



HEDIS MY 2022 Healthy Louisiana Performance Measure Results and Analysis

December 2023



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1. Introduction

In accordance with the Centers for Medicare & Medicaid Services' (CMS') external quality review (EQR) protocols¹⁻¹, the Louisiana Department of Health (LDH) contracted with Health Services Advisory Group, Inc. (HSAG) to validate performance measures reported annually by the Healthy Louisiana Medicaid managed care organizations (MCOs) operating in the State of Louisiana.

This report summarizes the methods and findings of HSAG's analysis of the Healthcare Effectiveness Data and Information Set (HEDIS)¹⁻² measurement year (MY) 2022 data submitted by the five MCOs that serve Medicaid members in Louisiana. A total of 47 measures, comprising 89 measure indicators (i.e., numerators), were selected for analysis based on the Healthy Louisiana designated measure reporting list. The measures selected for reporting are the measures required by LDH and appear in the Performance Measure Submission Guide for MY 2022 reporting.

The following MCOs are included in this analysis:

- Aetna Better Health (ABH)
- AmeriHealth Caritas Louisiana (ACLA)
- Healthy Blue (HBL)
- Louisiana Healthcare Connections (LHCC)
- UnitedHealthcare Community (UHC)

¹⁻¹ Department of Health and Human Services. Centers for Medicare & Medicaid Services. *External Quality Review (EQR) Protocols*, February 2023. Available at: <https://www.medicare.gov/medicaid/quality-of-care/downloads/2023-eqr-protocols.pdf>. Accessed on: Nov 14, 2023.

¹⁻² HEDIS is a registered trademark of NCQA.

2. Methodology

Each MCO provided HSAG with its HEDIS MY 2022 Interactive Data Submission System (IDSS) data, including audit designations and Final Audit Reports (FARs). First, HSAG verified the rates that were deemed reportable via the NCQA HEDIS audit protocol and reviewed the FARs to ensure that they met the NCQA standards. Next, HSAG prepared a Microsoft Excel file documenting each MCO's rates, the HSAG-computed statewide average (SWA), and last year's SWAs. Finally, HSAG included the NCQA MY 2022 Quality Compass²⁻¹ South Central 50th percentile and the National 50th percentile, which served as the benchmarks.

Of the 89 numerators, results are presented in this report for most measures. Eleven numerators not reported in Quality Compass were removed from the respective analyses due to lack of a benchmark. Additionally, while there is a benchmark associated with the *Ambulatory Care* measure, its two numerators were not compared in the analyses since percentage point differences cannot be applied to the measure due to the rates being calculated per 1,000 member months (MM) rather than as percentages.

For *Hemoglobin A1c (HbA1c) Control for Patients With Diabetes—HbA1c Poor Control (>9.0%)*, *Low-Risk Cesarean Delivery*, *Non-Recommended Cervical Screening in Adolescent Females*, and *Plan All-Cause Readmissions* measures, a lower rate is also considered better. None of the MCOs received a not applicable (N/A) audit designation (indicating a small denominator) or a biased rate (BR) audit designation among the measures selected for review.

The SWA for the HEDIS measures was calculated by weighting the relative contribution of each MCO for each measure. In calculating the weighted average for the HEDIS rates, the eligible population for each measure and not the measure denominator was used to weight the MCO rates to mitigate the different methodologies used by the MCOs to calculate the measures. If HSAG had instead used the measure denominator to determine the weighted average, the results might have been biased; those MCOs reporting a rate administratively would have contributed more to the weighted average than those MCOs that used a hybrid data collection methodology, which is based on a sample of the eligible population. MCOs with larger eligible populations are therefore weighted more toward the SWA.

HSAG conducted the following comparisons:

1. For the incentive measures, the HEDIS MY 2022 rates were compared to the LDH-designated target rates at both the statewide level and the MCO level. Differences of at least 0.1 percentage point were noted. Targets were set at:
 - a. **Achievement of the target rates** noted in the Performance Measure Submission Guide (based on 2021 Quality Compass National 50th percentile rates), or better; or
 - b. **Improvement** of the measure by 2 percentage points or more, without rounding, from the HEDIS MY 2021 rates.

²⁻¹ Quality Compass is a registered trademark of NCQA.

2. The HEDIS MY 2022 rates were compared to the MY 2022 Quality Compass National 50th percentile at both the statewide level and MCO level. Differences of at least 2 percentage points were noted.
3. The HEDIS MY 2022 rates were compared to the MY 2022 Quality Compass South Central 50th percentile at both the statewide level and MCO level. Differences of at least 2 percentage points were noted.
4. The HEDIS MY 2022 rates were compared to the HEDIS MY 2021 rates at both the statewide level and MCO level. Differences of at least 0.1 percentage point were noted.

Comparisons for measures are summarized in Table 3-1 through Table 3-4, while specific results are presented in Appendix A: Supplemental Tables.

Comparisons to the LDH Target Rates

There were 11 HEDIS incentive measures, encompassing 11 numerators. Table 3-1 displays a summary of the results for each MCO and the SWA for the incentive measures.

Table 3-1—Summary of Comparisons Between HEDIS Incentive Measures and Target/Improvement Rates

MCO	MY 2022 Incentive Measure Target/Improvement Rates		
	Met Target or Improved by 2 Percentage Points	Target and Improvement Not Met by 2 Percentage Points	Total Numerators ¹
ABH	5	6	11
ACLA	6	5	11
HBL	5	6	11
LHCC	6	5	11
UHC	7	4	11
Statewide Average	5	6	11

¹Total numerators are based on the count of measure indicators.

Table A-1 presents the specific results of the HEDIS incentive measures corresponding to Table 3-1 and displays the MCOs and SWAs that met the target rates or improved by 2 percentage points or more from the HEDIS MY 2021 rates, or did not meet the target rates and improved by 2 percentage points or more from the HEDIS MY 2021 rates.

