



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 Acute and Chronic Care Chart Book*

Prepared by Office of Quality Assurance and Improvement
NH Department of Health and Human Services (DHHS)
Publication Date: 11/22/2017

*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 Acute and Chronic Care Chart Book

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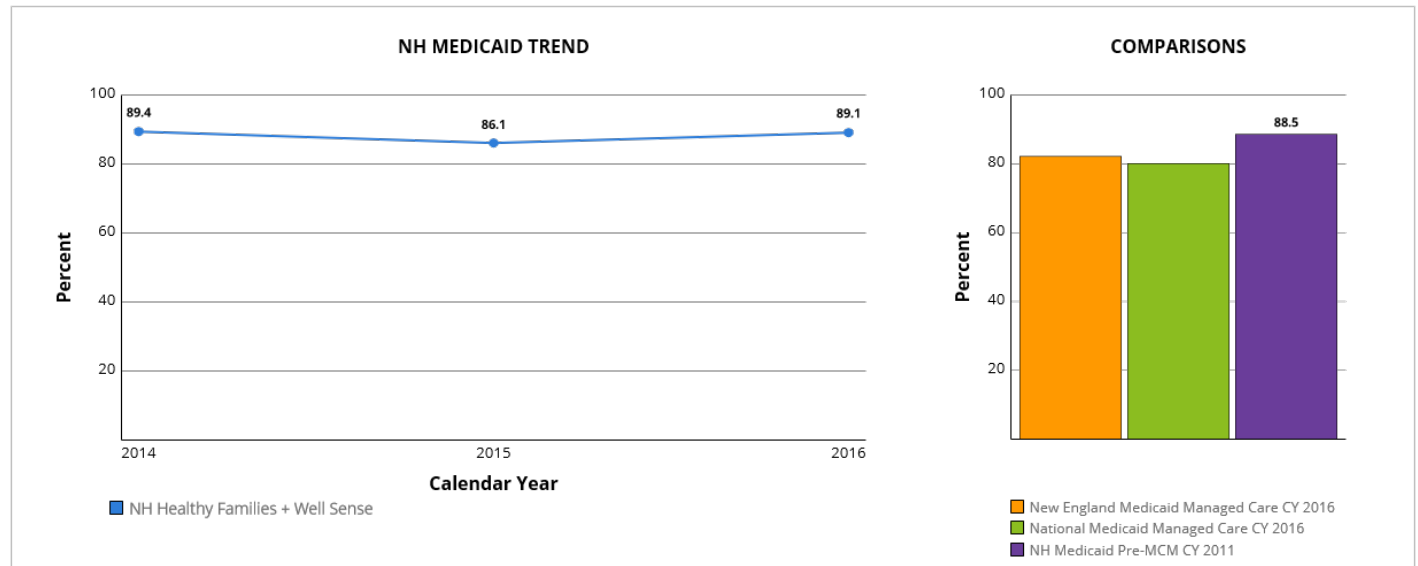
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- Medication Management for People With Asthma (MMA): Medication Compliance 50%: B. Age 12 to 18 Years
- Medication Management for People With Asthma (MMA): Medication Compliance 50%: C. Age 19 to 50 Years
- Medication Management for People With Asthma (MMA): Medication Compliance 50%: D. Age 51 to 64 Years
- 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
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Adults' Access to Preventive/Ambulatory Health Services (AAP)

HEDIS® Measurement Definition: The percentage of members 20 years and older 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



Data

Adults' Access to Preventive/Ambulatory Health Services (AAP)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	11,978	13,394	89.4%	88.9 - 89.9
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	33,862	39,317	86.1%	85.8 - 86.4
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	15,805	17,742	89.1%	88.6 - 89.6

Measure Details

Measure Name: **Adults' Access to Preventive/Ambulatory Health Services (AAP)**

Measure Identifier: HEDIS_AAP.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 20 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 adults are not accessing routine care, which may lead to poorer health outcomes. The measure is reported as the number of adults 20 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: [HEDIS Acute and Chronic 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:
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National Medicaid Managed Care

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

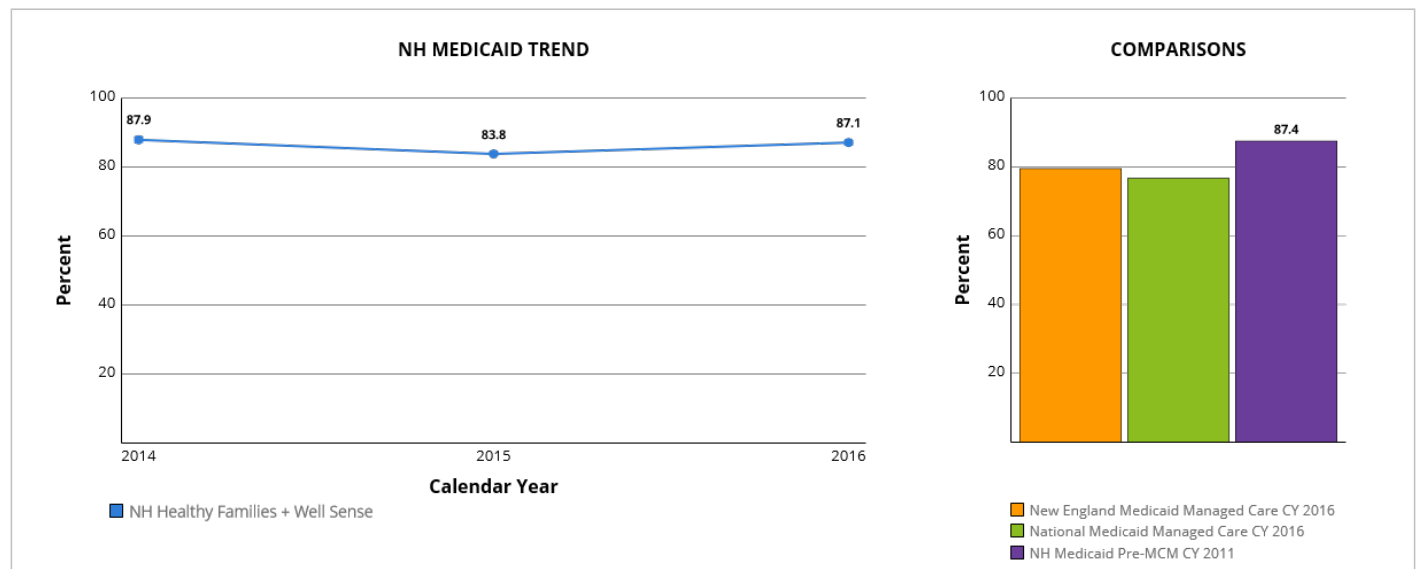
- Data Sources: Fee for Service (Pre-Managed Care)
 - Years: CY 2010, CY 2011
 - Comments:
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Adults' Access to Preventive/Ambulatory Health Services (AAP): A: Age 20-44 Years

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

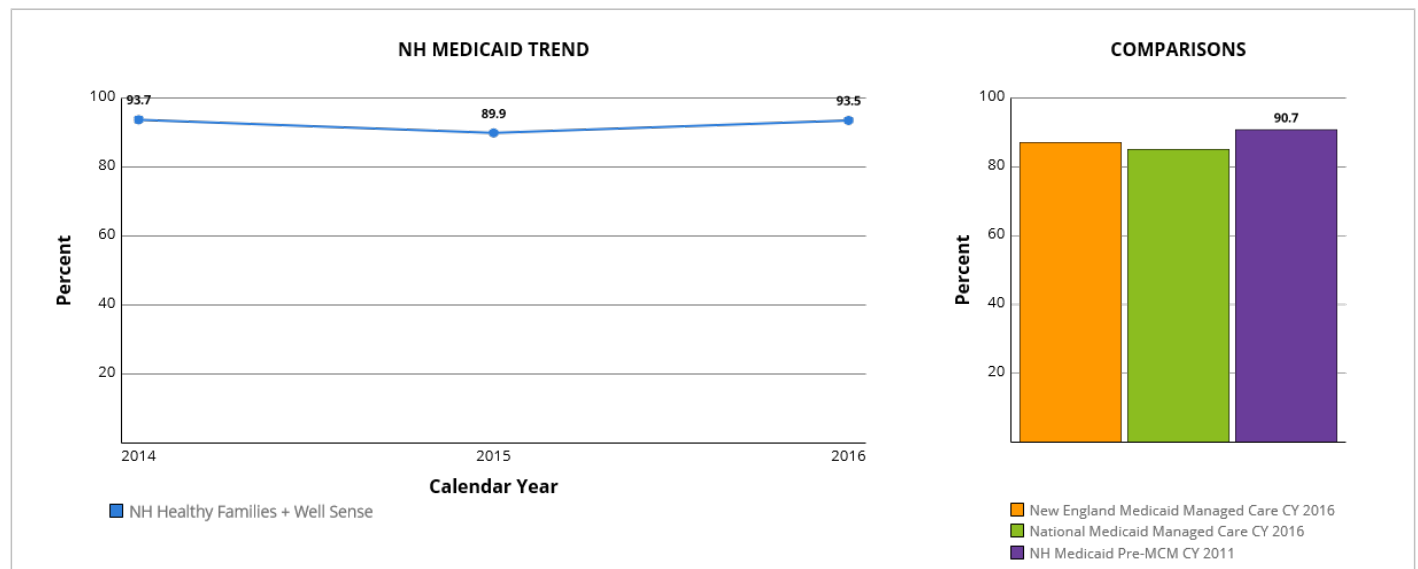
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2011
- Comments:

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

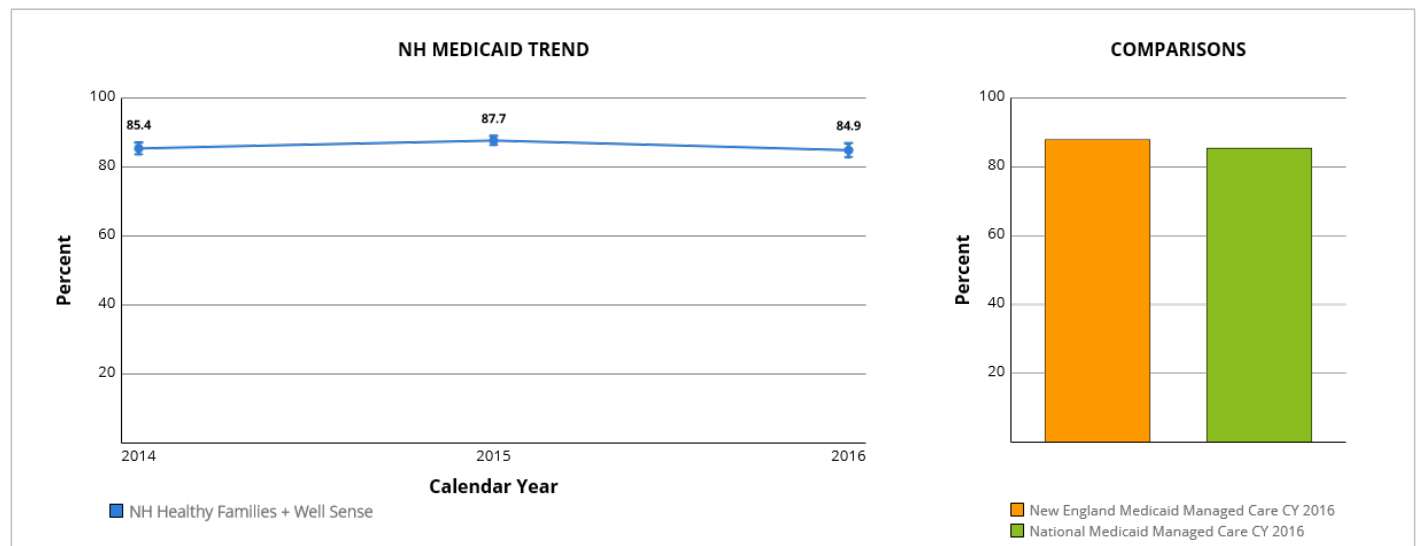
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2011
- Comments:

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

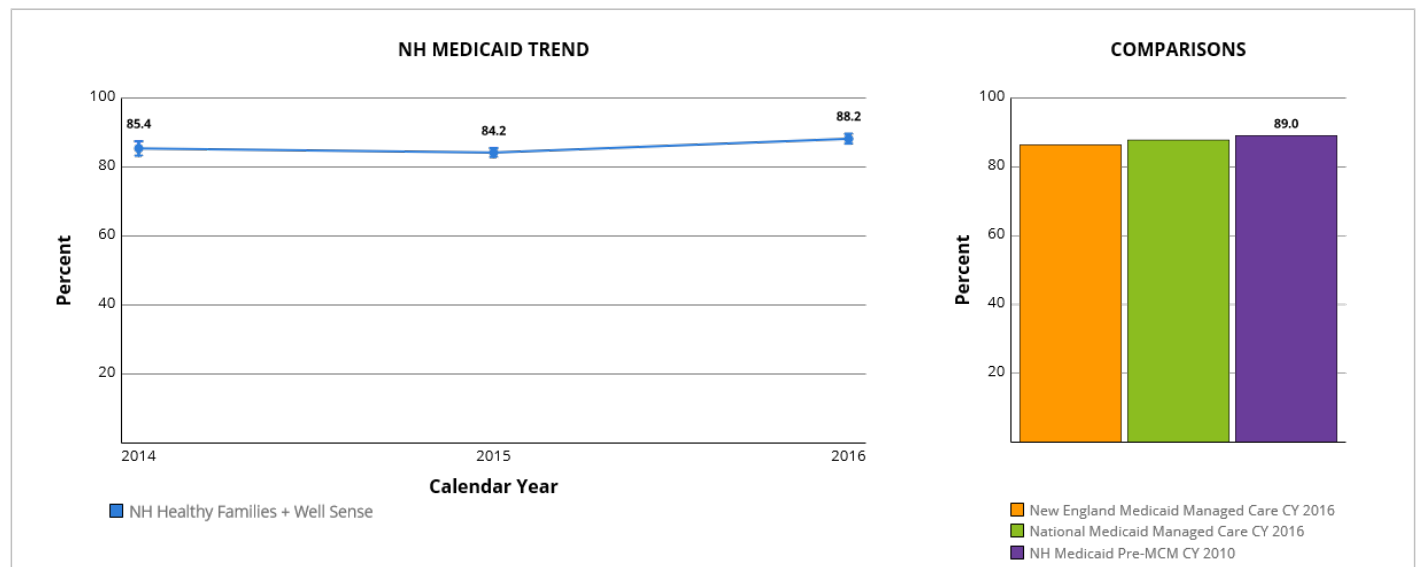
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

Annual Monitoring for Patients on Persistent Medications (MPM): ACE Inhibitors or ARBs

HEDIS® Measurement Definition: The percentage of members 18 years of age and older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least one therapeutic monitoring event for the therapeutic agent in the measurement year. For each product line, report each of the three rates separately.

- Annual monitoring for members on angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blockers (ARB).

Measure Identifier: HEDIS_MPM.01.A



Data

Annual Monitoring for Patients on Persistent Medications (MPM): ACE Inhibitors or ARBs

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	962	1,127	85.4%	83.3 - 87.5
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	2,621	3,111	84.2%	82.9 - 85.5
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	1,798	2,039	88.2%	86.8 - 89.6

Measure Details

Measure Name: **Annual Monitoring for Patients on Persistent Medications (MPM): ACE Inhibitors or ARBs**

Measure Identifier: HEDIS_MPM.01.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 18 year of age and older who, in the past year, took at least 180 treatment days of an angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blocker (ARB) medication and had at least one monitoring event that included a serum potassium and a serum creatinine test. Members on long-term ACE inhibitors or ARB medication should be monitored by the prescribing physician to assess for side-effects and to assist in making therapeutic decisions including the need to adjust drug dosage. The elderly are at particular risk for side effects from ACE inhibitors and ARB medications. A low or falling rate may indicate that adults are not being monitored for side effects and medication management as recommended. This measure is reported as the number of adults 18 year of age and older who, in the past year, took at least 180 treatment days of an ACE inhibitors or ARB medication and had at least one monitoring event that included a serum potassium and a serum creatinine test, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic 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

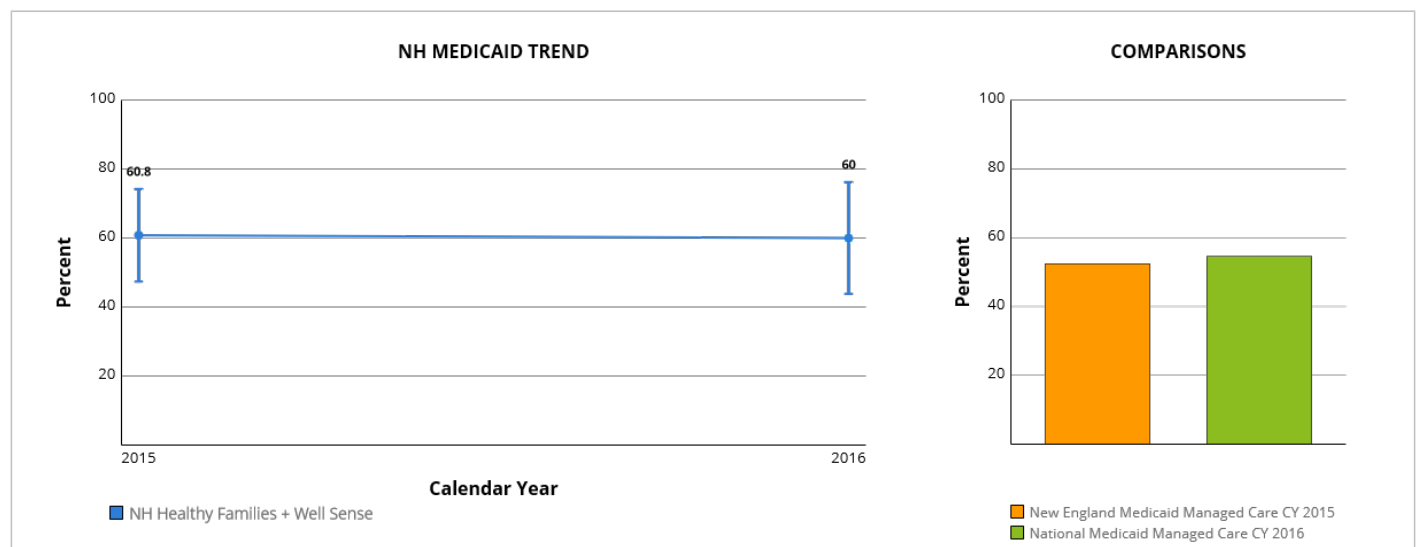
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2010
- Comments:

Annual Monitoring for Patients on Persistent Medications (MPM): Digoxin

HEDIS® Measurement Definition: The percentage of members 18 years of age and older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least one therapeutic monitoring event for the therapeutic agent in the measurement year. For each product line, report each of the three rates separately.

- Annual monitoring for members on digoxin.

Measure Identifier: HEDIS_MPM.02.A



Data

Annual Monitoring for Patients on Persistent Medications (MPM): Digoxin

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	31	51	60.8%	47.4 - 74.2
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	21	35	60.0%	43.8 - 76.2

Measure Details

Measure Name: **Annual Monitoring for Patients on Persistent Medications (MPM): Digoxin**

Measure Identifier: HEDIS_MPM.02.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 18 year of age and older who, in the past year took, at least 180 treatment days of digoxin medication and had at least one monitoring event that included a serum potassium, serum creatinine, and serum digoxin test. Individuals on long-term digoxin should be monitored by the prescribing physician to assess for side-effects and to assist in making therapeutic decisions including the need to adjust drug dosage. The elderly are at particular risk for side effects from digoxin medication. A low or falling rate may indicate that adults are not being monitored for side effects and medication management as recommended. This measure is reported as the number of adults 18 year of age and older who, in the past year, took at least 180 treatment days of digoxin medication and had at least one monitoring event that included a serum potassium, serum creatinine, and serum digoxin test, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic Care Measures](#)

Comparison Rate Comparison Data

New England Medicaid Managed Care

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

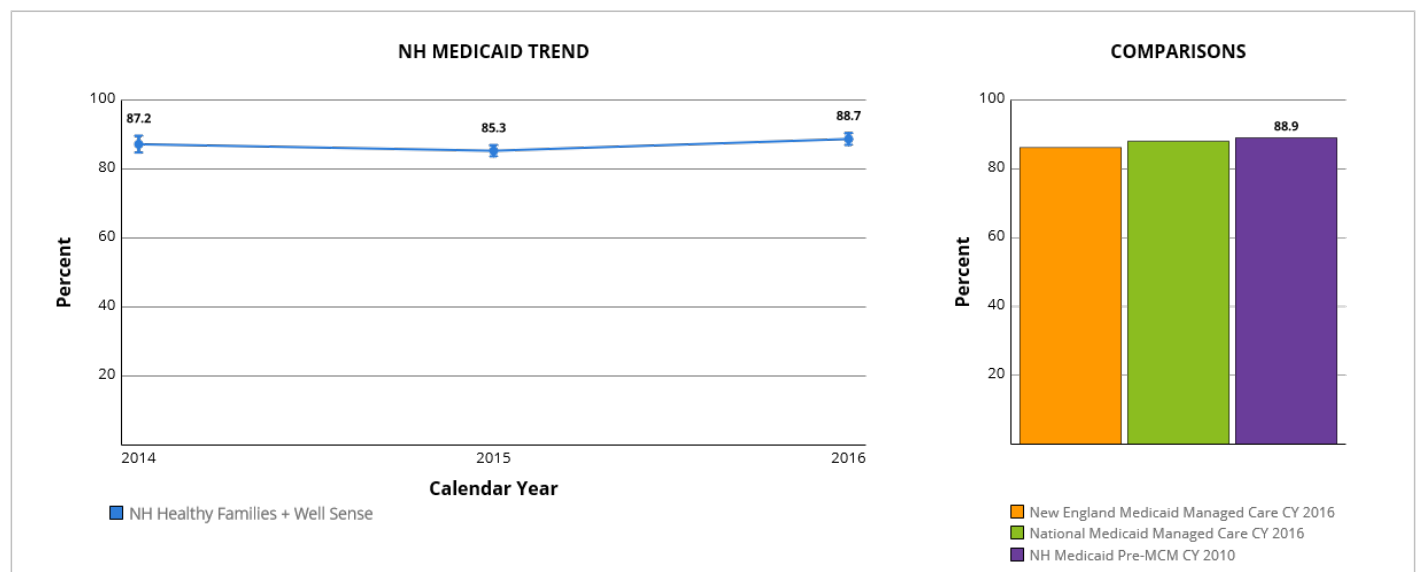
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2014, CY 2015, CY 2016
 - Comments:
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Annual Monitoring for Patients on Persistent Medications (MPM): Diuretics

HEDIS® Measurement Definition: The percentage of members 18 years of age and older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least one therapeutic monitoring event for the therapeutic agent in the measurement year. For each product line, report each of the three rates separately.

- Annual monitoring for members on diuretics.

Measure Identifier: HEDIS_MPM.03.A



Data

Annual Monitoring for Patients on Persistent Medications (MPM): Diuretics

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	674	773	87.2%	84.8 - 89.6
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	1,665	1,953	85.3%	83.7 - 86.9
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	1,213	1,368	88.7%	87.0 - 90.4

Measure Details

Measure Name: **Annual Monitoring for Patients on Persistent Medications (MPM): Diuretics**

Measure Identifier: HEDIS_MPM.03.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 18 year of age and older who, in the past year took, at least 180 treatment days of diuretic medication and had at least one monitoring event that included a serum potassium and serum creatinine test. Individuals on long-term diuretics should be monitored by the prescribing physician to assess for side-effects and to assist in making therapeutic decisions including the need to adjust drug dosage. The elderly are at particular risk for side effects from diuretic medication. A low or falling rate may indicate that adults are not being monitored for side effects and medication management as recommended. This measure is reported as the number of adults 18 year of age and older who, in the past year, took at least 180 treatment days of a diuretic medication and had at least one monitoring event that included a serum potassium and serum creatinine test, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic 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:

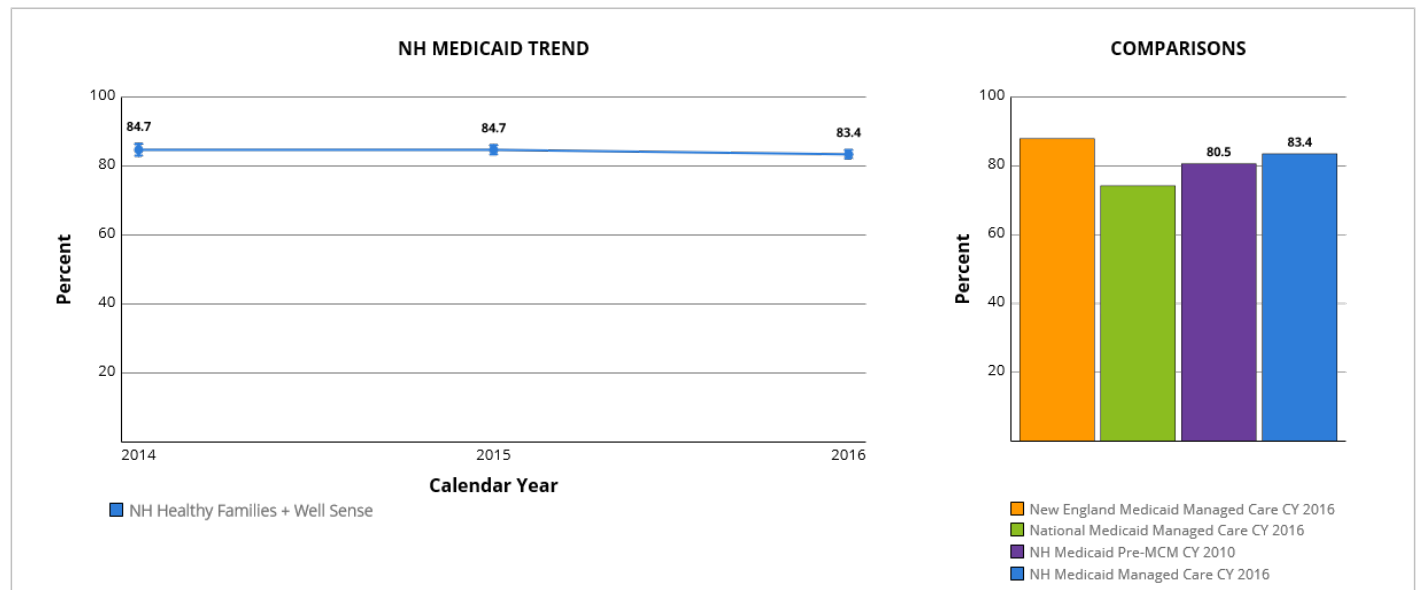
NH Medicaid Pre-MCM

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

Appropriate Testing for Children With Pharyngitis (CWP)

HEDIS® Measurement Definition: The percentage of children 2–18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode. A higher rate represents better performance (i.e., appropriate testing).

Measure Identifier: HEDIS_CWP.A



Data

Appropriate Testing for Children With Pharyngitis (CWP)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	1,487	1,756	84.7%	83.0 - 86.4
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	2,513	2,966	84.7%	83.4 - 86.0
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	2,904	3,483	83.4%	82.2 - 84.6

Measure Details

Measure Name: **Appropriate Testing for Children With Pharyngitis (CWP)**

Measure Identifier: HEDIS_CWP.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of children 2-18 years of age who were diagnosed with pharyngitis, were given an antibiotic, and received a group A streptococcus (strep) test. Strep pharyngitis is caused by a bacteria and a group A strep test can reliably confirm the presence of strep. Since antibiotics are effective against bacteria, people who have laboratory confirmed strep pharyngitis should be prescribed an antibiotic. The American Academy of Pediatrics (AAP) recommends that only children who have laboratory confirmed strep pharyngitis be treated with antibiotics as inappropriate use of antibiotics can lead to drug resistance. A low or falling rate may indicate that children are being given an antibiotic without having a confirmatory group A strep test, which may contribute to drug resistance if the child does not actually have a group A strep infection. This measure captures the number of members 2-18 years of age who were diagnosed with pharyngitis, were given an antibiotic, and received a group A streptococcus (strep) test, divided by the total eligible population, reported as a percentage.

