

2012 NEW YORK STATE

# Managed Care Plan Performance

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



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

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

## Executive Summary

Over 12 million New Yorkers receive their health insurance through a managed care plan or a preferred provider organization. This report is the 18th edition published by the New York State Department of Health and shares information about the quality of the health care provided by these insurers and the health care providers with whom they partner, to their members. The results of this report demonstrate the continuing commitment of insurers to provide their members with high quality care.

The 2012 Managed Care Plan Performance Report represents care New York State residents received during calendar year 2011. In general, results for NYS health plans continue to improve, consistently meeting or exceeding national bench marks for most measures. In addition, the trend of narrowing the performance gap between Medicaid and commercial health plans continues.

Some of the highlights in this report indicate that more New Yorkers are being monitored in the areas of Preventive Health, Chronic Care and Comprehensive Care for People with HIV AIDS. The Weight Assessment and Counseling for Nutrition and Physical Activity measure evaluates preventive care to promote healthy weight and activities for children ages three to 17. The measure addresses a child's Body Mass Index (BMI) percentile, as well as counseling about healthy eating and physical activity. The results reflect that seventy-three percent of Medicaid, 70 percent of Child Health Plus, and 65 percent of commercially insured children and adolescents had their BMI percentile measured and documented by their provider. These rates represent 30, 26 and 14 respective point increases from the 2009 rates for these measures.

For people with chronic illness, adhering to recommended testing and monitoring helps to ensure the disease is kept in control, which will maintain or improve quality of life, while also reducing costs associated with complications. Rates for the monitoring of persons with diabetes, annual monitoring for patients on persistent medications, and cholesterol management for patients with cardiovascular conditions have remained at high levels or improved for both commercial and public health insurance.

Enhancements in the medical management of persons living with HIV/AIDS have been shown to improve health outcomes and the overall health of this population. The State Medicaid program began measuring quality indicators of recommended treatment and preventive care for people living with HIV/AIDS in 2008. The percentage of plan members with HIV/AIDS, two years of age or older, who had two visits for primary care or HIV-related care, has increased from 63 percent to 84 percent among Medicaid managed care plans.

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



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## INTRODUCTION

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

## QUALITY MEASUREMENT IN NEW YORK STATE

As a way of monitoring managed care plan performance and improving the quality of care provided to New York State residents, the New York State Department of Health (NYSDOH) implemented a public reporting system in 1994 called the Quality Assurance Reporting Requirements (QARR). QARR is largely based on measures of quality established by the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS®). QARR also includes information collected using a national satisfaction survey methodology called CAHPS® (Consumer Assessment of Healthcare Providers and Systems). CAHPS data are collected every year for commercial enrollees. The NYSDOH sponsors a CAHPS survey for Medicaid managed care enrollees every two years. The most recent survey was done in late 2011.

## 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 2011 calendar year.

### Who Reports?

This report contains information from 29 health plans. Eleven plans reported on their commercial HMO enrollees; 18 plans reported on members enrolled in Medicaid managed care, and 19 plans reported on Child Health Plus enrollees. Ten plans reported data on their Preferred Provider Organization (PPO) membership. New this year are data submitted by Medicaid HIV Special Needs Plans (SNPS), which provide services to members living with HIV/AIDS. Two SNP plans submitted information about care received by their members in 2011. These data are presented in aggregate.

### Performance Measure Reporting

The NYSDOH does not require health plans to collect all measures every year. For measures that were not collected for 2011, the most recent information available is included in this report. The following measures were collected for 2010 but not for 2011:

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

Two measures for the 2011 measurement year are considered first year measures, and consistent with NCQA policy, individual plan rates are not published. Instead, data for the Immunizations for Adolescents and Medication Management for Persons with Asthma measures are reported in aggregate.

## USING THIS REPORT

This report represents results of health plan performance organized to allow comparison between health plans of the same type of insurance for each specific measure. Measures are organized into general domains to make it easier to focus on results in a related area. To use this report, first select the area of interest or domain, and then look for the type of insurance. The measures are arranged in columns with the title of the measure at the top, and a list of plan rates underneath. The health plans' names are along the left hand side of the page and the plan's rate for that measure is on the line with the plan name, under the column for that measure. Symbols are provided to indicate whether the plan performed statistically better (▲) or worse (▼) than the statewide average (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. Variations and/or extremes in utilization are difficult to interpret for plans with low enrollment. For this reason, plans with fewer than 30 eligible members are excluded from the statistical calculations of the percentiles, but are still included in the calculation of the statewide averages. All rates based on denominators of less than 30 are reported in the tables with a dashed line.

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

## What is in this report?

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

- Plan Profiles
- Provider Network
- Child and Adolescent Health
- Women's Health
- Adult Health
- Behavioral Health
- Satisfaction with Care
- HIV Special Needs Plans (HIV SNP)



**Types of Insurance**

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

<b>Commercial HMO</b>	Individual or employer sponsored health insurance. This is a form of health insurance where a health plan contracts with a network of providers to provide care; the member selects a primary care provider to coordinate care; and referrals to some services or specialists may be required.
<b>Commercial PPO</b>	Individual or employer sponsored health insurance. This is a form of health insurance where a health plan contracts with a network of providers to provide care; there is no primary care provider assignment; and referrals to some services or specialists are not usually required.
<b>Medicaid Managed Care</b>	Government sponsored health insurance. This is a form of health insurance where a health plan contracts with a network of providers to provide care; the member selects a primary care provider to coordinate care; and referrals to some services or specialists may be required. This includes people who are eligible for Medicaid managed care and Family Health Plus (NYS’s expansion program for adults age 19 and older).
<b>Child Health Plus</b>	Government sponsored health insurance, although individuals may pay a portion of the premium for some eligibility levels. This is a form of health insurance where a health plan contracts with a network of providers to provide care; the member selects a primary care provider to coordinate care; and referrals to some services or specialists may be required. This is NYS’s version of the federal State Children’s Health Insurance Program (SCHIP) for people up to age 19.
<b>HIV Special Needs Plan</b>	Government sponsored health insurance. This is a specific form of Medicaid coverage for persons living with HIV/AIDS. The SNP contracts with a network of providers to coordinate medical care; access to other services important for the care of HIV/AIDS, such as substance abuse counselors, and social service coordinators, may also be part of the SNP. Please note that significant numbers of persons with HIV/AIDS enrolled in Medicaid managed care plans.

**Trends and Averages**

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

**Additional Information**

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

## **OTHER DEPARTMENT OF HEALTH REPORTS AND WEBSITES**

Managed care performance data is available in other report formats, including utilization data and reports on demographic variation, are also available. All reports described below are available on the Department's website at <http://www.nyhealth.gov>.

### **eQARR**

The information contained in this report is available on the Department's website as an interactive report card for health care consumers. Commercial HMO, Commercial PPO, Medicaid, and Child Health Plus data are available on a regional basis.

### **Consumer Guides**

Consumer guides contain information on quality and satisfaction ratings in a condensed fashion and are intended to be very user-friendly for people evaluating the quality of health plans. Guides for 2012 are available for six regions of the state: New York City, Long Island, Hudson Valley, Northeast, Central, and Western New York. Guides for Medicaid, Commercial HMO, Commercial PPO, and Child Health Plus products can be obtained free of charge at the Department's website.

## **Managed Care Plan Access and Utilization Report**

The 2012 Managed Care Plan Access and Utilization 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.

### **Demographic Variation in Medicaid Managed Care**

The 2012 report provides information about the variation in quality of care received by select demographic characteristics such as gender, age, race/ethnicity, aid category and region. The report contains Medicaid managed care data only.

### **FEEDBACK**

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

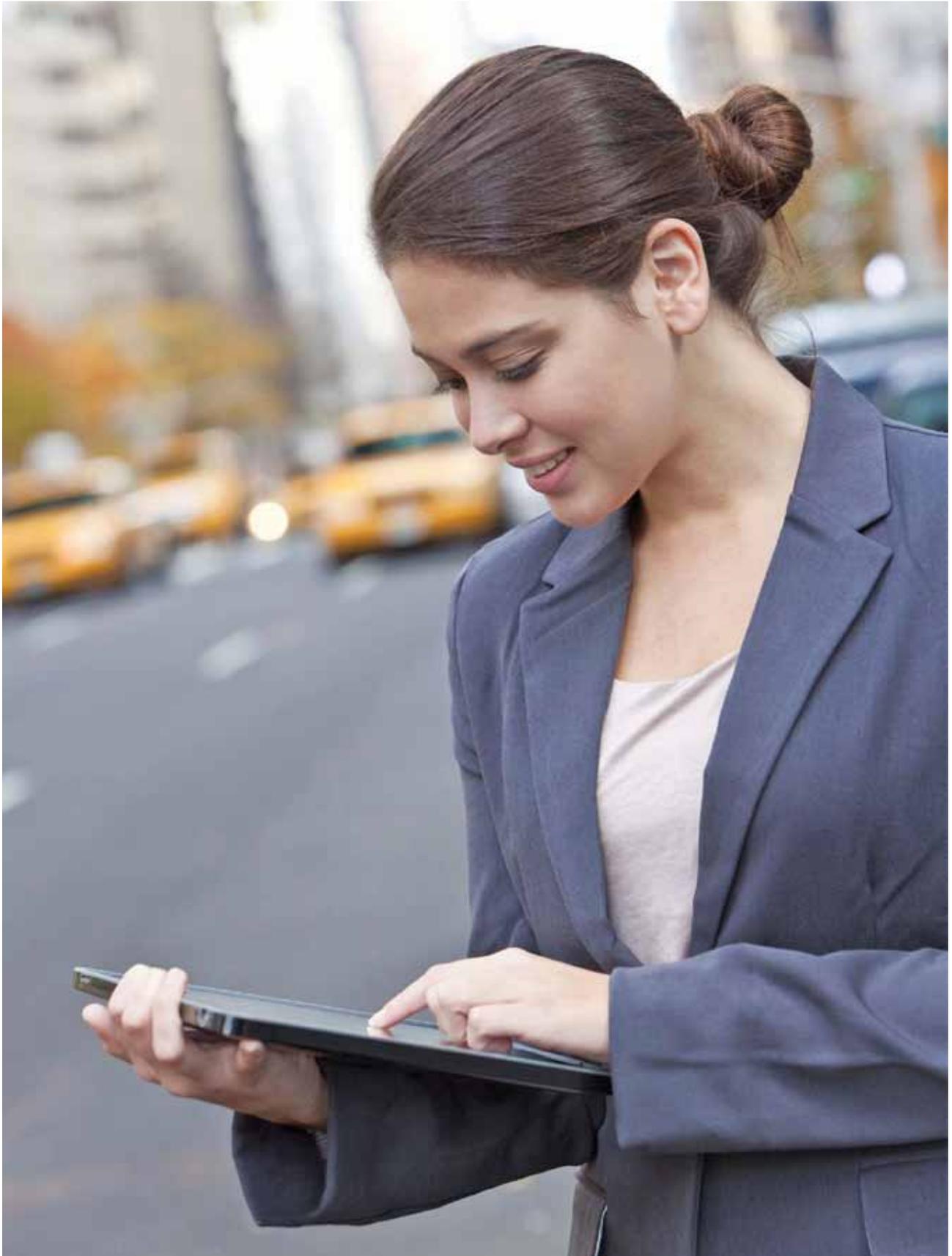
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This section provides an overview of each managed care plan operating in New York State during 2011. Health plans that also enroll commercial members in their Preferred Provider Organization (PPO) products are listed in an additional plan profile table in this section. The plan profiles include the following information:

Measure	Description
Type of Insurance Product	A plan may enroll members under different products such as commercial HMO (HMO), commercial PPO (PPO), Medicaid managed care (MA), Child Health Plus (CHP), or Family Health Plus (FHP). The product a plan offers is indicated by the following symbol: † .
Plan Service Areas	The 62 counties of New York State are divided into six regional plan service areas. Managed care organizations are certified to operate in specific counties in New York State. Please contact the health plans in your area to find out if they are currently enrolling in your county of residence.
Long Island (LI)	Nassau, Suffolk
New York City (NYC)	Bronx, Kings (Brooklyn), New York (Manhattan), Queens, Richmond (Staten Island)
Hudson Valley (HV)	Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester
Northeast (NE)	Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington
Central (CEN)	Broome, Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tioga, Tompkins
Western (WST)	Allegany, Cattaraugus, Chautauqua, Chemung, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, 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> .
2011 Enrollment	The total number of enrollees in the health plan as of December 31, 2011. 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. Commercial membership may include Health Maintenance Organization (HMO), and Point of Service (POS) members.
Percent Change from 2010	The percent change in total enrollment between December 31, 2010 and December 31, 2011.

Health Plan	TYPE OF INSURANCE						PLAN SERVICE AREAS*					Member Services
	CO	MA	SNP	CHP	FHP	LI	NYC	HV	NE	CEN	WST	
Aetna	†					●	●	●		●		1-800-872-3862
Affinity Health Plan		†			†	●	●	●				1-866-247-5678
Amerigroup New York		†			†	●	●	●				1-800-600-4441
Amida Care			†				●					1-800-556-0689
CDPHP	†	†			†			●	●	●		1-800-777-2273
Easy Choice Health Plan	†						●					1-866-747-8422
Empire	†				†	●	●	●	●			1-800-261-5962
Excellus BlueCross BlueShield	†	†			†				●	●	●	1-800-722-7884
Fidelis Care New York		†			†	●	●	●	●	●	●	1-888-343-3547
HIP (EmblemHealth)	†	†			†	●	●	●				1-800-447-8255
Health Plus		†			†	●	●					1-800-300-8181
HealthNow New York Inc.***	†	†			†				●	●	●	1-866-231-0847
Healthfirst PHSP, Inc.		†			†	●	●					1-866-463-6743
Hudson Health Plan		†			†			●				1-800-339-4557
Independent Health	†	†			†						●	1-800-501-3439
MVP	†	†			†			●	●	●	●	1-888-687-6277
MetroPlus Health Plan		†	†	†	†		●					1-800-303-9626
Neighborhood Health Providers		†			†	●	●					1-800-826-6240
Oxford	†					●	●	●				1-800-444-6222
Total Care		†			†					●		1-800-223-7242
UnitedHealthcare Community Plan		†			†	●	●	●	●	●		1-800-493-4647
Univera Community Health		†			†						●	1-800-494-2215
Univera Healthcare***	†										●	1-800-427-8490
WellCare of New York		†			†		●	●	●			1-800-288-5441

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

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

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

NCQA Accreditation Status as of 07/15/2012

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

Website	NCQA Accreditation***	2011 Enrollment	Percent Change from 2010
www.aetna.com	Commendable	109,655	-11%
www.affinityplan.org		261,855	-3%
www.amerigroupcorp.com		108,276	1%
www.amidacareny.org		4,732	67%
www.cdphp.com	Excellent	225,335	-1%
www.easychoiceny.com		17,792	-36%
www.empireblue.com	Commendable	472,103	8%
www.excellusbcs.com	Excellent	372,708	4%
www.fideliscare.org		714,755	13%
www.emblemhealth.com	Excellent	610,125	-9%
www.healthplus-ny.org		323,107	4%
www.healthnowny.com	Excellent	364,434	-1%
www.healthfirstny.org		503,220	8%
www.hudsonhealthplan.org		112,542	9%
www.independenthealth.com	Excellent	208,087	1%
www.mvphealthcare.com	Excellent	171,882	-21%
www.metroplus.org		417,211	5%
www.getnhp.com		209,771	2%
www.oxfordhealth.com	Commendable	621,630	12%
www.totalcareny.com		44,929	5%
www.uhccommunityplan.com	In Process	295,348	10%
www.univeracommunityhealth.org		48,156	3%
www.univerahealthcare.com	Excellent	66,472	28%
www.wellcare.com		74,626	-4%

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

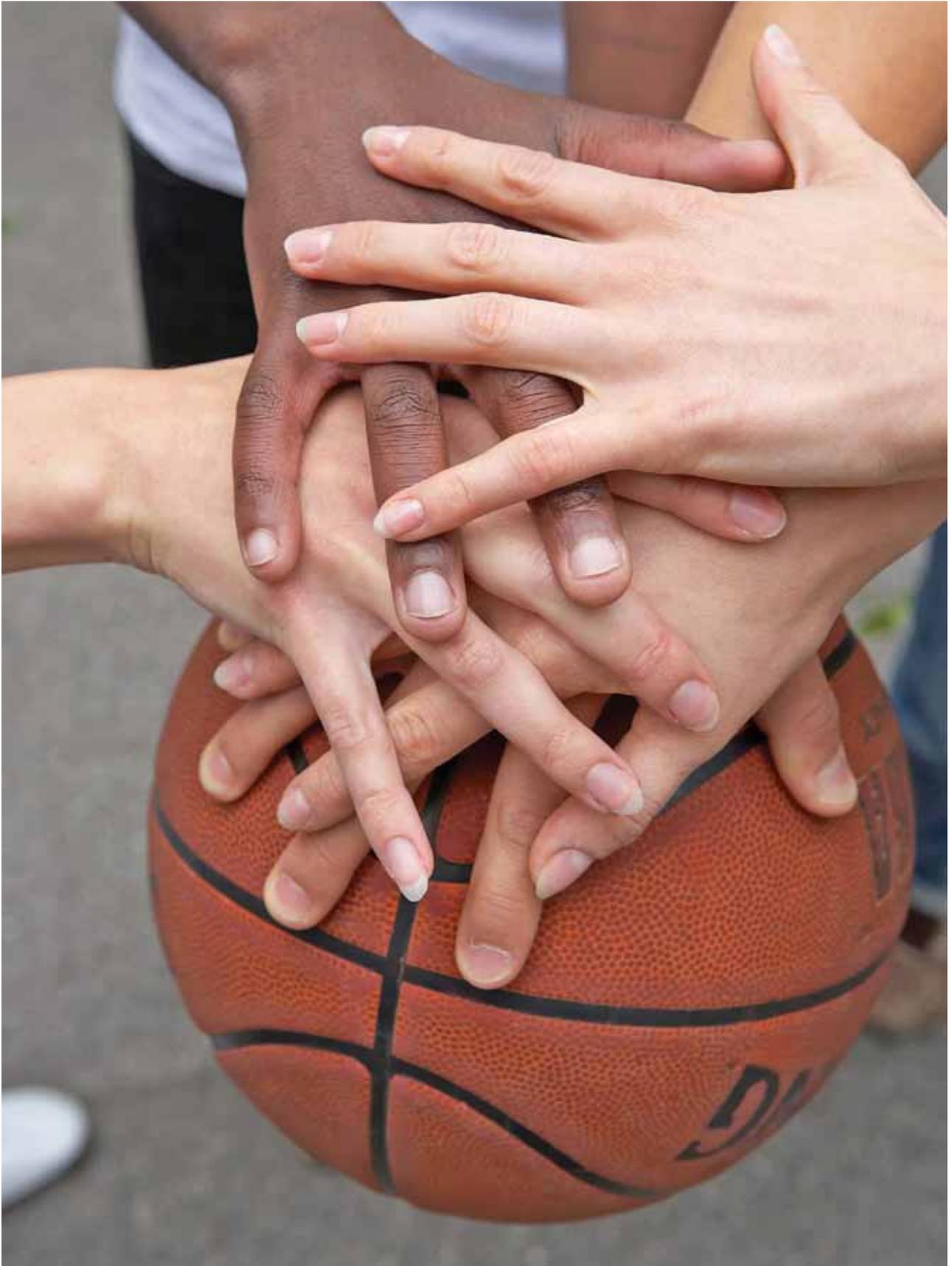
\* Plans may not participate in all counties in regions indicated.

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

\*\* Data source: NCQA Accreditation Rating as of 07/15/2012

For more information on NCQA accreditation please see their website at [www.ncqa.org](http://www.ncqa.org).

Website	NCQA Accreditation**	2011 Enrollment	Percent Change from 2010
www.aetna.com	Excellent	681,199	-7%
www.cdphp.com	Excellent	87,172	13%
www.cigna.com	Excellent	340,388	4%
www.empireblue.com		2,216,468	2%
www.excellusbcbs.com	Excellent	572,085	15%
www.ghi.com		380,812	-28%
www.emblemhealth.com		38,520	-18%
www.mvphealthcare.com		169,648	-7%
www.oxfordhealth.com	Excellent	383,308	9%
www.myuhc.com	Commendable	1,558,516	12%



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

The remaining measures in this section are collected through a member satisfaction survey known as CAHPS®. Both commercial and Medicaid managed

care plans adult membership are surveyed using CAHPS® 4.0 questionnaires. Commercial plans collect satisfaction data through CAHPS for their members every year. The data presented here are for adult commercial members who were enrolled in their health plan for at least 12 months. The NYSDOH sponsors a biennial CAHPS survey for Medicaid managed care members enrolled for at least 6 months. Medicaid members were last surveyed in late 2011. The data presented here are from that survey.

