



Department  
of Health

# 2018 Health Plan Comparison in New York State

**A Report Comparing Quality and Satisfaction  
Performance Results for Health Plans**



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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 2017, 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 2017 calendar year.

## Who Reports?

Managed care plans that were in operation during the entire 2017 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 2017 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:

- Immunizations for Adolescents - Combination 2
- Follow-up After Emergency Department Visit for Alcohol and Other Drug Dependence
- Follow-up After Emergency Department Visit for Mental Illness
- Follow-up After Hospitalization for Mental Illness
- Annual Monitoring for Patients on Persistent Medications - Combo

## 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 six types of managed care insurance is included in this report: Commercial Health Maintenance Organization (HMO), Commercial Preferred Provider Organization (PPO), Medicaid, Child Health Plus (CHP), Medicaid HIV Special Needs Plan (SNP), and Medicaid Health and Recovery Plan (HARP).

<b>Commercial HMO</b>	Commercial HMOs are a type of individual or employer-sponsored health insurance. Typically, the health plan contracts with a designated set of providers, and members select or are assigned to a primary care provider. Members may be required to seek referrals to some services or specialists.
<b>Commercial PPO</b>	Commercial PPO/EPOs are a type of individual or employer-sponsored health insurance. PPO/EPO members are not required to select a primary care provider. PPO/EPOs generally allow members to choose any health professional without a referral, both within and outside the designated provider network.
<b>Medicaid</b>	Medicaid is a government-sponsored insurance program for persons of all ages whose resources and income are not sufficient to pay for health care. Medicaid functions like a commercial HMO in that members are assigned to a primary care provider and that provider generally coordinates all of their care, including referrals or other special services.
<b>Child Health Plus</b>	Child Health Plus (CHP) is a government-sponsored insurance program for individuals up to age 19, and eligibility is based on a family's resources and income. CHP may require the member, or the member's family, to pay part of the premium. Much like Medicaid, a CHP member's care is directed and coordinated by a primary care physician through a designated network of providers. Visits to specialists and other special services generally require a referral under this plan.
<b>HIV SNP</b>	HIV Special Needs Plan (HIV SNP) is a government-sponsored health insurance plan for persons who are Medicaid-eligible and living with HIV/AIDS, or are homeless, or are transgender in NYC. Dependent children of eligible individuals may also enroll in a SNP. A SNP functions like Medicaid in that it requires care to be directed and coordinated through a primary care physician in a designated network. A SNP is unique because it provides additional special services for people living with HIV/AIDS including substance abuse counseling and supportive social services.
<b>HARP</b>	Health and Recovery Plan (HARP) is a government-sponsored health insurance program for adults with significant behavioral health needs (e.g. serious mental illness or substance use disorder). HARP members are offered Health Home care management services that develop person-centered plans of care that integrate physical and behavioral health services.



### 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/](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 six types of managed care insurance: Commercial HMO, Commercial PPO, Medicaid, HIV Special Needs Plan (HIV SNP), Child Health Plus (CHP), and Health and Recovery Plan (HARP).

#### 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 2018 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/](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 2017. Health plans that also enroll commercial members in their Preferred Provider Organization (PPO) products are listed in an additional profile table in this section. The profiles include the following information:

Profile Element	Description
Type of Insurance Product	A plan may enroll members under difference products such as Commercial HMO (HMO), Commercial PPO (PPO), Medicaid managed care (MA), HIV Special Needs Plan (SNP), Child Health Plus (CHP), or Health and Recovery Plan (HARP). 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 <a href="http://www.ncqa.org">www.ncqa.org</a> .
2017 Enrollment	The total number of enrollees in the health plans as of December 31, 2017. 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 2016	The percent change in total enrollment between December 31, 2016, and December 31, 2017.

**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 HMO	✓			✓	✓	✓	✓			1-800-453-0113
Empire BlueCross BlueShield HealthPlus		✓		✓	✓	✓				1-800-809-8009
Excellus BlueCross BlueShield †	✓	✓					✓	✓	✓	1-800-722-7884
Fidelis Care New York, Inc.		✓		✓	✓	✓	✓	✓	✓	1-888-343-3547
HIP (EmblemHealth)	✓	✓		✓	✓	✓	✓	✓		1-800-447-8255
HealthNow New York Inc.	✓	✓					✓		✓	1-866-231-0847
Healthfirst PHSP, Inc.	✓	✓		✓	✓					1-866-463-6743
Independent Health	✓	✓							✓	1-800-501-3439
MVP Health Care	✓	✓				✓	✓	✓	✓	1-888-687-6277
MetroPlus Health Plan		✓	✓		✓					1-800-303-9626
Molina Healthcare		✓						✓		1-800-223-7242
UnitedHealthcare Community Plan		✓		✓	✓	✓	✓	✓	✓	1-800-493-4647
Univera Healthcare †	✓								✓	1-800-499-1275
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.

† Excellus BlueCross BlueShield and Univera Healthcare combined reporting for measurement year 2017.

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



**Statewide Plan Profiles**

Health Plan	Website	NCQA Accreditation*	Enrollment	
			2017	Change from 2016
Affinity Health Plan	www.affinityplan.org		245,741	-3%
Amida Care	www.amidacareny.org		6,262	1%
CDPHP	www.cdphp.com	Excellent/Excellent	193,705	-3%
Crystal Run Health Plans	www.crystalrunhp.com		1,274	93%
Empire BlueCross BlueShield HMO	www.empireblue.com	Accredited	55,246	-16%
Empire BlueCross BlueShield HealthPlus	www.empireblue.com	Commendable	399,532	-4%
Excellus Blue Cross BlueShield †	www.excellusbcbs.com	Commendable/Commendable	1,108,745	2%
Fidelis Care New York, Inc.	www.fideliscare.org	Accredited	1,393,771	6%
HIP (EmblemHealth)	www.emblemhealth.com	Accredited/NA	435,444	-10%
HealthNow New York Inc.	www.healthnowny.com	Excellent/Commendable	391,021	41%
Healthfirst PHSP, Inc.	www.healthfirst.org		1,011,618	3%
Independent Health	www.independenthealth.com	Excellent	194,459	-1%
MVP Health Care	www.mvphealthcare.com	Commendable/NA	258,935	-2%
MetroPlus Health Plan	www.metroplus.org		417,429	-8%
Molina Healthcare	www.molinahealthcare.com		33,274	-7%
UnitedHealthcare Community Plan	www.uhccommunityplan.com	Commendable	550,397	6%
Univera Healthcare †	www.univerahealthcare.com	Commendable	†	NA
VNSNY Choice Health Plans	www.vnsnychoice.org		3,365	-5%
WellCare of New York	www.wellcare.com	Commendable	108,717	4%
YourCare Health Plan	www.yourcarehealthplan.com		46,556	-6%

**Notes**

\* Data Source: [NCQA](#) Accreditation Status as of October 2018. Accreditation status for Plans offering both Commercial and Medicaid Product listed as Commercial/Medicaid. NA = No Accreditation.

† Excellus BlueCross BlueShield and Univera Healthcare combined reporting for measurement year 2017.

Not every plan may be accepting new enrollment. Please call the plan Member Services 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
Oscar †	✓	✓	✓				1-855-672-2788
Oxford Health Insurance of New York	✓	✓	✓				1-800-444-6222
UnitedHealthcare Insurance Company of New York Inc.	✓	✓	✓	✓	✓	✓	1-866-633-2446

**Notes**

All Plans listed in this table are Commercial EPOs and PPOs.

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

† EPO reporting as PPO

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

**Statewide PPO Plan Profiles**

Health Plan	Website	NCQA Accreditation*	Enrollment	
			2017	Change from 2016
Aetna Life Insurance Company- New York	www.aetna.com	Commendable	906,531	12%
CDPHP Universal Benefits, Inc.	www.cdphp.com	Excellent	133,961	-16%
CGLIC/CHLIC	www.cigna.com	Accredited	472,162	3%
Empire BlueCross BlueShield PPO	www.empireblue.com	Accredited	1,049,633	-6%
GHI (EmblemHealth)	www.emblemhealth.com	Accredited	87,412	-14%
MVP Preferred PPO	www.mvphealthcare.com		109,153	17%
Oscar †	https://www.hioscar.com/ny		27,973	-24%
Oxford Health Insurance of New York	www.oxfordhealth.com	Commendable	745,447	190%
UnitedHealthcare Insurance Company of New York Inc.	www.myuhc.com	Accredited	757,346	-4%

**Notes**

All Plans listed in this table are Commercial EPOs and PPOs.

\* Data Source: [NCQA](#) Accreditation Status as of October 2018.

† EPO reporting as PPO

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

This section provides information on how well managed care plans provide care to their adult members.

## Managing Acute Illness

Encouraging healthy choices is an important role for providers, and the medical assistance with smoking cessation measures indicate how often these interactions occur. This measure is collected as part of the CAHPS® survey.

Measure	Description (Type of Insurance Product)
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 for commercial results. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)</p> <ol style="list-style-type: none"> <li>1. Advising Smokers to Quit: The percentage of eligible adults who received cessation advice.</li> <li>2. Discussing Cessation Medications: The percentage of eligible adults who discussed or were recommended cessation medications.</li> <li>3. Discussing Cessation Strategies: The percentage of eligible adults who discussed or were provided cessation methods or strategies.</li> </ol>

## Managing Cardiovascular and Respiratory Conditions

Chronic conditions such as cardiovascular disease and respiratory conditions (e.g., asthma and COPD) 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 these conditions are shown for both the commercial and Medicaid populations.

Measure	Description (Type of Insurance Product)
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, HARP)</p> <ol style="list-style-type: none"> <li>1. Members, ages 18 to 59 years, whose blood pressure was &lt;140/90 mm Hg.</li> <li>2. Members, ages 60 to 85 years, with a diagnosis of diabetes whose blood pressure &lt;140/90 mm Hg.</li> <li>3. Members, ages 60 to 85 years, without a diagnosis of diabetes whose blood pressure was &lt;150/90 mm Hg.</li> </ol>
Persistence of Beta-Blocker Treatment	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, HARP)
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, HARP)
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, HARP)

Measure	Description (Type of Insurance Product)
<b>Managing Cardiovascular and Respiratory Conditions (Continued)</b>	
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, HARP)
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, HARP)
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, HARP)</p> <ol style="list-style-type: none"> <li>1. Corticosteroid Rate: The percentage of events when the member was prescribed a systemic corticosteroid within 14 days of the event.</li> <li>2. Bronchodilator Rate: The percentage of events when the member was prescribed a bronchodilator within 30 days of the event.</li> </ol>

### Monitoring Diabetes and Managing Diabetes Outcomes (Medicaid Managed Care Plans)

Diabetes is a complex chronic condition affecting a large population requiring daily care and management. These measures report components of care for members with diabetes and the rates at which they received those components of care.

Measure	Description (Type of Insurance Product)
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, HARP)
Monitoring Diabetes	<ol style="list-style-type: none"> <li>1. HbA1c Testing: The percentage of members with diabetes who received at least one Hemoglobin A1c (HbA1c) test within the past year.</li> <li>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.</li> <li>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.</li> <li>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.</li> </ol>

Measure	Description (Type of Insurance Product)
<b>Monitoring Diabetes and Managing Diabetes Outcomes (Medicaid Managed Care Plans) (Continued)</b>	
Managing Diabetes Outcomes	<p>1. Poor HbA1c Control: The percentage of members with diabetes whose most recent HbA1c level indicated poor control (&gt;9.0 percent). <b>A low rate is desirable for this measure.</b></p> <p>2. HbA1c Control: The percentage of members with diabetes whose most recent HbA1c level was &lt;8.0 percent.</p> <p>3. Blood Pressure Controlled: The percentage of members with diabetes whose most recent blood pressure reading was &lt;140/90 mm Hg.</p>

### Managing Medications

Members using medications to treat chronic 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.

Measure	Description (Type of Insurance Product)
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, HARP)
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, HARP)</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>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 two numerators divided by the sum of the two denominators.</p>
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, HARP)</p> <p>1. Received Statin Therapy: Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year.</p> <p>2. Statin Adherence 80%: Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment period.</p>



Measure	Description (Type of Insurance Product)
<b>Managing Medications (Continued)</b>	
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, HARP)</p> <ol style="list-style-type: none"> <li>1. Received Statin Therapy: Members who were dispensed at least one statin medication of any intensity during the measurement year.</li> <li>2. Statin Adherence 80%: Members who remained on a statin medication of any intensity for at least 80% of the treatment period.</li> </ol>

### Managing Preventive Care

In addition to receiving annual flu vaccinations, 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.

