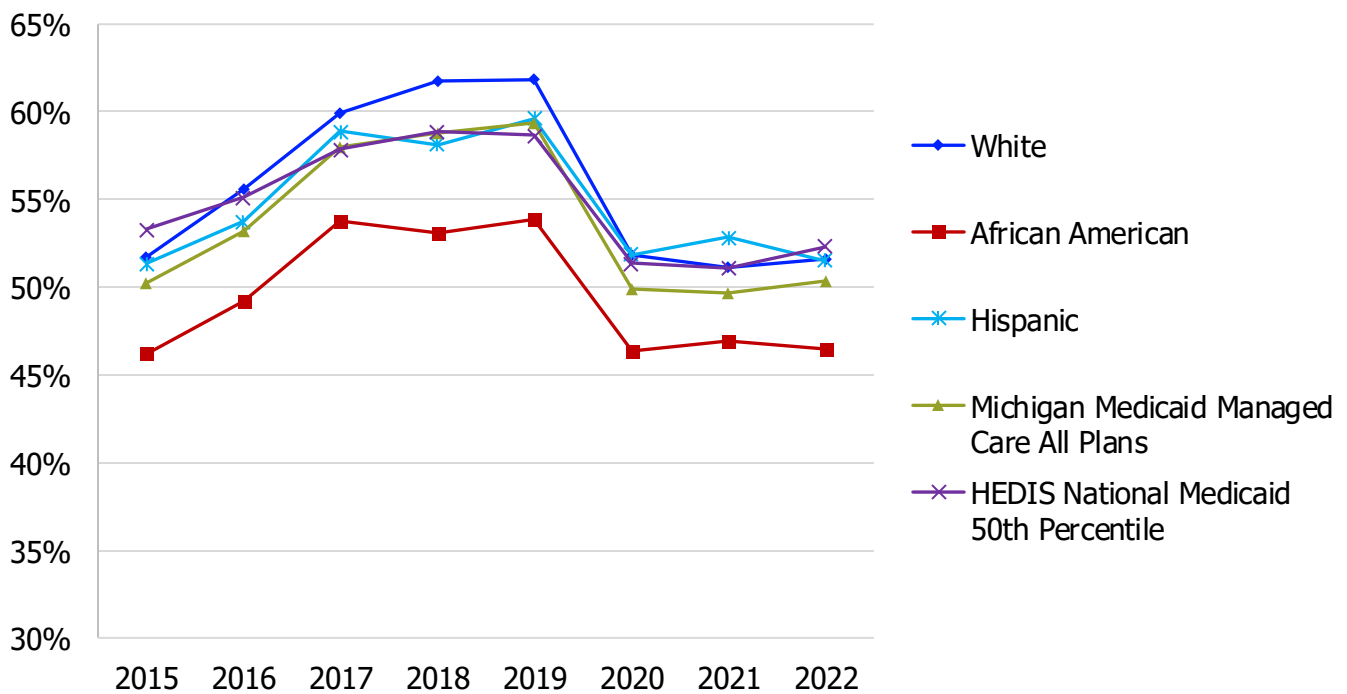


Figure 24: MY2015-MY2022 Eye Exam for Patients with Diabetes



Index of Disparity Summary

Michigan Medicaid Managed Care All Plans

Table 19: MY2015-MY2022 Index of Disparity (%) for Medicaid Managed Care All Plans