Topics: [HEDIS Acute and Chronic Care Measures](#), [Respiratory Health Care - Children](#)

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:

NH Medicaid Pre-MCM

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

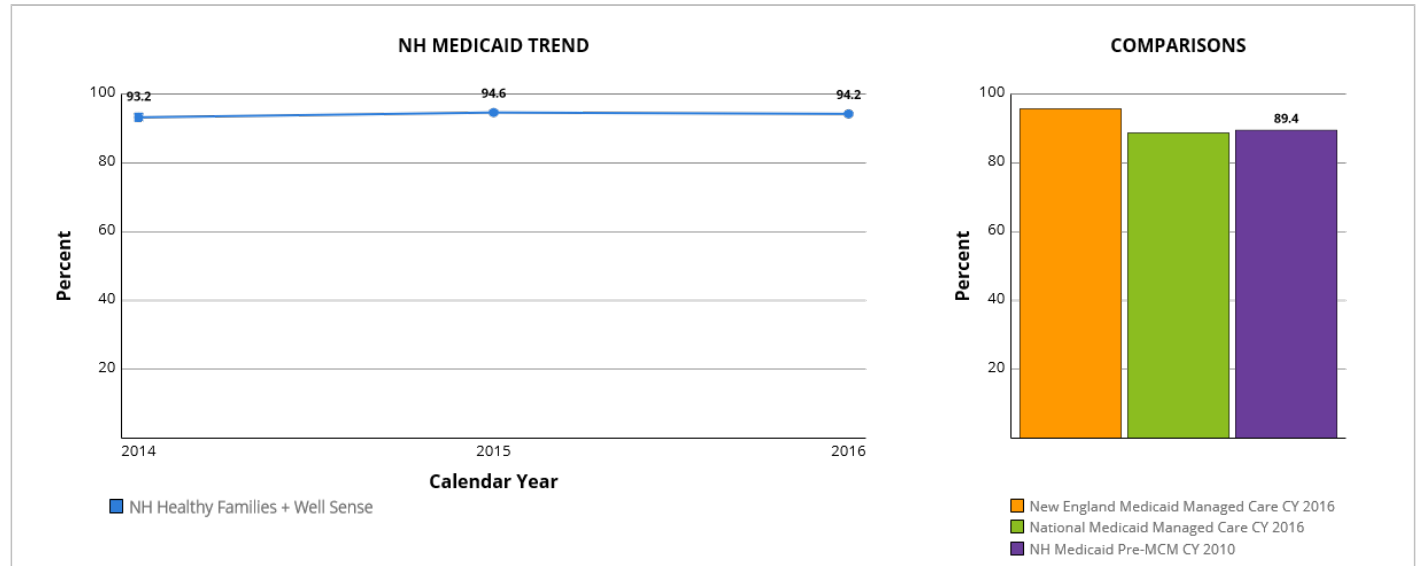
NH Medicaid Managed Care

- Data Sources: NH MCM Rate
 - Years: CY 2016
 - Comments:
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Appropriate Treatment for Children With Upper Respiratory Infection (URI)

HEDIS® Measurement Definition: The percentage of children 3 months–18 years of age who were given a diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic prescription.

Measure Identifier: HEDIS_URI.A



Data

Appropriate Treatment for Children With Upper Respiratory Infection (URI)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	174	2,561	93.2%	92.2 - 94.2
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	397	7,307	94.6%	94.1 - 95.1
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	406	6,978	94.2%	93.7 - 94.7

Measure Details

Measure Name: **Appropriate Treatment for Children With Upper Respiratory Infection (URI)**

Measure Identifier: HEDIS_URI.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of children 3 months-18 years of age who were diagnosed with an upper respiratory infection (URI) and were not prescribed an antibiotic. Upper respiratory infections are usually caused by a virus. Antibiotics are not effective against viruses. Therefore, most people who have an upper respiratory infection should not be prescribed an antibiotic as it will not work. The overuse of antibiotics is causing an increase in antibiotic resistance worldwide. A low or falling rate may indicate that children are being prescribed medication that will be ineffective in treating the URI and this overuse of antibiotics can lead to drug resistance. This measure is reported as the number of children 3 months-18 years of age who were diagnosed with an upper respiratory infection (URI) and were not prescribed an antibiotic, divided by the total eligible population, as a percentage. A high percent indicates appropriate treatment for URIs.

Topics: [HEDIS Acute and Chronic Care Measures](#), [Respiratory Health Care - Children](#)

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:
-

NH Medicaid Pre-MCM

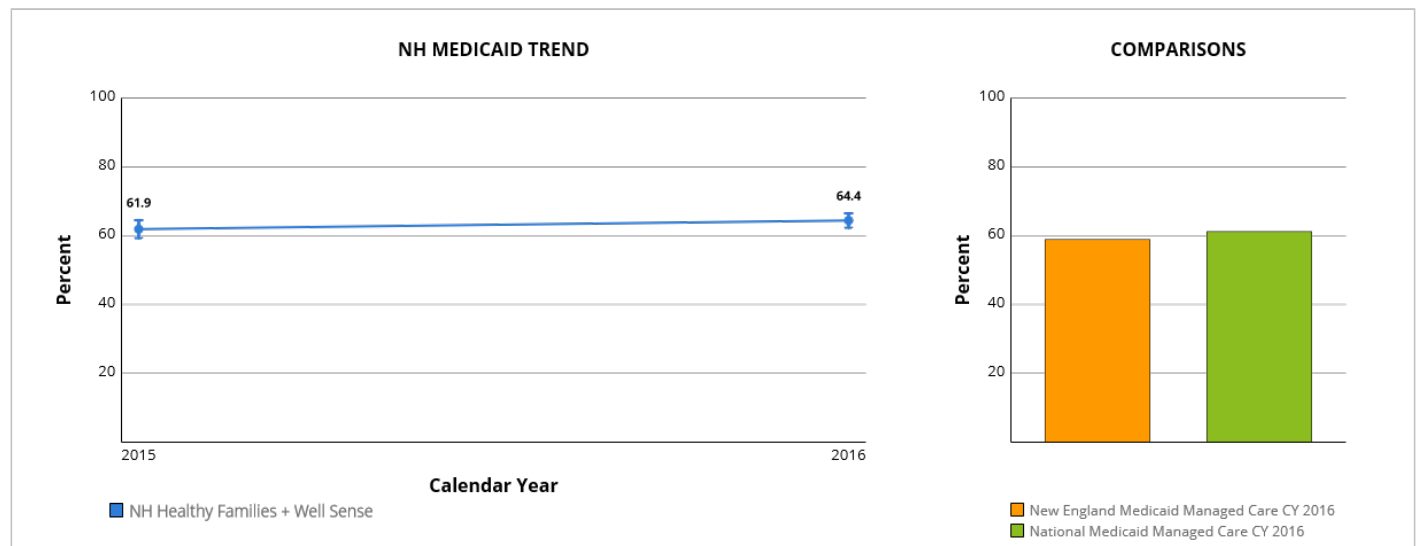
- Data Sources: Fee for Service (Pre-Managed Care)
 - Years: CY 2010
 - Comments:
-

Asthma Medication Ratio (AMR)

HEDIS® Measurement Definition: The percentage of members 5-85 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

Note: For Medicaid, report only members 5-64. For Medicare, report only members 18-85 years of age.

Measure Identifier: HEDIS_AMR.A



Data

Asthma Medication Ratio (AMR)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	854	1,380	61.9%	59.3 - 64.5
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	1,258	1,953	64.4%	62.3 - 66.5

Measure Details

Measure Name: **Asthma Medication Ratio (AMR)**

Measure Identifier: HEDIS_AMR.A

Data Source/Type: Administrative

Measure Relevance:

Topics: [Respiratory Health Care](#) , [HEDIS Acute and Chronic 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:
-

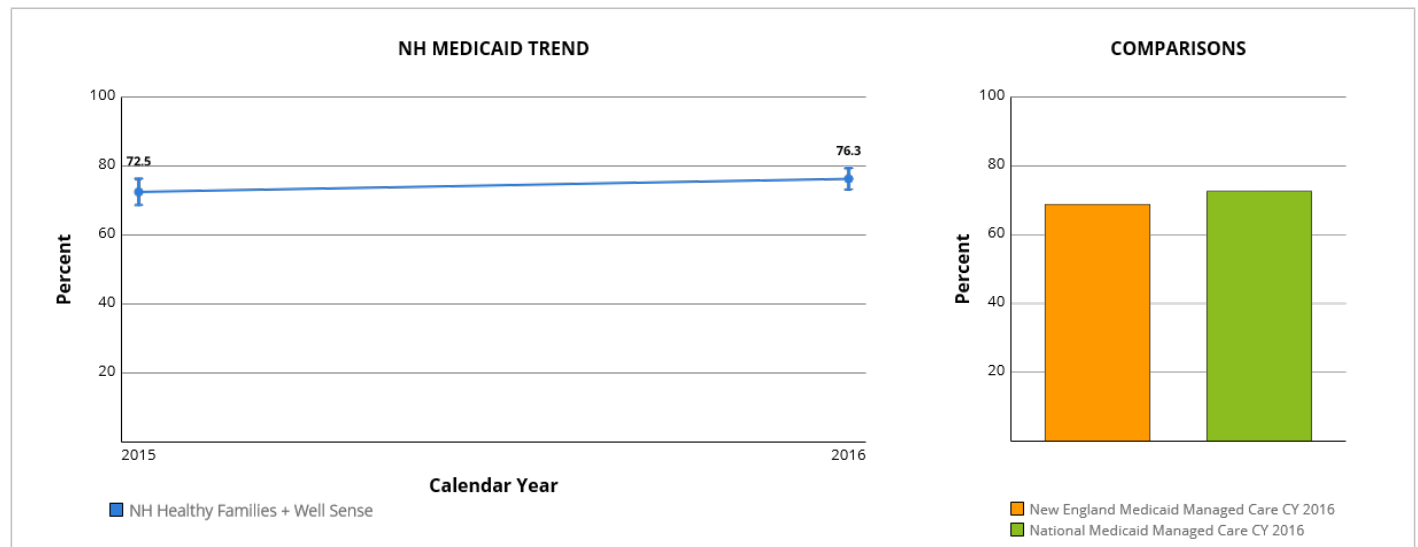
National Medicaid Managed Care

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

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 medications to total asthma medications of 0.50 or greater 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:
-

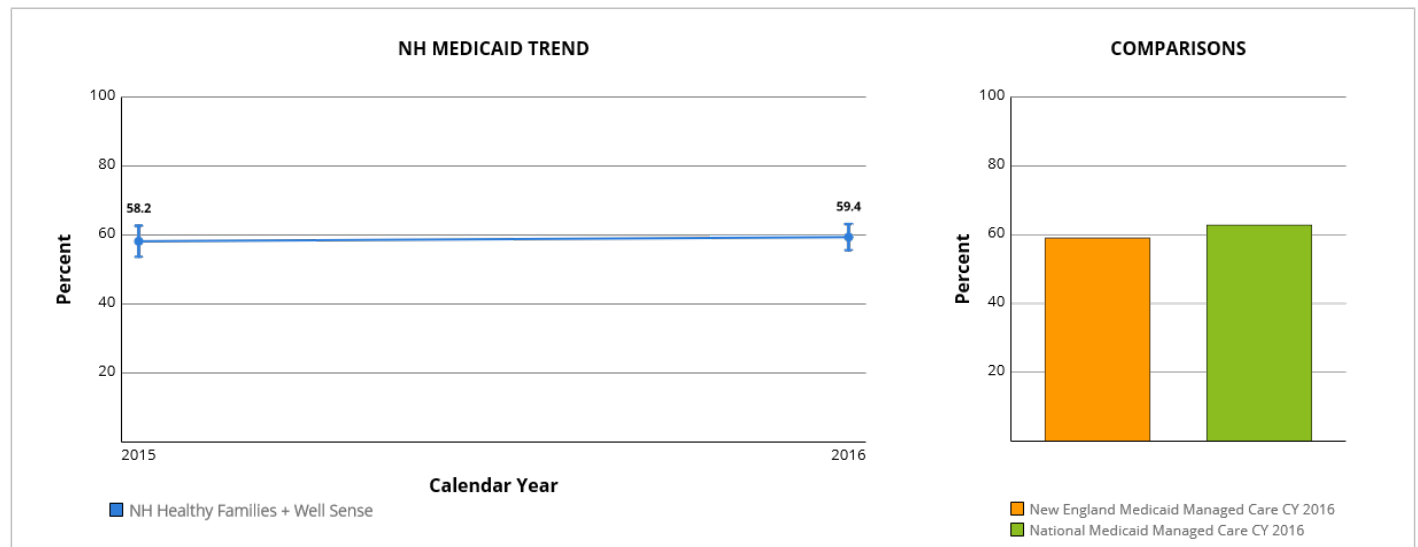
National Medicaid Managed Care

- 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 medications to total asthma medications of 0.50 or greater 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:

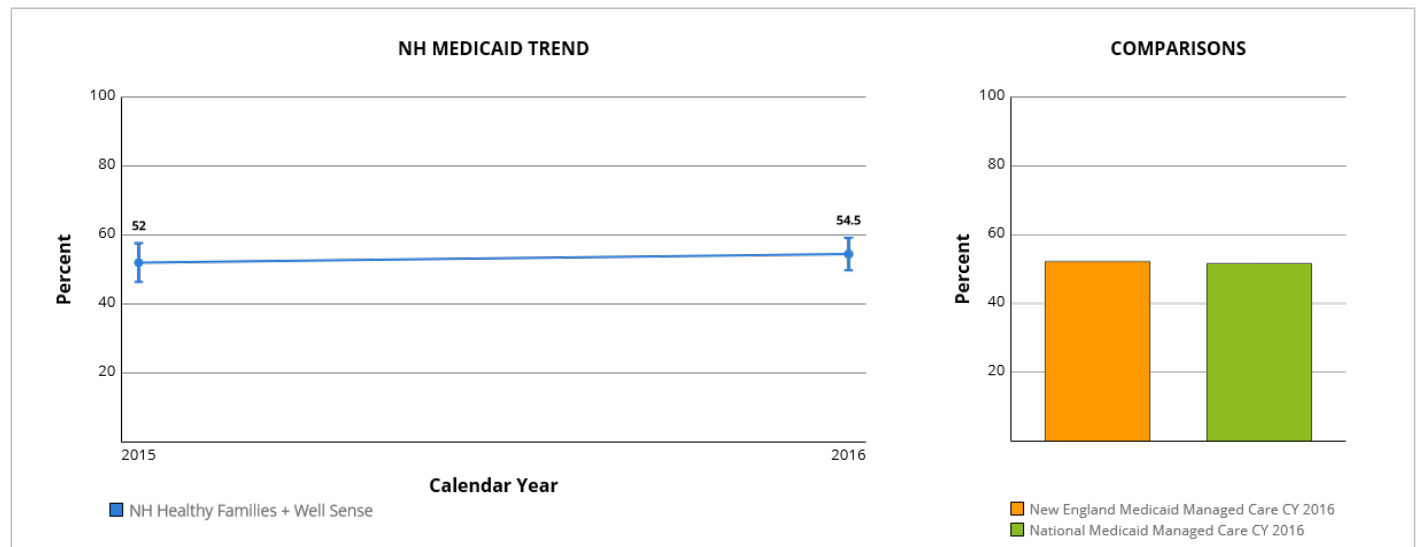
National Medicaid Managed Care

- 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 medications to total asthma medications of 0.50 or greater 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:

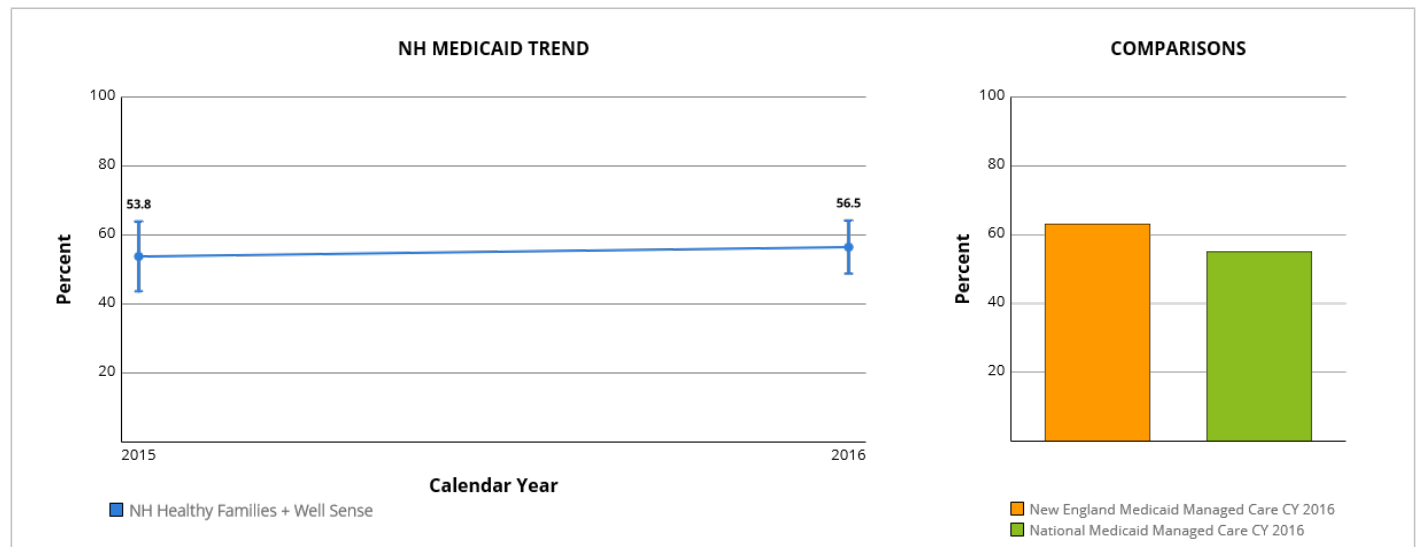
National Medicaid Managed Care

- 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 medications to total asthma medications of 0.50 or greater 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

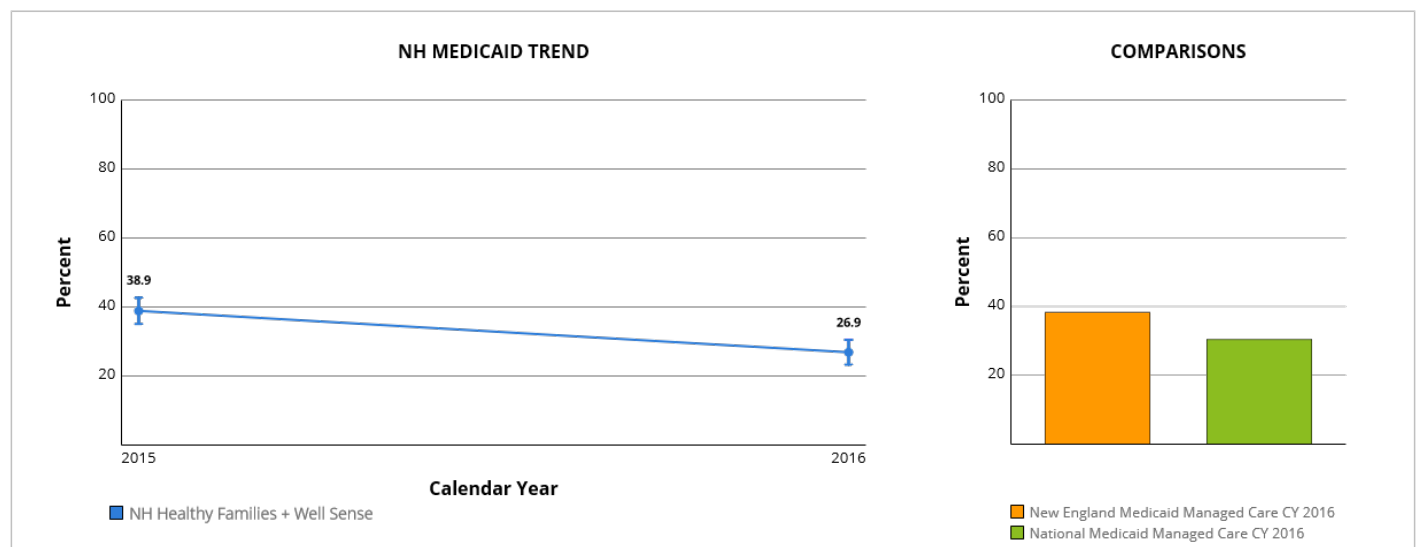
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2015, CY 2016
 - Comments:
-

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)

HEDIS® Measurement Definition: The percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription.

The measure is reported as an inverted rate $[1 - (\text{numerator}/\text{eligible population})]$. A higher rate indicates appropriate treatment of adults with acute bronchitis (i.e., the proportion for whom antibiotics were not prescribed).

Measure Identifier: HEDIS_AAB.A



Data

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	391	640	38.9%	35.1 - 42.7
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	432	591	26.9%	23.3 - 30.5

Measure Details

Measure Name: **Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)**

Measure Identifier: HEDIS_AAB.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 18-64 years of age who were diagnosed with acute bronchitis and were not prescribed an antibiotic. Acute bronchitis is usually caused by a virus. Antibiotics are not effective against viruses. Therefore, most members who have acute bronchitis should not be prescribed an antibiotic as it may not work. The overuse of antibiotics is causing an increase in antibiotic resistance worldwide. A low or falling rate may indicate that adults are being over prescribed medication that will be ineffective in treating acute bronchitis and this overuse of antibiotics can lead to drug resistance. This measure is reported as the number of adults 18-64 years of age who were diagnosed with acute bronchitis and were not prescribed an antibiotic, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic 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

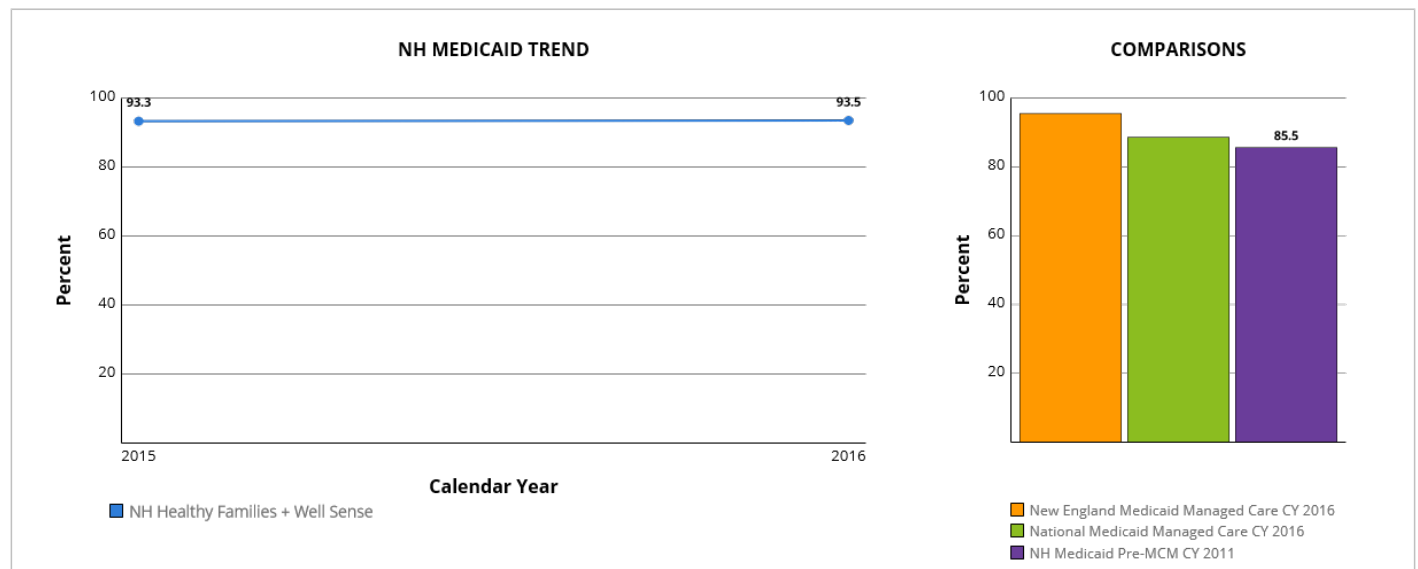
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2014, CY 2015, CY 2016
 - Comments:
-

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 12-19 Years

HEDIS® Measurement Definition: The percentage of members 12 months–19 years of age who had a visit with a PCP. The organization reports four separate percentages for each product line.

- Adolescents 12–19 years who had a visit with a PCP during the measurement year or the year prior to the measurement year.

Measure Identifier: HEDIS_CAP.04.A



Data

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 12-19 Years

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	13,950	14,959	93.3%	92.9 - 93.7
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	19,361	20,698	93.5%	93.2 - 93.8

Measure Details

Measure Name: **Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 12-19 Years**

Measure Identifier: HEDIS_CAP.04.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adolescents 12-19 years of age who had a visit with a primary care physician (PCP) in the past two years. PCPs coordinate the healthcare needs of their patients by providing preventive and diagnostic health care services; acute care and chronic disease management; and referrals as needed. The American Academy of Pediatrics (AAP) recommends that adolescents 12-19 years of age have a yearly well-care visit. A low or falling rate may indicate that adolescents are not accessing routine care, which may lead to poorer health outcomes. This measure is reported as the number of adolescents 12-19 years of age who have had at least one visit with a PCP during the past two years, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic Care Measures](#), [Office and Clinic Care - Children](#)

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:
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National Medicaid Managed Care

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

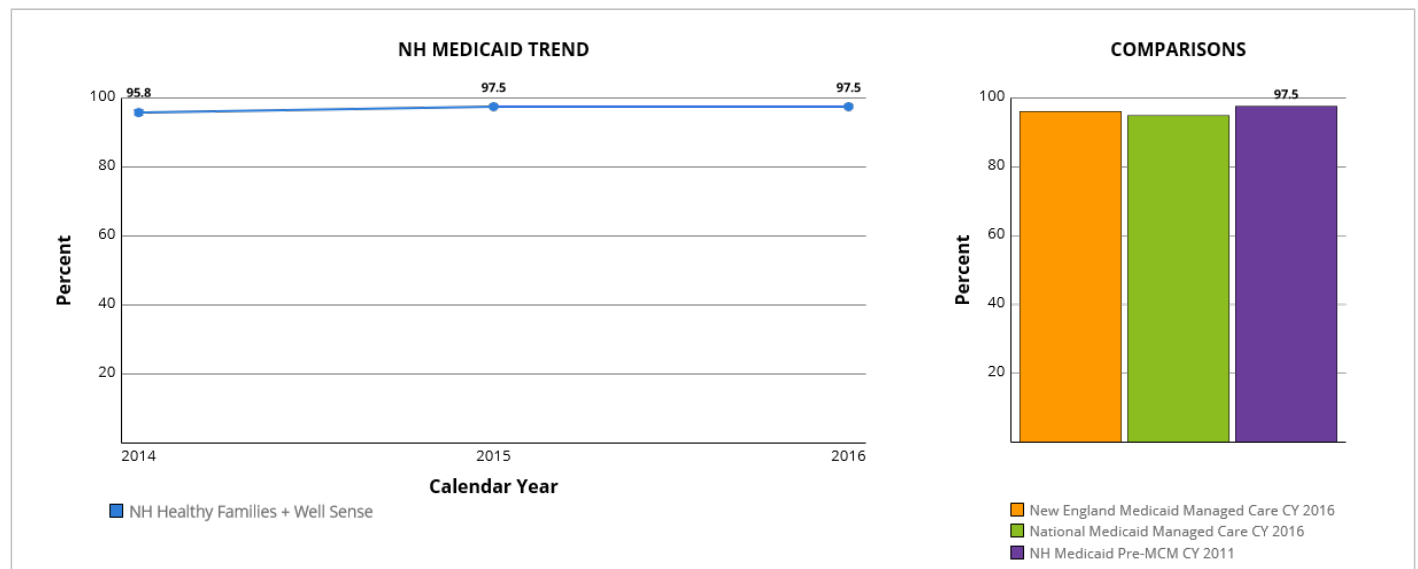
- Data Sources: Fee for Service (Pre-Managed Care)
 - Years: CY 2011
 - Comments:
-

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 12-24 Months

HEDIS® Measurement Definition: The percentage of members 12 months–19 years of age who had a visit with a PCP. The organization reports four separate percentages for each product line.

