



Medi-Cal Managed Care Division

state of california



Medi-Cal Managed Care External Quality Review Organization

Report of the
**2006 Performance Measures
for Medi-Cal Managed Care Members**

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Delmarva Foundation
Improving Healthcare in the Communities We Serve.

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Medi-Cal Managed Care External Accountability Set 2006

Executive Summary

In 2005, 3.2 million Medi-Cal qualified adults and children received health care services from the California Department of Health Services (CDHS) through Medi-Cal managed care plans. CDHS contracted with 20 plans in 22 counties to provide these services. To assess the quality of care, CDHS selected 12 Health Employer Data and Information Set (HEDIS®¹) measures for the External Accountability Set (EAS) each Medi-Cal managed care plan is required to report on annually. HEDIS is a nationally recognized, standardized set of performance indicators developed by the National Committee for Quality Assurance (NCQA). CDHS contracted with Delmarva Foundation for Medical Care as its External Quality Review Organization to validate and report on the rates for the selected EAS measures.

The report provides detailed results for each measure and compares the Medi-Cal Managed Care weighted average for each of the 12 HEDIS measures to national benchmarks. Key findings from this comparison are:

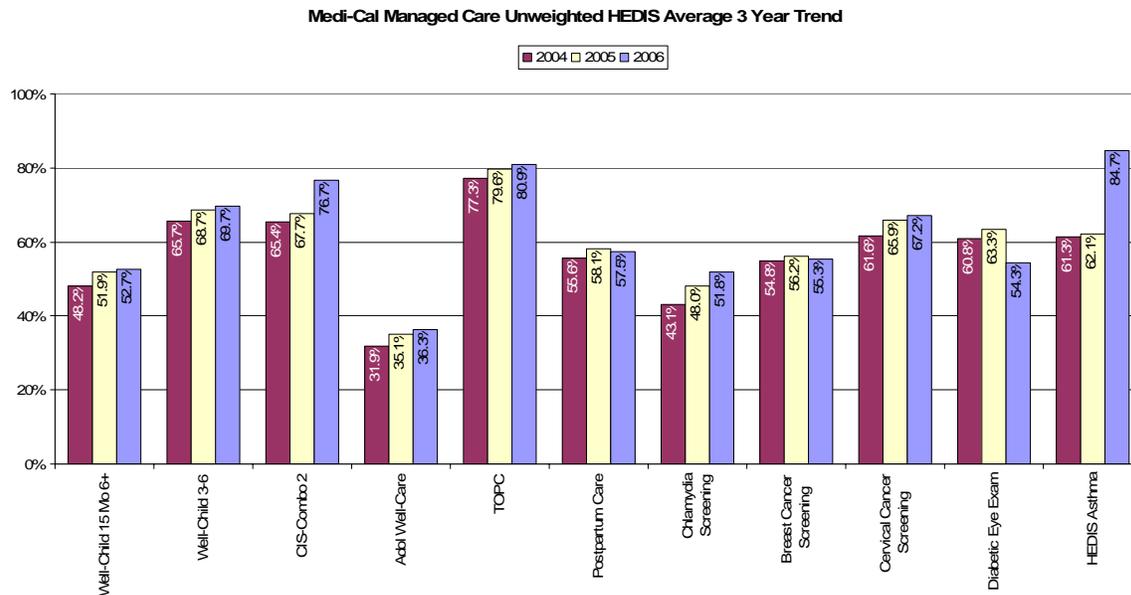
- The Medi-Cal Managed Care weighted average for 12 measures are at or above the 2005 national Medicaid mean.
- The Medi-Cal Managed Care weighted average for Childhood Immunizations-Combo 2 (76.6%) is 13.7 percentage points above the 2005 National Medicaid mean (62.9%).
- The Medi-Cal Managed Care weighted average for Adolescent Well-Care Visits (37.9%) was below the 2005 National Medicaid mean of 40.3%, indicating that an opportunity exists to improve care in this area.
- The Medi-Cal Managed Care weighted average for Well-Child Visits in the First 15 months of Life (55.8%) was above the 2005 National Medicaid mean of 46.8%.

The report also provides trend analysis for measures where multiple years of data are available. The averages used in the trend analysis are Medi-Cal Managed Care unweighted averages. The following key findings can be seen in the following summary chart.

- Eight out of 11 measures showed an upward three-year trend between 2004 and 2006.
- The unweighted Medi-Cal Managed Care averages for Postpartum Care and Breast Cancer Screenings have remained stable over the past the three years.

¹ HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

- From 2004 to 2006, the unweighted Medi-Cal Managed Care averages for Childhood Immunization-Combo 2 improved by 11.3 percentage points from 65.4% to 76.7%.
- Chlamydia Screenings improved between 2004 and 2006 by 7.7 percentage points from 43.1% to 51.8%.



Although 2006 rates for two HEDIS measures — Childhood Immunization (Combo 2) and Use of Appropriate Medications for Asthmatics — were affected by changes to HEDIS specifications, the positive trends are expected to continue in future measurement cycles. The 2006 rate for the Diabetic Retinal Eye Exam measure is likely attributable to changes in the number of plans required to report the measure in 2006. As of 2006, all plans were required to report the Diabetic Retinal Eye Exam measure where in the past only County Organized Health System plans were required to report on this measure.

The required HEDIS measures in the EAS for Medi-Cal Managed Care plans continue to provide useful validated data to support the management and quality improvement activities of the Medi-Cal Managed Care Program. CDHS will continue to monitor plan performance, identify trends in the data, and identify opportunities to improve the health services delivered to one of the State’s most vulnerable populations.

Results of the 2006 Performance Measures for the California Medi-Cal Managed Care Program

I. Introduction

In 2005, California's Medi-Cal Managed Care Program funded medical services for approximately 3.2 million Medi-Cal beneficiaries in 22 counties across California. Utilizing three models of health care delivery, Geographic Managed Care (GMC), the County-Organized Health System (COHS), and the Two-Plan Model, which includes commercial plans (CPs) and Local Initiatives (LIs), the California Department of Health Services (CDHS) contracted with 20 managed care plans to provide health care services for Medi-Cal-qualified adults and children.

Table 1 provides an overview of the models and their characteristics.

Table 1. Medi-Cal Managed Care Health Plan Models

Model	Characteristics
Geographic Managed Care (GMC)	Mandatory enrollment of Temporary Assistance to Needy Families (TANF) population into commercially operated managed care plan, with enrollee choosing between multiple plans in area.
County-Organized Health System (COHS)	Mandatory enrollment of nearly all Medi-Cal eligible population into managed care system developed by the county.
Two-Plan Model (Includes Commercial Plans [CPs] and Local Initiatives [LIs])	Mandatory enrollment of TANF population into one of two managed care entities. CP is a commercially operated managed care plan, and LI is a community-developed plan designed to meet the specific needs of the community served.

Table 2 lists the plans, contract/model type, and counties served.

Table 2. Medi-Cal Managed Care Contracted Health Plans

Plan Name	Plan Abbreviation	Contract Type	County (ies) of Operation
Alameda Alliance for Health	AAH	LI	Alameda
Blue Cross of CA	BC of CA	CP	Alameda
			Contra Costa
			Fresno
			San Francisco
			San Joaquin
			Santa Clara
		GMC	Sacramento
		GMC	San Diego
LI	Stanislaus		
LI	Tulare		
Cal Optima	CalOptima	COHS	Orange
Central Coast Alliance for Health	CCAH	COHS	Monterey
			Santa Cruz
Community Health Group	CHG	GMC	San Diego
Contra Costa Health Plan	CCHP	LI	Contra Costa
Health Net	Health Net	CP	Fresno
			Kern
			Los Angeles
			Tulare
		GMC	Sacramento
GMC	San Diego		
Health Plan of San Joaquin	HPSJ	LI	San Joaquin
Health Plan of San Mateo	HPSM	COHS	San Mateo
Inland Empire Health Plan	IEHP	LI	Riverside
			San Bernardino
Kaiser Foundation (North)	Kaiser (N)	GMC	Sacramento
Kaiser Foundation (South)	Kaiser (S)	GMC	San Diego
Kern Family Health Care	KFHC	LI	Kern
L.A. Care Health Plan	LA Care	LI	Los Angeles
Molina Healthcare	Molina	CP	Riverside
			San Bernardino
		GMC	Sacramento
Partnership Health Plan of CA	PHP of CA	COHS	Napa
			Solano
			Yolo
San Francisco Health Plan	SFHP	LI	San Francisco
Santa Barbara Regional Health Authority	SBRHA	COHS	Santa Barbara
Santa Clara Family Health Plan	SCFHP	LI	Santa Clara
Western Health Advantage	WHA	GMC	Sacramento

To effectively assess the quality of care provided by contracted health plans during 2005, the CDHS required each plan to report rates for a series of performance measures from the Health Employer Data and Information Set (HEDIS®¹). Developed by the National Committee for Quality Assurance (NCQA), HEDIS is a nationally recognized, standardized set of performance indicators that measure access, utilization, and quality. CDHS selected 12 HEDIS measures that assess the care provided to the largest segments of the Medi-Cal population, young women, children, and those with chronic conditions. Each of the HEDIS measures selected by CDHS was audited by NCQA certified auditors. This report presents the results of the performance measures, as reported in June 2006. For a brief description of the measures required by CDHS, refer to Appendix 1.

All measures have a continuous eligibility requirement defined as the time in months or years that the beneficiary must be enrolled in the Medi-Cal managed care plan before a particular date or event. The rates presented reflect select services for a portion of the Medi-Cal managed care population, providing a proximal gauge of plan access, timeliness of services and quality of care. Several factors may influence a plan's score, including the plan's ability to capture and report data, the unique characteristics of the member population, and the organization of the provider networks within specific geographic areas. Therefore, this information is best used to develop a composite sketch of the systems of quality employed by the managed care plans in delivering care and services.

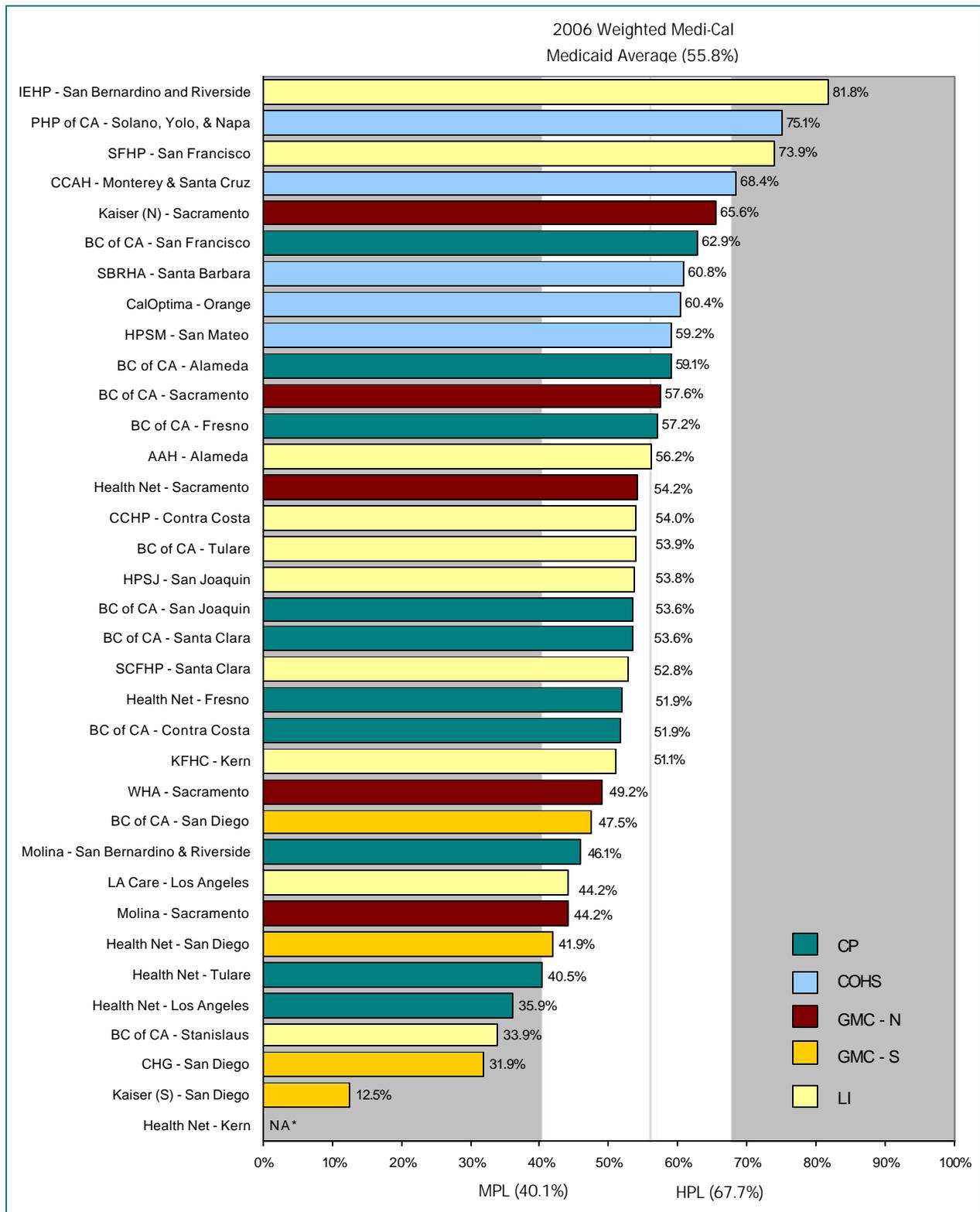
II. Report Organization

This report is organized into two sections, reflecting health plan rates and rates by model type. For each measure, a Medi-Cal managed care weighted average has been calculated to provide a comparative statistic. By establishing the weighted average, versus a simple average, this statistic accounts for variations in membership across plans. The report also identifies Minimum Performance Levels (MPLs) and High Performance Levels (HPLs) for each measure. Each MPL and HPL is based upon the 25th and 90th percentiles, respectively, of the 2005 national Medicaid averages². Establishment of MPLs not only permits health plans and CDHS to detect opportunities for improvement, but use of HPLs allows for identification of performance that exceeds national achievement. Used alongside the program-wide weighted averages, these benchmarks facilitate the assessment of quality and provide the basis for strategic planning among the plans and CDHS.

¹ HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

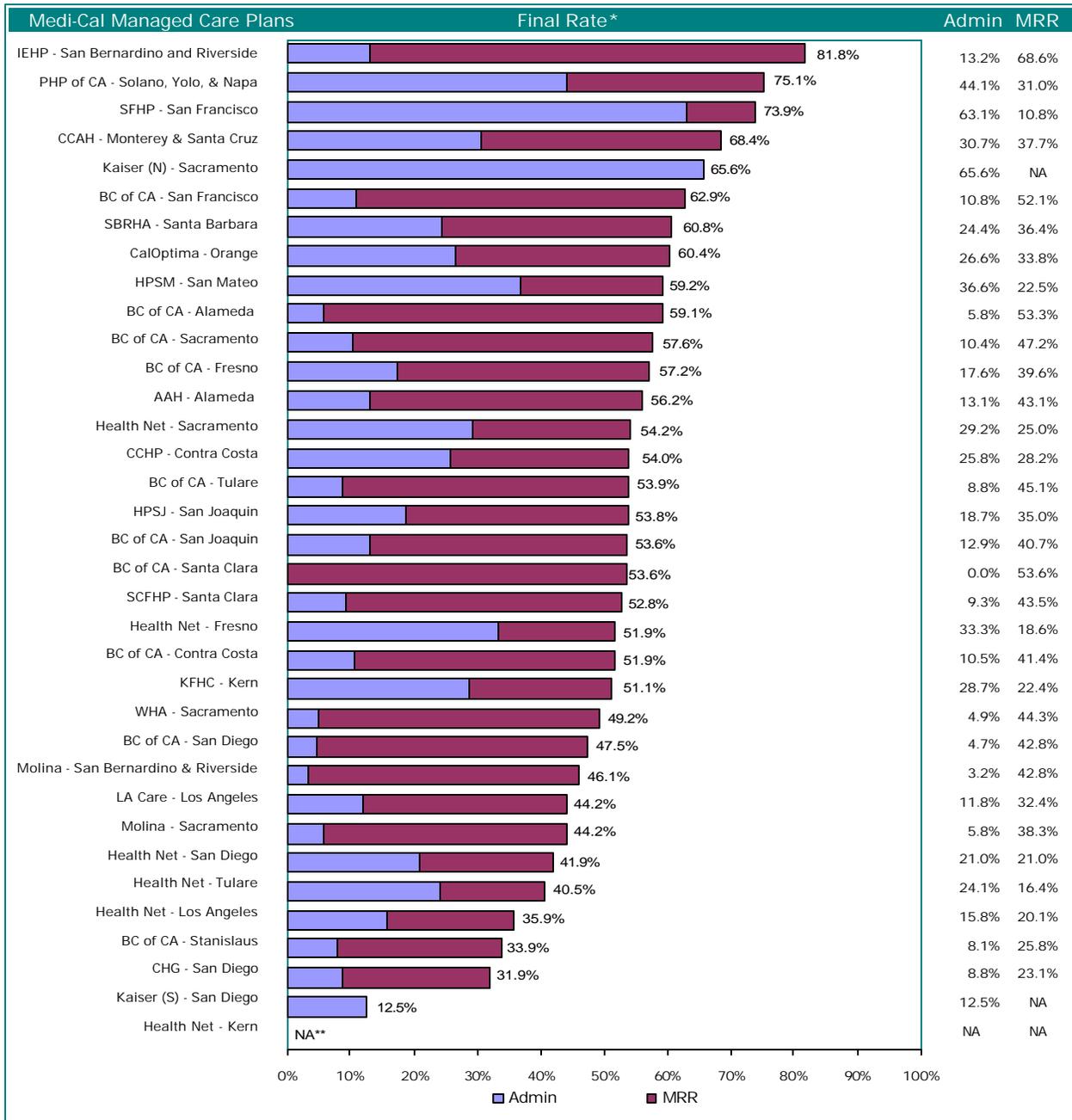
² Source: *2005 Quality Compass* published by the National Committee for Quality Assurance (NCQA).

Figure 1. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits)



*NA indicates that a plan had fewer than 30 members eligible for the indicator. Rates are not reported for measures where less than 30 members are eligible

Figure 2. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits) Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

**NA indicates that a plan had fewer than 30 members eligible for the indicator. Rates are not reported for measures where less than 30 members are eligible

The 2006 Medi-Cal Managed Care weighted average of 55.8% for Well-Child Visits in the First 15 Months of Life was exceeded by 40% of the health plans. The Medi-Cal managed care average and 71% of the health plans were above the HEDIS 2005 national Medicaid average of 46.8%. Four plans (Inland Empire Health Plan, Partnership Health Plan of CA, San Francisco Health Plan, and Central Coast Alliance Health) surpassed the HPL of 67.7%. The rates for four plans (Health Net-Los Angeles, Community Health Group, Blue Cross of CA-Stanislaus, and Kaiser-San Diego) fell below the MPL of 40.1%. Health Net-Kern did not report a rate for this measure due to a denominator of less than 30.

Table 3. Well-Child Visits in the First 15 Months of Life (6 or More Visits) Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]
Rate	55.8%	46.8%	68.7%

[†]Rate obtained from NCQA's *Quality Compass (2005)*.

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

Figure 3. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life

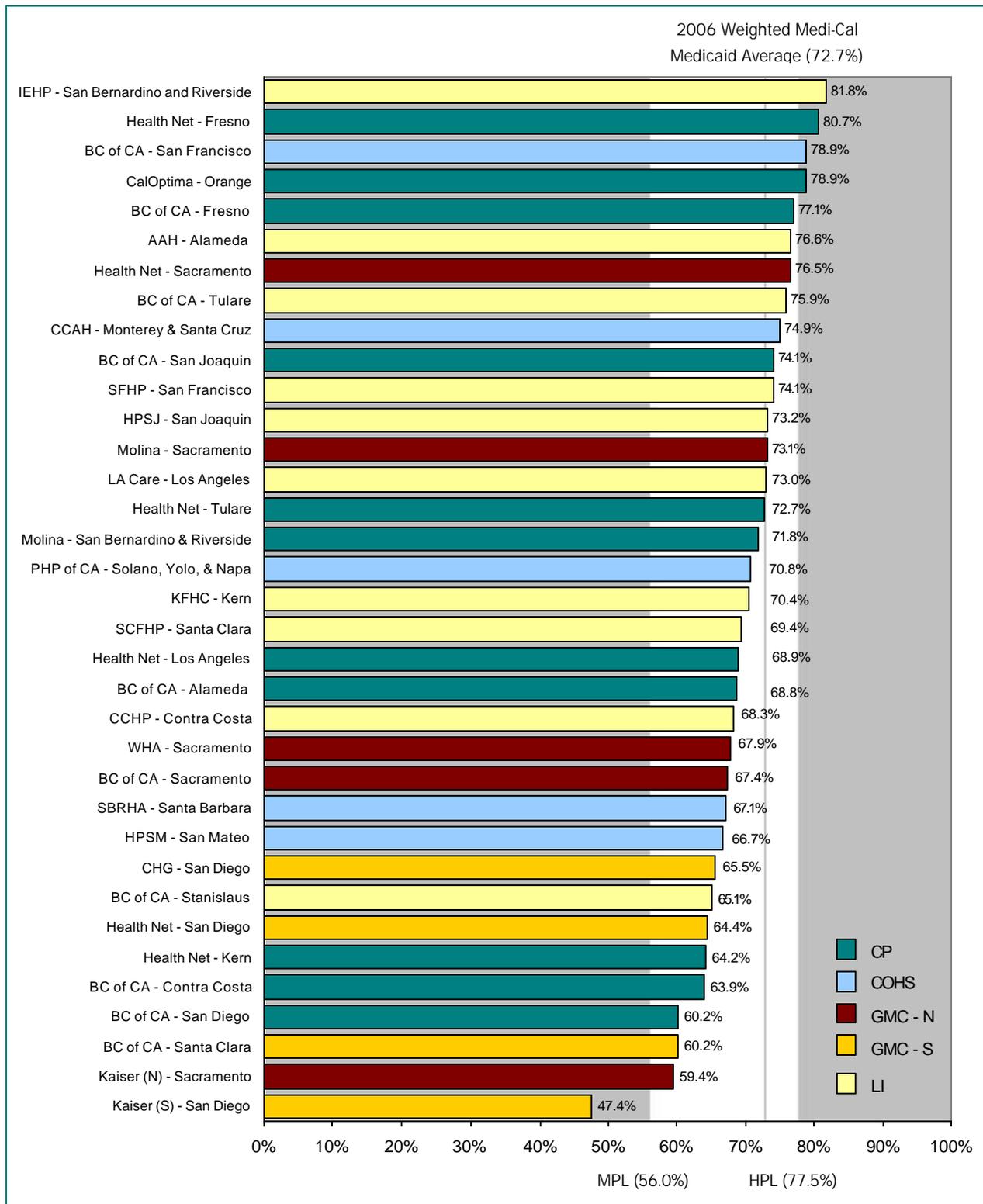
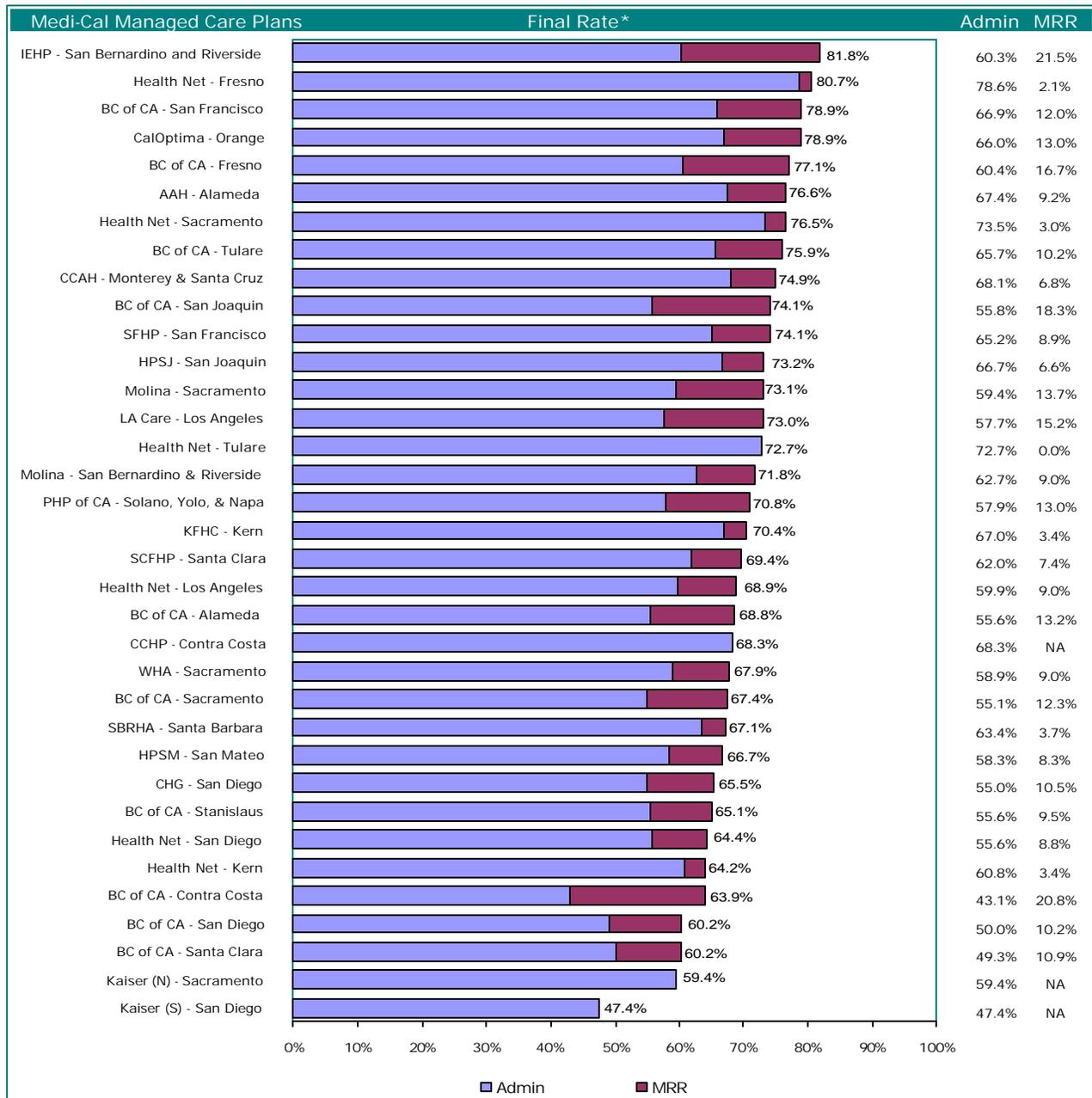


Figure 4. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

The majority of the health plans (88.6%) were above the national Medicaid average of 61.9% for Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life. Eleven percent, or four, of the health plans performed better than the HPL of 77.5%. Kaiser-San Diego, at 47.4%, performed below the MPL of 56.0%. The Medi-Cal Managed Care weighted average of 72.7% surpassed the national Medicaid average of 61.9% by 10.8 percentage points.

