

2010 NEW YORK STATE

Managed Care Plan Performance



A Report on Quality, Access to Care,
and Consumer Satisfaction

State of New York
Andrew M. Cuomo, Governor

Department of Health
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Additional and related information is also available from the New York State Department of Health website:
<http://www.health.ny.gov>

Comments regarding the format or content of this report are welcome.

Executive Summary

Over 11 million New Yorkers receive their health insurance through a managed care plan or a preferred provider organization. This report is the 16th edition published by the Department and shares information about the quality of the health care provided by these insurers and the health care providers with whom they partner, to their members. The results in this report demonstrate the continuing commitment of insurers to provide their members with high quality care.

The 2010 Managed Care Performance report represents the care received during calendar year 2009 for New York State residents. In general, results for NYS health plans continues to improve, consistently meeting or exceeding national benchmarks for most measures. In particular, Medicaid managed care plans have continued to improve and in many areas have reduced or eliminated the gap in performance compared to commercial health plans.

Some of the highlights in this report are that more children are being fully immunized against diseases, more women are receiving screenings to protect their reproductive health, and a greater number of people living with diabetes are receiving recommended services and experiencing improved outcomes.

For the first time in recent years, the rate of childhood immunizations declined slightly for commercial health plans. This decline mirrors the national results as well, so this was not specific to NYS and the causes are being explored. Medicaid managed care results increased by several percentage points which means that nearly 16,000 more children in Medicaid managed care were fully immunized because of the improvement in the performance over the past five years.

Since 2001, the rates for Chlamydia testing have nearly doubled for women in Medicaid managed care, rising from 37 percent in 2001 to 67 percent in 2009, which equates to nearly 29,000 more women being tested at least once a year. The rate for women enrolled in commercial health insurance rose from 27 percent to 56 percent in the same period.

The rate of poor glycohemoglobin control for Medicaid managed care patients with diabetes has declined from 52 percent in 2000 to 33 percent in 2009, which translates to approximately 26,500 fewer Medicaid recipients with poorly controlled blood sugars. The 2009 rate of poor control for enrollees in commercial health insurance is 28 percent.

Improvements in quality, together with information about appropriateness of services will allow NYS to continue to provide the most efficient, high quality health care, thereby improving the health of its residents.

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INTRODUCTION

Managed care plans provide a wide range of health services to millions of New Yorkers. Choosing a managed care plan that meets your needs and the needs of your family is an important decision. There are many things to consider before choosing a managed care plan. Does your current doctor participate in the plan? Does the plan enroll members in the county in which you live? Does the plan offer special services that will enhance the health of your family? This report is designed to help you make an informed decision by providing you with clear, easy-to-read information on managed care plan performance with respect to primary and preventive health visits, health care for acute illness, behavioral health and medical management of select chronic diseases. This report provides information on the managed care plans currently enrolling members in New York State, including the regions of the state they serve, the types of managed care products they provide, how to contact their member services departments, and other information about enrollment and national accreditation status.

QUALITY MEASUREMENT IN NEW YORK STATE

As a way of monitoring managed care plan performance and improving the quality of care provided to New York State residents, the New York State Department of Health (NYSDOH) implemented a public reporting system in 1994 called the Quality Assurance Reporting Requirements (QARR). QARR is largely based on measures of quality established by the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS®). QARR also includes information collected using a national satisfaction survey methodology called CAHPS® (Consumer Assessment of Healthcare Providers and Systems). CAHPS data are collected every year for commercial enrollees. The NYSDOH sponsors a CAHPS survey for Medicaid managed care enrollees every two years. The most recent survey was done in 2009.

THE DATA SOURCE AND YEAR

This report contains information about managed care plans including results from standardized quality of care measures, and satisfaction surveys, and information about providers in the plans' networks. Health plans have their information validated by a licensed auditor organization prior to sending it to the NYSDOH. Only valid information is published in this report. The data presented in this report are largely from care provided to members during the 2009 calendar year.

Who Reports?

This report contains information from 27 health plans for care received during 2009. Twelve plans reported on their commercial enrollees; 18 plans reported on their Medicaid enrollees, and 18 plans reported on Child Health Plus enrollees. Eleven plans reported data on their Preferred Provider Organization (PPO) membership for this year.

Performance Measure Reporting

The NYSDOH does not require health plans to collect all measures every year. For measures that were not collected for 2009, the most recent information available is included in this report. The following measures were collected for 2008 but not for 2009:

- Cervical Cancer Screening (for Medicaid only)
- Controlling High Blood Pressure
- Prenatal and Postpartum Care
- Frequency of Prenatal Care

New measures for the 2009 measurement year are considered first year measures, and consistent with NCQA policy, individual plan rates are not published. Instead, data for the Adolescent Preventive Care measure and two new measures of diabetes care are reported in aggregate.

USING THIS REPORT

This report represents results of health plan performance organized to allow comparison between health plans of the same type of insurance for each specific measure. Measures are organized into general domains to make it easier to focus on results in a related area. To use this report, first select the area of interest or domain, and then look for the type of insurance. The measures are arranged in columns with the title of the measure at the top, and a list of plan rates underneath. The health plans' names are along the left hand side of the page and the plan's rate for that measure is on the line with the plan name, under the column for that measure. Symbols are provided to indicate whether the plan performed statistically better (▲) or worse (▼) than the statewide average.

When comparing plan rates and associated significance ratings, you may notice plans that have the same numerical rating but a different significance rating. While this may seem like an error, plan significance ratings are based on how much a plan's rate differs from the statewide average and the number of individuals included in the rate. Therefore, plans can have the same rate but have different significance ratings because their rates are based on different numbers of enrollees.

Variations and/or extremes in utilization are difficult to interpret for plans with low enrollment. For this reason, plans with fewer than 30 eligible members are excluded from the statistical calculations of the percentiles, but are still included in the calculation of the statewide averages. All rates based on denominators of less than 30 are reported in the tables with a dashed line.

Types of Insurance

Information on four types of managed care insurance is included in this report: commercial HMO, commercial PPO, Medicaid, and Child Health Plus.

<p>Commercial HMO</p>	<p>Individual or employer sponsored health insurance. This is a form of health insurance where a health plan contracts with a network of providers to provide care; the member selects a primary care provider to coordinate care; and referrals to some services or specialists may be required.</p>
<p>Commercial PPO</p>	<p>Individual or employer sponsored health insurance. This is a form of health insurance where a health plan contracts with a network of providers to provide care; there is no primary care provider assignment; and referrals to some services or specialists are not usually required.</p>
<p>Medicaid</p>	<p>Government sponsored health insurance. This is a form of health insurance where a health plan contracts with a network of providers to provide care; the member selects a primary care provider to coordinate care; and referrals to some services or specialists may be required. This includes people who are eligible for Medicaid managed care and Family Health Plus (NYS's expansion program for adults age 19 and older).</p>
<p>Child Health Plus</p>	<p>Government sponsored health insurance, although individuals may pay part of premium for some eligibility levels. This is a form of health insurance where a health plan contracts with a network of providers to provide care; the member selects a primary care provider to coordinate care; and referrals to some services or specialists may be required. This is NYS's version of the federal State Children's Health Insurance Program (SCHIP) for people up to age 19.</p>

At the bottom of the table is the NYS average used to determine whether the difference in the plan rate to this overall rate is statistically better or worse. Whenever available, a national average is shown underneath the NYS average. This information allows you to see how plan is doing compared to the NYS average as well as how NYS compares in the national picture.

What is in this report?

Information about the health plans is divided into the following eight areas:

- Plan Profiles
- Provider Network
- Child and Adolescent Health
- Women's Health
- Adult Health Care
- Behavioral Health
- Satisfaction with Care
- Preferred Provider Organizations (PPO)

PPO performance reporting was initiated in NYS in 2009. For 2009, eleven plans submitted QARR data, for their PPO product lines. This is the first year that PPO results are being reported with plan-specific results. The comparability of results for this product to the other products is influenced by the degree to which benefit packages are comprehensive and comparable. Therefore, PPO results are displayed separately in Section 9.

Trends and Averages

Tables presenting New York's performance over time are included in each section. Due to changes in measure specifications not all measures are able to be included in the trend section. National benchmarks are displayed at the bottom of the data tables in each section. When available, commercial and Medicaid benchmarks are obtained from the NCQA's State of Healthcare Quality Report, available online at <http://www.ncqa.org>. For NYS-specific measures whose definitions differ from the HEDIS measures, no national benchmark is available. There are currently no available national benchmarks for Child Health Plus.



Additional Information

Some measures are able to be represented at a county level for Medicaid managed care using detailed information from Medicaid managed care plans. This geographical representation of data is presented to further understanding of variations in the quality of care for Medicaid managed care in New York State.

OTHER DEPARTMENT OF HEALTH REPORTS AND WEBSITES

Managed Care performance data is available in several formats and related data including utilization data and demographic variation, is also available. To see if there is another format that may be of interest to you, take a look at the report description.

eQARR

The information contained in this report is available on the Department's website as an interactive report card for health care consumers. Commercial HMO, Commercial PPO, Medicaid, and Child Health Plus data are available on a regional basis. eQARR can be found at the following link: <http://www.health.ny.gov>.

Consumer Guides

The consumer guides contain information on quality and satisfaction ratings in a condensed fashion that is meant to be very user-friendly for people evaluating the quality of health plans. Guides for 2010 are available for six regions of the state: New York City, Long Island, Hudson Valley, Northeast, Central, and Western New York. Guides for Medicaid, Commercial HMO, and Child Health Plus enrollees can be obtained free of charge at the Department's website, <http://www.health.ny.gov>.

Managed Care Plan Access and Utilization Report

The 2010 Managed Care Plan Access and Utilization Report contains additional information on access and utilization of certain services and procedures is available on the Department's website at <http://www.health.ny.gov>. This report contains data on Commercial HMO, Commercial PPO, Medicaid and Child Health Plus members' access to care for children and adults, use of hospitals and ERs, rates of various surgical procedures and rates of antibiotic utilization.

Demographic Variation in Medicaid Managed Care

The 2010 report provides information about variation in quality of care received by select demographic characteristics such as gender, age, race/ethnicity, aid category and region. The report contains Medicaid managed care data and is available on the Department's website, <http://www.health.ny.gov>.

FEEDBACK

We welcome suggestions and comments on this publication. Please contact us at:

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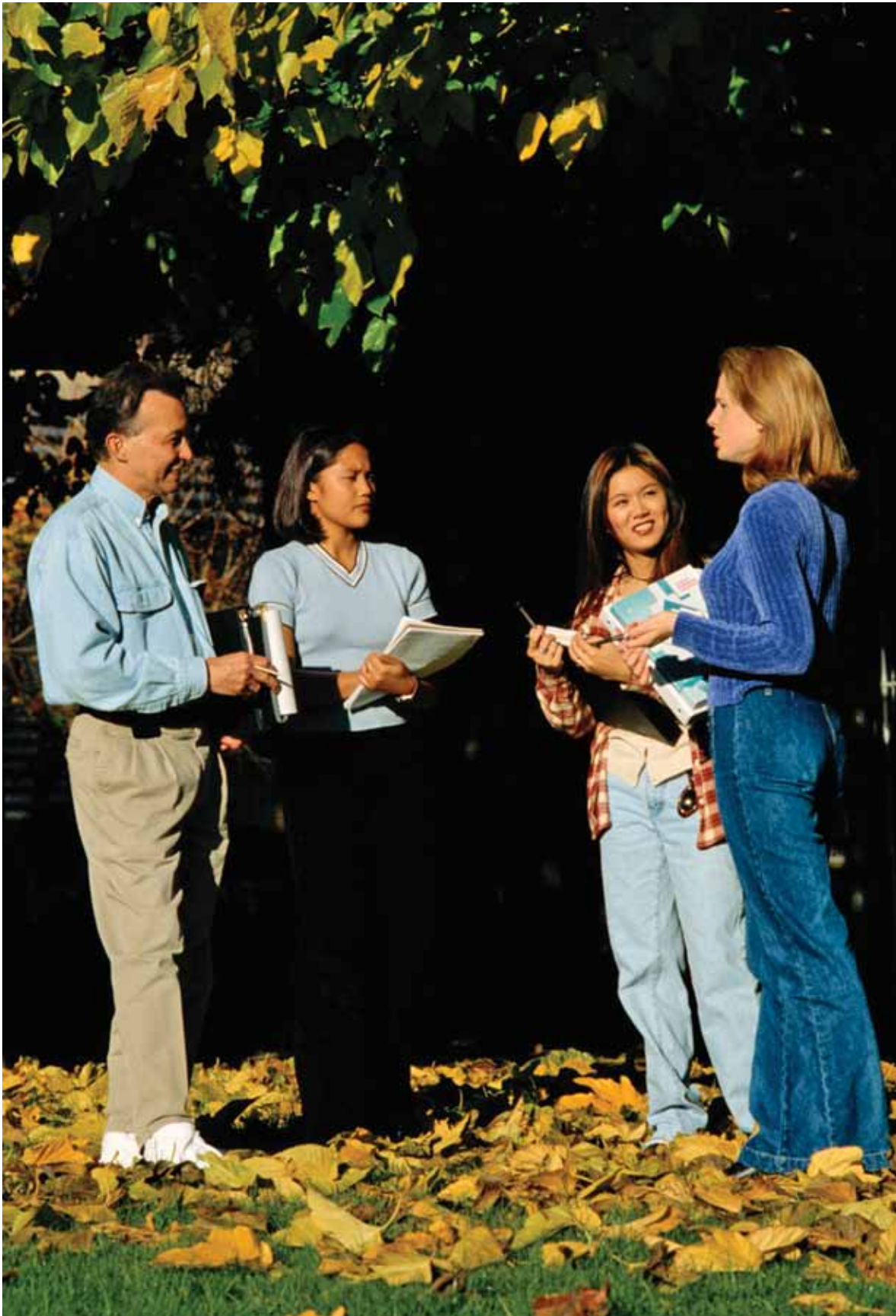
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This section provides an overview of each managed care plan operating in New York State during 2009. Health plans that enroll commercial members in Preferred Provider Organization (PPO) products are listed in an additional profile table in this section. The profiles include the following information:

Column Heading	Description
Type of Insurance	A plan may enroll members under different products such as commercial HMO (HMO), commercial PPO (PPO), Medicaid managed care (MA), Child Health Plus (CHP), or Family Health Plus (FHP). The product a plan offers is indicated by the following symbol † .
Plan Service Areas	The 62 counties of New York State are divided into six regional plan service areas. Managed care organizations are certified to operate in specific counties in New York State. Please contact the health plans in your area to find out if they are currently enrolling in your county of residence.
Long Island (LI)	Nassau, Suffolk
New York City (NYC)	Bronx, Kings (Brooklyn), New York (Manhattan), Queens, Richmond (Staten Island)
Hudson Valley (HV)	Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester
Northeast (NE)	Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington
Central (CEN)	Broome, Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tioga, Tompkins
Western (WST)	Allegany, Cattaraugus, Chautauqua, Chemung, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuylar, Seneca, Steuben, Wayne, Wyoming, Yates
Member Services Phone Number / Website	A toll-free member services number and the health plan’s main website URL.
NCQA Accreditation	The National Committee for Quality Assurance’s (NCQA) comprehensive accreditation process is conducted by a team of physicians and managed care experts. The accreditation level granted by NCQA is contained in this column. For more information about the accreditation process, levels of certification, and most recent ratings, please visit the NCQA website at www.ncqa.org
2009 Enrollment	The total number of enrollees in the health plans as of December 31, 2009. While this report presents quality of care data for commercial, Medicaid, and Child Health Plus enrollees, plans may also have membership in other products such as Medicare. The enrollment figures presented here include only membership in products that are included in QARR measures. Plans with may include both Health Maintenance Organization (HMO), and Point of Service (POS) members in their commercial HMO enrollment.
Percent Change from 2008	The percent change in total enrollment between December 31, 2008 and December 31, 2009.

Health Plan	TYPE OF INSURANCE					PLAN SERVICE AREAS*					Member Services
	CO	MA	CHP	FHP	LI	NYC	HV	NE	CEN	WST	
Aetna	†				●	●	●		●		1-800-872-3862
Affinity Health Plan		†	†	†	●	●	●				1-866-247-5678
Amerigroup New York		†	†	†		●	●				1-800-600-4441
Atlantis Health Plan	†					●					1-866-747-8422
CDPHP	†	†	†	†			●	●	●		1-800-777-2273
Empire	†		†		●	●	●	●			1-800-261-5962
Excellus BlueCross BlueShield	†	†	†	†				●	●	●	1-800-722-7884
Fidelis Care New York		†	†	†	●	●	●	●	●	●	1-888-343-3547
HIP (EmblemHealth)	†	†	†	†	●	●	●				1-800-447-8255
Health Net of New York, Inc.	†				●	●	●				1-800-848-4747
Health Plus		†	†	†	●	●					1-800-300-8181
HealthNow New York Inc.**	†	†	†	†				●	●	●	1-866-231-0847
Healthfirst PHSP, Inc.		†	†	†	●	●					1-866-463-6743
Hudson Health Plan		†	†	†			●				1-800-339-4557
Independent Health	†	†	†	†						●	1-800-501-3439
MVP	†	†	†	†			●	●	●	●	1-888-687-6277
MetroPlus Health Plan		†	†	†		●					1-800-303-9626
Neighborhood Health Providers		†	†	†	●	●					1-800-826-6240
Oxford	†				●	●	●				1-800-444-6222
Total Care		†	†	†					●		1-800-223-7242
UnitedHealthcare Community Plan		†	†	†	●	●			●		1-800-493-4647
Univera Community Health		†	†	†						●	1-800-494-2215
Univera Healthcare	†									●	1-800-427-8490
WellCare of New York		†	†	†		●	●	●			1-800-288-5441

* Plans may not participate in all counties in regions indicated.

** Also includes HealthNow commercial PPO membership.

Website	NCQA Accreditation***	2009 Enrollment	Percent Change from 2008
www.aetna.com	Excellent	160,359	-13%
www.affinityplan.org		248,950	13%
www.amerigroupcorp.com		112,624	3%
www.atlantishp.com		25,693	35%
www.cdphp.com	Excellent	250,070	-9%
www.empireblue.com	Excellent	325,687	-28%
www.excellusbcbs.com	Excellent	261,308	-11%
www.fideliscare.org		518,155	29%
www.hipusa.com	Excellent	719,952	-3%
www.healthnet.com	Excellent	119,123	-12%
www.healthplus-ny.org		298,468	7%
www.healthnowny.com	Excellent	406,334	23%
www.healthfirstny.org		436,186	16%
www.hudsonhealthplan.org		93,522	20%
www.independenthealth.com	Excellent	222,066	-5%
www.mvphealthcare.com	Excellent	300,127	-11%
www.metroplus.org		375,877	9%
www.getnhp.com		214,067	88%
www.oxfordhealth.com	Excellent	531,522	-6%
www.totalcareny.com		38,227	23%
www.americhoice.com		227,594	15%
www.univeracommunityhealth.org		44,348	5%
www.univerahealthcare.com	Excellent	11,396	-67%
www.wellcare.com		89,234	-13%

Not every plan may be accepting new enrollment. Please call the plan's Member Services number to make sure.

