2017 New Hampshire Medicaid Care Management Health Outcomes and Consumer Experience of Care Data

2017 Healthcare Effectiveness Data and Information Set (HEDIS) New Hampshire Managed Care Organizations Prevention Chart Book

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The Department of Health and Human Services' Mission is to join communities and families in providing opportunities for citizens to achieve health and independence

2017 HEDIS NH MCO Prevention Chart Book

MEASURES

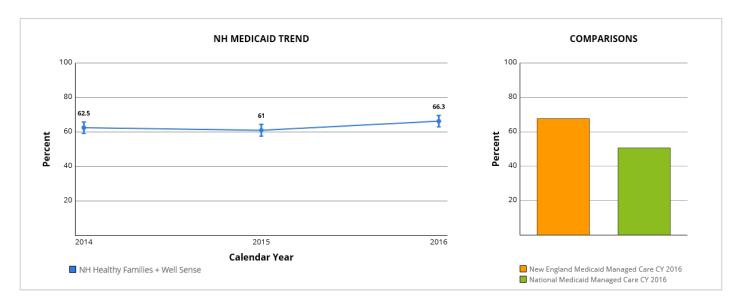
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- Adults' Access to Preventive/Ambulatory Health Services (AAP): B: Age 45-64 Years
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 Years
- Asthma Medication Ratio (AMR): A. Age 5 to 11 Years
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- Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): C. Age 12-17 Years

Adolescent Well-Care Visits (AWC, Hybrid Specification)

HEDIS® Measurement Definition: The percentage of enrolled members 12–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.

Measure Identifier: HEDIS_AWC.H



Data

Adolescent Well-Care Visits (AWC, Hybrid Specification)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 509 | 816 | 62.5% | 59.2 - 65.8 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 492 | 808 | 61.0% | 57.6 - 64.4 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 530 | 800 | 66.3% | 63.0 - 69.6 |

Measure Details

Measure Name: Adolescent Well-Care Visits (AWC, Hybrid Specification)

Measure Identifier: HEDIS AWC.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

This measure captures the percent of adolescents 12-21 years of age who had at least one comprehensive well-care visit with a Primary Care Physician or an Obstetrician/Gynecologist within the past year. The American Academy of Pediatrics (AAP) recommends that adolescents have at least one comprehensive well-care visit per year to assess growth and development, provide preventive services and education, and to identify areas of concern in a timely manner. A low or falling rate indicates that adolescents are not being evaluated in a timely manner which may lead to delays in follow-up or treatment and may lead to poorer health outcomes. The measure is calculated based on the number of adolescents 12-21 years of age who received one or more comprehensive well-care visits during the measurement year, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures, Well Care - Children

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

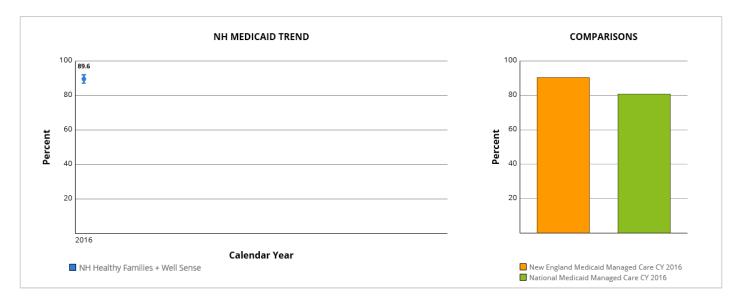
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

Adult BMI Assessment (ABA, Administrative Specification)

HEDIS® Measurement Definition: The percentage of members 18–74 years of age who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Measure Identifier: HEDIS_ABA.A



Data

Adult BMI Assessment (ABA, Administrative Specification)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 560 | 625 | 89.6% | 87.2 - 92.0 |

Measure Details

Measure Name: Adult BMI Assessment (ABA, Administrative Specification)

Measure Identifier: HEDIS ABA.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 18-74 years of age who had a Body Mass Index (BMI) assessment during the past two years. BMI is usually a good indicator of body fatness in a person. A high BMI may place a person a greater risk for many health problems including heart disease, hypertension (high blood pressure), stroke, type 2 diabetes, certain types of cancer, gall bladder disease, certain

musculoskeletal (bones, muscles, ligaments, etc.) disorders, and death. A low or falling rate indicates that adults are not having a BMI assessment during the past two years, which may lead to undiagnosed overweightness and places them at risk for weight-related health problems. This measure is reported as the number of adults 18-74 years of age that had a BMI assessment within the past two years, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2015, CY 2016
- Comments:

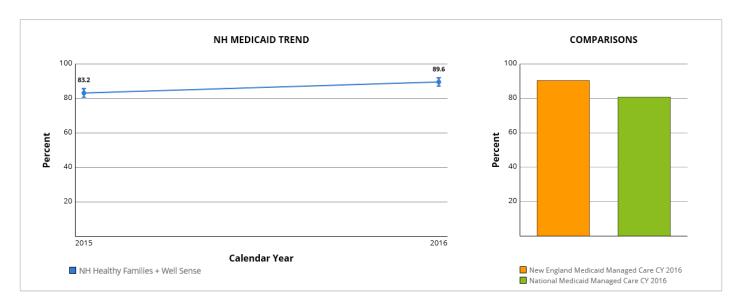
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2014, CY 2015, CY 2016
- · Comments:

Adult BMI Assessment (ABA, Hybrid Specification)

HEDIS® Measurement Definition: The percentage of members 18–74 years of age who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

Measure Identifier: HEDIS_ABA.H



Data

Adult BMI Assessment (ABA, Hybrid Specification)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 698 | 839 | 83.2% | 80.7 - 85.7 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 560 | 625 | 89.6% | 87.2 - 92.0 |

Measure Details

Measure Name: Adult BMI Assessment (ABA, Hybrid Specification)

Measure Identifier: HEDIS_ABA.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of adults 18-74 years of age who had a Body Mass Index (BMI)

assessment during the past two years. BMI is usually a good indicator of body fatness in a person A high BMI may place a person a greater risk for many health problems including heart disease, hypertension (high blood pressure), stroke, type 2 diabetes, certain types of cancer, gall bladder disease, certain musculoskeletal (bones, muscles, ligaments, etc.) disorders, and death. A low or falling rate indicates that adults are not having a BMI assessment during the past two years, which may lead to undiagnosed overweightness and places them at risk for weight-related health problems. This measure is reported as the number of adults 18-74 years of age that had a BMI assessment within the past two years, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2015, CY 2016

· Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

Years: CY 2015, CY 2016

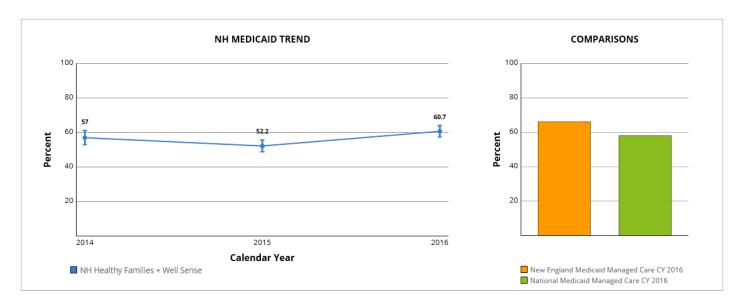
· Comments:

Cervical Cancer Screening (CCS, Hybrid Specification)

HEDIS® Measurement Definition: The percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria:

- Women age 21-64 who had cervical cytology performed every 3 years.
- Women age 30–64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years.

Measure Identifier: HEDIS CCS.H



Data

Cervical Cancer Screening (CCS, Hybrid Specification)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 438 | 795 | 57.0% | 52.9 - 61.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 443 | 849 | 52.2% | 48.8 - 55.6 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 504 | 830 | 60.7% | 57.4 - 64.0 |

Measure Details

Measure Name: Cervical Cancer Screening (CCS, Hybrid Specification)

Measure Identifier: HEDIS CCS.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of women 24-64 years of age who were screened for cervical cancer. The United States Preventative Task Force (USPSTF) recommends that women 24-29 have cervical cytology every 3 years and women 30-64 have cervical cytology every 3 years or cervical cytology and human papillomavirus (HPV) co-testing every 5 years. A low or falling rate may indicate that women are not receiving routine screening which may lead to undiagnosed cervical cancer and an increase in adverse outcomes associated with cervical cancer. This measure is reported as the number of women 24-29 who had cervical cytology in the past 3 years and for women 30-64 cervical cytology in the past 3 years or cervical cytology/HPV co-testing in the past 5 years, divided by the total eligible population, as a percentage.

Topics: Screenings - Adults, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

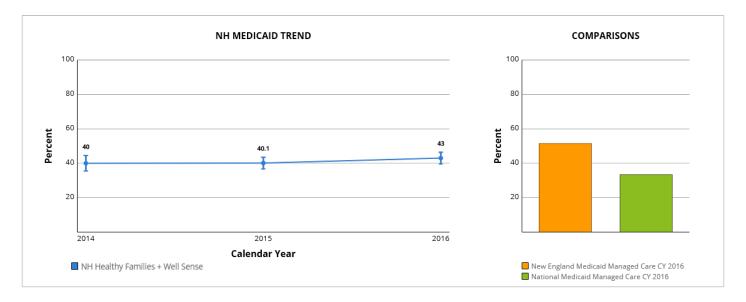
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): Combination 10

HEDIS® Measurement Definition: The percentage of children 2 years of age who had Combination 10 vaccines by their second birthday. Combination 10 includes DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA, RV and Influenza vaccinations.

Measure Identifier: HEDIS_CIS.19.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): Combination 10

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 199 | 497 | 40.0% | 35.5 - 44.5 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 330 | 834 | 40.1% | 36.7 - 43.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 362 | 831 | 43.0% | 39.6 - 46.4 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): Combination 10

Measure Identifier: HEDIS_CIS.19.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of young children who received all routinely recommended vaccines by the Centers for Disease Control and Prevention (CDC) for young children by two years of age. According to the Centers of Disease Control and Prevention (CDC) vaccines are the single most important way parents can protect their children from serious diseases. A low or falling rate may indicate that children have received less than the recommended number of doses of each vaccine may not be fully protected. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least four diphtheria, tetanus, and acellular pertussis (DTaP); three inactive polio (IPV); one measles, mumps, and rubella (MMR); three haemophilus influenza type B (HIB); three hepatitis B (HepB); one Varicella (VZV); four pneumococcal conjugate vaccine (PCV); one hepatitis A (HepA); two doses of the two-dose or three doses of the three-dose rotavirus (RV) vaccine series; and two influenza vaccine divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2015, CY 2016
- Comments:

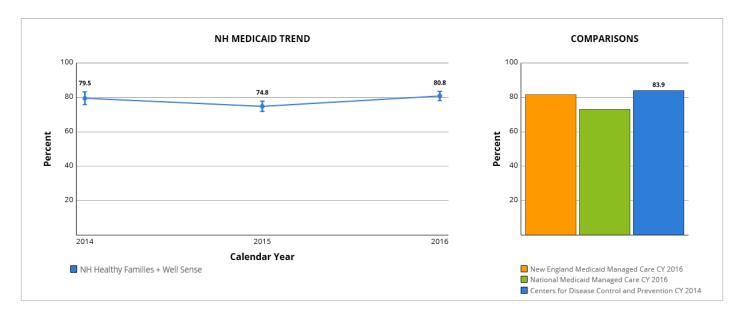
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2014, CY 2015, CY 2016
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): Combination 2

HEDIS® Measurement Definition: The percentage of children 2 years of age who had Combination 2 vaccines by their second birthday. Combination 2 includes DTaP, IPV, MMR, HiB, HepB and VZV vaccinations.

Measure Identifier: HEDIS_CIS.11.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): Combination 2

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 395 | 497 | 79.5% | 75.8 - 83.2 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 619 | 834 | 74.8% | 71.8 - 77.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 673 | 831 | 80.8% | 78.1 - 83.5 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): Combination 2

Measure Identifier: HEDIS CIS.11.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of young children who received vaccination combination #2. This combination includes all vaccines required by NH Child Care Licensing for children who attend child care. NH utilizes a 4-dose Hib vaccine product so each dose of single antigen Hib should be reviewed in addition to vaccine combination #2 to determine if each member meets the child care licensing requirements for immunizations. According to the Centers of Disease Control and Prevention (CDC) vaccines are the single most important way parents can protect their children from serious diseases. A low or falling rate may indicate that children have received less than the recommended number of doses of each vaccine and may not be fully protected. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least four diphtheria, tetanus, and acellular pertussis (DTaP); three inactive polio (IPV); one measles, mumps, and rubella (MMR); three haemophilus influenza type B (HIB); three hepatitis B (HepB); and one varicella (VZV) divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

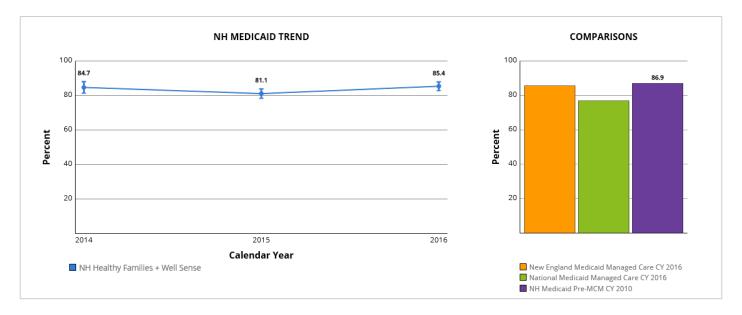
Centers for Disease Control and Prevention

- Data Sources: Centers for Disease Control and Prevention NH Survey
- Years: CY 2010, CY 2014
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): DTaP

HEDIS® Measurement Definition: The percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP) vaccines by their second birthday.

Measure Identifier: HEDIS_CIS.01.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): DTaP

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 421 | 497 | 84.7% | 81.4 - 88.0 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 668 | 834 | 81.1% | 78.4 - 83.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 711 | 831 | 85.4% | 82.9 - 87.9 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): DTaP

Measure Identifier: HEDIS_CIS.01.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

This measure captures the percent of young children who received at least four doses of diphtheria, tetanus, and acellular pertussis (DTaP) vaccine on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive four doses of DTaP vaccine prior to 2 years of age to protect against Diphtheria, Tetanus, and Pertussis diseases. A booster dose is recommended between 4–6 years of age. A low or falling rate may indicate that children have received less than the recommended number of doses of each vaccine may not be fully protected against Diphtheria, Tetanus, and Pertussis diseases. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least four doses of DTaP vaccine on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

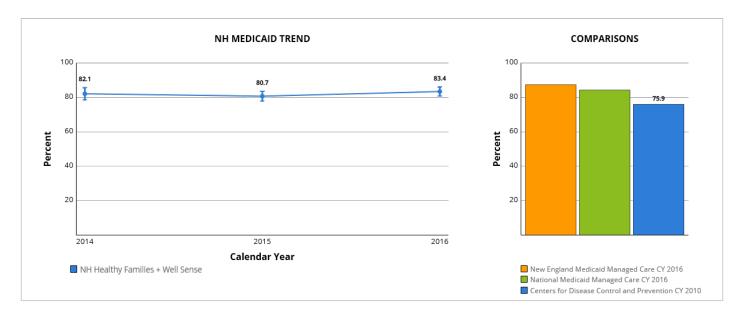
NH Medicaid Pre-MCM

- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2010
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis A

HEDIS® Measurement Definition: The percentage of children 2 years of age who had one hepatitis A (HepA) vaccine by their second birthday.

Measure Identifier: HEDIS_CIS.08.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis A

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 408 | 497 | 82.1% | 78.6 - 85.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 674 | 834 | 80.7% | 77.9 - 83.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 696 | 831 | 83.4% | 80.8 - 86.0 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis A

Measure Identifier: HEDIS_CIS.08.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of young children who received at least one hepatitis A (HepA) vaccine or have documented history of disease on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive 2 doses of HepA vaccine to protect against hepatitis A disease. The first dose is administered between 12–23 months of age. The second dose (booster) is administered 6–18 months after the first dose and provides long term protection. A low or falling rate may indicate that children have not received their first dose of vaccine and are not protected against hepatitis A disease. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least one dose of HepA vaccine or have documented history of disease on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

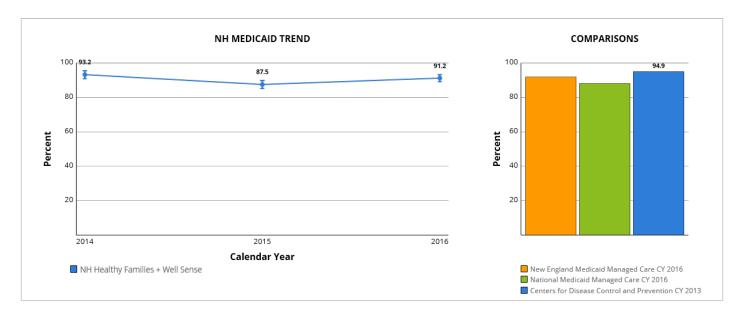
Centers for Disease Control and Prevention

- Data Sources: Centers for Disease Control and Prevention NH Survey
- Years: CY 2010
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis B

HEDIS® Measurement Definition: The percentage of children 2 years of age who had three hepatitis B (HepB) vaccines by their second birthday.

