

2014 Health Plan Comparison in New York State

A Report Comparing Quality and Satisfaction Performance Results for Health Plans



Department
of Health

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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 is collected every year for commercial enrollees. The NYSDOH sponsors a CAHPS survey for both adults and children enrolled in Medicaid Managed Care and Child Health Plus every two years. The most recent survey for adults was done in late 2013, and the most recent survey for children was done in late 2012.

Data Sources

This report contains information about managed care plans including results from standardized quality of care measures, consumer 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 2013 calendar year.

Who Reports?

Managed care plans that were in operation during the entire 2013 calendar year were required to report data. This report contains information on 25 distinct organizations. Eleven organizations reported on Commercial HMO enrollees; 9 reported on Commercial PPO members; 16 reported on their Medicaid enrollees, including their Child Health Plus members; and 3 reported on HIV Special Needs Plan (HIV SNP) enrollees. Beginning in calendar year 2014, Child Health Plus data will be represented with Medicaid Managed Care data. Please note that not all health plans serve commercial, Medicaid and/or Child Health Plus enrollees in every region of the state. To determine which managed care plans participate in your area please see our Managed Care Regional Consumer Guides.

Performance Measure Reporting

The NYSDOH does not require health plans to collect all measures every year. For measures that were not collected for 2013 measurement year, the most recent information available is included in this report. The following measures were collected for 2012 measurement year, but not for 2013 measurement year:

- Controlling High Blood Pressure
- Prenatal and Postpartum Care
- Frequency of Ongoing Prenatal Care

New measures for the 2013 measurement year are considered first year measures, and consistent with NCQA policy, individual plan rates are not published.

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 (significance ratings).

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 eligible for that measure. 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 per measure 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.

Shown at the bottom of each 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 a plan is doing compared to the NYS average as well as how NYS rates compare to the nation.

What is in this report?

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

- Information on Health Plans Serving NYS Residents
- Adult Health
- Behavioral Health
- Child and Adolescent health
- Provider Network
- Satisfaction with Care for Adults and Children
- Women's Health

Types of Insurance

Information on five types of managed care insurance is included in this report: Commercial HMO, Commercial PPO, Medicaid, Child Health Plus, and Medicaid HIV SNPs.

Commercial HMO	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.
Commercial PPO	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.
Medicaid	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).
Child Health Plus	Government sponsored health insurance, although individuals may pay part of premium depending on their income. 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. Beginning in 2014, Child Health Plus data will be represented with Medicaid Managed Care data.
HIV SNP	Government sponsored health insurance. This is a form of health insurance specific for Medicaid persons living with HIV/AIDS. The SNP contracts with a network of providers to coordinate medical care; access to other services important for the care of HIV/AIDS, such as substance abuse counseling, and social service support, may also be part of the SNP.

Other Department of Health Reports and Websites

Managed Care performance data is available in several formats and related data, including utilization data and information about demographic variation. All reports described below are available on the Department's website at http://www.health.ny.gov/health_care/managed_care/reports/.

Statewide Executive Summary of Managed Care in New York State

The 2014 Statewide Executive Summary of Managed Care contains a higher-level summary of selected results that can be found in this report from a statewide perspective. It will allow readers to gauge New York State performance against national benchmarks and identify improvement opportunities.

Health Plan Comparison Report (Web Version)

The information contained in this report is available on the Department's website as an interactive report card for health care consumers for five types of managed care insurance: Commercial HMO, Commercial PPO, Medicaid, HIV Special Needs Plan (HIV SNP) and Child Health Plus.

Regional 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 2014 are available for six regions of the state: New York City, Long Island, Hudson Valley, Northeast, Central, and Western New York. Guides for Medicaid and Child Health Plus, Commercial HMO, and Commercial PPO enrollees can be obtained free of charge at the Department's website.

Health Plan Service Use in New York State

The 2014 Health Plan Service Use in New York State report contains additional information on access and utilization of certain services. 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.

Health Care Disparities in New York State

The 2014 Health Care Disparities report provides information about variation in quality of care received in New York State by select demographic characteristics such as gender, age, race/ethnicity, aid category, and region. The report contains both Medicaid and Child Health Plus managed care data.

Feedback

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

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This section provides an overview of each managed care plan operating in New York State during 2013. Health plans that also enroll commercial members in their Preferred Provider Organization (PPO) products are listed in an additional profile table in this section. The profiles include the following information:

Profile Element	Description
Type of Insurance Product	A plan may enroll members under difference products such as Commercial HMO (HMO), Commercial PPO (PPO), Medicaid managed care (MA), HIV Special Needs Plan (SNP), Child Health Plus (CHP), or Family Health Plus (FHP). The product a plan offers is indicated by the following symbol: ✓. Commercial PPO (PPO) is in a separate table.
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, Schuyler, Seneca, Steuben, Wayne, Wyoming, Yates
Member Services Information	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 .
2013 Enrollment	The total number of enrollees in the health plans as of December 31, 2013. 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 membership in all products that are included in QARR measures. Plans with commercial membership may include Health Maintenance Organization (HMO), and Point of Service (POS) members in their commercial enrollment.
Percent Change from 2012	The percent change in total enrollment between December 31, 2012, and December 31, 2013.

Statewide Plan Profiles

Health Plan	Type of Insurance					Plan Service Area *						Member Services
	HMO	MA	SNP	CHP	FHP	LI	NYC	HV	NE	CEN	WST	
Aetna	✓					✓	✓	✓		✓		1-800-872-3862
Affinity Health Plan		✓		✓	✓	✓	✓	✓				1-866-247-5678
Amida Care			✓				✓					1-800-556-0689
CDPHP	✓	✓		✓	✓			✓	✓	✓		1-800-777-2273
Easy Choice Health Plan of NY	✓						✓					1-866-747-8422
Empire BlueCross BlueShield HMO	✓			✓		✓	✓	✓	✓			1-800-261-5962
Excellus Blue Cross BlueShield **	✓	✓		✓	✓				✓	✓	✓	1-800-722-7884
Fidelis Care New York, Inc.		✓		✓	✓	✓	✓	✓	✓	✓	✓	1-888-343-3547
HIP (EmblemHealth)	✓	✓		✓	✓	✓	✓	✓	✓	✓		1-800-447-8255
HealthNow New York Inc. **	✓	✓		✓	✓				✓	✓	✓	1-866-231-0847
HealthPlus, an Amerigroup Company		✓		✓	✓	✓	✓	✓				1-800-600-4441
Healthfirst PHSP, Inc.		✓		✓	✓	✓	✓					1-866-463-6743
Hudson Health Plan		✓		✓	✓			✓				1-800-339-4557
Independent Health	✓	✓		✓	✓						✓	1-800-501-3439
MVP Health Care	✓	✓		✓	✓			✓	✓	✓	✓	1-888-687-6277
MetroPlus Health Plan		✓	✓	✓	✓		✓					1-800-303-9626
Oxford Health Plans of New York	✓					✓	✓	✓				1-800-444-6222
Total Care, A Today's Options of New York Health Plan		✓		✓	✓					✓		1-800-223-7242
UnitedHealthcare Community Plan		✓		✓	✓	✓	✓	✓	✓	✓	✓	1-800-493-4647
Univera Community Health		✓		✓	✓						✓	1-800-494-2215
Univera Healthcare **	✓										✓	1-800-427-8490
VNSNY CHOICE Select Health			✓				✓					1-866-469-7774
WellCare of New York		✓		✓	✓		✓	✓	✓			1-800-288-5441

Notes

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

** Enrollment data reported as combined HMO and PPO membership.

Not every plan may be accepting new enrollment. Please call the plan Member Services toll free number to confirm availability.

Statewide Plan Profiles

Health Plan	Website	NCQA Accreditation*	Enrollment	
			2013	Change from 2012
Aetna	www.aetna.com	Commendable	69,205	-17%
Affinity Health Plan	www.affinityplan.org		265,229	4%
Amida Care	www.amidacareny.org		5,920	6%
CDPHP	www.cdphp.com	Excellent	219,914	1%
Easy Choice Health Plan of NY	www.easychoiceny.com		12,211	-15%
Empire BlueCross BlueShield HMO	www.empireblue.com	Commendable	267,303	-19%
Excellus Blue Cross BlueShield **	www.excellusbcbs.com	Excellent	1,085,056	195%
Fidelis Care New York, Inc.	www.fideliscare.org		898,066	11%
HIP (EmblemHealth)	www.emblemhealth.com	Commendable	578,158	-2%
HealthNow New York Inc. **	www.healthnowny.com	Excellent/Commendable	315,767	-13%
HealthPlus, an Amerigroup Company	www.myamerigroup.com	Commendable	447,236	6%
Healthfirst PHSP, Inc.	www.healthfirstny.org		798,810	42%
Hudson Health Plan	www.hudsonhealthplan.org		125,241	17%
Independent Health	www.independenthealth.com	Excellent/Commendable	206,704	2%
MVP Health Care	www.mvphealthcare.com	Excellent	142,999	-3%
MetroPlus Health Plan	www.metroplus.org		414,409	-4%
Oxford Health Plans of New York	www.oxfordhealth.com	Commendable	771,958	6%
Total Care, A Today's Options of New York Health Plan	www.totalcareny.com		35,691	15%
UnitedHealthcare Community Plan	www.uhccommunityplan.com	Commendable	374,103	12%
Univera Community Health	www.univeracomcommunityhealth.org		48,480	10%
Univera Healthcare **	www.univerahealthcare.com	Commendable	54,178	-12%
VNSNY CHOICE Select Health	www.vnsnychoice.org		5,078	-10%
WellCare of New York	www.wellcare.com	Commendable	88,502	15%

Notes

* Data Source: NCQA Accreditation Status as of November 2014.

** Enrollment data reported as combined HMO and PPO membership.

Not every plan may be accepting new enrollment. Please call the plan Member Services toll free number to confirm availability.

Statewide PPO Plan Profiles

Health Plan	Plan Service Area *						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
CGLIC/CHLIC	✓	✓	✓	✓	✓	✓	1-800-244-6224
Empire BlueCross BlueShield PPO	✓	✓	✓	✓			1-800-342-9816
GHI (EmblemHealth)	✓	✓	✓	✓	✓	✓	1-800-624-2414
HIP (EmblemHealth)	✓	✓	✓				1-800-447-8255
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

Notes

* Plans may not participate in all counties in regions indicated.
 Not every plan may be accepting new enrollment. Please call the plan Member Services toll free number to confirm availability.

Statewide PPO Plan Profiles

Health Plan	Website	NCQA Accreditation*	Enrollment	
			2013	Change from 2012
Aetna Life Insurance Company – New York	www.aetna.com	Commendable	668,884	3%
CDPHP Universal Benefits, Inc.	www.cdphp.com	Excellent	176,050	29%
CGLIC/CHLIC	www.cigna.com	Commendable	587,292	14%
Empire BlueCross BlueShield PPO	www.empireblue.com		650,155	-62%
GHI (EmblemHealth)	www.emblemhealth.com		213,667	-12%
HIP (EmblemHealth)	www.emblemhealth.com		24,276	-20%
MVP Preferred PPO	www.mvphealthcare.com		83,660	-33%
Oxford Health Insurance Company, Inc. – New York	www.oxfordhealth.com	Commendable	346,852	-10%
UnitedHealthcare Insurance Company of New York, Inc.	www.myuhc.com	Commendable	1,858,430	3%

Notes

* Data Source: NCQA Accreditation Status as of November 2014.

Not every plan may be accepting new enrollment. Please call the plan Member Services toll free number to confirm availability.

This section provides information on how well managed care plans provide care to their adult members, including managing chronic illnesses, providing access to preventive health screenings and treatments, and encouraging appropriate use of healthcare resources and treatments.

Two measures encouraging appropriate use of medical resources, imaging studies for lower back pain, and antibiotic use are presented. Overuse of imaging studies, including X-rays, MRIs, and CT scans can be harmful to the recipient as well as being costly. The overuse of antibiotics contributes to the development of antibiotic resistant bacteria in the community.

Encouraging healthful choices is an important role for providers, and the medical assistance with smoking cessation measures are a measure of how often these interactions occur. The CAHPS survey of members' experiences with health care provides the information for both the smoking cessation measures and an estimate of the number of members who receive influenza vaccinations. In addition to receiving annual flu vaccinations, a number of other preventive services are available to managed care members. Data collected from health plans indicates the percent of members who receive screening for colon cancer and the percentage that are screened for obesity by having their body mass index (BMI) calculated. The number of young adults enrolled in Medicaid who received routine dental care is presented as well.

Chronic conditions such as cardiovascular disease, respiratory conditions (such as asthma and COPD), and diabetes are a major focus of healthcare resources and affect a growing number of members enrolled in New York's managed care plans. Several measures of quality of care for each of these conditions are shown for both the commercial and Medicaid populations. In addition, members using medications to treat these and other conditions on a long-term basis are at increased risk of harm from side effects and drug toxicity. Several measures indicating how often members using such medications received appropriate testing to monitor these issues are presented.

Finally, for members enrolled in Medicaid managed care and living with HIV/AIDS, several indicators of quality care are presented. These measures were developed by New York State and include how often members utilize services as well as whether specific screening tests have occurred.

Measure Descriptions

Measure	Description (Type of Insurance Product)
Managing Preventive Care	
Colon Cancer Screening	The percentage of adults, ages 50 to 75 years, who had appropriate screening for colorectal cancer. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Adult BMI Assessment	The percentage of members, ages 18 to 74 years, with an outpatient visit, who had their body mass index (BMI) documented during the measurement year or the year prior the measurement year. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Annual Dental Visit (Ages 19-21)	The percentage of young adults, ages 19 to 21 years, who had at least one dental visit within the last year. (Medicaid)
Flu Shot for Adults	The percentage of members, ages 18 to 64 years for Commercial members, and ages 50 to 64 years for Medicaid members, who have had a flu shot. This measure is collected as part of the CAHPS survey and is calculated as a two year rolling average for commercial results. Medicaid results are based on a single year. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Discussion of Aspirin Risks and Benefits	The percentage of men, ages 46 to 79 years, and women, ages 56 to 79 years, who discussed the risks and benefits of using aspirin with a doctor or health provider. This measure is collected as part of the CAHPS survey and is calculated as a two year rolling average for commercial results. (Commercial HMO, Commercial PPO)

Measure	Description (Type of Insurance Product)
Managing Preventive Care (Continued)	
Aspirin Use	The percentage of eligible members who are currently taking aspirin. Eligible members include: men, ages 46 to 65 years, with at least one cardiovascular risk factor; men, ages 66 to 79 years, regardless of risk factors; and women, ages 56 to 79 years, with at least two cardiovascular risk factors. This measure is collected as part of the CAHPS survey and is calculated as a two year rolling average for commercial results. (Commercial HMO, Commercial PPO)
Managing Acute Illness	
Use of Imaging Studies for Low Back Pain	The percentage of members with a primary diagnosis of low back pain who did not have an imaging study (X-ray, MRI, CT scan). (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	The percentage of adults, ages 18 to 64 years, with acute bronchitis who did NOT receive a prescription for antibiotics. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Smoking Cessation	<p>The percentage of members, ages 18 years and older, who are current smokers or tobacco users and who received medical information about smoking or tobacco use cessation within the last 12 months from a health care provider. This measure is collected as part of the CAHPS survey and is calculated as a two year rolling average. Medicaid results are based on a single year. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Advising Smokers to Quit: The percentage of eligible adults who received cessation advice. 2. Discussing Cessation Medications: The percentage of eligible adults who discussed or were recommended cessation medications. 3. Discussing Cessation Strategies: The percentage of eligible adults who discussed or were provided cessation methods or strategies.
Managing Cardiovascular Conditions	
Controlling High Blood Pressure	The percentage of members, ages 18 to 85 years, who have hypertension and whose blood pressure was adequately controlled (below 140/90). This measure was not collected for 2013; 2012 data is presented in this report. (Commercial HMO, Commercial PPO, Medicaid)
Cholesterol Management for Patients with Cardiovascular Conditions	<p>The percentage of members, ages 18 to 75 years, with a cardiovascular condition, who had at least one cholesterol screening test and whose cholesterol level was below the recommended level (100 mg/dL) during the measurement year. There are two rates of cholesterol management as follows: (Commercial HMO, Commercial PPO, Medicaid)</p> <ol style="list-style-type: none"> 1. Cholesterol Screening: The percentage of members who had at least one LDL-C screening performed during the measurement year. 2. Cholesterol Level Controlled (LDL-C < 100mg/dL): The percentage of members whose most recent LDL-C result during the measurement year was below 100mg/dL.