*** Data source: NCQA website: <http://www.ncqa.org>

NCQA Accreditation Status as of 7/15/10

Commercial PPO Plan Profiles

Section

2

Health Plan	TYPE OF INSURANCE Commercial PPO	PLAN SERVICE AREAS*						Member Services
		LI	NYC	HV	NE	CEN	WST	
Aetna Life Insurance Company - New York	†	●	●	●	●	●	●	1-800-872-3862
CDPHP Universal Benefits, Inc.	†			●	●	●		1-877-269-2134
Connecticut General Life Insurance Company - NY	†	●	●	●	●	●	●	1-800-244-6224
Empire HealthChoice HMO, Inc.	†	●	●	●	●			1-800-342-9816
Excellus BlueCross BlueShield	†				●	●	●	1-877-757-3850
GHI (EmblemHealth)	†	●	●	●	●	●	●	1-800-624-2414
HIP (EmblemHealth)	†	●	●	●	●	●	●	1-800-447-8255
Health Net of New York, Inc.	†	●	●	●	●	●	●	1-888-747-7823
MVP Preferred PPO	†			●	●	●	●	1-888-687-6277
Oxford Health Insurance Company, Inc. - New York	†	●	●	●				1-800-444-6222
UnitedHealthcare Insurance Company of New York, Inc.	†	●	●	●	●	●	●	1-866-633-2446

* Plans may not participate in all counties in regions indicated.

Not every plan may be accepting new enrollment. Please call the plan Member Services number to make sure.

Website	NCQA Accreditation**	2008 Enrollment	Percent Change from 2008
www.aetna.com	Full	694,986	7%
www.cdphp.com	Excellent	75,233	18%
www.cigna.com	Full	255,809	2%
www.empireblue.com		2,383,505	51%
www.excellusbcs.com	Excellent	261,666	0%
www.ghi.com		326,518	13%
www.hipusa.com	Full	43,536	6%
www.healthnet.com		78,001	64%
www.mvphealthcare.com		112,910	297%
www.oxfordhealth.com	Full	411,422	-9%
www.myuhc.com	Excellent	627,890	-62%

** Data source: NCQA Accreditation Rating as of 7/15/2010.

For more information on NCQA accreditation please see their website at www.ncqa.org.



This section includes information on a health plan’s provider network and how consumers feel about the care they receive from their providers. Included in this section are board certification rates for several types of physicians. Various medical boards certify physicians in their area of specialization based on education, experience, and clinical and/or written testing.

The remaining measures in this section are collected through a member satisfaction survey known as CAHPS®. Both commercial and Medicaid managed care plans surveyed adult membership using CAHPS® 4.0H questionnaires. Commercial health plans collect CAHPS for their adult members every year. The data presented here are for adult commercial members who were enrolled in their health plan for at least 12 months. The NYSDOH sponsors a biennial CAHPS survey for Medicaid managed care members enrolled for at least 6 months.

Measure	Description (Type of Insurance)
Board Certification	The percentage of board-certified physicians in each of the following specialty fields: family medicine, internal medicine, obstetrics and gynecology (OB/GYN), and pediatrics. (CO, MA, PPO)
Satisfaction with Provider Communication	The percentage of members who responded “usually” or “always” when asked a set of questions to identify how often they were satisfied with communication they received from their doctor or health care provider. (CO, MA, PPO) <ol style="list-style-type: none"> 1) How often did your personal doctor listen carefully to you? 2) How often did your personal doctor explain things in a way you could understand? 3) How often did your personal doctor show respect for what you had to say? 4) How often did your personal doctor spend enough time with you?
Satisfaction with Personal Doctor	The percentage of members responding 8, 9, or 10 (on a scale of 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible) when asked, “How would you rate your personal doctor?” (CO, MA, PPO)
Satisfaction with Specialist	The percentage of members responding 8, 9, or 10 (on a scale of 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible) when asked, “How would you rate your specialist?” (CO, MA, PPO)

Commercial HMO Health Plan Performance

Section

3

Health Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Aetna	80	81▲	82▲	85▲	93	78	79
Atlantis Health Plan	53▼	68▼	35▼	64▼	89▼	71▼	66▼
CDPHP	85▲	80	84▲	77▼	94	83	78
Empire	73▼	74▼	76▼	77▼	93	79	78
Excellus BlueCross BlueShield	87▲	84▲	83▲	93▲	95	81	85▲
HIP (EmblemHealth)	80	81▲	76▼	82	91	77	73▼
Health Net of New York, Inc.	NV	NV	NV	NV	96▲	82	84
HealthNow New York Inc.	84▲	80	80	88▲	93	82	79
Independent Health	84▲	77▼	77	85	94	81	79
MVP	84▲	81	81	87▲	94	86▲	85▲
Oxford	76▼	86▲	89▲	86▲	95	82	79
Univera Healthcare	84▲	78	78	91▲	94	80	82
Statewide	79	80	79	83	93	81	79
National	*	*	*	*	93	82	81

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NV Plan submitted invalid data
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

Satisfaction rates presented here only reflect members residing in New York. These rates may differ from other publications of CAHPS data.

Medicaid Health Plan Performance

Section

3

Health Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Affinity Health Plan	83	83	83▲	83	85	71	67
Amerigroup New York	72▼	82	74	74▼	86	73	68
CDPHP	86▲	80▼	83▲	75▼	93▲	80▲	68
Excelsus BlueCross BlueShield	88▲	84	82▲	93▲	87	75	70
Fidelis Care New York	86▲	83	77	84	88	76	70
HIP (EmblemHealth)	79	81▼	74▼	81	85	73	59▼
Health Plus	81	85	77	81	85	72	69
HealthNow New York Inc.	82	77▼	74	85	86	75	70
Healthfirst PHSP, Inc.	86▲	91▲	79	86▲	83▼	72	64
Hudson Health Plan	83	79	78	87▲	88	78▲	74▲
Independent Health's MediSource	84	77▼	77	85	86	73	69
MVP	85▲	79▼	78	87▲	89	79▲	72
MetroPlus Health Plan	74▼	74▼	61▼	75▼	83	70	61
Neighborhood Health Providers	77▼	85	76	79▼	86	76	65
Total Care	92▲	94▲	84	98▲	85	73	66
UnitedHealthcare Community Plan	73▼	89▲	81▲	82	89▲	77	68
Univera Community Health	80	71▼	72	87▲	86	71	77▲
WellCare of New York	80	83	76	82	84	71	57▼
Statewide	81	83	77	82	86	74	67
National	*	*	*	*	87	76	76

3 Network

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

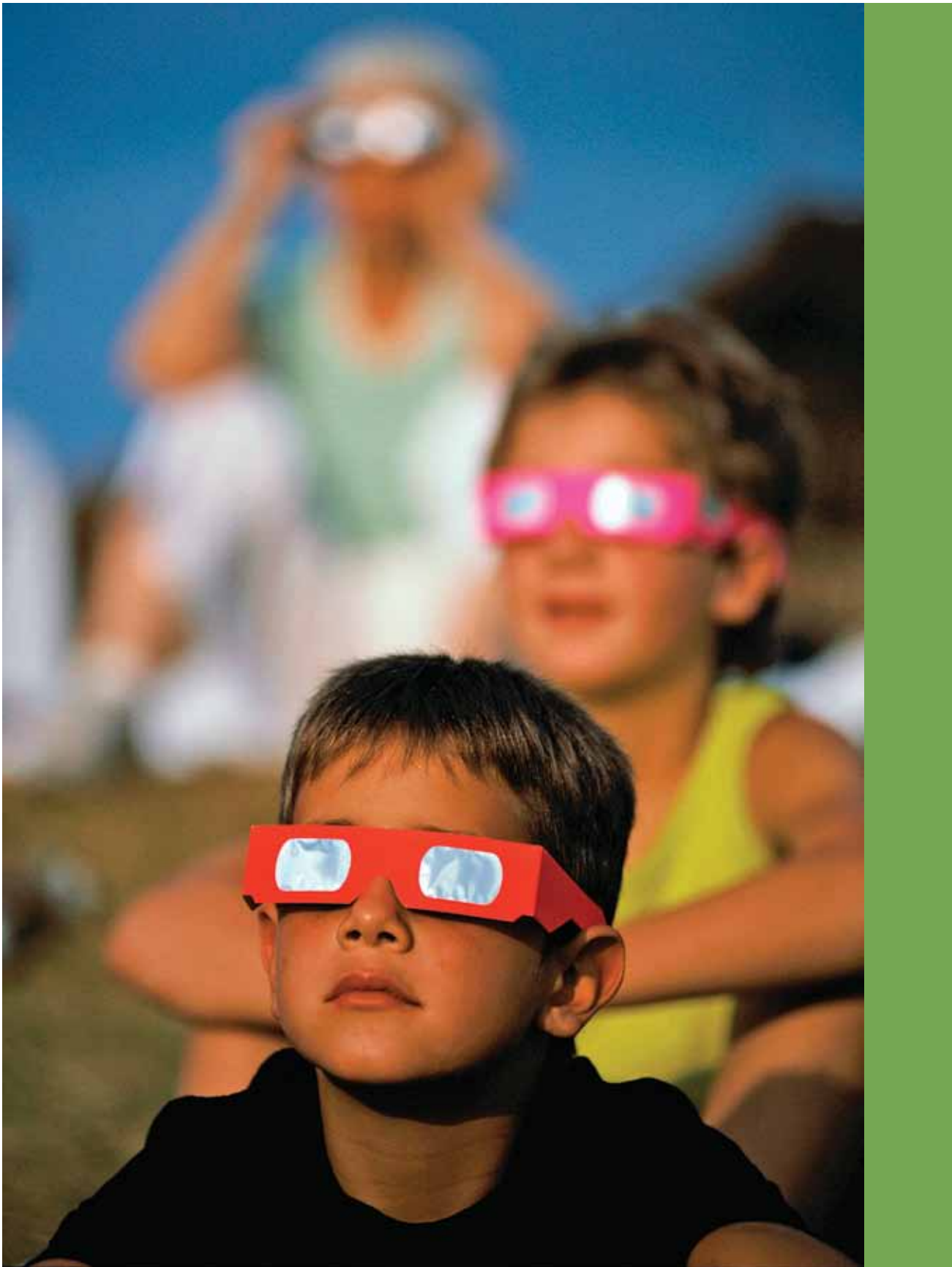
NOTE: Plans without symbols are not significantly different from the statewide average. Satisfaction rates presented here only reflect members residing in New York. These rates may differ from other publications of CAHPS data.

COMMERCIAL HMO

Measure	2007	2008	2009
Board Certified Family Medicine	81	81	79
Board Certified Internal Medicine	81	83	80
Board Certified OB/GYN	78	78	79
Board Certified Pediatrics	82	84	83
Satisfaction with Provider Communication	93	93	93
Satisfaction with Personal Doctor or Nurse	81	81	81
Satisfaction with Specialist	81	81	79

MEDICAID

Measure	2007	2008	2009
Board Certified Family Medicine	80	82	81
Board Certified Internal Medicine	79	82	83
Board Certified OB/GYN	74	76	77
Board Certified Pediatrics	79	83	82
Satisfaction with Provider Communication	88	Rotated	86
Satisfaction with Personal Doctor or Nurse	74	Rotated	74
Satisfaction with Specialist	71	Rotated	67



To ensure they lead healthy lives, routine primary and preventive care visits, including well-child and dental visits, are recommended for all children and adolescents. Children should have the recommended series of immunizations for their age. Young children can be exposed to lead through normal hand-to-mouth activity with toys and other objects and should have their blood tested for lead by the age of two. Regular well visits and medical exams are important to the health of children of all ages, from infants to adolescents. An annual dental visit is also an indicator of the health and well being of children.

The appropriateness of care for children with acute illness is also shown. Excess use of antibiotics is linked to the prevalence of resistant strains of bacteria in the community; appropriate testing and use of antibiotics in children is an indicator of high quality of care. Children with chronic health conditions, such as asthma or attention deficit/hyperactivity disorder (ADHD), should receive proper medical management for their conditions.

For children with asthma, this means receiving the appropriate medication for their condition. For children with ADHD, regular follow-up visits with a doctor is important after beginning prescription medications.

In recent years, the increasing prevalence of childhood obesity has become a significant public health concern. The number of children who are overweight and at risk for becoming obese has also continued to increase. A number of clinical guidelines state that monitoring body mass index (BMI) percentiles is the first step in identifying and addressing overweight and obesity risk. Additionally, counseling and assessment of nutrition and physical activity by the primary care provider is an important component of the overall goal of maintaining or achieving a healthy weight for youths. Three preventive counseling measures for healthy children and adolescents evaluate plan performance of these activities.



PREVENTIVE CARE FOR CHILDREN AND ADOLESCENTS

Measure	Description (Type of Insurance)
Childhood Immunization Status (Combo 3:4-3-1-2-3-1-4)	The percentage of two-year olds who were fully immunized. The HEDIS specifications for fully immunized consisted of the following vaccines: 4 Diphtheria/Tetanus/Pertussis, 3 Polio, 1 Measles/Mumps/Rubella, 2 H Influenza type B, 3 Hepatitis B, 1 Varicella, and 4 pneumococcal. (CO, MA, CHP, PPO)
Lead Testing	The percentage of two-year olds that had their blood tested for lead poisoning at least once. (CO, MA, CHP, PPO)
Well-Child & Preventive Care Visits in the First 15 Months of Life	The percentage of children who had five or more well-child and preventive health visits in their first 15 months of life. (CO, MA, CHP, PPO)
Well-Child & Preventive Care Visits in the 3rd, 4th, 5th, or 6th Year of Life	The percentage of children between the ages of three and six years who had a well-child and preventive health visit in the past year. (CO, MA, CHP, PPO)
Adolescent Well-Care Visits	The percentage of adolescents (ages 12-21) who had a well-care or preventive care visit in the past year. (CO, MA, CHP, PPO)
Annual Dental Visit	The percentage of children and adolescents ages 2 through 18 years, who had at least one dental visit within the last year. When a Medicaid plan does not offer dental care as part of its benefit package, enrollees have access to dental services through fee-for-service. (MA, CHP)

CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Measure	Description (Type of Insurance)
Appropriate Treatment for Upper Respiratory Infection (URI)	The percentage of children, ages 3 months to 18 years, who were diagnosed with an upper respiratory infection (common cold) and who were not given a prescription for an antibiotic. A higher score indicates more appropriate treatment for children with URI. (CO, MA, CHP, PPO)
Appropriate Testing for Pharyngitis	The percentage of children, ages two to 18 years, who were diagnosed with pharyngitis, were prescribed an antibiotic, and who had a group A streptococcus test performed. (CO, MA, CHP, PPO)
Use of Appropriate Medications for People with Asthma	The percentage of children, ages 5 to 11 years, with persistent asthma who received appropriate medications to control their condition. (CO, MA, CHP, PPO)
Follow-Up Care for Children Prescribed ADHD Medication	The percentage of children, ages 6 to 12 years, who were newly prescribed ADHD medication and who had at least 3 follow-up visits within a 10-month period of taking the medication. There are two measures to assess follow-up care for children taking ADHD medication. (CO, MA, CHP, PPO)
1) Initiation Phase	The percentage of children with a new prescription for ADHD medication who had one follow-up visit during the 30 days after beginning the medication.
2) Continuation & Maintenance Phase	The percentage of children with a new prescription for ADHD medication who remained on the medication for 7 months and who had at least 2 follow-up visits in the 9-month period after the initiation phase ended.

PREVENTIVE COUNSELING FOR CHILDREN AND ADOLESCENTS

Measure	Description (Type of Insurance)
Weight Assessment	The percentage of members, ages 3 to 17 years, who had a visit with a healthcare provider and whose weight was assessed by the percentile ranking of their Body Mass Index (BMI). (CO, MA, CHP, PPO)
Counseling for Nutrition	The percentage of members, ages 3 to 17 years, who were counseled on nutrition or who were referred for nutrition education by their healthcare provider. (CO, MA, CHP, PPO)
Counseling for Physical Activity	The percentage of members, ages 3 to 17 years, who were counseled on physical activity or were referred for physical activity by their healthcare provider. (CO, MA, CHP, PPO)

PREVENTIVE CARE FOR CHILDREN AND ADOLESCENTS

Health Plan	Childhood Immunization Combo 3 (4-3-1-2-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3 rd , 4 th , 5 th , or 6 th Year of Life	Adolescent Well-Care and Preventive Visits
Aetna	67	76	84▼	80▼	54▼
Atlantis Health Plan	42▼	75	90	74▼	47▼
CDPHP	78▲	79	92▲	87▲	67▲
Empire	59▼	75	81▼	82	54▼
Excellus BlueCross BlueShield	80▲	80	96▲	86▲	58
HIP (EmblemHealth)	59▼	87▲	72▼	76▼	54▼
Health Net of New York, Inc.	64	75	88	80▼	58▼
HealthNow New York Inc.	79▲	83▲	95▲	85▲	62▲
Independent Health	87▲	87▲	94▲	87▲	66▲
MVP	77▲	72▼	95▲	84▲	58▼
Oxford	60▼	70▼	91▲	83▲	61▲
Univera Healthcare	77	74	96▲	81	64▲
Statewide	68	78	88	82	59
National	73	*	*	*	*

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

* No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Asthma Medications (Ages 5-11)	Follow-Up Care for Children Prescribed ADHD Medication	
				Initiation Phase	Continuation Phase
Aetna	87	87	96	41	—
Atlantis Health Plan	86	79▼	—	—	—
CDPHP	86	90▲	96	35▼	36
Empire	82▼	89▲	98	41	43
Excelsus BlueCross BlueShield	89▲	88	95	35▼	37
HIP (EmblemHealth)	88▲	87	94▼	45	44
Health Net of New York, Inc.	88▲	89▲	99▲	41	48
HealthNow New York Inc.	84▼	80▼	97	51▲	54▲
Independent Health	84▼	89▲	96	42	48
MVP	88▲	85▼	97	36▼	40
Oxford	89▲	87	97	44	47
Univera HealthCare	88	83	—	39	—
Statewide	86	87	97	41	44
National	84	77	97	37	42

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

— Sample size too small to report

NA Not applicable. Plan did not have any eligible members.

NOTE: Plans without symbols are not significantly different from the statewide average.

PREVENTIVE COUNSELING FOR CHILDREN AND ADOLESCENTS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Aetna	47▼	64	54
Atlantis Health Plan	11▼	26▼	17▼
CDPHP	74▲	80▲	67▲
Empire	55	64	51▼
Excellus BlueCross BlueShield	70▲	78▲	72▲
HIP (EmblemHealth)	42▼	56▼	49▼
Health Net of New York, Inc.	48▼	56▼	43▼
HealthNow New York Inc.	52	64	61
Independent Health	65▲	75▲	56
MVP	65▲	70▲	68▲
Oxford	NV	NV	NV
Univera Healthcare	68▲	68	68▲
Statewide	55	66	57
National	35	41	37

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

NV Plan submitted invalid data.