Table 4. Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]	CA Healthy Families Average 2004 ^{††}
Rate	72.7%	61.9%	64.4%	68.0%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

^{††}Rate obtained from Healthy Families Website: http://www.healthyfamilies.ca.gov/English/Quality/survey_quality.htm

Figure 5. HEDIS 2006 Childhood Immunization Status (Combination #2)

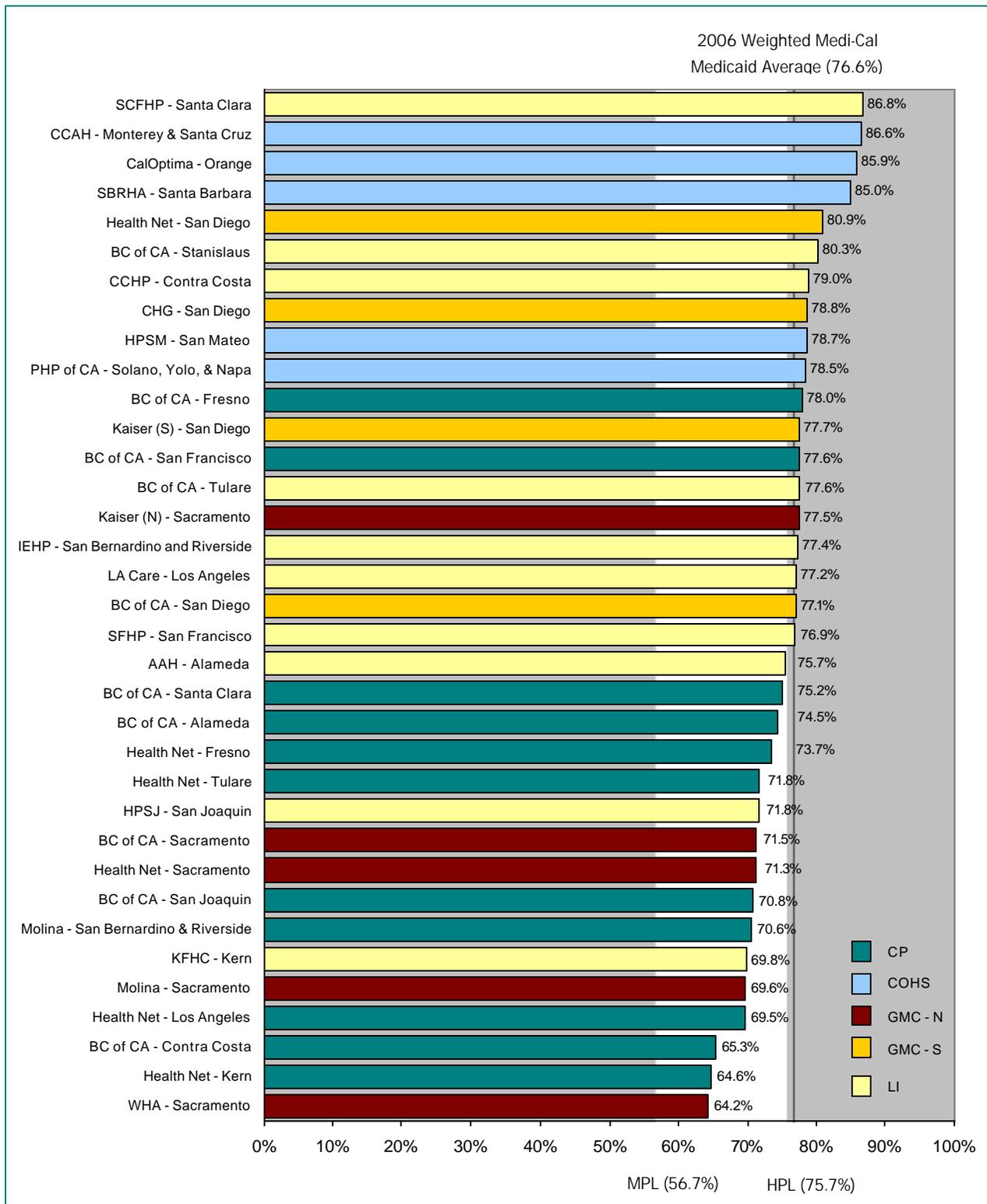
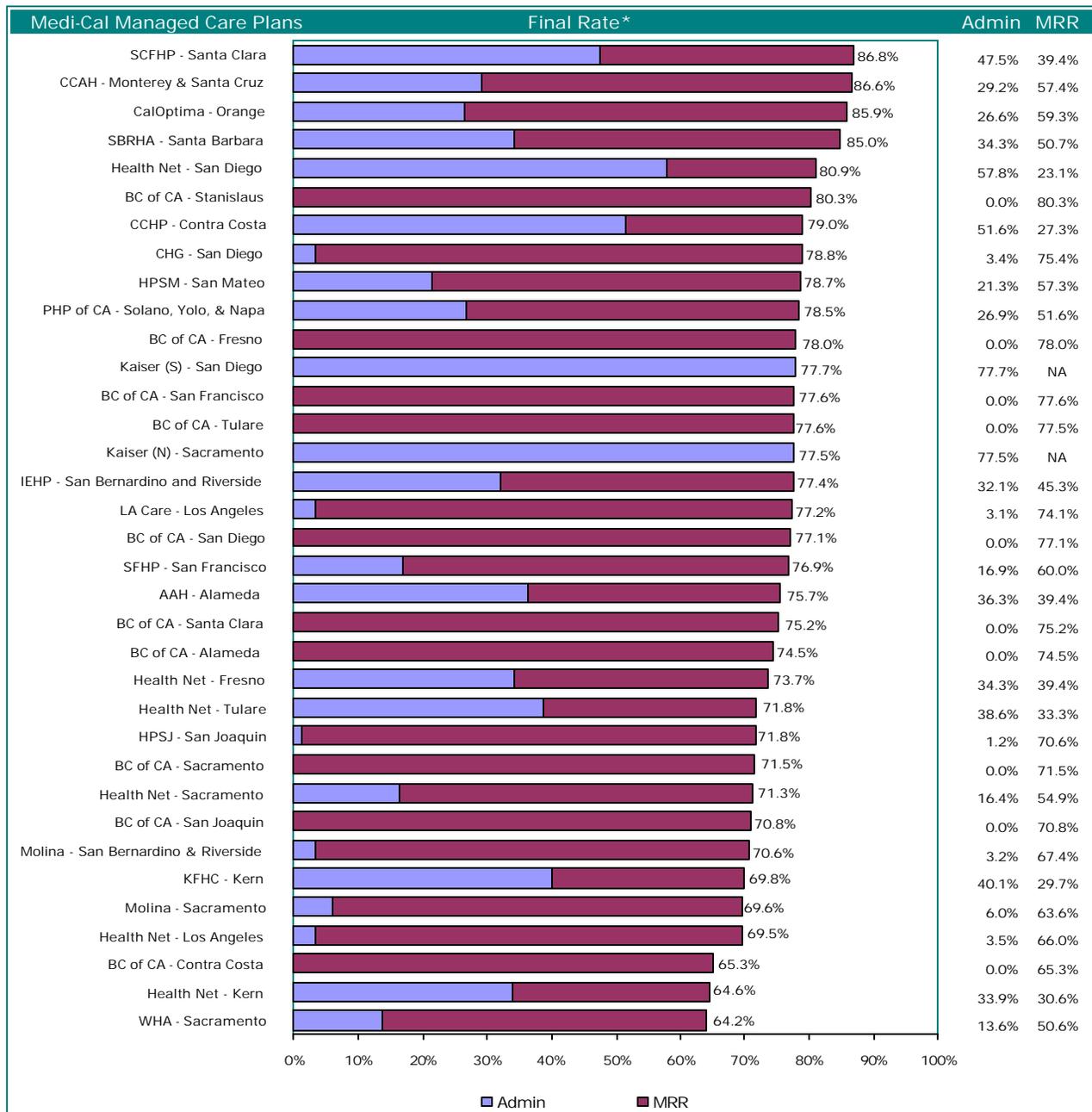


Figure 6. HEDIS 2006 Childhood Immunization Status (Combination #2)
Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

The Medi-Cal Managed Care weighted average of 76.6% was above the HPL of 75.7% for Childhood Immunization Status (Combination #2). Twenty health plan rates met or exceeded the HPL. All of the health plan rates surpassed the HEDIS 2005 national Medicaid average of 62.9%. This performance can partially be attributed to the changes in the technical specifications of the HEDIS 2006 measure. NCQA made modifications to the timing requirements for the administration of several antigens. Santa Clara Family Health Plan and Central Coast Alliance Health had the highest rates with 86.8% and 86.6%, respectively.

Table 5. Childhood Immunization Status (Combination #2) Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]	CA Healthy Families Average 2004 ^{††}
Rate	76.6%	62.9%	72.5%	75.0%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

^{††}Rate obtained from Healthy Families Website: http://www.healthyfamilies.ca.gov/English/Quality/survey_quality.htm.

Figure 7. HEDIS 2006 Adolescent Well-Care Visits

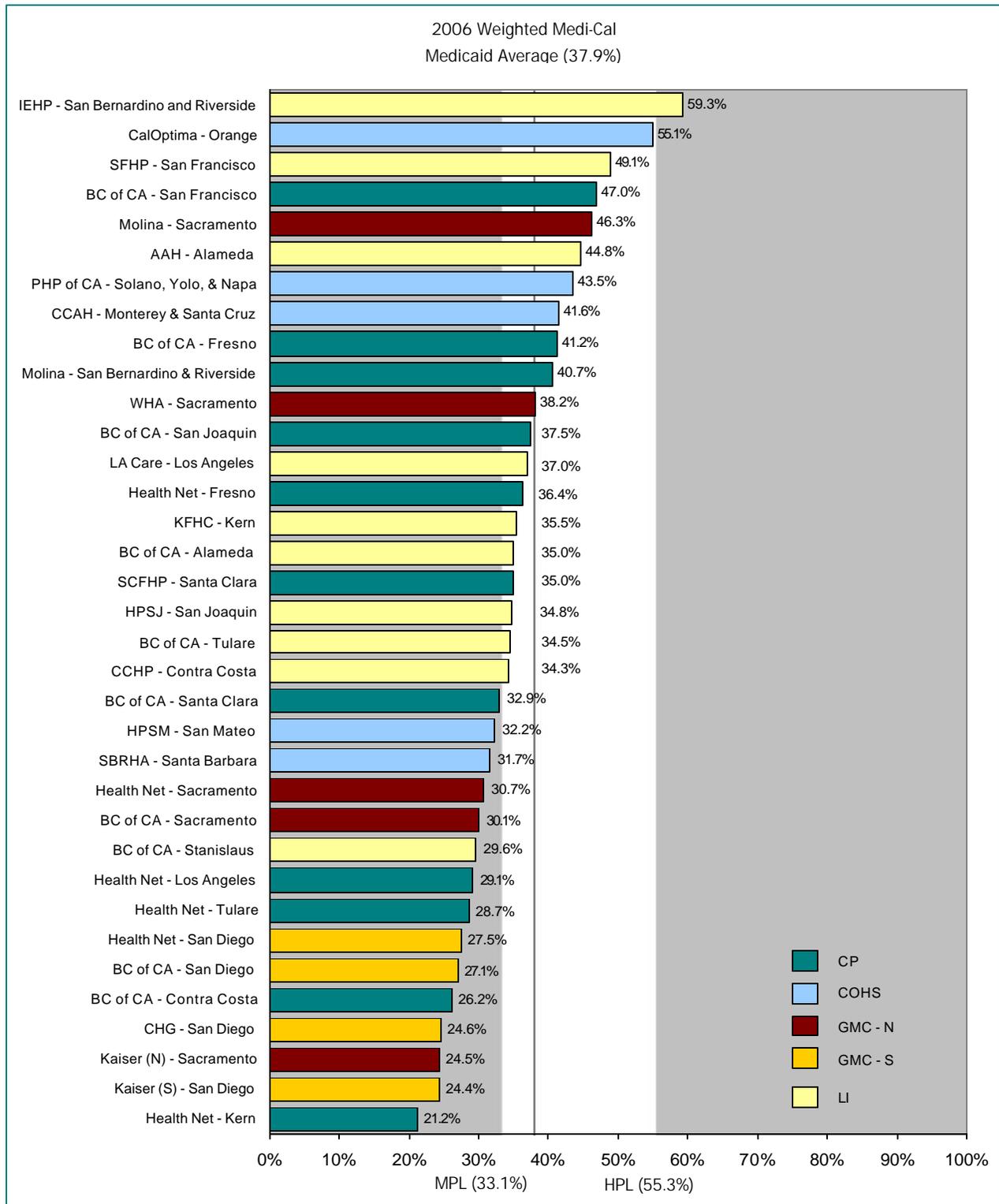
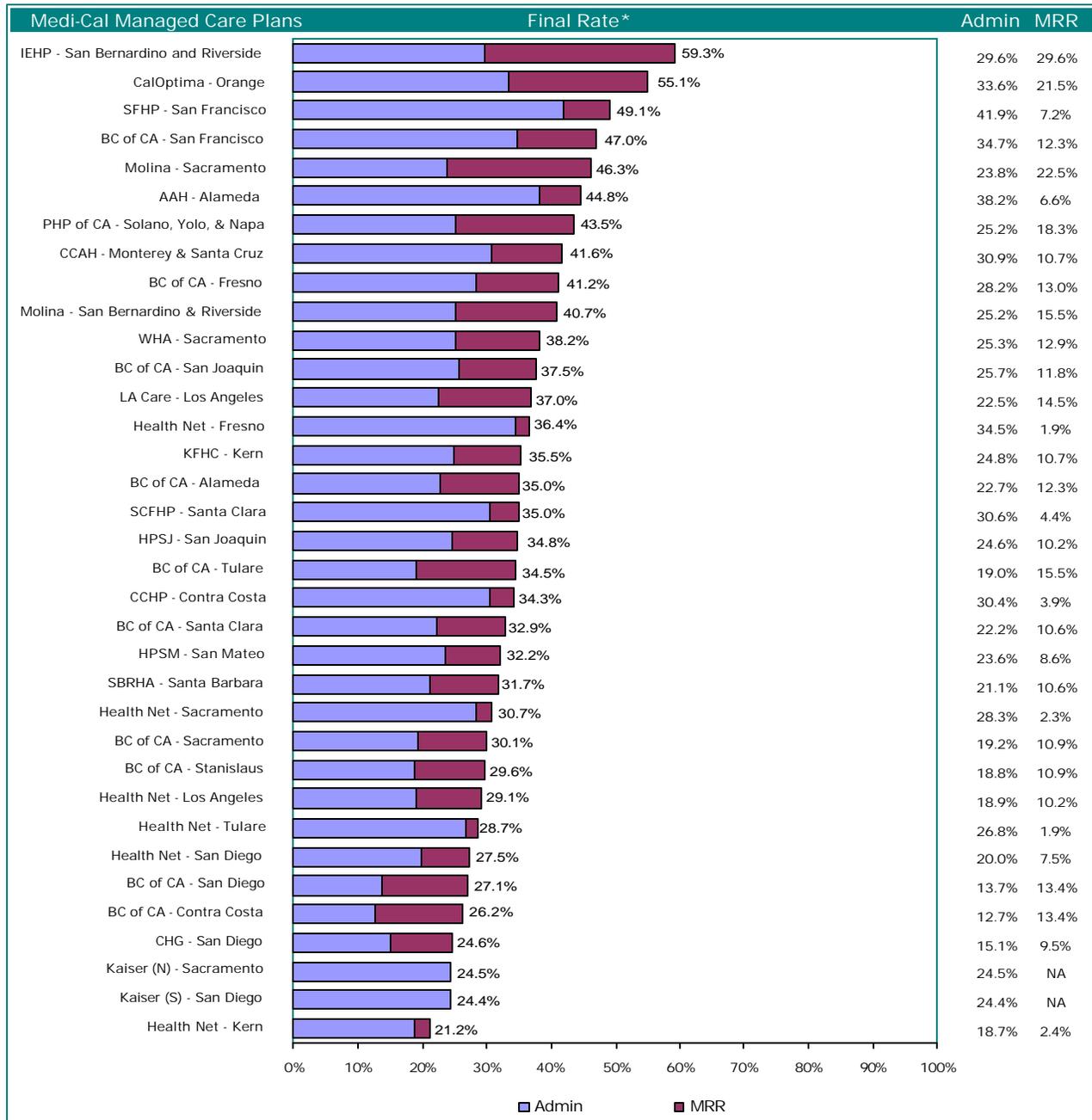


Figure 8. HEDIS 2006 Adolescent Well-Care Visits
Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

Ten of the 35 health plans were above the HEDIS 2005 national Medicaid average of 40.3% for Adolescent Well-Care Visits. Inland Empire Health Plan (59.3%) was four percentage points above the HPL of 55.3%. Forty-three percent, or 15, of the health plans were below the MPL of 33.1%.

Table 6. Adolescent Well-Care Visits Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]	CA Healthy Families Average 2004 ^{††}
Rate	37.9%	40.3%	38.3%	37.0%

[†]Rate obtained from NCQA's *Quality Compass (2005)*.

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>

^{††}Rate obtained from Healthy Families Website: http://www.healthyfamilies.ca.gov/English/Quality/survey_quality.htm

For HEDIS 2006, Medi-Cal managed care plans were required to report the Appropriate Treatment for Children with Upper Respiratory Infection indicator for the first time. In accordance with the CDHS policy of publicly reporting only aggregate data for first year measures, Table 7 reports the Medi-Cal Managed Care average for all plans and model types. Plan specific data for this indicator will be published in 2007.

Table 7. Appropriate Treatment for Children with Upper Respiratory Infection Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average†			HEDIS 2005 National Commercial Average‡
		MPL	Average	HPL	
Rate	80.1%	76.9%	80.0%	89.0%	82.7%

†Rate obtained from NCQA's *Quality Compass* (2005).

‡Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

Figure 9. HEDIS 2006 Prenatal and Postpartum Care--Timeliness of Prenatal Care

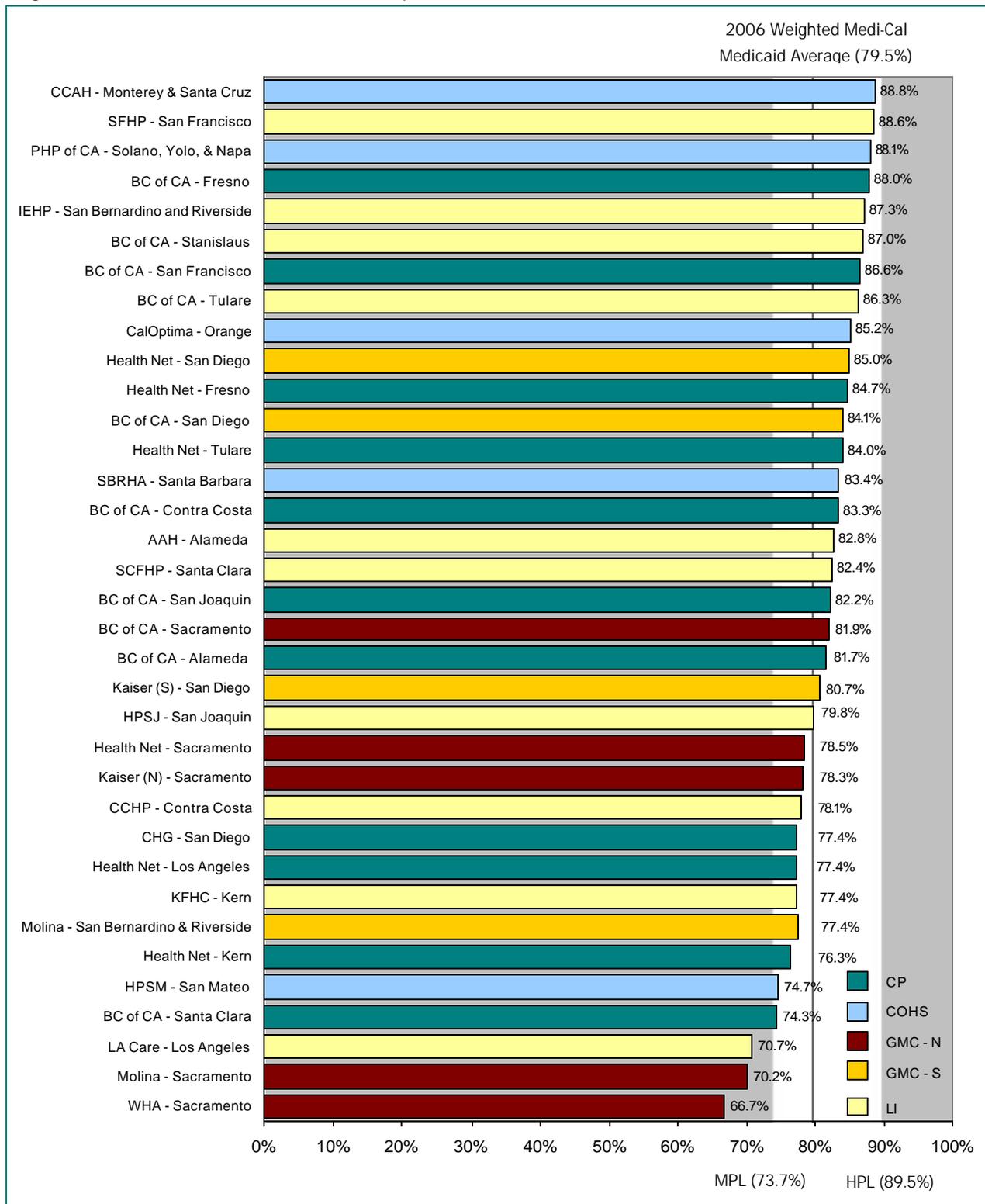
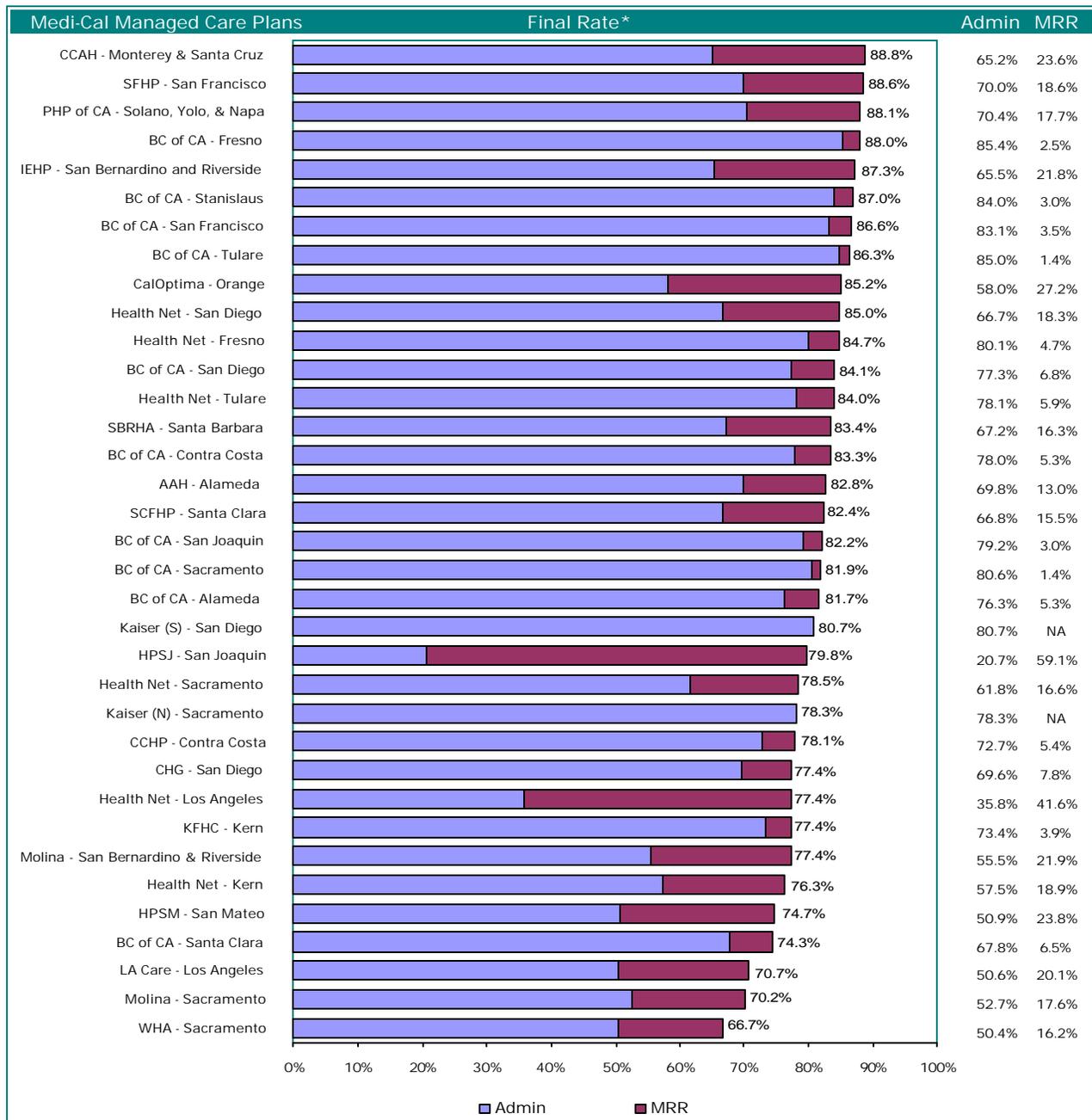


Figure 10. HEDIS 2006 Timeliness of Prenatal Care
Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

The Medi-Cal Managed Care weighted average of 79.5% was above the national Medicaid average of 78.3% for Timeliness of Prenatal Care. Among the health plans, 68.5% (24 plans) were above the national Medicaid average, and 62.8% (or 22 plans) were also above the Medi-Cal managed care average. While none of the health plans exceeded the HPL of 90.8%, four health plans were within three percentage points of meeting it. Three health plans were below the MPL of 73.7%.