- Children 12–24 months who had a visit with a PCP during the measurement year.

Measure Identifier: HEDIS_CAP.01.A



Data

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 12-24 Months

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	2,741	2,862	95.8%	95.1 - 96.5
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	3,935	4,036	97.5%	97.0 - 98.0
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	3,815	3,913	97.5%	97.0 - 98.0

Measure Details

Measure Name: **Children and Adolescents' Access to Primary Care Practitioners (CAP): Age**

12-24 Months

Measure Identifier: HEDIS_CAP.01.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of children 12-24 months of age who had a visit with a primary care physician (PCP) in the past year. PCPs coordinate the healthcare needs of their patients by providing preventive and diagnostic health care services; acute care and chronic disease management; and referrals as needed. The American Academy of Pediatrics (AAP) recommends that children have routine well-care visits between 12-24 months of age. A low or falling rate may indicate that children are not accessing routine care, which may lead to poorer health outcomes. This measure is reported as the number of children 12-24 months of age who had at least one visit with a PCP during the past year, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic Care Measures](#), [Office and Clinic Care - Children](#)

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

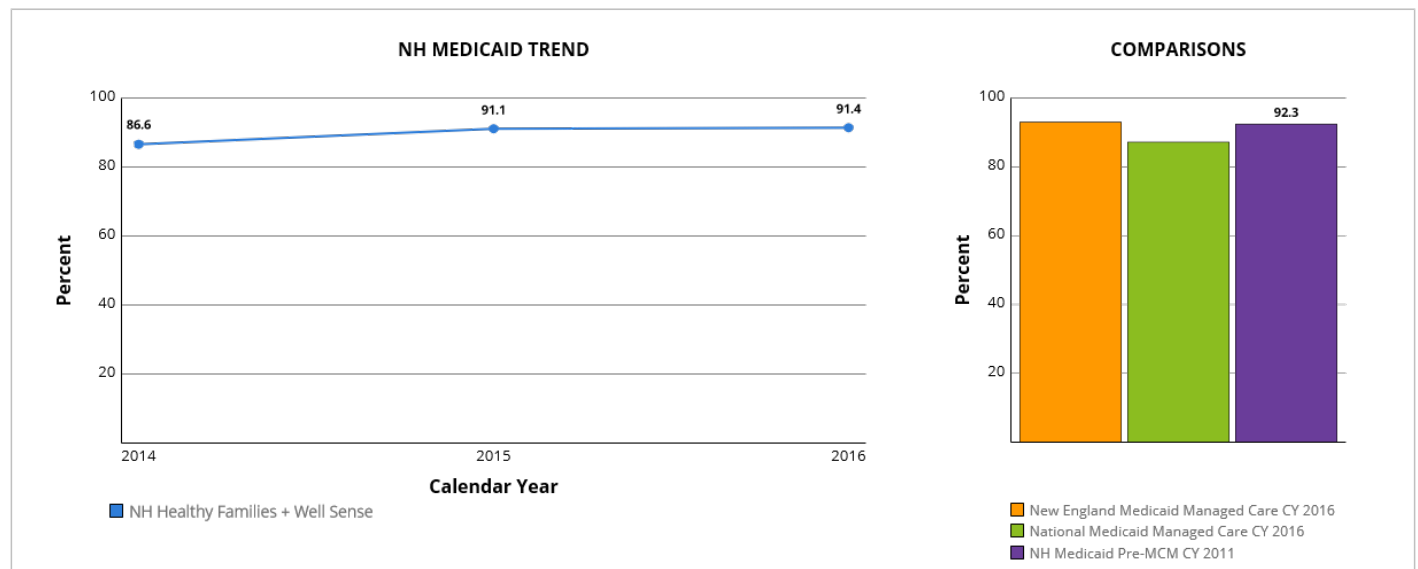
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2010, CY 2011
- Comments:

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 25 Months - 6 Years

HEDIS® Measurement Definition: The percentage of members 12 months–19 years of age who had a visit with a PCP. The organization reports four separate percentages for each product line.

- Children 25 months–6 years who had a visit with a PCP during the measurement year.

Measure Identifier: HEDIS_CAP.02.A



Data

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 25 Months - 6 Years

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	12,174	14,051	86.6%	86.0 - 87.2
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	17,552	19,276	91.1%	90.7 - 91.5
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	17,452	19,090	91.4%	91.0 - 91.8

Measure Details

Measure Name: **Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 25**

Months - 6 Years

Measure Identifier: HEDIS_CAP.02.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of children 25 months – 6 years of age who had a visit with a primary care physician (PCP) in the past year. PCPs coordinate the healthcare needs of their patients by providing preventive and diagnostic health care services; acute care and chronic disease management; and referrals as needed. The American Academy of Pediatrics (AAP) recommends that children have a well-care visit at 30 months of age then yearly for 3-6 year olds. A low or falling rate may indicate that children are not accessing routine care, which may lead to poorer health outcomes. This measure is reported as the number of children 25 months – 6 years of age who had at least one visit with a PCP during the past year, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic Care Measures](#), [Office and Clinic 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 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

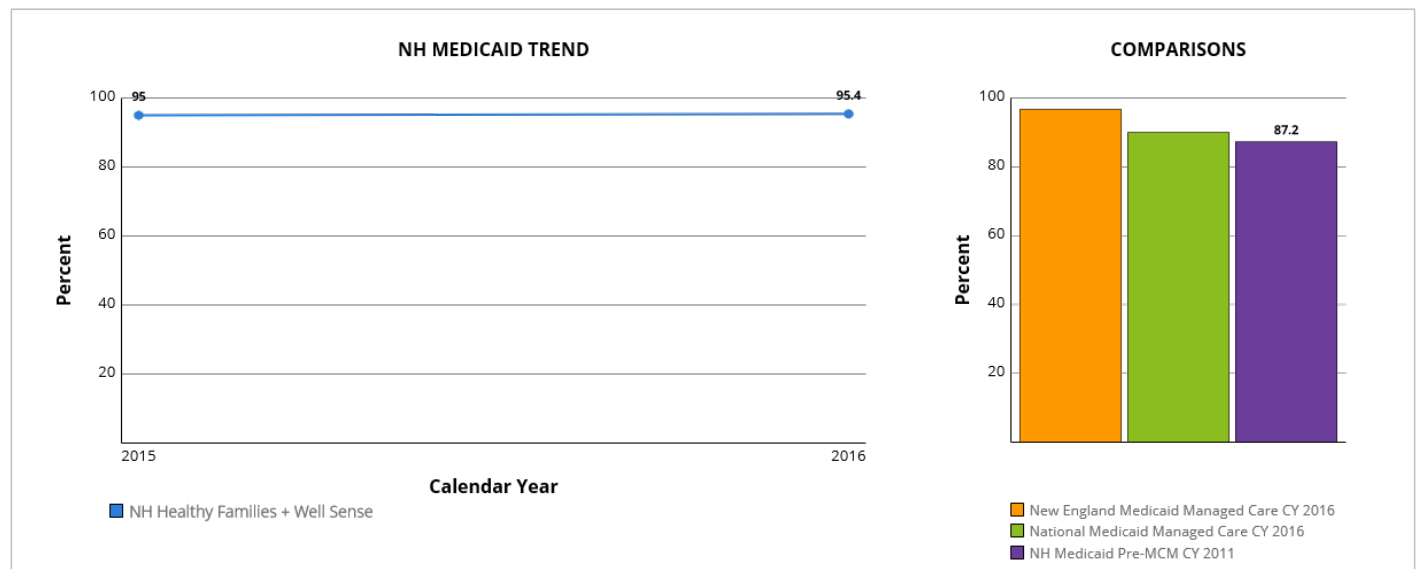
- Data Sources: Fee for Service (Pre-Managed Care)
- Years: CY 2010, CY 2011
- Comments:

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 7-11 Years

HEDIS® Measurement Definition: The percentage of members 12 months–19 years of age who had a visit with a PCP. The organization reports four separate percentages for each product line.

- Children 7–11 years who had a visit with a PCP during the measurement year or the year prior to the measurement year.

Measure Identifier: HEDIS_CAP.03.A



Data

Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 7-11 Years

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	11,351	11,950	95.0%	94.6 - 95.4
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	15,991	16,754	95.4%	95.1 - 95.7

Measure Details

Measure Name: **Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 7-11 Years**

Measure Identifier: HEDIS_CAP.03.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of children 7-11 years of age who had a visit with a primary care physician (PCP) in the past two years. PCPs coordinate the healthcare needs of their patients by providing preventive and diagnostic health care services; acute care and chronic disease management; and referrals as needed. The American Academy of Pediatrics (AAP) recommends that children 7-11 years of age have a yearly well-care visit. A low or falling rate may indicate that children are not accessing routine care, which may lead to poorer health outcomes. This measure is reported as the number of children 7-11 years of age who have had at least one visit with a PCP during the past two years, divided by the total eligible population, as a percentage.

Topics: [HEDIS Acute and Chronic Care Measures](#), [Office and Clinic Care - Children](#)

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 2015, CY 2016
 - Comments:
-

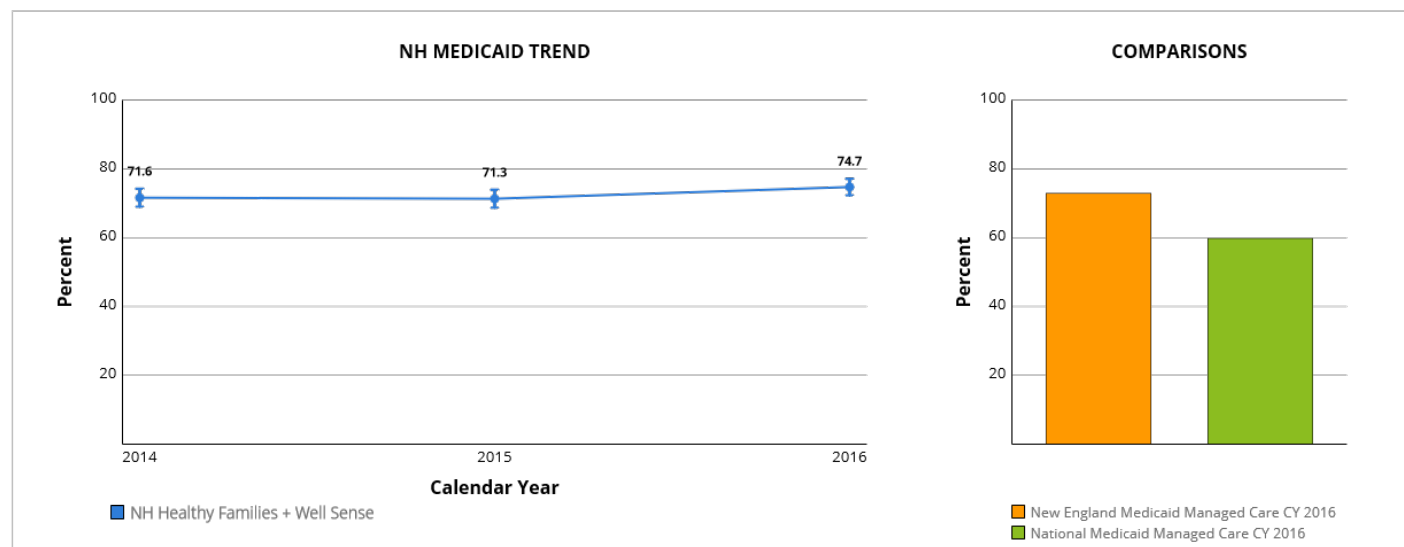
NH Medicaid Pre-MCM

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

Comprehensive Diabetes Care (CDC, Hybrid Specification): Blood Pressure Controlled <140/90 mm Hg

HEDIS® Measurement Definition: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had BP control (<140/90 mm Hg).

Measure Identifier: HEDIS_CDC.07.H



Data

Comprehensive Diabetes Care (CDC, Hybrid Specification): Blood Pressure Controlled <140/90 mm Hg

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	813	1,131	71.6%	69.0 - 74.2
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	808	1,132	71.3%	68.7 - 73.9
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	906	1,216	74.7%	72.3 - 77.1

Measure Details

Measure Name: **Comprehensive Diabetes Care (CDC, Hybrid Specification): Blood Pressure Controlled <140/90 mm Hg**

Measure Identifier: HEDIS_CDC.07.H

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

Measure Relevance:

This measure captures the percent of adults 18-75 years of age who have diabetes and had a blood pressure (BP) < 140/90 mm Hg in the past year. High BP (>140/90 mm Hg) may damage the blood vessels and may lead to heart disease, stroke, or kidney disease. Individuals with diabetes and hypertension are at higher risk for complications associated with diabetes and hypertension. A low or falling rate indicates adults with diabetes may not be receiving treatment for high BP, which may result in a greater risk of developing blood vessel damage and its associated complications. The measure is calculated based on the number of adults 18-75 years of age who have diabetes and had a BP < 140/90 mm Hg in the past year, divided by the total eligible population, as a percentage.

Topics: [Diabetes Health Care - Adults](#), [HEDIS Acute and Chronic 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:
-

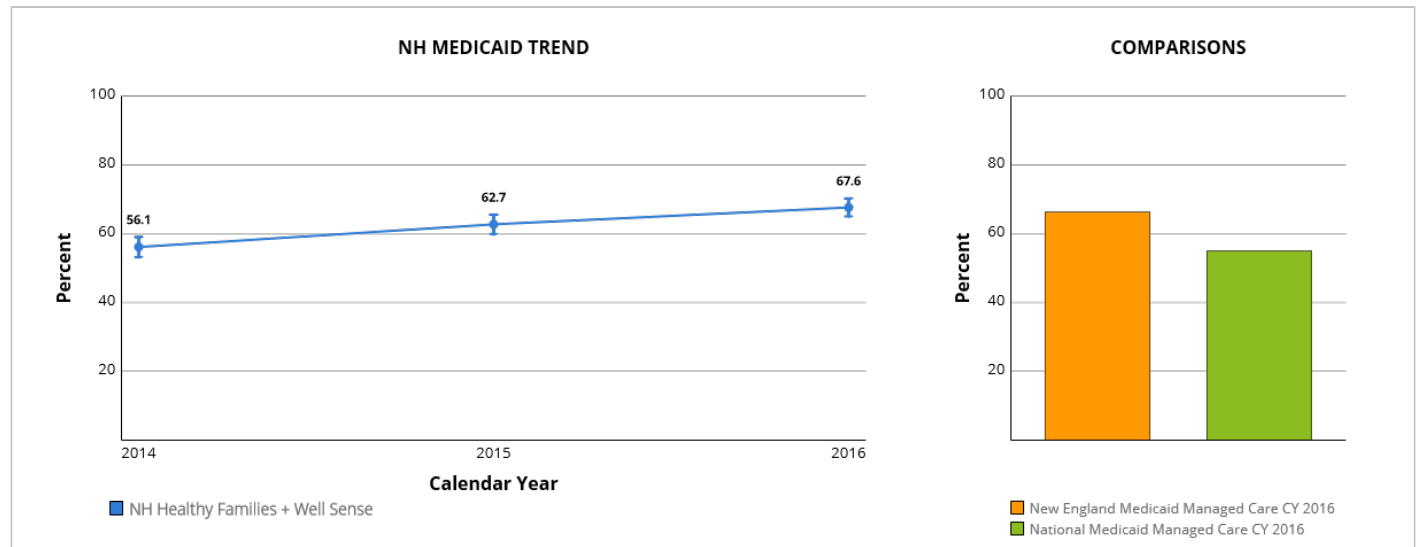
National Medicaid Managed Care

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

Comprehensive Diabetes Care (CDC, Hybrid Specification): Eye Exam

HEDIS® Measurement Definition: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had an Eye exam (retinal) performed.

Measure Identifier: HEDIS_CDC.05.H



Data

Comprehensive Diabetes Care (CDC, Hybrid Specification): Eye Exam

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	630	1,131	56.1%	53.2 - 59.0
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	709	1,132	62.7%	59.9 - 65.5
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	824	1,216	67.6%	65.0 - 70.2

Measure Details

Measure Name: **Comprehensive Diabetes Care (CDC, Hybrid Specification): Eye Exam**

Measure Identifier: HEDIS_CDC.05.H

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

Measure Relevance:

This measure captures the percent of adults 18-75 years of age who have diabetes and had an eye exam for diabetic retinal disease in the past year. People with diabetes may experience several eye problems as a complication of diabetes that can cause severe vision loss or even blindness. The American Diabetes Association recommends that diabetics have retinopathy screening at least once every year, which can assist in the recognition and management of retinopathy. A low or falling rate indicates that adults may not be receiving routine screening and may be at risk for adverse eye diseases associated with diabetes. The measure is calculated based on the number of adults 18-75 years of age who have diabetes and had an eye exam for diabetic retinal disease in the past year, divided by the total eligible population, as a percentage.

Topics: [Diabetes Health Care - Adults](#), [HEDIS Acute and Chronic 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

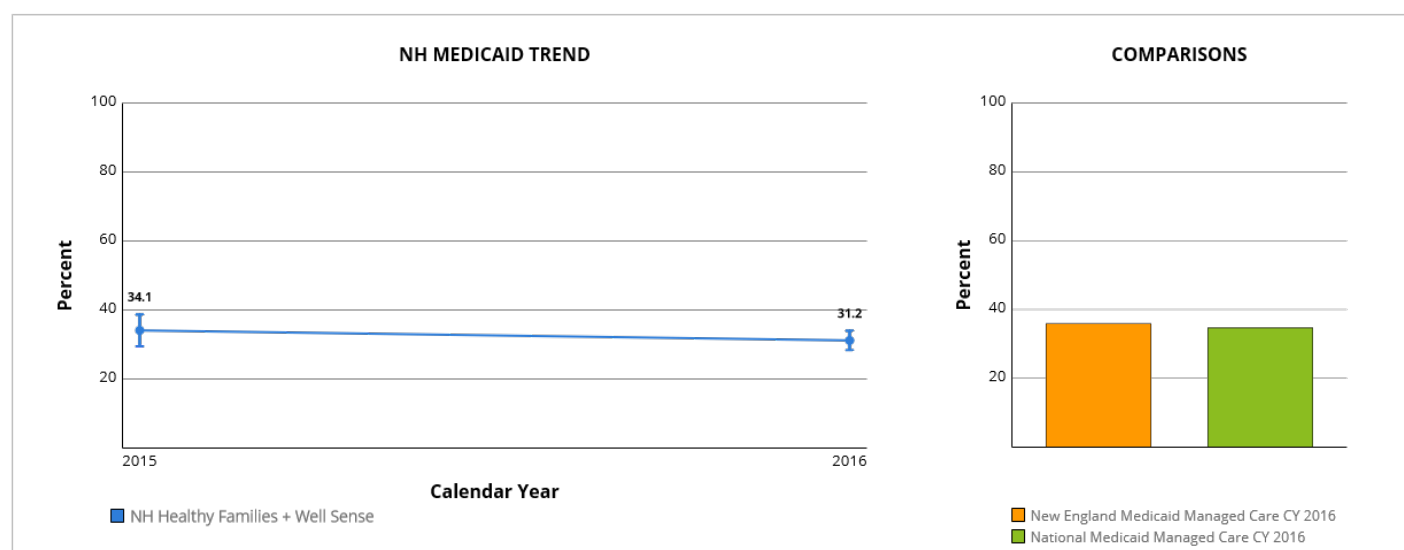
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2014, CY 2015, CY 2016
 - Comments:
-

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<7.0%) for a Selected Population

HEDIS® Measurement Definition: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had HbA1c control (<7.0%) for a selected population.*

* Additional exclusion criteria are required for this indicator that will result in a different eligible population from all other indicators. This indicator is only reported for the commercial and Medicaid product lines.

Measure Identifier: HEDIS_CDC.04.H



Data

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<7.0%) for a Selected Population

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	140	411	34.1%	29.5 - 38.7
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	298	1,042	31.2%	28.4 - 34.0

Measure Details

Measure Name: **Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<7.0%) for a Selected Population**

Measure Identifier: HEDIS_CDC.04.H

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

Measure Relevance:

This measure captures the percent of a selected population of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) <7% within the past year. HbA1c indicates the average level of blood glucose (sugar) over the past 2-3 months. HbA1c levels <7% indicate good glucose control. The American Diabetes Association suggests an A1c of 7% may be appropriate for each individual. A low or falling rate indicates that adults may not be adequately managing their diabetes and may have an increased risk of developing complications such as retinopathy, nephropathy, and neuropathy. The measure is calculated based on the number of a selected population of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) <7% within the past year, divided by the total eligible population, as a percentage.

Topics: [Diabetes Health Care - Adults](#), [HEDIS Acute and Chronic 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:

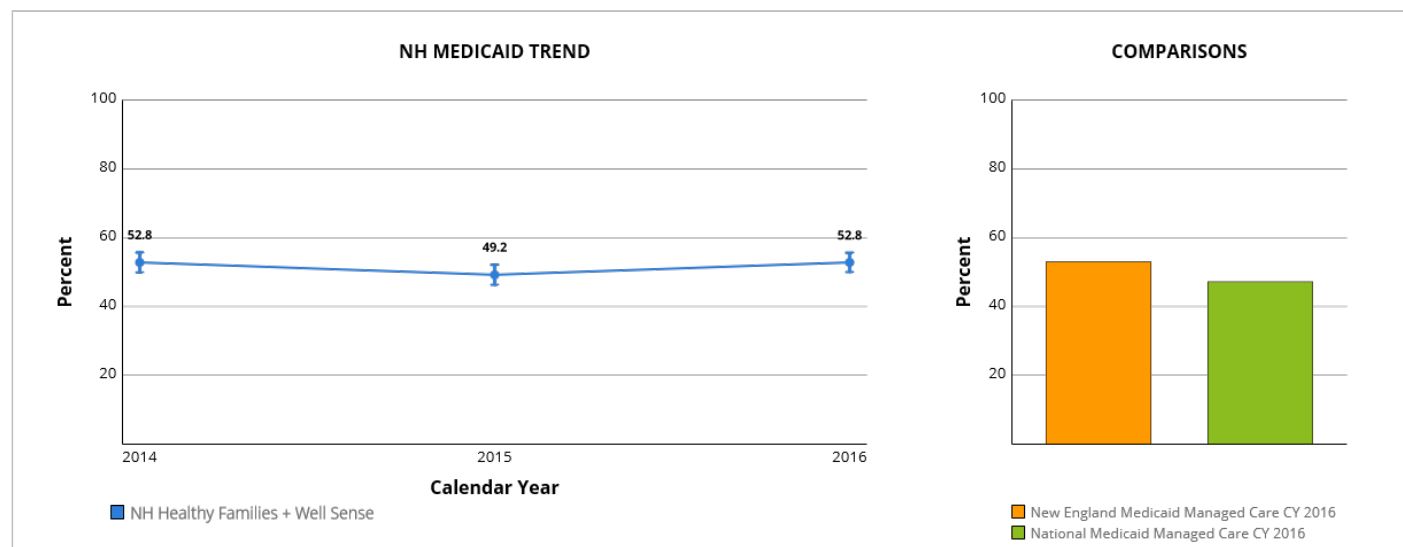
National Medicaid Managed Care

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

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<8.0%)

HEDIS® Measurement Definition: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had HbA1c control (<8.0%).

Measure Identifier: HEDIS_CDC.03.H



Data

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<8.0%)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	600	1,131	52.8%	49.9 - 55.7
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	558	1,132	49.2%	46.3 - 52.1
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	639	1,216	52.8%	50.0 - 55.6

Measure Details

Measure Name: **Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<8.0%)**

Measure Identifier: HEDIS_CDC.03.H

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

Measure Relevance:

This measure captures the percent of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) <8% within the past year. HbA1c indicates the average level of blood glucose (sugar) over the past 2-3 months, and HbA1c levels <8% indicate adequate glucose control. A low or falling rate indicates that adults may not be adequately managing their diabetes and may have an increased risk of developing complications such as retinopathy, nephropathy, and neuropathy. The measure is calculated based on the number of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) <8% within the past year, divided by the total eligible population, as a percentage.

Topics: [Diabetes Health Care - Adults](#), [HEDIS Acute and Chronic 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:
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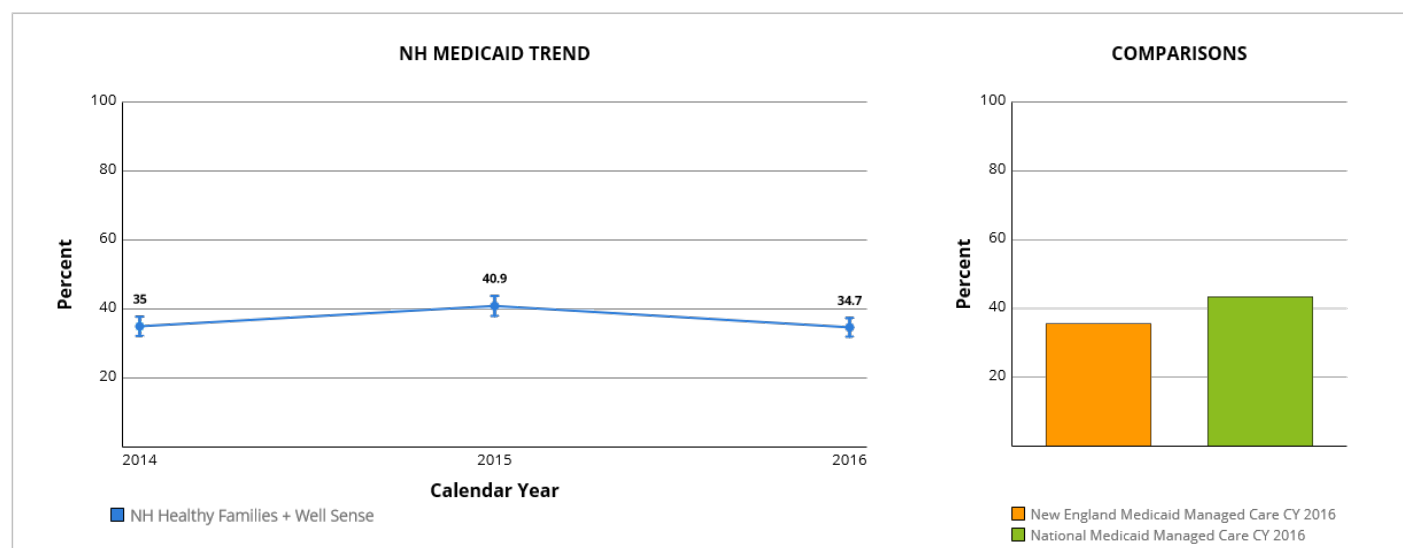
National Medicaid Managed Care

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

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Poor Control (>9.0%)

HEDIS® Measurement Definition: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had HbA1c poor control (>9.0%).