As displayed in Table A-1, among the incentive measures, the HEDIS MY 2022 SWA met the target rate or improved by 2 percentage points for the following five measures:

- *Immunization Status for Adolescents (IMA)—Combo 2*
- *Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)*
- *HbA1c Control for Patients With Diabetes (HBD)—HbA1c Poor Control (>9.0%)*
- *Controlling High Blood Pressure (CBP)*
- *Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (NSV)*

The SWA did not meet the target rate or improve by 2 percentage points for the following six measures:

- *Childhood Immunization Status (CIS)—Combo 3*
- *Colorectal Cancer Screening (COL)*
- *Cervical Cancer Screening (CCS)*
- *Follow-Up After Hospitalization for Mental Illness (FUH)—Within 30 Days of Discharge*
- *Follow-Up After Emergency Department Visit for Mental Illness (FUM)—Within 30 Days of Discharge*
- *Human Immunodeficiency Virus (HIV) Viral Load Suppression (HIV)*

All MCOs and the SWA collectively met the target rate or improved by 2 percentage points for the following three measures:

- *Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)*
- *HbA1c Control for Patients With Diabetes (HBD)—HbA1c Poor Control (>9.0%)*
- *Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (NSV)*

All MCOs and the SWA collectively did not meet the target rate or improve by 2 percentage points for the following two incentive measures:

- *Colorectal Cancer Screening (COL)*
- *Follow-Up After Hospitalization for Mental Illness (FUH)—Within 30 Days of Discharge*

Table A-2 presents the results for the HEDIS incentive measures itemized by MCO. Table A-2 also displays whether each MCO met the corresponding target rate published in the Performance Measure Submission Guide for MY 2022 reporting (based on the 2021 Quality Compass National 50th percentile) and/or whether the MCO's HEDIS MY 2022 rate improved by at least 2 percentage points compared to its HEDIS MY 2021 rate. Among the MCOs, overall measure rate results were as follows:

- MCO met both the improvement and achievement target for the measure: 27 percent
- MCO did not meet either the improvement or the achievement target for the measure: 47 percent
- MCO met the improvement target only for the measure: 11 percent
- MCO met the achievement target only for the measure: 15 percent

Comparisons to the Quality Compass National 50th Percentile

MCO results were compared to the MY 2022 Quality Compass “National—All LOBs (Excluding Preferred Provider Organizations (PPOs) and Exclusive Provider Organizations (EPOs))” 50th Percentile Benchmark. Table 3-2 displays a summary of the results for each MCO and the SWA. Counts represent each measure indicator, itemized by numerator; this analysis included 76 numerators. Of the five MCOs, UHC had the most rates that exceeded the benchmark by at least 2 percentage points above the Quality Compass National Benchmark. In addition, ABH had the most rates below the benchmark by at least 2 percentage points, followed by LHCC and HBL. Thirteen of the SWAs surpassed the benchmark by at least 2 percentage points, while 29 were below the benchmark by at least 2 percentage points.

Table 3-2—Comparisons Between HEDIS and Quality Compass National Benchmarks by Percentage Point Difference

MCO	MY 2022 Quality Compass National 50th Percentile ^{2,3}					Total Numerators ¹
	≥ 2 Percentage Points Below	0.1–2 Percentage Points Below	No Difference	0.1–2 Percentage Points Above	≥ 2 Percentage Points Above	
ABH	48	8	2	6	12	76
ACLA	26	18	2	13	17	76
HBL	32	13	2	18	11	76
LHCC	35	14	1	10	16	76
UHC	25	11	4	7	29	76
Statewide Average	29	16	3	15	13	76

¹Total numerators are based on the count of measure indicators.

²These comparisons excluded HIV, LRCD/previously NSV, CCS, two numerators of AMB, two numerators of DSF-E, Self-Reported Overall Health (Adult) and (Child), Self-Reported Overall Mental or Emotional Health (Adult) and (Child), and two numerators of PCR since Quality Compass does not contain a 50th Percentile Benchmark for these measures.

³SWAs for the applicable Consumer Assessment of Healthcare Providers and Systems (CAHPS)³⁻¹ measures were extracted from the NCQA Quality Compass Statewide Benchmarks: Average Rates.

Table A-3 presents the measure-specific results for the incentive and non-incentive HEDIS measures, and the MCOs and SWAs that showed a rate 2 percentage points higher or lower than the Quality Compass National Benchmark. Among the 11 incentive measures, four MCOs and the SWA were at least 2 percentage points higher than the benchmark for the following measure:

- *Immunization Status for Adolescents (IMA)—Combo 2*

³⁻¹ CAHPS is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Among the non-incentive HEDIS measures, all five MCOs and the SWA were at least 2 percentage points higher than the benchmark for the following measures:

- *Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)*
- *Chlamydia Screening in Women (CHL)*
- *Breast Cancer Screening (BCS)*
- *Initiation and Engagement of Substance Use Disorder (SUD) Treatment (IET)—Initiation of SUD Treatment and Engagement of SUD Treatment*

Comparisons to the Quality Compass South Central 50th Percentile

MCO results were compared to the MY 2022 Quality Compass “South Central—All LOBs (Excluding PPOs and EPOs)” 50th Percentile Benchmark. Table 3-3 displays a summary of the results for each MCO and the SWA. Counts represent each measure indicator, itemized by numerator; this analysis included 76 numerators. Of the five MCOs, UHC had the most rates that exceeded the benchmark by at least 2 percentage points above the Quality Compass South Central benchmark. In addition, ABH had the most rates below the benchmark by at least 2 percentage points, followed by LHCC. Five of the SWAs surpassed the benchmark by at least 2 percentage points, while 46 were below the benchmark by at least 2 percentage points.

Table 3-3—Comparisons Between HEDIS and Quality Compass South Central Benchmarks by Degree

MCO	MY 2022 Quality Compass South Central 50th Percentile ^{2,3}					
	≥ 2 Percentage Points Below	0.1–2 Percentage Points Below	No Difference	0.1–2 Percentage Points Above	≥ 2 Percentage Points Above	Total Numerators ¹
ABH	51	5	3	4	13	76
ACLA	41	9	7	12	7	76
HBL	44	13	2	8	9	76
LHCC	50	10	3	9	4	76
UHC	33	20	5	4	14	76
Statewide Average	46	15	0	10	5	76

¹Total numerators are based on the count of measure indicators.

²These comparisons excluded HIV, LRCO/previously NSV, CCS, two numerators of AMB, DSF-E, Self-Reported Overall Health (Adult) and (Child), Self-Reported Overall Mental or Emotional Health (Adult) and (Child), and two numerators of PCR since Quality Compass does not contain a 50th Percentile Benchmark for these measures.

³SWAs for the applicable CAHPS measures were extracted from the NCQA Quality Compass Statewide Benchmarks: Average Rates.

Table A-4 presents the measure-specific results for the incentive and non-incentive HEDIS measures, and the MCOs and SWAs that showed a rate at least 2 percentage points higher or lower than the Quality Compass South Central benchmark. Among the 11 incentive measures, four MCOs and the SWA were at least 2 percentage points higher than the benchmark for the following measure:

- *HbA1c Control for Patients With Diabetes (HBD)—HbA1c Poor Control (>9.0%)*

Among the non-incentive HEDIS measures, all five MCOs and the SWA were at least 2 percentage points higher than the benchmark for the following measures:

- *Chlamydia Screening in Women (CHL)*
- *Breast Cancer Screening (BCS)*
- *Initiation and Engagement of SUD Treatment (IET)—Initiation of SUD Treatment and Engagement of SUD Treatment*

Comparison to Last Year's Rates

MCO and SWA results were compared to last year's HEDIS rates. Table 3-4 summarizes the comparison results between HEDIS MY 2022 and HEDIS MY 2021 by MCO and the SWA. Counts represent each measure indicator, itemized by numerator; this analysis included 76 numerators. Any difference of at least 0.1 percentage point was noted in the results. Of the five MCOs, ACLA, LHCC, and UHC showed the most improvement in rates—by at least 0.1 percentage point for 21 measures, and UHC by greater than 2 percentage points for 34 measures. ABH and HBL had the most rates that fell below the benchmark by at least 0.1 percentage point for 19 measures, and ABH by greater than 2 percentage points for 20 measures. Among the SWAs, 30 measures improved by at least 0.1 percentage point and 23 measures by greater than 2 percentage points, while 11 measures declined by at least 0.1 percentage point and 11 measures by greater than 2 percentage points.