Table 8. Timeliness of Prenatal Care Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]
Rate	79.5%	78.3%	90.8%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

Figure 11. HEDIS 2006 Prenatal and Postpartum Care—Postpartum Care

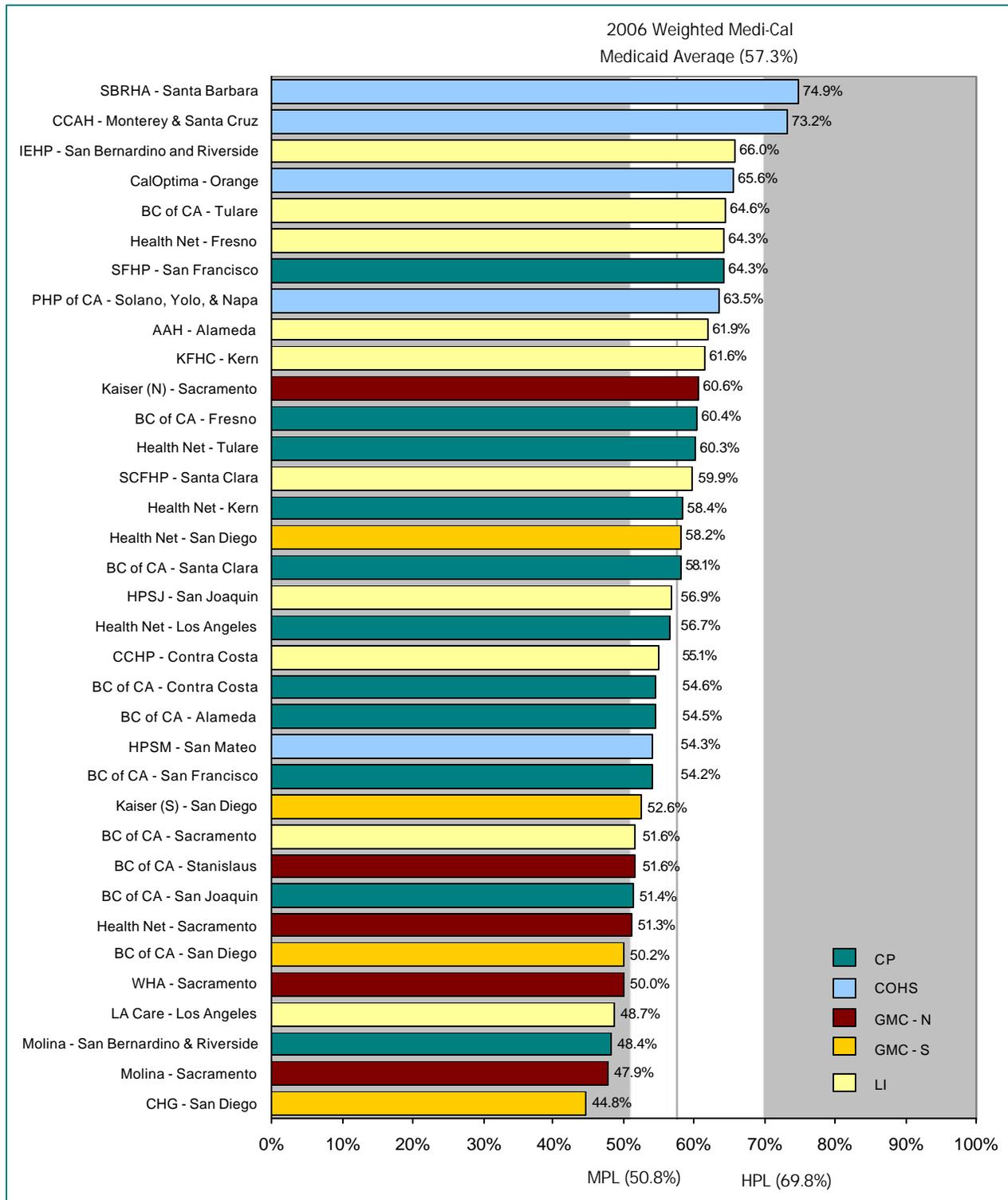
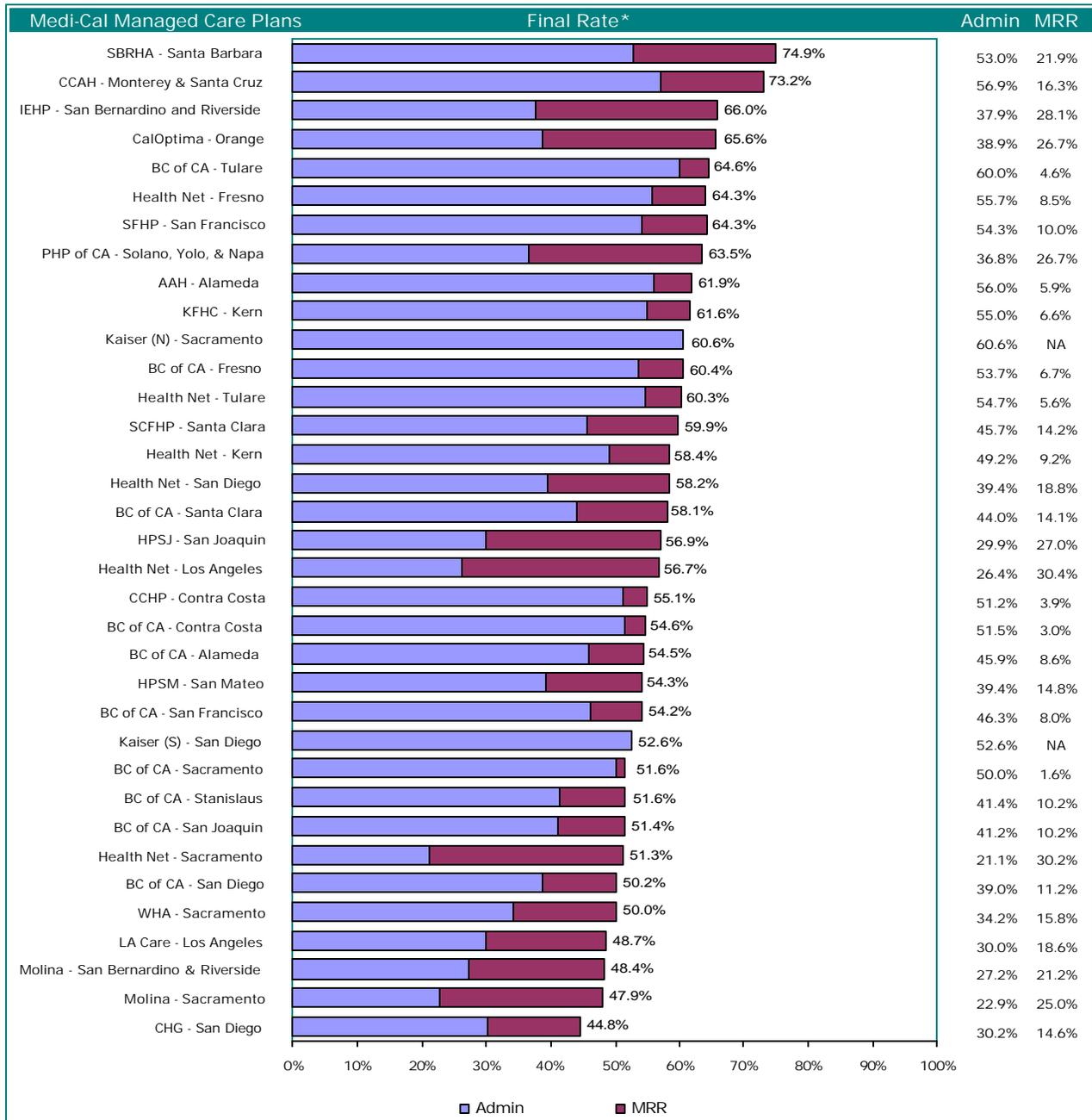


Figure 12. HEDIS 2006 Postpartum Care Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

The majority of health plans (68.5%) exceeded the national Medicaid average of 55.9% for Postpartum Care. Two plans surpassed and two other plans were within five percentage points of the HPL of 69.8%. Six plans were below the MPL of 50.8%.

Table 9. Postpartum Care Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]
Rate	57.3%	55.9%	80.6%

[†]Rate obtained from NCQA's *Quality Compass (2005)*.

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

Figure 13. HEDIS 2006 Chlamydia Screening in Women

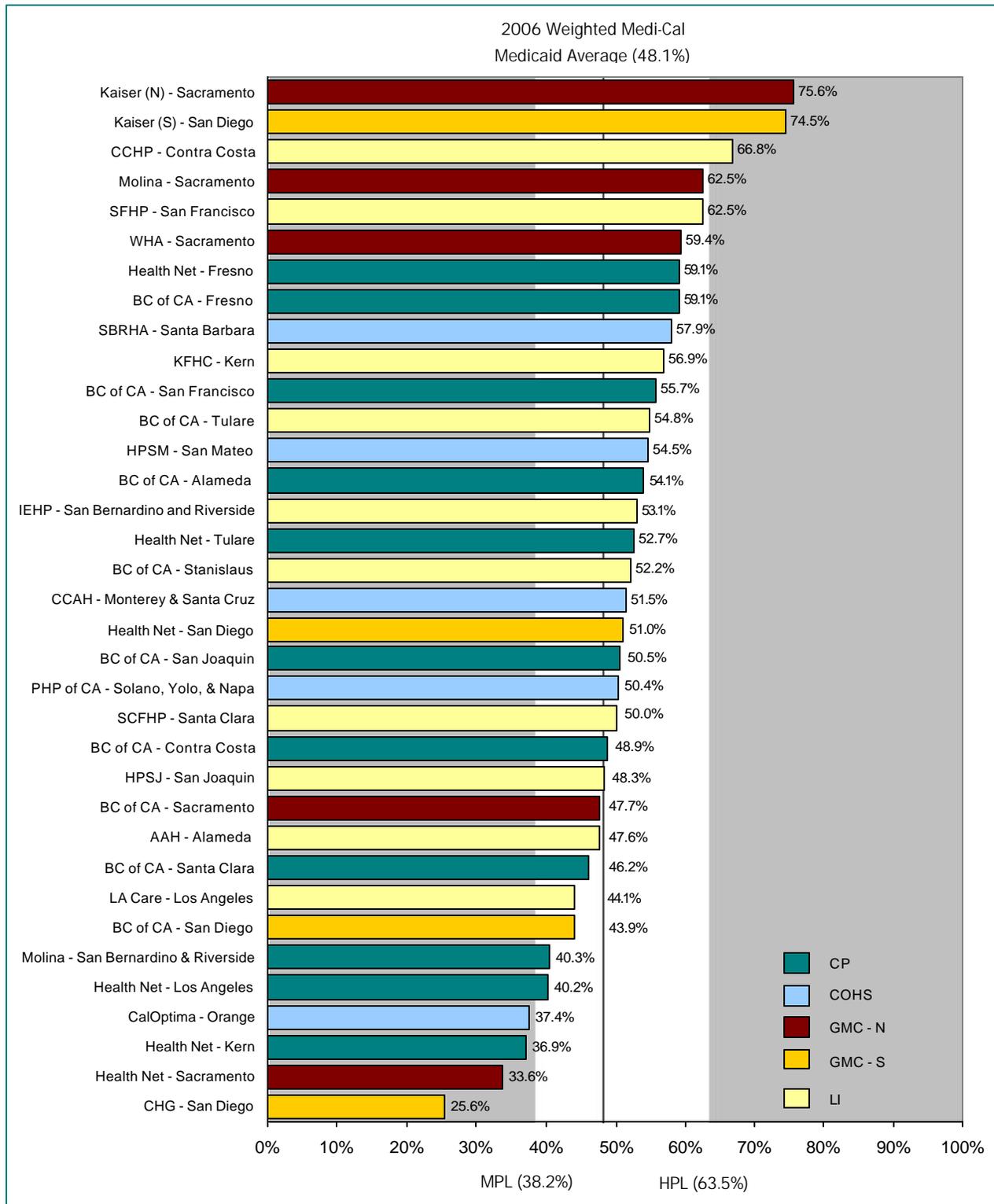
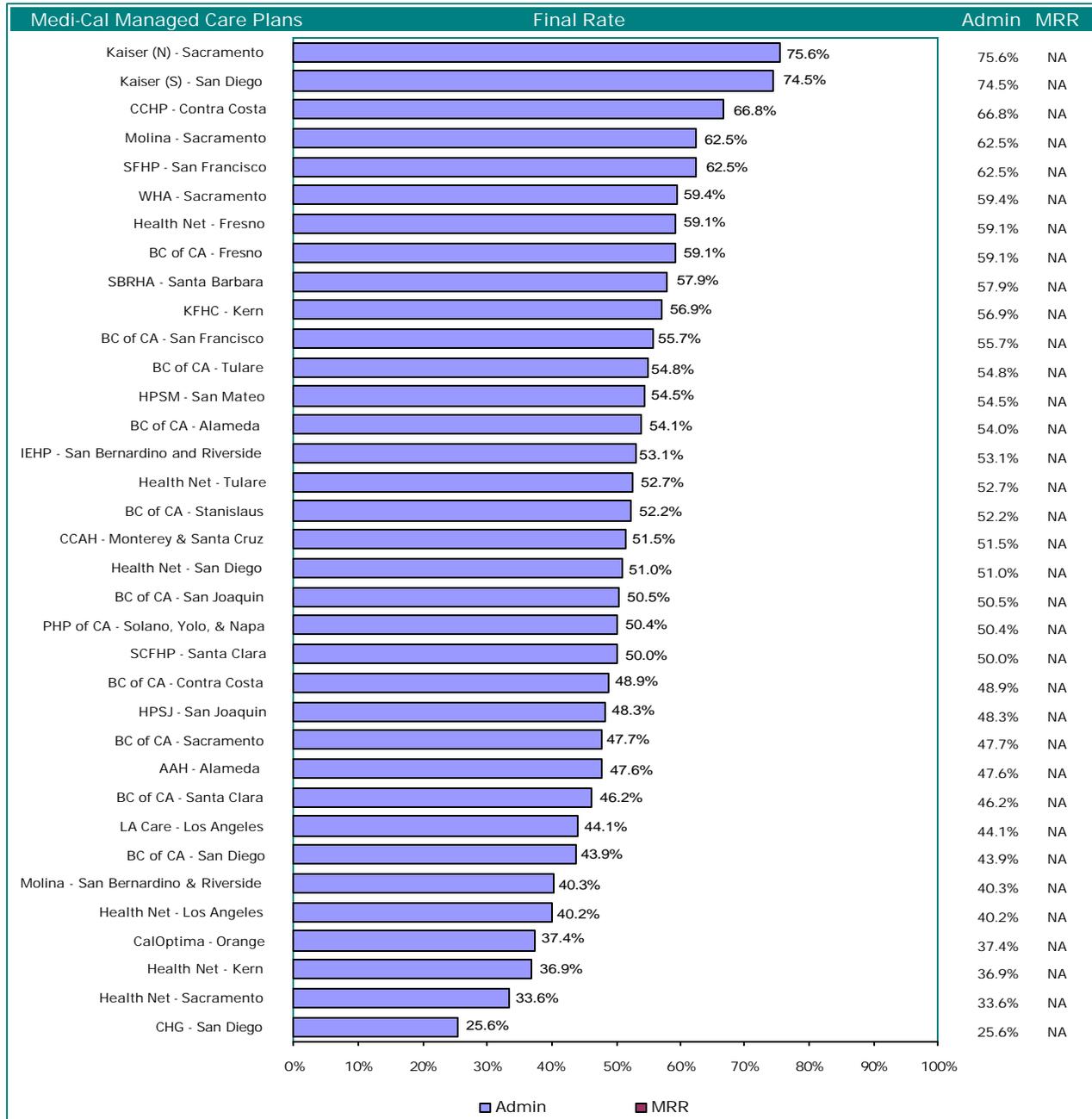


Figure 14. HEDIS 2006 Chlamydia Screening in Women
Rates from Administrative Data



In the area of Chlamydia Screening, 26 health plans were above the national Medicaid average of 46.4%. Three plans were above the HPL of 63.5%, and five plans were within five percentage points of obtaining the HPL. Eleven percent (four plans) of the health plans were below the MPL of 38.2%.

Table 10. Chlamydia Screening in Women Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]
Rate	48.1%	46.4%	32.2%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

Figure 15. HEDIS 2006 Cervical Cancer Screening

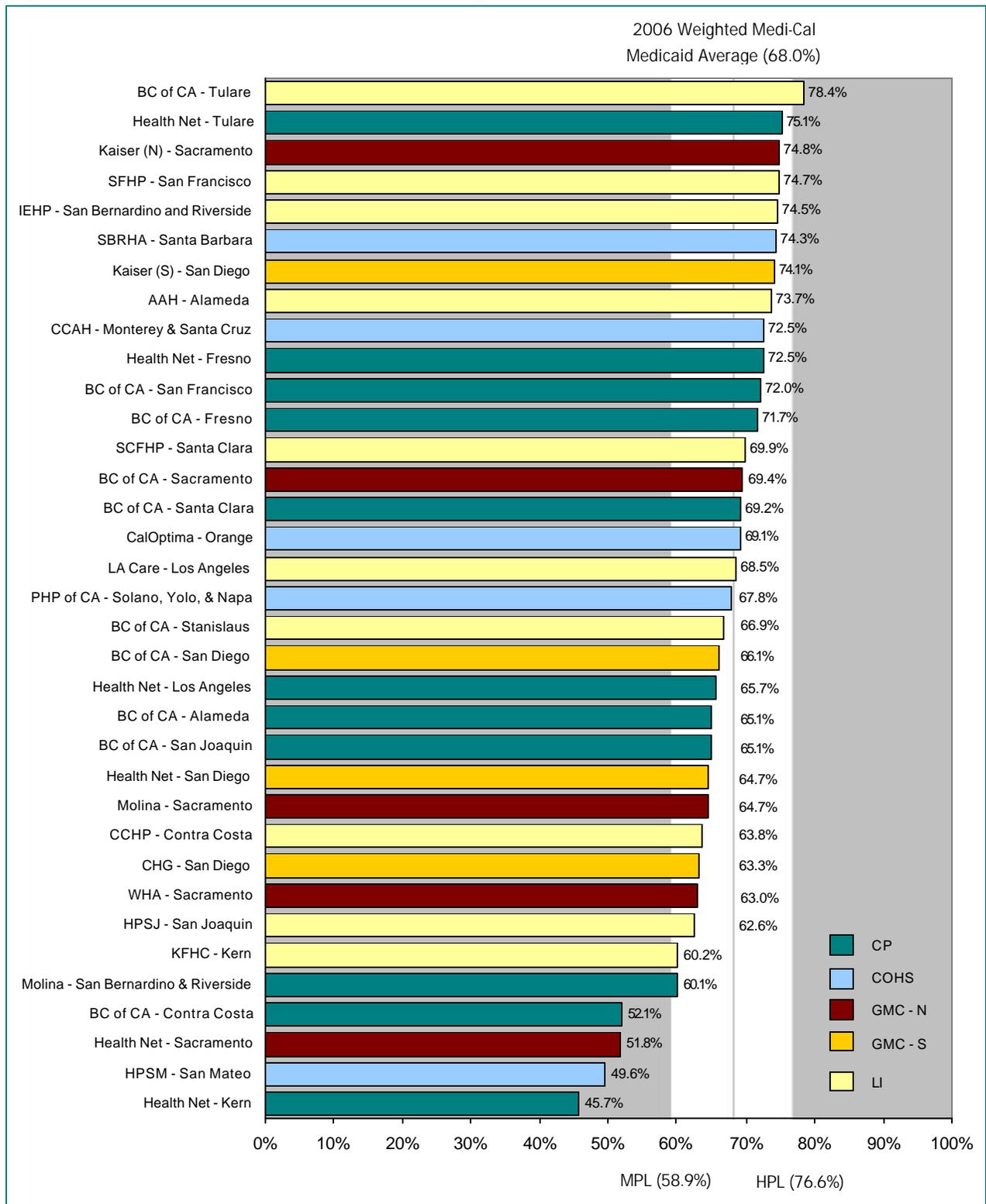
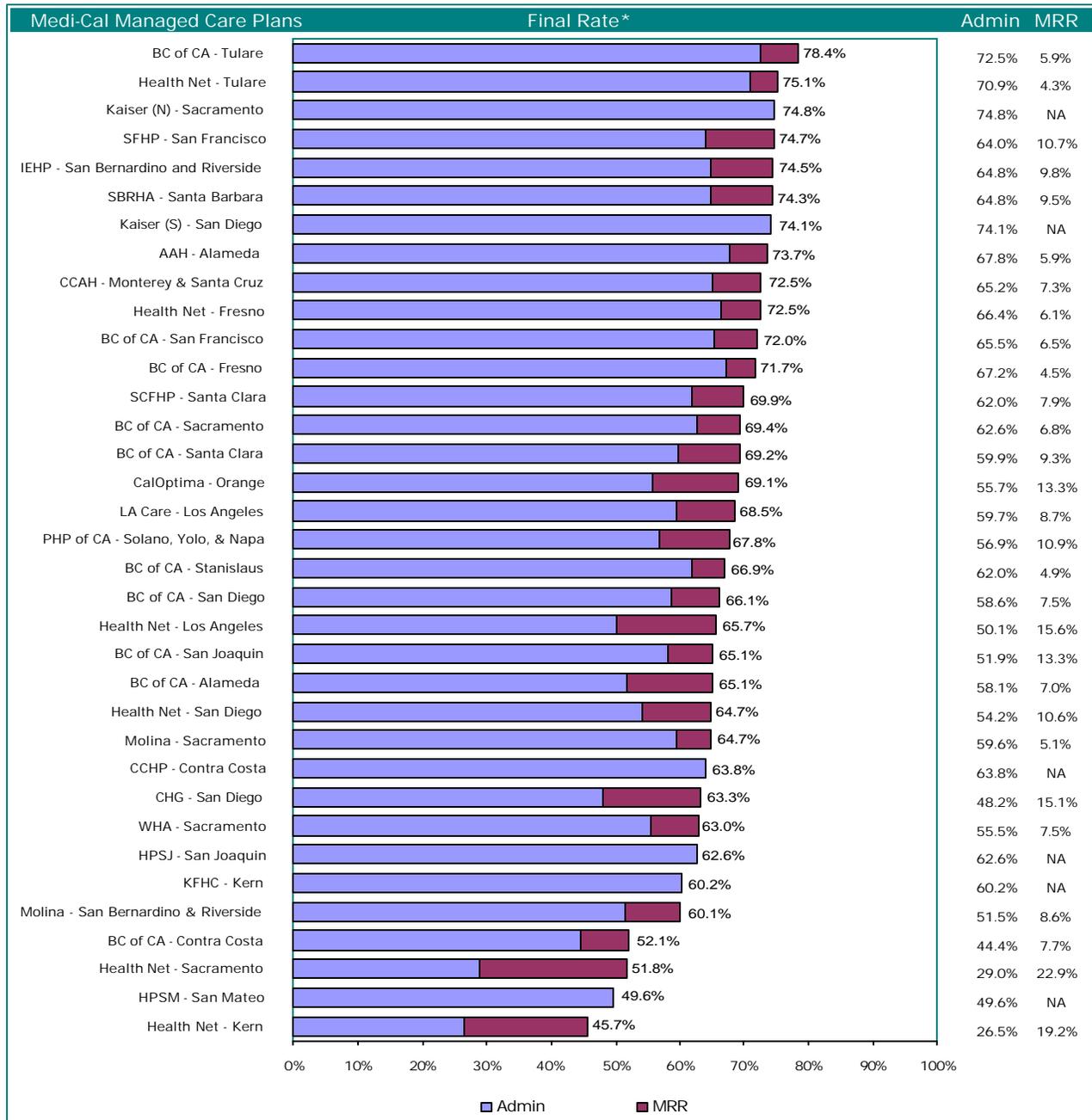


Figure 16. HEDIS 2006 Cervical Cancer Screening Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

In the area of Cervical Cancer Screening, 25 health plans were above the national Medicaid average of 64.5%. One plan, Blue Cross of CA-Tulare, was above the HPL of 76.6%. Eleven percent (four plans) of the health plans were below the MPL of 38.2%.