Measure	Description (Type of Insurance Product)
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, HARP)
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, HARP)
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. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)

### HIV/AIDS Viral Load Suppression (New York State-Specific Measure)

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	Description (Type of Insurance Product)
Viral Load Suppression	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, HARP)

### Commercial HMO Health Plan Performance

#### Managing Preventive Care

Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults
CDPHP	76 ▲	92 ▲	58
Empire BlueCross BlueShield HMO	61 ▼	78 ▼	54
Excellus BlueCross BlueShield	71	84	54
HIP (EmblemHealth)	64	77 ▼	42 ▼
HealthNow New York Inc.	68	94 ▲	51
Independent Health	70	94 ▲	49
MVP Health Care	73	88	59
Univera Healthcare	71	84	54
<b>Statewide Average</b>	<b>69</b>	<b>86</b>	<b>53</b>
<b>National Average</b>	<b>63</b>	<b>80</b>	<b>50</b>

#### 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) 2018 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	89	69	63
Empire BlueCross BlueShield HMO	--	--	--
Excellus BlueCross BlueShield	77	57	59
HIP (EmblemHealth)	78	54	49
HealthNow New York Inc.	88	62	54
Independent Health	83	61	54
MVP Health Care	88	69	53
Univera Healthcare	81	63	54
<b>Statewide Average</b>	<b>83</b>	<b>62</b>	<b>56</b>
<b>National Average</b>	<b>76</b>	<b>53</b>	<b>46</b>

#### 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) 2018 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	75 ▲	85
Empire BlueCross BlueShield HMO	52 ▼	--
Excellus BlueCross BlueShield	69	86
HIP (EmblemHealth)	47 ▼	83
HealthNow New York Inc.	76 ▲	93
Independent Health	75 ▲	94
MVP Health Care	72 ▲	94
Univera Healthcare	69	86
<b>Statewide Average</b>	<b>67</b>	<b>88</b>
<b>National Average</b>	<b>62</b>	<b>85</b>

#### 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) 2018 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	85	76	51
Empire BlueCross BlueShield HMO	76	76	59
Excellus BlueCross BlueShield	83 ▲	78 ▲	58 ▲
HIP (EmblemHealth)	78	75	53
HealthNow New York Inc.	78 ▼	73 ▼	48 ▼
Independent Health	79	70 ▼	44 ▼
MVP Health Care	84	78	59
Univera Healthcare	83 ▲	78 ▲	58 ▲
<b>Statewide Average</b>	<b>81</b>	<b>76</b>	<b>54</b>
<b>National Average</b>	*	*	*

#### 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	81	83
Empire BlueCross BlueShield HMO	54	--	--
Excellus BlueCross BlueShield	42 ▼	76	78
HIP (EmblemHealth)	48 ▲	69	75
HealthNow New York Inc.	46	81	81
Independent Health	51 ▲	83	88
MVP Health Care	38 ▼	70	81
Univera Healthcare	42 ▼	76	78
<b>Statewide Average</b>	<b>45</b>	<b>77</b>	<b>80</b>
<b>National Average</b>	<b>42</b>	<b>76</b>	<b>81</b>

#### 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) 2018 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	68 ▲	91	60
Empire BlueCross BlueShield HMO	88 ▼	55 ▼	90	47 ▼
Excellus BlueCross BlueShield	92	59	88	51
HIP (EmblemHealth)	91	64	91	57
HealthNow New York Inc.	90	67	89	60
Independent Health	92	68 ▲	93 ▲	61 ▲
MVP Health Care	90	66	91	57
Univera Healthcare	92	59	88	51
<b>Statewide Average</b>	<b>91</b>	<b>63</b>	<b>90</b>	<b>55</b>
<b>National Average</b>	<b>91</b>	<b>55</b>	<b>90</b>	<b>*</b>

#### 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) 2018 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	18 ▲	69 ▲	74 ▲
Empire BlueCross BlueShield HMO	28	62	62 ▼
Excellus BlueCross BlueShield	24	63	76 ▲
HIP (EmblemHealth)	32 ▼	59 ▼	52 ▼
HealthNow New York Inc.	21	64	73
Independent Health	18 ▲	71 ▲	79 ▲
MVP Health Care	21	65	71
Univera Healthcare	24	63	76 ▲
<b>Statewide Average</b>	<b>24</b>	<b>63</b>	<b>69</b>
<b>National Average</b>	<b>32</b>	<b>58</b>	<b>62</b>

#### 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) 2018 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	Diuretics	Combined Rate
CDPHP	89	87 ▲	87 ▲	87 ▲
Empire BlueCross BlueShield HMO	80	85	84	85
Excellus BlueCross BlueShield	87	85	83 ▼	84
HIP (EmblemHealth)	80	87 ▲	86 ▲	87 ▲
HealthNow New York Inc.	83	84 ▼	83	84
Independent Health	85	86	85	85 ▲
MVP Health Care	88	85	84	84
Univera Healthcare	87	85	83 ▼	84
<b>Statewide Average</b>	<b>86</b>	<b>85</b>	<b>84</b>	<b>84</b>
<b>National Average</b>	<b>89</b>	<b>84</b>	<b>83</b>	<b>84</b>

#### 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) 2018 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	85 ▲	74 ▼	64 ▲	70
Empire BlueCross BlueShield HMO	76 ▼	78	58	71
Excellus BlueCross BlueShield	81	80 ▲	61	74 ▲
HIP (EmblemHealth)	68 ▼	73	51 ▼	59 ▼
HealthNow New York Inc.	83 ▲	75	63 ▲	69 ▼
Independent Health	82	76	63 ▲	71
MVP Health Care	81	76	65 ▲	73
Univera Healthcare	81	80 ▲	61	74 ▲
<b>Statewide Average</b>	<b>81</b>	<b>77</b>	<b>61</b>	<b>72</b>
<b>National Average</b>	<b>80</b>	<b>73</b>	<b>62</b>	<b>66</b>

#### 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) 2018 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	59	55 ▼	48
CDPHP Universal Benefits, Inc.	71 ▲	92 ▲	64 ▲
CGLIC/CHLIC	60	65	43
Empire BlueCross BlueShield PPO	59	75 ▲	47
GHI (EmblemHealth)	50 ▼	45 ▼	47
MVP Preferred PPO	56	85 ▲	45
Oscar	39 ▼	72	34 ▼
Oxford Health Insurance of New York	62	69	45
UnitedHealthcare Insurance Company of New York, Inc.	64	75 ▲	50
<b>Statewide Average</b>	<b>60</b>	<b>69</b>	<b>48</b>
<b>National Average</b>	<b>59</b>	<b>67</b>	<b>50</b>

#### 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) 2018 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	81	57	49
CDPHP Universal Benefits, Inc.	86 ▲	71 ▲	65 ▲
CGLIC/CHLIC	71	38	34
Empire BlueCross BlueShield PPO	75	49	45
GHI (EmblemHealth)	80	67	40
MVP Preferred PPO	69	52	42
Oscar	66	36 ▼	42
Oxford Health Insurance of New York	--	--	--
UnitedHealthcare Insurance Company of New York, Inc.	66	46	37
<b>Statewide Average</b>	<b>75</b>	<b>52</b>	<b>45</b>
<b>National Average</b>	<b>73</b>	<b>48</b>	<b>42</b>

## 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) 2018 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	46	84
CDPHP Universal Benefits, Inc.	70 ▲	96 ▲
CGLIC/CHLIC	43 ▼	81
Empire BlueCross BlueShield PPO	47	85
GHI (EmblemHealth)	NV	62 ▼
MVP Preferred PPO	63 ▲	91
Oscar	55 ▲	--
Oxford Health Insurance of New York	48	81
UnitedHealthcare Insurance Company of New York, Inc.	51	84
<b>Statewide Average</b>	<b>49</b>	<b>83</b>
<b>National Average</b>	<b>54</b>	<b>84</b>

#### 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

- 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) 2018 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	77	78 ▲	58 ▲
CDPHP Universal Benefits, Inc.	79	73	49
CGLIC/CHLIC	79	73	50
Empire BlueCross BlueShield PPO	83 ▲	75	51
GHI (EmblemHealth)	75	77	53
MVP Preferred PPO	77	73	50
Oscar	83	75	49
Oxford Health Insurance of New York	78	74	52
UnitedHealthcare Insurance Company of New York, Inc.	78	73	51
<b>Statewide Average</b>	<b>79</b>	<b>75</b>	<b>52</b>
<b>National Average</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### 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	56	74	87 ▲
CDPHP Universal Benefits, Inc.	38 ▼	75	80
CGLIC/CHLIC	59	67	78
Empire BlueCross BlueShield PPO	56	78	87 ▲
GHI (EmblemHealth)	49 ▼	41 ▼	53 ▼
MVP Preferred PPO	46 ▼	86 ▲	81
Oscar	--	--	--
Oxford Health Insurance of New York	64 ▲	74	77
UnitedHealthcare Insurance Company of New York, Inc.	58	73	82
<b>Statewide Average</b>	<b>56</b>	<b>68</b>	<b>76</b>
<b>National Average</b>	<b>40</b>	<b>75</b>	<b>80</b>

## 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) 2018 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	89	55	90	48
CDPHP Universal Benefits, Inc.	91	68 ▲	90	62 ▲
CGLIC/CHLIC	91	48	90	45
Empire BlueCross BlueShield PPO	88	48	88	44
GHI (EmblemHealth)	77 ▼	44 ▼	83 ▼	37 ▼
MVP Preferred PPO	91	52	88	46
Oscar	90	38 ▼	89	34 ▼
Oxford Health Insurance of New York	91	51	91	44
UnitedHealthcare Insurance Company of New York, Inc.	90	54	85	45
<b>Statewide Average</b>	<b>89</b>	<b>52</b>	<b>89</b>	<b>45</b>
<b>National Average</b>	<b>90</b>	<b>49</b>	<b>88</b>	<b>*</b>

#### 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) 2018 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	37	56	48 ▼
CDPHP Universal Benefits, Inc.	21 ▲	66 ▲	75 ▲
CGLIC/CHLIC	43 ▼	49 ▼	51
Empire BlueCross BlueShield PPO	30 ▲	59	60 ▲
GHI (EmblemHealth)	56 ▼	39 ▼	28 ▼
MVP Preferred PPO	29 ▲	60	70 ▲
Oscar	33	58	62 ▲
Oxford Health Insurance of New York	34	59	55
UnitedHealthcare Insurance Company of New York, Inc.	39	54	60
<b>Statewide Average</b>	<b>35</b>	<b>56</b>	<b>55</b>
<b>National Average</b>	<b>41</b>	<b>48</b>	<b>50</b>

## 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) 2018 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	Diuretics	Combined Rate
Aetna Life Insurance Company - New York	84	85	83	84
CDPHP Universal Benefits, Inc.	90	85	85	85
CGLIC/CHLIC	84	86 ▲	84	85
Empire BlueCross BlueShield PPO	85	85	85 ▲	85
GHI (EmblemHealth)	70 ▼	75 ▼	74 ▼	74 ▼
MVP Preferred PPO	88	85	84	85
Oscar	79	85	83	84
Oxford Health Insurance of New York	86	86 ▲	84	85
UnitedHealthcare Insurance Company of New York, Inc.	87	86 ▲	85	85
<b>Statewide Average</b>	<b>85</b>	<b>85</b>	<b>84</b>	<b>85</b>
<b>National Average</b>	<b>88</b>	<b>83</b>	<b>82</b>	<b>82</b>

#### 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) 2018 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	77	80 ▲	57	68 ▲
CDPHP Universal Benefits, Inc.	84 ▲	77	63 ▲	70 ▲
CGLIC/CHLIC	79	74	57	63 ▼
Empire BlueCross BlueShield PPO	80 ▲	75	58	68 ▲
GHI (EmblemHealth)	50 ▼	64 ▼	42 ▼	60 ▼
MVP Preferred PPO	83 ▲	74	62 ▲	71 ▲
Oscar	77	76	61	69
Oxford Health Insurance of New York	78	74	57	65 ▼
UnitedHealthcare Insurance Company of New York, Inc.	77	75	56	65
<b>Statewide Average</b>	<b>77</b>	<b>75</b>	<b>57</b>	<b>66</b>
<b>National Average</b>	<b>81</b>	<b>75</b>	<b>60</b>	<b>68</b>

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

### Medicaid Health Plan Performance

#### Managing Preventive Care

Medicaid Managed Care Plans (MMC)				
Plan	Colon Cancer Screening	Adult BMI Assessment	Annual Dental Visit (Ages 19-20)	Flu Shot for Adults
Affinity Health Plan	61	89	37 ▼	44
CDPHP	53 ▼	96 ▲	39 ▼	42
Empire BlueCross BlueShield HealthPlus	61	84	40 ▼	39
Excellus BlueCross BlueShield	56 ▼	94 ▲	48 ▲	48 ▲
Fidelis Care New York, Inc.	61	88	48 ▲	37 ▼
HIP (EmblemHealth)	60	77 ▼	37 ▼	44
HealthNow New York Inc.	50 ▼	99 ▲	50 ▲	43
Healthfirst PHSP, Inc.	69 ▲	84	43	48
Independent Health's MediSource	53 ▼	93 ▲	48 ▲	41
MVP Health Care	54 ▼	84	45	39
MetroPlus Health Plan	67 ▲	92 ▲	38 ▼	46
Molina Healthcare	54 ▼	82 ▼	42	45
UnitedHealthcare Community Plan	53 ▼	78 ▼	46 ▲	35 ▼
WellCare of New York	57	94 ▲	35 ▼	39
YourCare Health Plan	55 ▼	88	45	46
<b>MMC Statewide Average</b>	<b>62</b>	<b>86</b>	<b>43</b>	<b>42</b>
<b>National Average</b>	<b>*</b>	<b>85</b>	<b>37</b>	<b>40</b>
HIV Special Needs Plans (SNP)				
Plan	Colon Cancer Screening	Adult BMI Assessment	Annual Dental Visit (Ages 19-20)	Flu Shot for Adults
Amida Care	56 ▼	74	NA	73
MetroPlus Health Plan	67 ▲	91 ▲	NA	73
VNSNY Choice Health Plans	63	67 ▼	NA	77
<b>SNP Statewide Average</b>	<b>61</b>	<b>77</b>	<b>NA</b>	<b>74</b>

#### Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- \* No national average available.
- 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) 2018 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	85	54	46
CDPHP	81	64	53
Empire BlueCross BlueShield HealthPlus	76	52	45
Excellus BlueCross BlueShield	81	65	49
Fidelis Care New York, Inc.	84	56	51
HIP (EmblemHealth)	80	57	52
HealthNow New York Inc.	83	64	50
Healthfirst PHSP, Inc.	77	50	38
Independent Health's MediSource	78	63	53
MVP Health Care	82	60	48
MetroPlus Health Plan	79	58	55
Molina Healthcare	77	63	54
UnitedHealthcare Community Plan	69	48	43
WellCare of New York	79	63	63
YourCare Health Plan	81	58	54
<b>MMC Statewide Average</b>	<b>80</b>	<b>59</b>	<b>51</b>
<b>National Average</b>	<b>77</b>	<b>52</b>	<b>45</b>
HIV Special Needs Plans (SNP)			
Plan	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Amida Care	91	79	75
MetroPlus Health Plan	91	85	76
VNSNY Choice Health Plans	95	80	75
<b>SNP Statewide Average</b>	<b>92</b>	<b>81</b>	<b>75</b>