Measure	Description (Type of Insurance Product)
Managing Cardiovascular Conditions (Continued)	
Persistence of Beta-Blocker Treatment	The percentage of members, age 18 years and older, who were hospitalized after a heart attack and received persistent beta-blocker treatment for six months after discharge. (Commercial HMO, Commercial PPO, Medicaid)
Managing Respiratory Conditions	
Use of Appropriate Medications for People with Asthma (Ages 19-64)	The percentage of members, ages 19 to 64 years, with persistent asthma who received at least one appropriate medication to control their condition during the measurement year. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Medical Management for People with Asthma 50% Days Covered (Ages 19-64)	The percentage of members, ages 19 to 64 years, with persistent asthma who filled prescriptions for asthma controller medications during at least 50% of their treatment period. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Asthma Medication Ratio (Ages 19-64)	The percentage of members, ages 19 to 64 years, who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	The percentage of members, ages 40 years and older, with a new diagnosis of COPD or newly active COPD, who received spirometry testing to confirm the diagnosis. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Pharmacotherapy Management of COPD Exacerbation	<p>The percentage of COPD exacerbation events for members, ages 40 years and older, who have had an acute inpatient discharge or ED visit and who were dispensed appropriate medications to manage the exacerbation. This measure is presented as two separate rates. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Corticosteroid Rate: The percentage of events when the member was prescribed a systemic corticosteroid within 14 days of the event. 2. Bronchodilator Rate: The percentage of events when the member was prescribed a bronchodilator within 30 days of the event.
Comprehensive Diabetes Care	
Comprehensive Diabetes Care	These measures report components of care for members, ages 18 to 75 years, with diabetes and the rates 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. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Monitoring Diabetes	<ol style="list-style-type: none"> 1. HbA1c Testing: The percentage of members with diabetes who received at least one Hemoglobin A1c (HbA1c) test within the past year. 2. Lipid Profile: The percentage of members with diabetes who had at least one cholesterol screening test done during the past year.

Measure	Description (Type of Insurance Product)
Comprehensive Diabetes Care (Continued)	
Monitoring Diabetes	<p>3. Dilated Eye Exam: The percentage of members with diabetes who had a retinal eye screening exam during the last year or who had a negative retinal exam in the year prior.</p> <p>4. Medical Attention for Nephropathy: The percentage of members with diabetes who had at least one nephropathy screening test or had evidence of nephropathy during the last year.</p> <p>5. Received All Four Tests: The percentage of members with diabetes who received at least one of each of the following tests: HbA1c test, cholesterol screening test, diabetes eye exam, and Medicaid attention for nephropathy.</p>
Managing Diabetes Outcomes	<p>1. 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.</p> <p>2. HbA1c Control: The percentage of members with diabetes whose most recent HbA1c level was <8.0 percent.</p> <p>3. HbA1c Control for Selected Populations: The percentage of members with diabetes whose most recent HbA1c level was <7.0 percent. Additional exclusion criteria are required for this indicator that will result in a different eligible population from all other indicators.</p> <p>4. Lipids Controlled: The percentage of members with diabetes whose most recent level of bad cholesterol was below the recommended level (LDL-C <100 mg/dL).</p> <p>5. Blood pressure controlled: The percentage of members with diabetes whose most recent blood pressure reading below 140/90.</p> <p>6. HbA1c and Lipids controlled: The percentage of members with diabetes whose most recent HbA1c level was ≤9.0 percent and whose most recent level of bad cholesterol was less than LDL-C <100 mg/dL.</p>
Managing Medications	
Drug Therapy for Rheumatoid Arthritis	The percentage of members with rheumatoid arthritis who were dispensed at least one ambulatory prescription for a disease modifying anti-rheumatic drug. (Commercial HMO, Commercial PPO, Medicaid)
Annual Monitoring for Patients on Persistent Medications	<p>The percentage of members, ages 18 years and older, who were taking certain medications for at least six months and who received specific monitoring tests. The following rates specify categories of medications that are of interest: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <p>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.</p>

Measure	Description (Type of Insurance Product)
Managing Medications (Continued)	
Annual Monitoring for Patients on Persistent Medications	<p>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.</p> <p>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.</p> <p>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 for each anticonvulsant in the measurement year.</p> <p>5. Combined Rate: The combined rate is the sum of the four numerators divided by the sum of the four denominators.</p>
HIV Comprehensive Care	
HIV/AIDS Comprehensive Care	<p>These measures are quality indicators of recommended treatment and preventive care for people living with HIV/AIDS. (Medicaid, HIV SNP)</p> <p>1. Engaged in Care: The percentage of members with HIV/AIDS, ages 2 years and older, who had two visits for primary care or HIV related care with at least one visit during each half of the past year.</p> <p>2. Viral Load Monitoring: The percentage of members with HIV/AIDS, ages 2 years and older, who had two viral load tests performed with at least one test during each half of the past year.</p> <p>3. Syphilis Screening: The percentage of members with HIV/AIDS, ages 19 years and older, who were screened for syphilis in the past year.</p>

Commercial HMO Health Plan Performance

Managing Preventive Care

Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults	Discussion of Aspirin Risks and Benefits	Aspirin Use
Aetna	66	61 ▼	48	53	40
CDPHP	76 ▲	92 ▲	55 ▲	47	46
Easy Choice Health Plan of NY	39 ▼	63 ▼	42 ▼	43	43
Empire BlueCross BlueShield HMO	54 ▼	77	47	47	40
Excellus Blue Cross BlueShield	64	82 ▲	53	49	39
HIP (EmblemHealth)	66	86 ▲	40 ▼	42	34 ▼
HealthNow New York Inc.	66	82 ▲	50	48	46
Independent Health	65	84 ▲	55 ▲	53	52
MVP Health Care	67	90 ▲	54	53 ▲	51
Oxford Health Plans of New York	60	59 ▼	38 ▼	44	41
Univera Healthcare	59	87 ▲	51	45	54
Statewide Average	64	78	49	48	45
National Average	63	76	50	*	47

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Acute Illness

Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Aetna	84 ▲	26	84	61	59
CDPHP	74 ▼	21	86	63	60 ▲
Easy Choice Health Plan of NY	80	41 ▲	75	45	38
Empire BlueCross BlueShield HMO	77	37 ▲	84	61	55
Excellus Blue Cross BlueShield	79 ▲	17 ▼	74 ▼	47	35 ▼
HIP (EmblemHealth)	79 ▲	30 ▲	91 ▲	48	43
HealthNow New York Inc.	81 ▲	18 ▼	82	57	47
Independent Health	84 ▲	18 ▼	82	53	45
MVP Health Care	69 ▼	18 ▼	85	63	57
Oxford Health Plans of New York	71 ▼	31 ▲	89	55	43
Univera Healthcare	79	17 ▼	88	59	53
Statewide Average	78	24	84	56	49
National Average	75	26	77	52	47

Legend

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

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Cardiovascular Conditions

Plan	Controlling High Blood Pressure **	Cholesterol Management After Cardiovascular Event		Persistence of Beta-Blocker Treatment
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)	
Aetna	51 ▼	86	53	84
CDPHP	71 ▲	89	60	87
Easy Choice Health Plan of NY	49 ▼	90	40 ▼	--
Empire BlueCross BlueShield HMO	58	91	55	69 ▼
Excellus Blue Cross BlueShield	69 ▲	87	61 ▲	85
HIP (EmblemHealth)	65 ▲	90	49 ▼	83
HealthNow New York Inc.	60	88	59	90
Independent Health	69 ▲	87	58	90
MVP Health Care	70 ▲	90	65 ▲	90
Oxford Health Plans of New York	38 ▼	89	48 ▼	81
Univera Healthcare	73 ▲	89	63 ▲	95
Statewide Average	59	88	56	85
National Average	64	87	58	84

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

** Rotated measure. Data is from 2012.

-- Sample size too small to report.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Respiratory Conditions

Plan	Use of Appropriate Medications for People with Asthma (Ages 19-64)	Asthma Medication Ratio (Ages 19-64)	Medical Management for People with Asthma 50% Days Covered (Ages 19-64)	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
					Corticosteroid	Bronchodilator
Aetna	90	70 ▼	78 ▲	64 ▲	73	78
CDPHP	92	80	69	42 ▼	80	80
Easy Choice Health Plan of NY	84	69	92 ▲	66	--	--
Empire BlueCross BlueShield HMO	92	81	71	61 ▲	81	86
Excellus Blue Cross BlueShield	92 ▲	81 ▲	71	41 ▼	75	77
HIP (EmblemHealth)	89	75 ▼	73	57 ▲	69	73
HealthNow New York Inc.	90	78	67	51	77	78
Independent Health	92	81	68	52	82	86
MVP Health Care	88	78	72	39 ▼	75	83
Oxford Health Plans of New York	87 ▼	73 ▼	67 ▼	60 ▲	71	76
Univera Healthcare	89	78	60 ▼	45	91	82
Statewide Average	90	78	70	52	76	79
National Average	*	*	*	43	76	80

Legend

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

Notes

- Plans without symbols are consistent with the statewide average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Monitoring Diabetes

Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Aetna	88	86	56	82	44
CDPHP	92	87	63 ▲	84	49 ▲
Easy Choice Health Plan of NY	83 ▼	79 ▼	32 ▼	81	25 ▼
Empire BlueCross BlueShield HMO	91	89	51 ▼	78 ▼	39 ▼
Excellus Blue Cross BlueShield	91	86	57	84	44
HIP (EmblemHealth)	92	88	59	81	48
HealthNow New York Inc.	90	87	64 ▲	86 ▲	57 ▲
Independent Health	90	88	62 ▲	88 ▲	52 ▲
MVP Health Care	91	87	55	84	43
Oxford Health Plans of New York	88	87	49 ▼	77 ▼	39 ▼
Univera Healthcare	90	88	59	84	48
Statewide Average	90	87	56	82	45
National Average	90	85	56	85	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Diabetes Outcomes

Plan	Poor HbA1c Control†	HbA1C Control (<8.0%)	HbA1C Control (<7.0%) for Selected Populations±	Lipids Controlled (<100 mg/dL)	Blood pressure controlled (<140/90 mm Hg)	HbA1c and Lipids Controlled
Aetna	37 ▼	53 ▼	38 ▼	41	47 ▼	35 ▼
CDPHP	22 ▲	66 ▲	45	47	76 ▲	41
Easy Choice Health Plan of NY	60 ▼	30 ▼	19 ▼	25 ▼	38 ▼	19 ▼
Empire BlueCross BlueShield HMO	28	63	NV	47	66	40
Excellus Blue Cross BlueShield	27	66 ▲	46	50 ▲	72 ▲	42
HIP (EmblemHealth)	31	59	41	38 ▼	60 ▼	33 ▼
HealthNow New York Inc.	31	60	43	49 ▲	67	45 ▲
Independent Health	21 ▲	69 ▲	48	56 ▲	73 ▲	49 ▲
MVP Health Care	21 ▲	67 ▲	43	50 ▲	72 ▲	45 ▲
Oxford Health Plans of New York	40 ▼	53 ▼	NV	37 ▼	54 ▼	30 ▼
Univera Healthcare	27	62	43	48	72 ▲	42
Statewide Average	30	61	44	45	65	38
National Average	31	59	40	47	65	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

† For Poor HbA1c Control, a low rate is desirable.

± Additional exclusion criteria are required for this indicator that will result in a different eligible population from all other indicators.

NV Plan submitted invalid data.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Medications

Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Aetna	75 ▼	82 ▼	84	81 ▼	61	81 ▼
CDPHP	91	87 ▲	88	87 ▲	63	87 ▲
Easy Choice Health Plan of NY	67 ▼	84	--	81	53	82
Empire BlueCross BlueShield HMO	81	82 ▼	82	82	62	81 ▼
Excellus Blue Cross BlueShield	88	82 ▼	83	81 ▼	58	81 ▼
HIP (EmblemHealth)	81 ▼	88 ▲	90	87 ▲	62	87 ▲
HealthNow New York Inc.	86	80 ▼	85	79 ▼	49 ▼	79 ▼
Independent Health	88	84	92 ▲	84	57	84 ▲
MVP Health Care	90	82 ▼	81	82	61	82 ▼
Oxford Health Plans of New York	85	86 ▲	85	85 ▲	62	85 ▲
Univera Healthcare	88	85	94	84	61	85 ▲
Statewide Average	86	84	85	83	59	83
National Average	88	83	87	83	59	83

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Preventive Care

Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults	Discussion of Aspirin Risks and Benefits	Aspirin Use
Aetna Life Insurance Company - New York	63	56 ▼	55	45	35
CDPHP Universal Benefits, Inc.	65	86 ▲	60	49	46
CGLIC/CHLIC	54 ▼	61	51	49	41
Empire BlueCross BlueShield PPO	56 ▼	74 ▲	40 ▼	43	--
GHI (EmblemHealth)	55 ▼	66	43 ▼	38 ▼	44
HIP (EmblemHealth)	57 ▼	70 ▲	75 ▲	52	48
MVP Preferred PPO	52 ▼	NV	52	53	43
Oxford Health Insurance of New York	60	48 ▼	51	54	47
UnitedHealthcare Insurance Company of New York, Inc.	69 ▲	62	47 ▼	53	55
Statewide Average	64	63	55	49	45
National Average	57	41	48	*	46

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- * No national average available.
- Sample size too small to report.
- NV** Plan submitted invalid data.