The two measures that displayed the largest decrease in the SWA were *Colorectal Cancer Screening (COL)*, which decreased by 4.88 percentage points, and *Pharmacotherapy for Opioid Use Disorder (POD)*, which decreased by 4.05 percentage points (data not shown). The two measures that displayed the largest improvement in the SWA were *Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)—Within 30 Days*, which increased by 13.96 percentage points, and *Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)*, which increased by 9.64 percentage points.

Table 3-4—Comparisons Between HEDIS MY 2022 and HEDIS MY 2021

MCO	HEDIS MY 2022 Compared to HEDIS MY 2021 ²					Total Numerators ¹
	≥ 2 Percentage Points Below	0.1–2 Percentage Points Below	No Difference	0.1–2 Percentage Points Above	≥ 2 Percentage Points Above	
ABH	20	19	1	15	21	76
ACLA	14	10	1	21	30	76
HBL	18	19	2	14	23	76
LHCC	13	15	1	21	26	76
UHC	12	9	0	21	34	76
Statewide Average	11	11	1	30	23	76

¹Total numerators are based on the count of measure indicators.

SWAs for the applicable CAHPS measures were extracted from the NCQA Quality Compass Statewide Benchmarks: Average Rates.

Table A-5 displays the incentive and non-incentive HEDIS measures, and the MCOs and SWAs that showed at least a 0.1 percentage point increase in rates from HEDIS MY 2021 to HEDIS MY 2022, as well as MCOs and SWAs that showed at least a 0.1 percentage point decrease in rates over time.

Table A-6 displays the incentive and non-incentive HEDIS measures, and the MCOs and SWAs that showed at least a 2 percentage point increase in rates from HEDIS MY 2021 to HEDIS MY 2022, as well as MCOs and SWAs that showed at least a 2 percentage point decrease in rates over time.

Appendix A: Supplemental Tables

Table A-1—HEDIS MY 2022 Incentive Measure Rates Compared to Target: Quality Compass or Improvement in Rates

HEDIS Incentive Measure ¹	Met Target or Improved	Target and Improvement Not Met
<i>Childhood Immunization Status (CIS)—Combo 3</i>	ACLA, LHCC	ABH, HBL, UHC, SWA
<i>Immunization Status for Adolescents (IMA)—Combo 2</i>	ACLA, HBL, LHCC, UHC, SWA	ABH
<i>Colorectal Cancer Screening (COL)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Cervical Cancer Screening (CCS)</i>	UHC	ABH, ACLA, HBL, LHCC, SWA
<i>Follow-Up After Hospitalization for Mental Illness (FUH)—Within 30 Days of Discharge</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)—Within 30 Days of Discharge</i>	ABH, UHC	ACLA, HBL, LHCC, SWA
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>HbA1c Control for Patients With Diabetes (HBD)—HbA1c Poor Control (>9.0%)*</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Controlling High Blood Pressure (CBP)</i>	ABH, ACLA, LHCC, UHC, SWA	HBL
<i>HIV Viral Load Suppression (HIV)</i>	HBL	ABH, ACLA, LHCC, UHC, SWA
<i>Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (NSV)*</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	

* A lower rate indicates better performance.

¹ Results correspond to Table 3-1, indicating achievement of the target rates noted in the current LA Performance Measure Submission Guide (2021 Quality Compass National 50th percentile rate) or improvement of the measure by 2 percentage points or more from the HEDIS MY 2021 rates.

Table A-2—HEDIS MY 2022 Incentive Measure Rates Compared to Louisiana Department of Health Targets

HEDIS Incentive Measure ¹	ABH	ACLA	HBL	LHCC	UHC	Achievement Target ²
<i>Childhood Immunization Status (CIS)—Combo 3</i>	No	Yes—I	No	Yes—I	No	67.88%
<i>Immunization Status for Adolescents (IMA)—Combo 2</i>	No	Yes—A	Yes—A	Yes—A	Yes—A	36.74%
<i>Colorectal Cancer Screening (COL)</i>	No	No	No	No	No	39.42%
<i>Cervical Cancer Screening (CCS)</i>	No	No	No	No	Yes—A	59.12%
<i>Follow-Up After Hospitalization for Mental Illness (FUH)—Within 30 Days of Discharge</i>	No	No	No	No	No	60.08%
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)—Within 30 Days of Discharge</i>	Yes—I	No	No	No	Yes—I	53.54%
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>	Yes—Both	Yes—Both	Yes—Both	Yes—Both	Yes—Both	21.31%
<i>HbA1c Control for Patients With Diabetes (HBD)—HbA1c Poor Control (>9.0%)*</i>	Yes—Both	Yes—Both	Yes—Both	Yes—I	Yes—Both	43.19%
<i>Controlling High Blood Pressure (CBP)</i>	Yes—Both	Yes—Both	No	Yes—I	Yes—Both	55.35%
<i>HIV Viral Load Suppression (HIV)</i>	No	No	Yes—A	No	No	80.67%
<i>Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (NSV)*</i>	Yes—A	Yes—Both	Yes—Both	Yes—A	Yes—Both	27.67%

* A lower rate indicates better performance.

¹ Results correspond to Table 3-1. Below is the key representing whether the MCO met the achievement target rate and/or the MCO’s HEDIS MY 2021 rate improved by at least 2 percentage points compared to the HEDIS MY 2021 rate.

- Yes—Both = MCO met both the improvement and achievement target.
- Yes—A = MCO met the achievement target only.
- Yes—I = MCO met the improvement target only.
- No = MCO did not meet either the improvement or the achievement target.

² The achievement targets are based on 2021 Quality Compass data and noted in the current LA Performance Measure Submission Guide, and are the same for all MCOs. The improvement target varies by MCO according to the HEDIS MY 2021 results.