NOTE: Plans without symbols are not significantly different from the statewide average.

PREVENTIVE CARE FOR CHILDREN AND ADOLESCENTS

Health Plan	Childhood Immunization Combo 3 (4-3-1-2-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3 rd , 4 th , 5 th , or 6 th Year of Life	Adolescent Well-Care and Preventive Visits	Annual Dental Visit (Ages 2-18)
Affinity Health Plan	81▲	91	80▲	76▼	49▼	51▼
Amerigroup New York	76	92	66▼	79	58▲	54▲
CDPHP	70	74▼	75▲	78▼	52▼	NA
Excelsus BlueCross BlueShield	81▲	83▼	83▲	78▼	52▼	NA
Fidelis Care New York	64▼	85▼	73	78▼	53▼	58▲
HIP (EmblemHealth)	59▼	91	68▼	79	57▲	50▼
Health Plus	81▲	93▲	71	83▲	59▲	54▲
HealthNow New York Inc.	80▲	84▼	81▲	78	54	NA
Healthfirst PHSP, Inc.	78▲	91	65▼	77▼	56▲	50▼
Hudson Health Plan	81▲	91	77▲	78▼	51▼	61▲
Independent Health's MediSource	73	86▼	77▲	78	57▲	NA
MVP	74	81▼	82▲	78	49▼	50▼
MetroPlus Health Plan	82▲	95▲	73▲	84▲	59▲	NA
Neighborhood Health Providers	83▲	94▲	70▼	79	51▼	42▼
Total Care	71	81▼	73	71▼	45▼	NA
UnitedHealthcare Community Plan	56▼	89	66▼	77▼	53▼	53▲
Univera Community Health	73	83▼	85▲	78	54	NA
WellCare of New York	66▼	91	68▼	78	61▲	NA
Statewide	73	90	72	79	55	52
National	69	66	*	*	*	*

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

* No national average available

NA Not applicable. Plan does not provide dental coverage.

NOTE: Plans without symbols are not significantly different from the statewide average.

CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Asthma Medications (Ages 5-11)	Follow-Up Care for Children Prescribed ADHD Medication	
				Initiation Phase	Continuation Phase
Affinity Health Plan	92▲	77▼	91	65▲	79▲
Amerigroup New York	88▼	80▼	91	53	65
CDPHP	87▼	80▼	95▲	41▼	43▼
Excelsus BlueCross BlueShield	92▲	83	94▲	42▼	47▼
Fidelis Care New York	89▼	86▲	92	60▲	62
HIP (EmblemHealth)	90	86▲	94▲	61▲	68
Health Plus	89▼	82▼	92	60	74▲
HealthNow New York Inc.	79▼	73▼	93	55	57
Healthfirst PHSP, Inc.	92▲	85▲	90▼	67▲	78▲
Hudson Health Plan	90	76▼	95▲	59	65
Independent Health's MediSource	90	80	95▲	59	64
MVP	93▲	84	92	34▼	49▼
MetroPlus Health Plan	94▲	84▲	89▼	62▲	70
Neighborhood Health Providers	90	78▼	88▼	52	60
Total Care	82▼	75▼	96▲	56	54
UnitedHealthcare Community Plan	90	82	94▲	51▼	58
Univera Community Health	89	73▼	95	59	68
WellCare of New York	90	80▼	93	58	60
Statewide	90	83	92	56	62
National	86	62	92	37	42

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different than the statewide average.

PREVENTIVE COUNSELING FOR CHILDREN AND ADOLESCENTS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Affinity Health Plan	54	73▲	56▲
Amerigroup New York	31▼	55▼	42▼
CDPHP	60▲	69▲	48
Excellus BlueCross BlueShield	69▲	75▲	60▲
Fidelis Care New York	49	70▲	53
HIP (EmblemHealth)	34▼	46▼	34▼
Health Plus	56	69▲	52
HealthNow New York Inc.	41▼	61	54▲
Healthfirst PHSP, Inc.	40▼	39▼	33▼
Hudson Health Plan	77▲	74▲	58▲
Independent Health's MediSource	36▼	68▲	35▼
MVP	52	66▲	52
MetroPlus Health Plan	70▲	74▲	64▲
Neighborhood Health Providers	41▼	69▲	54▲
Total Care	69▲	68▲	54▲
UnitedHealthcare Community Plan	48	46▼	39▼
Univera Community Health	50	51▼	37▼
WellCare of New York	53	41▼	33▼
Statewide	51	61	48
National	30	42	33

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different than the statewide average.

PREVENTIVE CARE FOR CHILDREN AND ADOLESCENTS

Health Plan	Childhood Immunization Combo 3 (4-3-1-2-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3rd, 4th, 5th, or 6th Year of Life	Adolescent Well-Care and Preventive Visits	Annual Dental Visit (Ages 2-18)
Affinity Health Plan	80▲	83	91▲	79▼	61▼	67▲
Amerigroup New York	74	91▲	—	76▼	62▼	60▼
CDPHP	71	80	89▲	83▲	67▲	69▲
Empire	51▼	72▼	78▼	82▲	66▲	57▼
Excelsus BlueCross BlueShield	74▲	83	81	80	65	67▲
Fidelis Care New York	76▲	86▲	84	80	62▼	65▲
HIP (EmblemHealth)	49▼	81	91	87▲	69▲	60▼
Health Plus	74▲	92▲	75	82	65▲	59▼
HealthNow New York Inc.	76▲	87	95▲	84▲	69▲	64▲
Healthfirst PHSP, Inc.	65	85	—	77▼	58▼	64▲
Hudson Health Plan	84▲	94▲	81	80	63▼	70▲
MVP	68	78	—	82	62	59▼
MetroPlus Health Plan	73	97▲	—	82	63▼	60▼
Neighborhood Health Providers	71	97▲	—	80	60▼	58▼
Total Care	73	73	—	76▼	59▼	60▼
UnitedHealthcare Community Plan	58▼	85	86	81	66▲	60▼
Univera Community Health	72	82	91▲	84▲	70▲	65▲
WellCare of New York	68	72	—	80	63	57▼
Statewide	66	82	82	81	64	63

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Asthma Medications (Ages 5-11)	Use of Appropriate Medications for People with Asthma (Ages 5-11) 3+ Controllers	Follow-Up Care for Children Prescribed ADHD Medication	
					Initiation Phase	Continuation Phase
Affinity Health Plan	90▲	84	95	75	60▲	—
Amerigroup New York	86	81▼	92	70	36	—
CDPHP	85	86	95	81	34▼	35▼
Empire	83▼	90▲	95	76	49	47
Excellus BlueCross BlueShield	84▼	79▼	96▲	81▲	45▼	48
Fidelis Care New York	89▲	85	95	76	60▲	68▲
HIP (EmblemHealth)	87	87	99▲	78	54	—
Health Plus	86	85	88▼	74	56	—
HealthNow New York Inc.	78▼	73▼	99▲	86▲	59	74▲
Healthfirst PHSP, Inc.	88▲	86	90▼	76	55	—
Hudson Health Plan	89▲	83▼	96	85▲	61▲	—
MVP	94▲	88	—	80	—	—
MetroPlus Health Plan	93▲	88▲	91	71	45	—
Neighborhood Health Providers	86	68▼	88	66▼	—	—
Total Care	79▼	78▼	93	84	55	—
UnitedHealthcare Community Plan	88▲	88▲	96	79	45	—
Univera Community Health	86	84	90	70	53	—
WellCare of New York	90▲	87	94	72	48	—
Statewide	86	85	94	78	49	53

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

PREVENTIVE COUNSELING FOR CHILDREN AND ADOLESCENTS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Affinity Health Plan	60▲	68	57
Amerigroup New York	42▼	66	54
CDPHP	61▲	69▲	58
Empire	51	61	51▼
Excellus BlueCross BlueShield	56	62	57
Fidelis Care New York	55	73▲	63▲
HIP (EmblemHealth)	38▼	55▼	44▼
Health Plus	58	72▲	63▲
HealthNow New York Inc.	50▼	61	63▲
Healthfirst PHSP, Inc.	44▼	46▼	42▼
Hudson Health Plan	79▲	75▲	69▲
MVP	69▲	64	63▲
MetroPlus Health Plan	68▲	73▲	64▲
Neighborhood Health Providers	53	69▲	52
Total Care	70▲	64	55
UnitedHealthcare Community Plan	47▼	53▼	43▼
Univera Community Health	60	60▼	55
WellCare of New York	59	54▼	47▼
Statewide	55	65	56

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

Adolescent Preventive Care

Preventive care includes addressing the primary causes of morbidity and mortality. For adolescents and young adults the causes of health issues are often associated with risk behaviors. Discussion of risk behaviors and their future health implications is recommended as part of annual well care for adolescents.

In New York State, four components of preventive care are measured for adolescents (ages 12 – 17). These measures evaluate the percentage of teens who have had assessment or counseling or education about sexual health, depression, and tobacco and substance abuse during outpatient visits with primary care providers.

NUMERATOR 1: ASSESSMENT/COUNSELING/EDUCATION ON RISK BEHAVIORS AND PREVENTIVE ACTIONS ASSOCIATED WITH SEXUAL ACTIVITY

	Commercial HMO	Commercial PPO	Medicaid	Child Health Plus
Number of Plans	12	11	18	18
Number <30	0	0	0	0
Number with Invalid Data	0	1	0	0
Statewide Average	48	34	51	54
Standard Deviation	19	11	11	11
Range of scores	10, 86	20, 57	33, 66	33, 68
10th Percentile	26	22	34	40
25th Percentile	35	26	39	44
Median	49	34	52	53
75th Percentile	53	41	59	62
90th Percentile	60	50	63	67

NUMERATOR 2: ASSESSMENT/COUNSELING/EDUCATION FOR DEPRESSION

	Commercial HMO	Commercial PPO	Medicaid	Child Health Plus
Number of Plans	12	11	18	18
Number <30	0	0	0	0
Number with Invalid Data	0	1	0	0
Statewide Average	33	19	43	45
Standard Deviation	14	13	13	11
Range of scores	6, 54	7, 49	17, 64	26, 63
10th Percentile	16	8	24	31
25th Percentile	22	15	29	34
Median	33	23	38	43
75th Percentile	41	34	51	51
90th Percentile	51	42	56	60

NUMERATOR 3: ASSESSMENT/COUNSELING/EDUCATION ABOUT THE RISKS OF TOBACCO USAGE

	Commercial HMO	Commercial PPO	Medicaid	Child Health Plus
Number of Plans	12	11	18	18
Number <30	0	0	0	0
Number with Invalid Data	0	1	0	0
Statewide Average	53	36	54	59
Standard Deviation	20	12	13	11
Range of scores	15, 90	24, 66	32, 75	35, 72
10th Percentile	30	25	34	42
25th Percentile	37	30	43	48
Median	53	36	56	58
75th Percentile	59	40	62	70
90th Percentile	70	56	70	72

NUMERATOR 4: ASSESSMENT/COUNSELING/EDUCATION ABOUT ALCOHOL AND OTHER DRUG USE

	Commercial HMO	Commercial PPO	Medicaid	Child Health Plus
Number of Plans	12	11	18	18
Number <30	0	0	0	0
Number with Invalid Data	0	1	0	0
Statewide Average	52	38	52	56
Standard Deviation	20	12	12	10
Range of scores	12, 91	26, 66	31, 67	34, 71
10th Percentile	31	28	35	43
25th Percentile	39	31	41	50
Median	52	36	54	56
75th Percentile	56	42	61	64
90th Percentile	70	58	67	68

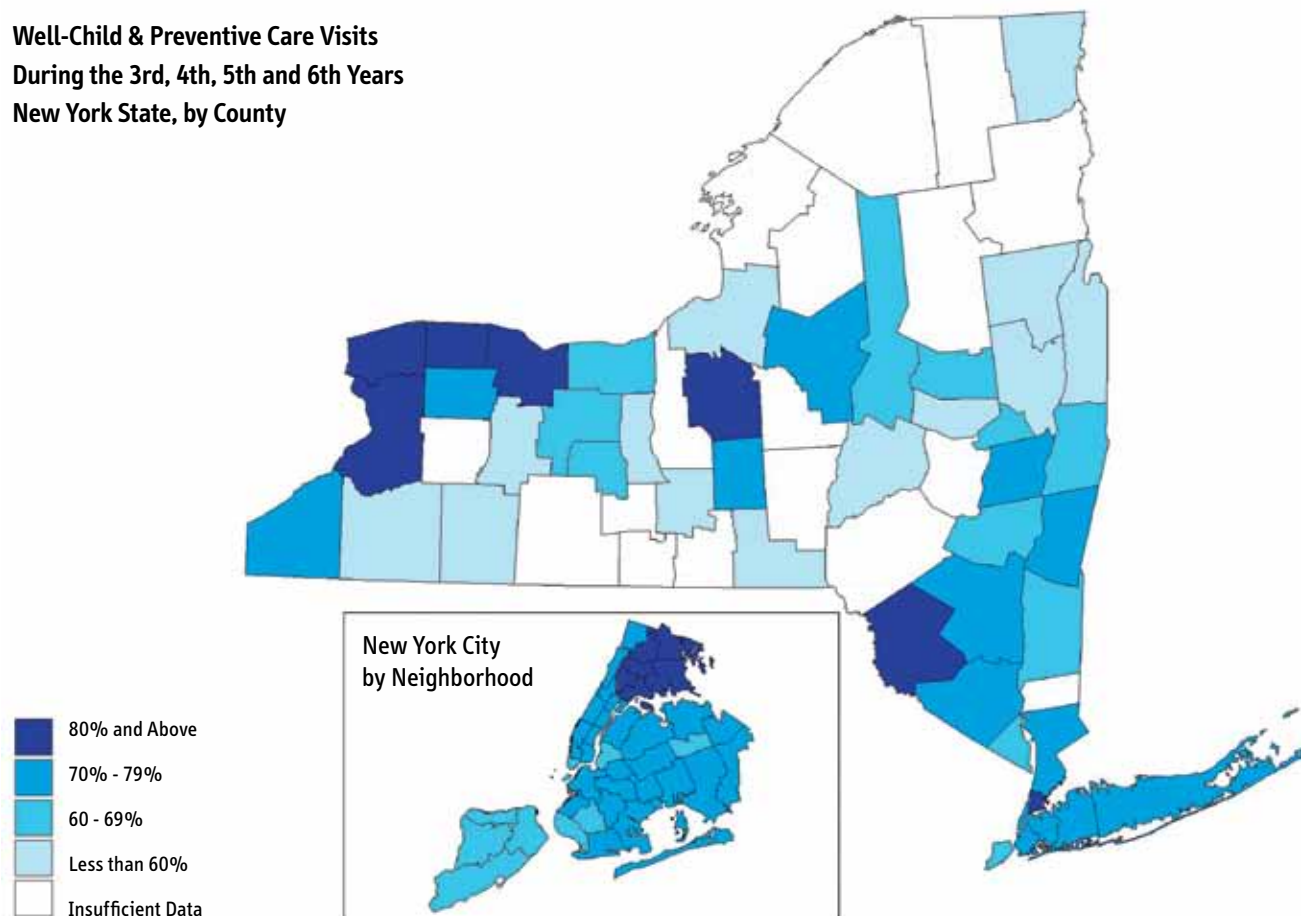
Looking for more information on children's health services?

The following measures are published in the 2010 Managed Care Plan Access and Utilization Report at the link <http://www.health.ny.gov>

- Frequency of Myringotomy Procedures – Children Ages 0-4 and 5-19
- Frequency of Tonsillectomy Procedures – Children Ages 0-9 and 10-19

The following map illustrates the variation in rates of well-child visits for 3 through 6 year olds in Medicaid managed care by county in NYS. The child's county of residence was used in this analysis. For areas in New York City, neighborhoods were used instead of counties, for more localized results.

**Well-Child & Preventive Care Visits
During the 3rd, 4th, 5th and 6th Years
New York State, by County**



COMMERCIAL HMO

Measure	2007	2008	2009
Lead Testing	77	Rotated	78
5 or More Well-Child Visits in the First 15 Months of Life	91	Rotated	88
Well-Child Visits in 3rd, 4th, 5th & 6th Year of Life	82	Rotated	82
Adolescent Well-Care Visits	59	Rotated	59
Appropriate Treatment for URI	85	86	86
Appropriate Testing for Pharyngitis	83	85	87
ADHD Initiation	37	39	41
ADHD Continuation	40	43	44
Weight Assessment for Children and Adolescents	NA	51	55
Weight Counseling for Nutrition for Children and Adolescents	NA	65	66
Weight Counseling for Physical Activity for Children and Adolescents	NA	57	57

MEDICAID

Measure	2007	2008	2009
Lead Testing	86	Rotated	90
5 or More Well-Child Visits in the First 15 Months of Life	79	Rotated	72
Well-Child Visits in 3rd, 4th, 5th & 6th Year of Life	81	Rotated	79
Adolescent Well-Care Visits	58	Rotated	55
Annual Dental Visit (Ages 2-18)	46	49	52
Appropriate Treatment for URI	89	89	90
Appropriate Testing for Pharyngitis	73	81	83
ADHD Initiation	53	54	56
ADHD Continuation	59	61	62
Weight Assessment for Children and Adolescents	NA	43	51
Weight Counseling for Nutrition for Children and Adolescents	NA	57	61
Weight Counseling for Physical Activity for Children and Adolescents	NA	43	48

CHILD HEALTH PLUS

Measure	2007	2008	2009
Lead Testing	76	Rotated	82
5 or More Well-Child Visits in the First 15 Months of Life	88	Rotated	82
Well-Child Visits in 3rd, 4th, 5th & 6th Year of Life	80	Rotated	81
Adolescent Well-Care Visits	63	Rotated	64
Annual Dental Visit (Ages 2-18)	57	60	63
Appropriate Treatment for URI	84	85	86
Appropriate Testing for Pharyngitis	78	84	85
ADHD Initiation	46	48	49
ADHD Continuation	52	54	53
Weight Assessment for Children and Adolescents	NA	47	55
Weight Counseling for Nutrition for Children and Adolescents	NA	61	65
Weight Counseling for Physical Activity for Children and Adolescents	NA	51	56

LEGEND

NA- Not Available



There are a number of conditions which can lead to serious illness if not caught early. Breast and cervical cancers are serious health concerns and early detection of these cancers greatly increases a woman's chance of survival. Mammograms and Pap tests are recommended for women in order to screen for these cancers. Chlamydia is the most common sexually transmitted disease in the United States. To prevent complications of this infection, such as infertility, ectopic pregnancy, and Pelvic Inflammatory Disease (PID), it is recommended that all sexually active women between the ages of 16 and 24 be screened for Chlamydia infection.

It is important for pregnant women to obtain early and regular prenatal care to increase the likelihood of healthy outcomes for themselves and their babies.