Measure Identifier: HEDIS_CIS.05.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis B

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 463 | 497 | 93.2% | 90.9 - 95.5 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 726 | 834 | 87.5% | 85.2 - 89.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 759 | 831 | 91.2% | 89.2 - 93.2 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis B

Measure Identifier: HEDIS_CIS.05.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of young children who received at least three doses of hepatitis B (HepB) vaccine or have documented history of disease on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive 3 doses of HepB vaccine to protect against hepatitis B disease. A low or falling rate may indicate that children have received less than the recommended number of doses of vaccine and may not be fully protected against hepatitis B disease. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least three doses of HepB vaccine or have documented history of disease on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

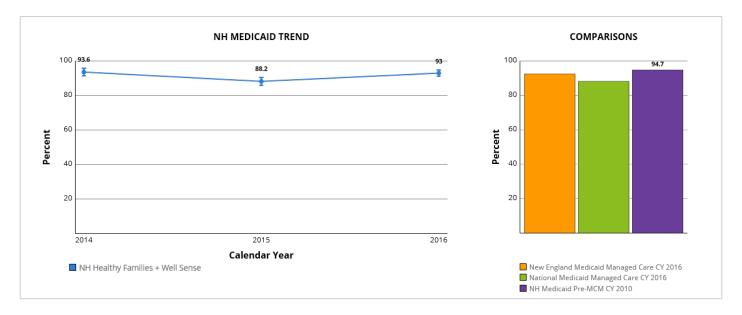
Centers for Disease Control and Prevention

- Data Sources: Centers for Disease Control and Prevention NH Survey
- Years: CY 2013
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): HiB

HEDIS® Measurement Definition: The percentage of children 2 years of age who had three haemophilus influenza type B (HiB) vaccines by their second birthday.

Measure Identifier: HEDIS_CIS.04.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): HiB

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 465 | 497 | 93.6% | 91.4 - 95.8 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 732 | 834 | 88.2% | 85.9 - 90.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 773 | 831 | 93.0% | 91.2 - 94.8 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): HiB

Measure Identifier: HEDIS_CIS.04.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

This measure captures the percent of young children who received at least three doses of Haemophilus Influenzae Type B (HIB) vaccine on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive a three-dose or four-dose vaccine series (depending on the vaccine product) to protect against Hib disease. New Hampshire (NH) uses a 4-dose product so children who are vaccinated in NH should receive 4 doses of Hib vaccine. Children who are behind on the Hib series or start the Hib vaccine series late may not need 4-doses to be considered up-to-date because their risk of invasive Hib disease decreases the older they become. Each child's immunization record must be evaluated to determine if their Hib series is up-to-date. A low or falling rate may indicate that children have received less than the recommended number of doses of vaccine and may not be fully protected against Hib disease. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least three doses of Hib vaccine on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

NH Medicaid Pre-MCM

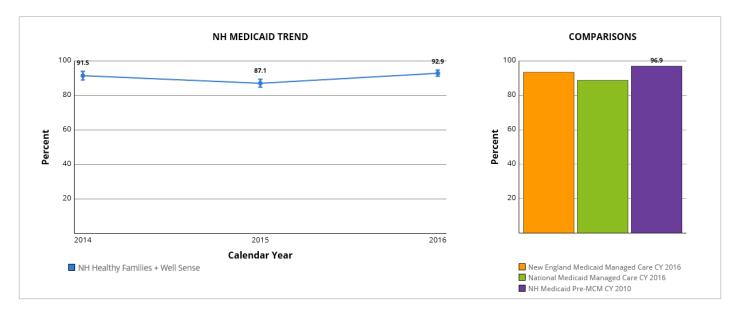
• Data Sources: Fee for Service (Pre-Managed Care)

Years: CY 2010Comments:

Childhood Immunization Status (CIS, Hybrid Specification): IPV

HEDIS® Measurement Definition: The percentage of children 2 years of age who had three polio (IPV) vaccines by their second birthday.

Measure Identifier: HEDIS_CIS.02.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): IPV

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 455 | 497 | 91.5% | 89.0 - 94.0 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 722 | 834 | 87.1% | 84.8 - 89.4 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 773 | 831 | 92.9% | 91.1 - 94.7 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): IPV

Measure Identifier: HEDIS_CIS.02.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

This measure captures the percent of young children who received at least three doses of polio vaccine on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive 3 doses of Inactivated polio vaccine (IPV) prior to two years of age to protect against polio disease. A booster dose is recommended between 4–6 years of age. A low or falling rate may indicate that children have received less than the recommended number of doses of each vaccine may not be fully protected against polio. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least three doses of polio vaccine on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

NH Medicaid Pre-MCM

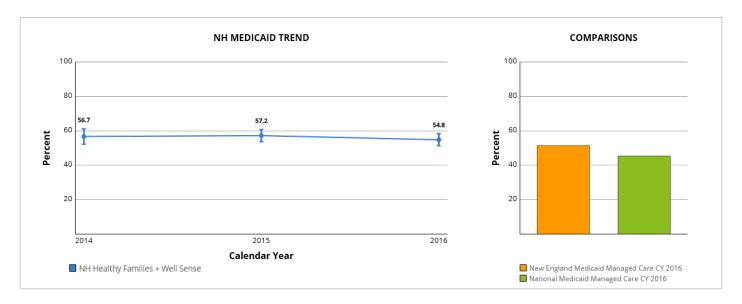
• Data Sources: Fee for Service (Pre-Managed Care)

Years: CY 2010Comments:

Childhood Immunization Status (CIS, Hybrid Specification): Influenza

HEDIS® Measurement Definition: The percentage of children 2 years of age who had two influenza (flu) vaccines by their second birthday.

Measure Identifier: HEDIS_CIS.10.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): Influenza

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 282 | 497 | 56.7% | 52.2 - 61.2 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 477 | 834 | 57.2% | 53.7 - 60.7 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 460 | 831 | 54.8% | 51.3 - 58.3 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): Influenza

Measure Identifier: HEDIS_CIS.10.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of young children who received at least two doses of influenza vaccine on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that young children receive two doses of influenza vaccine to protect against influenza (flu) disease. A low or falling rate may indicate that children have received less than the recommended number of doses of each vaccine may not be fully protected against flu disease. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least two doses of influenza vaccine on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

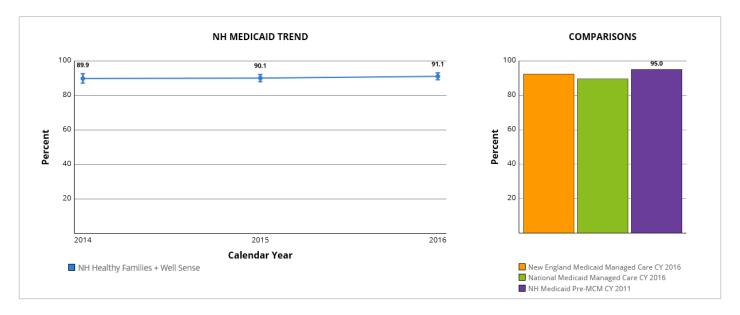
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): MMR

HEDIS® Measurement Definition: The percentage of children 2 years of age who had one measles, mumps and rubella (MMR) vaccine by their second birthday.

Measure Identifier: HEDIS_CIS.03.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): MMR

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 447 | 497 | 89.9% | 87.2 - 92.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 750 | 834 | 90.1% | 88.0 - 92.2 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 759 | 831 | 91.1% | 89.1 - 93.1 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): MMR

Measure Identifier: HEDIS_CIS.03.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

This measure captures the percent of young children who received at least one Measles, Mumps, and Rubella (MMR) vaccine or have documented history of disease on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive 2 doses of MMR vaccine to protect against Measles, Mumps, and Rubella diseases. The first dose is routinely administered between 12–15 months of age and the second dose between 4–6 years of age. A low or falling rate may indicate that children have not received their first dose of vaccine and are not protected against Measles, Mumps, and/or Rubella diseases. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least one dose of MMR vaccine or have documented history of disease on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2015, CY 2016
- · Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

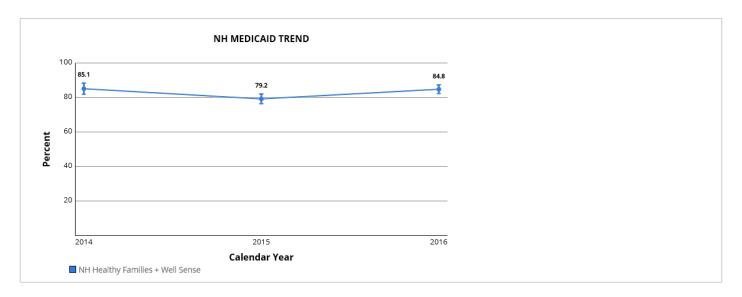
NH Medicaid Pre-MCM

- Data Sources: Centers for Disease Control and Prevention NH Survey
- Years: CY 2011
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): PCV

HEDIS® Measurement Definition: The percentage of children 2 years of age who had four pneumococcal conjugate (PCV) vaccines by their second birthday.

Measure Identifier: HEDIS_CIS.07.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): PCV

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 423 | 497 | 85.1% | 81.9 - 88.3 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 648 | 834 | 79.2% | 76.4 - 82.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 705 | 831 | 84.8% | 82.3 - 87.3 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): PCV

Measure Identifier: HEDIS_CIS.07.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

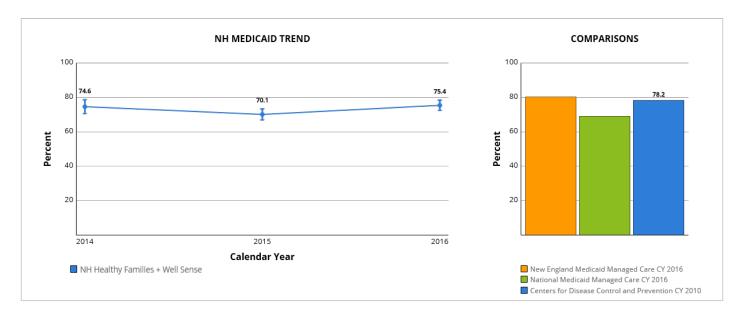
This measure captures the percent of young children who received at least four doses of pneumococcal conjugate vaccine (PCV) on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive 4 doses of PCV to protect against pneumococcal disease. A low or falling rate may indicate that children have received less than the recommended number of doses of vaccine may not be fully protected against pneumococcal disease. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least four doses of PCV on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Childhood Immunization Status (CIS, Hybrid Specification): Rotavirus

HEDIS® Measurement Definition: The percentage of children 2 years of age who had two or three rotavirus (RV) vaccines by their second birthday.

Measure Identifier: HEDIS_CIS.09.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): Rotavirus

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 371 | 497 | 74.6% | 70.6 - 78.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 585 | 834 | 70.1% | 66.9 - 73.3 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 624 | 831 | 75.4% | 72.4 - 78.4 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): Rotavirus

Measure Identifier: HEDIS CIS.09.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of young children who received at least two doses of the two-dose or three doses of the three-dose rotavirus (RV) vaccine on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive a complete series of RV vaccine to protect against rotavirus disease. A low or falling rate may indicate that children have received less than the recommended number of doses of each vaccine may not be fully protected against rotavirus disease. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least two doses of the two-dose or three doses of the three-dose RV vaccine on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

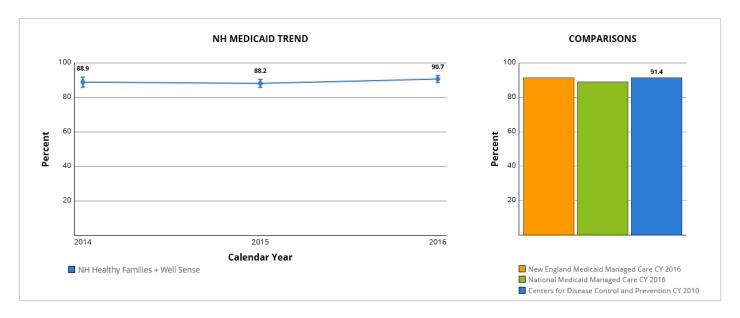
Centers for Disease Control and Prevention

- Data Sources: Centers for Disease Control and Prevention NH Survey
- Years: CY 2010
- Comments:

Childhood Immunization Status (CIS, Hybrid Specification): VZV

HEDIS® Measurement Definition: The percentage of children 2 years of age who had one chicken pox (VZV) vaccine by their second birthday.

Measure Identifier: HEDIS_CIS.06.H



Data

Childhood Immunization Status (CIS, Hybrid Specification): VZV

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 442 | 497 | 88.9% | 86.0 - 91.8 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 736 | 834 | 88.2% | 85.9 - 90.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 755 | 831 | 90.7% | 88.7 - 92.7 |

Measure Details

Measure Name: Childhood Immunization Status (CIS, Hybrid Specification): VZV

Measure Identifier: HEDIS_CIS.06.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

This measure captures the percent of young children who received at least one Varicella (VZV) vaccine or have documented history of disease (chickenpox) on or before 2 years of age. The Centers for Disease Control and Prevention (CDC) recommends that children receive 2 doses of VZV to protect against chickenpox disease. The first dose is administered between 12–15 months of age and the second dose between 4–6 years of age. A low or falling rate may indicate that children have not received their first dose of vaccine are not protected against chickenpox disease. This measure is reported as the number of children who turned 2 years of age during the reporting period and received at least one dose of VZV vaccine or have documented history of disease on or before 2 years of age, divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

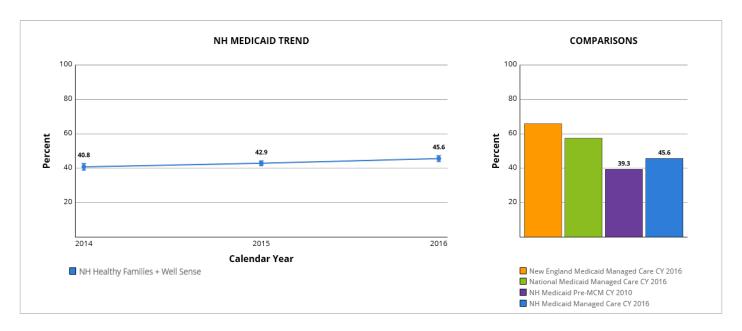
Centers for Disease Control and Prevention

- Data Sources: Centers for Disease Control and Prevention NH Survey
- Years: CY 2010
- Comments:

Chlamydia Screening in Women (CHL, Administrative Specification)

HEDIS® Measurement Definition: The percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

Measure Identifier: HEDIS_CHL.A



Data

Chlamydia Screening in Women (CHL, Administrative Specification)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 1,227 | 3,009 | 40.8% | 39.0 - 42.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 2,293 | 5,348 | 42.9% | 41.6 - 44.2 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 1,670 | 3,660 | 45.6% | 44.0 - 47.2 |

Measure Details

Measure Name: Chlamydia Screening in Women (CHL, Administrative Specification)

Measure Identifier: HEDIS_CHL.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of sexually active females 16-24 years of age who had at least one test for chlamydia during the past year. Chlamydia is the most common sexually transmitted disease in the United States, and may lead to an increased risk of pelvic infections, infertility, and complications during pregnancy. The Centers for Disease Control and Prevention recommends that all sexually active women < 25 years of age and high-risk women > 25 years of age be tested for chlamydia at least annually. A low or falling rate may indicate women are not being routinely screened and may be at a greater risk for an undetected Chlamydia infection. This measure is calculated based on the number of sexually active females 16-24 years of age, who received at least one chlamydia test during the past year, divided by the total eligible population, reported as a percentage.

Topics: HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2015, CY 2016

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

Years: CY 2013, CY 2014, CY 2015, CY 2016

Comments:

NH Medicaid Pre-MCM

Data Sources: Fee for Service (Pre-Managed Care)

Years: CY 2010Comments:

NH Medicaid Managed Care

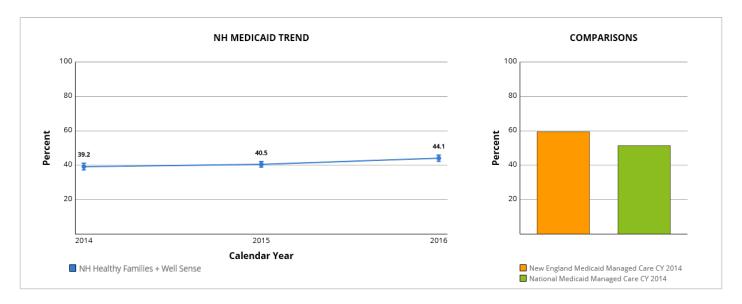
• Data Sources: NH MCM Rate

Years: CY 2016Comments:

Chlamydia Screening in Women (CHL, Administrative Specification): A. Age 16-20 Years

HEDIS® Measurement Definition: The percentage of women 16–20 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

Measure Identifier: HEDIS_CHL.A.1620



Data

Chlamydia Screening in Women (CHL, Administrative Specification): A. Age 16-20 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 944 | 2,410 | 39.2% | 37.3 - 41.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 1,508 | 3,726 | 40.5% | 38.9 - 42.1 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 1,311 | 2,974 | 44.1% | 42.3 - 45.9 |

Measure Details

Measure Name: Chlamydia Screening in Women (CHL, Administrative Specification): A. Age 16-20 Years

Measure Identifier: HEDIS_CHL.A.1620

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of sexually active females 16-20 years of age who had at least one test for chlamydia during the past year. Chlamydia is the most common sexually transmitted disease in the United States, and may lead to an increased risk of pelvic infections, infertility, and complications during pregnancy. The Centers for Disease Control and Prevention recommends that all sexually active women < 25 years of age and high-risk women > 25 years of age be tested for chlamydia at least annually. A low or falling rate may indicate women are not being routinely screened and may be at a greater risk for an undetected Chlamydia infection. This measure is calculated based on the number of sexually active females 16-20 years of age, who received at least one chlamydia test during the past year, divided by the total eligible population, reported as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2014

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

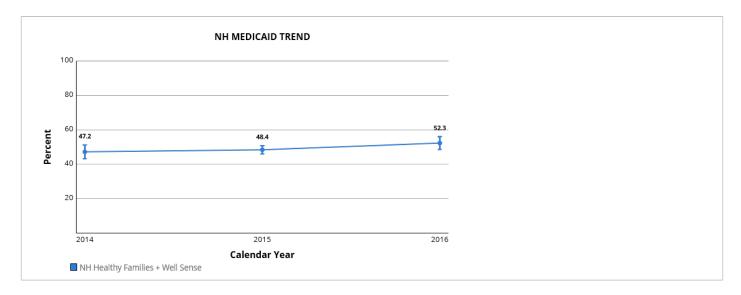
• Years: CY 2014

• Comments:

Chlamydia Screening in Women (CHL, Administrative Specification): B. Age 21-24 Years

HEDIS® Measurement Definition: The percentage of women 21–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

Measure Identifier: HEDIS_CHL.A.2124



Data

Chlamydia Screening in Women (CHL, Administrative Specification): B. Age 21-24 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 283 | 599 | 47.2% | 43.2 - 51.2 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 785 | 1,622 | 48.4% | 46.0 - 50.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 359 | 686 | 52.3% | 48.6 - 56.0 |

Measure Details

Measure Name: Chlamydia Screening in Women (CHL, Administrative Specification): B. Age 21-24 Years

Measure Identifier: HEDIS_CHL.A.2124

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of sexually active females 21-24 years of age who had at least one test for chlamydia during the past year. Chlamydia is the most common sexually transmitted disease in the United States, and may lead to an increased risk of pelvic infections, infertility, and complications during pregnancy. The Centers for Disease Control and Prevention recommends that all sexually active women < 25 years of age and high-risk women > 25 years of age be tested for chlamydia at least annually. A low or falling rate may indicate women are not being routinely screened and may be at a greater risk for an undetected Chlamydia infection. This measure is calculated based on the number of sexually active females 21-24 years of age, who received at least one chlamydia test during the past year, divided by the total eligible population, reported as a percentage.

