

Statewide Executive Summary
HealthChoice and Primary Adult Care participating organizations
HEDIS® 2011

Prepared for:

Maryland Department of Health and Mental Hygiene

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Prepared by:

HealthcareData Company, LLC
600 Bent Creek Blvd., Suite 160
Mechanicsburg, PA 17050
(800) 472-5382
www.HDCdata.com



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Background

The Maryland Department of Health and Mental Hygiene (DHMH) is responsible for evaluating the quality of care provided to Maryland Medicaid beneficiaries enrolled in the HealthChoice program, a mandatory managed care program established in 1997 under the §1115 federal waiver, and to Primary Adult Care (PAC) beneficiaries, a program established to provide services to lower-income Maryland residents. There are currently seven organizations participating in HealthChoice, with a total of 709,205 enrollees as of December 31, 2010. Five organizations currently participate in PAC, with a total of 48,749 enrollees as of December 31, 2010.

One way to evaluate quality is to use HEDIS[®] (Healthcare Effectiveness Data and Information Set), a group of standardized performance measures developed and maintained by the National Committee for Quality Assurance (NCQA). As part of DHMH's ongoing quality-monitoring efforts, state regulations require healthcare organizations to annually submit selected HEDIS measures to DHMH.

Seven HealthChoice organizations participated in the submission and validation of HEDIS data: AMERIGROUP Community Care, Diamond Plan, Jai Medical Systems, Maryland Physicians Care, MedStar Family Choice, Priority Partners, and UnitedHealthcare. Five HealthChoice organizations reported PAC information in 2011: AMERIGROUP Community Care, Jai Medical Systems, Maryland Physicians Care, Priority Partners, and UnitedHealthcare.

In order to ensure the validity of HEDIS data, DHMH contracted with an independent NCQA-licensed HEDIS audit firm, HealthcareData Company, LLC, to validate each organization's results. Audit activities for all seven organizations were conducted as prescribed by NCQA's HEDIS Compliance Audit Standards, Policies and Procedures.

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

I. Measures Designated for Reporting

Annually, DHMH determines the set of measures required for HEDIS reporting. DHMH selects these measures because they provide meaningful managed care organization comparative information and they measure performance pertinent to DHMH's priorities and goals.

Measures selected by DHMH for HealthChoice Reporting

DHMH required HealthChoice managed care organizations to report 21 HEDIS measures for services rendered in calendar year 2010. This set of measures reflected no change from the prior year.

Effectiveness of Care

- Childhood Immunization Status (CIS)
- Immunizations for Adolescents (IMA)
- Breast Cancer Screening (BCS)
- Cervical Cancer Screening (CCS)
- Comprehensive Diabetes Care (CDC), all indicators except HbA1c good control (<7.0%)
- Use of Appropriate Medications for People with Asthma (ASM)
- Appropriate Treatment for Children with Upper Respiratory Infection (URI)
- Appropriate Testing for Children with Pharyngitis (CWP)
- Chlamydia Screening in Women (CHL)

Access/Availability of Care

- Adults' Access to Preventive/Ambulatory Health Services (AAP)
- Children and Adolescents' Access to Primary Care Practitioners (CAP)
- Prenatal and Postpartum Care (PPC)
- Call Answer Timeliness (CAT)
- Call Abandonment (CAB)
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)

Use of Services

- Frequency of Ongoing Prenatal Care (FPC)
- Well-Child Visits in the First 15 Months of Life (W15)
- Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)
- Adolescent Well-Care Visits (AWC)
- Ambulatory Care (AMB)
- Identification of Alcohol and Other Drug Services (IAD)

Measures selected by DHMH for Primary Adult Care (PAC) performance reporting

DHMH required Primary Adult Care (PAC) organizations to report four HEDIS measures for services rendered in calendar year 2010.

- Breast Cancer Screening (BCS)
- Cervical Cancer Screening (CCS)
- Comprehensive Diabetes Care (CDC), all indicators except HbA1c good control (<7.0%)
- Adults' Access to Preventive / Ambulatory Health Services (AAP)

II. HEDIS Methodology

The HEDIS-reporting organization follows guidelines for data collection and specifications for measure calculation described in *HEDIS 2011 Volume 2: Technical Specifications*.

Data collection: The organization pulls together all data sources, typically into a data warehouse, against which HEDIS software programs are applied to calculate measures. Three approaches may be taken for data collection:

Administrative data: Data from transaction systems (claims, encounters, enrollment, practitioner) provide the majority of administrative data. Organizations may receive encounter files from pharmacy, laboratory, vision, and behavioral health vendors.

Supplemental data: NCQA defines supplemental data as atypical administrative data, i.e., not claims or encounters. Sources include immunization registry files, laboratory results files, case management databases, and medical record-derived databases.

Medical record data: Data abstracted from paper or electronic medical records may be applied to certain measures, using the NCQA-defined hybrid method. HEDIS specifications describe statistically sound methods of sampling, so that only a subset of the eligible population's medical records needs to be chased.

NCQA specifies hybrid calculation methods, in addition to administrative methods, for several measures selected by DHMH for HEDIS reporting:

- Childhood Immunization Status (CIS)
- Immunizations for Adolescents (IMA)
- Cervical Cancer Screening (CCS)
- Comprehensive Diabetes Care (CDC)—HbA1c testing; HbA1c poor control >9.0;
HbA1c control <8.0*
- Comprehensive Diabetes Care (CDC)—Eye exam (retinal) performed
- Comprehensive Diabetes Care (CDC)—LDL-C screening; LDL-C control <100mg/dL*
- Comprehensive Diabetes Care (CDC)—Medical attention for nephropathy
- Comprehensive Diabetes Care (CDC)—Blood pressure control <140/90 mm Hg;
- Comprehensive Diabetes Care (CDC)—Blood pressure control <140/80 mm Hg*
- Prenatal and Postpartum Care (PPC)
- Frequency of Ongoing Prenatal Care (FPC)
- Well-Child Visits in the First 15 Months of Life (W15)
- Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)
- Adolescent Well-Care Visits (AWC)

Use of the hybrid method is optional. NCQA maintains that no one approach to measure calculation or data collection is considered superior to another. From organization to organization, the percentages of data obtained from one data source versus another are highly variable, making it inappropriate to make across-the-board statements about the need for, or positive impact of, one method versus another. In fact, an organization's yield from the hybrid method may impact the final rate by only a few percentage points, an impact that is also achievable through improvement of administrative data systems.

* An organization must use the same method for the group of indicators.

III. Measure-specific Findings

Three years of HealthChoice results are displayed in Table A, along with the 2011 Maryland Average Reportable Rate (MARR) and most recent (HEDIS 2010) National HEDIS Mean (NHM). Table A1 shows three years of PAC results, along with the 2010 and 2011 MARR.

Measure-specific descriptions and five-year historical results are located on the pages following Table A.

| Table A – HealthChoice Organizations HEDIS 2011 Results, page one of three | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2011 | HEDIS 2010 |
|--|-------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---------------|
| | ACC | | | DIA | | | JMS | | | MPC | | | MSFC | | | PP | | | UHC | | | MARR | NMH |
| | Children's Prevention and Screening | | | | | | | | | | | | | | | | | | | | | | |
| Childhood Immunization Status (CIS) – Combination 2 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV) | 82.1% | 78.4% | 79.4% | 73.0% | 76.0% | 65.7% | 87.1% | 81.9% | 88.4% | 74.7% | 80.0% | 84.9% | 89.2% | 86.6% | 86.6% | 82.1% | 74.7% | 83.0% | 84.8% | 83.9% | 71.0% | 79.9% | 74.3% |
| Childhood Immunization Status (CIS) – Combination 3 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate) | 74.6% | 73.5% | 73.8% | 69.4% | 71.4% | 62.2% | 80.6% | 80.8% | 85.9% | 70.1% | 76.2% | 81.3% | 87.8% | 83.7% | 84.7% | 77.4% | 68.4% | 79.8% | 78.7% | 78.3% | 66.7% | 76.3% | 69.4% |
| Childhood Immunization Status (CIS) – Combination 4 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A) | * | 40.0% | 28.9% | * | 29.0% | 29.9% | * | 39.0% | 36.1% | * | 26.0% | 30.2% | * | 28.0% | 29.2% | * | 27.5% | 25.8% | * | 52.1% | 34.3% | 30.6% | 30.4% |
| Childhood Immunization Status (CIS) – Combination 5 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, rotavirus) | * | 45.9% | 54.4% | * | 33.6% | 40.2% | * | 55.4% | 58.9% | * | 40.1% | 53.8% | * | 48.2% | 53.5% | * | 46.2% | 37.5% | * | 56.4% | 47.4% | 49.4% | 41.6% |
| Childhood Immunization Status (CIS) – Combination 6 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, influenza) | * | 35.1% | 40.5% | * | 36.4% | 34.6% | * | 27.7% | 40.2% | * | 34.5% | 37.5% | * | 40.9% | 49.1% | * | 40.1% | 47.4% | * | 48.4% | 36.5% | 40.9% | 33.8% |
| Childhood Immunization Status (CIS) – Combination 7 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A, rotavirus) | * | 27.4% | 23.1% | * | 16.1% | 20.9% | * | 29.4% | 28.6% | * | 16.1% | 21.2% | * | 19.2% | 21.9% | * | 19.5% | 14.6% | * | 38.7% | 24.6% | 22.1% | 20.6% |
| Childhood Immunization Status (CIS) – Combination 8 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A, influenza) | * | 21.9% | 17.8% | * | 16.6% | 17.3% | * | 15.8% | 20.7% | * | 15.6% | 16.3% | * | 15.1% | 18.0% | * | 19.2% | 17.3% | * | 34.3% | 21.7% | 18.4% | 17.2% |
| Childhood Immunization Status (CIS) – Combination 9 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, rotavirus, influenza) | * | 23.8% | 32.4% | * | 18.0% | 25.2% | * | 19.8% | 27.8% | * | 20.0% | 25.1% | * | 25.5% | 33.1% | * | 26.8% | 25.5% | * | 38.0% | 27.7% | 28.1% | 23.2% |
| Childhood Immunization Status (CIS) – Combination 10 (DTaP/DT, IPV, MMR, HiB, Hepatitis B, VZV, pneumococcal conjugate, Hepatitis A, rotavirus, and influenza) | * | 16.3% | 15.5% | * | 9.2% | 13.8% | * | 12.4% | 17.0% | * | 10.0% | 10.9% | * | 10.7% | 13.9% | * | 13.9% | 10.7% | * | 27.3% | 15.8% | 13.9% | 12.6% |
| Immunizations for Adolescents (IMA) – Combination 1 (Meningococcal, Tdap/Td) | * | 41.7% | 46.1% | * | 32.1% | 40.0% | * | 67.3% | 71.6% | * | 45.7% | 52.1% | * | 45.7% | 57.2% | * | 41.6% | 56.9% | * | 42.3% | 38.6% | 51.8% | 42.5% |
| Well-Child Visits in the First 15 months of Life (W15) – Zero visits ¹ | 2.4% | 1.2% | 0.8% | 2.6% | 4.4% | 4.3% | 2.6% | 2.8% | 2.4% | 0.7% | 1.5% | 1.1% | 1.1% | 1.4% | 2.2% | 1.5% | 0.6% | 0.9% | 1.8% | 1.8% | 2.0% | 2.0% | 2.3% |
| Well-Child Visits in the First 15 months of Life (W15) – DHMH Five or Six-or-more visits rates (additive) | 83.0% | 84.2% | 87.2% | 77.1% | 66.7% | 64.7% | 81.8% | 89.4% | 83.4% | 87.3% | 84.2% | 86.0% | 81.0% | 86.2% | 84.7% | 86.4% | 86.9% | 87.1% | 86.0% | 85.1% | 83.6% | 82.4% | 75.8% |
| Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34) | 74.2% | 76.0% | 86.6% | 70.0% | 70.4% | 75.9% | 89.9% | 92.3% | 89.3% | 73.1% | 85.7% | 86.3% | 79.4% | 79.2% | 73.5% | 75.3% | 86.6% | 78.3% | 75.4% | 82.4% | 75.2% | 80.7% | 71.6% |
| Adolescent Well-Care Visits (AWC) | 54.1% | 52.2% | 63.1% | 49.7% | 50.6% | 51.4% | 76.1% | 79.9% | 79.7% | 49.5% | 64.7% | 72.1% | 52.8% | 61.1% | 63.5% | 53.4% | 64.9% | 60.0% | 47.3% | 64.7% | 49.8% | 62.8% | 47.7% |
| Respiratory Conditions | | | | | | | | | | | | | | | | | | | | | | | |
| Appropriate Testing for Children with Pharyngitis (CWP) | 66.4% | 61.9% | 61.5% | 69.4% | 62.4% | 64.7% | 67.3% | 70.9% | 76.3% | 75.6% | 77.4% | 74.0% | 78.9% | 82.7% | 81.0% | 72.0% | 73.5% | 69.5% | 69.8% | 68.8% | 70.8% | 71.1% | 62.3% |
| Appropriate Treatment for Children with Upper Respiratory Infection (URI) | 85.0% | 84.9% | 87.0% | 82.9% | 80.6% | 85.3% | 95.5% | 95.2% | 93.8% | 84.0% | 84.1% | 85.6% | 86.3% | 85.7% | 88.6% | 84.4% | 87.2% | 88.5% | 80.6% | 79.6% | 83.3% | 87.5% | 86.0% |
| Use of Appropriate Medications for People With Asthma (ASM) – Ages 5-11 (Note: HEDIS 2008-2009 age is 5-9) | 90.0% | 91.0% | 91.9% | NA | NA | 87.5% | NA | 85.1% | 91.9% | 91.5% | 94.9% | 93.1% | 94.0% | 92.9% | 92.8% | 91.9% | 92.2% | 93.6% | 91.8% | 91.3% | 93.2% | 92.0% | 91.8% |
| Use of Appropriate Medications for People With Asthma (ASM) – Ages 12-50 (Note: HEDIS 2008-2009 had two age groups, 10-17 and 18-56) | 88.7% | 86.8% | 87.7% | NA | 95.2% | 91.2% | 72.5% | 91.6% | 93.8% | 88.7% | 88.3% | 88.9% | 93.4% | 92.4% | 89.4% | 88.2% | 88.4% | 87.6% | 89.8% | 83.0% | 86.8% | 89.3% | 86.0% |
| Use of Appropriate Medications for People With Asthma (ASM) (Note: This age group was discontinued for HEDIS 2010) | 86.0% | | | 92.3% | | | 91.7% | | | 84.0% | | | 92.9% | | | 88.8% | | | 88.6% | | | | |
| Use of Appropriate Medications for People With Asthma (ASM) – Total combined ages 5-50 (Note: HEDIS 2008-2009 age group is 5-56) | 88.6% | 89.2% | 90.1% | 91.6% | 94.5% | 89.8% | 87.3% | 89.5% | 93.3% | 87.9% | 91.2% | 90.6% | 93.4% | 92.7% | 91.1% | 89.5% | 90.3% | 90.4% | 90.1% | 87.4% | 90.2% | 90.8% | 88.6% |