Measure	Abbr.	2015	2016	2017	2018	2019	2020	2021	2022
Breast Cancer Screening	BCS	6.06	4.05	3.91	4.72	4.05	4.85	4.25	3.49
Cervical Cancer Screening	CCS	4.27	3.77	3.56	2.84	3.86	3.41	2.92	3.15
Chlamydia Screening in Women	CHL	6.86	8.37	6.13	5.63	6.99	7.91	9.69	8.11
Postpartum Care	PPC	11.65	8.38	8.76	7.32	6.37	5.13	6.74	6.32
Childhood Immunization Status - Combination 3	CIS	10.19	7.27	8.53	9.02	8.04	9.99	17.22	13.96
Immunizations for Adolescents - Combination 1	IMA	3.24	3.04	2.48	2.64	1.88	3.18	4.69	3.36
Lead Screening in Children	LSC	5.65	4.11	4.11	3.46	3.48	4.77	7.92	8.57
Child and Adolescent Well-Care Visits (3-11 Years)	WCV						7.72	7.10	6.08
Adults' Access to Preventive/Ambulatory Health Services (20-44 years)	AAP	3.37	2.82	4.01	3.85	4.56	4.95	4.37	3.30
Hemoglobin A1c Control for Diabetes	HBD8								4.40
Hemoglobin A1c Poor Control for Diabetes	HBD9								3.38
Eye Exam for Patients with Diabetes	EED	4.78	4.04	4.20	4.20	4.63	3.70	3.96	4.52

■ Low Disparity (Index of Disparity <= 5%)

■ High Disparity (Index of Disparity > 5%)

Index of Disparity Summary

Michigan Medicaid Managed Care All Plans

This chart displays twelve groups of vertical bars, each representing one of the twelve measures, from left to right: BCS, CCS, CHL, PPC, CIS, IMA, LSC, WCV, AAP, HBD8, HBD9, and EED. Each group contains eight bars showing the Index of Disparity values from 2015 to 2022.