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Acute Illness

Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Aetna Life Insurance Company - New York	75	24 ▼	80	47	45
CDPHP Universal Benefits, Inc.	75	22 ▼	80	69 ▲	60
CGLIC/CHLIC	77	24 ▼	83	--	--
Empire BlueCross BlueShield PPO	76	38 ▲	--	--	--
GHI (EmblemHealth)	73 ▼	35 ▲	78	51	50
HIP (EmblemHealth)	73	29	80	57	56
MVP Preferred PPO	78	19 ▼	85	47	51
Oxford Health Insurance of New York	73 ▼	32 ▲	85	53	50
UnitedHealthcare Insurance Company of New York, Inc.	77 ▲	26 ▼	--	--	--
Statewide Average	76	29	80	54	52
National Average	74	24	71	44	38

Legend

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

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Cardiovascular Conditions

Plan	Controlling High Blood Pressure **	Cholesterol Management After Cardiovascular Event		Persistence of Beta-Blocker Treatment
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)	
Aetna Life Insurance Company - New York	56	86 ▲	47	81
CDPHP Universal Benefits, Inc.	72 ▲	88 ▲	57 ▲	91
CGLIC/CHLIC	49 ▼	88 ▲	56 ▲	82
Empire BlueCross BlueShield PPO	57	93 ▲	58 ▲	75
GHI (EmblemHealth)	66 ▲	89 ▲	44	87
HIP (EmblemHealth)	66 ▲	85	47	--
MVP Preferred PPO	NV	85 ▲	24 ▼	83
Oxford Health Insurance of New York	41 ▼	88 ▲	47	88
UnitedHealthcare Insurance Company of New York, Inc.	50 ▼	78 ▼	44	81
Statewide Average	57	82	47	84
National Average	58	83	50	81

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

** Rotated measure. Data is from 2012.

-- Sample size too small to report.

NV Plan submitted invalid data.

Notes

• Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Respiratory Conditions

Plan	Use of Appropriate Medications for People with Asthma (Ages 19-64)	Asthma Medication Ratio (Ages 19-64)	Medical Management for People with Asthma 50% Days Covered (Ages 19-64)	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
					Corticosteroid	Bronchodilator
Aetna Life Insurance Company - New York	90	76	84 ▲	56	68	81
CDPHP Universal Benefits, Inc.	91	78	67 ▼	41 ▼	78	81
CGLIC/CHLIC	92	80	69 ▼	57	74	83
Empire BlueCross BlueShield PPO	91	81 ▲	71	58 ▲	64	70
GHI (EmblemHealth)	85 ▼	72 ▼	88 ▲	57	65	73
HIP (EmblemHealth)	90	82	81	61	--	--
MVP Preferred PPO	88	75	68 ▼	42 ▼	69	74
Oxford Health Insurance of New York	91	79	71	58	74	84
UnitedHealthcare Insurance Company of New York, Inc.	89	75	67 ▼	53 ▼	66	71
Statewide Average	90	77	74	54	70	77
National Average	*	*	*	41	73	79

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

-- Sample size too small to report.

Notes

• Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Monitoring Diabetes

Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Aetna Life Insurance Company - New York	88	86	57 ▲	75	41
CDPHP Universal Benefits, Inc.	89	84	59 ▲	84 ▲	46 ▲
CGLIC/CHLIC	89	85	50	80	38
Empire BlueCross BlueShield PPO	91 ▲	90 ▲	52	80	42
GHI (EmblemHealth)	86	85	46 ▼	79	37
HIP (EmblemHealth)	90	87	53	83 ▲	43
MVP Preferred PPO	87	83 ▼	39 ▼	79 ▲	29 ▼
Oxford Health Insurance of New York	91 ▲	88	57 ▲	78	43
UnitedHealthcare Insurance Company of New York, Inc.	87	85	53	76	39
Statewide Average	88	86	53	77	40
National Average	87	81	47	79	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

• Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership.

Results are contained in the Commercial HMO pages.

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Diabetes Outcomes

Plan	Poor HbA1c Control†	HbA1C Control (<8.0%)	HbA1C Control (<7.0%) for Selected Populations±	Lipids Controlled (<100 mg/dL)	Blood pressure controlled (<140/90 mm Hg)	HbA1c and Lipids Controlled
Aetna Life Insurance Company - New York	36	55	39	40 ▼	48 ▼	34
CDPHP Universal Benefits, Inc.	25 ▲	65 ▲	43	44	70 ▲	39
CGLIC/CHLIC	34	55	NV	39 ▼	52 ▼	35
Empire BlueCross BlueShield PPO	29 ▲	59	NV	45	69 ▲	38
GHI (EmblemHealth)	41 ▼	50 ▼	35	36 ▼	57	30 ▼
HIP (EmblemHealth)	35	55	39	37 ▼	53 ▼	30 ▼
MVP Preferred PPO	NV	NV	NV	NV	NV	NV
Oxford Health Insurance of New York	42 ▼	51 ▼	NV	41	46 ▼	35
UnitedHealthcare Insurance Company of New York, Inc.	37	57	NV	46	62	39
Statewide Average	36	56	39	44	60	37
National Average	38	53	32	41	59	*

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

† For Poor HbA1c Control, a low rate is desirable.

± Additional exclusion criteria are required for this indicator that will result in a different eligible population from all other indicators.

NV Plan submitted invalid data.

Notes

• Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Medications

Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Aetna Life Insurance Company - New York	85 ▲	84	85	83	56	83 ▼
CDPHP Universal Benefits, Inc.	90 ▲	84	85	84	55	83
CGLIC/CHLIC	84	85	84	85	57	84
Empire BlueCross BlueShield PPO	68 ▼	86 ▲	91	86 ▲	64	86 ▲
GHI (EmblemHealth)	75 ▼	87 ▲	91	85 ▲	62	86 ▲
HIP (EmblemHealth)	81	85	--	85	--	85
MVP Preferred PPO	84	84	92	83	62	83
Oxford Health Insurance of New York	80	85	84	84	61	84
UnitedHealthcare Insurance Company of New York, Inc.	82	82 ▼	81	81 ▼	60	81 ▼
Statewide Average	81	85	86	84	59	84
National Average	87	80	82	80	56	80

Legend

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

Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Preventive Care

Plan	Medicaid Managed Care Plans (MMC)			
	Colon Cancer Screening	Adult BMI Assessment	Annual Dental Visit (Ages 19-21)	Flu Shot for Adults
Affinity Health Plan	66 ▲	87	42 ▼	43
CDPHP	51 ▼	83	42	42
Excellus Blue Cross BlueShield	48 ▼	83	42	47
Fidelis Care New York, Inc.	59	91 ▲	51 ▲	46
HIP (EmblemHealth)	56	84	42 ▼	45
HealthNow New York Inc.	50 ▼	87	40 ▼	42
HealthPlus, an Amerigroup Company	61	72 ▼	41 ▼	48
Healthfirst PHSP, Inc.	64 ▲	86	42 ▼	49
Hudson Health Plan	55	91 ▲	44	42
Independent Health	46 ▼	87	40 ▼	37
MVP Health Care	46 ▼	93 ▲	43	44
MetroPlus Health Plan	59	88	34 ▼	49
Total Care, A Today's Options of New York Health Plan	47 ▼	88	40	44
UnitedHealthcare Community Plan	56	85	46 ▲	39
Univera Community Health	44 ▼	91 ▲	44	45
WellCare of New York	63	79 ▼	36 ▼	40
MMC Statewide Average	59	85	44	44
National Average	*	76	33	*
Plan	HIV Special Needs Plans (SNP)			
	Colon Cancer Screening	Adult BMI Assessment	Annual Dental Visit (Ages 19-21)	Flu Shot for Adults
Amida Care	56	81	NA	73
MetroPlus Health Plan	62	86	NA	78
VNSNY CHOICE Select Health	--	--	NA	73
SNP Statewide Average	59	84	NA	75

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

-- Sample size too small to report.

NA Data not available.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Acute Illness

Plan	Medicaid Managed Care Plans (MMC)				
	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Affinity Health Plan	77	27	79	52	47
CDPHP	73 ▼	23	81	64 ▲	54 ▲
Excellus Blue Cross BlueShield	75 ▼	17 ▼	84	62	58 ▲
Fidelis Care New York, Inc.	75 ▼	26	79	56	46
HIP (EmblemHealth)	79	28	77	64	47
HealthNow New York Inc.	70 ▼	21	74	43 ▼	36 ▼
HealthPlus, an Amerigroup Company	78	27	67 ▼	49	42
Healthfirst PHSP, Inc.	80 ▲	29 ▲	80	64	54
Hudson Health Plan	71 ▼	23	78	58	48
Independent Health	80	21	79	56	44
MVP Health Care	78	20	81	61	43
MetroPlus Health Plan	81 ▲	27	75	49	44
Total Care, A Today's Options of New York Health Plan	71 ▼	24	72	46 ▼	38 ▼
UnitedHealthcare Community Plan	77	29 ▲	83	56	49
Univera Community Health	71 ▼	19 ▼	83	57	48
WellCare of New York	85 ▲	35 ▲	72	51	49
MMC Statewide Average	77	26	78	56	47
National Average	75	27	76	47	42
Plan	HIV Special Needs Plans (SNP)				
	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Amida Care	90 ▲	NA	92	80	76
MetroPlus Health Plan	69	NA	95	82	75
VNSNY CHOICE Select Health	73	NA	92	77	72
SNP Statewide Average	77	NA	93	79	75

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

NA Data Not Available.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Cardiovascular Conditions

Plan	Controlling High Blood Pressure **	Cholesterol Management After Cardiovascular Event		Persistence of Beta-Blocker Treatment
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)	
Affinity Health Plan	44 ▼	86	43	74 ▼
CDPHP	70 ▲	84 ▼	46	86
Excellus Blue Cross BlueShield	63	75 ▼	42	89
Fidelis Care New York, Inc.	70 ▲	89	46	83
HIP (EmblemHealth)	73 ▲	89	51	95 ▲
HealthNow New York Inc.	58 ▼	84	46	88
HealthPlus, an Amerigroup Company	62	90	43	80
Healthfirst PHSP, Inc.	59 ▼	88	50	83
Hudson Health Plan	64	87	52 ▲	--
Independent Health	59	83 ▼	48	90
MVP Health Care	68	77 ▼	49	--
MetroPlus Health Plan	64	91	50	84
Total Care, A Today's Options of New York Health Plan	70 ▲	86	42	--
UnitedHealthcare Community Plan	67	91 ▲	37 ▼	89
Univera Community Health	60	81 ▼	39 ▼	--
WellCare of New York	56 ▼	92 ▲	51	95
Statewide Average	63	88	46	85
National Average	56	81	40	84

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

** Rotated measure. Data is from 2012.

-- Sample size too small to report.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Respiratory Conditions - Asthma

Plan	Medicaid Managed Care Plans (MMC)		
	Use of Appropriate Medications for People with Asthma (Ages 19-64)	Asthma Medication Ratio (Ages 19-64)	Medical Management for People with Asthma 50% Days Covered (Ages 19-64)
Affinity Health Plan	80	60	68
CDPHP	78	54	57 ▼
Excellus Blue Cross BlueShield	80	56	61 ▼
Fidelis Care New York, Inc.	80	59	68
HIP (EmblemHealth)	82	59	69
HealthNow New York Inc.	78	58	58 ▼
HealthPlus, an Amerigroup Company	76 ▼	54 ▼	63 ▼
Healthfirst PHSP, Inc.	81 ▲	62 ▲	72 ▲
Hudson Health Plan	81	56	60 ▼
Independent Health	84	63	64
MVP Health Care	79	58	63
MetroPlus Health Plan	77 ▼	56 ▼	71 ▲
Total Care, A Today's Options of New York Health Plan	80	57	59
UnitedHealthcare Community Plan	78	62	70
Univera Community Health	83	61	62
WellCare of New York	81	66 ▲	66
MMC Statewide Average	80	59	68
National Average	*	*	*
Plan	HIV Special Needs Plans (SNP)		
	Use of Appropriate Medications for People with Asthma (Ages 19-64)	Asthma Medication Ratio (Ages 19-64)	Medical Management for People with Asthma 50% Days Covered (Ages 19-64)
Amida Care	66	45 ▲	83
MetroPlus Health Plan	63	36 ▼	77
VNSNY CHOICE Select Health	--	--	--
SNP Statewide Average	64	41	80

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

-- Sample size too small to report.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Respiratory Conditions - COPD

Plan	Medicaid Managed Care Plans (MMC)		
	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
		Corticosteroid	Bronchodilator
Affinity Health Plan	49	73	87
CDPHP	30 ▼	80	86
Excellus Blue Cross BlueShield	35 ▼	77	89
Fidelis Care New York, Inc.	53	75	87
HIP (EmblemHealth)	56 ▲	70	85
HealthNow New York Inc.	43	80	89
HealthPlus, an Amerigroup Company	52	73	90
Healthfirst PHSP, Inc.	53	74	91 ▲
Hudson Health Plan	40 ▼	77	88
Independent Health	40 ▼	77	88
MVP Health Care	25 ▼	80	87
MetroPlus Health Plan	50	71	91
Total Care, A Today's Options of New York Health Plan	44	65	82
UnitedHealthcare Community Plan	60 ▲	75	86
Univera Community Health	38 ▼	79	94
WellCare of New York	57	76	91
MMC Statewide Average	51	75	88
National Average	31	66	81
Plan	HIV Special Needs Plans (SNP)		
	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
		Corticosteroid	Bronchodilator
Amida Care	19	69	93
MetroPlus Health Plan	30	74	96
VNSNY CHOICE Select Health	--	63	94
SNP Statewide Average	24	69	94

Legend

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

Notes

- Plans without symbols are consistent with the statewide average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Monitoring Diabetes

Plan	Medicaid Managed Care Plans (MMC)				
	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Affinity Health Plan	86 ▼	84	57 ▼	81	44 ▼
CDPHP	88	80 ▼	66	78 ▼	47
Excellus Blue Cross BlueShield	85 ▼	76 ▼	64	78 ▼	44 ▼
Fidelis Care New York, Inc.	89	86	64	80	49
HIP (EmblemHealth)	86 ▼	85	56 ▼	83	46 ▼
HealthNow New York Inc.	84 ▼	78 ▼	62	82	46 ▼
HealthPlus, an Amerigroup Company	91	89 ▲	66	85	56 ▲
Healthfirst PHSP, Inc.	91	89	62	87 ▲	53
Hudson Health Plan	90	86	62	80	49
Independent Health	83 ▼	79 ▼	60	81	44 ▼
MVP Health Care	84 ▼	75 ▼	54 ▼	79 ▼	39 ▼
MetroPlus Health Plan	91	90 ▲	63	85	52
Total Care, A Today's Options of New York Health Plan	88	81 ▼	66	78 ▼	50
UnitedHealthcare Community Plan	92 ▲	90 ▲	67 ▲	83	55 ▲
Univera Community Health	83 ▼	79 ▼	62	82	47
WellCare of New York	90	89	65	88 ▲	57 ▲
MMC Statewide Average	89	87	63	83	51
National Average	84	76	54	79	*
Plan	HIV Special Needs Plans (SNP)				
	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Amida Care	91	94	39	80	29
MetroPlus Health Plan	94	97 ▲	46	81	39 ▲
VNSNY CHOICE Select Health	94	92	43	75	31
SNP Statewide Average	93	94	42	79	33

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](http://www.nationalcommitteesforqualityassurance.org).