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

### Medicaid Health Plan Performance

#### Managing Cardiovascular Conditions

Medicaid Managed Care Plans (MMC)		
Plan	Controlling High Blood Pressure	Persistence of Beta-Blocker Treatment
Affinity Health Plan	35 ▼	76
CDPHP	71 ▲	86
Empire BlueCross BlueShield HealthPlus	42 ▼	82
Excellus BlueCross BlueShield	70 ▲	85
Fidelis Care New York, Inc.	72 ▲	92 ▲
HIP (EmblemHealth)	45 ▼	83
HealthNow New York Inc.	63	--
Healthfirst PHSP, Inc.	61	84
Independent Health's MediSource	69 ▲	97
MVP Health Care	64	80
MetroPlus Health Plan	72 ▲	79
Molina Healthcare	54 ▼	--
UnitedHealthcare Community Plan	52 ▼	82
WellCare of New York	53 ▼	79
YourCare Health Plan	60	89
<b>MMC Statewide Average</b>	<b>61</b>	<b>85</b>
<b>National Average</b>	<b>57</b>	<b>78</b>
HIV Special Needs Plans (SNP)		
Plan	Controlling High Blood Pressure	Persistence of Beta-Blocker Treatment
Amida Care	41	--
MetroPlus Health Plan	75 ▲	--
VNSNY Choice Health Plans	14 ▼	--
<b>SNP Statewide Average</b>	<b>43</b>	<b>--</b>

#### 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) 2018 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	50 ▼	66	41 ▼
CDPHP	61	67	41
Empire BlueCross BlueShield HealthPlus	52 ▼	69	42
Excellus BlueCross BlueShield	60	69	51 ▲
Fidelis Care New York, Inc.	63 ▲	72 ▲	47 ▲
HIP (EmblemHealth)	58	66	38 ▼
HealthNow New York Inc.	56	70	46
Healthfirst PHSP, Inc.	51 ▼	70	45
Independent Health's MediSource	62	63 ▼	39
MVP Health Care	61	62 ▼	36 ▼
MetroPlus Health Plan	54 ▼	70	46
Molina Healthcare	58	61	41
UnitedHealthcare Community Plan	59	70	47
WellCare of New York	65 ▲	69	44
YourCare Health Plan	64 ▲	62 ▼	42
<b>MMC Statewide Average</b>	<b>57</b>	<b>69</b>	<b>45</b>
<b>National Average</b>	<b>*</b>	<b>*</b>	<b>*</b>
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	41 ▲	81	64
MetroPlus Health Plan	36	81	64
VNSNY Choice Health Plans	29 ▼	82	74
<b>SNP Statewide Average</b>	<b>37</b>	<b>82</b>	<b>66</b>

#### 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	50	80	91
CDPHP	36 ▼	78	84
Empire BlueCross BlueShield HealthPlus	56	71	85
Excellus BlueCross BlueShield	43 ▼	80	88
Fidelis Care New York, Inc.	59 ▲	79 ▲	89
HIP (EmblemHealth)	50	72	87
HealthNow New York Inc.	30 ▼	79	88
Healthfirst PHSP, Inc.	65 ▲	68 ▼	89
Independent Health's MediSource	42 ▼	85 ▲	93
MVP Health Care	40 ▼	80	86
MetroPlus Health Plan	51	73	90
Molina Healthcare	38 ▼	82	91
UnitedHealthcare Community Plan	56	76	86
WellCare of New York	54	72	85
YourCare Health Plan	44 ▼	78	83
<b>MMC Statewide Average</b>	<b>55</b>	<b>76</b>	<b>88</b>
<b>National Average</b>	<b>32</b>	<b>68</b>	<b>81</b>
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	22	57	96
MetroPlus Health Plan	40 ▲	54	91
VNSNY Choice Health Plans	21	73 ▲	92
<b>SNP Statewide Average</b>	<b>26</b>	<b>60</b>	<b>94</b>

## 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) 2018 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	91	63	90	57
CDPHP	89	69	91	61
Empire BlueCross BlueShield HealthPlus	91	63	93	58
Excellus BlueCross BlueShield	89	71	91	62
Fidelis Care New York, Inc.	91	72 ▲	94	65
HIP (EmblemHealth)	91	60 ▼	93	55 ▼
HealthNow New York Inc.	88 ▼	66	91	57
Healthfirst PHSP, Inc.	93	70	92	66
Independent Health's MediSource	88 ▼	64	92	55 ▼
MVP Health Care	89	56 ▼	91	50 ▼
MetroPlus Health Plan	94 ▲	66	93	62
Molina Healthcare	90	64	89 ▼	55 ▼
UnitedHealthcare Community Plan	90	59 ▼	91	54 ▼
WellCare of New York	92	59 ▼	93	55 ▼
YourCare Health Plan	89	67	92	59
<b>MMC Statewide Average</b>	<b>91</b>	<b>67</b>	<b>93</b>	<b>61</b>
<b>National Average</b>	<b>88</b>	<b>57</b>	<b>90</b>	<b>*</b>
Plan	HIV Special Needs Plans (SNP)			
	HbA1c Testing	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Amida Care	94	48	93	45
MetroPlus Health Plan	96	53	93	48
VNSNY Choice Health Plans	94	49	91	45
<b>SNP Statewide Average</b>	<b>95</b>	<b>50</b>	<b>93</b>	<b>46</b>

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

## Medicaid Health Plan Performance

### Managing Diabetes Outcomes

Medicaid Managed Care Plans (MMC)			
Plan	Poor HbA1c Control†	HbA1C Control (<8.0%)	Blood pressure controlled (<140/90 mm Hg)
Affinity Health Plan	39 ▼	52 ▼	54 ▼
CDPHP	30	60	74 ▲
Empire BlueCross BlueShield HealthPlus	34	54	54 ▼
Excellus BlueCross BlueShield	33	54	72 ▲
Fidelis Care New York, Inc.	26 ▲	64 ▲	59
HIP (EmblemHealth)	33	57	56 ▼
HealthNow New York Inc.	30	56	68 ▲
Healthfirst PHSP, Inc.	31	59	61
Independent Health's MediSource	29	60	69 ▲
MVP Health Care	32	58	66
MetroPlus Health Plan	26	59	70 ▲
Molina Healthcare	54 ▼	36 ▼	57 ▼
UnitedHealthcare Community Plan	30	59	60
WellCare of New York	28	59	63
YourCare Health Plan	34	57	65
<b>MMC Statewide Average</b>	<b>30</b>	<b>59</b>	<b>61</b>
<b>National Average</b>	<b>41</b>	<b>49</b>	<b>63</b>
HIV Special Needs Plans (SNP)			
Plan	Poor HbA1c Control†	HbA1C Control (<8.0%)	Blood pressure controlled (<140/90 mm Hg)
Amida Care	35 ▲	60 ▲	51
MetroPlus Health Plan	22 ▲	67 ▲	70 ▲
VNSNY Choice Health Plans	86 ▼	13 ▼	19 ▼
<b>SNP Statewide Average</b>	<b>44</b>	<b>50</b>	<b>48</b>

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).



## Medicaid Health Plan Performance

### Managing Medications

Plan	Medicaid Managed Care Plans (MMC)			
	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications		
		ACE Inhibitors/ARBs	Diuretics	Combined Rate
Affinity Health Plan	83	92	92	92
CDPHP	84	89 ▼	87 ▼	88 ▼
Empire BlueCross BlueShield HealthPlus	82	93 ▲	92	93 ▲
Excellus BlueCross BlueShield	90	87 ▼	87 ▼	87 ▼
Fidelis Care New York, Inc.	84	93 ▲	92 ▲	93 ▲
HIP (EmblemHealth)	84	91 ▼	90 ▼	91 ▼
HealthNow New York Inc.	74	87 ▼	88	87 ▼
Healthfirst PHSP, Inc.	82	93 ▲	92	92
Independent Health's MediSource	80	88 ▼	87 ▼	88 ▼
MVP Health Care	80	90 ▼	89 ▼	90 ▼
MetroPlus Health Plan	89 ▲	93 ▲	92	93 ▲
Molina Healthcare	80	90	89	90 ▼
UnitedHealthcare Community Plan	79	92	91	92
WellCare of New York	81	93	92	93
YourCare Health Plan	82	88 ▼	89 ▼	89 ▼
<b>MMC Statewide Average</b>	<b>83</b>	<b>92</b>	<b>91</b>	<b>92</b>
<b>National Average</b>	<b>74</b>	<b>88</b>	<b>88</b>	<b>88</b>
Plan	HIV Special Needs Plans (SNP)			
	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications		
		ACE Inhibitors/ARBs	Diuretics	Combined Rate
Amida Care	NA	99	99 ▲	99
MetroPlus Health Plan	NA	98 ▼	96 ▼	97 ▼
VNSNY Choice Health Plans	NA	99	99	99
<b>SNP Statewide Average</b>	<b>NA</b>	<b>99</b>	<b>98</b>	<b>99</b>

#### 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) 2018 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	79	60 ▼	66	56 ▼
CDPHP	83	63	63 ▼	56
Empire BlueCross BlueShield HealthPlus	79	68	68 ▲	61
Excellus BlueCross BlueShield	86 ▲	69	67	68 ▲
Fidelis Care New York, Inc.	76 ▼	66	65 ▼	61
HIP (EmblemHealth)	77	70	61 ▼	61
HealthNow New York Inc.	83	65	70	57
Healthfirst PHSP, Inc.	78	67	68 ▲	60
Independent Health's MediSource	84	71	70	63
MVP Health Care	80	60 ▼	64	57 ▼
MetroPlus Health Plan	81 ▲	72 ▲	73 ▲	64 ▲
Molina Healthcare	83	62	64	55
UnitedHealthcare Community Plan	75 ▼	65	61 ▼	61
WellCare of New York	80	66	69	61
YourCare Health Plan	83	70	65	58
<b>MMC Statewide Average</b>	<b>78</b>	<b>66</b>	<b>66</b>	<b>61</b>
<b>National Average</b>	<b>76</b>	<b>63</b>	<b>61</b>	<b>59</b>
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	71	59	74 ▼
MetroPlus Health Plan	65	63	60	85 ▲
VNSNY Choice Health Plans	79	79	59	80
<b>SNP Statewide Average</b>	<b>70</b>	<b>72</b>	<b>59</b>	<b>79</b>

## 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) 2018 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	78
CDPHP	84
Empire BlueCross BlueShield HealthPlus	73
Excellus BlueCross BlueShield	84 ▲
Fidelis Care New York, Inc.	76
HIP (EmblemHealth)	72
HealthNow New York Inc.	81
Healthfirst PHSP, Inc.	78
Independent Health's MediSource	79
MVP Health Care	85 ▲
MetroPlus Health Plan	76
Molina Healthcare	80
UnitedHealthcare Community Plan	75
WellCare of New York	66 ▼
YourCare Health Plan	76
<b>MMC Statewide Average</b>	<b>77</b>
<b>National Average</b>	<b>*</b>
HIV Special Needs Plans (SNP)	
Plan	Viral Load Suppression
Amida Care	77 ▼
MetroPlus Health Plan	80
VNSNY Choice Health Plans	83 ▲
<b>SNP Statewide Average</b>	<b>79</b>

#### 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.

### HARP Health Plan Performance

#### Managing Preventive Care

Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults
Affinity Enriched Health	54	82	58
CDPHP	66 ▲	95 ▲	50
Empire BlueCross BlueShield HealthPlus	52 ▼	81 ▼	44
Excellus Health Plan, Inc.	63	95 ▲	54
Fidelis HealthierLife	53 ▼	84	53
HIP EmblemHealth Enhanced Care Plus	49 ▼	69 ▼	53
Healthfirst Personal Wellness Plan	70 ▲	86	62 ▲
Independent Health's MediSource Connect	62	95 ▲	59
MVP Harmonious Health Care Plan	58	83	56
MetroPlus Enhanced	51 ▼	87	45
TONY (Total Care Plus)	54	82	50
UnitedHealthcare Community-Wellness4Me	55	80 ▼	39 ▼
YourCare Options Plus	57	91 ▲	56
<b>Statewide Average</b>	<b>58</b>	<b>85</b>	<b>52</b>

#### Legend

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

#### Notes

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

## HARP Health Plan Performance

## Managing Acute Illness

Plan	Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Affinity Enriched Health	84	68	54
CDPHP	91	79	65
Empire BlueCross BlueShield HealthPlus	100 ▲	84	60
Excellus Health Plan, Inc.	86	74	59
Fidelis HealthierLife	90	69	67
HIP EmblemHealth Enhanced Care Plus	89	73	64
Healthfirst Personal Wellness Plan	85	79	69
Independent Health's MediSource Connect	89	82	65
MVP Harmonious Health Care Plan	88	63	47 ▼
MetroPlus Enhanced	87	83	73 ▲
TONY (Total Care Plus)	89	65	62
UnitedHealthcare Community-Wellness4Me	90	68	59
YourCare Options Plus	87	66	52
<b>Statewide Average</b>	<b>89</b>	<b>73</b>	<b>61</b>

## 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.

## HARP Health Plan Performance

## Managing Cardiovascular Conditions

Plan	Controlling High Blood Pressure	Persistence of Beta-Blocker Treatment
Affinity Enriched Health	29 ▼	--
CDPHP	76 ▲	--
Empire BlueCross BlueShield HealthPlus	41 ▼	--
Excellus Health Plan, Inc.	70 ▲	--
Fidelis HealthierLife	43 ▼	91
HIP EmblemHealth Enhanced Care Plus	37 ▼	--
Healthfirst Personal Wellness Plan	53	87
Independent Health's MediSource Connect	70 ▲	--
MVP Harmonious Health Care Plan	53	--
MetroPlus Enhanced	60 ▲	--
TONY (Total Care Plus)	54	--
UnitedHealthcare Community-Wellness4Me	44 ▼	--
YourCare Options Plus	59 ▲	--
<b>Statewide Average</b>	<b>50</b>	<b>89</b>

## 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.

### HARP Health Plan Performance

#### Managing Respiratory Conditions - Asthma

Plan	Asthma Medication Ratio (Ages 21-64)	Medication Management for People with Asthma 50% Days Covered (Ages 21-64)	Medication Management for People with Asthma 75% Days Covered (Ages 21-64)
Affinity Enriched Health	45	81	60
CDPHP	62	68	36 ▼
Empire BlueCross BlueShield HealthPlus	41 ▼	77	53
Excellus Health Plan, Inc.	57 ▲	79	57
Fidelis HealthierLife	57 ▲	76	50
HIP EmblemHealth Enhanced Care Plus	52	71	51
Healthfirst Personal Wellness Plan	45 ▼	80	57
Independent Health's MediSource Connect	60	62	31 ▼
MVP Harmonious Health Care Plan	53	75	50
MetroPlus Enhanced	47	80	61 ▲
TONY (Total Care Plus)	50	59	44
UnitedHealthcare Community-Wellness4Me	49	67 ▼	48
YourCare Options Plus	69 ▲	61 ▼	40
<b>Statewide Average</b>	<b>50</b>	<b>77</b>	<b>54</b>