1. A lower rate indicates better performance. MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean ACC = AMERIGROUP Community Care DIA = Diamond Plan JMS = Jai Medical Systems
* New measure. No data for prior years. *Italics denote age group changed from previous year's specifications.* MSFC = MedStar Family Choice PP = Priority Partners MPC = Maryland Physicians Care UHC = UnitedHealthcare

| Table A – HealthChoice Organizations HEDIS 2011 Results, page two of three | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2011 | HEDIS 2010 |
|---|-------|-------|--------------|-------|-------|--------------|-------|-------|--------------|-------|-------|--------------|-------|-------|--------------|-------|-------|--------------|-------|-------|--------------|-------|---------------|
| | ACC | | | DIA | | | JMS | | | MPC | | | MSFC | | | PP | | | UHC | | | MARR | NMH |
| Member Access | | | | | | | | | | | | | | | | | | | | | | | |
| Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 12-24 months | 97.4% | 97.6% | 97.7% | 91.8% | 91.5% | 94.4% | 88.3% | 95.1% | 94.3% | 96.6% | 97.3% | 96.5% | 96.8% | 97.2% | 95.2% | 97.8% | 98.1% | 97.9% | 96.3% | 96.7% | 96.8% | 96.1% | 85.2% |
| Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 25 months to 6 years | 91.7% | 92.7% | 92.7% | 85.5% | 85.3% | 88.1% | 89.5% | 90.3% | 90.6% | 91.1% | 91.8% | 89.8% | 91.6% | 90.5% | 88.9% | 91.7% | 93.1% | 92.3% | 92.2% | 92.4% | 91.7% | 90.6% | 88.3% |
| Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 7-11 years | 92.6% | 93.3% | 93.6% | 84.6% | 85.0% | 86.7% | 93.7% | 94.1% | 94.5% | 91.6% | 92.6% | 92.8% | 92.2% | 93.4% | 93.4% | 92.9% | 93.8% | 94.1% | 92.2% | 93.2% | 93.1% | 92.6% | 90.3% |
| Children and Adolescents' Access to Primary Care Practitioners (CAP) – Age 12-19 years | 87.3% | 87.7% | 88.6% | 81.0% | 86.4% | 86.1% | 91.9% | 90.9% | 92.0% | 88.4% | 89.0% | 89.5% | 88.7% | 90.6% | 92.0% | 89.0% | 89.5% | 90.8% | 87.6% | 88.6% | 89.9% | 89.9% | 87.9% |
| Adults' Access to Preventive/ Ambulatory Health Services (AAP) – Age 20-44 | 77.3% | 79.4% | 79.6% | 75.2% | 76.6% | 76.9% | 77.2% | 78.6% | 79.0% | 79.0% | 81.7% | 80.9% | 79.2% | 78.7% | 79.2% | 79.3% | 82.4% | 83.0% | 75.7% | 79.2% | 79.2% | 79.7% | 80.5% |
| Adults' Access to Preventive/ Ambulatory Health Services (AAP) – Age 45-64 | 83.9% | 85.0% | 85.0% | 78.6% | 77.0% | 76.4% | 86.9% | 88.5% | 89.2% | 87.5% | 87.3% | 87.4% | 85.5% | 84.6% | 84.6% | 87.5% | 88.3% | 88.5% | 85.6% | 87.1% | 85.9% | 85.3% | 85.3% |
| Women's Health | | | | | | | | | | | | | | | | | | | | | | | |
| Breast Cancer Screening (BCS) | 41.3% | 43.7% | 46.0% | 39.9% | 40.8% | 39.3% | 64.4% | 60.8% | 62.3% | 46.1% | 44.5% | 42.8% | 57.6% | 63.4% | 54.6% | 42.2% | 45.4% | 48.0% | 51.2% | 48.2% | 45.3% | 48.3% | 52.4% |
| Cervical Cancer Screening (CCS) | 67.9% | 67.3% | 76.6% | 62.7% | 65.6% | 70.2% | 78.0% | 76.4% | 79.7% | 66.3% | 67.9% | 69.7% | 66.4% | 67.7% | 76.4% | 63.0% | 67.7% | 69.4% | 66.1% | 64.4% | 70.3% | 73.2% | 65.8% |
| Chlamydia Screening in Women (CHL) – Age 16-20 years | 58.3% | 63.2% | 62.8% | 46.4% | 58.9% | 54.4% | 81.0% | 84.9% | 89.2% | 58.6% | 61.3% | 60.6% | 52.0% | 57.1% | 56.2% | 58.1% | 61.0% | 62.1% | 50.3% | 57.9% | 55.9% | 63.0% | 54.4% |
| Chlamydia Screening in Women (CHL) – Age 21-24 years (Note: Rates for 2008 and prior year were for ages 21-25.) | 68.7% | 71.3% | 69.8% | 56.8% | 68.5% | 71.1% | 73.9% | 75.4% | 78.6% | 68.2% | 66.1% | 65.1% | 63.4% | 62.8% | 67.2% | 63.6% | 67.9% | 68.8% | 59.3% | 64.2% | 62.1% | 69.0% | 61.6% |
| Chlamydia Screening in Women (CHL) – Total, 16-24 years of age (Note: Rates for 2008 and prior year were for ages 16-25.) | 61.3% | 66.2% | 65.5% | 50.2% | 63.7% | 63.1% | 78.7% | 81.4% | 85.3% | 61.1% | 63.0% | 62.4% | 55.1% | 58.8% | 60.1% | 59.4% | 63.2% | 64.6% | 52.5% | 59.9% | 58.2% | 65.6% | 56.7% |
| Prenatal and Postpartum Care | | | | | | | | | | | | | | | | | | | | | | | |
| Prenatal and Postpartum Care (PPC) – Timeliness of Prenatal Care | 90.9% | 87.7% | 87.7% | 87.3% | 81.4% | 83.1% | 88.4% | 86.7% | 89.2% | 87.0% | 89.7% | 83.9% | 87.2% | 89.6% | 90.7% | 91.4% | 91.0% | 87.9% | 89.7% | 86.6% | 85.7% | 86.9% | 83.4% |
| Prenatal and Postpartum Care (PPC) – Postpartum Care | 64.3% | 66.7% | 66.3% | 52.8% | 59.3% | 59.4% | 72.6% | 79.2% | 80.2% | 62.1% | 72.2% | 75.2% | 71.9% | 78.5% | 71.7% | 63.5% | 66.7% | 68.2% | 67.6% | 63.4% | 62.5% | 69.1% | 64.1% |
| Frequency of Ongoing Prenatal Care (FPC) – Less than 21% of expected visits ¹ | 2.4% | 2.9% | 3.5% | 7.1% | 11.1% | 7.9% | 2.3% | 4.6% | 1.4% | 3.3% | 3.9% | 4.2% | 2.7% | 2.1% | 1.8% | 4.3% | 3.4% | 3.5% | 4.5% | 8.7% | 3.6% | 3.7% | 10.3% |
| Frequency of Ongoing Prenatal Care (FPC) – Greater than or equal to 81% of expected visits | 74.3% | 71.0% | 71.4% | 62.2% | 58.1% | 58.3% | 81.9% | 80.4% | 82.4% | 71.6% | 77.8% | 74.0% | 92.1% | 81.8% | 79.6% | 76.6% | 80.7% | 77.9% | 78.2% | 73.8% | 75.8% | 74.2% | 61.6 |
| Diabetes Care | | | | | | | | | | | | | | | | | | | | | | | |
| Comprehensive Diabetes (CDC) – Hemoglobin A1c Testing | 78.8% | 74.0% | 76.2% | 67.8% | 59.8% | 62.9% | 90.7% | 91.6% | 89.4% | 74.2% | 78.6% | 79.6% | 85.1% | 85.7% | 83.7% | 77.7% | 78.3% | 78.5% | 71.0% | 71.8% | 73.2% | 77.6% | 80.6% |
| Comprehensive Diabetes (CDC) – HbA1c Poor Control (>9.0%) ¹ | 49.6% | 49.5% | 49.3% | 52.1% | 57.4% | 55.9% | 30.3% | 34.4% | 38.0% | 57.9% | 53.0% | 51.1% | 33.8% | 27.6% | 37.0% | 47.3% | 44.8% | 46.0% | 56.4% | 51.6% | 56.2% | 47.6% | 44.9% |
| Comprehensive Diabetes (CDC) – HbA1c Adequate Control (< 8.0%) | 43.6% | 42.8% | 41.1% | 42.1% | 36.1% | 37.1% | 57.8% | 54.2% | 52.7% | 36.4% | 41.1% | 41.6% | 54.6% | 50.0% | 52.8% | 45.8% | 48.2% | 46.2% | 37.2% | 43.6% | 37.5% | 44.1% | 45.7% |
| Comprehensive Diabetes (CDC) – Eye Exam (Retinal) Performed | 50.1% | 51.4% | 62.3% | 52.1% | 51.6% | 55.9% | 77.2% | 77.8% | 79.7% | 65.8% | 74.0% | 74.5% | 72.2% | 75.1% | 73.7% | 54.6% | 65.0% | 62.2% | 65.9% | 71.3% | 66.7% | 67.9% | 52.7% |
| Comprehensive Diabetes (CDC) – LDL-C Screening | 74.5% | 69.3% | 71.6% | 66.9% | 62.3% | 61.8% | 93.3% | 93.1% | 91.2% | 73.9% | 72.5% | 74.9% | 81.7% | 81.5% | 79.3% | 73.9% | 74.5% | 70.4% | 71.5% | 70.8% | 71.0% | 74.3% | 74.2% |
| Comprehensive Diabetes (CDC) – LDL-C Control (<100 mg/dL) | 34.9% | 33.3% | 38.2% | 28.1% | 35.2% | 24.7% | 47.2% | 52.7% | 47.8% | 28.9% | 32.4% | 32.4% | 43.8% | 42.1% | 39.2% | 42.5% | 39.4% | 37.2% | 29.2% | 31.1% | 27.0% | 35.2% | 33.5% |
| Comprehensive Diabetes (CDC) – Medical Attention for Nephropathy | 78.8% | 74.4% | 78.8% | 75.2% | 69.7% | 67.1% | 93.3% | 93.1% | 93.6% | 75.8% | 78.6% | 77.6% | 86.6% | 86.9% | 85.6% | 78.3% | 77.6% | 80.1% | 73.7% | 74.2% | 73.5% | 79.5% | 76.9% |
| Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/80 mm Hg)** | 27.2% | 28.8% | 41.3% | 25.6% | 32.8% | 28.8% | 23.6% | 29.1% | 27.4% | 25.6% | 22.9% | 31.1% | 36.3% | 36.0% | 37.7% | 33.6% | 31.4% | 37.6% | 28.2% | 30.9% | 19.2% | 31.9% | |
| Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg) | 54.7% | 53.5% | 63.0% | 45.5% | 62.3% | 51.8% | 47.2% | 54.0% | 43.2% | 51.2% | 50.1% | 51.3% | 65.7% | 67.2% | 59.6% | 58.8% | 61.3% | 59.1% | 55.7% | 54.3% | 32.8% | 51.6% | 59.8% |

