



CHIP+

Child Health Plan *Plus*

HEDIS Measurement Year 2020 Aggregate Report for Child Health Plan *Plus*

October 2021

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



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1. Executive Summary

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 the Children’s Health Insurance Program (CHIP). As of the end of fiscal year (FY) 2020–2021, Colorado’s CHP+ enrollment was 71,098 children and pregnant women.¹⁻¹ The CHP+ services are coordinated through five managed care organizations (MCOs), the State Managed Care Network (SMCN), and DentaQuest. Medical services covered by Colorado’s CHP+ program include primary care, emergency/urgent care, hospital services, dental care, prescriptions, immunizations, maternity care, and mental/behavioral health care.

The CHP+ program is administered by Colorado’s Department of Health Care Policy and Financing (the Department). Colorado’s five CHP+ MCOs in FY 2020–2021 included Colorado Access (COA), Denver Health Medical Plan (DHMP), Friday Health Plans of Colorado (FHP), Kaiser Permanente Colorado (Kaiser), and Rocky Mountain Health Plans (RMHP). All counties in Colorado have a CHP+ MCO; however, the SMCN (the State’s administrative service organization) is available for CHP+ eligible members prior to enrollment in an MCO, for all pregnant women, and as an alternative to managed care for members who request to receive service using a fee-for-service (FFS) payment strategy instead of choosing an MCO. The SMCN directly contracts with providers, hospitals, and ancillary services, and was only required to report one measure, *Prenatal and Postpartum Care*. DentaQuest is the Colorado Medicaid dental program and provides dental benefits to pregnant woman and children enrolled in the CHP+ program. DentaQuest was only required to report one measure, *Annual Dental Visit—Total*.

To evaluate performance levels and to provide an objective, comparative review of the Colorado CHP+ MCOs’ quality-of-care outcomes and key performance measure rates, the Department required its MCOs to report results following the National Committee for Quality Assurance’s (NCQA’s) Healthcare Effectiveness Data and Information Set (HEDIS[®]) protocols.¹⁻² The Department selected HEDIS performance measures from the standard Medicaid HEDIS Measurement Year (MY) 2020 reporting set to evaluate the MCOs’ performance and for public reporting. For HEDIS MY 2020, the Department required that the MCOs report all HEDIS measures using the administrative methodology. This report includes rates calculated using only administrative data. Therefore, caution should be exercised when comparing results for measures with a hybrid option to national benchmarks, which were established using administrative and/or medical record review data.

¹⁻¹ Colorado Department of Health Care Policy and Financing. Child Health Plan *Plus*. Available at: <https://www.colorado.gov/pacific/hcpf/premiums-expenditures-and-caseload-reports>. Accessed on: Sept 22, 2021.

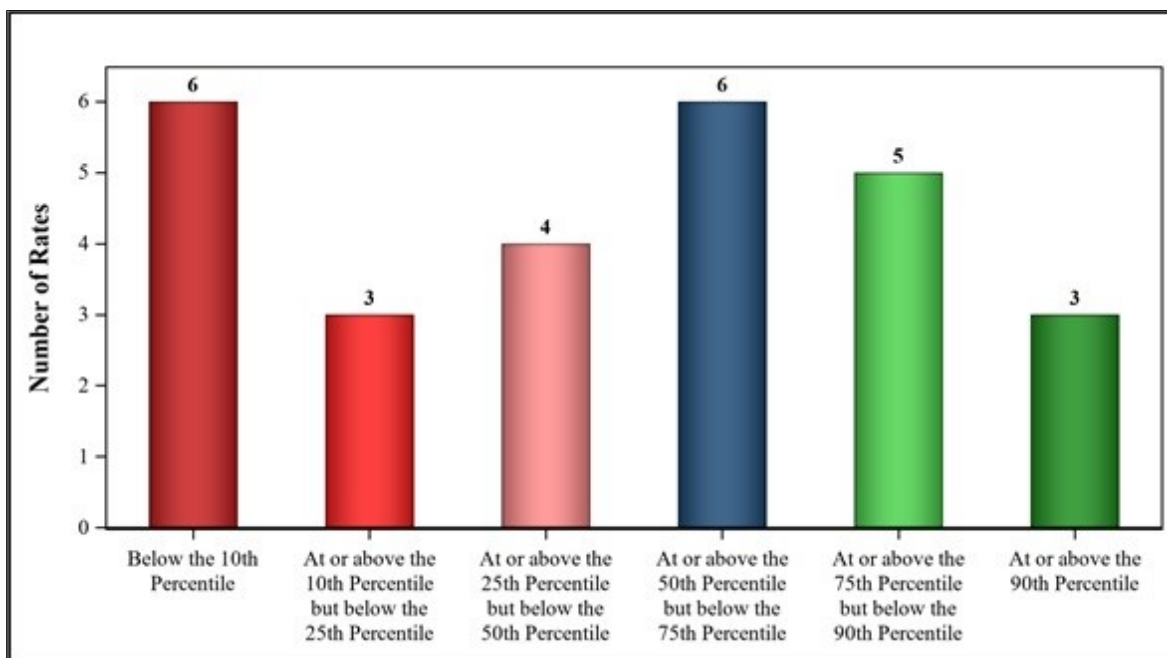
¹⁻² HEDIS[®] is a registered trademark of the NCQA.

In FY 2020–2021, each CHP+ MCO underwent an NCQA HEDIS Compliance Audit™ through a licensed HEDIS audit organization in order to verify the processes used to report valid HEDIS rates.¹⁻³ All CHP+ MCOs submitted final measure rates and audit results to Health Services Advisory Group, Inc. (HSAG), the Department’s external quality review organization (EQRO). HSAG examined the measures among the following domains of care: Pediatric Care, Access to Care and Preventive Screening, Mental/Behavioral Health, Respiratory Conditions, and Use of Services. Please see Appendix C for additional information on NCQA’s Information Systems (IS) standards and the audit findings for the CHP+ MCOs.¹⁻⁴ This report documents the results of HSAG’s analysis and recommendations for improvement, where appropriate.

Summary of Performance

Figure 1-1 shows the Colorado CHP+ program’s performance on the HEDIS MY 2020 performance measure indicators that were comparable to NCQA’s Quality Compass® national Medicaid health maintenance organization (HMO) percentiles for HEDIS MY 2019 (referred to throughout this report as percentiles).¹⁻⁵ The bars represent the number of CHP+ statewide weighted averages that fell into each national Medicaid percentile range. The percentile range shows how the CHP+ statewide weighted average ranked nationally. Measures under the Use of Services domain are considered utilization-based measures rather than performance measures; therefore, they are not included in this figure.

Figure 1-1—Colorado CHP+ Weighted Averages



¹⁻³ NCQA HEDIS Compliance Audit™ is a trademark of the NCQA.

¹⁻⁴ National Committee for Quality Assurance. *HEDIS Compliance Audit Standards, Policies and Procedures, Volume 5*. Washington D.C.

¹⁻⁵ Quality Compass® is a registered trademark of the NCQA.

The Colorado CHP+ weighted averages indicated low performance statewide compared to national standards, as 13 of 27 (48.1 percent) measure rates fell below the 50th percentile.

Detailed Statewide Performance

Table 1-1 shows the Colorado CHP+ weighted averages for HEDIS MY 2018 through HEDIS MY 2020 along with the percentile ranking for each HEDIS MY 2020 rate. Rates for HEDIS MY 2020 shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year. Rates for HEDIS MY 2020 shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.¹⁻⁶ For measures in the Use of Services domain, HSAG did not perform significance testing because variances were not provided in the Interactive Data Submission System (IDSS) files; therefore, differences in rates are reported here without significance testing. In addition, higher or lower rates do not necessarily indicate better or worse performance for the measures in the Use of Services domain.

Table 1-1—Colorado CHP+ Weighted Averages

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Pediatric Care</i>				
<i>Childhood Immunization Status</i>				
<i>Combination 2</i>	66.78%	63.39%	70.56% ^	25th–49th
<i>Combination 3</i>	65.16%	61.81%	69.20% ^	25th–49th
<i>Combination 4</i>	63.13%	60.55%	67.30% ^	25th–49th
<i>Combination 5</i>	59.76%	54.80%	64.18% ^	50th–74th
<i>Combination 6</i>	45.31%	46.77%	55.09% ^	75th–89th
<i>Combination 7</i>	58.20%	53.94%	62.62% ^	50th–74th
<i>Combination 8</i>	44.29%	45.91%	53.80% ^	75th–89th
<i>Combination 9</i>	42.27%	42.44%	51.97% ^	75th–89th
<i>Combination 10</i>	41.39%	41.97%	50.95% ^	75th–89th
<i>Immunizations for Adolescents</i>				
<i>Combination 1 (Meningococcal; Tetanus, Diphtheria Toxoids and Acellular Pertussis [Tdap])</i>	73.33%	74.81%	76.12%	10th–24th
<i>Combination 2 (Meningococcal, Tdap, Human Papillomavirus [HPV])</i>	39.02%	39.20%	42.47% ^	50th–74th

¹⁻⁶ Performance comparisons are based on the Chi-square test of statistical significance with a *p* value <0.05. A change in performance is considered statistically significant in this report if there was at least a 3-percentage point difference from HEDIS MY 2019 to HEDIS MY 2020.

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Well-Child Visits in the First 30 Months of Life³				
Well-Child Visits in the First 15 Months—Six or More Well-Child Visits	—	—	48.90%	—
Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits	—	—	73.12%	—
Child and Adolescent Well-Care Visits³				
Total	—	—	45.23%	—
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents				
Body Mass Index (BMI) Percentile Documentation—Total ¹	22.71%	22.62%	24.29%	<10th
Counseling for Nutrition—Total	21.46%	20.77%	22.75%	<10th
Counseling for Physical Activity—Total	17.58%	16.17%	17.76%	<10th
Access to Care				
Prenatal and Postpartum Care^{1,2}				
Timeliness of Prenatal Care	—	61.38%	58.45%	—
Postpartum Care	—	61.61%	53.32%^^	—
Annual Dental Visit				
Total	—	—	60.41%	50th–74th
Preventive Screening				
Chlamydia Screening in Women				
Ages 16 to 20 Years	36.52%	37.26%	35.29%	<10th
Non-Recommended Cervical Cancer Screening in Adolescent Females*				
Non-Recommended Cervical Cancer Screening in Adolescent Females	0.04%	0.04%	0.05%	≥90th
Mental/Behavioral Health				
Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication¹				
Initiation Phase	15.21%	14.98%	36.45%^	10th–24th
Continuation and Maintenance Phase	20.00%	32.69%	50.85%	25th–49th
Metabolic Monitoring for Children and Adolescents on Antipsychotics				
Blood Glucose Testing—Total	—	59.87%	44.44%^^	<10th
Cholesterol Testing—Total	—	39.47%	25.31%^^	<10th
Blood Glucose and Cholesterol Testing—Total	38.98%	36.84%	25.31%^^	10th–24th
Respiratory Conditions				
Appropriate Testing for Pharyngitis¹				
Ages 3 to 17 Years	—	84.20%	84.56%	50th–74th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Appropriate Treatment for Upper Respiratory Infection				
Ages 3 Months to 17 Years	—	93.30%	93.36%	50th–74th
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis				
Ages 3 Months to 17 Years	—	72.63%	72.27%	75th–89th
Asthma Medication Ratio				
Ages 5 to 11 Years	82.63%	88.44%	84.04%	≥90th
Ages 12 to 18 Years	71.32%	70.21%	77.96%	≥90th
Use of Services				
Ambulatory Care				
Outpatient Visits—Total	195.91	213.53	167.24	<10th
Emergency Department (ED) Visits—Total*	23.83	24.91	16.07	≥90th
Inpatient Utilization—General Hospital/Acute Care				
Total Discharges per 1,000 Member Months (Total Inpatient)	0.88	0.92	0.68	<10th
Total Average Length of Stay (Total Inpatient)	3.51	3.48	3.15	<10th
Total Discharges per 1,000 Member Months (Medicine)	0.63	0.68	0.51	<10th
Total Average Length of Stay (Medicine)	2.89	2.83	3.13	<10th
Total Discharges per 1,000 Member Months (Surgery)	0.21	0.21	0.15	<10th
Total Average Length of Stay (Surgery)	5.50	5.63	3.34	<10th
Total Discharges per 1,000 Member Months (Maternity)	0.07	0.07	0.05	<10th
Total Average Length of Stay (Maternity)	2.49	3.19	2.55	10th–24th
Antibiotic Utilization*				
Average Scripts Prescriptions Per Member Per Year (PMPY) for Antibiotics—Total	0.33	0.34	0.23	≥90th
Average Days Supplied per Antibiotic Script—Total	16.86	15.10	11.47	<10th
Average Scripts PMPY for Antibiotics of Concern—Total	0.11	0.11	0.07	≥90th
Percentage of Antibiotics of Concern of All Antibiotic Scripts—Total	31.91%	32.33%	30.09%	≥90th

* For this indicator, a lower rate indicates better performance.

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² The SMCN was the only MCO required to report the Prenatal and Postpartum Care measure. The rates were calculated using modified specifications; therefore, comparisons to national benchmarks were not performed for this measure.

³ Due to changes in the technical specifications for this measure in MY 2020, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed for this measure.

— Indicates that comparisons to benchmarks are not appropriate. This symbol may also indicate that NCQA recommended a break in trending; therefore, no prior year rates are displayed.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year.

Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.

Summary of Performance by Domain

Pediatric Care

Four of five (80.0 percent) MCOs reported a rate below the 25th percentile for the *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total* measure indicator and three of five (60.0 percent) MCOs reported a rate below the 25th percentile for the *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total* and *Counseling for Physical Activity—Total* measure indicators. This demonstrates opportunities to increase the number of comprehensive visits for children and adolescents. The MCOs and the Department should identify the factors contributing to the low rates for the well-care visits (e.g., are the issues related to barriers to accessing care, the coronavirus disease 2019 public health emergency [COVID-19 PHE], provider billing issues, or administrative data source challenges) and ensure children and adolescents receive comprehensive visits that follow the American Academy of Pediatrics' *Recommendations for Preventive Pediatric Health Care*.¹⁻⁷

Of note, three of four (75.0 percent) MCOs with reportable rates reported a rate at or above the 75th percentile for the *Childhood Immunization Status—Combination 6, Combination 8, Combination 9, and Combination 10* measure indicators and two of four (50.0 percent) MCOs with reportable rates reported a rate at or above the 90th percentile for the *Immunizations for Adolescents—Combination 2 (Meningococcal, Tdap, HPV)* measure indicator, indicating strength for children and adolescents receiving vaccinations.

Access to Care and Preventive Screening

Increasing the access to care for members may also have a positive impact on the quality of preventive care received, such as the *Chlamydia Screening in Women—Ages 16 to 20 Years* measure indicator, for which all four MCOs with reportable rates demonstrated poor performance, falling below the 25th percentile. Chlamydia is the most common sexually transmitted disease (STD) in the United States, and improvement of MCO performance in this measure could positively impact the quality of care for a substantial number of CHP+ members. The MCOs and the Department should ensure providers are aware of the importance of screening for chlamydia and increase the number of resources available to providers and members (e.g., one-on-one provider trainings, providing lists of members overdue for a screening, or newsletters targeting chlamydia screening rates) to support the screenings.^{1-8,1-9} The MCOs

¹⁻⁷ American Academy of Pediatrics. *Recommendations for Preventive Pediatric Health Care*. Available at: https://www.aap.org/en-us/Documents/periodicity_schedule.pdf. Accessed on: Sept 22, 2021.

¹⁻⁸ Centers for Disease Control and Prevention. *Chlamydia—CDC Fact Sheet*. Available at: <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia.htm>. Accessed on: Sept 22, 2021.

¹⁻⁹ National Prevention Information Network. *Strategies and Incentives from Health Plans to Increase Chlamydia Screening Rates*. Available at: <https://npin.cdc.gov/publication/strategies-and-incentives-health-plans-increase-chlamydia-screening-rates>. Accessed on: Sept 22, 2021.

could consider developing chlamydia screening messages and materials for young women that tap into their deeper values and aspirations, making them think about their future and how their decisions now can make an impact on their life, and frame STD testing as a normative behavior and that everyone should receive STD testing.¹⁻¹⁰ Conversely, four MCOs exceeded the 90th percentile and one MCO exceeded the 75th percentile for the *Non-Recommended Cervical Cancer Screening in Adolescent Females* measure, indicating the MCOs were not unnecessarily screening adolescent female members for cervical cancer.

Mental/Behavioral Health

For HEDIS MY 2020, DHMP, FHP, and Kaiser did not have any reportable rates within the Mental/Behavioral Health domain. RMHP demonstrated strong performance for young members newly prescribed ADHD medication who received a follow-up care visit within 30 days, with opportunities for improvement noted for COA in the same measure indicator.

Additionally, COA's rates for the *Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose Testing—Total*, *Cholesterol Testing—Total*, and *Blood Glucose and Cholesterol Testing—Total* measure indicators fell below the 50th percentile. Antipsychotic medication use is associated with adverse physical side effects (e.g., type 2 diabetes, cardiovascular disease), and children are more at risk for these side effects when they receive multiple antipsychotics.¹⁻¹¹ COA and the Department should conduct root cause analyses for the low monitoring rates for members prescribed ADHD and/or antipsychotic medications to determine the nature and scope of the issue (e.g., are the issues related to barriers to accessing care or the need for improved provider training) and implement strategies to improve the care for these members.

Respiratory Conditions

According to the Centers for Disease Control and Prevention (CDC), antibiotics do not help treat acute bronchitis (chest cold) and acute upper respiratory tract infections, as the common cold resolves without antibiotic treatment.¹⁻¹² For HEDIS MY 2020, four of five (80.0 percent) MCOs demonstrated strong performance in the Respiratory Conditions domain. COA's rates for both *Asthma Medication Ratio* measure indicators and the *Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Ages 3 Months to 17 Years* measure indicator were at or above the 75th percentile. DHMP's rate for the *Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years* measure indicator was at or above the 90th percentile. Kaiser's and RMHP's rates for the *Appropriate Testing for*

¹⁻¹⁰ Centers for Disease Control and Prevention. *Tips for Developing Chlamydia Screening Messages and Materials for Young Women*. Available at: <https://www.cdc.gov/std/chlamydia/ctMessages/Tips%20for%20CT%20screening%20mssg-%20young%20women-FINAL%20508%20compliant.pdf>. Access on Sept 22, 2021.

¹⁻¹¹ Correll CU, Detraux J, De Lepeleire J, De Hert M. Effects of antipsychotics, antidepressants and mood stabilizers on risk for physical diseases in people with schizophrenia, depression and bipolar disorder. *World Psychiatry*. 2015;14(2):119-36.

¹⁻¹² Centers for Disease Control and Prevention. *Be Antibiotics Aware*. https://www.cdc.gov/antibiotic-use/community/images/AU_gif3_infections_v06_TW1.gif. Accessed on Sept 22, 2021.

Pharyngitis—Ages 3 to 17 Years, Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years, and Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Ages 3 Months to 17 Years measure indicators were at or above the 75th percentile.

Use of Services

Reported rates for the MCOs and CHP+ weighted averages for the Use of Services domain did not take into account the characteristics of the population; therefore, HSAG could not draw conclusions regarding performance based on the reported utilization results. Nonetheless, combined with other performance metrics, the utilization results provide additional information that MCOs may use to assess barriers or patterns of utilization when evaluating improvement interventions.

Limitations and Considerations

- Since all HEDIS MY 2020 measures were reported using the administrative methodology according to the Department’s direction, MCOs that were able to obtain supplemental data or capture more complete data will generally report higher rates when using the administrative methodology. As a result, the rates presented in this report for measures with a hybrid option may be more representative of data completeness rather than a measure of performance.
- National HEDIS percentiles are not available for the CHIP population; therefore, comparison of the CHP+ MCOs’ rates to Medicaid percentiles should be interpreted with caution.

Introduction

The reader’s guide is designed to provide supplemental information to the reader that may aid in the interpretation and use of the results presented in this report.

CHP+ MCO Names

Table 2-1 presents the CHP+ MCOs discussed within this report and their corresponding abbreviations.

Table 2-1—2021 CHP+ MCO Names and Abbreviations

CHP+ MCO Name	Abbreviation
Colorado Access	COA
Denver Health Medical Plan	DHMP
Friday Health Plans of Colorado	FHP
Kaiser Permanente Colorado	Kaiser
Rocky Mountain Health Plans	RMHP

Summary of HEDIS MY 2020 Measures

Within this report, HSAG presents the statewide and MCO-specific performance on HEDIS measures selected by the Department for HEDIS MY 2020. The HEDIS measures selected by the Department were grouped into the following domains of care: Pediatric Care, Access to Care and Preventive Screening, Mental/Behavioral Health, Respiratory Conditions, and Use of Services.^{2-1,2-2} While performance is reported primarily at the measure indicator level, grouping these measures into domains encourages the MCOs and the Department to consider the measures as a whole rather than in isolation and to develop the strategic changes required to improve overall performance.

²⁻¹ The CHP+ SMCN was only required to report one measure, *Prenatal and Postpartum Care*.

²⁻² DentaQuest was only required to report one measure, *Annual Dental Visit*.

Table 2-2 shows the selected HEDIS MY 2020 measures and measure indicators that are presented within this report as well as the corresponding domains of care. Additional measure indicator rates are displayed within the appendices for more granular definitions of MCO performance for select measures. For example, the *Total* rates for the *Metabolic Monitoring for Children and Adolescents on Antipsychotics* measure indicators are displayed in the Executive Summary and Section 5 of this report to provide an overall understanding of plan and statewide performance associated with antipsychotic medication use for members 1 to 17 years of age. *Metabolic Monitoring for Children and Adolescents on Antipsychotics* rates for *Ages 1 to 11* and *Ages 12 to 17* are presented along with the *Total* in the appendices.

Table 2-2—HEDIS MY 2020 Selected Measures

Performance Measures
Pediatric Care
<i>Childhood Immunization Status—Combinations 2–10</i>
<i>Immunizations for Adolescents—Combination 1 (Meningococcal, Tdap) and Combination 2 (Meningococcal, Tdap, HPV)</i>
<i>Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits and Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits</i>
<i>Child and Adolescent Well-Care Visits—Total</i>
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total, Counseling for Nutrition—Total, and Counseling for Physical Activity—Total</i>
Access to Care and Preventive Screening
<i>Prenatal and Postpartum Care—Timeliness of Prenatal Care and Postpartum Care*</i>
<i>Annual Dental Visit—Total**</i>
<i>Chlamydia Screening in Women—Ages 16 to 20 Years</i>
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females</i>
Mental/Behavioral Health
<i>Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase and Continuation and Maintenance Phase</i>
<i>Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose Testing—Total, Cholesterol Testing—Total, and Blood Glucose and Cholesterol Testing—Total</i>
Respiratory Conditions
<i>Appropriate Testing for Pharyngitis—Ages 3 to 17 Years</i>
<i>Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years</i>
<i>Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Ages 3 Months to 17 Years</i>

Performance Measures
<i>Asthma Medication Ratio—Ages 5 to 11 Years and Ages 12 to 18 Years</i>
Use of Services
<i>Ambulatory Care—ED Visits—Total and Outpatient Visits—Total</i>
<i>Inpatient Utilization—General Hospital/Acute Care—Total Discharges per 1,000 Member Months (Total Inpatient), Total Average Length of Stay (Total Inpatient), Total Discharges per 1,000 Member Months (Medicine), Total Average Length of Stay (Medicine), Total Discharges per 1,000 Member Months (Surgery), Total Average Length of Stay (Surgery), Maternity—Total Discharges per 1,000 Member Months (Maternity), and Total Average Length of Stay (Maternity)</i>
<i>Antibiotic Utilization—Average Scripts PMPY for Antibiotics—Total, Average Days Supplied per Antibiotic Script—Total, Average Scripts PMPY for Antibiotics of Concern—Total, and Percentage of Antibiotics of Concern of All Antibiotic Scripts—Total</i>

* The CHP+ State Managed Care Network (SMCN) was only required to report one measure, Prenatal and Postpartum Care.

** DentaQuest was only required to report one measure, Annual Dental Visit.

Of note, HEDIS technical measure descriptions are included throughout this report, which include age requirements for inclusion in the measure. In some instances, the HEDIS technical measure definition includes individuals who would not be eligible for the CHP+ program (i.e., some measures apply to adults who are age 18 and older; however, the CHP+ program is limited to individuals who are in the month of their 19th birthday or younger). Therefore, the measure results actually reflect a more limited age group than the HEDIS technical specification definition.

Data Collection Method

According to the Department’s guidance, all measure rates presented in this report for the MCOs are based on administrative data only. The administrative method requires that the MCOs identify the eligible population (i.e., the denominator) using administrative data, derived from claims and encounters. In addition, the numerator(s), or services provided to the members in the eligible population, are derived solely using administrative and supplemental data collected during the reporting year. Supplemental data include immunization registry data, medical record review data from the prior year, etc. Medical records collected during the current year cannot be used to retrieve information. When using the administrative method, the entire eligible population becomes the denominator, and sampling is not allowed. In contrast, the hybrid method extracts a systematic sample of members and utilizes data from the medical record, along with administrative and supplemental data. The hybrid method generally produces higher rates because the completeness of documentation in the medical record exceeds what is typically captured in administrative data; however, the medical record review component of the hybrid method is considered more labor intensive. The data collection or calculation methods (i.e., administrative, hybrid) for each measure are described in detail by NCQA in the *HEDIS MY 2020 Volume 2 Technical Specifications*.

Data Sources and Measure Audit Results

MCO-specific performance displayed in this report was based on data elements obtained from the IDSS files or the Microsoft (MS) Excel files supplied by the MCOs contracted with the Department to provide CHP+ services. Prior to HSAG's receipt of the MCOs' IDSS files or MS Excel files, all the MCOs were required by the Department to have their HEDIS MY 2020 results examined and verified through an NCQA HEDIS Compliance Audit.

Through the audit process, each measure indicator rate reported by an MCO was assigned an NCQA-defined audit result. HEDIS MY 2020 measure indicator rates received one of seven predefined audit results: *Reportable (R)*, *Small Denominator (NA)*, *Biased Rate (BR)*, *No Benefit (NB)*, *Not Required (NQ)*, *Not Reported (NR)*, and *Unaudited (UN)*. The audit results are defined in the Glossary section.

Please see Appendix C for additional information on NCQA's Information System (IS) standards and the audit findings for the CHP+ MCOs.

Differences in Calculations

The *Prenatal and Postpartum Care* measure was calculated using modified measure specifications to address the use of bundled service billing. Only the SMCN was required to report this measure. Of note, the SMCN's calculated rates did not undergo an NCQA HEDIS Compliance Audit.

In a case where a provider submitted a bundled service claim, but did not indicate the date when prenatal care was initiated, the following criteria were used as a proxy to determine the date when prenatal care was initiated to calculate the rate for *Timeliness of Prenatal Care*:

- Any visit with the same obstetrician/gynecologist (OB/GYN) who submitted the bundled service claim during the relevant time period.
- A claim for an obstetric ultrasound during the relevant time period.

In a case where a provider submitted a bundled service claim, but did not indicate the date when postpartum care was rendered, any visit with the same OB/GYN during the relevant time period was used as a proxy to determine the date when postpartum care was rendered to calculate the rate for *Postpartum Care*.

Calculation of Statewide Averages

To calculate the statewide weighted averages, HSAG collected the audited results, numerator, denominator, rate, audit designation, and eligible population data elements reported in the files submitted by the five CHP+ MCOs for all measures. Given that the MCOs varied in membership size and demographic configuration, the statewide rate for a measure was the average rate weighted by each MCOs' eligible population for the measure. Weighting the rates by the eligible population sizes ensured that the rate for an MCO with 125,000 members, for example, had a greater impact on the overall Colorado CHP+ weighted average rate than the rate for an MCO with only 10,000 members. For the MCOs with rates reported as *NA* due to small denominators, the numerators, denominators, and eligible populations were still included in the calculations of the statewide weighted average. However, MCO rates reported as *BR*, *NB*, *NQ*, *NR*, or *UN* were excluded from the statewide weighted average calculation.

Evaluating Measure Results

National Benchmark Comparisons

Benchmark Data

HEDIS MY 2020 MCO rates and the statewide weighted average rates were compared to the corresponding national HEDIS benchmarks, which are expressed in percentiles of national performance for each measure. For comparative purposes, HSAG used the most recent data available from NCQA at the time of the production of this report to evaluate the HEDIS MY 2020 rates: NCQA's Quality Compass national Medicaid HMO percentiles for HEDIS MY 2019.

For some measures for which lower rates indicate better performance (e.g., *Ambulatory Care—ED Visits* and *Antibiotic Utilization*), HSAG inverted the percentiles to be consistently applied to these measures as with the other HEDIS measures. For example, the 10th percentile (a lower rate) was inverted to become the 90th percentile, indicating better performance.

Since national percentiles are not available specifically for the CHIP population, the CHP+ MCOs' rates as well as the Colorado CHP+ statewide weighted averages were compared to the national percentiles, which were composed of performance from all Medicaid plans. Therefore, comparisons of Colorado's CHP+ population measure indicator rates to the benchmarks should be interpreted with caution.

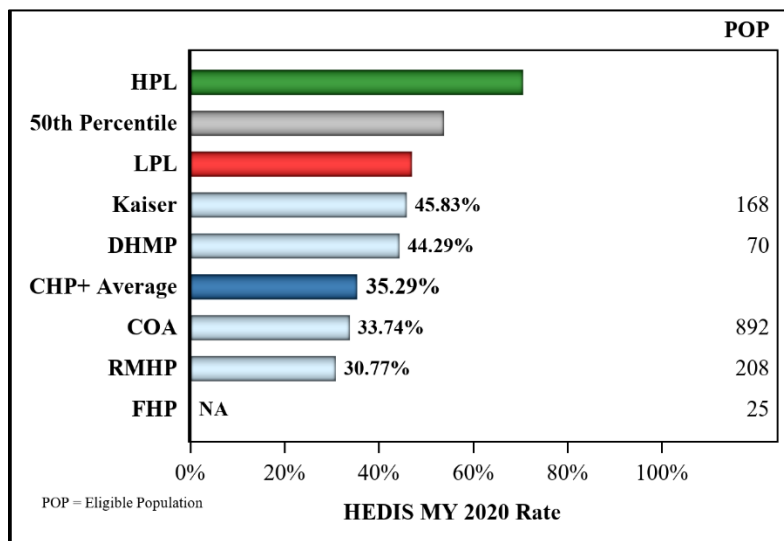
Additionally, benchmarking data (i.e., NCQA Quality Compass) are the proprietary intellectual property of NCQA; therefore, this report does not display any actual percentile values. As a result, rate comparisons to benchmarks are illustrated within this report using proxy displays.

Figure Interpretation

For each performance measure indicator presented in this report, the horizontal bar graph figure positioned on the right side of the page presents each MCO's performance against the HEDIS MY 2020 Colorado CHP+ weighted average (i.e., the bar shaded darker blue) as well as the 50th percentile (i.e., the bar shaded gray), and the high (i.e., the bar shaded green) and low (i.e., the bar shaded red) performance levels.

For most performance measures, the high performance level (HPL) corresponds to the 90th percentile and the low performance level (LPL) corresponds to the 25th percentile. For measures such as *Ambulatory Care—ED Visits* and *Antibiotic Utilization* in which lower rates indicate better performance, the 10th percentile (rather than the 90th percentile) and the 75th percentile (rather than the 25th percentile) are considered the HPL and LPL, respectively. An example of the horizontal bar graph figure for one measure is shown in Figure 2-1.

Figure 2-1—Sample Horizontal Bar Graph Figure



Percentile Rankings and Star Ratings

In addition to illustrating MCO-specific and statewide performance via side-by-side comparisons to national percentiles, benchmark comparisons are denoted within this report using the percentile ranking performance levels and star ratings defined below in Table 2-3.

Table 2-3—Percentile Ranking Performance Levels

Star Rating	Percentile Ranking	Performance Level
★★★★★	≥90th	At or above the 90th percentile
★★★★	75th–89th	At or above the 75th percentile but below the 90th percentile
★★★	50th–74th	At or above the 50th percentile but below the 75th percentile
★★	25th–49th	At or above the 25th percentile but below the 50th percentile
★	10th–24th	At or above the 10th percentile but below the 25th percentile
	<10th	Below the 10th percentile

Some measures in the Use of Services measure domain are designed to capture the frequency of services provided. Higher or lower rates in this domain do not necessarily indicate better or worse performance. These rates and the associated percentile rankings are provided for information only.

Of note, MCO-specific and statewide rates were rounded to the second decimal place before performance levels were determined. As HSAG assigned percentile rankings and star ratings, an em dash (—) was presented to indicate when the measure did not have an applicable benchmark; therefore, the performance levels for these measures were not presented in this report.

Trend Analysis

In addition to the percentile ranking and star rating results, HSAG also compared HEDIS MY 2020 Colorado CHP+ weighted averages and MCO-specific rates to the corresponding HEDIS MY 2020 rates. HSAG also evaluated the extent of changes observed in the rates between years. Year-over-year performance comparisons are based on the Chi-square test of statistical significance with a *p* value <0.05. However, caution should be exercised when interpreting results of the significance testing, given that statistically significant changes may not necessarily be clinically significant. To limit the impact of this, a change will not be considered statistically significant unless the change was at least 3 percentage points. Note that statistical testing could not be performed on the utilization-based measures under the Use of Services domain given that variances were not available in the IDSS or MS Excel files for HSAG to use for statistical testing.

In general, results from statistical significance testing provide information on whether a change in the rate may suggest improvement or decline in performance. Throughout the report, references to “significant” changes in performance are noted; these instances refer to statistically significant

differences between performance from HEDIS MY 2019 to HEDIS MY 2020. At the statewide level, if the number of MCOs reporting *NR* or *BR* differs vastly from year to year, the statewide performance may not represent all of the contracted MCOs, and any changes observed across years may need to take this factor into consideration. Nonetheless, changes (regardless of whether they are significant) could be related to the following factors independent of any effective interventions designed to improve the quality of care:

- Substantial changes in measure specifications. The “Measure Changes Between HEDIS MY 2019 and HEDIS MY 2020” section lists measures with specification changes made by NCQA.
- Substantial changes in membership composition within the MCO.

