



New York State Department of Health

2017 Health Plan Comparison Report

A Report Comparing Quality and Satisfaction Performance Results for Health Plans

QARR Report Series
Issue 2 of 5

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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 (NYS) 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 2015, and the most recent survey for children was done in late 2016.

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 2016 calendar year.

Who Reports?

Managed care plans that were in operation during the entire 2016 calendar year were required to report data. This report contains information on 24 health insurance organizations, all of which report data on one or more product lines, depending on their business lines in New York State. Child Health Plus data has been represented with Medicaid Managed Care data since 2014. 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

Since 2015, NCQA guidelines retired the HEDIS measure rotation policy. The NYSDOH requires health plans to collect all measures specified in the QARR technical specifications.

New measures for the 2016 measurement year are considered first year measures, and consistent with NCQA policy, individual plan rates are not published.

Measure Trending

Sometimes a measure's specifications change. These changes affect the results or alter the target population in such a manner that previous results for the measure are not comparable to current results. In such cases, NYSDOH recommends trending with caution, or not allowing trending.

Measures that had revisions that may affect trending are as follows:

- Colon Cancer Screening
- Shared Decision Making for Children (CAHPS®)

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 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 for Adults and Children
- 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.
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. Child Health Plus data has been represented with Medicaid Managed Care data since 2014.
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, are also available. All reports described below can be found 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 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 NYS 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 2017 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. (https://www.health.ny.gov/health_care/managed_care/consumer_guides/)

Health Plan Service Use in New York State

The Health Plan Service Use in NYS 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 Health Care Disparities report provides information about variation in quality of care received in NYS 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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Information on Health Plans Serving NYS Residents

SECTION

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This section provides an overview of each managed care plan operating in New York State during 2016. 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), or Child Health Plus (CHP). 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 .
2016 Enrollment	The total number of enrollees in the health plans as of December 31, 2016. 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 2015	The percent change in total enrollment between December 31, 2015, and December 31, 2016.

Statewide Plan Profiles

Health Plan	Type of Insurance			Plan Service Area *						Member Services
	HMO	MA	SNP	LI	NYC	HV	NE	CEN	WST	
Affinity Health Plan		✓		✓	✓	✓				1-866-247-5678
Amida Care			✓		✓					1-800-556-0689
CDPHP	✓	✓				✓	✓	✓		1-800-777-2273
Crystal Run Health Plans	✓	✓				✓				1-844-638-6506
Empire BlueCross BlueShield HealthPlus		✓		✓	✓	✓				1-800-809-8009
Empire BlueCross BlueShield HMO	✓			✓	✓	✓	✓			1-800-453-0113
Excellus Blue Cross BlueShield **	✓	✓					✓	✓	✓	1-800-722-7884
Fidelis Care New York, Inc.		✓		✓	✓	✓	✓	✓	✓	1-888-343-3547
Healthfirst PHSP, Inc.		✓		✓	✓					1-866-463-6743
HealthNow New York Inc. **	✓	✓					✓	✓	✓	1-866-231-0847
HIP (EmblemHealth)	✓	✓		✓	✓	✓	✓	✓		1-800-447-8255
Independent Health	✓	✓							✓	1-800-501-3439
MetroPlus Health Plan		✓	✓		✓					1-800-303-9626
Molina Healthcare		✓						✓		1-800-223-7242
MVP Health Care	✓	✓				✓	✓	✓	✓	1-888-687-6277
Oxford Health Plans of New York	✓			✓	✓	✓				1-800-444-6222
UnitedHealthcare Community Plan		✓		✓	✓	✓	✓	✓	✓	1-800-493-4647
Univera Healthcare **	✓								✓	1-800-427-8490
VNSNY Choice Health Plans			✓		✓					1-866-469-7774
WellCare of New York		✓		✓	✓	✓	✓		✓	1-800-288-5441
YourCare Health Plan		✓							✓	1-800-683-3781

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	
			2016	Change from 2015
Affinity Health Plan	www.affinityplan.org		248,773	-7%
Amida Care	www.amidacareny.org		6,178	3%
CDPHP	www.cdphp.com	Excellent	197,140	-9%
Crystal Run Health Plans	www.crystalrunhp.com		661	NA
Empire BlueCross BlueShield HealthPlus	www.empireblue.com	Commendable	409,534	-5%
Empire BlueCross BlueShield HMO	www.empireblue.com	Accredited	66,049	-2%
Excellus Blue Cross BlueShield **	www.excellusbcbs.com	Commendable	1,076,706	-1%
Fidelis Care New York, Inc.	www.fideliscare.org	Interim	1,293,265	6%
Healthfirst PHSP, Inc.	www.healthfirst.org		968,245	-3%
HealthNow New York Inc. **	www.healthnowny.com	Excellent/Commendable±	276,521	0%
HIP (EmblemHealth)	www.emblemhealth.com	Accredited	478,857	-10%
Independent Health	www.independenthealth.com	Excellent	195,236	-3%
MetroPlus Health Plan	www.metroplus.org		412,787	-5%
Molina Healthcare	www.molinahealthcare.com		34,526	-12%
MVP Health Care	www.mvphealthcare.com	Commendable	262,038	-7%
Oxford Health Plans of New York	www.oxfordhealth.com		605,145	6%
UnitedHealthcare Community Plan	www.uhccommunityplan.com	Commendable	516,286	0%
Univera Healthcare **	www.univerahealthcare.com	Commendable	25,120	-29%
VNSNY Choice Health Plans	www.vnsnychoice.org		3,546	-10%
WellCare of New York	www.wellcare.com	Commendable	104,802	-6%
YourCare Health Plan	www.yourcarehealthplan.com		48,293	-7%

Notes

* Data Source: NCQA Accreditation Status as of October 2017.

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

± Plan accreditation ratings were different for Commercial HMO and Medicaid Managed Care products. Listed as Commercial rating/Medicaid rating.

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
MVP Preferred PPO			✓	✓	✓	✓	1-888-687-6277
Oxford Health Insurance of 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.

All plans listed in this table are Commercial PPOs.

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	
			2016	Change from 2015
Aetna Life Insurance Company- New York	www.aetna.com	Commendable	806,798	0%
CDPHP Universal Benefits, Inc.	www.cdphp.com	Excellent	159,873	-11%
CGLIC/CHLIC	www.cigna.com	Accredited	460,251	-4%
Empire BlueCross BlueShield PPO	www.empireblue.com	Accredited	1,122,246	39%
GHI (EmblemHealth)	www.emblemhealth.com	Accredited	101,631	16%
MVP Preferred PPO	www.mvphealthcare.com		93,036	27%
Oxford Health Insurance of New York	www.oxfordhealth.com	Commendable	256,902	-3%
UnitedHealthcare Insurance Company of New York Inc.	www.myuhc.com	Accredited	790,719	-56%

Notes

* Data Source: NCQA Accreditation Status as of October 2017.

All plans listed in this table are Commercial PPOs.

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.

Encouraging healthy 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, the Viral Load suppression measure was developed by New York State as a key indicator of accessing appropriate HIV healthcare.

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 to the measurement year. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Annual Dental Visit (Ages 19-20)	The percentage of young adults, ages 19 to 20 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, 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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)

Measure	Description (Type of Insurance Product)
Managing Acute Illness	
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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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	<p>The percentage of members, ages 18 years or older, who had hypertension and whose blood pressure was adequately controlled during the measurement year based on the following criteria: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Members, ages 18 to 59 years, whose blood pressure was <140/90 mm Hg. 2. Members, ages 60 to 85 years, with a diagnosis of diabetes whose blood pressure <140/90 mm Hg. 3. Members, ages 60 to 85 years, without a diagnosis of diabetes whose blood pressure was <150/90 mm Hg.
Persistence of Beta-Blocker Treatment	<p>The percentage of members, ages 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, HIV SNP)</p>

Measure	Description (Type of Insurance Product)
Managing Respiratory Conditions	
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)
Medication 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)
Medication Management for People with Asthma 75% 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 75% of their treatment period. (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. 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. 3. 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. 4. Received All Three Tests: The percentage of members with diabetes who received at least one of each of the following tests: HbA1c test, diabetes eye exam, and medical attention for nephropathy.

Measure	Description (Type of Insurance Product)
Comprehensive Diabetes Care (Continued)	
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. Blood Pressure Controlled: The percentage of members with diabetes whose most recent blood pressure reading was <140/90 mm Hg.</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>ACE Inhibitors/ARBs: The percentage of members who received at least a 180-day supply of ACE inhibitors or ARBs during the measurement year and who had at least one serum potassium and a serum creatinine therapeutic monitoring test in the measurement year.</p> <p>Digoxin: The percentage of members who received at least a 180-day supply of digoxin during the measurement year and who had at least one serum potassium, at least one serum creatinine, and at least one serum digoxin therapeutic monitoring test in the measurement year.</p> <p>Diuretics: The percentage of members who received at least a 180-day supply of a diuretic during the measurement year and who had at least one serum potassium and a serum creatinine therapeutic monitoring test in the measurement year.</p> <p>The combined rate is the sum of the three numerators divided by the sum of the three denominators.</p>

Measure	Description (Type of Insurance Product)
Managing Medications (Continued)	
Statin Therapy for Patients with Cardiovascular Disease	<p>The percentage of males 21–75 years of age and females 40–75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Received Statin Therapy: Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year. 2. Statin Adherence 80%: Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment period.
Statin Therapy for Patients with Diabetes	<p>The percentage of members 40–75 years of age during the measurement year with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Received Statin Therapy: Members who were dispensed at least one statin medication of any intensity during the measurement year. 2. Statin Adherence 80%: Members who remained on a statin medication of any intensity for at least 80% of the treatment period.
HIV/AIDS Viral Load Suppression	
Viral Load Suppression	<p>The percentage of Medicaid enrollees confirmed HIV-positive who had a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year. (Medicaid, HIV SNP)</p>

Commercial HMO Health Plan Performance

Managing Preventive Care

Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults
CDPHP	73 ▲	93 ▲	57 ▲
Empire BlueCross BlueShield HMO	55 ▼	79	46
Excellus BlueCross BlueShield	68	91 ▲	56
HIP (EmblemHealth)	68	82	45
HealthNow New York Inc.	68	94 ▲	47
Independent Health	69	89 ▲	54
MVP Health Care	73 ▲	91 ▲	52
Oxford Health Plans of New York	62 ▼	48 ▼	45
Univera Healthcare	67	88 ▲	57
Statewide Average	67	81	52
National Average	62	77	48