Measure	Description (Type of Insurance)
<b>Board Certification</b>	The percentage of physicians whose board certification is active as of December 31 of the measurement year. Results are collected for the following fields: family medicine, internal medicine, obstetrics and gynecology, and pediatrics. (CO, PPO, MA)
<b>Satisfaction with Provider Communication</b>	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. (CO, PPO, MA)
<b>Satisfaction with Personal Doctor</b>	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?" (CO, PPO, MA)
<b>Satisfaction with Specialist</b>	The percentage of members responding 8, 9, or 10 (on a scale of 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible) when asked "How would you rate your specialist?" (CO, PPO, MA)

Health Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Aetna	82▲	81▲	78▲	84▲	95	86	83
CDPHP	84▲	86▲	85▲	74▼	93	84	86
Easy Choice Health Plan of NY	51▼	70▼	37▼	61▼	93	80	68▼
Empire	74▼	75▼	78	79	93	81	84
Excellus BlueCross BlueShield	81	83▲	80	85▲	94	83	85
HIP (EmblemHealth)	80	82▲	74	82▲	92	82	84
HealthNow New York Inc.	80	77	70▼	70▼	94	85	86
Independent Health	80	70▼	80	82	92	81	82
MVP	83▲	81▲	81▲	88▲	95▲	86	88▲
Oxford	78	79	81▲	81	94	82	80
Univera Healthcare	83▲	77	79	82	94	82	82
<b>Statewide</b>	<b>79</b>	<b>79</b>	<b>76</b>	<b>80</b>	<b>94</b>	<b>83</b>	<b>82</b>
<b>National</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>94</b>	<b>84</b>	<b>83</b>

### LEGEND

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

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

Health Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Aetna Life Insurance Company – New York	81▲	80▲	79	84▲	95	84	77
CDPHP Universal Benefits, Inc.	84▲	86▲	85▲	74▼	96▲	87	86
Connecticut General Life Insurance Company – NY	79	82▲	78	83▲	94	82	78
Empire HealthChoice HMO, Inc.	75▼	76▼	78	80▼	88▼	79	82
Excellus BlueCross BlueShield	81▲	83▲	80	86▲	93	84	89▲
GHI (EmblemHealth)	73▼	71▼	66▼	75▼	94	86	83
HIP (EmblemHealth)	81▲	81▲	74▼	82	91	84	83
MVP Preferred PPO	83▲	81▲	81▲	87▲	95	88	80
Oxford Health Insurance Company, Inc. - New York	78	79▲	81▲	81	95	81	77
UnitedHealthcare Insurance Company of New York, Inc.	76▼	79	82▲	83▲	95	86	83
<b>Statewide</b>	<b>78</b>	<b>78</b>	<b>77</b>	<b>81</b>	<b>94</b>	<b>84</b>	<b>82</b>
<b>National</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>95</b>	<b>83</b>	<b>82</b>

### LEGEND

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

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

Health Plan	Board Certified Family Medicine	Board Certified Internal Medicine	Board Certified OB/GYN	Board Certified Pediatrics	Satisfaction with Provider Communication	Satisfaction with Personal Doctor	Satisfaction with Specialist
Affinity Health Plan	83▲	NV	76	NV	90	77	74
Amerigroup New York	76▼	85▲	79	80	85	69	72
CDPHP	85▲	86▲	85▲	79	93▲	83▲	78▲
Excellus BlueCross BlueShield	81	83	80	85▲	88	75	73
Fidelis Care New York	84▲	83▲	78	85▲	89	74	61▼
HIP (EmblemHealth)	79	81	73▼	82	88	72	65
Health Plus	80	84▲	83▲	83	85	68▼	63
HealthNow New York Inc.	79	73▼	65▼	66▼	87	73	76▲
Healthfirst PHSP, Inc.	84▲	88▲	79	87▲	86	74	64
Hudson Health Plan	84	81	80	87▲	88	76	74
Independent Health's MediSource	80	71▼	79	82	85	71	71
MVP	83▲	83	78	88▲	89	73	73
MetroPlus Health Plan	73▼	75▼	61▼	74▼	85	71	61▼
Neighborhood Health Providers	78	84▲	79	81	87	74	68
Total Care	91▲	91▲	88▲	89▲	85	67▼	68
UnitedHealthcare Community Plan	74▼	78▼	81▲	80	86	73	66
Univera Community Health	79	70▼	69▼	77	88	74	69
WellCare of New York	74▼	77▼	64▼	75▼	87	76	70
<b>Statewide</b>	<b>80</b>	<b>81</b>	<b>77</b>	<b>82</b>	<b>87</b>	<b>73</b>	<b>69</b>
<b>National</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>88</b>	<b>77</b>	<b>78</b>

### LEGEND

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

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

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

## COMMERCIAL HMO

Measure	2009	2010	2011
Board Certified Family Medicine	79	79	79
Board Certified Internal Medicine	80	79	79
Board Certified OB/GYN	79	78	76
Board Certified Pediatrics	83	83	80
Satisfaction with Personal Doctor	81	82	83
Satisfaction with Specialist	79	81	82
Satisfaction with Provider Communication	93	93	94

## COMMERCIAL PPO

Measure	2009	2010	2011
Board Certified Family Medicine	77	76	78
Board Certified Internal Medicine	80	76	78
Board Certified OB/GYN	78	76	77
Board Certified Pediatrics	82	80	81
Satisfaction with Personal Doctor	81	83	84
Satisfaction with Specialist	81	83	82
Satisfaction with Provider Communication	94	94	94

## MEDICAID

Measure	2009	2010	2011
Board Certified Family Medicine	81	80	80
Board Certified Internal Medicine	83	81	81
Board Certified OB/GYN	77	76	77
Board Certified Pediatrics	82	82	82
Satisfaction with Personal Doctor	74	Rotated	73
Satisfaction with Specialist	67	Rotated	69
Satisfaction with Provider Communication	86	Rotated	87



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

The appropriateness of care for children with acute illness is also shown. Excess use of antibiotics is linked to the prevalence of resistant strains of bacteria in the community; appropriate testing and use of antibiotics in children is an indicator of high quality of care. Children with chronic health conditions, such as asthma or attention deficit/hyperactivity disorder (ADHD), should receive proper medical management for their conditions. For children with asthma, this means receiving the appropriate medication for their condition. For children with ADHD, regular follow-up visits with a doctor are important after beginning prescription medications.

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

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

CHILD AND ADOLESCENT PREVENTIVE CARE

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

CHILD AND ADOLESCENT PREVENTIVE CARE

Health Plan	Childhood Immunization Combo 3 (4-3-1-3-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> , or 6 <sup>th</sup> Year of Life	Adolescent Well-Care and Preventive Visits
Aetna	66▼	77▼	85▼	82▼	57▼
CDPHP	86▲	82	97▲	89▲	67▲
Easy Choice Health Plan of NY	41▼	73	74▼	34▼	21▼
Empire	63▼	79	85▼	74▼	45▼
Excellus BlueCross BlueShield	85▲	85	98▲	88▲	64▲
HIP (EmblemHealth)	78▲	90▲	96▲	94▲	64▲
HealthNow New York Inc.	75▲	83	96▲	87▲	63▲
Independent Health	81▲	88▲	97▲	88▲	66▲
MVP	82▲	83	95▲	84	58▼
Oxford	55▼	74▼	90▼	85	62▲
Univera Healthcare	81▲	83	93	84	59
<b>Statewide</b>	<b>71</b>	<b>82</b>	<b>93</b>	<b>85</b>	<b>60</b>
<b>National</b>	<b>76</b>	<b>*</b>	<b>*</b>	<b>73</b>	<b>43</b>

LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

\* No national average available

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

CHILD AND ADOLESCENT PREVENTIVE CARE

Health Plan	Childhood Immunization Combo 3 (4-3-1-3-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> , or 6 <sup>th</sup> Year of Life	Adolescent Well-Care and Preventive Visits
Aetna Life Insurance Company – New York	68▲	79	90	82▲	57▲
CDPHP Universal Benefits, Inc.	80▲	83▲	96▲	89▲	64▲
Connecticut General Life Insurance Company – NY	66	83▲	92▲	83▲	58▲
Empire HealthChoice HMO, Inc.	NV	NV	88▼	77▼	45▼
Excellus BlueCross BlueShield	83▲	77	88▼	78▼	53
GHI (EmblemHealth)	53▼	70▼	94▲	80	53
HIP (EmblemHealth)	72	75	96▲	92▲	59▲
MVP Preferred PPO	50▼	73▼	94▲	84▲	59▲
Oxford Health Insurance Company, Inc. – New York	55▼	72▼	91	83▲	63▲
UnitedHealthcare Insurance Company of New York, Inc.	60	76	93▲	84▲	57▲
<b>Statewide</b>	<b>64</b>	<b>76</b>	<b>90</b>	<b>80</b>	<b>53</b>
<b>National</b>	<b>63</b>	<b>*</b>	<b>*</b>	<b>70</b>	<b>41</b>

LEGEND

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

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

### CHILD AND ADOLESCENT PREVENTIVE CARE

Health Plan	Childhood Immunization Combo 3 (4-3-1-3-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> , or 6 <sup>th</sup> Year of Life	Adolescent Well-Care and Preventive Visits	Annual Dental Visit (Ages 2-18)
Affinity Health Plan	80▲	87	84▲	79▼	54▼	54▼
Amerigroup New York	75	89	80	83	63▲	55
CDPHP	77	76▼	85▲	77▼	52▼	NA
Excellus BlueCross BlueShield	77	85▼	87▲	75▼	51▼	NA
Fidelis Care New York	70	84▼	79▼	81▼	57▼	60▲
HIP (EmblemHealth)	71	91	95▲	95▲	67▲	54▼
Health Plus	78▲	91	82▼	86▲	64▲	56▲
HealthNow New York Inc.	69▼	80▼	85	78▼	55▼	NA
Healthfirst PHSP, Inc.	73	91	81▼	84▲	61▲	56▲
Hudson Health Plan	81▲	91	86▲	80▼	55▼	64▲
Independent Health's MediSource	69	88	85▲	79▼	56▼	NA
MVP	76	78▼	85	77▼	53▼	54
MetroPlus Health Plan	82▲	97▲	88▲	85▲	59	NA
Neighborhood Health Providers	82▲	96▲	84▲	84▲	59	51▼
Total Care	77	78▼	81	78▼	55▼	NA
UnitedHealthcare Community Plan	52▼	84▼	69▼	79▼	56▼	50▼
Univera Community Health	72	86	88▲	78▼	53▼	NA
WellCare of New York	57▼	86	71▼	80▼	63▲	47▼
Statewide	74	89	83	83	59	55
National	71	68	*	72	50	*

#### LEGEND

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

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

### CHILD AND ADOLESCENT PREVENTIVE CARE

Health Plan	Childhood Immunization Combo 3 (4-3-1-3-3-1-4)	Lead Testing	Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Well-Child & Preventive Care Visits in the 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> , or 6 <sup>th</sup> Year of Life	Adolescent Well-Care and Preventive Visits	Annual Dental Visit (Ages 2-18)
Affinity Health Plan	84▲	91▲	89	84	64▼	68▲
Amerigroup New York	91▲	97▲	—	83	68	65
CDPHP	78▲	84	92▲	80▼	66▼	72▲
Empire	57▼	75▼	84▼	85	70▲	56▼
Excellus BlueCross BlueShield	79▲	82	90	81▼	65▼	68▲
Fidelis Care New York	77▲	85	89	83▼	66▼	66▲
HIP (EmblemHealth)	72	83	98▲	98▲	79▲	67▲
Health Plus	79▲	90▲	83	88▲	72▲	58▼
HealthNow New York Inc.	76	87	92	83	68	68▲
Healthfirst PHSP, Inc.	78▲	89▲	86	85	69	66▲
Hudson Health Plan	80▲	90▲	89	83▼	68	71▲
Independent Health	—	—	—	85	72	46▼
MVP	65	86	—	81	66	58▼
MetroPlus Health Plan	79	93▲	—	84	65▼	60▼
Neighborhood Health Providers	83▲	92▲	85	86	66▼	62▼
Total Care	86▲	82	—	83	64▼	63
UnitedHealthcare Community Plan	59▼	81	83	86▲	70▲	55▼
Univera Community Health	80	87	93	87▲	69	70▲
WellCare of New York	—	—	—	88▲	70▲	63
<b>Statewide</b>	<b>72</b>	<b>83</b>	<b>87</b>	<b>84</b>	<b>68</b>	<b>64</b>

#### LEGEND

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

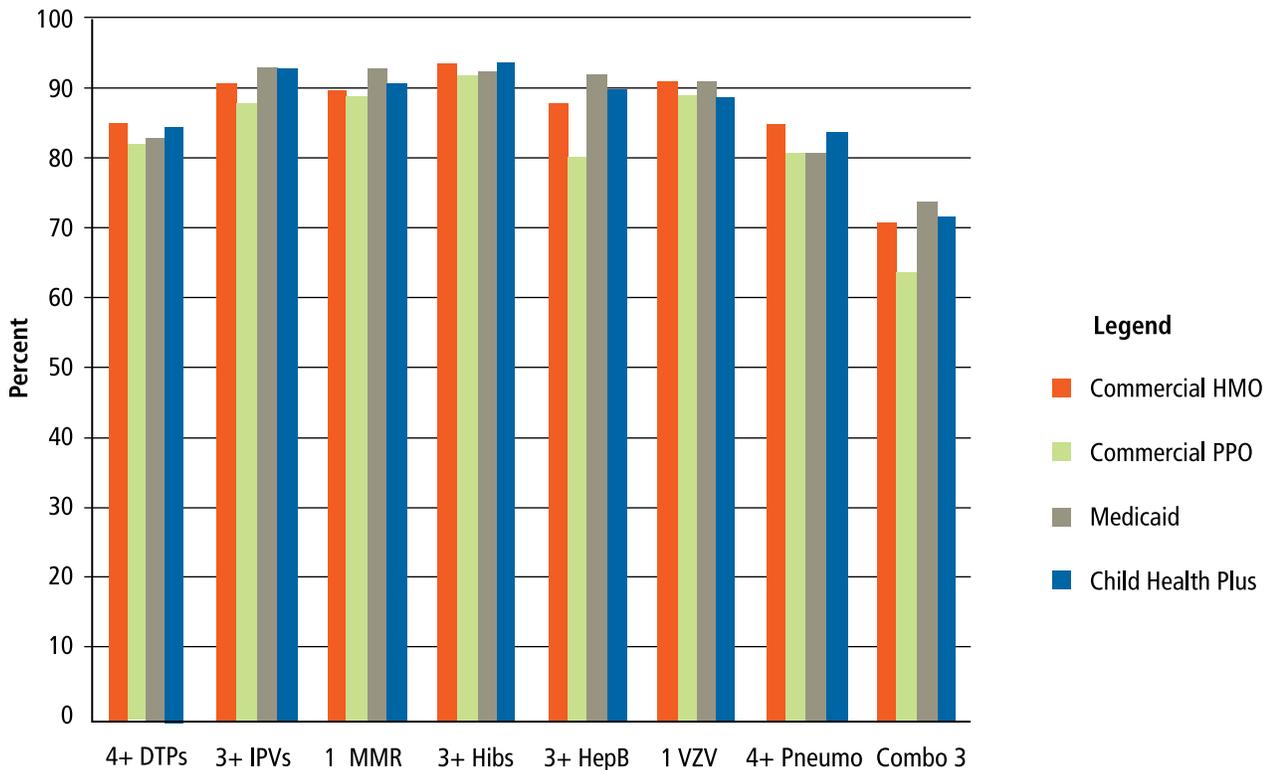
NOTE: Plans without symbols are not significantly different from the statewide average.

**CHILDHOOD IMMUNIZATION STATUS**

The Childhood Immunization Status measure describes a series of several vaccinations that are recommended for children before their second birthday. These include the following: four or more diphtheria, tetanus, and pertussis (DTP); three or more polio (IPV); at least one measles, mumps and rubella (MMR); three or more H influenza type B (Hib); three or more hepatitis B (HepB); one chicken pox (VZV); and four or more pneumococcal conjugate (Pneumo) vaccines. The following graph illustrates the rates, by payer, for each of the antigens contained in the combination rate.

Please note that the combination rate includes 19 different vaccinations. While this overall rate is relatively low, it is important to recognize that the rates of immunization for each specific antigen are much higher, often approaching 90 percent completeness. This indicates that overall, children in New York State are receiving the appropriate immunizations at a more comprehensive level than indicated by the combination rate.

**Immunization Rates by Payer**



### CARING FOR CHILDREN & ADOLESCENTS WITH ILLNESS

Measure	Description (Type of Insurance)
<b>Appropriate Treatment for Upper Respiratory Infection (URI)</b>	The percentage of children, ages 3 months to 18 years, who were diagnosed with an upper respiratory infection (common cold) and who were NOT given a prescription for an antibiotic. A higher score indicates more appropriate treatment of children with URI. (CO, PPO, MA, CHP)
<b>Appropriate Testing for Pharyngitis</b>	The percentage of children, ages two to 18 years, who were diagnosed with pharyngitis, were prescribed an antibiotic, and who were given a group A streptococcus test. (CO, PPO, MA, CHP)
<b>Use of Appropriate Medications for People with Asthma (Ages 5 to 18)</b>	The percentage of children ages 5 to 18 years with persistent asthma who received at least one appropriate medication to control their condition during the measurement year. (CO, PPO, MA, CHP)
<b>Appropriate Asthma Medications – 3+ Controllers (Ages 5 to 18)</b>	The percentage of children, ages 5 to 18 years, with persistent asthma who had three or more controller medication dispensing events in the last year. (CO, PPO, MA, CHP)
<b>Follow-up Care for Children Prescribed ADHD Medications</b>	The percentage of children, ages 6 to 12 years, who were newly prescribed ADHD medication and who had at least 3 follow-up visits within a 10-month period, 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. (CO, PPO, MA, CHP)
<b>1) Initiation Phase</b>	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.
<b>2) Continuation &amp; Maintenance Phase</b>	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 2 follow-up visits in the 9-month period after the initiation phase ended.

CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Appropriate Asthma Medications – 3+ Controllers (Ages 5-18)	Follow-Up Care for Children Prescribed ADHD Medication	
					Initiation Phase	Continuation Phase
Aetna	88	87	94	79	46	—
CDPHP	91▲	92▲	95	77	41	39
Easy Choice Health Plan of NY	87	77▼	—	—	—	—
Empire	89	88	96	75	42	—
Excellus BlueCross BlueShield	91▲	91▲	97▲	86▲	41	43
HIP (EmblemHealth)	94▲	91▲	97	79	50	61
HealthNow New York Inc.	87▼	83▼	96	78	47	50
Independent Health	83▼	93▲	96	78	42	41
MVP	87▼	87	93	74	41	48
Oxford	89	86▼	94	76	47	50
Univera Healthcare	83▼	84▼	92	77	54	—
Statewide	89	88	95	78	44	47
National	84	80	*	*	39	44

LEGEND

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

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

CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Appropriate Asthma Medications – 3+ Controllers (Ages 5-18)	Follow-Up Care for Children Prescribed ADHD Medication	
					Initiation Phase	Continuation Phase
Aetna Life Insurance Company - New York	89▲	89▲	94	76	44	49
CDPHP Universal Benefits, Inc.	89	90▲	95	76	50	43
Connecticut General Life Insurance Company - NY	90▲	88	95	78	50	61
Empire HealthChoice HMO, Inc.	88	86▼	94	79	36▼	41▼
Excellus BlueCross BlueShield	85▼	85▼	96▲	84▲	42	49
GHI (EmblemHealth)	88	88▲	91▼	72▼	48	60
HIP (EmblemHealth)	85	92▲	94	68	—	—
MVP Preferred PPO	89	87	96	79	39	47
Oxford Health Insurance Company, Inc. - New York	90▲	88▲	93	75▼	52▲	55
UnitedHealthcare Insurance Company of New York, Inc.	89▲	87	95	78	46	50
<b>Statewide</b>	<b>88</b>	<b>87</b>	<b>94</b>	<b>79</b>	<b>44</b>	<b>50</b>
<b>National</b>	<b>82</b>	<b>79</b>	<b>*</b>	<b>*</b>	<b>39</b>	<b>45</b>

LEGEND

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

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

### CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Appropriate Asthma Medications – 3+ Controllers (Ages 5-18)	Follow-Up Care for Children Prescribed ADHD Medication	
					Initiation Phase	Continuation Phase
Affinity Health Plan	93▲	76▼	88	70	65▲	74▲
Amerigroup New York	91	82▼	86▼	65▼	64	—
CDPHP	91	86	89	71	49▼	56▼
Excellus BlueCross BlueShield	93▲	86	91▲	71	43▼	52▼
Fidelis Care New York	90▼	88▲	89	70▼	62▲	68
HIP (EmblemHealth)	94▲	90▲	91▲	75▲	64▲	73
Health Plus	90▼	86	89	71	67▲	71
HealthNow New York Inc.	83▼	72▼	95▲	73	60	71
Healthfirst PHSP, Inc.	93▲	87▲	88▼	70	69▲	78▲
Hudson Health Plan	93▲	79▼	92▲	71	59	74
Independent Health's MediSource	91	76▼	93▲	74	61	60
MVP	93	81▼	88	67	33▼	35▼
MetroPlus Health Plan	94▲	84▼	88▼	71	61	74▲
Neighborhood Health Providers	91▼	85	90	73	66▲	80▲
Total Care	84▼	76▼	94▲	82▲	61	69
UnitedHealthcare Community Plan	92	90▲	91	74▲	52▼	52▼
Univera Community Health	89▼	80▼	92	76	57	68
WellCare of New York	90▼	84▼	90	74	53	60
<b>Statewide</b>	<b>92</b>	<b>86</b>	<b>89</b>	<b>71</b>	<b>59</b>	<b>66</b>
<b>National</b>	<b>85</b>	<b>67</b>	<b>*</b>	<b>*</b>	<b>39</b>	<b>46</b>

#### LEGEND

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

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

### CARING FOR CHILDREN AND ADOLESCENTS WITH ILLNESS

Health Plan	Appropriate Treatment for URI	Appropriate Testing for Pharyngitis	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Appropriate Asthma Medications – 3+ Controllers (Ages 5-18)	Follow-Up Care for Children Prescribed ADHD Medication	
					Initiation Phase	Continuation Phase
Affinity Health Plan	90	85▼	92	72	65▲	—
Amerigroup New York	88	86	85	64▼	—	—
CDPHP	86▼	91▲	91	78	40▼	48
Empire	89▲	90▲	89▼	70▼	50	54
Excellus BlueCross BlueShield	83▼	83▼	94▲	84▲	47▼	52▼
Fidelis Care New York	89▲	90▲	93	77	58▲	65
HIP (EmblemHealth)	93▲	88	92	81▲	49	—
Health Plus	89	86▼	89	69▼	51	—
HealthNow New York Inc.	82▼	78▼	96▲	77	49	61
Healthfirst PHSP, Inc.	91▲	90▲	88▼	71	64▲	—
Hudson Health Plan	91▲	87	92	73	53	—
Independent Health	91	81	—	—	—	—
MVP	92	90	98▲	84	—	—
MetroPlus Health Plan	90▲	87	91	77	61	—
Neighborhood Health Providers	89	88	92	67▼	53	—
Total Care	78▼	78▼	99▲	82	52	—
UnitedHealthcare Community Plan	86▼	88	92	74	55	—
Univera Community Health	88	88	88	67▼	51	61
WellCare of New York	91	87	95	78	39	—
<b>Statewide</b>	<b>88</b>	<b>88</b>	<b>92</b>	<b>76</b>	<b>51</b>	<b>59</b>

#### LEGEND

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

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

PREVENTIVE COUNSELING FOR HEALTHY YOUTHS

Measure	Description (Type of Insurance)
<p><b>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</b></p>	<p>The percentage of children and adolescents ages 3-17 who had an outpatient visit with a primary care provider (PCP) or OB/GYN practitioner during the measurement year, and who had their weight assessed as well as received counseling in related areas. This measure has three components, including weight assessment by calculation of body mass index (BMI), counseling for healthy nutrition, and counseling for physical activity. (CO, PPO, MA, CHP)</p>

PREVENTIVE COUNSELING FOR HEALTHY YOUTHS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Aetna	68	61▼	50▼
CDPHP	82▲	80▲	80▲
Easy Choice Health Plan of NY	23▼	22▼	22▼
Empire	56▼	68	59
Excellus BlueCross BlueShield	83▲	85▲	78▲
HIP (EmblemHealth)	63	63▼	59
HealthNow New York Inc.	79▲	75▲	65
Independent Health	85▲	88▲	80▲
MVP	77▲	73	70▲
Oxford	42▼	57▼	47▼
Univera Healthcare	84▲	86▲	77▲
Statewide	65	70	62
National	45	46	43

**LEGEND**

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

PREVENTIVE COUNSELING FOR HEALTHY YOUTHS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Aetna Life Insurance Company – New York	75▲	66▲	55
CDPHP Universal Benefits, Inc.	80▲	81▲	75▲
Connecticut General Life Insurance Company – NY	68▲	74▲	68▲
Empire HealthChoice HMO, Inc.	42▼	54▼	46▼
Excellus BlueCross BlueShield	71▲	77▲	68▲
GHI (EmblemHealth)	50▼	55▼	50
HIP (EmblemHealth)	63▲	68▲	61▲
MVP Preferred PPO	NV	NV	NV
Oxford Health Insurance Company, Inc. – New York	NV	NV	NV
UnitedHealthcare Insurance Company of New York, Inc.	NV	NV	NV
Statewide	55	61	53
National	25	28	26

LEGEND

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

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

### PREVENTIVE COUNSELING FOR HEALTHY YOUTHS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Affinity Health Plan	72	74	66
Amerigroup New York	43▼	65▼	49▼
CDPHP	69▼	74	65
Excelsus BlueCross BlueShield	69	79	66
Fidelis Care New York	76	80	70
HIP (EmblemHealth)	73	75	67
Health Plus	69	73	64
HealthNow New York Inc.	72	70▼	54▼
Healthfirst PHSP, Inc.	72	76	64
Hudson Health Plan	75	78	64
Independent Health's MediSource	66▼	73	55▼
MVP	85▲	80	71▲
MetroPlus Health Plan	82▲	81▲	73▲
Neighborhood Health Providers	76	77	65
Total Care	71	71▼	60▼
UnitedHealthcare Community Plan	75	80	70
Univera Community Health	72	83▲	65
WellCare of New York	65▼	55▼	49▼
<b>Statewide</b>	<b>73</b>	<b>77</b>	<b>66</b>
<b>National</b>	<b>46</b>	<b>50</b>	<b>41</b>

#### LEGEND

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

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

PREVENTIVE COUNSELING FOR HEALTHY YOUTHS

Health Plan	Weight Assessment	Counseling for Nutrition	Counseling for Physical Activity
Affinity Health Plan	71	73	68
Amerigroup New York	51▼	67▼	59▼
CDPHP	73	73	71▲
Empire	61▼	72	64
Excellus BlueCross BlueShield	66	72	65
Fidelis Care New York	77▲	75	71▲
HIP (EmblemHealth)	67	68▼	61▼
Health Plus	65	71	62▼
HealthNow New York Inc.	77▲	73	65
Healthfirst PHSP, Inc.	74▲	76	66
Hudson Health Plan	78▲	78▲	71
Independent Health	81▲	85▲	77▲
MVP	78▲	75	73▲
MetroPlus Health Plan	72	77	67
Neighborhood Health Providers	63▼	77	64
Total Care	70	72	68
UnitedHealthcare Community Plan	75▲	81▲	72▲
Univera Community Health	80▲	85▲	75▲
WellCare of New York	49▼	39▼	33▼
Statewide	70	74	67

LEGEND

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

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

**ADOLESCENT PREVENTIVE CARE**

Measure	Description (Type of Insurance)
<b>Adolescent Preventive Care Measures</b>	The percentage of adolescents ages 12-17 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. (CO, PPO, MA, CHP)
<b>1) Preventive Actions Associated with Sexual Activity</b>	Assessment, counseling, or education on risk behaviors and preventive actions associated with sexual activity.
<b>2) Depression</b>	Assessment, counseling, or education for depression.
<b>3) Tobacco Use</b>	Assessment, counseling, or education about the risks of tobacco use.
<b>4) Alcohol and Other Drug Use</b>	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.

### ADOLESCENT PREVENTIVE CARE

Health Plan	Assessment, Counseling or Education			
	Preventive Actions Associated with Sexual Activity	Depression	Tobacco Use	Alcohol and Other Drug Use
Aetna	49	42	48▼	50
CDPHP	67▲	61▲	78▲	71▲
Easy Choice Health Plan of NY	10▼	5▼	10▼	10▼
Empire	55	43	51	51
Excellus BlueCross BlueShield	66▲	68▲	68▲	71▲
HIP (EmblemHealth)	45▼	39	49▼	44▼
HealthNow New York Inc.	70▲	47	75▲	74▲
Independent Health	77▲	71▲	84▲	80▲
MVP	55	51	67▲	62
Oxford	36▼	26▼	36▼	38▼
Univera Healthcare	62	56▲	68▲	63
Statewide	55	46	59	57
National	*	*	*	*

#### LEGEND

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

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

ADOLESCENT PREVENTIVE CARE

Health Plan	Assessment, Counseling or Education			
	Preventive Actions Associated with Sexual Activity	Depression	Tobacco Use	Alcohol and Other Drug Use
Aetna Life Insurance Company – New York	51	33	50	56
CDPHP Universal Benefits, Inc.	70▲	54▲	76▲	71▲
Connecticut General Life Insurance Company – NY	47	37	47	51
Empire HealthChoice HMO, Inc.	36▼	37	41	41▼
Excellus BlueCross BlueShield	55▲	52▲	60▲	59▲
GHI (EmblemHealth)	42	30▼	43	44
HIP (EmblemHealth)	53	42	51	51
MVP Preferred PPO	NV	NV	NV	NV
Oxford Health Insurance Company, Inc. – New York	NV	NV	NV	NV
UnitedHealthcare Insurance Company of New York, Inc.	46	35	45	47
Statewide	47	37	48	49
National	*	*	*	*

LEGEND

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

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

### ADOLESCENT PREVENTIVE CARE

Health Plan	Assessment, Counseling or Education			
	Preventive Actions Associated with Sexual Activity	Depression	Tobacco Use	Alcohol and Other Drug Use
Affinity Health Plan	65	65	69	62
Amerigroup New York	52▼	43▼	52▼	52▼
CDPHP	58	50▼	75	71
Excelsus BlueCross BlueShield	54▼	54	61▼	55▼
Fidelis Care New York	67	61	77	74
HIP (EmblemHealth)	62	61	74	64
Health Plus	72	63	71	72
HealthNow New York Inc.	64	43▼	62	58▼
Healthfirst PHSP, Inc.	63	53	66	64
Hudson Health Plan	68	52	68	65
Independent Health's MediSource	64	52	68	62
MVP	65	49▼	73	63
MetroPlus Health Plan	72	68▲	72	74
Neighborhood Health Providers	67	56	70	67
Total Care	71	51	73	70
UnitedHealthcare Community Plan	81▲	76▲	83▲	82▲
Univera Community Health	52▼	54	60▼	58▼
WellCare of New York	47▼	36▼	47▼	47▼
<b>Statewide</b>	<b>66</b>	<b>59</b>	<b>70</b>	<b>67</b>
<b>National</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

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

### ADOLESCENT PREVENTIVE CARE

Health Plan	Assessment, Counseling or Education			
	Preventive Actions Associated with Sexual Activity	Depression	Tobacco Use	Alcohol and Other Drug Use
Affinity Health Plan	63	60	72	68
Amerigroup New York	53▼	45▼	51▼	53▼
CDPHP	64	52	75▲	70
Empire	57	53	64	62
Excellus BlueCross BlueShield	52▼	48	52▼	51▼
Fidelis Care New York	71▲	57	73	74▲
HIP (EmblemHealth)	56▼	51	58▼	53▼
Health Plus	66	61	68	67
HealthNow New York Inc.	65	47▼	72	69
Healthfirst PHSP, Inc.	67	57	68	68
Hudson Health Plan	65	54	74▲	69
Independent Health	76▲	61	77▲	75▲
MVP	67	63	74	74▲
MetroPlus Health Plan	70	60	64	65
Neighborhood Health Providers	66	52	70	63
Total Care	62	51	61	58▼
UnitedHealthcare Community Plan	73▲	67▲	76▲	77▲
Univera Community Health	65	60	72	71
WellCare of New York	32▼	21▼	35▼	34▼
<b>Statewide</b>	<b>64</b>	<b>55</b>	<b>67</b>	<b>66</b>

#### LEGEND

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

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

Appropriate vaccinations for older children are an important part of preventive care for young teens and this new measure looks at immunization rates for two vaccines. This measure reports the percentage of members (13 years old) who had one dose of meningococcal vaccine between their

11th and 13th birthdays and one dose of tetanus, diphtheria and pertussis vaccine between their 10th and their 13th birthdays. The measure calculates a rate for each vaccine and one combination rate for adolescents who have received both vaccines.

**IMMUNIZATIONS FOR ADOLESCENTS**

<b>Meningococcal Vaccine</b>	<b>HMO</b>	<b>PPO</b>	<b>MEDICAID</b>	<b>CHPLUS</b>
Number of Plans	11	10	18	19
Statewide Average	65	56	70	67
Range of Scores	24, 75	52, 64	54, 83	52, 84
25th Percentile	57	56	62	62
Median	66	59	70	65
75th Percentile	70	63	72	75

<b>Tetanus/Diphtheria/Pertussis Vaccine</b>	<b>HMO</b>	<b>PPO</b>	<b>MEDICAID</b>	<b>CHPLUS</b>
Number of Plans	11	10	18	19
Statewide Average	89	77	91	93
Range of Scores	52, 98	65, 96	67, 97	73, 97
25th Percentile	85	81	88	92
Median	97	85	92	94
75th Percentile	97	95	93	96

<b>Combination</b>	<b>HMO</b>	<b>PPO</b>	<b>MEDICAID</b>	<b>CHPLUS</b>
Number of Plans	11	10	18	19
Statewide Average	63	52	67	65
Range of Scores	21, 74	47, 62	49, 82	51, 83
25th Percentile	54	52	61	57
Median	65	56	68	64
75th Percentile	69	62	71	73

## COMMERCIAL HMO

Measure	2009	2010	2011
Follow-Up Care for Children Prescribed ADHD Medication:Continuation Phase	44	47	47
Follow-Up Care for Children Prescribed ADHD Medication:Initiation Phase	41	43	44
Assessment, Counseling, or Education:Alcohol and Other Drug Use	52	57	57
Assessment, Counseling, or Education:Depression	33	44	46
Assessment, Counseling, or Education:Preventive Actions Associated with Sexual Activity	48	54	55
Assessment, Counseling, or Education:Tobacco Use	53	58	59
Childhood Immunization Status (Combo 3:4-3-1-3-3-1-4)	68	Rotated	71
Lead Testing	78	Rotated	82
Appropriate Testing for Pharyngitis	87	87	88
Appropriate Treatment for Upper Respiratory Infection (URI)	86	88	89
Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	82	82	85
Adolescent Well-Care Visits	59	59	60
Well-Child & Preventive Care Visits in First 15 Months of Life (5+ Visits)	88	89	93
Weight Assessment- BMI Percentile	55	62	65
Counseling for Nutrition	66	66	70
Counseling for Physical Activity	57	59	62

## COMMERCIAL PPO

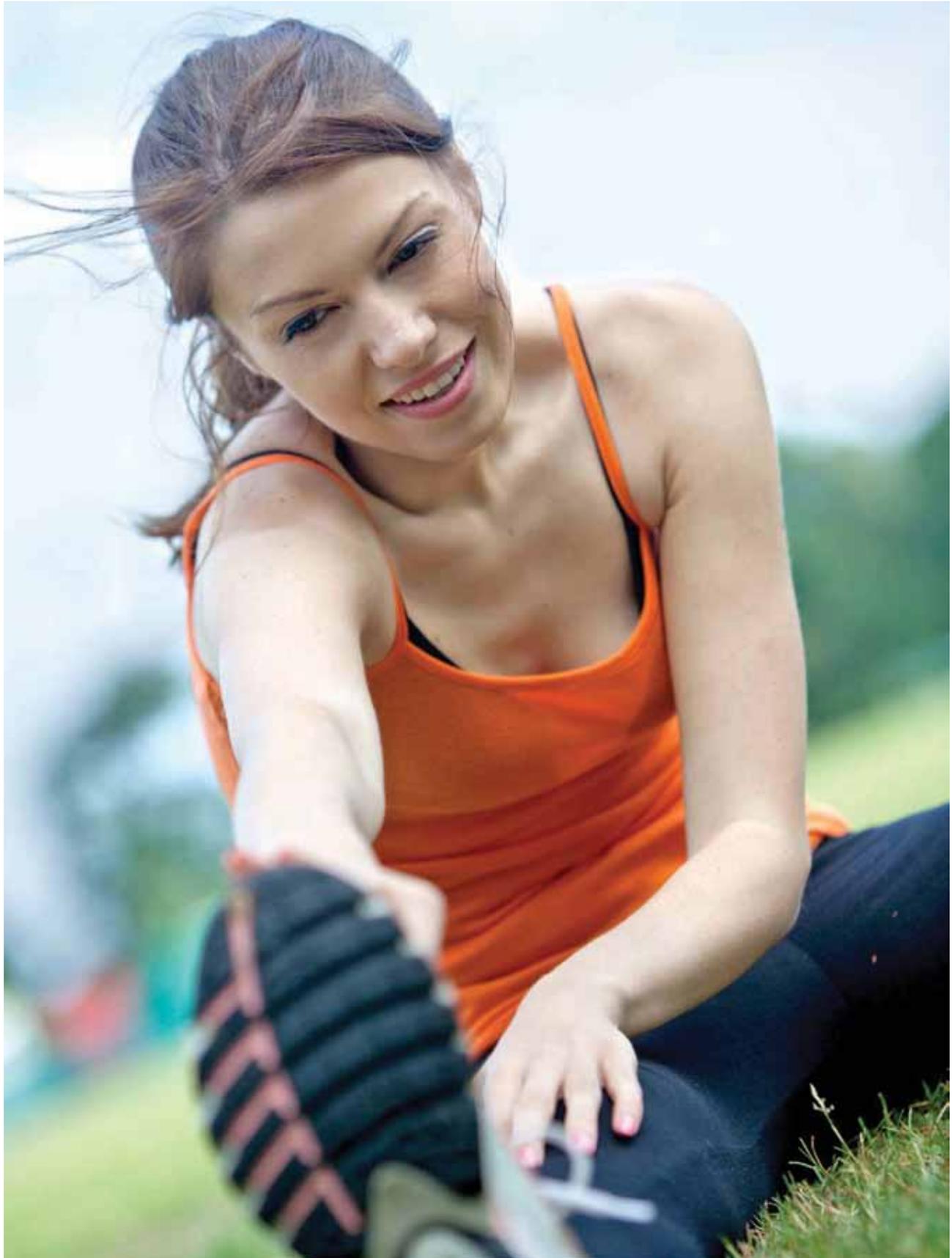
Measure	2009	2010	2011
Follow-Up Care for Children Prescribed ADHD Medication:Continuation Phase	44	46	50
Follow-Up Care for Children Prescribed ADHD Medication:Initiation Phase	40	42	44
Assessment, Counseling, or Education:Alcohol and Other Drug Use	38	40	49
Assessment, Counseling, or Education:Depression	19	30	37
Assessment, Counseling, or Education:Preventive Actions Associated with Sexual Activity	34	38	47
Assessment, Counseling, or Education:Tobacco Use	36	40	48
Childhood Immunization Status (Combo 3:4-3-1-3-3-1-4)	64	Rotated	64
Lead Testing	59	Rotated	76
Appropriate Testing for Pharyngitis	86	86	87
Appropriate Treatment for Upper Respiratory Infection (URI)	86	87	88
Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	77	79	80
Adolescent Well-Care Visits	49	52	53
Well-Child & Preventive Care Visits in First 15 Months of Life (5+ Visits)	85	90	90
Weight Assessment- BMI Percentile	35	44	55
Counseling for Nutrition	51	55	61
Counseling for Physical Activity	41	48	53