Measure Identifier: HEDIS_CDC.02.H



Data

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Poor Control (>9.0%)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	392	1,131	35.0%	32.2 - 37.8
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	462	1,132	40.9%	38.0 - 43.8
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	425	1,216	34.7%	32.0 - 37.4

Measure Details

Measure Name: **Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Poor Control (>9.0%)**

Measure Identifier: HEDIS_CDC.02.H

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

Measure Relevance:

This measure captures the percent of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) >9% within the past year. HbA1c indicates the average level of blood glucose (sugar) over the past 2-3 months. HbA1c levels >9% indicate poor glucose control and increases the risk of the individual developing complications such as retinopathy, nephropathy, and neuropathy. To reduce the risk of complications, the American Diabetes Association recommends an HbA1c <7%. A high or rising rate indicates that adults may not be adequately managing their diabetes and may have an increased risk of developing adverse outcomes associated with diabetes. The measure is calculated based on the number of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) >9% within the past year, divided by the total eligible population, as a percentage.

Topics: [Diabetes Health Care - Adults](#), [HEDIS Acute and Chronic 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:

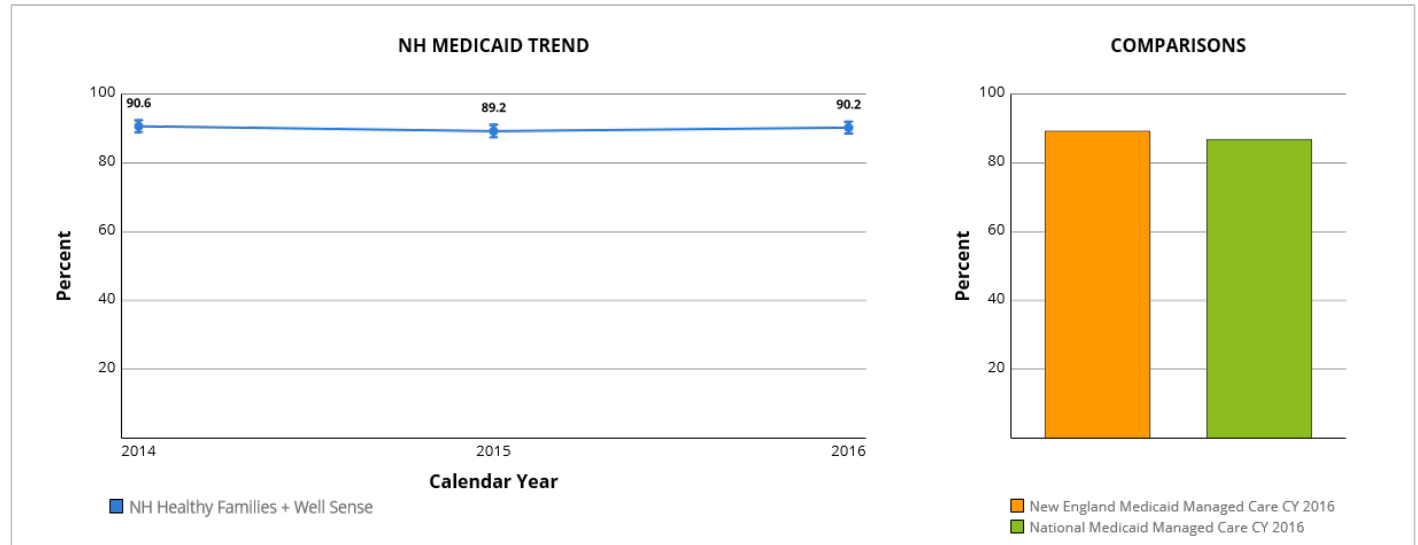
National Medicaid Managed Care

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

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Testing

HEDIS® Measurement Definition: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had Hemoglobin A1c (HbA1c) testing.

Measure Identifier: HEDIS_CDC.01.H



Data

Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Testing

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	1,026	1,131	90.6%	88.9 - 92.3
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	1,010	1,132	89.2%	87.4 - 91.0
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	1,096	1,216	90.2%	88.5 - 91.9

Measure Details

Measure Name: **Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Testing**

Measure Identifier: HEDIS_CDC.01.H

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

Measure Relevance:

This measure captures the percent of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) test within the past year. HbA1c indicates the average level of blood glucose (sugar) over the past 2-3 months. The American Diabetes Association recommends routine HbA1c testing to assist in the management of diabetes. A low or falling rate may indicate that adults are not receiving routine testing which may impact member's management of diabetes and its adverse outcomes. The measure is reported as the number of adults 18-75 years of age who have diabetes and had a Hemoglobin A1c (HbA1c) test within the past year, divided by the total eligible population, as a percentage.

Topics: [Diabetes Health Care - Adults](#), [HEDIS Acute and Chronic 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:

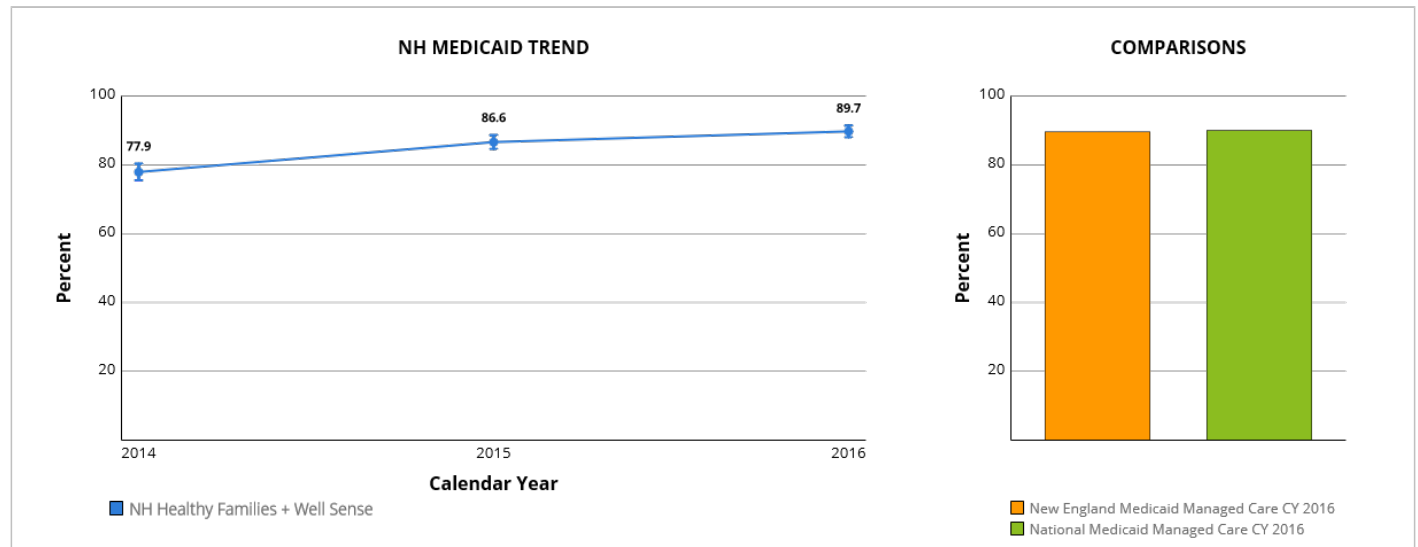
National Medicaid Managed Care

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

Comprehensive Diabetes Care (CDC, Hybrid Specification): Medical Attention for Nephropathy

HEDIS® Measurement Definition: The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had medical attention for nephropathy.

Measure Identifier: HEDIS_CDC.06.H



Data

Comprehensive Diabetes Care (CDC, Hybrid Specification): Medical Attention for Nephropathy

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	882	1,131	77.9%	75.5 - 80.3
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	980	1,132	86.6%	84.6 - 88.6
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	1,090	1,216	89.7%	88.0 - 91.4

Measure Details

Measure Name: **Comprehensive Diabetes Care (CDC, Hybrid Specification): Medical Attention for Nephropathy**

Measure Identifier: HEDIS_CDC.06.H

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

Measure Relevance:

This measure captures the percent of adults 18-75 years of age who have diabetes and received medical attention for nephropathy in the past year. People with diabetes may experience nephropathy (kidney disease) as a complication of diabetes that can lead to kidney failure. A high or rising rate may indicate that adults do not have their diabetes in good control and are experiencing a complication of diabetes. The measure is calculated based on the number of adults 18-75 years of age who received medical attention for nephropathy in the past year, divided by the total eligible population, as a percentage.

Topics: [Diabetes Health Care - Adults](#), [HEDIS Acute and Chronic 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:
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National Medicaid Managed Care

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

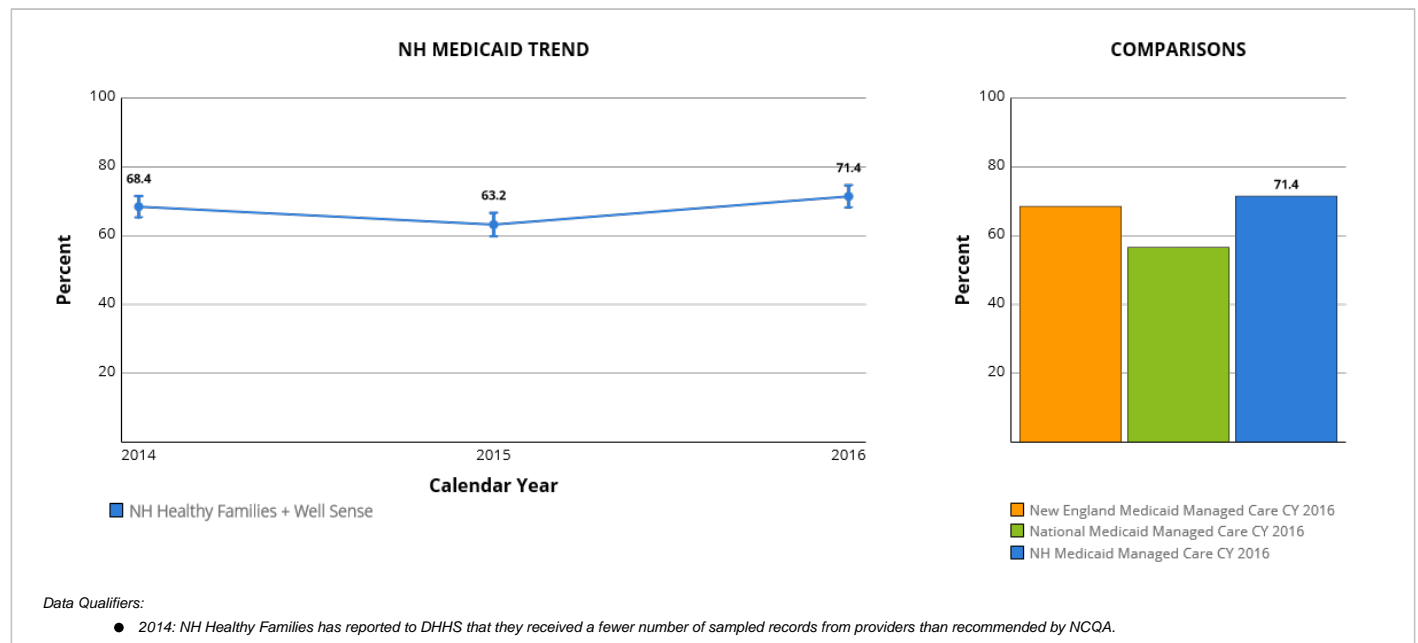
Controlling High Blood Pressure (CBP)

HEDIS® Measurement Definition: The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled during the measurement year based on the following criteria:

- Members 18–59 years of age whose BP was <140/90 mm Hg.
- Members 60–85 years of age with a diagnosis of diabetes whose BP was <140/90 mm Hg.
- Members 60–85 years of age without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Note: Use the Hybrid Method for this measure. A single rate is reported and is the sum of all three groups.

Measure Identifier: HEDIS_CBP.H



Data

Controlling High Blood Pressure (CBP)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	578	844	68.4%	65.3 - 71.5
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	493	790	63.2%	59.8 - 66.6
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	534	748	71.4%	68.2 - 74.6

Measure Details

Measure Name: **Controlling High Blood Pressure (CBP)**

Measure Identifier: HEDIS_CBP.H

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

Measure Relevance:

This measure captures the percent of adults 18–85 years of age with diagnosed hypertension and whose blood pressure (BP) was adequately controlled. The United States Preventative Task Force (USPSTF) recommends routine screening for high blood pressure in adults. A low or falling rate may indicate that adults are not having their BP adequately controlled, which may increase the risk of heart disease including heart attacks and stroke. This measure is reported as the number of adults 18-85 years of age with diagnosed hypertension, who's BP was adequately controlled according to current clinical guidelines such as those of the USPSTF divided by the total eligible population, as a percentage.

Topics: [Cardiovascular Health Care - Adults](#), [HEDIS Acute and Chronic 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:

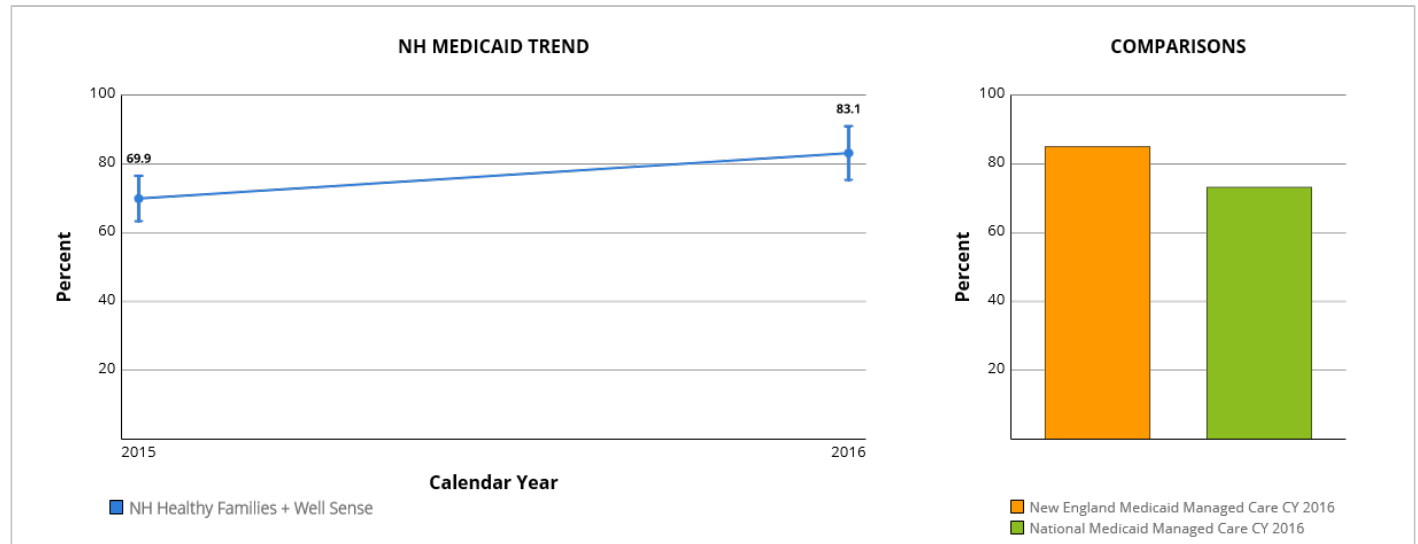
NH Medicaid Managed Care

- Data Sources: NH MCM Rate
- Years: CY 2016
- Comments:

Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)

HEDIS® Measurement Definition: The percentage of members who were diagnosed with rheumatoid arthritis and who were dispensed at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD).

Measure Identifier: HEDIS_ART.A



Data

Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	130	186	69.9%	63.3 - 76.5
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	74	89	83.1%	75.3 - 90.9

Measure Details

Measure Name: **Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)**

Measure Identifier: HEDIS_ART.A

Data Source/Type: Administrative

Measure Relevance:

Topics: [HEDIS Acute and Chronic 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:
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National Medicaid Managed Care

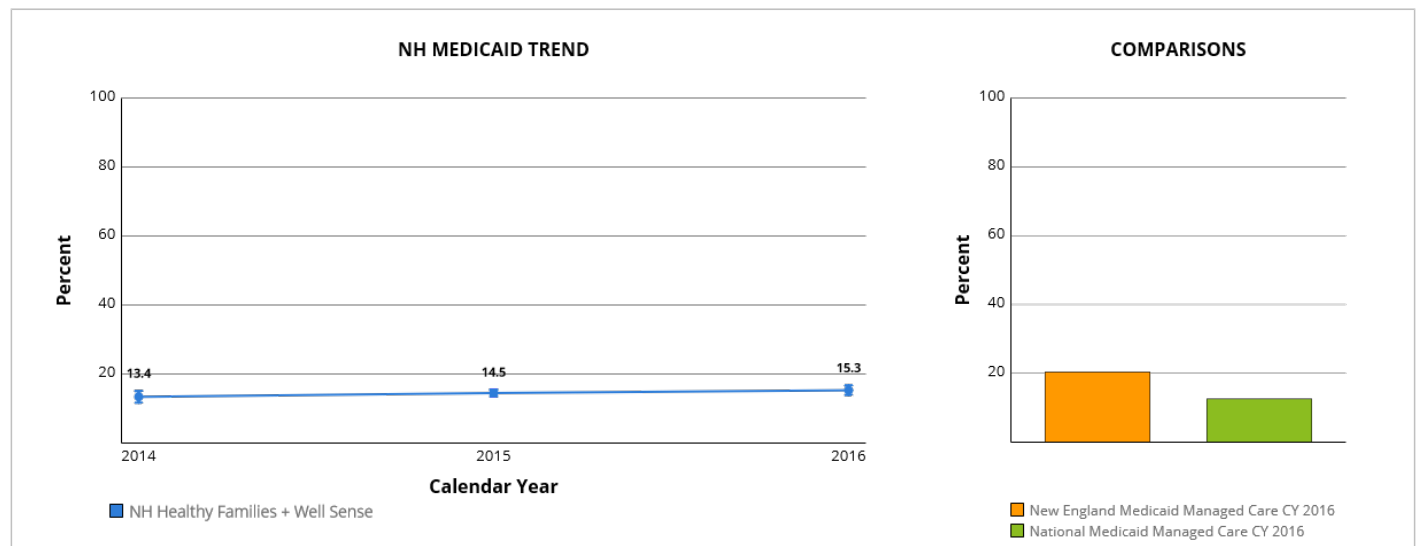
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2014, CY 2015, CY 2016
 - Comments:
-

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

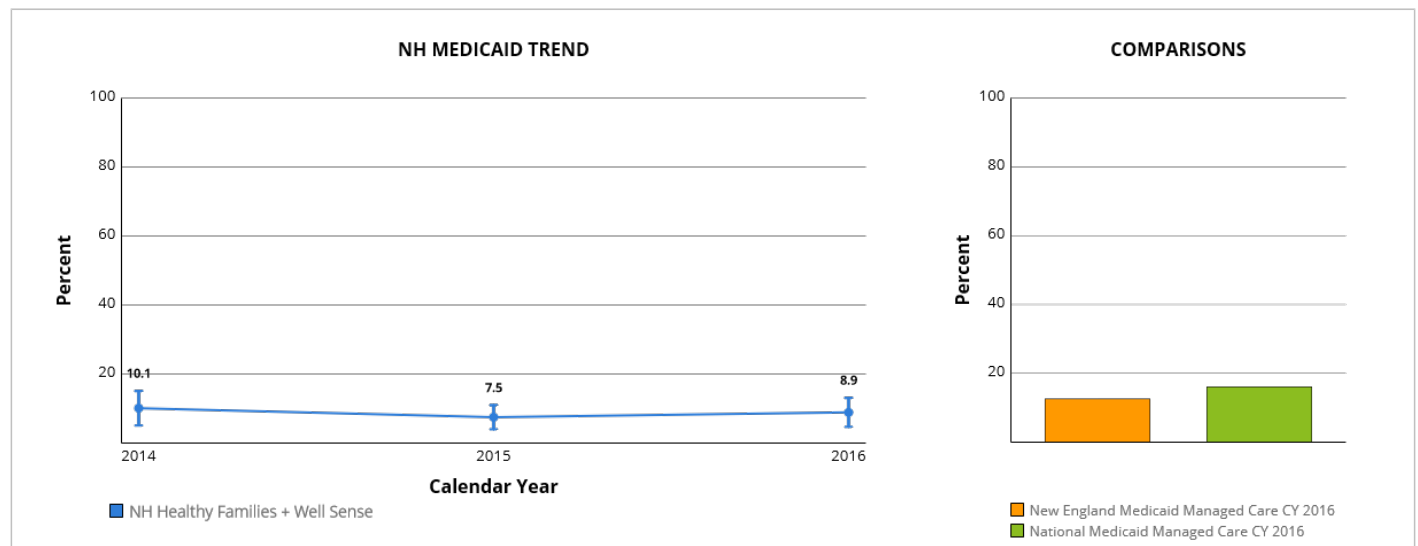
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2015, CY 2016
- Comments:

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

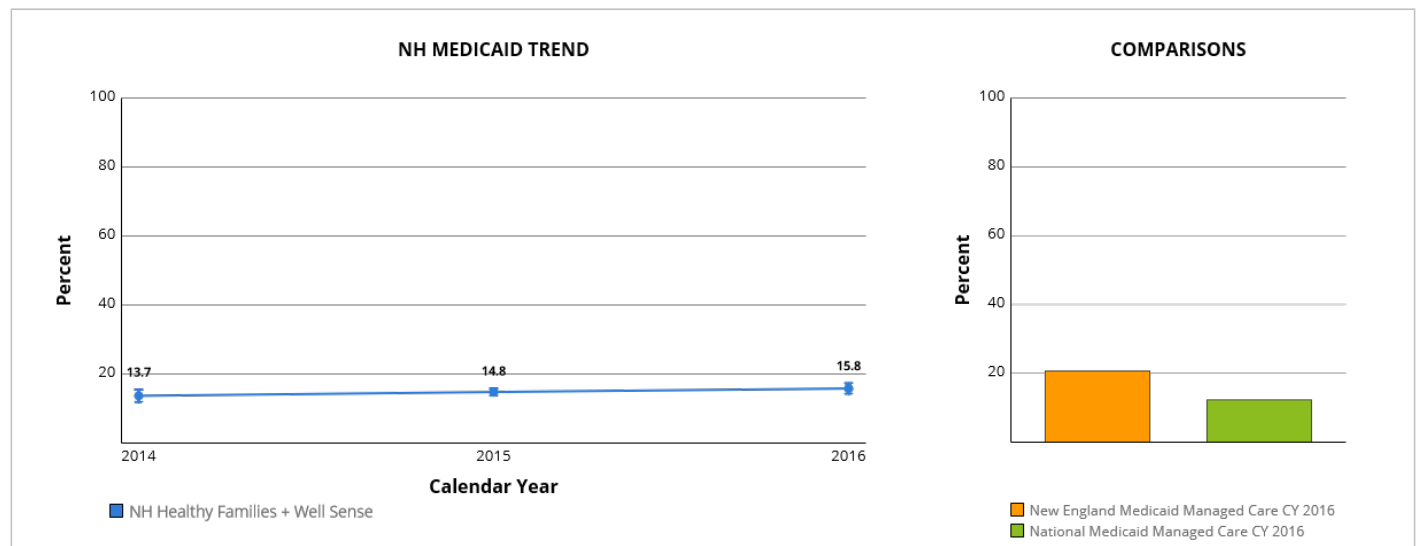
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2016
- Comments:

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

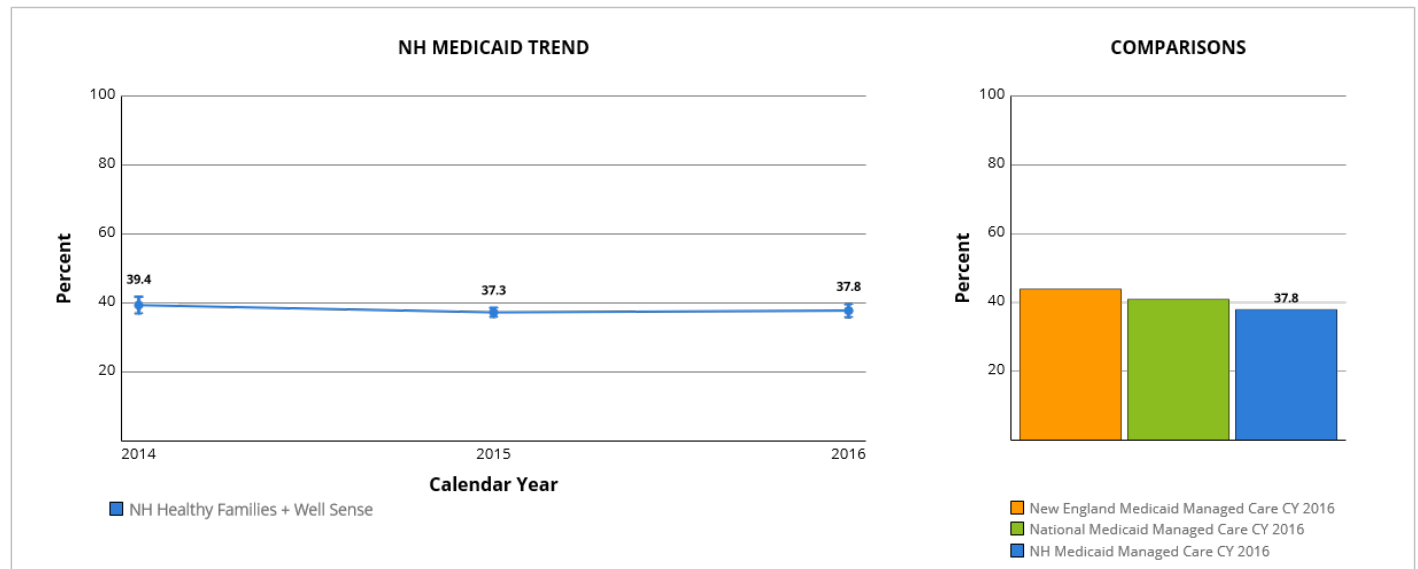
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2016
- Comments:

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:
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NH Medicaid Managed Care

