

**2015 HEDIS<sup>®</sup> AGGREGATE REPORT**  
**EXECUTIVE SUMMARY**  
*for*  
**Child Health Plan Plus**

February 2016

*This report was produced by Health Services Advisory Group, Inc. for the Colorado Department of Health Care Policy & Financing.*



3133 East Camelback Road, Suite 100 • Phoenix, AZ 85016-4545  
Phone 602.801.6600 • Fax 602.801.6051

### Introduction

The State of Colorado offers its residents a low-cost health insurance plan for qualified children age 18 and younger and pregnant women age 19 and older through its Child Health Plan *Plus* (CHP+) program, also known as Children’s Health Insurance Program (CHIP). In August 2015, Colorado’s CHP+ enrollment was 48,919 children and pregnant women.<sup>1-1</sup> The CHP+ services are coordinated through five health maintenance organizations (HMOs) and providers under the State Managed Care Network (SMCN). Medical services covered by Colorado’s CHP+ program include regular check-ups; immunizations; medicinal prescriptions; prenatal care services; hospital services; and some vision, hearing, and dental services.

The CHP+ program is administered by Colorado’s Department of Health Care Policy & Financing (the Department). During fiscal year (FY) 2014–2015, the Department contracted with five health plans to deliver healthcare services. Those health plans include Colorado Access, Colorado Choice Health Plan (Colorado Choice), Denver Health Medical Plan, Inc. (DHMP), Kaiser Permanente Colorado (Kaiser), and Rocky Mountain Health Plans (RMHP). In areas of the State with no managed care coverage, the CHP+ program offers an SMCN program via direct contracts with providers, hospitals, and ancillary services.

To evaluate performance levels and to provide an objective, comparative review of the Colorado CHP+ health plans’ quality-of-care outcomes and performance measures, the Department required its health plans to report results following the National Committee for Quality Assurance’s (NCQA’s) Healthcare Effectiveness Data and Information Set (HEDIS<sup>®</sup>) protocols. The Department selected 40 performance indicators from the standard Medicaid HEDIS reporting set to evaluate the Colorado CHP+ health plans’ performance and for public reporting.

Each health plan underwent an NCQA HEDIS Compliance Audit<sup>™</sup> through a licensed organization in order to verify the processes used to report valid HEDIS rates. All final audit results were submitted to Health Services Advisory Group, Inc. (HSAG), which was contracted by the Department to provide external quality review (EQR) services. Since national CHIP percentiles were not available, HSAG evaluated each CHP+ health plan’s current performance level using the national Medicaid percentiles.

HSAG examined the measures among different domains of care: Pediatric Care, Access to Care, Preventive Screening, Mental/Behavioral Health, Respiratory Conditions, and Use of Services. This approach to the analysis was designed to encourage consideration of the measures as a whole rather than in isolation and to think about the strategic and tactical changes required to improve overall performance.