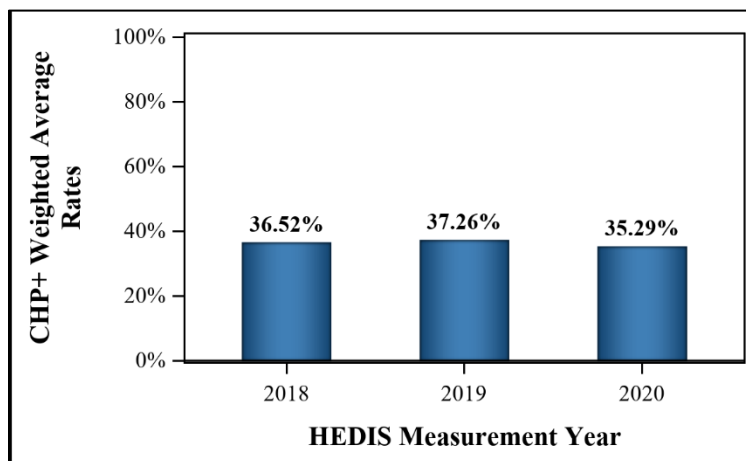
Similarly, caution should be exercised when comparing rates calculated administratively to national benchmarks that were calculated using the hybrid methodology.

Figure Interpretation

Within the Executive Summary and Appendix B of this report, performance measure indicator rates and results of significance testing between HEDIS MY 2019 and HEDIS MY 2020 are presented in tabular format. HEDIS MY 2020 rates shaded green with one caret (^) indicate a significant improvement in performance from the previous year. HEDIS MY 2020 rates shaded red with two carets (^) indicate a significant decline in performance from the previous year.

For each performance measure indicator presented in this report, the vertical bar graph figure positioned on the left side of the page presents the HEDIS MY 2018, HEDIS MY 2019, and HEDIS MY 2020 Colorado CHP+ weighted averages, with significance testing performed between the HEDIS MY 2019 and HEDIS MY 2020 weighted averages. Within these figures, HEDIS MY 2020 rates with one caret (^) indicate a significant improvement in performance from HEDIS MY 2019. HEDIS MY 2020 rates with two carets (^) indicate a significant decline in performance from HEDIS MY 2019. An example of the vertical bar graph figure for measure indicators reported is shown in Figure 2-2.

Figure 2-2—Sample Vertical Bar Graph Figure



Measure Changes Between HEDIS MY 2019 and HEDIS MY 2020

The following is a list of measures with technical specification changes that NCQA announced for HEDIS MY 2020.^{2-3,2-4} These changes may have an effect on the HEDIS MY 2020 rates that are presented in this report.

Childhood Immunization Status

- Added a requirement that live attenuated influenza vaccine (LAIV) (influenza) vaccination must occur on the child's second birthday.

Well-Child Visits in the First 30 Months of Life

- Revised the measure name to *Well-Child Visits in the First 30 Months of Life*.
- Retired the 0, 1, 2, 3, 4 and 5 well-child visit rates.
- Added Rate 2 for children who turned 30 months old during the measurement year and had two or more well-child visits in the last 15 months.
- Removed the Hybrid Data Collection Method.
- Removed the telehealth exclusion.
- Revised the Data Elements for Reporting table.
- Revised the Ages criteria in the *Rules for Allowable Adjustments* section to only allow ranges within the specified age range of the measure.

Child and Adolescent Well-Care Visits

- This measure is a combination measure that replaces the former *Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life* and *Adolescent Well-Care Visits* HEDIS measures.
- Added members age 7 to 11 years.
- Added age stratifications.
- Removed the Hybrid Data Collection Method.
- Removed the telehealth exclusion.
- Revised the Data Elements for Reporting table.
- Revised the Ages criteria in the *Rules for Allowable Adjustments* section to only allow ranges within the specified age range.

²⁻³ National Committee for Quality Assurance. *HEDIS® Measurement Year 2020 & Measurement Year 2021, Volume 2: Technical Specifications for Health Plans*. Washington, DC: NCQA Publication, 2020.

²⁻⁴ National Committee for Quality Assurance. *HEDIS® Measurement Year (MY) 2020, Volume 2: Technical Update*. Washington, DC: NCQA Publication, 2020.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

- Removed the exclusion of member-reported biometric values (body mass index, height, and weight).
- Added a *Note* to clarify that services rendered during a telephone visit, e-visit, or virtual check-in meet criteria for the *Counseling for Nutrition* and *Counseling for Physical Activity* indicators.

Prenatal and Postpartum Care

- Revised the definition of “last enrollment segment.”
- Clarified that visits that occur prior to the enrollment start date (during the pregnancy) meet criteria.
- Added telephone visits (Telephone Visits Value Set), e-visits, and virtual check-ins (Online Assessments Value Set) to the *Timeliness of Prenatal Care* rate (administrative specification) and clarified in the *Notes* that services provided via telephone, e-visit, or virtual check-in are eligible for use in reporting both rates.
- Updated the Hybrid Specification to indicate that sample size reduction is allowed using only the current year’s administrative rate for MY 2020; for MY 2021, organizations may reduce the sample size using the current year’s administrative rate or the prior year’s audited, product line-specific rate.
- Added examples of “pregnancy diagnosis” in the Hybrid Specification of the *Timeliness of Prenatal Care* indicator.

Follow-Up Care for Children Prescribed ADHD Medication

- Clarified in step 4 (of both rates) when the diagnosis must be on the discharge claim.
- Added telehealth and telephone visits to the Rate 1 numerator.
- Added e-visits and virtual check-ins to the Rate 2 numerator and modified the telehealth restrictions.

Metabolic Monitoring for Children and Adolescents on Antipsychotics

- Clarified in the *Rules for Allowable Adjustments of HEDIS* section that when adjusting ages, the upper age range may be expanded or there may be no upper age limit.

Appropriate Testing for Pharyngitis

- Updated the instructions for excluding visits that result in an inpatient stay.
- Deleted step 8; this step is unnecessary because these members are removed in step 5.

Appropriate Treatment for Upper Respiratory Infection

- Updated the instructions for excluding visits that result in an inpatient stay.
- In the *Rules for Allowable Adjustments* section, clarified that the numerator criteria may be adjusted with limits.

Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis

- Updated the instructions for excluding visits that result in an inpatient stay.
- In the *Rules for Allowable Adjustments* section, clarified that the numerator criteria may be adjusted with limits.

Asthma Medication Ratio

- Removed the restriction that only three of the four visits with an asthma diagnosis be an outpatient telehealth, telephone visit, e-visit, or virtual check-in when identifying the event/diagnosis.
- Clarified in step 1 when the diagnosis must be on the discharge claim.
- Added Dupilumab to the “Anti-interleukin-4” description in the Dupilumab Medications List.
- Clarified National Drug Code (NDC) code mapping requirements in the *Notes*.

Glossary

Table 2-4 provides definitions of terms, abbreviations, and acronyms used through this report.

Table 2-4—Definition of Terms

Term	Description
ADHD	Attention-deficit/hyperactivity disorder.
Audit Result	The HEDIS auditor’s final determination, based on audit findings, of the appropriateness of the MCO to publicly report its HEDIS measure rates. Each measure indicator rate included in the HEDIS audit receives an audit result of <i>Reportable (R)</i> , <i>Small Denominator (NA)</i> , <i>Biased Rate (BR)</i> , <i>No Benefit (NB)</i> , <i>Not Required (NQ)</i> , <i>Not Reported (NR)</i> , and <i>Unaudited (UN)</i> .
ADMIN%	Percentage of the final hybrid measure rate that was derived administratively (e.g., claims data and immunization registry).
BMI	Body Mass Index.
BR	Biased Rate: indicates that the MCO’s reported rate was invalid; therefore, the rate was not presented.
Continuous Enrollment Requirement	The minimum amount of time that a member must be enrolled in the MCO to be eligible for inclusion in a measure to ensure that the MCO has a sufficient amount of time to be held accountable for providing services to that member.
CHIP	Children’s Health Insurance Program.
CHP+	Child Health Plan <i>Plus</i> , Colorado’s program implementing the CHIP.
COVID-19	Coronavirus disease 2019.
CVX	Vaccine administered codes.
Data Completeness	The degree to which occurring services/diagnoses appear in the MCO’s administrative data systems.

Term	Description
Denominator	The number of members who meet all criteria specified in a measure for inclusion in the eligible population. When using the administrative method, the entire eligible population becomes the denominator. When using the hybrid method, a sample of the eligible population becomes the denominator.
DTaP	Diphtheria, tetanus toxoids, and acellular pertussis.
ED	Emergency department.
EDD	Estimated date of delivery.
EDI	Electronic data interchange; the direct computer-to-computer transfer of data.
Electronic Data	Data that are maintained in a computer environment versus a paper environment.
Encounter Data	Billing data received from a capitated provider. (Although the MCO does not reimburse the provider for each encounter, submission of encounter data allows the MCO to collect the data for future HEDIS reporting.)
EQR	External quality review.
Exclusions	Conditions outlined in HEDIS measure specifications that describe when a member should not be included in the denominator.
Final Audit Report	Following the MCO's completion of any corrective actions, an auditor completes the final audit report, documenting all final findings and results of the HEDIS audit. The final audit report includes a summary report, IS capabilities assessment, medical record review validation findings, measure results, and the auditor's audit opinion (the final audit statement).
Flu	Influenza.
FY	Fiscal year.
HEDIS	The Healthcare Effectiveness Data and Information Set (HEDIS), developed and maintained by NCQA, is a set of performance measures used to assess the quality of care provided by managed health care organizations.
HEDIS Repository	The data warehouse where all data used for HEDIS reporting are stored.
HepA	Hepatitis A.
HepB	Hepatitis B.
HiB	Haemophilus influenza type B.
HMO	Health maintenance organization.
HPL	High performance level. (For most performance measures, the Department defined the HPL as the most recent 90th percentile. For measures such as <i>Ambulatory Care—ED Visits</i> , in which lower rates indicate better performance, the 10th percentile [rather than the 90th percentile] is considered the HPL.)
HPV	Human papillomavirus.
hrHPV	High-risk human papillomavirus.

Term	Description
HSAG	Health Services Advisory Group, Inc., the State's external quality review organization.
Hybrid Measures	Measures that can be reported using the hybrid method.
IDSS	The Interactive Data Submission System, a tool used to submit data to NCQA.
IPV	Inactivated polio virus.
IS	Information System; an automated system for collecting, processing, and transmitting data.
IS Standards	Information System (IS) standards; an NCQA-defined set of standards that measure how an organization collects, stores, analyzes, and reports medical, customer service, member, practitioner, and vendor data. ²⁻⁵
IT	Information technology; the technology used to create, store, exchange, and use information in its various forms.
LPL	Low performance level. (For most performance measures, the Department defined the LPL as the most recent 25th national Medicaid percentile. For measures such as <i>Ambulatory Care—ED Visits</i> , in which lower rates indicate better performance, the 75th percentile [rather than the 25th percentile] is considered the LPL).
Material Bias	For most measures reported as a rate, any error that causes a ± 5 percent difference in the reported rate is considered materially biased. For non-rate measures, any error that causes a ± 10 percent difference in the reported rate or calculation is considered materially biased.
Medical Record Validation	The process that auditors follow to verify that the MCO's medical record abstraction meets industry standards and abstracted data are accurate.
Medicaid Percentiles	The NCQA national percentiles for each HEDIS measure for the Medicaid product line used to compare the MCO's performance and assess the reliability of the MCO's HEDIS rates.
MMR	Measles, mumps, and rubella.
MRR	Medical record review.

²⁻⁵ National Committee for Quality Assurance. HEDIS Compliance Audit Standards, Policies and Procedures, Volume 5. Washington D.C.

Term	Description
NA	<p>Small Denominator; indicates that the MCO followed the specifications but the denominator was too small (<30) to report a valid rate, resulting in an NA designation.</p> <ul style="list-style-type: none"> • For effectiveness of care (EOC) and EOC-like measures, when the denominator is fewer than 30. • For utilization measures that count member months, when the denominator is fewer than 360 member months. • For all risk-adjusted utilization measures, when the denominator is fewer than 150.
NB	<p>No Benefit; indicates that the required benefit to calculate the measure was not offered.</p>
NCQA	<p>The National Committee for Quality Assurance (NCQA) is a not-for-profit organization that assesses, through accreditation reviews and standardized measures, the quality of care provided by managed health care delivery systems; reports results of those assessments to employers, consumers, public purchasers, and regulators; and ultimately seeks to improve the health care provided within the managed care industry.</p>
NR	<p>Not Reported; indicates that the MCO chose not to report the required HEDIS measure indicator rate. This designation was assigned to rates during previous reporting years to indicate one of the following designations: The MCO chose not to report the required measure indicator rate, or the MCO's reported rate was invalid.</p>
Numerator	<p>The number of members in the denominator who received all the services as specified in the measure.</p>
NQ	<p>Not Required; indicates that the MCO was not required to report this measure.</p>
OB/GYN	<p>Obstetrician/Gynecologist.</p>
PCP	<p>Primary care practitioner.</p>
PCV	<p>Pneumococcal conjugate.</p>
PHE	<p>Public health emergency.</p>
PMPY	<p>Per member per year.</p>
POP	<p>Eligible population.</p>
PPC	<p>Prenatal and Postpartum Care.</p>
Provider Data	<p>Electronic files containing information about physicians such as type of physician, specialty, reimbursement arrangement, and office location.</p>
Retroactive Enrollment	<p>When the effective date of a member's enrollment in the MCO occurs prior to the date that the MCO is notified of that member's enrollment. Medicaid members who are retroactively enrolled in the MCO may be excluded from a HEDIS measure denominator if the time period from the date of enrollment to the date of notification exceeds the measure's allowable gap specifications.</p>

Term	Description
Revenue Codes	Cost codes for facilities to bill based on the categories of services, procedures, supplies, and materials.
RV	Rotavirus.
SMCN	State Managed Care Network.
Software Vendor	A third party, with source code certified by NCQA, that contracts with the MCO to write source code for HEDIS measures. (For the measures to be certified, the vendor must submit programming codes associated with the measure to NCQA for automated testing of program logic, and a minimum percentage of the measures must receive a “Pass” or “Pass With Qualifications” designation.)
The Department	The Colorado Department of Health Care Policy and Financing.
UN	Unaudited; indicates that the organization chose to report a measure that is not required to be audited.
URI	Upper respiratory infection.
Quality Compass	NCQA Quality Compass benchmark.
VZV	Varicella zoster virus (chicken pox).

Pediatric Care

The following section provides a detailed analysis of the Colorado CHP+ MCOs' performance within the Pediatric Care domain. The Pediatric Care domain encompasses the following measures/indicators:

- *Childhood Immunization Status—Combination 2—Combination 10*
- *Immunizations for Adolescents—Combination 1 (Meningococcal, Tdap) and Combination 2 (Meningococcal, Tdap, HPV)*
- *Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits and Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits*
- *Child and Adolescent Well-Care Visits—Total*
- *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total, Counseling for Nutrition—Total, and Counseling for Physical Activity—Total*

Please see the “Reader’s Guide” section for guidance on interpreting the figures presented within this section. For reference, additional analyses for each measure indicator are displayed in Appendix A and Appendix B.

Childhood Immunization Status

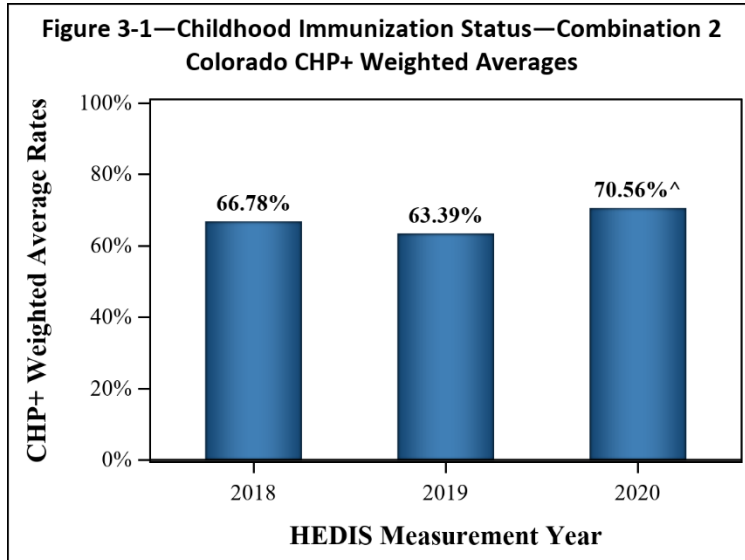
Childhood Immunization Status measures the percentage of members 2 years of age who received the following vaccinations on or before their second birthday. Table 3-1 displays the different antigens associated with various combinations.

Table 3-1—Combination Vaccinations for Childhood Immunization Status

Combination	Four DTaP	Three IPV	One MMR	Three HiB	Three HepB	One VZV	Four PCV	One HepA	Two or Three RV	Two Flu
Combination 2	✓	✓	✓	✓	✓	✓				
Combination 3	✓	✓	✓	✓	✓	✓	✓			
Combination 4	✓	✓	✓	✓	✓	✓	✓	✓		
Combination 5	✓	✓	✓	✓	✓	✓	✓		✓	
Combination 6	✓	✓	✓	✓	✓	✓	✓			✓
Combination 7	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Combination 8	✓	✓	✓	✓	✓	✓	✓	✓		✓
Combination 9	✓	✓	✓	✓	✓	✓	✓		✓	✓
Combination 10	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

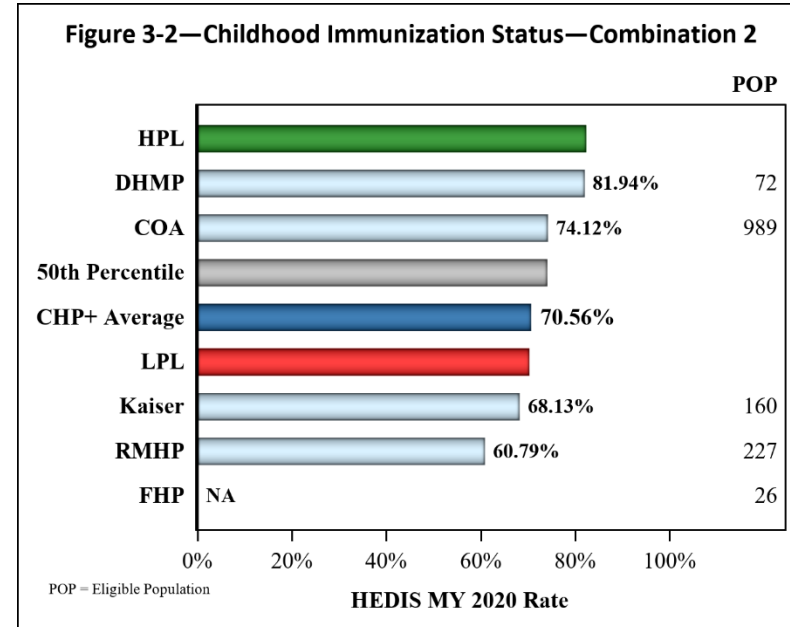
Childhood Immunization Status—Combination 2

Childhood Immunization Status—Combination 2 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, and one VZV.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

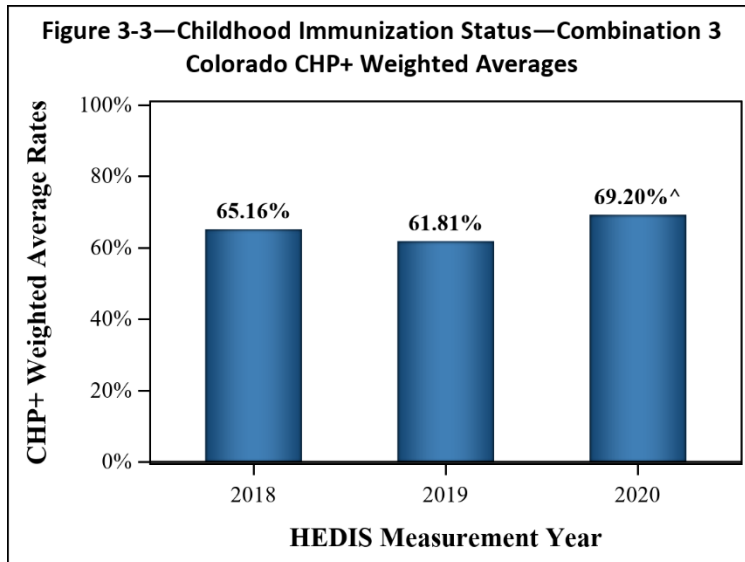


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

Two MCOs’ rates were above the 50th percentile but below the HPL. The Colorado CHP+ weighted average was above the LPL but below the 50th percentile. Two MCOs’ rates fell below the LPL. MCO performance varied by approximately 21 percentage points.

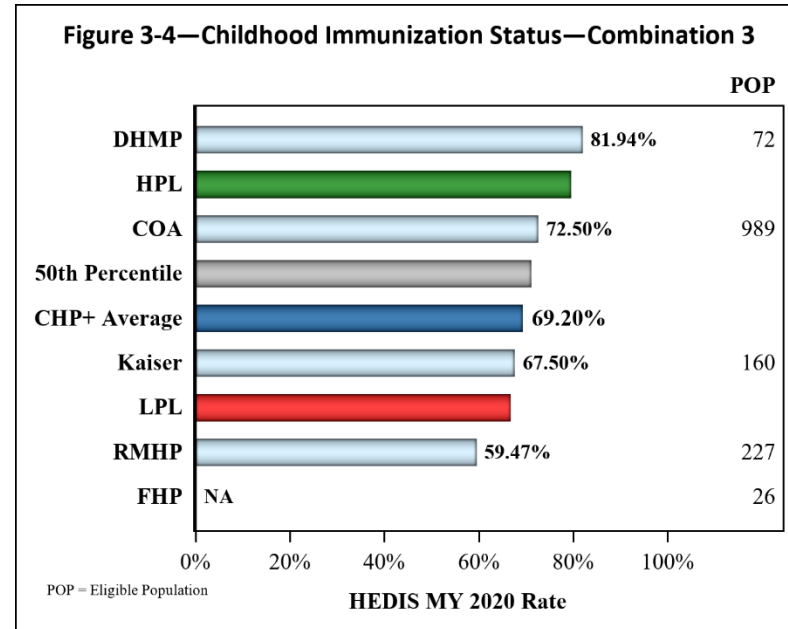
Childhood Immunization Status—Combination 3

Childhood Immunization Status—Combination 3 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, and four PCV.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

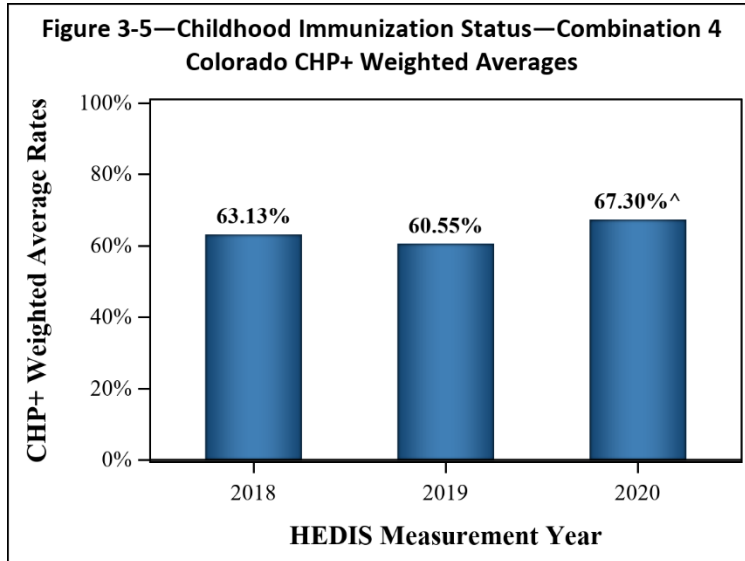


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

One MCO’s rate exceeded the HPL. One MCO’s rate was above the 50th percentile but below the HPL. One MCO’s rate and the Colorado CHP+ weighted average were above the LPL but below the 50th percentile. One MCO’s rate fell below the LPL. MCO performance varied by approximately 22 percentage points.

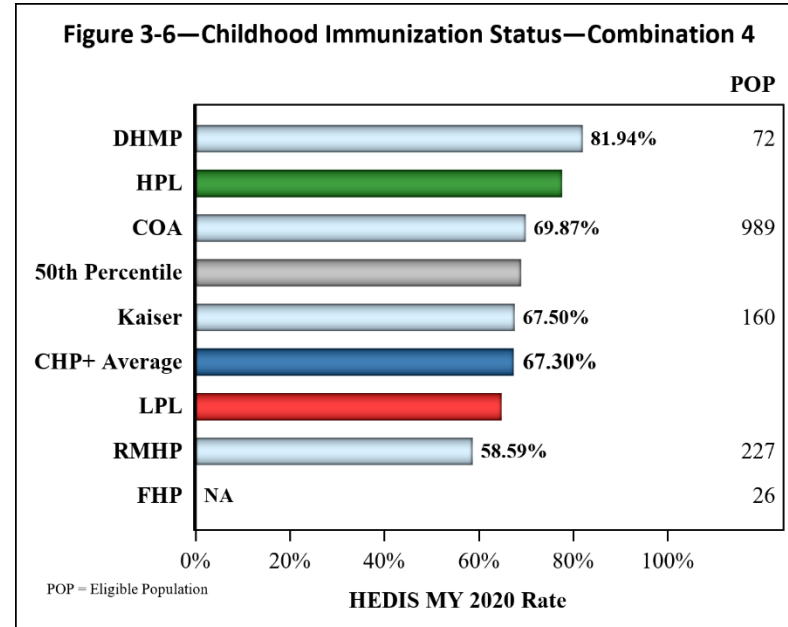
Childhood Immunization Status—Combination 4

Childhood Immunization Status—Combination 4 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, and one HepA.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

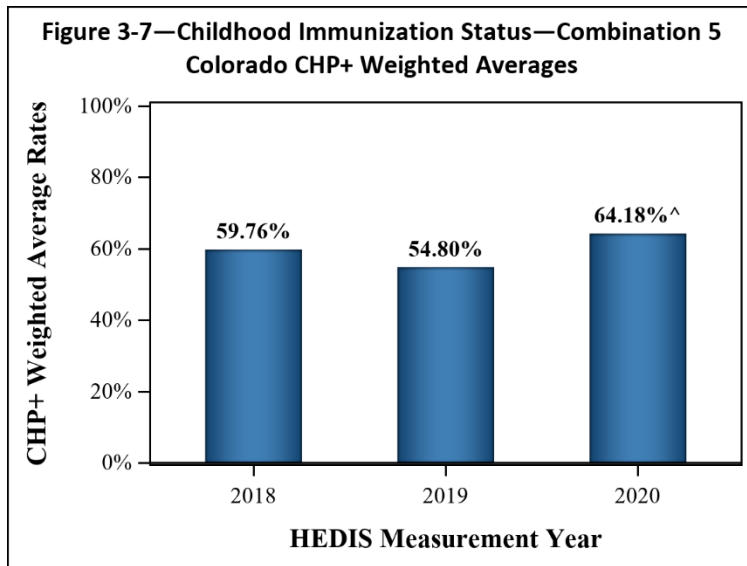


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

One MCO’s rate exceeded the HPL. One MCO’s rate was above the 50th percentile but below the HPL. One MCO’s rate and the Colorado CHP+ weighted average were above the LPL but below the 50th percentile. One MCO’s rate fell below the LPL. MCO performance varied by approximately 23 percentage points.

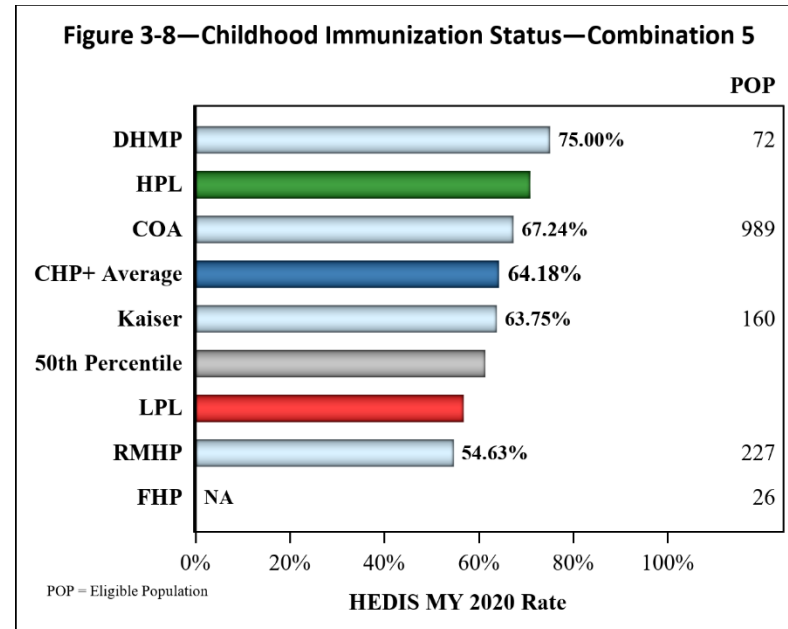
Childhood Immunization Status—Combination 5

Childhood Immunization Status—Combination 5 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, and two or three RV.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

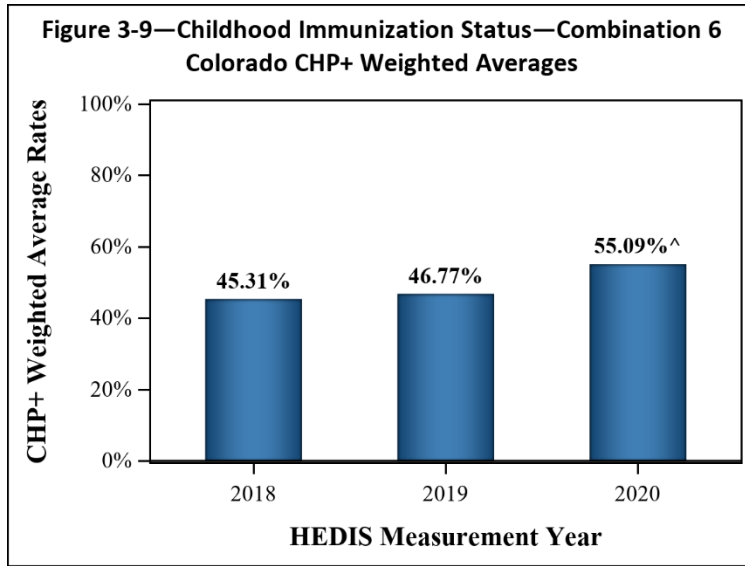


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

One MCO's rate exceeded the HPL. Two MCOs' rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. One MCO's rate fell below the LPL. MCO performance varied by approximately 20 percentage points.

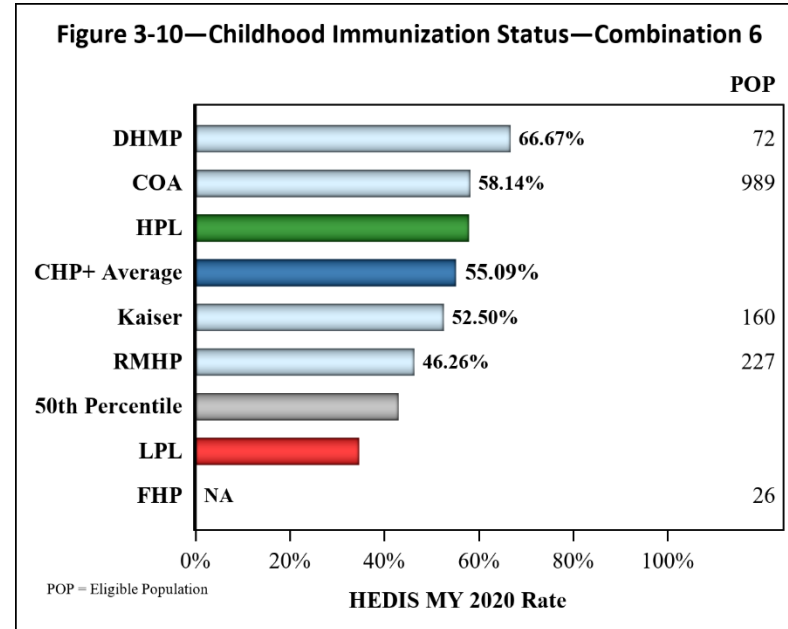
Childhood Immunization Status—Combination 6

Childhood Immunization Status—Combination 6 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, and two flu.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

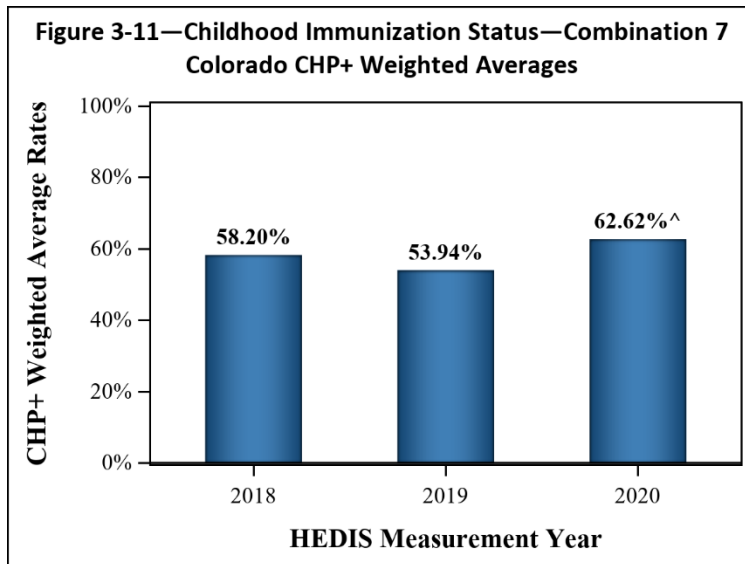


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

Two MCOs' rates exceeded the HPL. Two MCOs' rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. MCO performance varied by approximately 20 percentage points.