#### Legend

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

#### Notes

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

### HARP 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
Affinity Enriched Health	41	76	88
CDPHP	37	74	80
Empire BlueCross BlueShield HealthPlus	39	62 ▼	94 ▲
Excellus Health Plan, Inc.	35	81 ▲	91
Fidelis HealthierLife	47	71	87
HIP EmblemHealth Enhanced Care Plus	43	58 ▼	80
Healthfirst Personal Wellness Plan	62 ▲	68	88
Independent Health's MediSource Connect	29	81	93
MVP Harmonious Health Care Plan	35	77	86
MetroPlus Enhanced	44	71	93 ▲
TONY (Total Care Plus)	29	77	90
UnitedHealthcare Community-Wellness4Me	40	71	85
YourCare Options Plus	43	61	82
<b>Statewide Average</b>	<b>46</b>	<b>70</b>	<b>88</b>

#### Legend

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

#### Notes

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



### HARP Health Plan Performance

#### Monitoring Diabetes

Plan	HbA1c Testing	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Affinity Enriched Health	87	46 ▼	92	40 ▼
CDPHP	90	75 ▲	90 ▼	65 ▲
Empire BlueCross BlueShield HealthPlus	84 ▼	55	89 ▼	49
Excellus Health Plan, Inc.	86 ▼	69 ▲	92	58
Fidelis HealthierLife	89	60	93	54
HIP EmblemHealth Enhanced Care Plus	86 ▼	51 ▼	90 ▼	45 ▼
Healthfirst Personal Wellness Plan	94 ▲	64	96 ▲	59 ▲
Independent Health's MediSource Connect	89	68 ▲	95	62 ▲
MVP Harmonious Health Care Plan	87	54 ▼	91	49
MetroPlus Enhanced	92	50 ▼	93	45 ▼
TONY (Total Care Plus)	91	66 ▲	94	61 ▲
UnitedHealthcare Community-Wellness4Me	88	54 ▼	94	49
YourCare Options Plus	86	67 ▲	94	61 ▲
<b>Statewide Average</b>	<b>90</b>	<b>59</b>	<b>93</b>	<b>54</b>

#### Legend

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

#### Notes

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

## HARP Health Plan Performance

## Managing Diabetes Outcomes

Plan	Poor HbA1c Control†	HbA1C Control (<8.0%)	Blood pressure controlled (<140/90 mm Hg)
Affinity Enriched Health	55 ▼	40 ▼	39 ▼
CDPHP	32 ▲	58 ▲	79 ▲
Empire BlueCross BlueShield HealthPlus	50 ▼	45 ▼	51 ▼
Excellus Health Plan, Inc.	38	52	73 ▲
Fidelis HealthierLife	40	53	51 ▼
HIP EmblemHealth Enhanced Care Plus	48 ▼	46 ▼	46 ▼
Healthfirst Personal Wellness Plan	38	55	58
Independent Health's MediSource Connect	27 ▲	65 ▲	75 ▲
MVP Harmonious Health Care Plan	35	55	64 ▲
MetroPlus Enhanced	33 ▲	58 ▲	60
TONY (Total Care Plus)	63 ▼	30 ▼	52
UnitedHealthcare Community-Wellness4Me	41	50	58
YourCare Options Plus	38	55	64 ▲
<b>Statewide Average</b>	<b>40</b>	<b>53</b>	<b>57</b>

## 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.

## HARP Health Plan Performance

## Managing Medications

Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications		
		ACE Inhibitors/ARBs	Diuretics	Combined Rate
Affinity Enriched Health	--	92	92	92
CDPHP	--	94	94	94
Empire BlueCross BlueShield HealthPlus	--	94	93	94
Excellus Health Plan, Inc.	83	94	92	93 ▼
Fidelis HealthierLife	80	95	95	95
HIP EmblemHealth Enhanced Care Plus	--	92	92	92
Healthfirst Personal Wellness Plan	73	95	95	95 ▲
Independent Health's MediSource Connect	--	95	92	94
MVP Harmonious Health Care Plan	76	93	92	93
MetroPlus Enhanced	79	95	95	95
TONY (Total Care Plus)	--	92	93	92
UnitedHealthcare Community-Wellness4Me	64	96	94	95
YourCare Options Plus	--	91	91	91
<b>Statewide Average</b>	<b>75</b>	<b>94</b>	<b>94</b>	<b>94</b>

## 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.

### HARP Health Plan Performance

#### Managing Medications

Plan	Statin Therapy for Patients with Cardiovascular Disease		Statin Therapy for Patients with Diabetes	
	Received	Adherent	Received	Adherent
Affinity Enriched Health	82	49	64	56
CDPHP	75	54	62	61
Empire BlueCross BlueShield HealthPlus	76	51	66	58
Excellus Health Plan, Inc.	81	70	66	66
Fidelis HealthierLife	75	59	64	60
HIP EmblemHealth Enhanced Care Plus	75	53	60	57
Healthfirst Personal Wellness Plan	79	59	67 ▲	63
Independent Health's MediSource Connect	80	69	66	63
MVP Harmonious Health Care Plan	81	58	67	61
MetroPlus Enhanced	76	67	63	63
TONY (Total Care Plus)	82	39	67	59
UnitedHealthcare Community-Wellness4Me	71	60	61	55
YourCare Options Plus	84	59	65	57
<b>Statewide Average</b>	<b>77</b>	<b>59</b>	<b>65</b>	<b>61</b>

#### Legend

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

#### Notes

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

## HARP Health Plan Performance

## HIV/AIDS Viral Load Suppression

Plan	Viral Load Suppression
Affinity Enriched Health	68
CDPHP	81
Empire BlueCross BlueShield HealthPlus	71
Excellus Health Plan, Inc.	84 ▲
Fidelis HealthierLife	74
HIP EmblemHealth Enhanced Care Plus	75
Healthfirst Personal Wellness Plan	74
Independent Health's MediSource Connect	83
MVP Harmonious Health Care Plan	84
MetroPlus Enhanced	62 ▼
TONY (Total Care Plus)	92
UnitedHealthcare Community-Wellness4Me	66
YourCare Options Plus	--
<b>Statewide Average</b>	<b>73</b>

**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.

This section provides information on how well managed care plans provide care to members affected by a serious mental illness.

## Behavioral Health

Aftercare is important to avoiding return visits to the emergency department. Measures for Follow-up After Hospitalization and Emergency Department (ED) Visits for members diagnosed with alcohol and other drug dependence or mental illness within 7 and 30-days address whether members receive the recommended outpatient follow-up services and assess how well a health plan ensures members' continued engagement in care.

Measure	Description (Type of Insurance Product)
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, HARP)</p> <ol style="list-style-type: none"> <li>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.</li> <li>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.</li> </ol>
Follow-up After Emergency Department Visit for Mental Illness	<p>This measure is for members, ages 6 years and older, who were seen in emergency department visits with a principal diagnosis of mental illness, and received recommended outpatient follow-up services within the recommended timeframes. There are two time-frame components for this measure. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)</p> <ol style="list-style-type: none"> <li>1. Within 7 Days: The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness, who had a follow-up visit for mental illness within 7 days.</li> <li>2. Within 30 Days: The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness, who had a follow-up visit for mental illness within 30 days.</li> </ol>
Follow-up After Emergency Department Visit for Alcohol and other Drug Dependence	<p>This measure is for members, ages 13 years and older, who were seen in emergency department visits with a principal diagnosis of alcohol or other drug dependence(AOD), and received recommended outpatient follow-up services within the recommended timeframes. There are two time-frame components for this measure. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)</p> <ol style="list-style-type: none"> <li>1. Within 7 Days: The percentage of members who were seen in emergency department (ED) visits with a principal diagnosis of alcohol or other drug dependence(AOD), who had a follow-up visit for AOD within 7 days.</li> <li>2. Within 30 Days: The percentage of members who were seen in emergency department visits (ED) with a principal diagnosis of alcohol or other drug dependence(AOD), who had a follow-up visit for AOD within 30 days.</li> </ol>

Antidepressant Medication Management measures address 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.

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, HARP)</p> <ol style="list-style-type: none"> <li>1. Effective Acute Phase Treatment: The percentage of members who remained on antidepressant medication during the entire 12-week acute treatment phase.</li> <li>2. Effective Continuation Phase Treatment: The percentage of members who remained on antidepressant medication for at least six months.</li> </ol>

Members with schizophrenia or bipolar disorder are disproportionately more likely to suffer cardiovascular disease or diabetes. The four measures for people with schizophrenia or bipolar disorder highlight clinical outcomes and have the potential to identify members at greater risk for morbidity and mortality from adverse outcomes resulting from a lack of adherence to appropriate medications, preventive care, and treatment.

Measure	Description (Type of Insurance Product)
Adherence to Antipsychotic Medications for Individuals with Schizophrenia	The percentage of members, ages 19 to 64 years, during the measurement year with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period. (Medicaid, HIV SNP, HARP)
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, HARP)
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, HARP)
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, HARP)

### Child and Adolescent Behavioral Health

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 necessary for children prescribed antipsychotics.

Measure	Description (Type of Insurance Product)
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)

Children with attention deficit/hyperactivity disorder (ADHD) should receive regular follow-up visits with a doctor after beginning prescription medications.

Measure	Description (Type of Insurance Product)
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"> <li>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.</li> <li>2. Continuation &amp; 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.</li> </ol>



## Commercial HMO Health Plan Performance

## Behavioral Health

Plan	Follow-up After Emergency Department Visit for Mental Illness		Follow-up After Emergency Department Visit for Alcohol and other Drug Dependence	
	Within 7 Days	Within 30 Days	Within 7 Days	Within 30 Days
CDPHP	47	67	13	19
Empire BlueCross BlueShield HMO	47	51 ▼	11	15
Excellus BlueCross BlueShield	50	68	12	18
HIP (EmblemHealth)	39 ▼	57 ▼	6 ▼	9 ▼
HealthNow New York Inc.	70 ▲	80 ▲	22 ▲	27 ▲
Independent Health	46	67	19	26 ▲
MVP Health Care	62 ▲	74	14	18
Univera Healthcare	50	68	12	18
<b>Statewide Average</b>	<b>52</b>	<b>68</b>	<b>14</b>	<b>19</b>
<b>National Average</b>	<b>46</b>	<b>60</b>	<b>11</b>	<b>15</b>

## 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

## 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	66	53	71 ▲	83 ▲
Empire BlueCross BlueShield HMO	70	56	54	63 ▼
Excellus BlueCross BlueShield	68 ▲	54 ▲	58	74
HIP (EmblemHealth)	61 ▼	45 ▼	54 ▼	70 ▼
HealthNow New York Inc.	64 ▼	50	67 ▲	80 ▲
Independent Health	67	51	65	82
MVP Health Care	61 ▼	46 ▼	54	75
Univera Healthcare	68 ▲	54 ▲	58	74
<b>Statewide Average</b>	<b>67</b>	<b>52</b>	<b>61</b>	<b>76</b>
<b>National Average</b>	<b>68</b>	<b>52</b>	<b>48</b>	<b>70</b>

## 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) 2018 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	49	80 ▲	49	53
Empire BlueCross BlueShield HMO	--	--	24 ▼	--
Excellus BlueCross BlueShield	35 ▼	58	42	49
HIP (EmblemHealth)	41	--	63 ▲	--
HealthNow New York Inc.	43	67	49	60
Independent Health	56 ▲	52	48	59
MVP Health Care	37	--	38	--
Univera Healthcare	35 ▼	58	42	49
<b>Statewide Average</b>	<b>40</b>	<b>60</b>	<b>44</b>	<b>52</b>
<b>National Average</b>	<b>37</b>	<b>*</b>	<b>42</b>	<b>48</b>

## Legend

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

## Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

## Commercial PPO Health Plan Performance

## Behavioral Health

Plan	Follow-up After Emergency Department Visit for Mental Illness		Follow-up After Emergency Department Visit for Alcohol and other Drug Dependence	
	Within 7 Days	Within 30 Days	Within 7 Days	Within 30 Days
Aetna Life Insurance Company - New York	50	64	10	13
CDPHP Universal Benefits, Inc.	52	66	9	13
CGLIC/CHLIC	41 ▼	55 ▼	7	9 ▼
Empire BlueCross BlueShield PPO	56 ▲	69 ▲	11 ▲	15 ▲
GHI (EmblemHealth)	44	59	17	20
MVP Preferred PPO	53	70	18 ▲	20 ▲
Oscar	31	40 ▼	12	16
Oxford Health Insurance of New York	42 ▼	59 ▼	7 ▼	9 ▼
UnitedHealthcare Insurance Company of New York, Inc.	49	63	8	12
<b>Statewide Average</b>	<b>49</b>	<b>64</b>	<b>9</b>	<b>13</b>
<b>National Average</b>	<b>45</b>	<b>60</b>	<b>10</b>	<b>14</b>

## 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) 2018 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	73 ▲	60 ▲	59 ▲	74
CDPHP Universal Benefits, Inc.	69	53	63 ▲	80 ▲
CGLIC/CHLIC	67	53 ▼	45 ▼	75
Empire BlueCross BlueShield PPO	70	54	55	71
GHI (EmblemHealth)	70	55	46	61 ▼
MVP Preferred PPO	66	50 ▼	52	73
Oscar	75	61	26 ▼	38 ▼
Oxford Health Insurance of New York	66 ▼	55	55	70
UnitedHealthcare Insurance Company of New York, Inc.	69	56	60 ▲	75
<b>Statewide Average</b>	<b>69</b>	<b>55</b>	<b>56</b>	<b>73</b>
<b>National Average</b>	<b>68</b>	<b>53</b>	<b>45</b>	<b>67</b>

## 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.

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- National averages are taken from the State of Healthcare Quality (SOHQ) 2018 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	44	61	39	45
CDPHP Universal Benefits, Inc.	44	82 ▲	40	54
CGLIC/CHLIC	43	58	42	46
Empire BlueCross BlueShield PPO	39	69	40	54
GHI (EmblemHealth)	67	--	53	--
MVP Preferred PPO	43	61	42	46
Oscar	--	--	--	--
Oxford Health Insurance of New York	44	49 ▼	42	44
UnitedHealthcare Insurance Company of New York, Inc.	43	56	42	47
<b>Statewide Average</b>	<b>43</b>	<b>58</b>	<b>41</b>	<b>47</b>
<b>National Average</b>	<b>33</b>	<b>*</b>	<b>40</b>	<b>46</b>