- Data Sources: NH MCM Rate
 - Years: CY 2016
 - Comments:
-

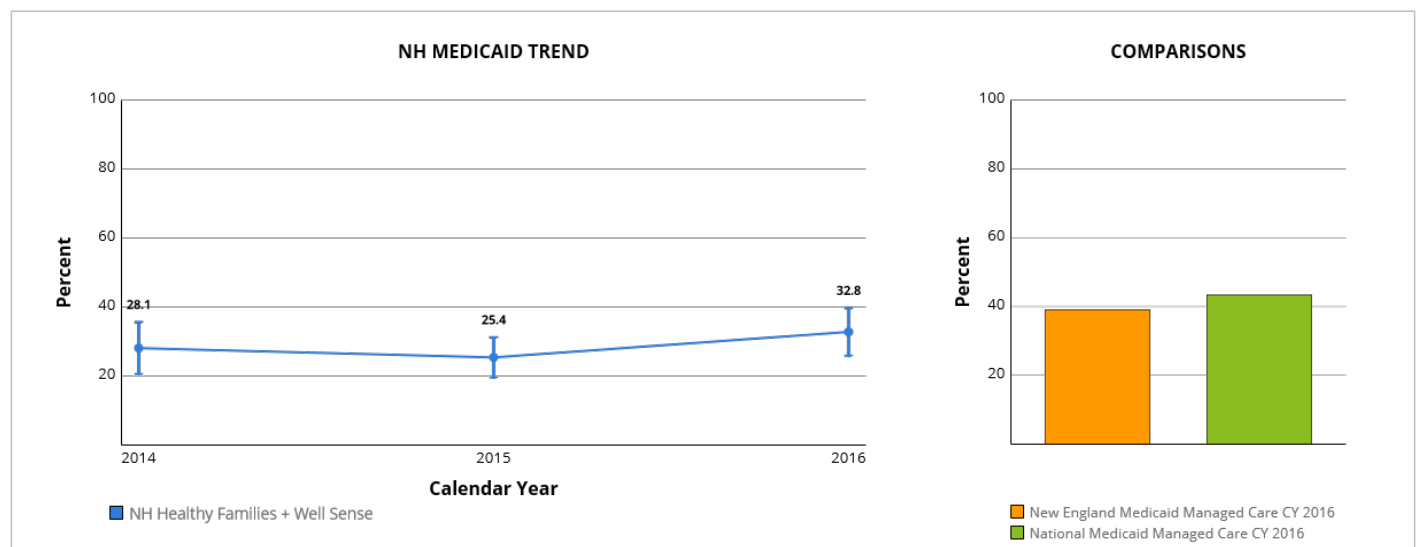
Initiation of Alcohol and Other Drug Dependence Treatment (IET):

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:

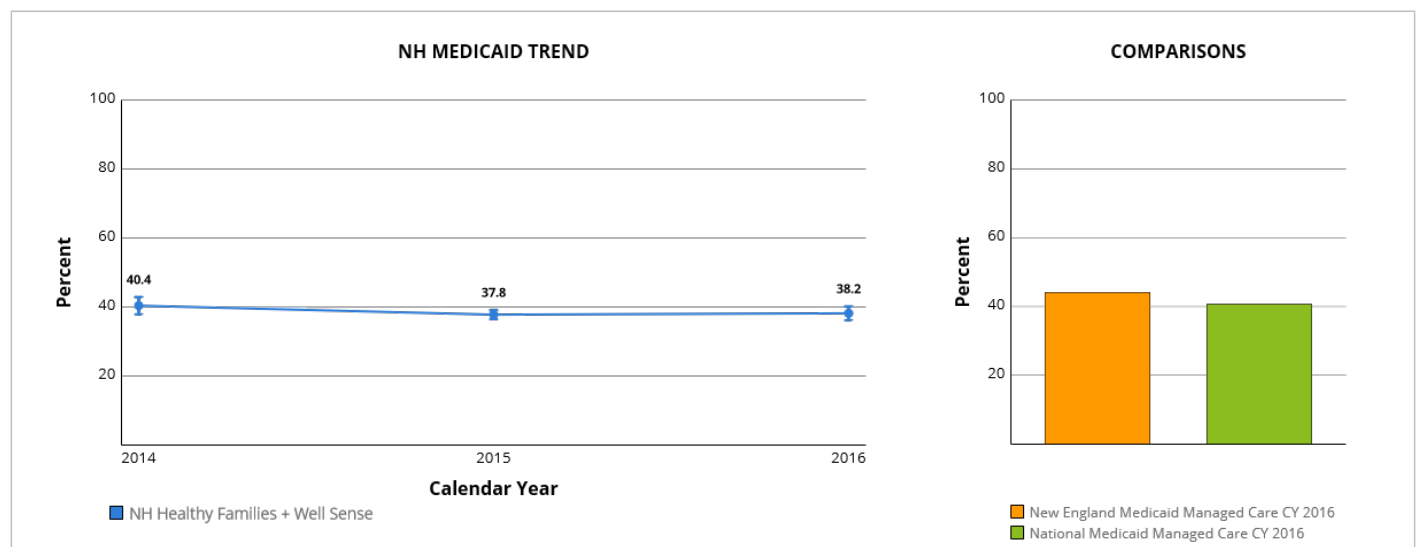
Initiation of Alcohol and Other Drug Dependence Treatment (IET):

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:

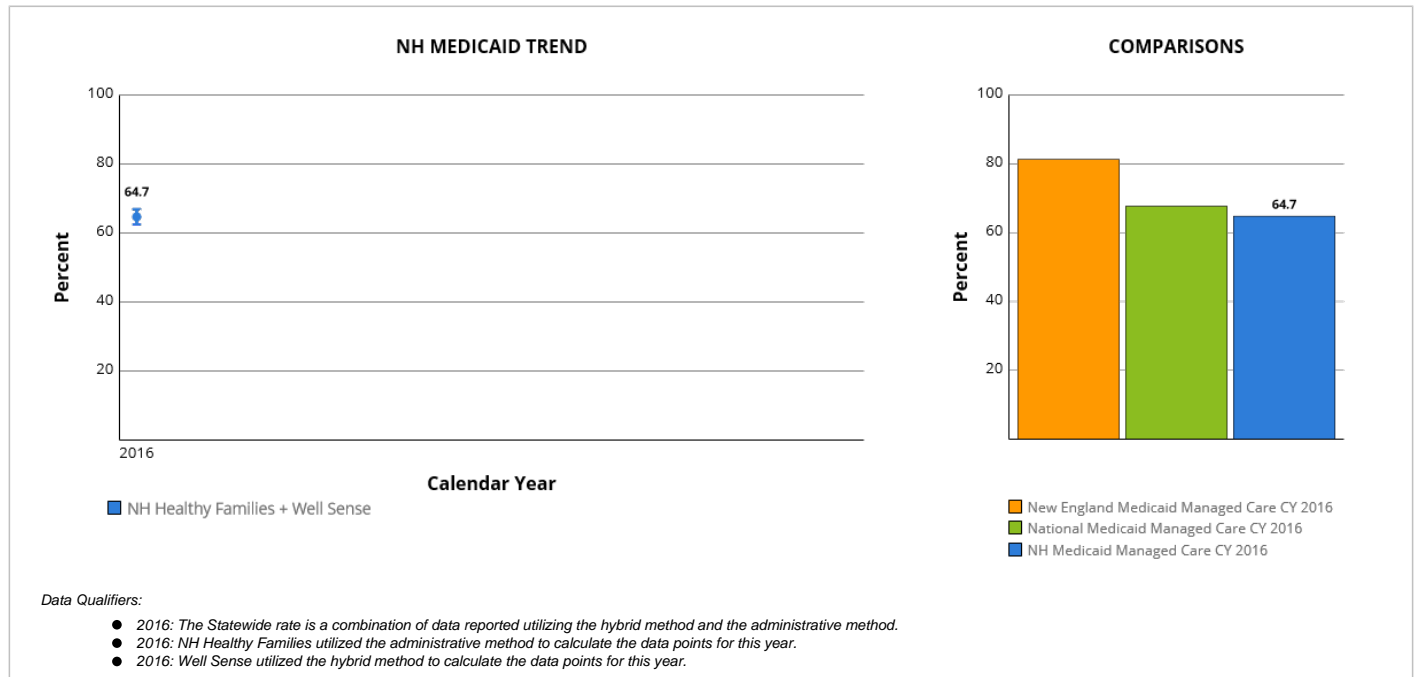
National Medicaid Managed Care

- 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 SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE 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 2016
- Comments:

National Medicaid Managed Care

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

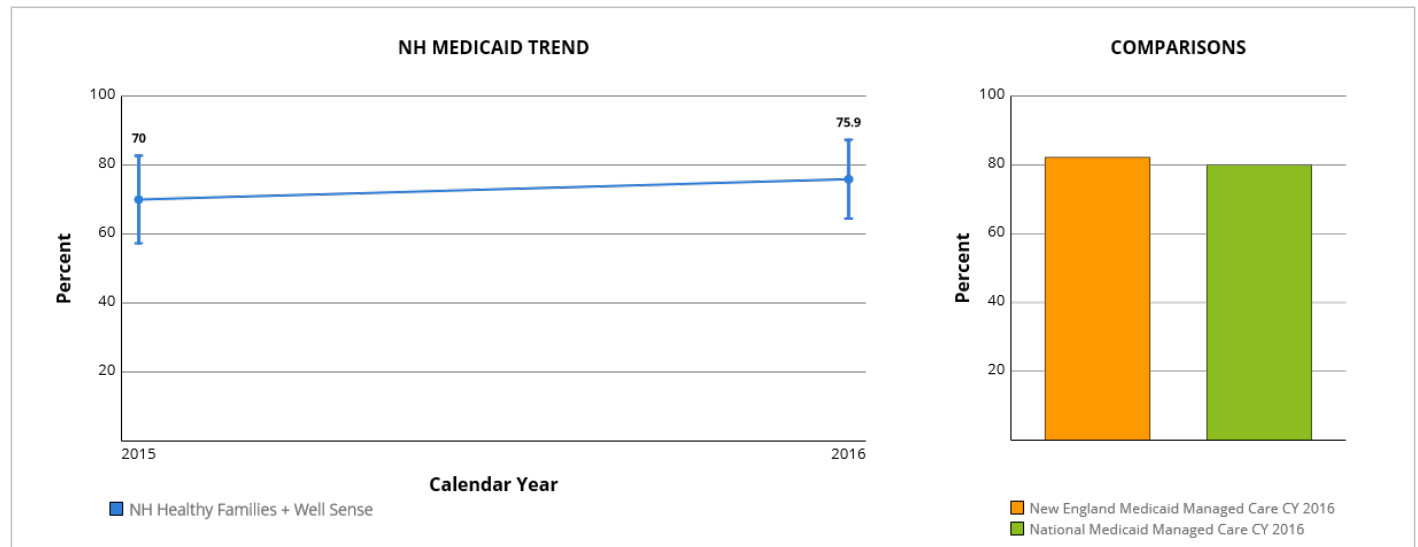
NH Medicaid Managed Care

- Data Sources: NH MCM Rate
 - Years: CY 2016
 - Comments:
-

Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)

HEDIS® Measurement Definition: The percentage of members 18 years of age and older during the measurement year who were hospitalized and discharged from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of AMI and who received persistent beta-blocker treatment for six months after discharge.

Measure Identifier: HEDIS_PBH.A



Data

Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	35	50	70.0%	57.3 - 82.7
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	41	54	75.9%	64.5 - 87.3

Measure Details

Measure Name: **Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)**

Measure Identifier: HEDIS_PBH.A

Data Source/Type: Administrative

Measure Relevance:

Topics: [Cardiovascular Health Care - Adults](#), [HEDIS Acute and Chronic 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:
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National Medicaid Managed Care

- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2014, CY 2015, CY 2016
 - Comments:
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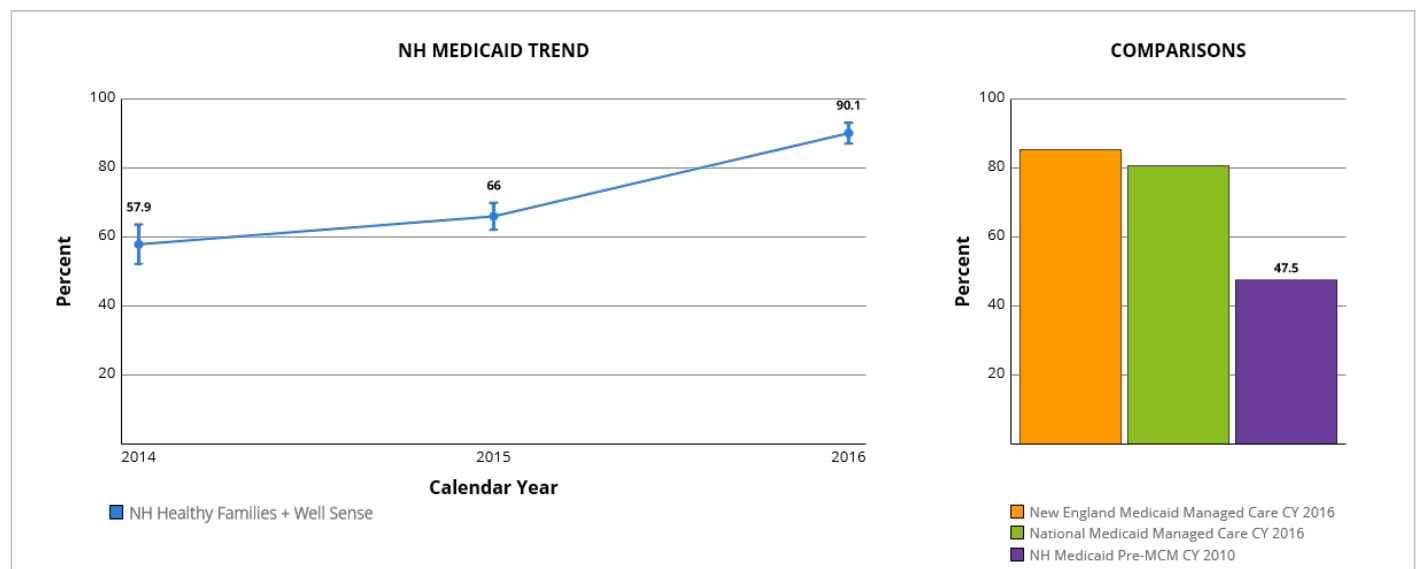
Pharmacotherapy Management of COPD Exacerbation (PCE): Bronchodilator

HEDIS® Measurement Definition: The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1–November 30 of the measurement year and who were dispensed appropriate medications for the following rate:

1. Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event.

Note: The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.

Measure Identifier: HEDIS_PCE.02.A



Data

Pharmacotherapy Management of COPD Exacerbation (PCE): Bronchodilator

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	168	290	57.9%	52.2 - 63.6
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	380	576	66.0%	62.1 - 69.9
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	337	374	90.1%	87.1 - 93.1

Measure Details

Measure Name: **Pharmacotherapy Management of COPD Exacerbation (PCE): Bronchodilator**

Measure Identifier: HEDIS_PCE.02.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of Chronic Obstructive Pulmonary Disease (COPD) exacerbations for adults 40 years of age and older that had an acute inpatient discharge or emergency department (ED) visit and filled a prescription for bronchodilator(s) within 30 days. COPD is one of the leading causes of death in the United States. COPD treatment including use of appropriate medications can control symptoms and decrease the frequency and severity of exacerbations. A low or falling rate may indicate that adults are not be receiving bronchodilator(s) for COPD management, which may lead to further exacerbations requiring potentially avoidable readmissions or ED visits. This measure is reported as the number of Chronic Obstructive Pulmonary Disease (COPD) exacerbations for adults 40 years of age and older who had an acute inpatient discharge or emergency department (ED) visit and who filled a prescription for a bronchodilator(s) within 30 days, divided by the total eligible population, as a percentage.

Topics: [Respiratory Health Care - Adults](#), [HEDIS Acute and Chronic 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 2014, CY 2015, CY 2016
- Comments:

NH Medicaid Pre-MCM

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

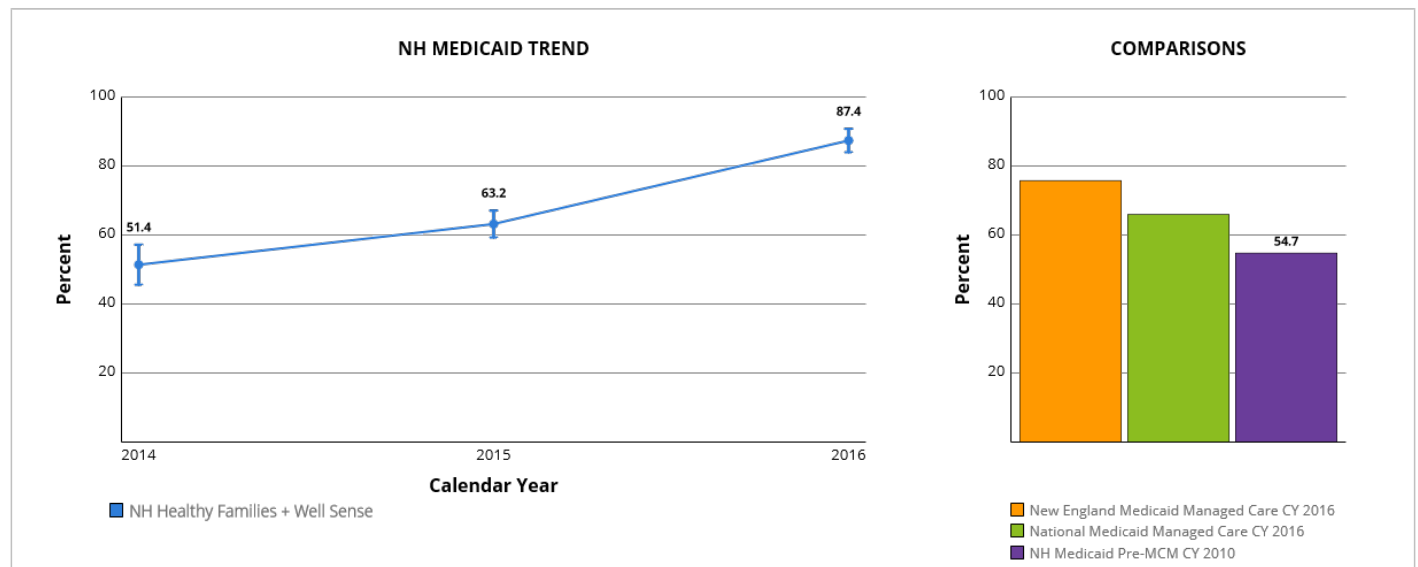
Pharmacotherapy Management of COPD Exacerbation (PCE): Systemic Corticosteroid

HEDIS® Measurement Definition: The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1–November 30 of the measurement year and who were dispensed appropriate medications for the following rate:

1. Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of the event.

Note: The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.

Measure Identifier: HEDIS_PCE.01.A



Data

Pharmacotherapy Management of COPD Exacerbation (PCE): Systemic Corticosteroid

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	149	290	51.4%	45.6 - 57.2
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	364	576	63.2%	59.3 - 67.1
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	327	374	87.4%	84.0 - 90.8

Measure Details

Measure Name: **Pharmacotherapy Management of COPD Exacerbation (PCE): Systemic Corticosteroid**

Measure Identifier: HEDIS_PCE.01.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of Chronic Obstructive Pulmonary Disease (COPD) exacerbations for adults 40 years of age and older that had an acute inpatient discharge or emergency department (ED) visit and filled a prescription for systemic corticosteroid within 14 days. COPD is one of the leading causes of death in the United States. COPD treatment including use of appropriate medications can control symptoms and decrease the frequency and severity of exacerbations. A low or falling rate may indicate that adults are not receiving systemic corticosteroids within 14 days for COPD management, which may lead to further exacerbations requiring potentially avoidable readmissions or ED visits. This measure is reported as the number of Chronic Obstructive Pulmonary Disease (COPD) exacerbations for adults 40 years of age and older who had an acute inpatient discharge or emergency department (ED) visit and who filled a prescription for systemic corticosteroid within 14 days, divided by the total eligible population, as a percentage.

Topics: [Respiratory Health Care - Adults](#), [HEDIS Acute and Chronic 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 2014, CY 2015, CY 2016
- Comments:

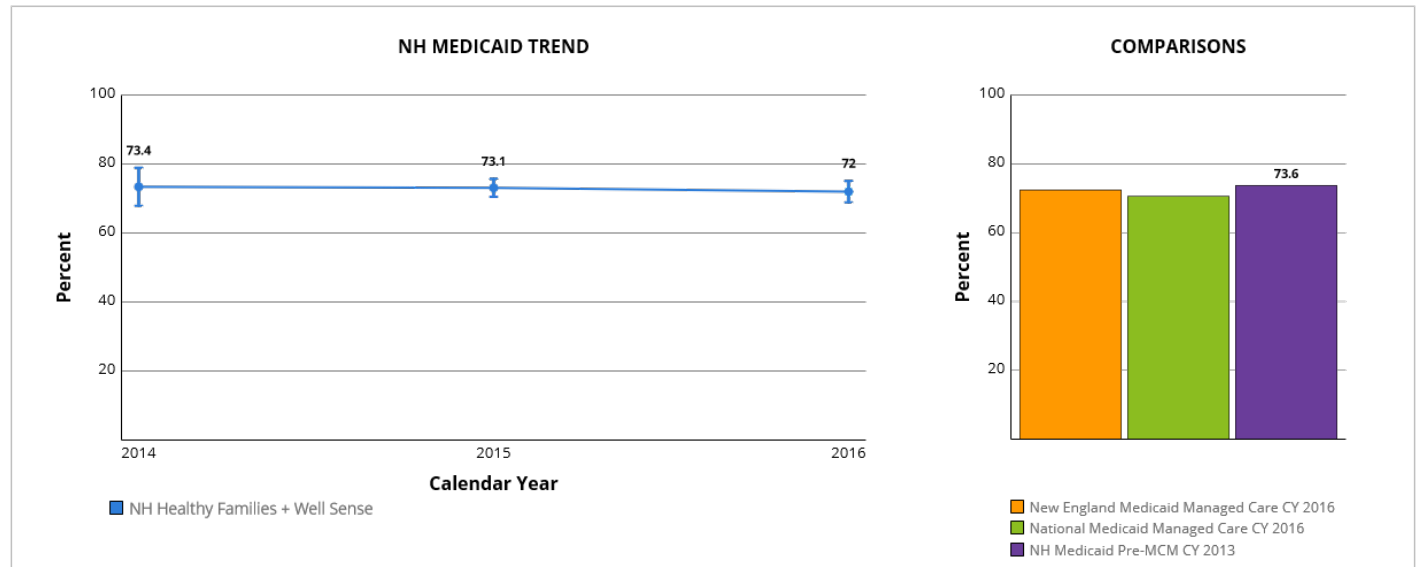
NH Medicaid Pre-MCM

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

Use of Imaging Studies for Low Back Pain (LBP)

HEDIS® Measurement Definition: The percentage of members with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.

Measure Identifier: HEDIS_LBP.A



Data

Use of Imaging Studies for Low Back Pain (LBP)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2014-01-01 - 2014-12-31	NH Healthy Families + Well Sense	66	248	73.4%	67.9 - 78.9
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	308	1,144	73.1%	70.5 - 75.7
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	225	804	72.0%	68.9 - 75.1

Measure Details

Measure Name: **Use of Imaging Studies for Low Back Pain (LBP)**

Measure Identifier: HEDIS_LBP.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 18-50 years of age diagnosed with low back pain who did not receive an imaging study within 28 days of diagnosis. The American Academy of Family Physicians (AAFP) states that for most people with acute low back pain, imaging the lower spine before six weeks does not improve outcomes. Therefore, most adults with low back pain should not receive imaging within 28 days of diagnosis. A low or falling rate may indicate that adults are receiving unnecessary imaging studies. This measure is reported as the number of adults 18-50 years of age diagnosed with low back pain who did not receive an imaging study within 28 days of diagnosis, divided by the total eligible population, reported as a percentage.

Topics: [HEDIS Acute and Chronic 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:

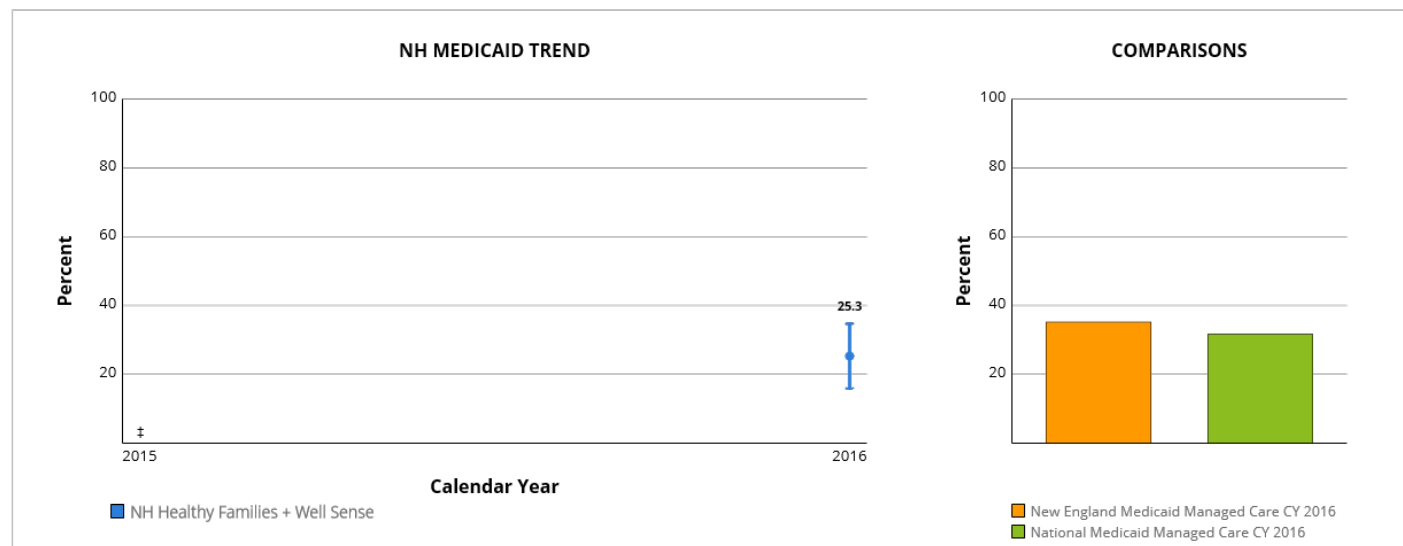
NH Medicaid Pre-MCM

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

Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

HEDIS® Measurement Definition: The percentage of members 40 years of age and older with a new diagnosis of COPD or newly active COPD, who received appropriate spirometry testing to confirm the diagnosis.

Measure Identifier: HEDIS_SPR.A



Data

Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

TIME PERIOD	DATA SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE INTERVAL
2015-01-01 - 2015-12-31	NH Healthy Families + Well Sense	0	0	‡	‡
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	21	83	25.3%	15.9 - 34.7

‡ Data has been suppressed due to small sample size.

Measure Details

Measure Name: **Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)**

Measure Identifier: HEDIS_SPR.A

Data Source/Type: Administrative

Measure Relevance:

This measure captures the percent of adults 40 years of age and older with a new diagnosis of Chronic Obstructive Pulmonary Disease (COPD) or newly active COPD, in which spirometry testing was used to confirm the diagnosis. According to the American Thoracic Society (ATS) spirometry is the most common breathing test and preferred method used to confirm a diagnosis of COPD. A low or falling rate may indicate that adults are not receiving spirometry testing as part of the diagnostic workup for COPD. This measure is reported as the number of adults 40 years of age and older with a new diagnosis of Chronic Obstructive Pulmonary Disease (COPD) or newly active COPD, in which spirometry testing was used to confirm the diagnosis, divided by the total eligible population, as a percentage.