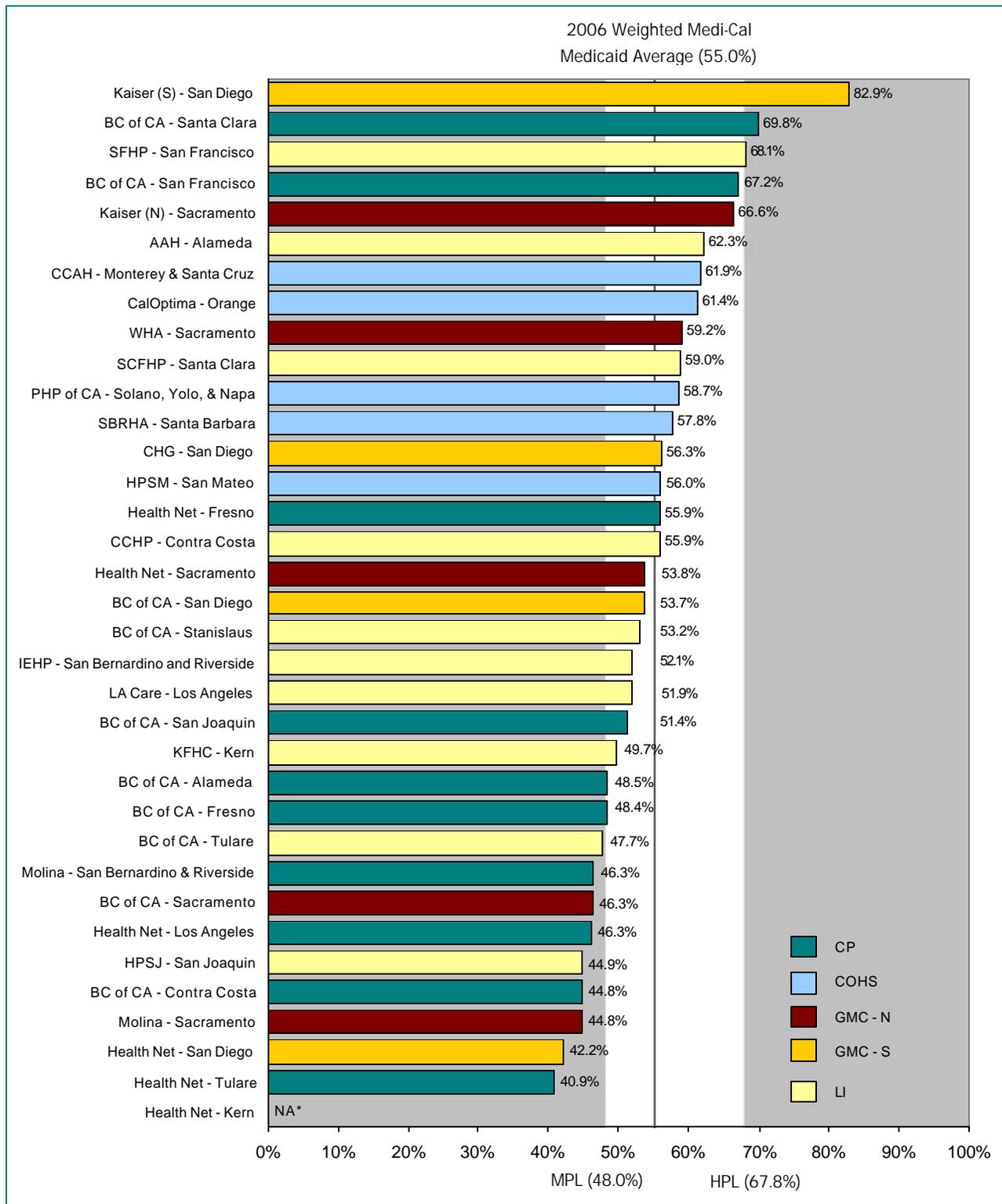
Table 11. Cervical Cancer Screening Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]
Rate	68.0%	64.5%	80.9%

[†]Rate obtained from NCQA's *Quality Compass (2005)*.

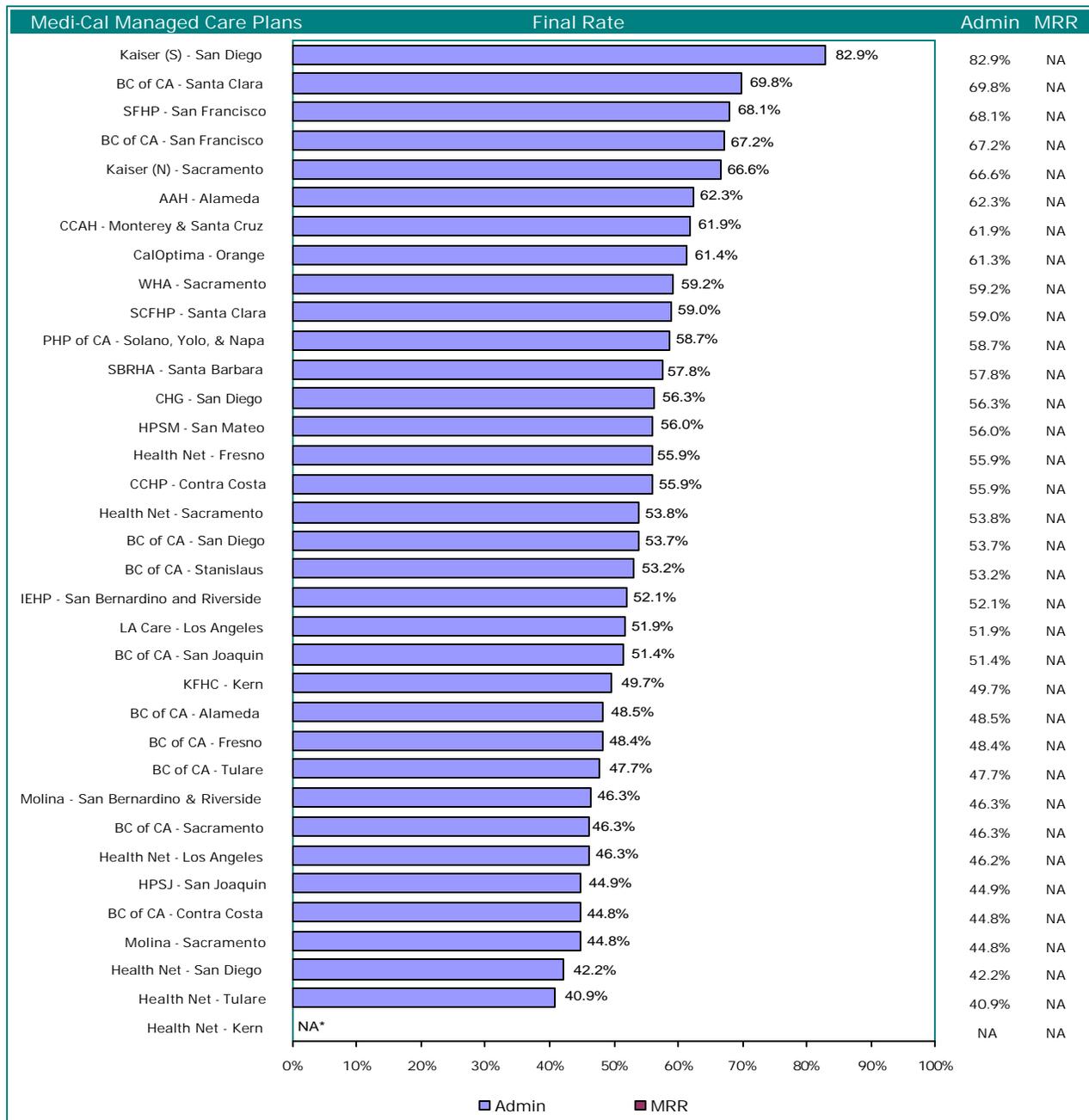
[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

Figure 17. HEDIS 2006 Breast Cancer Screening



*NA indicates that a plan had fewer than 30 members eligible for the indicator. Rates are not reported for measures where less than 30 members are eligible

Figure 18. HEDIS 2006 Breast Cancer Screening Rates from Administrative Data



The national Medicaid average (54.0%) and the Medi-Cal Managed Care weighted average (55.0%) were within one percentage point of each other for the Breast Cancer Screening measure. Three plans were above the HPL of 67.8%. The rate for Kaiser-San Diego (82.9%) was 15.1 percentage points above the HPL. Nine plans, or 25.7% of the plans, were below the MPL of 48.0%. Health Net-Kern did not report a rate for this measure due to a denominator of less than 30.

Table 12. Breast Cancer Screening Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]
Rate	55.0%	54.0%	73.4%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm> .

For HEDIS 2006, COHS plans continued to report the Comprehensive Diabetes Care – Eye Exam (Retinal) Performed indicator. Thus, plan specific results are provided in Figures 19 and 20. The remaining MCOs were required to report this indicator for the first time in 2006. Additionally, CDHS required three additional Comprehensive Diabetes Care indicators for all plans for the first time in 2006. In accordance with the CDHS policy of publicly reporting only aggregate data for first year measures, Tables 13 through 16 report the Medi-Cal Managed Care average for all plans and model types. Plan specific data for all Comprehensive Diabetes Care indicators will be published in the HEDIS 2007 report.

Figure 19. HEDIS 2006 Comprehensive Diabetes Care–Eye Exam (Retinal) Performed

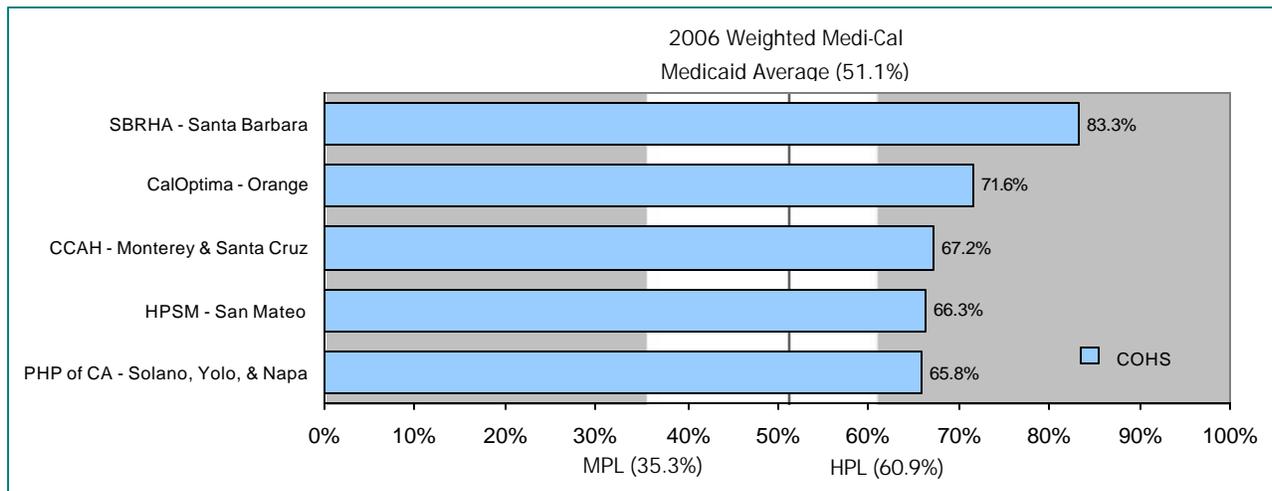
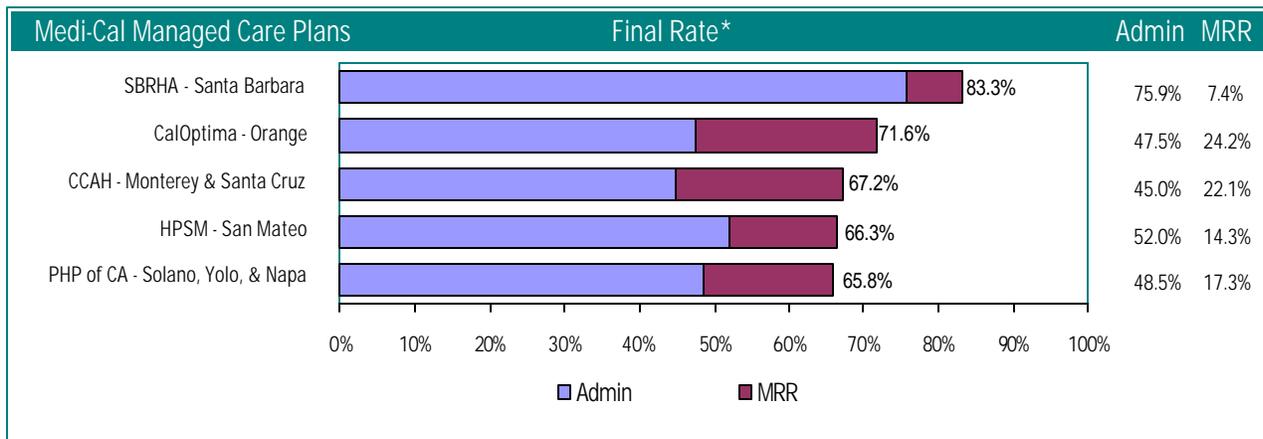


Figure 20. HEDIS 2006 Comprehensive Diabetes Care–Eye Exam (Retinal) Performed* Rates from Administrative Data and Medical Record Review Data



* Final rate may not equal the sum of the Administrative Rate and the Medical Record Rate due to rounding.

The Medi-Cal Managed Care weighted average (51.1%) exceeded the national Medicaid average of 44.1% for the Comprehensive Diabetes Care – Eye Exam (Retinal) measure. The individual plan rates for all the COHS were above the HPL of 60.9%.

Table 13. Comprehensive Diabetes Care—Eye Exam (Retinal) Performed Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]			HEDIS 2005 National Commercial Average [‡]
		MPL	Average	HPL	
Rate	51.1%	35.3%	44.1%	60.9%	50.9%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>

Table 14. Comprehensive Diabetes Care—HbA1c Testing Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]			HEDIS 2005 National Commercial Average [‡]
		MPL	Average	HPL	
Rate	74.3%	70.0%	75.0%	88.8%	86.5%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>

Table 15. Comprehensive Diabetes Care—LDL-C Screening Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]			HEDIS 2005 National Commercial Average [‡]
		MPL	Average	HPL	
Rate	84.4%	74.0%	78.6%	91.6%	91.0%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>

Table 16. Comprehensive Diabetes Care—Monitoring for Diabetic Nephropathy Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]			HEDIS 2005 National Commercial Average [‡]
		MPL	Average	HPL	
Rate	56.4%	37.9%	45.8%	63.0%	52.0%

[†]Rate obtained from NCQA's *Quality Compass* (2005).

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>

Figure 21. HEDIS 2006 Use of Appropriate Medications for People with Asthma

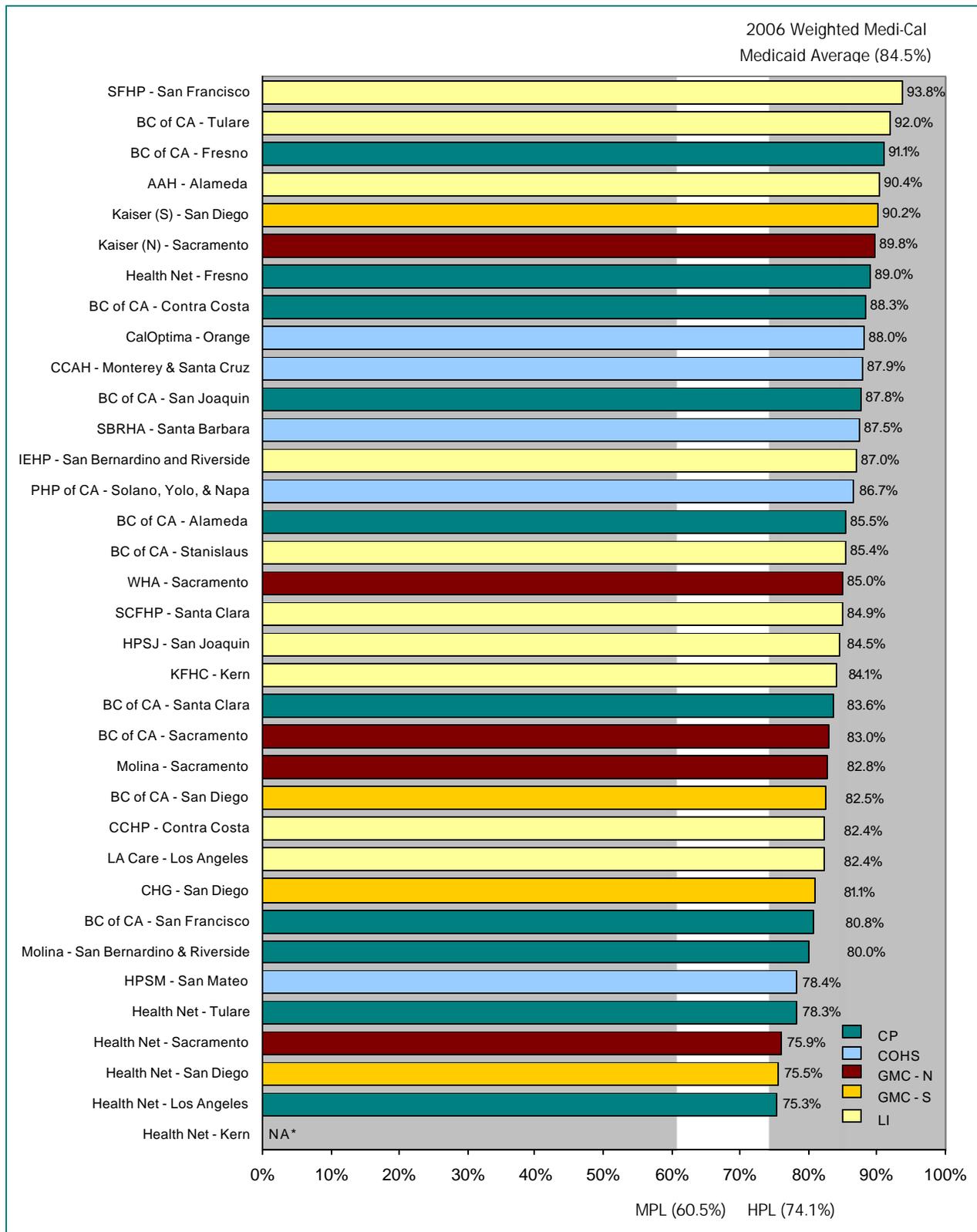
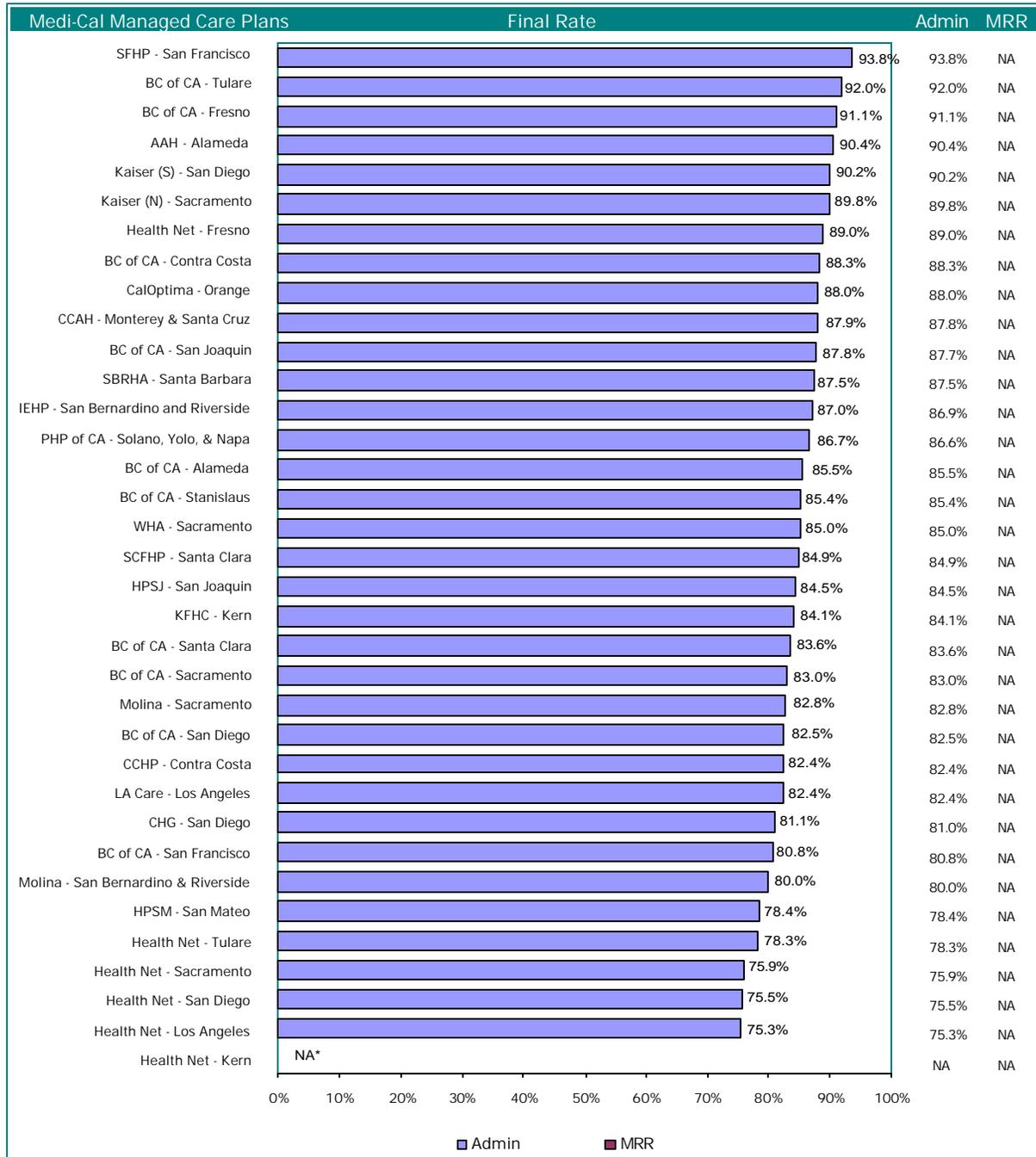


Figure 22. HEDIS 2006 Use of Appropriate Medications for People with Asthma Rates from Administrative Data



*NA indicates that a plan had fewer than 30 members eligible for the indicator. Rates are not reported for measures where less than 30 members

All the managed care plans exceeded the 2005 HPL level of 74.1% for Use of Appropriate Medications for People with Asthma measure. This performance can partially be attributed to the changes in the technical specifications of the HEDIS 2006 measure. NCQA modified the definition of persistent asthma allowing for the capture of asthmatics who are more likely to receive appropriate medications. The Medi-Cal Managed Care weighted average was 84.5%. The plan with the highest rate was San Francisco Health Plan with 93.8%. Health Net-Kern did not report a rate for this measure due to a denominator of less than 30.

Table 17. Use of Appropriate Medications for People with Asthma Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average [†]	HEDIS 2005 National Commercial Average [‡]
Rate	84.5%	63.8%	72.8%

[†]Rate obtained from NCQA's *Quality Compass (2005)*.

[‡]Rate obtained from NCQA's website: <http://www.ncqa.org/Programs/hedis/audit/2005MPR/Commercial.htm>.

For HEDIS 2006, Medi-Cal managed care plans were required to report the Inappropriate Treatment for Adults with Acute Bronchitis indicator for the first time. In accordance with the CDHS policy of publicly reporting only aggregate data for first year measures, Table 18 reports the Medi-Cal Managed Care average for all plans and model types. Plan specific data for this indicator will be published in 2007.

Table 18. Inappropriate Treatment for Adults with Acute Bronchitis Benchmarks

	HEDIS 2006 Medi-Cal Managed Care Average	HEDIS 2005 National Medicaid Average	HEDIS 2005 National Commercial Average
Rate	63.2%	NA *	NA *

*Benchmarks not available from NCOA.