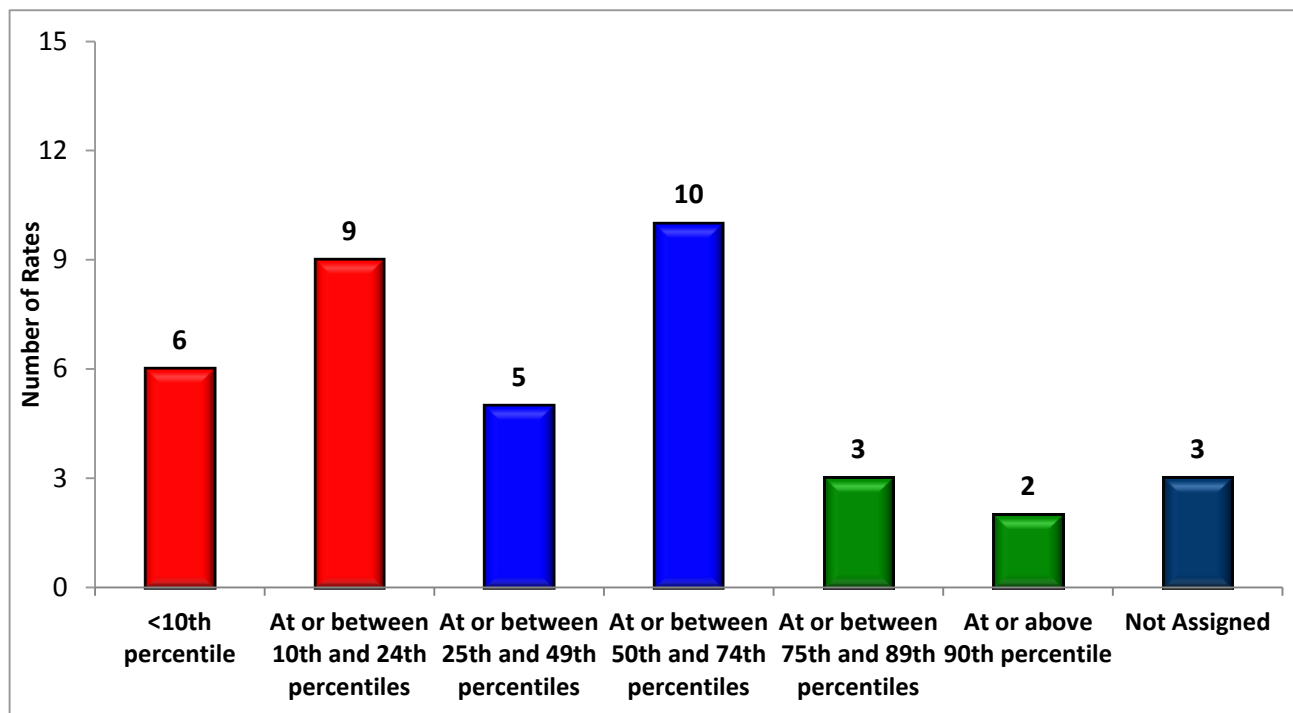
---

<sup>1-1</sup> Child Health Plan *Plus*. Available at: <https://www.colorado.gov/pacific/hcpf/child-health-plan-plus>. Accessed on: September 15, 2015.

## Summary of Performance

Figure 1-1 shows the Colorado CHP+ program’s performance on 19 measures with a total of 38 indicators<sup>1-2</sup> compared with national HEDIS 2014 Medicaid percentiles. The bars represent the number of Colorado CHP+ weighted averages falling into each HEDIS percentile range. The percentile range shows how the Colorado CHP+ weighted average ranked nationally. For example, the Colorado CHP+ weighted averages for two measures ranked at or above the 90th percentile. This means that the Colorado CHP+ program had two measures with performance in the top 10 percent of all health plans nationally.

**Figure 1-1—Colorado CHP+ Weighted Averages**



As depicted in Figure 1-1, 18 indicators performed within national averages (at or between the 25th and 89th percentiles), nine performed at or between the 10th and 24th percentiles, and six performed below the 10th percentile. Three of the Colorado CHP+ weighted averages fell at or between the 75th and 89th percentiles, and two Colorado CHP+ weighted averages were at or above the 90th percentile. Three indicators were not assigned a percentile range.

Table 1-1 presents the CHP+ statewide weighted averages for each measure from HEDIS 2013 to HEDIS 2015. The figures displayed in the comparison column reflect the percentage point difference between the HEDIS 2014 and HEDIS 2015 rates.

<sup>1-2</sup> Performance measures reported in this graph include all measures in the Pediatric Care, Access to Care, Preventive Screening, Mental/Behavioral Health, and Respiratory Related domains. Measures under the Use of Services domain are considered utilization-based measures rather than performance measures; therefore, they are not included in this graph.