1. A lower rate indicates better performance. MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean ACC = AMERIGROUP Community Care DIA = Diamond Plan JMS = Jai Medical Systems
** New measure for HEDIS 2011. Data for prior years 130/80. *Italics denote age group changed from previous year's specifications.* MSFC = MedStar Family Choice PP = Priority Partners MPC = Maryland Physicians Care UHC = UnitedHealthcare

| Table A – HealthChoice Organizations HEDIS 2011 Results, page three of three | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2009 | 2010 | 2011 | 2011 | HEDIS 2010 |
|---|-------|-------|--------------|-------|-------|--------------|-------|-------|--------------|-------|-------|--------------|-------|-------|-------------------------|-------|-------|--------------|-------|-------|--------------|-------|---------------|
| | ACC | | | DIA | | | JMS | | | MPC | | | MSFC | | | PP | | | UHC | | | MARR | NMH |
| Behavioral Health | | | | | | | | | | | | | | | | | | | | | | | |
| Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Initiation 13-17 Years | 41.6% | 38.9% | 47.6% | NA | NA | NA | NA | NA | NA | 37.9% | 25.3% | 49.5% | 17.8% | 23.1% | 19.6% | 45.7% | 46.9% | 50.0% | 46.8% | 41.3% | 52.0% | 43.7% | 42.5% |
| Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Initiation 18+ years | 52.0% | 51.1% | 51.5% | 41.5% | 41.9% | 41.1% | 48.3% | 44.2% | 48.9% | 49.8% | 46.9% | 50.8% | 36.4% | 36.5% | 33.1% | 49.0% | 46.8% | 48.4% | 56.8% | 50.7% | 50.1% | 46.3% | 44.7% |
| Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Initiation Overall | 50.4% | 49.4% | 50.9% | 41.9% | 40.9% | 40.8% | 48.1% | 44.4% | 48.8% | 48.4% | 44.7% | 50.6% | 34.4% | 35.6% | 32.2% | 48.5% | 46.8% | 48.6% | 55.5% | 49.7% | 50.3% | 46.0% | 44.3% |
| Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Engagement 13-17 Yrs | 26.5% | 23.7% | 33.3% | NA | NA | NA | NA | NA | NA | 21.0% | 26.7% | 33.6% | 4.4% | 10.3% | 8.7% | 23.9% | 26.7% | 32.4% | 8.9% | 13.1% | 25.4% | 26.7% | 17.7% |
| Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Engagement 18+ Years | 20.7% | 21.0% | 23.8% | 15.2% | 22.2% | 25.2% | 22.1% | 15.7% | 21.7% | 19.0% | 13.3% | 25.0% | 4.6% | 7.0% | 10.4% | 15.6% | 16.6% | 22.3% | 10.1% | 10.5% | 14.7% | 20.4% | 11.8% |
| Initiation and Engagement of Alcohol and other Drug Dependence (IET) – Engagement Overall | 21.6% | 21.4% | 25.3% | 15.3% | 21.1% | 25.5% | 22.1% | 16.0% | 22.0% | 19.2% | 12.7% | 25.9% | 4.6% | 7.2% | 10.3% | 16.7% | 17.9% | 23.6% | 10.0% | 10.8% | 16.0% | 21.2% | 12.3% |
| Identification of Alcohol and Other Drug Services (IAD) – Any | 2.5% | 2.3% | 2.5% | 5.7% | 5.8% | 5.9% | 17.0% | 17.6% | 17.1% | 4.4% | 4.9% | 6.0% | 4.1% | 3.8% | 4.4% | 4.3% | 4.6% | 5.3% | 2.9% | 3.3% | 3.9% | 6.4% | 3.3% |
| Identification of Alcohol and Other Drug Services (IAD) – Inpatient | 0.7% | 0.7% | 0.6% | 1.7% | 1.6% | 1.1% | 4.9% | 4.9% | 4.4% | 1.5% | 1.6% | 1.4% | 1.7% | 1.3% | 1.5% | 1.3% | 1.3% | 1.2% | 1.0% | 0.9% | 0.9% | 1.6% | 1.1% |
| Identification of Alcohol and Other Drug Services (IAD) – Intensive | 0.4% | 0.3% | 0.3% | 0.6% | 0.2% | 0.5% | 2.9% | 2.7% | 3.1% | 0.6% | 0.7% | 0.9% | 0.1% | 0.0% | 0.4% | 0.8% | 0.8% | 0.9% | 0.3% | 0.4% | 0.6% | 1.0% | 0.2% |
| Identification of Alcohol and Other Drug Services (IAD) - Outpatient/ED | 1.8% | 1.9% | 2.2% | 4.6% | 5.0% | 5.4% | 15.3% | 15.9% | 15.4% | 3.6% | 4.1% | 5.4% | 3.8% | 3.6% | 3.9% | 3.6% | 4.0% | 4.7% | 2.3% | 2.8% | 3.4% | 5.8% | 2.9% |
| Ambulatory Care (Utilization) | | | | | | | | | | | | | | | | | | | | | | | |
| Ambulatory Care (AMB) – Outpatient Visits ¹ | 374.0 | 388.5 | 366.8 | 330.5 | 330.1 | 321.5 | 364.2 | 385.8 | 347.4 | 375.2 | 400.4 | 373.9 | 380.0 | 389.5 | 364.4 | 382.2 | 415.9 | 395.0 | 365.1 | 391.2 | 361.1 | 361.4 | 367.2 |
| Ambulatory Care (AMB) – Emergency Department ² | 60.3 | 66.1 | 59.0 | 88.0 | 94.6 | 84.3 | 78.8 | 92.1 | 88.8 | 71.8 | 81.4 | 72.5 | 76.6 | 80.1 | 70.3² | 62.4 | 70.0 | 64.0 | 59.3 | 68.9 | 63.7 | 71.8 | 67.4 |
| Ambulatory Care (AMB) – Ambulatory Surgery | 6.5 | 6.5 | | 13.5 | 11.3 | | 14.0 | 14.9 | | 9.0 | 8.9 | | 13.3 | 14.4 | | 10.8 | 12.3 | | 9.1 | 9.8 | | | |
| Ambulatory Care (AMB) – Observation Room Stays | 2.0 | 1.6 | | 1.8 | 1.9 | | 2.4 | 1.7 | | 1.5 | 1.2 | | 0.3 | 0.4 | | 3.7 | 0.6 | | 1.4 | 1.2 | | | |
| Call Services | | | | | | | | | | | | | | | | | | | | | | | |
| Call Answer Timeliness (CAT) | 75.8% | 85.3% | 76.1% | 91.4% | 88.0% | 92.3% | 89.9% | 87.5% | 86.6% | 82.7% | 85.5% | 85.7% | 94.3% | 96.1% | 94.8% | 68.2% | 76.5% | 84.4% | 81.5% | 82.3% | 79.6% | 85.6% | 82.2% |
| Call Abandonment (CAB) ³ | 3.6% | 3.8% | 6.0% | 0.8% | 1.4% | 2.6% | 3.3% | 3.5% | 3.8% | 2.0% | 1.4% | 1.3% | 1.6% | 1.1% | 1.2% | 4.2% | 2.4% | 1.5% | 3.1% | 2.8% | 3.1% | 2.8% | 3.0% |

1. An error was discovered after the publication of this measure, which required the recalculation of the MARR the Outpatient Visits per 1,000 member months.

2. An error was discovered after the publication of this measure, which required the recalculation of the MARR the ED Visits per 1,000 member months.

3. A lower rate indicates better performance.

MARR = Maryland Average Reportable Rate NHM = National HEDIS Mean ACC = AMERIGROUP Community Care DIA = Diamond Plan JMS = Jai Medical Systems

MSFC = MedStar Family Choice PP = Priority Partners MPC = Maryland Physicians Care UHC = UnitedHealthcare

Italics denote age group changed from previous year's specifications.

| Table A1 – HealthChoice Organizations Reporting PAC HEDIS 2011 Results | 2010 | 2011 | 2010 | 2011 | 2010 | 2011 | 2010 | 2011 | 2010 | 2011 | 2010 | 2011 |
|--|------|-------|---------|-------|---------|-------|--------|-------|---------|-------|-------|-------|
| | ACC | | JMS PAC | | MPC PAC | | PP PAC | | UHC PAC | | MARR | MARR |
| Adults' Access to Preventive/ Ambulatory Health Services (AAP) – Age 20-44 | * | 77.1% | 71.9% | 74.9% | 65.7% | 67.6% | 59.4% | 65.1% | 67.4% | 68.5% | 66.1% | 70.6% |
| Adults' Access to Preventive/ Ambulatory Health Services (AAP) – Age 45-64 | * | 82.9% | 79.8% | 82.1% | 75.3% | 78.0% | 70.3% | 75.7% | 75.9% | 79.3% | 75.3% | 79.6% |
| Breast Cancer Screening (BCS) | * | NA | 47.2% | 55.6% | 38.4% | 40.7% | * | 33.8% | 29.7% | 36.7% | 38.4% | 41.7% |
| Cervical Cancer Screening (CCS) | * | 33.8% | 59.5% | 62.6% | 37.4% | 38.8% | 29.8% | 38.1% | 41.4% | 40.2% | 42.0% | 42.7% |
| Comprehensive Diabetes (CDC) – Hemoglobin A1c Testing | * | 71.4% | 85.8% | 87.4% | 79.1% | 75.4% | 68.0% | 76.7% | 75.2% | 72.7% | 77.0% | 76.7% |
| Comprehensive Diabetes (CDC) – HbA1c Poor Control (>9.0%) ¹ | * | 55.4% | 38.4% | 39.0% | 41.6% | 47.9% | 97.9% | 58.4% | 49.6% | 59.9% | 56.9% | 52.1% |
| Comprehensive Diabetes (CDC) – HbA1c Control (< 8.0%) | * | 33.0% | 50.4% | 49.2% | 47.7% | 43.3% | 2.1% | 35.5% | 43.8% | 32.4% | 35.9% | 38.7% |
| Comprehensive Diabetes (CDC) – Eye Exam (Retinal) Performed | * | 36.6% | 69.2% | 60.5% | 43.1% | 42.3% | 27.8% | 30.8% | 38.9% | 32.4% | 44.8% | 40.5% |
| Comprehensive Diabetes (CDC) – LDL-C Screening | * | 70.5% | 89.1% | 87.1% | 72.3% | 69.3% | 59.8% | 68.1% | 69.1% | 69.2% | 72.6% | 72.8% |
| Comprehensive Diabetes (CDC) – LDL-C Control (<100 mg/dL) | * | 29.5% | 42.2% | 43.5% | 35.5% | 31.6% | 0.0% | 25.1% | 29.2% | 24.3% | 26.7% | 30.8% |
| Comprehensive Diabetes (CDC) – Medical Attention for Nephropathy | * | 72.3% | 91.0% | 91.9% | 83.0% | 79.1% | 54.6% | 74.9% | 79.6% | 74.6% | 77.0% | 78.6% |
| Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/80 mm Hg)** | * | 0.0% | 24.3% | 26.1% | 23.1% | 25.8% | 0.0% | 3.2% | 21.2% | 0.0% | 17.1% | 11.0% |
| Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg) | * | 0.0% | 49.0% | 48.4% | 51.1% | 46.0% | 0.0% | 6.5% | 45.5% | 0.0% | 36.4% | 20.2% |

*Organization did not report for PAC

MARR = Maryland Average Reportable Rate

JMS = Jai Medical Systems

MPC = Maryland Physicians Care

1. A lower rate indicates better performance.

ACC = AMERIGROUP Community Care

PP = Priority Partners

UHC = UnitedHealthcare

** New measure for HEDIS 2011. Data for prior years 130/80

Children’s Prevention and Screening

Childhood Immunization Status (CIS)

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

| | DTaP | IPV | MMR | HiB | Hep B | VZV | PCV | Hep A | RV | Influenza |
|-----------------------|------|-----|-----|-----|-------|-----|-----|-------|----|-----------|
| Combination 2 | X | X | X | X | X | X | | | | |
| Combination 3 | X | X | X | X | X | X | X | | | |
| Combination 4 | X | X | X | X | X | X | X | X | | |
| Combination 5 | X | X | X | X | X | X | X | | X | |
| Combination 6 | X | X | X | X | X | X | X | | | X |
| Combination 7 | X | X | X | X | X | X | X | X | X | |
| Combination 8 | X | X | X | X | X | X | X | X | | X |
| Combination 9 | X | X | X | X | X | X | X | | X | X |
| Combination 10 | X | X | X | X | X | X | X | X | X | X |

Rationale: A basic method for prevention of serious illness is immunization. Childhood immunizations help prevent serious illnesses such as polio, tetanus and hepatitis. Vaccines are a proven way to help a child stay healthy and avoid the potentially harmful effects of childhood diseases like mumps and measles. Even preventing "mild" diseases saves hundreds of lost school days and work days, and millions of dollars.