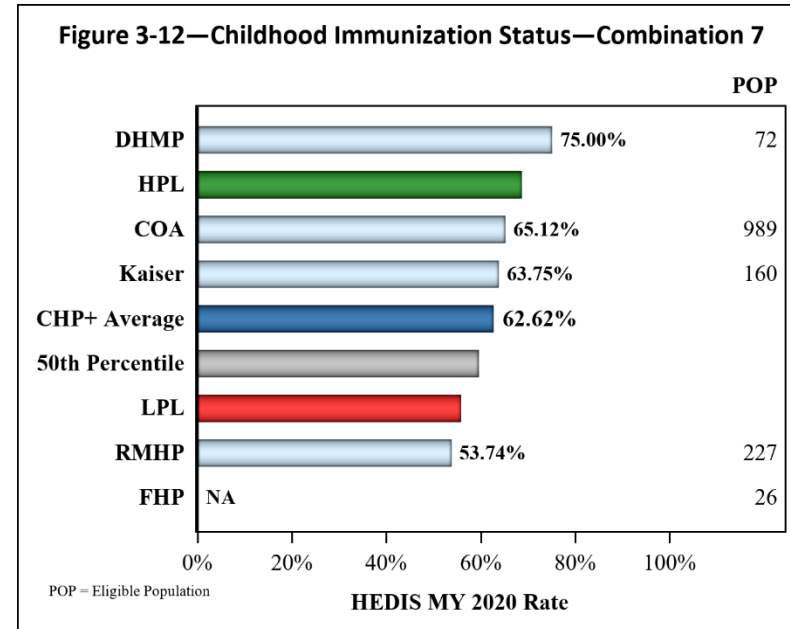
Childhood Immunization Status—Combination 7

Childhood Immunization Status—Combination 7 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, one HepA, and two or three RV.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

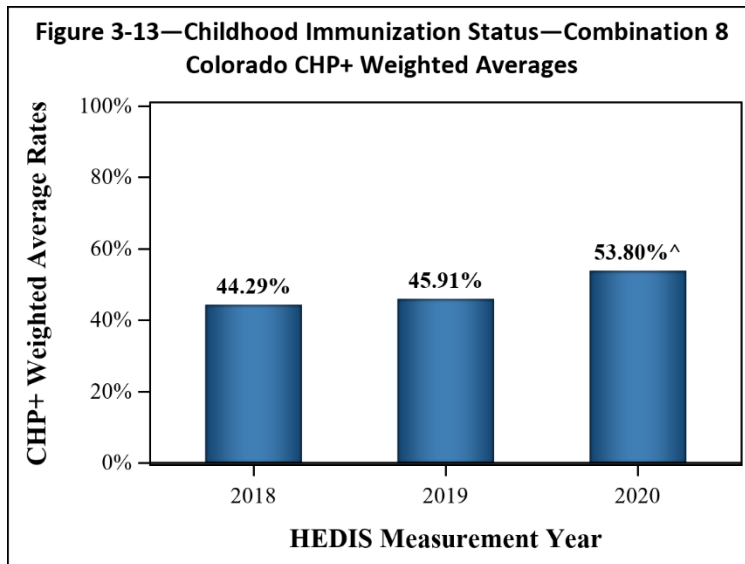


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

One MCO's rate exceeded the HPL. Two MCOs' rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. One MCO's rate fell below the LPL. MCO performance varied by approximately 21 percentage points.

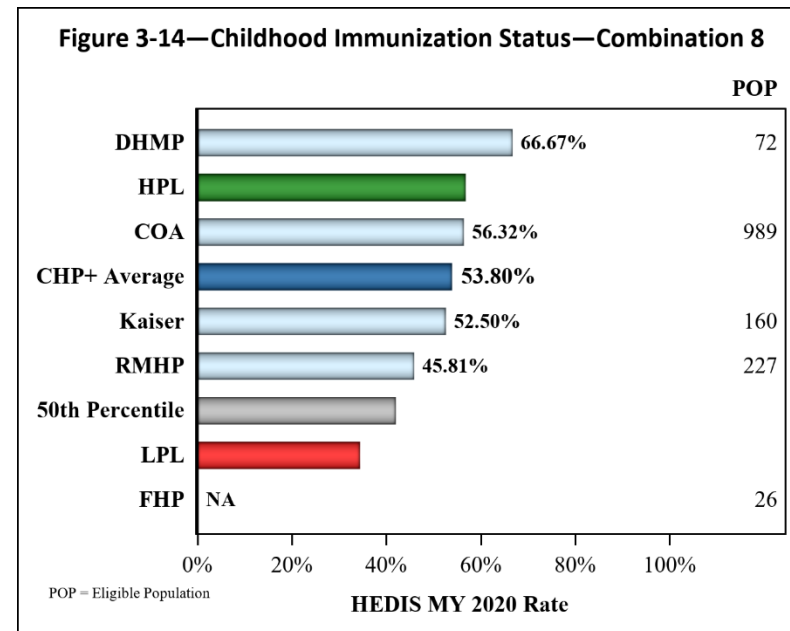
Childhood Immunization Status—Combination 8

Childhood Immunization Status—Combination 8 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, one HepA, and two flu.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

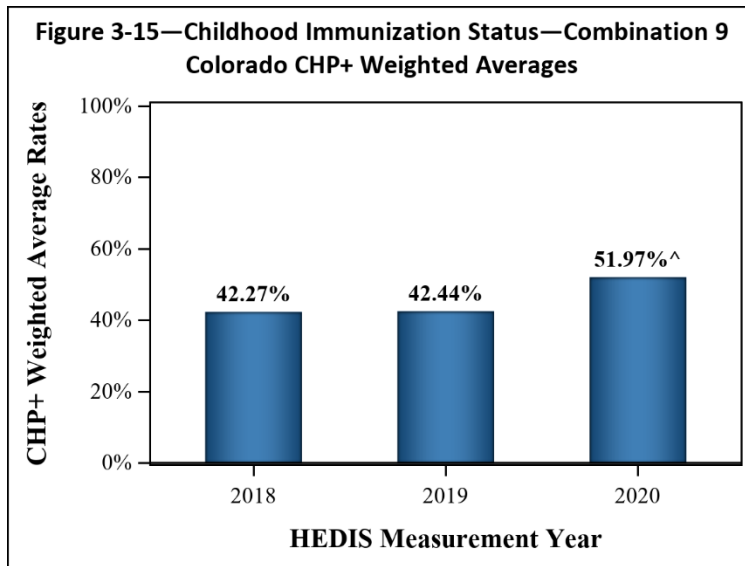


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

One MCO's rate exceeded the HPL. Three MCOs' rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. MCO performance varied by approximately 21 percentage points.

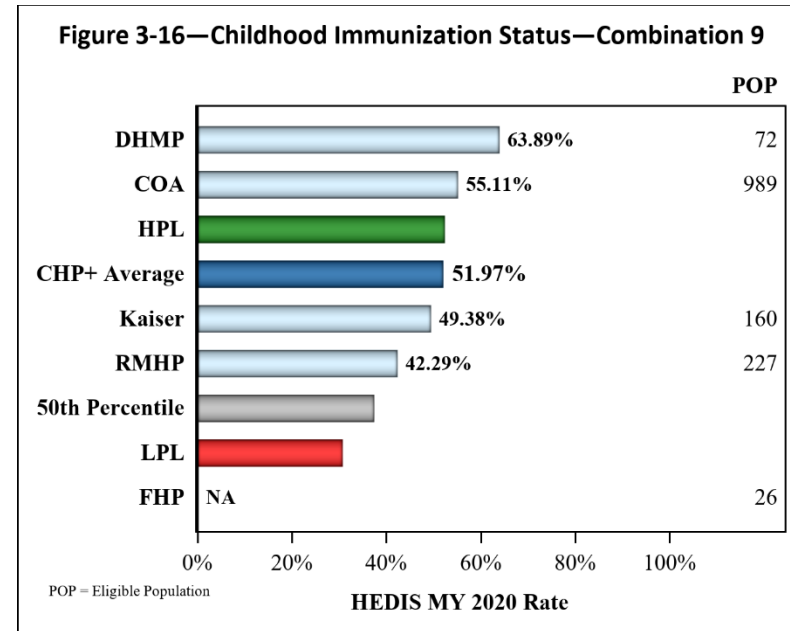
Childhood Immunization Status—Combination 9

Childhood Immunization Status—Combination 9 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, two or three RV, and two flu.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

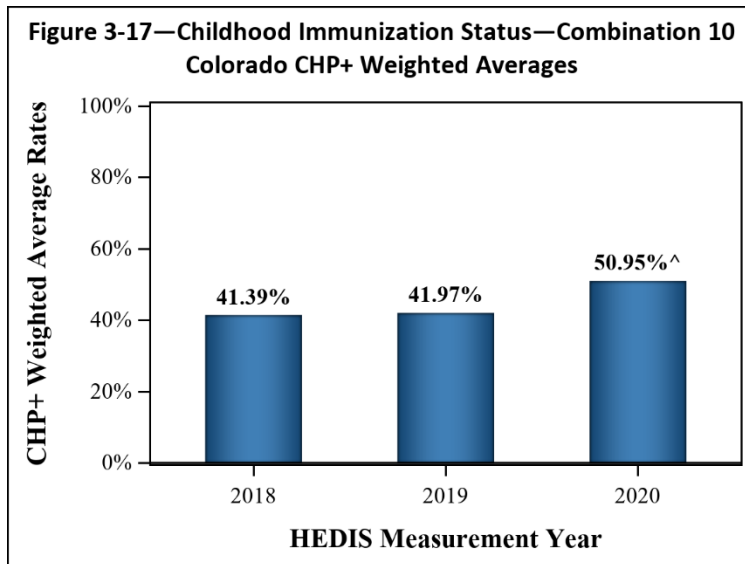


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

Two MCOs’ rates exceeded the HPL. Two MCOs’ rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. MCO performance varied by approximately 22 percentage points.

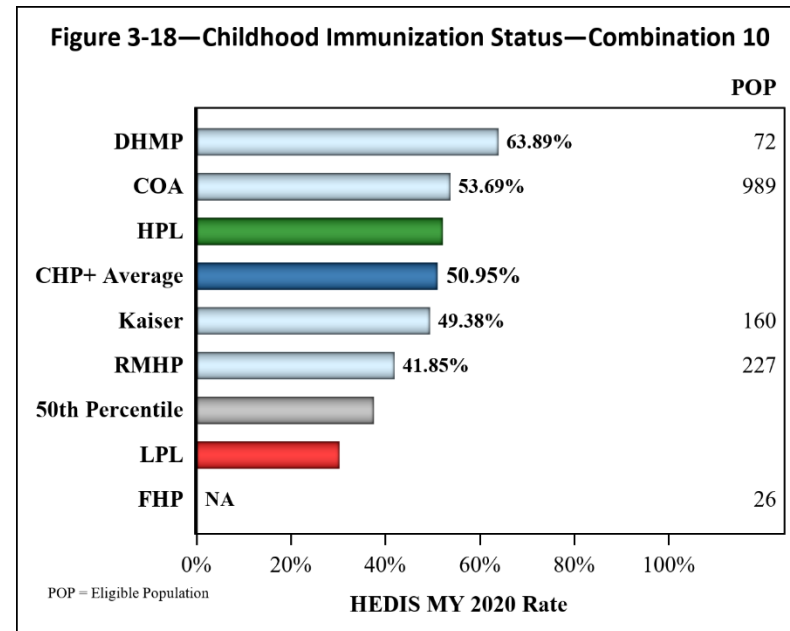
Childhood Immunization Status—Combination 10

Childhood Immunization Status—Combination 10 measures the percentage of members 2 years of age who received the following vaccines by their second birthday: four DTaP, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, one HepA, two or three RV, and two flu.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

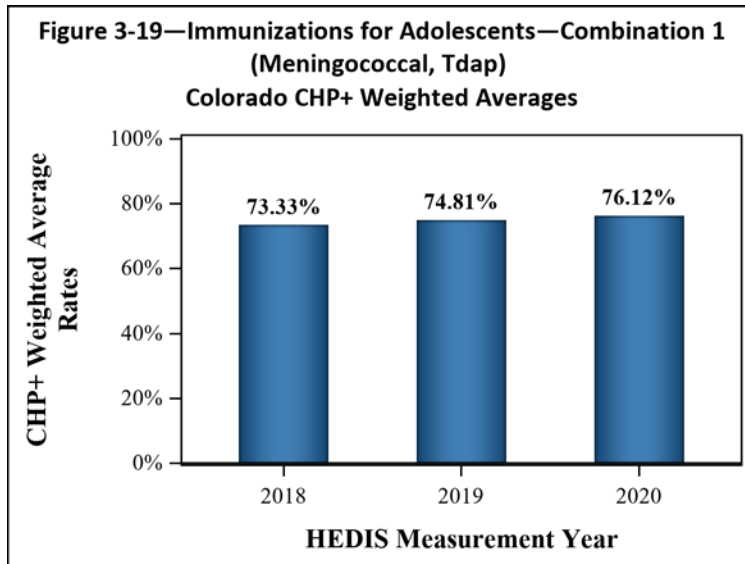


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate. Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

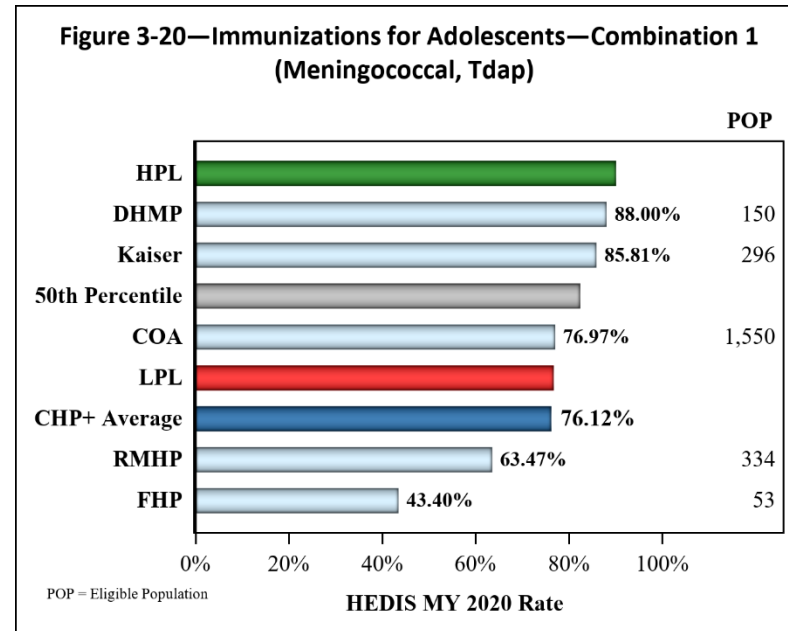
Two MCOs’ rates exceeded the HPL. Two MCOs’ rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. MCO performance varied by approximately 22 percentage points.

Immunizations for Adolescents—Combination 1 (Meningococcal, Tdap)

Immunizations for Adolescents—Combination 1 (Meningococcal, Tdap) measures the percentage of members 13 years of age who had the following vaccines by their 13th birthday: one dose of meningococcal vaccine, and one Tdap vaccine.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

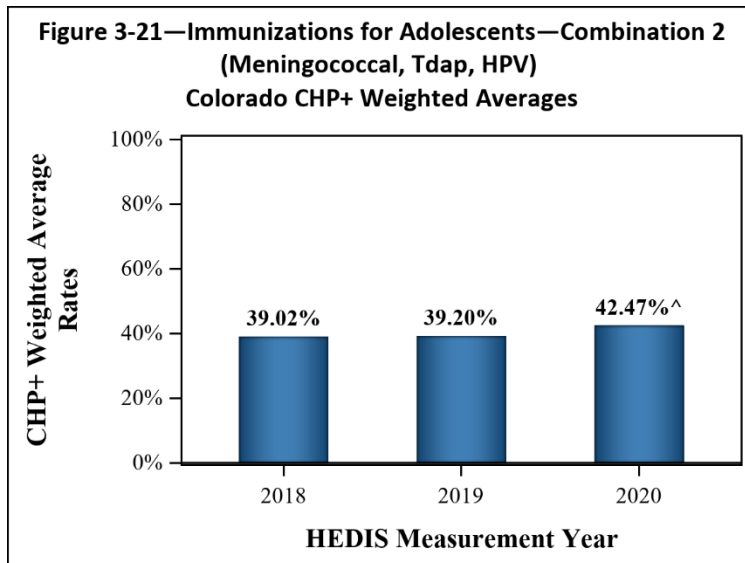


Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

Two MCOs' rates were above the 50th percentile but below the HPL. One MCO's rate was above the LPL but below the 50th percentile. Two MCOs' rates and the Colorado CHP+ weighted average fell below the LPL. MCO performance varied by approximately 45 percentage points.

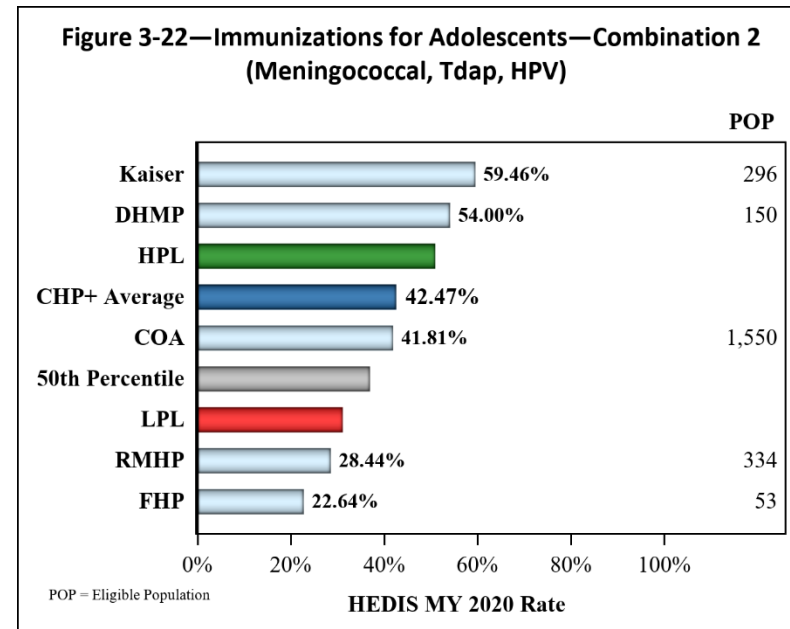
Immunizations for Adolescents—Combination 2 (Meningococcal, Tdap, HPV)

Immunizations for Adolescents—Combination 2 (Meningococcal, Tdap, HPV) measures the percentage of members 13 years of age who had the following vaccines by their 13th birthday: one dose of meningococcal vaccine, one Tdap vaccine, and completed the HPV vaccine series.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

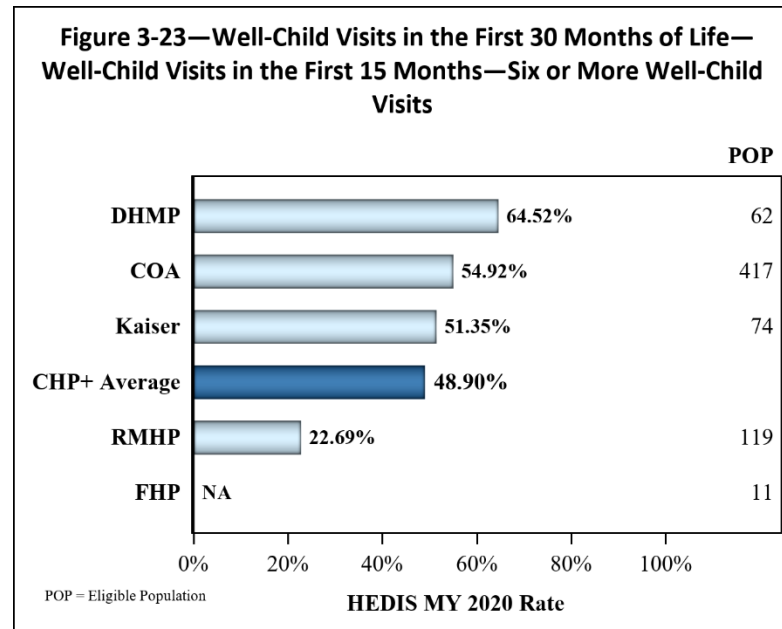


Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

Two MCOs' rates exceeded the HPL. One MCO's rate and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. Two MCOs' rates fell below the LPL. MCO performance varied by approximately 37 percentage points.

Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits

Well-Child Visits in the First 30 Months of Life—Well-Child Visits in the First 15 Months—Six or More Well-Child Visits measures the percentage of members who turned 15 months of age during the measurement year who received six or more well-child visits on different dates of service with a PCP upon or before turning 15 months of age. Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed.

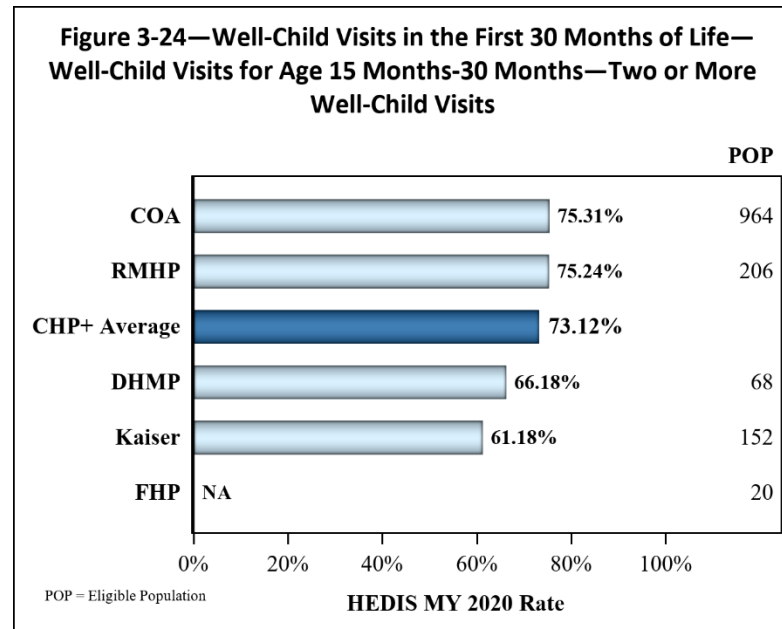


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

MCO performance varied by approximately 42 percentage points.

Well-Child Visits in the First 30 Months of Life—Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits

Well-Child Visits in the First 15 Months of Life—Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits measures the percentage of members who turned 30 months of age during the measurement year who received two or more well-child visits on different dates of service with a PCP between the child turning 15 months of age plus one day and the child turning 30 months of age. This was a new measure rate for MY 2020; therefore, prior years’ rates are not displayed.

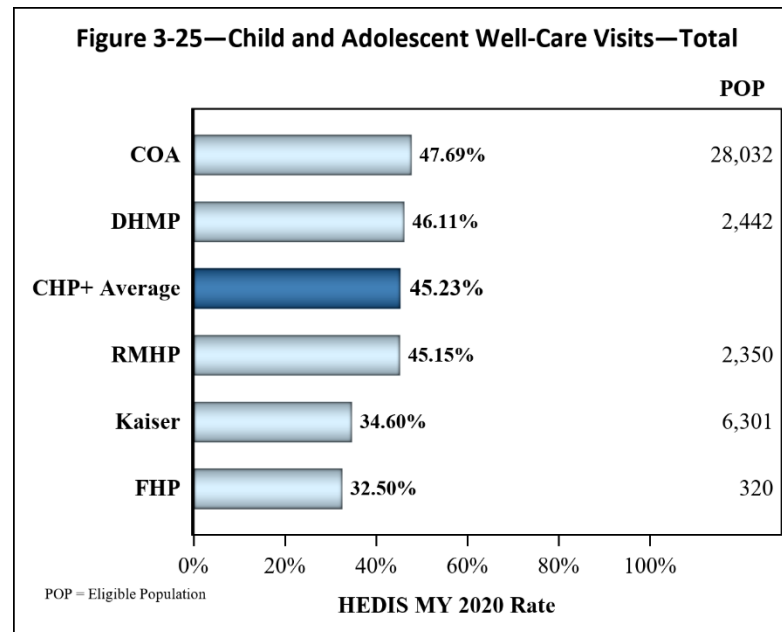


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

MCO performance varied by approximately 14 percentage points

Child and Adolescent Well-Care Visits—Total

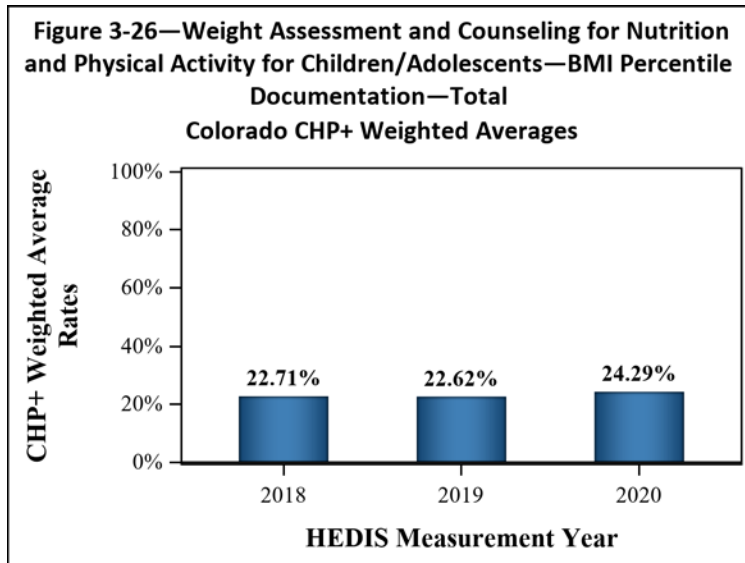
Child and Adolescent Well-Care Visits—Total measures the percentage of members 3 to 21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year. This measure is a combination measure that replaces the former *Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life* and *Adolescent Well-Care Visits* HEDIS measures. Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed.



MCO performance varied by approximately 15 percentage points.

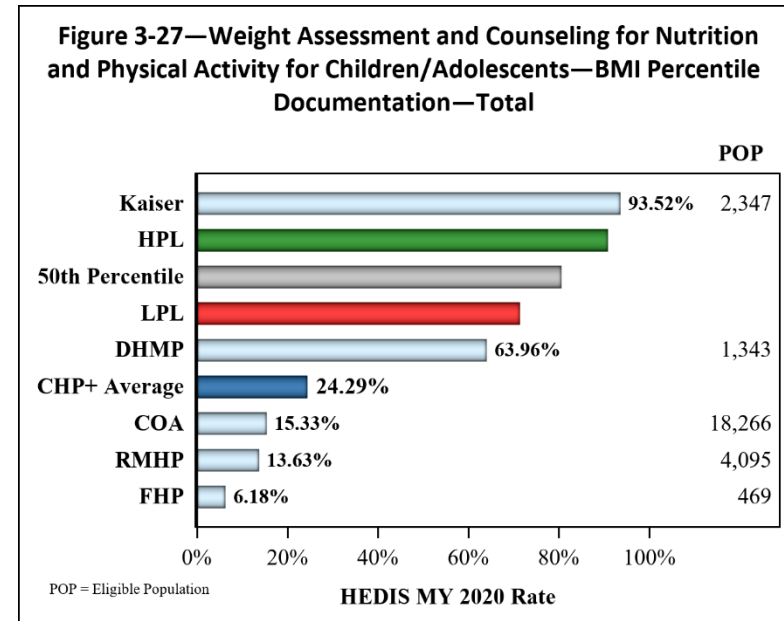
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total measures the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and had evidence of BMI percentile documentation during the measurement year.



Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

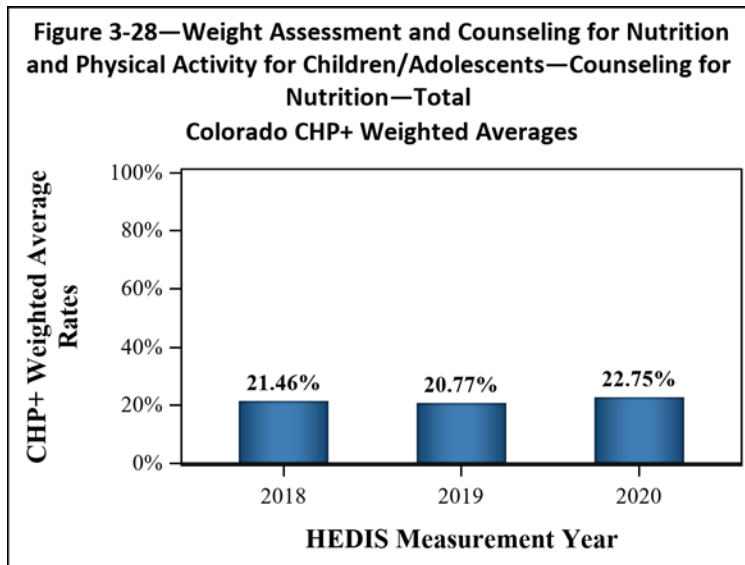


Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

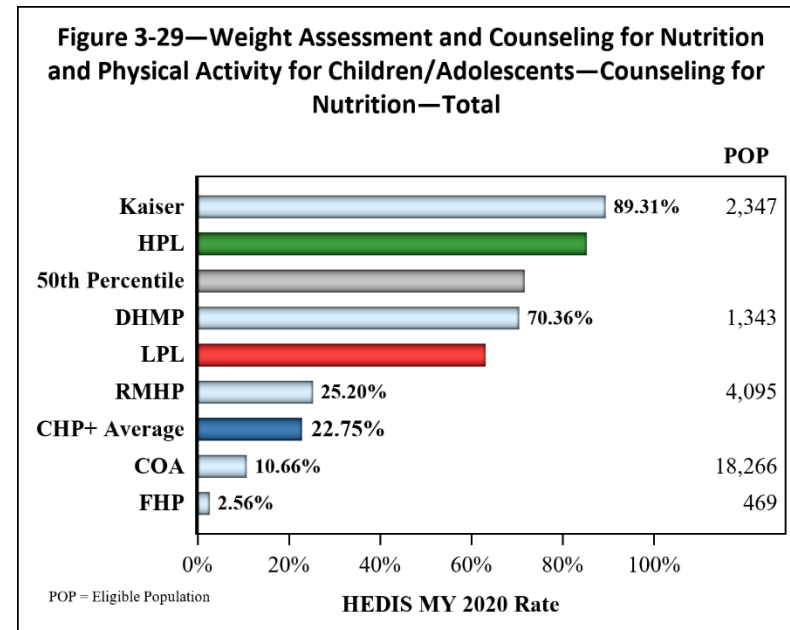
One MCO's rate exceeded the HPL. Four MCOs' rates and the Colorado CHP+ weighted average fell below the LPL. MCO performance varied by approximately 87 percentage points.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents— Counseling for Nutrition—Total

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total measures the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and received counseling for nutrition during the measurement year.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

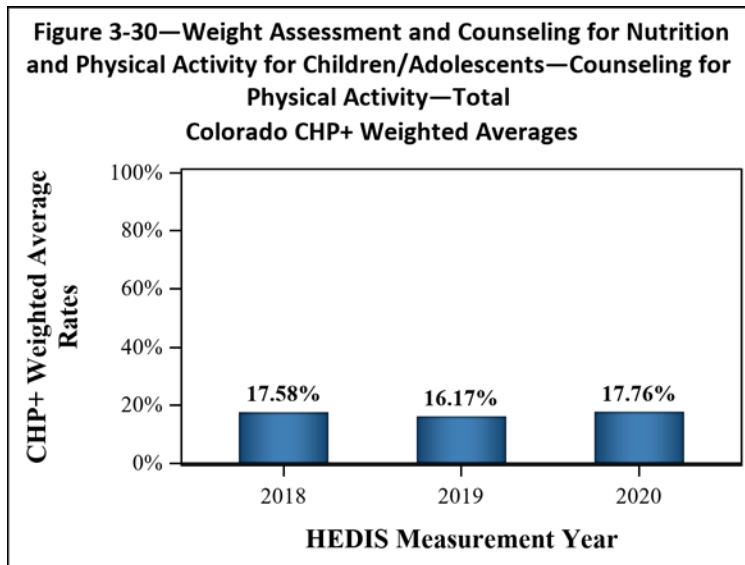


Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

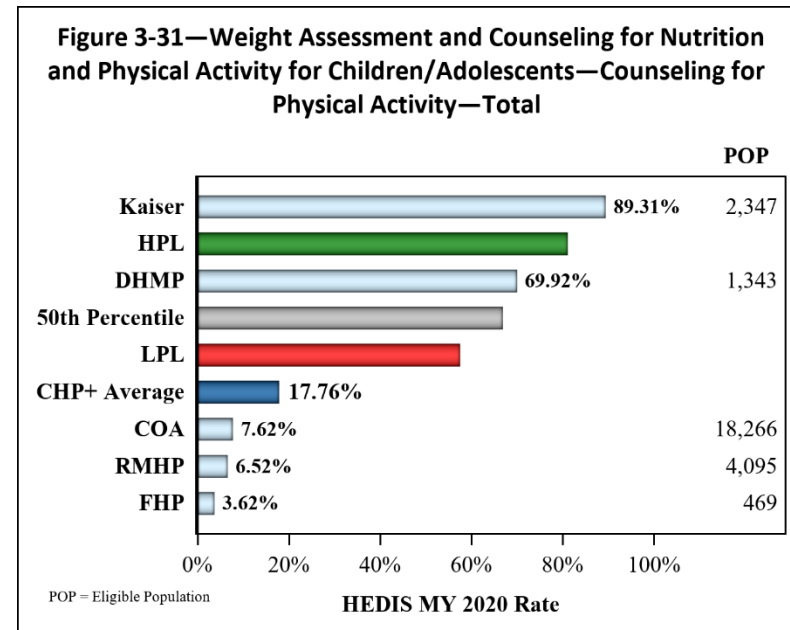
One MCO's rate exceeded the HPL. One MCO's rate was above the LPL but below the 50th percentile. Three MCO's rates and the Colorado CHP+ weighted average fell below the LPL. MCO performance varied by approximately 87 percentage points.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents— Counseling for Physical Activity—Total

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity—Total measures the percentage of members 3 to 17 years of age who had an outpatient visit with a PCP or OB/GYN and received counseling for physical activity during the measurement year.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.



Caution should be exercised when comparing administrative-only rates to national benchmarks that were calculated using the administrative and/or hybrid methodology.

One MCO's rate exceeded the HPL. One MCO's rate was above the 50th percentile but below the HPL. Three MCO's rates and the Colorado CHP+ weighted average fell below the LPL. MCO performance varied by approximately 86 percentage points.

Summary of Findings and Recommendations

Table 3-2 presents the MCOs’ performance ratings for each measure in the Pediatric Care domain. Performance ratings were assigned across five categories (from ★ representing *Poor Performance* to ★★★★★ representing *Excellent Performance*).