Table A-3—HEDIS MY 2022 Rates Compared to MY 2022 Quality Compass National 50th Percentile: 2 Percentage Point Differences

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
HEDIS Incentive Measures		

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
Childhood Immunization Status (CIS)		
<i>Combo 3</i>	ABH, LHCC	
Immunization Status for Adolescents (IMA)		
<i>Combo 2</i>	ABH	ACLA, HBL, LHCC, UHC, SWA
Colorectal Cancer Screening (COL) (QC—N/A)	N/A	N/A
Cervical Cancer Screening (CCS)	ABH, HBL	UHC
Follow-Up After Hospitalization for Mental Illness (FUH)		
<i>Within 30 days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
Follow-Up After Emergency Department Visit for Mental Illness (FUM)		
<i>Within 30 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)		
<i>Within 30 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
HbA1c Control for Patients With Diabetes (HBD)		
<i>HbA1c Poor Control (>9.0%)*</i>	LHCC	ABH, UHC
Controlling High Blood Pressure (CBP)	HBL, LHCC, SWA	
HIV Viral Load Suppression (HIV) (QC—N/A)	N/A	N/A
Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (LRCD/previously NSV)* (QC—N/A)	N/A	N/A

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
Other HEDIS Measures		
<i>Child and Adolescent Well-Care Visits (WCV)</i>		
<i>3–11 years</i>	ABH, HBL	
<i>12–17 years</i>	ABH	ACLA, LHCC, UHC, SWA
<i>18–21 years</i>		ACLA, LHCC, UHC, SWA
<i>Total</i>	ABH, HBL	
<i>Well-Child Visits in the First 30 Months of Life (W30)</i>		
<i>First 15 Months</i>		UHC
<i>15 Months–30 Months</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Adults’ Access to Preventive/Ambulatory Health Services (AAP)</i>		
<i>20–44 years</i>	ABH	LHCC, UHC
<i>45–64 years</i>	ABH	UHC
<i>65 years and older</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Total</i>	ABH	UHC
<i>Ambulatory Care (AMB)</i>		
<i>Outpatient Visits/1,000 MM</i>	N/A	N/A
<i>Emergency Department Visits/1,000 MM*</i>	N/A	N/A
<i>Follow-Up After Hospitalization for Mental Illness (FUH)</i>		
<i>Within 7 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)</i>		
<i>Within 7 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>		
<i>Within 7 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Plan All-Cause Readmissions (PCR)</i>		
<i>Observed Readmission (Num/Den) (QC—N/A)</i>	N/A	N/A
<i>Expected Readmissions Rate (QC—N/A)</i>	N/A	N/A
<i>Observed-to-Expected Ratio (Observed Readmissions/Expected Readmissions)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan, 8+9+10)</i>		ACLA, HBL, UHC, SWA
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan-General Population, 8+9+10)</i>	HBL	UHC
<i>Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)</i>		
<i>Depression Screening (Total) (QC—N/A)</i>	N/A	N/A
<i>Follow-Up on Positive Screen (Total) (QC—N/A)</i>	N/A	N/A
<i>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)</i>	ABH, HBL	
<i>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)</i>	ABH, HBL	UHC
<i>Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)</i>		
<i>Blood Glucose Testing</i>	LHCC	
<i>Cholesterol Testing</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Blood Glucose and Cholesterol Testing</i>	ABH, ACLA, LHCC, UHC, SWA	

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
<i>Prenatal and Postpartum Care (PPC)</i>		
<i>Prenatal Care</i>	ABH, LHCC	
<i>Postpartum Care</i>	LHCC	
<i>Lead Screening in Children (LSC)</i>		ACLA, UHC
<i>Childhood Immunization Status (CIS)</i>		
<i>DTaP</i>	ABH, LHCC, UHC, SWA	
<i>IPV</i>	ABH	ACLA, LHCC
<i>MMR</i>	ABH	
<i>HiB</i>	ABH	
<i>Hepatitis B</i>	ABH	ACLA, LHCC, SWA
<i>VZV</i>	ABH	
<i>Pneumococcal conjugate</i>	ABH, LHCC, SWA	
<i>Hepatitis A</i>	ABH	
<i>Rotavirus</i>	ABH, ACLA, HBL, UHC, SWA	
<i>Influenza</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Combo 7</i>	ABH, LHCC, SWA	
<i>Combo 10</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Immunization Status for Adolescents (IMA)</i>		
<i>Meningococcal</i>	ABH	LHCC, UHC
<i>Tdap/Td</i>	ABH	
<i>HPV</i>	ABH	ACLA, HBL, LHCC, UHC, SWA
<i>Combo 1</i>	ABH	ACLA, LHCC, UHC, SWA
<i>Flu Vaccinations for Adults Ages 18 to 64 (FVA)</i>	ABH, HBL, LHCC, SWA	

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)		
<i>BMI Percentile Documentation</i>	ACLA, HBL, LHCC, SWA	UHC
<i>Counseling for Nutrition</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Counseling for Physical Activity</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
Chlamydia Screening in Women (CHL)		
<i>Total</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
Breast Cancer Screening (BCS)		ABH, ACLA, HBL, LHCC, UHC, SWA
Medical Assistance With Smoking and Tobacco Use Cessation (MSC)		
<i>Advising Smokers and Tobacco Users to Quit</i>	UHC	ACLA
<i>Discussing Cessation Medications</i>	ABH, LHCC, UHC	ACLA
<i>Discussing Cessation Strategies</i>	LHCC	ACLA, HBL, UHC
Statin Therapy for Patients With Cardiovascular Disease (SPC)		
<i>Received Statin Therapy: Total</i>		
<i>Statin Adherence 80%: Total</i>	ACLA, HBL, UHC, SWA	ABH, LHCC
HbA1c Control for Patients With Diabetes (HBD)		
<i>HbA1c control (<8.0%)</i>	LHCC	ABH, UHC
Eye Exam for Patients With Diabetes (EED)		HBL, UHC
Blood Pressure Control for Patients With Diabetes (BPD)	ABH, ACLA, LHCC, SWA	UHC
Pharmacotherapy for Opioid Use Disorder (POD)	HBL, UHC	ABH, LHCC
Initiation and Engagement of SUD Treatment (IET)		

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
<i>Initiation of SUD Treatment</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Engagement of SUD Treatment</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)</i>		ABH, HBL, UHC, SWA
<i>Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Follow-Up Care for Children Prescribed ADHD Medication (ADD)</i>		
<i>Initiation Phase</i>	ACLA, HBL	
<i>Continuation Phase</i>	ACLA	ABH, UHC
<i>Antidepressant Medication Management (AMM)</i>		
<i>Effective Acute Phase Treatment</i>	ACLA, HBL, LHCC, UHC, SWA	
<i>Effective Continuation Phase Treatment</i>	ACLA, HBL, LHCC, UHC, SWA	ABH
<i>Appropriate Treatment for Children With Upper Respiratory Infection (URI)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Use of Imaging Studies for Low Back Pain (LBP)</i>	ABH, UHC	
<i>Non-Recommended Cervical Screening in Adolescent Females (NCS)*</i>		UHC
<i>Self-Reported Overall Health (Adult) (QC—N/A)</i>	N/A	N/A
<i>Self-Reported Overall Health (Child) (QC—N/A)</i>	N/A	N/A

Measures ¹	At Least 2 Percentage Points Below Quality Compass National	At Least 2 Percentage Points Above Quality Compass National
<i>Self-Reported Overall Mental or Emotional Health (Adult) (QC—N/A)</i>	N/A	N/A
<i>Self-Reported Overall Mental or Emotional Health (Child) (QC—N/A)</i>	N/A	N/A

* A lower rate indicates better performance.