Childhood Immunization Status (CIS) – Combination 2 (DTaP, IPV, MMR, HiB, Hepatitis B, VZV)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 88% | 89.8% | 82.1% | 78.4% | 79.4% |
| DIA | 74% | 68.1% | 73.0% | 76.0% | 65.7% |
| JMS | 75% | 85.0% | 87.1% | 81.9% | 88.4% |
| MPC | 71% | 72.2% | 74.7% | 80.0% | 84.9% |
| MSFC | 81% | 84.7% | 89.2% | 86.6% | 86.6% |
| PP | 82% | 86.5% | 82.1% | 74.7% | 83.0% |
| UHC | 73% | 78.0% | 84.8% | 83.9% | 71.0% |
| | | | | | |
| MARR | 78% | 80.6% | 81.9% | 80.2% | 79.9% |
| NHM | 73.3% | 72.3% | 73.7% | 74.3% | |

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Childhood Immunization Status (CIS) – Combination 3 (DTaP, IPV, MMR, HiB, Hepatitis B, VZV, Pneumococcal Conjugate)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 75% | 81.0% | 74.6% | 73.5% | 73.8% |
| DIA | 66% | 59.9% | 69.4% | 71.4% | 62.2% |
| JMS | 74% | 82.7% | 80.6% | 80.8% | 85.9% |
| MPC | 62% | 67.8% | 70.1% | 76.2% | 81.3% |
| MSFC | 69% | 78.1% | 87.8% | 83.7% | 84.7% |
| PP | 72% | 77.4% | 77.4% | 68.4% | 79.8% |
| UHC | 60% | 72.2% | 78.7% | 78.3% | 66.7% |
| | | | | | |
| MARR | 68% | 74.1% | 76.9% | 76.0% | 76.3% |
| NHM | 60.6% | 65.6% | 67.6% | 69.4% | |

Childhood Immunization Status (CIS) – Combination 4 (DTaP, IPV, MMR, HiB, Hep B, VZV, PCV, Hep A)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|------|------|------|-------|-------|
| ACC | | | | 40.0% | 28.9% |
| DIA | | | | 29.0% | 29.9% |
| JMS | | | | 39.0% | 36.1% |
| MPC | | | | 26.0% | 30.2% |
| MSFC | | | | 28.0% | 29.2% |
| PP | | | | 27.5% | 25.8% |
| UHC | | | | 52.1% | 34.3% |
| | | | | | |
| MARR | | | | 34.5% | 30.6% |
| NHM | | | | 30.4% | |

Childhood Immunization Status (CIS) – Combination 5 (DTaP, IPV, MMR, HiB, Hep B, VZV, PCV, RV)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|-------|
| ACC | | | | 45.9% | 54.4% |
| DIA | | | | 33.6% | 40.2% |
| JMS | | | | 55.4% | 58.9% |
| MPC | | | | 40.1% | 53.8% |
| MSFC | | | | 48.2% | 53.5% |
| PP | | | | 46.2% | 37.5% |
| UHC | | | | 56.4% | 47.4% |
| | | | | | |
| MARR | | | | 46.6% | 49.4% |
| NHM | | | | 41.6% | |

Childhood Immunization Status (CIS) – Combination 6 (DTaP, IPV, MMR, HiB, Hep B, VZV, PCV, Influenza)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|-------|
| ACC | | | | 35.1% | 40.5% |
| DIA | | | | 36.4% | 34.6% |
| JMS | | | | 27.7% | 40.2% |
| MPC | | | | 34.5% | 37.5% |
| MSFC | | | | 40.9% | 49.1% |
| PP | | | | 40.1% | 47.4% |
| UHC | | | | 48.4% | 36.5% |
| | | | | | |
| MARR | | | | 37.6% | 40.9% |
| NHM | | | | 33.8% | |

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Childhood Immunization Status (CIS) – Combination 7 (DTaP, IPV, MMR, HiB, Hep B, VZV, PCV, Hep A, RV)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|-------|
| ACC | | | | 27.4% | 23.1% |
| DIA | | | | 16.1% | 20.9% |
| JMS | | | | 29.4% | 28.6% |
| MPC | | | | 16.1% | 21.2% |
| MSFC | | | | 19.2% | 21.9% |
| PP | | | | 19.5% | 14.6% |
| UHC | | | | 38.7% | 24.6% |
| | | | | | |
| MARR | | | | 23.8% | 22.1% |
| NHM | | | | 20.6% | |

Childhood Immunization Status (CIS) – Combination 8 (DTaP, IPV, MMR, HiB, Hep B, VZV, PCV, Hep A, Influenza)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|-------|
| ACC | | | | 21.9% | 17.8% |
| DIA | | | | 16.6% | 17.3% |
| JMS | | | | 15.8% | 20.7% |
| MPC | | | | 15.6% | 16.3% |
| MSFC | | | | 15.1% | 18.0% |
| PP | | | | 19.2% | 17.3% |
| UHC | | | | 34.3% | 21.7% |
| | | | | | |
| MARR | | | | 19.8% | 18.4% |
| NHM | | | | 17.2% | |

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Childhood Immunization Status (CIS) – Combination 9 (DTaP, IPV, MMR, HiB, Hep B, VZV, PCV, RV, Influenza)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|-------|
| ACC | | | | 23.8% | 32.4% |
| DIA | | | | 18.0% | 25.2% |
| JMS | | | | 19.8% | 27.8% |
| MPC | | | | 20.0% | 25.1% |
| MSFC | | | | 25.5% | 33.1% |
| PP | | | | 26.8% | 25.5% |
| UHC | | | | 38.0% | 27.7% |
| | | | | | |
| MARR | | | | 24.5% | 28.1% |
| NHM | | | | 23.2% | |

Childhood Immunization Status (CIS) – Combination 10 (DTaP, IPV, MMR, HiB, Hep B, VZV, PCV, Hep A, RV, Influenza)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|-------|
| ACC | | | | 16.3% | 15.5% |
| DIA | | | | 9.2% | 13.8% |
| JMS | | | | 12.4% | 17.0% |
| MPC | | | | 10.0% | 10.9% |
| MSFC | | | | 10.7% | 13.9% |
| PP | | | | 13.9% | 10.7% |
| UHC | | | | 27.3% | 15.8% |
| | | | | | |
| MARR | | | | 14.3% | 13.9% |
| NHM | | | | 21.6% | |

Immunizations for Adolescents (IMA)

Description: The percentage of adolescents 13 years of age who had one dose of meningococcal vaccine and one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or one tetanus, diphtheria toxoids vaccine (Td) by their 13th birthday. The measure calculates a rate for each vaccine and one combination rate.

Rationale: Adolescent immunization rates have historically lagged behind early childhood immunization rates in the United States. In 2000, the American Academy of Pediatrics (AAP) reported that three million adolescents failed to receive at least one recommended vaccination. Low immunization rates among adolescents have the potential to cause outbreaks of preventable diseases and to establish reservoirs of disease in adolescents that can affect other populations including infants, the elderly and individuals with chronic conditions. Immunization recommendations for adolescents have changed in recent years. In addition to assessing for immunizations that may have been missed, there are new vaccines targeted specifically to adolescents.

Combination 1 (Meningococcal, Tdap/Td)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|------|------|------|-------|-------|
| ACC | | | | 41.7% | 46.1% |
| DIA | | | | 32.1% | 40.0% |
| JMS | | | | 67.3% | 71.6% |
| MPC | | | | 45.7% | 52.1% |
| MSFC | | | | 45.7% | 57.2% |
| PP | | | | 41.6% | 56.9% |
| UHC | | | | 42.3% | 38.6% |
| | | | | | |
| MARR | | | | 45.2% | 51.8% |
| NHM* | | | | 42.5% | |

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

Description: The percentage of members who turned 15 months old during the measurement year who had the following number of well-child visits with a primary care practitioner (PCP) during their first 15 months of life: no well-child visits; one, two, three, four, five, six-or-more well-child visits. DHMH also calculates the percentage of members receiving five or six-or-more visits by adding together the HEDIS results for five and for six-or-more visits.

Rationale: This measure looks at the adequacy of well-child care for infants. Regular check-ups are one of the best ways to detect physical, developmental, behavioral and emotional problems. They also provide an opportunity for the clinician to offer guidance and counseling to the parents.

Well-Child Visits in the First 15 months of Life (W15) – No well-child visits*

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|------|------|------|------|------|
| ACC | 1% | 1.1% | 2.4% | 1.2% | 0.8% |
| DIA | 7% | 3.1% | 2.6% | 4.4% | 4.3% |
| JMS | 3% | 5.3% | 2.6% | 2.8% | 2.4% |
| MPC | 1% | 1.1% | 0.7% | 1.5% | 1.1% |
| MSFC | 2% | 1.8% | 1.1% | 1.4% | 2.2% |
| PP | 1% | 0.7% | 1.5% | 0.6% | 0.9% |
| UHC | 2% | 1.7% | 1.8% | 1.8% | 2.0% |
| | | | | | |
| MARR | 2% | 2.1% | 1.8% | 2.0% | 2.0% |
| NHM | 3.8% | 5.6% | 2.7% | 2.3% | |

* A lower rate indicates better performance.

Well-Child Visits in the First 15 months of Life (W15) – DHMH Five or Six-or-more visits (rate constructed by adding together HEDIS five visits and six-or-more visits rates)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|--------|-------|
| ACC | 97% | 85.4% | 83.0% | 84.16% | 87.2% |
| DIA | 71% | 70.7% | 77.1% | 66.7% | 64.7% |
| JMS | 94% | 82.0% | 81.8% | 89.4% | 83.4% |
| MPC | 83% | 87.1% | 87.3% | 84.21% | 86.0% |
| MSFC | 78% | 82.3% | 81.0% | 86.2% | 84.7% |
| PP | 86% | 81.3% | 86.4% | 86.9% | 87.1% |
| UHC | 87% | 86.2% | 86.0% | 85.1% | 83.6% |
| | | | | | |
| MARR | 85% | 82.1% | 83.2% | 83.2% | 82.4% |
| NHM | 72.9% | 70.2% | 75.4% | 75.8% | |

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

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

Rationale: This measure looks at the use of routine check-ups by preschool and early school-age children. Well-child visits during the preschool and early school years are particularly important. A child can be helped through early detection of vision, speech and language problems. The AAP recommends annual well-child visits for two- to six-year-olds.

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

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------------|-------------|-------------|-------------|-------------|
| ACC | 80% | 77.5% | 74.2% | 76.0% | 86.6% |
| DIA | 69% | 66.4% | 70.0% | 70.4% | 75.9% |
| JMS | 88% | 89.1% | 89.9% | 92.3% | 89.3% |
| MPC | 76% | 79.1% | 73.1% | 85.7% | 86.3% |
| MSFC | 74% | 74.1% | 79.4% | 79.2% | 73.5% |
| PP | 73% | 77.4% | 75.3% | 86.6% | 78.3% |
| UHC | 80% | 76.3% | 75.4% | 82.4% | 75.2% |
| | | | | | |
| MARR | 77% | 77.1% | 76.8% | 81.8% | 80.7% |
| NHM | 66.8% | 65.3 % | 69.7% | 71.6% | |

Adolescent Well-Care Visits (AWC)

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

Rationale: This measure looks at the use of regular check-ups by adolescents. Adolescents benefit from an annual preventive health care visit that addresses the physical, emotional and social aspects of their health. The American Medical Association's *Guidelines for Adolescent Preventive Services*, the federal government's Bright Futures program and the AAP's guidelines all recommend comprehensive annual check-ups for adolescents.