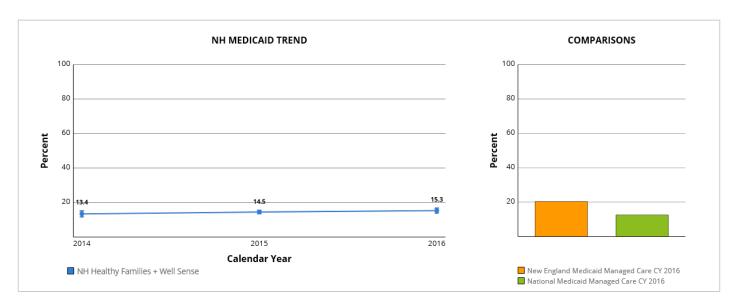
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Engagement of Alcohol and Other Drug Dependence Treatment (IET)

HEDIS® Measurement Definition: The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

• Engagement of AOD Treatment. The percentage of members who initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit.

Measure Identifier: HEDIS_IET.A.ENG



Data

Engagement of Alcohol and Other Drug Dependence Treatment (IET)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 216 | 1,615 | 13.4% | 11.7 - 15.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 753 | 5,200 | 14.5% | 13.5 - 15.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 366 | 2,391 | 15.3% | 13.9 - 16.7 |

Measure Details

Measure Name: Engagement of Alcohol and Other Drug Dependence Treatment (IET)

Measure Identifier: HEDIS IET.A.ENG

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adolescents and adults 13 years of age and older who had a new episode of alcohol or other drug (AOD) dependence, initiated treatment within 14 days of the diagnosis, and had at least two additional services with a diagnosis of AOD within 30 days of the initiation visit. Individuals who remain in treatment longer, have improved outcomes related to the treatment. A low or falling rate indicates that adolescents and adults have initiated treatment, but may not have continued treatment which could result in negative outcomes related to AOD dependence. This measure is reported as the number of adolescents and adults 13 years of age and older who had a new episode of AOD, initiated treatment within 14 days of the diagnosis, and had at least two additional services with a diagnosis of AOD within 30 days of the initiation visit, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2015, CY 2016

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2015, CY 2016

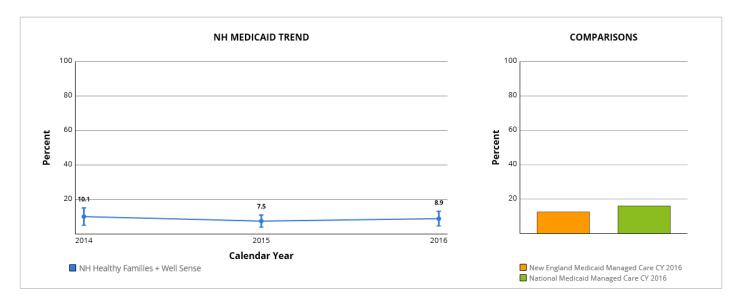
• Comments:

Engagement of Alcohol and Other Drug Dependence Treatment (IET): A. Age 13 to 17 Years

HEDIS® Measurement Definition: The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

• Engagement of AOD Treatment. The percentage of members who initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit.

Measure Identifier: HEDIS IET.A.ENG.1317



Data

Engagement of Alcohol and Other Drug Dependence Treatment (IET): A. Age 13 to 17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 14 | 139 | 10.1% | 5.1 - 15.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 16 | 213 | 7.5% | 4.0 - 11.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 16 | 180 | 8.9% | 4.7 - 13.1 |

Measure Details

Measure Name: Engagement of Alcohol and Other Drug Dependence Treatment (IET): A. Age

13 to 17 Years

Measure Identifier: HEDIS_IET.A.ENG.1317

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adolescents and adults 13 years of age and older who had a new episode of alcohol or other drug (AOD) dependence, initiated treatment within 14 days of the diagnosis, and had at least two additional services with a diagnosis of AOD within 30 days of the initiation visit. Individuals who remain in treatment longer, have improved outcomes related to the treatment. A low or falling rate indicates that adolescents and adults have initiated treatment, but may not have continued treatment which could result in negative outcomes related to AOD dependence. This measure is reported as the number of adolescents and adults 13 years of age and older who had a new episode of AOD, initiated treatment within 14 days of the diagnosis, and had at least two additional services with a diagnosis of AOD within 30 days of the initiation visit, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2016

Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2016

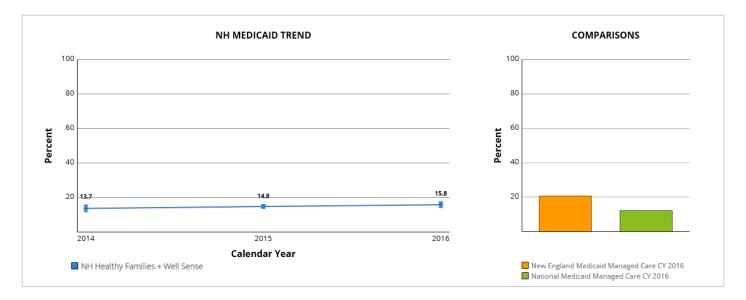
• Comments:

Engagement of Alcohol and Other Drug Dependence Treatment (IET): B. Age 18+ Years

HEDIS® Measurement Definition: The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

• Engagement of AOD Treatment. The percentage of members who initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit.

Measure Identifier: HEDIS_IET.A.ENG.18



Data

Engagement of Alcohol and Other Drug Dependence Treatment (IET): B. Age 18+ Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 202 | 1,476 | 13.7% | 11.9 - 15.5 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 737 | 4,987 | 14.8% | 13.8 - 15.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 350 | 2,211 | 15.8% | 14.3 - 17.3 |

Measure Details

Measure Name: Engagement of Alcohol and Other Drug Dependence Treatment (IET): B. Age

18+ Years

Measure Identifier: HEDIS_IET.A.ENG.18

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adolescents and adults 13 years of age and older who had a new episode of alcohol or other drug (AOD) dependence, initiated treatment within 14 days of the diagnosis, and had at least two additional services with a diagnosis of AOD within 30 days of the initiation visit. Individuals who remain in treatment longer, have improved outcomes related to the treatment. A low or falling rate indicates that adolescents and adults have initiated treatment, but may not have continued treatment which could result in negative outcomes related to AOD dependence. This measure is reported as the number of adolescents and adults 13 years of age and older who had a new episode of AOD, initiated treatment within 14 days of the diagnosis, and had at least two additional services with a diagnosis of AOD within 30 days of the initiation visit, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2016

Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2016

• Comments:

Frequency of Ongoing Prenatal Care (FPC, Hybrid Specification): 81+ Percent

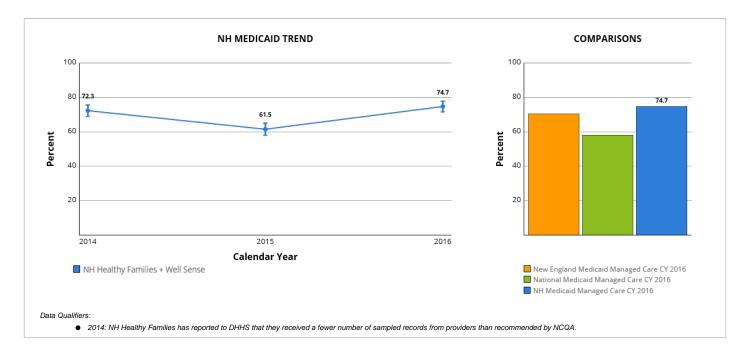
HEDIS® Measurement Definition: The percentage of Medicaid deliveries between November 6 of the year prior to the measurement year and November 5 of the measurement year that had the following number of expected prenatal visits:

• ≥81 percent of expected visits.

This measure uses the same denominator as the Prenatal and Postpartum Care measure.

Note: This measure has the same structure as measures in the Effectiveness of Care domain. The organization must follow the Guidelines for Effectiveness of Care Measures when calculating this measure.

Measure Identifier: HEDIS_FPC.05.H



Data

Frequency of Ongoing Prenatal Care (FPC, Hybrid Specification): 81+ Percent

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 540 | 755 | 72.3% | 69.0 - 75.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 453 | 769 | 61.5% | 58.0 - 65.0 |

| TIME PERIOD | DATA | MEASURE | MEASURE | MEASURE | CONFIDENCE |
|-------------------------|--|-----------|-------------|---------|-------------|
| | SUBMITTER | NUMERATOR | DENOMINATOR | RATE | INTERVAL |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 589 | 791 | 74.7% | 71.6 - 77.8 |

Measure Details

Measure Name: Frequency of Ongoing Prenatal Care (FPC, Hybrid Specification): 81+ Percent

Measure Identifier: HEDIS FPC.05.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of pregnant women who attended >81% of prenatal visits during their pregnancy. The American Academy of Obstetrics and Gynecology (ACOG) recommends a standard schedule of regular prenatal visits for pregnant women who have an uncomplicated pregnancy. A low or falling rate indicates that pregnant women are not receiving the recommend number of prenatal visits, which may result in higher rates of adverse pregnancy outcomes. This measure captures the number of pregnant women who received >81% of expected prenatal visits, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

NH Medicaid Managed Care

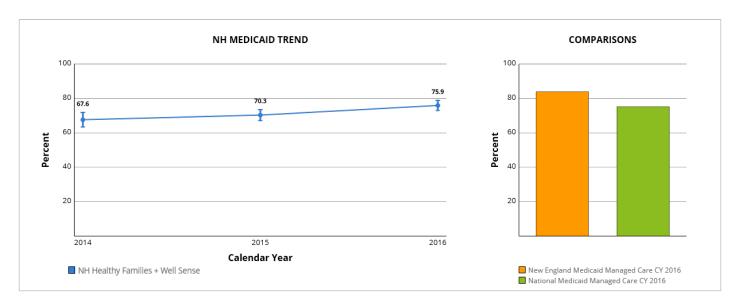
• Data Sources: NH MCM Rate

Years: CY 2016Comments:

Immunizations for Adolescents (IMA, Hybrid Specification): Combination 1

HEDIS® Measurement Definition: The percentage of adolescents 13 years of age who had one dose each of meningococcal vaccine and one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or one tetanus, diphtheria toxoids vaccine (Td) by their 13th birthday (combination rate).

Measure Identifier: HEDIS_IMA.03.H



Data

Immunizations for Adolescents (IMA, Hybrid Specification): Combination 1

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 324 | 479 | 67.6% | 63.4 - 71.8 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 558 | 795 | 70.3% | 67.1 - 73.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 632 | 832 | 75.9% | 73.0 - 78.8 |

Measure Details

Measure Name: Immunizations for Adolescents (IMA, Hybrid Specification): Combination 1

Measure Identifier: HEDIS_IMA.03.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of 13 year olds who received vaccine combination #1. The Centers for Disease Control and Prevention (CDC) recommends that adolescents receive one dose of MCV between 11-12 years of age with a booster dose at age 16 years to prevent meningococcal disease and one dose of Tdap vaccine between 11-12 years of age to prevent tetanus, diphtheria toxoids, and pertussis or one dose of Td to prevent tetanus and diphtheria. A low or falling rate may indicate that 13 year olds have received less than the recommended number of doses of each vaccine may not be fully protected which may contribute to outbreaks of preventable diseases in susceptible populations. This measure is reported as the number of 13 year olds who received at least one dose of meningococcal vaccine (MCV) and one dose of tetanus, diphtheria toxoids, and acellular pertussis (Tdap) or tetanus, diphtheria toxoids (Td) vaccine on or before 13 years of age divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

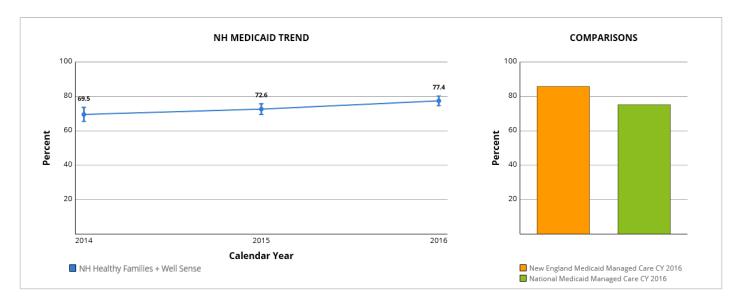
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

Immunizations for Adolescents (IMA, Hybrid Specification): Meningococcal Vaccine

HEDIS® Measurement Definition:The percentage of adolescents 13 years of age who had one dose of meningococcal vaccine by their 13th birthday.

Measure Identifier: HEDIS_IMA.01.H



Data

Immunizations for Adolescents (IMA, Hybrid Specification): Meningococcal Vaccine

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 333 | 479 | 69.5% | 65.4 - 73.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 577 | 795 | 72.6% | 69.5 - 75.7 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 645 | 832 | 77.4% | 74.6 - 80.2 |

Measure Details

Measure Name: Immunizations for Adolescents (IMA, Hybrid Specification): Meningococcal Vaccine

Measure Identifier: HEDIS_IMA.01.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of 13 year olds who received at least one dose of meningococcal vaccine (MCV) on or before 13 years of age. The Centers for Disease Control and Prevention (CDC) recommends that adolescents receive one dose of MCV between 11-12 years of age with a booster dose at age 16 years to prevent meningococcal disease. A low or falling rate may indicate that 13 year olds have received less than the recommended number of doses of each vaccine may not be fully protected. This measure is reported as the number of 13 year olds who received at least one dose of MCV on or before 13 years of age divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

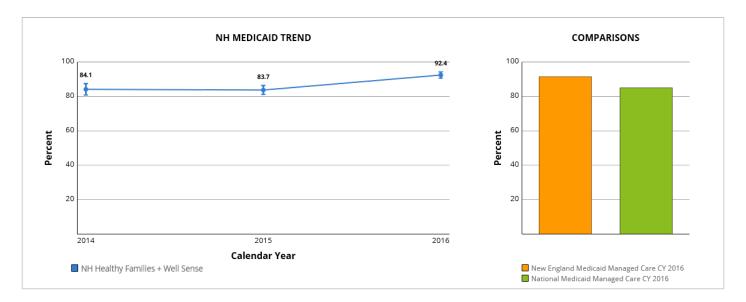
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

Immunizations for Adolescents (IMA, Hybrid Specification): Tdap/Td Vaccine

HEDIS® Measurement Definition: The percentage of adolescents 13 years of age who had one dose of tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) or one tetanus, diphtheria toxoids vaccine (Td) by their 13th birthday.

Measure Identifier: HEDIS_IMA.02.H



Data

Immunizations for Adolescents (IMA, Hybrid Specification): Tdap/Td Vaccine

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 403 | 479 | 84.1% | 80.8 - 87.4 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 663 | 795 | 83.7% | 81.1 - 86.3 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 769 | 832 | 92.4% | 90.6 - 94.2 |

Measure Details

Measure Name: Immunizations for Adolescents (IMA, Hybrid Specification): Tdap/Td Vaccine

Measure Identifier: HEDIS_IMA.02.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of 13 year olds who received at least one dose of tetanus, diphtheria toxoids, and acellular pertussis (Tdap) or tetanus, diphtheria toxoids (Td) vaccine on or before 13 years of age. The Centers for Disease Control and Prevention (CDC) recommends that adolescents receive one dose of Tdap vaccine between 10-12 years of age to prevent tetanus, diphtheria toxoids, and pertussis or one dose of Td to prevent tetanus and diphtheria. A low or falling rate may indicate that 13 year olds have received less than the recommended number of doses of each vaccine may not be fully protected which may contribute to outbreaks of preventable diseases in susceptible populations. This measure is reported as the number of 13 year olds who received at least one dose of Tdap or Td vaccine on or before 13 years of age divided by the total eligible population, reported as a percentage.