Figure 23. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits) – COHS

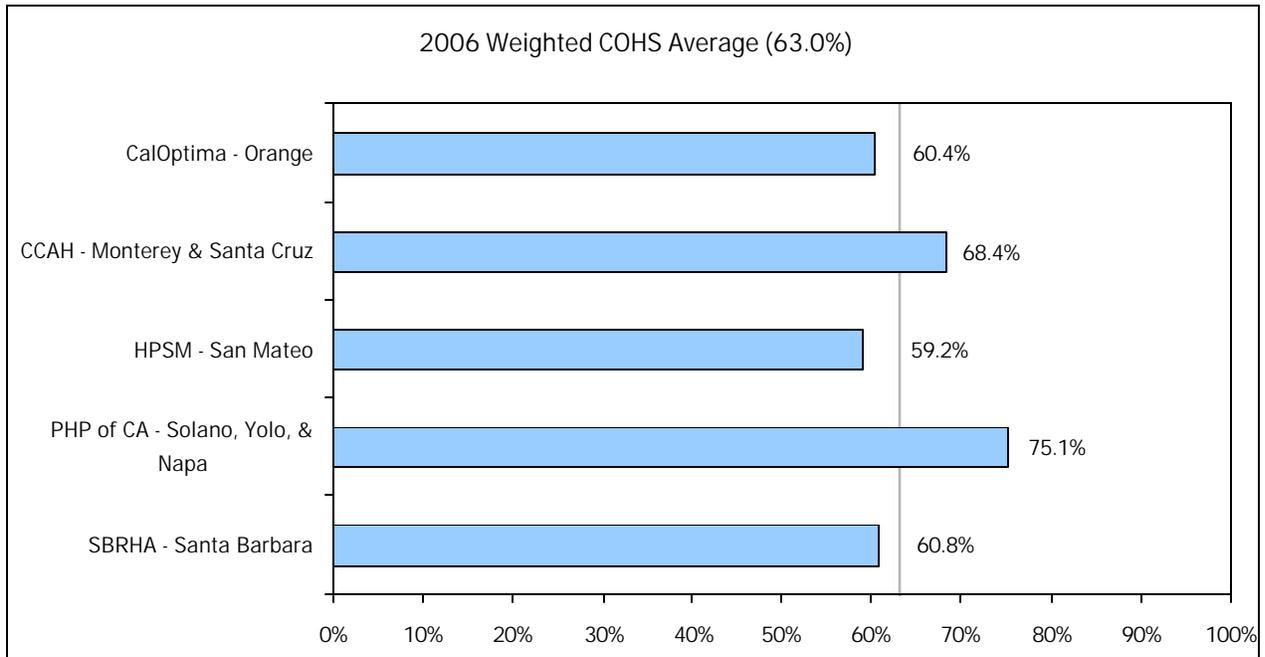
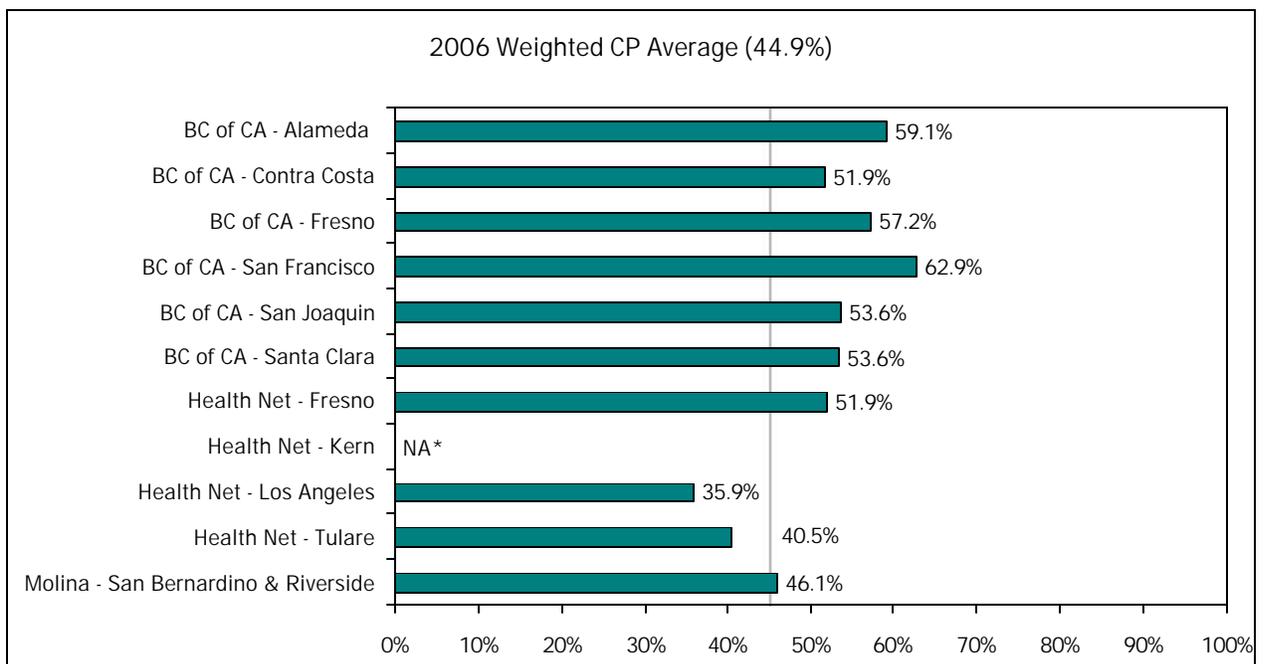


Figure 24. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits) – CP



* NA indicates that a plan had fewer than 30 members eligible for the indicator. Rates are not reported for measures where less than 30 members are eligible

Figure 25. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits) – GMC North

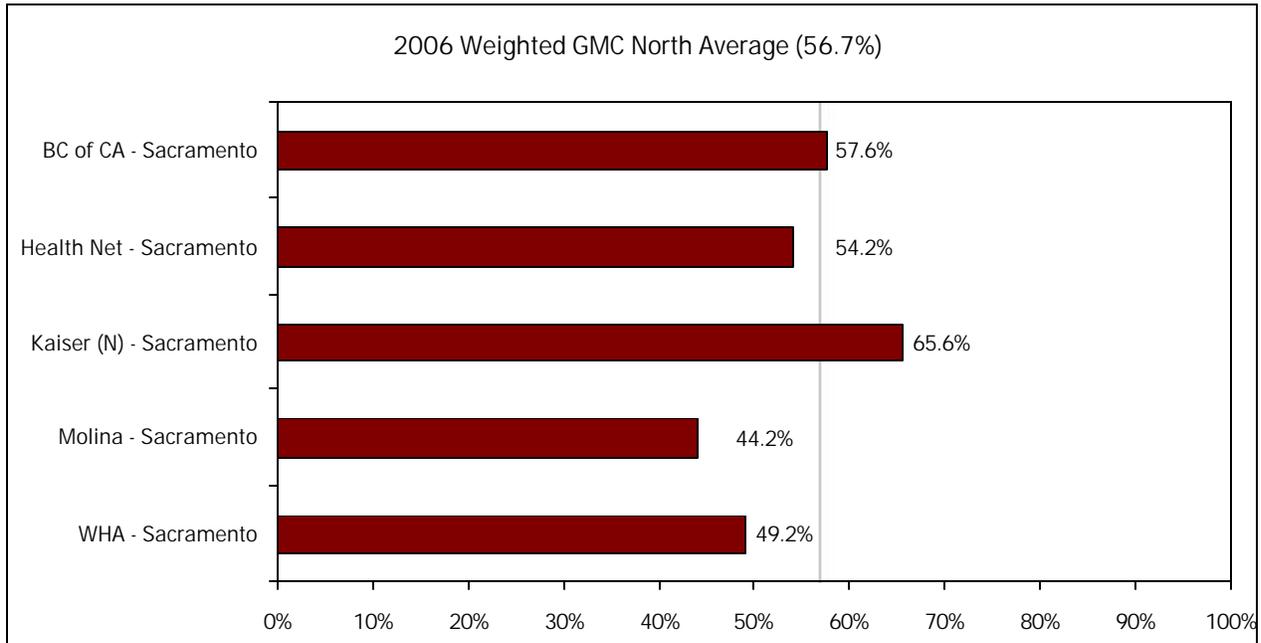


Figure 26. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits) – GMC South

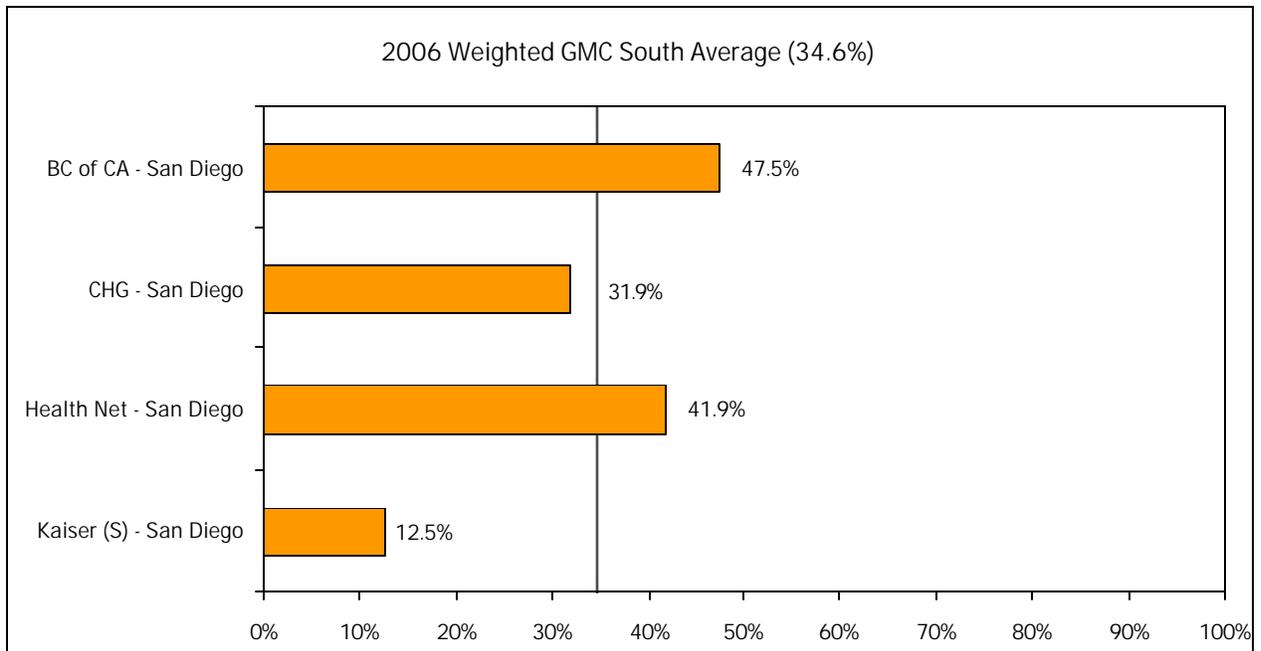


Figure 27. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits) – LI

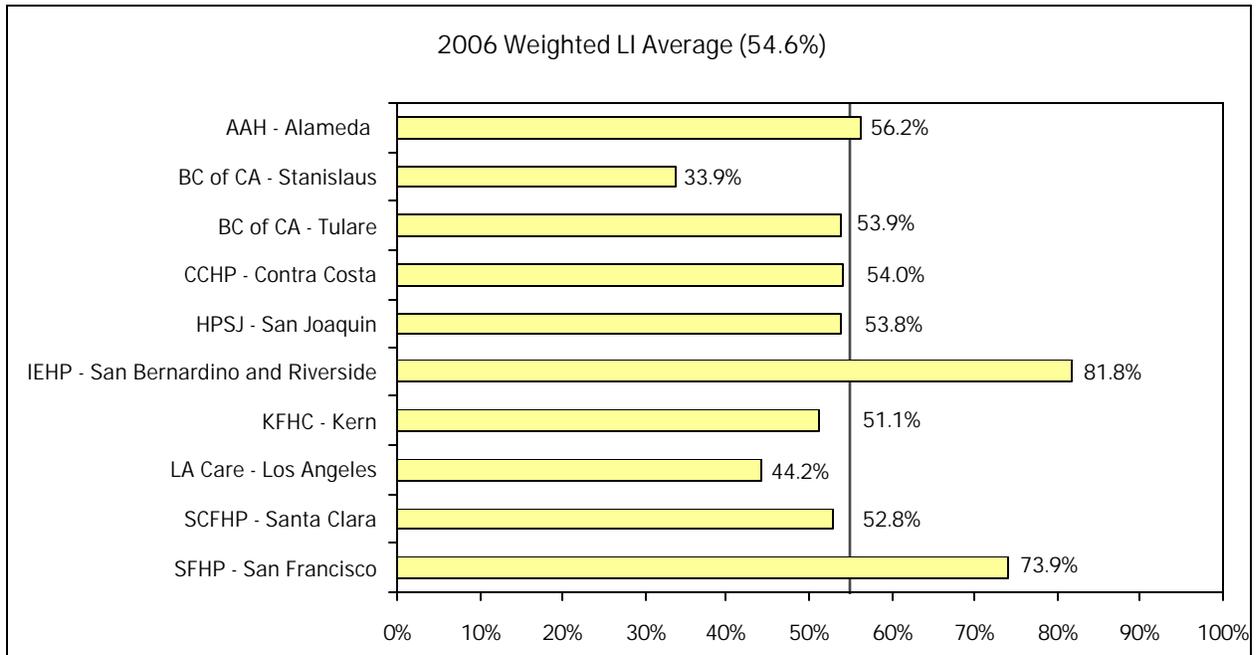


Figure 28. HEDIS 2006 Well-Child Visits in the First 15 Months of Life (6 or More Visits) – Model Type Comparison of Weighted Averages

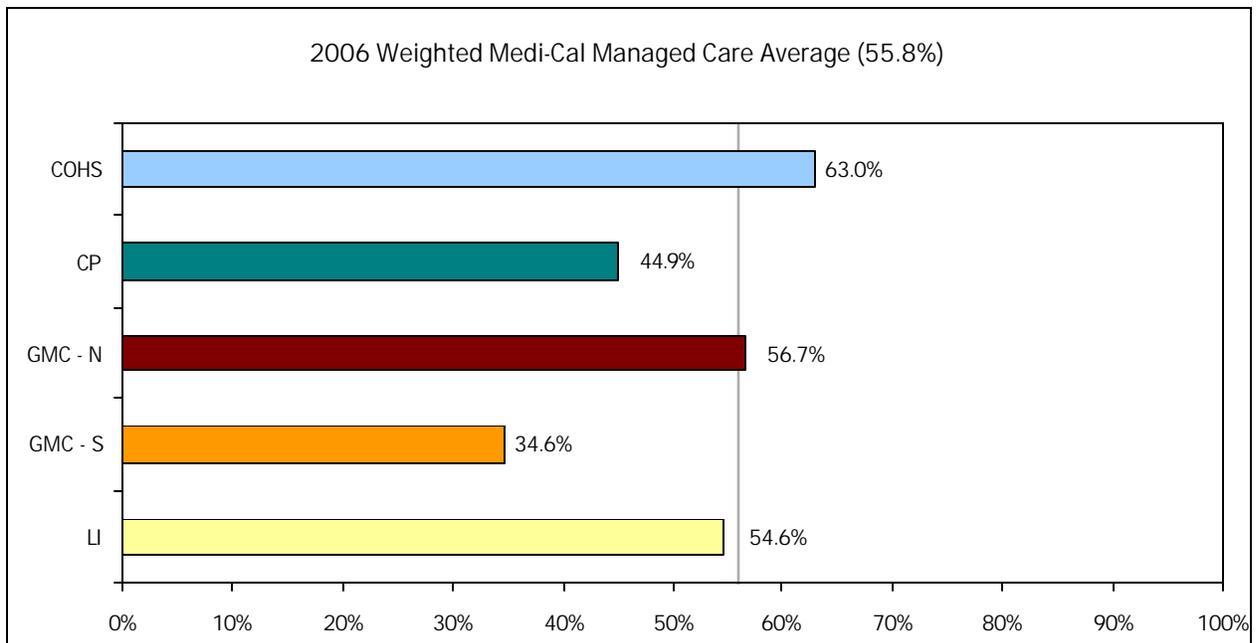


Table 19 presents the trends for the Well-Child Visits in the First 15 Months of Life for 6 or More Visits. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

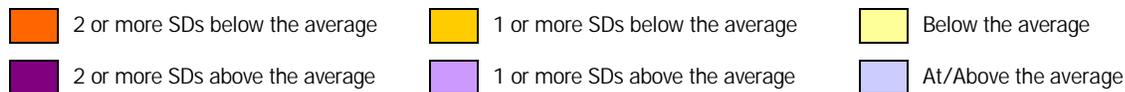


Table 19. Trends for Well-Child Visits in the First 15 Months of Life (6 or More Visits)

Model Type	Medi-Cal Managed Care Plans	HEDIS 2000 Rate	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	36.8	----	43.8	49.8	44.7	60.4
	CCAH	49.5	56.7	42.1	53.8	65.7	68.4
	HPSM	44.2	47.7	56.3	54.9	56.3	59.2
	PHP of CA	21.6	32.6	33.2	35.7	55.5	75.1
	SBRHA	58.1	62.3	62.7	64.0	53.9	60.8
CP	BC of CA (CP)	40.5	45.8	49.2	54.7	55.6	56.7
	Health Net (CP)	27.2	25.7	26.0	29.8	37.2	36.6
	Molina Healthcare (CP)	8.2	9.3	46.9	59.2	55.6	46.1
GMCN	BC of CA (GMC-North)	53.6	52.4	61.5	59.6	53.4	57.6
	Health Net (GMC-North)	43.4	41.4	48.5	55.1	46.7	54.2
	Kaiser (GMC-North)	63.9	66.7	72.2	52.9	67.4	65.6
	Molina Healthcare (GMC-North)	----	----	27.8	52.4	48.1	44.2
	WHA	40.0	36.5	21.9	35.6	51.2	49.2
GMCS	BC of CA (GMC-South)	----	----	37.5	44.4	44.4	47.5
	CHG	0.0	25.2	44.5	44.5	36.5	31.9
	Health Net (GMC-South)	----	----	23.9	23.9	34.2	41.9
	Kaiser (GMC-South)	----	----	26.8	40.5	----	12.5
	Sharp	----	----	41.1	58.5	----	----
	UCSD	----	----	27.2	----	----	----
	Universal	----	----	11.4	41.3	----	----
LI	AAH	31.1	33.0	32.6	61.1	60.7	56.2
	BC of CA (Stanislaus)	23.1	45.2	----	46.7	45.7	33.9
	BC of CA (Tulare)	----	10.4	45.3	52.7	47.7	53.9
	CCHP	21.4	34.8	23.8	38.4	51.1	54.0
	HPSJ	33.5	35.2	24.9	38.9	60.6	53.8
	IEHP	24.3	24.1	35.2	63.2	74.3	81.8
	KFHC	38.4	38.0	41.5	36.5	46.7	51.1
	L.A. Care	8.2	13.7	20.0	40.1	44.0	44.2
	SFHP	67.4	64.2	45.3	61.3	56.3	73.9
	SCFHP	27.1	27.0	47.6	47.8	56.5	52.8
Medi-Cal Overall Average*		34.6	37.6	38.6	48.2	51.9	52.7

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Well-Child Visits in the First 15 Months of Life (6 or More Visits)

The Medi-Cal Managed Care average for Well Child Visits in the first 15 months increased steadily from 48.2% in 2004 to 52.7% in 2006. The rates for four plans were one standard deviation or more above the Medi-Cal Managed Care average. In 2005 and 2006, Central Coast Alliance rates were one standard deviation and Inland Empire Health Plan rates were two standard deviations above the Medi-Cal Managed Care averages.

CalOptima improved its rate by 15.7 percentage points from 44.7% in 2005 to 60.4% in 2006 (above the average).

CalOptima, Health Net (GMC North), Contra Costa Health Plan and Blue Cross of CA (Tulare) brought their rates up from below average in 2005 to above average in 2006.

The rates for all four plans operating in the GMC South model were below the Medi-Cal Managed Care average in 2005 and 2006. Community Health Group was one standard deviation below the average in 2006 and Kaiser (GMC-South) was more than two standard deviations below in 2006.

Health Net (CP) and Blue Cross of Ca (Stanislaus) rates were one standard deviation below the 2006 Medi-Cal Managed Care average with 36.6% and 33.9% respectively.