Adolescent Well-Care Visits (AWC)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 57% | 50.3% | 54.1% | 52.2% | 63.1% |
| DIA | 50% | 44.6% | 49.7% | 50.6% | 51.4% |
| JMS | 76% | 73.3% | 76.1% | 79.9% | 79.7% |
| MPC | 60% | 51.3% | 49.5% | 64.7% | 72.1% |
| MSFC | 59% | 45.7% | 52.8% | 61.1% | 63.5% |
| PP | 54% | 52.6% | 53.4% | 64.9% | 60.0% |
| UHC | 59% | 52.5% | 47.3% | 64.7% | 49.8% |
| | | | | | |
| MARR | 59% | 52.9% | 54.7% | 62.6% | 62.8% |
| NHM | 43.7% | 42.0% | 45.9% | 47.7% | |

Respiratory Conditions

Appropriate Testing for Children with Pharyngitis (CWP)

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

Rationale: Overuse of antibiotics has been directly linked to the prevalence of antibiotic resistance in the community; promoting judicious use of antibiotics is important for reducing levels of antibiotic resistance. Pediatric clinical practice guidelines recommend that only children with diagnosed group-A strep pharyngitis based on appropriate lab tests be treated with antibiotics.

Appropriate Testing for Children with Pharyngitis (CWP)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 68% | 67.8% | 66.4% | 61.9% | 61.5% |
| DIA | 54% | 47.9% | 69.4% | 62.4% | 64.7% |
| JMS | 73% | 50.0% | 67.3% | 70.9% | 76.3% |
| MPC | 71% | 74.8% | 75.6% | 77.4% | 74.0% |
| MSFC | 54% | 75.8% | 78.9% | 82.7% | 81.0% |
| PP | 76% | 78.2% | 72.0% | 73.5% | 69.5% |
| UHC | 65% | 67.4% | 69.8% | 68.8% | 70.8% |
| | | | | | |
| MARR | 66% | 66.0% | 71.4% | 71.1% | 71.1% |
| NHM | 55.7% | 58.2% | 61.4% | 62.3% | |

Appropriate Treatment for Children with Upper Respiratory Infection (URI)

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

Rationale: The common cold (or URI) is a frequent reason for children visiting the doctor's office. Though existing clinical guidelines do not support the use of antibiotics for the common cold, physicians often prescribe them for this ailment. A performance measure of antibiotic use for URI sheds light on the prevalence of inappropriate antibiotic prescribing in clinical practice and raises awareness of the importance of reducing inappropriate antibiotic use to combat antibiotic resistance in the community.

Appropriate Treatment for Children with Upper Respiratory Infection (URI)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 86% | 87.1% | 85.0% | 84.9% | 87.0% |
| DIA | 87% | 82.9% | 82.9% | 80.6% | 85.3% |
| JMS | 82% | 87.3% | 95.5% | 95.2% | 93.8% |
| MPC | 83% | 85.1% | 84.0% | 84.1% | 85.6% |
| MSFC | 85% | 86.2% | 86.3% | 85.7% | 88.6% |
| PP | 94% | 96.6% | 84.4% | 87.2% | 88.5% |
| UHC | 79% | 80.6% | 80.6% | 79.6% | 83.3% |
| | | | | | |
| MARR | 85% | 86.5% | 85.5% | 85.3% | 87.5% |
| NHM | 83.3% | 84.1% | 85.5% | 86.0% | |

Use of Appropriate Medications for People with Asthma (ASM)

Description: The percentage of members 5–50 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year.

Rationale: Asthma is one of the nation's most common, costly and increasingly prevalent diseases. Asthma medications help reduce underlying airway inflammation and relieve or prevent airway narrowing. Many asthma-related hospitalizations, emergency room visits and missed work and school days can be avoided if patients have appropriate medications and medical management.

Use of Appropriate Medications for People with Asthma (ASM) – Ages 5–11

| | 2007* | 2008* | 2009* | 2010 | 2011 |
|-------------|--------------|--------------|--------------|-------------|-------------|
| ACC | 88% | 91.7% | 90.0% | 91.0% | 91.9% |
| DIA | NA | NA | NA | NA | 87.5% |
| JMS | NA | NA | NA | 85.1% | 91.9% |
| MPC | 91% | 90.5% | 91.5% | 94.9% | 93.1% |
| MSFC | 92% | 91.5% | 94.0% | 92.9% | 92.8% |
| PP | 89% | 87.8% | 91.9% | 92.2% | 93.6% |
| UHC | 92% | 92.0% | 91.8% | 91.3% | 93.2% |
| | | | | | |
| MARR | 90% | 90.7% | 91.8% | 91.2% | 92.0% |
| NHM | 89.6% | 89.3% | 92.0% | 91.8% | |

*Rates for 2009 and the prior years, shown in italics, are for ages 5–9.

Use of Appropriate Medications for People with Asthma (ASM) – Ages 12–50

| | 2007* | 2008* | 2009* | 2010 | 2011 |
|-------------|--------------|--------------|--------------|-------------|-------------|
| ACC | 87% | 87.9% | 86.0% | 86.8% | 87.7% |
| DIA | NA | NA | 92.3% | 95.2% | 91.2% |
| JMS | 85% | 94.0% | 91.7% | 91.6% | 93.8% |
| MPC | 85% | 86.5% | 84.0% | 88.3% | 88.9% |
| MSFC | 92% | 85.1% | 92.9% | 92.4% | 89.4% |
| PP | 76% | 78.7% | 88.8% | 88.4% | 87.6% |
| UHC | 86% | 86.0% | 88.6% | 83.0% | 86.8% |
| | | | | | |
| MARR | 85% | 86.4% | 89.2% | 89.4% | 89.3% |
| NHM | 84.7% | 84.5% | 85.2% | 86.0% | |

*Rates for 2009 and the prior years, shown in italics, are for ages 18–56.

Use of Appropriate Medications for People with Asthma (ASM) – Total Ages 5–50

| | 2007* | 2008* | 2009* | 2010 | 2011 |
|-------------|--------------|--------------|--------------|-------------|-------------|
| ACC | 88% | 89.6% | 88.6% | 89.2% | 90.1% |
| DIA | NA | NA | 91.6% | 94.5% | 89.8% |
| JMS | 83% | 91.6% | 87.3% | 89.5% | 93.3% |
| MPC | 88% | 88.7% | 87.9% | 91.2% | 90.6% |
| MSFC | 91% | 89.5% | 93.4% | 92.7% | 91.1% |
| PP | 86% | 85.0% | 89.5% | 90.3% | 90.4% |
| UHC | 89% | 89.6% | 90.1% | 87.4% | 90.2% |
| | | | | | |
| MARR | 88% | 89.0% | 89.8% | 90.7% | 90.8% |
| NHM | 87.1% | 86.9% | 88.7% | 88.6% | |

*Rates for 2009 and the prior years, shown in italics, are for ages 5–56.

Member Access

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

Description: The percentage of members 12 months–19 years of age that had a visit with a PCP: children 12–24 months and 25 months–6 years who had a visit with a PCP during the measurement year and children 7–11 years and adolescents 12–19 years who had a visit with a PCP during the measurement year or the year prior to the measurement year.

Rationale: Encouraging and making available access to primary care services is one potential strategy to lower hospital utilization while maintaining the quality of care delivered. Physicians have a central role to play in fostering quality-enhancing strategies that can help to slow the growth of healthcare expenditures.

**Children and Adolescents’ Access to Primary Care Practitioners (CAP)
Age 12–24 months**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------------|-------------|-------------|-------------|-------------|
| ACC | 97% | 96.7% | 97.4% | 97.6% | 97.7% |
| DIA | 90% | 92.2% | 91.8% | 91.5% | 94.4% |
| JMS | 91% | 91.7% | 88.3% | 95.1% | 94.3% |
| MPC | 96% | 96.5% | 96.6% | 97.3% | 96.5% |
| MSFC | 97% | 96.9% | 96.8% | 97.2% | 95.2% |
| PP | 95% | 94.2% | 97.8% | 98.1% | 97.9% |
| UHC | 95% | 95.8% | 96.3% | 96.7% | 96.8% |
| | | | | | |
| MARR | 94% | 94.9% | 95.0% | 96.2% | 96.1% |
| NHM | 94.1% | 93.4% | 95.0% | 95.2% | |

**Children and Adolescents' Access to Primary Care Practitioners (CAP) –
Age 25 months–6 years**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 91% | 91.1% | 91.7% | 92.7% | 92.7% |
| DIA | 82% | 82.9% | 85.5% | 85.3% | 88.1% |
| JMS | 89% | 88.4% | 89.5% | 90.3% | 90.6% |
| MPC | 91% | 90.0% | 91.1% | 91.8% | 89.8% |
| MSFC | 89% | 89.8% | 91.6% | 90.5% | 88.9% |
| PP | 85% | 86.5% | 91.7% | 93.1% | 92.3% |
| UHC | 89% | 90.8% | 92.2% | 92.4% | 91.7% |
| | | | | | |
| MARR | 88% | 88.5% | 90.4% | 90.9% | 90.6% |
| NHM | 84.9% | 84.3% | 87.2% | 88.3% | |

**Children and Adolescents' Access to Primary Care Practitioners (CAP) –
Age 7–11 years**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 92% | 92.3% | 92.6% | 93.3% | 93.6% |
| DIA | 81% | 82.7% | 84.6% | 85.0% | 86.7% |
| JMS | 90% | 89.3% | 93.7% | 94.1% | 94.5% |
| MPC | 92% | 91.2% | 91.6% | 92.6% | 92.8% |
| MSFC | 92% | 92.2% | 92.2% | 93.4% | 93.4% |
| PP | 87% | 88.0% | 92.9% | 93.8% | 94.1% |
| UHC | 90% | 92.1% | 92.2% | 93.2% | 93.1% |
| | | | | | |
| MARR | 89% | 89.7% | 91.4% | 92.2% | 92.6% |
| NHM | 86.0% | 85.8% | 87.8% | 90.3% | |

**Children and Adolescents' Access to Primary Care Practitioners (CAP) –
Age 12–19 years**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 89% | 88.4% | 87.3% | 87.7% | 88.6% |
| DIA | 80% | 84.9% | 81.0% | 86.4% | 86.1% |
| JMS | 92% | 92.8% | 91.9% | 90.9% | 92.0% |
| MPC | 88% | 89.2% | 88.4% | 89.0% | 89.5% |
| MSFC | 89% | 90.0% | 88.7% | 90.6% | 92.0% |
| PP | 83% | 84.0% | 89.0% | 89.5% | 90.8% |
| UHC | 86% | 88.6% | 87.6% | 88.6% | 89.9% |
| | | | | | |
| MARR | 87% | 88.3% | 87.7% | 89.0% | 89.9% |
| NHM | 83.2% | 82.6% | 85.3% | 87.9% | |

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

Description: The percentage of members 20 years of age and older who had an ambulatory or preventive care visit during the measurement year.

Rationale: Encouraging and making available access to primary and preventive care services is one potential strategy to lower hospital utilization while maintaining the quality of care delivered. Physicians have a central role to play in fostering quality-enhancing strategies that can help to slow the growth of health care expenditures.

Adults' Access to Preventive/Ambulatory Health Services (AAP) – Age 20–44 years

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|------|-------|-------|-------|-------|-------|----------|----------|----------|
| ACC | 77% | 76.7% | 77.3% | 79.4% | 79.6% | | | 77.1% |
| DIA | 72% | 71.3% | 75.2% | 76.6% | 76.9% | | | |
| JMS | 74% | 76.1% | 77.2% | 78.6% | 79.0% | 72.0% | 71.9% | 74.9% |
| MPC | 77% | 74.4% | 79.0% | 81.7% | 80.9% | 62.5% | 65.7% | 67.6% |
| MSFC | 76% | 74.8% | 79.2% | 78.7% | 79.2% | | | |
| PP | 77% | 77.0% | 79.3% | 82.4% | 83.0% | | 59.4% | 65.1% |
| UHC | 72% | 73.8% | 75.7% | 79.2% | 79.2% | 60.9% | 67.4% | 68.5% |
| | | | | | | | | |
| MARR | 75% | 74.9% | 77.6% | 79.5% | 79.7% | 65.1% | 66.1% | 70.6% |
| NHM | 78.2% | 76.8% | 79.8% | 80.5% | | | | |

Adults' Access to Preventive/Ambulatory Health Services (AAP) – Age 45–64 years

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|------|-------|-------|-------|-------|-------|----------|----------|----------|
| ACC | 84% | 83.8% | 83.9% | 85.0% | 85.0% | | | 82.9% |
| DIA | 76% | 78.6% | 78.6% | 77.0% | 76.4% | | | |
| JMS | 87% | 85.8% | 86.9% | 88.5% | 89.2% | 80.9% | 79.8% | 82.1% |
| MPC | 85% | 85.0% | 87.5% | 87.3% | 87.4% | 73.1% | 75.27% | 78.0% |
| MSFC | 83% | 84.1% | 85.5% | 84.6% | 84.6% | | | |
| PP | 87% | 87.1% | 87.5% | 88.3% | 88.5% | | 70.3% | 75.7% |
| UHC | 84% | 85.3% | 85.6% | 87.1% | 85.9% | 69.4% | 75.9% | 79.3% |
| | | | | | | | | |
| MARR | 84% | 84.2% | 85.1% | 85.4% | 85.3% | 74.5% | 75.30% | 79.6% |
| NHM | 83.1% | 82.4% | 85.5% | 85.3% | | | | |

Women’s Health

Breast Cancer Screening (BCS)

Description: The percentage of women 40–69 years of age who had a mammogram to screen for breast cancer.