Figure 25: MY2015-MY2022 Index of Disparity for Medicaid Managed Care All Plans

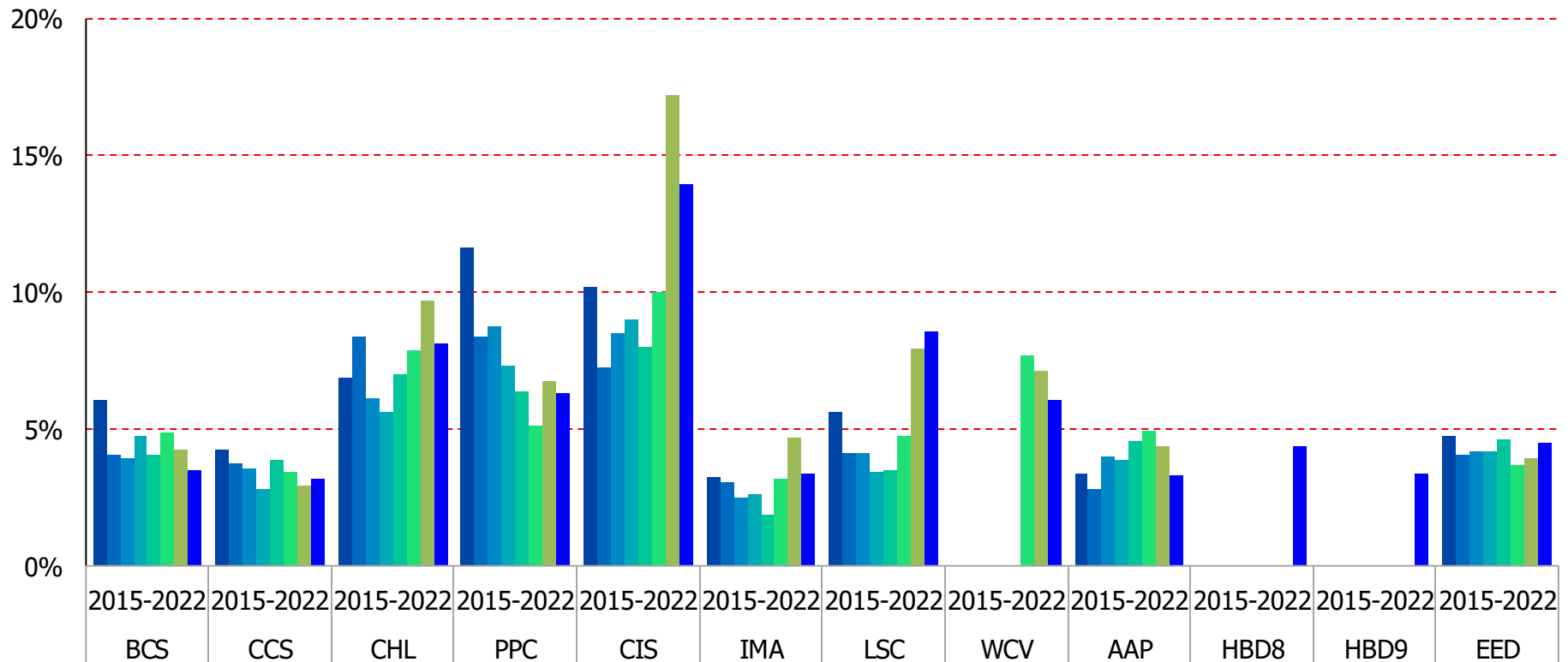


Table 20: MY2022 Rates and Confidence Intervals by Race/Ethnicity

Breast Cancer Screening (BCS)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	53.05%	50.82%	55.29%
African American	51.44%	50.79%	52.10%
White	54.24%	53.84%	54.63%
Hispanic	56.52%	54.64%	58.41%
American Indian/ Alaska Native	50.58%	47.07%	54.08%
All Plans	53.68%	53.38%	53.99%

Cervical Cancer Screening (CCS)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	51.63%	50.56%	52.70%
African American	51.70%	51.43%	51.96%
White	50.28%	50.10%	50.45%
Hispanic	55.54%	54.93%	56.15%
American Indian/ Alaska Native	51.34%	49.97%	52.72%
All Plans	50.65%	50.51%	50.78%

Table 20: MY2022 Rates and Confidence Intervals by Race/Ethnicity - continued

Chlamydia Screening in Women (CHL)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	58.58%	55.69%	61.47%
African American	74.44%	73.94%	74.95%
White	55.96%	55.52%	56.40%
Hispanic	64.15%	62.95%	65.35%
American Indian/ Alaska Native	61.37%	58.36%	64.38%
All Plans	62.76%	62.45%	63.07%

Postpartum Care (PPC)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	72.96%	69.12%	76.80%
African American	58.27%	57.33%	59.22%
White	69.79%	69.12%	70.45%
Hispanic	68.06%	66.12%	69.99%
American Indian/ Alaska Native	65.30%	60.42%	70.18%
All Plans	66.29%	65.79%	66.78%

Table 20: MY2022 Rates and Confidence Intervals by Race/Ethnicity - continued

Childhood Immunizations Status - Combination 3 (CIS)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	61.65%	58.83%	64.48%
African American	38.67%	37.86%	39.49%
White	49.93%	49.24%	50.62%
Hispanic	52.86%	51.02%	54.70%
American Indian/ Alaska Native	46.28%	41.57%	50.99%
All Plans	46.82%	46.36%	47.27%

Immunizations for Adolescents - Combination 1 (IMA)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	74.82%	71.55%	78.08%
African American	71.87%	71.07%	72.66%
White	76.13%	75.57%	76.68%
Hispanic	81.59%	80.28%	82.90%
American Indian/ Alaska Native	73.32%	69.28%	77.36%
All Plans	74.85%	74.44%	75.26%

Table 20: MY2022 Rates and Confidence Intervals by Race/Ethnicity - continued

Lead Screening in Children (LSC)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	60.37%	57.53%	63.21%
African American	49.66%	48.83%	50.49%
White	52.81%	52.12%	53.50%
Hispanic	61.81%	60.03%	63.60%
American Indian/ Alaska Native	50.12%	45.40%	54.84%
All Plans	52.65%	52.20%	53.10%

Child and Adolescent Well-Care Visits 3-11 years (WCV)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	66.42%	65.42%	67.43%
African American	54.06%	53.78%	54.34%
White	61.28%	61.07%	61.49%
Hispanic	61.82%	61.27%	62.36%
American Indian/ Alaska Native	58.26%	56.79%	59.74%
All Plans	59.20%	59.05%	59.35%