Figure 29. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life – COHS

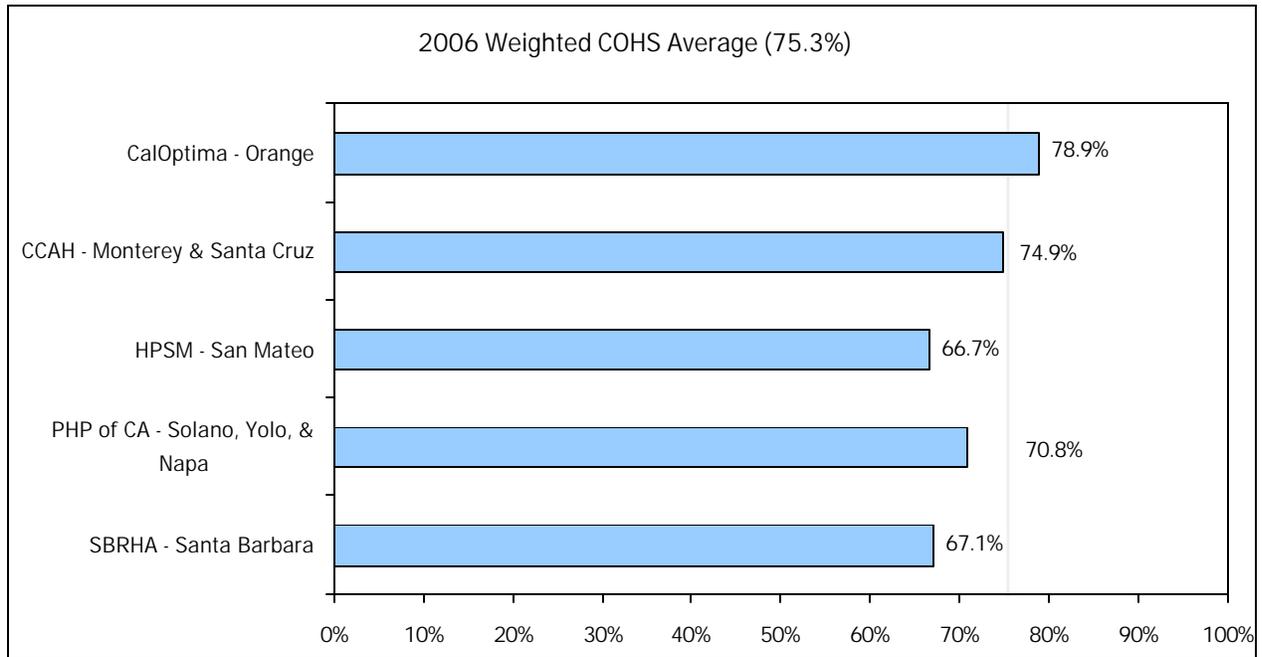


Figure 30. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life – CP

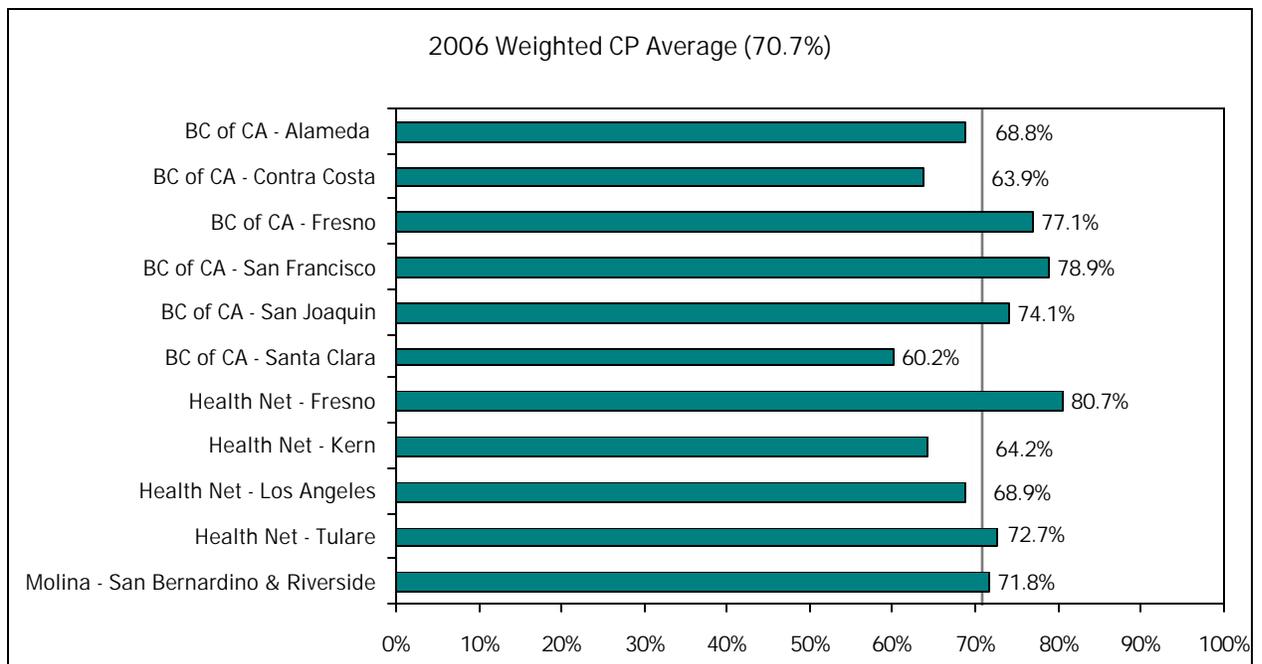


Figure 31. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life – GMC North

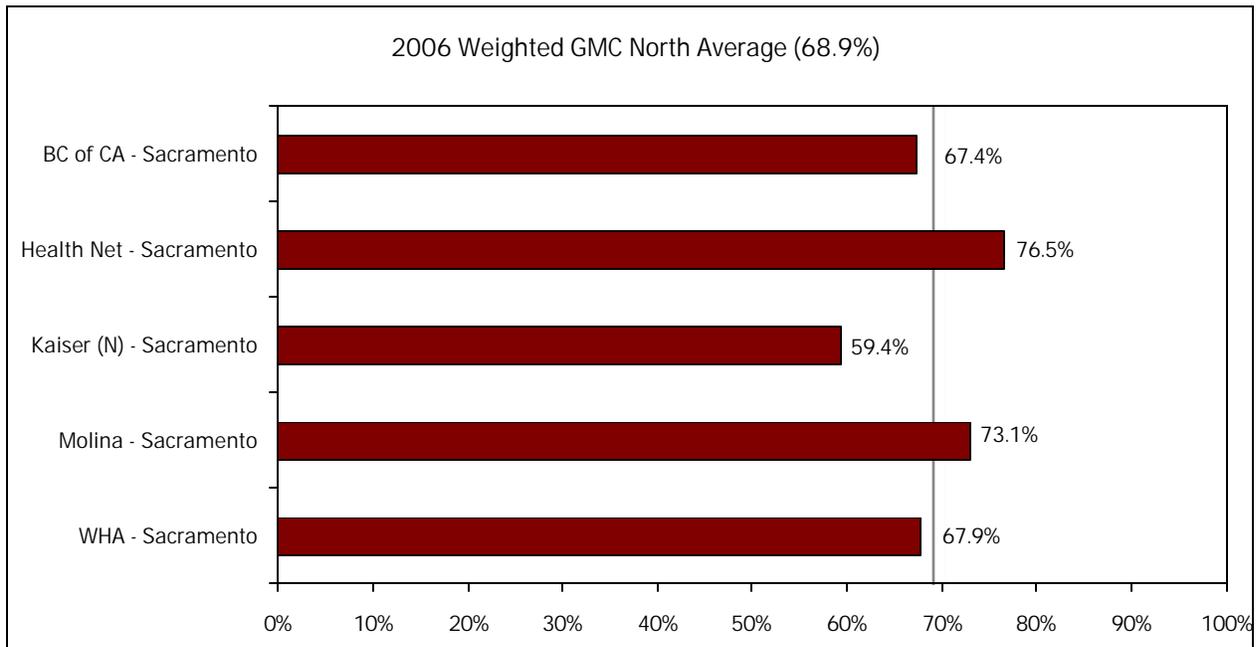


Figure 32. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life – GMC South

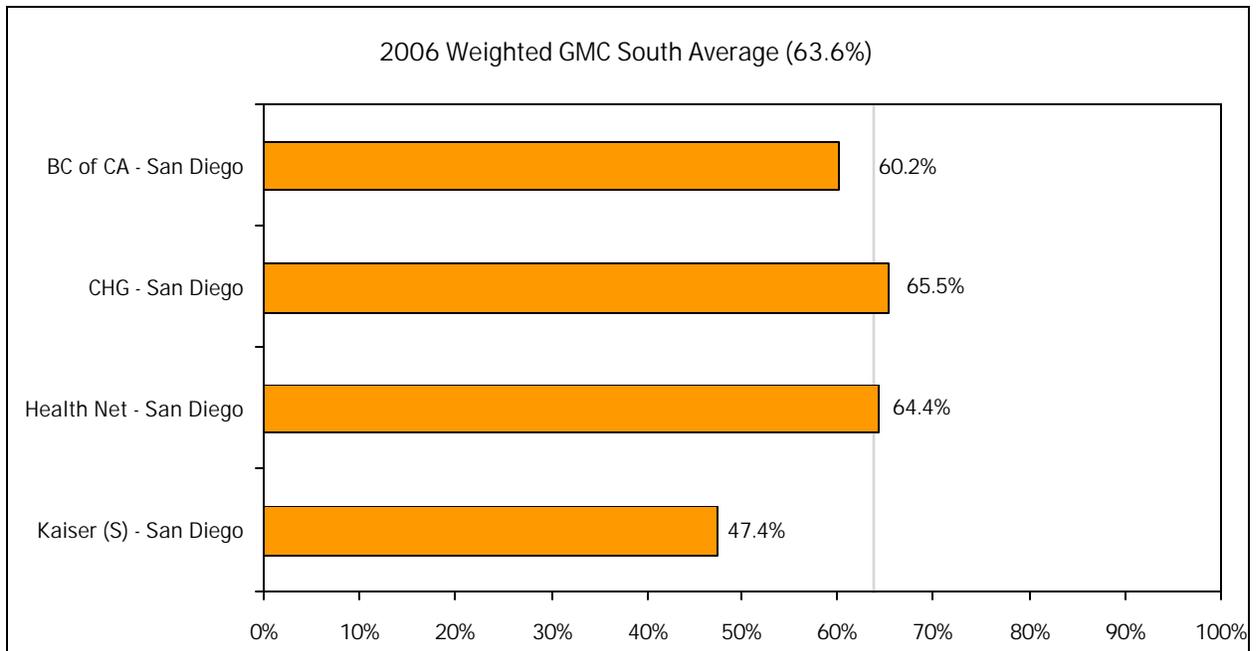


Figure 33. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life – LI

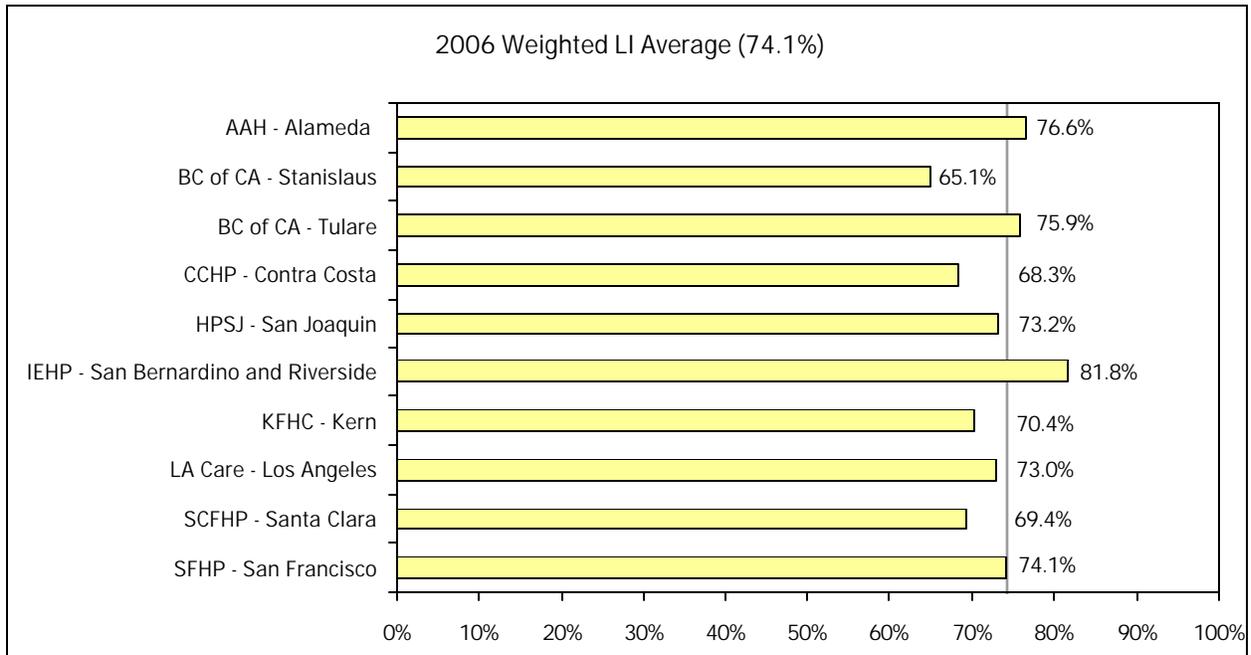


Figure 34. HEDIS 2006 Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life – Model Type Comparison of Weighted Averages

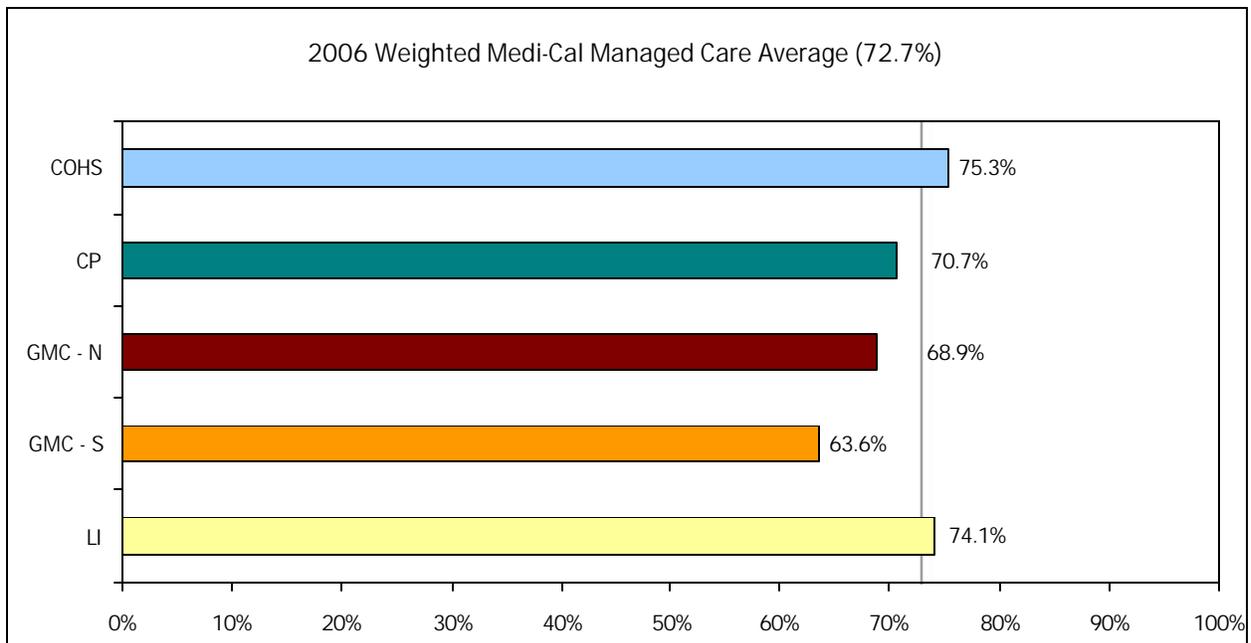


Table 20 presents the trends for Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

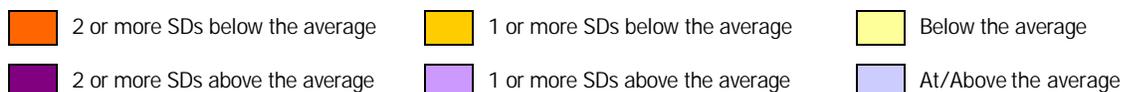


Table 20. Trends for Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life

Model Type	Medi-Cal Managed Care Plans	HEDIS 2000 Rate	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	----	----	----	----	----	78.9
	CCAH	----	----	----	----	----	74.9
	HPSM	----	----	----	----	----	66.7
	PHP of CA	----	----	----	----	----	70.8
	SBRHA	----	----	----	----	----	67.1
CP	BC of CA (CP)	65.5	62.5	75.0	70.8	73.8	73.7
	Health Net (CP)	49.2	50.2	55.5	61.7	67.7	69.4
	Molina Healthcare (CP)	57.7	60.5	67.5	74.8	77.6	71.8
GMCN	BC of CA (GMC-North)	56.6	56.3	63.0	65.5	71.3	67.4
	Health Net (GMC-North)	60.2	59.5	67.4	73.6	73.2	76.5
	Kaiser (GMC-North)	48.5	47.1	46.6	54.3	54.0	59.4
	Molina Healthcare (GMC-North)	----	----	56.7	63.1	71.8	73.1
	WHA	55.8	52.5	53.0	60.8	62.3	67.9
GMCS	BC of CA (GMC-South)	49.1	49.9	59.0	67.1	65.2	60.2
	CHG	58.6	66.9	67.6	64.7	67.9	65.5
	Health Net (GMC-South)	----	43.5	54.5	59.1	68.0	64.4
	Kaiser (GMC-South)	78.9	48.6	54.9	53.7	54.8	47.4
	Sharp	55.1	79.0	58.5	64.7	----	----
	UCSD	----	45.9	46.6	----	----	----
	Universal	43.1	51.6	57.7	70.2	----	----
LI	AAH	58.3	57.6	58.6	69.3	70.8	76.6
	BC of CA (Stanislaus)	47.2	54.1	54.9	61.6	62.5	65.1
	BC of CA (Tulare)	----	57.4	65.3	65.0	69.9	75.9
	CCHP	74.3	54.5	57.0	63.5	68.0	68.3
	HPSJ	62.7	57.4	65.0	67.3	70.8	73.2
	IEHP	52.0	61.1	62.0	70.6	77.8	81.8
	KFHC	65.3	60.0	66.4	62.3	70.6	70.4
	L.A. Care	40.5	47.5	46.6	65.0	67.9	73.0
	SFHP	57.4	68.6	63.7	77.0	79.7	74.1
SCFHP	60.2	64.1	67.6	71.8	65.5	69.4	
Medi-Cal Overall Average*		57.0	56.5	59.6	65.7	68.7	69.7

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Well-Child Visits in the Third, Fourth, Fifth, and Sixth Year of Life

Between 2004 and 2006, the Medi-Cal Managed Care average for Well Child Visits in the third, fourth, fifth, sixth year of life increased from 65.7% to 69.7%. Of the 22 plans where trending information is available, 13 plans had increases in their rates between 2005 and 2006.

CalOptima, Alameda Alliance, and Inland Empire rates were one standard deviation or more above the Medi-Cal Managed Care average in 2006. The rates for Kaiser (GMC-North), Blue Cross of CA (GMC-South), and Kaiser (GMC-South) were one to two standard deviations below the Medi-Cal Managed Care average in 2006.

Figure 35. HEDIS 2006 Childhood Immunization Status (Combination #2) – COHS

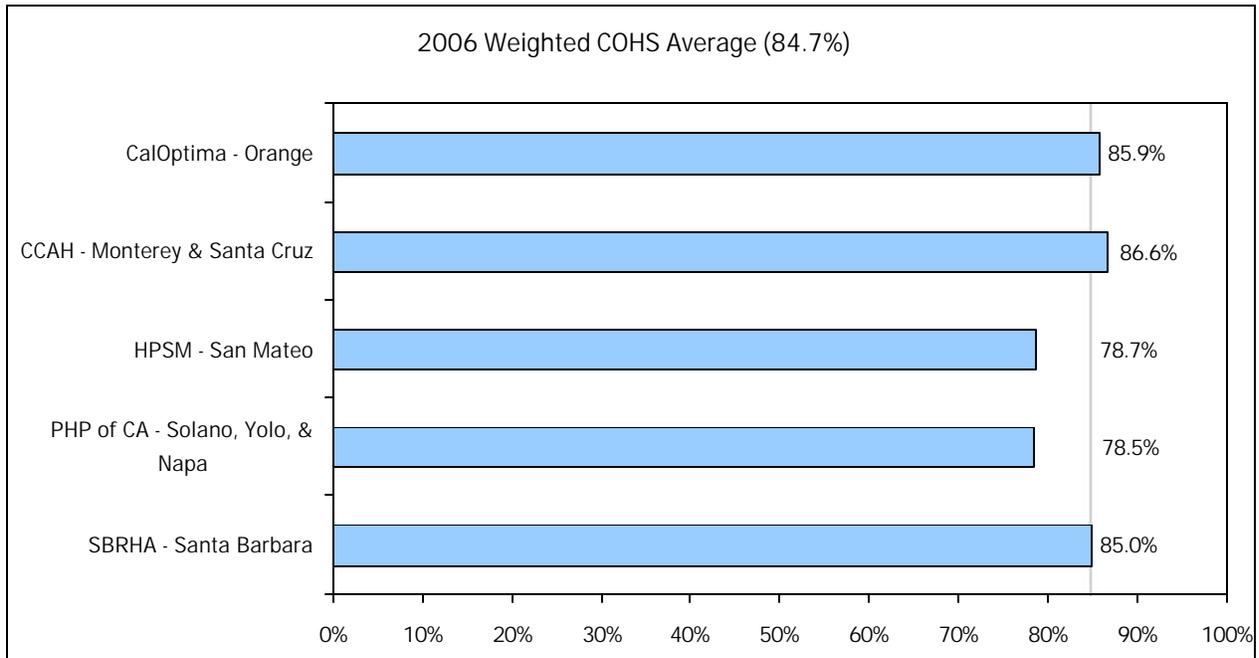


Figure 36. HEDIS 2006 Childhood Immunization Status (Combination #2) – CP

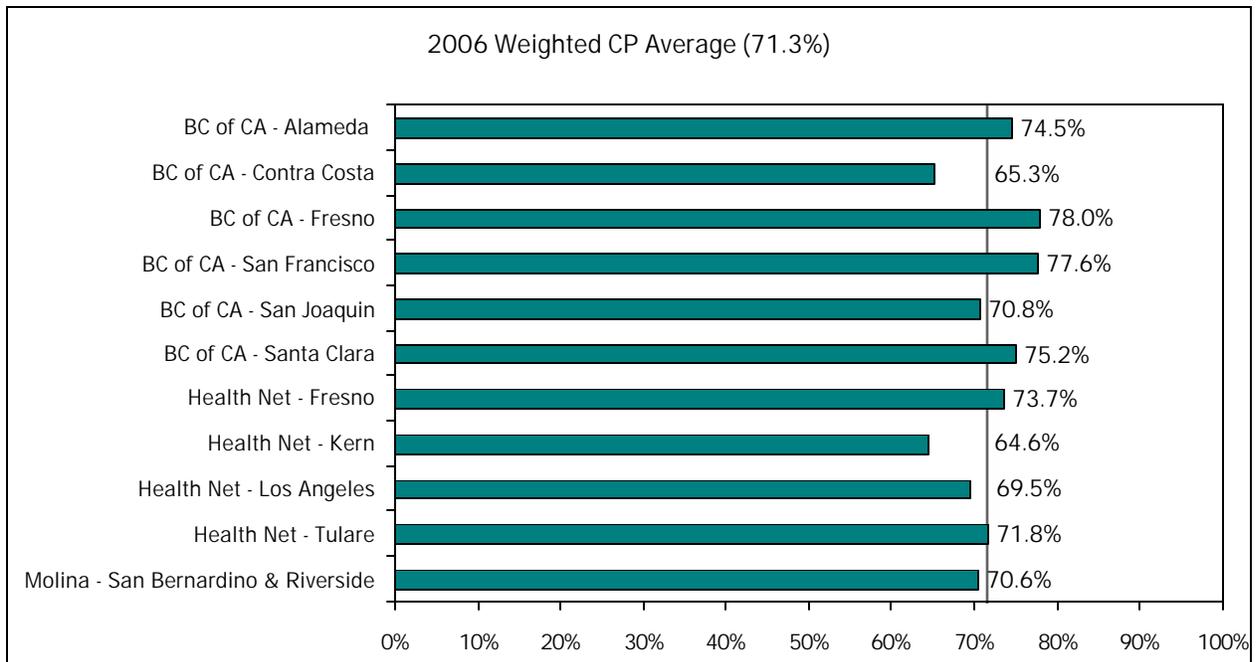


Figure 37. HEDIS 2006 Childhood Immunization Status (Combination #2) – GMC North

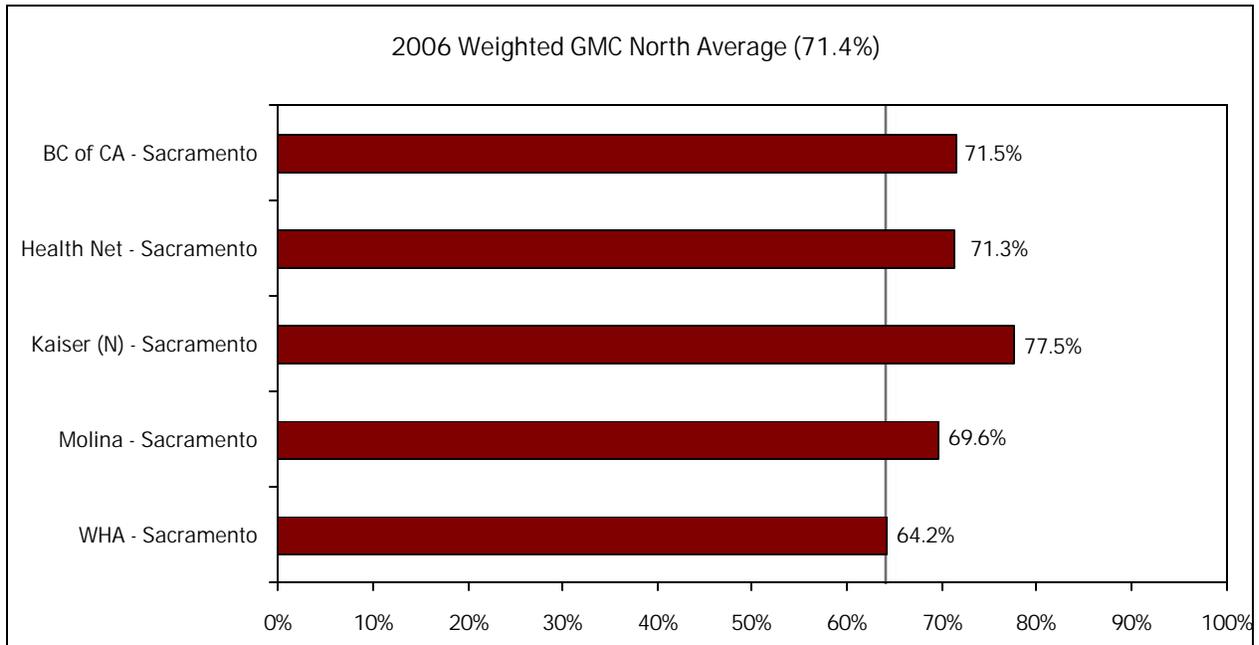


Figure 38. HEDIS 2006 Childhood Immunization Status (Combination #2) – GMC South

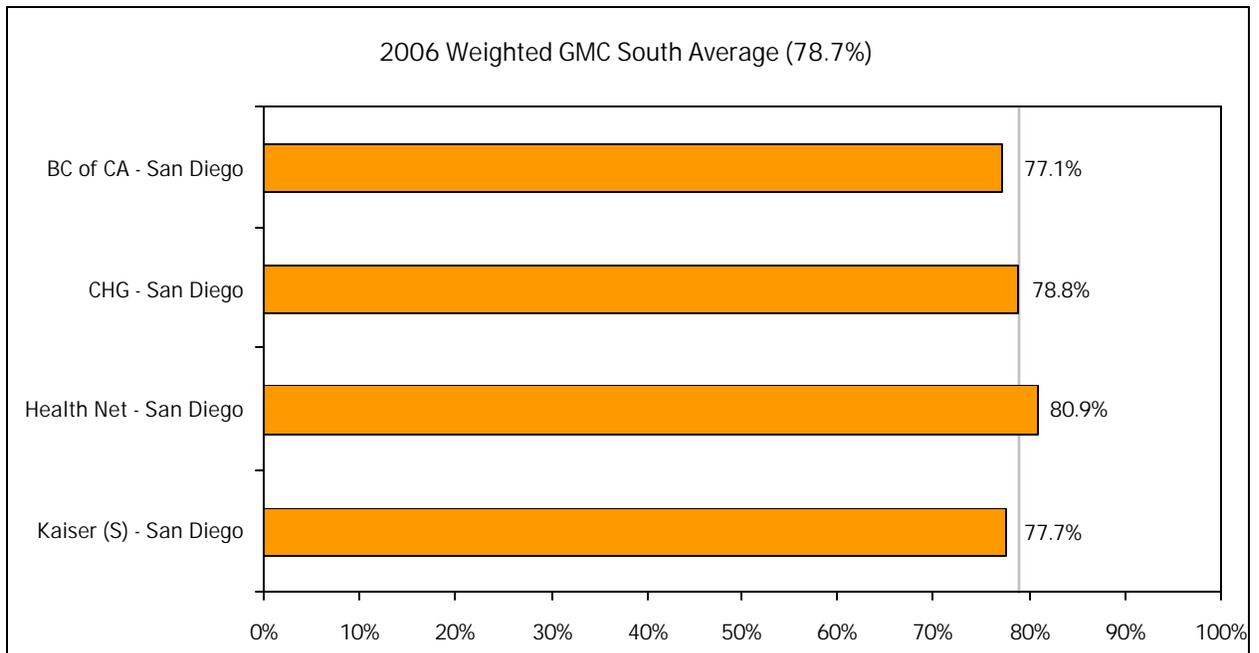


Figure 39. HEDIS 2006 Childhood Immunization Status (Combination #2) – LI

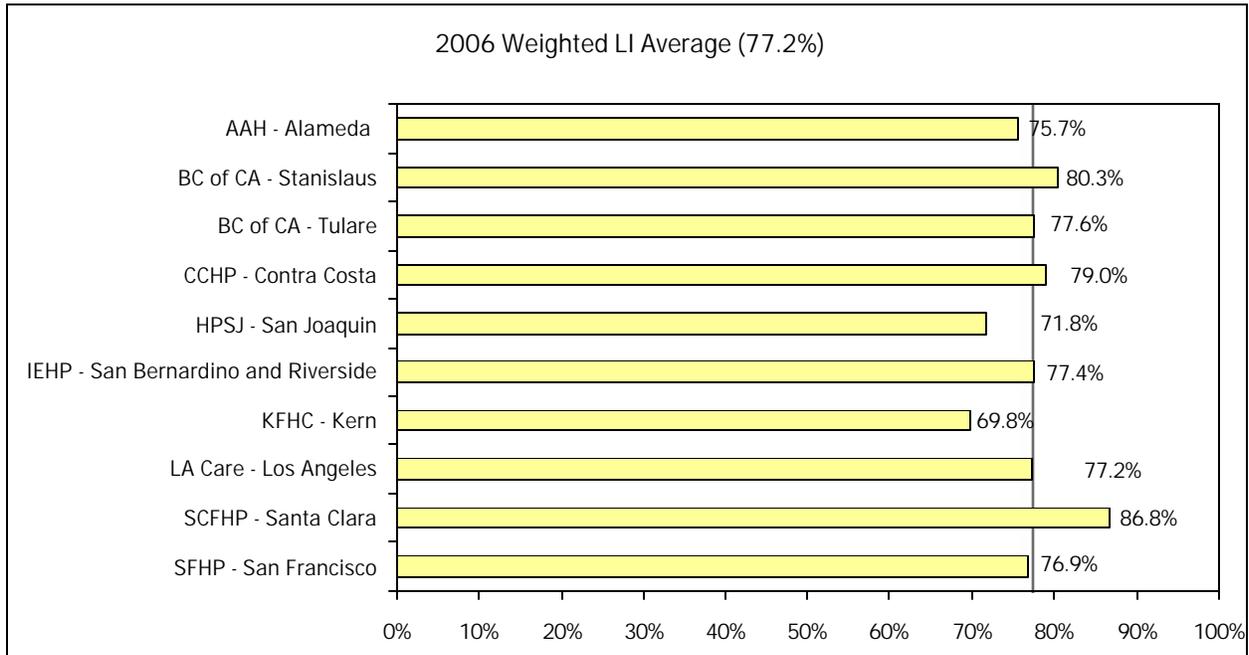


Figure 40. HEDIS 2006 Childhood Immunization Status (Combination #2) – Model Type Comparison of Weighted Averages