## MEDICAID

Measure	2009	2010	2011
Follow-Up Care for Children Prescribed ADHD Medication:Continuation Phase	62	64	66
Follow-Up Care for Children Prescribed ADHD Medication:Initiation Phase	56	58	59
Assessment, Counseling, or Education:Alcohol and Other Drug Use	52	60	67
Assessment, Counseling, or Education:Depression	43	52	59
Assessment, Counseling, or Education:Preventive Actions Associated with Sexual Activity	51	60	66
Assessment, Counseling, or Education:Tobacco Use	54	64	70
Annual Dental Visit(Ages 2-18)	52	54	55
Childhood Immunization Status (Combo 3:4-3-1-3-3-1-4)	73	Rotated	74
Lead Testing	90	Rotated	89
Appropriate Testing for Pharyngitis	83	84	86
Appropriate Treatment for Upper Respiratory Infection (URI)	90	91	92
Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	79	80	83
Adolescent Well-Care Visits	55	56	59
Well-Child & Preventive Care Visits in First 15 Months of Life (5+ Visits)	72	77	83
Weight Assessment- BMI Percentile	51	65	73
Counseling for Nutrition	61	71	77
Counseling for Physical Activity	48	58	66

## CHILD HEALTH PLUS

Measure	2009	2010	2011
Follow-Up Care for Children Prescribed ADHD Medication:Continuation Phase	53	58	59
Follow-Up Care for Children Prescribed ADHD Medication:Initiation Phase	49	53	51
Assessment, Counseling, or Education:Alcohol and Other Drug Use	56	62	66
Assessment, Counseling, or Education:Depression	45	49	55
Assessment, Counseling, or Education:Preventive Actions Associated with Sexual Activity	54	59	64
Assessment, Counseling, or Education:Tobacco Use	59	63	67
Annual Dental Visit(Ages 2-18)	63	63	64
Childhood Immunization Status (Combo 3:4-3-1-3-3-1-4)	66	Rotated	72
Lead Testing	82	Rotated	83
Appropriate Testing for Pharyngitis	85	87	88
Appropriate Treatment for Upper Respiratory Infection (URI)	86	87	88
Well-Child & Preventive Care Visits in 3rd, 4th, 5th & 6th Year of Life	81	82	84
Adolescent Well-Care Visits	64	66	68
Well-Child & Preventive Care Visits in First 15 Months of Life (5+ Visits)	82	85	87
Weight Assessment- BMI Percentile	55	64	70
Counseling for Nutrition	65	70	74
Counseling for Physical Activity	56	61	67



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

It is important for pregnant women to obtain early and regular prenatal care to increase the likelihood of healthy outcomes for themselves and their babies. All new mothers need post-partum care to ensure their bodies are healing and to provide appropriate services, including on-going family planning.

Risk-adjusted Low-Birthweight (LBW), Prenatal Care in the First Trimester, Late Pre-Term Deliveries, and Risk-Adjusted Primary Cesarean Sections are calculated by the NYSDOH using birth data submitted by health plans and from the Department’s Vital Statistics file. These measures reflect results of perinatal care for women who had a live birth during 2010. Because of differences in the Vital Statistics birth files of New York City and the rest of the state, statewide comparisons cannot be made; separate results for New York City and Rest of State are presented in this report. For more information about the process used to match the plan birth file to the Vital Statistics files, or about the risk-adjustment methodologies used here, please refer to the Technical Notes in Section Ten.

Measure	Description (Type of Insurance)
<b>Breast Cancer Screening</b>	The percentage of women between the ages of 40 and 69 who had a mammogram during the measurement year or the year prior. (CO, PPO, MA)
<b>Cervical Cancer Screening</b>	The percentage of women between the ages of 24 and 64 who had a Pap test, within the measurement year. (CO, PPO, MA)
<b>Chlamydia Screening</b>	The percentage of sexually active young women who had at least one test for Chlamydia during the measurement year. The measure is reported separately for ages 16 through 20 and 21 through 24. (CO, PPO, MA)
<b>Timeliness of Prenatal Care</b>	The percentage of women who gave birth in the last year who had a prenatal care visit in their first trimester or within 42 days of enrollment in their health plan. This measure was not collected in 2011; 2010 data are presented in this report. (CO, PPO, MA)
<b>Postpartum Care</b>	The percentage of women who gave birth in the last year who had a postpartum care visit between 21 and 56 days after they gave birth. This measure was not collected in 2011; 2010 data are presented in this report. (CO, PPO, MA)
<b>Frequency of Ongoing Prenatal Care</b>	The percentage of women who received 81 percent or more of the expected number of prenatal care visits, adjusted for gestational age and month the member enrolled in the health plan. This measure was not collected in 2011; 2010 data are presented in this report. (MA)

Health Plan	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)	Timeliness of Prenatal Care	Postpartum Care
Aetna	65▼	75▼	58	66▲	92	69-
CDPHP	76▲	80▲	55▼	65▲	97▲	87▲
Easy Choice Health Plan of NY	57▼	67▼	45	36▼	86▼	62▼
Empire	64▼	70▼	61▲	65▲	93	81▲
Excellus BlueCross BlueShield	76▲	82▲	44▼	51▼	93	89▲
HIP (EmblemHealth)	74▲	80▲	74▲	74▲	89	77
HealthNow New York Inc.	72▲	79▲	53▼	60▼	88	82▲
Independent Health	73▲	79▲	53▼	57▼	96▲	86▲
MVP	70	77▼	50▼	57▼	94	82▲
Oxford	65▼	79▲	54▼	61	93	65▼
Univera Healthcare	70	76▼	51▼	56▼	89	85▲
<b>Statewide</b>	<b>70</b>	<b>78</b>	<b>57</b>	<b>62</b>	<b>91</b>	<b>76</b>
<b>National</b>	<b>71</b>	<b>77</b>	<b>42</b>	<b>48</b>	<b>91</b>	<b>81</b>

### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

Health Plan	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	66▼	78▲	54▲	61▲	91▲	73▲
CDPHP Universal Benefits, Inc.	72▲	75▼	53	64▲	96▲	92▲
Connecticut General Life Insurance Company – NY	67▼	79▲	54▲	64▲	92▲	79▲
Empire HealthChoice HMO, Inc.	65▼	74▼	52	58▼	94▲	84▲
Excellus BlueCross BlueShield	72▲	79▲	43▼	51▼	86	88▲
GHI (EmblemHealth)	62▼	70▼	53	64▲	77▼	62▼
HIP (EmblemHealth)	66▼	73▼	54	64	77▼	67
MVP Preferred PPO	69▲	78▲	49▼	59	51▼	46▼
Oxford Health Insurance Company, Inc. - New York	69▲	83▲	49▼	59	68▼	45▼
UnitedHealthcare Insurance Company of New York, Inc.	69▲	78▲	58▲	65▲	73▼	42▼
<b>Statewide</b>	<b>68</b>	<b>77</b>	<b>52</b>	<b>60</b>	<b>84</b>	<b>68</b>
<b>National</b>	<b>67</b>	<b>74</b>	<b>40</b>	<b>45</b>	<b>76</b>	<b>66</b>

### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

Health Plan	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-24)
Affinity Health Plan	66▼	69▼	72▲	71
Amerigroup New York	68	67▼	74▲	73
CDPHP	58▼	65▼	64▼	68▼
Excellus BlueCross BlueShield	63▼	71	63▼	67▼
Fidelis Care New York	67	71	67▼	69▼
HIP (EmblemHealth)	67	72▲	73▲	75▲
Health Plus	70▲	74▲	74▲	75▲
HealthNow New York Inc.	54▼	70▼	65▼	66▼
Healthfirst PHSP, Inc.	70▲	72▲	72▲	73▲
Hudson Health Plan	62▼	71	68▼	73
Independent Health's MediSource	50▼	67▼	70	73
MVP	49▼	66▼	68	73
MetroPlus Health Plan	73▲	75▲	75▲	77▲
Neighborhood Health Providers	69▲	70▼	73▲	77▲
Total Care	64▼	69▼	59▼	63▼
UnitedHealthcare Community Plan	63▼	70▼	63▼	68▼
Univera Community Health	55▼	71	67	68▼
WellCare of New York	69▲	69▼	73▲	71
<b>Statewide</b>	<b>67</b>	<b>71</b>	<b>70</b>	<b>72</b>
<b>National</b>	<b>50</b>	<b>67</b>	<b>55</b>	<b>63</b>

### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

Health Plan	Timeliness of Prenatal Care	Postpartum Care	Frequency of Ongoing Prenatal Care
Affinity Health Plan	95▲	74	88▲
Amerigroup New York	79▼	63▼	58▼
CDPHP	90	69	82▲
Excelsus BlueCross BlueShield	88	71	60▼
Fidelis Care New York	93	73	84▲
HIP (EmblemHealth)	91	76	48▼
Health Plus	91	76	77
HealthNow New York Inc.	87	72	69▼
Healthfirst PHSP, Inc.	86▼	65▼	66▼
Hudson Health Plan	94▲	77▲	89▲
Independent Health's MediSource	90	63▼	68▼
MVP	92	72	81▲
MetroPlus Health Plan	94▲	76	86▲
Neighborhood Health Providers	92	75	79▲
Total Care	87▼	70	79▲
UnitedHealthcare Community Plan	83▼	78▲	51▼
Univera Community Health	86▼	61▼	56▼
WellCare of New York	73▼	52▼	51▼
<b>Statewide</b>	<b>90</b>	<b>73</b>	<b>74</b>
<b>National</b>	<b>84</b>	<b>64</b>	<b>61</b>

### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

NEW YORK STATE SPECIFIC PERINATAL HEALTH

Measure	Description (Type of Insurance)
<b>Prenatal Care in the First Trimester</b>	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. (CO, PPO, MA)
<b>Risk-Adjusted Low Birthweight (LBW)</b>	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. A low rate is desirable for this measure. (CO, PPO, MA)
<b>Risk-Adjusted Primary Cesarean Delivery</b>	The percentage of live infants born by cesarean delivery to women, continuously enrolled for 10 or more months, who had no prior cesarean deliveries. A low rate is desirable for this measure. (CO, PPO, MA)
<b>Vaginal Birth After Cesarean Delivery (VBAC)</b>	The percentage of women continuously enrolled for 10 or more months who delivered a live birth vaginally after having had a prior cesarean delivery. (CO, PPO, MA)

## NYC MEMBERSHIP

Health Plan	Perinatal Health			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight*	Risk-Adjusted Primary Cesarean Delivery*	Vaginal Birth After Cesarean (VBAC)
Aetna	84	7.2	28	13.4
Easy Choice Health Plan of NY	81	6.6	23	—
Empire	83	6.4	29	17.5
HIP (EmblemHealth)	83	6.2	27	8.8▼
Health Net of New York, Inc.	83	3.9	25	10.8
Oxford	86▲	5.7	24	17.2
NYC	84	6.0	26	13.4
Statewide	85	5.0	26	9.0

## REST OF STATE MEMBERSHIP

Health Plan	Perinatal Health			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight*	Risk-Adjusted Primary Cesarean Delivery*	Vaginal Birth After Cesarean (VBAC)
Aetna	87	2.4▲	28	5.3
CDPHP	86	3.7	22▲	9.6
Empire	87	4.1	28	3.1▼
Excellus BlueCross BlueShield	90▲	4.0	22▲	12.4▲
HIP (EmblemHealth)	85	5.5	30▼	4.8
Health Net of New York, Inc.	86	3.7	27	7.3
HealthNow New York Inc.	82▼	4.4	26	5.5
Independent Health	82▼	5.1	26	7.2
MVP	88▲	4.2	25	7.7
Oxford	87	5.2	29▼	7.0
Univera Healthcare	79▼	4.3	24	6.6
ROS	86	4.4	26	6.9
Statewide	85	5.0	26	9.0

\* A low rate is desirable for this measure

### LEGEND

▲ Significantly better than the regional average

▼ Significantly worse than the regional average

— Sample size too small to report

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

### NYC MEMBERSHIP

Health Plan	Perinatal Health			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight*	Risk-Adjusted Primary Cesarean Delivery*	Vaginal Birth After Cesarean (VBAC)
Aetna Life Insurance Company – New York	85	5.5	27	10.0
Connecticut General Life Insurance Company – NY	85	4.3	25	7.5
Empire HealthChoice HMO, Inc.	83▼	6.1	26	11.8
GHI (EmblemHealth)	85	5.6	26	11.0
HIP (EmblemHealth)	79	4.0	38	—
Health Net of New York, Inc.	87	4.4	22	12.9
Oxford Health Insurance Company, Inc. – New York	86	5.4	23	16.6▲
UnitedHealthcare Insurance Company of New York, Inc.	87▲	5.2	25	9.8
<b>NYC</b>	<b>85</b>	<b>5.5</b>	<b>25</b>	<b>11.4</b>
<b>Statewide</b>	<b>87</b>	<b>5.0</b>	<b>26</b>	<b>8.1</b>

### REST OF STATE MEMBERSHIP

Health Plan	Perinatal Health			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight*	Risk-Adjusted Primary Cesarean Delivery*	Vaginal Birth After Cesarean (VBAC)
Aetna Life Insurance Company – New York	88	4.5	28	4.8
CDPHP Universal Benefits, Inc.	86	4.9	22	11.4
Connecticut General Life Insurance Company – NY	87	7.1	37▼	2.6
Empire HealthChoice HMO, Inc.	88	3.8▲	28	6.6
Excellus BlueCross BlueShield	89	4.3	24▲	7.2
GHI (EmblemHealth)	89	5.2	28	3.0▼
HIP (EmblemHealth)	85	7.4	36	0.0▼
Health Net of New York, Inc.	92	7.6	30	10.4
MVP Preferred PPO	89	2.9	23	11.9
Oxford Health Insurance Company, Inc. – New York	92▲	6.4▼	29	6.9
UnitedHealthcare Insurance Company of New York, Inc.	89	5.0	28	5.8
<b>ROS</b>	<b>89</b>	<b>4.5</b>	<b>27</b>	<b>6.3</b>
<b>Statewide</b>	<b>87</b>	<b>5.0</b>	<b>26</b>	<b>8.1</b>

\* A low rate is desirable for this measure

#### LEGEND

▲ Significantly better than the regional average

▼ Significantly worse than the regional average

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

### NYC MEMBERSHIP

Health Plan	Perinatal Health			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight*	Risk-Adjusted Primary Cesarean Delivery*	Vaginal Birth After Cesarean (VBAC)
Affinity Health Plan	66▼	6.7	16	12.5
Amerigroup New York	72	6.2	18	11.9
Fidelis Care New York	72	6.4	17	17.7
HIP (EmblemHealth)	73	6.1	17	17.4
Health Plus	76▲	5.9	19▼	10.3▼
Healthfirst PHSP, Inc.	69▼	6.2	16	15.0
MetroPlus Health Plan	63▼	7.1	15▲	15.4
Neighborhood Health Providers	72	8.9▼	18	6.8▼
UnitedHealthcare Community Plan	81▲	5.8	15	41.8▲
WellCare of New York	73	6.2	20	9.4
NYC	72	6.6	17	15.9
Statewide	71	7.0	17	13.7

\* A low rate is desirable for this measure

#### LEGEND

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

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

### REST OF STATE MEMBERSHIP

Health Plan	Perinatal Health			
	Prenatal Care in the First Trimester	Risk-Adjusted Low Birthweight*	Risk-Adjusted Primary Cesarean Delivery*	Vaginal Birth After Cesarean (VBAC)
Affinity Health Plan	63 ▼	8.1	18	11.2
Amerigroup New York	—	—	—	—
CDPHP	72	7.1	15	9.9
Excelsus BlueCross BlueShield	76▲	7.3	16	11.2
Fidelis Care New York	68▼	7.5	15	11.8
HIP (EmblemHealth)	77▲	11.6▼	22▼	5.3▼
Health Plus	71	8.5	14	—
HealthNow New York Inc.	71	7.4	15	3.7▼
Healthfirst PHSP, Inc.	68	10.2	21	9.9
Hudson Health Plan	66▼	8.1	19	9.0
Independent Health's MediSource	71	8.3	17	7.8
MVP	71	7.1	14	19.7
Neighborhood Health Providers	67	13.9▼	18	6.5
Total Care	68	7.6	14	11.5
UnitedHealthcare Community Plan	75▲	8.5	19	9.6
Univera Community Health	73	6.2	17	11.8
WellCare of New York	61	7.6	16	—
ROS	70	7.8	16	10.5
Statewide	71	7.0	17	13.7

\* A low rate is desirable for this measure

#### LEGEND

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

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

## COMMERCIAL HMO

Measure	2009	2010	2011
Cervical Cancer Screening	79	78	78
Chlamydia Screening (Ages 16-20)	53	55	57
Chlamydia Screening (Ages 21-24)	59	60	62
Breast Cancer Screening	71	70	70
Risk-Adjusted Low Birthweight (LBW)*	5	5	NA
Risk-Adjusted Primary Cesarean Delivery*	26	26	NA
Prenatal Care in the First Trimester	86	85	NA
Vaginal Birth After Cesarean Section (VBAC)	9	9	NA

## COMMERCIAL PPO

Measure	2009	2010	2011
Cervical Cancer Screening	77	77	77
Chlamydia Screening (Ages 16-20)	49	50	52
Chlamydia Screening (Ages 21-24)	55	56	60
Breast Cancer Screening	67	68	68
Risk-Adjusted Low Birthweight (LBW)*	5	5	NA
Risk-Adjusted Primary Cesarean Delivery*	27	26	NA
Prenatal Care in the First Trimester	88	87	NA
Vaginal Birth After Cesarean Section (VBAC)	8	8	NA

NA Data is not available for 2011

\* A low rate is desirable for this measure

## MEDICAID

Measure	2009	2010	2011
Cervical Cancer Screening	NA	72	71
Chlamydia Screening (Ages 16-20)	65	67	70
Chlamydia Screening (Ages 21-24)	69	69	72
Breast Cancer Screening	68	68	67
Risk-Adjusted Low Birthweight (LBW)*	7	7	NA
Risk-Adjusted Primary Cesarean Delivery*	16	17	NA
Prenatal Care in the First Trimester	71	71	NA
Vaginal Birth After Cesarean Section (VBAC)	13	14	NA