Table 20: MY2022 Rates and Confidence Intervals by Race/Ethnicity - continued

Adults' Access to Preventive/Ambulatory Health Services 20-44 Years (AAP)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	75.45%	74.65%	76.25%
African American	68.58%	68.38%	68.78%
White	75.26%	75.13%	75.40%
Hispanic	72.54%	72.07%	73.01%
American Indian/ Alaska Native	75.29%	74.28%	76.31%
All Plans	72.86%	72.76%	72.96%

Hemoglobin A1c Control for Diabetes (HBD8)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	35.28%	33.50%	37.05%
African American	32.86%	32.33%	33.40%
White	37.02%	36.62%	37.41%
Hispanic	36.54%	35.24%	37.84%
American Indian/ Alaska Native	33.14%	30.27%	36.01%
All Plans	35.10%	34.83%	35.38%

Table 20: MY2022 Rates and Confidence Intervals by Race/Ethnicity - continued

Hemoglobin A1c Poor Control for Diabetes (HBD9)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	59.50%	57.68%	61.33%
African American	62.31%	61.76%	62.86%
White	56.95%	56.55%	57.36%
Hispanic	56.97%	55.63%	58.30%
American Indian/ Alaska Native	61.43%	58.46%	64.40%
All Plans	59.31%	59.02%	59.59%

Eye Exam for Patients with Diabetes (EED)

Race/Ethnicity	Rate	Lower Limit of 95% Confidence Interval	Upper Limit of 95% Confidence Interval
Asian American/ Native Hawaiian/OPI	53.67%	51.82%	55.52%
African American	46.49%	45.93%	47.06%
White	51.57%	51.17%	51.98%
Hispanic	51.50%	50.15%	52.85%
American Indian/ Alaska Native	52.03%	48.99%	55.08%
All Plans	50.31%	50.01%	50.60%

Appendices

Appendix A: Acronyms

Acronym	Description
MHP	Medicaid Health Plan
ACA	Affordable Care Act
MDHHS	Michigan Department of Health and Human Services
HEDIS	Healthcare Effectiveness Data and Information Set
PIP	Performance Improvement Project
NCQA	National Committee for Quality Assurance
CI	Confidence Interval
ID	Index of Disparity
BCS	Breast Cancer Screening
CCS	Cervical Cancer Screening
CHL	Chlamydia Screening in Women
PPC	Postpartum Care
CIS	Childhood Immunization Status - Combination 3
IMA	Immunizations for Adolescents - Combination 1
LSC	Lead Screening in Children
WCV	Child and Adolescent Well-Care Visits 3-11 years
AAP	Adults Access to Preventive/Ambulatory Health Services (20-44)
HBD8	Hemoglobin A1c Control for Diabetes
HBD9	Hemoglobin A1c Poor Control for Diabetes
EED	Eye Exam for Patients with Diabetes
SDOH	Social Determinants of Health
CHW	Community Health Worker

White (%)

Measure	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
BCS	58.00	57.80	**	64.00	58.91	63.23	62.77	61.99	61.51	56.78	53.53	54.24
CCS	66.40	66.22	**	62.00	56.42	58.60	59.06	60.54	57.95	56.46	53.44	50.28
CHL	56.10	57.98	55.60	54.19	56.83	58.54	59.04	60.19	59.28	53.36	54.48	55.96
PPC	62.60	61.75	64.80	61.57	61.73	63.31	64.14	64.32	69.27	67.84	69.99	69.79
CIS	74.00	74.88	72.10	72.99	70.57	73.26	72.52	69.27	70.57	66.24	53.19	49.93
IMA	74.60	86.77	84.60	87.65	84.74	85.64	83.53	83.92	83.83	82.03	76.56	76.13
LSC	73.10	78.53	77.80	78.71	78.91	80.69	79.79	78.49	77.65	75.15	55.16	52.81
WCV										54.61	60.20	61.28
AAP	86.20	87.02	87.80	86.19	85.92	84.58	81.88	81.61	81.84	77.57	77.12	75.26
HBD8												37.02
HBD9												56.95
EED	47.20	50.43	51.50	45.73	51.78	55.56	59.99	61.81	61.84	51.87	51.12	51.57