Topics: Immunizations - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

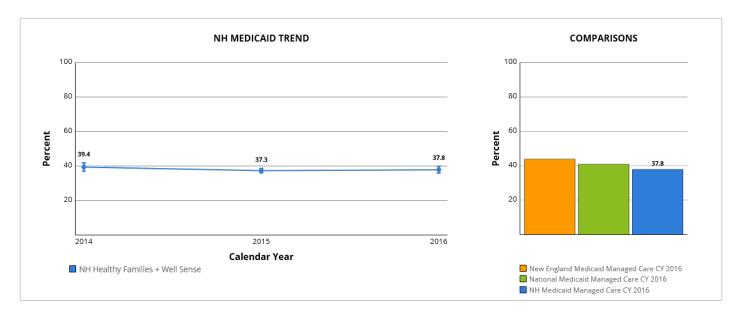
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

Initiation of Alcohol and Other Drug Dependence Treatment (IET)

HEDIS® Measurement Definition: The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

• Initiation of AOD Treatment. The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.

Measure Identifier: HEDIS_IET.A.INI



Data

Initiation of Alcohol and Other Drug Dependence Treatment (IET)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 636 | 1,615 | 39.4% | 37.0 - 41.8 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 1,939 | 5,200 | 37.3% | 36.0 - 38.6 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 904 | 2,391 | 37.8% | 35.9 - 39.7 |

Measure Details

Measure Name: Initiation of Alcohol and Other Drug Dependence Treatment (IET)

Measure Identifier: HEDIS IET.A.INI

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adolescents and adults 13 years of age and older that had a new episode of alcohol or other drug (AOD) dependence and initiated treatment within 14 days of the diagnosis. Initiating care after a need has been identified is an important step in managing AOD dependence. A low or falling rate indicates that adolescents and adults are not accessing treatment in a timely manner which may lead to AOD dependence remaining untreated. This measure is reported as the number of adolescent and adults 13 years of age and older who had a new episode of AOD dependence and initiated treatment within 14 days of the diagnosis, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2015, CY 2016

• Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2015, CY 2016

• Comments:

NH Medicaid Managed Care

• Data Sources: NH MCM Rate

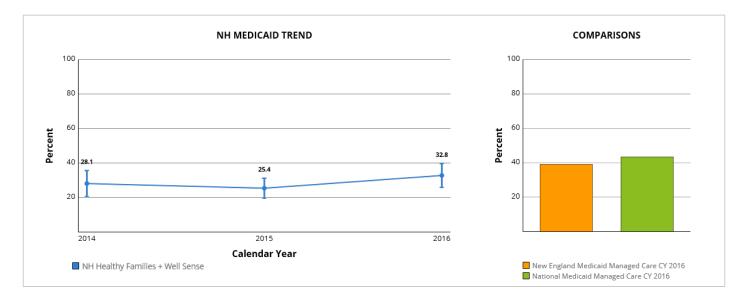
Years: CY 2016Comments:

Initiation of Alcohol and Other Drug Dependence Treatment (IET): A. Age 13 to 17 Years

HEDIS® Measurement Definition: The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

• Initiation of AOD Treatment. The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.

Measure Identifier: HEDIS IET.A.INI.1317



Data

Initiation of Alcohol and Other Drug Dependence Treatment (IET): A. Age 13 to 17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 39 | 139 | 28.1% | 20.6 - 35.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 54 | 213 | 25.4% | 19.6 - 31.2 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 59 | 180 | 32.8% | 25.9 - 39.7 |

Measure Details

Measure Name: Initiation of Alcohol and Other Drug Dependence Treatment (IET): A. Age 13 to 17 Years

Measure Identifier: HEDIS_IET.A.INI.1317

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adolescents and adults 13 years of age and older that had a new episode of alcohol or other drug (AOD) dependence and initiated treatment within 14 days of the diagnosis. Initiating care after a need has been identified is an important step in managing AOD dependence. A low or falling rate indicates that adolescents and adults are not accessing treatment in a timely manner which may lead to AOD dependence remaining untreated. This measure is reported as the number of adolescent and adults 13 years of age and older who had a new episode of AOD dependence and initiated treatment within 14 days of the diagnosis, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

Years: CY 2016

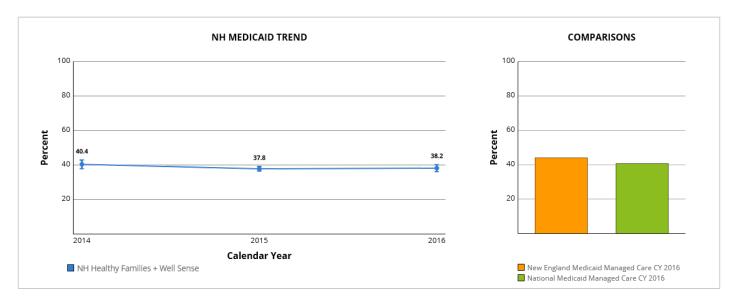
• Comments:

Initiation of Alcohol and Other Drug Dependence Treatment (IET): B. Age 18+ Years

HEDIS® Measurement Definition: The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

• Initiation of AOD Treatment. The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.

Measure Identifier: HEDIS IET.A.INI.18



Data

Initiation of Alcohol and Other Drug Dependence Treatment (IET): B. Age 18+ Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 597 | 1,476 | 40.4% | 37.9 - 42.9 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 1,885 | 4,987 | 37.8% | 36.5 - 39.1 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 845 | 2,211 | 38.2% | 36.2 - 40.2 |

Measure Details

Measure Name: Initiation of Alcohol and Other Drug Dependence Treatment (IET): B. Age 18+ Years

Measure Identifier: HEDIS_IET.A.INI.18

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adolescents and adults 13 years of age and older that had a new episode of alcohol or other drug (AOD) dependence and initiated treatment within 14 days of the diagnosis. Initiating care after a need has been identified is an important step in managing AOD dependence. A low or falling rate indicates that adolescents and adults are not accessing treatment in a timely manner which may lead to AOD dependence remaining untreated. This measure is reported as the number of adolescent and adults 13 years of age and older who had a new episode of AOD dependence and initiated treatment within 14 days of the diagnosis, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

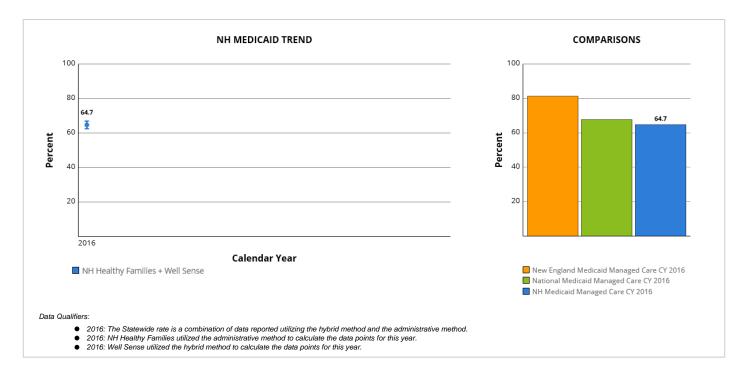
Years: CY 2016

• Comments:

Lead Screening in Children (LSC, Statewide Rate)

HEDIS® Measurement Definition: The percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday.

Measure Identifier: HEDIS_LSC



Data

Lead Screening in Children (LSC, Statewide Rate)

| TIME PERIOD | DATA | MEASURE | MEASURE | MEASURE | CONFIDENCE |
|-------------------------|--|-----------|-------------|---------|-------------|
| | SUBMITTER | NUMERATOR | DENOMINATOR | RATE | INTERVAL |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 1,171 | 1,878 | 64.7% | 62.5 - 66.9 |

Measure Details

Measure Name: Lead Screening in Children (LSC, Statewide Rate)

Measure Identifier: HEDIS_LSC

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 2 years of age who received 1 or more lead blood tests for lead

poisoning on or before 2 years of age. Approximately 310,000 children < five years of age have elevated blood lead levels in the United States. Elevated blood levels can cause serious health problems including gastrointestinal issues, growth problems, increased dental caries, and impaired neurologic development. The American Academy of Pediatrics (AAP) recommends universal testing for children with Medicaid between 9 - 12 months of age and at 24 months of age. A low or falling rate may indicate that young children are not being screened for lead levels, which may lead to undiagnosed cases of lead poisoning that may cause health problems including slow development, reduced Intelligence Quotient (IQ) scores, coma, or death. This measure is reported as the number of children 2 years of age who received 1 or more lead blood tests for lead poisoning on or before 2 years of age divided by the total eligible population, reported as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

Years: CY 2016Comments:

NH Medicaid Managed Care

• Data Sources: NH MCM Rate

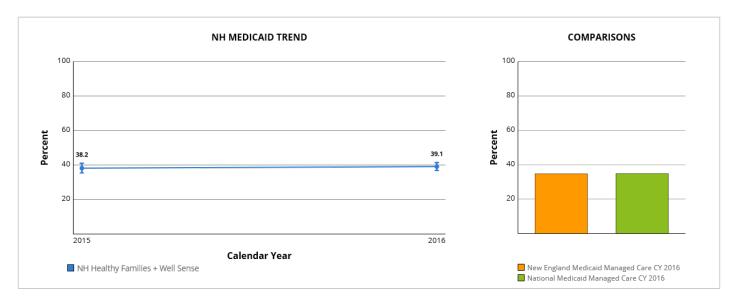
Years: CY 2016Comments:

Medication Management for People With Asthma (MMA): Medication Compliance 75%

HEDIS® Measurement Definition: The percentage of members 5-85 years of age during the measurement year, who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period:

 Percentage of members who remained on an asthma controller medication for at least 75% of their treatment period.

Measure Identifier: HEDIS MMA.A.75PC



Data

Medication Management for People With Asthma (MMA): Medication Compliance 75%

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 453 | 1,185 | 38.2% | 35.4 - 41.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 656 | 1,679 | 39.1% | 36.8 - 41.4 |

Measure Details

Measure Name: Medication Management for People With Asthma (MMA): Medication Compliance 75%

Measure Identifier: HEDIS_MMA.A.75PC

Data Source/Type: Administrative

Measure Relevance:

Topics: Screenings - Adults, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2015, CY 2016

· Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2015, CY 2016

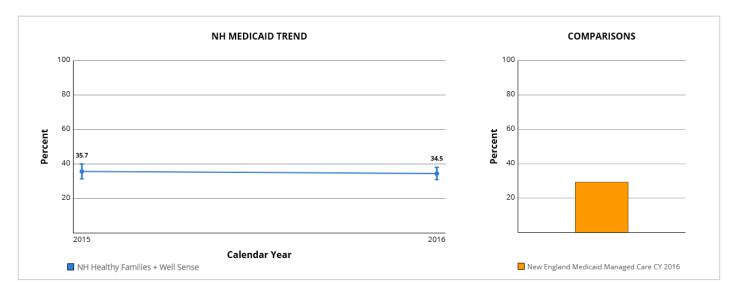
• Comments:

Medication Management for People With Asthma (MMA): Medication Compliance 75%: A. Age 5 to 11 Years

HEDIS® Measurement Definition: The percentage of members 5-11 years of age during the measurement year, who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period:

 Percentage of members who remained on an asthma controller medication for at least 75% of their treatment period.

Measure Identifier: HEDIS MMA.A.75PC.0511



Data

Medication Management for People With Asthma (MMA): Medication Compliance 75%: A. Age 5 to 11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 171 | 479 | 35.7% | 31.4 - 40.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 235 | 681 | 34.5% | 30.9 - 38.1 |

Measure Details

Measure Name: Medication Management for People With Asthma (MMA): Medication Compliance 75%: A. Age 5 to 11 Years

| Measure Identifier: HEDIS_MMA.A.75PC.0511 |
|---|
| Data Source/Type: Administrative |
| Measure Relevance: |
| Fopics: |

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

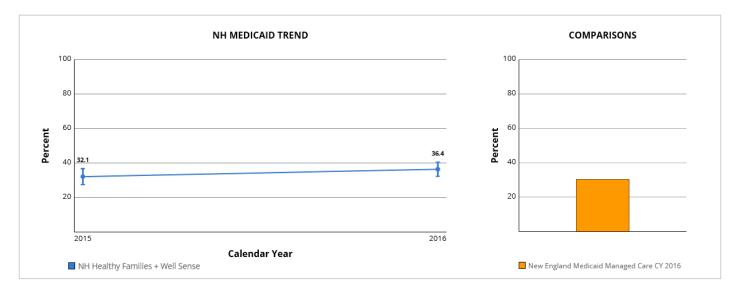
Years: CY 2016

Medication Management for People With Asthma (MMA): Medication Compliance 75%: B. Age 12 to 18 Years

HEDIS® Measurement Definition: The percentage of members 12-18 years of age during the measurement year, who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period:

 Percentage of members who remained on an asthma controller medication for at least 75% of their treatment period.

Measure Identifier: HEDIS MMA.A.75PC.1218



Data

Medication Management for People With Asthma (MMA): Medication Compliance 75%: B. Age 12 to 18 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 129 | 402 | 32.1% | 27.5 - 36.7 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 196 | 539 | 36.4% | 32.3 - 40.5 |

Measure Details

Measure Name: Medication Management for People With Asthma (MMA): Medication Compliance 75%: B. Age 12 to 18 Years

| Measure Identifier: HEDIS_MMA.A.75PC.1218 |
|---|
| Data Source/Type: Administrative |
| Measure Relevance: |
| Topics: |

Comparison Rate Comparison Data

New England Medicaid Managed Care

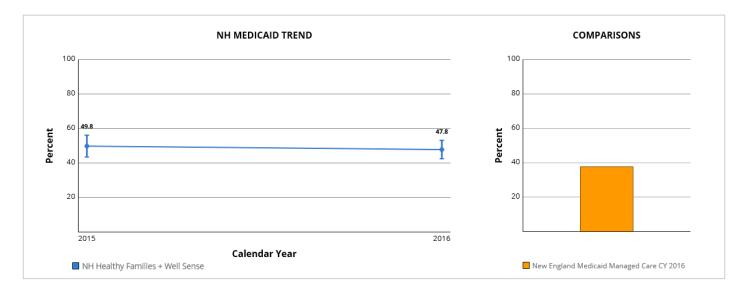
- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2016
- Comments:

Medication Management for People With Asthma (MMA): Medication Compliance 75%: C. Age 19 to 50 Years

HEDIS® Measurement Definition: The percentage of members 19-50 years of age during the measurement year, who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period:

 Percentage of members who remained on an asthma controller medication for at least 75% of their treatment period.

Measure Identifier: HEDIS MMA.A.75PC.1950



Data

Medication Management for People With Asthma (MMA): Medication Compliance 75%: C. Age 19 to 50 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 119 | 239 | 49.8% | 43.5 - 56.1 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 164 | 343 | 47.8% | 42.5 - 53.1 |

Measure Details

Measure Name: Medication Management for People With Asthma (MMA): Medication Compliance 75%: C. Age 19 to 50 Years

| Measure Identifier: HEDIS_MMA.A.75PC.1950 | |
|---|--|
| Data Source/Type: Administrative | |
| Measure Relevance: | |
| Topics: | |

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016

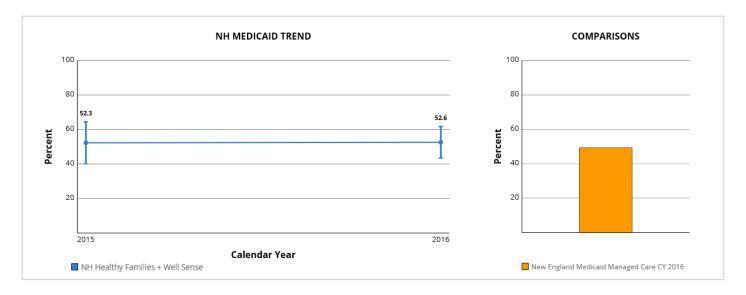
Comments:

Medication Management for People With Asthma (MMA): Medication Compliance 75%: D. Age 51 to 64 Years

HEDIS® Measurement Definition: The percentage of members 51-64 years of age during the measurement year, who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period:

 Percentage of members who remained on an asthma controller medication for at least 75% of their treatment period.

Measure Identifier: HEDIS MMA.A.75PC.5164



Data

Medication Management for People With Asthma (MMA): Medication Compliance 75%: D. Age 51 to 64 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 34 | 65 | 52.3% | 40.2 - 64.4 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 61 | 116 | 52.6% | 43.5 - 61.7 |

Measure Details

Measure Name: Medication Management for People With Asthma (MMA): Medication Compliance 75%: D. Age 51 to 64 Years

| Measure Identifier: HEDIS_MMA.A.75PC.5164 | |
|---|--|
| Data Source/Type: Administrative | |
| Measure Relevance: | |
| opics: | |

Comparison Rate Comparison Data

New England Medicaid Managed Care

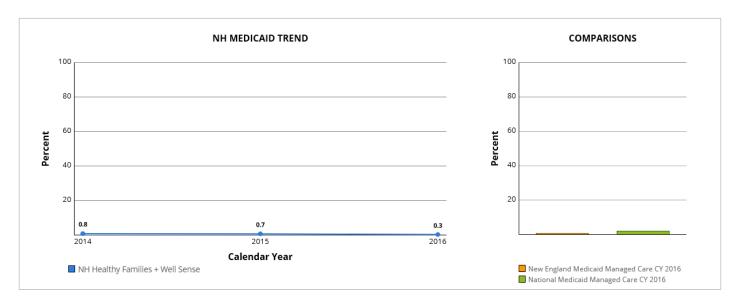
- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2016

Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)

HEDIS® Measurement Definition: The percentage of adolescent females 16–20 years of age who were screened unnecessarily for cervical cancer.

Note: A lower rate indicates better performance.