Topics: [Respiratory Health Care - Adults](#), [HEDIS Acute and Chronic 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:
-

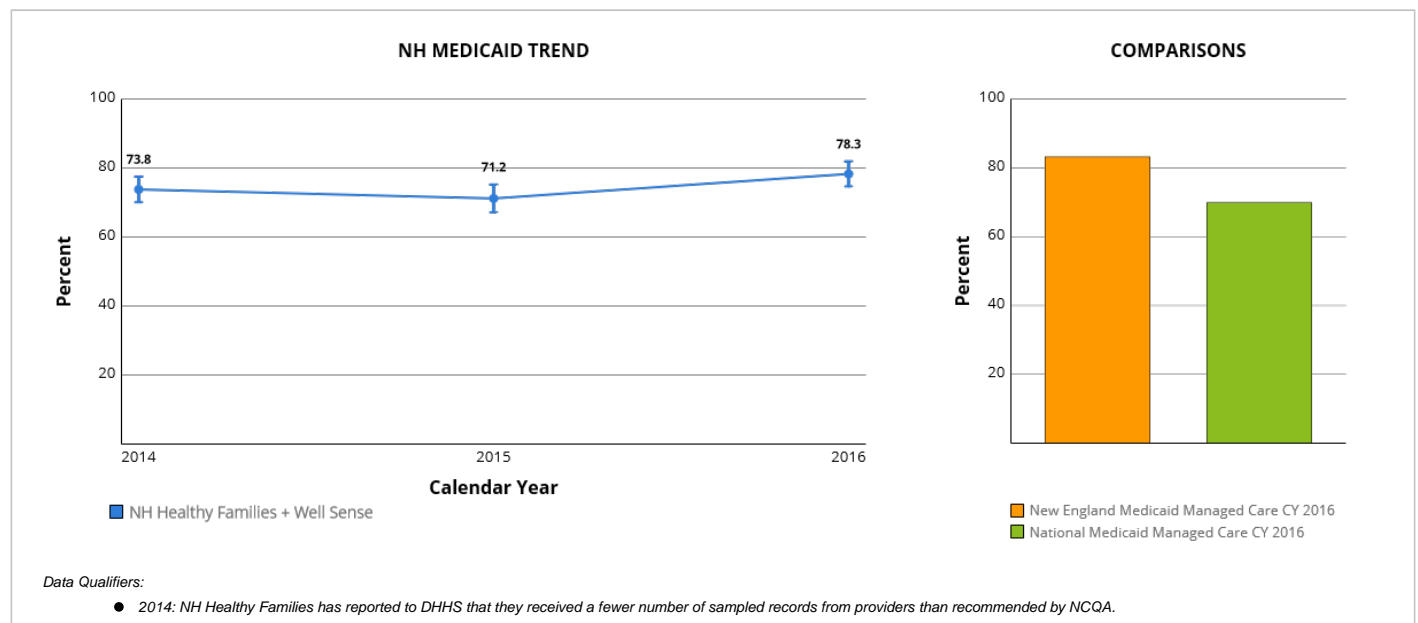
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: A. Age 3-11 Years

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 SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE 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 2016
- Comments:

National Medicaid Managed Care

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

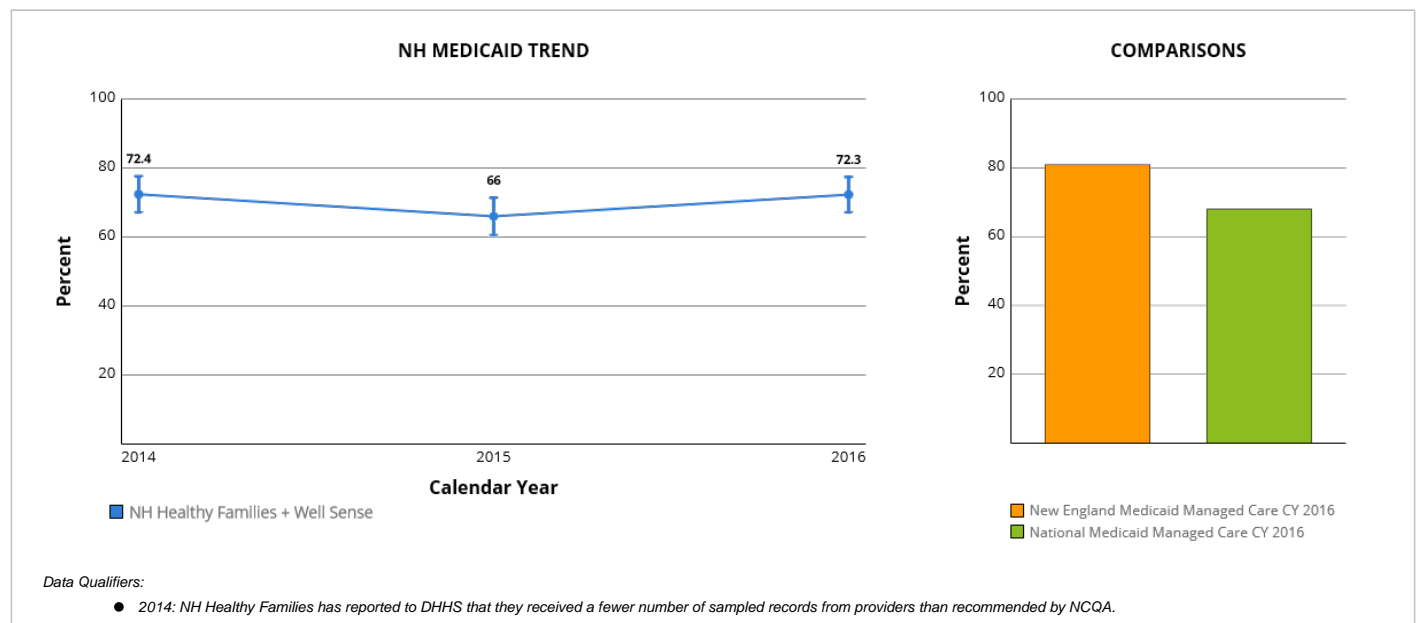
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC, Hybrid Specification): Evidence of BMI Percentile Documentation: B. Age 12-17 Years

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 SUBMITTER	MEASURE NUMERATOR	MEASURE DENOMINATOR	MEASURE RATE	CONFIDENCE 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

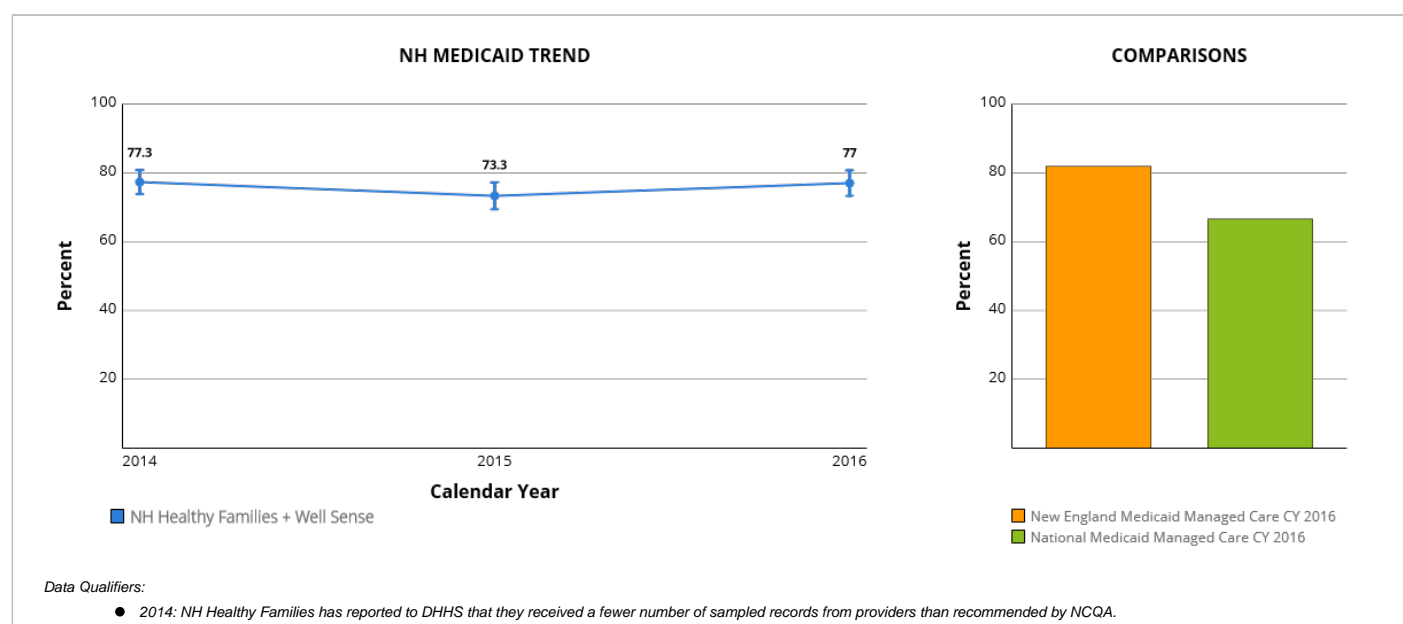
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2016
- Comments:

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 Details

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

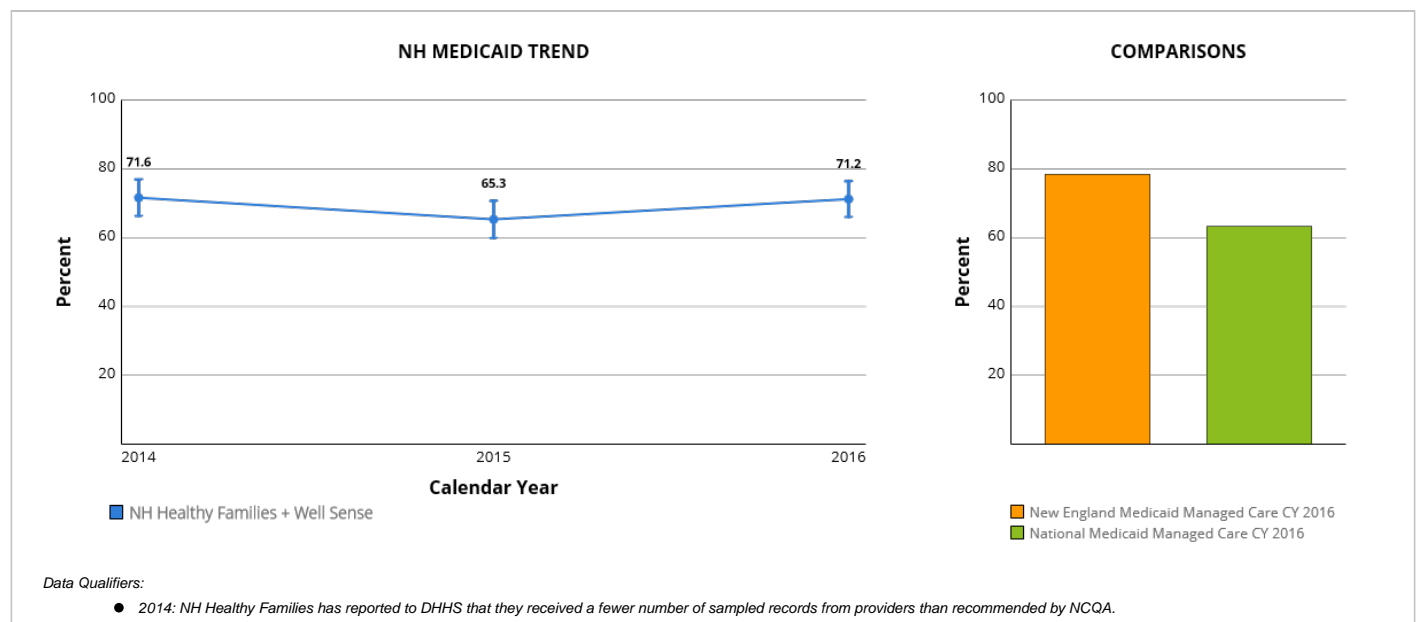
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2016
- Comments:

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 Details

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

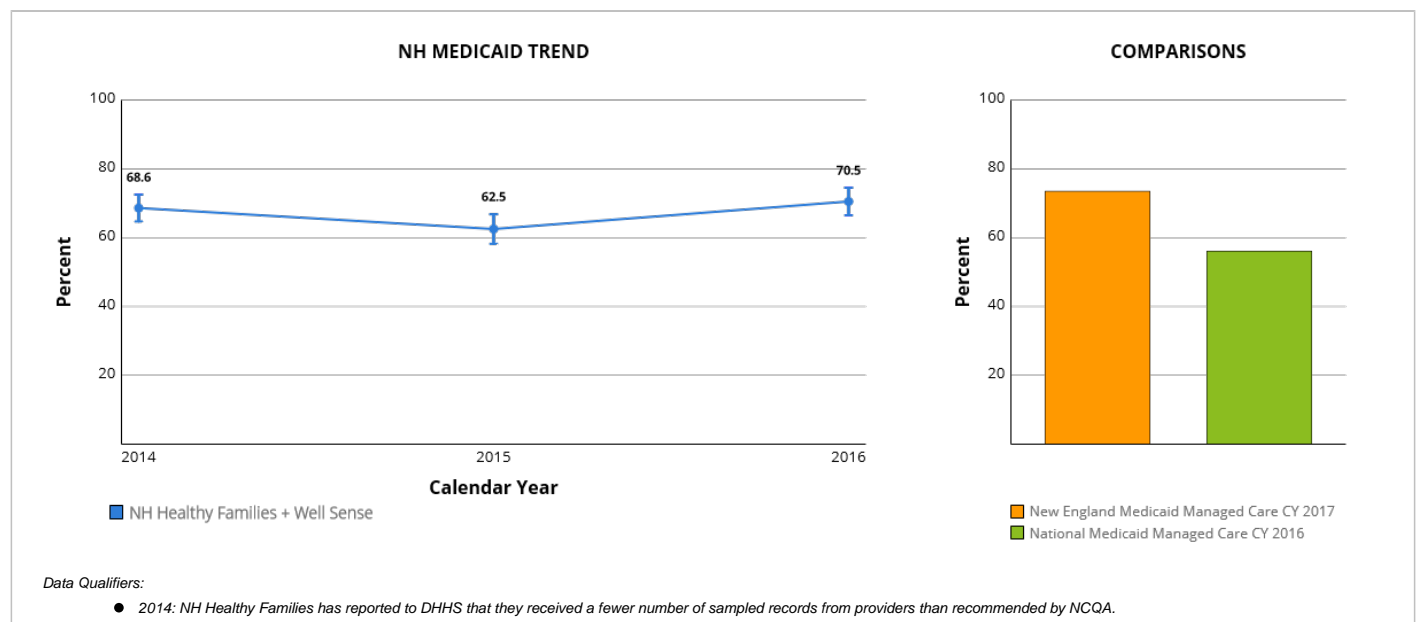
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2016
- Comments:

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

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

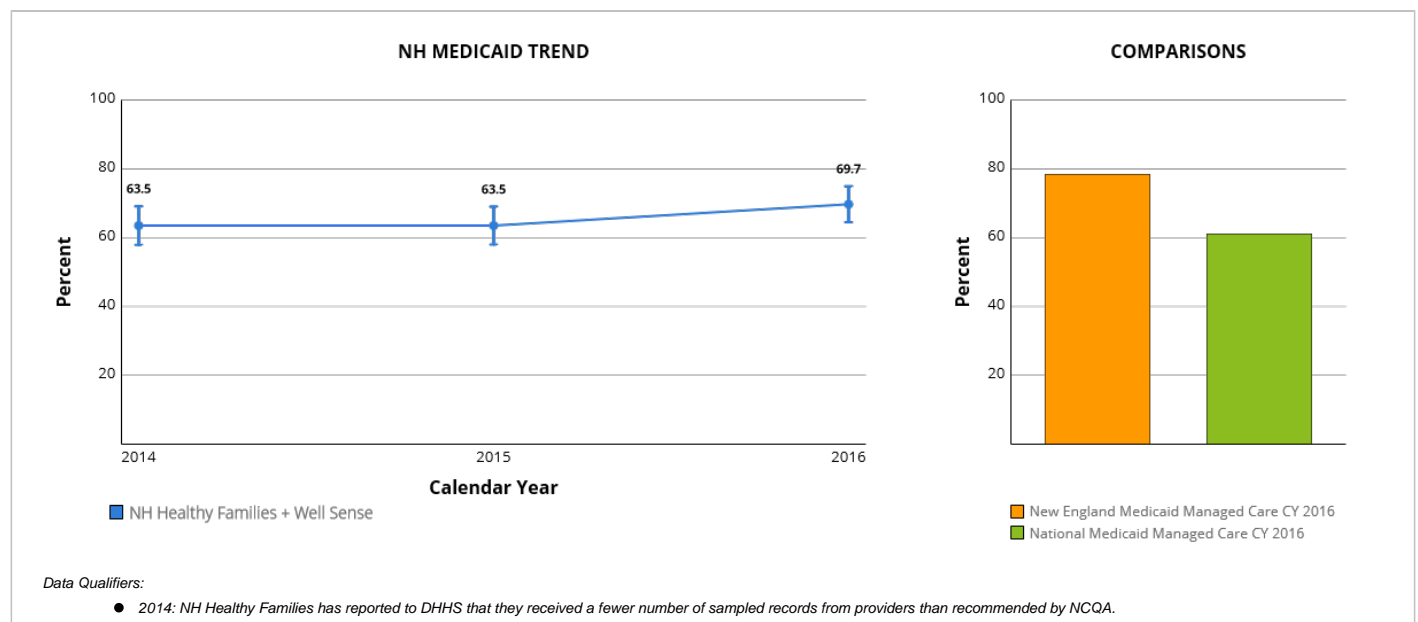
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
- Years: CY 2016
- Comments:

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 Details

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:

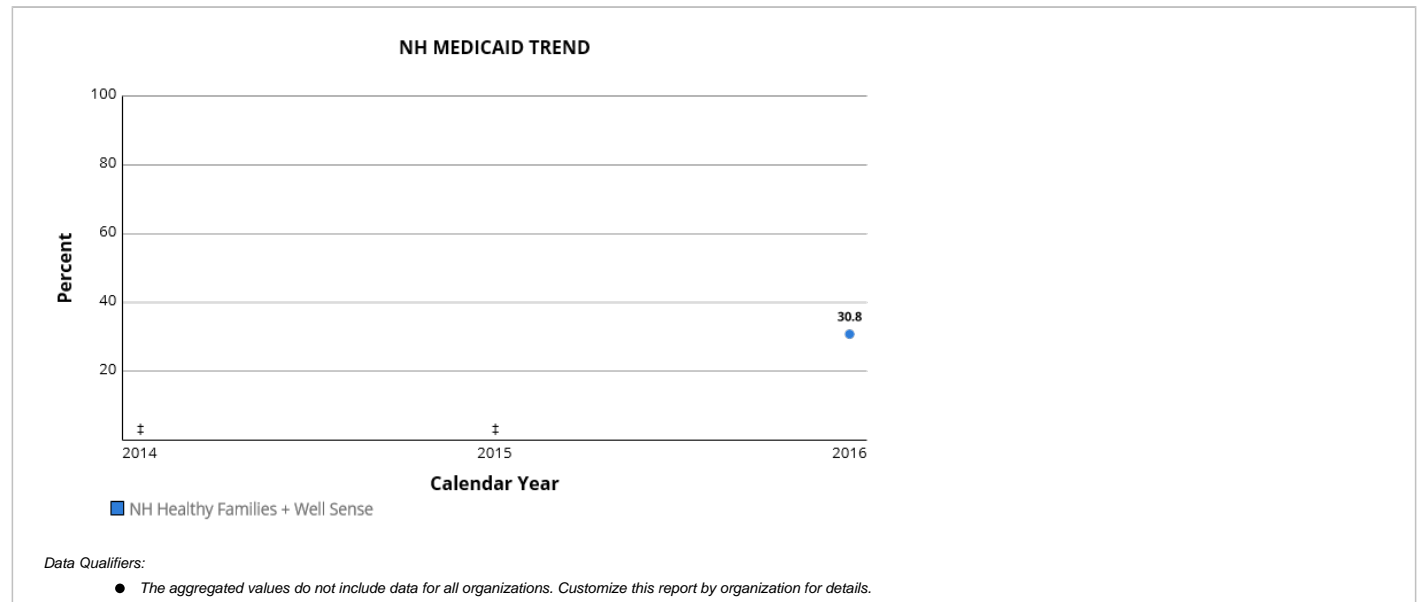
National Medicaid Managed Care

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

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

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:

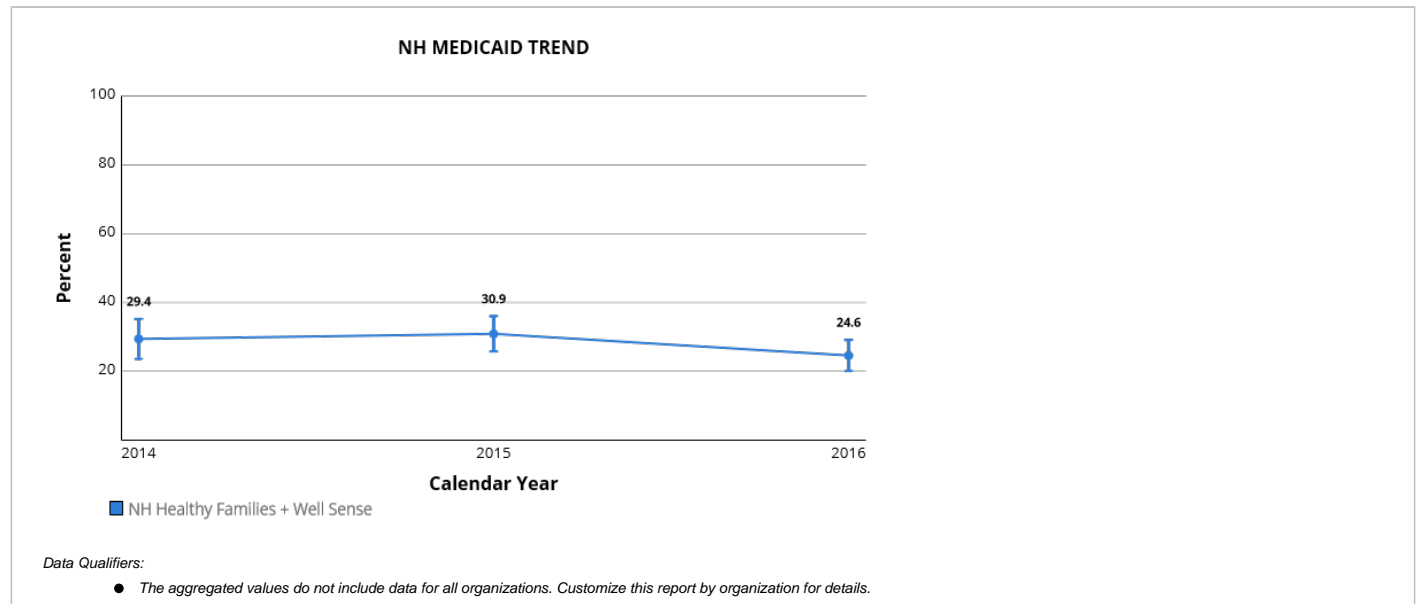
This measure captures the percent of children 1-5 years of age who are taking two or more antipsychotic medications and had metabolic testing. Some people who take antipsychotic medication gain weight and being overweight places them at a higher risk for developing diabetes over time. A low or falling 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

Topics:

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**

Measure Identifier: HEDIS_APM.A.611

Data Source/Type: Administrative

Measure Relevance:

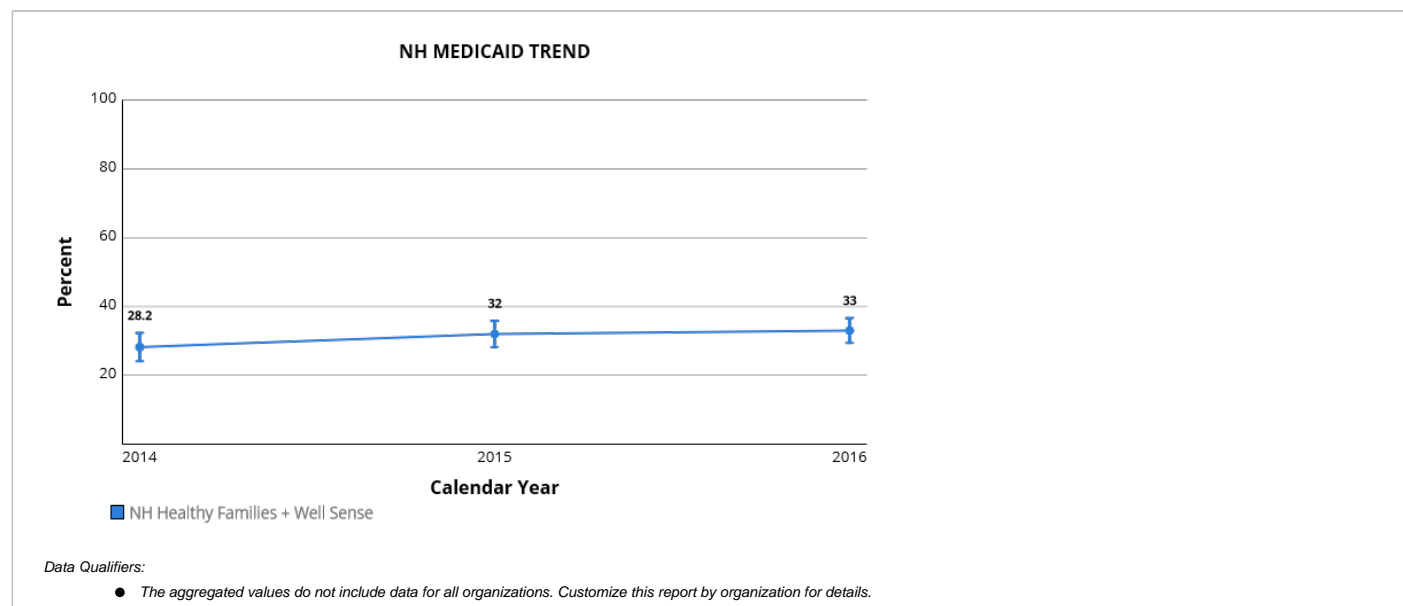
This measure captures the percent of children 6-11 years of age who are taking two or more antipsychotic medications and had metabolic testing. Some people who take antipsychotic medication gain weight and being overweight places them at a higher risk for developing diabetes over time. A low or falling 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:

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**

Measure Identifier: HEDIS_APM.A.1217

Data Source/Type: Administrative

Measure Relevance:

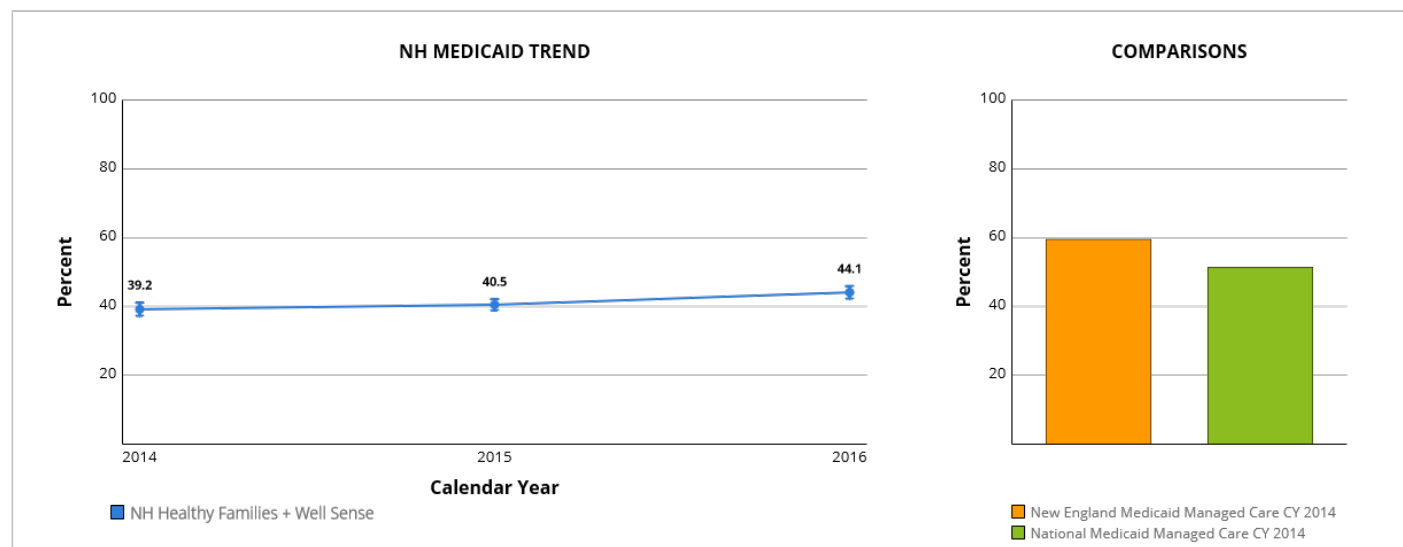
This measure captures the percent of children 12-17 years of age who are taking two or more antipsychotic medications and had metabolic testing. Some people who take antipsychotic medication gain weight and being overweight places them at a higher risk for developing diabetes over time. A low or falling 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:

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:
-

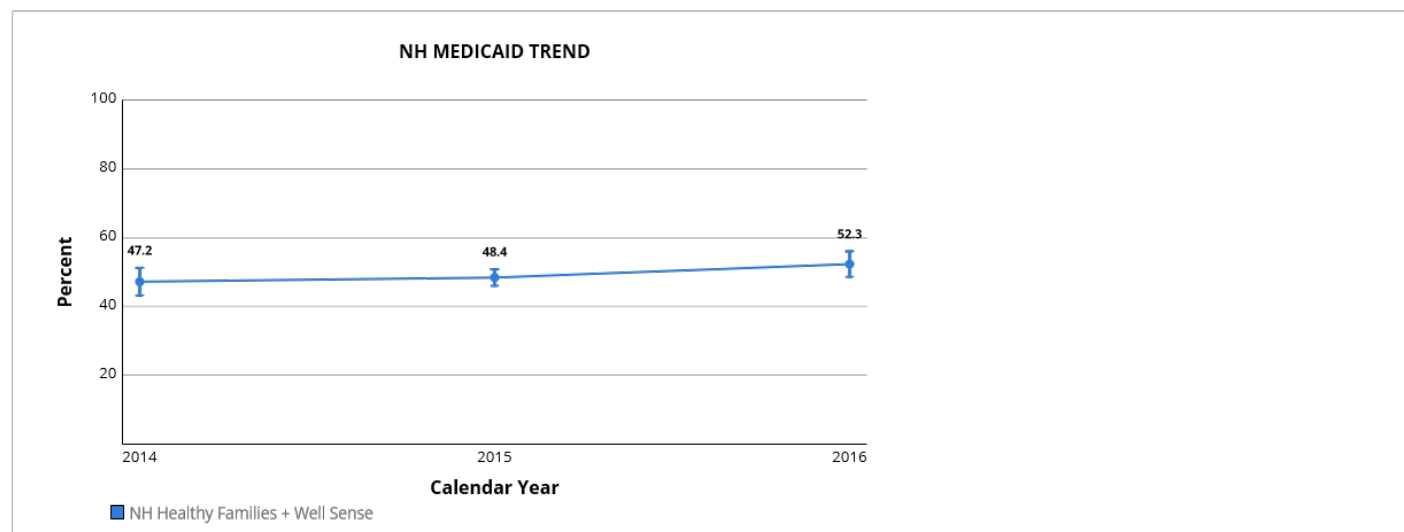
National Medicaid Managed Care

- 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:

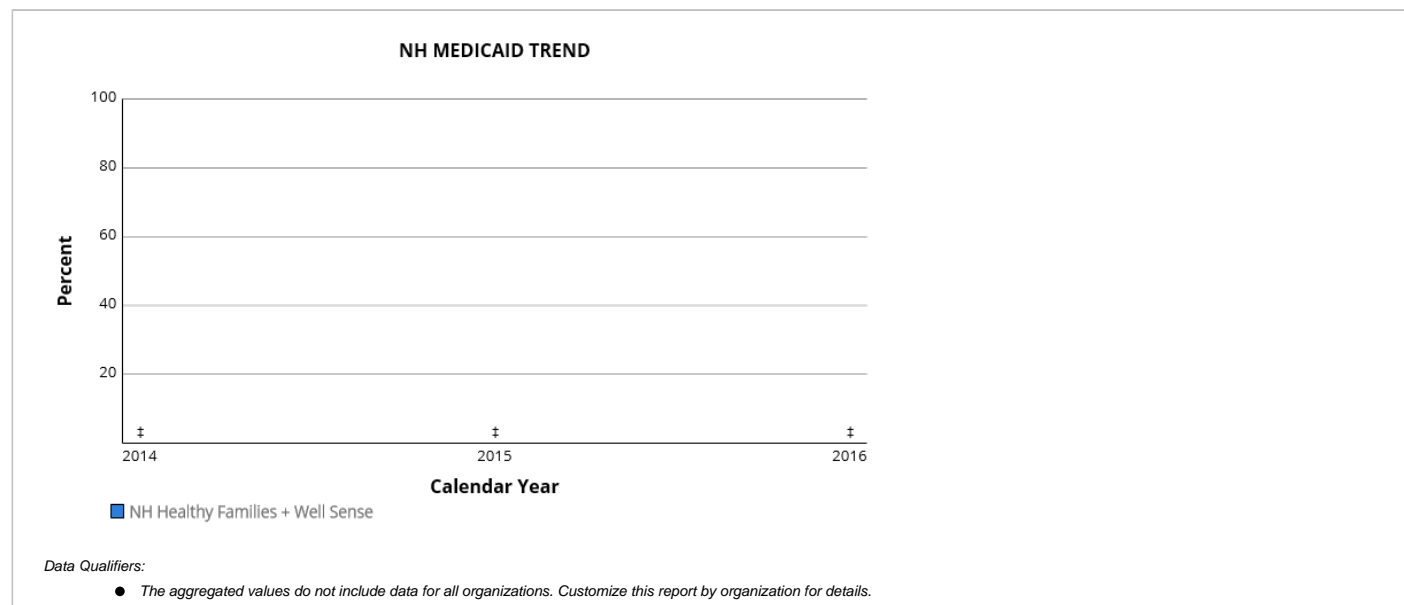
This measure captures the percent of sexually active females 21-24 years of age who had at least one test for chlamydia during the past year. Chlamydia is the most common sexually transmitted disease in the United States, and may lead to an increased risk of pelvic infections, infertility, and complications 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.

Topics:

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:

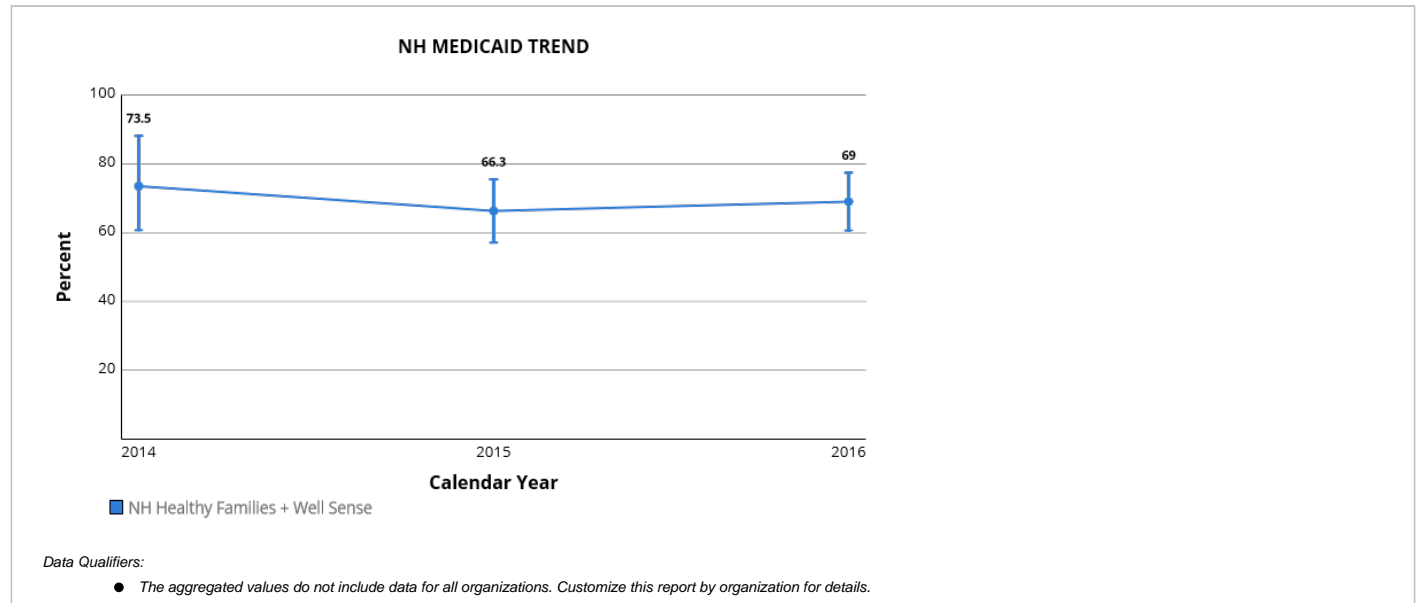
This measure captures the percent of children 1-5 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care as the first-line treatment. Psychosocial care provides a whole person approach to an individual and looks at the overall well-being of the patient; 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:

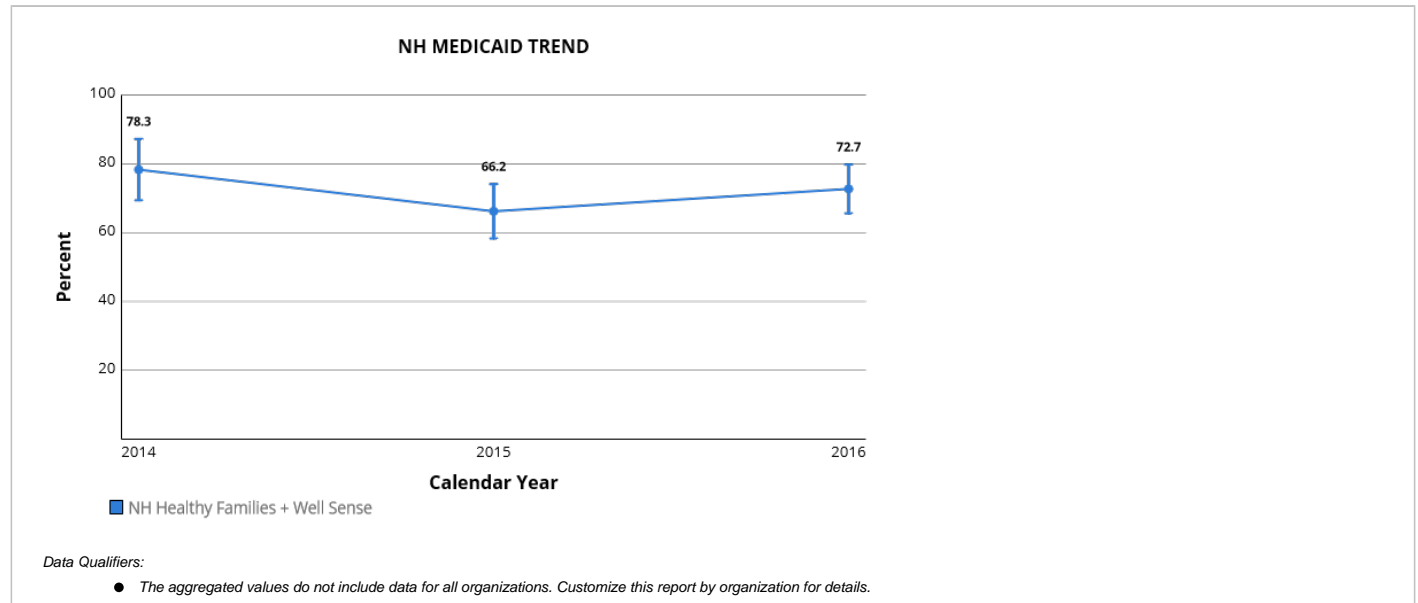
This measure captures the percent of children 6-11 years of age who started on an antipsychotic medication and had documentation of receiving psychosocial care as the first-line treatment. Psychosocial care provides a whole person approach to an individual and looks at the overall well-being of the patient; 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.

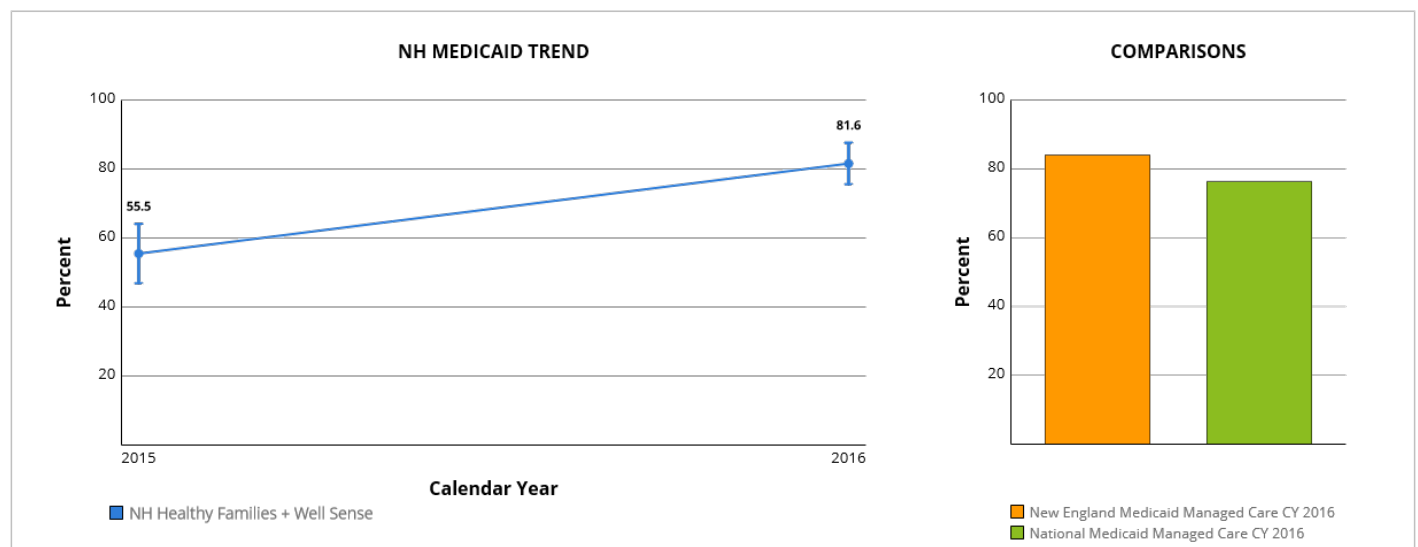
Topics:

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 2016
 - Comments:
-

National Medicaid Managed Care

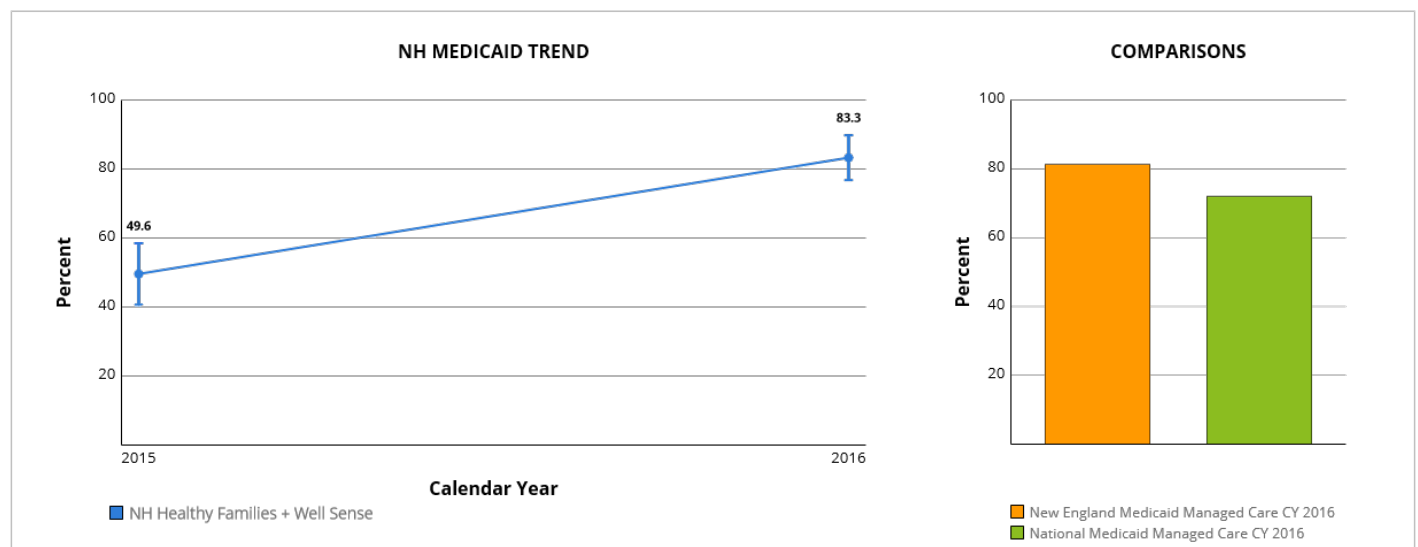
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2016
 - Comments:
-

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**

Measure Identifier: HEDIS_SPC.A.THR.4075

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:
-

National Medicaid Managed Care

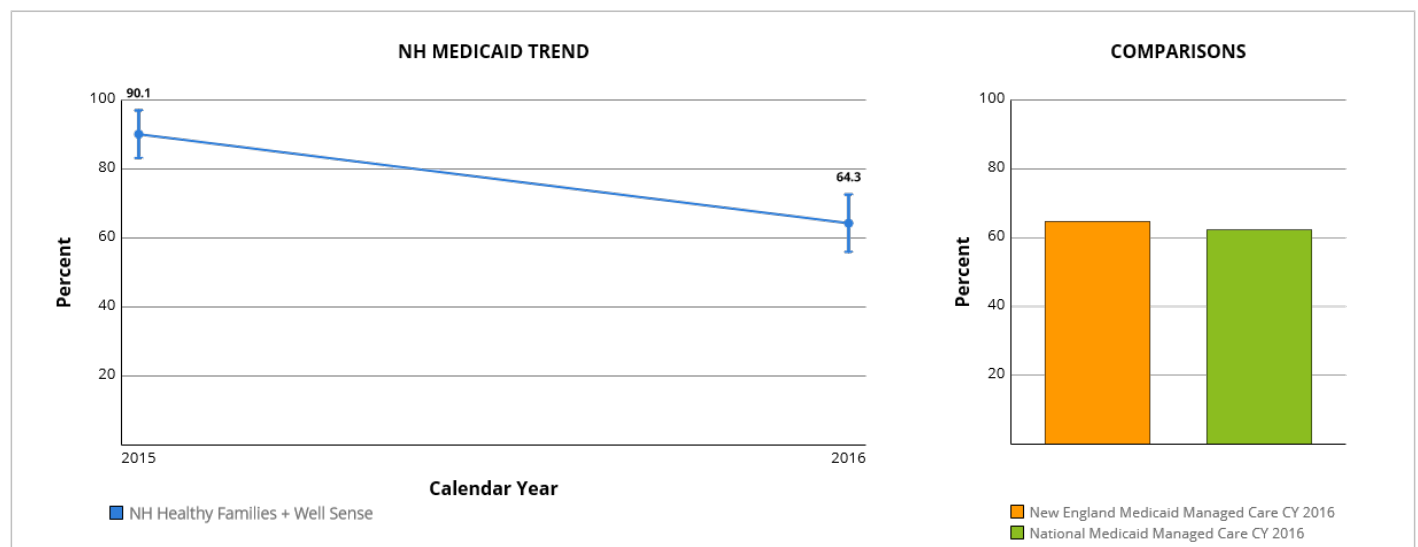
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2016
 - Comments:
-

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 2016
 - Comments:
-

National Medicaid Managed Care

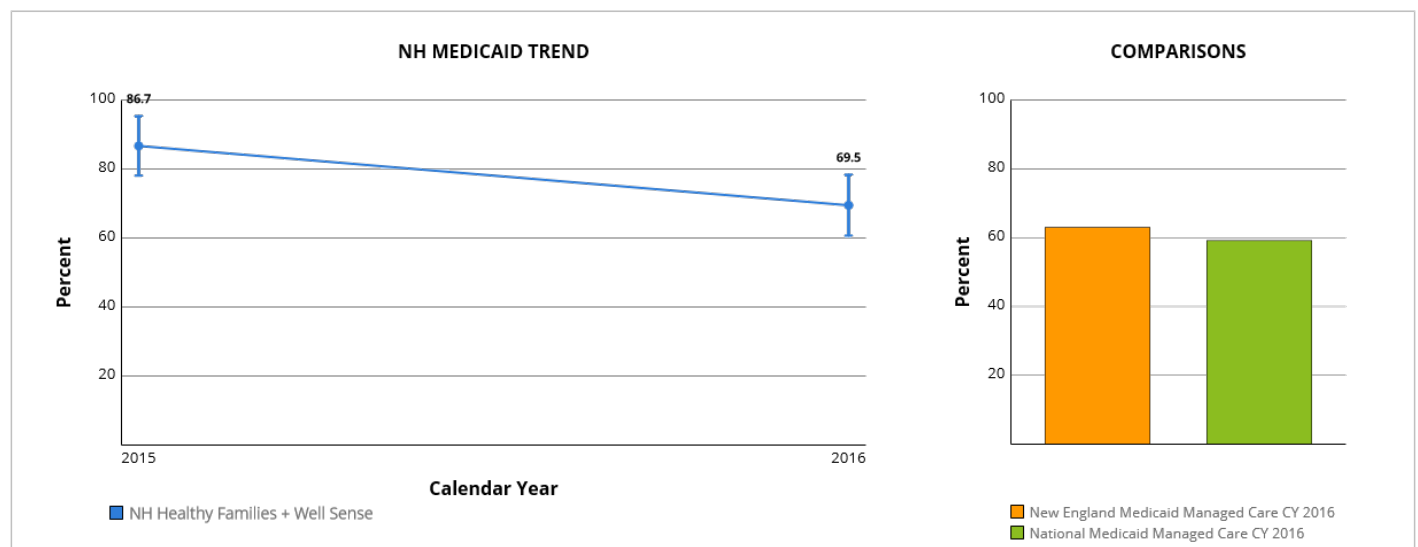
- Data Sources: National Medicaid Managed Care, Quality Compass NCQA
 - Years: CY 2016
 - Comments:
-

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.4075

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:
-

National Medicaid Managed Care

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

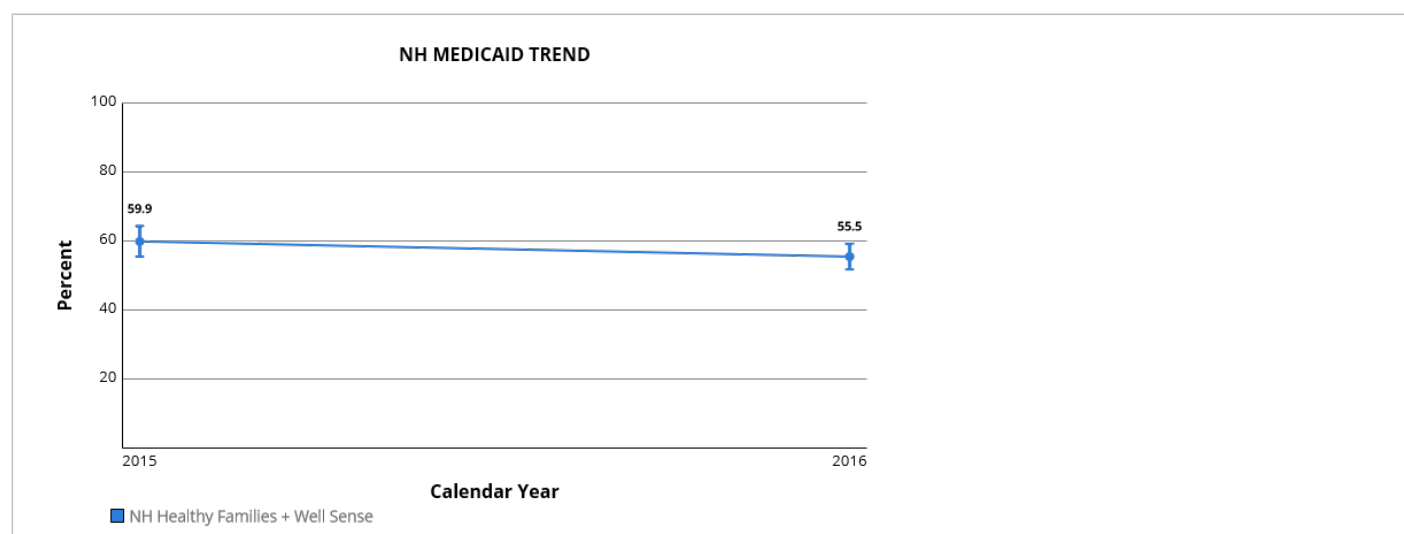
Medication Management for People With Asthma (MMA):

Medication Compliance 50%: 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 50% of their treatment period.

Measure Identifier: HEDIS_MMA.A.50PC.0511



Data

Medication Management for People With Asthma (MMA): Medication Compliance 50%: 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	287	479	59.9%	55.5 - 64.3
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	378	681	55.5%	51.8 - 59.2

Measure Details

Measure Name: **Medication Management for People With Asthma (MMA): Medication Compliance 50%: A. Age 5 to 11 Years**

Measure Identifier: HEDIS_MMA.A.50PC.0511

Data Source/Type: Administrative

Measure Relevance:

Topics:

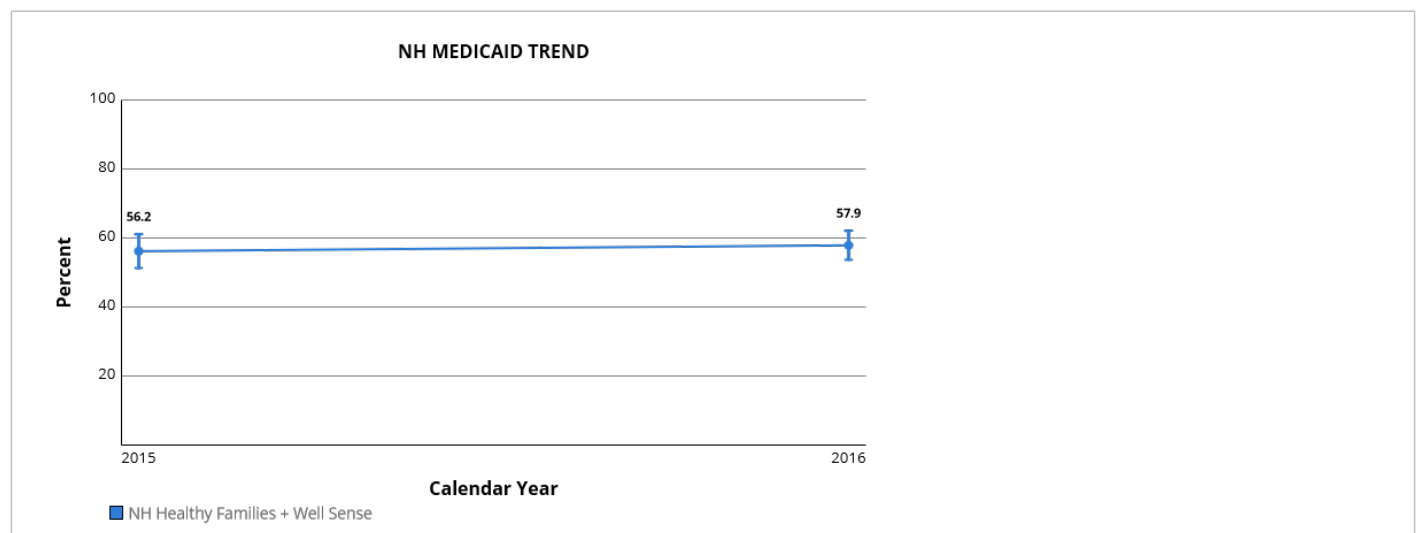
Medication Management for People With Asthma (MMA):

Medication Compliance 50%: 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 50% of their treatment period.