## Legend

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

## Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

## Medicaid Health Plan Performance

## Behavioral Health

Plan	Medicaid Managed Care Plans (MMC)			
	Follow-up After Emergency Department Visit for Mental Illness		Follow-up After Emergency Department Visit for Alcohol and other Drug Dependence	
	Within 7 Days	Within 30 Days	Within 7 Days	Within 30 Days
Affinity Health Plan	49 ▼	62 ▼	15 ▼	19 ▼
CDPHP	45 ▼	66	24 ▲	30 ▲
Empire BlueCross BlueShield HealthPlus	59 ▲	70	13 ▼	17 ▼
Excellus BlueCross BlueShield	54	70	16	25
Fidelis Care New York, Inc.	63 ▲	74 ▲	22 ▲	28 ▲
HIP (EmblemHealth)	45 ▼	63	12 ▼	17 ▼
HealthNow New York Inc.	65 ▲	78 ▲	23	31
Healthfirst PHSP, Inc.	47 ▼	63 ▼	16 ▼	22 ▼
Independent Health's MediSource	76 ▲	82 ▲	27 ▲	33 ▲
MVP Health Care	49 ▼	66	17	23
MetroPlus Health Plan	41 ▼	57 ▼	20	24
Molina Healthcare	56	68	17	23
UnitedHealthcare Community Plan	45 ▼	60 ▼	16 ▼	22
WellCare of New York	56	66	18	23
YourCare Health Plan	61	74	20	27
<b>MMC Statewide Average</b>	<b>53</b>	<b>67</b>	<b>18</b>	<b>24</b>
<b>National Average</b>	<b>40</b>	<b>55</b>	<b>12</b>	<b>18</b>
Plan	HIV Special Needs Plans (SNP)			
	Follow-up After Emergency Department Visit for Mental Illness		Follow-up After Emergency Department Visit for Alcohol and other Drug Dependence	
	Within 7 Days	Within 7 Days	Within 7 Days	Within 30 Days
Amida Care	58	73	26	31
MetroPlus Health Plan	37 ▼	59	15	20
VNSNY Choice Health Plans	57	66	24	25
<b>SNP Statewide Average</b>	<b>51</b>	<b>67</b>	<b>22</b>	<b>28</b>

## Legend

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

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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

## Medicaid Health Plan Performance

## Behavioral Health

Plan	Medicaid Managed Care Plans (MMC)			
	Antidepressant Medication Management		Follow-up After Hospitalization for Mental Illness	
	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Affinity Health Plan	50	34 ▼	52 ▼	70 ▼
CDPHP	54	37	68 ▲	84 ▲
Empire BlueCross BlueShield HealthPlus	53	38	60	77
Excellus BlueCross BlueShield	47 ▼	35 ▼	56 ▼	72 ▼
Fidelis Care New York, Inc.	54 ▲	38	63	79 ▲
HIP (EmblemHealth)	52	38	57	77
HealthNow New York Inc.	49	34	57	75
Healthfirst PHSP, Inc.	53	38	74 ▲	85 ▲
Independent Health's MediSource	49	35	60	78
MVP Health Care	51	37	62	79
MetroPlus Health Plan	53	37	51 ▼	69 ▼
Molina Healthcare	45 ▼	33	43 ▼	61 ▼
UnitedHealthcare Community Plan	54	39	63	75 ▼
WellCare of New York	54	35	39 ▼	62 ▼
YourCare Health Plan	49	35	58	75
<b>MMC Statewide Average</b>	<b>52</b>	<b>37</b>	<b>62</b>	<b>78</b>
<b>National Average</b>	<b>54</b>	<b>39</b>	<b>37</b>	<b>58</b>
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	58	41	NV	NV
MetroPlus Health Plan	64	45	37	56
VNSNY Choice Health Plans	70	54	42	72
<b>SNP Statewide Average</b>	<b>62</b>	<b>45</b>	<b>39</b>	<b>63</b>

## Legend

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

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) 2018 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	79
CDPHP	62	--	81	85
Empire BlueCross BlueShield HealthPlus	63	--	84	80
Excellus BlueCross BlueShield	61	--	78 ▼	68
Fidelis Care New York, Inc.	64	85	82	81
HIP (EmblemHealth)	67	--	79	82
HealthNow New York Inc.	65	--	76 ▼	56 ▼
Healthfirst PHSP, Inc.	61	84	85 ▲	84
Independent Health's MediSource	57	--	78	86
MVP Health Care	66	--	82	79
MetroPlus Health Plan	59	--	86 ▲	86
Molina Healthcare	52	--	79	--
UnitedHealthcare Community Plan	64	--	81	80
WellCare of New York	65	--	80	79
YourCare Health Plan	55	--	79	--
<b>MMC Statewide Average</b>	<b>62</b>	<b>82</b>	<b>82</b>	<b>81</b>
<b>National Average</b>	<b>59</b>	<b>79</b>	<b>81</b>	<b>70</b>
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	56	--	99	92
MetroPlus Health Plan	60	--	99	--
VNSNY Choice Health Plans	61	--	96	--
<b>SNP Statewide Average</b>	<b>58</b>	<b>--</b>	<b>98</b>	<b>89</b>

## 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) 2018 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	69	63	75
CDPHP	46	72	51 ▼	59
Empire BlueCross BlueShield HealthPlus	51 ▲	54 ▼	66 ▲	74
Excellus BlueCross BlueShield	32 ▼	69	44 ▼	51 ▼
Fidelis Care New York, Inc.	40 ▼	69	59	67
HIP (EmblemHealth)	51 ▲	67	65 ▲	76
HealthNow New York Inc.	32	82	46 ▼	60
Healthfirst PHSP, Inc.	52 ▲	70	66 ▲	78 ▲
Independent Health's MediSource	43	78	50 ▼	70
MVP Health Care	37 ▼	61	51 ▼	56 ▼
MetroPlus Health Plan	46	68	62	80 ▲
Molina Healthcare	31 ▼	71	61	77
UnitedHealthcare Community Plan	36 ▼	57 ▼	58	66
WellCare of New York	43	63	59	--
YourCare Health Plan	38	83	51	55
<b>Statewide Average</b>	<b>42</b>	<b>67</b>	<b>58</b>	<b>66</b>
<b>National Average</b>	<b>35</b>	<b>*</b>	<b>45</b>	<b>55</b>

## Legend

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

## Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

## HARP Health Plan Performance

## Behavioral Health

Plan	Follow-up After Emergency Department Visit for Mental Illness		Follow-up After Emergency Department Visit for Alcohol and other Drug Dependence	
	Within 7 Days	Within 30 Days	Within 7 Days	Within 30 Days
Affinity Enriched Health	53	72	25	28
CDPHP	42	68	18	33
Empire BlueCross BlueShield HealthPlus	65 ▲	82 ▲	26	34
Excellus Health Plan, Inc.	49	73	19	28
Fidelis HealthierLife	66 ▲	81 ▲	28	36 ▲
HIP EmblemHealth Enhanced Care Plus	52	75	20	27
Healthfirst Personal Wellness Plan	46 ▼	69 ▼	25	33
Independent Health's MediSource Connect	72	91	24	35
MVP Harmonious Health Care Plan	49	72	20	30
MetroPlus Enhanced	38 ▼	61 ▼	29 ▲	35
TONY (Total Care Plus)	43	58 ▼	27	37
UnitedHealthcare Community-Wellness4Me	42 ▼	64 ▼	18 ▼	26 ▼
YourCare Options Plus	68	82	27	37
<b>Statewide Average</b>	<b>52</b>	<b>73</b>	<b>25</b>	<b>33</b>

## Legend

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

## Notes

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

## HARP 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
Affinity Enriched Health	54	39	39 ▼	69 ▼
CDPHP	47	39	52	74
Empire BlueCross BlueShield HealthPlus	49	39	53 ▼	72 ▼
Excellus Health Plan, Inc.	43 ▼	32	51	72
Fidelis HealthierLife	52	39	60	80
HIP EmblemHealth Enhanced Care Plus	51	36	51 ▼	74
Healthfirst Personal Wellness Plan	53	40	75 ▲	87 ▲
Independent Health's MediSource Connect	40	30	61	80
MVP Harmonious Health Care Plan	52	38	56	77
MetroPlus Enhanced	54	41	46 ▼	72 ▼
TONY (Total Care Plus)	43	31	42	74
UnitedHealthcare Community-Wellness4Me	49	38	63	80
YourCare Options Plus	51	37	60	84
<b>Statewide Average</b>	<b>51</b>	<b>38</b>	<b>59</b>	<b>78</b>

## Legend

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

## Notes

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

## HARP Health Plan Performance

## Schizophrenia and Bipolar Disorder Measures

Plan	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 Enriched Health	69	--	80 ▼	76
CDPHP	65	--	88	86
Empire BlueCross BlueShield HealthPlus	66	76	82	79
Excellus Health Plan, Inc.	68	--	81	66 ▼
Fidelis HealthierLife	66	82	85	80
HIP EmblemHealth Enhanced Care Plus	68	97	79 ▼	79
Healthfirst Personal Wellness Plan	67	90	86 ▲	82
Independent Health's MediSource Connect	66	--	74 ▼	76
MVP Harmonious Health Care Plan	71	--	81	82
MetroPlus Enhanced	66	92	86 ▲	84
TONY (Total Care Plus)	64	--	85	72
UnitedHealthcare Community-Wellness4Me	64	--	81	80
YourCare Options Plus	62	--	75 ▼	72
<b>Statewide Average</b>	<b>67</b>	<b>84</b>	<b>83</b>	<b>80</b>

## 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.

This section provides information on how well managed care plans provide care, counseling, and health education to children and adolescents.

### Caring for Children and Adolescents with Illnesses

Appropriate testing and treatment of pharyngitis prevents the spread of sickness and reduce the unnecessary use of antibiotics. Appropriate testing and use of antibiotics in children are indicators of high quality of care. Children with chronic health conditions 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.

Measure	Description (Type of Insurance Product)
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)

### Child and Adolescent Preventive Care

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

Measure	Description (Type of Insurance Product)
Adolescent Immunization Combo	The percentage of members, age 13 years, who had one dose of meningococcal conjugate vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine by their 13th birthday. (Commercial HMO, Commercial PPO, Medicaid/Child Health Plus)
Adolescent Immunization (Combo 2)	The percentage of adolescents 13 years of age who had one dose of meningococcal conjugate vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday. (Commercial HMO, Commercial PPO, Medicaid/Child Health Plus)
Childhood Immunization Status (Combo 3)	The percentage of members, age 2 years, who were fully immunized. The HEDIS specifications for fully immunized consists of the following vaccines: four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. (Commercial HMO, Commercial PPO, Medicaid/Child Health Plus)

Measure	Description (Type of Insurance Product)
<b>Child and Adolescent Preventive Care (Continued)</b>	
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)
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)
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)

### Preventive Counseling for Children and Adolescents

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 continues to increase. 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 is an important component to maintain and achieve a healthy weight.

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	Description (Type of Insurance Product)
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)
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"> <li>1. Sexual Activity: Assessment, counseling or education on risk behaviors and preventive actions associated with sexual activity</li> <li>2. Depression: Assessment, counseling or education for depression</li> <li>3. Tobacco Use: Assessment, counseling or education about the risks of tobacco use</li> <li>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)</li> </ol>

### Commercial HMO Health Plan Performance

#### Child and Adolescent Preventive Care - Immunizations and Screening

Plan	Adolescent Immunization Combo	Adolescent Immunization (Combo2)	Childhood Immunization Status (Combo 3)	Lead Testing
CDPHP	93 ▲	30	88	89
Empire BlueCross BlueShield HMO	79 ▼	14 ▼	66 ▼	83 ▼
Excellus BlueCross BlueShield	87	26	89	84 ▼
HIP (EmblemHealth)	83 ▼	27	72 ▼	88
HealthNow New York Inc.	94 ▲	30	91 ▲	90
Independent Health	89	27	91 ▲	94 ▲
MVP Health Care	91	27	85	86
Univera Healthcare	87	26	89	84 ▼
<b>Statewide Average</b>	<b>88</b>	<b>27</b>	<b>86</b>	<b>89</b>
<b>National Average</b>	<b>80</b>	<b>24</b>	<b>77</b>	<b>*</b>

#### 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) 2018 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 ▲	91 ▲	73 ▲
Empire BlueCross BlueShield HMO	88 ▼	82 ▼	62 ▼
Excellus BlueCross BlueShield	94	85 ▼	63 ▼
HIP (EmblemHealth)	86 ▼	80 ▼	61 ▼
HealthNow New York Inc.	96 ▲	91 ▲	71 ▲
Independent Health	98 ▲	93 ▲	75 ▲
MVP Health Care	97	91 ▲	69 ▲
Univera Healthcare	94	85 ▼	63 ▼
<b>Statewide Average</b>	<b>94</b>	<b>86</b>	<b>66</b>
<b>National Average</b>	<b>*</b>	<b>77</b>	<b>48</b>

#### 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) 2018 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	93	84	67	39
Empire BlueCross BlueShield HMO	79 ▼	73	61	36
Excellus BlueCross BlueShield	92	86	67 ▲	43 ▲
HIP (EmblemHealth)	94	73 ▼	59	36
HealthNow New York Inc.	92	82	54 ▼	30 ▼
Independent Health	96 ▲	84	49 ▼	27 ▼
MVP Health Care	93	85	71	46
Univera Healthcare	92	86	67 ▲	43 ▲
<b>Statewide Average</b>	<b>92</b>	<b>84</b>	<b>63</b>	<b>39</b>
<b>National Average</b>	<b>87</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### 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) 2018 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	91 ▲	91 ▲	87 ▲	74	78 ▲	84	82
Empire BlueCross BlueShield HMO	80	80	71	52 ▼	52 ▼	65 ▼	64 ▼
Excellus BlueCross BlueShield	83	78	74	71	62	80	76
HIP (EmblemHealth)	71 ▼	67 ▼	58 ▼	55 ▼	54 ▼	63 ▼	57 ▼
HealthNow New York Inc.	90 ▲	92 ▲	84 ▲	74	73	86 ▲	82 ▲
Independent Health	95 ▲	94 ▲	91 ▲	86 ▲	86 ▲	88 ▲	90 ▲
MVP Health Care	89 ▲	84	79	68	57 ▼	79	75
Univera Healthcare	83	78	74	71	62	80	76
<b>Statewide Average</b>	<b>84</b>	<b>81</b>	<b>75</b>	<b>68</b>	<b>68</b>	<b>78</b>	<b>74</b>
<b>National Average</b>	<b>70</b>	<b>64</b>	<b>59</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