Measure Identifier: HEDIS_NCS.A



Data

Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 29 | 3,707 | 0.8% | 0.5 - 1.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 40 | 6,058 | 0.7% | 0.5 - 0.9 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 17 | 5,162 | 0.3% | 0.2 - 0.4 |

Measure Details

Measure Name: Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)

Measure Identifier: HEDIS_NCS.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of females 16-20 years of age who were unnecessarily screened for cervical cancer. The United States Preventive Service Task Force (USPSTF) recommends against screening for cervical cancer in women younger than age 21 years. A high or rising rate may indicate that women 16-20 are being unnecessarily screened for cervical cancer. This measure is calculated based on the number of females 16-20 years of age who were unnecessarily screened for cervical cancer, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

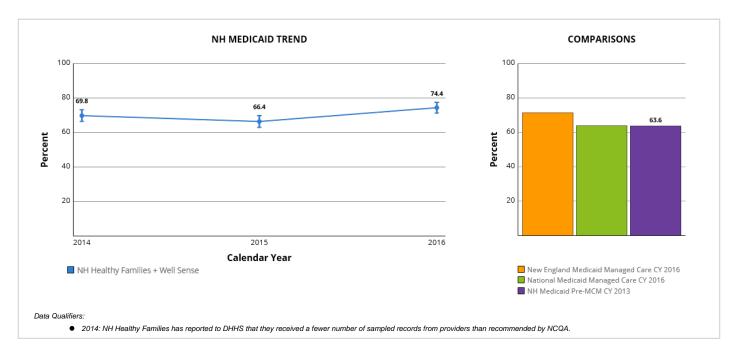
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2014, CY 2016
- Comments:

Prenatal and Postpartum Care (PPC, Hybrid Specification): Postpartum Care

HEDIS® Measurement Definition: The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care.

• Postpartum Care. The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.

Measure Identifier: HEDIS PPC.02.H



Data

Prenatal and Postpartum Care (PPC, Hybrid Specification): Postpartum Care

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 528 | 755 | 69.8% | 66.4 - 73.2 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 503 | 769 | 66.4% | 63.0 - 69.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 586 | 791 | 74.4% | 71.3 - 77.5 |

Measure Name: Prenatal and Postpartum Care (PPC, Hybrid Specification): Postpartum Care

Measure Identifier: HEDIS_PPC.02.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of females who had a baby and received a post-partum care visit between 21–56 days after delivery. The American Academy of Obstetrics and Gynecology (ACOG) recommends that women who had a baby receive a post-partum care visit between 4–6 weeks after delivering a baby. Post-partum care is important to the health of the mother to assess the many physical and emotional changes that are occurring to her and to provide education and support. A low or falling rate indicates that new mothers are not receiving the recommended post-partum care, which may result in higher rates of adverse post-partum outcomes. The measure is reported as the number of females who had a baby and received at least one post-partum care visit between 21–56 days after delivery, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2016
- · Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

NH Medicaid Pre-MCM

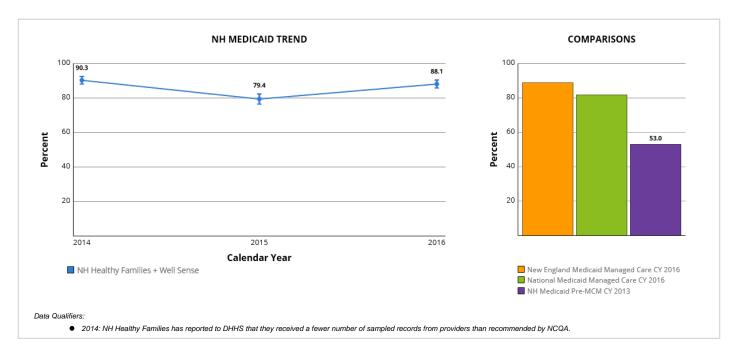
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2010, CY 2013
- · Comments:

Prenatal and Postpartum Care (PPC, Hybrid Specification): Timeliness of Prenatal Care

HEDIS® Measurement Definition: The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care.

• Timeliness of Prenatal Care. The percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester or within 42 days of enrollment in the organization.

Measure Identifier: HEDIS PPC.01.H



Data

Prenatal and Postpartum Care (PPC, Hybrid Specification): Timeliness of Prenatal Care

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 685 | 755 | 90.3% | 88.1 - 92.5 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 594 | 769 | 79.4% | 76.5 - 82.3 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 694 | 791 | 88.1% | 85.8 - 90.4 |

Measure Name: Prenatal and Postpartum Care (PPC, Hybrid Specification): Timeliness of Prenatal Care

Measure Identifier: HEDIS_PPC.01.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of females who had a baby and received at least one prenatal care visit in the first trimester (first 12 weeks) of pregnancy or within 42 days of enrollment in the organization. The American Academy of Obstetrics and Gynecology (ACOG) recommends a standard schedule of regular prenatal visits, beginning in the first trimester, for pregnant women who have an uncomplicated pregnancy. A low or falling rate indicates that pregnant women are not receiving prenatal care during the first trimester, which may result in higher rates of adverse pregnancy outcomes. The measure is reported as the number of females who had a baby and received at least one prenatal care visit in the first trimester of pregnancy or within 42 days of enrollment in the organization, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2015, CY 2016

· Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- · Comments:

NH Medicaid Pre-MCM

Data Sources: Fee for Service (Pre-Managed Care)

Years: CY 2012, CY 2013

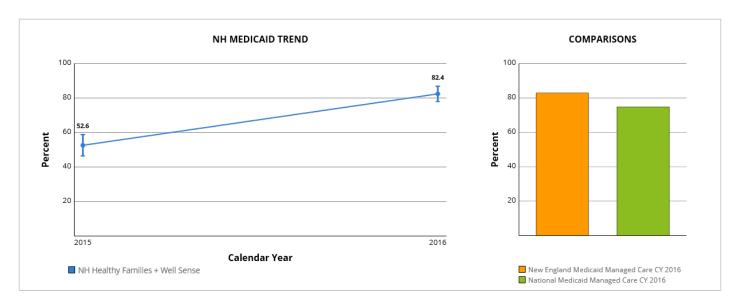
• Comments:

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy

HEDIS® Measurement Definition: The percentage of males 21-75 years of age and females 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

• Received Statin Therapy. Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year.

Measure Identifier: HEDIS_SPC.A.THR



Data

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 131 | 249 | 52.6% | 46.4 - 58.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 234 | 284 | 82.4% | 78.0 - 86.8 |

Measure Details

Measure Name: Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy

Measure Identifier: HEDIS_SPC.A.THR

Data Source/Type: Administrative

Measure Relevance:

Topics: Screenings - Adults, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2014, CY 2016

· Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2014, CY 2016

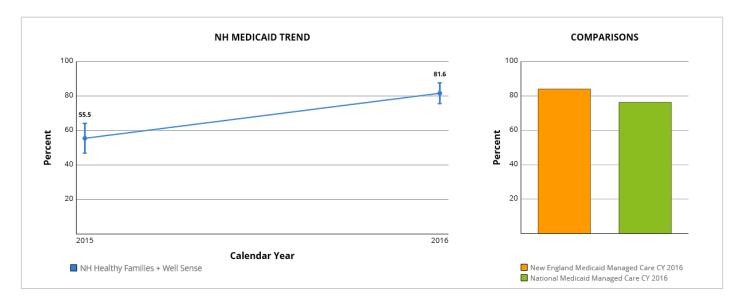
• Comments:

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: A. Males Age 21 to 75

HEDIS® Measurement Definition: The percentage of males 21-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

• Received Statin Therapy. Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year.

Measure Identifier: HEDIS_SPC.A.THR.2175



Data

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: A. Males Age 21 to 75

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 71 | 128 | 55.5% | 46.9 - 64.1 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 129 | 158 | 81.6% | 75.6 - 87.6 |

Measure Details

Measure Name: Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: A. Males Age 21 to 75

| Measure Identifier: HEDIS_SPC.A.THR.2175 | |
|--|--|
| Data Source/Type: Administrative | |
| Measure Relevance: | |
| Topics: | |

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

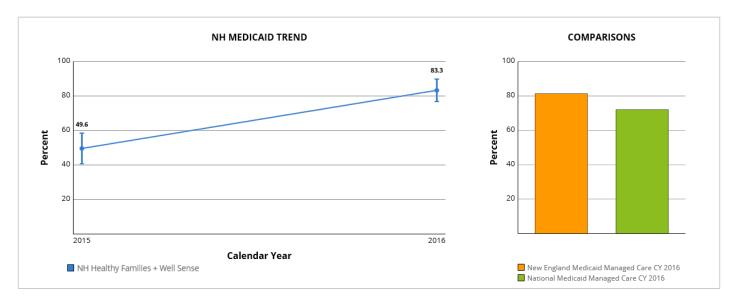
Years: CY 2016Comments:

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: B. Females Age 40 to 75

HEDIS® Measurement Definition: The percentage of females 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

• Received Statin Therapy. Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year.

Measure Identifier: HEDIS_SPC.A.THR.4075



Data

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: B. Females Age 40 to 75

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 60 | 121 | 49.6% | 40.7 - 58.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 105 | 126 | 83.3% | 76.8 - 89.8 |

Measure Details

Measure Name: Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: B. Females Age 40 to 75

| asure Identifier: HEDIS_SPC.A.THR.4075 | |
|--|--|
| ta Source/Type: Administrative | |
| asure Relevance: | |
| pics: | |

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2016

• Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

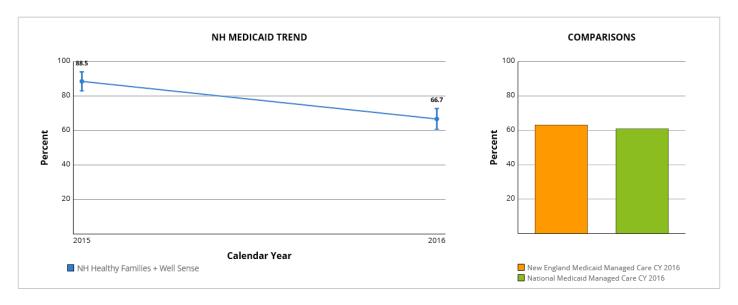
Years: CY 2016Comments:

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%

HEDIS® Measurement Definition: The percentage of males 21-75 years of age and females 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

• Statin Adherence 80%. Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment.

Measure Identifier: HEDIS_SPC.A.ADH



Data

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 116 | 131 | 88.5% | 83.0 - 94.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 156 | 234 | 66.7% | 60.7 - 72.7 |

Measure Details

Measure Name: Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%

Measure Identifier: HEDIS_SPC.A.ADH

Data Source/Type: Administrative

Measure Relevance:

Topics: Screenings - Adults, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2014, CY 2016

· Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2014, CY 2016

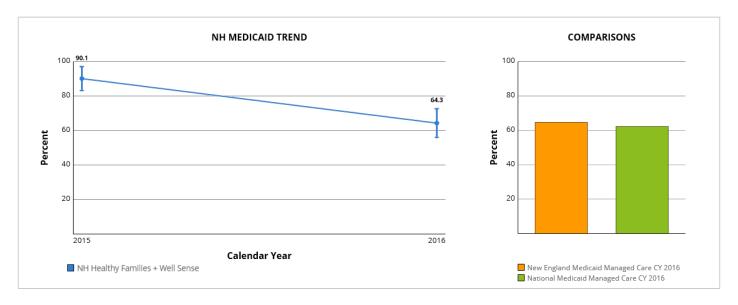
• Comments:

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: A. Males Age 21 to 75

HEDIS® Measurement Definition: The percentage of males 21-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

• Statin Adherence 80%. Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment.

Measure Identifier: HEDIS SPC.A.ADH.2175



Data

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: A. Males Age 21 to 75

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 64 | 71 | 90.1% | 83.2 - 97.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 83 | 129 | 64.3% | 56.0 - 72.6 |

Measure Details

Measure Name: Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: A. Males Age 21 to 75

| Measure Identifier: HEDIS_SPC.A.ADH.2175 |
|--|
| Data Source/Type: Administrative |
| Measure Relevance: |
| Topics: |
| |

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

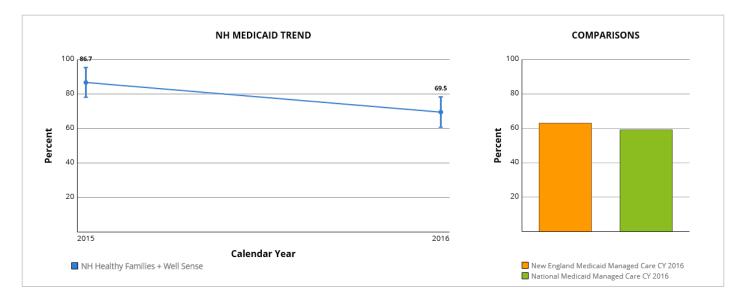
Years: CY 2016Comments:

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: B. Females Age 40 to 75

HEDIS® Measurement Definition: The percentage of females 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

• Statin Adherence 80%. Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment.

Measure Identifier: HEDIS_SPC.A.ADH.4075



Data

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: B. Females Age 40 to 75

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 52 | 60 | 86.7% | 78.1 - 95.3 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 73 | 105 | 69.5% | 60.7 - 78.3 |

Measure Details

Measure Name: Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: B. Females Age 40 to 75

| Measure Identifier: HEDIS_SPC.A.ADH. | | |
|--------------------------------------|--|--|
| Data Source/Type: Administrative | | |
| Measure Relevance: | | |
| Topics: | | |

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

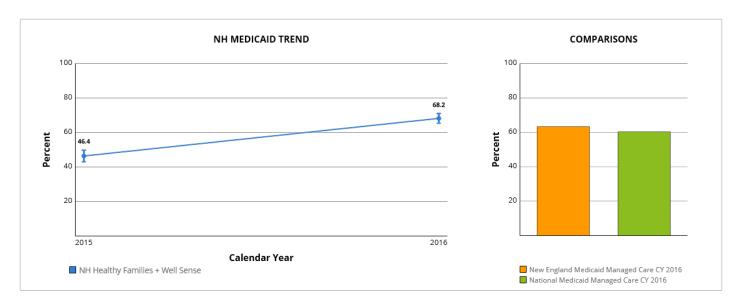
Years: CY 2016Comments:

Statin Therapy for Patients With Diabetes Disease (SPD): Received Statin Therapy

HEDIS® Measurement Definition: The percentage of members age 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

• Received Statin Therapy. Members who were dispensed at least one statin medication of any intensity during the measurement year.

Measure Identifier: HEDIS SPD.A.THR



Data

Statin Therapy for Patients With Diabetes Disease (SPD): Received Statin Therapy

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 395 | 851 | 46.4% | 43.0 - 49.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 717 | 1,052 | 68.2% | 65.4 - 71.0 |

Measure Details

Measure Name: Statin Therapy for Patients With Diabetes Disease (SPD): Received Statin Therapy

Measure Identifier: HEDIS_SPD.A.THR

Data Source/Type: Administrative

Measure Relevance:

Topics: Screenings - Adults, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2014, CY 2016

· Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2014, CY 2016

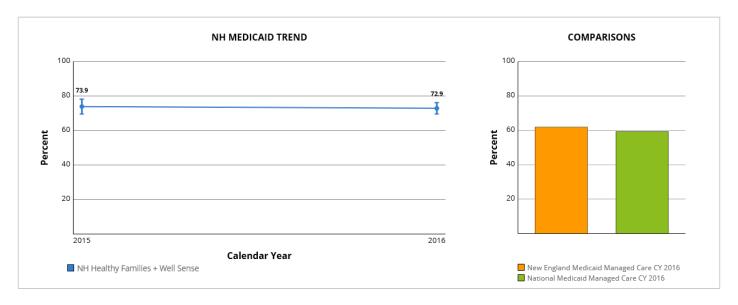
• Comments:

Statin Therapy for Patients With Diabetes Disease (SPD): Statin Adherence 80%

HEDIS® Measurement Definition: The percentage of members age 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and has received the following:

 Received Statin Therapy. Members who remained on statin medication of any intensity for at least 80% of the treatment period.

Measure Identifier: HEDIS_SPD.A.ADH



Data

Statin Therapy for Patients With Diabetes Disease (SPD): Statin Adherence 80%

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 292 | 395 | 73.9% | 69.6 - 78.2 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 523 | 717 | 72.9% | 69.6 - 76.2 |

Measure Details

Measure Name: Statin Therapy for Patients With Diabetes Disease (SPD): Statin Adherence 80%

Measure Identifier: HEDIS_SPD.A.ADH

Data Source/Type: Administrative

Measure Relevance:

Topics: Screenings - Adults, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2014, CY 2016

· Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2014, CY 2016

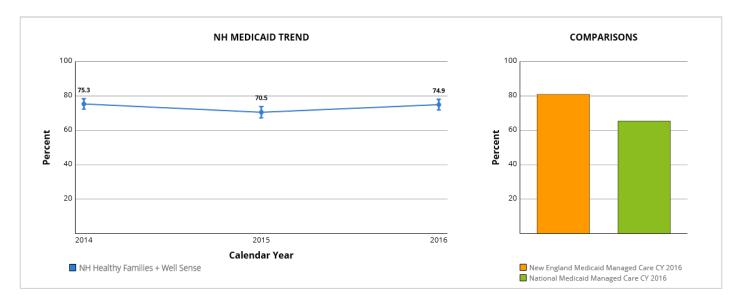
• Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition

HEDIS® Measurement Definition: The percentage of members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

• Counseling for nutrition.