Table 3-2—Pediatric Care: Measure-Specific Performance Ratings

Performance Measures	COA	DHMP	FHP	Kaiser	RMHP
Childhood Immunization Status					
Combination 2	★★★	★★★★★	—	★	★
Combination 3	★★★	★★★★★	—	★★	★
Combination 4	★★★	★★★★★	—	★★	★
Combination 5	★★★★★	★★★★★	—	★★★	★
Combination 6	★★★★★	★★★★★	—	★★★★★	★★★
Combination 7	★★★★★	★★★★★	—	★★★	★
Combination 8	★★★★★	★★★★★	—	★★★★★	★★★
Combination 9	★★★★★	★★★★★	—	★★★★★	★★★
Combination 10	★★★★★	★★★★★	—	★★★★★	★★★
Immunizations for Adolescents					
Combination 1 (Meningococcal, Tdap)	★★	★★★★★	★	★★★	★
Combination 2 (Meningococcal, Tdap, HPV)	★★★	★★★★★	★	★★★★★	★
Well-Child Visits in the First 30 Months of Life					
Well-Child Visits in the First 15 Months—Six or More Well-Child Visits	—	—	—	—	—
Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits	—	—	—	—	—
Child and Adolescent Well-Care Visits					
Total	—	—	—	—	—
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents					
BMI Percentile Documentation—Total	★	★	★	★★★★★	★
Counseling for Nutrition—Total	★	★★	★	★★★★★	★
Counseling for Physical Activity—Total	★	★★★	★	★★★★★	★

— Indicates that a percentile ranking was not determined because the rate was not reportable or there was a break in trending.

Table 3-3 presents a summary of the MCOs’ overall performance for the measures in the Pediatric Care domain. The table shows the number of measures falling into each performance rating.

Table 3-3—Pediatric Care: MCO-Specific Count of Measures by Performance Rating

Health Plan Name	★★★★★	★★★★	★★★	★★	★
COA	3	3	4	1	3
DHMP	9	2	1	1	1
FHP	0	0	0	0	5
Kaiser	4	4	3	2	1
RMHP	0	0	4	0	10

Four of five (80.0 percent) MCOs reported a rate below the 25th percentile for the *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile Documentation—Total* measure indicator and three of five (60.0 percent) MCOs reported a rate below the 25th percentile for the *Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition—Total* and *Counseling for Physical Activity—Total* measure indicators. This demonstrates opportunities to increase the number of comprehensive visits for children and adolescents. The MCOs and the Department should identify the factors contributing to the low rates for the well-care visits (e.g., are the issues related to barriers to accessing care, the COVID-19 PHE, provider billing issues, or administrative data source challenges) and ensure children and adolescents receive comprehensive visits that follow the American Academy of Pediatrics’ *Recommendations for Preventive Pediatric Health Care*.³⁻¹

Of note, three of four (75.0 percent) MCOs with reportable rates reported a rate at or above the 75th percentile for the *Childhood Immunization Status—Combination 6, Combination 8, Combination 9, and Combination 10* measure indicators and two of four (50.0 percent) MCOs with reportable rates reported a rate at or above the 90th percentile for the *Immunizations for Adolescents—Combination 2 (Meningococcal, Tdap, HPV)* measure indicator, indicating strength for children and adolescents receiving vaccinations.

³⁻¹ American Academy of Pediatrics. *Recommendations for Preventive Pediatric Health Care*. Available at: https://www.aap.org/en-us/Documents/periodicity_schedule.pdf. Accessed on: Sept 22, 2021.

4. Access to Care and Preventive Screening

Access to Care and Preventive Screening

The following section provides a detailed analysis of the Colorado CHP+ MCOs' performance for the Access to Care and Preventive Screening domain. The Access to Care and Preventive Screening domain encompasses the following measures:

Access to Care

- *Prenatal and Postpartum Care—Timeliness of Prenatal Care and Postpartum Care*
- *Annual Dental Visit—Total*

Preventive Screening

- *Chlamydia Screening in Women—Ages 16 to 20 Years*
- *Non-Recommended Cervical Cancer Screening in Adolescent Females*

Please see the “Reader’s Guide” section for guidance on interpreting the figures presented within this section. For reference, additional analyses for each measure indicator are displayed in Appendix A and Appendix B.

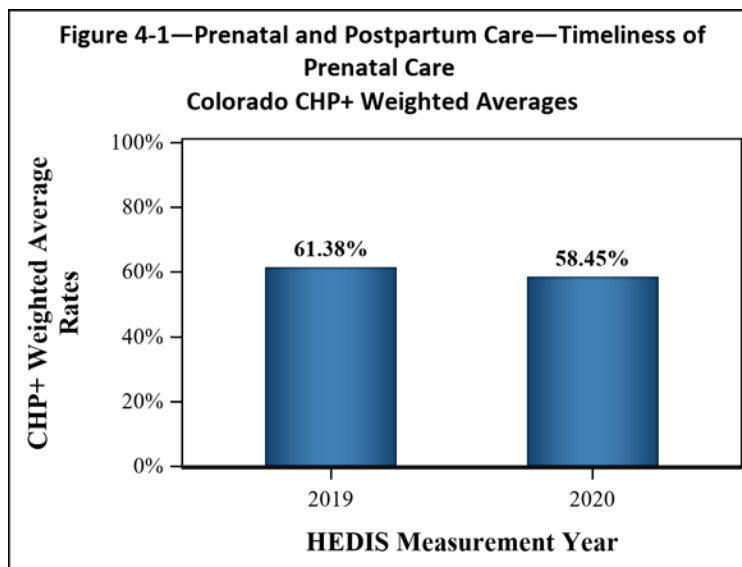
Prenatal and Postpartum Care

Prenatal and Postpartum Care measures the percentage of deliveries of live births on or between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these members, the measure assesses prenatal and postpartum care. Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years should be considered with caution.

Only the SMCN was required to report *Prenatal and Postpartum Care*, and the remaining CHP+ MCOs were not required to report rates for this measure. Of note, the SMCN’s calculated rates did not undergo an NCQA HEDIS Compliance Audit.

Prenatal and Postpartum Care—Timeliness of Prenatal Care

Prenatal and Postpartum Care—Timeliness of Prenatal Care measures the percentage of deliveries of live births that received a prenatal care visit in the first trimester, on the enrollment start date, or within 42 days of enrollment in the MCO.

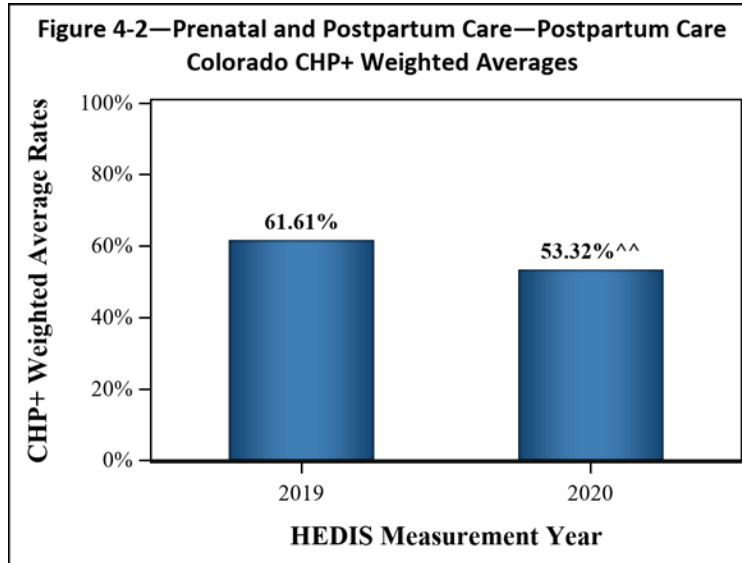


The SMCN is the only CHP+ MCO required to report the Prenatal and Postpartum Care measure.

The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

Prenatal and Postpartum Care—Postpartum Care

Prenatal and Postpartum Care—Postpartum Care measures the percentage of deliveries of live births that had a postpartum visit on or between 21 and 56 days after delivery.



Two carets (^^) indicate a statistically significant decline in performance from MY 2019 to MY 2020.

The SMCN is the only CHP+ MCO required to report the Prenatal and Postpartum Care measure.

The Colorado CHP+ weighted average significantly declined from MY 2019 to MY 2020.

Annual Dental Visit—Total

Annual Dental Visit—Total measures the percentage of enrollees 2 to 20 years of age who had at least one dental visit during the measurement year.

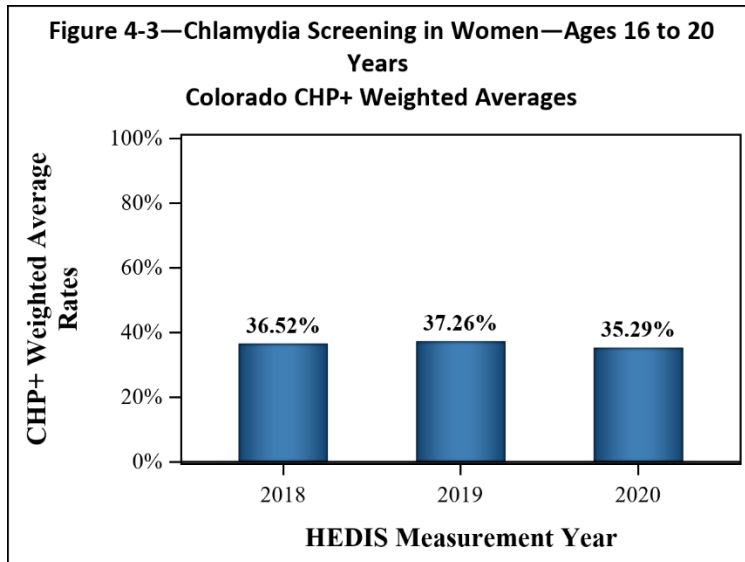
Table 4-1—Annual Dental Visit Results

Performance Measures	Eligible Population	HEDIS MY 2020 Rate	Percentile Ranking
<i>Dental</i>			
<i>Annual Dental Visit</i>			
<i>Ages 2 to 3 Years</i>	4,066	51.30%	50th–74th
<i>Ages 4 to 6 Years</i>	7,527	64.45%	25th–49th
<i>Ages 7 to 10 Years</i>	10,405	67.95%	25th–49th
<i>Ages 11 to 14 Years</i>	11,074	62.53%	25th–49th
<i>Ages 15 to 18 Years</i>	10,022	51.34%	25th–49th
<i>Ages 19 to 20 Years</i>	172	34.88%	25th–49th
<i>Total</i>	43,266	60.41%	50th–74th

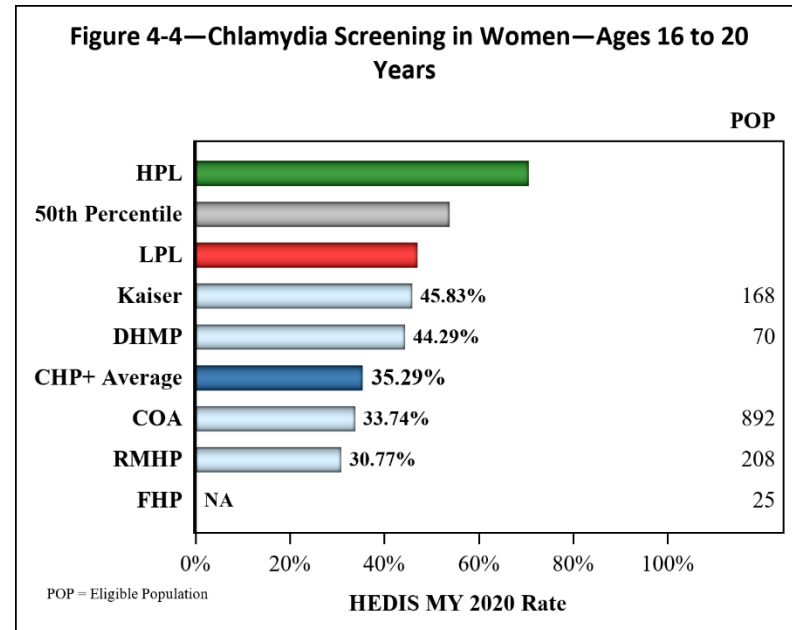
DentaQuest is the only CHP+ MCO required to report the Annual Dental Visit measure.

Chlamydia Screening in Women—Ages 16 to 20 Years

Chlamydia Screening in Women—Ages 16 to 20 Years measures the percentage of female members 16 to 20 years of age who were identified as being sexually active and received at least one test for chlamydia during the measurement year.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

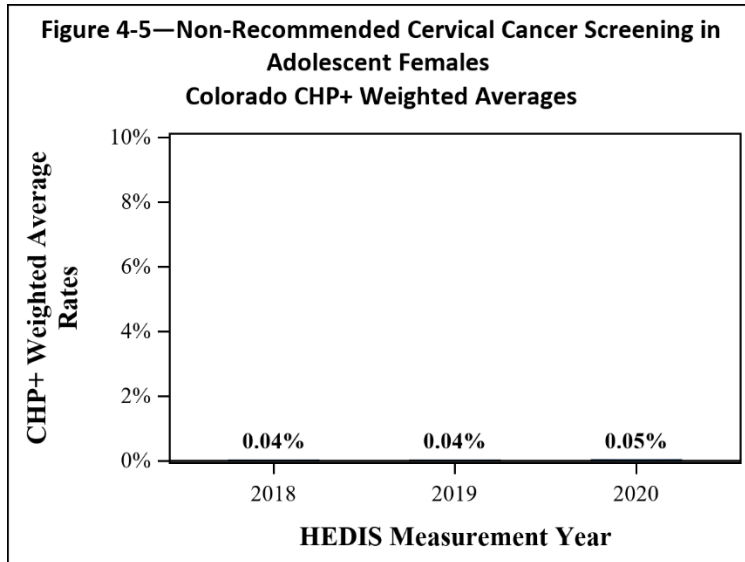


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

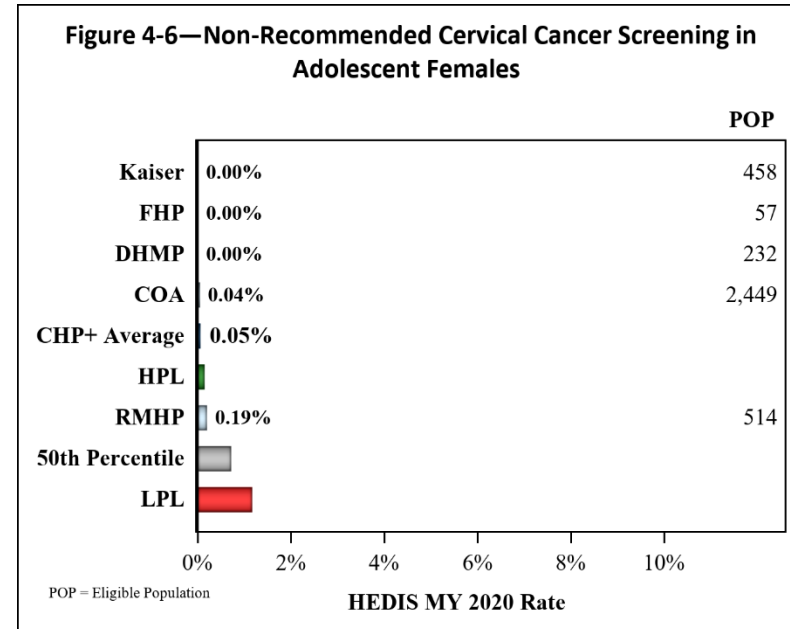
Four MCOs’ rates and the Colorado CHP+ weighted average fell below the LPL. MCO performance varied by approximately 15 percentage points.

Non-Recommended Cervical Cancer Screening in Adolescent Females

Non-Recommended Cervical Cancer Screening in Adolescent Females measures the percentage of adolescent female members 16 to 20 years of age who were screened unnecessarily for cervical cancer. For this measure, a lower rate indicates better performance.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.



Four MCOs’ rates and the Colorado CHP+ weighted average exceeded the HPL. One MCO’s rate was above the 50th percentile but below the HPL. MCO performance varied by less than 1 percentage point.

Summary of Findings and Recommendations

Table 4-2 presents the MCOs’ performance ratings for each measure in the Preventive Screening domain. Performance ratings were assigned across five categories (from ★ representing *Poor Performance* to ★★★★★ representing *Excellent Performance*).

Table 4-2—Preventive Screening: Measure-Specific Performance Ratings

Performance Measures	COA	DHMP	FHP	Kaiser	RMHP
Preventive Screening					
Chlamydia Screening in Women					
Ages 16 to 20 Years	★	★	—	★	★
Non-Recommended Cervical Cancer Screening in Adolescent Females*					
Non-Recommended Cervical Cancer Screening in Adolescent Females	★★★★★	★★★★★	★★★★★	★★★★★	★★★★★

— Indicates that a percentile ranking was not determined because the rate was not reportable.

* For this indicator, a lower rate indicates better performance.

Table 4-3 presents a summary of the MCOs’ overall performance for the measures in the Preventive Screening domain with the number of measures falling into each performance rating.

Table 4-3—Preventive Screening: MCO-Specific Count of Measures by Performance Rating

Health Plan Name	★★★★★	★★★★	★★★	★★	★
Preventive Screening					
COA	1	0	0	0	1
DHMP	1	0	0	0	1
FHP	1	0	0	0	0
Kaiser	1	0	0	0	1
RMHP	0	1	0	0	1

Increasing the access to care for members may have a positive impact on the quality of preventive care received, such as the *Chlamydia Screening in Women—Ages 16 to 20 Years* measure indicator, for which all four MCOs with reportable rates demonstrated poor performance, falling below the 25th percentile. Chlamydia is the most common STD in the United States, and improvement of MCO performance in this measure could positively impact the quality of care for a substantial number of CHP+ members. The MCOs and the Department should ensure providers are aware of the importance of screening for chlamydia and increase the number of resources available to providers and members (e.g., one-on-one provider trainings, providing lists of members overdue for a screening, or newsletters

targeting chlamydia screening rates) to support the screenings.^{4-1,4-2} The MCOs could consider developing chlamydia screening messages and materials for young women that tap into their deeper values and aspirations, making them think about their future and how their decisions now can make an impact on their life, and frame STD testing as a normative behavior and that everyone should receive STD testing.⁴⁻³ Conversely, four MCOs exceeded the 90th percentile and one MCO exceeded the 75th percentile for the *Non-Recommended Cervical Cancer Screening in Adolescent Females* measure, indicating the MCOs were not unnecessarily screening adolescent female members for cervical cancer.

⁴⁻¹ Centers for Disease Control and Prevention. *Chlamydia—CDC Fact Sheet*. Available at: <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia.htm>. Accessed on: Sept 22, 2021.

⁴⁻² National Prevention Information Network. *Strategies and Incentives from Health Plans to Increase Chlamydia Screening Rates*. Available at: <https://npin.cdc.gov/publication/strategies-and-incentives-health-plans-increase-chlamydia-screening-rates>. Accessed on: Sept 22, 2021.

⁴⁻³ Centers for Disease Control and Prevention. *Tips for Developing Chlamydia Screening Messages and Materials for Young Women*. Available at: <https://www.cdc.gov/std/chlamydia/ctMessages/Tips%20for%20CT%20screening%20mssg-%20young%20women-FINAL%20508%20compliant.pdf>. Access on Sept 22, 2021.

5. Mental/Behavioral Health

Mental/Behavioral Health

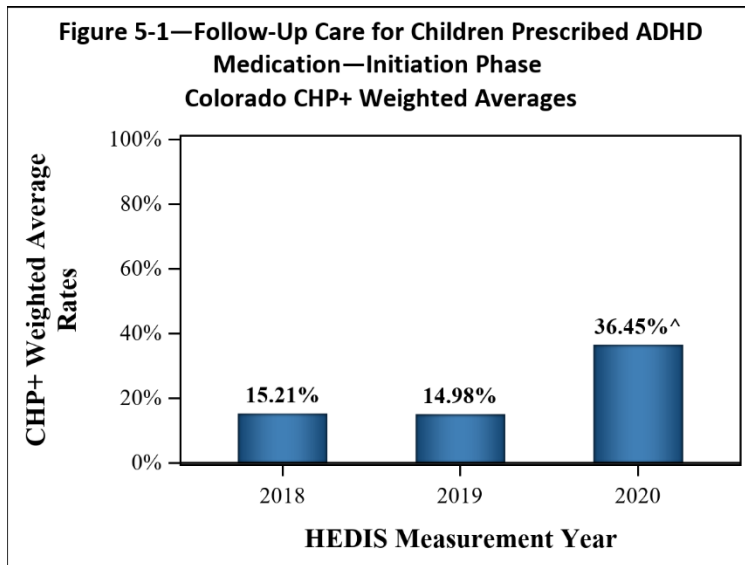
The following section provides a detailed analysis of the Colorado CHP+ MCOs' performance for the Mental/Behavioral Health domain. The Mental/Behavioral Health domain encompasses the following measures/indicators:

- *Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase and Continuation and Maintenance Phase*
- *Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose Testing—Total, Cholesterol Testing—Total, and Blood Glucose and Cholesterol Testing—Total*

Please see the “Reader’s Guide” section for guidance on interpreting the figures presented within this section. For reference, additional analyses for each measure indicator are displayed in Appendix A and Appendix B.

Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase

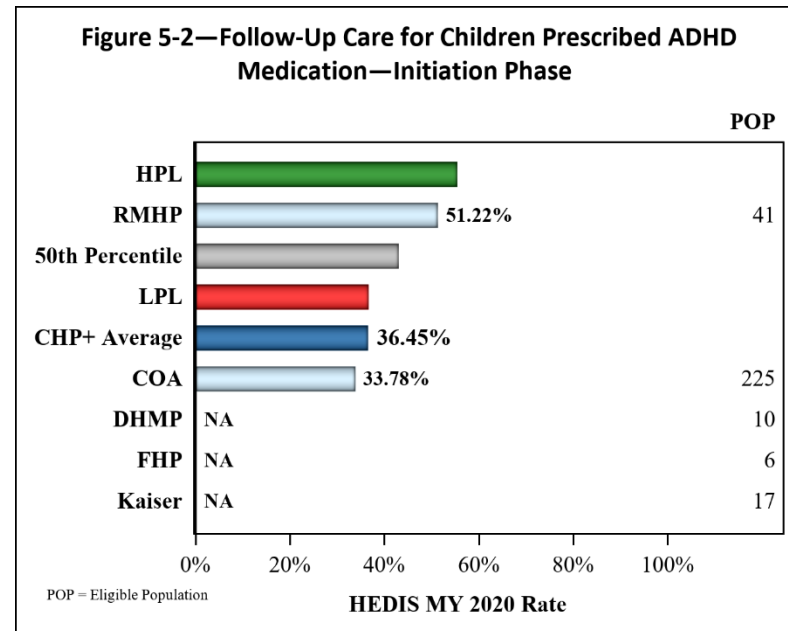
Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase measures the percentage of members 6 to 12 years of age who were newly prescribed ADHD medication and who had a follow-up care visit within 30 days of the first ADHD medication being dispensed.



One caret (^) indicates a significant improvement in performance from MY 2019 to MY 2020.

Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

The Colorado CHP+ weighted average significantly improved from MY 2019 to MY 2020.

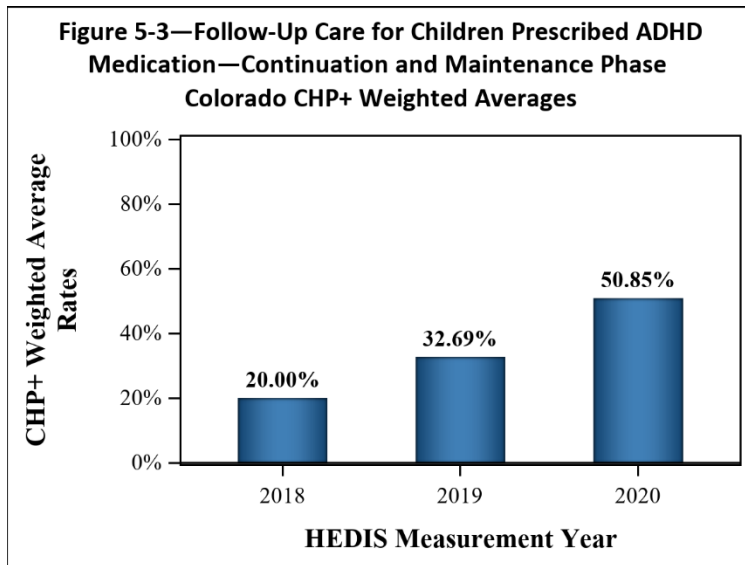


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

One MCO’s rate was above the 50th percentile but below the HPL. One MCO’s rate and the Colorado CHP+ weighted average fell below the LPL. None of the other MCOs had reportable rates for this measure indicator. MCO performance varied by approximately 17 percentage points.

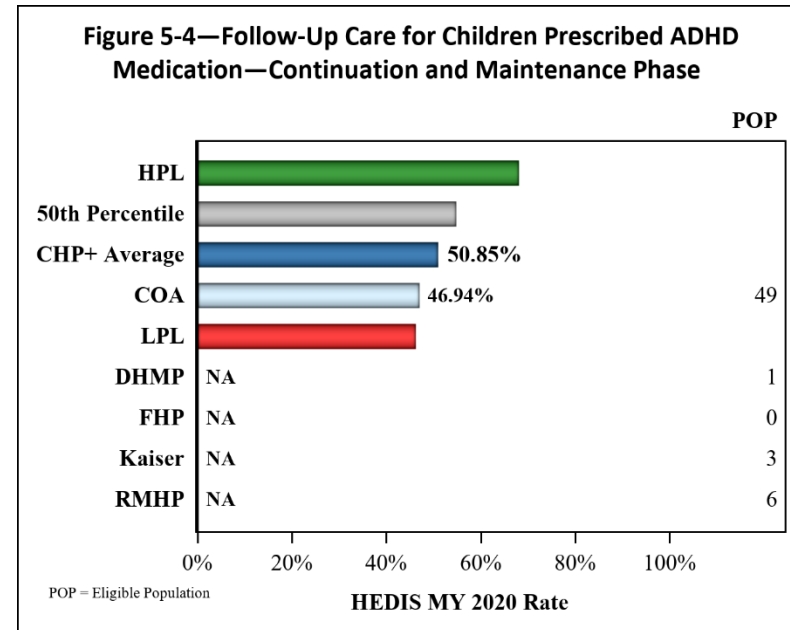
Follow-Up Care for Children Prescribed ADHD Medication—Continuation and Maintenance Phase

Follow-Up Care for Children Prescribed ADHD Medication—Continuation and Maintenance Phase measures the percentage of members 6 to 12 years of age who were newly prescribed ADHD medication, remained on the medication for at least 210 days, and had at least three follow-up care visits within a 10-month period, one of which was within 30 days of the first ADHD medication being dispensed.



Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

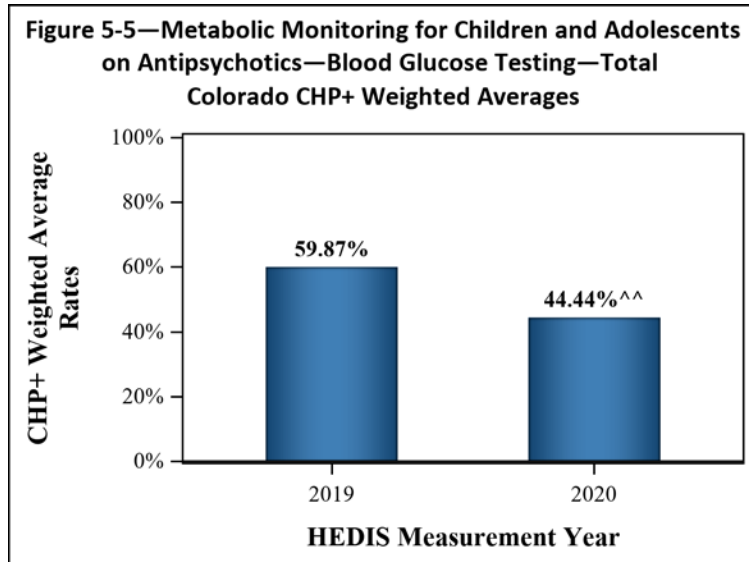


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

One MCO's rate and the Colorado CHP+ weighted average were above the LPL but below the 50th percentile. None of the other MCOs had reportable rates for this measure indicator.

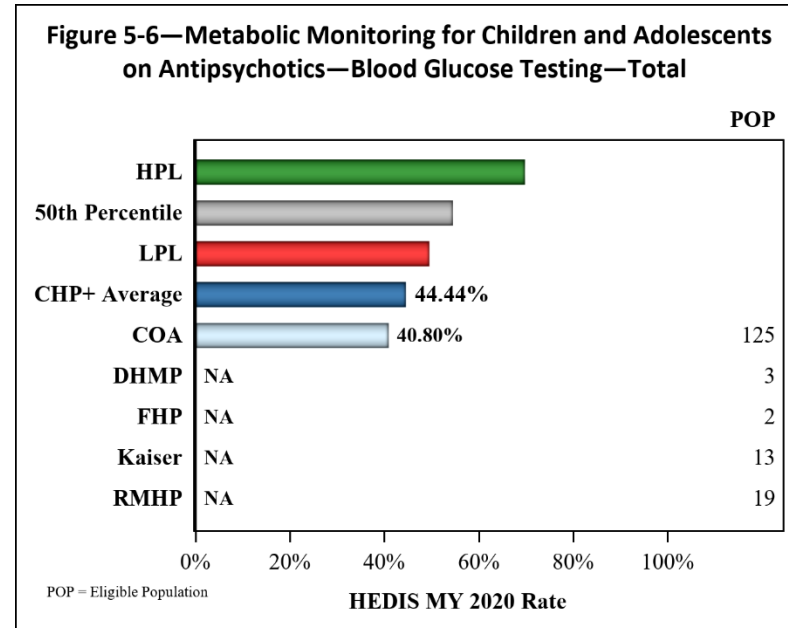
Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose Testing—Total

Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose Testing—Total measures the percentage of members 1 to 17 years of age who had two or more antipsychotic medication prescriptions and received blood glucose testing.



Two carets (^^) indicate a statistically significant decline in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly declined from MY 2019 to MY 2020.

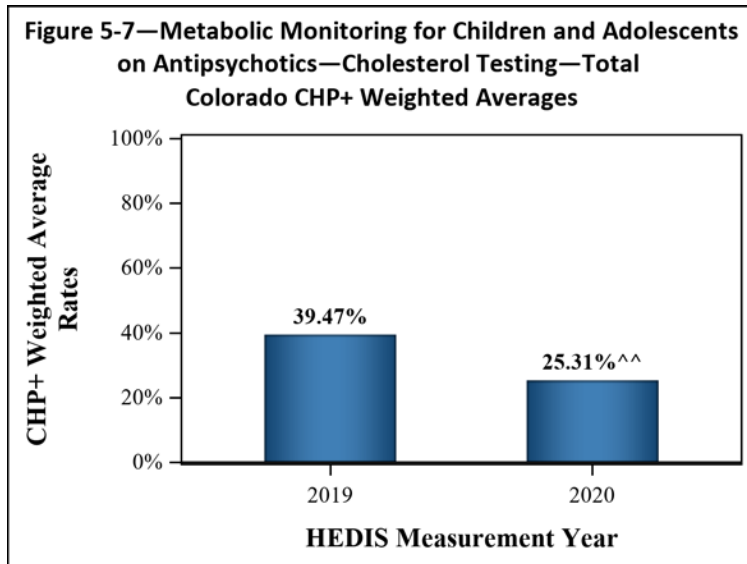


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

One MCO's rate and the Colorado CHP+ weighted average fell below the LPL. None of the other MCOs had reportable rates for this measure indicator.

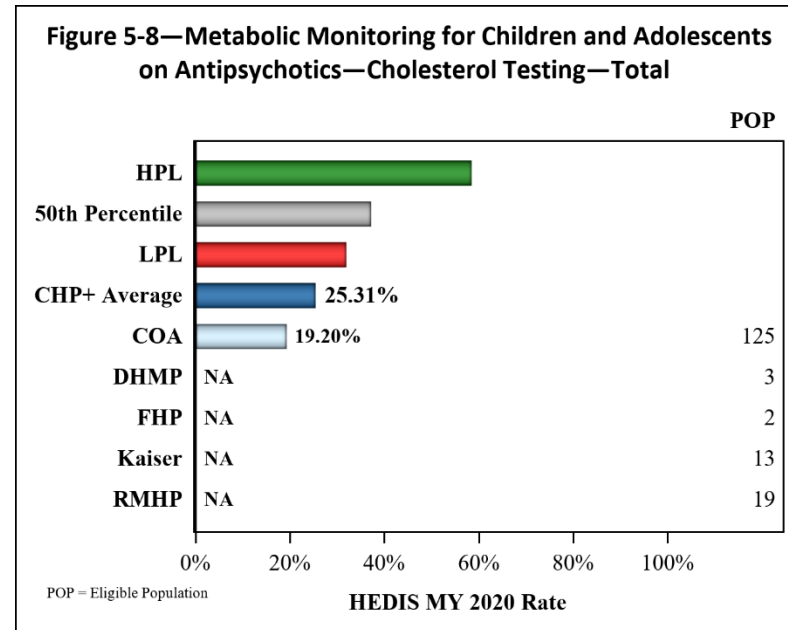
Metabolic Monitoring for Children and Adolescents on Antipsychotics—Cholesterol Testing—Total

Metabolic Monitoring for Children and Adolescents on Antipsychotics—Cholesterol Testing—Total measures the percentage of members 1 to 17 years of age who had two or more antipsychotic medication prescriptions and received cholesterol testing.



Two carets (^^) indicate a statistically significant decline in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly declined from MY 2019 to MY 2020.

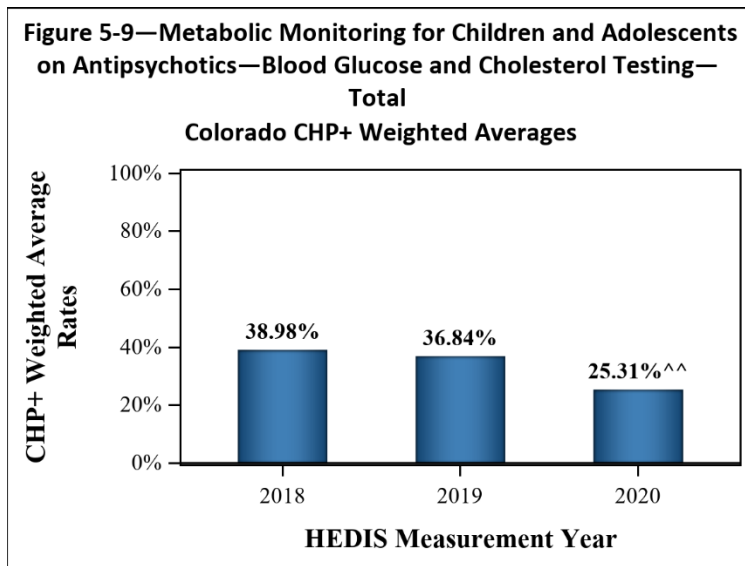


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

One MCO's rate and the Colorado CHP+ weighted average fell below the LPL. None of the other MCOs had reportable rates for this measure indicator.