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Acute Illness

Plan	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
CDPHP	86	69 ▲	61 ▲
Empire BlueCross BlueShield HMO	68	44	39
Excellus BlueCross BlueShield	71	49	51
HIP (EmblemHealth)	80	48	39
HealthNow New York Inc.	84	54	45
Independent Health	79	60	52
MVP Health Care	89 ▲	66	51
Oxford Health Plans of New York	--	--	--
Univera Healthcare	82	58	44
Statewide Average	80	56	48
National Average	75	48	43

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.
- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Cardiovascular Conditions

Plan	Controlling High Blood Pressure	Persistence of Beta-Blocker Treatment
CDPHP	78 ▲	89
Empire BlueCross BlueShield HMO	50 ▼	--
Excellus BlueCross BlueShield	69 ▲	87
HIP (EmblemHealth)	57 ▼	68 ▼
HealthNow New York Inc.	73 ▲	85
Independent Health	78 ▲	96 ▲
MVP Health Care	73 ▲	88
Oxford Health Plans of New York	37 ▼	80
Univera Healthcare	72 ▲	--
Statewide Average	63	85
National Average	62	84

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Respiratory Conditions - Asthma

Plan	Asthma Medication Ratio (Ages 19-64)	Medication Management for People with Asthma 50% Days Covered (Ages 19-64)	Medication Management for People with Asthma 75% Days Covered (Ages 19-64)
CDPHP	83 ▲	74	48
Empire BlueCross BlueShield HMO	76	76	53
Excellus BlueCross BlueShield	80 ▲	73 ▲	50 ▲
HIP (EmblemHealth)	73	67	41 ▼
HealthNow New York Inc.	75	68	43 ▼
Independent Health	79	69	44
MVP Health Care	78	73	48
Oxford Health Plans of New York	70 ▼	69 ▼	44 ▼
Univera Healthcare	78	72	51
Statewide Average	78	71	47
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.

Commercial HMO Health Plan Performance

Managing Respiratory Conditions - COPD

Plan	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
		Corticosteroid	Bronchodilator
CDPHP	42	82 ▲	68
Empire BlueCross BlueShield HMO	60 ▲	--	--
Excellus BlueCross BlueShield	41 ▼	70	76
HIP (EmblemHealth)	52 ▲	53 ▼	70
HealthNow New York Inc.	49	85 ▲	86 ▲
Independent Health	50	66	67
MVP Health Care	35 ▼	60	69
Oxford Health Plans of New York	63 ▲	66	81
Univera Healthcare	45	--	--
Statewide Average	48	68	74
National Average	42	70	77

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Monitoring Diabetes

Plan	HbA1c Testing	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
CDPHP	93	65 ▲	93 ▲	60 ▲
Empire BlueCross BlueShield HMO	87 ▼	49 ▼	88	43 ▼
Excellus BlueCross BlueShield	93	61	89	56
HIP (EmblemHealth)	91	60	92	57
HealthNow New York Inc.	89	64 ▲	92	56
Independent Health	91	66 ▲	93 ▲	60 ▲
MVP Health Care	90	59	90	53
Oxford Health Plans of New York	89	49 ▼	90	45 ▼
Univera Healthcare	92	61	93	55
Statewide Average	91	59	90	54
National Average	91	54	90	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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%)	Blood pressure controlled (<140/90 mm Hg)
CDPHP	19 ▲	70 ▲	75 ▲
Empire BlueCross BlueShield HMO	28	63	62
Excellus BlueCross BlueShield	23 ▲	65	74 ▲
HIP (EmblemHealth)	32 ▼	57 ▼	55 ▼
HealthNow New York Inc.	23 ▲	65	78 ▲
Independent Health	22 ▲	68 ▲	76 ▲
MVP Health Care	25	63	74 ▲
Oxford Health Plans of New York	37 ▼	53 ▼	44 ▼
Univera Healthcare	22 ▲	69 ▲	75 ▲
Statewide Average	28	61	65
National Average	33	56	62

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- † For Poor HbA1c Control, a low rate is desirable.

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	Combined Rate
CDPHP	94 ▲	87 ▲	32	87 ▲	87 ▲
Empire BlueCross BlueShield HMO	84	83	40	81 ▼	82 ▼
Excellus BlueCross BlueShield	89 ▲	84 ▼	43	84	84
HIP (EmblemHealth)	74 ▼	88 ▲	30	87 ▲	88 ▲
HealthNow New York Inc.	82 ▼	84 ▼	50	83 ▼	83 ▼
Independent Health	82 ▼	86	55 ▲	85	85 ▲
MVP Health Care	87	84 ▼	32	83	83 ▼
Oxford Health Plans of New York	85	86 ▲	34	85	85 ▲
Univera Healthcare	83	84	--	82	83
Statewide Average	86	85	41	84	84
National Average	88	84	48	83	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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Managing Medications

Plan	Statin Therapy for Patients with Cardiovascular Disease		Statin Therapy for Patients with Diabetes	
	Received:	Adherent:	Received:	Adherent:
CDPHP	83 ▲	71 ▲	63 ▲	71 ▲
Empire BlueCross BlueShield HMO	73 ▼	69	55 ▼	64
Excellus BlueCross BlueShield	83 ▲	62 ▼	61 ▲	69 ▲
HIP (EmblemHealth)	61 ▼	59 ▼	49 ▼	55 ▼
HealthNow New York Inc.	83 ▲	63	60	64
Independent Health	80	73 ▲	62 ▲	68 ▲
MVP Health Care	77	75 ▲	61 ▲	70 ▲
Oxford Health Plans of New York	74 ▼	65	54 ▼	57 ▼
Univera Healthcare	87 ▲	58	66 ▲	62
Statewide Average	79	65	59	65
National Average	79	70	60	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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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
Aetna Life Insurance Company - New York	58	66	43
CDPHP Universal Benefits, Inc.	70 ▲	88 ▲	54 ▲
CGLIC/CHLIC	63	65	43
Empire BlueCross BlueShield PPO	59	83 ▲	45
GHI (EmblemHealth)	46 ▼	44 ▼	43
MVP Preferred PPO	62	86 ▲	42
Oxford Health Insurance of New York	69 ▲	46 ▼	52
UnitedHealthcare Insurance Company of New York, Inc.	58	48 ▼	52
Statewide Average	60	67	47
National Average	58	63	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.
- 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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Acute Illness

Plan	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Aetna Life Insurance Company - New York	--	--	--
CDPHP Universal Benefits, Inc.	83	67	58
CGLIC/CHLIC	78	59	50
Empire BlueCross BlueShield PPO	73	37 ▼	33 ▼
GHI (EmblemHealth)	85	65	57
MVP Preferred PPO	77	54	46
Oxford Health Insurance of New York	--	--	--
UnitedHealthcare Insurance Company of New York, Inc.	82	62	52
Statewide Average	78	55	48
National Average	72	45	40

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Cardiovascular Conditions

Plan	Controlling High Blood Pressure	Persistence of Beta-Blocker Treatment
Aetna Life Insurance Company - New York	49	84
CDPHP Universal Benefits, Inc.	71 ▲	92
CGLIC/CHLIC	41 ▼	89
Empire BlueCross BlueShield PPO	53	84
GHI (EmblemHealth)	69 ▲	60 ▼
MVP Preferred PPO	71 ▲	90
Oxford Health Insurance of New York	37 ▼	79
UnitedHealthcare Insurance Company of New York, Inc.	36 ▼	79
Statewide Average	48	83
National Average	55	84

Legend

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

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Respiratory Conditions - Asthma

Plan	Asthma Medication Ratio (Ages 19-64)	Medication Management for People with Asthma 50% Days Covered (Ages 19-64)	Medication Management for People with Asthma 75% Days Covered (Ages 19-64)
Aetna Life Insurance Company - New York	79	73	53 ▲
CDPHP Universal Benefits, Inc.	77	69	45
CGLIC/CHLIC	80	71	46
Empire BlueCross BlueShield PPO	81 ▲	74	49
GHI (EmblemHealth)	73	72	43
MVP Preferred PPO	76	72	50
Oxford Health Insurance of New York	79	73	49
UnitedHealthcare Insurance Company of New York, Inc.	74 ▼	71	47
Statewide Average	79	72	49
National Average	*	*	*

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.

Commercial PPO Health Plan Performance

Managing Respiratory Conditions - COPD

Plan	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
		Corticosteroid	Bronchodilator
Aetna Life Insurance Company - New York	59	75 ▲	84 ▲
CDPHP Universal Benefits, Inc.	43 ▼	80 ▲	80 ▲
CGLIC/CHLIC	59	53	70
Empire BlueCross BlueShield PPO	57	69	75
GHI (EmblemHealth)	48 ▼	35 ▼	47 ▼
MVP Preferred PPO	38 ▼	68	68
Oxford Health Insurance of New York	63 ▲	63	63
UnitedHealthcare Insurance Company of New York, Inc.	59	83 ▲	83
Statewide Average	56	60	67
National Average	40	69	75

Legend

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

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Monitoring Diabetes

Plan	HbA1c Testing	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Aetna Life Insurance Company - New York	90	53	91	47
CDPHP Universal Benefits, Inc.	95 ▲	65 ▲	92	61 ▲
CGLIC/CHLIC	93	45 ▼	90	42
Empire BlueCross BlueShield PPO	92	50	92	45
GHI (EmblemHealth)	74 ▼	45 ▼	85 ▼	35 ▼
MVP Preferred PPO	90	50	90	46
Oxford Health Insurance of New York	89	54	88	46
UnitedHealthcare Insurance Company of New York, Inc.	93	52	87 ▼	45
Statewide Average	91	51	90	45
National Average	89	48	88	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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%)	Blood pressure controlled (<140/90 mm Hg)
Aetna Life Insurance Company - New York	30	59	56
CDPHP Universal Benefits, Inc.	19 ▲	71 ▲	75 ▲
CGLIC/CHLIC	30	60	49 ▼
Empire BlueCross BlueShield PPO	27	61	64 ▲
GHI (EmblemHealth)	65 ▼	29 ▼	27 ▼
MVP Preferred PPO	26 ▲	62	76 ▲
Oxford Health Insurance of New York	37 ▼	54	44 ▼
UnitedHealthcare Insurance Company of New York, Inc.	36 ▼	55	45 ▼
Statewide Average	31	58	56
National Average	43	47	50

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- † For Poor HbA1c Control, a low rate is desirable.