All new mothers need post-partum care to ensure their body is healing and to provide appropriate services, including on-going family planning.

Risk-adjusted Low-Birthweight (LBW), Prenatal Care in the First Trimester, and Percent of LBW Births at Level II/III/IV Facilities are calculated by the NYSDOH using birth data submitted by the health plans and the Department's Vital Statistics file. Because of differences in the Vital Statistics birth files of New York City and the rest of the state, statewide comparisons cannot be made; separate results for New York City and Rest of State are presented in this report. For more information about the process used to match the plan birth file to the Vital Statistics files, or about the risk-adjustment methodologies used here, please refer to the Technical Notes in Section Ten.

Measure	Description (Type of Insurance)
Breast Cancer Screening	The percentage of women between the ages of 40 and 69 who had a mammogram during the measurement year or the year prior. (CO, MA, PPO)
Cervical Cancer Screening	The percentage of women between the ages of 24 and 64 who had a Pap test within the measurement year or the two years prior. (CO, MA, PPO)
Chlamydia Screening	The percentage of sexually active young women who had at least one test for Chlamydia during the measurement year. The measure is reported separately for ages 16 through 20 and 21 through 24. (CO, MA, PPO)
Timeliness of Prenatal Care	The percentage of women who gave birth in the last year who had a prenatal care visit in their first trimester or within 42 days of enrollment in their health plan. This measure was not collected in 2009; 2008 data are presented in this report. (CO, MA)
Postpartum Care	The percentage of women who had a postpartum care visit between 21 and 56 days after they gave birth. This measure was not collected in 2009; 2008 data are presented in this report. (CO, MA)
Frequency of Ongoing Prenatal Care	The percentage of women who received 81 percent or more of the expected number of prenatal care visits, adjusted for gestational age and month the member enrolled in the health plan. This measure was not collected in 2009; 2008 data are presented in this report. (MA)
Risk-Adjusted Low Birthweight (LBW)	The percentage of live infants weighing less than 2,500 grams among all deliveries by women continuously enrolled in a plan for 10 or more months. 2008 data are presented in this report. (CO, MA, PPO)
Prenatal Care in the First Trimester	The percentage of women, continuously enrolled for 10 or more months, who delivered a live birth and had their first prenatal care visit in the first trimester of pregnancy. 2008 data are presented in this report. (CO, MA, PPO)
Percent of LBW Births at Level II/III/IV Facilities	The percentage of low birthweight babies (<2,500 grams) born to women enrolled for 10 or more months, who were delivered at Level II, III, or IV facilities. 2008 data are presented in this report. (CO, MA, PPO)

Health Plan	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care	Postpartum Care
Aetna	67▼	76▼	53	62▲	99▲	85
Atlantis Health Plan	62▼	73▼	49	53	71▼	NV
CDPHP	76▲	81▲	48▼	56▼	97▲	87▲
Empire	69▼	78▼	50▼	59	95	81
Excelsus BlueCross BlueShield	75▲	80▲	41▼	48▼	93	89▲
HIP (EmblemHealth)	69▼	76▼	62▲	69▲	90▼	82
Health Net of New York, Inc.	64▼	77▼	48▼	58	95	81
HealthNow New York Inc.	74▲	80▲	55▲	59	89▼	78
Independent Health	75▲	80▲	52	55▼	93	83
MVP	73▲	79	46▼	55▼	95	87▲
Oxford	69▼	80▲	52	60	95	76▼
Univera Healthcare	70	73▼	50	48▼	97▲	91▲
Statewide	71	79	53	59	94	81
National	71	77	41	45	92	83

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

NYC MEMBERSHIP

Health Plan	Perinatal Health		
	Risk-Adjusted Low Birthweight*	Prenatal Care in the First Trimester	% of LBW Births at Level II/III/IV Facilities
Aetna	5.5	85	100
Atlantis Health Plan	5.0	76	—
Empire	6.8	85	100
GHI HMO	—	—	—
HIP (Emblem Health)	6.1	79 ▼	100
Health Net of New York, Inc.	5.8	86 ▲	100
Oxford	6.5	86 ▲	100
New York City Average	6.2	84	100
Statewide Average	5.2	85	91

REST OF STATE MEMBERSHIP

Health Plan	Perinatal Health		
	Risk-Adjusted Low Birthweight*	Prenatal Care in the First Trimester	% of LBW Births at Level II/III/IV Facilities
Aetna	4.3	87	—
CDPHP	4.3	89 ▲	86
Empire	4.6	87 ▲	95
Excellus BlueCross BlueShield	4.3	88 ▲	80
GHI HMO	4.4	83	—
HIP (EmblemHealth)	4.6	82 ▼	100
Health Net of New York, Inc.	4.4	87	—
HealthNow New York Inc.	3.9	80 ▼	76
Independent Health	5.0	81 ▼	75
MVP	5.3	90 ▲	74
Oxford	5.1	88 ▲	94
Preferred Care	4.8	87	57
Univera HealthCare	4.7	85	—
Rest of State Average	4.6	86	84
Statewide Average	5.2	85	91

* A low rate is desirable for this measure

LEGEND

▲ Significantly better than the regional average

▼ Significantly worse than the regional average

— Sample size too small to report

NOTE: Plans without symbols are not significantly different from the regional average.

Health Plan	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)
Affinity Health Plan	69	73	70▲	72▲
Amerigroup New York	69	72	63	71
CDPHP	56▼	75	53▼	57▼
Excellus BlueCross BlueShield	63▼	79▲	66	71
Fidelis Care New York	65▼	72	64	67▼
HIP (EmblemHealth)	67▼	74	65	70
Health Plus	68	74	63▼	68
HealthNow New York Inc.	57▼	75	64	70
Healthfirst PHSP, Inc.	71▲	75	68▲	71▲
Hudson Health Plan	67	69	63	70
Independent Health's MediSource	56▼	70	73▲	73▲
MVP	51▼	75	69▲	75▲
MetroPlus Health Plan	75▲	79▲	69▲	75▲
Neighborhood Health Providers	68	68▼	55▼	69
Total Care	65▼	74	66	61▼
UnitedHealthcare Community Plan	63▼	70	55▼	66▼
Univera Community Health	57▼	76	65	64▼
WellCare of New York	71▲	64▼	61▼	62▼
Statewide	68	73	65	69
National	52	66	54	62

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

Health Plan	Timeliness of Prenatal Care	Postpartum Care	Frequency of Ongoing Prenatal Care
Affinity Health Plan	92▲	74	86▲
Amerigroup New York	85▼	74	78▲
CDPHP	94▲	69	77
Excellus BlueCross BlueShield	86	70	62▼
Fidelis Care New York	92▲	78▲	83▲
HIP (EmblemHealth)	85▼	74	51▼
Health Plus	89	72	83▲
HealthNow New York Inc.	88	64▼	63▼
Healthfirst PHSP, Inc.	86	72	73
Hudson Health Plan	92▲	75	83▲
Independent Health's MediSource	87	64▼	71
MVP	93▲	72	85▲
MetroPlus Health Plan	95▲	74	82▲
Neighborhood Health Providers	89	72	78▲
Total Care	84▼	69	77
UnitedHealthcare Community Plan	80▼	75	43▼
Univera Community Health	90	68▼	68▼
WellCare of New York	75▼	62▼	50▼
Statewide	89	73	73
National	82	63	*

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

NYC MEMBERSHIP

Health Plan	Perinatal Health		
	Risk-Adjusted Low Birthweight*	Prenatal Care in the First Trimester	% of LBW Births at Level II/III/IV Facilities
Affinity Health Plan	7.6	65 ▼	100
AmeriChoice by UnitedHealthcare	8.2	80 ▲	100
Amerigroup New York	8.0	71	100
Fidelis Care New York	6.9	67	100
GHI HMO	6.0	69	—
HIP (Emblem Health)	7.0	72 ▲	100
Health Plus	7.7	74 ▲	100
Healthfirst PHSP, Inc.	7.6	67 ▼	100
MetroPlus	8.5	64 ▼	100
Neighborhood Health Providers	7.5	70	100
WellCare of New York	8.2	67	100
New York City Average	7.7	70	100
Statewide Average	7.5	69	92

* A low rate is desirable for this measure

LEGEND

- ▲ Significantly better than the regional average
- ▼ Significantly worse than the regional average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the regional average.

REST OF STATE MEMBERSHIP

Health Plan	Perinatal Health		
	Risk-Adjusted Low Birthweight*	Prenatal Care in the First Trimester	% of LBW Births at Level II/III/IV Facilities
Affinity Health Plan	7.8	57 ▼	87
Amerigroup New York	—	—	—
CDPHP	6.2	71	79
Excellus BlueCross BlueShield	5.7▲	73 ▲	73
Fidelis Care New York	7.2	67	69
GHI HMO	6.9	60 ▼	—
HIP (EmblemHealth)	11.9▼	74 ▲	100
Health Plus	10.7	59	—
HealthNow New York Inc.	7.7	70	61
Healthfirst PHSP, Inc.	7.2	64	—
Hudson Health Plan	8.0	63 ▼	77
Independent Health's Medisource	8.9	72	89
MVP	6.9	79 ▲	—
Neighborhood Health Providers	10.0	48 ▼	—
Preferred Care	6.9	59 ▼	73
Total Care	6.4	67	97
UnitedHealthcare Community Plan	7.1	74 ▲	—
Univera Community Health	8.6	73 ▲	84
WellCare of New York	4.1	69	—
Rest of State Average	7.2	68	78
Statewide Average	7.5	69	92

* A low rate is desirable for this measure

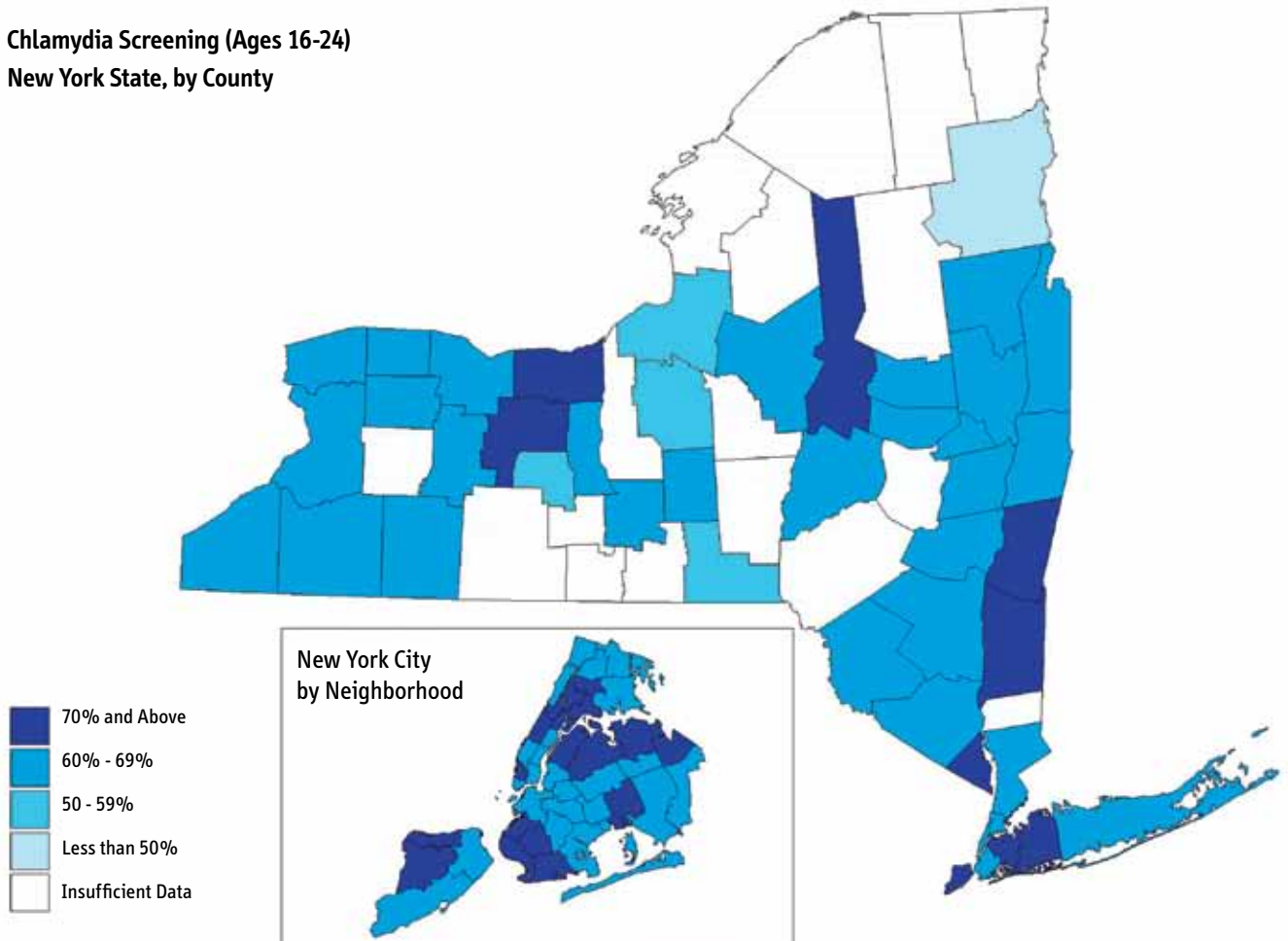
LEGEND

- ▲ Significantly better than the regional average
- ▼ Significantly worse than the regional average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the regional average.

The following map illustrates the variation in rates of Chlamydia screening for sexually active women ages 16 through 24 in Medicaid managed care by county in NYS. The woman's county of residence was used in this analysis. For areas in New York City, neighborhoods were used instead of counties, for more localized results.

**Chlamydia Screening (Ages 16-24)
New York State, by County**



COMMERCIAL HMO

Measure	2007	2008	2009
Breast Cancer Screening	68	71	71
Cervical Cancer Screening	NA	82	79
Chlamydia Screening (Ages 16-20)	45	48	53
Chlamydia Screening (Ages 21-24)	NA	54	59
Low Birthweight	5	5	NA
Prenatal Care in the First Trimester	86	84	NA
Percent of LBW Births at Level II/III/IV Facilities	90	89	NA

MEDICAID

Measure	2007	2008	2009
Breast Cancer Screening	64	67	68
Chlamydia Screening (Ages 16-20)	53	59	65
Chlamydia Screening (Ages 21-24)	NA	63	69
Low Birthweight	7	8	NA
Prenatal Care in the First Trimester	71	69	NA
Percent of LBW Births at Level II/III/IV Facilities	93	92	NA

* A low rate is desirable for this measure

LEGEND

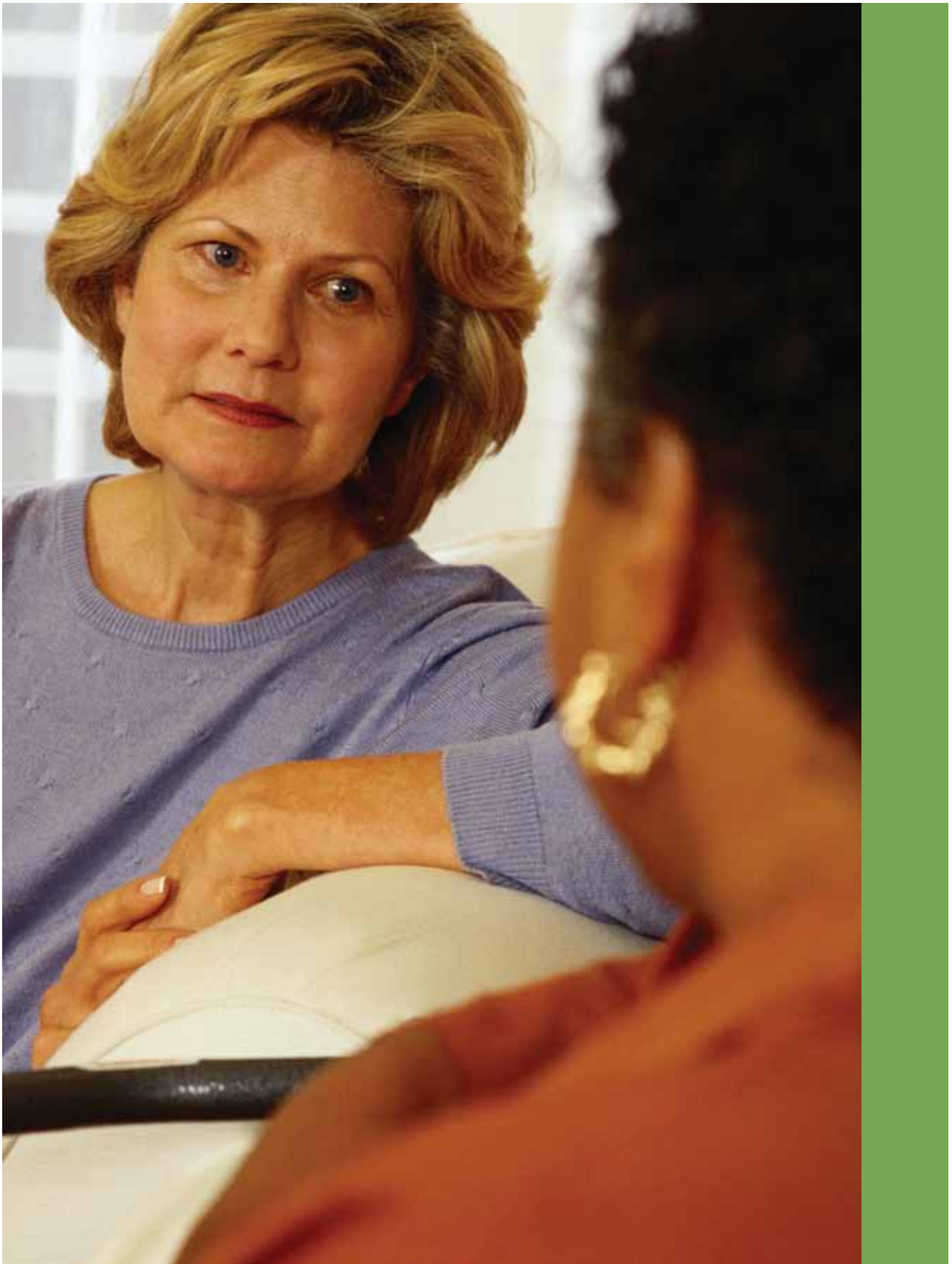
NA – Not available.

Looking for more information on women's health services?

The following measures are published in the 2010 Managed Care Plan Access and Utilization Report at the link:

<http://www.health.ny.gov>

- Frequency of Abdominal Hysterectomy
- Frequency of Vaginal Hysterectomy
- Frequency of Non-Obstetrical Dilatation & Curettage
- Frequency of Lumpectomy
- Frequency of Mastectomy
- Inpatient Discharges and Average Length of Stay (Maternity)



Overview

This section provides information on how well managed care plans provide care to their adult members with acute and chronic illnesses, including appropriate use of healthcare resources and treatments.