Medicaid Health Plan Performance

Managing Diabetes Outcomes

Plan	Medicaid Managed Care Plans (MMC)					
	Poor HbA1c Control†	HbA1C Control (<8.0%)	HbA1C Control (<7.0%) for Selected Populations±	Lipids Controlled (<100 mg/dL)	Blood pressure controlled (<140/90 mm Hg)	HbA1c and Lipids Controlled
Affinity Health Plan	26 ▲	55	41	37 ▼	70	31 ▼
CDPHP	39 ▼	51 ▼	36	36 ▼	73 ▲	28 ▼
Excellus Blue Cross BlueShield	40 ▼	51 ▼	37	36 ▼	71	29 ▼
Fidelis Care New York, Inc.	31	59	41	40	71	33
HIP (EmblemHealth)	39 ▼	52 ▼	34 ▼	44	63 ▼	35
HealthNow New York Inc.	37 ▼	56	42	38 ▼	67	32
HealthPlus, an Amerigroup Company	30	60	43	43	75 ▲	35
Healthfirst PHSP, Inc.	35	51 ▼	35 ▼	46	64 ▼	35
Hudson Health Plan	34	62 ▲	51 ▲	41	77 ▲	32
Independent Health	36 ▼	55	39	41	67	32
MVP Health Care	37 ▼	54	41	44	74 ▲	35
MetroPlus Health Plan	27 ▲	64 ▲	43	50 ▲	66	41 ▲
Total Care, A Today's Options of New York Health Plan	39 ▼	53	37	40	75 ▲	29 ▼
UnitedHealthcare Community Plan	29	61 ▲	47 ▲	41	71	36
Univera Community Health	42 ▼	51 ▼	41	36 ▼	63 ▼	28 ▼
WellCare of New York	31	59	42	44	62 ▼	36
MMC Statewide Average	32	57	41	43	69	35
National Average	46	45	34	34	60	*
Plan	HIV Special Needs Plans (SNP)					
	Poor HbA1c Control†	HbA1C Control (<8.0%)	HbA1C Control (<7.0%) for Selected Populations±	Lipids Controlled (<100 mg/dL)	Blood pressure controlled (<140/90 mm Hg)	HbA1c and Lipids Controlled
Amida Care	47 ▼	48 ▼	40 ▼	32 ▼	64	21 ▼
MetroPlus Health Plan	30 ▲	61	56 ▲	53 ▲	64	42 ▲
VNSNY CHOICE Select Health	28 ▲	66 ▲	53	48	61	39 ▲
SNP Statewide Average	35	58	50	44	63	34

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

† For Poor HbA1c Control, a low rate is desirable.

± Additional exclusion criteria are required for this indicator that will result in a different eligible population from all other indicators.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Medications

Medicaid Managed Care Plans (MMC)						
Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Affinity Health Plan	77	91 ▼	87 ▼	90 ▼	63	89 ▼
CDPHP	79	89 ▼	95	88 ▼	65	87 ▼
Excellus Blue Cross BlueShield	80	89 ▼	89	89 ▼	71	88 ▼
Fidelis Care New York, Inc.	83 ▲	93 ▲	96	92 ▲	74 ▲	92 ▲
HIP (EmblemHealth)	76	91 ▼	94	90 ▼	67	89 ▼
HealthNow New York Inc.	64 ▼	79 ▼	77 ▼	80 ▼	56 ▼	77 ▼
HealthPlus, an Amerigroup Company	83	92	93	91	63	91
Healthfirst PHSP, Inc.	80	93 ▲	96	92 ▲	66	91
Hudson Health Plan	69 ▼	92	93	91	73	91
Independent Health	66 ▼	89 ▼	94	87 ▼	68	87 ▼
MVP Health Care	82	88 ▼	--	89	58	86 ▼
MetroPlus Health Plan	82	93 ▲	97	93 ▲	63 ▼	92 ▲
Total Care, A Today's Options of New York Health Plan	67	91	--	90	71	89
UnitedHealthcare Community Plan	75	92	91	91	63	90
Univera Community Health	77	88 ▼	90	87 ▼	62	86 ▼
WellCare of New York	79	91	--	91	55 ▼	90
MMC Statewide Average	79	92	93	91	67	91
National Average	71	88	91	88	66	86
HIV Special Needs Plans (SNP)						
Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Amida Care	NA	100	--	100	73	99
MetroPlus Health Plan	NA	99	--	99	69	98
VNSNY CHOICE Select Health	NA	99	--	99	56	97
SNP Statewide Average	NA	99	--	99	66	98

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

-- Sample size too small to report.

NA Data not available.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

HIV/AIDS Comprehensive Care

Plan	Medicaid Managed Care Plans (MMC)		
	Engaged in Care	Viral Load Monitoring	Syphilis Screening
Affinity Health Plan	82	68	69
CDPHP	92 ▲	76	66
Excellus Blue Cross BlueShield	88 ▲	75	61 ▼
Fidelis Care New York, Inc.	85 ▲	71	70
HIP (EmblemHealth)	70 ▼	52 ▼	60 ▼
HealthNow New York Inc.	87	79	60 ▼
HealthPlus, an Amerigroup Company	83	68	74
Healthfirst PHSP, Inc.	85 ▲	72 ▲	76 ▲
Hudson Health Plan	91 ▲	78 ▲	74
Independent Health	84	74	58 ▼
MVP Health Care	72	70	49 ▼
MetroPlus Health Plan	76 ▼	69	77 ▲
Total Care, A Today's Options of New York Health Plan	47 ▼	75	59
UnitedHealthcare Community Plan	64 ▼	62 ▼	67
Univera Community Health	83	73	55 ▼
WellCare of New York	87	59	61
MMC Statewide Average	82	70	71
Plan	HIV Special Needs Plans (SNP)		
	Engaged in Care	Viral Load Monitoring	Syphilis Screening
Amida Care	91 ▲	81	85 ▲
MetroPlus Health Plan	84 ▼	80 ▼	81 ▼
VNSNY CHOICE Select Health	91 ▲	83 ▲	80 ▼
SNP Statewide Average	89	81	82

Legend

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

Notes

- Plans without symbols are consistent with the statewide average.

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 ambulatory follow-up visits within recommended timeframes.

Members with schizophrenia or bipolar disorder are disproportionately more likely to suffer chronic diseases and have a significantly shorter lifespan than the general population. The four measures for people with schizophrenia or bipolar disorder highlight the clinical outcomes and also have the potential to identify members at greater risk for morbidity and mortality from adverse outcomes resulting from a lack of adherence to appropriate medications, preventive care, and treatment.

Measure Descriptions

Measure	Description (Type of Insurance Product)
Antidepressant Medication Management	<p>This measure is for members, ages 18 years and older, who were diagnosed with depression and treated with an antidepressant medication. There are two components for this measure. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Effective Acute Phase Treatment: The percentage of members who remained on antidepressant medication during the entire 12-week acute treatment phase. 2. Effective Continuation Phase Treatment: The percentage of members who remained on antidepressant medication for at least six months.
Follow-up After Hospitalization for Mental Illness	<p>This measure is for members, ages 6 years and older, who were hospitalized for treatment of selected mental health disorders and has two time-frame components. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Within 7 Days: The percentage of members who were seen on an ambulatory basis or who were in intermediate treatment with a mental health provider within 7 days of discharge. 2. Within 30 Days: The percentage of members who were seen on an ambulatory basis or who were in intermediate treatment with a mental health provider within 30 days of discharge.
Adherence to Antipsychotic Medications for Individuals with Schizophrenia	The percentage of members, ages 19 to 64 years, during the measurement year with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period. (Medicaid, HIV SNP)
Diabetes Screening for People w/ Schizophrenia or Bipolar Disorder Using Antipsychotic Meds	The percentage of members, ages 18 to 64 years, with schizophrenia or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year. (Medicaid, HIV SNP)

Measure	Description (Type of Insurance Product)
Diabetes Monitoring for People with Diabetes and Schizophrenia	The percentage of members, ages 18 to 64 years, with diabetes and schizophrenia who had both an LDL-C test and an HbA1c test during the measurement year. (Medicaid, HIV SNP)
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	The percentage of members, ages 18 to 64 years, with cardiovascular disease and schizophrenia who had an LDL-C test during the measurement year. (Medicaid, HIV SNP)

Commercial HMO Health Plan Performance

Behavioral 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	68	53	56	70
CDPHP	62	46	65 ▲	85 ▲
Easy Choice Health Plan of NY	84 ▲	79 ▲	--	--
Empire BlueCross BlueShield HMO	64	48	48 ▼	62 ▼
Excellus Blue Cross BlueShield	66 ▲	49	60 ▲	77 ▲
HIP (EmblemHealth)	76 ▲	64 ▲	52	68
HealthNow New York Inc.	58 ▼	42 ▼	66 ▲	80 ▲
Independent Health	66	50	62	79
MVP Health Care	62	45	65	79
Oxford Health Plans of New York	63	49	50 ▼	64 ▼
Univera Healthcare	62	47	31 ▼	44 ▼
Statewide Average	64	49	56	72
National Average	64	47	55	73

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Behavioral 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	75 ▲	65 ▲	61	74
CDPHP Universal Benefits, Inc.	64	49 ▼	71 ▲	85 ▲
CGLIC/CHLIC	55 ▼	34 ▼	53 ▼	69
Empire BlueCross BlueShield PPO	67	51	57	71
GHI (EmblemHealth)	80 ▲	72 ▲	47 ▼	59 ▼
HIP (EmblemHealth)	81 ▲	70 ▲	--	--
MVP Preferred PPO	60 ▼	46 ▼	57	72
Oxford Health Insurance of New York	68	55	57	70
UnitedHealthcare Insurance Company of New York, Inc.	64 ▼	49 ▼	60	75 ▲
Statewide Average	67	53	59	73
National Average	64	49	50	69

Legend

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

Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Behavioral Health

Plan	Medicaid Managed Care Plans (MMC)			
	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	50	35	55 ▼	69 ▼
CDPHP	50	34	60	78
Excellus Blue Cross BlueShield	49	34	50 ▼	70 ▼
Fidelis Care New York, Inc.	51	35	70 ▲	84 ▲
HIP (EmblemHealth)	67 ▲	52 ▲	49 ▼	67 ▼
HealthNow New York Inc.	50	35	62	76
HealthPlus, an Amerigroup Company	48	33	69 ▲	80
Healthfirst PHSP, Inc.	49	34	74 ▲	86 ▲
Hudson Health Plan	49	32	67	83 ▲
Independent Health	50	34	57	71 ▼
MVP Health Care	45 ▼	31	66	80
MetroPlus Health Plan	49	36	49 ▼	68 ▼
Total Care, A Today's Options of New York Health Plan	44 ▼	31	48 ▼	67 ▼
UnitedHealthcare Community Plan	50	36	70 ▲	81 ▲
Univera Community Health	52	36	52 ▼	68 ▼
WellCare of New York	44	29	62	73
Statewide Average	50	35	63	78
National Average	51	35	42	61
Plan	HIV Special Needs Plans (SNP)			
	Antidepressant Medication Management		Follow-up After Hospitalization for Mental Illness	
	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Amida Care	53	38	44	66 ▲
MetroPlus Health Plan	53	41	29 ▼	43 ▼
VNSNY CHOICE Select Health	57	42	46	60
Statewide Average	54	40	40	58

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Schizophrenia and Bipolar Disorder Measures

Plan	Medicaid Managed Care Plans (MMC)			
	Adherence to Antipsychotic Medications for Individuals with Schizophrenia	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Diabetes Screening for People w/ Schizophrenia or Bipolar Disorder Using Antipsychotic Meds	Diabetes Monitoring for People with Diabetes and Schizophrenia
Affinity Health Plan	67 ▲	--	75 ▼	69 ▼
CDPHP	62	--	83	77
Excellus Blue Cross BlueShield	58	--	83	71
Fidelis Care New York, Inc.	61	88	81	75
HIP (EmblemHealth)	65	73	82	72
HealthNow New York Inc.	56	--	68 ▼	63
HealthPlus, an Amerigroup Company	61	75	83	77
Healthfirst PHSP, Inc.	65	92 ▲	86 ▲	83 ▲
Hudson Health Plan	63	--	86	81
Independent Health	55	--	76 ▼	75
MVP Health Care	63	--	84	71
MetroPlus Health Plan	61	85	85 ▲	82
Total Care, A Today's Options of New York Health Plan	51 ▼	--	80	58 ▼
UnitedHealthcare Community Plan	68 ▲	83	80	76
Univera Community Health	52 ▼	--	76	76
WellCare of New York	55	--	83	76
Statewide Average	63	82	82	77
National Average	60	79	79	68
Plan	HIV Special Needs Plans (SNP)			
	Adherence to Antipsychotic Medications for Individuals with Schizophrenia	Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia	Diabetes Screening for People w/ Schizophrenia or Bipolar Disorder Using Antipsychotic Meds	Diabetes Monitoring for People with Diabetes and Schizophrenia
Amida Care	52	--	100	--
MetroPlus Health Plan	59	--	98	86
VNSNY CHOICE Select Health	65	--	98	85
Statewide Average	58	--	99	85

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

-- Sample size too small to report.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

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 and adolescents 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 indicative 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 are 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 youth. Three preventive counseling measures for healthy children and adolescents evaluate plan performance of these activities.

In addition to routine visits with a doctor, adolescents have unique preventive care needs. A set of four measures developed by New York State address assessment and counseling for several areas of concern, including risks associated with sexual activity, depression, tobacco, and substance use.