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	Combined Rate
Aetna Life Insurance Company - New York	82	85	36	84	84
CDPHP Universal Benefits, Inc.	87	86 ▲	40	85 ▲	85 ▲
CGLIC/CHLIC	84	86 ▲	42	85 ▲	85 ▲
Empire BlueCross BlueShield PPO	84	85	41	84	84
GHI (EmblemHealth)	64 ▼	77 ▼	37	76 ▼	76 ▼
MVP Preferred PPO	89 ▲	84	34	83	83
Oxford Health Insurance of New York	84	84	33	83	83
UnitedHealthcare Insurance Company of New York, Inc.	87	86 ▲	48	85 ▲	85 ▲
Statewide Average	83	85	38	83	84
National Average	87	82	39	81	82

Legend

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

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Managing Medications

Plan	Statin Therapy for Patients with Cardiovascular Disease		Statin Therapy for Patients with Diabetes	
	Received:	Adherent:	Received:	Adherent:
Aetna Life Insurance Company - New York	75 ▲	78 ▲	55	68 ▲
CDPHP Universal Benefits, Inc.	82 ▲	71	61 ▲	74 ▲
CGLIC/CHLIC	76 ▲	70	55	63
Empire BlueCross BlueShield PPO	77 ▲	72	57 ▲	65
GHI (EmblemHealth)	46 ▼	52 ▼	40 ▼	57 ▼
MVP Preferred PPO	80 ▲	73	59 ▲	69
Oxford Health Insurance of New York	76 ▲	68	57 ▲	65
UnitedHealthcare Insurance Company of New York, Inc.	76 ▲	67 ▼	54	62 ▼
Statewide Average	73	71	55	65
National Average	80	72	59	68

Legend

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

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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 19-20)	Flu Shot for Adults **
Affinity Health Plan	55	66 ▼	37 ▼	45
CDPHP	56	97 ▲	38 ▼	35 ▼
Empire BlueCross BlueShield HealthPlus	60	81 ▼	41 ▼	47 ▲
Excellus BlueCross BlueShield	52 ▼	90	48 ▲	41
Fidelis Care New York, Inc.	57	92 ▲	49 ▲	35 ▼
HIP (EmblemHealth)	57	89	40 ▼	36
HealthNow New York Inc.	49 ▼	96 ▲	49	40
Healthfirst PHSP, Inc.	64 ▲	87	44	44
Independent Health's MediSource	49 ▼	93 ▲	46	41
MVP Health Care	54	90 ▲	46	38
MetroPlus Health Plan	65 ▲	92 ▲	40 ▼	48 ▲
Molina Healthcare	50 ▼	93 ▲	44	46 ▲
UnitedHealthcare Community Plan	50 ▼	75 ▼	46 ▲	33 ▼
WellCare of New York	57	90	41 ▼	42
YourCare Health Plan	46 ▼	86	44	37
MMC Statewide Average	58	87	44	40
National Average	*	81	36	39
Plan	HIV Special Needs Plans (SNP)			
	Colon Cancer Screening	Adult BMI Assessment	Annual Dental Visit (Ages 19-20)	Flu Shot for Adults **
Amida Care	57	60 ▼	NA	72
MetroPlus Health Plan	65	91 ▲	NA	74
VNSNY Choice Health Plans	63	76	NA	76
SNP Statewide Average	61	74	NA	74

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- * No national average available.
- ** Rotated measure. Data is from 2015.
- NA Data not available.

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Acute Illness

Medicaid Managed Care Plans (MMC)			
Plan	Advising Smokers to Quit **	Discussing Smoking Cessation Medications **	Discussing Smoking Cessation Strategies **
Affinity Health Plan	68	49	44
CDPHP	82	59	49
Empire BlueCross BlueShield HealthPlus	74	51	49
Excellus BlueCross BlueShield	83	60	54
Fidelis Care New York, Inc.	69 ▼	46 ▼	43
HIP (EmblemHealth)	85	54	54
HealthNow New York Inc.	83	59	51
Healthfirst PHSP, Inc.	76	56	45
Independent Health's MediSource	76	62	51
MVP Health Care	81	60	53
MetroPlus Health Plan	79	61	61
Molina Healthcare	82	66	46
UnitedHealthcare Community Plan	76	64	50
WellCare of New York	81	58	51
YourCare Health Plan	83	61	52
MMC Statewide Average	80	59	51
National Average	76	48	43
HIV Special Needs Plans (SNP)			
Plan	Advising Smokers to Quit **	Discussing Smoking Cessation Medications **	Discussing Smoking Cessation Strategies **
Amida Care	92	85	78
MetroPlus Health Plan	91	78	75
VNSNY Choice Health Plans	89	80	71
SNP Statewide Average	91	81	75

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- ** Rotated measure. Data is from 2015.

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Cardiovascular Conditions

Plan	Medicaid Managed Care Plans (MMC)	
	Controlling High Blood Pressure	Persistence of Beta-Blocker Treatment
Affinity Health Plan	30 ▼	83
CDPHP	73 ▲	89
Empire BlueCross BlueShield HealthPlus	56 ▼	81
Excellus BlueCross BlueShield	71 ▲	86
Fidelis Care New York, Inc.	71 ▲	92 ▲
HIP (EmblemHealth)	62	82
HealthNow New York Inc.	63	--
Healthfirst PHSP, Inc.	60	82
Independent Health's MediSource	65	91
MVP Health Care	64	80
MetroPlus Health Plan	60	82
Molina Healthcare	65	--
UnitedHealthcare Community Plan	NV	87
WellCare of New York	54 ▼	84
YourCare Health Plan	61	--
MMC Statewide Average	62	86
National Average	56	80
Plan	HIV Special Needs Plans (SNP)	
	Controlling High Blood Pressure	Persistence of Beta-Blocker Treatment
Amida Care	26 ▼	--
MetroPlus Health Plan	60 ▲	--
VNSNY Choice Health Plans	37	--
SNP Statewide Average	38	--

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Respiratory Conditions - Asthma

Plan	Medicaid Managed Care Plans (MMC)		
	Asthma Medication Ratio (Ages 19-64)	Medication Management for People with Asthma 50% Days Covered (Ages 19-64)	Medication Management for People with Asthma 75% Days Covered (Ages 19-64)
Affinity Health Plan	54	68	41
CDPHP	58	61 ▼	35 ▼
Empire BlueCross BlueShield HealthPlus	51 ▼	63 ▼	37 ▼
Excellus BlueCross BlueShield	60 ▲	66	42
Fidelis Care New York, Inc.	61 ▲	70 ▲	44 ▲
HIP (EmblemHealth)	59	68	41
HealthNow New York Inc.	56	67	45
Healthfirst PHSP, Inc.	50 ▼	68	42
Independent Health's MediSource	62	60 ▼	38
MVP Health Care	60 ▲	62 ▼	36 ▼
MetroPlus Health Plan	52 ▼	71 ▲	47 ▲
Molina Healthcare	61	62	39
UnitedHealthcare Community Plan	56	65	42
WellCare of New York	63 ▲	70	43
YourCare Health Plan	66 ▲	67	45
MMC Statewide Average	56	68	42
National Average	*	*	*
Plan	HIV Special Needs Plans (SNP)		
	Asthma Medication Ratio (Ages 19-64)	Medication Management for People with Asthma 50% Days Covered (Ages 19-64)	Medication Management for People with Asthma 75% Days Covered (Ages 19-64)
Amida Care	43 ▲	81	63
MetroPlus Health Plan	31	83	64
VNSNY Choice Health Plans	28 ▼	85	73
SNP Statewide Average	36	82	65

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.

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	45 ▼	68	82
CDPHP	33 ▼	79 ▲	88
Empire BlueCross BlueShield HealthPlus	54	68	87
Excellus BlueCross BlueShield	44 ▼	75 ▲	87
Fidelis Care New York, Inc.	53	72 ▲	84
HIP (EmblemHealth)	49	57 ▼	82
HealthNow New York Inc.	39 ▼	73	87
Healthfirst PHSP, Inc.	63 ▲	62 ▼	86
Independent Health's MediSource	39 ▼	71	85
MVP Health Care	41 ▼	69	84
MetroPlus Health Plan	53	72	88
Molina Healthcare	45	70	80
UnitedHealthcare Community Plan	55	69	82
WellCare of New York	55	68	86
YourCare Health Plan	45	79 ▲	87
MMC Statewide Average	52	69	85
National Average	32	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	17 ▼	62	94
MetroPlus Health Plan	40 ▲	71	95
VNSNY Choice Health Plans	25	67	91
SNP Statewide Average	25	65	94

Legend

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

Notes

- Plans without symbols are consistent with the statewide average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Monitoring Diabetes

Plan	Medicaid Managed Care Plans (MMC)			
	HbA1c Testing	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Affinity Health Plan	90	53 ▼	90	49 ▼
CDPHP	91	65	91	58
Empire BlueCross BlueShield HealthPlus	93	65	95 ▲	60
Excellus BlueCross BlueShield	85 ▼	64	86 ▼	53 ▼
Fidelis Care New York, Inc.	93	67	94	62
HIP (EmblemHealth)	92	66	93	61
HealthNow New York Inc.	88 ▼	59 ▼	92	53 ▼
Healthfirst PHSP, Inc.	91	68	91	63
Independent Health's MediSource	90	63	93	56
MVP Health Care	91	53 ▼	90	48 ▼
MetroPlus Health Plan	93	62	91	55
Molina Healthcare	91	66	92	58
UnitedHealthcare Community Plan	90	NV	91	NV
WellCare of New York	92	61	96 ▲	57
YourCare Health Plan	87 ▼	65	92	57
MMC Statewide Average	91	65	92	59
National Average	87	55	90	*
Plan	HIV Special Needs Plans (SNP)			
	HbA1c Testing	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Amida Care	96	26 ▼	96	24 ▼
MetroPlus Health Plan	97	49 ▲	95	47 ▲
VNSNY Choice Health Plans	93	NV	90 ▼	NV
SNP Statewide Average	95	35	94	33

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Diabetes Outcomes

Plan	Medicaid Managed Care Plans (MMC)		
	Poor HbA1c Control†	HbA1C Control (<8.0%)	Blood pressure controlled (<140/90 mm Hg)
Affinity Health Plan	41 ▼	51 ▼	38 ▼
CDPHP	30	55	74 ▲
Empire BlueCross BlueShield HealthPlus	31	56	66
Excellus BlueCross BlueShield	39 ▼	52	73 ▲
Fidelis Care New York, Inc.	29	61 ▲	68
HIP (EmblemHealth)	30	57	61
HealthNow New York Inc.	35	55	67
Healthfirst PHSP, Inc.	32	57	64
Independent Health's MediSource	28 ▲	63 ▲	71 ▲
MVP Health Care	30	59	75 ▲
MetroPlus Health Plan	37	51	62
Molina Healthcare	59 ▼	34 ▼	58 ▼
UnitedHealthcare Community Plan	40 ▼	52	NV
WellCare of New York	32	55	61
YourCare Health Plan	42 ▼	49 ▼	64
MMC Statewide Average	33	56	64
National Average	43	47	60
Plan	HIV Special Needs Plans (SNP)		
	Poor HbA1c Control†	HbA1C Control (<8.0%)	Blood pressure controlled (<140/90 mm Hg)
Amida Care	61 ▼	36 ▼	38 ▼
MetroPlus Health Plan	27 ▲	65 ▲	71 ▲
VNSNY Choice Health Plans	76 ▼	22 ▼	57
SNP Statewide Average	56	40	53

Legend

- ▲ Significantly better than the statewide average.
- ▼ Significantly worse than the statewide average.
- † For Poor HbA1c Control, a low rate is desirable.
- NV Plan submitted invalid data.