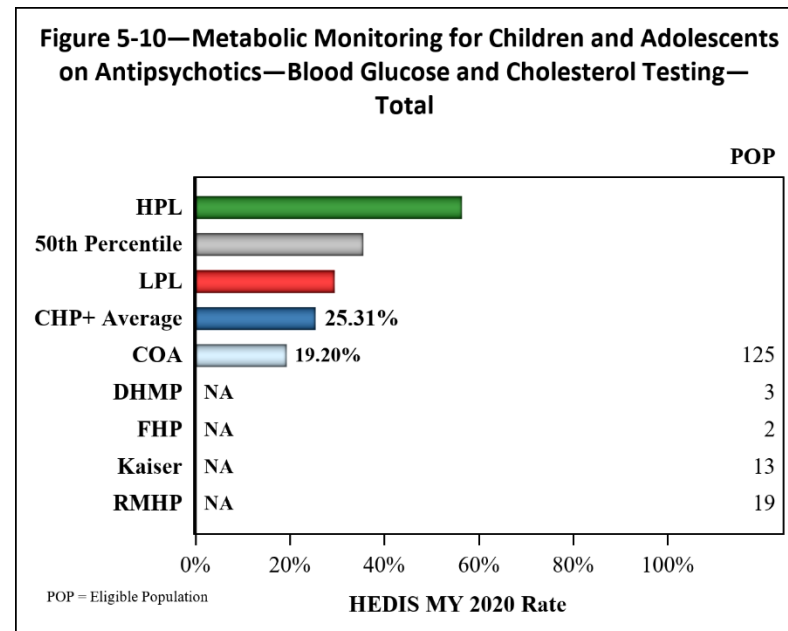
Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total

Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total measures the percentage of members 1 to 17 years of age who had two or more antipsychotic medication prescriptions and received blood glucose and cholesterol testing.



Two carets (^) indicate a statistically significant decline in performance from MY 2019 to MY 2020.

The Colorado CHP+ weighted average significantly declined from MY 2019 to MY 2020.



NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

One MCO's rate and the Colorado CHP+ weighted average fell below the LPL. None of the other MCOs had reportable rates for this measure indicator.

Summary of Findings and Recommendations

Table 5-1 presents the MCOs’ performance ratings for each measure in the Mental/Behavioral Health domain. Performance ratings were assigned across five categories (from ★ representing *Poor Performance* to ★★★★★ representing *Excellent Performance*).

Table 5-1—Mental/Behavioral Health: Measure-Specific Performance Ratings

Performance Measures	COA	DHMP	FHP	Kaiser	RMHP
<i>Follow-Up Care for Children Prescribed ADHD Medication</i>					
<i>Initiation Phase</i>	★	—	—	—	★★★★
<i>Continuation and Maintenance Phase</i>	★★	—	—	—	—
<i>Metabolic Monitoring for Children and Adolescents on Antipsychotics</i>					
<i>Blood Glucose Testing—Total</i>	★	—	—	—	—
<i>Cholesterol Testing—Total</i>	★	—	—	—	—
<i>Blood Glucose and Cholesterol Testing—Total</i>	★	—	—	—	—

— Indicates that a percentile ranking was not determined because the rate was not reportable.

Table 5-2 presents a summary of the MCOs’ overall performance for measures in the Mental/Behavioral Health domain.

Table 5-2—Mental/Behavioral Health: MCO-Specific Count of Measures by Performance Rating

Health Plan Name	★★★★★	★★★★	★★★	★★	★
COA	0	0	0	1	4
DHMP	0	0	0	0	0
FHP	0	0	0	0	0
Kaiser	0	0	0	0	0
RMHP	0	1	0	0	0

For HEDIS MY 2020, DHMP, FHP, and Kaiser did not have any reportable rates within the Mental/Behavioral Health domain. RMHP demonstrated strong performance for young members newly prescribed ADHD medication who received a follow-up care visit within 30 days, with opportunities for improvement noted for COA in the same measure indicator.

Additionally, COA’s rates for the *Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose Testing—Total*, *Cholesterol—Total*, and *Blood Glucose and Cholesterol Testing—Total* measure indicators fell below the 10th percentile. Antipsychotic medication use is associated with adverse physical side effects (e.g., type 2 diabetes, cardiovascular disease), and children

are more at risk for these side effects when they receive multiple antipsychotics.⁵⁻¹ COA and the Department should conduct root cause analyses for the low monitoring rates for members prescribed ADHD and/or antipsychotic medications to determine the nature and scope of the issue (e.g., are the issues related to barriers to accessing care or the need for improved provider training) and implement strategies to improve the care for these members.

⁵⁻¹ Correll CU, Detraux J, De Lepeleire J, De Hert M. Effects of antipsychotics, antidepressants and mood stabilizers on risk for physical diseases in people with schizophrenia, depression and bipolar disorder. *World Psychiatry*. 2015;14(2):119-36.

Respiratory Conditions

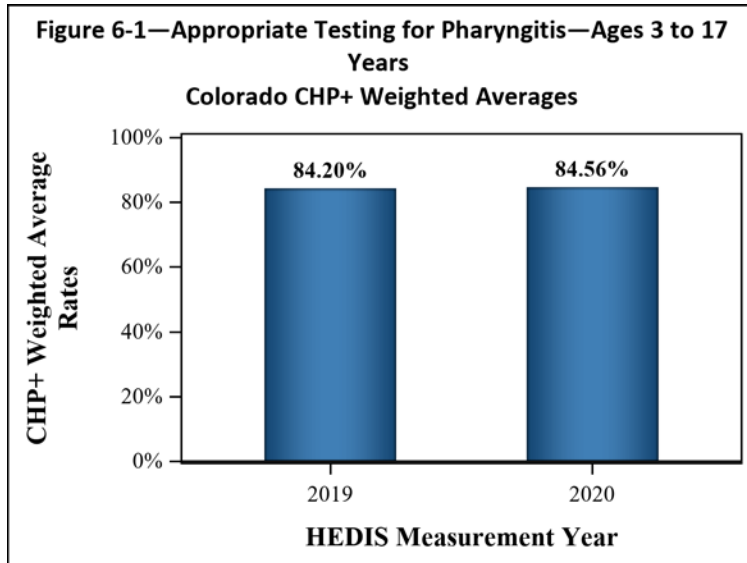
The following section provides a detailed analysis of the Colorado CHP+ MCOs' performance for the Respiratory Conditions domain. The Respiratory Conditions domain encompasses the following measures/indicators:

- *Appropriate Testing for Pharyngitis—Ages 3 to 17 Years*
- *Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years*
- *Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Ages 3 Months to 17 Years*
- *Asthma Medication Ratio—Ages 5 to 11 Years and Ages 12 to 18 Years*

Please see the “Reader’s Guide” section for guidance on interpreting the figures presented within this section. For reference, additional analyses for each measure indicator are displayed in Appendix A and Appendix B.

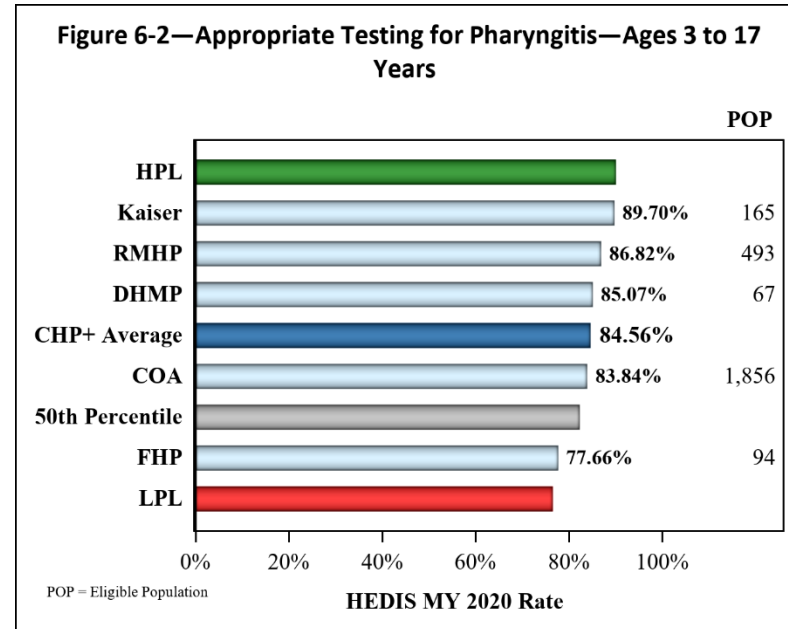
Appropriate Testing for Pharyngitis—Ages 3 to 17 Years

Appropriate Testing for Pharyngitis—Ages 3 to 17 Years measures the percentage of members 3 to 17 years of age who were diagnosed with pharyngitis, dispensed an antibiotic, and received a Group A streptococcus (strep) test for the episode.



Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

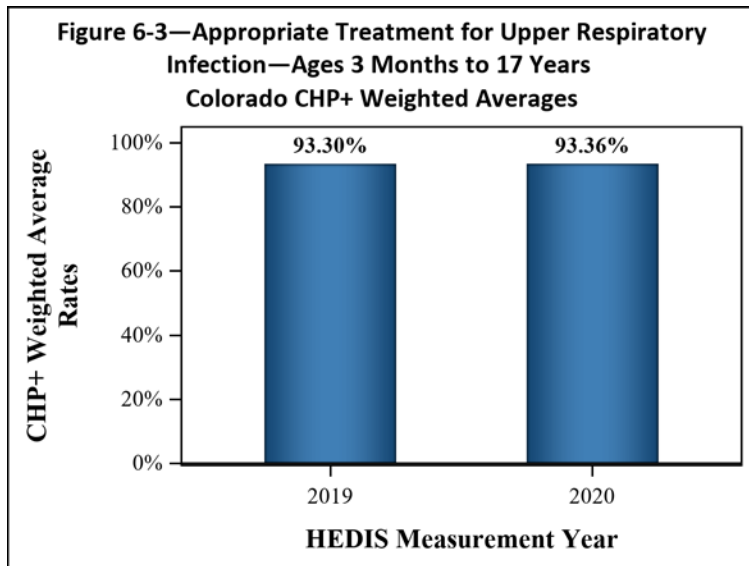
The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.



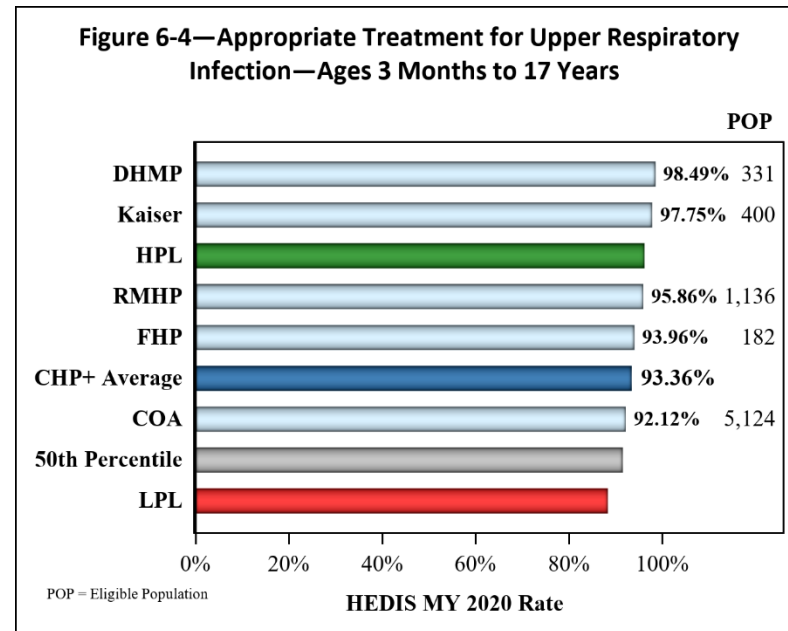
Four MCOs’ rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. One MCO’s rate was above the LPL but below the 50th percentile. MCO performance varied by approximately 12 percentage points

Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years

Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years measures the percentage of members 3 months to 17 years of age diagnosed with an upper respiratory infection (URI) that did not result in an antibiotic dispensing event.



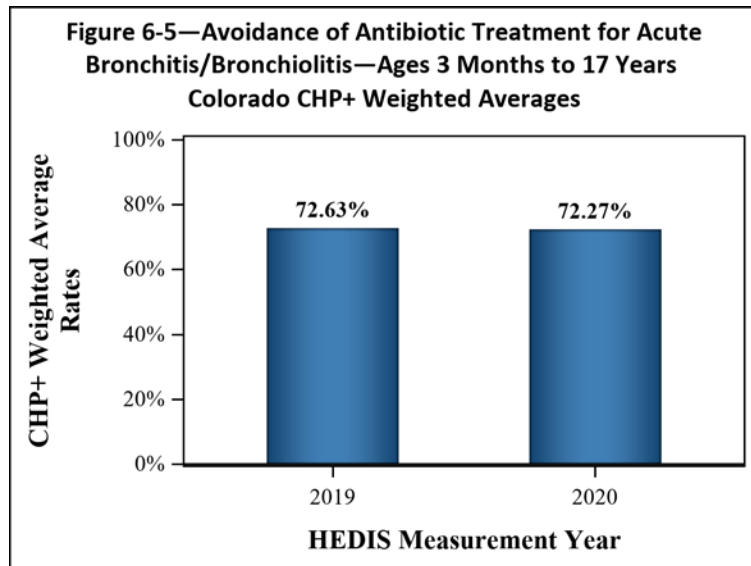
The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.



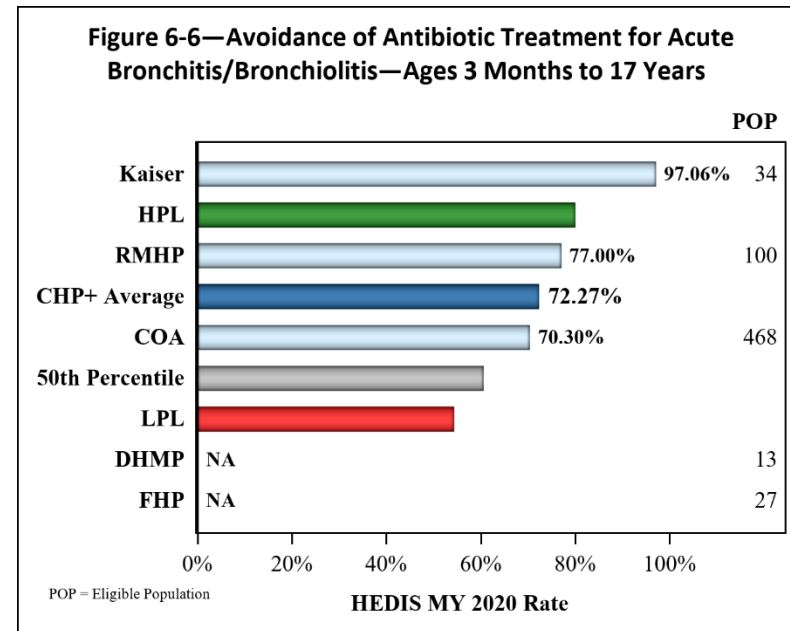
Two MCOs’ rates exceeded the HPL. Three MCOs’ rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. MCO performance varied by approximately 6 percentage points.

Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Ages 3 Months to 17 Years

Avoidance of Antibiotic Treatment for Acute/Bronchiolitis—Ages 3 Months to 17 Years measures the percentage of episodes for members ages 3 months to 17 years with a diagnosis of acute bronchitis/bronchiolitis that did not result in an antibiotic dispensing event.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

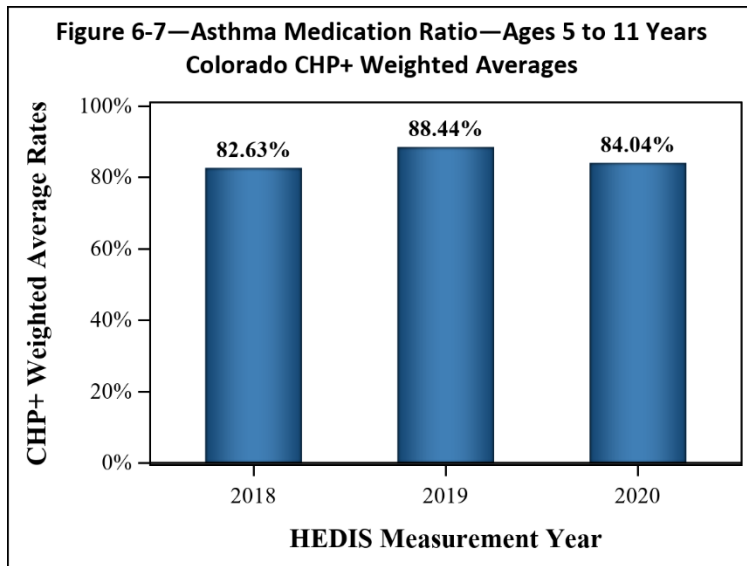


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate

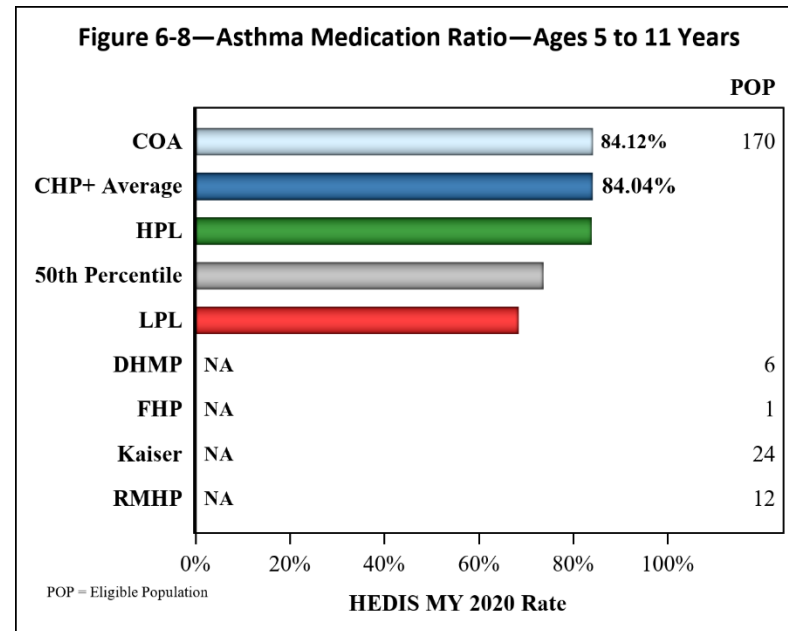
One MCO's rate exceeded the HPL. Two MCOs' rates and the Colorado CHP+ weighted average were above the 50th percentile but below the HPL. MCO performance varied by approximately 27 percentage points.

Asthma Medication Ratio—Ages 5 to 11 Years

Asthma Medication Ratio—Ages 5 to 11 Years measures the percentage of members 5 to 11 years of age identified as having persistent asthma who had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.

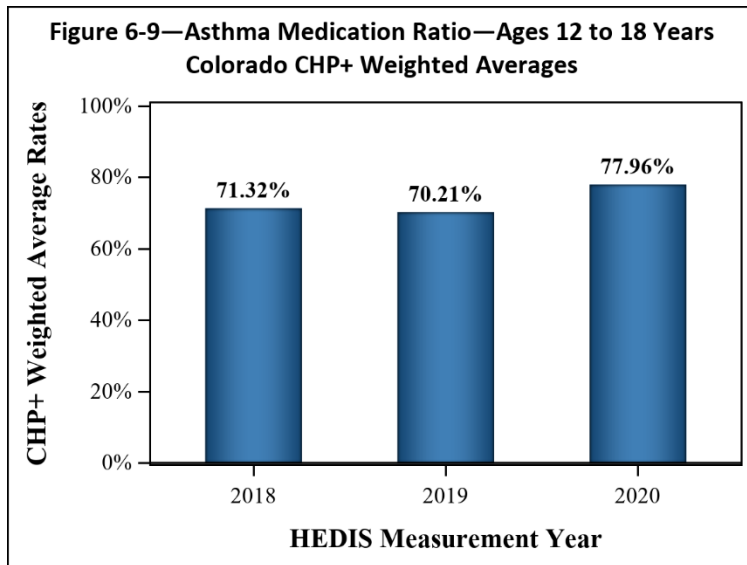


NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

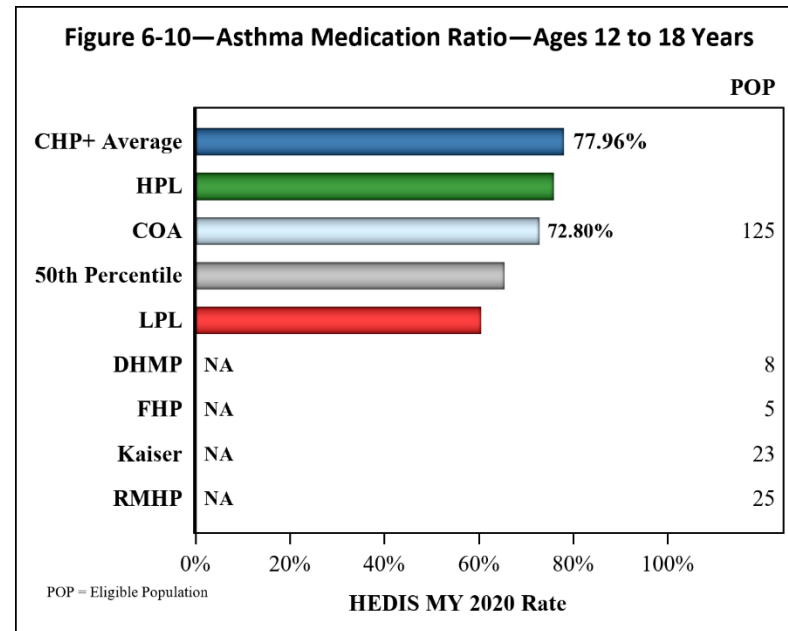
One MCO's rate and the Colorado CHP+ weighted average exceeded the HPL. None of the other MCOs had reportable rates for this measure indicator.

Asthma Medication Ratio—Ages 12 to 18 Years

Asthma Medication Ratio—Ages 12 to 18 Years measures the percentage of members 12 to 18 years of age identified as having persistent asthma who had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.



The Colorado CHP+ weighted average did not demonstrate a significant change from MY 2019 to MY 2020.



NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

The Colorado CHP+ weighted average exceeded the HPL. One MCO's rate was above the 50th percentile but below the HPL. None of the other MCOs had reportable rates for this measure indicator.

Summary of Findings and Recommendations

Table 6-1 presents the MCOs’ performance ratings for each measure in the Respiratory Conditions domain. Performance ratings were assigned across five categories (from ★ representing *Poor Performance* to ★★★★★ representing *Excellent Performance*).

Table 6-1—Respiratory Conditions: Measure-Specific Performance Ratings

Performance Measures	COA	DHMP	FHP	Kaiser	RMHP
Appropriate Testing for Pharyngitis					
<i>Ages 3 to 17 Years</i>	★★★★	★★★★	★★	★★★★★	★★★★★
Appropriate Treatment for Upper Respiratory Infection					
<i>Ages 3 Months to 17 Years</i>	★★★★	★★★★★	★★★★	★★★★★	★★★★★
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis					
<i>Ages 3 Months to 17 Years</i>	★★★★	—	—	★★★★★	★★★★★
Asthma Medication Ratio					
<i>Ages 5 to 11 Years</i>	★★★★★	—	—	—	—
<i>Ages 12 to 18 Years</i>	★★★★	—	—	—	—

— Indicates that a percentile ranking was not determined because the rate was not reportable.

Table 6-2 presents a summary of the MCOs’ overall performance for measures in the Respiratory Conditions domain.

Table 6-2—Respiratory Conditions: MCO-Specific Count of Measures by Performance Rating

Health Plan Name	★★★★★	★★★★	★★★	★★	★
COA	1	2	2	0	0
DHMP	1	0	1	0	0
FHP	0	0	1	1	0
Kaiser	2	1	0	0	0
RMHP	0	3	0	0	0

According to the CDC, antibiotics do not help treat acute bronchitis (chest cold) and acute URIs, as the common cold resolves without antibiotic treatment.⁶⁻¹ For HEDIS MY 2020, four of five (80.0 percent) MCOs demonstrated strong performance in the Respiratory Conditions domain. COA’s rates for both *Asthma Medication Ratio* measure indicators and the *Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Ages 3 Months to 17 Years* measure indicator were at or above the 75th percentile. DHMP’s rate for the *Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years* measure indicator was at or above the 90th percentile. Kaiser’s and RMHP’s rates for the *Appropriate Testing for Pharyngitis—Ages 3 to 17 Years*, *Appropriate Treatment for Upper Respiratory Infection—Ages 3 Months to 17 Years*, and *Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Ages 3 Months to 17 Years* measure indicators were at or above the 75th percentile.

⁶⁻¹ Centers for Disease Control and Prevention. *Be Antibiotics Aware*. https://www.cdc.gov/antibiotic-use/community/images/AU_gif3_infections_v06_TWI.gif. Accessed on Sept 22, 2021.

7. Use of Services

Use of Services

Within the Use of Services domain, HEDIS methodology requires that the rate be derived using only the administrative method. The Use of Services domain encompasses the following measures:

- *Ambulatory Care—Outpatient Visits—Total and ED Visits—Total*
- *Inpatient Utilization—General Hospital/Acute Care—Total Discharges per 1,000 Member Months (Total Inpatient), Total Average Length of Stay (Total Inpatient), Total Discharges per 1,000 Member Months (Medicine), Total Average Length of Stay (Medicine), Total Discharges per 1,000 Member Months (Surgery), Total Average Length of Stay (Surgery), Total Discharges per 1,000 Member Months (Maternity), and Total Average Length of Stay (Maternity)*
- *Antibiotic Utilization—Average Scripts PMPY for Antibiotics—Total, Average Days Supplied per Antibiotic Script—Total, Average Scripts PMPY for Antibiotics of Concern—Total, and Percentage of Antibiotics of Concern of All Antibiotic Scripts—Total*

All the MCOs were required to report these measures in HEDIS MY 2020. The MCOs’ member months served as an eligible population proxy and were used when calculating the Colorado CHP+ weighted average. Table 7-1 displays the member months for each MCO and the CHP+ program. The largest contribution of member months came from the two categories of children between 1 and 9 years of age and between 10 and 19 years of age.

Table 7-1—Colorado CHP+ Member Months for Calendar Year 2020

Age	COA	DHMP	FHP	Kaiser	RMHP	Total CHP+
Less Than 1 Year	10,365	899	326	708	2,373	14,671
1–9 Years	274,044	23,316	8,121	38,708	57,242	401,431
10–19 Years	287,424	29,466	9,490	52,046	58,618	437,044
Total	571,833	53,681	17,937	91,462	118,233	853,146

Rates displayed in the Use of Services domain are for informational purposes only; the rates do not indicate the quality and timeliness of, or access to, care and services. Therefore, exercise caution in connecting these data to the efficacy of the program, as many factors influence these data. HSAG recommends that MCOs review the Use of Services results to identify whether a rate is higher or lower than expected. Additional focused analyses related to the Use of Services domain may help to identify key drivers associated with the utilization patterns.

Please see the “Reader’s Guide” section for guidance on interpreting the tables presented within this section. For reference, additional analyses for each measure indicator are displayed in Appendix A and Appendix B.

Ambulatory Care

The *Ambulatory Care* measure summarizes use of ambulatory care for *Outpatient Visits—Total* and *ED Visits—Total*. In this section, the results for the total age group are presented.

Results

Table 7-2 shows *Outpatient Visits—Total* and *ED Visits—Total* per 1,000 member months for ambulatory care for all ages.

Table 7-2—Ambulatory Care: Total Visits per 1,000 Member Months for Total Age Group

MCO Name	Outpatient Visits	ED Visits*
COA	177.19	17.24
DHMP	127.95	13.67
FHP	141.10	12.71
Kaiser	108.70	14.61
RMHP	186.23	13.14
MY 2020 Colorado CHP+ Weighted Average	167.24	16.07
MY 2019 Colorado CHP+ Weighted Average	213.53	24.91
MY 2018 Colorado CHP+ Weighted Average	195.91	23.83

* For this indicator, a lower rate may indicate more favorable performance.

For the *ED Visits—Total* measure indicator, MCO performance varied, ranging from 12.71 ED visits per 1,000 member months to 17.24 ED visits per 1,000 member months. Rates displayed for the *Outpatient Visits* measure indicator are for information only.

Inpatient Utilization—General Hospital/Acute Care

The *Inpatient Utilization—General Hospital/Acute Care* measure summarizes use of acute inpatient care and services in four categories: total inpatient, medicine, surgery, and maternity.

Results

Table 7-3 shows the total discharges per 1,000 member months for all ages, which are presented for information only.

Table 7-3—Inpatient Utilization—General Hospital/Acute Care: Total Discharges per 1,000 Member Months for Total Age Group

MCO Name	Total Inpatient	Medicine	Surgery	Maternity
COA	0.73	0.56	0.15	0.06
DHMP	0.69	0.50	0.13	0.10
FHP	0.50	0.17	0.28	0.11
Kaiser	0.49	0.34	0.14	0.02
RMHP	0.62	0.47	0.14	0.02
MY 2020 Colorado CHP+ Weighted Average	0.68	0.51	0.15	0.05
MY 2019 Colorado CHP+ Weighted Average	0.92	0.68	0.21	0.07
MY 2018 Colorado CHP+ Weighted Average	0.88	0.63	0.21	0.07

Table 7-4 displays the total average length of stay for all ages, which are presented for information only.

Table 7-4—Inpatient Utilization—General Hospital/Acute Care: Total Average Length of Stay for Total Age Group

MCO Name	Total Inpatient	Medicine	Surgery	Maternity
COA	3.30	3.26	3.54	2.69
DHMP	2.30	2.00	3.57	2.00
FHP	2.33	1.33	2.80	3.00
Kaiser	3.22	3.45	2.77	2.00
RMHP	2.84	2.84	2.88	2.00
MY 2020 Colorado CHP+ Weighted Average	3.15	3.13	3.34	2.55
MY 2019 Colorado CHP+ Weighted Average	3.48	2.83	5.63	3.19
MY 2018 Colorado CHP+ Weighted Average	3.51	2.89	5.50	2.49

Antibiotic Utilization

Table 7-5 displays the results of the *Antibiotic Utilization* measure indicators, which are presented for information only for four categories: *Average Scripts PMPY for Antibiotics*, *Average Days Supplied per Antibiotic Script*, *Average Scripts PMPY Antibiotics of Concern*, and *Percentage of Antibiotics of Concern of All Antibiotic Scripts*. Of note, antibiotics of concern are those that are often prescribed unnecessarily or inappropriately and could increase the risk of antibiotic resistant infections. For this measure, a lower rate may indicate more favorable performance.

Table 7-5—Antibiotic Utilization: Total for Total Age Group*

MCO Name	Average Scripts PMPY for Antibiotics	Average Days Supplied per Antibiotic Script	Average Scripts PMPY for Antibiotics of Concern	Percentage of Antibiotics of Concern of All Antibiotic Scripts
COA	0.21	11.45	0.07	30.66%
DHMP	0.12	12.43	0.03	25.52%
FHP	0.27	9.65	0.10	38.94%
Kaiser	0.17	14.16	0.04	25.00%
RMHP	0.41	10.73	0.12	29.98%
MY 2020 Colorado CHP+ Weighted Average	0.23	11.47	0.07	30.09%
MY 2019 Colorado CHP+ Weighted Average	0.34	15.10	0.11	32.33%
MY 2018 Colorado CHP+ Weighted Average	0.33	16.86	0.11	31.91%

* For this measure, a lower rate may indicate more favorable performance.

Summary of Findings and Recommendations

Reported rates for the MCOs and CHP+ weighted averages for the Use of Services domain did not take into account the characteristics of the population; therefore, HSAG could not draw conclusions regarding performance based on the reported utilization results. Nonetheless, combined with other performance metrics, the utilization results provide additional information that MCOs may use to assess barriers or patterns of utilization when evaluating improvement interventions.

Appendix A. Tabular Results for Measures by MCO

Appendix A presents tables showing results for the measures by MCO. Where applicable, the results provided for each measure include the eligible population and rate for each MCO as well as HEDIS MY 2018, MY 2019, and MY 2020 Colorado CHP+ weighted averages. Yellow shading with one caret (^) indicates the HEDIS MY 2020 MCO-specific rate or Colorado CHP+ weighted average ranked at or above the 50th percentile. Comparisons of Colorado’s CHP+ population measure indicator rates to the national Medicaid benchmarks should be interpreted with caution, as previously discussed in the body of this report.