Green
Significant increase from previous year

Red
Significant decrease from previous year

African American (%)

Measure	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
BCS	55.70	56.39	**	61.20	58.54	60.68	60.42	59.19	58.33	54.06	50.75	51.44
CCS	67.30	68.14	**	65.60	60.84	63.07	63.12	63.79	61.62	58.31	55.72	51.70
CHL	73.60	75.15	73.30	73.08	70.50	75.73	76.31	76.33	75.40	71.79	73.18	74.44
PPC	46.30	48.74	53.40	48.17	48.55	54.14	54.06	50.53	59.37	54.96	57.27	58.27
CIS	63.00	64.70	62.90	64.24	58.28	64.60	63.40	59.17	57.69	50.53	39.66	38.67
IMA	72.40	83.85	81.40	86.02	80.74	83.86	82.68	81.28	83.43	79.86	68.53	71.87
LSC	75.20	77.77	77.30	77.49	76.33	77.92	78.10	74.43	73.83	67.72	50.46	49.66
WCV										42.46	52.98	54.06
AAP	80.20	80.97	81.60	78.49	77.17	76.69	73.50	72.90	74.15	69.79	71.67	68.58
HBD8	73.50	75.71	76.50	77.66	79.84	80.93	80.78	82.75	82.56	76.50	78.22	32.86
HBD9												62.31
EED	41.00	45.91	47.30	41.60	46.19	49.17	53.75	53.06	53.87	46.32	46.93	46.49

**
Data not submitted due to NCQA revisions to the specifications of the measure

Hispanic (%)

Measure	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
BCS	58.10	58.79	**	61.30	63.84	65.79	67.82	66.55	63.87	59.32	57.19	56.52
CCS	69.80	66.55	**	64.90	60.20	62.27	62.63	64.55	62.64	58.67	58.52	55.54
CHL	64.60	63.94	62.60	58.96	62.48	65.37	65.17	66.92	67.13	61.12	62.17	64.15
PPC	58.80	62.11	63.50	63.23	60.41	62.76	60.99	60.85	68.06	65.02	71.88	68.06
CIS	78.40	75.09	77.40	78.58	76.57	79.35	78.23	76.09	74.81	69.16	65.43	52.86
IMA	80.70	89.32	88.50	90.49	91.17	91.15	88.50	89.45	89.70	86.81	81.86	81.59
LSC	81.80	82.49	83.10	84.60	83.17	87.66	85.18	83.27	81.75	79.95	61.68	61.81
WCV										54.04	62.58	61.82
AAP	82.20	81.98	83.80	81.92	81.94	81.73	77.89	78.88	79.57	74.76	77.49	72.54
HBD8												36.54
HBD9												56.97
EED	42.00	45.47	50.30	45.47	51.36	53.73	58.90	58.12	59.61	51.86	52.85	51.50

Green
Significant
increase from
previous year

Red
Significant
decrease from
previous year

Michigan Medicaid Managed Care All Plans (%)

Measure	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
BCS	57.00	57.41	**	63.00	59.30	62.60	62.13	61.37	60.83	56.31	52.30	53.68
CCS	66.50	66.06	**	62.90	57.48	59.64	59.97	60.90	58.90	56.40	53.65	50.65
CHL	64.50	65.83	63.40	62.39	62.50	65.36	65.65	66.27	65.42	60.20	61.00	62.76
PPC	58.10	58.41	60.30	57.38	57.22	60.62	60.87	59.63	66.02	63.39	65.94	66.29
CIS	70.70	72.24	70.70	71.03	66.82	71.43	70.71	67.12	67.31	61.54	49.15	46.82
IMA	74.10	85.95	83.40	87.31	83.90	85.60	83.48	83.62	83.99	81.56	73.89	74.85
LSC	74.60	78.90	78.40	78.93	78.57	80.74	79.68	77.63	76.84	72.99	53.95	52.65
WCV										50.92	58.13	59.20
AAP	83.60	84.53	85.30	83.21	82.76	81.64	78.64	78.26	79.02	74.60	74.68	72.86
HBD8												35.10
HBD9												59.31
EED	44.60	48.95	49.90	44.88	50.21	53.26	58.03	58.85	59.37	49.91	49.67	50.31