Measure Identifier: HEDIS_MMA.A.50PC.1218



Data

Medication Management for People With Asthma (MMA): Medication Compliance 50%: 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	226	402	56.2%	51.3 - 61.1
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	312	539	57.9%	53.7 - 62.1

Measure Details

Measure Name: **Medication Management for People With Asthma (MMA): Medication Compliance 50%: B. Age 12 to 18 Years**

Measure Identifier: HEDIS_MMA.A.50PC.1218

Data Source/Type: Administrative

Measure Relevance:

Topics:

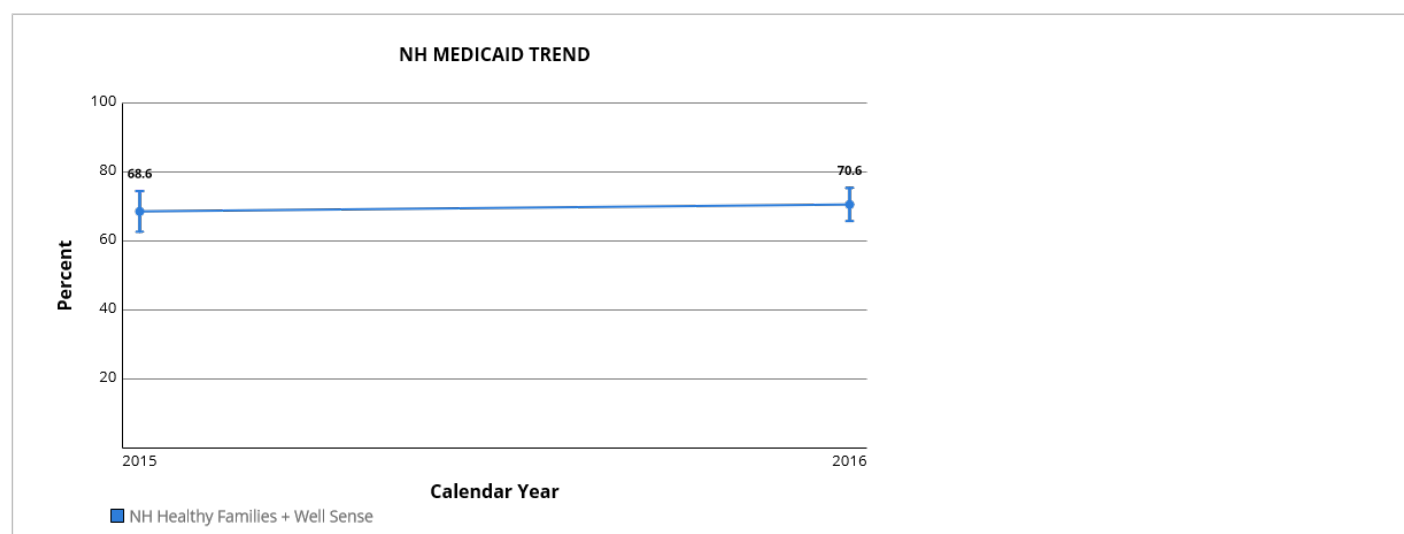
Medication Management for People With Asthma (MMA):

Medication Compliance 50%: 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 50% of their treatment period.

Measure Identifier: HEDIS_MMA.A.50PC.1950



Data

Medication Management for People With Asthma (MMA): Medication Compliance 50%: 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	164	239	68.6%	62.7 - 74.5
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	242	343	70.6%	65.8 - 75.4

Measure Details

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

Measure Identifier: HEDIS_MMA.A.50PC.1950

Data Source/Type: Administrative

Measure Relevance:

Topics:

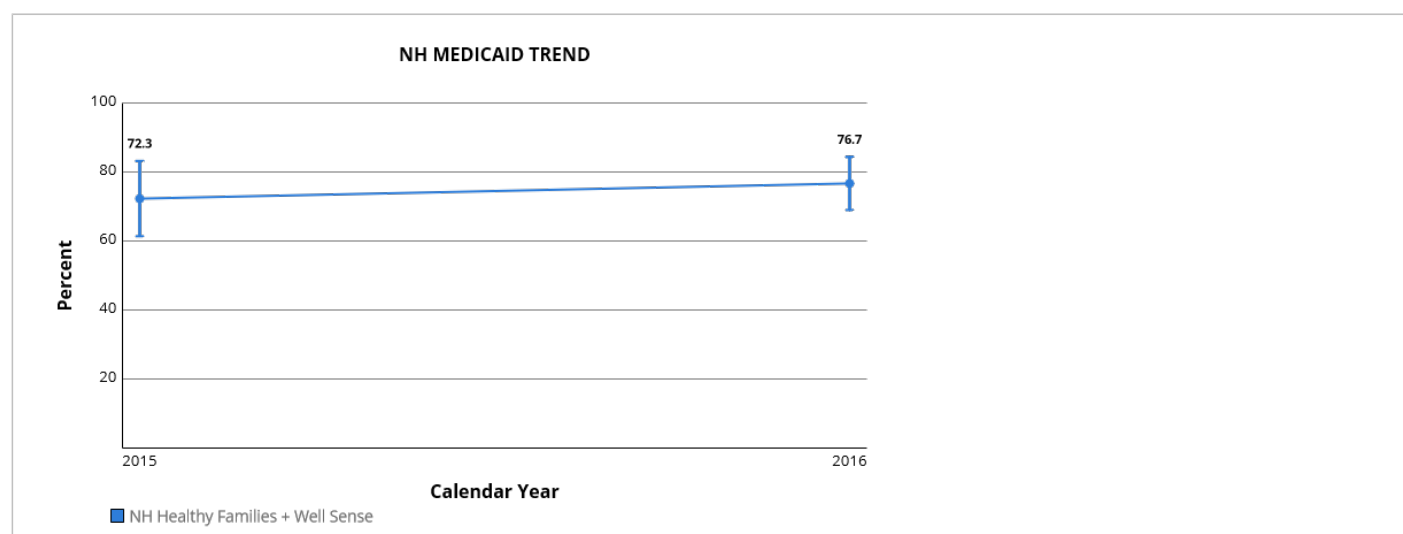
Medication Management for People With Asthma (MMA):

Medication Compliance 50%: 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 50% of their treatment period.

Measure Identifier: HEDIS_MMA.A.50PC.5164



Data

Medication Management for People With Asthma (MMA): Medication Compliance 50%: 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	47	65	72.3%	61.4 - 83.2
2016-01-01 - 2016-12-31	NH Healthy Families + Well Sense	89	116	76.7%	69.0 - 84.4

Measure Details

Measure Name: **Medication Management for People With Asthma (MMA): Medication Compliance 50%: D. Age 51 to 64 Years**

Measure Identifier: HEDIS_MMA.A.50PC.5164

Data Source/Type: Administrative

Measure Relevance:

Topics:

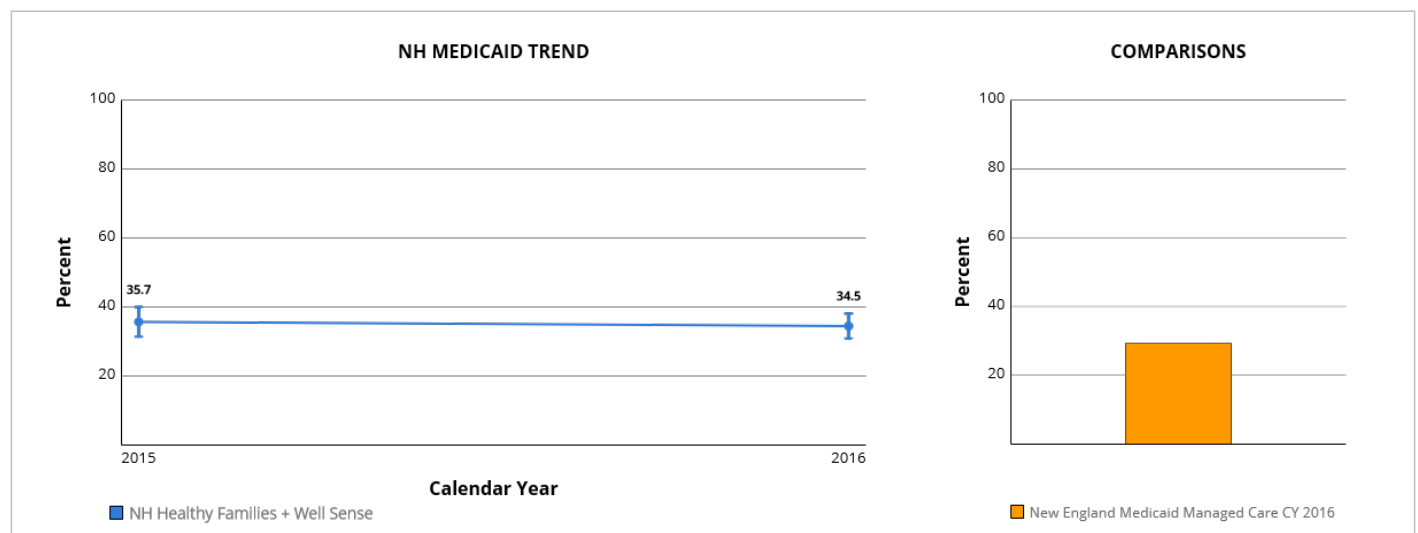
Medication Management for People With Asthma (MMA):

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:

Topics:

Comparison Rate Comparison Data

New England Medicaid Managed Care

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

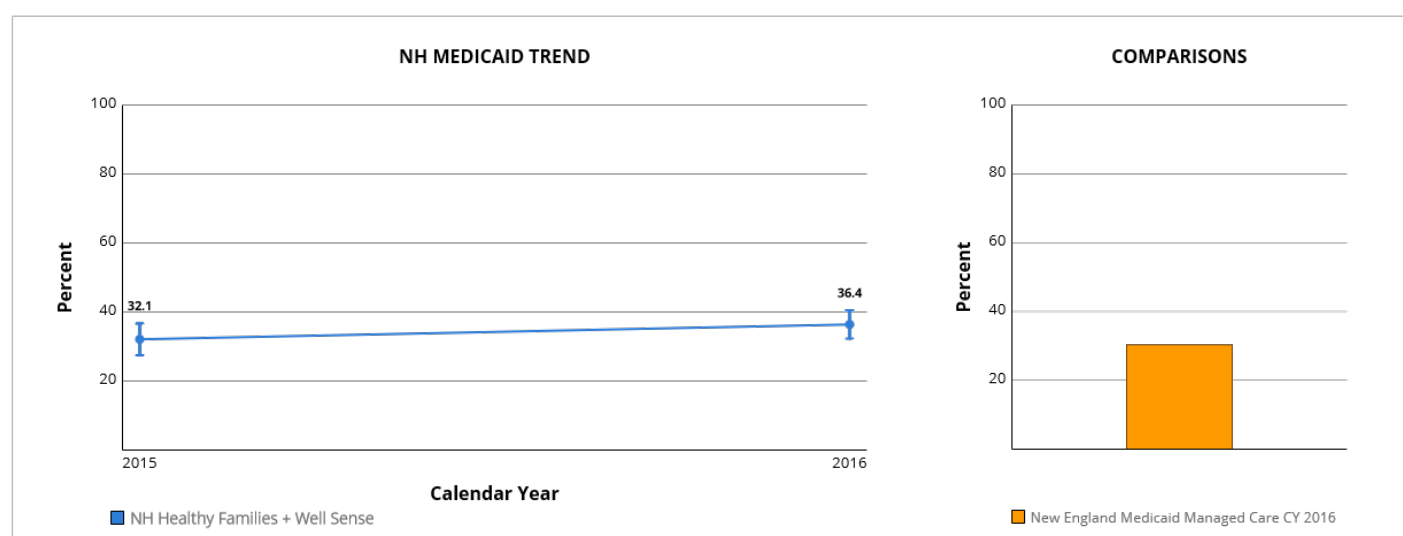
Medication Management for People With Asthma (MMA):

Medication Compliance 75%: 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:

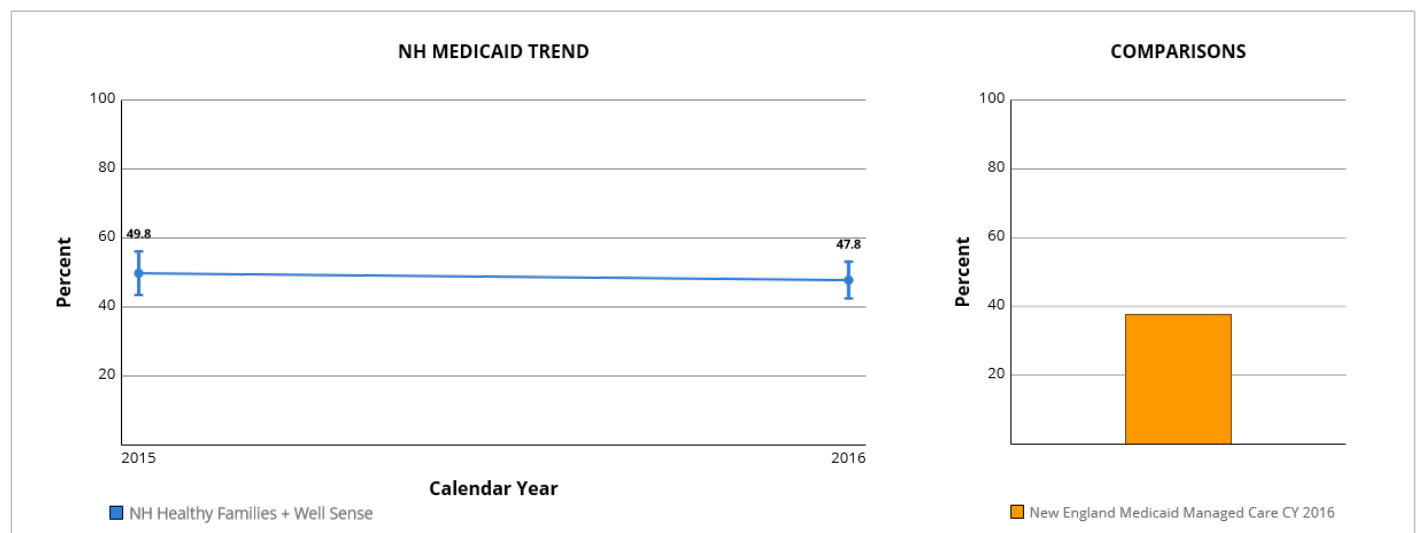
Medication Management for People With Asthma (MMA):

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

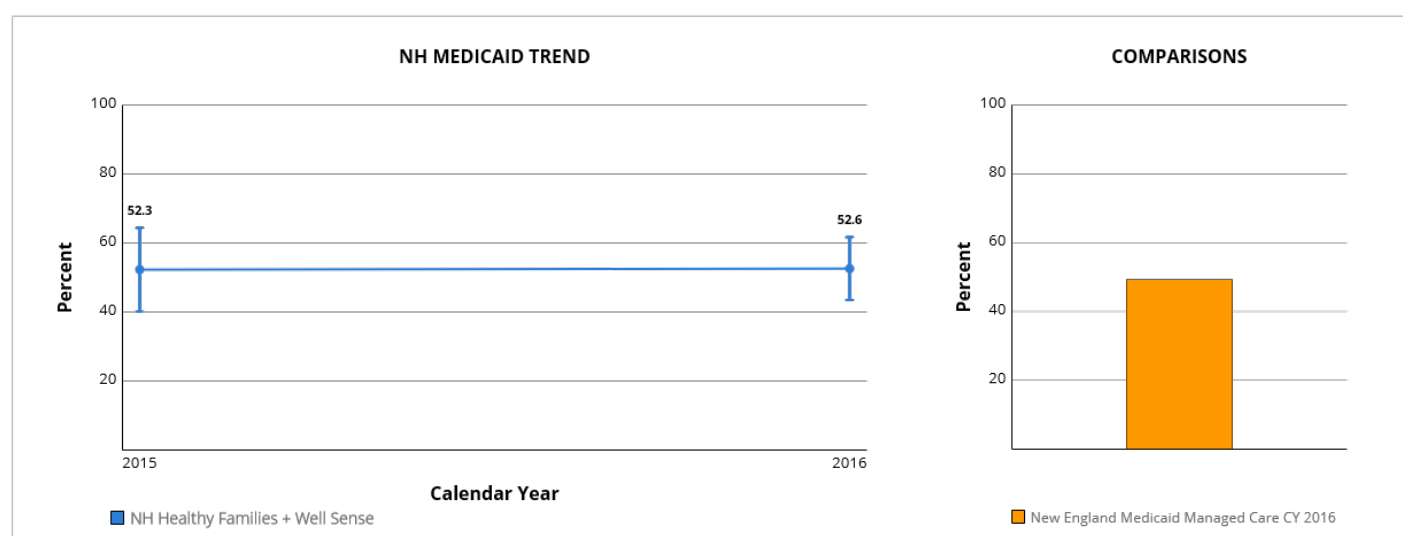
- Data Sources: New England Medicaid Managed Care, Quality Compass, NCQA
 - Years: CY 2016
 - Comments:
-

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:

Topics:

Comparison Rate Comparison Data

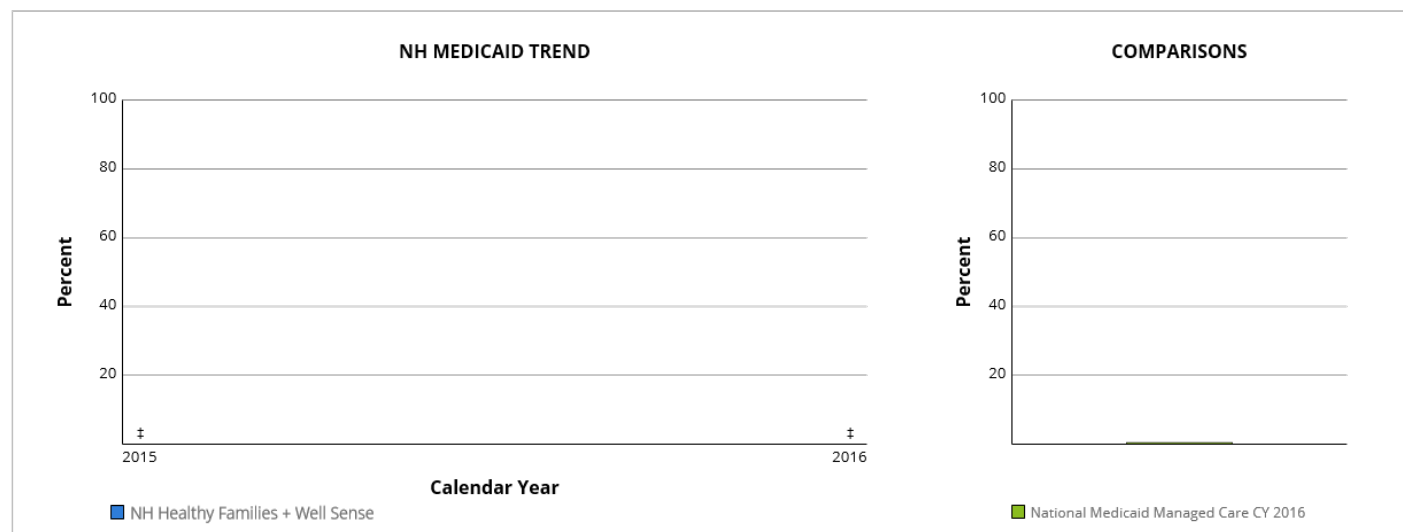
New England Medicaid Managed Care

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

Data Source/Type: Administrative

Measure Relevance:

Topics:

Comparison Rate Comparison Data

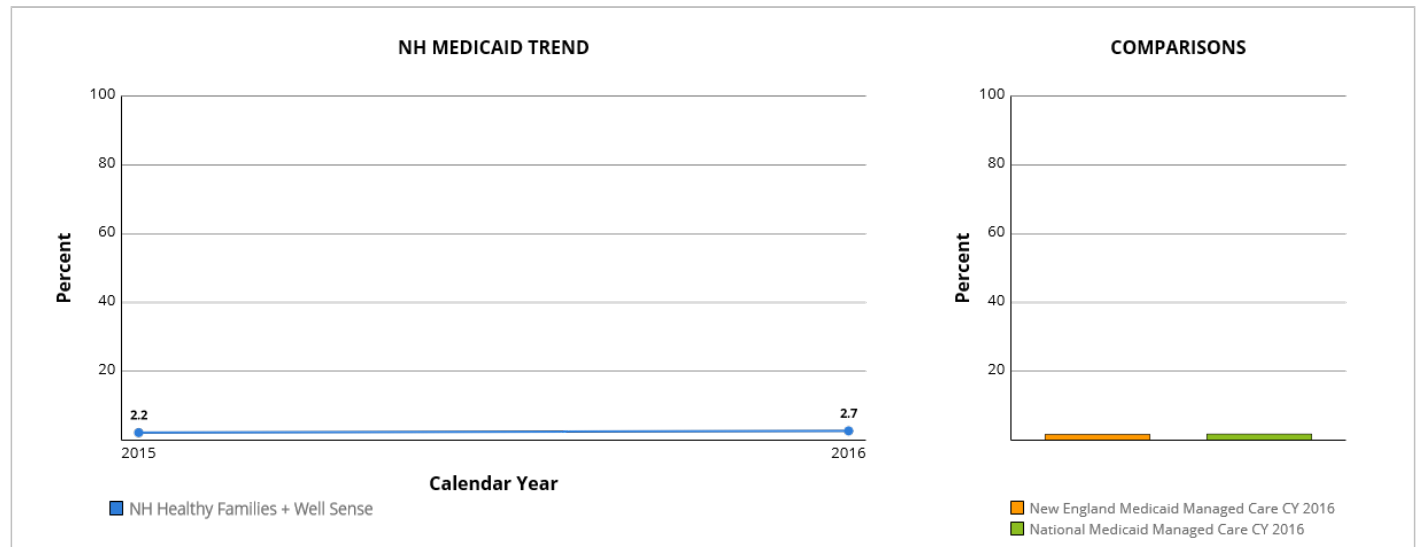
National Medicaid Managed Care

- 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:

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:
-

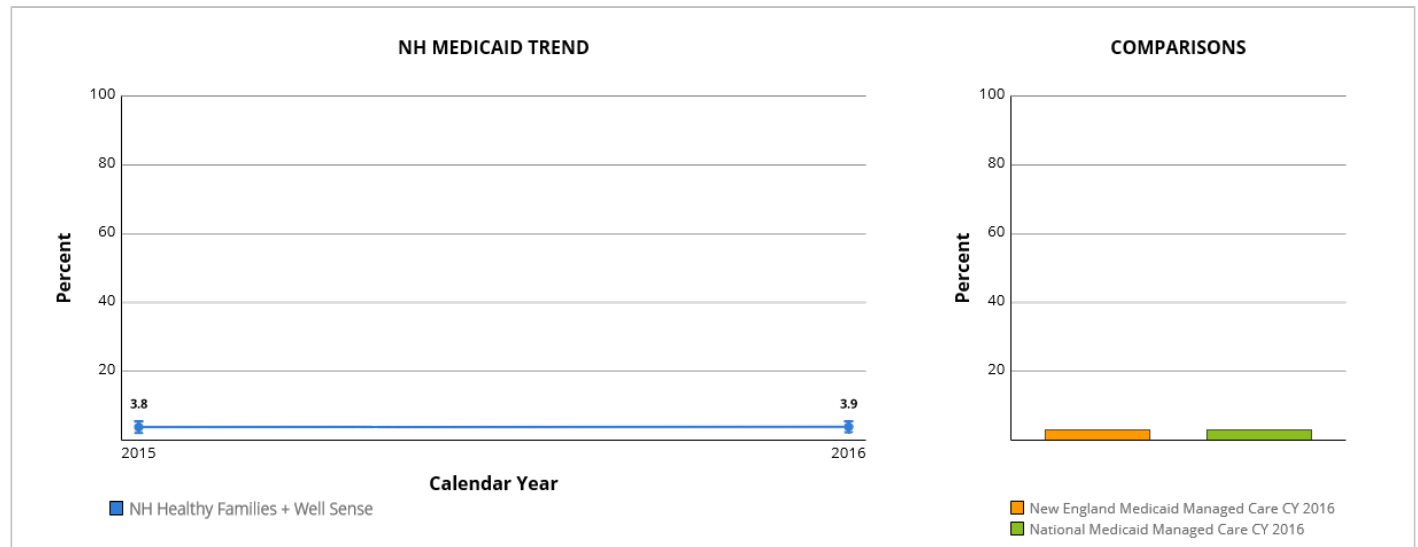
National Medicaid Managed Care

- 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): 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:

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:
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REPORT DETAILS

Generated on Nov 22 2017 at 12:16

Measures:

Adults' Access to Preventive/Ambulatory Health Services (AAP),
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,
Annual Monitoring for Patients on Persistent Medications (MPM): ACE Inhibitors or ARBs,
Annual Monitoring for Patients on Persistent Medications (MPM): Digoxin,
Annual Monitoring for Patients on Persistent Medications (MPM): Diuretics,
Appropriate Testing for Children With Pharyngitis (CWP),
Appropriate Treatment for Children With Upper Respiratory Infection (URI),
Asthma Medication Ratio (AMR),
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,
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB),
Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 12-19 Years,
Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 12-24 Months,
Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 25 Months - 6 Years,
Children and Adolescents' Access to Primary Care Practitioners (CAP): Age 7-11 Years,
Comprehensive Diabetes Care (CDC, Hybrid Specification): Blood Pressure Controlled <140/90 mm Hg,
Comprehensive Diabetes Care (CDC, Hybrid Specification): Eye Exam,
Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<7.0%) for a Selected Population,
Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Control (<8.0%),
Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Poor Control (>9.0%),
Comprehensive Diabetes Care (CDC, Hybrid Specification): HbA1c Testing,

Comprehensive Diabetes Care (CDC, Hybrid Specification): Medical Attention for Nephropathy,
 Controlling High Blood Pressure (CBP),
 Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART),
 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,
 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),
 Persistence of Beta-Blocker Treatment After a Heart Attack (PBH),
 Pharmacotherapy Management of COPD Exacerbation (PCE): Bronchodilator,
 Pharmacotherapy Management of COPD Exacerbation (PCE): Systemic Corticosteroid,
 Use of Imaging Studies for Low Back Pain (LBP),
 Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR),
 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,
 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: 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,
 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,
 Chlamydia Screening in Women (CHL, Administrative Specification): A. Age 16-20 Years,
 Chlamydia Screening in Women (CHL, Administrative Specification): B. Age 21-24 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,
 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%: A. Males Age 21 to 75,
 Statin Therapy for Patients With Cardiovascular Disease (SPC): Statin Adherence 80%: B. Females Age 40 to 75,
 Medication Management for People With Asthma (MMA): Medication Compliance 50%: A. Age 5 to 11 Years,
 Medication Management for People With Asthma (MMA): Medication Compliance 50%: B. Age 12 to 18 Years,
 Medication Management for People With Asthma (MMA): Medication Compliance 50%: C. Age 19 to 50 Years,
 Medication Management for People With Asthma (MMA): Medication Compliance 50%: D. Age 51 to 64 Years,
 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,
 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.

Citation: NH Department of Health and Human Services. Office of Quality Assurance and Improvement. Report generated on Nov 22 2017 at 12:16. [<http://medicaidquality.nh.gov>]

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