Measure Descriptions

Measure	Description (Type of Insurance Product)
Child and Adolescent Preventive Care	
Adolescent Immunization Combo	The percentage of members, age 13 years, who had one dose of meningococcal vaccine between their 11th and 13th birthdays and one dose of tetanus, diphtheria and pertussis vaccine between their 10th and their 13th birthdays. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Adolescent Immunization HPV	The percentage of female adolescents 13 years of age who had three doses of the human papillomavirus (HPV) vaccine by their 13th birthday. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Childhood Immunization Status (Combo 3)	The percentage of members, age 2 years, who were fully immunized. The HEDIS specifications for fully immunized consists of the following vaccines: 4 Diphtheria/Tetanus/Pertussis, 3 Polio, 1 Measles/Mumps/Rubella, 3 H Influenza type B, 3 Hepatitis B, 1 Varicella, and 4 pneumococcal. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Lead Testing	The percentage of children, age 2 years, who had their blood tested for lead poisoning at least once by their 2nd birthday. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)

Measure	Description (Type of Insurance Product)
Child and Adolescent Preventive Care (Continued)	
Well-Child Visits in First 15 Months of Life-5 Visits	The percentage of children who had five or more well-child visits with a primary care provider in their first 15 months of life. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	The percentage of children, ages 3 to 6 years, who had one or more well-child visits with a primary care provider during the measurement year. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Adolescent Well-Care Visits	The percentage of adolescents, ages 12 to 21 years, who had at least one comprehensive well-care visit with a primary care provider during the measurement year. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Annual Dental Visit (Ages 2-18)	The percentage of children and adolescents, ages 2 to 18 years, who had at least one dental visit within the measurement year. (Medicaid, Child Health Plus)
Caring for Children and Adolescents with Illness	
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 of children with URI. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Appropriate Testing for Pharyngitis	The percentage of children, ages 2 to 18 years, who were diagnosed with pharyngitis, were prescribed an antibiotic, and who were given a group A streptococcus test. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Use of Appropriate Medications for People with Asthma (Ages 5-18)	The percentage of children, ages 5 to 18 years, with persistent asthma who received at least one appropriate medication to control their condition during the measurement year. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Asthma Medication Ratio (Ages 5-18)	The percentage of members, ages 5 to 18 years, who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Medical Management for People with Asthma 50% Days Covered (Ages 5-18)	The percentage of children, ages 5 to 18 years, with persistent asthma who filled prescriptions for asthma controller medications during at least 50% of their treatment period. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)
Follow-up Care for Children Prescribed ADHD Medications	<p>The percentage of children, ages 6 to 12 years, who were newly prescribed ADHD medication and who had at least three follow-up visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed. There are two measures to assess follow-up care for children taking ADHD medication. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)</p> <ol style="list-style-type: none"> 1. Initiation Phase: The percentage of children with a new prescription for ADHD medication and who had one follow-up visit with a practitioner within the 30 days after starting the medication. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus) 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, in addition to the visit in the Initiation Phase, had at least two follow-up visits in the 9-month period after the initiation phase ended. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus)

Measure	Description (Type of Insurance Product)
Preventive Counseling for Children and Adolescents	
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	The percentage of children and adolescents, ages 3 to 17 years, who had an outpatient visit with a PCP or OB/GYN practitioner during the measurement year, who had their body mass index (BMI) calculated, had counseling for nutrition, and counseling for physical activity. (CO, PPO, MA, CHP)
Adolescent Preventive Care Measures	<p>The percentage of adolescents, ages 12 to 17 years, who had at least one outpatient visit with a PCP or OB/GYN practitioner during the measurement year, and received the following four components of care during the measurement year. (Commercial HMO, Commercial PPO, Medicaid, Child Health Plus):</p> <ol style="list-style-type: none"> 1. Assessment or counseling or education on risk behaviors and preventive actions associated with sexual activity 2. Assessment or counseling or education for depression 3. Assessment or counseling or education about the risks of tobacco use 4. Assessment or counseling or education about the risks of substance use (Substance use includes alcohol, street drugs, non-prescription drugs, prescription drug misuse and inhalant use)

Commercial HMO Health Plan Performance

Child and Adolescent Preventive Care - Immunizations and Screening

Plan	Adolescent Immunization Combo	Adolescent Immunization HPV	Childhood Immunization Status (Combo 3)	Lead Testing
Aetna	68	11 ▼	62 ▼	75
CDPHP	74	15	81 ▲	89 ▲
Easy Choice Health Plan of NY	41 ▼	--	--	--
Empire BlueCross BlueShield HMO	70	11 ▼	62 ▼	75
Excellus Blue Cross BlueShield	72	20 ▲	86 ▲	83 ▲
HIP (EmblemHealth)	78 ▲	17	72	82
HealthNow New York Inc.	75 ▲	17	80 ▲	88 ▲
Independent Health	78 ▲	12	84 ▲	91 ▲
MVP Health Care	71	17	78	82 ▲
Oxford Health Plans of New York	65 ▼	8 ▼	58 ▼	64 ▼
Univera Healthcare	74	18	84 ▲	91 ▲
Statewide Average	72	15	74	78
National Average	68	14	77	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

-- Sample size too small to report.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Child and Adolescent Preventive Care - Well Visits

Plan	Well-Child & Preventive Care Visits in First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	Adolescent Well-Care Visits
Aetna	87	82 ▼	59 ▼
CDPHP	97 ▲	90 ▲	69 ▲
Easy Choice Health Plan of NY	--	66 ▼	41 ▼
Empire BlueCross BlueShield HMO	73 ▼	79 ▼	50 ▼
Excellus Blue Cross BlueShield	95 ▲	85	61
HIP (EmblemHealth)	82 ▼	81 ▼	56 ▼
HealthNow New York Inc.	95 ▲	88 ▲	66 ▲
Independent Health	97 ▲	91 ▲	70 ▲
MVP Health Care	96 ▲	87 ▲	60
Oxford Health Plans of New York	92	85	64 ▲
Univera Healthcare	95	87	64 ▲
Statewide Average	91	85	61
National Average	*	74	45

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Caring for Children and Adolescents with Illness

Plan	Appropriate Treatment for Upper Respiratory Infection (URI)	Appropriate Testing for Pharyngitis	Follow-up Care for Children Prescribed ADHD Medication	
			Initiation Phase	Continuation Phase
Aetna	91	89	43	--
CDPHP	91	93 ▲	49	52
Easy Choice Health Plan of NY	83	67 ▼	--	--
Empire BlueCross BlueShield HMO	93 ▲	84	40	--
Excellus Blue Cross BlueShield	88 ▼	85 ▼	42	47
HIP (EmblemHealth)	92 ▲	86	38	--
HealthNow New York Inc.	89	86	47	56
Independent Health	88	91 ▲	43	54
MVP Health Care	89	90 ▲	42	51
Oxford Health Plans of New York	90	87	47	50
Univera Healthcare	82 ▼	83	52	--
Statewide Average	89	87	44	49
National Average	85	81	40	47

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Caring for Children and Adolescents with Illness - Asthma

Plan	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Asthma Medication Ratio (Ages 5-18)	Medical Management for People with Asthma 50% Days Covered (Ages 5-18)
Aetna	91	77	71
CDPHP	95	87	58
Easy Choice Health Plan of NY	--	--	--
Empire BlueCross BlueShield HMO	93	84	57
Excellus Blue Cross BlueShield	96 ▲	85 ▲	59 ▲
HIP (EmblemHealth)	89 ▼	73 ▼	58
HealthNow New York Inc.	95	81	54
Independent Health	96	85	53
MVP Health Care	94	87	61
Oxford Health Plans of New York	91 ▼	79 ▼	53
Univera Healthcare	100	88	39 ▼
Statewide Average	94	83	57
National Average	*	*	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

-- Sample size too small to report.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Assessment and Counseling for Children and Adolescents

Plan	Weight Assessment			Assessment, Education or Counseling for Adolescents			
	BMI Percentile	Counseling for Nutrition	Counseling for Physical Activity	Sexual Activity	Depression	Tobacco Use	Alcohol and Other Drug Use
Aetna	60 ▼	66 ▼	57 ▼	50	50	52 ▼	50 ▼
CDPHP	86 ▲	84 ▲	76 ▲	66 ▲	58 ▲	78 ▲	75 ▲
Easy Choice Health Plan of NY	29 ▼	38 ▼	33 ▼	19 ▼	13 ▼	19 ▼	18 ▼
Empire BlueCross BlueShield HMO	68	74	68	39 ▼	35 ▼	42 ▼	41 ▼
Excellus Blue Cross BlueShield	80 ▲	80 ▲	77 ▲	65 ▲	65 ▲	77 ▲	72 ▲
HIP (EmblemHealth)	67	70 ▼	57 ▼	56	39 ▼	56 ▼	52 ▼
HealthNow New York Inc.	82 ▲	82 ▲	79 ▲	61 ▲	56 ▲	72 ▲	68 ▲
Independent Health	88 ▲	91 ▲	86 ▲	82 ▲	72 ▲	88 ▲	82 ▲
MVP Health Care	80 ▲	81 ▲	75 ▲	73 ▲	51	80 ▲	74 ▲
Oxford Health Plans of New York	53 ▼	62 ▼	51 ▼	29 ▼	21 ▼	44 ▼	38 ▼
Univera Healthcare	90 ▲	85 ▲	82 ▲	71 ▲	59 ▲	82 ▲	77 ▲
Statewide Average	72	75	68	54	48	64	59
National Average	58	57	54	*	*	*	*

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Child and Adolescent Preventive Care - Immunizations and Screening

Plan	Adolescent Immunization Combo	Adolescent Immunization HPV	Childhood Immunization Status (Combo 3)	Lead Testing
Aetna Life Insurance Company - New York	64	9	67	78
CDPHP Universal Benefits, Inc.	73 ▲	15 ▲	82 ▲	86 ▲
CGLIC/CHLIC	60	7 ▼	71	73
Empire BlueCross BlueShield PPO	69 ▲	10	75 ▲	82 ▲
GHI (EmblemHealth)	66	8	56 ▼	74
HIP (EmblemHealth)	66	8	58	77
MVP Preferred PPO	65	15 ▲	59 ▼	79 ▲
Oxford Health Insurance of New York	62	7	61 ▼	67 ▼
UnitedHealthcare Insurance Company of New York, Inc.	62	10	67	71
Statewide Average	64	9	68	75
National Average	58	11	66	*

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* No national average available.

Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the statewide average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Child and Adolescent Preventive Care - Well Visits

Plan	Well-Child & Preventive Care Visits in First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	Adolescent Well-Care Visits
Aetna Life Insurance Company - New York	92 ▲	84 ▲	59 ▲
CDPHP Universal Benefits, Inc.	95 ▲	88 ▲	65 ▲
CGLIC/CHLIC	92 ▲	84 ▲	61 ▲
Empire BlueCross BlueShield PPO	83 ▼	79 ▼	52 ▼
GHI (EmblemHealth)	87 ▼	81 ▼	55 ▼
HIP (EmblemHealth)	89	81	59
MVP Preferred PPO	95 ▲	85	59
Oxford Health Insurance of New York	91	85 ▲	66 ▲
UnitedHealthcare Insurance Company of New York, Inc.	92 ▲	83	57 ▼
Statewide Average	90	83	58
National Average	*	70	41

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Caring for Children and Adolescents with Illness

Plan	Appropriate Treatment for Upper Respiratory Infection (URI)	Appropriate Testing for Pharyngitis	Follow-up Care for Children Prescribed ADHD Medication	
			Initiation Phase	Continuation Phase
Aetna Life Insurance Company - New York	91	89	45	44
CDPHP Universal Benefits, Inc.	91	90	47	53
CGLIC/CHLIC	91	89	52	60
Empire BlueCross BlueShield PPO	92 ▲	87	44	56
GHI (EmblemHealth)	90	90 ▲	44	52
HIP (EmblemHealth)	91	91	--	--
MVP Preferred PPO	89	87	44	55
Oxford Health Insurance of New York	91	87 ▼	49	53
UnitedHealthcare Insurance Company of New York, Inc.	91	86 ▼	46	50
Statewide Average	91	88	47	52
National Average	83	78	38	45

Legend

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

Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Caring for Children and Adolescents with Illness - Asthma

Plan	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Asthma Medication Ratio (Ages 5-18)	Medical Management for People with Asthma 50% Days Covered (Ages 5-18)
Aetna Life Insurance Company - New York	93	81	75 ▲
CDPHP Universal Benefits, Inc.	92	84	58
CGLIC/CHLIC	96	87 ▲	56
Empire BlueCross BlueShield PPO	94	85	55 ▼
GHI (EmblemHealth)	89 ▼	76 ▼	79 ▲
HIP (EmblemHealth)	--	--	--
MVP Preferred PPO	95	84	56
Oxford Health Insurance of New York	96	82	55 ▼
UnitedHealthcare Insurance Company of New York, Inc.	93	83	55 ▼
Statewide Average	94	83	61
National Average	*	*	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

-- Sample size too small to report.

Notes

• Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Assessment and Counseling for Children and Adolescents

Plan	Weight Assessment			Assessment, Education or Counseling for Adolescents			
	BMI Percentile	Counseling for Nutrition	Counseling for Physical Activity	Sexual Activity	Depression	Tobacco Use	Alcohol and Other Drug Use
Aetna Life Insurance Company - New York	61	58 ▼	53 ▼	50	45 ▲	50	50
CDPHP Universal Benefits, Inc.	87 ▲	81 ▲	76 ▲	64 ▲	50 ▲	74 ▲	71 ▲
CGLIC/CHLIC	68 ▲	68	59	52 ▲	43 ▲	60 ▲	59 ▲
Empire BlueCross BlueShield PPO	71 ▲	73 ▲	70 ▲	45	40	50	51
GHI (EmblemHealth)	59	59	53 ▼	41	29	45	40
HIP (EmblemHealth)	59	61	50 ▼	43	29	43	44
MVP Preferred PPO	NV	NV	NV	NV	NV	NV	NV
Oxford Health Insurance of New York	49 ▼	59	53 ▼	31 ▼	15 ▼	42	36 ▼
UnitedHealthcare Insurance Company of New York, Inc.	54 ▼	61	55	39	27	46	41
Statewide Average	60	64	58	43	33	49	46
National Average	33	36	34	*	*	*	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

NV Plan submitted invalid data.