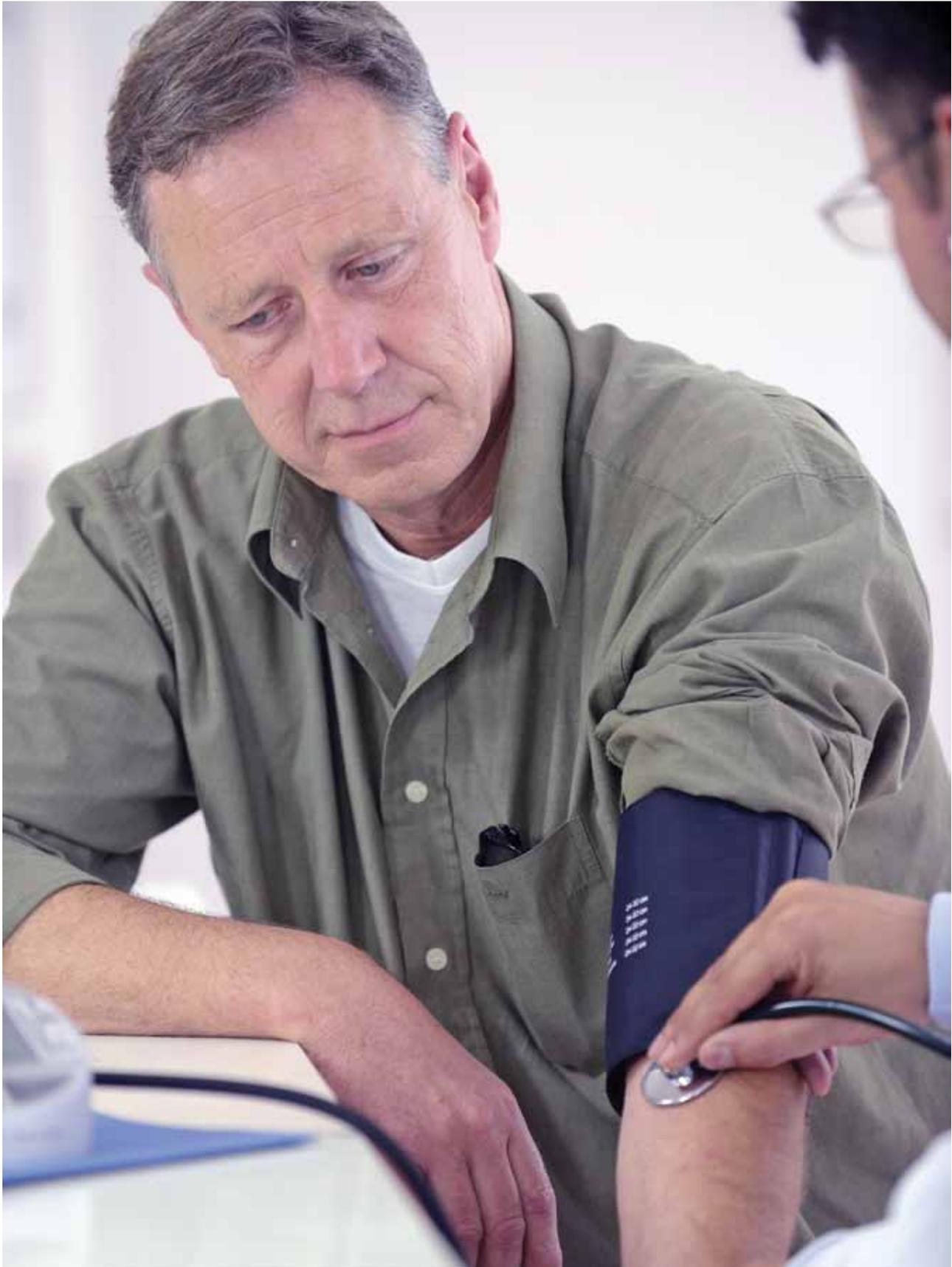
NA Data is not available for 2011

\* A low rate is desirable for this measure

### Looking for more information on women's health services?

The following measures are published in the 2012 Managed Care Plan Access and Utilization Report at the link:  
<http://www.health.ny.gov>

- Frequency of Abdominal Hysterectomy
- Frequency of Vaginal Hysterectomy
- Frequency of Lumpectomy
- Frequency of Mastectomy
- Inpatient Discharges and Average Length of Stay (Maternity)



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

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

Encouraging healthful choices is an important role for providers, and the medical assistance with smoking cessation measures are indicative of how often these interactions occur. The CAHPS survey of members' experiences with health care provides the information for both the smoking cessation measures and an estimate of the number of members who receive influenza vaccinations. In addition to receiving annual flu vaccinations, a number of other preventive services are available to managed care members. Data collected from health plans includes

the percent of members who receive screening for colon cancer and the percentage that are screened for obesity by having their body mass index (BMI) calculated. The number of young adults enrolled in Medicaid who received routine dental care is presented as well.

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

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

## MANAGING ACUTE ILLNESS

Measure	Description (Type of Insurance)
<b>Use of Imaging Studies for Low Back Pain</b>	The percentage of members with a primary diagnosis of low back pain who did NOT have an imaging study (X-ray, MRI, CT scan). A higher score indicates more appropriate treatment of people with low back pain. (CO, PPO, MA)
<b>Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis</b>	The percentage of adults, ages 18 to 64, with acute bronchitis who did NOT receive a prescription for antibiotics. A higher score indicates more appropriate treatment of people with acute bronchitis. (CO, PPO, MA)
<b>Medical Assistance with Smoking Cessation</b>	The percentage of members, 18 years and older, who are current smokers or tobacco users and who received medical information about smoking or tobacco use cessation from a health care provider. This measure is collected as part of the CAHPS survey. (CO, PPO, MA)
<b>1) Advising Smokers to Quit</b>	The percentage of eligible adults who were advised by their healthcare provider to quit smoking or using tobacco products.
<b>2) Discussion of Smoking Cessation Medications</b>	The percentage of eligible adults who discussed or were recommended cessation medications such as nicotine gum, patch or prescription medication.
<b>3) Discussion of Smoking Cessation Strategies</b>	The percentage of eligible adults who discussed or were provided smoking cessation methods or strategies other than medications.

MANAGING ACUTE ILLNESS

Health Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis	Medical Assistance with Smoking Cessation		
			Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Aetna	84▲	24▲	74	44▼	41
CDPHP	77	16▼	88▲	70▲	64▲
Easy Choice Health Plan of NY	77	46▲	70▼	37▼	31▼
Empire	73▼	30▲	84	53	49
Excellus BlueCross BlueShield	81▲	16▼	86	76▲	56
HIP (EmblemHealth)	82▲	23	86	60	52
HealthNow New York Inc.	82▲	16▼	86	66	53
Independent Health	83▲	15▼	82	54	46
MVP	72▼	16▼	78	71▲	62▲
Oxford	76▼	27▲	80	51	42
Univera Healthcare	82▲	19	80	58	52
Statewide	79	21	82	60	51
National	74	24	78	53	48

LEGEND

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

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

### MANAGING ACUTE ILLNESS

Health Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis	Medical Assistance with Smoking Cessation		
			Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Aetna Life Insurance Company – New York	74	25	76	46	41
CDPHP Universal Benefits, Inc.	74	17▼	75	60	54
Connecticut General Life Insurance Company – NY	76▲	25	77	48	47
Empire HealthChoice HMO, Inc.	72▼	29▲	69	41	28-
Excellus BlueCross BlueShield	80▲	20▼	71	57	50
GHI (EmblemHealth)	73▼	31▲	84	54	47
HIP (EmblemHealth)	70	24	76	50	46
MVP Preferred PPO	77▲	16▼	81	52	41
Oxford Health Insurance Company, Inc. – New York	74	26▲	78	36▼	29▼
UnitedHealthcare Insurance Company of New York, Inc.	77▲	24	—	—	—
<b>Statewide</b>	<b>75</b>	<b>24</b>	<b>76</b>	<b>51</b>	<b>45</b>
<b>National</b>	<b>74</b>	<b>22</b>	<b>72</b>	<b>47</b>	<b>40</b>

#### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

— Sample size too small to report

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

The CAHPS rates presented here reflect only members residing in New York.

These rates may differ from other publications of CAHPS data.

### MANAGING ACUTE ILLNESS

Health Plan	Use of Imaging Studies for Low Back Pain	Avoidance of Antibiotic Therapy in Adults with Acute Bronchitis	Medical Assistance with Smoking Cessation		
			Advising Smokers to Quit	Discussing Smoking Cessation Medications	Discussing Smoking Cessation Strategies
Affinity Health Plan	78	28	71	53	40
Amerigroup New York	81▲	28	71	50	40
CDPHP	73▼	19▼	84▲	63▲	55▲
Excellus BlueCross BlueShield	77▼	32▲	79	55	48
Fidelis Care New York	77▼	25▼	75	55	47
HIP (EmblemHealth)	80▲	33▲	76	51	41
Health Plus	77▼	29	76	51	34▼
HealthNow New York Inc.	75▼	18▼	77	53	44
Healthfirst PHSP, Inc.	81▲	31▲	77	60	54
Hudson Health Plan	72▼	22▼	74	48	45
Independent Health's MediSource	80	16▼	81	60	49
MVP	77	15▼	81	59	55▲
MetroPlus Health Plan	82▲	29	84	64	62▲
Neighborhood Health Providers	80▲	19▼	78	59	47
Total Care	73▼	18▼	75	55	42
UnitedHealthcare Community Plan	81▲	34▲	67▼	40▼	42
Univera Community Health	78	22▼	80	62	54
WellCare of New York	84▲	37▲	78	61	51
<b>Statewide</b>	<b>79</b>	<b>28</b>	<b>78</b>	<b>56</b>	<b>48</b>
<b>National</b>	<b>76</b>	<b>24</b>	<b>75</b>	<b>44</b>	<b>40</b>

#### LEGEND

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

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

MANAGING PREVENTIVE CARE

Measure	Description (Type of Insurance Product)
<b>Colon Cancer Screening</b>	The percentage of adults, ages 50 to 75 years, who had appropriate screening for colorectal cancer. (CO, PPO, MA)
<b>Annual Dental Visit</b>	The percentage of young adults ages 19 through 21 years, who had at least one dental visit within the last year. Some Medicaid plans do not include dental care in the benefit package. When a Medicaid plan does not offer dental care as part of its benefit package, enrollees have access to dental services through fee-for-service. Medicaid fee-for-service data is not represented in this report. (MA)
<b>Adult BMI Assessment</b>	The percentage of members, 18 to 74 years of age with an outpatient visit, who had their body mass index (BMI) documented during the measurement year or the year prior to the measurement year. This measure was not collected in 2011; 2010 data are presented in this report. (CO, PPO, MA)
<b>Flu Shot for Adults</b>	The percentage of members, ages 50 to 64, 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 plans. Medicaid results are based on a single year. (CO, PPO, MA)

### MANAGING PREVENTIVE CARE

Health Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults
Aetna	61	29▼	46
CDPHP	72▲	76▲	57▲
Easy Choice Health Plan of NY	36▼	41▼	37▼
Empire	63	50▼	44▼
Excellus BlueCross BlueShield	70	51	63▲
HIP (EmblemHealth)	66	69▲	43▼
HealthNow New York Inc.	69	69▲	56
Independent Health	66	74▲	58▲
MVP	68	65▲	53
Oxford	60▼	26▼	48
Univera Healthcare	65	58	53
<b>Statewide</b>	<b>65</b>	<b>56</b>	<b>51</b>
<b>National</b>	<b>62</b>	<b>41</b>	<b>53</b>

#### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

The CAHPS rates presented here reflect only members residing in New York.

These rates may differ from other publications of CAHPS data.

### MANAGING PREVENTIVE CARE

Health Plan	Colon Cancer Screening	Adult BMI Assessment	Flu Shot for Adults
Aetna Life Insurance Company – New York	64▲	26▼	55
CDPHP Universal Benefits, Inc.	71▲	72▲	52
Connecticut General Life Insurance Company – NY	53	NV	54
Empire HealthChoice HMO, Inc.	47▼	41	48
Excellus BlueCross BlueShield	64▲	46▲	57
GHI (EmblemHealth)	50▼	36	44▼
HIP (EmblemHealth)	55	39	47
MVP Preferred PPO	47▼	NV	57
Oxford Health Insurance Company, Inc. – New York	65▲	NV	53
UnitedHealthcare Insurance Company of New York, Inc.	62▲	NV	46
<b>Statewide</b>	<b>57</b>	<b>39</b>	<b>52</b>
<b>National</b>	<b>55</b>	<b>12</b>	<b>51</b>

#### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

NV Plan submitted invalid data

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

The CAHPS rates presented here reflect only members residing in New York.

These rates may differ from other publications of CAHPS data.

### MANAGING PREVENTIVE CARE

Health Plan	Colon Cancer Screening	Adult BMI Assessment	Annual Dental Visit (Ages 19-21)	Flu Shot for Adults
Affinity Health Plan	53	72	39▼	37
Amerigroup New York	52▼	54▼	39▼	36
CDPHP	49▼	70	NA	38
Excellus BlueCross BlueShield	49▼	49▼	38▼	34
Fidelis Care New York	55	72	50▲	35
HIP (EmblemHealth)	62▲	73	40▼	39
Health Plus	58	75▲	41▼	35
HealthNow New York Inc.	50▼	70	NA	44
Healthfirst PHSP, Inc.	60	70	46▲	42
Hudson Health Plan	50▼	74▲	42	52▲
Independent Health's MediSource	46▼	58▼	44	45
MVP	46▼	56▼	40	43
MetroPlus Health Plan	58	79▲	45	51▲
Neighborhood Health Providers	61	72	41▼	45
Total Care	41▼	50▼	44	33▼
UnitedHealthcare Community Plan	54	69	41▼	33
Univera Community Health	43▼	60▼	38	35
WellCare of New York	55	55▼	30▼	47
<b>Statewide</b>	<b>56</b>	<b>70</b>	<b>43</b>	<b>40</b>
<b>National</b>	<b>*</b>	<b>42</b>	<b>*</b>	<b>*</b>

#### LEGEND

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

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

## MANAGING CARDIOVASCULAR CONDITIONS

Measure	Description (Type of Insurance)
<b>Controlling High Blood Pressure</b>	The percentage of members, ages 18 to 85 years, who have hypertension and whose blood pressure was adequately controlled (below 140/90). This measure was not collected in 2011; 2010 data are presented in this report. (CO, PPO, MA)
<b>Cholesterol Management for Patients with Cardiovascular Conditions</b>	The percentage of members, ages 18 to 75 years, with a cardiovascular condition, who had at least one cholesterol screening test and whose cholesterol level was below the recommended level (100 mg/dL) during the measurement year. (CO, PPO, MA)
<b>Persistence of Beta-Blocker Treatment</b>	The percentage of members, age 18 years and older, who were hospitalized after a heart attack and received persistent beta-blocker treatment for six months after discharge. (CO, PPO)

## MANAGING CARDIOVASCULAR CONDITIONS

Health Plan	Controlling High Blood Pressure	Cholesterol Management After Cardiovascular Event		Persistence of Beta Blocker Treatment
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)	
Aetna	57▼	87	49▼	78
CDPHP	72▲	90	64	93▲
Easy Choice Health Plan of NY	41▼	86	20▼	—
Empire	72▲	91	64	72▼
Excellus BlueCross BlueShield	70	90	72▲	82
HIP (EmblemHealth)	59▼	90	53▼	87
HealthNow New York Inc.	67	91	63	86
Independent Health	68	94▲	66	92▲
MVP	74▲	88	67▲	87
Oxford	52▼	88	52▼	78▼
Univera Healthcare	63	90	66	89
Statewide	66	90	62	84
National	63	88	60	81

## LEGEND

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

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

MANAGING CARDIOVASCULAR CONDITIONS

Health Plan	Controlling High Blood Pressure	Cholesterol Management After Cardiovascular Event		Persistence of Beta Blocker Treatment
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)	
Aetna Life Insurance Company – New York	45▼	87▲	44	76
CDPHP Universal Benefits, Inc.	75▲	95▲	66▲	86
Connecticut General Life Insurance Company – NY	56	87▲	54▲	79
Empire HealthChoice HMO, Inc.	67▲	86▲	NV	76
Excellus BlueCross BlueShield	63▲	91▲	60▲	75
GHI (EmblemHealth)	47▼	90▲	46	79
HIP (EmblemHealth)	51▼	91▲	47	—
MVP Preferred PPO	NV	84	NV	83
Oxford Health Insurance Company, Inc. – New York	NV	89▲	50	80
UnitedHealthcare Insurance Company of New York, Inc.	NV	76▼	43	73
Statewide	59	82	47	78
National	57	84	50	77

LEGEND

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

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

MANAGING CARDIOVASCULAR CONDITIONS

Health Plan	Controlling High Blood Pressure	Cholesterol Management After Cardiovascular Event	
		Cholesterol Screening Test	Cholesterol Level Controlled (<100 mg/dL)
Affinity Health Plan	74▲	89	60▲
Amerigroup New York	50▼	90	50
CDPHP	67	83▼	50
Excellus BlueCross BlueShield	60▼	85▼	55
Fidelis Care New York	70	90	54
HIP (EmblemHealth)	69	91	57▲
Health Plus	70	91	55
HealthNow New York Inc.	68	88	57
Healthfirst PHSP, Inc.	66	90	54
Hudson Health Plan	73▲	88	61▲
Independent Health's MediSource	59▼	78▼	45▼
MVP	59▼	85	53
MetroPlus Health Plan	68	93▲	56
Neighborhood Health Providers	69	86▼	52
Total Care	68	89	58
UnitedHealthcare Community Plan	67	94▲	37▼
Univera Community Health	57▼	84▼	47
WellCare of New York	55▼	93▲	49
Statewide	67	90	52
National	56	82	42

LEGEND

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

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

**MANAGING RESPIRATORY CONDITIONS**

Measure	Description (Type of Insurance Product)
<b>Use of Appropriate Medications for People with Asthma (Ages 19-64)</b>	The percentage of members, ages 19 to 64 years, with persistent asthma who received at least one appropriate medication to control their condition during the measurement year. (CO, PPO, MA)
<b>Appropriate Asthma Medication – 3+ Controllers (Ages 19-64)</b>	The percentage of members, ages 19 to 64 years, with persistent asthma who had three or more controller medication dispensing events in the last year. (CO, PPO, MA)
<b>Use of Spirometry Testing in the Assessment and Diagnosis of COPD</b>	The percentage of members 40 years of age and older with a new diagnosis of COPD or newly active COPD, who received spirometry testing to confirm the diagnosis. (CO, PPO, MA)
<p><b>Pharmacotherapy Management of COPD Exacerbation</b></p> <p><b>1) Corticosteroid Rate</b></p> <p><b>2) Bronchodilator Rate</b></p>	<p>The percentage of COPD exacerbation events for members 40 years of age 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. (CO, PPO, MA)</p> <p>The percentage of events when the member was prescribed a systemic corticosteroid within 14 days of the event.</p> <p>The percentage of events when the member was prescribed a bronchodilator within 30 days of the event.</p>

MANAGING RESPIRATORY CONDITIONS

Health Plan	Use of Appropriate Medications for People with Asthma (Ages 19-64)	Appropriate Asthma Medications – 3+ Controllers (Ages 19-64)	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
				Corticosteroids	Bronchodilators
Aetna	88▼	79▼	61▲	65	80
CDPHP	92	83	44▼	75	80
Easy Choice Health Plan of NY	90	77	58	—	—
Empire	90	82	60▲	72	80
Excellus BlueCross BlueShield	93▲	87▲	46▼	68	77
HIP (EmblemHealth)	95▲	82	51	74	83
HealthNow New York Inc.	89	82	49▼	73	80
Independent Health	91	82	51	71	77
MVP	91	84	40▼	75	75
Oxford	89▼	79▼	59▲	70	80
Univera Healthcare	93	83	54	68	79
<b>Statewide</b>	<b>91</b>	<b>82</b>	<b>53</b>	<b>72</b>	<b>79</b>
<b>National</b>	<b>*</b>	<b>*</b>	<b>43</b>	<b>71</b>	<b>80</b>

LEGEND

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

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

MANAGING RESPIRATORY CONDITIONS

Health Plan	Use of Appropriate Medications for People with Asthma (Ages 19-64)	Appropriate Asthma Medications – 3+ Controllers (Ages 19-64)	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
				Corticosteroids	Bronchodilators
Aetna Life Insurance Company – New York	92	81	55▲	60	83
CDPHP Universal Benefits, Inc.	92	83	43▼	69	81
Connecticut General Life Insurance Company – NY	93	84	55▲	65	74
Empire HealthChoice HMO, Inc.	93	84▲	49▼	54▼	74
Excellus BlueCross BlueShield	92	84▲	43▼	69	74
GHI (EmblemHealth)	89▼	78▼	57▲	59	70
HIP (EmblemHealth)	87	75	61▲	—	—
MVP Preferred PPO	91	82	42▼	79▲	75
Oxford Health Insurance Company, Inc. – New York	92	83	60▲	82▲	82
UnitedHealthcare Insurance Company of New York, Inc.	91	80▼	51	70	76
Statewide	92	83	51	67	76
National	*	*	41	70	77

LEGEND

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

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

### MANAGING RESPIRATORY CONDITIONS

Health Plan	Use of Appropriate Medications for People with Asthma (Ages 19-64)	Appropriate Asthma Medications – 3+ Controllers (Ages 19-64)	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pharmacotherapy Management of COPD Exacerbation	
				Corticosteroids	Bronchodilators
Affinity Health Plan	84	74	47	63	87
Amerigroup New York	87▲	76	48	53	74
CDPHP	80▼	68▼	28▼	73	84
Excelsus BlueCross BlueShield	83	68▼	32▼	52▼	74▼
Fidelis Care New York	83	72	52	72▲	85
HIP (EmblemHealth)	84	73	62▲	69	87
Health Plus	85	74	48	66	84
HealthNow New York Inc.	78▼	65▼	37▼	60	80
Healthfirst PHSP, Inc.	83	74	52	73▲	89▲
Hudson Health Plan	81	67▼	46	73	87
Independent Health's MediSource	84	72	52	76▲	86
MVP	82	68▼	43	72	83
MetroPlus Health Plan	85	75▲	41▼	58▼	90▲
Neighborhood Health Providers	88▲	79▲	44▼	69	91▲
Total Care	82	68▼	32▼	53▼	71▼
UnitedHealthcare Community Plan	85	74	60▲	70	81
Univera Community Health	84	72	43	64	70▼
WellCare of New York	87▲	76	57▲	73	76
Statewide	84	74	50	68	84
National	*	*	32	64	80