¹ Results correspond to Table 3-2. Measures that are marked QC—N/A were excluded from the comparison because Quality Compass does not contain a 50th Percentile Benchmark for these measures.

ADHD: attention-deficit/hyperactivity disorder; IPV: inactivated polio vaccine; MMR: measles, mumps, and rubella; HiB: haemophilus influenzae type b; HB: hepatitis B; VZV: varicella-zoster virus (chickenpox); BP: blood pressure; HPV: human papillomavirus; BMI: body mass index.

Table A-4—HEDIS MY 2022 Rates Compared to MY 2022 Quality Compass South Central 50th Percentile: 2 Percentage Point Differences

Measures ¹	At Least 2 Percentage Points Below Quality Compass South Central	At Least 2 Percentage Points Above Quality Compass South Central
HEDIS Incentive Measures		
<i>Childhood Immunization Status (CIS)</i>		
<i>Combo 3</i>	ABH	
<i>Immunization Status for Adolescents (IMA)</i>		
<i>Combo 2</i>	ABH	ACLA, HBL, UHC
<i>Colorectal Cancer Screening (COL) (QC—N/A)</i>		
<i>Cervical Cancer Screening (CCS)</i>	ABH, HBL	UHC
<i>Follow-Up After Hospitalization for Mental Illness (FUH)</i>		
<i>Within 30 days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)</i>		
<i>Within 30 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>		
<i>Within 30 Days of Discharge</i>		ABH, ACLA
<i>HbA1c Control for Patients With Diabetes (HBD)</i>		
<i>HbA1c Poor Control (>9.0%)*</i>		ABH, ACLA, HBL, UHC, SWA
<i>Controlling High Blood Pressure (CBP)</i>	HBL	ABH, ACLA, UHC
<i>HIV Viral Load Suppression (HIV) (QC—N/A)</i>	N/A	N/A
<i>Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (LRCD/previously NSV)* (QC—N/A)</i>	N/A	N/A
Other HEDIS Measures		
<i>Child and Adolescent Well-Care Visits (WCV)</i>		

Measures ¹	At Least 2 Percentage Points Below Quality Compass South Central	At Least 2 Percentage Points Above Quality Compass South Central
<i>3–11 years</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>12–17 years</i>	ABH, HBL, SWA	
<i>18–21 years</i>	ABH	UHC
<i>Total</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Well-Child Visits in the First 30 Months of Life (W30)</i>		
<i>First 15 Months</i>		UHC
<i>15 Months–30 Months</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Adults’ Access to Preventive/Ambulatory Health Services (AAP)</i>		
<i>20–44 years</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>45–64 years</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>65 years and older</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Total</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Ambulatory Care (AMB)</i>		
<i>Outpatient Visits/1,000 MM</i>	N/A	N/A
<i>Emergency Department Visits/1,000 MM*</i>	N/A	N/A

Measures ¹	At Least 2 Percentage Points Below Quality Compass South Central	At Least 2 Percentage Points Above Quality Compass South Central
<i>Follow-Up After Hospitalization for Mental Illness (FUH)</i>		
<i>Within 7 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)</i>		
<i>Within 7 Days of Discharge</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>		
<i>Within 7 Days of Discharge</i>		ABH
<i>Plan All-Cause Readmissions (PCR)</i>		
<i>Observed Readmission (Num/Den) (QC—N/A)</i>	N/A	N/A
<i>Expected Readmissions Rate (QC—N/A)</i>	N/A	N/A
<i>Observed-to-Expected Ratio (Observed Readmissions/Expected Readmissions)</i>	ABH, ACLA, HBL, UHC, SWA	
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan, 8+9+10)</i>	ABH, LHCC	HBL, UHC
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan-General Population, 8+9+10)</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)</i>		
<i>Depression Screening (Total) (QC—N/A)</i>	N/A	N/A
<i>Follow-Up on Positive Screen (Total) (QC—N/A)</i>	N/A	N/A
<i>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)</i>		
<i>Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)</i>		

Measures ¹	At Least 2 Percentage Points Below Quality Compass South Central	At Least 2 Percentage Points Above Quality Compass South Central
<i>Blood Glucose Testing</i>	LHCC, SWA	
<i>Cholesterol Testing</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Blood Glucose and Cholesterol Testing</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Prenatal and Postpartum Care (PPC)</i>		
<i>Prenatal Care</i>	ABH, LHCC	
<i>Postpartum Care</i>	LHCC	ABH
<i>Lead Screening in Children (LSC)</i>		ACLA, UHC
<i>Childhood Immunization Status (CIS)</i>		
<i>DTaP</i>	ABH, HBL, LHCC, UHC, SWA	
<i>IPV</i>	ABH	
<i>MMR</i>	ABH, HBL	
<i>HiB</i>	ABH, HBL	
<i>Hepatitis B</i>	ABH	
<i>VZV</i>	ABH	
<i>Pneumococcal conjugate</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Hepatitis A</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Rotavirus</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Influenza</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Combo 7</i>	ABH, ACLA, LHCC, UHC, SWA	

Measures ¹	At Least 2 Percentage Points Below Quality Compass South Central	At Least 2 Percentage Points Above Quality Compass South Central
<i>Combo 10</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Immunization Status for Adolescents (IMA)</i>		
<i>Meningococcal</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Tdap/Td</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>HPV</i>	ABH, LHCC, SWA	
<i>Combo 1</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Flu Vaccinations for Adults Ages 18 to 64 (FVA)</i>	ABH, HBL, LHCC, SWA	
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)</i>		
<i>BMI Percentile Documentation</i>	ABH, ACLA, HBL, LHCC, SWA	
<i>Counseling for Nutrition</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Counseling for Physical Activity</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Chlamydia Screening in Women (CHL)</i>		
<i>Total</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Breast Cancer Screening (BCS)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA

Measures ¹	At Least 2 Percentage Points Below Quality Compass South Central	At Least 2 Percentage Points Above Quality Compass South Central
<i>Medical Assistance With Smoking and Tobacco Use Cessation (MSC)</i>		
<i>Advising Smokers and Tobacco Users to Quit</i>	ABH, LHCC, UHC, SWA	ACLA
<i>Discussing Cessation Medications</i>	ABH, HBL, LHCC, UHC, SWA	
<i>Discussing Cessation Strategies</i>	ABH, LHCC	ACLA
<i>Statin Therapy for Patients With Cardiovascular Disease (SPC)</i>		
<i>Received Statin Therapy: Total</i>		
<i>Statin Adherence 80%: Total</i>	HBL, UHC	ABH, LHCC
<i>HbA1c Control for Patients With Diabetes (HBD)</i>		
<i>HbA1c control (<8.0%)</i>	LHCC	ABH, HBL, UHC
<i>Eye Exam for Patients With Diabetes (EED)</i>	ACLA	HBL, UHC
<i>Blood Pressure Control for Patients With Diabetes (BPD)</i>	ACLA, LHCC, SWA	UHC
<i>Pharmacotherapy for Opioid Use Disorder (POD)</i>	ACLA, HBL, UHC, SWA	
<i>Initiation and Engagement of SUD Treatment (IET)</i>		
<i>Initiation of SUD Treatment</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Engagement of SUD Treatment</i>		ABH, ACLA, HBL, UHC, SWA
<i>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)</i>		ABH, HBL, UHC, SWA
<i>Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)</i>	ABH, ACLA, HBL, UHC, SWA	
<i>Follow-Up Care for Children Prescribed ADHD Medication (ADD)</i>		
<i>Initiation Phase</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Continuation Phase</i>	ACLA, HBL, LHCC, SWA	
<i>Antidepressant Medication Management (AMM)</i>		

Measures ¹	At Least 2 Percentage Points Below Quality Compass South Central	At Least 2 Percentage Points Above Quality Compass South Central
<i>Effective Acute Phase Treatment</i>	ACLA, UHC	ABH
<i>Effective Continuation Phase Treatment</i>	ACLA, UHC	ABH
<i>Appropriate Treatment for Children With Upper Respiratory Infection (URI)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Use of Imaging Studies for Low Back Pain (LBP)</i>		
<i>Non-Recommended Cervical Screening in Adolescent Females (NCS)*</i>		
<i>Self-Reported Overall Health (Adult) (QC—N/A)</i>	N/A	N/A
<i>Self-Reported Overall Health (Child) (QC—N/A)</i>	N/A	N/A
<i>Self-Reported Overall Mental or Emotional Health (Adult) (QC—N/A)</i>	N/A	N/A
<i>Self-Reported Overall Mental or Emotional Health (Child) (QC—N/A)</i>	N/A	N/A

* A lower rate indicates better performance.

¹ Results correspond to Table 3-3. Measures that are marked QC—N/A were excluded from the comparison because Quality Compass does not contain a 50th Percentile Benchmark for these measures.

Table A-5—HEDIS MY 2022 Rates Compared to MY 2021 Rates: 0.1 Percentage Point Differences

Measures ¹	Decreased by 0.1 Percentage Point or More	Increased by 0.1 Percentage Point or More
HEDIS Incentive Measures		
<i>Childhood Immunization Status (CIS)</i>		
<i>Combo 3</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>Immunization Status for Adolescents (IMA)</i>		
<i>Combo 2</i>	ABH, ACLA, LHCC, SWA	HBL, UHC
<i>Colorectal Cancer Screening (COL) (QC—N/A)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Cervical Cancer Screening (CCS)</i>	ABH, ACLA, HBL, LHCC, SWA	UHC
<i>Follow-Up After Hospitalization for Mental Illness (FUH)</i>		
<i>Within 30 days of Discharge</i>	ABH, ACLA, LHCC, UHC, SWA	HBL
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)</i>		
<i>Within 30 Days of Discharge</i>	ACLA	ABH, HBL, LHCC, UHC, SWA
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>		
<i>Within 30 Days of Discharge</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>HbA1c Control for Patients With Diabetes (HBD)</i>		
<i>HbA1c Poor Control (>9.0%)*</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Controlling High Blood Pressure (CBP)</i>	HBL	ABH, ACLA, LHCC, UHC, SWA
<i>HIV Viral Load Suppression (HIV) (QC—N/A)</i>	ACLA, HBL, UHC, SWA	ABH, LHCC
<i>Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (LRCD/previously NSV)* (QC—N/A)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
Other HEDIS Measures		

Measures ¹	Decreased by 0.1 Percentage Point or More	Increased by 0.1 Percentage Point or More
<i>Child and Adolescent Well-Care Visits (WCV)</i>		
<i>3–11 years</i>	ABH	ACLA, HBL, LHCC, UHC, SWA
<i>12–17 years</i>	HBL	ABH, ACLA, LHCC, UHC, SWA
<i>18–21 years</i>	ABH, ACLA	LHCC, UHC, SWA
<i>Total</i>	HBL	ABH, ACLA, LHCC, UHC, SWA
<i>Well-Child Visits in the First 30 Months of Life (W30)</i>		
<i>First 15 Months</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>15 Months–30 Months</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>Adults’ Access to Preventive/Ambulatory Health Services (AAP)</i>		
<i>20–44 years</i>	N/A	N/A
<i>45–64 years</i>	N/A	N/A
<i>65 years and older</i>	N/A	N/A
<i>Total</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Ambulatory Care (AMB)</i>		
<i>Outpatient Visits/1,000 MM</i>	N/A	N/A
<i>Emergency Department Visits/1,000 MM*</i>	N/A	N/A
<i>Follow-Up After Hospitalization for Mental Illness (FUH)</i>		
<i>Within 7 Days of Discharge</i>	ACLA, LHCC, UHC, SWA	ABH, HBL

Measures ¹	Decreased by 0.1 Percentage Point or More	Increased by 0.1 Percentage Point or More
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)</i>		
<i>Within 7 Days of Discharge</i>	ABH	ACLA, HBL, LHCC, UHC, SWA
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>		
<i>Within 7 Days of Discharge</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Plan All-Cause Readmissions (PCR)</i>		
<i>Observed Readmission (Num/Den) (QC—N/A)</i>	N/A	N/A
<i>Expected Readmissions Rate (QC—N/A)</i>	N/A	N/A
<i>Observed-to-Expected Ratio (Observed Readmissions/Expected Readmissions)</i>	ABH, UHC	ACLA, HBL, LHCC, SWA
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan, 8+9+10)</i>	ABH, ACLA, LHCC	HBL, UHC, SWA
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan-General Population, 8+9+10)</i>	ABH, HBL, LHCC, UHC	ACLA
<i>Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)</i>		
<i>Depression Screening (Total) (QC—N/A)</i>	N/A	N/A
<i>Follow-Up on Positive Screen (Total) (QC—N/A)</i>	N/A	N/A
<i>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)</i>	ABH	ACLA, HBL, LHCC, UHC, SWA
<i>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)</i>		
<i>Blood Glucose Testing</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Cholesterol Testing</i>	LHCC	ABH, ACLA, HBL, UHC, SWA