Pediatric Care Performance Measure Results

Table A-1—Pediatric Care Performance Measure Results—MCO-Specific Rates and Colorado CHP+ Weighted Averages

CHP+ Plan	Eligible Population	Rate
<i>Childhood Immunization Status</i>		
<i>DTap</i>		
COA	989	78.26% ^
FHP	26	NA
DHMP	72	81.94% ^
Kaiser	160	71.25%
RMHP	227	64.76%
HEDIS MY 2020 Colorado CHP+ Weighted Average		74.36%
HEDIS MY 2019 Colorado CHP+ Weighted Average		75.28%
HEDIS MY 2018 Colorado CHP+ Weighted Average		71.44%
<i>IPV</i>		
COA	989	87.97%
FHP	26	NA
DHMP	72	88.89%
Kaiser	160	85.63%
RMHP	227	74.89%
HEDIS MY 2020 Colorado CHP+ Weighted Average		84.33%
HEDIS MY 2019 Colorado CHP+ Weighted Average		85.43%
HEDIS MY 2018 Colorado CHP+ Weighted Average		82.98%
<i>MMR</i>		
COA	989	88.27%
FHP	26	NA
DHMP	72	86.11%
Kaiser	160	86.25%

CHP+ Plan	Eligible Population	Rate
RMHP	227	80.62%
HEDIS MY 2020 Colorado CHP+ Weighted Average		86.23%
HEDIS MY 2019 Colorado CHP+ Weighted Average		83.23%
HEDIS MY 2018 Colorado CHP+ Weighted Average		82.31%
<i>HiB</i>		
COA	989	87.46%
FHP	26	NA
DHMP	72	87.50%
Kaiser	160	87.50%
RMHP	227	74.89%
HEDIS MY 2020 Colorado CHP+ Weighted Average		84.19%
HEDIS MY 2019 Colorado CHP+ Weighted Average		86.69%
HEDIS MY 2018 Colorado CHP+ Weighted Average		82.38%
<i>Hepatitis B</i>		
COA	989	87.06%
FHP	26	NA
DHMP	72	94.44% ^
Kaiser	160	85.00%
RMHP	227	75.33%
HEDIS MY 2020 Colorado CHP+ Weighted Average		83.92%
HEDIS MY 2019 Colorado CHP+ Weighted Average		77.87%
HEDIS MY 2018 Colorado CHP+ Weighted Average		81.97%
<i>VZV</i>		
COA	989	86.55%
FHP	26	NA
DHMP	72	86.11%
Kaiser	160	84.38%
RMHP	227	76.21%
HEDIS MY 2020 Colorado CHP+ Weighted Average		84.12%
HEDIS MY 2019 Colorado CHP+ Weighted Average		85.59%
HEDIS MY 2018 Colorado CHP+ Weighted Average		81.57%
<i>Pneumococcal Conjugate</i>		
COA	989	80.89% ^
FHP	26	NA
DHMP	72	83.33% ^
Kaiser	160	80.63% ^
RMHP	227	69.16%
HEDIS MY 2020 Colorado CHP+ Weighted Average		77.88%

CHP+ Plan	Eligible Population	Rate
HEDIS MY 2019 Colorado CHP+ Weighted Average		77.56%
HEDIS MY 2018 Colorado CHP+ Weighted Average		74.68%
<i>Hepatitis A</i>		
COA	989	82.81%
FHP	26	NA
DHMP	72	84.72%
Kaiser	160	83.75%
RMHP	227	81.94%
HEDIS MY 2020 Colorado CHP+ Weighted Average		82.50%
HEDIS MY 2019 Colorado CHP+ Weighted Average		83.94%
HEDIS MY 2018 Colorado CHP+ Weighted Average		79.27%
<i>Rotavirus</i>		
COA	989	77.15% ^
FHP	26	NA
DHMP	72	80.56% ^
Kaiser	160	78.13% ^
RMHP	227	64.32%
HEDIS MY 2020 Colorado CHP+ Weighted Average		74.15% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		74.25%
HEDIS MY 2018 Colorado CHP+ Weighted Average		73.33%
<i>Influenza</i>		
COA	989	66.73% ^
FHP	26	NA
DHMP	72	66.67% ^
Kaiser	160	62.50% ^
RMHP	227	55.07% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		63.70% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		61.26%
HEDIS MY 2018 Colorado CHP+ Weighted Average		53.75%
<i>Combination 2</i>		
COA	989	74.12% ^
FHP	26	NA
DHMP	72	81.94% ^
Kaiser	160	68.13%
RMHP	227	60.79%
HEDIS MY 2020 Colorado CHP+ Weighted Average		70.56%
HEDIS MY 2019 Colorado CHP+ Weighted Average		63.39%
HEDIS MY 2018 Colorado CHP+ Weighted Average		66.78%

CHP+ Plan	Eligible Population	Rate
Combination 3		
COA	989	72.50% ^
FHP	26	NA
DHMP	72	81.94% ^
Kaiser	160	67.50%
RMHP	227	59.47%
HEDIS MY 2020 Colorado CHP+ Weighted Average		69.20%
HEDIS MY 2019 Colorado CHP+ Weighted Average		61.81%
HEDIS MY 2018 Colorado CHP+ Weighted Average		65.16%
Combination 4		
COA	989	69.87% ^
FHP	26	NA
DHMP	72	81.94% ^
Kaiser	160	67.50%
RMHP	227	58.59%
HEDIS MY 2020 Colorado CHP+ Weighted Average		67.30%
HEDIS MY 2019 Colorado CHP+ Weighted Average		60.55%
HEDIS MY 2018 Colorado CHP+ Weighted Average		63.13%
Combination 5		
COA	989	67.24% ^
FHP	26	NA
DHMP	72	75.00% ^
Kaiser	160	63.75% ^
RMHP	227	54.63%
HEDIS MY 2020 Colorado CHP+ Weighted Average		64.18% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		54.80%
HEDIS MY 2018 Colorado CHP+ Weighted Average		59.76%
Combination 6		
COA	989	58.14% ^
FHP	26	NA
DHMP	72	66.67% ^
Kaiser	160	52.50% ^
RMHP	227	46.26% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		55.09% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		46.77%
HEDIS MY 2018 Colorado CHP+ Weighted Average		45.31%

CHP+ Plan	Eligible Population	Rate
Combination 7		
COA	989	65.12% ^
FHP	26	NA
DHMP	72	75.00% ^
Kaiser	160	63.75% ^
RMHP	227	53.74%
HEDIS MY 2020 Colorado CHP+ Weighted Average		62.62% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		53.94%
HEDIS MY 2018 Colorado CHP+ Weighted Average		58.20%
Combination 8		
COA	989	56.32% ^
FHP	26	NA
DHMP	72	66.67% ^
Kaiser	160	52.50% ^
RMHP	227	45.81% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		53.80% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		45.91%
HEDIS MY 2018 Colorado CHP+ Weighted Average		44.29%
Combination 9		
COA	989	55.11% ^
FHP	26	NA
DHMP	72	63.89% ^
Kaiser	160	49.38% ^
RMHP	227	42.29% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		51.97% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		42.44%
HEDIS MY 2018 Colorado CHP+ Weighted Average		42.27%
Combination 10		
COA	989	53.69% ^
FHP	26	NA
DHMP	72	63.89% ^
Kaiser	160	49.38% ^
RMHP	227	41.85% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		50.95% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		41.97%
HEDIS MY 2018 Colorado CHP+ Weighted Average		41.39%

CHP+ Plan	Eligible Population	Rate
Immunizations for Adolescents		
Meningococcal		
COA	1,550	77.81%
FHP	53	43.40%
DHMP	150	91.33% ^
Kaiser	296	87.50% ^
RMHP	334	67.37%
HEDIS MY 2020 Colorado CHP+ Weighted Average		77.63%
HEDIS MY 2019 Colorado CHP+ Weighted Average		77.26%
HEDIS MY 2018 Colorado CHP+ Weighted Average		75.41%
Tdap		
COA	1,550	87.87%
FHP	53	62.26%
DHMP	150	90.00% ^
Kaiser	296	91.55% ^
RMHP	334	82.34%
HEDIS MY 2020 Colorado CHP+ Weighted Average		87.12%
HEDIS MY 2019 Colorado CHP+ Weighted Average		86.08%
HEDIS MY 2018 Colorado CHP+ Weighted Average		86.32%
HPV		
COA	1,550	44.58% ^
FHP	53	22.64%
DHMP	150	55.33% ^
Kaiser	296	61.15% ^
RMHP	334	33.53%
HEDIS MY 2020 Colorado CHP+ Weighted Average		45.28% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		42.75%
HEDIS MY 2018 Colorado CHP+ Weighted Average		41.42%
Combination 1 (Meningococcal, Tdap)		
COA	1,550	76.97%
FHP	53	43.40%
DHMP	150	88.00% ^
Kaiser	296	85.81% ^
RMHP	334	63.47%
HEDIS MY 2020 Colorado CHP+ Weighted Average		76.12%
HEDIS MY 2019 Colorado CHP+ Weighted Average		74.81%
HEDIS MY 2018 Colorado CHP+ Weighted Average		73.33%

CHP+ Plan	Eligible Population	Rate
Combination 2 (Meningococcal, Tdap, HPV)		
COA	1,550	41.81% ^
FHP	53	22.64%
DHMP	150	54.00% ^
Kaiser	296	59.46% ^
RMHP	334	28.44%
HEDIS MY 2020 Colorado CHP+ Weighted Average		42.47% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		39.20%
HEDIS MY 2018 Colorado CHP+ Weighted Average		39.02%
Well-Child Visits in the First 30 Months of Life²		
Well-Child Visits in the First 15 Months—Six or More Well-Child Visits		
COA	417	54.92%
FHP	11	NA
DHMP	62	64.52%
Kaiser	74	51.35%
RMHP	119	22.69%
HEDIS MY 2020 Colorado CHP+ Weighted Average		48.90%
HEDIS MY 2019 Colorado CHP+ Weighted Average		—
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits		
COA	964	75.31%
FHP	20	NA
DHMP	68	66.18%
Kaiser	152	61.18%
RMHP	206	75.24%
HEDIS MY 2020 Colorado CHP+ Weighted Average		73.12%
HEDIS MY 2019 Colorado CHP+ Weighted Average		—
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
Child and Adolescent Well-Care Visits²		
Ages 3 to 11 Years		
COA	15,599	53.14%
FHP	447	36.91%
DHMP	1,247	50.12%
Kaiser	2,439	41.16%
RMHP	3,446	54.59%
HEDIS MY 2020 Colorado CHP+ Weighted Average		51.62%
HEDIS MY 2019 Colorado CHP+ Weighted Average		—

CHP+ Plan	Eligible Population	Rate
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Ages 12 to 17 Years</i>		
COA	10,778	42.81%
FHP	320	32.50%
DHMP	1,039	42.93%
Kaiser	1,931	30.45%
RMHP	2,350	45.15%
HEDIS MY 2020 Colorado CHP+ Weighted Average		41.50%
HEDIS MY 2019 Colorado CHP+ Weighted Average		—
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Ages 18 to 21 Years</i>		
COA	1,655	28.16%
FHP	42	7.14%
DHMP	156	35.26%
Kaiser	1,931	30.45%
RMHP	346	32.37%
HEDIS MY 2020 Colorado CHP+ Weighted Average		29.64%
HEDIS MY 2019 Colorado CHP+ Weighted Average		—
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Total</i>		
COA	28,032	47.69%
FHP	320	32.50%
DHMP	2,442	46.11%
Kaiser	6,301	34.60%
RMHP	2,350	45.15%
HEDIS MY 2020 Colorado CHP+ Weighted Average		45.23%
HEDIS MY 2019 Colorado CHP+ Weighted Average		—
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</i>		
<i>BMI Percentile Documentation—Ages 3 to 11 Years¹</i>		
COA	11,183	13.69%
FHP	275	8.36%
DHMP	758	63.72%
Kaiser	1,414	93.78% [^]
RMHP	2,502	13.59%
HEDIS MY 2020 Colorado CHP+ Weighted Average		22.95%
HEDIS MY 2019 Colorado CHP+ Weighted Average		20.60%
HEDIS MY 2018 Colorado CHP+ Weighted Average		20.52%

CHP+ Plan	Eligible Population	Rate
<i>BMI Percentile Documentation—Ages 12 to 17 Years¹</i>		
COA	7,083	17.92%
FHP	194	3.09%
DHMP	585	64.27%
Kaiser	933	93.14% ^
RMHP	1,593	13.68%
HEDIS MY 2020 Colorado CHP+ Weighted Average		26.36%
HEDIS MY 2019 Colorado CHP+ Weighted Average		25.83%
HEDIS MY 2018 Colorado CHP+ Weighted Average		26.36%
<i>BMI Percentile Documentation—Total¹</i>		
COA	18,266	15.33%
FHP	469	6.18%
DHMP	1,343	63.96%
Kaiser	2,347	93.52% ^
RMHP	4,095	13.63%
HEDIS MY 2020 Colorado CHP+ Weighted Average		24.29%
HEDIS MY 2019 Colorado CHP+ Weighted Average		22.62%
HEDIS MY 2018 Colorado CHP+ Weighted Average		22.71%
<i>Counseling for Nutrition—Ages 3 to 11 Years</i>		
COA	11,183	10.14%
FHP	275	2.91%
DHMP	758	72.30%
Kaiser	1,414	89.32% ^
RMHP	2,502	26.94%
HEDIS MY 2020 Colorado CHP+ Weighted Average		22.48%
HEDIS MY 2019 Colorado CHP+ Weighted Average		19.78%
HEDIS MY 2018 Colorado CHP+ Weighted Average		20.41%
<i>Counseling for Nutrition—Ages 12 to 17 Years</i>		
COA	7,083	11.49%
FHP	194	2.06%
DHMP	585	67.86%
Kaiser	933	89.28% ^
RMHP	1,593	22.47%
HEDIS MY 2020 Colorado CHP+ Weighted Average		23.16%
HEDIS MY 2019 Colorado CHP+ Weighted Average		22.37%
HEDIS MY 2018 Colorado CHP+ Weighted Average		23.21%

CHP+ Plan	Eligible Population	Rate
<i>Counseling for Nutrition—Total</i>		
COA	18,266	10.66%
FHP	469	2.56%
DHMP	1,343	70.36%
Kaiser	2,347	89.31% ^
RMHP	4,095	25.20%
HEDIS MY 2020 Colorado CHP+ Weighted Average		22.75%
HEDIS MY 2019 Colorado CHP+ Weighted Average		20.77%
HEDIS MY 2018 Colorado CHP+ Weighted Average		21.46%
<i>Counseling for Physical Activity—Ages 3 to 11 Years</i>		
COA	11,183	6.59%
FHP	275	0.73%
DHMP	758	71.64% ^
Kaiser	1,414	89.32% ^
RMHP	2,502	6.51%
HEDIS MY 2020 Colorado CHP+ Weighted Average		16.79%
HEDIS MY 2019 Colorado CHP+ Weighted Average		14.74%
HEDIS MY 2018 Colorado CHP+ Weighted Average		15.93%
<i>Counseling for Physical Activity—Ages 12 to 17 Years</i>		
COA	7,083	9.25%
FHP	194	7.73%
DHMP	585	67.69%
Kaiser	933	89.28% ^
RMHP	1,593	6.53%
HEDIS MY 2020 Colorado CHP+ Weighted Average		19.28%
HEDIS MY 2019 Colorado CHP+ Weighted Average		18.45%
HEDIS MY 2018 Colorado CHP+ Weighted Average		20.34%
<i>Counseling for Physical Activity—Total</i>		
COA	18,266	7.62%
FHP	469	3.62%
DHMP	1,343	69.92% ^
Kaiser	2,347	89.31% ^
RMHP	4,095	6.52%
HEDIS MY 2020 Colorado CHP+ Weighted Average		17.76%
HEDIS MY 2019 Colorado CHP+ Weighted Average		16.17%
HEDIS MY 2018 Colorado CHP+ Weighted Average		17.58%

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed.



NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

— Indicates that NCQA recommended a break in trending; therefore, no prior year rates are displayed.

Yellow shading with one caret (^) indicates the rate was at or above the 50th percentile.

Bold font indicates Colorado CHP+ weighted average values.

Access to Care and Preventive Screening Performance Measure Results

**Table A-2—Access to Care and Preventive Screening Performance Measure Results—
MCO-Specific Rates and Colorado CHP+ Weighted Averages**

CHP+ Plan	Eligible Population	Rate
<i>Prenatal and Postpartum Care^{1,3}</i>		
<i>Timeliness of Prenatal Care</i>		
SMCN	799	58.45%
HEDIS MY 2020 Colorado CHP+ Weighted Average		58.45%
HEDIS MY 2019 Colorado CHP+ Weighted Average		61.38%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Postpartum Care</i>		
SMCN	799	53.32%
HEDIS MY 2020 Colorado CHP+ Weighted Average		53.32%
HEDIS MY 2019 Colorado CHP+ Weighted Average		61.61%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Chlamydia Screening in Women²</i>		
<i>Ages 16 to 20 Years</i>		
COA	892	33.74%
FHP	25	NA
DHMP	70	44.29%
Kaiser	168	45.83%
RMHP	208	30.77%
HEDIS MY 2020 Colorado CHP+ Weighted Average		35.29%
HEDIS MY 2019 Colorado CHP+ Weighted Average		37.26%
HEDIS MY 2018 Colorado CHP+ Weighted Average		36.52%
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females*</i>		
COA	2,449	0.04% ^
FHP	57	0.00% ^
DHMP	232	0.00% ^
Kaiser	458	0.00% ^
RMHP	514	0.19% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		0.05% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		0.04%
HEDIS MY 2018 Colorado CHP+ Weighted Average		0.04%

* For this indicator, a lower rate indicates better performance.

¹ Since the Prenatal and Postpartum Care rates are calculated using a modified specification, comparisons to national benchmarks are not shown.

² Because the CHP+ population is limited to individuals ages 18 years and younger, the HEDIS MY 2020 indicator rates for Ages 16 to 20 Years are the same as the measure indicator rates for the Total age grouping for this measure.

³ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

— Indicates that NCQA recommended a break in trending; therefore, no prior year rates are displayed.

Yellow shading with one caret (^) indicates the rate was at or above the 50th percentile.

Bold font indicates Colorado CHP+ weighted average values.

Mental/Behavioral Health Performance Measure Results

Table A-3—Mental/Behavioral Health Performance Measure Results—MCO-Specific Rates and Colorado CHP+ Weighted Averages

CHP+ Plan	Eligible Population	Rate
<i>Follow-Up Care for Children Prescribed ADHD Medication¹</i>		
<i>Initiation Phase</i>		
COA	225	33.78%
FHP	6	NA
DHMP	10	NA
Kaiser	17	NA
RMHP	41	51.22% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		36.45%
HEDIS MY 2019 Colorado CHP+ Weighted Average		14.98%
HEDIS MY 2018 Colorado CHP+ Weighted Average		15.21%
<i>Continuation and Maintenance Phase</i>		
COA	49	46.94%
FHP	0	NA
DHMP	1	NA
Kaiser	3	NA
RMHP	6	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		50.85%
HEDIS MY 2019 Colorado CHP+ Weighted Average		32.69%
HEDIS MY 2018 Colorado CHP+ Weighted Average		20.00%
<i>Metabolic Monitoring for Children and Adolescents on Antipsychotics</i>		
<i>Blood Glucose Testing—Ages 1 to 11 Years</i>		
COA	27	NA
FHP	2	NA
DHMP	0	NA
Kaiser	2	NA
RMHP	1	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		40.63%
HEDIS MY 2019 Colorado CHP+ Weighted Average		40.54%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Blood Glucose Testing—Ages 12 to 17 Years</i>		
COA	98	40.82%
FHP	0	NA
DHMP	3	NA

CHP+ Plan	Eligible Population	Rate
Kaiser	11	NA
RMHP	18	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		45.38%
HEDIS MY 2019 Colorado CHP+ Weighted Average		66.09%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Blood Glucose Testing—Total</i>		
COA	125	40.80%
FHP	2	NA
DHMP	3	NA
Kaiser	13	NA
RMHP	19	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		44.44%
HEDIS MY 2019 Colorado CHP+ Weighted Average		59.87%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Cholesterol Testing—Ages 1 to 11 Years</i>		
COA	27	NA
FHP	2	NA
DHMP	0	NA
Kaiser	2	NA
RMHP	1	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		25.00%
HEDIS MY 2019 Colorado CHP+ Weighted Average		29.73%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Cholesterol Testing—Ages 12 to 17 Years</i>		
COA	98	18.37%
FHP	0	NA
DHMP	3	NA
Kaiser	11	NA
RMHP	18	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		25.38%
HEDIS MY 2019 Colorado CHP+ Weighted Average		42.61%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Cholesterol Testing—Total</i>		
COA	125	19.20%
FHP	2	NA
DHMP	3	NA
Kaiser	13	NA
RMHP	19	NA

CHP+ Plan	Eligible Population	Rate
HEDIS MY 2020 Colorado CHP+ Weighted Average		25.31%
HEDIS MY 2019 Colorado CHP+ Weighted Average		39.47%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Blood Glucose and Cholesterol Testing—Ages 1 to 11 Years</i>		
COA	27	NA
FHP	2	NA
DHMP	0	NA
Kaiser	2	NA
RMHP	1	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		25.00%
HEDIS MY 2019 Colorado CHP+ Weighted Average		27.03%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Blood Glucose and Cholesterol Testing—Ages 12 to 17 Years</i>		
COA	98	18.37%
FHP	0	NA
DHMP	3	NA
Kaiser	11	NA
RMHP	18	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		25.38%
HEDIS MY 2019 Colorado CHP+ Weighted Average		40.00%
HEDIS MY 2018 Colorado CHP+ Weighted Average		38.89%
<i>Blood Glucose and Cholesterol Testing—Total</i>		
COA	125	19.20%
FHP	2	NA
DHMP	3	NA
Kaiser	13	NA
RMHP	19	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		25.31%
HEDIS MY 2019 Colorado CHP+ Weighted Average		36.84%
HEDIS MY 2018 Colorado CHP+ Weighted Average		38.98%

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

— Indicates that NCQA recommended a break in trending; therefore, no prior year rates are displayed.

Yellow shading with one caret (^) indicates the rate was at or above the 50th percentile.

Bold font indicates Colorado CHP+ weighted average values.

Respiratory Conditions Performance Measure Results

Table A-4—Respiratory Conditions Performance Measure Results—MCO-Specific Rates and Colorado CHP+ Weighted Averages

CHP+ Plan	Eligible Population	Rate
<i>Appropriate Testing for Pharyngitis¹</i>		
<i>Ages 3 to 17 Years</i>		
COA	1,856	83.84% ^
FHP	94	77.66%
DHMP	67	85.07% ^
Kaiser	165	89.70% ^
RMHP	493	86.82% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		84.56% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		84.20%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Ages 18 to 64 Years</i>		
COA	74	79.73% ^
FHP	2	NA
DHMP	4	NA
Kaiser	10	NA
RMHP	29	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		75.63% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		81.45%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Appropriate Treatment for Upper Respiratory Infection</i>		
<i>Ages 3 Months to 17 Years</i>		
COA	5,124	92.12% ^
FHP	182	93.96% ^
DHMP	331	98.49% ^
Kaiser	400	97.75% ^
RMHP	1,136	95.86% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		93.36% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		93.30%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Ages 18 to 64 Years</i>		
COA	116	98.28% ^
FHP	3	NA
DHMP	12	NA
Kaiser	1	NA

CHP+ Plan	Eligible Population	Rate
RMHP	35	94.29% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		97.60% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		90.46%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis</i>		
<i>Ages 3 Months to 17 Years</i>		
COA	468	70.30% ^
FHP	27	NA
DHMP	13	NA
Kaiser	34	97.06% ^
RMHP	100	77.00% ^
HEDIS MY 2020 Colorado CHP+ Weighted Average		72.27% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		72.63%
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Ages 18 to 64 Years</i>		
COA	15	NA
FHP	0	NA
DHMP	0	NA
Kaiser	0	NA
RMHP	0	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		NA
HEDIS MY 2019 Colorado CHP+ Weighted Average		NA
HEDIS MY 2018 Colorado CHP+ Weighted Average		—
<i>Asthma Medication Ratio</i>		
<i>Ages 5 to 11 Years</i>		
COA	170	84.12% ^
FHP	1	NA
DHMP	6	NA
Kaiser	24	NA
RMHP	12	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		84.04% ^
HEDIS MY 2019 Colorado CHP+ Weighted Average		88.44%
HEDIS MY 2018 Colorado CHP+ Weighted Average		82.63%
<i>Ages 12 to 18 Years</i>		
COA	125	72.80% ^
FHP	5	NA
DHMP	8	NA
Kaiser	23	NA

CHP+ Plan	Eligible Population	Rate
RMHP	25	NA
HEDIS MY 2020 Colorado CHP+ Weighted Average		77.96%[^]
HEDIS MY 2019 Colorado CHP+ Weighted Average		70.21%
HEDIS MY 2018 Colorado CHP+ Weighted Average		71.32%
Total		
COA	296	79.39% [^]
FHP	6	NA
DHMP	14	NA
Kaiser	47	91.49% [^]
RMHP	37	97.30% [^]
HEDIS MY 2020 Colorado CHP+ Weighted Average		81.25%[^]
HEDIS MY 2019 Colorado CHP+ Weighted Average		80.25%
HEDIS MY 2018 Colorado CHP+ Weighted Average		77.63%

¹ Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

— Indicates that NCQA recommended a break in trending; therefore, no prior year rates are displayed.

Yellow shading with one caret (^) indicates the rate was at or above the 50th percentile.

Bold font indicates Colorado CHP+ weighted average values.

Use of Services Measure Results

Table A-5—Use of Services Measure Results—MCO-Specific Rates and Colorado CHP+ Weighted Averages

CHP+ Plan	Rate
<i>Ambulatory Care</i>	
<i>ED Visits—Age <1 Year*</i>	
COA	32.03
FHP	NA
DHMP	31.15
Kaiser	32.49
RMHP	18.12
HEDIS MY 2020 Colorado CHP+ Weighted Average	29.51
HEDIS MY 2019 Colorado CHP+ Weighted Average	48.02
HEDIS MY 2018 Colorado CHP+ Weighted Average	40.86
<i>ED Visits—Ages 1 to 9 Years*</i>	
COA	18.19
FHP	12.31
DHMP	15.40
Kaiser	15.55
RMHP	13.54
HEDIS MY 2020 Colorado CHP+ Weighted Average	16.99
HEDIS MY 2019 Colorado CHP+ Weighted Average	27.39
HEDIS MY 2018 Colorado CHP+ Weighted Average	25.62
<i>ED Visits—Ages 10 to 19 Years*</i>	
COA	15.81
FHP	12.75
DHMP	11.78
Kaiser	13.66
RMHP	12.54
HEDIS MY 2020 Colorado CHP+ Weighted Average	14.78
HEDIS MY 2019 Colorado CHP+ Weighted Average	21.75
HEDIS MY 2018 Colorado CHP+ Weighted Average	21.51
<i>ED Visits—Total*</i>	
COA	17.24
FHP	12.71
DHMP	13.67
Kaiser	14.61
RMHP	13.14
HEDIS MY 2020 Colorado CHP+ Weighted Average	16.07

CHP+ Plan	Rate
HEDIS MY 2019 Colorado CHP+ Weighted Average	24.91
HEDIS MY 2018 Colorado CHP+ Weighted Average	23.83
<i>Outpatient Visits—Age <1 Year</i>	
COA	508.83
FHP	NA
DHMP	341.49
Kaiser	388.42
RMHP	516.65
HEDIS MY 2020 Colorado CHP+ Weighted Average	491.51
HEDIS MY 2019 Colorado CHP+ Weighted Average	581.18
HEDIS MY 2018 Colorado CHP+ Weighted Average	562.23
<i>Outpatient Visits—Ages 1 to 9 Years</i>	
COA	178.66
FHP	146.16
DHMP	127.77
Kaiser	121.60
RMHP	186.07
HEDIS MY 2020 Colorado CHP+ Weighted Average	170.60
HEDIS MY 2019 Colorado CHP+ Weighted Average	224.78
HEDIS MY 2018 Colorado CHP+ Weighted Average	204.79
<i>Outpatient Visits—Ages 10 to 19 Years</i>	
COA	163.83
FHP	128.03
DHMP	121.60
Kaiser	95.30
RMHP	173.00
HEDIS MY 2020 Colorado CHP+ Weighted Average	153.27
HEDIS MY 2019 Colorado CHP+ Weighted Average	190.56
HEDIS MY 2018 Colorado CHP+ Weighted Average	176.04
<i>Outpatient Visits—Total</i>	
COA	177.19
FHP	141.10
DHMP	127.95
Kaiser	108.70
RMHP	186.23
HEDIS MY 2020 Colorado CHP+ Weighted Average	167.24
HEDIS MY 2019 Colorado CHP+ Weighted Average	213.53
HEDIS MY 2018 Colorado CHP+ Weighted Average	195.91

CHP+ Plan	Rate
<i>Inpatient Utilization—General Hospital/Acute Care</i>	
<i>Discharges per 1,000 Member Months (Total Inpatient)—Age <1 Year</i>	
COA	3.38
FHP	NA
DHMP	2.22
Kaiser	2.82
RMHP	2.53
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.07
HEDIS MY 2019 Colorado CHP+ Weighted Average	4.07
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.73
<i>Discharges per 1,000 Member Months (Total Inpatient)—Ages 1 to 9 Years</i>	
COA	0.54
FHP	0.37
DHMP	0.77
Kaiser	0.49
RMHP	0.58
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.55
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.93
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.86
<i>Discharges per 1,000 Member Months (Total Inpatient)—Ages 10 to 19 Years</i>	
COA	0.82
FHP	0.63
DHMP	0.58
Kaiser	0.46
RMHP	0.58
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.73
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.81
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.84
<i>Discharges per 1,000 Member Months (Total Inpatient)—Total</i>	
COA	0.73
FHP	0.50
DHMP	0.69
Kaiser	0.49
RMHP	0.62
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.68
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.92

CHP+ Plan	Rate
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.88
<i>Days per 1,000 Member Months (Total Inpatient)—Age <1 Year</i>	
COA	14.38
FHP	NA
DHMP	2.22
Kaiser	9.89
RMHP	10.54
HEDIS MY 2020 Colorado CHP+ Weighted Average	12.47
HEDIS MY 2019 Colorado CHP+ Weighted Average	22.97
HEDIS MY 2018 Colorado CHP+ Weighted Average	14.40
<i>Days per 1,000 Member Months (Total Inpatient)—Ages 1 to 9 Years</i>	
COA	1.59
FHP	0.62
DHMP	1.59
Kaiser	1.42
RMHP	1.55
HEDIS MY 2020 Colorado CHP+ Weighted Average	1.55
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.04
HEDIS MY 2018 Colorado CHP+ Weighted Average	2.88
<i>Days per 1,000 Member Months (Total Inpatient)—Ages 10 to 19 Years</i>	
COA	2.78
FHP	1.69
DHMP	1.56
Kaiser	1.59
RMHP	1.59
HEDIS MY 2020 Colorado CHP+ Weighted Average	2.37
HEDIS MY 2019 Colorado CHP+ Weighted Average	2.71
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.05
<i>Days per 1,000 Member Months (Total Inpatient)—Total</i>	
COA	2.42
FHP	1.17
DHMP	1.58
Kaiser	1.59
RMHP	1.75
HEDIS MY 2020 Colorado CHP+ Weighted Average	2.16
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.21
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.09

CHP+ Plan	Rate
<i>Average Length of Stay (Total Inpatient)—Age <1 Year</i>	
COA	4.26
FHP	NA
DHMP	1.00†
Kaiser	3.50†
RMHP	4.17†
HEDIS MY 2020 Colorado CHP+ Weighted Average	4.07
HEDIS MY 2019 Colorado CHP+ Weighted Average	5.64
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.86
<i>Average Length of Stay (Total Inpatient)—Ages 1 to 9 Years</i>	
COA	2.95
FHP	1.67†
DHMP	2.06†
Kaiser	2.89†
RMHP	2.70
HEDIS MY 2020 Colorado CHP+ Weighted Average	2.81
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.27
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.36
<i>Average Length of Stay (Total Inpatient)—Ages 10 to 19 Years</i>	
COA	3.37
FHP	2.67†
DHMP	2.71†
Kaiser	3.46†
RMHP	2.74
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.26
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.36
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.62
<i>Average Length of Stay (Total Inpatient)—Total</i>	
COA	3.30
FHP	2.33†
DHMP	2.30
Kaiser	3.22
RMHP	2.84
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.15
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.48
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.51

CHP+ Plan	Rate
<i>Discharges per 1,000 Member Months (Medicine)—Age <1 Year</i>	
COA	2.99
FHP	NA
DHMP	2.22
Kaiser	2.82
RMHP	2.11
HEDIS MY 2020 Colorado CHP+ Weighted Average	2.73
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.41
HEDIS MY 2018 Colorado CHP+ Weighted Average	2.98
<i>Discharges per 1,000 Member Months (Medicine)—Ages 1 to 9 Years</i>	
COA	0.44
FHP	0.12
DHMP	0.73
Kaiser	0.41
RMHP	0.51
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.46
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.78
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.70
<i>Discharges per 1,000 Member Months (Medicine)—Ages 10 to 19 Years</i>	
COA	0.58
FHP	0.21
DHMP	0.27
Kaiser	0.25
RMHP	0.36
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.49
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.49
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.51
<i>Discharges per 1,000 Member Months (Medicine)—Total</i>	
COA	0.56
FHP	0.17
DHMP	0.50
Kaiser	0.34
RMHP	0.47
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.51
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.68
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.63

CHP+ Plan	Rate
<i>Days per 1,000 Member Months (Medicine)—Age <1 Year</i>	
COA	11.87
FHP	NA
DHMP	2.22
Kaiser	9.89
RMHP	9.69
HEDIS MY 2020 Colorado CHP+ Weighted Average	10.57
HEDIS MY 2019 Colorado CHP+ Weighted Average	11.95
HEDIS MY 2018 Colorado CHP+ Weighted Average	10.44
<i>Days per 1,000 Member Months (Medicine)—Ages 1 to 9 Years</i>	
COA	1.19
FHP	0.25
DHMP	1.46
Kaiser	1.19
RMHP	1.38
HEDIS MY 2020 Colorado CHP+ Weighted Average	1.21
HEDIS MY 2019 Colorado CHP+ Weighted Average	2.19
HEDIS MY 2018 Colorado CHP+ Weighted Average	1.89
<i>Days per 1,000 Member Months (Medicine)—Ages 10 to 19 Years</i>	
COA	2.07
FHP	0.21
DHMP	0.61
Kaiser	1.04
RMHP	0.92
HEDIS MY 2020 Colorado CHP+ Weighted Average	1.65
HEDIS MY 2019 Colorado CHP+ Weighted Average	1.32
HEDIS MY 2018 Colorado CHP+ Weighted Average	1.55
<i>Days per 1,000 Member Months (Medicine)—Total</i>	
COA	1.83
FHP	0.22
DHMP	1.01
Kaiser	1.17
RMHP	1.32
HEDIS MY 2020 Colorado CHP+ Weighted Average	1.60
HEDIS MY 2019 Colorado CHP+ Weighted Average	1.92
HEDIS MY 2018 Colorado CHP+ Weighted Average	1.82

CHP+ Plan	Rate
Average Length of Stay (Medicine)—Age <1 Year	
COA	3.97
FHP	NA
DHMP	1.00†
Kaiser	3.50†
RMHP	4.60†
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.88
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.51
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.50
Average Length of Stay (Medicine)—Ages 1 to 9 Years	
COA	2.69
FHP	2.00†
DHMP	2.00†
Kaiser	2.88†
RMHP	2.72†
HEDIS MY 2020 Colorado CHP+ Weighted Average	2.65
HEDIS MY 2019 Colorado CHP+ Weighted Average	2.82
HEDIS MY 2018 Colorado CHP+ Weighted Average	2.71
Average Length of Stay (Medicine)—Ages 10 to 19 Years	
COA	3.54
FHP	1.00†
DHMP	2.25†
Kaiser	4.15†
RMHP	2.57†
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.41
HEDIS MY 2019 Colorado CHP+ Weighted Average	2.69
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.04
Average Length of Stay (Medicine)—Total	
COA	3.26
FHP	1.33†
DHMP	2.00†
Kaiser	3.45
RMHP	2.84
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.13
HEDIS MY 2019 Colorado CHP+ Weighted Average	2.83
HEDIS MY 2018 Colorado CHP+ Weighted Average	2.89