#### LEGEND

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

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

COMPREHENSIVE DIABETES CARE

Measure	Description (Type of Insurance)
<b>Monitoring Diabetes</b>	This group of measures report components of care for members, ages 18 to 75, with diabetes and the rate at which they received necessary components of diabetes care. The measures presented here monitor the condition of members with diabetes.
<b>HbA1c Testing</b>	The percentage of members with diabetes who received at least one Hemoglobin A1c (HbA1c) test within the past year. (CO, PPO, MA)
<b>Lipid Profile</b>	The percentage of members with diabetes who had at least one cholesterol screening test done during the past year. (CO, PPO, MA)
<b>Dilated Eye Exam</b>	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. (CO, PPO, MA)
<b>Monitoring for Nephropathy</b>	The percentage of members with diabetes who had at least one nephropathy screening test or had evidence of nephropathy during the last year. (CO, PPO, MA)
<b>Received All Tests</b>	The percentage of members with diabetes who had at least one of the following: HbA1c test, cholesterol screening test, dilated eye exam, nephropathy screening test, (MA)

Measure	Description (Type of Insurance)
<b>Managing Diabetes Outcomes</b>	This group of measures report components of care for members, ages 18 to 75, with diabetes and the rate at which they received necessary components of diabetes care. The measures presented here measure outcomes for diabetes.
<b>Poor HbA1c Control</b>	The percentage of members with diabetes whose most recent HbA1c level indicated poor control (>9.0 percent). (CO, PPO, MA)
<b>HbA1c Control (&lt;8.0%)</b>	The percentage of members with diabetes whose most recent HbA1c level was less than 8.0 percent. (CO, PPO, MA)
<b>HbA1c Control(&lt;7.0%) for Selected Populations</b>	The percentage of members with diabetes whose most recent HbA1c level was less than 7.0 percent. Additional exclusion criteria are required for this indicator, resulting in a different eligible population. (CO, PPO, MA).
<b>Lipids Controlled</b>	The percentage of members with diabetes whose most recent level of bad cholesterol was below the recommended level (LDL-C <100 mg/dL). (CO, PPO, MA)
<b>Blood Pressure Controlled</b>	The percentage of members with diabetes whose most recent blood pressure reading was below 140/90 mmHg. (CO, PPO, MA)
<b>HbA1c &amp; Lipids Controlled</b>	The percentage of members with diabetes whose most recent HbA1c level was at or less than 9.0 percent and whose most recent level of bad cholesterol was below the recommended level (LDL-C <100 mg/dL). (MA)

MONITORING DIABETES

Health Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring
Aetna	84▼	84▼	57	76▼
CDPHP	88	88	63	87▲
Easy Choice Health Plan of NY	74▼	73▼	21▼	75▼
Empire	91	89	59	86▲
Excellus BlueCross BlueShield	92▲	88	67▲	84
HIP (EmblemHealth)	90	90	64▲	81
HealthNow New York Inc.	91	89	65▲	84
Independent Health	91	89	67▲	88▲
MVP	90	84▼	60	83
Oxford	88	87	48▼	78▼
Univera Healthcare	92▲	89	63	87▲
Statewide	90	88	60	83
National	90	85	57	84

LEGEND

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

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

MANAGING DIABETES OUTCOMES

Health Plan	Poor HbA1c Control*	HbA1c Control (<8.0%)	HbA1c Control (<7.0%) for Selected Populations†	Lipids Controlled (<100 mg/dL)	Blood Pressure Controlled (<140/90 mm Hg)
Aetna	33▼	58▼	42	44	51▼
CDPHP	23▲	68▲	49	48	81▲
Easy Choice Health Plan of NY	60▼	33▼	22▼	17▼	19▼
Empire	21▲	68▲	46	50	67
Excellus BlueCross BlueShield	17▲	72▲	52▲	53▲	71▲
HIP (EmblemHealth)	30	62	44	48	64
HealthNow New York Inc.	23▲	67	50	52▲	69
Independent Health	20▲	69▲	49	51	74▲
MVP	19▲	69▲	48	52▲	69▲
Oxford	42▼	50▼	37▼	36▼	56▼
Univera Healthcare	19▲	72▲	53▲	48	70▲
Statewide	27	63	45	47	66
National	28	61	42	48	66

\* A low rate is desirable for this measure.

† Additional exclusion criteria are required for this indicator, resulting in a different eligible population from all other indicators.

LEGEND

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

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

MONITORING DIABETES

Health Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring
Aetna Life Insurance Company – New York	86	85	60▲	77▲
CDPHP Universal Benefits, Inc.	87	84	61▲	81▲
Connecticut General Life Insurance Company – NY	89▲	86	52	76▲
Empire HealthChoice HMO, Inc.	86	85	51▼	69
Excellus BlueCross BlueShield	93▲	89▲	58	82▲
GHI (EmblemHealth)	87	86	48▼	77▲
HIP (EmblemHealth)	88	86	53	81▲
MVP Preferred PPO	86	82▼	42▼	76▲
Oxford Health Insurance Company, Inc. – New York	84	84	54	73
UnitedHealthcare Insurance Company of New York, Inc.	84	82	59	68
<b>Statewide</b>	<b>86</b>	<b>84</b>	<b>55</b>	<b>72</b>
<b>National</b>	<b>87</b>	<b>81</b>	<b>48</b>	<b>78</b>

LEGEND

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

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

MANAGING DIABETES OUTCOMES

Health Plan	Poor HbA1c Control*	HbA1c Control (<8.0%)	HbA1c Control (<7.0%) for Selected Populations†	Lipids Controlled (<100 mg/dL)	Blood Pressure Controlled (<140/90 mm Hg)
Aetna Life Insurance Company – New York	35▲	58▲	40	45▲	54
CDPHP Universal Benefits, Inc.	25▲	64▲	45▲	46▲	75▲
Connecticut General Life Insurance Company – NY	34▲	58▲	44▲	43	55
Empire HealthChoice HMO, Inc.	53▼	40▼	28▼	32▼	41▼
Excelsus BlueCross BlueShield	22▲	70▲	49▲	50▲	72▲
GHI (EmblemHealth)	46▼	47▼	36	38	37▼
HIP (EmblemHealth)	43	50	34	38	53
MVP Preferred PPO	NV	NV	NV	NV	NV
Oxford Health Insurance Company, Inc. – New York	49▼	43▼	28▼	39	54
UnitedHealthcare Insurance Company of New York, Inc.	40	54	36	42	55
Statewide	42	51	36	40	52
National	34	55	36	42	59

\* A low rate is desirable for this measure.

† Additional exclusion criteria are required for this indicator, resulting in a different eligible population from all other indicators.

LEGEND

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

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

### MONITORING DIABETES

Health Plan	HbA1c Testing	Lipid Profile	Dilated Eye Exam	Nephropathy Monitoring	Received All Tests
Affinity Health Plan	88	84	65	83	51
Amerigroup New York	90	92▲	68	84	57▲
CDPHP	82▼	76▼	66	74▼	44▼
Excelsus BlueCross BlueShield	90	79▼	66	82	47▼
Fidelis Care New York	88	87	62	81	48
HIP (EmblemHealth)	91	91▲	65	89▲	57▲
Health Plus	90	89	64	85	55
HealthNow New York Inc.	85▼	82▼	59▼	80	48
Healthfirst PHSP, Inc.	89	88	64	82	50
Hudson Health Plan	87	83▼	57▼	80	44▼
Independent Health's MediSource	83▼	78▼	59▼	84	42▼
MVP	89	81▼	56▼	83	42▼
MetroPlus Health Plan	92▲	91▲	65	85	56
Neighborhood Health Providers	88	85	66	83	52
Total Care	91▲	83▼	61	80	46▼
UnitedHealthcare Community Plan	87	87	64	80▼	52
Univera Community Health	86▼	80▼	60▼	87▲	46▼
WellCare of New York	90	89	64	85	55
<b>Statewide</b>	<b>89</b>	<b>87</b>	<b>64</b>	<b>83</b>	<b>51</b>
<b>National</b>	<b>83</b>	<b>75</b>	<b>53</b>	<b>78</b>	<b>*</b>

#### LEGEND

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

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

## MANAGING DIABETES OUTCOMES

Health Plan	Poor HbA1c Control*	HbA1C Control (<8.0%)	HbA1C Control (<7.0%) for Selected Populations†	Lipids Controlled (<100 mg/dL)	Blood Pressure Controlled (<140/90 mm Hg)	HbA1c & Lipids Controlled
Affinity Health Plan	36	55	37	52▲	63	41
Amerigroup New York	35	56	39	46	68	36
CDPHP	34	56	38	41▼	76▲	33▼
Excelsus BlueCross BlueShield	33	59	41	39▼	72▲	31▼
Fidelis Care New York	32	61	45	49	75▲	38
HIP (EmblemHealth)	29▲	62▲	46▲	48	63	40
Health Plus	33	55	39	46	67	36
HealthNow New York Inc.	33	56	44	45	69	37
Healthfirst PHSP, Inc.	34	55	42	47	60▼	37
Hudson Health Plan	36	53▼	42	48	70	37
Independent Health's MediSource	33	57	43	40▼	64	31▼
MVP	33	57	41	44	66	35
MetroPlus Health Plan	28▲	62	40	52▲	61▼	44▲
Neighborhood Health Providers	36	53▼	34▼	41▼	71▲	31▼
Total Care	33	57	40	42▼	76▲	30▼
UnitedHealthcare Community Plan	39▼	54	42	35▼	67	29▼
Univera Community Health	34	57	43	42▼	68	34
WellCare of New York	31	61	43	49	52▼	40
Statewide	33	58	41	47	66	37
National	43	48	35	35	61	*

\* A low rate is desirable for this measure.

† Additional exclusion criteria are required for this indicator, resulting in a different eligible population from all other indicators.

### LEGEND

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

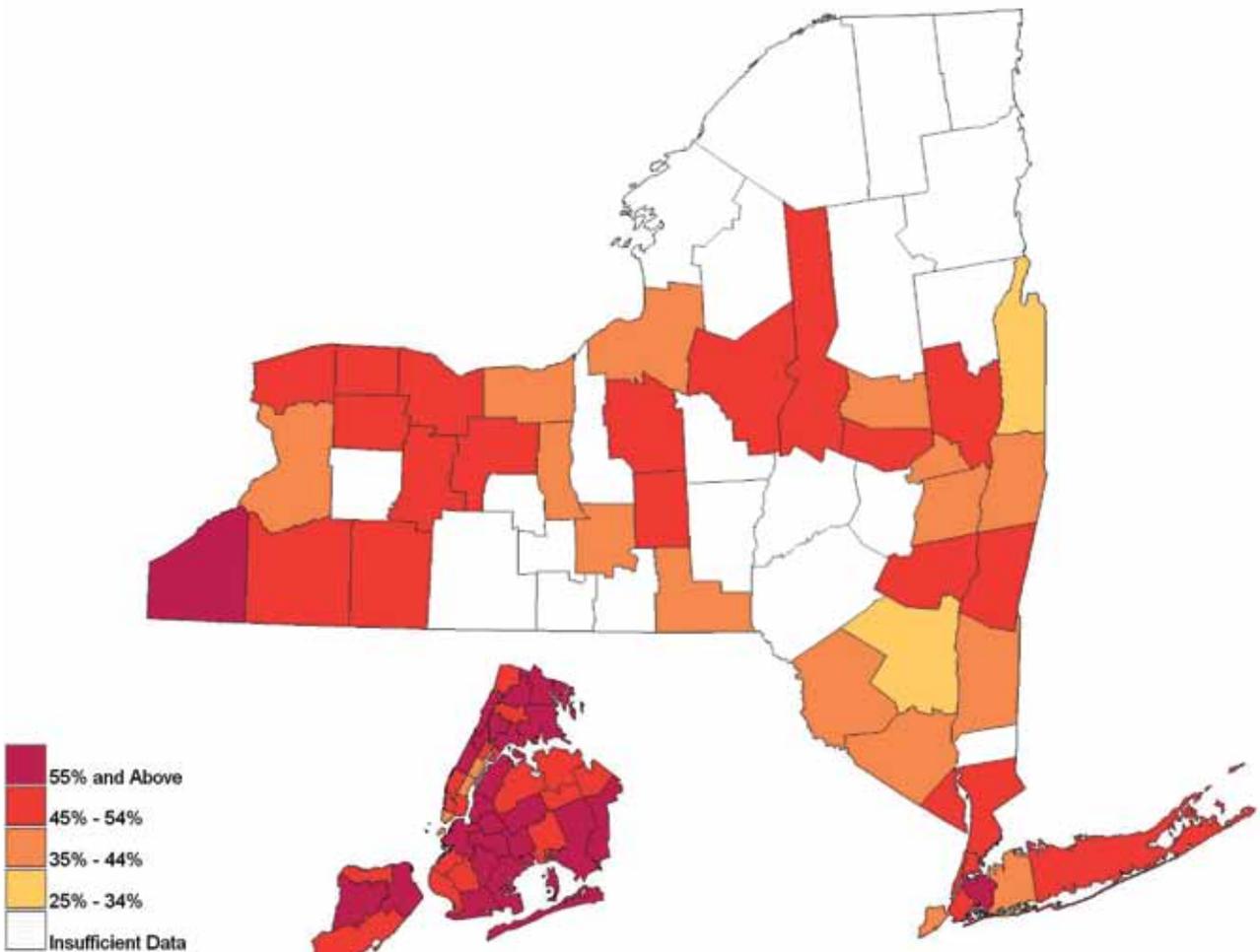
NOTE: Plans without symbols are not significantly different from the statewide average.

**COMPREHENSIVE DIABETES CARE**

The following map illustrates the variation by county in completeness of monitoring tests for Medicaid managed care enrollees with diabetes. Diabetics, ages 18 and older, who received at least one of each of the following: HcA1c test, cholesterol screening

test, dilated eye exam, and medical attention for nephropathy are included in this map. The member’s county of residence was used in this analysis. For areas in New York City, neighborhoods were used instead of counties for more localized results. The data used here are from 2009 and 2011 combined.

**Monitoring Diabetes – Received All Tests New York State, by County**



New York City, by Neighborhood

## MANAGING MEDICATIONS

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

MANAGING MEDICATIONS

Health Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Aetna	82	80▼	77	80▼	68▲	80▼
CDPHP	90▲	86▲	89	86▲	64	86▲
Easy Choice Health Plan of NY	83	73▼	—	73▼	28▼	72▼
Empire	81	88▲	89▲	87▲	64	87▲
Excellus BlueCross BlueShield	89▲	83▼	84	82▼	61	82▼
HIP (EmblemHealth)	78▼	90▲	91▲	90▲	62	90▲
HealthNow New York Inc.	84	81▼	80	80▼	52▼	80▼
Independent Health	84	84▼	85	83▼	59	83▼
MVP	89▲	82▼	79	81▼	61	81▼
Oxford	79▼	86▲	84	84	60	85▲
Univera Healthcare	86	84	84	84	59	83
<b>Statewide</b>	<b>84</b>	<b>85</b>	<b>84</b>	<b>84</b>	<b>60</b>	<b>84</b>
<b>National</b>	<b>88</b>	<b>83</b>	<b>85</b>	<b>82</b>	<b>61</b>	<b>82</b>

LEGEND

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

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

MANAGING MEDICATIONS

Health Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Aetna Life Insurance Company – New York	78▼	82▼	77▼	81▼	61	81▼
CDPHP Universal Benefits, Inc.	95▲	86▲	93▲	85▲	57	85▲
Connecticut General Life Insurance Company – NY	82	80▼	75▼	79▼	56	79▼
Empire HealthChoice HMO, Inc.	83	86▲	91▲	85▲	63	85▲
Excelsus BlueCross BlueShield	87▲	80▼	80▼	80▼	58	80▼
GHI (EmblemHealth)	74▼	87▲	87	86▲	63	86▲
HIP (EmblemHealth)	81	88▲	—	88▲	64	88▲
MVP Preferred PPO	89▲	83	88	83▲	63	83▲
Oxford Health Insurance Company, Inc. – New York	81	83	86	82	63	82
UnitedHealthcare Insurance Company of New York, Inc.	74▼	80▼	79	79▼	62	79▼
<b>Statewide</b>	<b>82</b>	<b>83</b>	<b>83</b>	<b>82</b>	<b>61</b>	<b>82</b>
<b>National</b>	<b>87</b>	<b>79</b>	<b>79</b>	<b>78</b>	<b>57</b>	<b>78</b>

LEGEND

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

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

### MANAGING MEDICATIONS

Health Plan	Drug Therapy for Rheumatoid Arthritis	Annual Monitoring for Patients on Persistent Medications				
		ACE Inhibitors/ ARBs	Digoxin	Diuretics	Anticonvulsants	Combined Rate
Affinity Health Plan	73	91	96	89▼	61▼	89▼
Amerigroup New York	78	92	90	91	64	91▲
CDPHP	77	88▼	93	88▼	65	86▼
Excellus BlueCross BlueShield	81	90▼	90	89▼	72▲	88▼
Fidelis Care New York	78	92	93	91	71▲	90
HIP (EmblemHealth)	80	93▲	93	92▲	65	91▲
Health Plus	75	92▲	94	91	66	91▲
HealthNow New York Inc.	65▼	80▼	89	80▼	57▼	78▼
Healthfirst PHSP, Inc.	78	92▲	96	91	65	91▲
Hudson Health Plan	72	92	89	92▲	69	90
Independent Health's MediSource	74	89▼	89	88▼	70	87▼
MVP	89▲	86▼	100▲	87▼	70	85▼
MetroPlus Health Plan	81	92▲	97▲	91▲	68	91▲
Neighborhood Health Providers	86▲	92	96	91	63	90
Total Care	68	90	87	90	74▲	89
UnitedHealthcare Community Plan	71▼	92	94	91	62▼	90
Univera Community Health	74	86▼	—	85▼	58	84▼
WellCare of New York	64▼	91	—	89▼	60	89
<b>Statewide</b>	<b>77</b>	<b>91</b>	<b>94</b>	<b>90</b>	<b>66</b>	<b>90</b>
<b>National</b>	<b>69</b>	<b>86</b>	<b>90</b>	<b>85</b>	<b>65</b>	<b>84</b>

#### LEGEND

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

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

**MANAGING HIV/AIDS**

Measure	Description (Type of Insurance)
<b>HIV/AIDS Comprehensive Care</b>	These measures are quality indicators of recommended treatment and preventive care for members with HIV/AIDS. These measures are specific to New York State and have no national comparisons. (MA)
<b>1) Engaged in Care</b>	The percentage of members with HIV/AIDS, 2 years of age or older, who had two visits for primary care or HIV related care with at least one visit during each half of the past year.
<b>2) Viral Load Monitoring</b>	The percentage of members with HIV/AIDS, 2 years of age or older, who had two viral load tests performed with at least one test during each half of the past year.
<b>3) Syphilis Screening Rate</b>	The percentage of members with HIV/AIDS, 19 years of age or older, who were screened for syphilis in the past year.