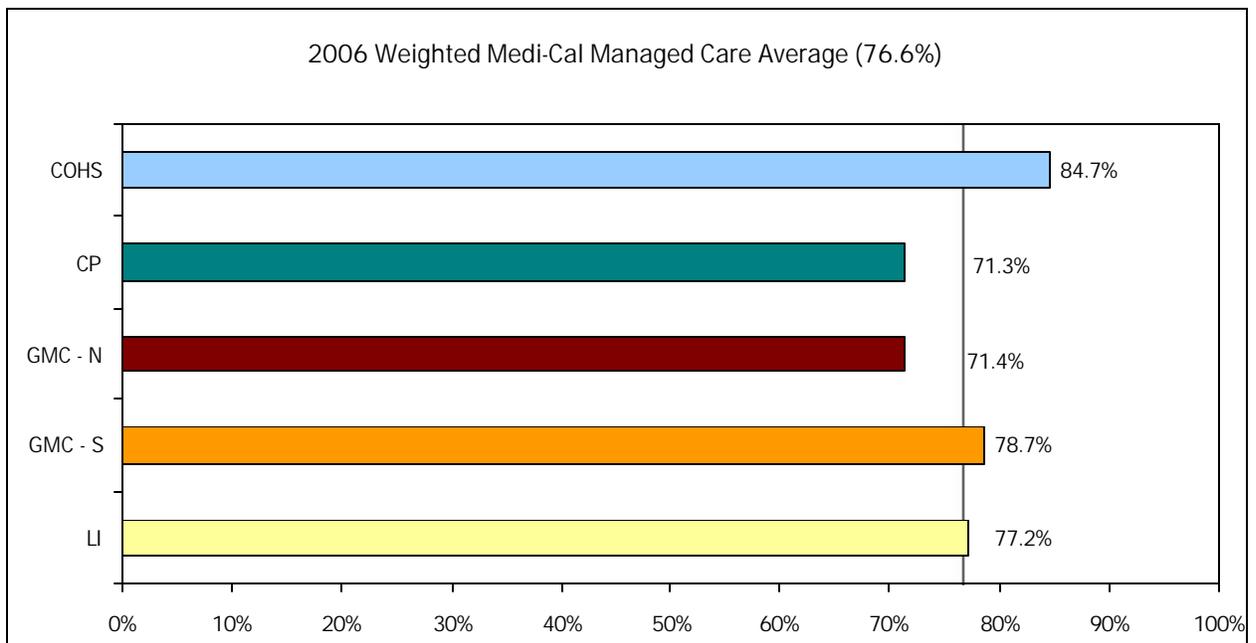


Table 21 presents the trends for Childhood Immunization Status – Combination #2. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

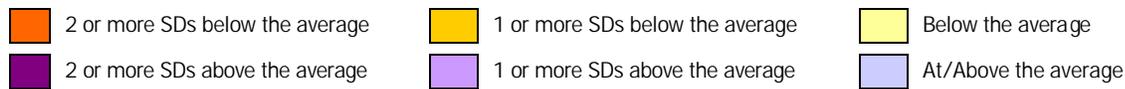


Table 21. Trends for Childhood Immunization Status (Combination #2)

Model Type	Medi-Cal Managed Care Plans	HEDIS 2000 Rate	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	52.3	60.4	72.2	72.5	74.3	85.9
	CCAH	43.8	58.6	57.7	73.5	75.7	86.6
	HPSM	53.4	55.7	56.9	61.8	61.7	78.7
	PHP of CA	44.2	54.9	56.2	67.6	70.7	78.5
	SBRHA	63.3	65.4	69.2	76.4	79.4	85.0
CP	BC of CA (CP)	52.7	57.2	62.7	64.5	66.4	76.0
	Health Net (CP)	48.5	43.9	50.7	60.9	60.7	69.7
	Molina Healthcare (CP)	31.1	45.7	48.6	60.0	68.5	70.6
GMCN	BC of CA (GMC-North)	52.2	55.8	56.0	62.5	66.0	71.5
	Health Net (GMC-North)	55.9	51.9	49.9	63.5	60.3	71.3
	Kaiser (GMC-North)	52.4	66.8	67.0	70.1	70.6	77.5
	Molina Healthcare (GMC-North)	----	----	36.3	54.5	58.8	69.6
	WHA	32.4	40.0	43.6	42.4	47.8	64.2
GMCS	BC of CA (GMC-South)	----	41.7	62.7	74.3	73.4	77.1
	CHG	49.6	57.2	79.3	77.4	70.3	78.8
	Health Net (GMC-South)	----	46.6	68.2	74.5	73.5	80.9
	Kaiser (GMC-South)	66.0	59.8	64.5	71.7	75.7	77.7
	Sharp	24.7	40.7	59.6	69.8	----	----
	UCSD	----	32.0	60.1	----	----	----
	Universal	36.2	48.5	55.2	72.7	----	----
LI	AAH	46.5	48.6	53.8	56.9	67.1	75.7
	BC of CA (Stanislaus)	23.8	44.9	53.9	60.9	63.9	80.3
	BC of CA (Tulare)	----	49.1	67.1	70.4	71.1	77.6
	CCHP	51.8	65.5	69.2	61.3	60.2	79.0
	HPSJ	29.9	43.0	43.6	53.9	67.6	71.8
	IEHP	39.8	47.9	63.0	68.1	74.9	77.4
	KFHC	48.4	57.2	61.8	55.6	65.1	69.8
	L.A. Care	38.7	49.0	51.7	59.5	56.3	77.2
	SFHP	47.2	51.4	62.9	74.3	73.4	76.9
	SCFHP	42.4	53.6	60.4	65.7	73.2	86.8
Medi-Cal Overall Average*		45.1	51.5	58.8	65.4	67.7	76.7

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Childhood Immunizations Status (Combination #2)

The Medi-Cal Managed Care average increased 11.3 percentage points between 2004 (65.4%) and 2006 (76.7%). All 2006 individual plan rates were above 60%, and all exceeded the individual plan rates for 2005. In 2005, no plan rates were over 80% while in 2006 six plans out of 27 had rates above 80%. Central Coast Alliance and Santa Barbara Regional rates were the highest with 86.6% and 86.8% respectively.

Plans that were at least one standard deviation below the 2006 Medi-Cal Managed Care average included Kern Family Health Care, Molina Healthcare (CP), Molina Healthcare (GMC-North), Western Health Advantage, and Health Net (CP).

Figure 41. HEDIS 2006 Adolescent Well-Care Visits– COHS

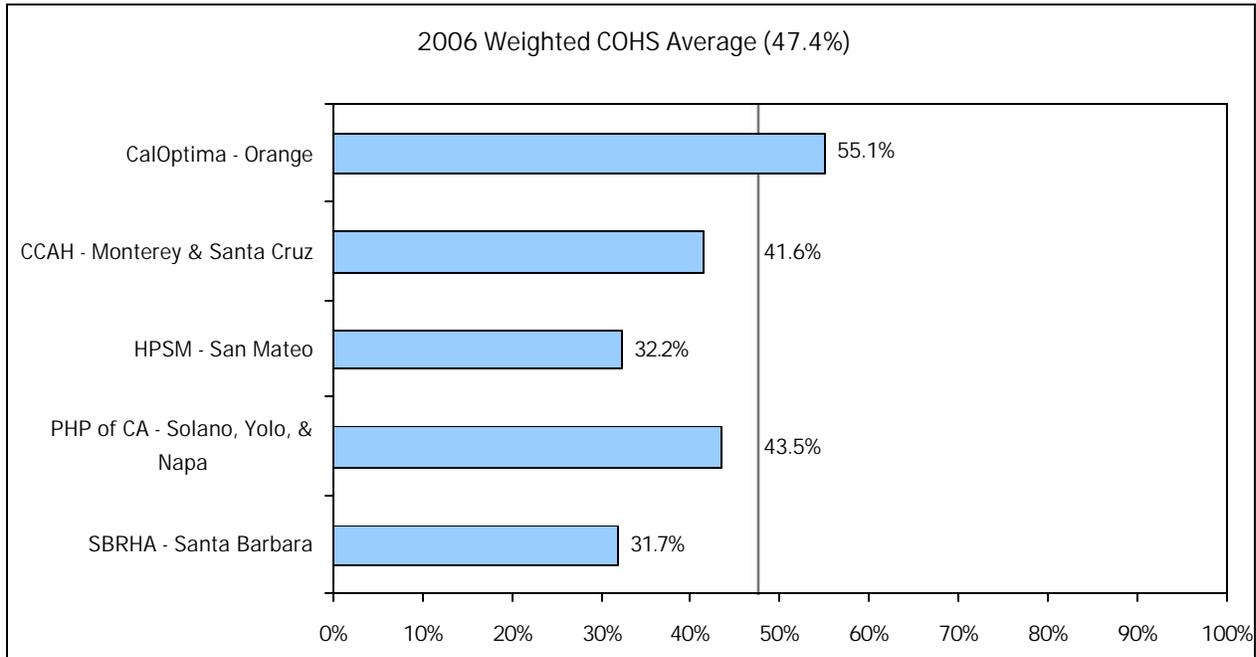


Figure 42. HEDIS 2006 Adolescent Well-Care Visits – CP

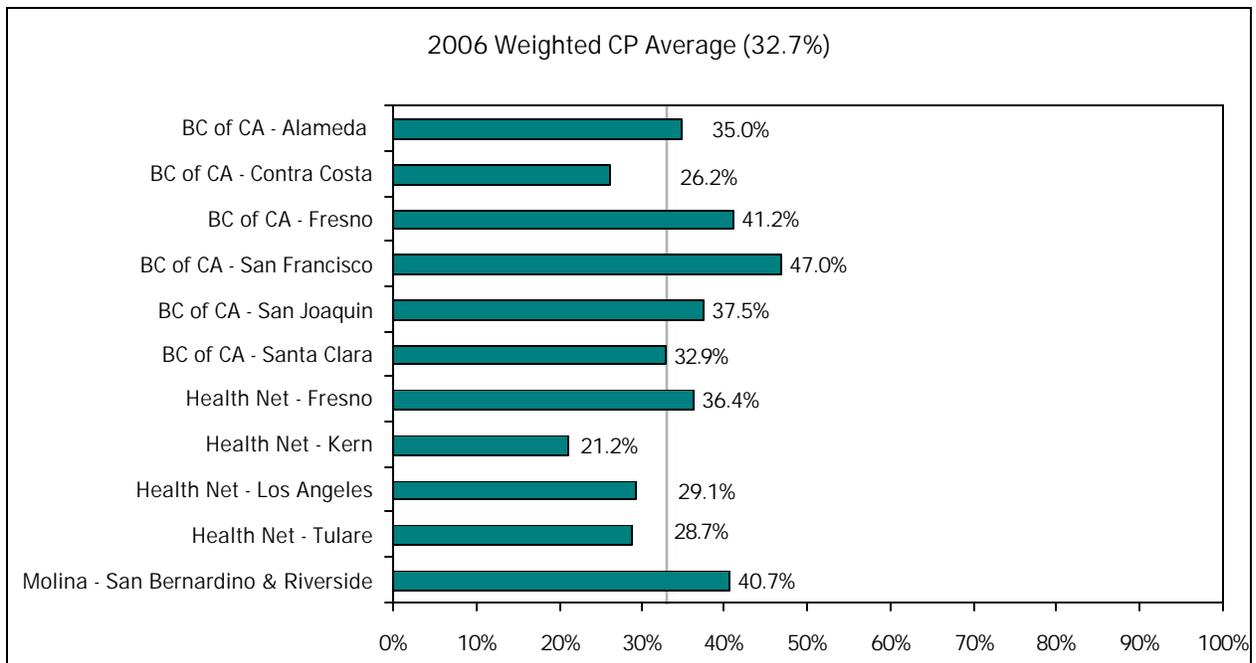


Figure 43. HEDIS 2006 Adolescent Well-Care Visits – GMC North

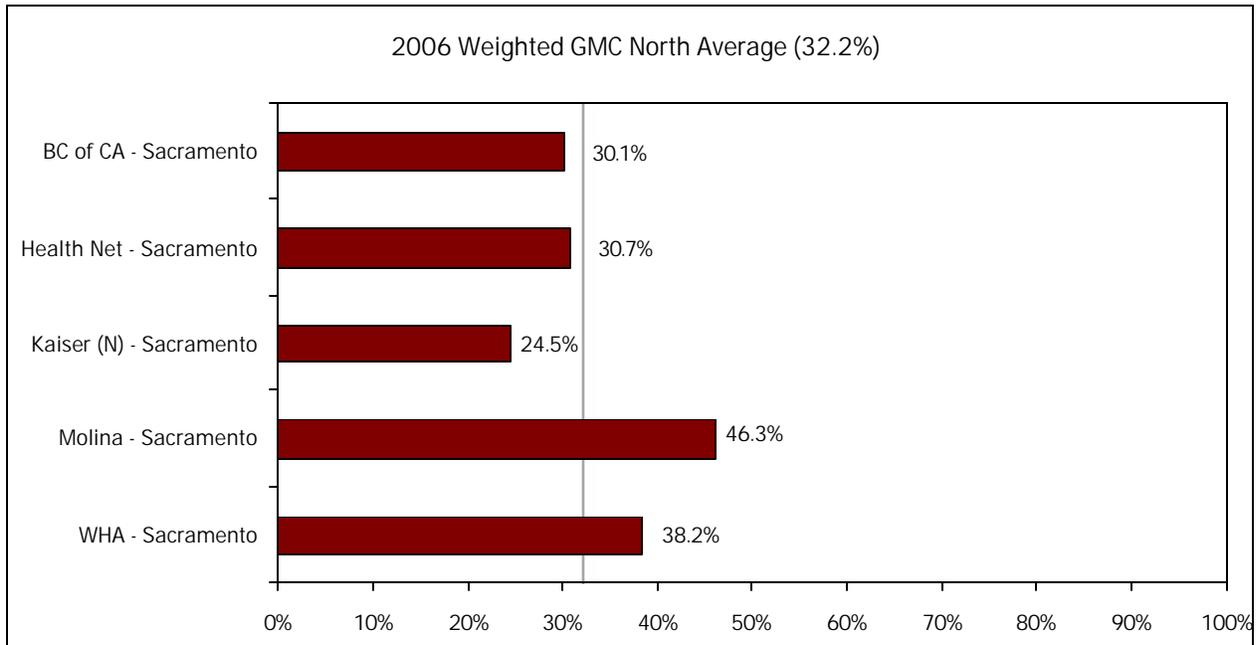


Figure 44. HEDIS 2006 Adolescent Well-Care Visits – GMC South

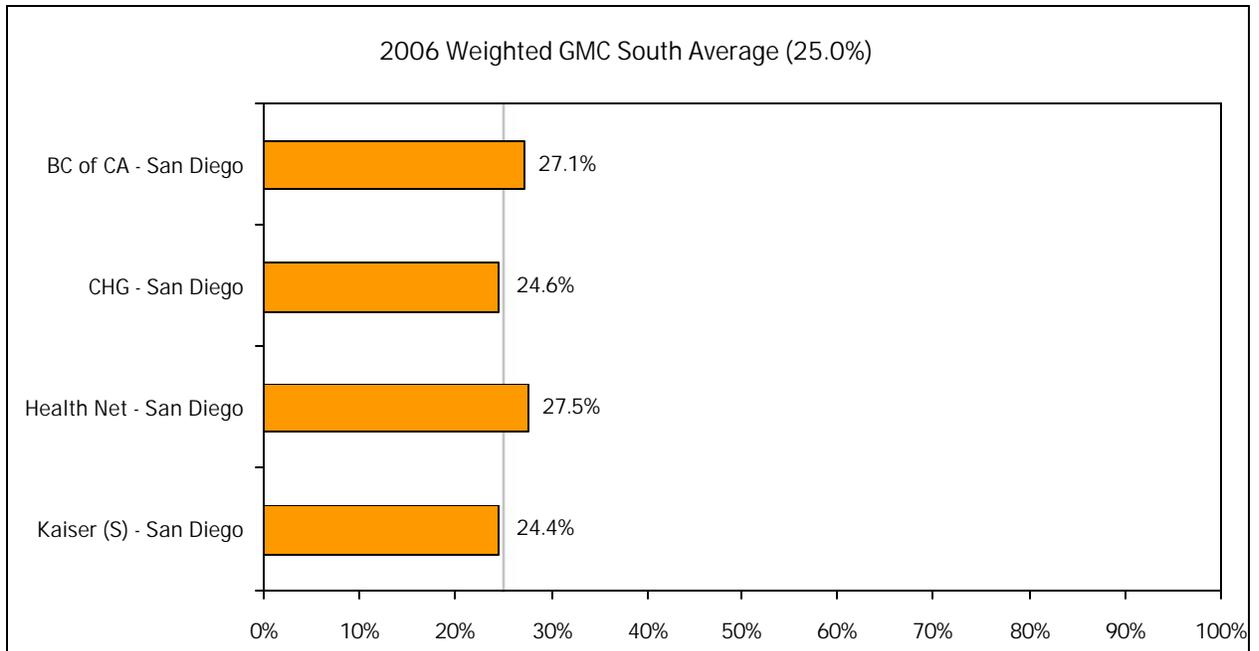


Figure 45. HEDIS 2006 Adolescent Well-Care Visits – LI

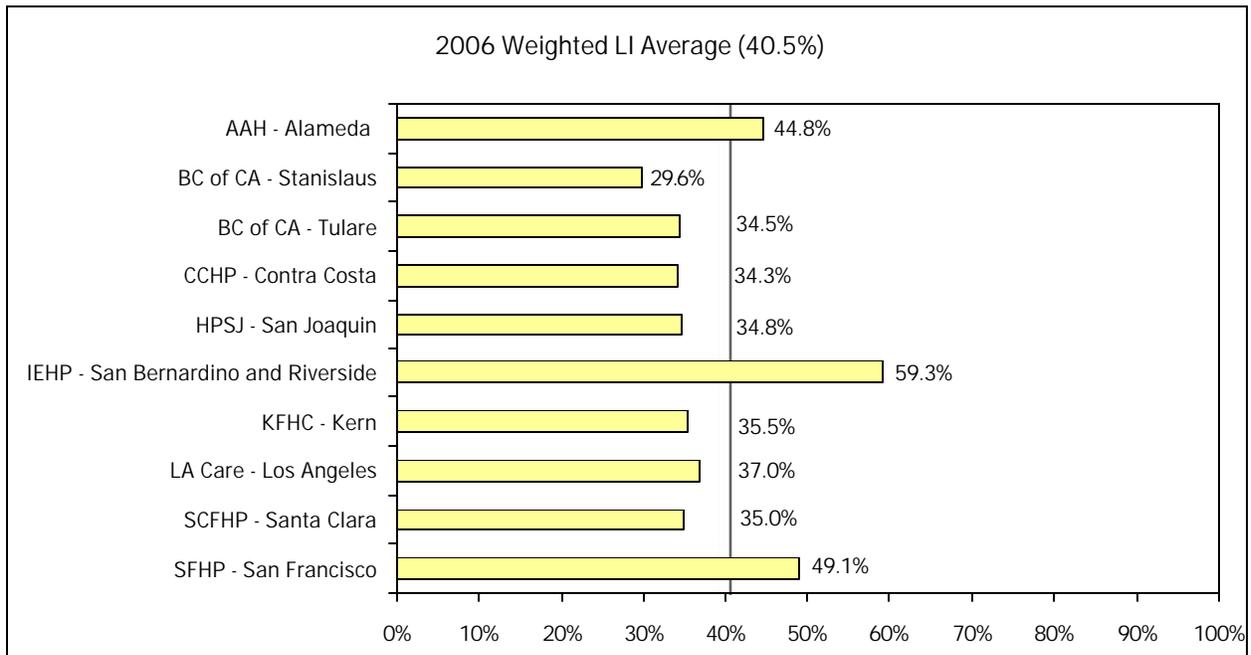


Figure 46. HEDIS 2006 Adolescent Well-Care Visits
Model Type Comparison of Weighted Averages

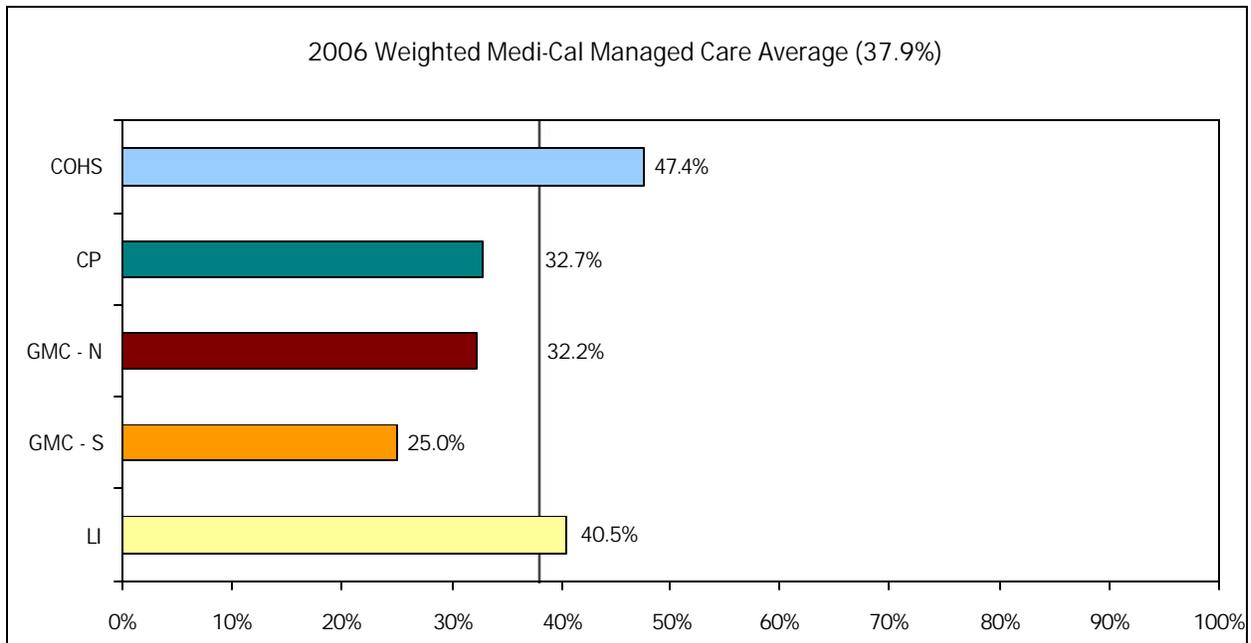


Table 22 presents the trends for Adolescent Well-Care Visits. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

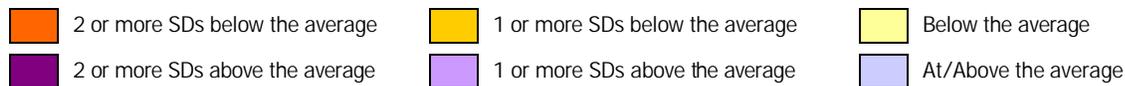


Table 22. Trends for Adolescent Well-Care Visits

Model Type	Medi-Cal Managed Care Plans	HEDIS 2000 Rate	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	35.2	40.3	43.3	43.1	40.1	55.1
	CCAH	33.8	23.6	26.3	30.2	40.4	41.6
	HPSM	27.3	24.5	27.8	30.1	32.2	32.2
	PHP of CA	27.3	35.6	30.3	23.8	32.5	43.5
	SBRHA	26.4	22.7	30.8	26.2	32.4	31.7
CP	BC of CA (CP)	23.5	30.1	36.6	37.2	38.3	39.0
	Health Net (CP)	28.7	25.3	25.1	24.7	31.1	29.1
	Molina Healthcare (CP)	31.4	29.4	39.1	45.3	43.1	40.7
GMCN	BC of CA (GMC-North)	26.9	26.3	27.1	29.6	38.2	30.1
	Health Net (GMC-North)	40.4	35.9	29.3	31.8	32.1	30.7
	Kaiser (GMC-North)	24.3	23.5	23.6	24.4	24.7	24.5
	Molina Healthcare (GMC-North)	-----	-----	34.4	39.5	45.6	46.3
	WHA	34.8	25.8	21.4	37.2	31.1	38.2
GMCS	BC of CA (GMC-South)	19.3	18.3	25.5	29.2	26.9	27.1
	CHG	29.4	29.4	32.6	31.9	29.7	24.6
	Health Net (GMC-South)	-----	24.5	24.9	24.1	23.8	27.5
	Kaiser (GMC-South)	50.2	17.9	25.0	23.6	24.4	24.4
	Sharp	24.9	28.0	21.2	30.7	-----	-----
	UCSD	-----	21.9	19.2	-----	-----	-----
	Universal	19.7	18.5	17.5	30.8	-----	-----
LI	AAH	34.5	32.9	40.0	37.5	45.5	44.8
	BC of CA (Stanislaus)	18.3	20.2	21.1	18.1	29.4	29.6
	BC of CA (Tulare)	-----	21.1	25.7	27.8	29.6	34.5
	CCHP	34.2	22.6	22.5	31.1	33.8	34.3
	HPSJ	40.3	37.3	31.1	38.0	38.4	34.8
	IEHP	35.9	31.5	36.3	44.0	52.2	59.3
	KFHC	32.4	27.1	26.3	25.5	37.2	35.5
	L.A. Care	17.4	16.6	16.1	37.8	36.7	37.0
	SFHP	30.4	35.6	29.4	38.4	45.1	49.1
SCFHP	31.5	32.6	33.8	33.6	33.1	35.0	
Medi-Cal Overall Average*		29.9	26.9	28.1	31.9	35.1	36.3

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Adolescent Well-Care Visits

There was a gradual increase in the Medi-Cal Managed Care average for the Adolescent Well-Care Visit measure between 2004 (31.9%) to 2006 (36.3%). In 2006, eight out of 27 plans had rates that exceeded 40%, including CalOptima (55.1%) and Inland Empire (59.3%) whose rates were the highest.

Plans with rates one or more standard deviations below the 2006 Medi-Cal Managed Care average were Kaiser (GMC North), Blue Cross of CA (GMC South), Community Health Group, and Kaiser (GMC South).