Measure Identifier: HEDIS_WCC.02.H



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 633 | 840 | 75.3% | 72.3 - 78.3 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 556 | 794 | 70.5% | 67.2 - 73.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 596 | 796 | 74.9% | 71.8 - 78.0 |

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition

Measure Identifier: HEDIS_WCC.02.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 3-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for nutrition. The American Academy of Pediatrics (AAP) promotes routine nutritional screening and counseling to promote healthy eating habits for optimal growth and development and obesity prevention. A low or falling rate indicates that children are not being routinely counseled for nutrition and may be at greater risk for overweight conditions. This measure is calculated based on the number of children 3-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for nutrition, divided by the total eligible population, as a percentage.

Topics: Office and Clinic Care - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

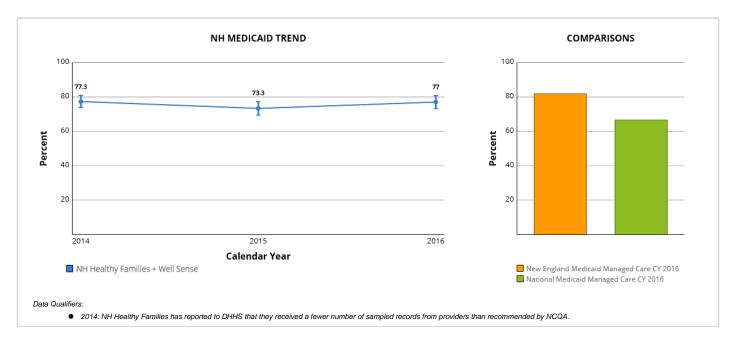
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2014, CY 2015, CY 2016
- · Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: A. Age 3-11 Years

HEDIS® Measurement Definition: The percentage of members 3–11 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

• Counseling for nutrition.

Measure Identifier: HEDIS_WCC.02.H.N311



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: A. Age 3-11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 431 | 558 | 77.3% | 73.8 - 80.8 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 364 | 499 | 73.3% | 69.4 - 77.2 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 385 | 501 | 77.0% | 73.3 - 80.7 |

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: A. Age 3-11 Years

Measure Identifier: HEDIS_WCC.02.H.N311

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2016

• Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2016

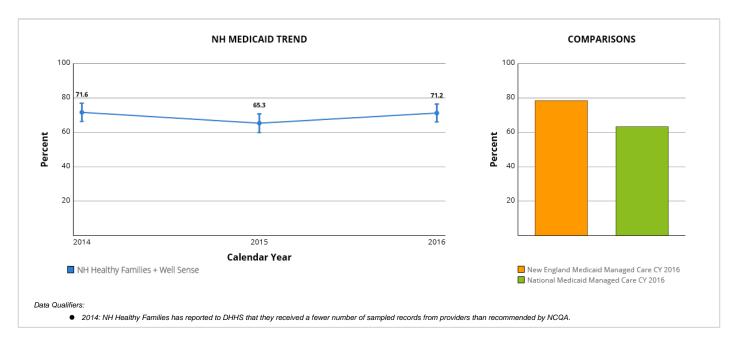
Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: B. Age 12-17 Years

HEDIS® Measurement Definition:The percentage of members 12–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

• Counseling for nutrition.

Measure Identifier: HEDIS_WCC.02.H.N1217



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: B. Age 12-17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 202 | 282 | 71.6% | 66.3 - 76.9 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 192 | 295 | 65.3% | 59.9 - 70.7 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 211 | 295 | 71.2% | 66.0 - 76.4 |

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: B. Age 12-17 Years

Measure Identifier: HEDIS_WCC.02.H.N1217

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2016

• Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2016

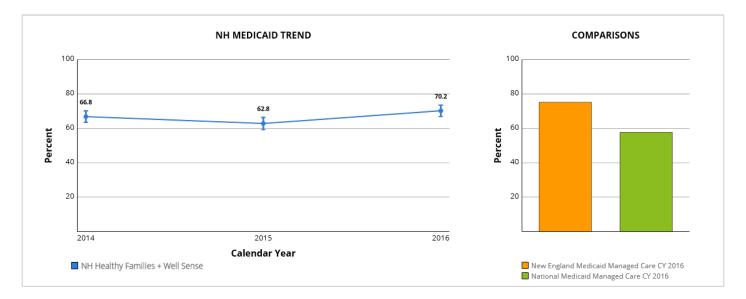
Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity

HEDIS® Measurement Definition: The percentage of members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

Counseling for physical activity.

Measure Identifier: HEDIS_WCC.03.H



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 563 | 840 | 66.8% | 63.5 - 70.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 497 | 794 | 62.8% | 59.3 - 66.3 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 558 | 796 | 70.2% | 66.9 - 73.5 |

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity

Measure Identifier: HEDIS_WCC.03.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 3-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for physical activity. The American Academy of Pediatrics (AAP) promotes routine physical activity counseling to promote a healthy lifestyle. Regular physical activity increases lean body mass, muscle, and bone strength and reduces the risk of obesity. A low or falling rate indicates that children are not being routinely counseled for physical activity as recommended and may be at greater risk for overweight conditions. This measure is calculated based on the number of children 3-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for physical activity, divided by the total eligible population, as a percentage.

Topics: Office and Clinic Care - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2015, CY 2016
- · Comments:

National Medicaid Managed Care

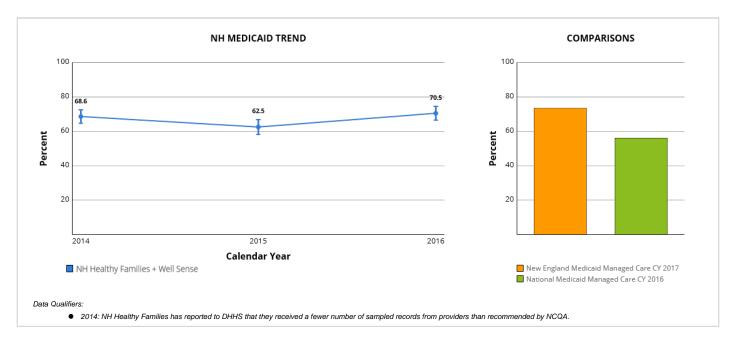
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2014, CY 2015, CY 2016
- · Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: A. Age 3-11 Years

HEDIS® Measurement Definition: The percentage of members 3–11 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

Counseling for physical activity.

Measure Identifier: HEDIS_WCC.03.H.P311



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: A. Age 3-11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 383 | 558 | 68.6% | 64.7 - 72.5 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 310 | 499 | 62.5% | 58.2 - 66.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 352 | 501 | 70.5% | 66.5 - 74.5 |

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: A. Age 3-11 Years

Measure Identifier: HEDIS_WCC.03.H.P311

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 3-11 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for physical activity. The American Academy of Pediatrics (AAP) promotes routine physical activity counseling to promote a healthy lifestyle. Regular physical activity increases lean body mass, muscle, and bone strength and reduces the risk of obesity. A low or falling rate indicates that children are not being routinely counseled for physical activity as recommended and may be at greater risk for overweight conditions. This measure is calculated based on the number of children 3-11 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for physical activity, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2017

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2016

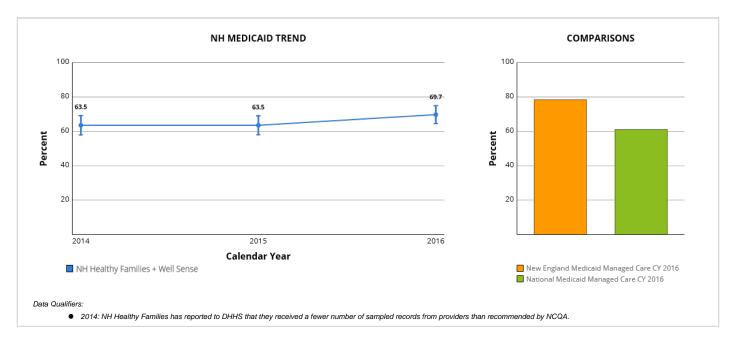
• Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: B. Age 12-17 Years

HEDIS® Measurement Definition: The percentage of members 12–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

Counseling for physical activity.

Measure Identifier: HEDIS_WCC.03.H.P1217



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: B. Age 12-17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 180 | 282 | 63.5% | 57.9 - 69.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 187 | 295 | 63.5% | 58.0 - 69.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 206 | 295 | 69.7% | 64.5 - 74.9 |

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: B. Age 12-17 Years

Measure Identifier: HEDIS_WCC.03.H.P1217

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 12-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for physical activity. The American Academy of Pediatrics (AAP) promotes routine physical activity counseling to promote a healthy lifestyle. Regular physical activity increases lean body mass, muscle, and bone strength and reduces the risk of obesity. A low or falling rate indicates that children are not being routinely counseled for physical activity as recommended and may be at greater risk for overweight conditions. This measure is calculated based on the number of children 12-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of counseling for physical activity, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2016

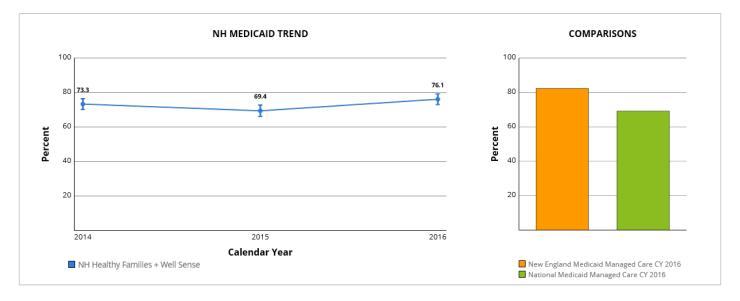
• Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation

HEDIS® Measurement Definition: The percentage of members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

- BMI percentile documentation*.
- * Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.

Measure Identifier: HEDIS_WCC.01.H



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 614 | 840 | 73.3% | 70.2 - 76.4 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 544 | 794 | 69.4% | 66.1 - 72.7 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 601 | 796 | 76.1% | 73.0 - 79.2 |

Measure Details

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation

Measure Identifier: HEDIS_WCC.01.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 3-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of Body Mass Index (BMI) percentile. BMI percentiles are calculated from the Centers of Disease Control and Prevention (CDC) growth charts and assess length and weight measurements based on the age and gender of the child. BMI is a screening tool to track the severity of overweight or obesity. A low or falling rate indicates that children are not being routinely screened for BMI as recommended and this may place the child at greater risk for overweight conditions. This measure is calculated based on the number of children 3-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of Body Mass Index (BMI) percentile, divided by the total eligible population, as a percentage.

Topics: Office and Clinic Care - Children, HEDIS Preventive Care Measures

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA, New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2014, CY 2016
- · Comments:

National Medicaid Managed Care

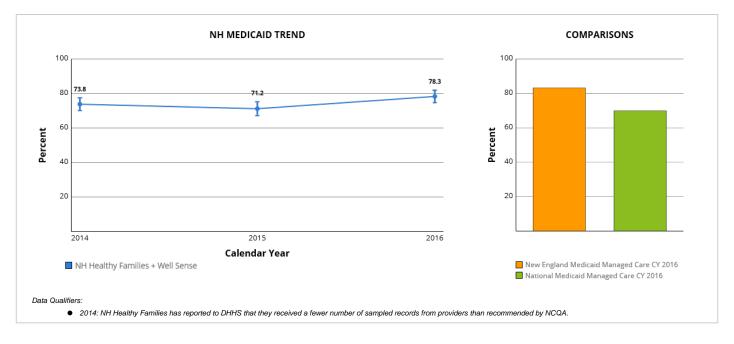
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2014, CY 2015, CY 2016
- · Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: A. Age 3-11 Years

HEDIS® Measurement Definition: The percentage of members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

- BMI percentile documentation*.
- * Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.

Measure Identifier: HEDIS_WCC.01.H.B311



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: A. Age 3-11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 411 | 558 | 73.8% | 70.1 - 77.5 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 351 | 499 | 71.2% | 67.2 - 75.2 |

| TIME PERIOD | DATA | MEASURE | MEASURE | MEASURE | CONFIDENCE |
|-------------------------|--|-----------|-------------|---------|-------------|
| | SUBMITTER | NUMERATOR | DENOMINATOR | RATE | INTERVAL |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 391 | 501 | 78.3% | 74.7 - 81.9 |

Measure Details

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: A. Age 3-11 Years

Measure Identifier: HEDIS_WCC.01.H.B311

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 3-11 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of Body Mass Index (BMI) percentile. BMI percentiles are calculated from the Centers of Disease Control and Prevention (CDC) growth charts and assess length and weight measurements based on the age and gender of the child. BMI is a screening tool to track the severity of overweight or obesity. A low or falling rate indicates that children are not being routinely screened for BMI as recommended and this may place the child at greater risk for overweight conditions. This measure is calculated based on the number of children 3-11 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of Body Mass Index (BMI) percentile, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016Comments:

National Medicaid Managed Care

• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

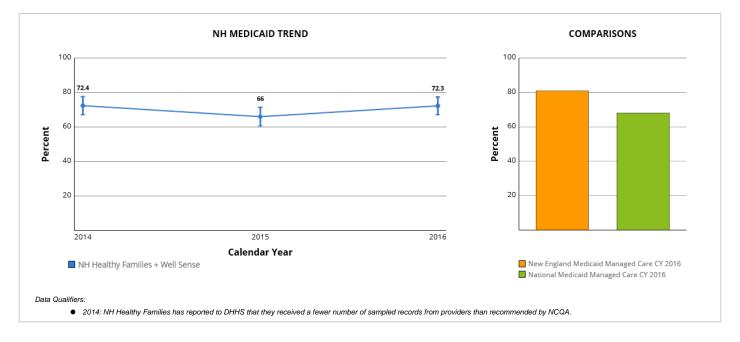
Years: CY 2016Comments:

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: B. Age 12-17 Years

HEDIS® Measurement Definition: The percentage of members 12–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year.

- BMI percentile documentation*.
- * Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.

Measure Identifier: HEDIS_WCC.01.H.B1217



Data

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: B. Age 12-17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 203 | 282 | 72.4% | 67.2 - 77.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 193 | 295 | 66.0% | 60.6 - 71.4 |

| TIME PERIOD | DATA | MEASURE | MEASURE | MEASURE | CONFIDENCE |
|-------------------------|--|-----------|-------------|---------|-------------|
| | SUBMITTER | NUMERATOR | DENOMINATOR | RATE | INTERVAL |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 210 | 295 | 72.3% | 67.2 - 77.4 |

Measure Details

Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: B. Age 12-17 Years

Measure Identifier: HEDIS WCC.01.H.B1217

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 12-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of Body Mass Index (BMI) percentile. BMI percentiles are calculated from the Centers of Disease Control and Prevention (CDC) growth charts and assess length and weight measurements based on the age and gender of the child. BMI is a screening tool to track the severity of overweight or obesity. A low or falling rate indicates that children are not being routinely screened for BMI as recommended and this may place the child at greater risk for overweight conditions. This measure is calculated based on the number of children 12-17 years of age who had an outpatient provider visit with a primary care provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had documentation of Body Mass Index (BMI) percentile, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2016

· Comments:

National Medicaid Managed Care

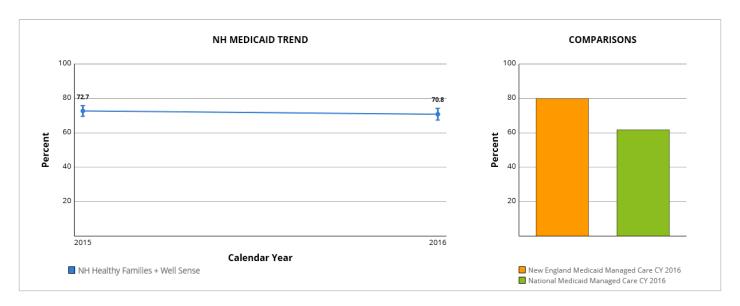
• Data Sources: National Medicaid Managed Care, Quality Compass NCQA

Years: CY 2016Comments:

Well-Child Visits in the First 15 Months of Life (W15, Hybrid Specification): 6 or More Visits

HEDIS® Measurement Definition: The percentage of members who turned 15 months old during the measurement year and who had the following number of well-child visits with a PCP during their first 15 months of life: Six or more well-child visits.

Measure Identifier: HEDIS_W15.07.H



Data

Well-Child Visits in the First 15 Months of Life (W15, Hybrid Specification): 6 or More Visits

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 603 | 836 | 72.7% | 69.6 - 75.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 525 | 741 | 70.8% | 67.4 - 74.2 |

Measure Details

Measure Name: Well-Child Visits in the First 15 Months of Life (W15, Hybrid Specification): 6 or More Visits

Measure Identifier: HEDIS W15.07.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of well-child visits a young child has received by 15 months of age. The American Academy of Pediatrics (AAP) recommends that infants receive at least six well-child visits in their first year of life to assess the growth and development of the infant; provide preventive services, such as immunizations; provide education and guidance to the parents; and to identify areas of concern/abnormalities in a timely manner. A low or falling rate indicates that young children are not being evaluated in a timely manner which may lead to delays in follow-up or treatment and may lead to poorer health outcomes. This measures is calculated based on the number of young children who received 6 or more well child visits their first 15 months of life, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures, Well Care - Children

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2015, CY 2016

• Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

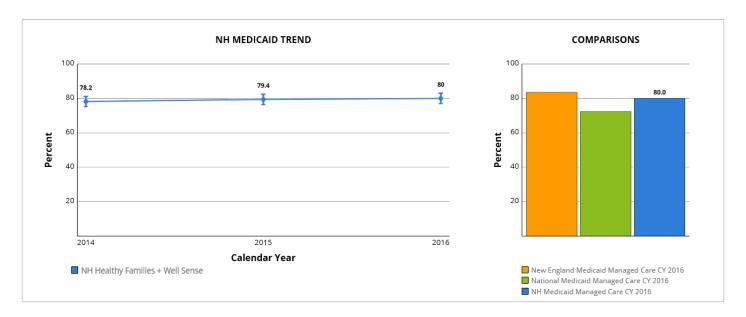
• Years: CY 2015, CY 2016

• Comments:

Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34, Hybrid Specification)

HEDIS® Measurement Definition: The percentage of members 3–6 years of age who had one or more well-child visits with a PCP during the measurement year.