Notes

• Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Child and Adolescent Preventive Care - Immunizations and Screening

Plan	Adolescent Immunization Combo	Adolescent Immunization HPV	Childhood Immunization Status (Combo 3)	Lead Testing
Affinity Health Plan	75	31	76	87
CDPHP	69	18 ▼	76	82 ▼
Excellus Blue Cross BlueShield	72	25	77	76 ▼
Fidelis Care New York, Inc.	69	25	74	85
HIP (EmblemHealth)	74	17 ▼	63 ▼	85
HealthNow New York Inc.	66 ▼	20 ▼	75	81 ▼
HealthPlus, an Amerigroup Company	69	26	78 ▲	92 ▲
Healthfirst PHSP, Inc.	73	35 ▲	74	92 ▲
Hudson Health Plan	77 ▲	28	78 ▲	86 ▼
Independent Health	73	22 ▼	76	86
MVP Health Care	76 ▲	18 ▼	72	76 ▼
MetroPlus Health Plan	81 ▲	41 ▲	84 ▲	97 ▲
Total Care, A Today's Options of New York Health Plan	76 ▲	35 ▲	78 ▲	85
UnitedHealthcare Community Plan	60 ▼	12 ▼	51 ▼	81 ▼
Univera Community Health	71	17 ▼	76	87
WellCare of New York	64 ▼	31	66 ▼	89
Statewide Average	72	27	73	87
National Average	70	20	71	66

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Child and Adolescent Preventive Care - Well Visits

Plan	Well-Child & Preventive Care Visits in First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	Adolescent Well-Care Visits	Annual Dental Visit (Ages 2-18)
Affinity Health Plan	83	83	61 ▼	61
CDPHP	89 ▲	80 ▼	62 ▼	65 ▲
Excellus Blue Cross BlueShield	90 ▲	78 ▼	60 ▼	61
Fidelis Care New York, Inc.	84 ▲	82 ▼	63 ▼	64 ▲
HIP (EmblemHealth)	73 ▼	79 ▼	62 ▼	61
HealthNow New York Inc.	85	80 ▼	62 ▼	55 ▼
HealthPlus, an Amerigroup Company	82	86 ▲	70 ▲	62 ▲
Healthfirst PHSP, Inc.	82	85 ▲	65 ▲	57 ▼
Hudson Health Plan	87 ▲	86 ▲	64	68 ▲
Independent Health	83	81 ▼	60 ▼	63 ▲
MVP Health Care	86	83	61 ▼	60
MetroPlus Health Plan	86 ▲	85 ▲	65 ▲	61
Total Care, A Today's Options of New York Health Plan	85	83	64	55 ▼
UnitedHealthcare Community Plan	71 ▼	81 ▼	60 ▼	57 ▼
Univera Community Health	90 ▲	79 ▼	63	69 ▲
WellCare of New York	73 ▼	81 ▼	65	55 ▼
Statewide Average	82	83	64	61
National Average	*	71	50	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Caring for Children and Adolescents with Illness

Plan	Appropriate Treatment for Upper Respiratory Infection (URI)	Appropriate Testing for Pharyngitis	Follow-up Care for Children Prescribed ADHD Medication	
			Initiation Phase	Continuation Phase
Affinity Health Plan	92	82 ▼	50 ▼	58
CDPHP	92	87	47 ▼	54 ▼
Excellus Blue Cross BlueShield	88 ▼	83 ▼	44 ▼	54 ▼
Fidelis Care New York, Inc.	91 ▼	90 ▲	59	67
HIP (EmblemHealth)	93 ▲	89 ▲	51	62
HealthNow New York Inc.	86 ▼	77 ▼	54	61
HealthPlus, an Amerigroup Company	92	87	65 ▲	79 ▲
Healthfirst PHSP, Inc.	94 ▲	86	67 ▲	82 ▲
Hudson Health Plan	93	86	56	68
Independent Health	90 ▼	81 ▼	60	68
MVP Health Care	94	88	41 ▼	52
MetroPlus Health Plan	94 ▲	82 ▼	57	62
Total Care, A Today's Options of New York Health Plan	90	69 ▼	59	76
UnitedHealthcare Community Plan	92	88 ▲	58	66
Univera Community Health	89 ▼	83 ▼	53	58
WellCare of New York	92	84 ▼	52	--
Statewide Average	92	87	56	65
National Average	85	66	40	46

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

-- Sample size too small to report.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Caring for Children and Adolescents with Illness - Asthma

Plan	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Asthma Medication Ratio (Ages 5-18)	Medical Management for People with Asthma 50% Days Covered (Ages 5-18)
Affinity Health Plan	85	70	54
CDPHP	87	69	50
Excellus Blue Cross BlueShield	91 ▲	75 ▲	59 ▲
Fidelis Care New York, Inc.	88 ▲	73 ▲	56 ▲
HIP (EmblemHealth)	84	67	53
HealthNow New York Inc.	93 ▲	74	53
HealthPlus, an Amerigroup Company	82 ▼	66 ▼	44 ▼
Healthfirst PHSP, Inc.	85 ▼	68 ▼	56 ▲
Hudson Health Plan	89 ▲	73	45 ▼
Independent Health	91	76	51
MVP Health Care	88	73	52
MetroPlus Health Plan	81 ▼	64 ▼	53
Total Care, A Today's Options of New York Health Plan	91	76	61
UnitedHealthcare Community Plan	90 ▲	73	55
Univera Community Health	90	72	44 ▼
WellCare of New York	88	71	47
Statewide Average	86	69	53
National Average	*	*	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Assessment and Counseling for Children and Adolescents

Plan	Weight Assessment			Assessment, Education or Counseling for Adolescents			
	BMI Percentile	Counseling for Nutrition	Counseling for Physical Activity	Sexual Activity	Depression	Tobacco Use	Alcohol and Other Drug Use
Affinity Health Plan	76	79	73 ▲	70	66	77	73
CDPHP	77	77	64	59 ▼	47 ▼	63 ▼	57 ▼
Excellus Blue Cross BlueShield	77	74	69	64	59	68	64
Fidelis Care New York, Inc.	71	78	72	69	61	81 ▲	69
HIP (EmblemHealth)	62 ▼	64 ▼	52 ▼	62	43 ▼	62 ▼	57 ▼
HealthNow New York Inc.	76	79	73	57 ▼	50 ▼	69	62 ▼
HealthPlus, an Amerigroup Company	79 ▲	73	66	65	56	76	70
Healthfirst PHSP, Inc.	66 ▼	72 ▼	62 ▼	73	66	70	71
Hudson Health Plan	88 ▲	82 ▲	79 ▲	62	59	69	66
Independent Health	75	83 ▲	73	67	55	78	70
MVP Health Care	78	80	68	64	57	82 ▲	71
MetroPlus Health Plan	86 ▲	86 ▲	65	74	71 ▲	77	78 ▲
Total Care, A Today's Options of New York Health Plan	87 ▲	80	74 ▲	67	73 ▲	73	67
UnitedHealthcare Community Plan	84 ▲	86 ▲	82 ▲	75	73 ▲	79	76
Univera Community Health	82 ▲	79	73 ▲	68	63	75	68
WellCare of New York	70 ▼	69 ▼	62 ▼	60 ▼	50 ▼	68	62 ▼
Statewide Average	75	77	68	69	61	74	70
National Average	57	59	51	*	*	*	*

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

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® 5.0 questionnaires. Commercial plans collect satisfaction data through CAHPS for their 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. Medicaid members were last surveyed in late 2013. The data presented here are from that survey for adults only.

Measure Descriptions

Measure	Description (Type of Insurance Product)
Provider Network	
Board Certification	The percentage of physicians whose board certification is active as of December 31 of the measurement year. Results are collected for the following fields: family medicine, internal medicine, obstetrics and gynecology, and pediatrics. (CO, PPO, MA, HIV SNP)
Satisfaction with Provider Communication	The percentage of members who responded "usually" or "always" when asked how often their doctor listened to them carefully, explained things in a way they could understand, showed respect for what they had to say, and spent enough time with them. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
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) when asked "How would you rate your personal doctor?" (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
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?" (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)

Commercial HMO Health Plan Performance

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	80 ▲	77	83 ▲	94	83	84
CDPHP	86 ▲	82 ▲	78	83	95	88 ▲	87 ▲
Easy Choice Health Plan of NY	60 ▼	63 ▼	67 ▼	64 ▼	90 ▼	78 ▼	61 ▼
Empire BlueCross BlueShield HMO	76 ▼	77	78	79	96 ▲	87	84
Excellus Blue Cross BlueShield	79	83 ▲	81	79	96	84	81
HIP (EmblemHealth)	81	79	73 ▼	79	93	87	86
HealthNow New York Inc.	84 ▲	79	77	88 ▲	96 ▲	86	85
Independent Health	81	70 ▼	76	82	95	86	82
MVP Health Care	83 ▲	78	79	86 ▲	95	86	87 ▲
Oxford Health Plans of New York	75 ▼	79 ▲	83 ▲	81	94	83	82
Univera Healthcare	81	77	80	78	93	79 ▼	81
Statewide Average	79	78	78	81	94	84	82
National Average	*	*	*	*	95	85	85

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

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

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

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	80 ▲	79	76 ▼	83 ▲	93	83	78
CDPHP Universal Benefits, Inc.	86 ▲	82 ▲	78	83	97 ▲	88	85
CGLIC/CHLIC	72 ▼	80 ▲	NV	71 ▼	95	85	85
Empire BlueCross BlueShield PPO	78	77 ▼	79	80	92	77 ▼	75 ▼
GHI (EmblemHealth)	75 ▼	76 ▼	71 ▼	79	94	89	88 ▲
HIP (EmblemHealth)	80 ▲	79	73 ▼	79	93	89 ▲	88 ▲
MVP Preferred PPO	83 ▲	78	79	86 ▲	96	87	86
Oxford Health Insurance of New York	75 ▼	79	83 ▲	81	95	84	80
UnitedHealthcare Insurance Company of New York, Inc.	76	80	84 ▲	84 ▲	96 ▲	87	83
Statewide Average	77	78	78	80	95	85	83
National Average	*	*	*	*	95	85	84

Legend

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

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Board Certification

Plan	Medicaid Managed Care Plans (MMC)			
	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics
Affinity Health Plan	78	79	NV	78
CDPHP	85 ▲	81	77	83
Excellus Blue Cross BlueShield	79	83 ▲	81	79
Fidelis Care New York, Inc.	83 ▲	83 ▲	86 ▲	82 ▲
HIP (EmblemHealth)	79	77	70 ▼	78
HealthNow New York Inc.	83 ▲	77	78	85
HealthPlus, an Amerigroup Company	62 ▼	78	75 ▼	77 ▼
Healthfirst PHSP, Inc.	76	81 ▲	78	82
Hudson Health Plan	81	77	74	78
Independent Health	82	71 ▼	76	82
MVP Health Care	83 ▲	78	79	86 ▲
MetroPlus Health Plan	75	73 ▼	60 ▼	75 ▼
Total Care, A Today's Options of New York Health Plan	89 ▲	87	82	88
UnitedHealthcare Community Plan	75 ▼	79	82 ▲	82 ▲
Univera Community Health	77	73	76	74
WellCare of New York	72 ▼	75 ▼	65 ▼	74 ▼
MMC Statewide Average	78	78	78	80
National Average	74	76	75	80
Plan	HIV Special Needs Plans (SNP)			
	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics
Amida Care	75 ▲	82 ▲	80 ▲	72 ▲
MetroPlus Health Plan	--	74	60 ▲	75 ▲
VNSNY CHOICE Select Health	44 ▼	60 ▼	26 ▼	41 ▼
SNP Statewide Average	57	69	55	64

Legend

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

Notes

- Plans without symbols are consistent with the statewide average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Provider Satisfaction

Plan	Medicaid Managed Care Plans (MMC)		
	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Affinity Health Plan	89	78	76
CDPHP	92 ▲	80	74
Excellus Blue Cross BlueShield	91	76	76
Fidelis Care New York, Inc.	88	77	72
HIP (EmblemHealth)	89	83 ▲	73
HealthNow New York Inc.	88	74	73
HealthPlus, an Amerigroup Company	89	76	73
Healthfirst PHSP, Inc.	89	79	73
Hudson Health Plan	91	81	80
Independent Health	90	76	76
MVP Health Care	92	82 ▲	81
MetroPlus Health Plan	87	72 ▼	73
Total Care, A Today's Options of New York Health Plan	87	70 ▼	75
UnitedHealthcare Community Plan	90	83 ▲	78
Univera Community Health	88	76	78
WellCare of New York	91	83 ▲	79
MMC Statewide Average	89	78	76
National Average	89	79	80
Plan	HIV Special Needs Plans (SNP)		
	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Amida Care	94	90	72
MetroPlus Health Plan	95	91	75
VNSNY CHOICE Select Health	93	88	75
SNP Statewide Average	94	90	74

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

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 a member's health care experience: accessing care, interactions with healthcare providers, and interactions with the health plan.

Commercial data is from the CAHPS 5.0 survey conducted in 2013 for adult commercial members who were enrolled in their health plan for at least 12 months.

Members were asked to describe their experiences within the past 12 months. This data is 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. Members were asked to describe their experiences in the past 6 months. Medicaid enrollees were last surveyed by the Department in late 2013. The data presented here are from that survey for adults only.

Measure Descriptions

Measure	Description (Type of Insurance Product)
Satisfaction with Access to Care and Health Plan for Adults	
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, they received care they needed. The following questions are contained in this composite: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. How often was it easy to get the care, tests, or treatment you needed? 2. How often did you get an appointment to see a specialist as soon as you needed?
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, they received health services quickly. The following questions are contained in this composite: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. When you needed care right away, how often did you get care as soon as you needed? 2. How often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?
Claims Processing	<p>The percentage of members responding "usually" or "always" when asked a set of questions to identify how, in the last 12 months, their health plan handled claims. The following questions are contained in this composite: (Commercial HMO, Commercial 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?

Measure	Description (Type of Insurance Product)
Satisfaction with Access to Care for Adults (Continued)	
Plan Information on Cost	<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: (Commercial HMO, Commercial 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?
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, they used their health plan's customer service. The following questions are contained in this composite: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</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. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p>
Satisfaction with Experience of Care for Adults	
Shared Decision Making	<p>The percentage of members responding "definitely 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: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. When you talked about starting or stopping a prescription medication, how much did a doctor or other health provider talk about the reasons you might want to take a medicine? 2. When you talked about starting or stopping a prescription medication, how much did a doctor or other health provider talk about the reasons you might not want to take a medicine? 3. When you talked about starting or stopping a prescription medication, did a doctor or other health provider ask you what you thought 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. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p>
Wellness Discussion	<p>The percentage who responded "yes" when asked if, in the past 6 months, they discussed with a doctor or other health care provider specific things they could do to prevent illness. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p>

Measure	Description (Type of Insurance Product)
Satisfaction with Experience of Care for Adults (Continued)	
Rating of Overall Healthcare	The percentage of members responding 8, 9 or 10 on scale of 0 to 10, where 0 is the worst healthcare possible and 10 is the best healthcare possible. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Getting Needed Counseling or Treatment	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. (Medicaid, HIV SNP)
Rating of Counseling or Treatment	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. (Medicaid, HIV SNP)

Commercial HMO Health Plan Performance

Satisfaction with Access to Care and Health Plan for Adults

Plan	Satisfaction with Access to Care		Satisfaction with Health Plan			
	Getting Care Needed	Getting Care Quickly	Claims Processing	Plan Information on Cost	Customer Service	Rating of Health Plan
Aetna	88	87	87	63	90	72 ▲
CDPHP	93 ▲	93 ▲	94 ▲	77 ▲	96 ▲	83 ▲
Easy Choice Health Plan of NY	76 ▼	74 ▼	45 ▼	41 ▼	65 ▼	38 ▼
Empire BlueCross BlueShield HMO	88	86	87	59	87	69
Excellus Blue Cross BlueShield	92 ▲	89	89	NA	84	66
HIP (EmblemHealth)	82 ▼	82 ▼	87	63	86	78 ▲
HealthNow New York Inc.	91 ▲	90 ▲	93 ▲	69	91 ▲	72 ▲
Independent Health	92 ▲	91 ▲	93 ▲	74 ▲	91 ▲	69
MVP Health Care	90	92 ▲	90 ▲	73 ▲	85	70
Oxford Health Plans of New York	84	84	84	53 ▼	86	49 ▼
Univera Healthcare	89	89	84	66	87	56 ▼
Statewide Average	88	87	85	64	86	66
National Average	88	87	89	*	88	68

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

NA Data not available.