Notes

- Plans without symbols are consistent with the statewide average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	Combined Rate
Affinity Health Plan	83	92	50	91	91 ▼
CDPHP	83	90 ▼	57	88 ▼	89 ▼
Empire BlueCross BlueShield HealthPlus	83	92	52	91	92
Excellus BlueCross BlueShield	89 ▲	88 ▼	47	88 ▼	87 ▼
Fidelis Care New York, Inc.	82	94 ▲	66 ▲	93 ▲	93 ▲
HIP (EmblemHealth)	83	91 ▼	49	90 ▼	91 ▼
HealthNow New York Inc.	73	86 ▼	--	86 ▼	86 ▼
Healthfirst PHSP, Inc.	78	93 ▲	47	92 ▲	92
Independent Health's MediSource	76	89 ▼	--	88 ▼	88 ▼
MVP Health Care	77	90 ▼	51	90 ▼	90 ▼
MetroPlus Health Plan	84	93 ▲	63	93 ▲	93 ▲
Molina Healthcare	85	92	--	91	91
UnitedHealthcare Community Plan	78	91 ▼	45	90 ▼	91 ▼
WellCare of New York	77	93	--	92	93 ▲
YourCare Health Plan	76	87 ▼	--	85 ▼	86 ▼
MMC Statewide Average	81	92	54	91	92
National Average	73	88	55	88	88
HIV Special Needs Plans (SNP)					
Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications			
		ACE Inhibitors/ARBs	Digoxin	Diuretics	Combined Rate
Amida Care	NA	100 ▲	--	100 ▲	100 ▲
MetroPlus Health Plan	NA	98	--	97 ▼	98 ▼
VNSNY Choice Health Plans	NA	98	--	97	98
SNP Statewide Average	NA	99	--	98	99

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Managing Medications

Plan	Medicaid Managed Care Plans (MMC)			
	Statin Therapy for Patients with Cardiovascular Disease		Statin Therapy for Patients with Diabetes	
	Received:	Adherent:	Received:	Adherent:
Affinity Health Plan	73	87 ▲	64	57 ▼
CDPHP	81 ▲	56 ▼	63	58
Empire BlueCross BlueShield HealthPlus	76	66	66 ▲	59
Excellus BlueCross BlueShield	82 ▲	64	66	61
Fidelis Care New York, Inc.	70 ▼	64	63 ▼	60
HIP (EmblemHealth)	72	65	59 ▼	61
HealthNow New York Inc.	84 ▲	61	68	61
Healthfirst PHSP, Inc.	73	63 ▼	65 ▲	58 ▼
Independent Health's MediSource	85 ▲	60	67	57
MVP Health Care	75	60 ▼	61 ▼	55 ▼
MetroPlus Health Plan	77 ▲	70 ▲	70 ▲	64 ▲
Molina Healthcare	77	64	65	59
UnitedHealthcare Community Plan	69 ▼	63	59 ▼	60
WellCare of New York	79	69	66	58
YourCare Health Plan	81 ▲	56 ▼	63	61
MMC Statewide Average	73	65	64	60
National Average	75	61	60	59
Plan	HIV Special Needs Plans (SNP)			
	Statin Therapy for Patients with Cardiovascular Disease		Statin Therapy for Patients with Diabetes	
	Received:	Adherent:	Received:	Adherent:
Amida Care	67	66	56	76
MetroPlus Health Plan	73	74	60	84
VNSNY Choice Health Plans	71	81	57	79
SNP Statewide Average	70	73	58	80

Legend

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

Notes

- Plans without symbols are consistent with the statewide average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

HIV/AIDS Viral Load Suppression

		Medicaid Managed Care Plans (MMC)	
Plan		Viral Load Suppression	
Affinity Health Plan		76	
CDPHP		83	
Empire BlueCross BlueShield HealthPlus		73 ▼	
Excellus BlueCross BlueShield		84 ▲	
Fidelis Care New York, Inc.		76	
HIP (EmblemHealth)		77	
HealthNow New York Inc.		79	
Healthfirst PHSP, Inc.		78	
Independent Health's MediSource		76	
MVP Health Care		84 ▲	
MetroPlus Health Plan		77	
Molina Healthcare		84	
UnitedHealthcare Community Plan		73	
WellCare of New York		71	
YourCare Health Plan		79	
MMC Statewide Average		77	
National Average		*	
		HIV Special Needs Plans (SNP)	
Plan		Viral Load Suppression	
Amida Care		76 ▼	
MetroPlus Health Plan		80 ▲	
VNSNY Choice Health Plans		81 ▲	
SNP Statewide Average		79	

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.

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.

Children with attention deficit/hyperactivity disorder (ADHD) should receive proper medical management for their condition. For children with ADHD, regular follow-up visits with a doctor are important after beginning prescription medications.

Current guidelines recommend psychosocial care as the first-line treatment for children with mental illness, but for some children with serious behavioral health issues such treatment is not enough. In such cases, a clinician may prescribe antipsychotic medications to reduce a child's level of impairment and improve his or her quality of life. While antipsychotics can be effective, their use has been linked to metabolic disturbances making metabolic monitoring is necessary for children prescribed antipsychotics.

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	<p>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)</p>

Measure	Description (Type of Insurance Product)
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)
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)
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)
Metabolic Monitoring for Children and Adolescents on Antipsychotics	The percentage of children and adolescents, ages 1 to 17 years, who had two or more antipsychotic prescriptions and had metabolic testing. (Commercial HMO, Commercial PPO, Medicaid/Child Health Plus)
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	The percentage of children and adolescents, ages 1 to 17 years, who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment. (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. 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 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
CDPHP	67	51	77 ▲	87 ▲
Empire BlueCross BlueShield HMO	66	51	53	68
Excellus BlueCross BlueShield	65	50	59	75
HIP (EmblemHealth)	64	48	53 ▼	69 ▼
HealthNow New York Inc.	60 ▼	44 ▼	66 ▲	83 ▲
Independent Health	66	49	68 ▲	84 ▲
MVP Health Care	64	50	63	80
Oxford Health Plans of New York	66	51	50 ▼	65 ▼
Univera Healthcare	59	45	32 ▼	49 ▼
Statewide Average	65	49	59	74
National Average	67	51	53	72

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Child and Adolescent Behavioral Health

Plan	Metabolic Monitoring for Children and Adolescents on Antipsychotics	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	Follow-up Care for Children Prescribed ADHD Medication	
			Initiation Phase	Continuation Phase
CDPHP	55 ▲	76	59 ▲	74 ▲
Empire BlueCross BlueShield HMO	--	--	36	--
Excellus BlueCross BlueShield	39	69 ▲	44	52
HIP (EmblemHealth)	56	--	51	--
HealthNow New York Inc.	31	70	53 ▲	50
Independent Health	45	--	40	45
MVP Health Care	42	67	40	43
Oxford Health Plans of New York	38	41 ▼	31 ▼	36 ▼
Univera Healthcare	--	--	57	--
Statewide Average	40	61	43	49
National Average	36	58	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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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 ▲	64 ▲	60	73
CDPHP Universal Benefits, Inc.	68	54	70 ▲	82 ▲
CGLIC/CHLIC	66 ▼	52 ▼	49 ▼	77
Empire BlueCross BlueShield PPO	68	52 ▼	54 ▼	69 ▼
GHI (EmblemHealth)	68	57	52	67
MVP Preferred PPO	68	53	57	67
Oxford Health Insurance of New York	68	56	58	72
UnitedHealthcare Insurance Company of New York, Inc.	66 ▼	52 ▼	62 ▲	76
Statewide Average	69	56	58	73
National Average	68	53	50	70

Legend

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

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Child and Adolescent Behavioral Health

Plan	Metabolic Monitoring for Children and Adolescents on Antipsychotics	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	Follow-up Care for Children Prescribed ADHD Medication	
			Initiation Phase	Continuation Phase
Aetna Life Insurance Company - New York	45	66	41	43
CDPHP Universal Benefits, Inc.	50	68	46	63
CGLIC/CHLIC	37	67	50	53
Empire BlueCross BlueShield PPO	33 ▼	72	35 ▼	43
GHI (EmblemHealth)	53	--	56	--
MVP Preferred PPO	44	66	41	58
Oxford Health Insurance of New York	49	48 ▼	47	49
UnitedHealthcare Insurance Company of New York, Inc.	42	70	52 ▲	57
Statewide Average	42	64	44	50
National Average	32	58	39	46

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	49	35	53 ▼	71 ▼
CDPHP	52	35	70 ▲	84 ▲
Empire BlueCross BlueShield HealthPlus	48	35	61	76
Excellus BlueCross BlueShield	45 ▼	32 ▼	56 ▼	72 ▼
Fidelis Care New York, Inc.	53 ▲	37	66 ▲	80 ▲
HIP (EmblemHealth)	54	38	54 ▼	71 ▼
HealthNow New York Inc.	47	32	69	83
Healthfirst PHSP, Inc.	52	37	72 ▲	84 ▲
Independent Health's MediSource	47	35	51 ▼	76
MVP Health Care	50	36	61	77
MetroPlus Health Plan	50	36	56 ▼	74 ▼
Molina Healthcare	45 ▼	31 ▼	46 ▼	63 ▼
UnitedHealthcare Community Plan	52	38 ▲	67	79
WellCare of New York	48	34	45 ▼	64 ▼
YourCare Health Plan	47	33	61	76
Statewide Average	51	36	63	78
National Average	53	38	46	64
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	59	42	31	50 ▼
MetroPlus Health Plan	52	40	38	74
VNSNY Choice Health Plans	62	44	37	73
Statewide Average	58	42	35	67