Managing and Preventing Acute Illness:

Two measures on overuse, imaging studies and antibiotic use, are presented. Utilization of imaging studies, including x-rays, MRIs and CT-scans, is examined for adults with lower back pain. Overuse of imaging studies can be harmful to the recipient as well as costly. The overuse of antibiotics contributes to the development of antibiotic resistant bacteria in the community. Three components of Medical Assistance with Smoking Cessation: advising smokers to quit, discussing medications, and discussing other strategies for quitting, are calculated from CAHPS survey data. Another measure obtained through the CAHPS survey, Flu Shots for Adults, examines whether eligible members received a vaccination for influenza during the flu season.

Managing Preventive Care: Routine screening for colon cancer is recommended for the early detection of colon cancer. The percentage of adults screened for colon cancer is shown. Obesity is the second leading cause of preventable death in the United States, affecting a large portion of the adult population. Clinical guidelines promote the use of the body mass index (BMI) as a measure for weight assessment. This section includes the percentage of adults who had their BMI assessed in the past two years. Routine dental care for young adults is also shown for Medicaid members.

Managing Cardiovascular Conditions: There are four measures related to cardiovascular conditions. One measure examines whether members who were prescribed a beta-blocker after a heart attack remained on the medication. Cholesterol screening is also important for those with cardiovascular conditions; whether cholesterol levels were checked and controlled is presented here. Members with hypertension whose blood pressure is under control are assessed as well.

Managing Respiratory Conditions: Respiratory illness, such as asthma and chronic obstructive

pulmonary disease (COPD), affect many adults and this section includes information about managing these conditions. The quality of care provided to adults with chronic asthma is represented by how many received the appropriate medications for their condition. An additional measure looks at the percentage of members with asthma who received three or more dispensing events of controller medications as a measure of more stringent asthma control. This report also examines the number of adults with COPD who received a spirometry test to confirm their diagnosis. Pharmacotherapy management of COPD exacerbation looks at whether patients who experience acute exacerbation of their COPD receive the appropriate medications to manage the episode.

Managing Diabetes: Diabetes is a serious disease with long term complications such as heart disease, kidney disease, and blindness. Appropriate management of the disease, including regular screening tests and meeting clinical guidelines for control, may help prevent complications. This report assesses several different components of appropriate diabetes care, including testing for glycosylated hemoglobin and cholesterol levels. Two additional measures of combined screening tests and desired outcomes are shown for Medicaid members. For more information about how these measures are calculated, please see the Technical Notes in Section Ten.

Managing Medications: The measures in this section indicate how often members using medications received appropriate testing to monitor medication related issues. For example, persons with rheumatoid arthritis, disease modifying anti-rheumatic drugs (DMARDs) are often the most effective treatment for preventing joint impairment. Patients using medications on a long-term basis are at increased risk of harm from side-effects and drug toxicity.

Managing HIV/AIDS: For members in Medicaid managed care living with HIV/AIDS, several indicators of quality care are presented for the first time on a plan level. These indicators include how often members utilize services as well as whether specific screening tests have occurred.

MANAGING ACUTE ILLNESS

Measure	Description (Type of Insurance)
Use of Imaging Studies for Low Back Pain	The percentage of members with low back pain who did not have an imaging study (X-ray, MRI, CT scan). (CO, MA, PPO)
Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis	The percentage of adults, ages 18 to 64, with acute bronchitis who did not receive a prescription for antibiotics. (CO, MA, PPO)
Medical Assistance with Smoking Cessation	The percentage of members, 18 years and older, who are current smokers, and who received medical assistance with smoking cessation within the last 12 months (6 months for Medicaid) from a health care provider. This measure is collected as part of the CAHPS survey. The commercial survey had significant changes this year, and, because the measure uses two years of data, results are not available. 2008 data for commercial plans are presented in this report. (CO, MA)
1) Advising Smokers to Quit	The percentage of eligible adults who received advice from a health care provider to quit smoking.
2) Discussing Smoking Cessation Medications	The percentage of eligible adults whose health care provider recommended or discussed smoking cessation medications.
3) Discussing Smoking Cessation Strategies	The percentage of eligible adults whose health care provider discussed or recommended other smoking cessation methods and strategies.

MANAGING PREVENTIVE CARE

Measure	Description (Type of Insurance)
Colon Cancer Screening	The percentage of adults, ages 50 to 80 years, who had appropriate screening for colorectal cancer. (CO, PPO)
Annual Dental Visit	The percentage of adults ages 19 through 21 years, who had at least one dental visit within the last year. When a Medicaid plan does not offer dental care as part of its benefit package, enrollees have access to dental services through fee-for-service. (MA)
Adult BMI Assessment	The percentage of adults, ages 18 to 74 years, who had their body mass index (BMI) measured by their health care provider in the past two years. (CO, MA, PPO)
Flu Shot for Adults	The percentage of members, ages 50 to 64, who have had a flu shot. (CO, MA, PPO)

MANAGING CARDIOVASCULAR CONDITIONS

Measure	Description (Type of Insurance)
Controlling High Blood Pressure	The percentage of members, ages 18 to 85 years, who have hypertension and who have controlled their blood pressure (below 140/90). This measure was not collected in 2009, 2008 data are presented in this report. (CO, MA, PPO)
Cholesterol Management for Patients with Cardiovascular Conditions	The percentage of members, ages 18 to 75 years, with a cardiovascular condition, who had LDL-C screening performed, and whose LDL-C levels were in control (<100 mg/dL). (CO, MA, PPO)
Persistence of Beta-Blocker Treatment	The percentage of members, age 35 years and older, who were hospitalized after a heart attack and received persistent beta-blocker treatment. (CO, PPO)

MANAGING RESPIRATORY CONDITIONS

Measure	Description (Type of Insurance)
Use of Appropriate Medications for People with Asthma	The percentage of members, ages 12 to 50 years, with persistent asthma who received appropriate medication to control their condition. (CO, MA, PPO)
Appropriate Asthma Medications – 3+ Controller Dispensing Events	The percentage of members with persistent asthma, ages 5-50, who had three or more controller medication dispensing events in the last year. (CO, MA, PPO) Data for Child Health Plus (ages 5-11 only) are presented in Section 4.
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	The percentage of members 40 years of age and older with a new diagnosis of COPD who received spirometry testing to confirm the diagnosis. (CO, MA, PPO)
Pharmacotherapy Management of COPD Exacerbation	The percentage of times that members 40 years of age and older who have had an acute inpatient discharge or ED visit for COPD, received the two recommended types of medications to manage the exacerbation. This measure is presented as two separate rates. (CO, MA, PPO)
1) Corticosteroid Rate	Corticosteroid Rate: The percentage of instances when the member was prescribed a systemic corticosteroid within 14 days of the event.
1) Bronchodilator Rate	Bronchodilator Rate: The percentage of instances when the member was prescribed a bronchodilator within 30 days of the event.

MANAGING DIABETES

Measure	Description (Type of Insurance)
Comprehensive Diabetes Care	This measure includes components of care for members with diabetes and the rate at which they received necessary components of diabetes care. Measures presented here are grouped into those that monitor diabetes and those that measure outcomes for diabetes. (CO, MA, PPO)
Monitoring Diabetes	
HbA1c Testing	The percentage of members with diabetes who received a Hemoglobin A1c (HbA1c) test within the past year.
Lipid Profile	The percentage of members with diabetes who had a cholesterol test done over the past year.
Dilated Eye Exam	The percentage of members with diabetes who had a retinal eye screening exam over the last two years.
Nephropathy Monitoring	The percentage of members with diabetes who were screened or monitored for kidney damage.
Received All Tests	The percentage of members with diabetes who had all four screening tests. This measure is calculated for Medicaid members only.
Managing Diabetes Outcomes	
Poor HbA1c Control	The percentage of members with diabetes whose most recent HbA1c level indicated poor control (>9.0 percent). A low rate is desirable for this measure.
Lipids Controlled	The percentage of members with diabetes whose level of bad cholesterol was in control (LDL-C <100 mg/dL).
Blood Pressure Controlled	The percentage of members with diabetes who have controlled their blood pressure (below 140/90 mmHg).
HbA1c and Lipids Controlled	The percentage of members who had a HbA1c level at or below 9.0 percent (not poorly controlled) and whose level of bad cholesterol was in control (LDL-C <100 mg/dL). This measure is calculated for Medicaid members only.

MANAGING MEDICATIONS

Measure	Description (Type of Insurance)
Drug Therapy for Rheumatoid Arthritis	The percentage of members with rheumatoid arthritis who were prescribed disease modifying anti-rheumatic drug therapy during the measurement year. (CO, MA, PPO)
Annual Monitoring for Patients on Persistent Medications	The percentage of members 18 years and older who were taking certain medications for at least six months and who received specific monitoring tests. The following numerators specify categories of medications that are of interest: (CO, MA, PPO)
1) ACE Inhibitors or ARBs	The percentage of members who received at least a 180 day supply of ACE inhibitors and/or ARBs, and who had at least one blood test for potassium and a monitoring test for kidney function in the measurement year.
2) Digoxin	The percentage of members who received at least a 180 day supply of digoxin, and who had at least one blood test for potassium and a monitoring test for kidney function in the measurement year.
3) Diuretics	The percentage of members who received at least a 180 day supply of diuretics, and who had at least one blood test for potassium and a monitoring test for kidney function in the measurement year.
4) Anticonvulsants	The percentage of members who received at least a 180 day supply of an anticonvulsant and who had at least one blood test for therapeutic drug level in the measurement year.
5) Combined Rate	The combined rate is the sum of the four numerators divided by the sum of the four denominators.

MANAGING HIV/AIDS

Measure	Description (Type of Insurance)
HIV/AIDS Comprehensive Care	These measures include quality indicators of recommended treatment and preventive care for people living with HIV/AIDS, who are enrolled in Medicaid Managed Care. These measures are New York State specific and have no national comparisons. (MA)
1) Engaged in Care	The percentage of members with HIV/AIDS, 2 years of age or older, who had two visits for primary care or HIV related care at least 6 months apart within the past year. The intent is to measure the number of members who are receiving ongoing primary care for their HIV and preventive health care needs.
2) Viral Load Monitoring	The percentage of members with HIV/AIDS, 2 years of age or older, who had two viral load tests, performed at least 6 months apart, within the past year.
3) Syphilis Screening Rate	The percentage of members with HIV/AIDS, 19 years of age or older, who were screened for syphilis in the past year.

MANAGING ACUTE ILLNESS

Health Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis	Medical Assistance with Smoking Cessation		
			Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Aetna	81▲	26▲	72	48	—
Atlantis Health Plan	79	42▲	77	41▼	37
CDPHP	75▼	18▼	83	64	62▲
Empire	75▼	24▲	83	61	57
Excellus BlueCross BlueShield	83▲	15▼	83	61	49
HIP (EmblemHealth)	83▲	24▲	85	49	58
Health Net of New York, Inc.	82▲	29▲	—	—	—
HealthNow New York Inc.	81▲	16▼	76	59	48
Independent Health	83▲	14▼	81	57	58
MVP	74▼	19▼	84	62	53
Oxford	77▼	30▲	—	—	—
Univera Healthcare	76	15▼	82	64	45
Statewide	79	22	81	57	51
National	74	24	80	53	50

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING PREVENTIVE CARE

Health Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults
Aetna	65	25▼	43▼
Atlantis Health Plan	37▼	38▼	37▼
CDPHP	73▲	57▲	54
Empire	64	42▼	47
Excellus BlueCross BlueShield	66	40▼	62▲
HIP (EmblemHealth)	65	57▲	40▼
Health Net of New York, Inc.	68	43▼	54
HealthNow New York Inc.	70▲	46	47
Independent Health	67	58▲	53
MVP	65	47	58▲
Oxford	60▼	NV	48
Univera Healthcare	58▼	58▲	50
Statewide	66	48	50
National	61	41	51

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING CARDIOVASCULAR CONDITIONS

Health Plan	Controlling High Blood Pressure	Cholesterol Management After Cardiovascular Event		Persistence of Beta Blocker Use
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)	
Aetna	61	91	52▼	75
Atlantis Health Plan	NV	87	31▼	—
CDPHP	68	89	67▲	77
Empire	67	96▲	71▲	74
Excellus BlueCross BlueShield	67	90	66▲	82
HIP (EmblemHealth)	64	92	51▼	73
Health Net of New York, Inc.	70▲	92	61	81
HealthNow New York Inc.	60	90	57	76
Independent Health	64	91	65▲	85▲
MVP	66	90	61	79
Oxford	52▼	91	54	72
Univera Healthcare	65	85▼	57	—
Statewide	63	91	58	76
National	63	88	59	74

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING RESPIRATORY CONDITIONS

Health Plan	Use of Appropriate Medications for People with Asthma (Ages 12-50)	Use of Appropriate Medications for People with Asthma (Ages 5-50) – 3+ Controllers	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
				Corticosteroids	Bronchodilators
Aetna	91	78▼	57▲	57	71
Atlantis Health Plan	89	83	37	—	—
CDPHP	91	81	37▼	73	79
Empire	91	80	53▲	64	87▲
Excellus BlueCross BlueShield	92	83▲	41▼	59	81
HIP (EmblemHealth)	90	76▼	48	63	77
Health Net of New York, Inc.	94▲	84▲	61▲	—	—
HealthNow New York Inc.	91	81	42▼	71	79
Independent Health	92	83▲	43▼	77	81
MVP	91	83▲	37▼	72	80
Oxford	90	80	58▲	63	76
Univera Healthcare	93	82	40	—	—
Statewide	91	81	47	69	79
National	91	*	39	66	78

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

MONITORING DIABETES

Health Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring
Aetna	86▼	86	52▼	72▼
Atlantis Health Plan	79▼	79▼	37▼	72▼
CDPHP	90	88	62	83
Empire	89	90	62	85
Excellus BlueCross BlueShield	92▲	87	65▲	85▲
HIP (EmblemHealth)	91	89	62	81
Health Net of New York, Inc.	89	89	60	78▼
HealthNow New York Inc.	87▼	87	62	85
Independent Health	90	90	64▲	89▲
MVP	92▲	88	56	86▲
Oxford	88	89	51▼	79
Univera Healthcare	90	86	61	88▲
Statewide	89	88	59	82
National	89	85	57	83

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING DIABETES OUTCOMES

Health Plan	Poor HbA1c Control*	Lipids Controlled (<100 mg/dL)	Blood Pressure Controlled (<140/90 mm Hg)
Aetna	34▼	44	58▼
Atlantis Health Plan	73▼	14▼	31▼
CDPHP	22▲	50	76▲
Empire	23▲	50	69▲
Excelsus BlueCross BlueShield	18▲	51▲	69▲
HIP (EmblemHealth)	28	44	61
Health Net of New York, Inc.	30	50	52▼
HealthNow New York Inc.	29	50	68▲
Independent Health	21▲	51	71▲
MVP	21▲	51▲	67
Oxford	37▼	43	55▼
Univera Healthcare	23▲	51	68▲
Statewide	28	47	64
National	28	47	65

* A low rate is desirable for this measure.

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING MEDICATIONS

Health Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Aetna	78	82▼	80	81▼	63	81▼
Atlantis Health Plan	—	76▼	—	75▼	52	75▼
CDPHP	90▲	83	86	83	63	83
Empire	86	94▲	95▲	93▲	79▲	93▲
Excellus BlueCross BlueShield	92▲	82▼	87	81▼	62	81▼
HIP (EmblemHealth)	78▼	84▲	86	83	68▲	84▲
Health Net of New York, Inc.	80	83	78	82	64	82
HealthNow New York Inc.	83	78▼	75▼	77▼	57▼	77▼
Independent Health	87▲	83	84	83	60	83
MVP	83	81▼	80	81▼	63	81▼
Oxford	77▼	86▲	86	85▲	62	85▲
Univera Healthcare	78	81▼	—	81	65	80▼
Statewide	83	83	83	83	63	83
National	86	81	84	80	62	80

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

— Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING ACUTE ILLNESS

Health Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis	Medical Assistance with Smoking Cessation		
			Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Affinity Health Plan	78▼	22▼	72	50	45
Amerigroup New York	80	19▼	67	28▼	34▼
CDPHP	75▼	24	78	61▲	55▲
Excelsus BlueCross BlueShield	80	20▼	78	56	46
Fidelis Care New York	78▼	21▼	67	40▼	36▼
HIP (EmblemHealth)	82▲	28▲	68	51	47
Health Plus	79	27▲	60▼	46	45
HealthNow New York Inc.	75▼	18▼	79	50	42
Healthfirst PHSP, Inc.	83▲	22▼	76	54	54
Hudson Health Plan	77	19▼	77	48	46
Independent Health's MediSource	80	23	80▲	58	50
MVP	80	15▼	80	61▲	53
MetroPlus Health Plan	83▲	27	60▼	48	44
Neighborhood Health Providers	80	17▼	69	54	45
Total Care	72▼	14▼	76	49	42
UnitedHealthcare Community Plan	80	35▲	66	57	57▲
Univera Community Health	84▲	19▼	75	50	48
WellCare of New York	83▲	34▲	62	30▼	40
Statewide	80	26	74	52	47
National	76	26	74	43	39

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING PREVENTIVE CARE

Health Plan	Adult BMI Assessment	Annual Dental Visit (Ages 19-21)	Flu Shot for Adults
Affinity Health Plan	60	39▼	32
Amerigroup New York	52	38▼	30
CDPHP	55	NA	34
Excellus BlueCross BlueShield	43▼	35	40
Fidelis Care New York	55	49▲	33
HIP (EmblemHealth)	58	36▼	42
Health Plus	70▲	40▼	32
HealthNow New York Inc.	49▼	NA	31
Healthfirst PHSP, Inc.	48▼	42	35
Hudson Health Plan	64▲	43	38
Independent Health's MediSource	54	NA	37
MVP	37▼	44	36
MetroPlus Health Plan	77▲	41	46▲
Neighborhood Health Providers	57	32▼	34
Total Care	43▼	48	28
UnitedHealthcare Community Plan	35▼	46▲	35
Univera Community Health	48▼	45	31
WellCare of New York	48▼	28▼	34
Statewide	55	42	35
National	35	*	*

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NA Not applicable. Plan does not provide dental coverage;
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING CARDIOVASCULAR CONDITIONS

Health Plan	Controlling High Blood Pressure	Cholesterol Management After Cardiovascular Event	
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)
Affinity Health Plan	69	90	52
Amerigroup New York	65	95▲	54
CDPHP	67	86▼	58▲
Excelsus BlueCross BlueShield	61	83▼	58▲
Fidelis Care New York	66	88	54
HIP (EmblemHealth)	65	93	54
Health Plus	68	93	56
HealthNow New York Inc.	64	83▼	53
Healthfirst PHSP, Inc.	58▼	92	52
Hudson Health Plan	66	88	55
Independent Health's MediSource	60▼	82▼	48
MVP	59▼	82▼	48
MetroPlus Health Plan	74▲	92	56▲
Neighborhood Health Providers	58▼	89	53
Total Care	65	80▼	43
UnitedHealthcare Community Plan	66	93	39▼
Univera Community Health	60	85▼	52
WellCare of New York	59▼	92	47
Statewide	65	91	51
National	56	81	41