Rationale: Breast cancer is the second most common type of cancer among American women. Women whose breast cancer is detected early have more treatment choices and better chances for survival. Mammography screening has been shown to reduce mortality by 20% to 30% among women 40 and older.

Breast Cancer Screening (BCS)

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|-------------|-------|-------|-------|-------|-------|----------|----------|----------|
| ACC | 44% | 42.0% | 41.3% | 43.7% | 46.0% | | | NA |
| DIA | 27% | 32.8% | 39.9% | 40.8% | 39.3% | | | |
| JMS | 56% | 64.3% | 64.4% | 60.8% | 62.3% | 44.6% | 47.2% | 55.6% |
| MPC | 46% | 45.6% | 46.1% | 44.5% | 42.8% | 28.8% | 38.4% | 40.7% |
| MSFC | 49% | 50.9% | 57.6% | 63.4% | 54.6% | | | |
| PP | 42% | 42.3% | 42.2% | 45.4% | 48.0% | | NA | 33.8% |
| UHC | 46% | 51.4% | 51.2% | 48.2% | 45.3% | 23.0% | 29.7% | 36.7% |
| | | | | | | | | |
| MARR | 44% | 47.0% | 49.0% | 49.5% | 48.3% | 32.1% | 38.4% | 41.7% |
| NHM | 49.1% | 50.0% | 50.8% | 52.4% | | | | |

Cervical Cancer Screening (CCS)

Description: The percentage of women 21–64 years of age who received one or more Pap tests to screen for cervical cancer.

Rationale: Cervical cancer is the second most common cancer worldwide and the third leading cause of cancer-related deaths. Most cervical cancer deaths could have been eliminated with timely and effective screening and treatment. Cervical cancer is a successfully preventable and treatable cancer and can usually be found through regular Pap tests.

Cervical Cancer Screening (CCS)

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|-------------|-------|-------|-------|--------|-------|-------------|-------------|-------------|
| ACC | 71% | 61.4% | 67.9% | 67.3% | 76.6% | | | 33.8% |
| DIA | 44% | 48.0% | 62.7% | 65.6% | 70.2% | | | |
| JMS | 78% | 73.8% | 78.0% | 76.4% | 79.7% | 54.1% | 59.5% | 62.6% |
| MPC | 62% | 64.1% | 66.3% | 67.9% | 69.7% | 33.5% | 37.4% | 38.8% |
| MSFC | 58% | 64.7% | 66.4% | 67.65% | 76.4% | | | |
| PP | 63% | 65.6% | 63.0% | 67.71% | 69.4% | | 29.8% | 38.1% |
| UHC | 61% | 64.8% | 66.1% | 64.4% | 70.3% | 29.6% | 41.4% | 40.2% |
| | | | | | | | | |
| MARR | 62% | 63.2% | 67.2% | 68.1% | 73.2% | 39.1% | 42.0% | 42.7% |
| NHM | 65.7% | 64.8% | 66.0% | 65.8% | | | | |

Chlamydia Screening in Women (CHL)

Description: The percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

Rationale: Chlamydia trachomatis is the most common sexually transmitted disease (STD) in the United States. The Centers for Disease Control and Prevention (CDC) estimates that approximately three million people are infected with chlamydia each year. Chlamydia is more prevalent among adolescent and young adult women. In 2003, the highest age-specific rates of reported chlamydia in women were among 15 to 19 year-olds and 20 to 24 year-olds. Left untreated, chlamydia may cause permanent damage to a woman's fallopian tubes, uterus and surrounding tissue.

Chlamydia Screening in Women (CHL) – Age 16–20 years

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------------|-------------|-------------|-------------|-------------|
| ACC | 60% | 55.6% | 58.3% | 63.2% | 62.8% |
| DIA | 45% | 52.2% | 46.4% | 58.9% | 54.4% |
| JMS | 69% | 79.5% | 81.0% | 84.9% | 89.2% |
| MPC | 60% | 57.7% | 58.6% | 61.3% | 60.6% |
| MSFC | 52% | 56.6% | 52.0% | 57.1% | 56.2% |
| PP | 57% | 58.0% | 58.1% | 61.0% | 62.1% |
| UHC | 49% | 46.0% | 50.3% | 57.9% | 55.9% |
| | | | | | |
| MARR | 56% | 58.0% | 57.8% | 63.5% | 63.0% |
| NHM | 50.5% | 48.7% | 52.7% | 54.4% | |

Chlamydia Screening in Women (CHL) – Age 21–24 years

| | 2007* | 2008* | 2009 | 2010 | 2011 |
|-------------|--------------|--------------|-------------|-------------|-------------|
| ACC | <i>70%</i> | <i>66.0%</i> | 68.7% | 71.3% | 69.8% |
| DIA | <i>57%</i> | <i>65.2%</i> | 56.8% | 68.5% | 71.1% |
| JMS | <i>70%</i> | <i>70.9%</i> | 73.9% | 75.4% | 78.6% |
| MPC | <i>72%</i> | <i>67.7%</i> | 68.2% | 66.1% | 65.1% |
| MSFC | <i>56%</i> | <i>64.3%</i> | 63.4% | 62.8% | 67.2% |
| PP | <i>67%</i> | <i>64.7%</i> | 63.6% | 67.9% | 68.8% |
| UHC | <i>58%</i> | <i>55.8%</i> | 59.3% | 64.2% | 62.1% |
| | | | | | |
| MARR | <i>64%</i> | <i>64.9%</i> | 64.8% | 68.0% | 69.0% |
| NHM | <i>55.0%</i> | <i>54.1%</i> | 59.4% | 61.6% | |

*Rates for 2008 and the prior year, shown in italics, were for ages 21–25.

Chlamydia Screening in Women (CHL) – Total (16–24) years

| | <i>2007*</i> | <i>2008*</i> | 2009 | 2010 | 2011 |
|-------------|--------------|--------------|-------------|-------------|-------------|
| ACC | <i>63%</i> | <i>59.2%</i> | 61.3% | 66.2% | 65.5% |
| DIA | <i>51%</i> | <i>57.8%</i> | 50.2% | 63.7% | 63.1% |
| JMS | <i>69%</i> | <i>76.6%</i> | 78.7% | 81.4% | 85.3% |
| MPC | <i>63%</i> | <i>60.5%</i> | 61.1% | 63.0% | 62.4% |
| MSFC | <i>53%</i> | <i>58.9%</i> | 55.1% | 58.8% | 60.1% |
| PP | <i>60%</i> | <i>59.7%</i> | 59.4% | 63.2% | 64.6% |
| UHC | <i>52%</i> | <i>48.6%</i> | 52.5% | 59.9% | 58.2% |
| | | | | | |
| MARR | <i>59%</i> | <i>60.2%</i> | 59.8% | 65.2% | 65.6% |
| NHM | <i>52.4%</i> | <i>50.8%</i> | 54.9% | 56.7% | |

*Rates for 2008 and the prior year, shown in italics, were for ages 16–25.

Prenatal and Postpartum Care

Prenatal and Postpartum Care (PPC)

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

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

Rationale:

Timeliness of Prenatal Care: Preventive medicine is fundamental to prenatal care. Healthy diet, counseling, vitamin supplements, identification of maternal risk factors and health promotion must occur early in pregnancy to have an optimal effect on outcome. Ideally, a pregnant woman will have her first prenatal visit during the first trimester of pregnancy. Some women enroll in a health plan at a later stage of pregnancy; in this case, it is essential for the health plan to begin providing prenatal care as quickly as possible.

Postpartum Care: The American College of Obstetricians and Gynecologists recommends that women see their healthcare provider at least once between four and six weeks after giving birth. The first postpartum visit should include a physical examination and an opportunity for the healthcare practitioner to answer parents' questions and give family planning guidance and counseling on nutrition.

Prenatal and Postpartum Care (PPC) – Timeliness of Prenatal Care

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------------|-------------|-------------|-------------|-------------|
| ACC | 98% | 90.9% | 90.9% | 87.7% | 87.7% |
| DIA | 89% | 85.0% | 87.3% | 81.4% | 83.1% |
| JMS | 88% | 89.7% | 88.4% | 86.7% | 89.2% |
| MPC | 87% | 84.0% | 87.0% | 89.7% | 83.9% |
| MSFC | 90% | 90.0% | 87.2% | 89.6% | 90.7% |
| PP | 87% | 91.1% | 91.4% | 91.0% | 87.9% |
| UHC | 88% | 91.7% | 89.7% | 86.6% | 85.7% |
| | | | | | |
| MARR | 89% | 88.9% | 88.8% | 87.5% | 86.9% |
| NHM | 81.2% | 81.4% | 81.9% | 83.4% | |

Prenatal and Postpartum Care (PPC) – Postpartum Care

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|--------|-------|
| ACC | 85% | 61.9% | 64.3% | 66.67% | 66.3% |
| DIA | 52% | 52.9% | 52.8% | 59.3% | 59.4% |
| JMS | 72% | 68.2% | 72.6% | 79.2% | 80.2% |
| MPC | 60% | 60.3% | 62.1% | 72.2% | 75.2% |
| MSFC | 55% | 67.4% | 71.9% | 78.5% | 71.7% |
| PP | 63% | 64.6% | 63.5% | 66.67% | 68.2% |
| UHC | 64% | 64.3% | 67.6% | 63.4% | 62.5% |
| | | | | | |
| MARR | 64% | 62.8% | 65.0% | 69.4% | 69.1% |
| NHM | 59.1% | 58.7% | 62.6% | 64.1% | |

Frequency of Ongoing Prenatal Care (FPC)

Description: The percentage of Medicaid deliveries between November 6 of the year prior to the measurement year and November 5 of the measurement year that received the following number of expected prenatal visits: less than 21% of expected visits, 21% to 40% of expected visits, 41% to 60% of expected visits, 61% to 80% of expected visits, and greater than or equal to 81% of expected visits.

Rationale: Complications can arise at any time during pregnancy. For that reason, continued monitoring throughout pregnancy is necessary. Frequency and adequacy of ongoing prenatal visits are important factors in minimizing pregnancy problems.

Frequency of Ongoing Prenatal Care (FPC) – Less than 21% of expected visits

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|------|
| ACC | 1% | 1.3% | 2.4% | 2.9% | 3.5% |
| DIA | 8% | 6.2% | 7.1% | 11.1% | 7.9% |
| JMS | 4% | 1.5% | 2.3% | 4.6% | 1.4% |
| MPC | 7% | 6.2% | 3.3% | 3.9% | 4.2% |
| MSFC | 6% | 3.2% | 2.7% | 2.1% | 1.8% |
| PP | 6% | 3.4% | 4.3% | 3.4% | 3.5% |
| UHC | 5% | 6.0% | 4.5% | 8.7% | 3.6% |
| | | | | | |
| MARR | 5% | 4.0% | 3.8% | 5.2% | 3.7% |
| NHM | 13.5% | 12.5% | 11.9% | 10.3% | |

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Frequency of Ongoing Prenatal Care (FPC) – Greater than or equal to 81% of expected visits

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|-------------|-------|-------|-------|-------|-------|
| ACC | 87% | 75.7% | 74.3% | 71.0% | 71.4% |
| DIA | 61% | 61.4% | 62.2% | 58.1% | 58.3% |
| JMS | 80% | 84.6% | 81.9% | 80.4% | 82.4% |
| MPC | 62% | 78.7% | 71.6% | 77.8% | 74.0% |
| MSFC | 82% | 85.9% | 92.1% | 81.8% | 79.6% |
| PP | 70% | 75.3% | 76.6% | 80.7% | 77.9% |
| UHC | 72% | 75.3% | 78.2% | 73.8% | 75.8% |
| | | | | | |
| MARR | 73% | 76.7% | 76.7% | 74.8% | 74.2% |
| NHM | 58.6% | 59.3% | 58.7% | 61.6% | |

Diabetes

Comprehensive Diabetes Care (CDC)

Description: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had each of the following:

- Hemoglobin A1c (HbA1c) testing
- HbA1c poor control (>9.0%)
- HbA1c control (<8.0%)
- Eye exam (retinal) performed
- LDL-C screening
- LDL-C control (<100 mg/dL)
- Medical attention for nephropathy
- Blood Pressure (BP) control (<140/80 mm Hg)
- BP control (<140/90 mm Hg)

Rationale: Diabetes is a disease characterized by high blood glucose levels caused by the body's inability to correctly produce or use the hormone insulin. Almost 21 million Americans are living with diabetes, and an estimated three million Americans have undiagnosed diabetes. Much of the burden of illness and cost of diabetes treatment is attributed to potentially preventable long-term complications including heart disease, blindness, kidney disease and stroke. Appropriate and timely screening and treatment can significantly reduce the disease burden.