Measure Identifier: HEDIS_W34.H



Data

Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34, Hybrid Specification)

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 640 | 816 | 78.2% | 75.3 - 81.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 569 | 718 | 79.4% | 76.4 - 82.4 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 563 | 698 | 80.0% | 77.0 - 83.0 |

Measure Details

Measure Name: Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34, Hybrid Specification)

Measure Identifier: HEDIS_W34.H

Data Source/Type: Hybrid (Administrative Data and Medical Records)

Measure Relevance:

This measure captures the percent of children 3-6 years of age who had at least one well-child visit in the past year. The American Academy of Pediatrics (AAP) recommends that children 3 through 6 receive at least one well child visit per year to assess the growth and development; provide preventive services and education; and to identify areas of concern in a timely manner. A low or falling rate indicates that children are not being evaluated in a timely manner which may lead to delays in follow-up or treatment and may lead to poorer health outcomes. The measure is calculated based on the number of children 3-6 years of age who received one or more well-child visits during the measurement year, divided by the total eligible population, as a percentage.

Topics: HEDIS Preventive Care Measures, Well Care - Children

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2013, CY 2014, CY 2015, CY 2016
- Comments:

NH Medicaid Managed Care

Data Sources: NH MCM Rate

• Years: CY 2016

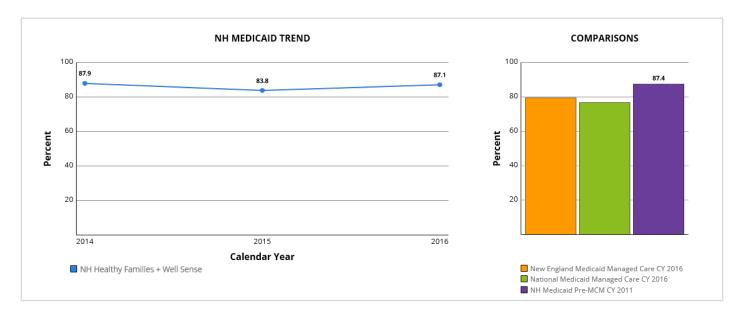
· Comments:

Adults' Access to Preventive/Ambulatory Health Services (AAP): A: Age 20-44 Years

HEDIS® Measurement Definition: The percentage of members 20-44 years old who had an ambulatory or preventive care visit. The organization reports three separate percentages for each product line.

• Medicaid members who had an ambulatory or preventive care visit during the measurement year.

Measure Identifier: HEDIS_AAP.A.2044



Data

Adults' Access to Preventive/Ambulatory Health Services (AAP): A: Age 20-44 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 6,594 | 7,505 | 87.9% | 87.2 - 88.6 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 19,674 | 23,472 | 83.8% | 83.3 - 84.3 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 9,192 | 10,558 | 87.1% | 86.5 - 87.7 |

Measure Details

Measure Name: Adults' Access to Preventive/Ambulatory Health Services (AAP): A: Age 20-44

Years

Measure Identifier: HEDIS_AAP.A.2044

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 20-44 years of age who had an outpatient or preventive care visit in the past year. Routine care is important to monitor the health status of adults, provide preventive services, provide patient education, and to identify areas of concern in a timely manner. A low or falling rate indicates that adults are not accessing routine care, which may lead to poorer health outcomes. The measure is reported as the number of adults 20-44 years of age who received one or more outpatient or preventive care visits during the measurement year, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

NH Medicaid Pre-MCM

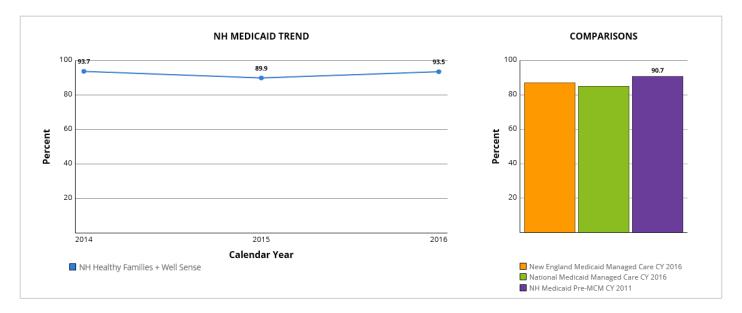
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2011
- · Comments:

Adults' Access to Preventive/Ambulatory Health Services (AAP): B: Age 45-64 Years

HEDIS® Measurement Definition: The percentage of members 45-64 years old who had an ambulatory or preventive care visit. The organization reports three separate percentages for each product line.

• Medicaid members who had an ambulatory or preventive care visit during the measurement year.

Measure Identifier: HEDIS_AAP.A.4564



Data

Adults' Access to Preventive/Ambulatory Health Services (AAP): B: Age 45-64 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 4,007 | 4,276 | 93.7% | 93.0 - 94.4 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 11,942 | 13,284 | 89.9% | 89.4 - 90.4 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 5,558 | 5,942 | 93.5% | 92.9 - 94.1 |

Measure Details

Measure Name: Adults' Access to Preventive/Ambulatory Health Services (AAP): B: Age 45-64

Years

Measure Identifier: HEDIS_AAP.A.4564

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 45-64 years of age who had an outpatient or preventive care visit in the past year. Routine care is important to monitor the health status of adults, provide preventive services, provide patient education, and to identify areas of concern in a timely manner. A low or falling rate indicates that adults are not accessing routine care, which may lead to poorer health outcomes. The measure is reported as the number of adults 45-64 years of age who received one or more outpatient or preventive care visits during the measurement year, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2015, CY 2016
- Comments:

National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

NH Medicaid Pre-MCM

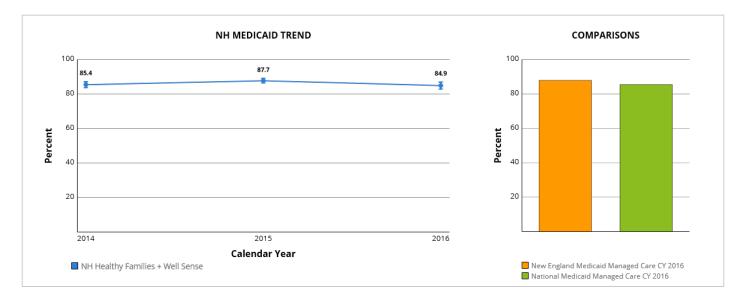
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2011
- · Comments:

Adults' Access to Preventive/Ambulatory Health Services (AAP): C. Age 65+ Years

HEDIS® Measurement Definition: The percentage of members 65 years and older who had an ambulatory or preventive care visit. The organization reports three separate percentages for each product line.

• Medicaid and Medicare members who had an ambulatory or preventive care visit during the measurement year.

Measure Identifier: HEDIS AAP.A.65



Data

Adults' Access to Preventive/Ambulatory Health Services (AAP): C. Age 65+ Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 1,377 | 1,613 | 85.4% | 83.7 - 87.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 2,246 | 2,561 | 87.7% | 86.4 - 89.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 1,055 | 1,242 | 84.9% | 82.9 - 86.9 |

Measure Details

Measure Name: Adults' Access to Preventive/Ambulatory Health Services (AAP): C. Age 65+

Years

Measure Identifier: HEDIS_AAP.A.65

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 65 years of age and older who had an outpatient or preventive care visit in the past year. Routine care is important to monitor the health status of adults, provide preventive services, provide patient education, and to identify areas of concern in a timely manner. A low or falling rate indicates that elderly adults are not accessing routine care, which may lead to poorer health outcomes. The measure is reported as the number of adults 65 years of age and older who received one or more outpatient or preventive care visits during the measurement year, divided by the total eligible population, as a percentage.

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

• Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

Years: CY 2015, CY 2016

Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

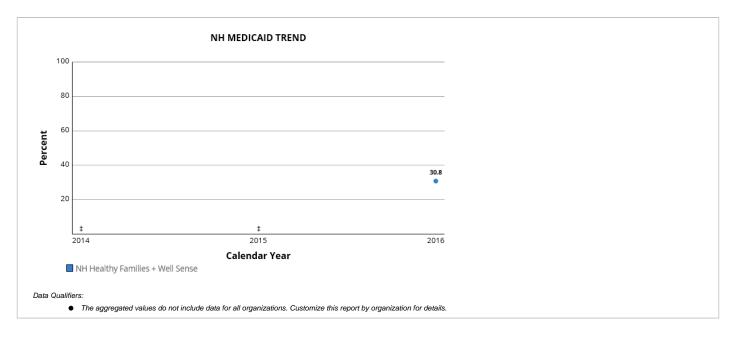
• Years: CY 2015. CY 2016

• Comments:

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): A. Age 1-5 Years

HEDIS® Measurement Definition: The percentage of children 1–5 years of age who had two or more antipsychotic prescriptions and had metabolic testing.

Measure Identifier: HEDIS_APM.A.15



Data

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): A. Age 1-5 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 0 | 4 | ‡ | ‡ |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 0 | 25 | ‡ | ‡ |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 8 | 26 | 30.8% | ‡ |

[‡] Data has been suppressed due to small sample size.

Measure Details

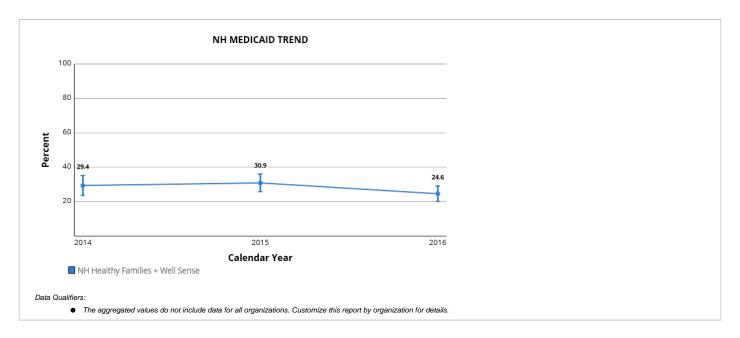
Topics:

| Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): A. Age 1-5 Years |
|---|
| Measure Identifier: HEDIS_APM.A.15 |
| Data Source/Type: Administrative |
| Measure Relevance: |
| This measure captures the percent of children 1-5 years of age who are taking two or more antipsychotic medications and had metabolic testing. Some people who take antipsychotic medication gain weight and being overweight places them at a higher risk for developing diabetes over time. A low or falling rate may indicate that children taking antipsychotic medications are not being routinely screened for diabetes and this may lead to an increase in undiagnosed diabetes. This measure captures the number of children 1-5 years of age who are taking two or more antipsychotic medications and had metabolic testing, divided by the total eligible population, as a percentage |

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): B. Age 6-11 Years

HEDIS® Measurement Definition: The percentage of children 6-11 years of age who had two or more antipsychotic prescriptions and had metabolic testing.

Measure Identifier: HEDIS_APM.A.611



Data

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): B. Age 6-11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 70 | 238 | 29.4% | 23.6 - 35.2 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 98 | 317 | 30.9% | 25.8 - 36.0 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 86 | 349 | 24.6% | 20.1 - 29.1 |

Measure Details

Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): B. Age 6-11 Years

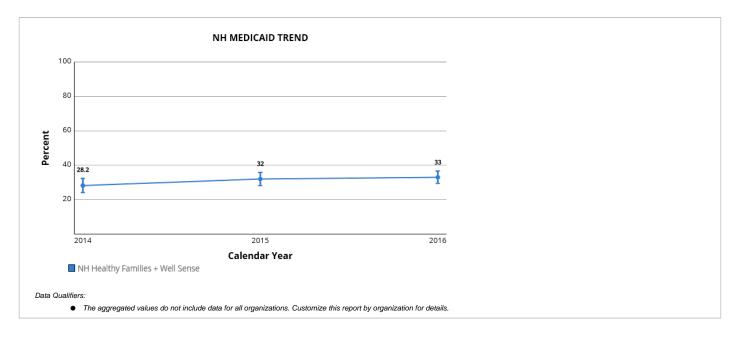
| Data Source/Type: Administrative |
|--|
| Measure Relevance: |
| This measure captures the percent of children 6-11 years of age who are taking two or more antipsychotic medications and had metabolic testing. Some people who take antipsychotic medication gain weight and being overweight places them at a higher risk for developing diabetes over time. A low or falling rate may indicate that children taking antipsychotic medications are not being routinely screened for diabetes and this may lead to an increase in undiagnosed diabetes. This measure captures the number of children 6-11 years of age who taking two or more antipsychotic medications and had metabolic testing, divided by the total eligible population, as a percentage. |
| Topics: |

Measure Identifier: HEDIS_APM.A.611

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): C. Age 12-17 Years

HEDIS® Measurement Definition: The percentage of adolescents 12–17 years of age who had two or more antipsychotic prescriptions and had metabolic testing.

Measure Identifier: HEDIS_APM.A.1217



Data

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): C. Age 12-17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 128 | 454 | 28.2% | 24.1 - 32.3 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 187 | 584 | 32.0% | 28.2 - 35.8 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 218 | 660 | 33.0% | 29.4 - 36.6 |

Measure Details

Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): C. Age 12-17 Years

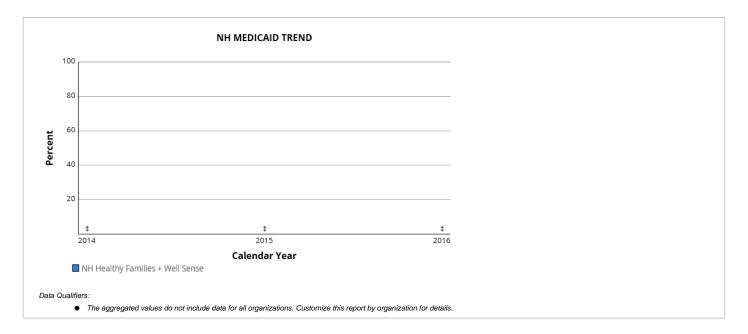
| Data Source/Type: Administrative |
|---|
| Measure Relevance: |
| This measure captures the percent of children 12-17 years of age who are taking two or more antipsychotic medications and had metabolic testing. Some people who take antipsychotic medication gain weight and being overweight places them at a higher risk for developing diabetes over time. A low or falling rate may indicate that children taking antipsychotic medications are not being routinely screened for diabetes and this may lead to an increase in undiagnosed diabetes. This measure captures the number of children 12-17 years of age who taking two or more antipsychotic medications and had metabolic testing, divided by the total eligible population, as a percentage |
| Topics: |

Measure Identifier: HEDIS_APM.A.1217

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): A. Age 1-5 Years

HEDIS® Measurement Definition: The percentage of children and adolescents 1–5 years of age who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.

Measure Identifier: HEDIS_APP.A.15



Data

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): A. Age 1-5 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | ‡ | 4 | ‡ | ‡ |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 7 | 14 | ‡ | ‡ |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | ‡ | 11 | ‡ | ‡ |

[‡] Data has been suppressed due to small sample size.

Measure Details

Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): A. Age 1-5 Years

Measure Identifier: HEDIS_APP.A.15

Data Source/Type: Administrative

Measure Relevance:

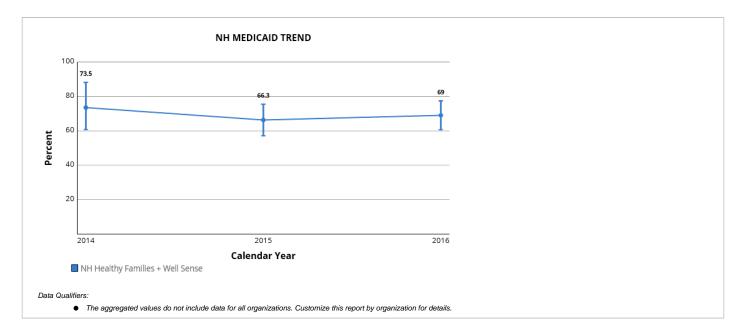
This measure captures the percent of children 1-5 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care as the first-line treatment. Psychosocial care provides a whole person approach to an individual and looks at the overall well-being of the patient; mentally, physically, and socially. A low or falling rate indicates that children received antipsychotic medication without receiving psychosocial care as the first-line treatment and this may lead to the overuse of medication. This measure is reported as the number of children 1-5 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care prior as the first-line treatment, divided by the total eligible population, as a percentage.

| Topics: | |
|---------|--|
| | |

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): B. Age 6-11 Years

HEDIS® Measurement Definition: The percentage of children and adolescents 6-11 years of age who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.