CHP+ Plan	Rate
<i>Discharges per 1,000 Member Months (Surgery)—Age <1 Year</i>	
COA	0.39
FHP	NA
DHMP	0.00
Kaiser	0.00
RMHP	0.42
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.34
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.67
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.75
<i>Discharges per 1,000 Member Months (Surgery)—Ages 1 to 9 Years</i>	
COA	0.10
FHP	0.25
DHMP	0.04
Kaiser	0.08
RMHP	0.07
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.09
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.15
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.16
<i>Discharges per 1,000 Member Months (Surgery)—Ages 10 to 19 Years</i>	
COA	0.18
FHP	0.32
DHMP	0.20
Kaiser	0.19
RMHP	0.20
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.19
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.25
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.26
<i>Discharges per 1,000 Member Months (Surgery)—Total</i>	
COA	0.15
FHP	0.28
DHMP	0.13
Kaiser	0.14
RMHP	0.14
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.15
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.21
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.21

CHP+ Plan	Rate
<i>Days per 1,000 Member Months (Surgery)—Age <1 Year</i>	
COA	2.51
FHP	NA
DHMP	0.00
Kaiser	0.00
RMHP	0.84
HEDIS MY 2020 Colorado CHP+ Weighted Average	1.91
HEDIS MY 2019 Colorado CHP+ Weighted Average	11.02
HEDIS MY 2018 Colorado CHP+ Weighted Average	3.95
<i>Days per 1,000 Member Months (Surgery)—Ages 1 to 9 Years</i>	
COA	0.40
FHP	0.37
DHMP	0.13
Kaiser	0.23
RMHP	0.17
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.34
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.85
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.99
<i>Days per 1,000 Member Months (Surgery)—Ages 10 to 19 Years</i>	
COA	0.56
FHP	1.16
DHMP	0.75
Kaiser	0.52
RMHP	0.63
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.59
HEDIS MY 2019 Colorado CHP+ Weighted Average	1.18
HEDIS MY 2018 Colorado CHP+ Weighted Average	1.30
<i>Days per 1,000 Member Months (Surgery)—Total</i>	
COA	0.52
FHP	0.78
DHMP	0.47
Kaiser	0.39
RMHP	0.41
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.49
HEDIS MY 2019 Colorado CHP+ Weighted Average	1.18
HEDIS MY 2018 Colorado CHP+ Weighted Average	1.17

CHP+ Plan	Rate
<i>Average Length of Stay (Surgery)—Age <1 Year</i>	
COA	6.50†
FHP	NA
DHMP	NA
Kaiser	NA
RMHP	2.00†
HEDIS MY 2020 Colorado CHP+ Weighted Average	5.60†
HEDIS MY 2019 Colorado CHP+ Weighted Average	16.50
HEDIS MY 2018 Colorado CHP+ Weighted Average	5.30
<i>Average Length of Stay (Surgery)—Ages 1 to 9 Years</i>	
COA	4.07†
FHP	1.50†
DHMP	3.00†
Kaiser	3.00†
RMHP	2.50†
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.65
HEDIS MY 2019 Colorado CHP+ Weighted Average	5.58
HEDIS MY 2018 Colorado CHP+ Weighted Average	6.23
<i>Average Length of Stay (Surgery)—Ages 10 to 19 Years</i>	
COA	3.04
FHP	3.67†
DHMP	3.67†
Kaiser	2.70†
RMHP	3.08†
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.07
HEDIS MY 2019 Colorado CHP+ Weighted Average	4.70
HEDIS MY 2018 Colorado CHP+ Weighted Average	5.08
<i>Average Length of Stay (Surgery)—Total</i>	
COA	3.54
FHP	2.80†
DHMP	3.57†
Kaiser	2.77†
RMHP	2.88†
HEDIS MY 2020 Colorado CHP+ Weighted Average	3.34
HEDIS MY 2019 Colorado CHP+ Weighted Average	5.63
HEDIS MY 2018 Colorado CHP+ Weighted Average	5.50

CHP+ Plan	Rate
<i>Discharges per 1,000 Member Months (Maternity)—Ages 10 to 19 Years</i>	
COA	0.06
FHP	0.11
DHMP	0.10
Kaiser	0.02
RMHP	0.02
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.05
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.07
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.08
<i>Discharges per 1,000 Member Months (Maternity)—Total</i>	
COA	0.06
FHP	0.11
DHMP	0.10
Kaiser	0.02
RMHP	0.02
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.05
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.07
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.07
<i>Days per 1,000 Member Months (Maternity)—Ages 10 to 19 Years</i>	
COA	0.15
FHP	0.32
DHMP	0.20
Kaiser	0.04
RMHP	0.03
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.13
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.22
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.19
<i>Days per 1,000 Member Months (Maternity)—Total</i>	
COA	0.15
FHP	0.32
DHMP	0.20
Kaiser	0.04
RMHP	0.03
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.13
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.22
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.18

CHP+ Plan	Rate
<i>Average Length of Stay (Maternity)—Ages 10 to 19 Years</i>	
COA	2.69†
FHP	3.00†
DHMP	2.00†
Kaiser	2.00†
RMHP	2.00†
HEDIS MY 2020 Colorado CHP+ Weighted Average	2.55†
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.19
HEDIS MY 2018 Colorado CHP+ Weighted Average	2.49
<i>Average Length of Stay (Maternity)—Total</i>	
COA	2.69†
FHP	3.00†
DHMP	2.00†
Kaiser	2.00†
RMHP	2.00†
HEDIS MY 2020 Colorado CHP+ Weighted Average	2.55†
HEDIS MY 2019 Colorado CHP+ Weighted Average	3.19
HEDIS MY 2018 Colorado CHP+ Weighted Average	2.49
<i>Antibiotic Utilization*</i>	
<i>Average Scripts PMPY for Antibiotics—Ages 0 to 9 Years</i>	
COA	0.23
FHP	0.31
DHMP	0.13
Kaiser	0.17
RMHP	0.41
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.24
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.40
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.36
<i>Average Scripts PMPY for Antibiotics—Ages 10 to 17 Years</i>	
COA	0.19
FHP	0.23
DHMP	0.09
Kaiser	0.17
RMHP	0.40
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.21
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.27
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.27

CHP+ Plan	Rate
<i>Average Scripts PMPY for Antibiotics—Ages 18 to 34 Years</i>	
COA	0.33
FHP	0.21
DHMP	0.25
Kaiser	0.20
RMHP	0.62
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.33
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.39
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.37
<i>Average Scripts PMPY for Antibiotics—Total</i>	
COA	0.21
FHP	0.27
DHMP	0.12
Kaiser	0.17
RMHP	0.41
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.23
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.34
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.33
<i>Average Days Supplied per Antibiotic Script—Ages 0 to 9 Years</i>	
COA	9.98
FHP	8.72
DHMP	9.09
Kaiser	10.25
RMHP	9.71
HEDIS MY 2020 Colorado CHP+ Weighted Average	9.87
HEDIS MY 2019 Colorado CHP+ Weighted Average	13.69
HEDIS MY 2018 Colorado CHP+ Weighted Average	12.64
<i>Average Days Supplied per Antibiotic Script—Ages 10 to 17 Years</i>	
COA	13.34
FHP	10.50
DHMP	16.68
Kaiser	17.15
RMHP	11.83
HEDIS MY 2020 Colorado CHP+ Weighted Average	13.31
HEDIS MY 2019 Colorado CHP+ Weighted Average	17.11
HEDIS MY 2018 Colorado CHP+ Weighted Average	15.93

CHP+ Plan	Rate
<i>Average Days Supplied per Antibiotic Script—Ages 18 to 34 Years</i>	
COA	11.79
FHP	13.50
DHMP	12.29
Kaiser	17.30
RMHP	11.17
HEDIS MY 2020 Colorado CHP+ Weighted Average	12.27
HEDIS MY 2019 Colorado CHP+ Weighted Average	17.01
HEDIS MY 2018 Colorado CHP+ Weighted Average	15.71
<i>Average Days Supplied per Antibiotic Script—Total</i>	
COA	11.45
FHP	9.65
DHMP	12.43
Kaiser	14.16
RMHP	10.73
HEDIS MY 2020 Colorado CHP+ Weighted Average	11.47
HEDIS MY 2019 Colorado CHP+ Weighted Average	15.10
HEDIS MY 2018 Colorado CHP+ Weighted Average	16.86
<i>Average Scripts PMPY for Antibiotics of Concern—Ages 0 to 9 Years</i>	
COA	0.07
FHP	0.11
DHMP	0.04
Kaiser	0.05
RMHP	0.12
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.07
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.13
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.12
<i>Average Scripts PMPY for Antibiotics of Concern—Ages 10 to 17 Years</i>	
COA	0.06
FHP	0.10
DHMP	0.02
Kaiser	0.04
RMHP	0.12
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.06
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.09
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.09

CHP+ Plan	Rate
<i>Average Scripts PMPY for Antibiotics of Concern—Ages 18 to 34 Years</i>	
COA	0.10
FHP	0.09
DHMP	0.06
Kaiser	0.04
RMHP	0.18
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.10
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.13
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.13
<i>Average Scripts PMPY for Antibiotics of Concern—Total</i>	
COA	0.07
FHP	0.10
DHMP	0.03
Kaiser	0.04
RMHP	0.12
HEDIS MY 2020 Colorado CHP+ Weighted Average	0.07
HEDIS MY 2019 Colorado CHP+ Weighted Average	0.11
HEDIS MY 2018 Colorado CHP+ Weighted Average	0.11
<i>Percentage of Antibiotics of Concern of All Antibiotic Scripts—Ages 0 to 9 Years</i>	
COA	30.93%
FHP	33.94%
DHMP	27.73%
Kaiser	27.37%
RMHP	29.48%
HEDIS MY 2020 Colorado CHP+ Weighted Average	30.33%
HEDIS MY 2019 Colorado CHP+ Weighted Average	31.58%
HEDIS MY 2018 Colorado CHP+ Weighted Average	32.39%
<i>Percentage of Antibiotics of Concern of All Antibiotic Scripts—Ages 10 to 17 Years</i>	
COA	30.14%
FHP	45.12%
DHMP	23.04%
Kaiser	23.49%
RMHP	30.67%
HEDIS MY 2020 Colorado CHP+ Weighted Average	29.84%
HEDIS MY 2019 Colorado CHP+ Weighted Average	33.38%
HEDIS MY 2018 Colorado CHP+ Weighted Average	33.82%

CHP+ Plan	Rate
Percentage of Antibiotics of Concern of All Antibiotic Scripts—Ages 18 to 34 Years	
COA	31.52%
FHP	43.75%
DHMP	24.62%
Kaiser	21.71%
RMHP	29.15%
HEDIS MY 2020 Colorado CHP+ Weighted Average	29.80%
HEDIS MY 2019 Colorado CHP+ Weighted Average	33.46%
HEDIS MY 2018 Colorado CHP+ Weighted Average	34.12%
Percentage of Antibiotics of Concern of All Antibiotic Scripts—Total	
COA	30.66%
FHP	38.94%
DHMP	25.52%
Kaiser	25.00%
RMHP	29.98%
HEDIS MY 2020 Colorado CHP+ Weighted Average	30.09%
HEDIS MY 2019 Colorado CHP+ Weighted Average	32.33%
HEDIS MY 2018 Colorado CHP+ Weighted Average	31.91%

* For this indicator, a lower rate indicates better performance.

† Indicates that fewer than 30 discharges were reported for this measure indicator. Exercise caution when evaluating this rate.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

Bold font indicates Colorado CHP+ weighted average values.

Appendix B. Trend Tables

Appendix B includes trend tables for the MCOs and the Colorado CHP+ weighted averages. Where applicable, measure rates for HEDIS MY 2018, MY 2019, and MY 2020 are presented.

HEDIS MY 2019 to MY 2020 performance comparisons are based on the Chi-square test of statistical significance with a p value <0.05 . Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year. Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.

For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the IDSS files; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or worse performance. Rates are not risk adjusted; therefore, the percentile ranking should be interpreted with caution and may not accurately reflect better or worse performance.

COA Trend Table

Table B-1—COA Trend Table

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Pediatric Care</i>				
<i>Childhood Immunization Status</i>				
<i>DTap</i>	75.83%	78.13%	78.26%	50th–74th
<i>IPV</i>	86.44%	86.60%	87.97%	25th–49th
<i>MMR</i>	86.44%	88.37%	88.27%	25th–49th
<i>HiB</i>	87.03%	88.62%	87.46%	25th–49th
<i>Hepatitis B</i>	85.61%	84.58%	87.06%	25th–49th
<i>VZV</i>	84.32%	86.09%	86.55%	25th–49th
<i>Pneumococcal Conjugate</i>	78.07%	78.76%	80.89%	50th–74th
<i>Hepatitis A</i>	80.66%	83.44%	82.81%	25th–49th
<i>Rotavirus</i>	76.18%	74.46%	77.15%	75th–89th
<i>Influenza</i>	57.08%	63.08%	66.73%	≥90th
<i>Combination 2</i>	71.58%	72.06%	74.12%	50th–74th
<i>Combination 3</i>	69.58%	70.04%	72.50%	50th–74th
<i>Combination 4</i>	66.86%	68.02%	69.87%	50th–74th
<i>Combination 5</i>	63.21%	61.31%	67.24% ^	75th–89th
<i>Combination 6</i>	49.53%	53.22%	58.14% ^	≥90th
<i>Combination 7</i>	61.32%	59.92%	65.12% ^	75th–89th
<i>Combination 8</i>	48.23%	51.83%	56.32%	75th–89th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Combination 9</i>	45.64%	47.53%	55.11% [^]	≥90th
<i>Combination 10</i>	44.58%	46.78%	53.69% [^]	≥90th
Immunizations for Adolescents				
<i>Meningococcal</i>	78.09%	78.14%	77.81%	10th–24th
<i>Tdap</i>	87.54%	87.59%	87.87%	25th–49th
<i>HPV</i>	41.17%	44.04%	44.58%	50th–74th
<i>Combination 1 (Meningococcal, Tdap)</i>	76.30%	76.14%	76.97%	25th–49th
<i>Combination 2 (Meningococcal, Tdap, HPV)</i>	38.90%	40.19%	41.81%	50th–74th
Well-Child Visits in the First 30 Months of Life²				
<i>Well-Child Visits in the First 15 Months—Six or More Well-Child Visits</i>	—	—	54.92%	—
<i>Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits</i>	—	—	75.31%	—
Child and Adolescent Well-Care Visits²				
<i>Ages 3 to 11 Years</i>	—	—	53.14%	—
<i>Ages 12 to 17 Years</i>	—	—	42.81%	—
<i>Ages 18 to 21 Years</i>	—	—	28.16%	—
<i>Total</i>	—	—	47.69%	—
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents				
<i>BMI Percentile Documentation—Ages 3 to 11 Years¹</i>	7.47%	10.00%	13.69% [^]	<10th
<i>BMI Percentile Documentation—Ages 12 to 17 Years¹</i>	12.36%	14.69%	17.92% [^]	<10th
<i>BMI Percentile Documentation—Total¹</i>	9.27%	11.78%	15.33% [^]	<10th
<i>Counseling for Nutrition—Ages 3 to 11 Years</i>	4.39%	5.82%	10.14% [^]	<10th
<i>Counseling for Nutrition—Ages 12 to 17 Years</i>	6.35%	8.04%	11.49% [^]	<10th
<i>Counseling for Nutrition—Total</i>	5.11%	6.66%	10.66% [^]	<10th
<i>Counseling for Physical Activity—Ages 3 to 11 Years</i>	1.98%	3.21%	6.59% [^]	<10th
<i>Counseling for Physical Activity—Ages 12 to 17 Years</i>	5.13%	6.25%	9.25% [^]	<10th
<i>Counseling for Physical Activity—Total</i>	3.14%	4.36%	7.62% [^]	<10th
Preventive Screening				
Chlamydia Screening in Women				
<i>Ages 16 to 20 Years</i>	32.27%	34.07%	33.74%	<10th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Non-Recommended Cervical Cancer Screening in Adolescent Females*				
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females</i>	0.08%	0.00%	0.04%	≥90th
Mental/Behavioral Health				
Follow-Up Care for Children Prescribed ADHD Medication¹				
<i>Initiation Phase</i>	0.00%	0.00%	33.78% [^]	10th–24th
<i>Continuation and Maintenance Phase</i>	NA	NA	46.94%	25th–49th
Metabolic Monitoring for Children and Adolescents on Antipsychotics				
<i>Blood Glucose Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Ages 12 to 17 Years</i>	—	66.25%	40.82% ^{^^}	<10th
<i>Blood Glucose Testing—Total</i>	—	60.58%	40.80% ^{^^}	<10th
<i>Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 12 to 17 Years</i>	—	35.00%	18.37% ^{^^}	<10th
<i>Cholesterol Testing—Total</i>	—	33.65%	19.20% ^{^^}	<10th
<i>Blood Glucose and Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Ages 12 to 17 Years</i>	28.33%	32.50%	18.37% ^{^^}	<10th
<i>Blood Glucose and Cholesterol Testing—Total</i>	30.49%	30.77%	19.20% ^{^^}	<10th
Respiratory Conditions				
Appropriate Testing for Pharyngitis¹				
<i>Ages 3 to 17 Years</i>	—	85.48%	83.84%	50th–74th
<i>Ages 18 to 64 Years</i>	—	84.42%	79.73%	75th–89th
Appropriate Treatment for Upper Respiratory Infection				
<i>Ages 3 Months to 17 Years</i>	—	92.27%	92.12%	50th–74th
<i>Ages 18 to 64 Years</i>	—	89.96%	98.28% [^]	≥90th
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis				
<i>Ages 3 Months to 17 Years</i>	—	72.11%	70.30%	75th–89th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Asthma Medication Ratio				
<i>Ages 5 to 11 Years</i>	83.19%	87.60%	84.12%	≥90th
<i>Ages 12 to 18 Years</i>	75.79%	72.92%	72.80%	75th–89th
<i>Total</i>	79.91%	81.11%	79.39%	≥90th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Use of Services†				
Ambulatory Care				
ED Visits*	26.90	27.08	17.24	≥90th
Outpatient Visits	218.12	227.68	177.19	<10th
Inpatient Utilization—General Hospital/Acute Care				
Discharges per 1,000 Member Months (Total Inpatient)	1.03	1.02	0.73	<10th
Days per 1,000 Member Months (Total Inpatient)	3.55	3.47	2.42	<10th
Average Length of Stay (Total Inpatient)	3.43	3.40	3.30	<10th
Discharges per 1,000 Member Months (Medicine)	0.74	0.76	0.56	<10th
Days per 1,000 Member Months (Medicine)	2.19	2.14	1.83	<10th
Average Length of Stay (Medicine)	2.97	2.82	3.26	10th–24th
Discharges per 1,000 Member Months (Surgery)	0.25	0.23	0.15	<10th
Days per 1,000 Member Months (Surgery)	1.25	1.21	0.52	<10th
Average Length of Stay (Surgery)	4.90	5.36	3.54	<10th
Discharges per 1,000 Member Months (Maternity)	0.09	0.08	0.06	<10th
Days per 1,000 Member Months (Maternity)	0.23	0.27	0.15	<10th
Average Length of Stay (Maternity)	2.58†	3.43†	2.69†	<10th
Antibiotic Utilization*				
Average Scripts PMPY for Antibiotics	0.35	0.35	0.21	≥90th
Average Days Supplied per Antibiotic Script	10.87	10.70	11.45	<10th
Average Scripts PMPY for Antibiotics of Concern	0.12	0.12	0.07	≥90th
Percentage of Antibiotics of Concern of All Antibiotic Scripts	33.71%	33.07%	30.66%	≥90th

* For this indicator, a lower rate indicates better performance.

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed for this measure.

— Indicates that NCQA recommended a break in trending; therefore, prior years' rates are not displayed. This symbol may also indicate that the MCOs were not required to report this measure for HEDIS MY 2018 or HEDIS MY 2019.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

† For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the IDSS files; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or poorer performance. Rates are not risk adjusted; therefore, the percentile ranking should be interpreted with caution and may not accurately reflect high or low performance. This symbol may also indicate that fewer than 30 discharges were reported for this measure indicator. Exercise caution when evaluating this rate.

Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year.

Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.

DHMP Trend Table

Table B-2—DHMP Trend Table

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Pediatric Care				
Childhood Immunization Status				
<i>DTap</i>	69.84%	82.26%	81.94%	75th–89th
<i>IPV</i>	75.40%	96.77%	88.89%	25th–49th
<i>MMR</i>	78.57%	93.55%	86.11%	10th–24th
<i>HiB</i>	74.60%	95.16%	87.50%	25th–49th
<i>Hepatitis B</i>	73.81%	100.00%	94.44%	≥90th
<i>VZV</i>	78.57%	93.55%	86.11%	10th–24th
<i>Pneumococcal Conjugate</i>	69.05%	85.48%	83.33%	75th–89th
<i>Hepatitis A</i>	80.16%	93.55%	84.72%	25th–49th
<i>Rotavirus</i>	66.67%	87.10%	80.56%	≥90th
<i>Influenza</i>	53.17%	64.52%	66.67%	≥90th
<i>Combination 2</i>	67.46%	82.26%	81.94%	75th–89th
<i>Combination 3</i>	65.87%	82.26%	81.94%	≥90th
<i>Combination 4</i>	65.87%	82.26%	81.94%	≥90th
<i>Combination 5</i>	57.94%	79.03%	75.00%	≥90th
<i>Combination 6</i>	46.03%	59.68%	66.67%	≥90th
<i>Combination 7</i>	57.94%	79.03%	75.00%	≥90th
<i>Combination 8</i>	46.03%	59.68%	66.67%	≥90th
<i>Combination 9</i>	41.27%	58.06%	63.89%	≥90th
<i>Combination 10</i>	41.27%	58.06%	63.89%	≥90th
Immunizations for Adolescents				
<i>Meningococcal</i>	84.21%	91.14%	91.33%	75th–89th
<i>Tdap</i>	85.53%	87.34%	90.00%	50th–74th
<i>HPV</i>	57.24%	55.70%	55.33%	≥90th
<i>Combination 1 (Meningococcal, Tdap)</i>	82.24%	86.71%	88.00%	75th–89th
<i>Combination 2 (Meningococcal, Tdap, HPV)</i>	55.92%	53.80%	54.00%	≥90th
Well-Child Visits in the First 30 Months of Life²				
<i>Well-Child Visits in the First 15 Months—Six or More Well-Child Visits</i>	—	—	64.52%	—
<i>Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits</i>	—	—	66.18%	—
Child and Adolescent Well-Care Visits²				
<i>Ages 3 to 11 Years</i>	—	—	50.12%	—
<i>Ages 12 to 17 Years</i>	—	—	42.93%	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Ages 18 to 21 Years</i>	—	—	35.26%	—
<i>Total</i>	—	—	46.11%	—
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents				
<i>BMI Percentile Documentation—Ages 3 to 11 Years¹</i>	14.27%	18.23%	63.72% ^	10th–24th
<i>BMI Percentile Documentation—Ages 12 to 17 Years¹</i>	33.15%	31.02%	64.27% ^	10th–24th
<i>BMI Percentile Documentation—Total¹</i>	21.80%	23.81%	63.96% ^	10th–24th
<i>Counseling for Nutrition—Ages 3 to 11 Years</i>	2.14%	4.56%	72.30% ^	25th–49th
<i>Counseling for Nutrition—Ages 12 to 17 Years</i>	16.67%	13.17%	67.86% ^	25th–49th
<i>Counseling for Nutrition—Total</i>	7.93%	8.31%	70.36% ^	25th–49th
<i>Counseling for Physical Activity—Ages 3 to 11 Years</i>	1.66%	3.49%	71.64% ^	50th–74th
<i>Counseling for Physical Activity—Ages 12 to 17 Years</i>	14.16%	12.48%	67.69% ^	25th–49th
<i>Counseling for Physical Activity—Total</i>	6.65%	7.41%	69.92% ^	50th–74th
Preventive Screening				
Chlamydia Screening in Women				
<i>Ages 16 to 20 Years</i>	47.22%	47.89%	44.29%	10th–24th
Non-Recommended Cervical Cancer Screening in Adolescent Females*				
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females</i>	0.00%	0.00%	0.00%	≥90th
Mental/Behavioral Health				
Follow-Up Care for Children Prescribed ADHD Medication¹				
<i>Initiation Phase</i>	NA	NA	NA	—
<i>Continuation and Maintenance Phase</i>	NA	NA	NA	—
Metabolic Monitoring for Children and Adolescents on Antipsychotics				
<i>Blood Glucose Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Total</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Total</i>	—	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Blood Glucose and Cholesterol Testing—Ages 12 to 17 Years</i>	NA	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Total</i>	NA	NA	NA	—
Respiratory Conditions				
Appropriate Testing for Pharyngitis¹				
<i>Ages 3 to 17 Years</i>	—	90.58%	85.07%	50th–74th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Appropriate Treatment for Upper Respiratory Infection				
<i>Ages 3 Months to 17 Years</i>	—	97.88%	98.49%	≥90th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis				
<i>Ages 3 Months to 17 Years</i>	—	NA	NA	—
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Asthma Medication Ratio				
<i>Ages 5 to 11 Years</i>	NA	NA	NA	—
<i>Ages 12 to 18 Years</i>	NA	NA	NA	—
<i>Total</i>	NA	NA	NA	—
Use of Services[†]				
Ambulatory Care				
<i>ED Visits*</i>	21.49	22.57	13.67	≥90th
<i>Outpatient Visits</i>	135.56	158.85	127.95	<10th
Inpatient Utilization—General Hospital/Acute Care				
<i>Discharges per 1,000 Member Months (Total Inpatient)</i>	0.82	1.05	0.69	<10th
<i>Days per 1,000 Member Months (Total Inpatient)</i>	2.52	2.71	1.58	<10th
<i>Average Length of Stay (Total Inpatient)</i>	3.07	2.59	2.30	<10th
<i>Discharges per 1,000 Member Months (Medicine)</i>	0.60	0.79	0.50	<10th
<i>Days per 1,000 Member Months (Medicine)</i>	1.56	1.82	1.01	<10th
<i>Average Length of Stay (Medicine)</i>	2.59	2.30	2.00 [†]	<10th
<i>Discharges per 1,000 Member Months (Surgery)</i>	0.17	0.17	0.13	<10th
<i>Days per 1,000 Member Months (Surgery)</i>	0.87	0.67	0.47	<10th
<i>Average Length of Stay (Surgery)</i>	5.07 [†]	3.90 [†]	3.57 [†]	<10th
<i>Discharges per 1,000 Member Months (Maternity)</i>	0.09	0.16	0.10	<10th
<i>Days per 1,000 Member Months (Maternity)</i>	0.19	0.41	0.20	<10th
<i>Average Length of Stay (Maternity)</i>	2.00 [†]	2.60 [†]	2.00 [†]	<10th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Antibiotic Utilization*				
Average Scripts PMPY for Antibiotics	0.14	0.18	0.12	≥90th
Average Days Supplied per Antibiotic Script	11.28	10.88	12.43	<10th
Average Scripts PMPY for Antibiotics of Concern	0.03	0.04	0.03	≥90th
Percentage of Antibiotics of Concern of All Antibiotic Scripts	24.04%	23.74%	25.52%	≥90th

* For this indicator, a lower rate indicates better performance.

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed for this measure.

— Indicates that NCQA recommended a break in trending; therefore, prior years' rates are not displayed. This symbol may also indicate that the MCOs were not required to report this measure for HEDIS MY 2018 or HEDIS MY 2019.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

† For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the IDSS files; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or poorer performance. Rates are not risk adjusted; therefore, the percentile ranking should be interpreted with caution and may not accurately reflect high or low performance. This symbol may also indicate that fewer than 30 discharges were reported for this measure indicator. Exercise caution when evaluating this rate.

Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year.

Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.

FHP Trend Table

Table B-3—FHP Trend Table

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Pediatric Care				
Childhood Immunization Status				
<i>DTap</i>	7.14%	0.00%	NA	—
<i>IPV</i>	7.14%	0.00%	NA	—
<i>MMR</i>	40.48%	50.00%	NA	—
<i>HiB</i>	9.52%	6.67%	NA	—
<i>Hepatitis B</i>	7.14%	0.00%	NA	—
<i>VZV</i>	38.10%	40.00%	NA	—
<i>Pneumococcal Conjugate</i>	7.14%	0.00%	NA	—
<i>Hepatitis A</i>	52.38%	56.67%	NA	—
<i>Rotavirus</i>	4.76%	0.00%	NA	—
<i>Influenza</i>	11.90%	13.33%	NA	—
<i>Combination 2</i>	4.76%	0.00%	NA	—
<i>Combination 3</i>	4.76%	0.00%	NA	—
<i>Combination 4</i>	4.76%	0.00%	NA	—
<i>Combination 5</i>	4.76%	0.00%	NA	—
<i>Combination 6</i>	0.00%	0.00%	NA	—
<i>Combination 7</i>	4.76%	0.00%	NA	—
<i>Combination 8</i>	0.00%	0.00%	NA	—
<i>Combination 9</i>	0.00%	0.00%	NA	—
<i>Combination 10</i>	0.00%	0.00%	NA	—
Immunizations for Adolescents				
<i>Meningococcal</i>	31.58%	48.39%	43.40%	<10th
<i>Tdap</i>	56.14%	51.61%	62.26%	<10th
<i>HPV</i>	14.04%	14.52%	22.64%	<10th
<i>Combination 1 (Meningococcal, Tdap)</i>	26.32%	41.94%	43.40%	<10th
<i>Combination 2 (Meningococcal, Tdap, HPV)</i>	12.28%	8.06%	22.64% ^	<10th
Well-Child Visits in the First 30 Months of Life²				
<i>Well-Child Visits in the First 15 Months—Six or More Well-Child Visits</i>	—	—	NA	—
<i>Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits</i>	—	—	NA	—
Child and Adolescent Well-Care Visits²				
<i>Ages 3 to 11 Years</i>	—	—	36.91%	—
<i>Ages 12 to 17 Years</i>	—	—	32.50%	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Ages 18 to 21 Years</i>	—	—	7.14%	—
<i>Total</i>	—	—	32.50%	—
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents				
<i>BMI Percentile Documentation—Ages 3 to 11 Years¹</i>	12.15%	12.80%	8.36%	<10th
<i>BMI Percentile Documentation—Ages 12 to 17 Years¹</i>	6.28%	15.09%	3.09%^^	<10th
<i>BMI Percentile Documentation—Total¹</i>	9.70%	13.69%	6.18%^^	<10th
<i>Counseling for Nutrition—Ages 3 to 11 Years</i>	4.17%	3.20%	2.91%	<10th
<i>Counseling for Nutrition—Ages 12 to 17 Years</i>	5.31%	8.81%	2.06%^^	<10th
<i>Counseling for Nutrition—Total</i>	4.65%	5.38%	2.56%	<10th
<i>Counseling for Physical Activity—Ages 3 to 11 Years</i>	0.00%	0.00%	0.73%	<10th
<i>Counseling for Physical Activity—Ages 12 to 17 Years</i>	14.98%	5.03%	7.73%	<10th
<i>Counseling for Physical Activity—Total</i>	6.26%	1.96%	3.62%	<10th
Preventive Screening				
Chlamydia Screening in Women				
<i>Ages 16 to 20 Years</i>	NA	NA	NA	—
Non-Recommended Cervical Cancer Screening in Adolescent Females*				
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females</i>	0.00%	0.00%	0.00%	≥90th
Mental/Behavioral Health				
Follow-Up Care for Children Prescribed ADHD Medication¹				
<i>Initiation Phase</i>	NA	NA	NA	—
<i>Continuation and Maintenance Phase</i>	NA	NA	NA	—
Metabolic Monitoring for Children and Adolescents on Antipsychotics				
<i>Blood Glucose Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Total</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Total</i>	—	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Blood Glucose and Cholesterol Testing—Ages 12 to 17 Years</i>	NA	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Total</i>	NA	NA	NA	—
Respiratory Conditions				
Appropriate Testing for Pharyngitis¹				
<i>Ages 3 to 17 Years</i>	—	65.81%	77.66%	25th–49th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Appropriate Treatment for Upper Respiratory Infection				
<i>Ages 3 Months to 17 Years</i>	—	91.67%	93.96%	50th–74th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis				
<i>Ages 3 Months to 17 Years</i>	—	NA	NA	—
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Asthma Medication Ratio				
<i>Ages 5 to 11 Years</i>	NA	NA	NA	—
<i>Ages 12 to 18 Years</i>	NA	NA	NA	—
<i>Total</i>	NA	NA	NA	—
Use of Services[†]				
Ambulatory Care				
<i>ED Visits*</i>	17.33	20.17	12.71	≥90th
<i>Outpatient Visits</i>	166.81	190.96	141.10	<10th
Inpatient Utilization—General Hospital/Acute Care				
<i>Discharges per 1,000 Member Months (Total Inpatient)</i>	0.37	0.32	0.50	<10th
<i>Days per 1,000 Member Months (Total Inpatient)</i>	0.87	0.55	1.17	<10th
<i>Average Length of Stay (Total Inpatient)</i>	2.33 [†]	1.71 [†]	2.33 [†]	<10th
<i>Discharges per 1,000 Member Months (Medicine)</i>	0.21	0.23	0.17	<10th
<i>Days per 1,000 Member Months (Medicine)</i>	0.42	0.37	0.22	<10th
<i>Average Length of Stay (Medicine)</i>	2.00 [†]	1.60 [†]	1.33 [†]	<10th
<i>Discharges per 1,000 Member Months (Surgery)</i>	0.17	0.09	0.28	<10th
<i>Days per 1,000 Member Months (Surgery)</i>	0.25	0.18	0.78	<10th
<i>Average Length of Stay (Surgery)</i>	1.50 [†]	2.00 [†]	2.80 [†]	<10th
<i>Discharges per 1,000 Member Months (Maternity)</i>	0.00	0.00	0.11	<10th
<i>Days per 1,000 Member Months (Maternity)</i>	0.00	0.00	0.32	<10th
<i>Average Length of Stay (Maternity)</i>	NA	NA	3.00 [†]	<10th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Antibiotic Utilization*				
Average Scripts PMPY for Antibiotics	12.00	0.42	0.27	≥90th
Average Days Supplied per Antibiotic Script	99.95	102.83	9.65	25th–49th
Average Scripts PMPY for Antibiotics of Concern	2.32	0.15	0.10	≥90th
Percentage of Antibiotics of Concern of All Antibiotic Scripts	19.35%	35.97%	38.94%	50th–74th

* For this indicator, a lower rate indicates better performance.

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed for this measure.