Measures ¹	Decreased by 0.1 Percentage Point or More	Increased by 0.1 Percentage Point or More
<i>Blood Glucose and Cholesterol Testing</i>	LHCC	ABH, ACLA, HBL, UHC, SWA
<i>Prenatal and Postpartum Care (PPC)</i>		
<i>Prenatal Care</i>	ABH	ACLA, HBL, LHCC, UHC, SWA
<i>Postpartum Care</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Lead Screening in Children (LSC)</i>	HBL, LHCC, UHC, SWA	ABH, ACLA
<i>Childhood Immunization Status (CIS)</i>		
<i>DTaP</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>IPV</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>MMR</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>HiB</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>Hepatitis B</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>VZV</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Pneumococcal conjugate</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>Hepatitis A</i>		ABH, ACLA, LHCC, UHC, SWA
<i>Rotavirus</i>	HBL	ABH, ACLA, LHCC, UHC, SWA
<i>Influenza</i>	ABH, ACLA, HBL, UHC, SWA	LHCC
<i>Combo 7</i>	HBL	ABH, ACLA, LHCC, UHC, SWA
<i>Combo 10</i>	ABH, ACLA, HBL, UHC, SWA	LHCC

Measures ¹	Decreased by 0.1 Percentage Point or More	Increased by 0.1 Percentage Point or More
Immunization Status for Adolescents (IMA)		
<i>Meningococcal</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Tdap/Td</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>HPV</i>	ABH, ACLA, LHCC, SWA	HBL, UHC
<i>Combo 1</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
Flu Vaccinations for Adults Ages 18 to 64 (FVA)	ABH, HBL, LHCC	ACLA, UHC, SWA
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)		
<i>BMI Percentile Documentation</i>	LHCC	ABH, ACLA, HBL, UHC, SWA
<i>Counseling for Nutrition</i>	HBL	ACLA, LHCC, UHC, SWA
<i>Counseling for physical Activity</i>	ACLA, HBL	ABH, LHCC, UHC, SWA
Chlamydia Screening in Women (CHL)		
<i>Total</i>	ABH, HBL	ACLA, UHC, SWA
Breast Cancer Screening (BCS)		ABH, ACLA, HBL, LHCC, UHC, SWA
Medical Assistance With Smoking and Tobacco Use Cessation (MSC)		
<i>Advising Smokers and Tobacco Users to Quit</i>	ABH, UHC	ACLA, HBL, LHCC, SWA
<i>Discussing Cessation Medications</i>	LHCC, UHC	ABH, ACLA, HBL, SWA
<i>Discussing Cessation Strategies</i>	LHCC	ABH, ACLA, HBL, UHC, SWA
Statin Therapy for Patients With Cardiovascular Disease (SPC)		
<i>Received Statin Therapy: Total</i>	HBL, LHCC, SWA	ABH, UHC
<i>Statin Adherence 80%: Total</i>		ABH, ACLA, HBL, LHCC, UHC, SWA

Measures ¹	Decreased by 0.1 Percentage Point or More	Increased by 0.1 Percentage Point or More
<i>HbA1c Control for Patients With Diabetes (HBD)</i>		
<i>HbA1c control (<8.0%)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Eye Exam for Patients With Diabetes (EED)</i>	ACLA, LHCC, SWA	ABH, HBL, UHC
<i>Blood Pressure Control for Patients With Diabetes (BPD)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Pharmacotherapy for Opioid Use Disorder (POD)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Initiation and Engagement of SUD Treatment (IET)</i>		
<i>Initiation of SUD Treatment</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Engagement of SUD Treatment</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)</i>	ABH, HBL, LHCC, SWA	ACLA, UHC,
<i>Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)</i>	ACLA, HBL	ABH, LHCC, UHC, SWA
<i>Follow-Up Care for Children Prescribed ADHD Medication (ADD)</i>		
<i>Initiation Phase</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Continuation Phase</i>	HBL, LHCC	ABH, ACLA, UHC, SWA
<i>Antidepressant Medication Management (AMM)</i>		
<i>Effective Acute Phase Treatment</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Effective Continuation Phase Treatment</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Appropriate Treatment for Children With Upper Respiratory Infection (URI)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA

Measures ¹	Decreased by 0.1 Percentage Point or More	Increased by 0.1 Percentage Point or More
<i>Use of Imaging Studies for Low Back Pain (LBP)</i>	ABH, ACLA, LHCC, UHC, SWA	HBL
<i>Non-Recommended Cervical Screening in Adolescent Females (NCS)*</i>	ABH, ACLA, HBL, UHC, SWA	LHCC

* A lower rate indicates better performance.

¹ Results correspond to Table 3-4.

Table A-6—HEDIS MY 2022 Rates Compared to HEDIS MY 2021 Rates: 2.0 Percentage Point Differences

Measures ¹	Decreased by 2 Percentage Points or More	Increased by 2 Percentage Points or More
HEDIS Incentive Measures		
<i>Childhood Immunization Status (CIS)</i>		
<i>Combo 3</i>	ABH	ACLA, LHCC
<i>Immunization Status for Adolescents (IMA)</i>		
<i>Combo 2</i>	ABH, ACLA, LHCC, SWA	
<i>Colorectal Cancer Screening (COL) (QC—N/A)</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Cervical Cancer Screening (CCS)</i>	ACLA, HBL	
<i>Follow-Up After Hospitalization for Mental Illness (FUH)</i>		
<i>Within 30 days of Discharge</i>	UHC	
<i>Follow-Up After Emergency Department Visit for Mental Illness (FUM)</i>		
<i>Within 30 Days of Discharge</i>		ABH, UHC
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>		
<i>Within 30 Days of Discharge</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>HbA1c Control for Patients With Diabetes (HBD)</i>		
<i>HbA1c Poor Control (>9.0%)*</i>	ABH, ACLA, HBL, LHCC, UHC, SWA	
<i>Controlling High Blood Pressure (CBP)</i>	HBL	ABH, ACLA, LHCC, UHC, SWA
<i>HIV Viral Load Suppression (HIV) (QC—N/A)</i>	ACLA	
<i>Low-Risk Cesarean Delivery (Cesarean Rate for Low-Risk First Birth Women) (LRCD/previously NSV)* (QC—N/A)</i>	ACLA, HBL, UHC, SWA	
Other HEDIS Measures		
<i>Child and Adolescent Well-Care Visits (WCV)</i>		