**Table 1-1—Colorado CHP+ Statewide Weighted Averages**

HEDIS Measures	HEDIS 2013	HEDIS 2014	HEDIS 2015	Change From 2014–2015	2014 National Medicaid Percentile Ranking†
<b>Pediatric Care</b>					
<i>Childhood Immunization Status<sup>^</sup></i>					
<i>Combination 2</i>	58.04%	73.25%	61.27%	<b>-11.98</b>	<10th
<i>Combination 3</i>	55.89%	70.33%	59.89%	<b>-10.44</b>	10th–24th
<i>Combination 4</i>	51.43%	63.50%	55.61%	<b>-7.89</b>	10th–24th
<i>Combination 5</i>	44.11%	58.90%	50.42%	<b>-8.48</b>	10th–24th
<i>Combination 6</i>	36.70%	51.53%	42.40%	<b>-9.13</b>	25th–49th
<i>Combination 7</i>	41.16%	55.43%	47.06%	<b>-8.37</b>	10th–24th
<i>Combination 8</i>	34.73%	47.79%	40.03%	<b>-7.76</b>	25th–49th
<i>Combination 9</i>	30.45%	44.66%	37.13%	<b>-7.53</b>	50th–74th
<i>Combination 10</i>	28.93%	42.56%	35.06%	<b>-7.50</b>	50th–74th
<i>Well-Child Visits in the First 15 Months of Life<sup>^</sup></i>					
<i>Zero Visits*</i>	2.67%	2.16%	3.07%	+0.91	10th–24th
<i>Six or More Visits</i>	25.48%	67.41%	45.18%	<b>-22.23</b>	<10th
<i>Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life<sup>^</sup></i>	61.26%	66.29%	61.59%	<b>-4.70</b>	10th–24th
<i>Adolescent Well-Care Visits<sup>^</sup></i>	42.09%	44.00%	40.38%	-3.62	10th–24th
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>					
<i>BMI Assessment: Total</i>	68.80%	69.59%	60.81%	<b>-8.78</b>	50th–74th
<i>Nutrition Counseling: Total</i>	62.24%	64.47%	61.19%	-3.28	50th–74th
<i>Physical Activity Counseling: Total</i>	56.68%	58.26%	57.49%	-0.77	50th–74th
<i>Immunizations for Adolescents—Combination 1<sup>^</sup></i>	47.96%	66.27%	64.11%	-2.16	25th–49th
<i>Appropriate Testing for Children With Pharyngitis</i>	80.87%	79.09%	79.64%	+0.55	75th–89th
<b>Access to Care</b>					
<i>Prenatal and Postpartum Care (SMCN Only)<sup>^</sup></i>					
<i>Timeliness of Prenatal Care</i>	78.59%	70.80%	30.36% <sup>1</sup>	<b>-40.44</b>	<10th
<i>Postpartum Care</i>	67.88%	63.26%	37.80% <sup>1</sup>	<b>-25.46</b>	<10th
<i>Children’s and Adolescents’ Access to Primary Care Practitioners</i>					
<i>Ages 12 to 24 Months</i>	93.69%	91.36%	93.22%	+1.86	<10th
<i>Ages 25 Months to 6 Years</i>	82.62%	82.41%	80.57%	<b>-1.84</b>	<10th
<i>Ages 7 to 11 Years</i>	88.80%	89.16%	89.64%	+0.48	25th–49th

**Table 1-1—Colorado CHP+ Statewide Weighted Averages**

HEDIS Measures	HEDIS 2013	HEDIS 2014	HEDIS 2015	Change From 2014–2015	2014 National Medicaid Percentile Ranking†
<i>Ages 12 to 19 Years</i>	89.06%	88.60%	90.09%	+1.49	50th–74th
<b>Preventive Screening</b>					
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females*</i>	—	—	0.62%	—	≥90th
<i>Chlamydia Screening in Women—Total</i>	—	—	57.01%	—	50th–74th
<b>Mental/Behavioral Health</b>					
<i>Antidepressant Medication Management</i>					
<i>Effective Acute Phase Treatment</i>	—	—	NA	—	NA
<i>Effective Continuation Phase Treatment</i>	—	—	NA	—	NA
<i>Follow-up Care for Children Prescribed ADHD Medication</i>					
<i>Initiation</i>	43.64%	16.78%	46.01%	+29.23	50th–74th
<i>Continuation</i>	47.95%	30.77%	41.82%	+11.05	25th–49th
<i>Follow-up After Hospitalization for Mental Illness</i>					
<i>30-Day Follow-up</i>	—	—	69.40%	—	50th–74th
<i>7-Day Follow-up</i>	—	—	47.01%	—	50th–74th
<b>Respiratory Conditions</b>					
<i>Appropriate Treatment for Children With URI</i>	—	—	91.50%	—	75th–89th
<i>Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis</i>	—	—	NA	—	NA
<i>Use of Appropriate Medications for People With Asthma</i>	—	—	95.83%	—	≥90th
<i>Medication Management for People With Asthma—Total:</i>					
<i>Medication Compliance 50%</i>	—	—	46.96%	—	10th–24th
<i>Medication Compliance 75%</i>	—	—	20.27%	—	10th–24th
<i>Asthma Medication Ratio—Total</i>	74.95%	73.78%	74.17%	+0.39	75th–89th
<b>Use of Services††</b>					
<i>Ambulatory Care: Total</i>					
<i>Outpatient Visits per 1,000 MM: Total</i>	—	214.08	204.21	-9.87	<10th
<i>Emergency Department (ED) Visits per 1,000 MM: Total</i>	30.07	26.47	26.31	-0.16	<10th
<i>Inpatient Utilization—General Hospital/Acute Care: Total</i>					
<i>Discharges per 1,000 MM (Total Inpatient)</i>	—	1.23	1.28	+0.05	<10th
<i>Days per 1,000 MM (Total Inpatient)</i>	—	4.16	4.34	+0.18	<10th
<i>Average Length of Stay (Total Inpatient)</i>	—	3.37	3.41	+0.04	25th–49th