— Indicates that NCQA recommended a break in trending; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed. This symbol may also indicate that the MCOs were not required to report this measure for HEDIS MY 2018 or HEDIS MY 2019.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

† For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the IDSS files; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or poorer performance. Rates are not risk adjusted; therefore, the percentile ranking should be interpreted with caution and may not accurately reflect high or low performance. This symbol may also indicate that fewer than 30 discharges were reported for this measure indicator. Exercise caution when evaluating this rate.

Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year.

Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.

Kaiser Trend Table

Table B-4—Kaiser Trend Table

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Pediatric Care				
Childhood Immunization Status				
<i>DTap</i>	71.13%	77.54%	71.25%	10th–24th
<i>IPV</i>	87.03%	90.91%	85.63%	10th–24th
<i>MMR</i>	81.17%	89.84%	86.25%	10th–24th
<i>HiB</i>	87.87%	90.37%	87.50%	25th–49th
<i>Hepatitis B</i>	88.70%	91.98%	85.00% ^^	10th–24th
<i>VZV</i>	81.59%	87.70%	84.38%	10th–24th
<i>Pneumococcal Conjugate</i>	77.82%	83.42%	80.63%	50th–74th
<i>Hepatitis A</i>	81.17%	87.70%	83.75%	25th–49th
<i>Rotavirus</i>	76.57%	81.28%	78.13%	75th–89th
<i>Influenza</i>	48.95%	67.38%	62.50%	75th–89th
<i>Combination 2</i>	69.46%	75.94%	68.13%	10th–24th
<i>Combination 3</i>	67.36%	74.33%	67.50%	25th–49th
<i>Combination 4</i>	66.95%	74.33%	67.50%	25th–49th
<i>Combination 5</i>	62.76%	69.52%	63.75%	50th–74th
<i>Combination 6</i>	41.84%	59.89%	52.50%	75th–89th
<i>Combination 7</i>	62.34%	69.52%	63.75%	50th–74th
<i>Combination 8</i>	41.84%	59.89%	52.50%	75th–89th
<i>Combination 9</i>	40.59%	56.15%	49.38%	75th–89th
<i>Combination 10</i>	40.59%	56.15%	49.38%	75th–89th
Immunizations for Adolescents				
<i>Meningococcal</i>	84.49%	85.00%	87.50%	50th–74th
<i>Tdap</i>	89.77%	88.33%	91.55%	75th–89th
<i>HPV</i>	58.42%	56.67%	61.15%	≥90th
<i>Combination 1 (Meningococcal, Tdap)</i>	82.84%	82.33%	85.81%	50th–74th
<i>Combination 2 (Meningococcal, Tdap, HPV)</i>	56.44%	53.67%	59.46%	≥90th
Well-Child Visits in the First 30 Months of Life²				
<i>Well-Child Visits in the First 15 Months—Six or More Well-Child Visits</i>	—	—	51.35%	—
<i>Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits</i>	—	—	61.18%	—
Child and Adolescent Well-Care Visits²				
<i>Ages 3 to 11 Years</i>	—	—	41.16%	—
<i>Ages 12 to 17 Years</i>	—	—	30.45%	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Ages 18 to 21 Years</i>	—	—	30.45%	—
<i>Total</i>	—	—	34.60%	—
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents				
<i>BMI Percentile Documentation—Ages 3 to 11 Years¹</i>	98.82%	98.14%	93.78%^^	≥90th
<i>BMI Percentile Documentation—Ages 12 to 17 Years¹</i>	98.18%	97.89%	93.14%^^	≥90th
<i>BMI Percentile Documentation—Total¹</i>	98.57%	98.04%	93.52%^^	≥90th
<i>Counseling for Nutrition—Ages 3 to 11 Years</i>	96.57%	95.41%	89.32%^^	≥90th
<i>Counseling for Nutrition—Ages 12 to 17 Years</i>	95.59%	94.76%	89.28%^^	≥90th
<i>Counseling for Nutrition—Total</i>	96.18%	95.14%	89.31%^^	≥90th
<i>Counseling for Physical Activity—Ages 3 to 11 Years</i>	96.57%	95.41%	89.32%^^	≥90th
<i>Counseling for Physical Activity—Ages 12 to 17 Years</i>	95.59%	94.76%	89.28%^^	≥90th
<i>Counseling for Physical Activity—Total</i>	96.18%	95.14%	89.31%^^	≥90th
Preventive Screening				
Chlamydia Screening in Women				
<i>Ages 16 to 20 Years</i>	45.51%	52.69%	45.83%	10th–24th
Non-Recommended Cervical Cancer Screening in Adolescent Females*				
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females</i>	0.00%	0.25%	0.00%	≥90th
Mental/Behavioral Health				
Follow-Up Care for Children Prescribed ADHD Medication¹				
<i>Initiation Phase</i>	45.16%	NA	NA	—
<i>Continuation and Maintenance Phase</i>	NA	NA	NA	—
Metabolic Monitoring for Children and Adolescents on Antipsychotics				
<i>Blood Glucose Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Total</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Total</i>	—	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Blood Glucose and Cholesterol Testing—Ages 12 to 17 Years</i>	NA	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Total</i>	NA	NA	NA	—
Respiratory Conditions				
Appropriate Testing for Pharyngitis¹				
<i>Ages 3 to 17 Years</i>	—	92.39%	89.70%	75th–89th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Appropriate Treatment for Upper Respiratory Infection				
<i>Ages 3 Months to 17 Years</i>	—	97.51%	97.75%	≥90th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis				
<i>Ages 3 Months to 17 Years</i>	—	93.33%	97.06%	≥90th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Asthma Medication Ratio				
<i>Ages 5 to 11 Years</i>	NA	NA	NA	—
<i>Ages 12 to 18 Years</i>	NA	NA	NA	—
<i>Total</i>	NA	81.08%	91.49%	≥90th
Use of Services[†]				
Ambulatory Care				
<i>ED Visits*</i>	18.86	21.93	14.61	≥90th
<i>Outpatient Visits</i>	133.57	158.31	108.70	<10th
Inpatient Utilization—General Hospital/Acute Care				
<i>Discharges per 1,000 Member Months (Total Inpatient)</i>	0.49	0.69	0.49	<10th
<i>Days per 1,000 Member Months (Total Inpatient)</i>	1.81	3.34	1.59	<10th
<i>Average Length of Stay (Total Inpatient)</i>	3.67	4.86	3.22	<10th
<i>Discharges per 1,000 Member Months (Medicine)</i>	0.40	0.46	0.34	<10th
<i>Days per 1,000 Member Months (Medicine)</i>	0.93	1.54	1.17	<10th
<i>Average Length of Stay (Medicine)</i>	2.29	3.35	3.45	10th–24th
<i>Discharges per 1,000 Member Months (Surgery)</i>	0.08	0.22	0.14	<10th
<i>Days per 1,000 Member Months (Surgery)</i>	0.86	1.77	0.39	<10th
<i>Average Length of Stay (Surgery)</i>	10.50 [†]	8.17 [†]	2.77 [†]	<10th
<i>Discharges per 1,000 Member Months (Maternity)</i>	0.01	0.02	0.02	<10th
<i>Days per 1,000 Member Months (Maternity)</i>	0.04	0.05	0.04	<10th
<i>Average Length of Stay (Maternity)</i>	3.00 [†]	3.00 [†]	2.00 [†]	<10th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Antibiotic Utilization*				
Average Scripts PMPY for Antibiotics	0.19	0.29	0.17	≥90th
Average Days Supplied per Antibiotic Script	12.47	11.52	14.16	<10th
Average Scripts PMPY for Antibiotics of Concern	0.05	0.08	0.04	≥90th
Percentage of Antibiotics of Concern of All Antibiotic Scripts	24.21%	27.59%	25.00%	≥90th

* For this indicator, a lower rate indicates better performance.

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed for this measure.

— Indicates that NCQA recommended a break in trending; therefore, prior years' rates are not displayed. This symbol may also indicate that the MCOs were not required to report this measure for HEDIS MY 2018 or HEDIS MY 2019.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

† For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the IDSS files; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or poorer performance. Rates are not risk adjusted; therefore, the percentile ranking should be interpreted with caution and may not accurately reflect high or low performance. This symbol may also indicate that fewer than 30 discharges were reported for this measure indicator. Exercise caution when evaluating this rate.

Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year.

Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.

RMHP Trend Table

Table B-5—RMHP Trend Table

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Pediatric Care				
Childhood Immunization Status				
<i>DTap</i>	68.14%	71.00%	64.76%	<10th
<i>IPV</i>	84.07%	85.00%	74.89% ^^	<10th
<i>MMR</i>	77.88%	58.50%	80.62% ^	<10th
<i>HiB</i>	76.99%	85.00%	74.89% ^^	<10th
<i>Hepatitis B</i>	79.65%	43.00%	75.33% ^	<10th
<i>VZV</i>	80.97%	86.00%	76.21% ^^	<10th
<i>Pneumococcal Conjugate</i>	74.34%	76.50%	69.16%	10th–24th
<i>Hepatitis A</i>	76.55%	83.50%	81.94%	10th–24th
<i>Rotavirus</i>	75.66%	74.00%	64.32% ^^	10th–24th
<i>Influenza</i>	54.42%	54.50%	55.07%	50th–74th
<i>Combination 2</i>	57.08%	21.00%	60.79% ^	<10th
<i>Combination 3</i>	57.08%	20.50%	59.47% ^	<10th
<i>Combination 4</i>	54.42%	20.50%	58.59% ^	<10th
<i>Combination 5</i>	54.87%	16.00%	54.63% ^	10th–24th
<i>Combination 6</i>	41.15%	12.00%	46.26% ^	50th–74th
<i>Combination 7</i>	52.21%	16.00%	53.74% ^	10th–24th
<i>Combination 8</i>	39.38%	12.00%	45.81% ^	50th–74th
<i>Combination 9</i>	39.82%	11.00%	42.29% ^	50th–74th
<i>Combination 10</i>	38.05%	11.00%	41.85% ^	50th–74th
Immunizations for Adolescents				
<i>Meningococcal</i>	60.67%	65.08%	67.37%	<10th
<i>Tdap</i>	84.67%	84.13%	82.34%	10th–24th
<i>HPV</i>	22.33%	23.49%	33.53% ^	10th–24th
<i>Combination 1 (Meningococcal, Tdap)</i>	57.67%	62.86%	63.47%	<10th
<i>Combination 2 (Meningococcal, Tdap, HPV)</i>	18.33%	20.32%	28.44% ^	10th–24th
Well-Child Visits in the First 30 Months of Life²				
<i>Well-Child Visits in the First 15 Months—Six or More Well-Child Visits</i>	—	—	22.69%	—
<i>Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits</i>	—	—	75.24%	—
Child and Adolescent Well-Care Visits²				
<i>Ages 3 to 11 Years</i>	—	—	54.59%	—
<i>Ages 12 to 17 Years</i>	—	—	45.15%	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Ages 18 to 21 Years</i>	—	—	32.37%	—
<i>Total</i>	—	—	45.15%	—
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents				
<i>BMI Percentile Documentation—Ages 3 to 11 Years¹</i>	3.38%	7.82%	13.59% [^]	<10th
<i>BMI Percentile Documentation—Ages 12 to 17 Years¹</i>	7.35%	9.69%	13.68% [^]	<10th
<i>BMI Percentile Documentation—Total¹</i>	4.83%	8.53%	13.63% [^]	<10th
<i>Counseling for Nutrition—Ages 3 to 11 Years</i>	23.76%	29.04%	26.94%	<10th
<i>Counseling for Nutrition—Ages 12 to 17 Years</i>	21.67%	26.85%	22.47% ^{^^}	<10th
<i>Counseling for Nutrition—Total</i>	23.00%	28.21%	25.20% ^{^^}	<10th
<i>Counseling for Physical Activity—Ages 3 to 11 Years</i>	4.96%	7.54%	6.51%	<10th
<i>Counseling for Physical Activity—Ages 12 to 17 Years</i>	6.43%	8.47%	6.53%	<10th
<i>Counseling for Physical Activity—Total</i>	5.50%	7.89%	6.52%	<10th
Preventive Screening				
Chlamydia Screening in Women				
<i>Ages 16 to 20 Years</i>	33.57%	30.67%	30.77%	<10th
Non-Recommended Cervical Cancer Screening in Adolescent Females*				
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females</i>	0.00%	0.00%	0.19%	75th–89th
Mental/Behavioral Health				
Follow-Up Care for Children Prescribed ADHD Medication¹				
<i>Initiation Phase</i>	53.33%	55.88%	51.22%	75th–89th
<i>Continuation and Maintenance Phase</i>	NA	NA	NA	—
Metabolic Monitoring for Children and Adolescents on Antipsychotics				
<i>Blood Glucose Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Blood Glucose Testing—Total</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Ages 12 to 17 Years</i>	—	NA	NA	—
<i>Cholesterol Testing—Total</i>	—	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Ages 1 to 11 Years</i>	—	NA	NA	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
<i>Blood Glucose and Cholesterol Testing—Ages 12 to 17 Years</i>	NA	NA	NA	—
<i>Blood Glucose and Cholesterol Testing—Total</i>	NA	NA	NA	—
Respiratory Conditions				
Appropriate Testing for Pharyngitis¹				
<i>Ages 3 to 17 Years</i>	—	77.29%	86.82% [^]	75th–89th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Appropriate Treatment for Upper Respiratory Infection				
<i>Ages 3 Months to 17 Years</i>	—	94.78%	95.86%	75th–89th
<i>Ages 18 to 64 Years</i>	—	NA	94.29%	≥90th
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis				
<i>Ages 3 Months to 17 Years</i>	—	69.66%	77.00%	75th–89th
<i>Ages 18 to 64 Years</i>	—	NA	NA	—
Asthma Medication Ratio				
<i>Ages 5 to 11 Years</i>	NA	NA	NA	—
<i>Ages 12 to 18 Years</i>	NA	NA	NA	—
<i>Total</i>	75.00%	81.25%	97.30% [^]	≥90th
Use of Services[†]				
Ambulatory Care				
<i>ED Visits*</i>	18.38	18.93	13.14	≥90th
<i>Outpatient Visits</i>	211.60	222.08	186.23	<10th
Inpatient Utilization—General Hospital/Acute Care				
<i>Discharges per 1,000 Member Months (Total Inpatient)</i>	0.75	0.68	0.62	<10th
<i>Days per 1,000 Member Months (Total Inpatient)</i>	3.26	2.50	1.75	<10th
<i>Average Length of Stay (Total Inpatient)</i>	4.37	3.67	2.84	<10th
<i>Discharges per 1,000 Member Months (Medicine)</i>	0.49	0.50	0.47	<10th
<i>Days per 1,000 Member Months (Medicine)</i>	1.61	1.50	1.32	<10th
<i>Average Length of Stay (Medicine)</i>	3.27	3.02	2.84	<10th
<i>Discharges per 1,000 Member Months (Surgery)</i>	0.21	0.17	0.14	<10th
<i>Days per 1,000 Member Months (Surgery)</i>	1.54	0.97	0.41	<10th
<i>Average Length of Stay (Surgery)</i>	7.46 [†]	5.76 [†]	2.88 [†]	<10th
<i>Discharges per 1,000 Member Months (Maternity)</i>	0.10	0.03	0.02	<10th
<i>Days per 1,000 Member Months (Maternity)</i>	0.23	0.07	0.03	<10th
<i>Average Length of Stay (Maternity)</i>	2.33 [†]	2.00 [†]	2.00 [†]	<10th

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Percentile Ranking
Antibiotic Utilization*				
Average Scripts PMPY for Antibiotics	0.39	0.41	0.41	≥90th
Average Days Supplied per Antibiotic Script	10.20	20.51	10.73	<10th
Average Scripts PMPY for Antibiotics of Concern	0.14	0.14	0.12	≥90th
Percentage of Antibiotics of Concern of All Antibiotic Scripts	35.98%	33.22%	29.98%	≥90th

* For this indicator, a lower rate indicates better performance.

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed for this measure.

— Indicates that NCQA recommended a break in trending; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed. This symbol may also indicate that the MCOs were not required to report this measure for HEDIS MY 2018 or HEDIS MY 2019.

NA (Small Denominator) indicates that the MCO followed the specifications, but the denominator was too small (<30) to report a valid rate.

† For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the IDSS files; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or poorer performance. Rates are not risk adjusted; therefore, the percentile ranking should be interpreted with caution and may not accurately reflect high or low performance. This symbol may also indicate that fewer than 30 discharges were reported for this measure indicator. Exercise caution when evaluating this rate.

Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year.

Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.



Colorado CHP+ Weighted Averages Trend Table

Given that the MCOs varied in membership size, the statewide average rate for each measure was weighted by each MCO’s eligible population for the measure. For the MCOs with rates reported as *Small Denominator (NA)*, the numerators, denominators, and eligible populations were included in the calculations of the statewide rate. MCO rates reported as *Biased Rate (BR)* or *Not Reported (NR)* were excluded from the statewide rate calculation. Of note, the Colorado CHP+ weighted averages are based on the CHP+ MCOs and the SMCN.

Table B-6—Colorado CHP+ Weighted Average Trend Table

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Plan Rate Range
Pediatric Care				
Childhood Immunization Status				
<i>DTap</i>	71.44%	75.28%	74.36%	64.76%–81.94%
<i>IPV</i>	82.98%	85.43%	84.33%	74.89%–88.89%
<i>MMR</i>	82.31%	83.23%	86.23% ^	80.62%–88.27%
<i>HiB</i>	82.38%	86.69%	84.19%	74.89%–87.50%
<i>Hepatitis B</i>	81.97%	77.87%	83.92% ^	75.33%–94.44%
<i>VZV</i>	81.57%	85.59%	84.12%	76.21%–86.55%
<i>Pneumococcal Conjugate</i>	74.68%	77.56%	77.88%	69.16%–83.33%
<i>Hepatitis A</i>	79.27%	83.94%	82.50%	81.94%–84.72%
<i>Rotavirus</i>	73.33%	74.25%	74.15%	64.32%–80.56%
<i>Influenza</i>	53.75%	61.26%	63.70%	55.07%–66.73%
<i>Combination 2</i>	66.78%	63.39%	70.56% ^	60.79%–81.94%
<i>Combination 3</i>	65.16%	61.81%	69.20% ^	59.47%–81.94%
<i>Combination 4</i>	63.13%	60.55%	67.30% ^	58.59%–81.94%
<i>Combination 5</i>	59.76%	54.80%	64.18% ^	54.63%–75.00%
<i>Combination 6</i>	45.31%	46.77%	55.09% ^	46.26%–66.67%
<i>Combination 7</i>	58.20%	53.94%	62.62% ^	53.74%–75.00%
<i>Combination 8</i>	44.29%	45.91%	53.80% ^	45.81%–66.67%
<i>Combination 9</i>	42.27%	42.44%	51.97% ^	42.29%–63.89%
<i>Combination 10</i>	41.39%	41.97%	50.95% ^	41.85%–63.89%
Immunizations for Adolescents				
<i>Meningococcal</i>	75.41%	77.26%	77.63%	43.40%–91.33%
<i>Tdap</i>	86.32%	86.08%	87.12%	62.26%–91.55%
<i>HPV</i>	41.42%	42.75%	45.28%	22.64%–61.15%
<i>Combination 1 (Meningococcal, Tdap)</i>	73.33%	74.81%	76.12%	43.40%–88.00%
<i>Combination 2 (Meningococcal, Tdap, HPV)</i>	39.02%	39.20%	42.47% ^	22.64%–59.46%

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Plan Rate Range
Well-Child Visits in the First 30 Months of Life²				
Well-Child Visits in the First 15 Months—Six or More Well-Child Visits	—	—	48.90%	22.69%–64.52%
Well-Child Visits for Age 15 Months–30 Months—Two or More Well-Child Visits	—	—	73.12%	61.18%–75.31%
Child and Adolescent Well-Care Visits²				
Ages 3 to 11 Years	—	—	51.62%	36.91%–54.59%
Ages 12 to 17 Years	—	—	41.50%	30.45%–45.15%
Ages 18 to 21 Years	—	—	29.64%	7.14%–35.26%
Total	—	—	45.23%	32.50%–47.69%
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents				
BMI Percentile Documentation—Ages 3 to 11 Years ¹	20.52%	20.60%	22.95%	8.36%–93.78%
BMI Percentile Documentation—Ages 12 to 17 Years ¹	26.36%	25.83%	26.36%	3.09%–93.14%
BMI Percentile Documentation—Total ¹	22.71%	22.62%	24.29%	6.18%–93.52%
Counseling for Nutrition—Ages 3 to 11 Years	20.41%	19.78%	22.48%	2.91%–89.32%
Counseling for Nutrition—Ages 12 to 17 Years	23.21%	22.37%	23.16%	2.06%–89.28%
Counseling for Nutrition—Total	21.46%	20.77%	22.75%	2.56%–89.31%
Counseling for Physical Activity—Ages 3 to 11 Years	15.93%	14.74%	16.79%	0.73%–89.32%
Counseling for Physical Activity—Ages 12 to 17 Years	20.34%	18.45%	19.28%	6.53%–89.28%
Counseling for Physical Activity—Total	17.58%	16.17%	17.76%	3.62%–89.31%
Access to Care				
Prenatal and Postpartum Care¹				
Timeliness of Prenatal Care	—	61.38%	58.45%	—
Postpartum Care	—	61.61%	53.32%	—
Preventive Screening				
Chlamydia Screening in Women				
Ages 16 to 20 Years	36.52%	37.26%	35.29%	30.77%–45.83%
Non-Recommended Cervical Cancer Screening in Adolescent Females*				
Non-Recommended Cervical Cancer Screening in Adolescent Females	0.04%	0.04%	0.05%	0.00%–0.19%
Mental/Behavioral Health				
Follow-Up Care for Children Prescribed ADHD Medication¹				
Initiation Phase	15.21%	14.98%	36.45% ^	33.78%–51.22%
Continuation and Maintenance Phase	20.00%	32.69%	50.85%	—

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Plan Rate Range
Metabolic Monitoring for Children and Adolescents on Antipsychotics				
Blood Glucose Testing—Ages 1 to 11 Years	—	40.54%	40.63%	—
Blood Glucose Testing—Ages 12 to 17 Years	—	66.09%	45.38% ^^	—
Blood Glucose Testing—Total	—	59.87%	44.44% ^^	—
Cholesterol Testing—Ages 1 to 11 Years	—	29.73%	25.00%	—
Cholesterol Testing—Ages 12 to 17 Years	—	42.61%	25.38% ^^	—
Cholesterol Testing—Total	—	39.47%	25.31% ^^	—
Blood Glucose and Cholesterol Testing—Ages 1 to 11 Years	—	27.03%	25.00%	—
Blood Glucose and Cholesterol Testing—Ages 12 to 17 Years	38.89%	40.00%	25.38% ^^	—
Blood Glucose and Cholesterol Testing—Total	38.98%	36.84%	25.31% ^^	—
Respiratory Conditions				
Appropriate Testing for Pharyngitis¹				
Ages 3 to 17 Years	—	84.20%	84.56%	77.66%–89.70%
Ages 18 to 64 Years	—	81.45%	75.63%	—
Appropriate Treatment for Upper Respiratory Infection				
Ages 3 Months to 17 Years	—	93.30%	93.36%	92.12%–98.49%
Ages 18 to 64 Years	—	90.46%	97.60% ^	94.29%–98.28%
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis				
Ages 3 Months to 17 Years	—	72.63%	72.27%	70.30%–97.06%
Ages 18 to 64 Years	—	NA	NA	—
Asthma Medication Ratio				
Ages 5 to 11 Years	82.63%	88.44%	84.04%	—
Ages 12 to 18 Years	71.32%	70.21%	77.96%	—
Total	77.63%	80.25%	81.25%	79.39%–97.30%
Use of Services †				
Ambulatory Care				
ED Visits*	23.83	24.91	16.07	12.71–17.24
Outpatient Visits	195.91	213.53	167.24	108.70–186.23
Inpatient Utilization—General Hospital/Acute Care				
Discharges per 1,000 Member Months (Total Inpatient)	0.88	0.92	0.68	0.49–0.73
Days per 1,000 Member Months (Total Inpatient)	3.09	3.21	2.16	1.17–2.42
Average Length of Stay (Total Inpatient)	3.51	3.48	3.15	2.33–3.30
Discharges per 1,000 Member Months (Medicine)	0.63	0.68	0.51	0.17–0.56
Days per 1,000 Member Months (Medicine)	1.82	1.92	1.60	0.22–1.83

Performance Measures	HEDIS MY 2018 Rate	HEDIS MY 2019 Rate	HEDIS MY 2020 Rate	Plan Rate Range
<i>Average Length of Stay (Medicine)</i>	2.89	2.83	3.13	2.00–3.45
<i>Discharges per 1,000 Member Months (Surgery)</i>	0.21	0.21	0.15	0.13–0.28
<i>Days per 1,000 Member Months (Surgery)</i>	1.17	1.18	0.49	0.39–0.78
<i>Average Length of Stay (Surgery)</i>	5.50	5.63	3.34	2.77–3.57
<i>Discharges per 1,000 Member Months (Maternity)</i>	0.07	0.07	0.05	0.02–0.11
<i>Days per 1,000 Member Months (Maternity)</i>	0.18	0.22	0.13	0.03–0.32
<i>Average Length of Stay (Maternity)</i>	2.49	3.19	2.55†	2.00–3.00
Antibiotic Utilization*				
<i>Average Scripts PMPY for Antibiotics</i>	0.33	0.34	0.23	0.12–0.41
<i>Average Days Supplied per Antibiotic Script</i>	16.86	15.10	11.47	9.65–14.16
<i>Average Scripts PMPY for Antibiotics of Concern</i>	0.11	0.11	0.07	0.03–0.12
<i>Percentage of Antibiotics of Concern of All Antibiotic Scripts</i>	31.91%	32.33%	30.09%	25.00%–38.94%

* For this indicator, a lower rate indicates better performance.

¹ Due to changes in the technical specifications for this measure, NCQA recommends that trending between MY 2020 and prior years be considered with caution.

² Due to changes in the technical specifications for this measure, NCQA recommends a break in trending between MY 2020 and prior years; therefore, prior years' rates are not displayed and comparisons to benchmarks are not performed for this measure.

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NA (Small Denominator) indicates that the MCOs followed the specifications, but the denominator was too small (<30) to report a valid rate.

† For measures in the Use of Services domain, statistical tests across years were not performed because variances were not provided in the IDSS files; differences in rates were reported without statistical test results. In addition, higher or lower rates did not necessarily denote better or poorer performance. Rates are not risk adjusted; therefore, the percentile ranking should be interpreted with caution and may not accurately reflect high or low performance. This symbol may also indicate that fewer than 30 discharges were reported for this measure indicator. Exercise caution when evaluating this rate.

Rates shaded green with one caret (^) indicate a statistically significant improvement in performance from the previous year.

Rates shaded red with two carets (^) indicate a statistically significant decline in performance from the previous year.

Appendix C. Information System Findings

Information System Findings

NCQA's Information System (IS) standards are the guidelines used by NCQA-certified HEDIS compliance auditors to assess the MCOs' HEDIS reporting capabilities.^{C-1} HSAG evaluated each MCO on six IS standards. To assess the MCOs' adherence to standards, HSAG reviewed several documents for the CHP+ MCOs, which included the Final Audit Reports (FARs) (generated by an NCQA-licensed audit organization [LO]), IDSS files, and audit review tables. The findings indicated that all MCOs were fully compliant with all of NCQA's IS standards. For the MCOs that were compliant, no issues were identified that resulted in material bias to the HEDIS measure results reported for the CHP+ population. These MCOs accurately reported all Department-required HEDIS performance measures.

As in last year, all the MCOs except Kaiser contracted with a software vendor to produce the reported HEDIS measure rates. The vendors submitted programming code developed for each HEDIS measure to NCQA for the measure certification process. Through certification, NCQA tested that the software produced valid results and that calculations met NCQA standards. Kaiser's certified HEDIS auditor selected a core set of measures for source code review. The selected source codes were reviewed and approved for measure reporting.

Each Colorado CHP+ MCO contracted with a licensed HEDIS audit organization to perform the NCQA HEDIS Compliance Audit. The SMCN program did not undergo an NCQA HEDIS Compliance Audit. The following table presents NCQA's IS standards and summarizes the audit findings related to each IS standard for the CHP+ MCOs only.

^{C-1} National Committee for Quality Assurance. *HEDIS Compliance Audit Standards, Policies and Procedures, Volume 5*. Washington D.C.

Table C-1—Summary of Compliance With IS Standards

NCQA’s IS Standards	HSAG’s Findings Based on HEDIS MY 2020 FAR Review
<p>IS 1.0—Medical Service Data—Sound Coding Methods and Data Capture, Transfer, and Entry</p> <ul style="list-style-type: none"> • Industry standard codes are required and captured. • Primary and secondary diagnosis codes are identified. • Nonstandard codes (if used) are mapped to industry standard codes. • Standard submission forms are used. • Timely and accurate data entry processes and sufficient edit checks are used. • Data completeness is continually assessed, and all contracted vendors involved in medical claims processing are monitored. 	<p>All MCOs were fully compliant with IS Standard 1.0 for medical services data capture and processing. No issues or concerns were noted for this standard relevant to the selected Colorado CHP+ measures.</p> <p>The MCOs only accepted industry standard codes on industry standard forms.</p> <p>All data elements required for HEDIS reporting were adequately captured.</p>
<p>IS 2.0—Enrollment Data—Data Capture, Transfer, and Entry</p> <ul style="list-style-type: none"> • All HEDIS-relevant information for data entry or electronic transmissions of enrollment data is accurate and complete. • Manual entry of enrollment data is timely and accurate, and sufficient edit checks are in place. • The MCOs continually assess data completeness and take steps to improve performance. • The MCOs effectively monitor the quality and accuracy of electronic submissions. • The MCOs have effective control processes for the transmission of enrollment data. 	<p>All MCOs were fully compliant with IS Standard 2.0 for enrollment data capture and processing. No issues or concerns were noted for this standard relevant to the selected Colorado CHP+ measures.</p> <p>The MCOs had policies and procedures in place for submitted electronic data. Data elements required for reporting were captured. Adequate validation processes were in place, ensuring data accuracy.</p>
<p>IS 3.0—Practitioner Data—Data Capture, Transfer, and Entry</p> <ul style="list-style-type: none"> • Provider specialties are fully documented and mapped to HEDIS provider specialties. • Effective procedures for submitting HEDIS-relevant information are in place. • Electronic transmissions of practitioner data are checked to ensure accuracy. • Processes and edit checks ensure accurate and timely entry of data into the transaction files. • Data completeness is assessed, and steps are taken to improve performance. • Vendors are regularly monitored against expected performance standards. 	<p>All MCOs were fully compliant with IS Standard 3.0 for practitioner data capture and processing. No issues or concerns were noted for this standard relevant to the selected Colorado CHP+ measures.</p> <p>The MCOs appropriately captured and documented practitioner data. Data validation processes were in place to verify practitioner data.</p> <p>In addition, for accuracy and completeness, all MCOs reviewed all provider data received from delegated entities.</p>

NCQA's IS Standards	HSAG's Findings Based on HEDIS MY 2020 FAR Review
<p>IS 4.0—Medical Record Review Processes—Training, Sampling, Abstraction, and Oversight</p> <ul style="list-style-type: none"> Forms or tools used for medical record review capture all fields relevant to HEDIS reporting. Checking procedures are in place to ensure data integrity for electronic transmission of information. Retrieval and abstraction of data from medical records are accurately performed. Data entry processes, including edit checks, are timely and accurate. Data completeness is assessed, including steps to improve performance. Vendor performance is monitored against expected performance standards. 	<p>All MCOs were fully compliant with IS Standard 4.0 for medical record review processes. No issues or concerns were noted for this standard relevant to the selected Colorado CHP+ measures. However, HSAG did not review this step since the State requires administrative rates only.</p> <p>The data collection tools used by the MCOs were able to capture all data fields necessary for HEDIS reporting. Sufficient validation processes were in place to ensure data accuracy. However, HSAG did not review this step since the State requires administrative rates only.</p>
<p>IS 5.0—Supplemental Data—Capture, Transfer, and Entry</p> <ul style="list-style-type: none"> Nonstandard coding schemes are fully documented and mapped to industry standard codes. Effective procedures for submitting HEDIS-relevant information are in place. Electronic transmissions of supplemental data are checked to ensure accuracy. Data entry processes, including edit checks, are timely and accurate. Data completeness is assessed, including steps to improve performance. Vendor performance is monitored against expected performance standards. Data approved for electronic clinical data system (ECDS) reporting met reporting requirements. NCQA-certified eCOM (electronic clinical quality measure) data met reporting requirements. 	<p>All MCOs were fully compliant with IS Standard 5.0 for supplemental data capture and processing. No issues or concerns were noted for this standard relevant to the selected Colorado CHP+ measures. Two MCOs reported using only standard supplemental databases for reporting. The other three MCOs reported using both standard and nonstandard supplemental databases for reporting.</p> <p>The HEDIS repository contained all data fields required for HEDIS reporting. In addition, staff members were interviewed to confirm the appropriate quality processes for the data source and to determine if primary source verification (PSV) was needed on all supplemental data that were in nonstandard form.</p>

NCQA's IS Standards	HSAG's Findings Based on HEDIS MY 2020 FAR Review
<p>IS 6.0 Data Preproduction Processing—Transfer, Consolidation, Control Procedures That Support Measure Reporting Integrity</p> <ul style="list-style-type: none"> • Nonstandard coding schemes are fully documented and mapped to industry standard codes. Organization-to-vendor mapping is fully documented. • Data transfers to HEDIS repository from transaction files are accurate and file consolidations, extracts, and derivations are accurate. • Repository structure and formatting is suitable for measures and enable required programming efforts. • Report production is managed effectively and operators perform appropriately. • Vendor performance is monitored against expected performance standards. 	<p>All MCOs were fully compliant with IS Standard 6.0 for data preproduction processing.</p> <p>File consolidation and data extractions were performed by the MCOs' staff members. Data were verified for accuracy at each data merge point.</p>
<p>IS 7.0—Data Integration and Reporting—Accurate Reporting, Control Procedures That Support HEDIS Reporting Integrity</p> <ul style="list-style-type: none"> • Data transfers to the HEDIS repository from transaction files are accurate. • Report production is managed effectively and operators perform appropriately. • HEDIS reporting software is managed properly. • The organization regularly monitors vendor performance against expected performance standards. 	<p>All the MCOs were fully compliant with IS Standard 7.0 for data integration. No issues or concerns were noted for this standard relevant to the selected Colorado CHP+ measures.</p> <p>The MCOs used an NCQA-certified measure vendor for data production and rate calculation.</p>