Measures ¹	Decreased by 2 Percentage Points or More	Increased by 2 Percentage Points or More
<i>3–11 years</i>		UHC
<i>12–17 years</i>		UHC
<i>18–21 years</i>		UHC
<i>Total</i>		UHC
Well-Child Visits in the First 30 Months of Life (W30)		
<i>First 15 Months</i>		ABH, HBL, LHCC, UHC, SWA
<i>15 Months–30 Months</i>		UHC
Adults’ Access to Preventive/Ambulatory Health Services (AAP)		
<i>20–44 years</i>		
<i>45–64 years</i>		
<i>65 years and older</i>		
<i>Total</i>	ABH, ACLA, HBL, LHCC, SWA	
Ambulatory Care (AMB)		
<i>Outpatient Visits/1,000 MM</i>	N/A	N/A
<i>Emergency Department Visits/1,000 MM*</i>	N/A	N/A
Follow-Up After Hospitalization for Mental Illness (FUH)		
<i>Within 7 Days of Discharge</i>	LHCC	HBL
Follow-Up After Emergency Department Visit for Mental Illness (FUM)		
<i>Within 7 Days of Discharge</i>		

Measures ¹	Decreased by 2 Percentage Points or More	Increased by 2 Percentage Points or More
<i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)</i>		
<i>Within 7 Days of Discharge</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Plan All-Cause Readmissions (PCR)</i>		
<i>Observed Readmission (Num/Den) (QC—N/A)</i>	N/A	N/A
<i>Expected Readmissions Rate (QC—N/A)</i>	N/A	N/A
<i>Observed-to-Expected Ratio (Observed Readmissions/Expected Readmissions)</i>	ABH	HBL, LHCC
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan, 8+9+10)</i>		HBL
<i>CAHPS Health Plan Survey 5.0H, Child (Rating of Health Plan-General Population, 8+9+10)</i>	HBL	
<i>Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)</i>		
<i>Depression Screening (Total) (QC—N/A)</i>	N/A	N/A
<i>Follow-Up on Positive Screen (Total) (QC—N/A)</i>	N/A	N/A
<i>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)</i>		
<i>Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)</i>		ACLA, HBL, UHC, SWA
<i>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)</i>	ABH, HBL	ACLA, LHCC, UHC, SWA
<i>Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)</i>		
<i>Blood Glucose Testing</i>		ACLA, HBL, UHC, SWA
<i>Cholesterol Testing</i>		ACLA, HBL,
<i>Blood Glucose and Cholesterol Testing</i>		ABH, ACLA, HBL
<i>Prenatal and Postpartum Care (PPC)</i>		
<i>Prenatal Care</i>	ABH	LHCC
<i>Postpartum Care</i>		ABH, ACLA, LHCC, SWA
<i>Lead Screening in Children (LSC)</i>	HBL	

Measures ¹	Decreased by 2 Percentage Points or More	Increased by 2 Percentage Points or More
Childhood Immunization Status (CIS)		
<i>DTaP</i>	ABH	ACLA, LHCC
<i>IPV</i>	ABH	ACLA, LHCC
<i>MMR</i>		ACLA, UHC
<i>HiB</i>	ABH	ACLA, UHC
<i>Hepatitis B</i>	HBL	
<i>VZV</i>		ACLA, UHC
<i>Pneumococcal conjugate</i>	ABH	ACLA, LHCC, UHC, SWA
<i>Hepatitis A</i>		ACLA, UHC
<i>Rotavirus</i>	HBL	ABH, LHCC, SWA
<i>Influenza</i>	ACLA, UHC	LHCC
<i>Combo 7</i>	HBL	LHCC
<i>Combo 10</i>	ABH, UHC	LHCC
Immunization Status for Adolescents (IMA)		
<i>Meningococcal</i>	ABH, ACLA, HBL, UHC, SWA	
<i>Tdap/Td</i>	ABH, ACLA, HBL, UHC, SWA	
<i>HPV</i>	ABH, ACLA, LHCC, SWA	
<i>Combo 1</i>	ABH, ACLA, HBL, UHC, SWA	
Flu Vaccinations for Adults Ages 18 to 64 (FVA)	LHCC	ACLA, UHC, SWA
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)		
<i>BMI Percentile Documentation</i>	LHCC	ABH, ACLA, UHC
<i>Counseling for Nutrition</i>	HBL	LHCC, UHC
<i>Counseling for Physical Activity</i>	ACLA	ABH, LHCC

Measures ¹	Decreased by 2 Percentage Points or More	Increased by 2 Percentage Points or More
<i>Chlamydia Screening in Women (CHL)</i>		
<i>Total</i>		UHC
<i>Breast Cancer Screening (BCS)</i>		
		UHC
<i>Medical Assistance With Smoking and Tobacco Use Cessation (MSC)</i>		
<i>Advising Smokers and Tobacco Users to Quit</i>	ABH, UHC	ACLA, HBL
<i>Discussing Cessation Medications</i>	LHCC, UHC	ABH, ACLA, HBL, SWA
<i>Discussing Cessation Strategies</i>	LHCC	ABH, ACLA, HBL, UHC, SWA
<i>Statin Therapy for Patients With Cardiovascular Disease (SPC)</i>		
<i>Received Statin Therapy: Total</i>		
<i>Statin Adherence 80%: Total</i>		ABH, HBL, LHCC, SWA
<i>HbA1c Control for Patients With Diabetes (HBD)</i>		
<i>HbA1c control (<8.0%)</i>		ACLA, HBL, LHCC, UHC, SWA
<i>Eye Exam for Patients With Diabetes (EED)</i>	LHCC	HBL
<i>Blood Pressure Control for Patients With Diabetes (BPD)</i>		ABH, HBL, LHCC, UHC, SWA
<i>Pharmacotherapy for Opioid Use Disorder (POD)</i>	ABH, ACLA, HBL, SWA	
<i>Initiation and Engagement of SUD Treatment (IET)</i>		
<i>Initiation of SUD Treatment</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Engagement of SUD Treatment</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)</i>	ABH, LHCC	ACLA, UHC
<i>Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)</i>		
<i>Follow-Up Care for Children Prescribed ADHD Medication (ADD)</i>		

Measures ¹	Decreased by 2 Percentage Points or More	Increased by 2 Percentage Points or More
<i>Initiation Phase</i>		ABH, ACLA, HBL, UHC, SWA
<i>Continuation Phase</i>		ABH, ACLA, UHC, SWA
<i>Antidepressant Medication Management (AMM)</i>		
<i>Effective Acute Phase Treatment</i>	ABH, ACLA, HBL, UHC, SWA	
<i>Effective Continuation Phase Treatment</i>	ACLA, HBL, LHCC, UHC, SWA	
<i>Appropriate Treatment for Children With Upper Respiratory Infection (URI)</i>		ABH, HBL, LHCC, UHC, SWA
<i>Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)</i>		ABH, ACLA, HBL, LHCC, UHC, SWA
<i>Use of Imaging Studies for Low Back Pain (LBP)</i>		
<i>Non-Recommended Cervical Screening in Adolescent Females (NCS)*</i>		

* A lower rate indicates better performance.

¹Results correspond to Table 3-4.