**MEDICAID PERFORMANCE**

Health Plan	Engaged in Care	Viral Load Monitoring	Syphilis Screening
<b>Amida Care</b>	93▲	86▲	87▲
<b>MetroPlus Health Plan</b>	88▼	83	73▼
<b>Statewide</b>	90	84	78

**LEGEND**

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

### MANAGING HIV/AIDS

Health Plan	Engaged in Care	Viral Load Monitoring	Syphilis Screening Rate
Affinity Health Plan	88▲	61	70
Amerigroup New York	89	64	61
CDPHP	93▲	72▲	67
Excellus BlueCross BlueShield	79	59	56▼
Fidelis Care New York	90▲	65	66
HIP (EmblemHealth)	82	55▼	52▼
Health Plus	82	56▼	69
HealthNow New York Inc.	90	82▲	74
Healthfirst PHSP, Inc.	83	68▲	72▲
Hudson Health Plan	89▲	75▲	62
Independent Health's MediSource	84	76	54
MVP	76	67	52▼
MetroPlus Health Plan	77▼	64	69
Neighborhood Health Providers	84	66	65
Total Care	83	77▲	64
UnitedHealthcare Community Plan	68▼	57▼	53▼
Univera Community Health	94▲	77▲	62
WellCare of New York	78	55	71
<b>Statewide</b>	<b>84</b>	<b>64</b>	<b>66</b>

#### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

**MEDICATION MANAGEMENT FOR PEOPLE WITH ASTHMA**

Asthma is one of the most prevalent chronic diseases and its treatment generally relies on a regimen of medications to appropriately manage the condition. Medications for asthma are generally categorized into either rescue medications (used to treat acute symptoms and exacerbations) or controller medications (used to maintain control of persistent asthma). It is estimated that up to two-thirds of people with asthma have symptoms that are considered uncontrolled. Proper adherence to the appropriate medications can help manage these symptoms. This new measure examines the percentage of members (5-64 years of age) with persistent asthma who filled prescriptions for asthma controller medications during at least 50% of their treatment period.

Medication Management for People with Asthma (Ages 5-18)	HMO	PPO	MEDICAID	CHPLUS
Number of Plans	11	10	18	19
Statewide Average	53	55	50	54
Range of Scores	44, 63	49, 61	44, 64	32, 64
25th Percentile	50	53	47	47
Median	51	57	49	51
75th Percentile	55	58	53	56

Medication Management for People with Asthma (Ages 19-64)	HMO	PPO	MEDICAID
Number of Plans	11	10	18
Statewide Average	70	70	68
Range of Scores	52, 98	65, 96	67, 97
25th Percentile	66	68	61
Median	70	70	67
75th Percentile	73	71	70

**PERSISTENCE OF BETA BLOCKER TREATMENT**

This measure examines the percentage of members who were hospitalized for an acute heart attack and who received beta-blocker treatment for six months after discharge. This measure has been collected for commercial members for several years. However this is the first year that the information has been required for members enrolled in Medicaid.

Persistence of Beta-Blocker Treatment	HMO
Number of Plans	18
Statewide Average	77
Range of Scores	60, 90
25th Percentile	73
Median	76
75th Percentile	83

## COMMERCIAL HMO

Measure	2009	2010	2011
Flu Shot for Adults	50	51	51
Advising Smokers to Quit	81	82	82
Drug Therapy for Rheumatoid Arthritis	83	84	84
Use of Imaging Studies for Low Back Pain	79	79	79
Persistence of Beta-Blocker Treatment	76	79	84
Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	22	21	21
Cholesterol Level Controlled (<100 mg/dL)	58	Rotated	62
Cholesterol Screening Test	91	Rotated	90
Colon Cancer Screening	66	Rotated	65
Monitoring Diabetes - Lipid Profile	88	Rotated	88
Managing Diabetes Outcomes – HbA1C Control (<7.0%) for Selected Populations	43	Rotated	45
Managing Diabetes Outcomes – HbA1C Control (<8.0%)	62	Rotated	63
Monitoring Diabetes – Dilated Eye Exam	59	Rotated	60
Monitoring Diabetes – Nephropathy Monitoring	82	Rotated	83
Managing Diabetes Outcomes – Poor HbA1c Control	28	Rotated	27
Monitoring Diabetes – HbA1c Testing	89	Rotated	90
Managing Diabetes Outcomes – Lipids Controlled (<100 mg/dL)	47	Rotated	47
Discussing Smoking Cessation Medications	57	59	60
Discussing Smoking Cessation Strategies	51	51	51
Annual Monitoring for Patients on Persistent Medications – ACE Inhibitors/ARBs	83	84	85
Annual Monitoring for Patients on Persistent Medications – Anticonvulsant	63	60	60
Annual Monitoring for Patients on Persistent Medications – Combined Rate	83	83	84
Annual Monitoring for Patients on Persistent Medications – Digoxin	83	85	84
Annual Monitoring for Patients on Persistent Medications – Diuretics	83	83	84
Pharmacotherapy Management of COPD Exacerbation – Bronchodilator	79	78	79
Pharmacotherapy Management of COPD Exacerbation – Corticosteroid	69	71	72
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	47	52	53

## COMMERCIAL PPO

Measure	2009	2010	2011
Flu Shot for Adults	47	50	52
Advising Smokers to Quit	77	77	76
Drug Therapy for Rheumatoid Arthritis	82	84	82
Use of Imaging Studies for Low Back Pain	74	75	75
Persistence of Beta-Blocker Treatment	76	75	78
Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	26	24	24
Cholesterol Level Controlled (<100 mg/dL)	54	Rotated	47
Cholesterol Screening Test	88	Rotated	82
Colon Cancer Screening	48	Rotated	57
Monitoring Diabetes – Lipid Profile	86	Rotated	84
Managing Diabetes Outcomes – HbA1C Control (<7.0%) for Selected Populations	35	Rotated	36
Managing Diabetes Outcomes – HbA1C Control (<8.0%)	52	Rotated	51
Monitoring Diabetes – Dilated Eye Exam	52	Rotated	55
Monitoring Diabetes – Nephropathy Monitoring	75	Rotated	72
Managing Diabetes Outcomes -Poor HbA1c Control	41	Rotated	42
Monitoring Diabetes – HbA1c Testing	88	Rotated	86
Managing Diabetes Outcomes – Lipids Controlled (<100 mg/dL)	40	Rotated	40
Discussing Smoking Cessation Medications	51	50	51
Discussing Smoking Cessation Strategies	43	43	45
Annual Monitoring for Patients on Persistent Medications – ACE Inhibitors/ARBs	84	82	83
Annual Monitoring for Patients on Persistent Medications – Anticonvulsant	63	61	61
Annual Monitoring for Patients on Persistent Medications – Combined Rate	83	82	82
Annual Monitoring for Patients on Persistent Medications – Digoxin	82	82	83
Annual Monitoring for Patients on Persistent Medications – Diuretics	83	82	82
Pharmacotherapy Management of COPD Exacerbation – Bronchodilator	75	75	76
Pharmacotherapy Management of COPD Exacerbation – Corticosteroid	63	64	67
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	51	52	51

## MEDICAID

Measure	2009	2010	2011
Flu Shot for Adults	35	Rotated	40
Advising Smokers to Quit	74	Rotated	78
Drug Therapy for Rheumatoid Arthritis	74	76	77
Use of Imaging Studies for Low Back Pain	80	79	79
Avoidance of Antibiotics Therapy in Adults with Acute Bronchitis	26	27	28
Cholesterol Level Controlled (<100 mg/dL)	51	Rotated	52
Cholesterol Screening Test	91	Rotated	90
Annual Dental Visit(Ages 19-21)	42	43	43
Monitoring Diabetes – Lipid Profile	87	Rotated	87
Managing Diabetes Outcomes – HbA1C Control (<7.0%) for Selected Populations	37	Rotated	41
Managing Diabetes Outcomes – HbA1C Control (<8.0%)	55	Rotated	58
Monitoring Diabetes – Dilated Eye Exam	63	Rotated	64
Monitoring Diabetes – Nephropathy Monitoring	83	Rotated	83
Managing Diabetes Outcomes – Poor HbA1c Control	33	Rotated	33
Monitoring Diabetes – HbA1c Testing	89	Rotated	89
Managing Diabetes Outcomes – HbA1c and Lipids Controlled	36	Rotated	37
Monitoring Diabetes – Received All Tests	50	Rotated	51
Engaged in Care	67	80	84
Syphilis Screening	54	58	66
Viral Load Monitoring	47	58	64
Managing Diabetes Outcomes – Lipids Controlled (<100 mg/dL)	44	Rotated	47
Discussing Smoking Cessation Medications	52	Rotated	56
Discussing Smoking Cessation Strategies	47	Rotated	48
Annual Monitoring for Patients on Persistent Medications – ACE Inhibitors/ARBs	90	91	91
Annual Monitoring for Patients on Persistent Medications – Anticonvulsant	66	67	66
Annual Monitoring for Patients on Persistent Medications – Combined Rate	88	89	90
Annual Monitoring for Patients on Persistent Medications – Digoxin	91	94	94
Annual Monitoring for Patients on Persistent Medications – Diuretics	88	90	90
Pharmacotherapy Management of COPD Exacerbation – Bronchodilator	84	85	84
Pharmacotherapy Management of COPD Exacerbation – Corticosteroid	61	66	68
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	45	46	50

### Looking for more information on adult health services?

The following measures are published in the 2012 Managed Care Plan Access and Utilization Report at the link:

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

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



Antidepressant Medication Management measures how well a health plan manages people with moderate to severe depression who are prescribed antidepressant medication. Once diagnosed, individuals treated with medications should be managed on both a short-term (acute phase) and long-term (continuation phase) basis. By continuing treatment, patients with depressive

disorders may prevent a relapse in symptoms and future recurrences of depression. Follow-up After Hospitalization for Mental Illness measures whether enrollees who were hospitalized for treatment of certain mental health disorders received recommended ambulatory follow-up visits within recommended timeframes.

Measure	Description (Type of Insurance)
<b>Antidepressant Medication Management</b>	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. (CO, PPO, MA)
<b>1) Effective Acute Phase Treatment</b>	The percentage of members who remained on antidepressant medication during the entire 12-week acute treatment phase.
<b>2) Effective Continuation Phase Treatment</b>	The percentage of members who remained on antidepressant medication for at least six months.
<b>Follow-up After Hospitalization for Mental Illness</b>	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. The first component is 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. The second component is the percentage of members who were seen in the same settings within 30 days. (CO, PPO, MA)

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	65	49	59▼	70▼
CDPHP	69▲	58▲	76▲	90▲
Easy Choice Health Plan of NY	71	57	—	—
Empire	61	44	65▼	77
Excellus BlueCross BlueShield	69▲	53▲	88▲	89▲
HIP (EmblemHealth)	65	48	69	81
HealthNow New York Inc.	59▼	42▼	75▲	87▲
Independent Health	65	50	59▼	76▼
MVP	65	47▼	81▲	85
Oxford	67	55▲	65▼	76▼
Univera Healthcare	58▼	43▼	91▲	92▲
Statewide	65	50	70	81
National	65	48	60	77

### LEGEND

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

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

Health Plan	Antidepressant Medication Management		Follow-up After Hospitalization for Mental Illness	
	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Aetna Life Insurance Company – New York	64	50	58▼	74▼
CDPHP Universal Benefits, Inc.	70	59▲	78▲	88▲
Connecticut General Life Insurance Company – NY	71▲	54	58▼	72▼
Empire HealthChoice HMO, Inc.	62▼	44▼	59▼	78
Excellus BlueCross BlueShield	65	48▼	84▲	87▲
GHI (EmblemHealth)	69	53	54▼	69▼
HIP (EmblemHealth)	64	45	66	78
MVP Preferred PPO	65	47	85▲	86▲
Oxford Health Insurance Company, Inc. – New York	70▲	59▲	67	81
UnitedHealthcare Insurance Company of New York, Inc.	66	51	64	79
<b>Statewide</b>	<b>66</b>	<b>50</b>	<b>64</b>	<b>79</b>
<b>National</b>	<b>64</b>	<b>48</b>	<b>54</b>	<b>74</b>

### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

Health Plan	Antidepressant Medication Management		Follow-up After Hospitalization for Mental Illness	
	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Affinity Health Plan	49	35	80▲	89▲
Amerigroup New York	46	28	59▼	68▼
CDPHP	64▲	50▲	71	83
Excellus BlueCross BlueShield	48▼	29▼	78▲	83
Fidelis Care New York	53▲	34	70	83
HIP (EmblemHealth)	65▲	51▲	70	81
Health Plus	52	34	86▲	89▲
HealthNow New York Inc.	56	43▲	71	84
Healthfirst PHSP, Inc.	47▼	31▼	63▼	81▼
Hudson Health Plan	46	34	72	85
Independent Health's MediSource	48	32	50▼	72▼
MVP	52	37	76	84
MetroPlus Health Plan	45▼	30▼	61▼	78▼
Neighborhood Health Providers	46▼	31	82▲	91▲
Total Care	49	32	70	80
UnitedHealthcare Community Plan	45▼	31▼	78▲	86▲
Univera Community Health	52	32	93▲	94▲
WellCare of New York	47	33	65	75▼
<b>Statewide</b>	<b>51</b>	<b>34</b>	<b>72</b>	<b>83</b>
<b>National</b>	<b>51</b>	<b>34</b>	<b>45</b>	<b>64</b>

### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

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

## COMMERCIAL HMO

Measure	2009	2010	2011
Antidepressant Medication Management – Effective Acute Phase Treatment	63	65	65
Antidepressant Medication Management – Effective Continuation Phase Treatment	47	49	50
Follow-Up After Hospitalization for Mental Illness Within 7 Days	66	68	70
Follow-Up After Hospitalization for Mental Illness Within 30 Days	80	82	81

## COMMERCIAL PPO

Measure	2009	2010	2011
Antidepressant Medication Management – Effective Acute Phase Treatment	67	65	66
Antidepressant Medication Management – Effective Continuation Phase Treatment	51	49	50
Follow-Up After Hospitalization for Mental Illness Within 7 Days	60	61	64
Follow-Up After Hospitalization for Mental Illness Within 30 Days	76	76	79

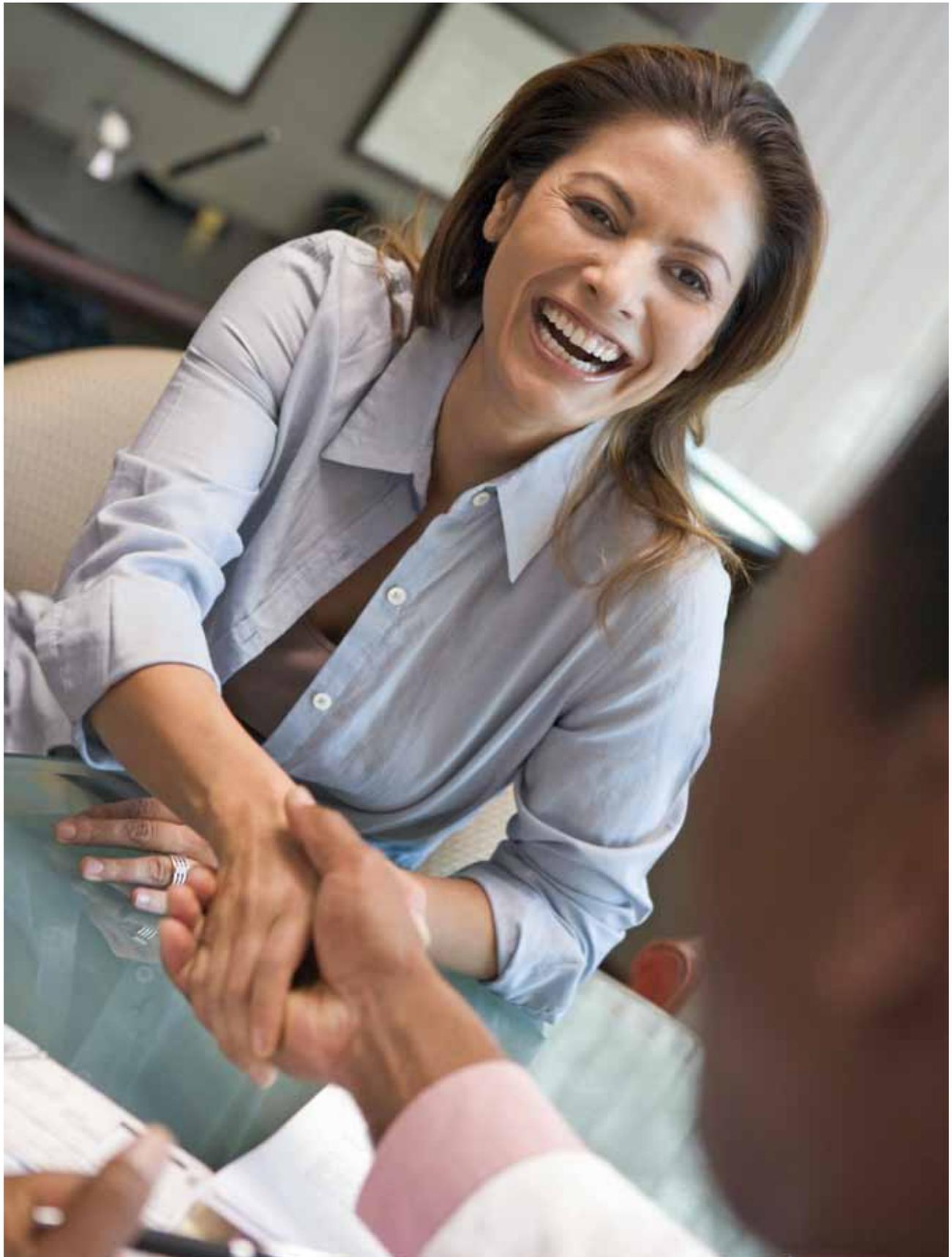
## MEDICAID

Measure	2009	2010	2011
Antidepressant Medication Management – Effective Acute Phase Treatment	51	52	51
Antidepressant Medication Management – Effective Continuation Phase Treatment	35	35	34
Follow-Up After Hospitalization for Mental Illness Within 7 Days	68	70	72
Follow-Up After Hospitalization for Mental Illness Within 30 Days	80	85	83

### Looking for more information on behavioral health services?

The following measures are published in the 2012 Managed Care Plan Access and Utilization Report at the link: <http://www.health.ny.gov>

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



This section of the 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 are from the CAHPS 4.0H survey conducted in 2012 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. These data are collected annually and submitted to the Department by the health plans. The NYSDOH sponsors a biennial CAHPS survey for Medicaid adults enrolled for at least 6 months. Members were asked to describe their experiences in the past 6 months. Medicaid enrollees were last surveyed by the Department late in 2011; data from this survey are presented in this report.