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	62	--	79	71 ▼
CDPHP	60	--	83	85
Empire BlueCross BlueShield HealthPlus	61	--	82	85
Excellus BlueCross BlueShield	52 ▼	--	78 ▼	75
Fidelis Care New York, Inc.	63	84	83	82
HIP (EmblemHealth)	61	--	80	79
HealthNow New York Inc.	68	--	75 ▼	66
Healthfirst PHSP, Inc.	59	87	85 ▲	83
Independent Health's MediSource	60	--	76 ▼	64
MVP Health Care	62	--	81	77
MetroPlus Health Plan	61	--	82	84
Molina Healthcare	61	--	81	--
UnitedHealthcare Community Plan	64	88	81	76
WellCare of New York	68	--	83	83
YourCare Health Plan	54	--	77	78
Statewide Average	61	83	82	80
National Average	59	78	81	70
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	50 ▼	--	100 ▲	85
MetroPlus Health Plan	58	--	98	--
VNSNY Choice Health Plans	68 ▲	--	96 ▼	76
Statewide Average	56	--	99	84

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Child and Adolescent Behavioral Health

Plan	Metabolic Monitoring for Children and Adolescents on Antipsychotics	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	Follow-up Care for Children Prescribed ADHD Medication	
			Initiation Phase	Continuation Phase
Affinity Health Plan	42	66	63	73
CDPHP	46 ▲	66	53 ▼	61
Empire BlueCross BlueShield HealthPlus	48 ▲	55 ▼	68 ▲	79 ▲
Excellus BlueCross BlueShield	33 ▼	70	42 ▼	53 ▼
Fidelis Care New York, Inc.	40 ▼	71 ▲	59	67
HIP (EmblemHealth)	49 ▲	68	65	72
HealthNow New York Inc.	25 ▼	74	49	62
Healthfirst PHSP, Inc.	50 ▲	71	68 ▲	78 ▲
Independent Health's MediSource	49	67	51 ▼	56
MVP Health Care	37 ▼	52 ▼	54 ▼	68
MetroPlus Health Plan	43	67	67 ▲	88 ▲
Molina Healthcare	24 ▼	57	67	82
UnitedHealthcare Community Plan	36 ▼	62	59	69
WellCare of New York	43	60	66	--
YourCare Health Plan	41	78	47 ▼	47 ▼
Statewide Average	42	67	59	68
National Average	33	60	44	55

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Children of all ages, from infants to adolescents, should receive routine primary and preventive care to ensure they lead healthy lives. Primary and preventive care, such as annual medical and dental exams, are indicative of the health and well-being of children. In conjunction with other preventive care, children and adolescents should have the recommended series of immunizations for their age. Additionally, young children can be exposed to lead through normal hand-to-mouth activity with toys and other objects, and it is recommended they have their blood tested for lead by the age of two.

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, should receive proper medical management for their conditions. For children with asthma, this means receiving enough of the appropriate medication for their condition and remaining adherent to their treatment plan.

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 NYS 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)
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)

Measure	Description (Type of Insurance Product)
Child and Adolescent Preventive Care (Continued)	
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)
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 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)
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)
Medication 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)
Medication Management for People with Asthma 75% Days Covered (Ages 5-85)	The percentage of members, ages 5 to 85 years, with persistent asthma who filled prescriptions for asthma controller medications during at least 75% of their treatment period. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
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. (Commercial HMO, Commercial PPO, Medicaid/Child Health Plus)

Measure	Description (Type of Insurance Product)
Preventive Counseling for Children and Adolescents (Continued)	
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. Sexual Activity: Assessment, counseling or education on risk behaviors and preventive actions associated with sexual activity 2. Depression: Assessment, counseling or education for depression 3. Tobacco Use: Assessment, counseling or education about the risks of tobacco use 4. Alcohol and Other Drug Use: Assessment, 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	Childhood Immunization Status (Combo 3)	Lead Testing
CDPHP	86 ▲	87 ▲	91 ▲
Empire BlueCross BlueShield HMO	70 ▼	68 ▼	80
Excellus BlueCross BlueShield	81	88 ▲	82
HIP (EmblemHealth)	74 ▼	77	85
HealthNow New York Inc.	84 ▲	91 ▲	94 ▲
Independent Health	87 ▲	89 ▲	95 ▲
MVP Health Care	83 ▲	89 ▲	88 ▲
Oxford Health Plans of New York	71 ▼	63 ▼	78 ▼
Univera Healthcare	80	95 ▲	97 ▲
Statewide Average	78	81	84
National Average	77	76	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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
CDPHP	97 ▲	92 ▲	74 ▲
Empire BlueCross BlueShield HMO	86 ▼	82 ▼	62 ▼
Excellus BlueCross BlueShield	94 ▲	85 ▼	62 ▼
HIP (EmblemHealth)	86 ▼	83 ▼	62 ▼
HealthNow New York Inc.	95 ▲	91 ▲	71 ▲
Independent Health	97 ▲	91 ▲	74 ▲
MVP Health Care	97 ▲	89 ▲	68 ▲
Oxford Health Plans of New York	92	85 ▼	67 ▲
Univera Healthcare	98	88	67
Statewide Average	93	86	65
National Average	*	77	48

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial HMO Health Plan Performance

Caring for Children and Adolescents with Illness

Plan	Appropriate Testing for Pharyngitis	Asthma Medication Ratio (Ages 5-18)	Medication Management for People with Asthma 50% Days Covered (Ages 5-18)	Medication Management for People with Asthma 75% Days Covered (Ages 5-18)
CDPHP	94 ▲	86	62	45 ▲
Empire BlueCross BlueShield HMO	80 ▼	78	61	39
Excellus BlueCross BlueShield	90 ▲	85 ▲	59 ▲	38 ▲
HIP (EmblemHealth)	89	77	50	21 ▼
HealthNow New York Inc.	86 ▼	78	50	26 ▼
Independent Health	95 ▲	84	47 ▼	25 ▼
MVP Health Care	92	86	64	41
Oxford Health Plans of New York	88 ▼	80 ▼	52	28 ▼
Univera Healthcare	84 ▼	89	61	37
Statewide Average	89	83	56	34
National Average	84	*	*	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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
CDPHP	92 ▲	91 ▲	88 ▲	72	72 ▲	82 ▲	79 ▲
Empire BlueCross BlueShield HMO	69 ▼	74	68	53 ▼	46 ▼	60 ▼	63
Excellus BlueCross BlueShield	81 ▲	82	78 ▲	70 ▲	65 ▲	82 ▲	72
HIP (EmblemHealth)	74	74	66 ▼	69	65	74	72
HealthNow New York Inc.	91 ▲	90 ▲	83 ▲	84 ▲	74 ▲	86 ▲	84 ▲
Independent Health	94 ▲	92 ▲	88 ▲	82 ▲	81 ▲	86 ▲	83 ▲
MVP Health Care	84 ▲	85 ▲	77 ▲	67	51 ▼	80 ▲	72
Oxford Health Plans of New York	56 ▼	60 ▼	52 ▼	35 ▼	30 ▼	46 ▼	40 ▼
Univera Healthcare	91 ▲	90 ▲	85 ▲	84 ▲	79 ▲	91 ▲	85 ▲
Statewide Average	77	78	72	64	59	73	67
National Average	65	61	56	*	*	*	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	Childhood Immunization Status (Combo 3)	Lead Testing
Aetna Life Insurance Company - New York	72	73	83
CDPHP Universal Benefits, Inc.	82 ▲	88 ▲	90 ▲
CGLIC/CHLIC	63 ▼	69 ▼	82
Empire BlueCross BlueShield PPO	79 ▲	73	75 ▼
GHI (EmblemHealth)	56 ▼	59 ▼	70 ▼
MVP Preferred PPO	81 ▲	83 ▲	84
Oxford Health Insurance of New York	68 ▼	71	83
UnitedHealthcare Insurance Company of New York, Inc.	70	80 ▲	86 ▲
Statewide Average	73	74	81
National Average	70	69	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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 ▲	86 ▲	66 ▲
CDPHP Universal Benefits, Inc.	96 ▲	89 ▲	63
CGLIC/CHLIC	94 ▲	86 ▲	67 ▲
Empire BlueCross BlueShield PPO	82 ▼	79 ▼	56 ▼
GHI (EmblemHealth)	77 ▼	61 ▼	45 ▼
MVP Preferred PPO	94	86 ▲	65 ▲
Oxford Health Insurance of New York	92 ▲	86 ▲	71 ▲
UnitedHealthcare Insurance Company of New York, Inc.	94 ▲	87 ▲	66 ▲
Statewide Average	90	84	62
National Average	*	74	45

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Commercial PPO Health Plan Performance

Caring for Children and Adolescents with Illness

Plan	Appropriate Testing for Pharyngitis	Asthma Medication Ratio (Ages 5-18)	Medication Management for People with Asthma 50% Days Covered (Ages 5-18)	Medication Management for People with Asthma 75% Days Covered (Ages 5-18)
Aetna Life Insurance Company - New York	93 ▲	83	60	36
CDPHP Universal Benefits, Inc.	93 ▲	83	60	32
CGLIC/CHLIC	92 ▲	84	56	30
Empire BlueCross BlueShield PPO	84 ▼	85	57	32
GHI (EmblemHealth)	87	81	47	26
MVP Preferred PPO	92 ▲	84	64	36
Oxford Health Insurance of New York	87 ▼	81	56	32
UnitedHealthcare Insurance Company of New York, Inc.	84 ▼	82	57	32
Statewide Average	89	83	58	33
National Average	83	*	*	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	64	66	59	49	43	51	50
CDPHP Universal Benefits, Inc.	90 ▲	89 ▲	84 ▲	82 ▲	79 ▲	91 ▲	85 ▲
CGLIC/CHLIC	84 ▲	83 ▲	74 ▲	55	52	60	59
Empire BlueCross BlueShield PPO	71	70	61	55	53	61	61
GHI (EmblemHealth)	46 ▼	50 ▼	43 ▼	46	42	49	45 ▼
MVP Preferred PPO	89 ▲	84 ▲	77 ▲	67 ▲	55 ▲	81 ▲	72 ▲
Oxford Health Insurance of New York	59 ▼	65	56	40 ▼	36 ▼	46 ▼	45 ▼
UnitedHealthcare Insurance Company of New York, Inc.	59 ▼	58 ▼	48 ▼	33 ▼	32 ▼	43 ▼	37 ▼
Statewide Average	68	68	60	49	46	55	53
National Average	52	50	45	*	*	*	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	Childhood Immunization Status (Combo 3)	Lead Testing
Affinity Health Plan	78	70 ▼	87
CDPHP	79	82 ▲	83 ▼
Empire BlueCross BlueShield HealthPlus	71 ▼	73	89
Excellus BlueCross BlueShield	84 ▲	83 ▲	85
Fidelis Care New York, Inc.	78	71	82 ▼
HIP (EmblemHealth)	76	71	86
HealthNow New York Inc.	76	80 ▲	82 ▼
Healthfirst PHSP, Inc.	81	75	91 ▲
Independent Health's MediSource	79	81 ▲	88
MVP Health Care	82 ▲	80 ▲	87
MetroPlus Health Plan	84 ▲	86 ▲	95 ▲
Molina Healthcare	72 ▼	83 ▲	86
UnitedHealthcare Community Plan	67 ▼	70 ▼	80 ▼
WellCare of New York	67 ▼	73	88
YourCare Health Plan	78	77	87
Statewide Average	78	74	86
National Average	75	70	68