Measure Identifier: HEDIS_APP.A.611



Data

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): B. Age 6-11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 25 | 34 | 73.5% | 60.7 - 88.1 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 67 | 101 | 66.3% | 57.1 - 75.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 80 | 116 | 69.0% | 60.6 - 77.4 |

Measure Details

Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on

Antipsychotics (APP): B. Age 6-11 Years

Measure Identifier: HEDIS_APP.A.611

Data Source/Type: Administrative

Measure Relevance:

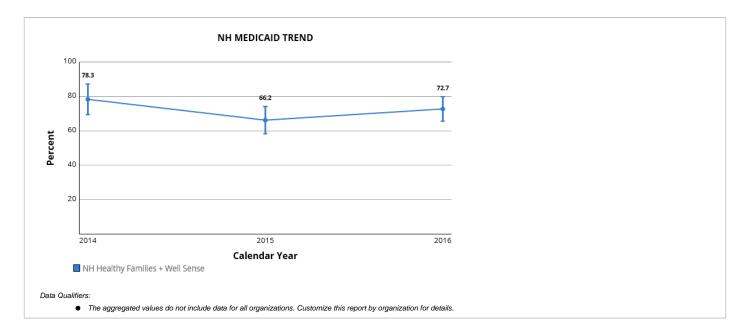
This measure captures the percent of children 6-11 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care as the first-line treatment. Psychosocial care provides a whole person approach to an individual and looks at the overall well-being of the patient; mentally, physically, and socially. A low or falling rate indicates that children received antipsychotic medication without receiving psychosocial care as the first-line treatment and this may lead to the overuse of medication. This measure is reported as the number of children 6-11 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care prior as the first-line treatment, divided by the total eligible population, as a percentage.

| Topics: | |
|---------|--|
|---------|--|

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): C. Age 12-17 Years

HEDIS® Measurement Definition: The percentage of children and adolescents 12–17 years of age who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.

Measure Identifier: HEDIS_APP.A.1217



Data

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): C. Age 12-17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2014-01-01 - 2014-12-31 | NH Healthy Families + Well Sense | 65 | 83 | 78.3% | 69.4 - 87.2 |
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 92 | 139 | 66.2% | 58.3 - 74.1 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 109 | 150 | 72.7% | 65.6 - 79.8 |

Measure Details

Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on

Antipsychotics (APP): C. Age 12-17 Years Measure Identifier: HEDIS_APP.A.1217

Data Source/Type: Administrative

Measure Relevance:

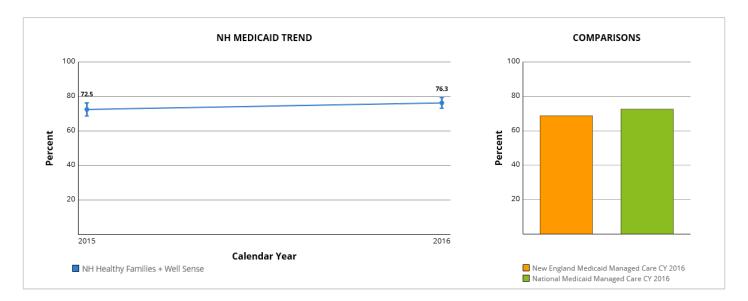
This measure captures the percent of children 12-17 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care as the first-line treatment. Psychosocial care provides a whole person approach to an individual and looks at the overall well-being of the patient; mentally, physically, and socially. A low or falling rate indicates that children received antipsychotic medication without receiving psychosocial care as the first-line treatment and this may lead to the overuse of medication. This measure is reported as the number of children 12-17 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care prior as the first-line treatment, divided by the total eligible population, as a percentage.

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Asthma Medication Ratio (AMR): A. Age 5 to 11 Years

HEDIS® Measurement Definition: The percentage of members 5-11 years of age who were identified as having persistent asthma and had a ratio of controller medcations to total asthma medications of 0.50 or grater during the measurement year.

Measure Identifier: HEDIS_AMR.A.0511



Data

Asthma Medication Ratio (AMR): A. Age 5 to 11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 375 | 517 | 72.5% | 68.7 - 76.3 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 557 | 730 | 76.3% | 73.2 - 79.4 |

Measure Details

Measure Name: Asthma Medication Ratio (AMR): A. Age 5 to 11 Years

Measure Identifier: HEDIS_AMR.A.0511

Data Source/Type: Administrative

Measure Relevance:

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2015, CY 2016
- Comments:

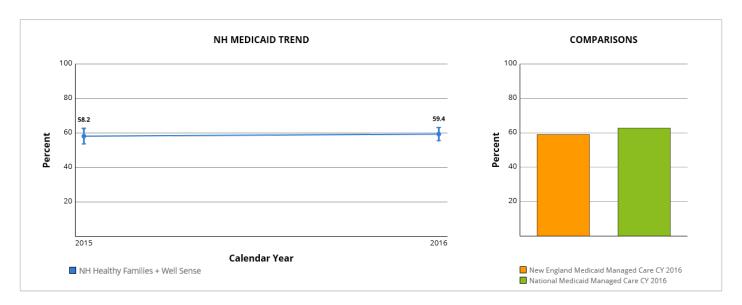
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

Asthma Medication Ratio (AMR): B. Age 12 to 18 Years

HEDIS® Measurement Definition: The percentage of members 12-18 years of age who were identified as having persistent asthma and had a ratio of controller medcations to total asthma medications of 0.50 or grater during the measurement year.

Measure Identifier: HEDIS_AMR.A.1218



Data

Asthma Medication Ratio (AMR): B. Age 12 to 18 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 270 | 464 | 58.2% | 53.7 - 62.7 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 376 | 633 | 59.4% | 55.6 - 63.2 |

Measure Details

Measure Name: Asthma Medication Ratio (AMR): B. Age 12 to 18 Years

Measure Identifier: HEDIS_AMR.A.1218

Data Source/Type: Administrative

Measure Relevance:

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2015, CY 2016
- Comments:

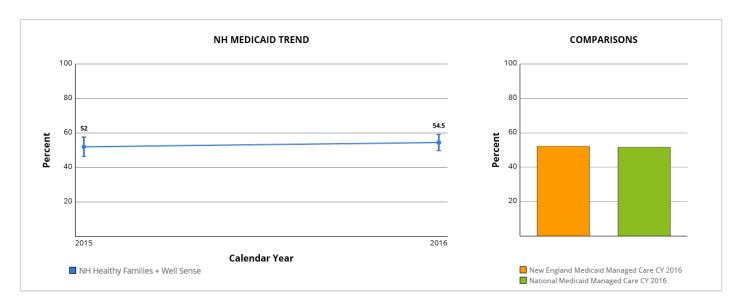
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

Asthma Medication Ratio (AMR): C. Age 19 to 50 Years

HEDIS® Measurement Definition: The percentage of members 19-50 years of age who were identified as having persistent asthma and had a ratio of controller medcations to total asthma medications of 0.50 or grater during the measurement year.

Measure Identifier: HEDIS_AMR.A.1950



Data

Asthma Medication Ratio (AMR): C. Age 19 to 50 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 159 | 306 | 52.0% | 46.4 - 57.6 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 234 | 429 | 54.5% | 49.8 - 59.2 |

Measure Details

Measure Name: Asthma Medication Ratio (AMR): C. Age 19 to 50 Years

Measure Identifier: HEDIS_AMR.A.1950

Data Source/Type: Administrative

Measure Relevance:

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2015, CY 2016
- Comments:

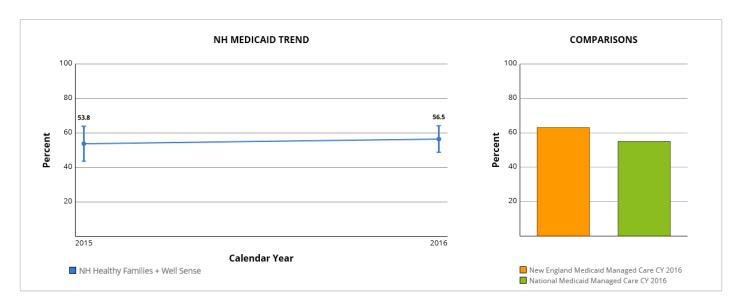
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

Asthma Medication Ratio (AMR): D. Age 51 to 64 Years

HEDIS® Measurement Definition: The percentage of members 51-64 years of age who were identified as having persistent asthma and had a ratio of controller medcations to total asthma medications of 0.50 or grater during the measurement year.

Measure Identifier: HEDIS_AMR.A.5164



Data

Asthma Medication Ratio (AMR): D. Age 51 to 64 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 50 | 93 | 53.8% | 43.7 - 63.9 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 91 | 161 | 56.5% | 48.8 - 64.2 |

Measure Details

Measure Name: Asthma Medication Ratio (AMR): D. Age 51 to 64 Years

Measure Identifier: HEDIS_AMR.A.5164

Data Source/Type: Administrative

Measure Relevance:

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2015, CY 2016
- Comments:

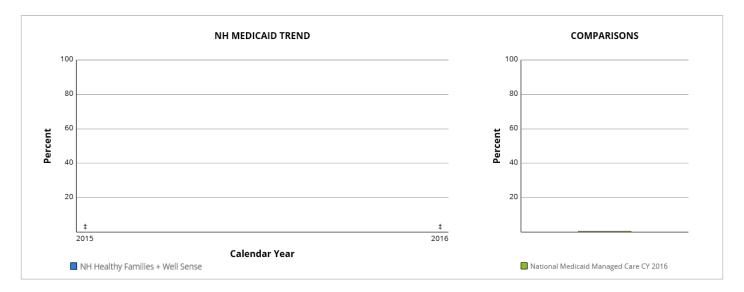
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): A. Age 1-5 Years

HEDIS® Measurement Definition: The percentage of children 1–5 years of age who were on two or more concurrent antipsychotic medications.

Measure Identifier: HEDIS_APC.A.0105



Data

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): A. Age 1-5 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 0 | 15 | ‡ | ‡ |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 0 | 20 | ‡ | ‡ |

[‡] Data has been suppressed due to small sample size.

Measure Details

Measure Name: Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): A. Age 1-5 Years

Measure Identifier: HEDIS_APC.A.0105

| ata Source/Type: Administrative | |
|---------------------------------|--|
| leasure Relevance: | |
| opics: | |
| | |

Comparison Rate Comparison Data

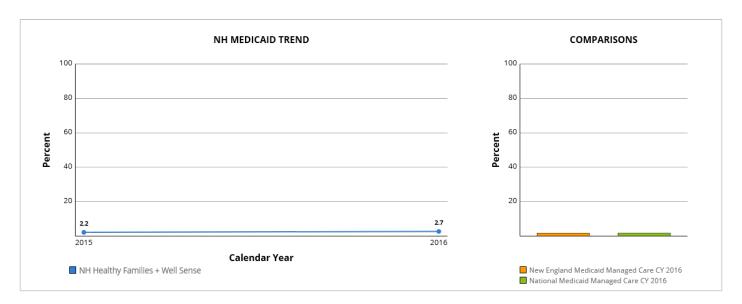
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): B. Age 6-11 Years

HEDIS® Measurement Definition: The percentage of children 6–11 years of age who were on two or more concurrent antipsychotic medications.

Measure Identifier: HEDIS APC.A.0611



Data

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): B. Age 6-11 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 6 | 269 | 2.2% | ‡ |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 8 | 293 | 2.7% | ‡ |

Measure Details

Measure Name: Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): B. Age 6-11 Years

Measure Identifier: HEDIS APC.A.0611

Data Source/Type: Administrative

Measure Relevance:

Comparison Rate Comparison Data

New England Medicaid Managed Care

- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
- Years: CY 2015, CY 2016
- Comments:

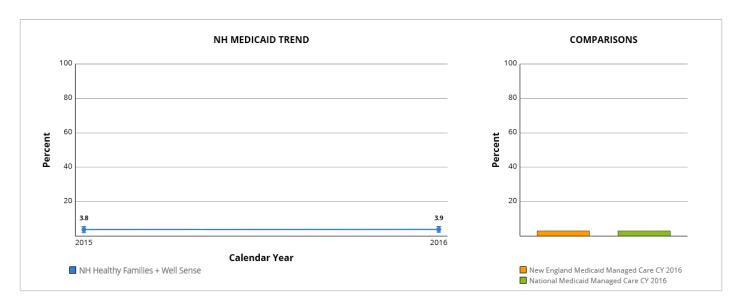
National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): C. Age 12-17 Years

HEDIS® Measurement Definition: The percentage of children 12–17 years of age who were on two or more concurrent antipsychotic medications.

Measure Identifier: HEDIS APC.A.1217



Data

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): C. Age 12-17 Years

| TIME PERIOD | DATA SUBMITTER | MEASURE NUMERATOR | MEASURE DENOMINATOR | MEASURE RATE | CONFIDENCE INTERVAL |
|-------------------------|--|----------------------|------------------------|-----------------|------------------------|
| 2015-01-01 - 2015-12-31 | NH Healthy Families + Well Sense | 19 | 501 | 3.8% | 2.1 - 5.5 |
| 2016-01-01 - 2016-12-31 | NH Healthy Families + Well Sense | 22 | 560 | 3.9% | 2.3 - 5.5 |

Measure Details

Measure Name: Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): C. Age 12-17 Years

Measure Identifier: HEDIS APC.A.1217

Data Source/Type: Administrative

Measure Relevance:

Comparison Rate Comparison Data

New England Medicaid Managed Care

Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA

• Years: CY 2016

· Comments:

National Medicaid Managed Care

Data Sources: National Medicaid Managed Care, Quality Compass NCQA

• Years: CY 2016

Comments:

REPORT DETAILS

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Measures:

Adolescent Well-Care Visits (AWC, Hybrid Specification),

Adult BMI Assessment (ABA, Administrative Specification),

Adult BMI Assessment (ABA, Hybrid Specification),

Cervical Cancer Screening (CCS, Hybrid Specification),

Childhood Immunization Status (CIS, Hybrid Specification): Combination 10,

Childhood Immunization Status (CIS, Hybrid Specification): Combination 2,

Childhood Immunization Status (CIS, Hybrid Specification): DTaP,

Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis A,

Childhood Immunization Status (CIS, Hybrid Specification): Hepatitis B,

Childhood Immunization Status (CIS, Hybrid Specification): HiB,

Childhood Immunization Status (CIS, Hybrid Specification): IPV,

Childhood Immunization Status (CIS, Hybrid Specification): Influenza,

Childhood Immunization Status (CIS, Hybrid Specification): MMR,

Childhood Immunization Status (CIS, Hybrid Specification): PCV,

Childhood Immunization Status (CIS, Hybrid Specification): Rotavirus,

Childhood Immunization Status (CIS, Hybrid Specification): VZV,

Chlamydia Screening in Women (CHL, Administrative Specification),

Chlamydia Screening in Women (CHL, Administrative Specification): A. Age 16-20 Years,

Chlamydia Screening in Women (CHL, Administrative Specification): B. Age 21-24 Years,

Engagement of Alcohol and Other Drug Dependence Treatment (IET),

Engagement of Alcohol and Other Drug Dependence Treatment (IET): A. Age 13 to 17 Years,

Engagement of Alcohol and Other Drug Dependence Treatment (IET): B. Age 18+ Years,

Frequency of Ongoing Prenatal Care (FPC, Hybrid Specification): 81+ Percent,

Immunizations for Adolescents (IMA, Hybrid Specification): Combination 1,

Immunizations for Adolescents (IMA, Hybrid Specification): Meningococcal Vaccine,

Immunizations for Adolescents (IMA, Hybrid Specification): Tdap/Td Vaccine,

Initiation of Alcohol and Other Drug Dependence Treatment (IET),

Initiation of Alcohol and Other Drug Dependence Treatment (IET): A. Age 13 to 17 Years,

Initiation of Alcohol and Other Drug Dependence Treatment (IET): B. Age 18+ Years,

Lead Screening in Children (LSC, Statewide Rate),

Medication Management for People With Asthma (MMA): Medication Compliance 75%,

Medication Management for People With Asthma (MMA): Medication Compliance 75%: A. Age 5 to 11 Years,

Medication Management for People With Asthma (MMA): Medication Compliance 75%: B. Age 12 to 18 Years,

Medication Management for People With Asthma (MMA): Medication Compliance 75%: C. Age 19 to 50 Years,

Medication Management for People With Asthma (MMA): Medication Compliance 75%: D. Age 51 to 64 Years,

Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS),

Prenatal and Postpartum Care (PPC, Hybrid Specification): Postpartum Care,

Prenatal and Postpartum Care (PPC, Hybrid Specification): Timeliness of Prenatal Care,

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy,

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: A. Males Age 21 to 75,

Statin Therapy for Patients With Cardiovascular Disease (SPC): Received Statin Therapy: B. Females Age 40 to 75,

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%,

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: A. Males Age 21 to 75,

Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: B. Females Age 40 to 75,

Statin Therapy for Patients With Diabetes Disease (SPD): Received Statin Therapy,

Statin Therapy for Patients With Diabetes Disease (SPD): Statin Adherence 80%,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: A. Age 3-11 Years,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Nutrition: B. Age 12-17 Years,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: A. Age 3-11 Years,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Counseling for Physical Activity: B. Age 12-17 Years,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: A. Age 3-11 Years,

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: B. Age 12-17 Years,

Well-Child Visits in the First 15 Months of Life (W15, Hybrid Specification): 6 or More Visits,

Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34, Hybrid Specification),

Adults' Access to Preventive/Ambulatory Health Services (AAP): A: Age 20-44 Years,

Adults' Access to Preventive/Ambulatory Health Services (AAP): B: Age 45-64 Years,

Adults' Access to Preventive/Ambulatory Health Services (AAP): C. Age 65+ Years,

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): A. Age 1-5 Years,

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): B. Age 6-11 Years,

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): C. Age 12-17 Years,

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): A. Age 1-5 Years,

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): B. Age 6-11 Years,

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): C. Age 12-17 Years,

Asthma Medication Ratio (AMR): A. Age 5 to 11 Years,

Asthma Medication Ratio (AMR): B. Age 12 to 18 Years,

Asthma Medication Ratio (AMR): C. Age 19 to 50 Years,

Asthma Medication Ratio (AMR): D. Age 51 to 64 Years,

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): A. Age 1-5 Years,

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): B. Age 6-11 Years,

Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC): C. Age 12-17 Years

Max Time Periods: 5

Organizations: Medicaid Care Management: NH Healthy Families, Medicaid Care Management: Well Sense (aggregated)

Data Publish Statuses: Published

Data has been suppressed due to small sample size.

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