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGEMENT OF RESPIRATORY CONDITIONS

Health Plan	Appropriate Use of Asthma Medications (Ages 12-50)	Use of Appropriate Medications for People with Asthma (Ages 5-50) 3+ Controllers	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
				Corticosteroids	Bronchodilators
Affinity Health Plan	88	76	46	61	82
Amerigroup New York	87	73	36▼	55	82
CDPHP	89	76	29▼	62	82
Excellus BlueCross BlueShield	85▼	74	32▼	63	78
Fidelis Care New York	89	76	40▼	59	81
HIP (EmblemHealth)	89	71▼	50▲	63	87
Health Plus	88	74	48	60	78
HealthNow New York Inc.	91	79▲	38▼	71	85
Healthfirst PHSP, Inc.	87▼	75	42	63	84
Hudson Health Plan	87	79▲	46	63	83
Independent Health's MediSource	91▲	78	38	71	87
MVP	88	73	23▼	63	81
MetroPlus Health Plan	88	75	46	61	92▲
Neighborhood Health Providers	89	71▼	47	63	87
Total Care	92▲	81▲	39	57	84
UnitedHealthcare Community Plan	90▲	77▲	52▲	63	86
Univera Community Health	89	77	43	63	73
WellCare of New York	90	75	52▲	42▼	81
Statewide	88	75	45	61	84
National	86	*	29	62	81

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

MONITORING DIABETES

Health Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Affinity Health Plan	89	86	64	82	49
Amerigroup New York	90	90▲	63	86	53
CDPHP	87	81▼	60	81	45▼
Excelsus BlueCross BlueShield	90	81▼	69▲	84	52
Fidelis Care New York	88	84▼	62	82	48
HIP (EmblemHealth)	92▲	90▲	67▲	85	57▲
Health Plus	90	88	62	86▲	53
HealthNow New York Inc.	81▼	78▼	58▼	83	43▼
Healthfirst PHSP, Inc.	86▼	87	59	80	45▼
Hudson Health Plan	89	83▼	58▼	82	45▼
Independent Health's MediSource	84▼	79▼	58▼	86	45▼
MVP	87	81▼	46▼	82	35▼
MetroPlus Health Plan	93▲	91▲	62	87▲	55▲
Neighborhood Health Providers	87	87	68▲	84	52
Total Care	87	79▼	64	77▼	44▼
UnitedHealthcare Community Plan	87	89	68▲	78▼	49
Univera Community Health	86	80▼	64	86	48
WellCare of New York	87	89	58▼	84	46
Statewide	89	87	63	83	50
National	81	74	53	77	*

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING DIABETES OUTCOMES

Health Plan	Poor HbA1c Control*	Lipids Controlled (<100mg/dL)	Blood Pressure Controlled (<140/90 mm Hg)	HbA1c and Lipids Controlled
Affinity Health Plan	25▲	46	73▲	38
Amerigroup New York	34	43	69▲	32
CDPHP	32	43	75▲	36
Excellus BlueCross BlueShield	29▲	44	68	36
Fidelis Care New York	32	40	72▲	33
HIP (EmblemHealth)	30▲	48▲	67	42▲
Health Plus	28▲	41	69▲	33
HealthNow New York Inc.	40▼	37▼	63	31▼
Healthfirst PHSP, Inc.	47▼	47	50▼	34
Hudson Health Plan	29▲	44	73▲	36
Independent Health's MediSource	38▼	41	66	31▼
MVP	36	47	62	36
MetroPlus Health Plan	28▲	49▲	63	44▲
Neighborhood Health Providers	34	40	68	30▼
Total Care	37	36▼	71▲	26▼
UnitedHealthcare Community Plan	40▼	36▼	64	28▼
Univera Community Health	35	45	65	35
WellCare of New York	32	41	58▼	34
Statewide	33	44	65	36
National	45	34	60	*

* A low rate is desirable for this measure.

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING MEDICATIONS

Health Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Affinity Health Plan	73	89	94	88	61▼	88
Amerigroup New York	83▲	90	86	89	66	89▲
CDPHP	79	88	90	86	68	86▼
Excelsus BlueCross BlueShield	80	90	93	88	71	88
Fidelis Care New York	74	90	93	88	70▲	88
HIP (EmblemHealth)	81▲	89▼	93	87▼	63▼	87▼
Health Plus	75	89	85	88	63	88
HealthNow New York Inc.	66	81▼	88	82▼	61	80▼
Healthfirst PHSP, Inc.	73	90	93	89▲	67	89▲
Hudson Health Plan	72	92▲	96▲	91▲	73▲	90▲
Independent Health's MediSource	75	88	89	89	70	87
MVP	88▲	89	—	90	73▲	87
MetroPlus Health Plan	79▲	93▲	92	92▲	67	91▲
Neighborhood Health Providers	73	85▼	91	83▼	70	84▼
Total Care	78	89	87	88	69	87▼
UnitedHealthcare Community Plan	64▼	91▲	92	90▲	66	90▲
Univera Community Health	74	86▼	—	85▼	59	84▼
WellCare of New York	64▼	84▼	94	83▼	52▼	83▼
Statewide	74	90	91	88	66	88
National	71	86	89	85	69	83

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING HIV/AIDS

Health Plan	Engaged in Care	Viral Load Monitoring	Syphilis Screening Rate
Affinity Health Plan	83▲	60▲	62▲
Amerigroup New York	30▼	28▼	53
CDPHP	84▲	67▲	58
Excellus BlueCross BlueShield	58	68▲	65
Fidelis Care New York	64	35▼	53
HIP (EmblemHealth)	64	46	42▼
Health Plus	50▼	44	59
HealthNow New York Inc.	—	—	—
Healthfirst PHSP, Inc.	79▲	40▼	56
Hudson Health Plan	87▲	71▲	60
Independent Health's MediSource	—	—	—
MVP	—	—	—
MetroPlus Health Plan	64	49	58
Neighborhood Health Providers	73	39	53
Total Care	—	—	—
UnitedHealthcare Community Plan	48▼	34▼	51
Univera Community Health	87▲	65▲	60
WellCare of New York	68	29▼	52
Statewide	67	47	54

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

Comprehensive Diabetes Care New Measures: Hemoglobin A1c Control

Clinical guidelines of care for persons living with diabetes establish goals of control for glycosolated hemoglobin levels (HbA1c). An HbA1c level in the target range is one of the most effective ways to prevent complications associated with diabetes. Recent studies have indicated that not all people can be safely treated to achieve the target goal. Therefore, two measures of HbA1c control have been added to the Comprehensive Diabetes Care suite. HbA1c control below 8.0% is appropriate for all

persons with diabetes. For persons with diabetes who do not have higher risk conditions (cardiac disease, blindness, dementia, advanced age), HbA1c control below 7.0% is appropriate. The results for the two measures do not use the same denominator population and the results should be considered separately from each other. HbA1c control below 7.0% excludes individuals with these high risk conditions.

NUMERATOR 1: HBA1C CONTROL <8.0%

	Commercial HMO	Commercial PPO	Medicaid
Number of Plans	12	11	18
Number <30	0	0	0
Number with Invalid Data	0	2	0
Statewide Average	62	52	55
Standard Deviation	14	6	4
Range of scores	22, 71	46, 65	45, 61
10th Percentile	54	46	49
25th Percentile	57	50	52
Median	65	56	55
75th Percentile	69	59	59
90th Percentile	70	65	60

NUMERATOR 2: HBA1C CONTROL <7.0%

	Commercial HMO	Commercial PPO	Medicaid
Number of Plans	12	11	18
Number <30	0	0	0
Number with Invalid Data	0	2	0
Statewide Average	43	35	37
Standard Deviation	9	5	3
Range of scores	17, 51	33, 47	32, 44
10th Percentile	36	33	32
25th Percentile	37	33	37
Median	46	35	38
75th Percentile	48	42	40
90th Percentile	50	47	44

COMMERCIAL HMO

Measure	2007	2008	2009
Use of Imaging Studies for Low Back Pain	78	78	79
Avoidance of Antibiotics for Adults with Acute Bronchitis	24	23	22
Colon Cancer Screening	61	Rotated	66
Adult BMI Assessment (ABA)	NA	40	48
Flu Shot for Adults	49	50	50
Cholesterol Management-Screening	91	Rotated	91
Cholesterol Management-Level <100 mg/dL	60	Rotated	58
Persistence of Beta Blocker Use	77	78	76
Drug Therapy for Rheumatoid Arthritis	81	82	83
Annual Monitoring for Patients on Persistent Medications			
ACE inhibitors and/or ARBs	81	82	83
Digoxin	83	82	83
Diuretics	80	82	83
Anticonvulsants	61	61	63
Combined	80	82	83
Use of Spirometry Testing for COPD	46	46	47
Pharmacotherapy Management of COPD Exacerbation			
Corticosteroid	44	71	69
Bronchodilator	65	78	79
Comprehensive Diabetes Care			
HbA1c Testing	88	Rotated	89
Cholesterol Screening	87	Rotated	88
Eye Exam	60	Rotated	59
Nephropathy	81	Rotated	82
Poor Control	28	Rotated	28
Cholesterol <100 mg/dL	45	Rotated	47
Diabetes Care- Blood pressure controlled <140/90	65	Rotated	64

LEGEND

NA – Not available.

MEDICAID

Measure	2007	2008	2009
Use of Imaging Studies for Low Back Pain	81	82	80
Avoidance of Antibiotics for Adults with Acute Bronchitis	27	25	26
Adult BMI Assessment (ABA)	NA	45	55
Annual Dental Visit(Ages 19-21)	37	38	42
Flu Shot for Adults	43	Rotated	35
Cholesterol Management-Screening	89	Rotated	91
Cholesterol Management-Level <100 mg/dL	47	Rotated	51
Drug Therapy for Rheumatoid Arthritis	74	73	74
Annual Monitoring for Patients on Persistent Medications	85	88	90
ACE inhibitors and/or ARBs			
Digoxin	91	91	91
Diuretics	84	87	88
Anticonvulsants	65	65	66
Combined	84	87	88
Use of Spirometry Testing for COPD	40	42	45
Pharmacotherapy Management of COPD Exacerbation			
Corticosteroid	50	65	61
Bronchodilator	76	84	84
Comprehensive Diabetes Care			
HbA1c Testing	87	Rotated	89
Cholesterol Screening	85	Rotated	87
Eye Exam	62	Rotated	63
Nephropathy	82	Rotated	83
Received All Tests	49	Rotated	50
Poor Control	34	Rotated	33
Cholesterol <100 mg/dL	41	Rotated	44
Blood pressure controlled <140/90	61	Rotated	65
HbA1C and Lipids Controlled	33	Rotated	36
HIV/AIDS Comprehensive Care			
Engaged in Care	NA	63	67
Viral Load Monitoring	NA	47	47

Looking for more information on adult health services?

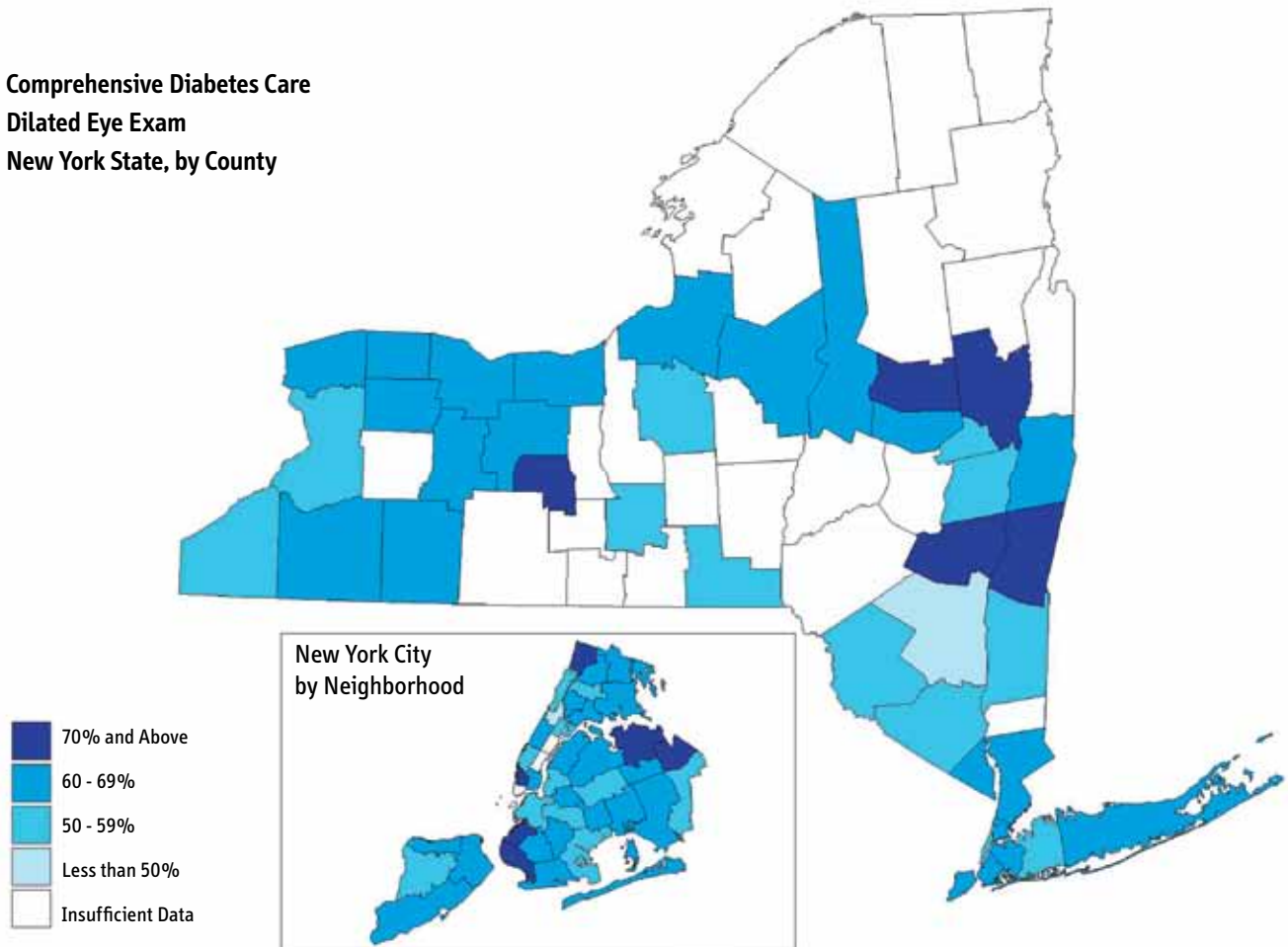
The following measures are published in the 2010 Managed Care Plan Access and Utilization Report at the link:

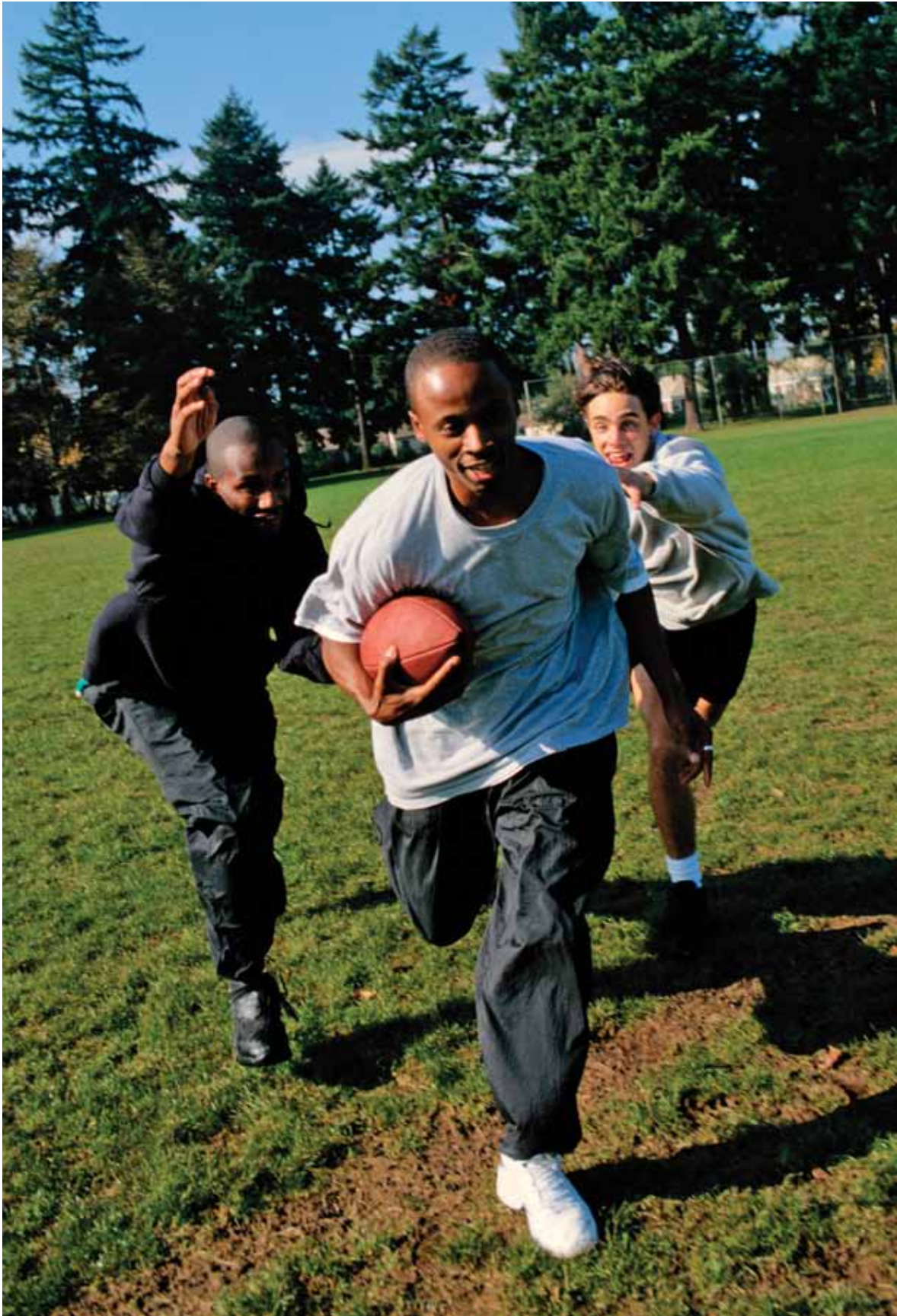
<http://www.health.ny.gov>

- Frequency of Angioplasty
- Frequency of Cardiac Catheterization
- Frequency of Coronary Artery Bypass Grafts
- Antibiotic Utilization, Including Antibiotics of Concern
- Frequency of Laparoscopic Cholecystectomy
- Frequency of Prostatectomy
- Frequency of Back Surgery

The following map illustrates the variation in rates of dilated eye exams for persons with diabetes, ages 18 and older in Medicaid managed care by county in NYS. The patient's county of residence was used in this analysis. For areas in New York City, neighborhoods were used instead of counties, for more localized results.