### Commercial PPO Health Plan Performance

#### Child and Adolescent Preventive Care - Immunizations and Screening

Plan	Adolescent Immunization Combo	Adolescent Immunization (Combo2)	Childhood Immunization Status (Combo 3)	Lead Testing
Aetna Life Insurance Company - New York	74 ▼	17	68 ▼	84
CDPHP Universal Benefits, Inc.	94 ▲	29 ▲	89 ▲	91 ▲
CGLIC/CHLIC	72 ▼	14 ▼	76	85 ▲
Empire BlueCross BlueShield PPO	85 ▲	17	70	71 ▼
GHI (EmblemHealth)	54 ▼	14	46 ▼	69 ▼
MVP Preferred PPO	90 ▲	21 ▲	80 ▲	83
Oscar	63 ▼	17	67	76
Oxford Health Insurance of New York	81	13 ▼	73	82
UnitedHealthcare Insurance Company of New York, Inc.	82	16	79 ▲	89 ▲
<b>Statewide Average</b>	<b>80</b>	<b>16</b>	<b>73</b>	<b>81</b>
<b>National Average</b>	<b>73</b>	<b>20</b>	<b>70</b>	<b>*</b>

#### 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) 2018 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	93 ▲	85 ▲	63
CDPHP Universal Benefits, Inc.	96 ▲	91 ▲	62
CGLIC/CHLIC	94 ▲	88 ▲	69 ▲
Empire BlueCross BlueShield PPO	83 ▼	79 ▼	56 ▼
GHI (EmblemHealth)	71 ▼	63 ▼	46 ▼
MVP Preferred PPO	94 ▲	88 ▲	66 ▲
Oscar	78 ▼	76 ▼	54 ▼
Oxford Health Insurance of New York	90	86 ▲	68 ▲
UnitedHealthcare Insurance Company of New York, Inc.	94 ▲	88 ▲	67 ▲
<b>Statewide Average</b>	<b>90</b>	<b>84</b>	<b>63</b>
<b>National Average</b>	<b>*</b>	<b>75</b>	<b>45</b>

#### 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) 2018 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	94 ▲	79	64 ▲	40 ▲
CDPHP Universal Benefits, Inc.	94 ▲	80	60	27
CGLIC/CHLIC	93 ▲	83	58	28
Empire BlueCross BlueShield PPO	84 ▼	84	56	27 ▼
GHI (EmblemHealth)	87	74	54	41
MVP Preferred PPO	94 ▲	81	61	35
Oscar	93	--	--	--
Oxford Health Insurance of New York	88 ▼	83	59	34
UnitedHealthcare Insurance Company of New York, Inc.	84 ▼	80	59	31
<b>Statewide Average</b>	<b>89</b>	<b>82</b>	<b>59</b>	<b>33</b>
<b>National Average</b>	<b>86</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### Legend

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

#### Notes

- Data for Excellus Bluecross Blueshield PPO, HealthNow PPO, and Univera PPO are reported as a combination of PPO and HMO membership. Results are contained in the Commercial HMO pages.
- Plans without symbols are consistent with the **statewide** average.
- National averages are taken from the State of Healthcare Quality (SOHQ) 2018 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	71	64 ▼	59	52	51	58	57
CDPHP Universal Benefits, Inc.	91 ▲	91 ▲	88 ▲	83 ▲	81 ▲	90 ▲	85 ▲
CGLIC/CHLIC	85 ▲	85 ▲	76 ▲	56	59 ▲	70 ▲	65 ▲
Empire BlueCross BlueShield PPO	75	74	64	57 ▲	53	67 ▲	65 ▲
GHI (EmblemHealth)	50 ▼	48 ▼	37 ▼	37 ▼	34 ▼	41 ▼	40 ▼
MVP Preferred PPO	83 ▲	78 ▲	71 ▲	55	57 ▲	73 ▲	65 ▲
Oscar	72	64 ▼	64	29 ▼	17 ▼	27 ▼	35 ▼
Oxford Health Insurance of New York	69	69	60	37 ▼	39 ▼	47 ▼	41 ▼
UnitedHealthcare Insurance Company of New York, Inc.	68 ▼	66 ▼	58	38 ▼	43	50 ▼	46 ▼
<b>Statewide Average</b>	<b>73</b>	<b>71</b>	<b>63</b>	<b>49</b>	<b>49</b>	<b>58</b>	<b>54</b>
<b>National Average</b>	<b>57</b>	<b>53</b>	<b>48</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

### Medicaid Health Plan Performance

#### Child and Adolescent Preventive Care - Immunizations and Screening

Plan	Adolescent Immunization Combo	Adolescent Immunization (Combo2)	Childhood Immunization Status (Combo 3)	Lead Testing
Affinity Health Plan	83	49 ▲	77	90
CDPHP	90 ▲	31 ▼	79	83 ▼
Empire BlueCross BlueShield HealthPlus	84	42	67 ▼	88
Excellus BlueCross BlueShield	88 ▲	39	83 ▲	87
Fidelis Care New York, Inc.	86	37	74	88
HIP (EmblemHealth)	82	28 ▼	68 ▼	85
HealthNow New York Inc.	85	28 ▼	74	87
Healthfirst PHSP, Inc.	82	51 ▲	80 ▲	90
Independent Health's MediSource	86	38	81 ▲	91 ▲
MVP Health Care	85	42	77	91
MetroPlus Health Plan	90 ▲	64 ▲	87 ▲	95 ▲
Molina Healthcare	83	47 ▲	80 ▲	87
UnitedHealthcare Community Plan	79 ▼	18 ▼	63 ▼	83 ▼
WellCare of New York	73 ▼	37	75	85
YourCare Health Plan	90 ▲	30 ▼	74	89
<b>Statewide Average</b>	<b>84</b>	<b>41</b>	<b>75</b>	<b>88</b>
<b>National Average</b>	<b>78</b>	<b>33</b>	<b>69</b>	<b>69</b>

#### 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) 2018 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	91 ▲	82 ▼	64 ▼	54 ▼
CDPHP	83	83 ▼	66 ▼	61
Empire BlueCross BlueShield HealthPlus	80 ▼	86 ▲	72 ▲	61
Excellus BlueCross BlueShield	88 ▲	82 ▼	67 ▼	64 ▲
Fidelis Care New York, Inc.	82	84 ▼	66 ▼	63 ▲
HIP (EmblemHealth)	78 ▼	87 ▲	77 ▲	51 ▼
HealthNow New York Inc.	88	82 ▼	67	69 ▲
Healthfirst PHSP, Inc.	84 ▲	89 ▲	73 ▲	59 ▼
Independent Health's MediSource	87 ▲	86	68	70 ▲
MVP Health Care	84 ▲	84 ▼	67 ▼	67 ▲
MetroPlus Health Plan	83	87 ▲	67 ▼	62 ▲
Molina Healthcare	81	79 ▼	62 ▼	54 ▼
UnitedHealthcare Community Plan	74 ▼	83 ▼	65 ▼	61
WellCare of New York	75 ▼	78 ▼	64 ▼	51 ▼
YourCare Health Plan	80	84	66 ▼	69 ▲
<b>Statewide Average</b>	<b>82</b>	<b>85</b>	<b>68</b>	<b>61</b>
<b>National Average</b>	<b>*</b>	<b>73</b>	<b>53</b>	<b>*</b>

#### 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) 2018 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	86 ▼	53 ▼	49 ▼	23 ▼
CDPHP	91	68	59	32
Empire BlueCross BlueShield HealthPlus	90 ▼	65	54 ▼	27 ▼
Excellus BlueCross BlueShield	93 ▲	68 ▲	60	39 ▲
Fidelis Care New York, Inc.	93 ▲	73 ▲	61 ▲	34 ▲
HIP (EmblemHealth)	88 ▼	66	50 ▼	23 ▼
HealthNow New York Inc.	92	68	51	27
Healthfirst PHSP, Inc.	86 ▼	54 ▼	59 ▲	30
Independent Health's MediSource	95 ▲	69	42 ▼	21 ▼
MVP Health Care	93 ▲	70 ▲	52 ▼	23 ▼
MetroPlus Health Plan	88 ▼	61 ▼	57	29
Molina Healthcare	82 ▼	61	50	26
UnitedHealthcare Community Plan	95 ▲	72 ▲	56	28
WellCare of New York	89	67	44 ▼	22
YourCare Health Plan	92	79 ▲	52	27
<b>Statewide Average</b>	<b>91</b>	<b>64</b>	<b>57</b>	<b>30</b>
<b>National Average</b>	<b>78</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### 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) 2018 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	83	80	72	70	65	75	71
CDPHP	86	83	75	58	66	78	72
Empire BlueCross BlueShield HealthPlus	81	81	67 ▼	58	53	62 ▼	61
Excellus BlueCross BlueShield	90 ▲	89 ▲	80 ▲	69	77 ▲	85 ▲	71
Fidelis Care New York, Inc.	87	84	74	64	59	73	67
HIP (EmblemHealth)	77 ▼	75 ▼	66 ▼	65	61	70	68
HealthNow New York Inc.	84	83	76	68	65	84 ▲	76 ▲
Healthfirst PHSP, Inc.	79 ▼	81	69	63	54	64	63
Independent Health's MediSource	90 ▲	89 ▲	85 ▲	86 ▲	81 ▲	89 ▲	85 ▲
MVP Health Care	87 ▲	84	74	59	60	72	65
MetroPlus Health Plan	93 ▲	90 ▲	78 ▲	81 ▲	82 ▲	85 ▲	80 ▲
Molina Healthcare	73 ▼	68 ▼	65 ▼	53 ▼	62	65	54 ▼
UnitedHealthcare Community Plan	78 ▼	80	74	59	55	65	61
WellCare of New York	84	81	70	62	57	73	67
YourCare Health Plan	86	81	76	68	71 ▲	76	73
<b>Statewide Average</b>	<b>84</b>	<b>83</b>	<b>73</b>	<b>65</b>	<b>61</b>	<b>71</b>	<b>67</b>
<b>National Average</b>	<b>73</b>	<b>67</b>	<b>61</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### 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) 2018 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 2017 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 2017 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)
<b>Provider Network</b>	
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, HARP)
Satisfaction with Provider Communication	The percentage of members who responded "usually" or "always" when asked how often their doctor listened to them carefully, explained things in a way they could understand, showed respect for what they had to say, and spent enough time with them. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)
Satisfaction with Personal Doctor	The percentage of members responding 8, 9, or 10 (on a scale of 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor) when asked "How would you rate your personal doctor?" (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)
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?" (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)

### 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	85 ▲	81 ▲	76	83	97 ▲	89 ▲	87
Empire BlueCross BlueShield HMO	81 ▲	83 ▲	83 ▲	83 ▲	96	86	80
Excellus BlueCross BlueShield	64 ▼	69 ▼	87 ▲	69 ▼	96	84	87
HIP (EmblemHealth)	76	75 ▼	77 ▼	78	89 ▼	78 ▼	77 ▼
HealthNow New York Inc.	67 ▼	73 ▼	66 ▼	70 ▼	95	88	90 ▲
Independent Health	82	73 ▼	80	82	95	85	85
MVP Health Care	81 ▲	74 ▼	82	81	95	88	82
Univera Healthcare	64 ▼	69 ▼	87 ▲	69 ▼	96	84	87
<b>Statewide Average</b>	<b>77</b>	<b>77</b>	<b>79</b>	<b>79</b>	<b>95</b>	<b>85</b>	<b>84</b>
<b>National Average</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>95</b>	<b>85</b>	<b>85</b>

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

## Commercial PPO Health Plan Performance

Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Aetna Life Insurance Company - New York	80 ▲	77	79	83 ▲	96	85	81
CDPHP Universal Benefits, Inc.	85 ▲	81 ▲	76	82 ▲	96	86	83
CGLIC/CHLIC	70	76	81 ▲	79	92	82	85
Empire BlueCross BlueShield PPO	80 ▲	83 ▲	83 ▲	82 ▲	97	86	88
GHI (EmblemHealth)	77 ▲	76	72 ▼	78	93	85	81
MVP Preferred PPO	81 ▲	74 ▼	82	80	97	82	79
Oscar	11 ▼	71 ▼	25 ▼	11 ▼	95	78 ▼	77
Oxford Health Insurance of New York	66 ▼	76	85 ▲	79 ▲	95	88	87
UnitedHealthcare Insurance Company of New York, Inc.	68 ▼	77	86 ▲	80 ▲	97	89	84
<b>Statewide Average</b>	<b>72</b>	<b>77</b>	<b>78</b>	<b>78</b>	<b>95</b>	<b>84</b>	<b>83</b>
<b>National Average</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>95</b>	<b>85</b>	<b>84</b>

### 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) 2018 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	65 ▼	66 ▼	64 ▼	70 ▼
CDPHP	85 ▲	80	74	82
Empire BlueCross BlueShield HealthPlus	35 ▼	70 ▼	75	75 ▼
Excellus BlueCross BlueShield	60 ▼	69 ▼	83 ▲	65 ▼
Fidelis Care New York, Inc.	81 ▲	81 ▲	81 ▲	86 ▲
HIP (EmblemHealth)	75	75	74 ▼	76 ▼
HealthNow New York Inc.	75	76	78	82
Healthfirst PHSP, Inc.	72	80 ▲	81 ▲	81
Independent Health's MediSource	82 ▲	73	80	82
MVP Health Care	81 ▲	75	80	78
MetroPlus Health Plan	68	66 ▼	67 ▼	67 ▼
Molina Healthcare	89 ▲	92 ▲	86	89 ▲
UnitedHealthcare Community Plan	69 ▼	77 ▲	85 ▲	80
WellCare of New York	73	73 ▼	66 ▼	76
YourCare Health Plan	87 ▲	83 ▲	82	85 ▲
<b>MMC Statewide Average</b>	<b>72</b>	<b>76</b>	<b>77</b>	<b>79</b>
<b>National Average</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>
Plan	HIV Special Needs Plans (SNP)			
	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics
Amida Care	89 ▲	86 ▲	86 ▲	71 ▲
MetroPlus Health Plan	68 ▲	66 ▲	67 ▼	67 ▲
VNSNY Choice Health Plans	15 ▼	23 ▼	--	11 ▼
<b>SNP Statewide Average</b>	<b>55</b>	<b>58</b>	<b>78</b>	<b>52</b>

#### Legend

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

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

\* No national average available.