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	89 ▲	79 ▼	66 ▼	53 ▼
CDPHP	91 ▲	78 ▼	65 ▼	60 ▼
Empire BlueCross BlueShield HealthPlus	78 ▼	86 ▲	70 ▲	62 ▲
Excellus BlueCross BlueShield	86 ▲	82 ▼	67 ▼	64 ▲
Fidelis Care New York, Inc.	80	83 ▼	67 ▼	63 ▲
HIP (EmblemHealth)	78	83 ▼	70 ▲	57 ▼
HealthNow New York Inc.	84	82	69	69 ▲
Healthfirst PHSP, Inc.	80	88 ▲	72 ▲	59 ▼
Independent Health's MediSource	84 ▲	83	67 ▼	67 ▲
MVP Health Care	81	85	68	69 ▲
MetroPlus Health Plan	82 ▲	87 ▲	67 ▼	62 ▲
Molina Healthcare	82	78 ▼	61 ▼	57 ▼
UnitedHealthcare Community Plan	74 ▼	83 ▼	66 ▼	59 ▼
WellCare of New York	72 ▼	79 ▼	65 ▼	56 ▼
YourCare Health Plan	76	79 ▼	62 ▼	68 ▲
Statewide Average	80	84	68	61
National Average	*	72	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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

Medicaid Health Plan Performance

Caring for Children and Adolescents with Illness

Plan	Appropriate Testing for Pharyngitis	Asthma Medication Ratio (Ages 5-18)	Medication Management for People with Asthma 50% Days Covered (Ages 5-18)	Medication Management for People with Asthma 75% Days Covered (Ages 5-18)
Affinity Health Plan	84 ▼	59 ▼	49 ▼	21 ▼
CDPHP	90	67	54	31 ▲
Empire BlueCross BlueShield HealthPlus	89	67 ▲	52	24 ▼
Excellus BlueCross BlueShield	92 ▲	69 ▲	54	30 ▲
Fidelis Care New York, Inc.	93 ▲	70 ▲	59 ▲	30 ▲
HIP (EmblemHealth)	87 ▼	68 ▲	55	29
HealthNow New York Inc.	81 ▼	69	53	34
Healthfirst PHSP, Inc.	86 ▼	55 ▼	53	25 ▼
Independent Health's MediSource	91	71 ▲	44 ▼	22
MVP Health Care	89	70 ▲	51	24
MetroPlus Health Plan	81 ▼	58 ▼	53	26
Molina Healthcare	78 ▼	63	44 ▼	19
UnitedHealthcare Community Plan	87 ▼	68 ▲	53	28
WellCare of New York	86 ▼	63	57	26
YourCare Health Plan	89	77 ▲	45 ▼	20
Statewide Average	89	63	54	26
National Average	74	*	*	*

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	59 ▼	59 ▼	40 ▼	42 ▼	41 ▼	45 ▼	45 ▼
CDPHP	87 ▲	83	77 ▲	66	72 ▲	79	71
Empire BlueCross BlueShield HealthPlus	75	78	64 ▼	64	56	65 ▼	63
Excellus BlueCross BlueShield	86 ▲	85 ▲	81 ▲	70	66	84 ▲	76 ▲
Fidelis Care New York, Inc.	81	84 ▲	75 ▲	72	61	81 ▲	73
HIP (EmblemHealth)	80	80	72	77 ▲	70 ▲	76	75
HealthNow New York Inc.	91 ▲	87 ▲	80 ▲	73	67	86 ▲	76 ▲
Healthfirst PHSP, Inc.	70 ▼	82	67	66	60	71	72
Independent Health's MediSource	91 ▲	88 ▲	81 ▲	77 ▲	79 ▲	85 ▲	79 ▲
MVP Health Care	86 ▲	82	74 ▲	66	63	77	70
MetroPlus Health Plan	83 ▲	80	69	66	70 ▲	70	62
Molina Healthcare	91 ▲	85 ▲	85 ▲	68	78 ▲	82 ▲	68
UnitedHealthcare Community Plan	69 ▼	69 ▼	58 ▼	NV	NV	NV	NV
WellCare of New York	80	78	60 ▼	46 ▼	52 ▼	45 ▼	49 ▼
YourCare Health Plan	78	77	72	66	65	74	69
Statewide Average	77	80	69	67	61	73	69
National Average	69	65	58	*	*	*	*

Legend

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

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 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 the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey. Commercial health plan data is from the CAHPS® 5.0H survey conducted in 2016 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 2015 using the CAHPS® 5.0H survey. 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. (Commercial HMO, Commercial PPO, Medicaid, 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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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?" This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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) when asked "How would you rate your specialist?" This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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
CDPHP	86 ▲	82 ▲	76	83 ▲	96	89	83
Empire BlueCross BlueShield HMO	78 ▲	82 ▲	82 ▲	83 ▲	96	87	85
Excellus BlueCross BlueShield	71	78 ▲	84 ▲	71 ▼	97	89	85
HIP (EmblemHealth)	68 ▼	71 ▼	73 ▼	74 ▼	91 ▼	77 ▼	78 ▼
HealthNow New York Inc.	81 ▲	80 ▲	75	83 ▲	96	84	87
Independent Health	84 ▲	74	80	81	97	90 ▲	81
MVP Health Care	80 ▲	73	77	78	96	86	82
Oxford Health Plans of New York	60 ▼	67 ▼	77 ▼	72 ▼	96	89	88
Univera Healthcare	74	76	86 ▲	74	96	88	92 ▲
Statewide Average	74	73	78	77	96	86	84
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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	81 ▲	80 ▲	81 ▲	86 ▲	95	86	82
CDPHP Universal Benefits, Inc.	86 ▲	83 ▲	76	82 ▲	96	86	90 ▲
CGLIC/CHLIC	62 ▼	72 ▼	63 ▼	65 ▼	95	82	82
Empire BlueCross BlueShield PPO	77 ▲	81 ▲	82 ▲	82 ▲	95	87	88
GHI (EmblemHealth)	72	73 ▼	70 ▼	76	96	84	82
MVP Preferred PPO	80 ▲	73	77	78	96	84	82
Oxford Health Insurance of New York	60 ▼	67 ▼	77	72 ▼	98 ▲	89	87
UnitedHealthcare Insurance Company of New York, Inc.	66 ▼	75 ▲	84 ▲	79 ▲	93	88	86
Statewide Average	71	74	75	77	96	86	85
National Average	*	*	*	*	96	85	84

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	73	68 ▼	58 ▼	70 ▼
CDPHP	86 ▲	81 ▲	74	81
Empire BlueCross BlueShield HealthPlus	31 ▼	72 ▼	70 ▼	75 ▼
Excellus BlueCross BlueShield	71	78	84 ▲	71 ▼
Fidelis Care New York, Inc.	81 ▲	81 ▲	80 ▲	84 ▲
HIP (EmblemHealth)	66 ▼	71 ▼	72	74 ▼
HealthNow New York Inc.	67	72	68	76
Healthfirst PHSP, Inc.	73	77 ▲	82 ▲	82 ▲
Independent Health's MediSource	84 ▲	73	80	81
MVP Health Care	81 ▲	75	78	78
MetroPlus Health Plan	54 ▼	67 ▼	55 ▼	63 ▼
Molina Healthcare	92 ▲	83	77	88
UnitedHealthcare Community Plan	66 ▼	75	83 ▲	79
WellCare of New York	69	71 ▼	62 ▼	73 ▼
YourCare Health Plan	NV	NV	NV	NV
MMC Statewide Average	71	75	75	78
National Average	*	*	*	*
Plan	HIV Special Needs Plans (SNP)			
	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics
Amida Care	56	43 ▼	53 ▲	37 ▼
MetroPlus Health Plan	54	67 ▲	55 ▲	63 ▲
VNSNY Choice Health Plans	12 ▼	0 ▼	0 ▼	0 ▼
SNP Statewide Average	53	51	46	47

Legend

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

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

* No national average available.

NV Plan submitted invalid data.

Notes

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

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	92	83	76
CDPHP	91	84 ▲	82
Empire BlueCross BlueShield HealthPlus	89	76	74
Excellus BlueCross BlueShield	92	80	85
Fidelis Care New York, Inc.	90	78	75
HIP (EmblemHealth)	91	79	74
HealthNow New York Inc.	92	77	86 ▲
Healthfirst PHSP, Inc.	89	80	79
Independent Health's MediSource	89	80	82
MVP Health Care	93 ▲	82	84 ▲
MetroPlus Health Plan	87 ▼	74 ▼	76
Molina Healthcare	87	81	83
UnitedHealthcare Community Plan	91	80	77
WellCare of New York	87	81	79
YourCare Health Plan	94 ▲	78	78
MMC Statewide Average	91	80	80
National Average	91	80	80
Plan	HIV Special Needs Plans (SNP)		
	Satisfaction with Provider Communication **	Satisfaction with Personal Doctor **	Satisfaction with Specialist **
Amida Care	93	87	74
MetroPlus Health Plan	95	91	74
VNSNY Choice Health Plans	95	88	76
SNP Statewide Average	94	89	75

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- ** Rotated measure. Data is from 2015.

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 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® 5.0H survey conducted in 2016 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 2015 using the CAHPS® 5.0H survey. 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 they received care they needed. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. 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 they received health services quickly. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. 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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. 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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. 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 they used their health plan's customer service. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. 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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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 they made healthcare decisions with their doctor. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. The following questions are contained in this composite: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)</p> <ol style="list-style-type: none"> 1. Did you and a doctor or other health provider talk about the reasons you might want to take a medicine? 2. Did you and 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?