**Table 1-1—Colorado CHP+ Statewide Weighted Averages**

HEDIS Measures	HEDIS 2013	HEDIS 2014	HEDIS 2015	Change From 2014–2015	2014 National Medicaid Percentile Ranking <sup>†</sup>
<i>Discharges per 1,000 MM (Medicine)</i>	—	0.85	0.96	+0.11	<10th
<i>Days per 1,000 MM (Medicine)</i>	—	2.38	2.46	+0.08	<10th
<i>Average Length of Stay (Medicine)</i>	—	2.81	2.56	-0.25	<10th
<i>Discharges per 1,000 MM (Surgery)</i>	—	0.30	0.24	-0.06	<10th
<i>Days per 1,000 MM (Surgery)</i>	—	1.56	1.69	+0.13	<10th
<i>Average Length of Stay (Surgery)</i>	—	5.27	7.06	+1.79	50th–74th
<i>Discharges per 1,000 MM (Maternity)</i>	—	0.19	0.16	-0.03	<10th
<i>Days per 1,000 MM (Maternity)</i>	—	0.45	0.41	-0.04	<10th
<i>Average Length of Stay (Maternity)</i>	—	2.44	2.51	+0.07	25th–49th
<b>Antibiotic Utilization</b>					
<i>Average Scripts PMPY for Antibiotics (All Ages)</i>	—	—	0.49	—	<10th
<i>Average Days Supplied per Antibiotic Script (All Ages)</i>	—	—	10.39	—	≥90th
<i>Average Scripts PMPY for Antibiotics of Concern (All Ages)</i>	—	—	0.19	—	<10th
<i>Percentage of Antibiotics of Concern of All Antibiotic Scripts (All Ages)</i>	—	—	39.19%	—	25th–49th
<b>Mental Health Utilization: Total</b>					
<i>Any Service</i>	—	—	0.68%	—	<10th
<i>Inpatient</i>	—	—	0.03%	—	<10th
<i>Intensive Outpatient/Partial Hospitalization</i>	—	—	0.22%	—	50th–74th
<i>Outpatient/ED</i>	—	—	0.57%	—	<10th

Note: Rates shaded in green with a green font indicate a statistically significant improvement from the prior year.

Rates shaded in red with a red font indicate a statistically significant decline from the prior year.

— Shown when no data were available or the measure was not reported in the HEDIS 2013 or HEDIS 2014 aggregate report.

\* For the *Well-Child Visits in the First 15 Months of Life—Zero Visits* indicator and *Non-Recommended Cervical Cancer Screening in Adolescent Females* measure, a lower rate indicates better performance.

^ Due to the Department’s reporting requirement change from a hybrid methodology to an administrative methodology in HEDIS 2015, rate changes between HEDIS 2014 and HEDIS 2015 may not accurately reflect performance changes.

†† For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the plan-submitted file; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or poorer performance. Individual plan demographics should be considered when reviewing performance.

<sup>1</sup> The HEDIS 2015 rates for the *Prenatal and Postpartum Care* measure were not audited by HSAG.

A summary of statewide performance for each domain is presented here:

- ◆ Pediatric Care—Statewide performance in the Pediatric Care domain showed rate decreases for many measures, though some of the changes could be related to a change in the Department’s reporting requirement from a hybrid to an administrative methodology in HEDIS 2015. Significant rate reductions were noted for these measures: *Childhood Immunization Status* (all indicators); *Well-Child Visits in the First 15 Months of Life—Six or More Visits*; *Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life*; and *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Assessment: Total*. One measure (*Appropriate Testing for Children With Pharyngitis*) benchmarked between the national Medicaid 75th and 89th percentiles, and five additional rates benchmarked between the 50th and 74th percentiles. Ten measures (*Childhood Immunization Status—Combination 2, Combination 3, Combination 4, Combination 5, Combination 7*; *Well-Child Visits in the First 15 Months of Life—Zero Visits, Six or More Visits*; *Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life*; *Adolescent Well-Care Visits*; and *Immunizations for Adolescents—Combination 1*) were below the 25th percentile, suggesting opportunities for improvement.
- ◆ Access to Care—Statewide performance in this domain presents significant opportunity for improvement. Only one of the measures ranked at or above the national HEDIS 2014 Medicaid 50th percentile. Additionally, significant, large rate reductions were reported for the *Timeliness of Prenatal Care* (40.44 percentage points) and *Postpartum Care* (25.46 percentage points) indicators under *Prenatal and Postpartum Care*. This would possibly be attributed to required methodology being different than the previous year.
- ◆ Preventive Screening—Measures under this domain were not part of either CHP+ HEDIS 2013 or CHP+ HEDIS 2014. A comparison to historical rates is not available. *Non-Recommended Cervical Cancer Screening in Adolescent Females* ranked above the national HEDIS 2014 Medicaid 90th percentile, and *Chlamydia Screening in Women—Total* ranked between the 50th and the 75th national HEDIS 2014 Medicaid percentiles.
- ◆ Mental/Behavioral Health—The only measure with reported rates from CHP+ HEDIS 2013 and 2014 within this domain is *Follow-up Care for Children Prescribed ADHD Medication*. Both indicators showed a rate increase from CHP+ HEDIS 2014, with the *Initiation* indicator showing a significant increase. Rates were not reported for *Antidepressant Medication Management*. Both indicators under the *Follow-up After Hospitalization for Mental Illness* measure ranked between the national HEDIS 2014 Medicaid 50th and 74th percentiles.
- ◆ Respiratory Conditions—The only measure with reported rates from CHP+ HEDIS 2013 and 2014 within this domain is *Asthma Medication Ratio*. The *Total* rate showed a slight increase from CHP+ HEDIS 2014. Among the measures that were reported first time in HEDIS 2015, *Medication Management for People With Asthma* ranked below the national HEDIS 2014 Medicaid 25th percentile for both 50 percent and 75 percent compliance indicators.
- ◆ Use of Services—The *Ambulatory Care: Total—Emergency Department Visits per 1,000 Member Months (MM)* indicator was the only measure with available rates from two prior years. The HEDIS 2014 rate declined by 12 percent (3.6 visits) from HEDIS 2013, and the HEDIS 2015 rate declined by 0.6 percent (0.16 visits). Both indicators within the *Ambulatory Care: Total* measure ranked below the national HEDIS 2014 Medicaid 10th percentile. A wide range of results were reported within the *Inpatient Utilization—General Hospital/Acute Care: Total* measure. *Discharges per 1,000 MM—Total Inpatient and Medicine* increased from CHP+

HEDIS 2014, while *Discharges per 1,000 MM—Surgery* and *Maternity* decreased. *Days per 1,000 MM—Total Inpatient, Medicine, and Surgery* increased since CHP+ HEDIS 2014, and *Maternity* decreased. *Average Length of Stay—Medicine* decreased from CHP+ HEDIS 2014 and increased for *Total Inpatient, Surgery, and Maternity*. The measures *Antibiotic Utilization* and *Mental Health Utilization: Total* are new for CHP+ HEDIS 2015. Of the 22 indicators reported under the Use of Services domain, 16 ranked below the national HEDIS 2014 Medicaid 10th percentile. Five indicators ranked between the 25th and 74th national HEDIS 2014 Medicaid percentiles, and one indicator (*Antibiotic Utilization—Average Days Supplied per Antibiotic Script [All Ages]*) ranked above the national HEDIS 2014 Medicaid 90th percentile.

## Limitations and Considerations

- ◆ In general, health plans may choose to report certain measures using the hybrid methodology as allowed by NCQA. However, the Department has identified an acceptable methodology for each selected measure. In HEDIS 2015, the Department changed the reporting requirements from a hybrid to an administrative methodology for several measures (*Childhood Immunization Status; Well-Child Visits in the First 15 Months of Life; Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life; Adolescent Well-Care Visits; Immunizations for Adolescents; and Prenatal and Postpartum Care*). As such, trending of Statewide and plan performance may not reflect true performance changes.
- ◆ National HEDIS 2014 Medicaid percentiles are not available for the CHIP population; therefore, comparison of the CHP+ plans' rates and the SMCN's rates to HEDIS 2014 Medicaid percentiles should be interpreted with caution.