-- Sample size too small to report.

#### Notes

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

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

#### 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) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).



## HARP Health Plan Performance

### Board Certification

Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics
Affinity Enriched Health	64 ▼	66 ▼	63 ▼	72 ▼
CDPHP	85 ▲	80 ▲	74	82
Empire BlueCross BlueShield HealthPlus	35 ▼	71 ▼	75	75 ▼
Excellus Health Plan, Inc.	60 ▼	69 ▼	83 ▲	65 ▼
Fidelis HealthierLife	81 ▲	81 ▲	81 ▲	86 ▲
HIP EmblemHealth Enhanced Care Plus	75 ▲	75	74	76 ▼
Healthfirst Personal Wellness Plan	72	81 ▲	82 ▲	81 ▲
Independent Health's MediSource Connect	82 ▲	73	80	82
MVP Harmonious Health Care Plan	81 ▲	75	80	78
MetroPlus Enhanced	68	66 ▼	67 ▼	67 ▼
TONY (Total Care Plus)	89 ▲	92 ▲	86	89 ▲
UnitedHealthcare Community- Wellness4Me	58 ▼	69	85	75
YourCare Options Plus	87 ▲	83 ▲	82	85 ▲
<b>Statewide Average</b>	<b>70</b>	<b>75</b>	<b>77</b>	<b>78</b>

#### Legend

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

#### Notes

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

### HARP Health Plan Performance

#### Provider Satisfaction

Plan	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Affinity Enriched Health	88	74	78
CDPHP	87	85 ▲	76
Empire BlueCross BlueShield HealthPlus	89	79	70
Excellus Health Plan, Inc.	90	81	83
Fidelis HealthierLife	80 ▼	67 ▼	77
HIP EmblemHealth Enhanced Care Plus	91	77	73
Healthfirst Personal Wellness Plan	87	75	71
Independent Health's MediSource Connect	89	75	81
MVP Harmonious Health Care Plan	90	85 ▲	68
MetroPlus Enhanced	90	81	77
TONY (Total Care Plus)	90	70	74
UnitedHealthcare Community-Wellness4Me	90	77	85
YourCare Options Plus	86	73	77
<b>Statewide Average</b>	<b>88</b>	<b>77</b>	<b>76</b>

#### Legend

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

#### Notes

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

# Satisfaction with Care for Adults

## SECTION

## 7

This report 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 2017 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. Adult Medicaid enrollees were last surveyed by the Department in late 2017 using the CAHPS® 5.0H survey.

### Measure Descriptions

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

Measure	Description (Type of Insurance Product)
<b>Satisfaction with Access to Care for Adults (Continued)</b>	
Plan Information on Cost	<p>The percentage of members responding "usually" or "always" when asked a set of questions to identify if, in the last 12 months, they looked for information about health care costs. The following questions are contained in this composite: (Commercial HMO, Commercial PPO)</p> <ol style="list-style-type: none"> <li>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?</li> <li>2. How often were you able to find out from your health plan how much you would have to pay for specific prescription medicines?</li> </ol>
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. The following questions are contained in this composite: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)</p> <ol style="list-style-type: none"> <li>1. How often did your health plan's customer service give you the information or help you needed?</li> <li>2. How often did your health plan's customer service staff treat you with courtesy and respect?</li> </ol>
Rating of Health Plan	<p>The percentage of members responding 8, 9 or 10 on a scale of 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)</p>
<b>Satisfaction with Experience of Care for Adults</b>	
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. The following questions are contained in this composite: (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)</p> <ol style="list-style-type: none"> <li>1. Did you and a doctor or other health provider talk about the reasons you might want to take a medicine?</li> <li>2. Did you and a doctor or other health provider talk about the reasons you might not want to take a medicine?</li> <li>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?</li> </ol>

## Satisfaction with Care for Adults

## SECTION

7

Measure	Description (Type of Insurance Product)
<b>Satisfaction with Experience of Care for Adults (Continued)</b>	
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. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)
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. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)
Rating of Overall Healthcare	The percentage of members responding 8, 9 or 10 on scale of 0 to 10, where 0 is the worst healthcare possible and 10 is the best healthcare possible. (Commercial HMO, Commercial PPO, Medicaid, HIV SNP, HARP)
Getting Needed Counseling or Treatment	The percentage who responded "usually" or "always" when asked how often, in the past 6 months, it was easy to get counseling or treatment for a personal or family problem through their health plan. (Medicaid, HIV SNP, HARP)
Rating of Counseling or Treatment	The percentage of members responding 8, 9, or 10 on a scale of 0 to 10, where 0 is the worst counseling or treatment possible and 10 is the best counseling or treatment possible. (Medicaid, HIV SNP, HARP)

### 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	93 ▲	92 ▲	95 ▲	72 ▲	92	84 ▲
Empire BlueCross BlueShield HMO	83	82	74 ▼	56 ▼	79 ▼	47 ▼
Excellus BlueCross BlueShield	87	87	92	64	85	69
HIP (EmblemHealth)	75 ▼	71 ▼	88	54 ▼	80 ▼	59 ▼
HealthNow New York Inc.	89	89	92	70	97 ▲	79 ▲
Independent Health	91 ▲	91 ▲	95 ▲	74 ▲	94 ▲	75 ▲
MVP Health Care	89	90 ▲	94 ▲	66	92	71
Univera Healthcare	87	87	92	60	85	69
<b>Statewide Average</b>	<b>87</b>	<b>86</b>	<b>90</b>	<b>64</b>	<b>88</b>	<b>69</b>
<b>National Average</b>	<b>86</b>	<b>85</b>	<b>89</b>	<b>63</b>	<b>88</b>	<b>64</b>

#### 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) 2018 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	84	86	82 ▲	87 ▲
Empire BlueCross BlueShield HMO	82	83	71	71 ▼
Excellus BlueCross BlueShield	82	87	72	78
HIP (EmblemHealth)	74 ▼	72 ▼	72	73 ▼
HealthNow New York Inc.	82	85	77	84 ▲
Independent Health	79	86	80	85 ▲
MVP Health Care	81	85	77	80
Univera Healthcare	82	87	72	78
<b>Statewide Average</b>	<b>81</b>	<b>84</b>	<b>75</b>	<b>79</b>
<b>National Average</b>	<b>82</b>	<b>*</b>	<b>*</b>	<b>78</b>

#### 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) 2018 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	87	85	85	51 ▼	94 ▲	63
CDPHP Universal Benefits, Inc.	92 ▲	91 ▲	94 ▲	72 ▲	94 ▲	76 ▲
CGLIC/CHLIC	87	80	88	54	84	59
Empire BlueCross BlueShield PPO	85	82	87	57	87	75 ▲
GHI (EmblemHealth)	88	82	82	60	83	66
MVP Preferred PPO	87	81	82	69 ▲	86	57
Oscar	80 ▼	76 ▼	77	63	87	40 ▼
Oxford Health Insurance of New York	88	85	87	51 ▼	88	55 ▼
UnitedHealthcare Insurance Company of New York, Inc.	87	85	85	55	85	66
<b>Statewide Average</b>	<b>87</b>	<b>83</b>	<b>85</b>	<b>59</b>	<b>88</b>	<b>62</b>
<b>National Average</b>	<b>87</b>	<b>86</b>	<b>89</b>	<b>60</b>	<b>89</b>	<b>60</b>

#### 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) 2018 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 ▼	83	81 ▲	74
CDPHP Universal Benefits, Inc.	83	86 ▲	83 ▲	82 ▲
CGLIC/CHLIC	83	75	73	76
Empire BlueCross BlueShield PPO	82	82	77	79
GHI (EmblemHealth)	79	75	77	74
MVP Preferred PPO	81	83	75	73
Oscar	81	77	65 ▼	60 ▼
Oxford Health Insurance of New York	89 ▲	74	72	77
UnitedHealthcare Insurance Company of New York, Inc.	81	79	70	84 ▲
<b>Statewide Average</b>	<b>82</b>	<b>79</b>	<b>75</b>	<b>75</b>
<b>National Average</b>	<b>82</b>	<b>*</b>	<b>*</b>	<b>76</b>

#### 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) 2018 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	74	73	85	74
CDPHP	86 ▲	85 ▲	91 ▲	87 ▲
Empire BlueCross BlueShield HealthPlus	76	75	86	76
Excellus BlueCross BlueShield	82	79	83	80
Fidelis Care New York, Inc.	80	80	86	77
HIP (EmblemHealth)	75	76	89	67 ▼
HealthNow New York Inc.	79	85 ▲	83	66 ▼
Healthfirst PHSP, Inc.	73 ▼	75	84	79
Independent Health's MediSource	82	82	86	81 ▲
MVP Health Care	83 ▲	77	92 ▲	85 ▲
MetroPlus Health Plan	71 ▼	71 ▼	88	79
Molina Healthcare	83	78	82	72
UnitedHealthcare Community Plan	76	80	81	70 ▼
WellCare of New York	78	75	84	72
YourCare Health Plan	83	85 ▲	87	74
<b>MMC Statewide Average</b>	<b>79</b>	<b>78</b>	<b>86</b>	<b>76</b>
<b>National Average</b>	<b>82</b>	<b>82</b>	<b>88</b>	<b>77</b>
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	89 ▲	92	80
MetroPlus Health Plan	79	82 ▼	88	80
VNSNY Choice Health Plans	82	86	92	79
<b>SNP Statewide Average</b>	<b>80</b>	<b>86</b>	<b>90</b>	<b>79</b>

#### 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 for rotated measures are taken from the State of Healthcare Quality (SOHQ) 2018 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	83	80	73	75	75	72
CDPHP	82	86	74	83 ▲	85 ▲	65
Empire BlueCross BlueShield HealthPlus	81	79	68	71	42 ▼	37 ▼
Excellus BlueCross BlueShield	79	81	74	84 ▲	70	66
Fidelis Care New York, Inc.	82	75	81 ▲	78	70	57
HIP (EmblemHealth)	82	76	74	72	66	58
HealthNow New York Inc.	81	79	72	70 ▼	81 ▲	56
Healthfirst PHSP, Inc.	76	80	72	75	62	60
Independent Health's MediSource	82	86	72	79	64	60
MVP Health Care	80	83	72	81	88 ▲	76 ▲
MetroPlus Health Plan	74 ▼	80	72	74	72	52
Molina Healthcare	83	84	75	78	66	58
UnitedHealthcare Community Plan	79	79	69	74	59	52
WellCare of New York	81	86	62 ▼	76	--	--
YourCare Health Plan	77	85	72	77	73	64
<b>MMC Statewide Average</b>	<b>80</b>	<b>81</b>	<b>72</b>	<b>77</b>	<b>69</b>	<b>60</b>
<b>National Average</b>	<b>79</b>	<b>*</b>	<b>*</b>	<b>75</b>	<b>*</b>	<b>*</b>
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	83	91	84	77	75	63
MetroPlus Health Plan	84	85	87	82	79	67
VNSNY Choice Health Plans	84	92	83	78	77	63
<b>SNP Statewide Average</b>	<b>84</b>	<b>89</b>	<b>84</b>	<b>79</b>	<b>77</b>	<b>64</b>

#### Legend

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

#### Notes

- Plans without symbols are consistent with the **statewide** average.
- National averages for rotated measures are taken from the State of Healthcare Quality (SOHQ) 2018 Report from the [National Committee for Quality Assurance \(NCQA\)](#).

### HARP 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	Customer Service	Rating of Health Plan
Affinity Enriched Health	72	79	84	73
CDPHP	83	84	93 ▲	79
Empire BlueCross BlueShield HealthPlus	78	77	88	72
Excellus Health Plan, Inc.	78	88 ▲	81	83 ▲
Fidelis HealthierLife	80	88	88	74
HIP EmblemHealth Enhanced Care Plus	82	73 ▼	91 ▲	73
Healthfirst Personal Wellness Plan	79	80	83	78
Independent Health's MediSource Connect	79	83	88	77
MVP Harmonious Health Care Plan	82	81	80	70
MetroPlus Enhanced	74	88 ▲	81	68
TONY (Total Care Plus)	71	82	77	54 ▼
UnitedHealthcare Community-Wellness4Me	80	85	83	62 ▼
YourCare Options Plus	74	83	89	75
<b>Statewide Average</b>	<b>78</b>	<b>82</b>	<b>85</b>	<b>72</b>

#### Legend

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

#### Notes

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

### HARP Health Plan Performance

#### Satisfaction with Experience of Care for Adults

Plan	Shared Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Healthcare	Getting Needed Counseling or Treatment	Rating of Counseling or Treatment
Affinity Enriched Health	76	82	82	64	90	66
CDPHP	78	82	74	68	81	68
Empire BlueCross BlueShield HealthPlus	81	88	86	70	79	68
Excellus Health Plan, Inc.	77	88	78	66	84	69
Fidelis HealthierLife	74	65 ▼	76	66	86	71
HIP EmblemHealth Enhanced Care Plus	78	80	77	65	84	67
Healthfirst Personal Wellness Plan	80	82	84	67	86	73
Independent Health's MediSource Connect	79	86	85	71	84	62
MVP Harmonious Health Care Plan	77	86	78	67	83	67
MetroPlus Enhanced	79	84	84	66	85	66
TONY (Total Care Plus)	80	75	83	49 ▼	76	60
UnitedHealthcare Community-Wellness4Me	76	80	80	69	86	64
YourCare Options Plus	76	74	74	61	80	68
<b>Statewide Average</b>	<b>78</b>	<b>81</b>	<b>80</b>	<b>65</b>	<b>83</b>	<b>67</b>

#### Legend

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

#### Notes

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

This report presents several indicators of parents' satisfaction with the care their child received. These measures are from the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey, which assesses members' satisfaction with accessing care, experiences with healthcare providers, and the health plan.