**Comprehensive Diabetes Care
Dilated Eye Exam
New York State, by County**





Antidepressant Medication Management addresses how well a health plan performs in treating people with moderate to severe depression who are prescribed antidepressant medication. Once diagnosed, individuals treated with medications should be managed on both a short-term (acute phase) and long-term (continuation phase) basis.

By continuing treatment, patients with depressive disorders may prevent a relapse in symptoms and/or prevent future recurrences of depression.

Follow-up after hospitalization for mental illness addresses whether enrollees who were hospitalized for treatment of certain mental health disorders received recommended follow-up visits within recommended timeframes.

Measure	Description (Type of Insurance)
Antidepressant Medication Management	The percentage of members, ages 18 and older who were diagnosed with depression and treated with an antidepressant medication. This measure has two components of care. (CO, MA, PPO)
1) Effective Acute Phase Treatment	The percentage who remained on medication for the entire 12-week acute treatment phase.
2) Effective Continuation Phase Treatment	The percentage who remained on medication for at least six months.
Follow-up After Hospitalization for Mental Illness	The percentage of members ages 6 years and older who were hospitalized for treatment for selected mental health disorders (such as depression or bipolar disorder) and were seen on an ambulatory basis or who were in intermediate treatment with a mental health provider after discharge. This measure has two timeframe components. (CO, MA, PPO)
1) Within 7 Days	Those members who had a follow-up visit within seven days of discharge.
2) Within 30 Days	Those members who had a follow-up visit within 30 days of discharge.

Health Plan	Antidepressant Medication Management		Follow-up After Hospitalization for Mental Illness	
	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Aetna	54▼	41▼	62	79
Atlantis Health Plan	68	54	24▼	39▼
CDPHP	64	48	73▲	88▲
Empire	58	43	68	81
Excellus BlueCross BlueShield	75▲	60▲	82▲	83
HIP (EmblemHealth)	58▼	44	65	81
Health Net of New York, Inc.	61	48	65	80
HealthNow New York Inc.	58▼	42▼	73▲	85▲
Independent Health	59▼	46	64	82
MVP	65▲	48	62▼	76▼
Oxford	63	47	60▼	74▼
Univera Healthcare	68	52	—	—
Statewide	63	47	66	80
National	63	46	59	77

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

Health Plan	Antidepressant Medication Management		Follow-up After Hospitalization for Mental Illness	
	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Affinity Health Plan	52	37	66	80
Amerigroup New York	41▼	29	70	82
CDPHP	56▲	32	64	75▼
Excelsus BlueCross BlueShield	52	34	88▲	89▲
Fidelis Care New York	49	33	71▲	83▲
HIP (EmblemHealth)	81▲	68▲	63▼	77▼
Health Plus	46▼	29▼	71	84▲
HealthNow New York Inc.	51	35	69	83
Healthfirst PHSP, Inc.	45▼	29▼	60▼	75▼
Hudson Health Plan	45	25▼	72	88▲
Independent Health's MediSource	49	34	52▼	69▼
MVP	48	36	62	79
MetroPlus Health Plan	46▼	30▼	66	80
Neighborhood Health Providers	39▼	22▼	69	83
Total Care	47	29	71	80
UnitedHealthcare Community Plan	50	33	68	80
Univera Community Health	54	36	90▲	92▲
WellCare of New York	43▼	27▼	52▼	66▼
Statewide	51	35	68	80
National	50	33	43	60

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

COMMERCIAL HMO

Measure	2007	2008	2009
Antidepressant Medication Management			
Acute Phase	62	63	63
Continuation Phase	46	47	47
Follow-Up After Hospitalization for Mental Illness			
Within 7 Days	67	63	66
Within 30 Days	81	79	80

MEDICAID

Measure	2007	2008	2009
Antidepressant Medication Management			
Acute Phase	46	49	51
Continuation Phase	29	32	35
Follow-Up After Hospitalization for Mental Illness			
Within 7 Days	60	63	68
Within 30 Days	77	78	80

Looking for more information on behavioral health services?

The following measures are published in the 2010 Managed Care Plan Access and Utilization Report at the link:
<http://www.health.ny.gov>

- Identification of Alcohol & Other Drug Dependency Treatment Services
- Initiation & Engagement of Alcohol and Other Drug Dependency Treatment Services
- Mental Health Utilization – Inpatient, Outpatient, Intensive Outpatient and Partial Hospitalization



This report also presents several indicators of members' satisfaction with the care they receive. These measures are from the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey, which assesses three areas of health care experience: getting care, healthcare providers, and the health plan.

Commercial data are from the CAHPS 4.0H survey conducted in 2009 for adult commercial members who were enrolled in their health plan for at least 12 months. These data are collected annually and submitted to the Department by the health plans.

The NYSDOH sponsors a biennial CAHPS survey for Medicaid adults enrolled for at least 6 months. Medicaid enrollees were surveyed by the Department in 2009; data from this survey are presented in this report.

The satisfaction rates presented in this report reflect only members residing in New York State. These rates may differ from other publications of CAHPS® data.



Measure	Description (Type of Insurance)
Getting Care Needed	<p>The percentage of members responding “usually” or “always” when asked a set of questions to identify if, in the last 12 months (6 months for Medicaid), they received care they needed. The following questions are contained in this composite: (CO, MA, PPO)</p> <ol style="list-style-type: none"> 1) How often was it easy to get appointments with specialists? 2) How often was it easy to get the care, tests, or treatment you thought you needed through your health plan?
Getting Care Quickly	<p>The percentage of members responding “usually” or “always” when asked a set of questions to identify if, in the last 12 months (6 months for Medicaid), they received health plan services quickly. The following questions are contained in this composite: (CO, MA, PPO)</p> <ol style="list-style-type: none"> 1) When you needed care right away for an illness, injury, or condition, how often did you get care as soon as you thought you needed? 2) Not counting the times you needed health care right away, how often did you get an appointment for health care as soon as you thought you needed?
Claims Processing	<p>The percentage of members responding “usually” or “always” when asked a set of questions to identify if, in the last 12 months, they submitted claims to their health plan. The following questions are contained in this composite: (CO, PPO)</p> <ol style="list-style-type: none"> 1) How often did your health plan handle your claims quickly? 2) How often did your health plan handle your claims correctly?
Plan Information on Costs	<p>The percentage of members responding “usually” or “always” when asked a set of questions to identify if, in the last 12 months, they looked for information about health care costs. The following questions are contained in this composite: (CO, PPO)</p> <ol style="list-style-type: none"> 1) How often were you able to find out from your health plan how much you would have to pay for a health care service or treatment? 2) How often were you able to find out from your health plan how much you would have to pay for specific prescription medicines?

Measure	Description (Type of Insurance)
Customer Service	<p>The percentage of members responding “usually” or “always” when asked a set of questions to identify if, in the last 12 months (6 months for Medicaid), they used their health plan’s customer services. The following questions are contained in this composite: (CO, MA, PPO)</p> <ol style="list-style-type: none"> 1) How often did your health plan’s customer service give you the information or help you needed? 2) How often did your health plan’s customer service staff treat you with courtesy and respect?
Rating of Health Plan	<p>The percentage of members responding 8, 9, or 10 on a scale of 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible. (CO, MA, PPO)</p>
Shared Decision Making	<p>The percentage of members responding “definitely yes” or “somewhat yes” when asked a set of questions to identify if, in the last 12 months, they made healthcare decisions with their doctor. The following questions are contained in this composite: (PPO)</p> <ol style="list-style-type: none"> 1) Did a doctor or other health provider talk with you about the pros and cons of each choice for your treatment or healthcare? 2) When there was more than one choice for your treatment of healthcare, did doctor or other health provider ask which choice was best for you?
Care Coordination	<p>The percentage who responded “usually” or “always” when asked how often their personal doctor seemed informed and up-to-date about care they received from other doctors or health providers. (CO, MA, PPO)</p>
Wellness Discussion	<p>The percentage who responded “usually” or “always” when asked how often their doctor or other health provider discussed things to do to prevent illness. (CO, MA, PPO)</p>
Rating of Overall Health Care	<p>The percentage of members responding 8, 9, or 10 on a scale of 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible. (CO, MA, PPO)</p>
Getting Needed Counseling or Treatment	<p>The percentage who responded “usually” or “always” when asked how often, in the past 6 months, it was easy to get counseling or treatment for a personal or family problem through their health plan. (MA)</p>
Rating of Counseling or Treatment	<p>The percentage of members responding 8, 9, or 10 on a scale of 0 to 10, where 0 is the worst counseling or treatment possible and 10 is the best counseling or treatment possible. (MA)</p>

Health Plan	Satisfaction with Access to Care		Satisfaction with Health Plan			
	Getting Care Needed	Getting Care Quickly	Claims Processing	Plan Information on Costs	Customer Service	Rating of Health Plan
Aetna	83	86	91▲	61	83	63
Atlantis Health Plan	66▼	79▼	59▼	46▼	69▼	36▼
CDPHP	90▲	89	92▲	79▲	91▲	74▲
Empire	85	85	85	59▼	87	54▼
Excellus BlueCross BlueShield	90▲	91▲	92▲	72	86	58
HIP (EmblemHealth)	81	82▼	87	60	76▼	59
Health Net of New York, Inc.	83	82	83	66	80	65▲
HealthNow New York Inc.	88▲	91▲	89	70	86	63
Independent Health	87▲	91▲	93▲	78▲	94▲	70▲
MVP	89▲	89	88	74▲	87	63
Oxford	83	85	80	64	85	52▼
Univera HealthCare	86	87	88	68	83	55
Statewide	84	87	85	66	84	59
National	85	86	88	*	84	63

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

Health Plan	Satisfaction with the Experience of Care			Rating of Overall Health Care
	Shared Decision Making	Care Coordination	Wellness Discussion	
Aetna	58	78	55	70
Atlantis Health Plan	52▼	63▼	49▼	49▼
CDPHP	64	81	62	82▲
Empire	56	80	53▼	75
Excellus BlueCross BlueShield	63	86▲	59	79▲
HIP (EmblemHealth)	59	76	62	71
Health Net of New York, Inc.	63	79	57	78
HealthNow New York Inc.	53▼	79	61	76
Independent Health	63	82	67▲	78▲
MVP	66▲	79	61	78▲
Oxford	56	79	62	72
Univera HealthCare	62	85▲	63	74
Statewide	60	79	60	74
National	*	*	*	75

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

Health Plan	Satisfaction with Access to Care		Satisfaction with Health Plan	
	Getting Care Needed	Getting Care Quickly	Customer Service	Rating of Health Plan
Affinity Health Plan	71	75	77	69
Amerigroup New York	69	66▼	77	64▼
CDPHP	80▲	85▲	80	75▲
Excellus BlueCross BlueShield	77	84▲	82	73▲
Fidelis Care New York	74	79	80	68
HIP (EmblemHealth)	71	72▼	76	62▼
Health Plus	68▼	72▼	78	69
HealthNow New York Inc.	78▲	84▲	83	67
Healthfirst PHSP, Inc.	72	73	83	71
Hudson Health Plan	82▲	81▲	86▲	78▲
Independent Health's MediSource	81▲	85▲	88▲	80▲
MVP	79▲	85▲	83	69
MetroPlus Health Plan	70	65▼	80	73▲
Neighborhood Health Providers	69▼	70▼	77	65▼
Total Care	76	79	70▼	65▼
UnitedHealthcare Community Plan	70	76	75	68
Univera Community Health	78▲	81▲	88▲	73
WellCare of New York	67▼	71▼	71▼	64▼
Statewide	74	77	80	69
National	75	80	80	71

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

Health Plan	Satisfaction with the Experience of Care					
	Shared Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Health Care	Getting Needed Counseling or Treatment	Rating of Counseling or Treatment
Affinity Health Plan	54	68	50	65	62	50
Amerigroup New York	55	73	47	63	45▼	52
CDPHP	65▲	82▲	59▲	70▲	70	65
Excellus BlueCross BlueShield	58	76	61▲	69	80▲	58
Fidelis Care New York	57	75	48	66	68	58
HIP (EmblemHealth)	59	75	51	59▼	69	54
Health Plus	54	72	45▼	61	54▼	56
HealthNow New York Inc.	58	78	55	67	82▲	68▲
Healthfirst PHSP, Inc.	55	69	54	64	61	44▼
Hudson Health Plan	59	74	53	70▲	76▲	63
Independent Health's MediSource	58	77	57▲	73▲	80▲	60
MVP	66▲	77	57▲	69	73	57
MetroPlus Health Plan	50▼	70	52	57▼	55▼	56
Neighborhood Health Providers	54	75	50	63	57	59
Total Care	58	71	50	65	74▲	54
UnitedHealthcare Community Plan	59	69	43▼	67	64	58
Univera Community Health	57	80▲	52	67	72	61
WellCare of New York	43▼	68	42▼	58▼	47▼	51
Statewide	57	74	52	65	66	57
National	*	*	*	67	*	*

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

COMMERCIAL HMO

Measure	2007	2008	2009
Getting Care Needed	86	85	84
Received Services Quickly	88	88	87
Claims Processing	87	84	85
Plan Information on Cost	66	66	66
Customer Service	84	85	84
Rating of Health Plan	62	63	59
Shared Decision Making	NA	60	60
Care Coordination	80	80	79
Wellness Discussion	NA	59	60
Overall Rating of Healthcare	75	75	74

MEDICAID

Measure	2007	2008	2009
Getting Care Needed	75	Rotated	74
Received Services Quickly	78	Rotated	77
Customer Service	80	Rotated	80
Rating of Health Plan	66	Rotated	69
Care Coordination	74	Rotated	74
Wellness Discussion	53	Rotated	52
Getting Needed Counseling	69	Rotated	66
Rating of Counseling	59	Rotated	57
Overall Rating of Healthcare	65	Rotated	65

LEGEND

NA- Not Available

Looking for more information on access to health services?

The following measures are published in the 2010 Managed Care Plan Access and Utilization Report at the link:

<http://www.health.ny.gov>

- Children's Access to Preventive Health Services
- Adult's Access to Preventive and Ambulatory Health Services

- Outpatient Use of Services: Outpatient Visits, Emergency Room Visits, Ambulatory Surgery Encounters
- Inpatient Use of Services: Medicine, Surgery, and Maternity: Total Days, Discharges, and Average Length of Stay



Like an HMO, a PPO/EPO is a form of health insurance where a health plan contracts with a network of providers. However, unlike an HMO, members are able to access network services without the use of a primary care provider or referrals. While in the past the HMO has been the dominant model for health coverage in the United States and New York, in recent years the popularity of Preferred Provider Organization (PPO) or Exclusive Provider Organization (EPO) model has grown. National estimates have suggested that over 60% of persons with health coverage are enrolled in a PPO/EPO. Both PPO and EPO results are shown together in this section.

Since quality reporting in New York has focused only on HMO plans, there is little data available for people enrolled in a PPO plan. The NYSDOH required PPO plans enrolling at least 30,000 New York State residents to submit QARR data for the first time in 2009. This 2010 report marks the first public reporting of results by individual plan for PPO.

Like QARR data for HMOs, these data reporting requirements are based on standardized HEDIS and CAHPS measures, and provide information on plan performance with respect to primary and preventive

health visits, access to health care, behavioral health, and medical management of select chronic diseases. Information about consumer satisfaction is also contained in this report. In 2010, eleven plans submitted PPO/EPO data about the care provided to their members in 2009.

Each table in this section contains measures of quality of care performance or consumer satisfaction measures with results for individual plans and the statewide average. In most instances, the measure requirements for HMOs and PPOs follow the same HEDIS guidelines; please refer to the appropriate section in this report for a more detailed description of the measures. Please note that for some measures, plans have the option to look for documentation of care in the medical record (hybrid method) in addition to the administrative claims paid by the plan. However, because the benefit package of HMO and PPO plans are not always the same, the rates for some measures calculated using the hybrid option do not resemble those of the HMO plans. Data for these measures have been suppressed as they are not comparable. Where available, the national benchmarks shown are obtained from the NCQA's State of Healthcare Quality Report, available online at <http://www.ncqa.org>.



PROVIDER NETWORK

Health Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Aetna Life Insurance Company – New York	79▲	82▲	82▲	85▲	95	80	77
CDPHP Universal Benefits, Inc.	85▲	80	84▲	77▼	95	86▲	87▲
Connecticut General Life Insurance Company – NY	72▼	74▼	68▼	76▼	93	77	81
Empire HealthChoice HMO, Inc.	68▼	71▼	74▼	76▼	92	82	85
Excellus BlueCross BlueShield	87▲	84▲	83▲	93▲	93	82	84
GHI (EmblemHealth)	78	81▲	65▼	80▼	94	80	77
HIP (EmblemHealth)	80▲	79▼	76▼	81	91▼	80	72▼
Health Net of New York, Inc.	NV	NV	NV	NV	93	80	81
MVP Preferred PPO	84▲	80	80▲	86▲	93	80	87▲
Oxford Health Insurance Company, Inc. – New York	76	86▲	89▲	86▲	96▲	85	80
UnitedHealthcare Insurance Company of New York, Inc.	76▼	82▲	86▲	85▲	97▲	82	84
Statewide	77	80	78	82	94	81	81
National	*	*	*	*	94	82	81

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NV Plan submitted invalid data
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average. The satisfaction rates presented here reflect only members residing in New York. These rates may differ from older publications of CAHPS data.