**
Data not
submitted due
to NCQA
revisions to the
specifications of
the measure

Appendix C: MY2011-MY2022 Index of Disparity (%) for Medicaid Managed Care All Plans

Measure	Abbr.	2011*	2012*	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Breast Cancer Screening	BCS	5.36	4.79	**	4.30	6.06	4.05	3.91	4.72	4.05	4.85	4.25	3.49
Cervical Cancer Screening	CCS	6.38	4.55	**	7.88	4.27	3.77	3.56	2.84	3.86	3.41	2.92	3.15
Chlamydia Screening in Women	CHL	10.20	8.00	9.37	14.75	6.86	8.37	6.13	5.63	6.99	7.91	9.69	8.11
Postpartum Care	PPC	8.22	8.32	10.10	9.99	11.65	8.38	8.76	7.32	6.37	5.13	6.74	6.32
Childhood Immunizations Status - Combination 3	CIS	8.24	8.38	11.70	5.87	10.19	7.27	8.53	9.02	8.04	9.99	17.22	13.96
Immunizations for Adolescents - Combination 1	IMA	4.17	2.86	5.18	4.86	3.24	3.04	2.48	2.64	1.88	3.18	4.69	3.36
Lead Screening in Children	LSC	5.36	3.11	4.50	5.58	5.65	4.11	4.11	3.46	3.48	4.77	7.92	8.57
Child and Adolescent Well-Care Visits (3-11 Years)	WCV										7.72	7.10	6.08
Adults' Access to Preventive/Ambulatory Health Services (20-44 years)	AAP	2.73	3.10	3.66	3.40	3.37	2.82	4.01	3.85	4.56	4.95	4.37	3.30
Hemoglobin A1c Control for Diabetes	HBD8	3.65	4.07	3.18	3.44	3.62	3.91	3.70	2.95	2.24	2.55	3.46	4.40
Hemoglobin A1c Poor Control for Diabetes	HBD9												3.38
Eye Exam for Patients with Diabetes	CDC2	10.52	7.33	4.70	5.19	4.78	4.04	4.20	4.20	4.63	3.70	3.96	4.52

* Due to methodology changes starting from MY 2013, caution should be taken with comparing the Index of Disparity results from MY2013 and forward with results from MY2012 and earlier

** Data not submitted for BCS and CCS due to NCQA revisions to the specifications of these two measures

■ Low Disparity (Index of Disparity <= 5%)
 ■ High Disparity (Index of Disparity > 5%)

Endnotes

- 1 [Disparity in Health and Healthcare: 5 Key Questions and Answers](#). 2024. Kaiser Family Foundation.
- 2 [The Business Case for Racial Equity: Michigan. 2018](#).
- 3 [Balanced Budget Act of 1997. 42 CFR 438.206. 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.
- 7 HEDIS MY 2022 Volume 2: Technical Specifications for Health Plans. Washington, DC: National Committee for Quality Assurance.
- 8 [Pearcy JN, Keppel KG. A summary measure of health disparity](#). Public Health Reports. 2002;117:273-280.
- 9 [2022 HEDIS Aggregate Report for Michigan Medicaid, October 2022](#). Table 9-1a & 1b, pages 104-106.
- 10 [Kaiser Family Foundation: Key Data on Health and Health Care by Race and Ethnicity](#)
- 11 [CMS Approves Michigan's Extension of Medicaid & CHIP Coverage for 12 Months After Pregnancy](#)
- 12 [MDHHS 2022-2024 Social Determinants of Health Strategy](#).