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Satisfaction with Experience of Care for Adults

Plan	Shared Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Healthcare
Aetna	49	82	81	73
CDPHP	53 ▲	83	79	86 ▲
Easy Choice Health Plan of NY	46	77	72	57 ▼
Empire BlueCross BlueShield HMO	47	81	79	80
Excellus Blue Cross BlueShield	45	85	73	85 ▲
HIP (EmblemHealth)	45	84	80	77
HealthNow New York Inc.	45	86	79	83 ▲
Independent Health	47	89 ▲	82 ▲	82 ▲
MVP Health Care	51	87	72 ▼	85 ▲
Oxford Health Plans of New York	47	81	70 ▼	72 ▼
Univera Healthcare	43	82	80	76
Statewide Average	47	83	77	78
National Average	*	*	*	78

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Satisfaction with Access to Care and Health Plan for Adults

Plan	Satisfaction with Access to Care		Satisfaction with Health Plan			
	Getting Care Needed	Getting Care Quickly	Claims Processing	Plan Information on Cost	Customer Service	Rating of Health Plan
Aetna Life Insurance Company - New York	80 ▼	81 ▼	89	51	83	58 ▼
CDPHP Universal Benefits, Inc.	92 ▲	90 ▲	93 ▲	64 ▲	86	70 ▲
CGLIC/CHLIC	86	86	85	53	85	62
Empire BlueCross BlueShield PPO	86	86	86	66	92 ▲	70
GHI (EmblemHealth)	87	85	82	55	75 ▼	66
HIP (EmblemHealth)	77 ▼	77 ▼	88	49 ▼	83	70 ▲
MVP Preferred PPO	90 ▲	91 ▲	89	60	94 ▲	56 ▼
Oxford Health Insurance of New York	83	89	75 ▼	53	83	57 ▼
UnitedHealthcare Insurance Company of New York, Inc.	90 ▲	92 ▲	88	61	85	71 ▲
Statewide Average	86	86	86	57	85	65
National Average	88	87	88	*	86	60

Legend

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

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Satisfaction with Experience of Care for Adults

Plan	Shared Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Healthcare
Aetna Life Insurance Company - New York	50	73	79	70 ▼
CDPHP Universal Benefits, Inc.	55 ▲	89 ▲	81	79
CGLIC/CHLIC	49	79	76	79
Empire BlueCross BlueShield PPO	48	72	72	75
GHI (EmblemHealth)	47	73	72	77
HIP (EmblemHealth)	37 ▼	83	73	75
MVP Preferred PPO	47	81	79	79
Oxford Health Insurance of New York	51	76	76	78
UnitedHealthcare Insurance Company of New York, Inc.	45	82	83 ▲	79
Statewide Average	48	79	77	77
National Average	*	*	*	77

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

* No national average available.

Notes

- The satisfaction rates presented here reflect only members residing in New York. These rates may differ from other publications of CAHPS data.
- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Satisfaction with Access to Care and Health Plan for Adults

Plan	Medicaid Managed Care Plans (MMC)			
	Satisfaction with Access to Care		Satisfaction with Health Plan	
	Getting Care Needed	Getting Care Quickly	Customer Service	Rating of Health Plan
Affinity Health Plan	77	75	85	75
CDPHP	82 ▲	83 ▲	86	80
Excellus Blue Cross BlueShield	83 ▲	84 ▲	81	78
Fidelis Care New York, Inc.	78	77	81	75
HIP (EmblemHealth)	73 ▼	73 ▼	79	72
HealthNow New York Inc.	79	80	84	68 ▼
HealthPlus, an Amerigroup Company	76	71 ▼	82	75
Healthfirst PHSP, Inc.	72 ▼	76	83	79
Hudson Health Plan	84 ▲	84 ▲	91 ▲	82 ▲
Independent Health	80	82 ▲	84	80 ▲
MVP Health Care	84 ▲	82 ▲	86	79
MetroPlus Health Plan	72 ▼	71 ▼	78	77
Total Care, A Today's Options of New York Health Plan	78	80	76	67 ▼
UnitedHealthcare Community Plan	76	75	79	73
Univera Community Health	82 ▲	81	83	80
WellCare of New York	74	74	81	75
MMC Statewide Average	78	78	82	76
National Average	80	81	87	75
Plan	HIV Special Needs Plans (SNP)			
	Satisfaction with Access to Care		Satisfaction with Health Plan	
	Getting Care Needed	Getting Care Quickly	Customer Service	Rating of Health Plan
Amida Care	83 ▲	86	82	75
MetroPlus Health Plan	80	85	84	80 ▲
VNSNY CHOICE Select Health	77	80 ▼	77	71 ▼
SNP Statewide Average	80	84	81	75

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

Notes

• Plans without symbols are consistent with the statewide average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Satisfaction with Experience of Care for Adults

Plan	Medicaid Managed Care Plans (MMC)					
	Shared Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Healthcare	Getting Needed Counseling or Treatment	Rating of Counseling or Treatment
Affinity Health Plan	49	81	68	70	66	63
CDPHP	53	86 ▲	78 ▲	76 ▲	78	66
Excellus Blue Cross BlueShield	49	82	71	73	69	62
Fidelis Care New York, Inc.	49	74	65 ▼	71	67	60
HIP (EmblemHealth)	43	70 ▼	73	68	68	61
HealthNow New York Inc.	48	72	71	66	73	57
HealthPlus, an Amerigroup Company	49	77	62 ▼	70	60	59
Healthfirst PHSP, Inc.	51	78	69	70	66	68
Hudson Health Plan	56 ▲	80	71	75	79	64
Independent Health	47	80	74	70	81 ▲	69
MVP Health Care	51	80	75	76 ▲	72	56
MetroPlus Health Plan	48	72	71	65 ▼	73	58
Total Care, A Today's Options of New York Health Plan	45	76	68	69	63	59
UnitedHealthcare Community Plan	43	81	68	71	73	64
Univera Community Health	48	77	76 ▲	77 ▲	75	64
WellCare of New York	46	78	71	74	58	50
MMC Statewide Average	48	78	71	71	70	61
National Average	51	*	*	71	*	*
Plan	HIV Special Needs Plans (SNP)					
	Shared Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Healthcare	Getting Needed Counseling or Treatment	Rating of Counseling or Treatment
Amida Care	63	86	89	80	81	68
MetroPlus Health Plan	64	88	87	80	73	66
VNSNY CHOICE Select Health	55 ▼	88	88	77	74	64
SNP Statewide Average	61	87	88	79	76	66

Legend

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

Notes

- Plans without symbols are consistent with the statewide average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

This report presents several indicators of parents' satisfaction with the care their child received. These measures are from the CAHPS® survey, which assesses satisfaction with: accessing care, experiences with healthcare providers, and the health plan.

In 2012, NYSDOH sponsored a CAHPS survey for children enrolled in Medicaid and Child Health Plus for at least six months. The children's CAHPS survey asks parents about satisfaction with providers and services applicable to all children, and also asks questions about services often used by children with health care conditions or special needs. Measures included in the child CAHPS regarding special needs are:

- Access to Specialized Services
- Family-Centered Care
- Coordination of Care for Children with Chronic Conditions

Plan results reflect combined CHP and Medicaid responses. One plan had only one product; the plan specific results are not displayed although the data is included in the statewide results.

Measure Descriptions

Measure	Description (Type of Insurance Product)
Satisfaction with Experience of Care for Children	
Collaborative Decision Making for Children	<p>The percentage of parents responding "yes" when asked a set of questions to identify if, in the last 6 months, they made healthcare decisions with their child's doctor. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid and Child Health Plus combined)</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 child's treatment or healthcare? 2. When there was more than one choice for your child's treatment of healthcare, did a doctor or other health provider ask which choice was best for you?
Coordination of Care for Children with Chronic Conditions	<p>The percentage of parents responding "yes" when asked a set of questions to identify if, in the last 6 months, they received needed healthcare coordination with daycare, school, or other healthcare providers. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid and Child Health Plus combined)</p> <ol style="list-style-type: none"> 1. Did you get the help you needed from your child's doctor or other health providers in contacting your child's school or daycare? 2. Did anyone from your child's health plan, doctor's office or clinic help you coordinate your child's care among different providers or health care services?
Rating of Overall Healthcare for Children	<p>The percentage of parents responding 8, 9 or 10 on scale of 0 to 10, where 0 is the worst healthcare possible and 10 is the best healthcare possible. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. (Medicaid and Child Health Plus combined)</p>

Measure	Description (Type of Insurance Product)
Satisfaction with Providers for Children	
Satisfaction with Personal Doctor for Children	The percentage of parents 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) when asked "How would you rate your child's personal doctor?" This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. (Medicaid and Child Health Plus combined)
Satisfaction with Specialist for Children	The percentage of parents 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 the specialist your child sees most often?" This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. (Medicaid and Child Health Plus combined)
Satisfaction with Provider Communication for Children	The percentage of parents who responded "usually" or "always" when asked how often their doctor listened to them carefully, explained things in a way they could understand, showed respect for what they had to say, and spent enough time with them. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. (Medicaid and Child Health Plus combined)
Family-Centered Care: Personal Doctor Who Knows Child	<p>The percentage of parents responding "yes" when asked a set of questions to identify if, in the last 6 months, their child's doctor knew about the child's and family's daily living needs. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid and Child Health Plus combined)</p> <ol style="list-style-type: none"> 1. Did your child's personal doctor talk with you about how your child is feeling, growing, or behaving? 2. Does your child's personal doctor understand how the child's medical, behavioral, or other health conditions affect your child's day-to-day life? 3. Does your child's personal doctor understand how the child's medical, behavioral, or other health conditions affect your family's day-to-day life?
Satisfaction with Access to Care for Children	
Getting Care Needed for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify if, in the last 6 months, their child received care they needed. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid and Child Health Plus combined)</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 your child needed through your health plan?

Measure	Description (Type of Insurance Product)
Satisfaction with Access to Care for Children (Continued)	
Getting Care Quickly for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify if, in the last 6 months, their child received health services quickly. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid and Child Health Plus combined)</p> <ol style="list-style-type: none"> 1. When your child needed care right away for an illness, injury, or condition, how often did your child get care as soon as you wanted? 2. Not counting the times your child needed health care right away, how often did your child get an appointment for health care as soon as you wanted?
Access to Prescription Medicines for Children	<p>The percentage of parents responding "usually" or "always" when asked how often in the past 6 months, it was easy to get prescription medicines for their child through the child's health plan. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. (Medicaid and Child Health Plus combined)</p>
Access to Specialized Services for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify, if, in the past 6 months, the child received the specialized services the child needed. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid and Child Health Plus combined)</p> <ol style="list-style-type: none"> 1. How often was it easy to get special medical equipment or devices for your child? 2. How often was it easy to get physical, occupational, or speech therapy for your child? 3. How often was it easy to get emotional, developmental, or behavioral treatment or counseling for your child?
Satisfaction with Health Plan Care for Children	
Customer Service for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify if, in the last 6 months, they used their child's health plan's customer service. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid and Child Health Plus combined)</p> <ol style="list-style-type: none"> 1. How often did your child's health plan's customer service give you the information or help you needed? 2. How often did your child's health plan's customer service staff treat you with courtesy and respect?
Rating of Health Plan for Children	<p>The percentage of parents responding 8, 9 or 10 on scale of 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible. This measure was not collected for 2013 Medicaid; 2012 Medicaid data is presented in this report. (Medicaid and Child Health Plus combined)</p>

Medicaid/Child Health Plus Health Plan Performance

Satisfaction with Access to Care and Health Plan for Children

Plan	Satisfaction with Access to Care				Satisfaction with Health Plan	
	Getting Care Needed for Children **	Getting Care Quickly for Children **	Access to Specialized Services for Children **	Access to Prescription Medicines for Children **	Customer Service for Children **	Rating of Health Plan for Children **
Affinity Health Plan	81	86	68	90	90 ▲	84
CDPHP	86 ▲	93 ▲	85 ▲	93 ▲	85	88 ▲
Excellus Blue Cross BlueShield	82	92 ▲	70	95 ▲	89	84
Fidelis Care New York, Inc.	77	88	75	94 ▲	84	83
HIP (EmblemHealth)	77	83	64	88	79	76 ▼
HealthNow New York Inc.	84 ▲	92 ▲	76	94 ▲	84	83
HealthPlus, an Amerigroup Company	80	81 ▼	70	87	86	84
Healthfirst PHSP, Inc.	72 ▼	81 ▼	65	87	82	84
Hudson Health Plan	82	87	77	90	93 ▲	89 ▲
Independent Health	79	89	77	93	86	87 ▲
MVP Health Care	83	90 ▲	81 ▲	93 ▲	85	83
MetroPlus Health Plan	70 ▼	74 ▼	70	84 ▼	81	86 ▲
Total Care, A Today's Options of New York Health Plan	75	86	72	86	80	73 ▼
UnitedHealthcare Community Plan	74	85	67	87	81	74 ▼
Univera Community Health	80	90 ▲	76	93	88	88 ▲
WellCare of New York	71	78 ▼	55 ▼	83 ▼	85	72 ▼
Statewide Average	78	86	71	90	85	82

Legend

▲ Significantly better than the **statewide** average.▼ Significantly worse than the **statewide** average.

** Rotated measure. Data is from 2012.

Notes

• Plans without symbols are consistent with the **statewide** average.

Medicaid/Child Health Plus Health Plan Performance

Satisfaction with Experience of Care for Children

Plan	Collaborative Decision Making for Children **	Coordination of Care for Children with Chronic Conditions **	Rating of Overall Healthcare for Children **
Affinity Health Plan	80 ▼	73	82
CDPHP	92 ▲	69	89 ▲
Excellus Blue Cross BlueShield	90	79 ▲	90 ▲
Fidelis Care New York, Inc.	84	78	85
HIP (EmblemHealth)	83	78	79 ▼
HealthNow New York Inc.	87	76	86
HealthPlus, an Amerigroup Company	87	70	82
Healthfirst PHSP, Inc.	88	71	83
Hudson Health Plan	87	75	85
Independent Health	90	68	86
MVP Health Care	90	78	85
MetroPlus Health Plan	87	72	80
Total Care, A Today's Options of New York Health Plan	89	73	77 ▼
UnitedHealthcare Community Plan	85	74	82
Univera Community Health	88	78	85
WellCare of New York	82	74	80
Statewide Average	87	74	83

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

** Rotated measure. Data is from 2012.

Notes

- Plans without symbols are consistent with the **statewide** average.