Measure	Description (Type of Insurance Product)
Satisfaction with Experience of Care for Adults (Continued)	
Care Coordination	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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
Wellness Discussion	The percentage who responded "yes" when asked if they discussed with a doctor or other health care provider specific things they could do to prevent illness. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP)
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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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. This measure was not collected for 2016 Medicaid; 2015 Medicaid data is presented in this report. (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
CDPHP	92 ▲	91 ▲	95 ▲	71 ▲	92	78 ▲
Empire BlueCross BlueShield HMO	79 ▼	77 ▼	79 ▼	47 ▼	75 ▼	49 ▼
Excellus BlueCross BlueShield	89	91 ▲	90	69	93	68
HIP (EmblemHealth)	77 ▼	77 ▼	83	53 ▼	81 ▼	63
HealthNow New York Inc.	93 ▲	92 ▲	92	65	94 ▲	68
Independent Health	93 ▲	90	94 ▲	73 ▲	93 ▲	72 ▲
MVP Health Care	91	90 ▲	93 ▲	61	92	68
Oxford Health Plans of New York	89	88	78 ▼	59	87	58 ▼
Univera Healthcare	94 ▲	89	97 ▲	63	92	66
Statewide Average	88	87	89	62	89	66
National Average	86	84	88	63	88	63

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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
CDPHP	83	87	77	86 ▲
Empire BlueCross BlueShield HMO	82	83	74	70 ▼
Excellus BlueCross BlueShield	79	81	73	81
HIP (EmblemHealth)	73 ▼	69 ▼	69 ▼	65 ▼
HealthNow New York Inc.	82	88	81	76
Independent Health	82	86	83 ▲	84 ▲
MVP Health Care	80	86	74	86 ▲
Oxford Health Plans of New York	80	82	82 ▲	82
Univera Healthcare	84	88	74	87 ▲
Statewide Average	80	83	76	80
National Average	82	*	*	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.
- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	91	88	93 ▲	50 ▼	89	60
CDPHP Universal Benefits, Inc.	89	89	89	72 ▲	87	69 ▲
CGLIC/CHLIC	88	88	88	61	83	56
Empire BlueCross BlueShield PPO	89	86	90	58	84	70 ▲
GHI (EmblemHealth)	85	82	80	50 ▼	85	60
MVP Preferred PPO	91	89	85	68 ▲	86	55 ▼
Oxford Health Insurance of New York	86	84	80	56	84	63
UnitedHealthcare Insurance Company of New York, Inc.	88	82	80	54	89	61
Statewide Average	88	86	85	59	86	62
National Average	88	86	89	61	88	59

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.
- 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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	75	88	71	74
CDPHP Universal Benefits, Inc.	82	88	74	83 ▲
CGLIC/CHLIC	81	75 ▼	73	73
Empire BlueCross BlueShield PPO	80	83	76	81
GHI (EmblemHealth)	73	83	75	73
MVP Preferred PPO	75	88	79	77
Oxford Health Insurance of New York	85 ▲	85	75	83 ▲
UnitedHealthcare Insurance Company of New York, Inc.	80	76	75	76
Statewide Average	79	83	75	78
National Average	82	*	*	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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	78	81	90 ▲	77
CDPHP	85 ▲	83	89 ▲	82 ▲
Empire BlueCross BlueShield HealthPlus	74 ▼	75	82	78
Excellus BlueCross BlueShield	86 ▲	84 ▲	87	82 ▲
Fidelis Care New York, Inc.	78	76	85	71 ▼
HIP (EmblemHealth)	76	75 ▼	83	69 ▼
HealthNow New York Inc.	83	88 ▲	84	75
Healthfirst PHSP, Inc.	77	78	80	78
Independent Health's MediSource	82	85 ▲	87	81 ▲
MVP Health Care	85 ▲	84 ▲	88 ▲	80 ▲
MetroPlus Health Plan	67 ▼	68 ▼	80	73
Molina Healthcare	78	79	81	76
UnitedHealthcare Community Plan	74 ▼	78	79	69 ▼
WellCare of New York	71 ▼	75 ▼	82	75
YourCare Health Plan	82	83	86	75
MMC Statewide Average	79	80	84	76
National Average	80	80	88	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	81	85	90	78
MetroPlus Health Plan	83	89	90	80
VNSNY Choice Health Plans	83	86	88	73 ▼
SNP Statewide Average	82	86	89	77

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- ** Rotated measure. Data is from 2015.

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages for rotated measures are taken from the State of Healthcare Quality (SOHQ) 2017 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	78	84	69	73	86 ▲	79 ▲
CDPHP	83	88 ▲	72	80 ▲	75	75 ▲
Empire BlueCross BlueShield HealthPlus	75	76	64	74	60 ▼	59
Excellus BlueCross BlueShield	80	80	71	78	82	59
Fidelis Care New York, Inc.	73 ▼	73 ▼	65	69 ▼	71	56
HIP (EmblemHealth)	83	80	72	70	69	57
HealthNow New York Inc.	84 ▲	80	69	78	87 ▲	68
Healthfirst PHSP, Inc.	80	78	65	77	63	57
Independent Health's MediSource	80	84	73	79 ▲	87 ▲	77 ▲
MVP Health Care	80	82	67	78 ▲	75	62
MetroPlus Health Plan	77	78	67	70 ▼	71	69
Molina Healthcare	78	80	72	76	75	68
UnitedHealthcare Community Plan	76	77	67	68 ▼	68	67
WellCare of New York	80	73	66	71	69	49
YourCare Health Plan	81	82	71	74	74	55
MMC Statewide Average	79	80	68	75	74	64
National Average	79	*	*	74	*	*
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	85	84	85	74	75	62
MetroPlus Health Plan	83	89	84	77	84 ▲	64
VNSNY Choice Health Plans	81	88	84	78	76	64
SNP Statewide Average	83	87	84	77	79	63

Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- * No national average available.
- ** Rotated measure. Data is from 2015.

Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages for rotated measures are taken from the State of Healthcare Quality (SOHQ) 2017 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. Plan results reflect combined CHP and Medicaid responses.

In 2016, 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

Measure Descriptions

Measure	Description (Type of Insurance Product)
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. The following questions are contained in this composite: (Medicaid/Child Health Plus)</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?
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. The following questions are contained in this composite: (Medicaid/Child Health Plus)</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 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. The following questions are contained in this composite: (Medicaid/Child Health Plus)</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?

Measure	Description (Type of Insurance Product)
Satisfaction with Access to Care for Children (Continued)	
Access to Prescription Medicines for Children	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. (Medicaid/Child Health Plus)
Satisfaction with Health Plan 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. The following questions are contained in this composite: (Medicaid/Child Health Plus)</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	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) what number would you use to rate your child's health plan. (Medicaid/Child Health Plus)
Satisfaction with Experience of Care for Children	
Shared Decision Making for Children	<p>The percentage of parents responding "yes" and "a lot" when asked a set of questions to identify if, in the last 6 months, they made healthcare decisions with their child's doctor. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> 1. When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want your child to take a medicine? 2. When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might not want your child to take a medicine? 3. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

Measure	Description (Type of Insurance Product)
Satisfaction with Experience of Care for Children (Continued)	
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. The following questions are contained in this composite: (Medicaid/Child Health Plus)</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) when asked what number would you use to rate all your child's health care in the last 6 months.. (Medicaid/Child Health Plus)</p>
Satisfaction with Providers for Children	
Satisfaction with Personal Doctor for Children	<p>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?" (Medicaid/Child Health Plus)</p>
Satisfaction with Specialist for Children	<p>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?" (Medicaid/Child Health Plus)</p>
Satisfaction with Provider Communication for Children	<p>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. (Medicaid/Child Health Plus)</p>
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. The following questions are contained in this composite: (Medicaid/Child Health Plus)</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?

Medicaid 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	87	70	90	83	84
CDPHP	91 ▲	92 ▲	86 ▲	94	84	87
Empire BlueCross BlueShield HealthPlus	84	88	75	91	85	86
Excellus BlueCross BlueShield	86	91	81	94	90	90 ▲
Fidelis Care New York, Inc.	90 ▲	89	80	90	87	82
HIP (EmblemHealth)	86	88	75	91	83	81
HealthNow New York Inc.	90 ▲	92 ▲	81	96 ▲	89	86
Healthfirst PHSP, Inc.	79 ▼	87	77	93	88	87
Independent Health's MediSource	86	91	74	93	92 ▲	91 ▲
MVP Health Care	88	90	81	94	89	88 ▲
MetroPlus Health Plan	78 ▼	80 ▼	75	89	83	84
Molina Healthcare	77 ▼	86	76	91	83	79 ▼
UnitedHealthcare Community Plan	85	94 ▲	77	88	89	81
WellCare of New York	85	80 ▼	56 ▼	85 ▼	83	78 ▼
YourCare Health Plan	87	90	77	92	83	84
Statewide Average	85	88	76	91	86	85
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.

Medicaid Health Plan Performance

Satisfaction with Experience of Care for Children

Plan	Shared Decision Making for Children	Coordination of Care for Children with Chronic Conditions	Rating of Overall Healthcare for Children
Affinity Health Plan	67 ▼	69	85
CDPHP	81 ▲	69	87
Empire BlueCross BlueShield HealthPlus	67 ▼	74	84
Excellus BlueCross BlueShield	82 ▲	76	88
Fidelis Care New York, Inc.	73	80 ▲	88
HIP (EmblemHealth)	81 ▲	79	86
HealthNow New York Inc.	76	80 ▲	81
Healthfirst PHSP, Inc.	73	76	86
Independent Health's MediSource	75	71	88
MVP Health Care	70	79	88
MetroPlus Health Plan	71	72	84
Molina Healthcare	81 ▲	77	83
UnitedHealthcare Community Plan	73	71	87
WellCare of New York	69	70	82
YourCare Health Plan	79	68 ▼	85
Statewide Average	74	74	86
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.

Medicaid 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	90	80	94	90
CDPHP	94 ▲	86	94	94 ▲
Empire BlueCross BlueShield HealthPlus	88	84	93	87
Excellus BlueCross BlueShield	90	81	95 ▲	91
Fidelis Care New York, Inc.	88	81	95 ▲	92
HIP (EmblemHealth)	92	79	95 ▲	86
HealthNow New York Inc.	88	86	94	91
Healthfirst PHSP, Inc.	89	83	92	89
Independent Health's MediSource	87	84	93	88
MVP Health Care	88	89	93	89
MetroPlus Health Plan	90	80	90 ▼	90
Molina Healthcare	89	80	91	91
UnitedHealthcare Community Plan	91	80	95	90
WellCare of New York	90	90	93	93
YourCare Health Plan	88	89	92	92
Statewide Average	89	83	93	90
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.