**SATISFACTION WITH ACCESS TO CARE AND THE HEALTH PLAN**

Measure	Description (Type of Insurance)
<b>Getting Needed Care</b>	The percentage of members responding "usually" or "always" when asked a set of questions to determine if they received the care they needed. Questions asked how often it was easy to get appointments with specialists, and how often it was easy to get care, tests, or treatment through their health plan. (CO, PPO, MA)
<b>Getting Care Quickly</b>	The percentage of members responding "usually" or "always" when asked a set of questions to determine if they received health services quickly. Questions asked how often members were able to get urgent care, and how often members were able to get an appointment for routine health care as soon as desired? (CO, PPO, MA)
<b>Claims Processing</b>	The percentage of members responding "usually" or "always" when asked a set of questions to determine how quickly and correctly their health plan handled claims. (CO, PPO)
<b>Plan Information on Costs</b>	The percentage of members responding "usually" or "always" when asked a set of questions to determine if they looked for information about health care costs, including how much they would have to pay for a health care service for treatment or for specific prescription medicines. (CO, PPO)
<b>Customer Service</b>	The percentage of members responding "usually" or "always" when asked a set of questions to determine if they used their health plan's customer service. Members were asked how often health plan's customer service gave the information or help needed, and how often the health plan's customer service staff treated the member with courtesy and respect. (CO, PPO, MA)
<b>Rating of Health Plan</b>	The percentage of members 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. (CO, PPO, MA)

Health Plan	Satisfaction with Access to Care		Satisfaction with Health Plan			
	Getting Needed Care	Getting Care Quickly	Claims Processing	Plan Information on Costs	Customer Service	Rating of Health Plan
Aetna	86	85	86	52	85	68
CDPHP	89▲	90▲	90▲	66	83	74▲
Easy Choice Health Plan of NY	65▼	73▼	50▼	46▼	65▼	33▼
Empire	87	82	86	51	85	64
Excellus BlueCross BlueShield	86	87	88	62	85	70▲
HIP (EmblemHealth)	80	80▼	88	57	85	74▲
HealthNow New York Inc.	89▲	88	90▲	67	90	68
Independent Health	87	89	89	76▲	89	75▲
MVP	89▲	93▲	88	75▲	91▲	67
Oxford	84	88	86	59	88	52▼
Univera Healthcare	85	91▲	85	60	81	58▼
Statewide	84	86	84	61	84	64
National	86	86	89	*	86	66

### LEGEND

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

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

Health Plan	Satisfaction with Access to Care		Satisfaction with Health Plan			
	Getting Needed Care	Getting Care Quickly	Claims Processing	Plan Information on Costs	Customer Service	Rating of Health Plan
Aetna Life Insurance Company – New York	87	84	91	70	90	61
CDPHP Universal Benefits, Inc.	89	90	90	71	89	72▲
Connecticut General Life Insurance Company – NY	86	87	80	61	84	55▼
Empire HealthChoice HMO, Inc.	89	92▲	91	63	93▲	72▲
Excellus BlueCross BlueShield	86	91	87	57	82	63
GHI (EmblemHealth)	90	84	83	73	85	63
HIP (EmblemHealth)	84	81▼	76▼	55	74▼	59
MVP Preferred PPO	89	85	85	62	83	56▼
Oxford Health Insurance Company, Inc. – New York	85	87	86	57	87	59
UnitedHealthcare Insurance Company of New York, Inc.	88	90▲	90	75▲	88	72▲
<b>Statewide</b>	<b>87</b>	<b>87</b>	<b>86</b>	<b>64</b>	<b>85</b>	<b>63</b>
<b>National</b>	<b>86</b>	<b>87</b>	<b>88</b>	<b>*</b>	<b>82</b>	<b>58</b>

### LEGEND

▲ Significantly better than the statewide average

▼ Significantly worse than the statewide average

\* No national average available

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

Health Plan	Satisfaction with Access to Care		Satisfaction with Health Plan	
	Getting Needed Care	Getting Care Quickly	Customer Service	Rating of Health Plan
Affinity Health Plan	74	76	79	71
Amerigroup New York	73	68▼	82	69
CDPHP	80▲	86▲	89▲	78▲
Excellus BlueCross BlueShield	79▲	80	74	72
Fidelis Care New York	77	75	83	72
HIP (EmblemHealth)	71	78	81	66▼
Health Plus	75	72	86	68
HealthNow New York Inc.	78	82▲	83	68
Healthfirst PHSP, Inc.	72	72	79	72
Hudson Health Plan	77	79	89▲	81▲
Independent Health's MediSource	77	80	82	78▲
MVP	78	80▲	79	65▼
MetroPlus Health Plan	67▼	64▼	77	68
Neighborhood Health Providers	73	74	81	72
Total Care	75	76	71▼	65▼
UnitedHealthcare Community Plan	74	75	83	67
Univera Community Health	76	79	88▲	73
WellCare of New York	71	74	82	69
<b>Statewide</b>	<b>75</b>	<b>76</b>	<b>81</b>	<b>71</b>
<b>National</b>	<b>76</b>	<b>80</b>	<b>80</b>	<b>74</b>

### LEGEND

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

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

SATISFACTION WITH THE EXPERIENCE OF CARE

Measure	Description (Type of Insurance)
<b>Collaborative Decision Making</b>	The percentage of members responding 'definitely yes' when asked a set of questions to identify if they made healthcare decisions with their doctor. Questions asked whether a doctor talked about the pros and cons of each choice for treatment or healthcare, and when there was more than one choice for treatment or healthcare, if a doctor asked which choice was best for the member? (CO, PPO, MA)
<b>Care Coordination</b>	The percentage of members who responded "usually" or "always" when asked how often their personal doctor seemed informed and up-to-date about care they received from other doctors or health providers. (CO, PPO, MA)
<b>Wellness Discussion</b>	The percentage of members who responded "usually" or "always" when asked how often their doctor or other health provider discussed things to do to prevent illness. (CO, PPO, MA)
<b>Rating of Overall Healthcare</b>	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. (CO, PPO, MA)
<b>Getting Needed Counseling or Treatment</b>	The percentage of members who responded "usually" or "always" when asked how often it was easy to get counseling or treatment for a personal or family problem through their health plan. (MA)
<b>Rating of Counseling or Treatment</b>	The percentage of members responding 8, 9, or 10 on a scale of 0 to 10, where 0 is the worst counseling or treatment possible and 10 is the best counseling or treatment possible. (MA)

Health Plan	Satisfaction with the Experience of Care			Rating of Overall Health Care
	Collaborative Decision Making	Care Coordination	Wellness Discussion	
Aetna	61	73	57	79
CDPHP	63	79	64	80
Easy Choice Health Plan of NY	56	71▼	54▼	56▼
Empire	58	80	53▼	77
Excellus BlueCross BlueShield	64	79	63	76
HIP (EmblemHealth)	61	82	59	70
HealthNow New York Inc.	58	82	67	86▲
Independent Health	58	81	64	78
MVP	62	88▲	65	79
Oxford	64	78	61	71
Univera Healthcare	63	84	65	78
<b>Statewide</b>	<b>61</b>	<b>80</b>	<b>61</b>	<b>75</b>
<b>National</b>	<b>*</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

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

Health Plan	Satisfaction with the Experience of Care			
	Collaborative Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Health Care
Aetna Life Insurance Company – New York	65	74	57	77
CDPHP Universal Benefits, Inc.	65	81	63▲	85▲
Connecticut General Life Insurance Company – NY	58	84	57	73
Empire HealthChoice HMO, Inc.	61	85	48	73
Excellus BlueCross BlueShield	54▼	78	60	76
GHI (EmblemHealth)	64	83	52	76
HIP (EmblemHealth)	54	76	62	70▼
MVP Preferred PPO	64	83	59	79
Oxford Health Insurance Company, Inc. – New York	68	78	57	74
UnitedHealthcare Insurance Company of New York, Inc.	63	82	61	84▲
<b>Statewide</b>	<b>62</b>	<b>80</b>	<b>58</b>	<b>76</b>
<b>National</b>	<b>*</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

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

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

Health Plan	Satisfaction with the Experience of Care					
	Collaborative Decision Making	Care Coordination	Wellness Discussion	Rating of Overall Health Care	Getting Needed Counseling or Treatment	Rating of Counseling or Treatment
Affinity Health Plan	64▲	67	60	69	72	63
Amerigroup New York	61	60	55	58▼	49▼	58
CDPHP	65▲	77▲	61▲	76▲	76	73▲
Excellus BlueCross BlueShield	62	75▲	61▲	73▲	81▲	57
Fidelis Care New York	52	64	56	70	74	64
HIP (EmblemHealth)	54	67	56	63	71	54
Health Plus	51	62	48▼	65	67	57
HealthNow New York Inc.	61	74	56	64	72	61
Healthfirst PHSP, Inc.	58	71	54	65	56▼	56
Hudson Health Plan	58	71	59	72▲	80▲	66
Independent Health's MediSource	53	74▲	60	67	76	61
MVP	59	64	60▲	69	76	54
MetroPlus Health Plan	56	64	56	62	76	63
Neighborhood Health Providers	60	70	57	66	77	61
Total Care	57	71	51	62	67	49▼
UnitedHealthcare Community Plan	57	61▼	45▼	66	71	55
Univera Community Health	61	70	54	66	76	65
WellCare of New York	52	70	48▼	65	60	50
<b>Statewide</b>	<b>58</b>	<b>68</b>	<b>55</b>	<b>67</b>	<b>71</b>	<b>59</b>
<b>National</b>	<b>*</b>	<b>*</b>	<b>*</b>	<b>70</b>	<b>*</b>	<b>*</b>

### LEGEND

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

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

## COMMERCIAL HMO

Measure	2009	2010	2011
Getting Needed Care	84	85	84
Claims Processing	85	85	84
Care Coordination	79	80	80
Plan Information on Cost	66	67	61
Customer Service	84	83	84
Collaborative Decision Making	60	61	61
Rating of Overall Healthcare	74	75	75
Getting Care Quickly	87	87	86
Rating of Health Plan	59	62	64
Wellness Discussion	60	60	61

## COMMERCIAL PPO

Measure	2009	2010	2011
Getting Needed Care	85	86	87
Claims Processing	86	84	86
Care Coordination	77	79	80
Plan Information on Cost	62	63	64
Customer Service	80	81	85
Collaborative Decision Making	60	64	62
Rating of Overall Healthcare	74	75	76
Getting Care Quickly	87	87	87
Rating of Health Plan	56	60	63
Wellness Discussion	57	58	58

## MEDICAID

Measure	2009	2010	2011
Getting Needed Care	74	Rotated	75
Care Coordination	74	Rotated	68
Customer Service	80	Rotated	81
Collaborative Decision Making	57	Rotated	58
Getting Needed Counseling or Treatment	66	Rotated	71
Rating of Overall Healthcare	65	Rotated	67
Getting Care Quickly	77	Rotated	76
Rating of Treatment or Counseling	57	Rotated	59
Rating of Health Plan	69	Rotated	71
Wellness Discussion	52	Rotated	55

### Looking for more information on access to health services?

The following measures are published in the 2012 Managed Care Plan Access and Utilization Report at the link:

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

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

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



An HIV Special Needs Plan (HIV SNP) is a health plan for Medicaid enrollees living with HIV/AIDS and their eligible children. (Children are not required to have HIV or AIDS.) Members who join an HIV SNP choose a SNP primary care provider – a doctor or nurse practitioner (NP) – who will take care of most of their health care needs. All HIV SNP primary care providers are "HIV specialists", meaning that these doctors and NPs have special training to treat people with HIV/AIDS. Members enrolled in an HIV SNP are eligible for all the same services they are entitled to under traditional Medicaid, as well as specialized services including care coordination, treatment adherence services, and HIV prevention and risk-reduction education. HIV SNPs are responsible for helping to coordinate all medical services; services not covered by regular Medicaid that support wellness (such as psycho-social case management, housing, counseling, peer support, legal assistance, etc.); special programs for substance abusers, homeless people, and families affected by HIV/AIDS; and services that are "carved out" or paid for through fee-for-service Medicaid, like long-term care and hospice.

Since 2008, the NYSDOH has collected a limited set of data about the quality of care received by members enrolled in HIV SNPs as part of the annual Quality Assurance Reporting Requirements (QARR). The 2011 data represented the first year of complete QARR reporting for HIV SNPs. There are

a few quality measures that are not applicable to people living with HIV/AIDS and these measures are not collected for the HIV SNPs. Like QARR data for Medicaid managed care plans, these data requirements are based on standardized HEDIS and CAHPS measures, and provide information on plan performance with respect to primary and preventive health visits, access to health care, behavioral health, and medical management of select chronic diseases. Information about consumer satisfaction is also contained in this section. In 2011, members enrolled in HIV SNPs were surveyed about their experiences with healthcare along with members enrolled in Medicaid managed care plans.

The tables in the following section contain measures of quality of care performance or consumer satisfaction measures with results for the statewide average for SNPs. (Please refer to the appropriate section in this report for more information about the individual measures). As this is the first year of full QARR data from HIV SNPs, the results are shown only in aggregate. There are differences in the populations enrolled in HIV SNPs and Medicaid Managed care which should be kept in mind when comparing to other Medicaid managed care results. HIV SNPs operate solely in NYC and do not receive auto-assigned members while Medicaid managed care results are from throughout New York State and include auto-assigned members.

**PROVIDER NETWORK**

<b>Measure</b>	<b>2011 HIV SNP Statewide Average</b>
<b>Board Certified Family Medicine</b>	81
<b>Board Certified Internal Medicine</b>	80
<b>Board Certified OB/GYN</b>	74
<b>Board Certified Pediatrics</b>	75
<b>Satisfaction with Provider Communication</b>	93
<b>Satisfaction with Personal Doctor</b>	86
<b>Satisfaction with Specialist</b>	64

**WOMEN'S HEALTH**

<b>Measure</b>	<b>2011 HIV SNP Statewide Average</b>
<b>Breast Cancer Screening</b>	70
<b>Cervical Cancer Screening</b>	82

## ADULT HEALTH

Measure	HIV SNP 2011 Statewide Average
Colon Cancer Screening	60
Adult BMI Assessment**	82
Flu Shot for Adults	72
Use of Imaging Studies for Low Back Pain	81
Advising Smokers to Quit	91
Discussing Smoking Cessation Medications	82
Discussing Smoking Cessation Strategies	72
Controlling High Blood Pressure**	59
Use of Appropriate Medications for People with Asthma (Ages 19-64)	71
Appropriate Asthma Medications- 3+ Controllers (Ages 19-64)	64
Monitoring Diabetes - HbA1c Testing	92
Monitoring Diabetes - Lipid Profile	95
Monitoring Diabetes - Dilated Eye Exam	52
Monitoring Diabetes - Nephropathy Monitoring	78
Monitoring Diabetes - Received All Tests	42
Managing Diabetes Outcomes -Poor HbA1c Control	31
Managing Diabetes Outcomes - HbA1C Control (<8.0%)	63
Managing Diabetes Outcomes - HbA1C Control (<7.0%) for Selected Populations	49
Managing Diabetes Outcomes - Lipids Controlled (<100 mg/dL)	53
Managing Diabetes Outcomes - Blood pressure controlled (<140/90 mm Hg)	69
Managing Diabetes Outcomes - HbA1c and Lipids Controlled	42
Annual Monitoring for Patients on Persistent Medications- ACE Inhibitors/ARBs	99
Annual Monitoring for Patients on Persistent Medications- Digoxin	—
Annual Monitoring for Patients on Persistent Medications- Diuretics	99
Annual Monitoring for Patients on Persistent Medications- Anticonvulsant	82
Annual Monitoring for Patients on Persistent Medications- Combined Rate	98
Managing HIV/AIDS – Engaged in Care	90
Managing HIV/AIDS – Viral Load Monitoring	84
Managing HIV/AIDS – Syphilis Screening	78

— Sample size too small to report.

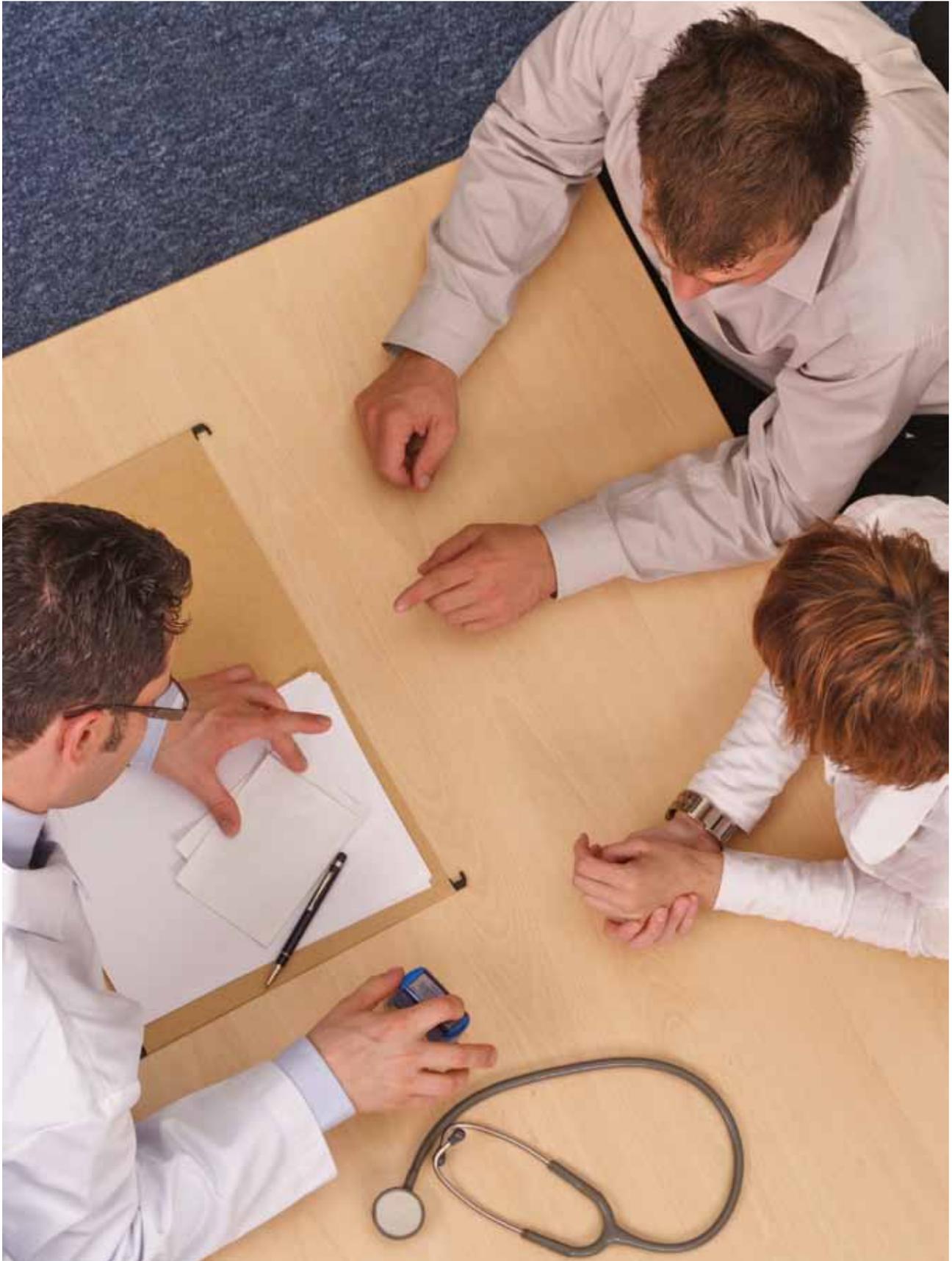
\*\* Rotated Measure. Data is from 2010

**BEHAVIORAL HEALTH**

Measure	2011 HIV SNP Statewide Average
Antidepressant Medication Management – Acute Phase	53
Antidepressant Medication Management – Continuation Phase	32
Follow-up After Hospitalization for Mental Illness – 7 Days	34
Follow-up After Hospitalization for Mental Illness – 30 Days	51

**SATISFACTION WITH CARE**

Measure	2011 HIV SNP Statewide Average
Getting Care Needed	74
Getting Care Quickly	84
Customer Service	81
Rating of Health Plan	70
Collaborative Decision Making	72
Care Coordination	83
Wellness Discussion	77
Rating of Overall Healthcare	77
Getting Needed Counseling or Treatment	78
Rating of Counseling or Treatment	68



## INTERPRETING THE MEASURES

### Plan-specific Rates

The rates reported as part of the 2011 Managed Care Plan Performance Report are displayed as rates per 100 enrollees (percentages). To calculate a plan's rate for a measure, the numerator is divided by the denominator and then multiplied by 100. Plan-specific data are excluded from the tables as a result of any of the following methodological limitations:

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

### Diabetes Composite Measures

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

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

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

### PERINATAL CARE

NYSDOH calculates several measures for perinatal care using data submitted by the health plans and data contained in the Department's Vital Statistics (VS) birth file. The data are put through a matching process prior to calculation of the measures. In 2004, data elements on the VS file were modified. Because not all data elements were captured by the New York City VS birth file, two different risk-adjusted low birthweight (LBW) models were developed. Results from New York City (NYC) and Rest of State (ROS) are separate and cannot be compared.

### Risk-Adjustment Factors

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

### Low Birthweight Methodology

To compute the risk-adjusted low birthweight (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 (<2,500 grams) or “not LBW”. The independent variables used in the methodology included:

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

### Primary Cesarean Section Methodology

To compute the risk-adjusted PCS rates, a logistic regression model was developed. The model predicted a binary response for PCS, i.e., all births were designated as either PCS or not PCS .

The independent variables used in the methodology included:

- maternal age (less than 18, 18-19, 20-29, 30 and over)
- education (less than high school, high school, any college)
- dx of diabetes (yes, no)
- dx of gestational diabetes (yes, no)
- dx of pre-existing hypertension (yes, no)
- dx of pregnancy related hypertension (yes, no)
- birthweight greater than 4,000g (yes, no)
- birthweight between 500g and 1,500g (yes, no)
- race/ethnicity (white, black, Hispanic, other)
- parity (none, 1 or more previous live births)
- resident of New York City (yes, no)
- presence of infection (yes, no)
- breech presentation (yes, no)
- pre-pregnancy BMI (underweight, normal weight, overweight or obese)
- Medicaid aid category (ADC, Safety Net, MA, SSI, FHP)
- eclampsia (yes, no)
- abruption placenta (yes, no)
- weeks gestation of pregnancy (LT 33, 33-35, 36-38, 39+)

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.

### 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.