Medicaid/Child Health Plus Health Plan Performance

Satisfaction with Providers for Children

Plan	Satisfaction with Personal Doctor for Children **	Satisfaction with Specialist for Children **	Satisfaction with Provider Communication for Children **	Family-Centered Care: Personal Doctor Who Knows Child **
Affinity Health Plan	87	81	91	91
CDPHP	93 ▲	82	96 ▲	92 ▲
Excellus Blue Cross BlueShield	90	83	95 ▲	90
Fidelis Care New York, Inc.	90	79	93	89
HIP (EmblemHealth)	89	78	93	89
HealthNow New York Inc.	87	72	95 ▲	85
HealthPlus, an Amerigroup Company	87	78	91	86
Healthfirst PHSP, Inc.	87	77	92	87
Hudson Health Plan	91	80	94	87
Independent Health	87	81	92	88
MVP Health Care	91	86 ▲	93	91
MetroPlus Health Plan	85	60 ▼	89 ▼	78 ▼
Total Care, A Today's Options of New York Health Plan	88	81	93	87
UnitedHealthcare Community Plan	90	78	94	86
Univera Community Health	89	77	94	87
WellCare of New York	89	72	91	87
Statewide Average	89	78	93	88

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

** Rotated measure. Data is from 2012.

Notes

- Plans without symbols are consistent with the **statewide** average.

There are a number of conditions affecting women that 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 receive appropriate services, including on-going family planning.

Risk-adjusted Low-Birthweight (LBW), Prenatal Care in the First Trimester, Late Pre-Term Deliveries, and Risk-Adjusted Primary Cesarean Sections are calculated by the NYSDOH using birth data submitted by the health plans and the Department's Bureau of Health Informatics. These measures reflect results of perinatal care for women who had a live birth during 2012. 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 Descriptions

Measure	Description (Type of Insurance Product)
Women's Preventive Care	
Breast Cancer Screening	The percentage of women, ages 50 to 74 years, who had a mammogram anytime on or between October 1 two years prior to the measurement year and December 31 of the measurement year. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Chlamydia Screening (Ages 16-24)	The percentage of sexually active young women, ages 16 to 24 years, who had at least one test for Chlamydia during the measurement year. The measure is reported separately for ages 16 to 20 years and 21 to 24 years. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
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 for 2013; 2012 data is presented in this report. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Postpartum Care	The percentage of women who gave birth in the last year who had a postpartum care visit between 21 and 56 days after they gave birth. This measure was not collected for 2013; 2012 data is presented in this report. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
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 for 2013; 2012 data is presented in this report. (Medicaid, HIV SNP)

Measure	Description (Type of Insurance Product)
Perinatal Care	
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.
Risk-Adjusted Low Birthweight (LBW)	The percentage of live infants weighing less than 2500 grams among all deliveries by women continuously enrolled in a plan for 10 or more months.
Risk-Adjusted Primary Cesarean Delivery	The percentage of live infants born by cesarean delivery to women, continuously enrolled for 10 or more months, who had no prior cesarean deliveries.
Vaginal Birth After Cesarean Section (VBAC)	The percentage of women continuously enrolled for 10 or more months who delivered a live birth vaginally after having had a prior cesarean delivery.

Commercial HMO Health Plan Performance

Preventive Care for Women

Plan	Breast Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care **	Postpartum Care **
Aetna	68 ▼	60 ▲	67 ▲	91	67 ▼
CDPHP	79 ▲	60 ▲	68 ▲	96 ▲	88 ▲
Easy Choice Health Plan of NY	62 ▼	53	61	82	47 ▼
Empire BlueCross BlueShield HMO	67 ▼	59 ▲	65 ▲	89	72
Excellus Blue Cross BlueShield	76 ▲	43 ▼	52 ▼	96 ▲	89 ▲
HIP (EmblemHealth)	76 ▲	76 ▲	77 ▲	83 ▼	75
HealthNow New York Inc.	73	58 ▲	62	82 ▼	70
Independent Health	76 ▲	54	60	97 ▲	88 ▲
MVP Health Care	73	50 ▼	60	94 ▲	80 ▲
Oxford Health Plans of New York	69 ▼	54	63 ▲	90	70 ▼
Univera Healthcare	74	52	57 ▼	90	88 ▲
Statewide Average	74	54	61	89	75
National Average	74	41	50	91	81

Legend

▲ Significantly better than the **statewide** average.

▼ Significantly worse than the **statewide** average.

** Rotated measure. Data is from 2012.

Notes

• Plans without symbols are consistent with the **statewide** average.

• National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Perinatal Health †

Plan	Plan represented in Rest of State			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight (LBW) *	Risk-Adjusted Primary Cesarean Delivery *	Vaginal Birth After Cesarean Section (VBAC)
Aetna	83	5.6	25	5.7
CDPHP	85	3.5	23	9.8
Empire BlueCross BlueShield HMO	89	6.0	27	5.5
Excellus Blue Cross BlueShield	90 ▲	3.9 ▲	22 ▲	8.5
HIP (EmblemHealth)	85	6.2	30 ▼	5.4
HealthNow New York Inc.	83 ▼	4.8	23	8.2
Independent Health	84 ▼	4.6	24	8.2
MVP Health Care	86	4.4	24	10.6
Oxford Health Plans of New York	87	5.1	28 ▼	9.2
Univera Healthcare	84	4.8	26	6.9
Regional Average	87	4.5	24	8.2
Statewide Average	86	4.9	24	9.9
Plan	Plan represented in NYC			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight (LBW) *	Risk-Adjusted Primary Cesarean Delivery *	Vaginal Birth After Cesarean Section (VBAC)
Aetna	86	4.9	26	12.8
Easy Choice Health Plan of NY	82	3.1	20	--
Empire BlueCross BlueShield HMO	84	5.7	20	17.5
HIP (EmblemHealth)	85	6.2	26	11.5
Oxford Health Plans of New York	84	6.4	22	18.9
Regional Average	84	6.1	23	15.6
Statewide Average	86	4.9	24	9.9

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

-- Sample size too small to report.

* A lower rate is desirable. For more information about the risk-adjustment methodologies, see the [Technical Notes](#) section.

† Data is from 2012.

Notes

• Plans without symbols are consistent with the statewide average.

Commercial PPO Health Plan Performance

Preventive Care for Women

Plan	Breast Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care **	Postpartum Care **
Aetna Life Insurance Company - New York	69 ▲	55 ▼	65	91	72
CDPHP Universal Benefits, Inc.	75 ▲	58	66	96 ▲	89 ▲
CGLIC/CHLIC	70 ▲	56	66	94 ▲	79 ▲
Empire BlueCross BlueShield PPO	68 ▲	59	67 ▲	90	68
GHI (EmblemHealth)	64 ▼	54 ▼	64	85 ▼	70
HIP (EmblemHealth)	70 ▲	57	68	85 ▼	71
MVP Preferred PPO	73 ▲	50 ▼	60 ▼	62 ▼	38 ▼
Oxford Health Insurance of New York	70 ▲	52 ▼	63 ▼	92	69
UnitedHealthcare Insurance Company of New York, Inc.	62 ▼	60 ▲	67 ▲	83 ▼	67 ▼
Statewide Average	65	57	66	90	73
National Average	70	38	46	82	71

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

** Rotated measure. Data is from 2012.

Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the statewide average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Perinatal Health †

Plan	Plan represented in Rest of State			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight (LBW) *	Risk-Adjusted Primary Cesarean Delivery *	Vaginal Birth After Cesarean Section (VBAC)
Aetna Life Insurance Company - New York	88	4.6	25	8.1
CDPHP Universal Benefits, Inc.	86	4.7	24	13.2 ▲
CGLIC/CHLIC	90	7.5	25	2.1
Empire BlueCross BlueShield PPO	87	4.0	26	5.9
GHI (EmblemHealth)	88	4.5	29	9.8
HIP (EmblemHealth)	86	7.6	26	5.9
MVP Preferred PPO	88	3.9	26	8.6
Oxford Health Insurance of New York	88	4.5	28	6.4
UnitedHealthcare Insurance Company of New York, Inc.	87	4.5	26	4.6
Regional Average	87	4.4	26	6.8
Statewide Average	86	4.8	25	8.2
Plan	Plan represented in NYC			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight (LBW) *	Risk-Adjusted Primary Cesarean Delivery *	Vaginal Birth After Cesarean Section (VBAC)
Aetna Life Insurance Company - New York	85	4.5	26	12.3
CGLIC/CHLIC	85	4.6	23	5.4
Empire BlueCross BlueShield PPO	84	5.5	24	9.3
GHI (EmblemHealth)	87	4.7	24	8.6
HIP (EmblemHealth)	83	5.2	30	12.5
Oxford Health Insurance of New York	85	5.0	26	9.6
UnitedHealthcare Insurance Company of New York, Inc.	85	5.6	25	9.7
Regional Average	85	5.2	25	9.9
Statewide Average	86	4.8	25	8.2

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

* A lower rate is desirable. For more information about the risk-adjustment methodologies, see the [Technical Notes](#) section.

† Data is from 2012.

- Notes**
- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
 - Plans without symbols are consistent with the statewide average.

Medicaid Health Plan Performance

Preventive Care for Women

Plan	Medicaid Managed Care Plans (MMC)					
	Breast Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care **	Postpartum Care **	Frequency of Ongoing Prenatal Care **
Affinity Health Plan	71	75 ▲	76 ▲	91	69	78 ▲
CDPHP	61 ▼	61 ▼	70 ▼	91	70	77 ▲
Excellus Blue Cross BlueShield	65 ▼	53 ▼	68 ▼	91	70	73
Fidelis Care New York, Inc.	71 ▼	69 ▼	72 ▼	89	77 ▲	79 ▲
HIP (EmblemHealth)	69 ▼	72	77 ▲	85 ▼	68	57 ▼
HealthNow New York Inc.	60 ▼	61 ▼	70	78 ▼	62 ▼	42 ▼
HealthPlus, an Amerigroup Company	74 ▲	73 ▲	76 ▲	87	64 ▼	63 ▼
Healthfirst PHSP, Inc.	76 ▲	77 ▲	78 ▲	89	67	69
Hudson Health Plan	70	69	74	92 ▲	75 ▲	81 ▲
Independent Health	57 ▼	70	73	90	66	65 ▼
MVP Health Care	60 ▼	63 ▼	75	93 ▲	67	82 ▲
MetroPlus Health Plan	74 ▲	79 ▲	78 ▲	87	66	76 ▲
Total Care, A Today's Options of New York Health Plan	74	68	74	87	73	77 ▲
UnitedHealthcare Community Plan	69 ▼	63 ▼	67 ▼	86	79 ▲	51 ▼
Univera Community Health	57 ▼	64 ▼	72	85	62 ▼	56 ▼
WellCare of New York	73	76 ▲	76	83 ▼	62 ▼	57 ▼
MMC Statewide Average	72	71	74	88	70	70
National Average	58	51	62	82	61	56
Plan	HIV Special Needs Plans (SNP)					
	Breast Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care **	Postpartum Care **	Frequency of Ongoing Prenatal Care **
Amida Care	69 ▼	--	74	--	--	--
MetroPlus Health Plan	79 ▲	70	69	78	41	65
VNSNY CHOICE Select Health	--	--	--	--	--	--
SNP Statewide Average	74	69	76	79	36	63

Legend

- ▲ Significantly better than the statewide average.
- ▼ Significantly worse than the statewide average.
- ** Rotated measure. Data is from 2012.
- Sample size too small to report.

Notes

- Plans without symbols are consistent with the statewide average.
- National average is based on 2014 report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Perinatal Health †

Plan	Plan represented in Rest of State			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight (LBW) *	Risk-Adjusted Primary Cesarean Delivery *	Vaginal Birth After Cesarean Section (VBAC)
Affinity Health Plan	69	8.2	16	10.8
CDPHP	69	6.4	13	11.5
Excellus Blue Cross BlueShield	74 ▲	6.2	14	13.8
Fidelis Care New York, Inc.	70	6.8	14	12.1
HIP (EmblemHealth)	76	9.7	17	5.6
HealthNow New York Inc.	69	8.2	16	9.3
HealthPlus, an Amerigroup Company	70	2.4	13	--
Healthfirst PHSP, Inc.	72	9.5	18	8.3
Hudson Health Plan	69	7.3	16	6.8
Independent Health	73	7.6	19 ▼	9.9
MVP Health Care	72	5.9	15	14.2
Total Care, A Today's Options of New York Health Plan	62 ▼	7.7	12	18.9
UnitedHealthcare Community Plan	73	6.7	17	6.4
Univera Community Health	73	7.4	14	10.3
WellCare of New York	67	6.3	14	8.3
Regional Average	71	7.0	15	10.9
Statewide Average	72	6.6	16	14.3
Plan	Plan represented in NYC			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight (LBW) *	Risk-Adjusted Primary Cesarean Delivery *	Vaginal Birth After Cesarean Section (VBAC)
Affinity Health Plan	72	5.1	16	15.0
Fidelis Care New York, Inc.	75	6.3	16	18.4
HIP (EmblemHealth)	76	6.1	17	17.2
HealthPlus, an Amerigroup Company	75	6.2	17	11.0 ▼
Healthfirst PHSP, Inc.	73	6.6	17	14.7 ▼
MetroPlus Health Plan	64 ▼	6.4	15	13.0 ▼
UnitedHealthcare Community Plan	81 ▲	6.5	14 ▲	37.8 ▲
WellCare of New York	70	6.6	19	14.8
Regional Average	73	6.3	16	17.3
Statewide Average	72	6.6	16	14.3

Legend

▲ Significantly better than the statewide average.

▼ Significantly worse than the statewide average.

-- Sample size too small to report.

* A lower rate is desirable. For more information about the risk-adjustment methodologies, see the [Technical Notes](#) section.

† Data is from 2012.

Notes

• Plans without symbols are consistent with the statewide average.

INTERPRETING THE MEASURES

Plan-specific Rates

The rates reported as part of the 2014 Health Plan Comparison 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 using member-level data submitted by the health 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 composites were calculated as the number of outcomes where the member met the benchmark. The outcome composite 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. In 2004, data elements on the VS file were modified. Because not all data elements were captured by the New York City VS birth file, two different risk-adjusted low birthweight (LBW) models were 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 (LBW) 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

Primary Cesarean Section (PCS) Methodology

To compute the risk-adjusted PCS rates, a logistic regression model was developed. The model predicted a binary response for PCS, i.e., all births were designated as either “PCS” or “not PCS.” 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)
- dx of diabetes (yes, no)
- dx of gestational diabetes (yes, no)
- dx of pre-existing hypertension (yes, no)
- dx of pregnancy related hypertension (yes, no)
- birthweight greater than 4,000g (yes, no)
- birthweight between 500g and 1,500g (yes, no)
- race/ethnicity (white, black, Hispanic, other)
- parity (none, 1 or more previous live births)
- resident of New York City (yes, no)
- presence of infection (yes, no)
- breech presentation (yes, no)
- pre-pregnancy BMI (underweight, normal weight, overweight or obese)
- Medicaid aid category (ADC, Safety Net, MA, SSI, FHP)
- eclampsia (yes, no)
- abruption placenta (yes, no)
- weeks gestation of pregnancy (LT 33, 33-35, 36-38, 39+)

Limitations of the Risk-Adjusted Data

The expected PCS 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 PCS rates multiplied by the overall statewide PCS rate.

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.