PREVENTIVE CARE FOR CHILDREN AND ADOLESCENTS

Health Plan	Childhood Immunization Combo 3 (4-3-1-2-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3 rd , 4 th , 5 th , or 6 th Year of Life	Adolescent Well-Care and Preventive Visits
Aetna Life Insurance Company – New York	65	76▲	87▲	79▲	53▲
CDPHP Universal Benefits, Inc.	79▲	78▲	92▲	87▲	63▲
Connecticut General Life Insurance Company – NY	NV	70▲	90▲	81▲	57▲
Empire HealthChoice HMO, Inc.	NV	45▼	82▼	75▼	43▼
Excellus BlueCross BlueShield	76▲	73▲	87▲	76▼	51▲
GHI (EmblemHealth)	51▼	65▲	78▼	68▼	42▼
HIP (EmblemHealth)	44▼	63	79	81▲	54▲
Health Net of New York, Inc.	62	75▲	93▲	85▲	63▲
MVP Preferred PPO	NV	63	95▲	82▲	57▲
Oxford Health Insurance Company, Inc. – New York	NV	65▲	89▲	85▲	63▲
UnitedHealthcare Insurance Company of New York, Inc.	NV	73▲	91▲	81▲	56▲
Statewide	64	59	85	77	49
National	40	*	*	*	*

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NV Plan submitted invalid data
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Asthma Medications (Ages 5-11)	Follow-Up Care for Children Prescribed ADHD Medication	
				Initiation Phase	Continuation Phase
Aetna Life Insurance Company – New York	89▲	87	98▲	38	44
CDPHP Universal Benefits, Inc.	85	89▲	95	35	—
Connecticut General Life Insurance Company – NY	89▲	86	97	44	54
Empire HealthChoice HMO, Inc.	82▼	84▼	97	37	46
Excellus BlueCross BlueShield	83▼	83▼	97	36	41
GHI (EmblemHealth)	89▲	86	91▼	30▼	37
HIP (EmblemHealth)	88	90▲	—	—	—
Health Net of New York, Inc.	89▲	90▲	95	49	—
MVP Preferred PPO	87	85	100▲	45	—
Oxford Health Insurance Company, Inc. – New York	89▲	89▲	95	45▲	44
UnitedHealthcare Insurance Company of New York, Inc.	88▲	87	96	48▲	50
Statewide	86	86	96	40	44
National	83	76	97	35	39

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

PREVENTIVE COUNSELING FOR CHILDREN AND ADOLESCENTS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Aetna Life Insurance Company – New York	54▲	62▲	56▲
CDPHP Universal Benefits, Inc.	75▲	76▲	66▲
Connecticut General Life Insurance Company – NY	NV	NV	NV
Empire HealthChoice HMO, Inc.	28▼	47	35▼
Excelsus BlueCross BlueShield	54▲	59▲	52▲
GHI (EmblemHealth)	26▼	48	38
HIP (EmblemHealth)	47▲	51	40
Health Net of New York, Inc.	54▲	58▲	45
MVP Preferred PPO	NV	NV	NV
Oxford Health Insurance Company, Inc. – New York	NV	NV	NV
UnitedHealthcare Insurance Company of New York, Inc.	NV	NV	NV
Statewide	35	51	41
National	17	20	18

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

WOMEN'S HEALTH

Health Plan	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)
Aetna Life Insurance Company – New York	68▲	78▲	51▲	60▲
CDPHP Universal Benefits, Inc.	72▲	75▼	49	57
Connecticut General Life Insurance Company – NY	68	79▲	52▲	62▲
Empire HealthChoice HMO, Inc.	67	75▼	48▼	52▼
Excellus BlueCross BlueShield	74▲	80▲	42▼	49▼
GHI (EmblemHealth)	56▼	65▼	51▲	58▲
HIP (EmblemHealth)	60▼	70▼	56▲	59
Health Net of New York, Inc.	64▼	81▲	51	63▲
MVP Preferred PPO	72▲	78	44▼	51▼
Oxford Health Insurance Company, Inc. – New York	71▲	83▲	48	57▲
UnitedHealthcare Insurance Company of New York, Inc.	68▲	77▲	52▲	60▲
Statewide	67	76	49	55
National	67	75	38	41

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

PERINATAL HEALTH – REST OF STATE MEMBERSHIP

Health Plan	Risk-Adjusted Low birthweight*	Prenatal Care in the First Trimester	% of LBW Births at Level II/III/IV Facilities
Aetna Life Insurance Company – New York	4.8	88	83
CDPHP Universal Benefits, Inc.	3.3	87	—
Connecticut General Life Insurance Company – NY	6.2	88	—
Empire HealthChoice HMO, Inc.	4.8	88	88
Excelsus BlueCross BlueShield	4.2	88	68
GHI (EmblemHealth)	4.3	88	—
HIP (EmblemHealth)	4.9	84	—
Health Net of New York, Inc.	3.7	89	—
HealthNow New York Inc.	4.2	87	—
MVP Preferred PPO	7.3	94	—
Oxford Health Insurance Company, Inc. – New York	4.4	87	89
UnitedHealthcare Insurance Company of New York, Inc.	4.2	89	97
Rest of State	4.4	88	86
Statewide	4.8	87	93

PERINATAL HEALTH – NYC MEMBERSHIP

Health Plan	Risk-Adjusted Low birthweight*	Prenatal Care in the First Trimester	% of LBW Births at Level II/III/IV Facilities
Aetna Life Insurance Company – New York	4.7	86	100
Connecticut General Life Insurance Company – NY	4.8	90	—
Empire HealthChoice HMO, Inc.	5.4	88	100
HIP (EmblemHealth)	5.0	78	—
Health Net of New York, Inc.	3.3	92▲	—
Oxford Health Insurance Company, Inc. – New York	4.8	87	100
New York City	5.1	87	100
Statewide	4.8	87	93

* A low rate is desirable for this measure.

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING ACUTE ILLNESS FOR ADULTS

Health Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis	Medical Assistance with Smoking Cessation		
			Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Aetna Life Insurance Company – New York	74	27	91▲	56	59
CDPHP Universal Benefits, Inc.	77	15▼	72	52	48
Connecticut General Life Insurance Company – NY	76	24▼	89▲	63	37
Empire HealthChoice HMO, Inc.	73▼	22▼	—	—	—
Excellus BlueCross BlueShield	78▲	15▼	74	52	40
GHI (EmblemHealth)	76▲	48▲	76	54	49
HIP (EmblemHealth)	77	33▲	—	23▼	27▼
Health Net of New York, Inc.	83▲	25	—	—	—
MVP Preferred PPO	78▲	22▼	69	46	39
Oxford Health Insurance Company, Inc. – New York	74	28▲	—	—	—
UnitedHealthcare Insurance Company of New York, Inc.	74	25	91▲	52	45
Statewide	74	26	77	51	43
National	73	23	73	47	41

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size was too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING PREVENTIVE CARE FOR ADULTS

Health Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults
Aetna Life Insurance Company – New York	51▲	24▼	47
CDPHP Universal Benefits, Inc.	72▲	63▲	51
Connecticut General Life Insurance Company - NY	52▲	NV	48
Empire HealthChoice HMO, Inc.	45▼	26▼	47
Excellus BlueCross BlueShield	55▲	37▲	47
GHI (EmblemHealth)	41▼	33	41▼
HIP (EmblemHealth)	38▼	42▲	41▼
Health Net of New York, Inc.	63▲	46▲	49
MVP Preferred PPO	47▼	NV	49
Oxford Health Insurance Company, Inc. - New York	59▲	NV	54
UnitedHealthcare Insurance Company of New York, Inc.	47▼	NV	50
Statewide	48	32	47
National	47	16	51

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING CARDIOVASCULAR CONDITIONS FOR ADULTS

Health Plan	Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)	Persistence of Beta Blocker Use
Aetna Life Insurance Company – New York	90	60▲	71
CDPHP Universal Benefits, Inc.	91▲	62▲	—
Connecticut General Life Insurance Company – NY	79▼	NV	79
Empire HealthChoice HMO, Inc.	87▼	NV	77
Excellus BlueCross BlueShield	84	55	82▲
GHI (EmblemHealth)	92▲	45▼	71
HIP (EmblemHealth)	89	50	—
Health Net of New York, Inc.	91▲	60▲	—
MVP Preferred PPO	85	NV	75
Oxford Health Insurance Company, Inc. – New York	90	52	76
UnitedHealthcare Insurance Company of New York, Inc.	87	52	75
Statewide	88	54	76
National	80	42	70

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size was too small to report
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING RESPIRATORY CONDITIONS FOR ADULTS

Health Plan	Use of Appropriate Medications for People with Asthma (Ages 12-50)	Use of Appropriate Medications for People with Asthma (Ages 5-50) – 3+ Controllers	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
				Corticosteroids	Bronchodilators
Aetna Life Insurance Company – New York	92	79	56▲	59	70
CDPHP Universal Benefits, Inc.	92	79	35▼	63	73
Connecticut General Life Insurance Company – NY	94▲	83▲	52	71	83
Empire HealthChoice HMO, Inc.	92	81	47▼	64	73
Excelsus BlueCross BlueShield	90	81	39▼	66	77
GHI (EmblemHealth)	90	74▼	55▲	57	65▼
HIP (EmblemHealth)	89	72	56	—	—
Health Net of New York, Inc.	90	82	58▲	—	—
MVP Preferred PPO	92	85▲	31▼	73	90▲
Oxford Health Insurance Company, Inc. – New York	93▲	81	57▲	63	77
UnitedHealthcare Insurance Company of New York, Inc.	91	80	50	60	84
Statewide	92	80	51	63	75
National	92	*	37	64	75

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size too small to report
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average.

MONITORING DIABETES FOR ADULTS

Health Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring
Aetna Life Insurance Company – New York	87	88	54	72
CDPHP Universal Benefits, Inc.	89	87	59▲	81▲
Connecticut General Life Insurance Company – NY	82▼	82▼	41▼	74
Empire HealthChoice HMO, Inc.	90	87	54	77
Excelsus BlueCross BlueShield	88	84	54	77
GHI (EmblemHealth)	83▼	86	51	70▼
HIP (EmblemHealth)	88	88	51	77
Health Net of New York, Inc.	90	90▲	55	80▲
MVP Preferred PPO	86▼	82▼	46▼	74
Oxford Health Insurance Company, Inc. – New York	88	87	54	76
UnitedHealthcare Insurance Company of New York, Inc.	87	86	47▼	72
Statewide	88	86	52	75
National	83	79	43	70

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

MANAGING DIABETES OUTCOMES

Health Plan	Poor HbA1c Control*	Lipids Controlled (<100 mg/dL)	Blood Pressure Controlled (<140/90 mm Hg)
Aetna Life Insurance Company – New York	36▲	46▲	60▲
CDPHP Universal Benefits, Inc.	24▲	51▲	37▼
Connecticut General Life Insurance Company – NY	NV	NV	NV
Empire HealthChoice HMO, Inc.	45	39	42
Excellus BlueCross BlueShield	27▲	44▲	66▲
GHI (EmblemHealth)	46▼	37	20▼
HIP (EmblemHealth)	34▲	42	58▲
Health Net of New York, Inc.	31▲	51▲	54▲
MVP Preferred PPO	NV	NV	NV
Oxford Health Insurance Company, Inc. – New York	42	36▼	53▲
UnitedHealthcare Insurance Company of New York, Inc.	41	37	49
Statewide	41	40	46
National	45	37	46

* A low rate is desirable for this measure.

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

ANNUAL MONITORING FOR PATIENTS OF PERSISTANT MEDICATIONS

Health Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring		
Aetna Life Insurance Company – New York	79	82▼	79	81▼	60	81▼
CDPHP Universal Benefits, Inc.	89▲	83	93▲	83	54	83
Connecticut General Life Insurance Company – NY	86	79▼	67▼	78▼	59	78▼
Empire HealthChoice HMO, Inc.	86▲	90▲	89▲	89▲	70▲	89▲
Excellus BlueCross BlueShield	91▲	82▼	83	82▼	61	81▼
GHI (EmblemHealth)	64▼	87▲	89▲	85▲	64	86▲
HIP (EmblemHealth)	83	82	—	80▼	63	81▼
Health Net of New York, Inc.	80	85	80	85▲	66	84▲
MVP Preferred PPO	85	80▼	82	79▼	59	79▼
Oxford Health Insurance Company, Inc. – New York	83	85▲	86▲	83	62	84▲
UnitedHealthcare Insurance Company of New York, Inc.	76▼	80▼	74▼	79▼	63	79▼
Statewide	82	84	82	83	63	83
National	87	78	78	77	59	77

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- Sample size was too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

BEHAVIORAL HEALTH

Health Plan	Antidepressant Medication Management		Follow-up After Hospitalization for Mental Illness	
	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Aetna Life Insurance Company – New York	66	48	62	75
CDPHP Universal Benefits, Inc.	57▼	41▼	83▲	92▲
Connecticut General Life Insurance Company – NY	67	54	44▼	65▼
Empire HealthChoice HMO, Inc.	63▼	45▼	59	77
Excellus BlueCross BlueShield	72▲	57▲	87▲	88▲
GHI (EmblemHealth)	66	51	43▼	61▼
HIP (EmblemHealth)	66	50	74▲	82
Health Net of New York, Inc.	63	57	70▲	83
MVP Preferred PPO	68	47	53▼	70
Oxford Health Insurance Company, Inc. – New York	69	52	64	77
UnitedHealthcare Insurance Company of New York, Inc.	64	49	63	76
Statewide	67	51	60	76
National	63	46	53	72

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average

NOTE: Plans without symbols are not significantly different from the statewide average.

SATISFACTION WITH CARE

Health Plan	Satisfaction with Access to Care		Satisfaction with Health Plan			
	Getting Care Needed	Getting Care Quickly	Claims Processing	Plan Information on Costs	Customer Service	Rating of Health Plan
Aetna Life Insurance Company – New York	86	90	86	62	82	56
CDPHP Universal Benefits, Inc.	89▲	91▲	88	75▲	85	65▲
Connecticut General Life Insurance Company - NY	83	85	82	61	77	52
Empire HealthChoice HMO, Inc.	86	86	85	60	86	69▲
Excellus BlueCross BlueShield	89▲	90▲	94▲	70▲	85	58
GHI (EmblemHealth)	84	84	85	57	76	55
HIP (EmblemHealth)	73▼	80▼	79	51▼	71▼	36▼
Health Net of New York, Inc.	85	87	91	63	84	59
MVP Preferred PPO	86	87	86	62	83	56
Oxford Health Insurance Company, Inc. – New York	82	85	84	55	77	53
UnitedHealthcare Insurance Company of New York, Inc.	87	86	84	68	80	59
Statewide	85	87	86	62	80	56
National	86	87	87	*	82	82

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

* No national average available

NOTE: Plans without symbols are not significantly different from the statewide average. Satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.

SATISFACTION WITH CARE

Health Plan	Satisfaction with the Experience of Care			Rating of Overall Health Care
	Shared Decision Making	Care Coordination	Wellness Discussion	
Aetna Life Insurance Company – New York	63	76	57	74
CDPHP Universal Benefits, Inc.	66▲	79	62▲	82▲
Connecticut General Life Insurance Company - NY	51▼	77	55	69
Empire HealthChoice HMO, Inc.	58	70	54	74
Excellus BlueCross BlueShield	66▲	79	59	78
GHI (EmblemHealth)	57	76	57	70
HIP (EmblemHealth)	58	76	56	66▼
Health Net of New York, Inc.	57	70	52	70
MVP Preferred PPO	63	78	57	76
Oxford Health Insurance Company, Inc. – New York	59	81	61	78
UnitedHealthcare Insurance Company of New York, Inc.	62	81	58	77
Statewide	60	77	57	74
National	*	*	*	74

LEGEND

- ▲ Significantly better than the statewide average
- ▼ Significantly worse than the statewide average
- * No national average available

NOTE: Plans without symbols are not significantly different from the statewide average. Satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.



INTERPRETING THE MEASURES

Plan-specific Rates

The rates reported as part of the 2010 Managed Care Plan Performance Report are displayed as rates per 100 enrollees (percentages). To calculate a plan’s rate for a measure, the numerator is divided by the denominator and then multiplied by 100. Plan-specific data are excluded from the tables as a result of any of the following methodological limitations:

- The denominator is less than 30, resulting in an unreliable rate. Please note that even though the plan’s sample is too small to report individually, the plan’s data are included in the statewide average.
- No enrollee could meet the eligibility requirements (such as continuous enrollment).
- Data are determined to be Not Valid (NV). Invalid data are removed from the statewide calculation.

Diabetes Composite Measures

NYSDOH calculates several measures of diabetes care for Medicaid enrollees using member-level data submitted by the Medicaid plans as part of the QARR data set. The member-level file consists of a subset of QARR measures and includes all members who were eligible for at least one of the specified measures. The file contains the member’s Medicaid ID number, the health plan ID number and an indicator (yes/no) of whether the member was eligible for a measure and if so, whether the member was numerator compliant for that measure. In addition to the ability to link members to outside data sets (Medicaid enrollment files, CAHPS response sets, Medicaid claims), this data set allows the NYSDOH to generate composite measures of diabetes care.

Diabetes composite measures were calculated for both the screening and control measures in the Comprehensive Diabetes Care suite of measures.

Screening composites were calculated as the number of tests each individual had in the measurement year based on the indicators reported in the member-level file. The Received All Tests measure reported here represents the percentage of eligible members who had screening tests for HbA1c levels, cholesterol levels, a dilated retinal eye exam, and nephropathy monitoring. The Diabetes Outcome measure presented here is the percentage of members whose most recent HbA1c levels were at or below 9.0 percent and whose levels of bad cholesterol were in control (LDL-C < 100 mg/dL).

PERINATAL CARE

NYSDOH calculates several measures for perinatal care using data submitted by the health plans and data contained in the Department’s Vital Statistics (VS) birth file. The data are put through a matching process prior to calculation of the measures. Because not all data elements are captured by the New York City VS birth file, two different risk-adjusted low birthweight (LBW) models have been developed. Results from New York City (NYC) and Rest of State (ROS) are separate and cannot be compared.

Risk-Adjustment Factors

Health events, such as low birthweight (LBW) births and cesarean deliveries, do not occur randomly across all plans. In addition, certain risk factors, such as maternal age or education, may be disproportionate across plans and beyond the plans’ control. Risk adjustment is used because it removes or reduces the effects of confounding factors that may influence a plan’s rate. Therefore, risk-adjusted rates account for patient factors that strongly influence the outcome, thereby allowing for a fairer comparison among the plans. These data reflect the removal of multiple births and include only women who were continuously enrolled in a plan for ten months, allowing for a one-month break in service.

Low Birthweight Methodology

To compute the risk-adjusted LBW rates, a logistic regression model was developed. The model predicted a binary response for LBW, i.e., all births were designated as either LBW or “not LBW” (<2,500 grams). The independent variables used in the methodology included:

- maternal age (less than 18, 18-19, 20-29, 30 and over)
- education (less than high school, high school, any college)
- alcohol use (yes, no)
- drug use (yes, no)
- tobacco (yes, no)
- level of prenatal care as defined by a modified Kessner index (intense, adequate, intermediate, inadequate, no care, unknown)
- race/ethnicity (white, black, Hispanic, other)
- parity (none, 1-2, 3-4, 5 or more previous live births)
- maternal medical risk factors (yes, no)
- hospitalized during this pregnancy (yes, no) – Rest of State model only
- previous pre-term delivery (yes, no) – Rest of State model only
- previous low birthweight (yes, no) – NYC model only
- nationality (born in US/Puerto Rico or rest of world)
- marital status (yes,no)
- poor pregnancy outcome (yes, no) – Rest of State model only
- vaginal bleeding (yes, no) – Rest of State model only
- prelabor referral for high risk (yes, no) – Rest of State model only
- problem with gums during pregnancy (yes, no) – Rest of State model only
- aid category (TANF, SSI, FHP) – Medicaid models only

The expected LBW rate is the rate a plan would have if the plan’s patient mix were identical to the patient mix of the state. The plan-specific, risk-adjusted rate is the ratio of observed to expected LBW rates multiplied by the overall statewide LBW rate.



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Additional and related information is also available from the New York State Department of Health website on the internet:
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To learn how to enroll in Medicaid managed care, call your local Department of Social Services.
In New York City, call **Medicaid CHOICE at 1-800-505-5678**.

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