Comprehensive Diabetes (CDC) – Hemoglobin A1c (HbA1c) Testing

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | PAC 2011 |
|-------------|-------|-------|-------|-------|-------|-------------|-------------|-------------|
| ACC | 78% | 73.2% | 78.8% | 74.0% | 76.2% | | | 71.4% |
| DIA | 64% | 68.0% | 67.8% | 59.8% | 62.9% | | | |
| JMS | 85% | 89.7% | 90.7% | 91.6% | 89.4% | 83.6% | 85.8% | 87.4% |
| MPC | 76% | 78.4% | 74.2% | 78.6% | 79.6% | 77.4% | 79.1% | 75.4% |
| MSFC | 84% | 87.7% | 85.1% | 85.7% | 83.7% | | | |
| PP | 82% | 78.3% | 77.7% | 78.3% | 78.5% | | 68.0% | 76.7% |
| UHC | 74% | 74.7% | 71.0% | 71.8% | 73.2% | 64.4% | 75.2% | 72.7% |
| | | | | | | | | |
| MARR | 78% | 78.6% | 77.9% | 77.1% | 77.6% | 75.2% | 77.0% | 76.7% |
| NHM | 78.0% | 77.4% | 80.5% | 80.6% | | | | |

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Comprehensive Diabetes (CDC) – HbA1c Poor Control (>9.0%)*

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | PAC 2011 |
|-------------|-------|-------|-------|-------|-------|----------|----------|----------|
| ACC | 45% | 52.5% | 49.6% | 49.5% | 49.3% | | | 55.4% |
| DIA | 50% | 52.6% | 52.1% | 57.4% | 55.9% | | | |
| JMS | 38% | 32.6% | 30.3% | 34.4% | 38.0% | 39.0% | 38.4% | 39.0% |
| MPC | 61% | 55.5% | 57.9% | 53.0% | 51.1% | 51.4% | 41.6% | 47.9% |
| MSFC | 35% | 38.2% | 33.8% | 27.6% | 37.0% | | | |
| PP | 47% | 38.7% | 47.3% | 44.8% | 46.0% | | 97.9% | 58.4% |
| UHC | 46% | 50.9% | 56.4% | 51.6% | 56.2% | 83.3% | 49.6% | 59.9% |
| MARR | 46% | 45.9% | 46.8% | 45.5% | 47.6% | 57.9% | 56.9% | 52.1% |
| NHM | 48.7% | 47.7% | 44.8% | 44.9% | | | | |

* A lower rate indicates better performance.

Comprehensive Diabetes (CDC) – HbA1c Control (< 8.0%)

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|-------------|------|------|-------|-------|-------|----------|----------|----------|
| ACC | | | 43.6% | 42.8% | 41.1% | | | 33.0% |
| DIA | | | 42.1% | 36.1% | 37.1% | | | |
| JMS | | | 57.8% | 54.2% | 52.7% | 49.2% | 50.4% | 49.2% |
| MPC | | | 36.4% | 41.1% | 41.6% | 38.6% | 47.4% | 43.3% |
| MSFC | | | 54.6% | 50.0% | 52.8% | | | |
| PP | | | 45.8% | 48.2% | 46.2% | | 2.1% | 35.5% |
| UHC | | | 37.2% | 43.6% | 37.5% | 13.1% | 43.8% | 32.4% |
| MARR | | | 45.4% | 45.1% | 44.1% | 33.6% | 35.9% | 38.7% |
| NHM | | | 44.1% | 45.7% | | | | |

Comprehensive Diabetes (CDC) – Eye Exam (Retinal) Performed

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|-------------|-------|-------|-------|-------|-------|----------|----------|----------|
| ACC | 73% | 57.5% | 50.1% | 51.4% | 62.3% | | | 36.6% |
| DIA | 43% | 43.3% | 52.1% | 51.6% | 55.9% | | | |
| JMS | 72% | 75.3% | 77.2% | 77.8% | 79.7% | 48.0% | 69.2% | 60.5% |
| MPC | 54% | 54.4% | 65.8% | 74.0% | 74.5% | 31.9% | 43.1% | 42.3% |
| MSFC | 63% | 66.2% | 72.2% | 75.1% | 73.7% | | | |
| PP | 55% | 63.3% | 54.6% | 65.0% | 62.2% | | 27.8% | 30.8% |
| UHC | 57% | 58.2% | 65.9% | 71.3% | 66.7% | 25.6% | 38.9% | 32.4% |
| MARR | 59% | 59.7% | 62.6% | 66.6% | 67.9% | 35.1% | 44.8% | 40.5% |
| NHM | 51.4% | 50.1% | 52.8% | 52.7% | | | | |

Comprehensive Diabetes (CDC) – LDL-C Screening

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|------|-------|-------|-------|-------|-------|-------------|-------------|-------------|
| ACC | 73% | 72.7% | 74.5% | 69.3% | 71.6% | | | 70.5% |
| DIA | 57% | 64.9% | 66.9% | 62.3% | 61.8% | | | |
| JMS | 84% | 90.3% | 93.3% | 93.1% | 91.2% | 88.7% | 89.1% | 87.1% |
| MPC | 76% | 72.7% | 73.9% | 72.5% | 74.9% | 70.9% | 72.3% | 69.3% |
| MSFC | 80% | 82.8% | 81.7% | 81.5% | 79.3% | | | |
| PP | 72% | 73.7% | 73.9% | 74.5% | 70.4% | | 59.8% | 68.1% |
| UHC | 74% | 71.8% | 71.5% | 70.8% | 71.0% | 59.5% | 69.1% | 69.2% |
| | | | | | | | | |
| MARR | 74% | 75.6% | 76.5% | 74.9% | 74.3% | 73.0% | 72.6% | 72.8% |
| NHM | 71.1% | 70.9% | 74.1% | 74.2% | | | | |

Comprehensive Diabetes (CDC) – LDL-C Control (<100 mg/dL)

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|------|-------|-------|-------|-------|-------|-------------|-------------|-------------|
| ACC | 37% | 33.5% | 34.9% | 33.3% | 38.2% | | | 29.5% |
| DIA | 20% | 27.8% | 28.1% | 35.2% | 24.7% | | | |
| JMS | 53% | 48.2% | 47.2% | 52.7% | 47.8% | 42.7% | 42.2% | 43.5% |
| MPC | 27% | 28.6% | 28.9% | 32.4% | 32.4% | 31.2% | 35.5% | 31.6% |
| MSFC | 43% | 42.3% | 43.8% | 42.1% | 39.2% | | | |
| PP | 38% | 37.5% | 42.5% | 39.4% | 37.2% | | 0.0% | 25.1% |
| UHC | 36% | 30.2% | 29.2% | 31.1% | 27.0% | 10.4% | 29.2% | 24.3% |
| | | | | | | | | |
| MARR | 36% | 35.4% | 36.4% | 38.0% | 35.2% | 28.1% | 26.7% | 30.8% |
| NHM | 30.6% | 31.4% | 33.8% | 33.5% | | | | |

Comprehensive Diabetes (CDC) – Medical Attention for Nephropathy

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|------|-------|-------|-------|-------|-------|-------------|-------------|-------------|
| ACC | 83% | 80.3% | 78.8% | 74.4% | 78.8% | | | 72.3% |
| DIA | 63% | 75.3% | 75.2% | 69.7% | 67.1% | | | |
| JMS | 91% | 95.9% | 93.3% | 93.1% | 93.6% | 86.5% | 91.0% | 91.9% |
| MPC | 79% | 74.8% | 75.8% | 78.6% | 77.6% | 82.8% | 83.0% | 79.1% |
| MSFC | 85% | 87.4% | 86.6% | 86.9% | 85.6% | | | |
| PP | 77% | 83.9% | 78.3% | 77.6% | 80.1% | | 54.6% | 74.9% |
| UHC | 75% | 77.6% | 73.7% | 74.2% | 73.5% | 70.1% | 79.6% | 74.6% |
| | | | | | | | | |
| MARR | 79% | 82.2% | 80.2% | 79.2% | 79.5% | 79.8% | 77.0% | 78.6% |
| NHM | 74.6% | 74.4% | 76.6% | 76.9% | | | | |

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Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/80 mm Hg)

| | 2007* | 2008* | 2009* | 2010* | 2011 | 2009* PAC | 2010* PAC | 2011 PAC |
|-------------|--------------|--------------|--------------|--------------|-------------|----------------------|----------------------|---------------------|
| ACC | 26% | 31.1% | 27.2% | 28.8% | 41.3% | | | 0.0% |
| DIA | 16% | 25.8% | 25.6% | 32.8% | 28.8% | | | |
| JMS | 29% | 25.9% | 23.6% | 29.1% | 27.4% | NR | 24.3% | 26.1% |
| MPC | 26% | 25.8% | 25.6% | 22.9% | 31.1% | 21.2% | 23.1% | 25.8% |
| MSFC | 36% | 31.0% | 36.3% | 36.0% | 37.7% | | | |
| PP | 45% | 35.8% | 33.6% | 31.4% | 37.6% | | 0.0% | 3.2% |
| UHC | 26% | 26.0% | 28.2% | 30.9% | 19.2% | 0.0% | 21.2% | 0.0% |
| | | | | | | | | |
| MARR | 29% | 28.8% | 28.6% | 30.3% | 31.9% | NA | 17.1% | 11.0% |
| NHM | 30.4% | 29.6% | 30.7% | 32.2% | | | | |

* Rates for 2010 and prior years, shown in italics, are for Blood Pressure Control (<130/80 mm HG)

Comprehensive Diabetes (CDC) – Blood Pressure Control (<140/90 mm Hg)

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2009 PAC | 2010 PAC | 2011 PAC |
|-------------|-------------|-------------|-------------|-------------|-------------|---------------------|---------------------|---------------------|
| ACC | 56% | 56.8% | 54.7% | 53.5% | 63.0% | | | 0.0% |
| DIA | 41% | 40.2% | 45.5% | 62.3% | 51.8% | | | |
| JMS | 53% | 52.1% | 47.2% | 54.0% | 43.2% | NR | 49.0% | 48.4% |
| MPC | 45% | 49.2% | 51.2% | 50.1% | 51.3% | 45.3% | 51.1% | 46.0% |
| MSFC | 61% | 63.3% | 65.7% | 67.2% | 59.6% | | | |
| PP | 66% | 65.2% | 58.8% | 61.3% | 59.1% | | 0.0% | 6.5% |
| UHC | 50% | 55.7% | 55.7% | 54.3% | 32.8% | 0.0% | 45.5% | 0.0% |
| | | | | | | | | |
| MARR | 53% | 54.6% | 54.1% | 57.5% | 51.6% | NA | 36.4% | 20.2% |
| NHM | 30.4% | 55.5% | 56.9% | 59.8% | | | | |

Behavioral Health

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

Description: The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

- Initiation of AOD Treatment: The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.
- Engagement of AOD Treatment: The percentage of members who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.

Rationale: There are more deaths, illnesses and disabilities from substance abuse than from any other preventable health condition. Treatment of medical problems caused by substance abuse places a huge burden on the healthcare system.

Identifying individuals with AOD disorders is an important first step in the process of care, but the identification often does not lead to the initiation of care. Reasons an individual may not initiate treatment include the social stigma associated with AOD disorder, denial of the problem, noncompliance with treatment, or lack of immediately available treatment services. This measure is designed to ensure that treatment is initiated once the need has been identified, and will permit comparison of effectiveness in initiating care.

Treatment engagement is an intermediate step between initially accessing care (the first visit) and completing a full course of treatment. Numerous studies indicate that individuals who remain in treatment for a longer duration of time have improved outcome, but the 1990 Drug Service Research Survey suggested that many clients (52 percent) with AOD disorders leave treatment prematurely. This measure is an important intermediate indicator, closely related to outcome. In fact, studies have tied the frequency and intensity of engagement as important in treatment outcomes and reducing drug-related illnesses.

Results tables appear on the following two pages.

**Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) –
Initiation 13–17 Years**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 41.6% | 38.9% | 47.6% |
| DIA | | | NA | NA | NA |
| JMS | | | NA | NA | NA |
| MPC | | | 37.9% | 25.3% | 49.5% |
| MSFC | | | 17.8% | 23.1% | 19.6% |
| PP | | | 45.7% | 46.9% | 50.0% |
| UHC | | | 46.8% | 41.3% | 52.0% |
| | | | | | |
| MARR | | | 37.9% | 35.1% | 43.7% |
| NHM | | | 38.2% | 42.5% | |

**Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) –
Initiation 18+ Years**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 52.0% | 51.1% | 51.5% |
| DIA | | | 41.5% | 41.9% | 41.1% |
| JMS | | | 48.3% | 44.2% | 48.9% |
| MPC | | | 49.8% | 46.9% | 50.8% |
| MSFC | | | 36.4% | 36.5% | 33.1% |
| PP | | | 49.0% | 46.8% | 48.4% |
| UHC | | | 56.8% | 50.7% | 50.1% |
| | | | | | |
| MARR | | | 47.7% | 45.4% | 46.3% |
| NHM | | | 45.2% | 44.7% | |

**Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) –
Initiation Overall Ages**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 50.4% | 49.4% | 50.9% |
| DIA | | | 41.9% | 40.9% | 40.8% |
| JMS | | | 48.1% | 44.4% | 48.8% |
| MPC | | | 48.4% | 44.7% | 50.6% |
| MSFC | | | 34.4% | 35.6% | 32.2% |
| PP | | | 48.5% | 46.8% | 48.6% |
| UHC | | | 55.5% | 49.7% | 50.3% |
| | | | | | |
| MARR | | | 46.7% | 44.5% | 46.0% |
| NHM | | | 44.5% | 44.3% | |

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) – Engagement 13–17 Years

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 26.5% | 23.7% | 33.3% |
| DIA | | | NA | NA | NA |
| JMS | | | NA | NA | NA |
| MPC | | | 21.0% | 7.1% | 33.6% |
| MSFC | | | 4.4% | 10.3% | 8.7% |
| PP | | | 23.9% | 26.7% | 32.4% |
| UHC | | | 8.9% | 13.1% | 25.4% |
| MARR | | | 16.9% | 16.2% | 26.7% |
| NHM | | | 14.8% | 17.7% | |

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) – Engagement 18+ Years

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 20.7% | 21.0% | 23.8% |
| DIA | | | 15.2% | 22.2% | 25.2% |
| JMS | | | 22.1% | 15.7% | 21.7% |
| MPC | | | 19.0% | 13.3% | 25.0% |
| MSFC | | | 4.6% | 7.0% | 10.4% |
| PP | | | 15.6% | 16.6% | 22.3% |
| UHC | | | 10.1% | 10.5% | 14.7% |
| MARR | | | 15.3% | 15.2% | 20.4% |
| NHM | | | 12.3% | 11.8% | |

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

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 21.6% | 21.4% | 25.3% |
| DIA | | | 15.3% | 21.1% | 25.5% |
| JMS | | | 22.1% | 16.0% | 22.0% |
| MPC | | | 19.2% | 12.7% | 25.9% |
| MSFC | | | 4.6% | 7.2% | 10.3% |
| PP | | | 16.7% | 17.9% | 23.6% |
| UHC | | | 10.0% | 10.8% | 16.0% |
| MARR | | | 15.6% | 15.3% | 21.2% |
| NHM | | | 12.4% | 12.3% | |

Identification of Alcohol and Other Drug Services (IAD)

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

- Any services
- Inpatient
- Intensive outpatient or partial hospitalization
- Outpatient or ED

Rationale: There are more deaths, illnesses and disabilities from substance abuse than from any other preventable health condition. Treatment of medical problems caused by substance abuse places a huge burden on the healthcare system.

Identification of Alcohol and Other Drug Services (IAD) – Any

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 2.3% | 2.3% | 2.5% |
| DIA | | | 5.7% | 5.8% | 5.9% |
| JMS | | | 17.0% | 17.6% | 17.1% |
| MPC | | | 4.4% | 4.9% | 6.0% |
| MSFC | | | 4.1% | 3.8% | 4.4% |
| PP | | | 4.3% | 4.6% | 5.3% |
| UHC | | | 2.9% | 3.3% | 3.9% |
| | | | | | |
| MARR | | | 5.8% | 6.0% | 6.4% |
| NHM | | | 3.0% | 3.3% | |

Identification of Alcohol and Other Drug Services (IAD) – Inpatient

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|------|
| ACC | | | 0.7% | 0.7% | 0.6% |
| DIA | | | 1.7% | 1.64% | 1.1% |
| JMS | | | 4.9% | 4.9% | 4.4% |
| MPC | | | 1.5% | 1.57% | 1.4% |
| MSFC | | | 1.7% | 1.33% | 1.5% |
| PP | | | 1.3% | 1.30% | 1.2% |
| UHC | | | 1.0% | 0.9% | 0.9% |
| | | | | | |
| MARR | | | 1.8% | 1.8% | 1.6% |
| NHM | | | 1.1% | 1.1% | |

**Identification of Alcohol and Other Drug Services (IAD) –
Intensive Outpatient/Partial Hospitalization**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|------|
| ACC | | | 0.4% | 0.3% | 0.3% |
| DIA | | | 0.6% | 0.2% | 0.5% |
| JMS | | | 2.9% | 2.7% | 3.1% |
| MPC | | | 0.6% | 0.66% | 0.9% |
| MSFC | | | 0.1% | 0.0% | 0.4% |
| PP | | | 0.8% | 0.8% | 0.9% |
| UHC | | | 0.3% | 0.4% | 0.6% |
| | | | | | |
| MARR | | | 0.8% | 0.73% | 1.0% |
| NHM | | | 0.2% | 0.2% | |

**Identification of Alcohol and Other Drug Services (IAD) –
Outpatient/ED**

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|-------|-------|-------|
| ACC | | | 1.8% | 1.9% | 2.2% |
| DIA | | | 4.6% | 5.0% | 5.4% |
| JMS | | | 15.3% | 15.9% | 15.4% |
| MPC | | | 3.6% | 4.1% | 5.4% |
| MSFC | | | 3.8% | 3.6% | 3.9% |
| PP | | | 3.6% | 4.0% | 4.7% |
| UHC | | | 2.3% | 2.8% | 3.4% |
| | | | | | |
| MARR | | | 5.0% | 5.3% | 5.8% |
| NHM | | | 2.5% | 2.9% | |

Ambulatory Care (utilization)

Ambulatory Care (AMB)

Description: Utilization of ambulatory care in the following categories:

- Outpatient visits
- Emergency department (ED) visits

Rationale: Outpatient visits include office visits or routine visits to hospital outpatient departments. Emergency rooms often deliver nonemergency care. An organization that promotes effective ambulatory treatment of patients should be able to keep the number of emergency room visits relatively low. Looking at inpatient surgery and ambulatory surgery together can help assess how much outpatient surgery is performed.

Ambulatory Care (AMB) – Outpatient visits per 1,000 member months

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|-------|-------|-------|-------|--------------------|
| ACC | 393.8 | 374.0 | 374.0 | 388.5 | 366.8 |
| DIA | 319.6 | 329.5 | 330.5 | 330.1 | 321.5 |
| JMS | 355.3 | 359.8 | 364.2 | 385.8 | 347.4 |
| MPC | 352.4 | 372.1 | 375.2 | 400.4 | 373.9 |
| MSFC | 338.1 | 360.5 | 380.0 | 389.5 | 364.4 ¹ |
| PP | 321.2 | 324.0 | 382.2 | 415.9 | 395.0 |
| UHC | 341.4 | 354.4 | 365.1 | 391.2 | 361.1 |
| | | | | | |
| MARR | 346.0 | 353.5 | 367.3 | 385.9 | 361.4 ¹ |
| NHM | 300.8 | 317.8 | 347.3 | 367.2 | |

¹ An error was discovered after the publication of this measure, which required the recalculation of the MARR the Outpatient Visits per 1,000 member months.

Ambulatory Care (AMB) – Emergency department (ED) visits per 1,000 member months

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|------|-------------------|
| ACC | 56.0 | 58.5 | 60.3 | 66.1 | 59.0 |
| DIA | 76.9 | 87.0 | 88.0 | 94.6 | 84.3 |
| JMS | 70.7 | 77.5 | 78.8 | 92.1 | 88.8 |
| MPC | 65.7 | 67.4 | 71.8 | 81.4 | 72.5 |
| MSFC | 54.5 | 76.3 | 76.6 | 80.1 | 70.3 ² |
| PP | 58.7 | 61.0 | 62.4 | 70.0 | 64.0 |
| UHC | 50.2 | 54.7 | 59.3 | 68.9 | 63.7 |
| | | | | | |
| MARR | 61.8 | 68.9 | 71.0 | 79.0 | 71.8 ² |
| NHM | 57.0 | 60.9 | 60.2 | 67.4 | |

² An error was discovered after the publication of this measure, which required the recalculation of the MARR the ED Visits per 1,000 member months.

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Ambulatory Care (AMB) – Ambulatory surgery procedures per 1,000 member months *

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|------|------|
| ACC | 3.4 | 3.6 | 6.5 | 6.5 | |
| DIA | 4.7 | 5.6 | 13.5 | 11.3 | |
| JMS | 6.1 | 6.8 | 14.0 | 14.9 | |
| MPC | 5.5 | 5.4 | 9.0 | 8.9 | |
| MSFC | 4.0 | 6.2 | 13.3 | 14.4 | |
| PP | 9.3 | 10.0 | 10.8 | 12.3 | |
| UHC | 5.0 | 5.2 | 9.1 | 9.8 | |
| | | | | | |
| MARR | 5.4 | 6.1 | 10.9 | 11.2 | |
| NHM | 5.3 | 5.5 | 9.2 | 10.2 | |

Ambulatory Care (AMB) – Observation room stays per 1,000 member months *

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|------|------|
| ACC | 2.8 | 3.1 | 2.0 | 1.6 | |
| DIA | 6.0 | 4.7 | 1.8 | 1.9 | |
| JMS | 3.0 | 2.8 | 2.4 | 1.7 | |
| MPC | 3.1 | 2.3 | 1.5 | 1.2 | |
| MSFC | 0.1 | 1.8 | 0.3 | 0.4 | |
| PP | 0.9 | 2.7 | 3.7 | 0.6 | |
| UHC | 2.2 | 2.0 | 1.4 | 1.2 | |
| | | | | | |
| MARR | 2.6 | 2.8 | 1.9 | 1.2 | |
| NHM | 1.8 | 2.0 | 1.8 | 1.7 | |

* Ambulatory Surgery Procedures and Observation Room Stays were deleted from this measure in HEDIS 2011.

Call Services

Call Answer Timeliness (CAT)

Description: The percentage of calls received by the organization's member services call centers (during operating hours) during the measurement year that were answered by a live voice within 30 seconds.

Rationale: Healthcare providers, organization members, and purchasers increasingly recognize the importance of customer service as a factor in patient satisfaction.

Call Answer Timeliness (CAT)

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|-------|-------|-------|-------|-------|
| ACC | 67% | 52.0% | 75.8% | 85.3% | 76.1% |
| DIA | 90% | 85.7% | 91.4% | 88.0% | 92.3% |
| JMS | 85% | 86.0% | 89.9% | 87.5% | 86.6% |
| MPC | 76% | 74.5% | 82.7% | 85.5% | 85.7% |
| MSFC | 86% | 84.2% | 94.3% | 96.1% | 94.8% |
| PP | NR* | NR* | 68.2% | 76.5% | 84.4% |
| UHC | 60% | 89.1% | 81.5% | 82.3% | 79.6% |
| | | | | | |
| MARR | 77% | 78.6% | 83.4 | 85.9% | 85.6% |
| NHM | 74.4% | 79.4% | 79.7% | 82.2% | |

*This organization was unable to report the Call Answer Timeliness measure for HEDIS 2008 because its call system was not able to track calls answered within 30 seconds until August 2007.

Call Abandonment (CAB)

Description: The percentage of calls received by the organization's member services call centers (during operating hours) during the measurement year that were abandoned by the caller before being answered by a live voice. Lower rates represent better performance.

Rationale: See Call Answer Timeliness

Call Abandonment (CAB)*

| | 2007 | 2008 | 2009 | 2010 | 2011 |
|------|------|------|------|-------|------|
| ACC | 10% | 9.3% | 3.6% | 3.8% | 6.0% |
| DIA | 1% | 1.1% | 0.8% | 1.45% | 2.6% |
| JMS | 14% | 3.9% | 3.3% | 3.5% | 3.8% |
| MPC | 3% | 2.9% | 2.0% | 1.43% | 1.3% |
| MSFC | 2% | 2.2% | 1.6% | 1.1% | 1.2% |
| PP | NR | 5.0% | 4.2% | 2.4% | 1.5% |
| UHC | 8% | 1.2% | 3.1% | 2.8% | 3.1% |
| | | | | | |
| MARR | 6% | 3.7% | 2.7% | 2.4% | 2.8% |
| NHM | 5.8% | 5.5% | 3.3% | 3.0% | |

* A lower rate indicates better performance.