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 about services used by children with health care conditions or special needs.

Plan results reflect combined CHP and Medicaid responses.

### Measure Descriptions

Measure	Description (Type of Insurance Product)
<b>Satisfaction with Access to Care for Children</b>	
Getting Care Needed for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify if, in the last 6 months, their child received care they needed. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> <li>1. How often was it easy to get appointments with specialists?</li> <li>2. How often was it easy to get the care, tests, or treatment you thought your child needed through your health plan?</li> </ol>
Getting Care Quickly for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify if, in the last 6 months, their child received health services quickly. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> <li>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?</li> <li>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?</li> </ol>
Access to Specialized Services for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify, if, in the past 6 months, the child received the specialized services the child needed. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> <li>1. How often was it easy to get special medical equipment or devices for your child?</li> <li>2. How often was it easy to get physical, occupational, or speech therapy for your child?</li> <li>3. How often was it easy to get emotional, developmental, or behavioral treatment or counseling for your child?</li> </ol>

Measure	Description (Type of Insurance Product)
<b>Satisfaction with Access to Care for Children (Continued)</b>	
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. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. (Medicaid/Child Health Plus)
<b>Satisfaction with Health Plan for Children</b>	
Customer Service for Children	<p>The percentage of parents responding "usually" or "always" when asked a set of questions to identify if, in the last 6 months, they used their child's health plan's customer service. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> <li>1. How often did your child's health plan's customer service give you the information or help you needed?</li> <li>2. How often did your child's health plan's customer service staff treat you with courtesy and respect?</li> </ol>
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. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. (Medicaid/Child Health Plus)
<b>Satisfaction with Experience of Care for Children</b>	
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. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> <li>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?</li> <li>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?</li> <li>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?</li> </ol>

Measure	Description (Type of Insurance Product)
<b>Satisfaction with Experience of Care for Children (Continued)</b>	
Coordination of Care for Children with Chronic Conditions	<p>The percentage of parents responding "yes" when asked a set of questions to identify if, in the last 6 months, they received needed healthcare coordination with daycare, school, or other healthcare providers. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> <li>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?</li> <li>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?</li> </ol>
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. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. (Medicaid/Child Health Plus)</p>
<b>Satisfaction with Providers for Children</b>	
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?" This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. (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?" This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. (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. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. (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. This measure was not collected for 2017 Medicaid; 2016 Medicaid data is presented in this report. The following questions are contained in this composite: (Medicaid/Child Health Plus)</p> <ol style="list-style-type: none"> <li>1. Did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?</li> <li>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?</li> <li>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?</li> </ol>



# Satisfaction with Care for Children

## SECTION

8

### 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
<b>Statewide Average</b>	<b>85</b>	<b>88</b>	<b>76</b>	<b>91</b>	<b>86</b>	<b>85</b>
<b>National Average</b>	*	*	*	*	*	*

#### Legend

- ▲ Significantly better than the **statewide** average.
- ▼ Significantly worse than the **statewide** average.
- \* No national average available.
- \*\* Rotated measure. Data is from 2016.

#### Notes

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

# Satisfaction with Care for Children

## SECTION

8

### 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
<b>Statewide Average</b>	<b>74</b>	<b>74</b>	<b>86</b>
<b>National Average</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### Legend

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

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

\* No national average available.

\*\* Rotated measure. Data is from 2016.

#### Notes

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

# Satisfaction with Care for Children

## SECTION

8

### 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
<b>Statewide Average</b>	<b>89</b>	<b>83</b>	<b>93</b>	<b>90</b>
<b>National Average</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>

#### Legend

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

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

\* No national average available.

\*\* Rotated measure. Data is from 2016.

#### Notes

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

This section provides information on how well managed care plans provide care to women members.

### Perinatal Health

Prenatal Care in the First Trimester, Risk-Adjusted Low-Birthweight (LBW), 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 2016. 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, please refer to the Technical Notes in Section Ten.

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

### Preventive Care for Women

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. After delivery, new mothers need postpartum care to ensure their body is healing and to receive appropriate services, including on-going family planning.

Measure	Description (Type of Insurance Product)
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, HARP)
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, HARP)

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 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.

Measure	Description (Type of Insurance Product)
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, HARP)

<b>Women's Health</b>	<b>SECTION</b>	<b>9</b>
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<b>Measure</b>	<b>Description (Type of Insurance Product)</b>
<b>Preventive Care for Women (Continued)</b>	
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, HARP)
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, HARP)

### 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	79 ▲	83	71 ▲	68 ▲	96	93 ▲
Empire BlueCross BlueShield HMO	67 ▼	71 ▼	52	60	92	75 ▼
Excellus BlueCross BlueShield	78 ▲	79	45 ▼	54 ▼	95	83
HIP (EmblemHealth)	74 ▼	80	73 ▲	77 ▲	83 ▼	61 ▼
HealthNow New York Inc.	78 ▲	83	59 ▲	65 ▲	98 ▲	91 ▲
Independent Health	77	80	59 ▲	63	98 ▲	94 ▲
MVP Health Care	75 ▼	78	53	62	92	87 ▲
Univera Healthcare	78 ▲	79	45 ▼	54 ▼	95	83
<b>Statewide Average</b>	<b>77</b>	<b>80</b>	<b>55</b>	<b>62</b>	<b>94</b>	<b>83</b>
<b>National Average</b>	<b>73</b>	<b>74</b>	<b>44</b>	<b>54</b>	<b>84</b>	<b>75</b>

#### 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) 2018 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	4.7	17	19.0
Empire BlueCross BlueShield HMO	84	5.4	15	--
Excellus BlueCross BlueShield	90 ▲	3.8	17	12.9
HIP (EmblemHealth)	84 ▼	4.3	21	3.5 ▼
HealthNow New York Inc.	86	3.8	17	8.8
Independent Health	81 ▼	4.7	18	9.0
MVP Health Care	89	4.7	19	6.5
Univera Healthcare	84	6.0	19	15.4
<b>Regional Average</b>	<b>88</b>	<b>4.2</b>	<b>18</b>	<b>11.4</b>
<b>Statewide Average</b>	<b>88</b>	<b>4.5</b>	<b>18</b>	<b>12.3</b>
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	84	5.6	22	--
HIP (EmblemHealth)	86	6.5	23	12.2
<b>Regional Average</b>	<b>85</b>	<b>6.3</b>	<b>22</b>	<b>12.9</b>
<b>Statewide Average</b>	<b>88</b>	<b>4.5</b>	<b>18</b>	<b>12.3</b>

#### 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 2016.

#### 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 ▲	78	62 ▲	69	84	64 ▼
CDPHP Universal Benefits, Inc.	78 ▲	87 ▲	65 ▲	66	96 ▲	89 ▲
CGLIC/CHLIC	71 ▲	79	61	70 ▲	88	70
Empire BlueCross BlueShield PPO	68	75 ▼	60 ▼	68	88	74 ▲
GHI (EmblemHealth)	48 ▼	56 ▼	69 ▲	73 ▲	69 ▼	50 ▼
MVP Preferred PPO	72 ▲	75	56 ▼	63 ▼	88	83 ▲
Oscar	58 ▼	70 ▼	60	67	89	74
Oxford Health Insurance of New York	62 ▼	82 ▲	57 ▼	65 ▼	86	66
UnitedHealthcare Insurance Company of New York, Inc.	73 ▲	81 ▲	63 ▲	72 ▲	92 ▲	67
<b>Statewide Average</b>	<b>68</b>	<b>79</b>	<b>61</b>	<b>68</b>	<b>88</b>	<b>69</b>
<b>National Average</b>	<b>70</b>	<b>73</b>	<b>42</b>	<b>52</b>	<b>77</b>	<b>67</b>

#### 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) 2018 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	4.7	21	9.1
CDPHP Universal Benefits, Inc.	88	4.2	19	10.9
CGLIC/CHLIC	89	4.8	23	9.6
Empire BlueCross BlueShield PPO	89	5.1	21	7.6
GHI (EmblemHealth)	84	6.1	27	--
MVP Preferred PPO	88	4.5	19	8.8
Oxford Health Insurance of New York	88	4.5	20	11.2
UnitedHealthcare Insurance Company of New York, Inc.	89	4.9	22	8.4
<b>Regional Average</b>	<b>89</b>	<b>4.8</b>	<b>22</b>	<b>8.8</b>
<b>Statewide Average</b>	<b>89</b>	<b>5.2</b>	<b>22</b>	<b>10.1</b>
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	89	5.9	23	9.2
CGLIC/CHLIC	90	5.4	22	10.3
Empire BlueCross BlueShield PPO	87 ▼	5.5	21	13.3
GHI (EmblemHealth)	88	6.9	24	8.3
Oxford Health Insurance of New York	91	5.1	18	15.9
UnitedHealthcare Insurance Company of New York, Inc.	91 ▲	5.2	21	11.4
<b>Regional Average</b>	<b>89</b>	<b>5.5</b>	<b>22</b>	<b>11.7</b>
<b>Statewide Average</b>	<b>89</b>	<b>5.2</b>	<b>22</b>	<b>10.1</b>

#### 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 2016.

#### 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
Affinity Health Plan	68 ▼	67	76 ▲	78 ▲	92 ▲	68
CDPHP	65 ▼	71	65 ▼	71 ▼	91	68
Empire BlueCross BlueShield HealthPlus	73 ▲	73	76 ▲	79 ▲	87	73
Excellus BlueCross BlueShield	65 ▼	72	54 ▼	69 ▼	92 ▲	63 ▼
Fidelis Care New York, Inc.	71	72	71 ▼	74 ▼	90	73
HIP (EmblemHealth)	67 ▼	70	74	76	80 ▼	61 ▼
HealthNow New York Inc.	59 ▼	69	61 ▼	64 ▼	88	68
Healthfirst PHSP, Inc.	77 ▲	74	82 ▲	81 ▲	90	75
Independent Health's MediSource	69	75	68 ▼	74	87	66 ▼
MVP Health Care	68 ▼	73	70 ▼	75	83 ▼	69
MetroPlus Health Plan	74 ▲	74	78 ▲	78 ▲	92 ▲	71
Molina Healthcare	70	70	70	75	78 ▼	56 ▼
UnitedHealthcare Community Plan	65 ▼	68	66 ▼	70 ▼	76 ▼	71
WellCare of New York	67 ▼	67 ▼	81 ▲	80 ▲	88	71
YourCare Health Plan	69	70	64 ▼	74	86	67
<b>MMC Statewide Average</b>	<b>71</b>	<b>72</b>	<b>73</b>	<b>76</b>	<b>88</b>	<b>71</b>
<b>National Average</b>	<b>58</b>	<b>59</b>	<b>54</b>	<b>63</b>	<b>81</b>	<b>64</b>
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
Amida Care	66	80	--	--	--	--
MetroPlus Health Plan	73 ▲	87 ▲	79	--	--	--
VNSNY Choice Health Plans	66	81	--	--	--	--
<b>SNP Statewide Average</b>	<b>68</b>	<b>82</b>	<b>75</b>	<b>78</b>	<b>69</b>	<b>44</b>

#### 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) 2018 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	76	7.7	14	11.6
CDPHP	74	6.8	13	17.6
Empire BlueCross BlueShield HealthPlus	74	12.9 ▼	17	13.0
Excellus BlueCross BlueShield	76	6.3	11	16.3
Fidelis Care New York, Inc.	74	7.0	12	15.3
HIP (EmblemHealth)	75	8.8	17	10.5
HealthNow New York Inc.	69	8.8	11	11.2
Healthfirst PHSP, Inc.	78	8.1	11	12.3
Independent Health's MediSource	75	6.8	12	14.4
MVP Health Care	79	5.9	13	11.4
Molina Healthcare	66 ▼	6.2	13	22.8
UnitedHealthcare Community Plan	76	8.3	15	9.6
WellCare of New York	69	6.1	14	6.3
YourCare Health Plan	74	6.5	15	18.4
<b>Regional Average</b>	<b>74</b>	<b>7.0</b>	<b>13</b>	<b>14.3</b>
<b>Statewide Average</b>	<b>75</b>	<b>6.6</b>	<b>14</b>	<b>16.5</b>
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	73 ▼	6.4	15	10.6 ▼
Empire BlueCross BlueShield HealthPlus	80 ▲	5.8	14	15.0
Fidelis Care New York, Inc.	77	6.5	15	21.8
HIP (EmblemHealth)	79	6.3	17	20.3
Healthfirst PHSP, Inc.	74 ▼	6.2	14	14.8 ▼
MetroPlus Health Plan	67 ▼	7.2	14	14.1 ▼
UnitedHealthcare Community Plan	81 ▲	5.7	13 ▲	38.6 ▲
WellCare of New York	73	8.0	19	10.1
<b>Regional Average</b>	<b>76</b>	<b>6.3</b>	<b>14</b>	<b>18.4</b>
<b>Statewide Average</b>	<b>75</b>	<b>6.6</b>	<b>14</b>	<b>16.5</b>

#### 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 2016.

#### Notes

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

### HARP Health Plan Performance

#### Preventive Care for Women

Plan	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care	Postpartum Care
Affinity Enriched Health	55 ▼	64	74	--	--
CDPHP	67	72	80	92 ▲	55
Empire BlueCross BlueShield HealthPlus	60	64 ▼	73	71	34
Excellus Health Plan, Inc.	67	71	74	86 ▲	53 ▲
Fidelis HealthierLife	62	68	77	76	45
HIP EmblemHealth Enhanced Care Plus	59 ▼	65	70	--	--
Healthfirst Personal Wellness Plan	71 ▲	75 ▲	79	71	39
Independent Health's MediSource Connect	64	71	--	--	--
MVP Harmonious Health Care Plan	61	70	73	73	38
MetroPlus Enhanced	57 ▼	60 ▼	81	76	31
TONY (Total Care Plus)	65	69	--	--	--
UnitedHealthcare Community-Wellness4Me	54 ▼	65	72	78	40
YourCare Options Plus	68	67	--	NV	NV
<b>Statewide Average</b>	<b>64</b>	<b>69</b>	<b>76</b>	<b>76</b>	<b>43</b>

#### 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.

## INTERPRETING THE MEASURES

### Plan-specific Rates

The rates reported as part of the 2018 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.