There are a number of conditions affecting women, which can lead to serious illness if not caught early. Breast and cervical cancers are serious health concerns, and early detection of these cancers greatly increases a woman's chance of survival. Mammograms and Pap tests are recommended for women in order to screen for these cancers. Chlamydia is the most common sexually transmitted disease in the United States. To prevent complications of this infection, such as infertility, ectopic pregnancy, and Pelvic Inflammatory Disease (PID), it is recommended that all sexually active women, ages 16 to 24 years, 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 2015. 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)
Cervical Cancer Screening	The percentage of women, ages 21 to 64 years, who had cervical cytology performed every 3 years or women, ages 30 to 64 years, who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years. (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. (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. (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. (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.(Commercial HMO, Commercial PPO, Medicaid)
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.(Commercial HMO, Commercial PPO, Medicaid)
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.(Commercial HMO, Commercial PPO, Medicaid)
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, Commercial PPO, Medicaid)

Commercial HMO Health Plan Performance

Preventive Care for Women

Plan	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care	Postpartum Care
CDPHP	80 ▲	85	67 ▲	71 ▲	96 ▲	90 ▲
Empire BlueCross BlueShield HMO	65 ▼	72 ▼	53	61	87	74 ▼
Excellus BlueCross BlueShield	77 ▲	81	44 ▼	55 ▼	95 ▲	89 ▲
HIP (EmblemHealth)	75 ▲	84	77 ▲	80 ▲	90	73 ▼
HealthNow New York Inc.	76 ▲	78 ▼	57 ▲	64	95 ▲	89 ▲
Independent Health	76 ▲	80	58	63	97 ▲	91 ▲
MVP Health Care	74 ▲	76 ▼	52	64	95 ▲	83 ▲
Oxford Health Plans of New York	58 ▼	82	59 ▲	67 ▲	77 ▼	63 ▼
Univera Healthcare	76 ▲	81	49	59	97 ▲	91 ▲
Statewide Average	73	81	55	63	89	79
National Average	73	74	43	53	85	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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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)
CDPHP	88	4.0	19	19.0
Empire BlueCross BlueShield HMO	85	6.1	19	--
Excellus BlueCross BlueShield	89 ▲	3.8	17 ▲	12.9
HIP (EmblemHealth)	85	5.3	20	3.5
HealthNow New York Inc.	84 ▼	3.7	20	8.8
Independent Health	81 ▼	5.8 ▼	21	9.0
MVP Health Care	89	3.8	19	6.5
Oxford Health Plans of New York	90 ▲	4.2	23 ▼	9.3
Univera Healthcare	85	4.1	22	15.4
Regional Average	88	4.1	19	11.1
Statewide Average	88	4.5	20	12.3
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)
Empire BlueCross BlueShield HMO	93 ▲	5.6	23	--
HIP (EmblemHealth)	85 ▼	5.7	21	12.2 ▼
Oxford Health Plans of New York	89 ▲	5.9	21	19.5
Regional Average	87	5.8	21	16.3
Statewide Average	88	4.5	20	12.3

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 2015.

Notes

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

Commercial PPO Health Plan Performance

Preventive Care for Women

Plan	Breast Cancer Screening	Cervical 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 ▲	81	57 ▼	66 ▼	82 ▼	66
CDPHP Universal Benefits, Inc.	77 ▲	84	63 ▲	66	98 ▲	93 ▲
CGLIC/CHLIC	70 ▲	79	58	67	91 ▲	66
Empire BlueCross BlueShield PPO	67 ▼	77	59	67	89	75 ▲
GHI (EmblemHealth)	50 ▼	60 ▼	62	69	75 ▼	49 ▼
MVP Preferred PPO	72 ▲	78	52 ▼	62 ▼	94 ▲	83 ▲
Oxford Health Insurance of New York	64 ▼	86 ▲	55 ▼	65 ▼	83	61 ▼
UnitedHealthcare Insurance Company of New York, Inc.	72 ▲	82	64 ▲	73 ▲	85	62 ▼
Statewide Average	68	80	59	68	87	68
National Average	70	73	40	50	76	66

Legend

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

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	89	4.3	22	9.1
CDPHP Universal Benefits, Inc.	90	3.7	20	10.9
CGLIC/CHLIC	88	4.0	21	9.6
Empire BlueCross BlueShield PPO	89	5.2	22	7.6
GHI (EmblemHealth)	87	6.9	22	--
MVP Preferred PPO	91	4.1	17	8.8
Oxford Health Insurance of New York	92	7.4 ▼	24	11.2
UnitedHealthcare Insurance Company of New York, Inc.	89	4.3	24 ▼	8.4
Regional Average	89	4.5	22	8.8
Statewide Average	90	5.0	22	10.1
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	90	5.6	23	9.2
CGLIC/CHLIC	90	5.4	20	10.3
Empire BlueCross BlueShield PPO	87 ▼	5.6	21	13.3
GHI (EmblemHealth)	87	3.7	27	8.3
Oxford Health Insurance of New York	92	5.6	22	15.9
UnitedHealthcare Insurance Company of New York, Inc.	91	5.2	22	11.4
Regional Average	90	5.4	22	11.7
Statewide Average	90	5.0	22	10.1

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 2015.

- 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	Cervical 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	69 ▼	71	76 ▲	78 ▲	88	68	69
CDPHP	64 ▼	72	65 ▼	72 ▼	89	72	77 ▲
Empire BlueCross BlueShield HealthPlus	71	76	74	77	90	71	63
Excellus BlueCross BlueShield	64 ▼	68 ▼	56 ▼	71 ▼	89	67	67
Fidelis Care New York, Inc.	71	72	70 ▼	73 ▼	90	72	68
HIP (EmblemHealth)	70	78	75	78	88	63 ▼	66
HealthNow New York Inc.	57 ▼	70	57 ▼	63 ▼	86	66	65
Healthfirst PHSP, Inc.	77 ▲	81 ▲	81 ▲	81 ▲	88	73	67
Independent Health's MediSource	68 ▼	76	67 ▼	72 ▼	93 ▲	66 ▼	72 ▲
MVP Health Care	70	74	72	78	93 ▲	74	82 ▲
MetroPlus Health Plan	73 ▲	77	79 ▲	78 ▲	93 ▲	74	80 ▲
Molina Healthcare	68	69 ▼	67 ▼	75	83 ▼	71	74 ▲
UnitedHealthcare Community Plan	66 ▼	71	66 ▼	71 ▼	83 ▼	69	46 ▼
WellCare of New York	68 ▼	62 ▼	80 ▲	80 ▲	89	69	72 ▲
YourCare Health Plan	66 ▼	71	66 ▼	70 ▼	84 ▼	63 ▼	59 ▼
MMC Statewide Average	71	75	73	76	89	71	67
National Average	59	58	54	62	82	64	58
Plan	HIV Special Needs Plans (SNP)						
	Breast Cancer Screening	Cervical 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	64	67 ▼	--	--	--	--	--
MetroPlus Health Plan	72 ▲	84 ▲	84 ▲	--	--	--	--
VNSNY Choice Health Plans	66	83 ▲	--	--	--	--	--
SNP Statewide Average	67	77	74	70	80	50	52

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 averages are taken from the State of Healthcare Quality (SOHQ) 2017 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	77	6.6	15	11.6
CDPHP	74	5.0	13	17.6
Empire BlueCross BlueShield HealthPlus	74	9.3	15	13.0
Excellus BlueCross BlueShield	76	5.1 ▲	11	16.3
Fidelis Care New York, Inc.	74	6.8	13	15.3
HIP (EmblemHealth)	80	9.6	19 ▼	10.5
HealthNow New York Inc.	74	8.9	14	11.2
Healthfirst PHSP, Inc.	75	8.8	13	12.3
Independent Health's MediSource	70 ▼	7.4	11	14.4
MVP Health Care	74	7.5	16	11.4
Molina Healthcare	64 ▼	6.3	13	22.8
UnitedHealthcare Community Plan	77	6.9	15	9.6
WellCare of New York	68	5.7	12	6.3
YourCare Health Plan	74	7.6	14	18.4
Regional Average	74	6.7	14	14.3
Statewide Average	75	6.5	14	16.5
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 ▼	5.2	15	10.6 ▼
Empire BlueCross BlueShield HealthPlus	78 ▲	6.7	16 ▼	15.0
Fidelis Care New York, Inc.	77 ▲	6.9	14	21.8
HIP (EmblemHealth)	77	7.9	14	20.3
Healthfirst PHSP, Inc.	74	5.7 ▲	14	14.8 ▼
MetroPlus Health Plan	65 ▼	7.0	14	14.1 ▼
UnitedHealthcare Community Plan	81 ▲	5.7	13	38.6 ▲
WellCare of New York	71	7.5	14	10.1
Regional Average	75	6.3	14	18.4
Statewide Average	75	6.5	14	16.5

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 2015.

Notes

• Plans without symbols are consistent with the statewide average.

INTERPRETING THE MEASURES

Plan-specific Rates

The rates reported as part of the 2017 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 10 months, allowing for a one-month gap 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 are described in the following table.

Independent Variables	Values
Maternal Age	Less than 19 years 20-29 years 30 years and over
Education	Less than high school High school Any college
Alcohol Use	Yes/No
Illicit Drug Use	Yes/No
Tobacco Use	Yes/No
Level of prenatal care as defined by a modified Kessner index	Intense Adequate Intermediate Inadequate No care Unknown
Race/Ethnicity	Black Hispanic Other White
Parity	No previous live births 1-2 previous live births 3-4 previous live births 5 or more previous live births
Maternal medical risk factors	Yes/No
Hospitalized during this pregnancy	Yes/No
Previous pre-term delivery	Yes/No
Previous low birthweight	Yes/No
Nationality	Born in United States or Puerto Rico Born in Rest of World
Marital status	Yes/No
Poor pregnancy outcome	Yes/No
Vaginal bleeding	Yes/No
Pre-labor referral for high risk	Yes/No
Problems with gums during pregnancy	Yes/No
Aid Category *Medicaid Models only	TANF SSI FHP

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 are described in the following table.

Independent Variables	Values
Maternal Age	Less than 19 years 20-29 years 30 years and over
Education	Less than high school High school Any college
Diagnosis of Diabetes	Yes/No
Diagnosis of gestational diabetes	Yes/No
Diagnosis of pre-existing hypertension	Yes/No
Diagnosis of pregnancy-related hypertension	Yes/No
Birthweight greater than 4,000g	Yes/No
Birthweight between 500g and 1,500g	Yes/No
Race/Ethnicity	Black Hispanic Other White
Parity	No previous live births 1 or more previous live births
Resident of New York City	Yes/No
Presence of infection	Yes/No
Breech presentation	Yes/No
Pre-pregnancy Body Mass Index (BMI)	Underweight Normal weight Overweight Obese
Medicaid Aid Category *Medicaid Models only	ADC Safety Net MA SSI FHP
Eclampsia	Yes/No
Abruption placenta	Yes/No
Weeks gestation of pregnancy	Less than 33 weeks 33-35 weeks 36-38 weeks 39 weeks or more

Limitations of the Risk-Adjusted Data

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.

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.