For HEDIS 2006, Medi-Cal managed care plans were required to report the Appropriate Treatment for Children with Upper Respiratory Infection indicator for the first time. In accordance with the CDHS policy of publicly reporting only aggregate data for first year measures, Figure 47 reports the Medi-Cal Managed Care average by model type only. The Medi-Cal overall average for the indicator is presented in Table 23. Plan specific data for all Appropriate Treatment for Children with Upper Respiratory Infection indicators will be published in the HEDIS 2007 report.

Figure 47. HEDIS 2006 Appropriate Treatment for Children With Upper Respiratory Infection Model Type Comparison of Weighted Averages

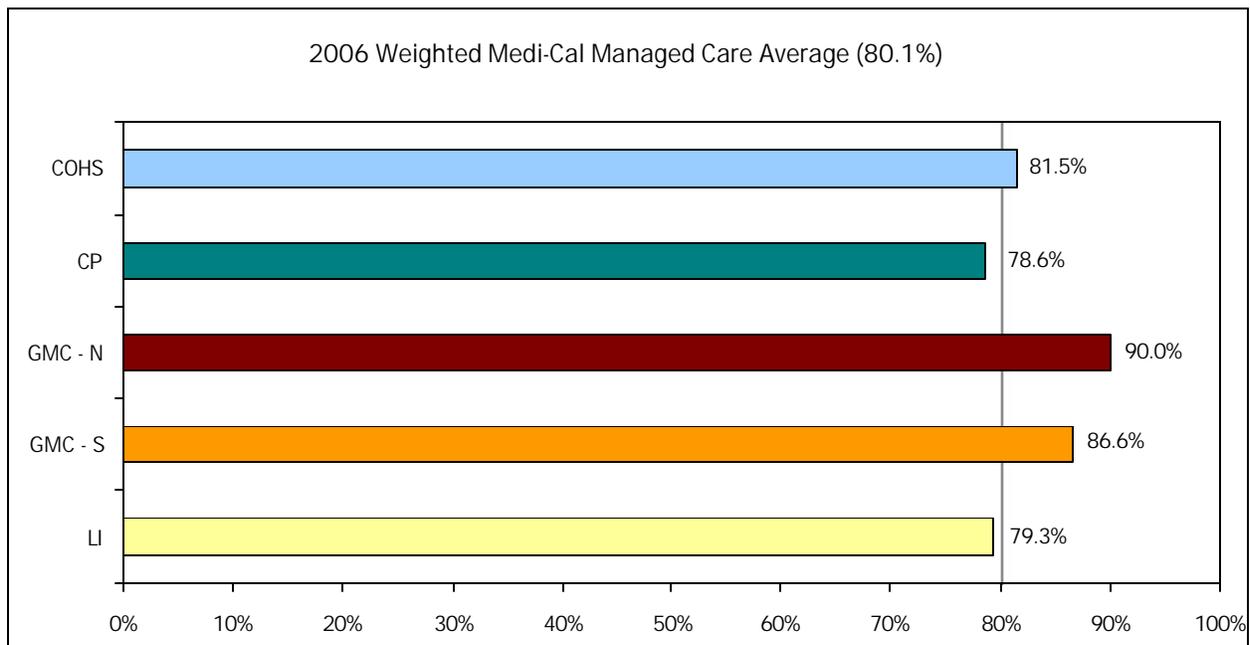


Table 23 presents the Medi-Cal Overall Average for Appropriate Treatment for Children with Upper Respiratory Infection.

Table 23. Appropriate Treatment for Children With Upper Respiratory Infection

Medi-Cal Managed Care Plans	HEDIS 2006 Rate
Medi-Cal Overall Average*	85.1%

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Figure 48. HEDIS 2006 Prenatal and Postpartum Care (Timeliness of Prenatal Care) – COHS

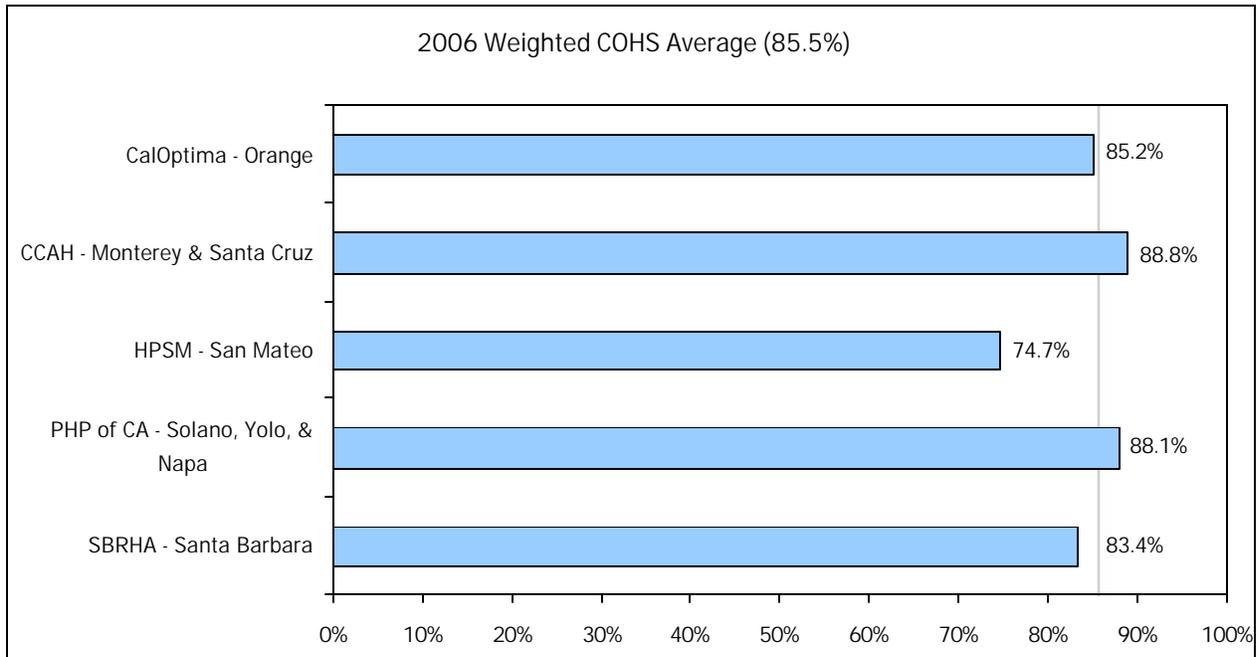


Figure 49. HEDIS 2006 Prenatal and Postpartum Care (Timeliness of Prenatal Care) – CP

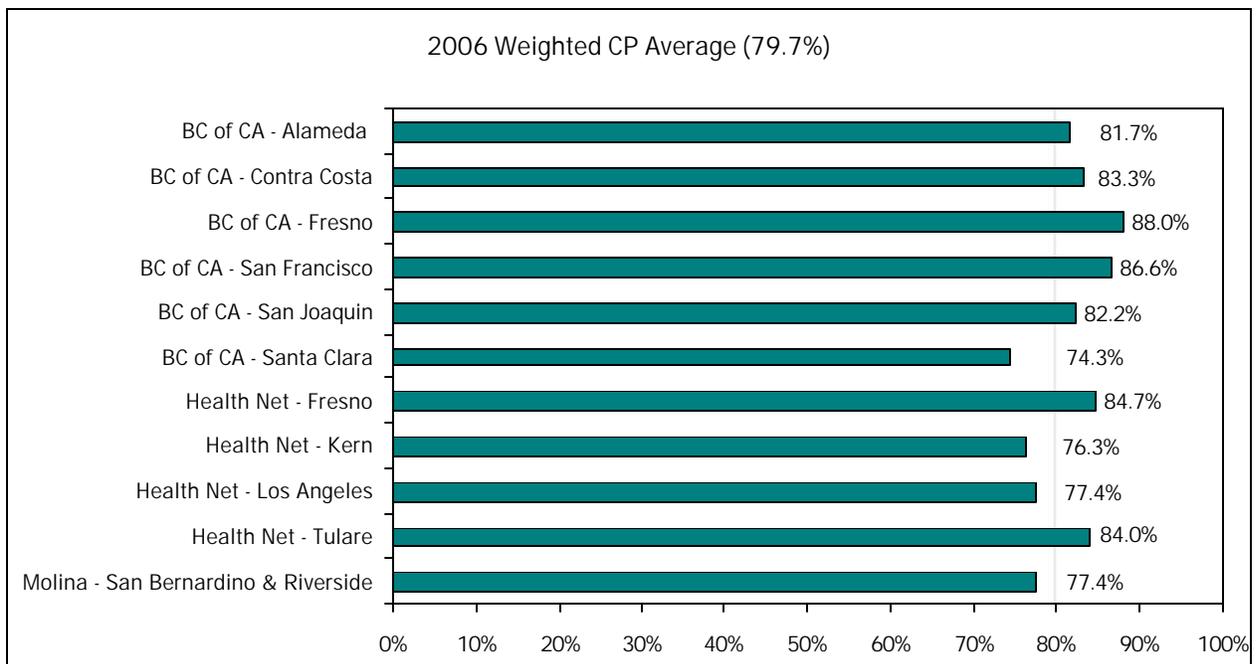


Figure 50. Prenatal and Postpartum Care (Timeliness of Prenatal Care) – GMC North

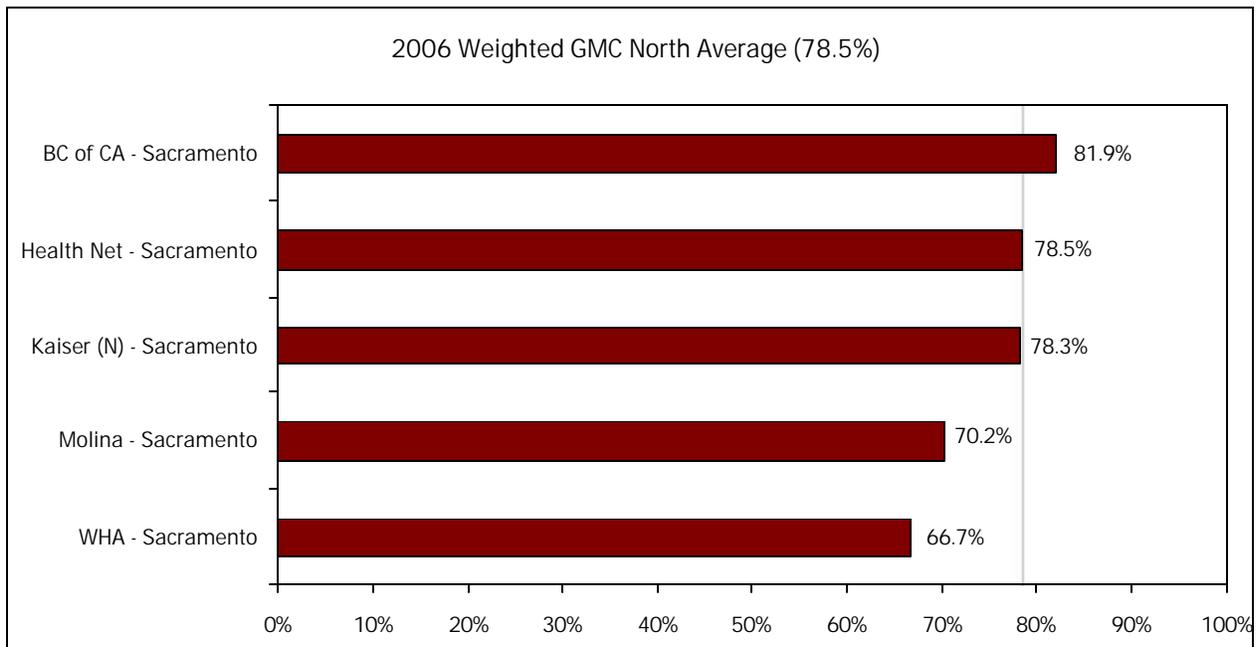


Figure 51. HEDIS 2006 Prenatal and Postpartum Care (Timeliness of Prenatal Care) – GMC South

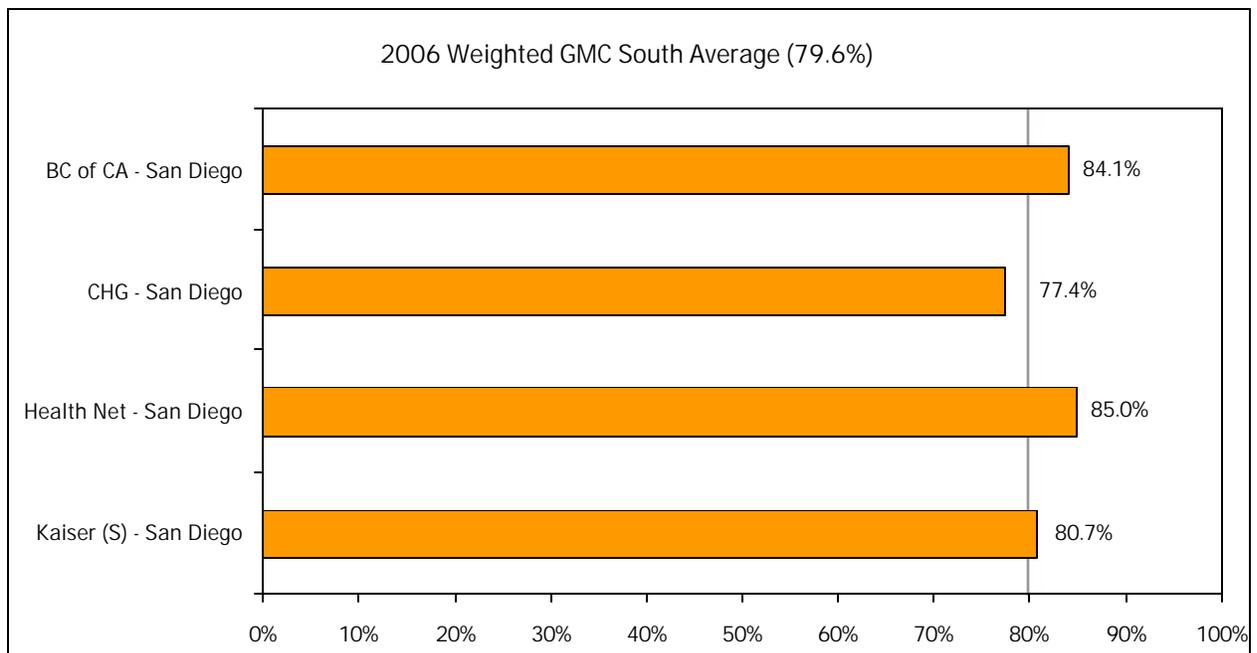


Figure 52. HEDIS 2006 Prenatal and Postpartum Care (Timeliness of Prenatal Care) – LI

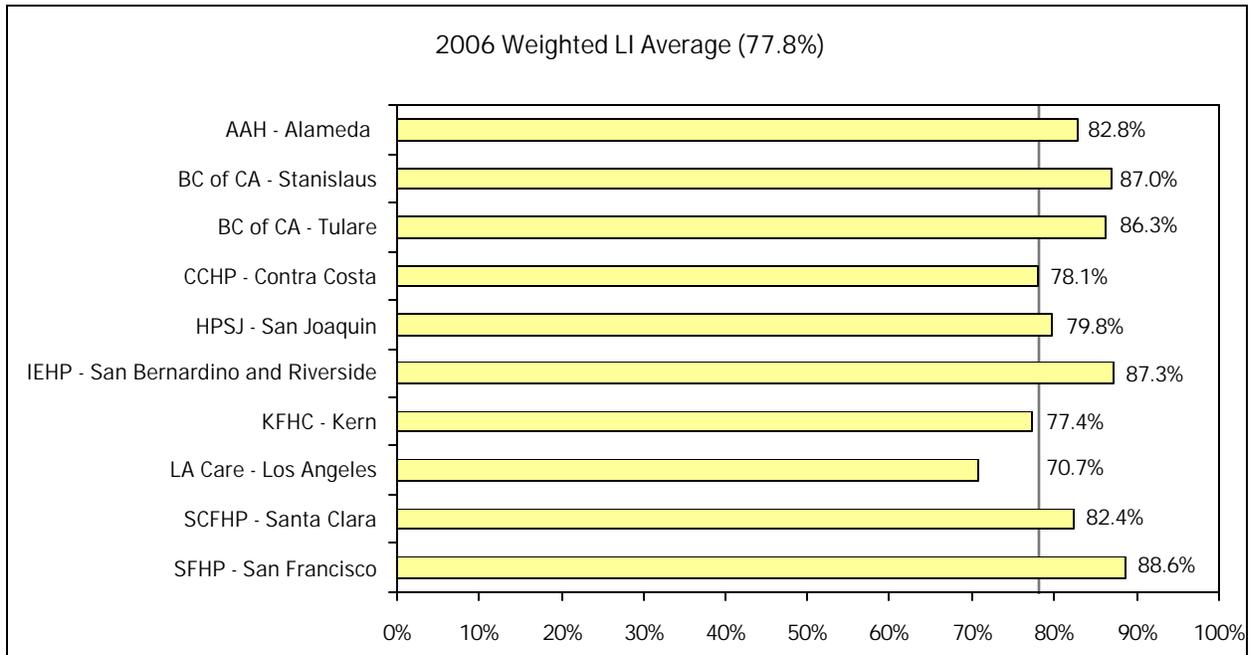


Figure 53. HEDIS 2006 Prenatal and Postpartum Care (Timeliness of Prenatal Care) – Model Type Comparison of Weighted Averages

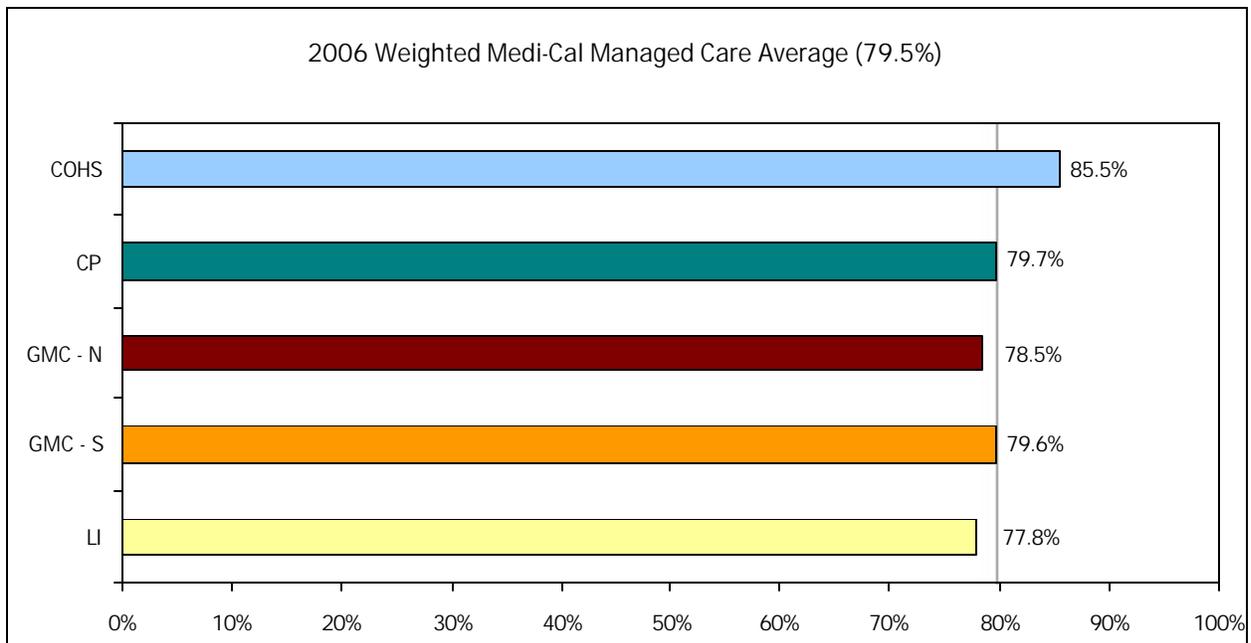


Table 24 presents the trends for Prenatal and Postpartum Care – Timeliness of Prenatal Care. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

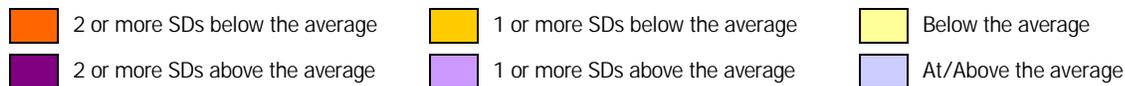


Table 24. Trends for Prenatal and Postpartum Care - Timeliness of Prenatal Care

Model Type	Medi-Cal Managed Care Plans	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	69.8	81.4	73.1	83.3	85.2
	CCAH	76.4	78.8	88.1	88.1	88.8
	HPSM	78.7	72.4	70.7	71.1	74.7
	PHP of CA	76.6	74.8	81.0	88.7	88.1
	SBRHA	88.3	88.2	89.8	83.5	83.4
CP	BC of CA (CP)	76.8	80.8	83.2	82.6	84.0
	Health Net (CP)	37.4	55.3	66.5	75.7	78.3
	Molina Healthcare (CP)	65.3	67.5	72.0	75.5	77.4
GMCN	BC of CA (GMC-North)	76.3	81.3	76.6	80.9	81.9
	Health Net (GMC-North)	34.9	63.9	77.1	77.3	78.5
	Kaiser (GMC-North)	70.8	73.0	76.8	76.7	78.3
	Molina Healthcare (GMC-North)	-----	64.5	71.8	71.5	70.2
	WHA	57.9	57.4	61.0	67.7	66.7
GMCS	BC of CA (GMC-South)	79.8	84.3	81.6	82.1	84.1
	CHG	69.6	67.6	77.6	72.0	77.4
	Health Net (GMC-South)	29.5	47.2	77.0	83.6	85.0
	Kaiser (GMC-South)	80.5	84.3	80.0	85.2	80.7
	Sharp	-----	61.6	78.2	-----	-----
	UCSD	81.3	74.2	-----	-----	-----
	Universal	70.8	67.5	79.1	-----	-----
LI	AAH	68.7	72.0	72.0	80.9	82.8
	BC of CA (Stanislaus)	78.7	81.7	80.5	82.3	87.0
	BC of CA (Tulare)	65.7	85.2	83.8	79.9	86.3
	CCHP	82.0	83.7	80.3	79.6	78.1
	HPSJ	65.0	75.9	69.0	79.3	79.8
	IEHP	72.7	71.1	81.0	85.9	87.3
	KFHC	75.9	71.5	80.5	77.0	77.4
	L.A. Care	58.7	69.9	73.5	73.9	70.7
	SFHP	74.2	73.0	76.9	84.2	88.6
	SCFHP	81.7	80.8	81.6	80.0	82.4
Medi-Cal Overall Average*		69.4	73.0	77.3	79.6	80.9

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Prenatal and Postpartum Care – Timeliness of Prenatal Care

The Medi-Cal Managed Care average increased from 69.4% in 2001 to 80.9% in 2006. Eight out of 27 plans rates were above 85%.

The Western Health Advantage rate (66.7%) was two standard deviations or more below the 2006 Medi-Cal Managed Care average.

Figure 54. HEDIS 2006 Prenatal and Postpartum Care (Postpartum Care) – COHS

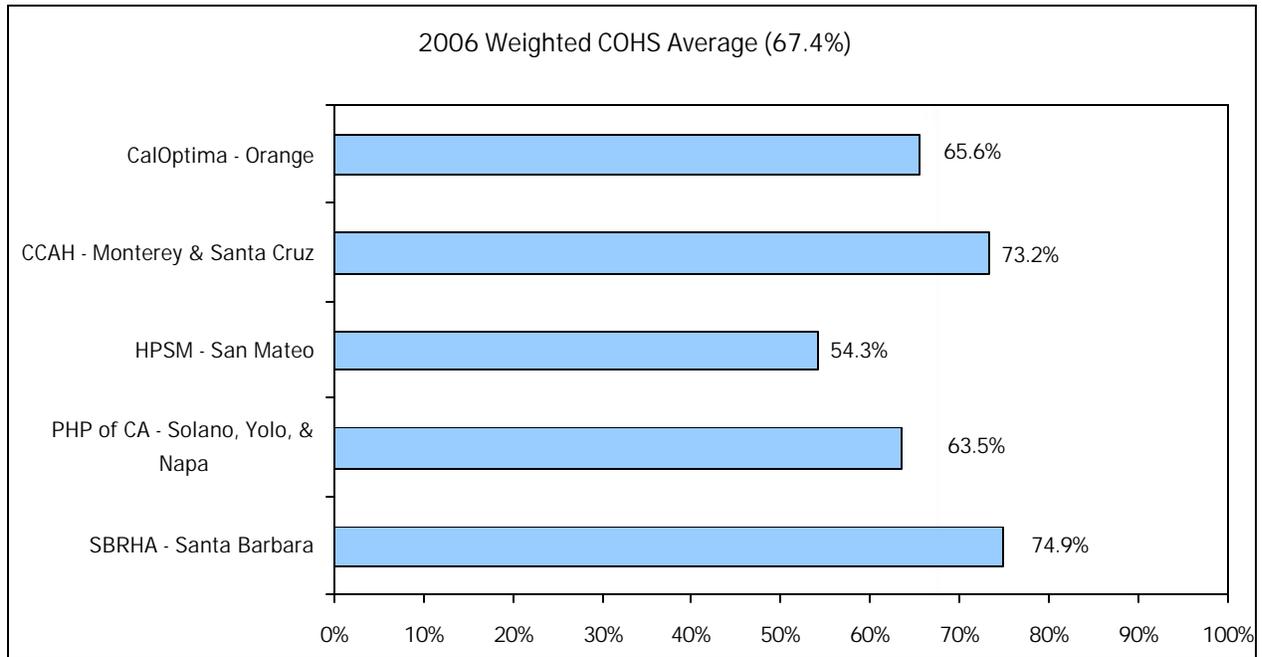


Figure 55. HEDIS 2006 Prenatal and Postpartum Care (Postpartum Care) – CP

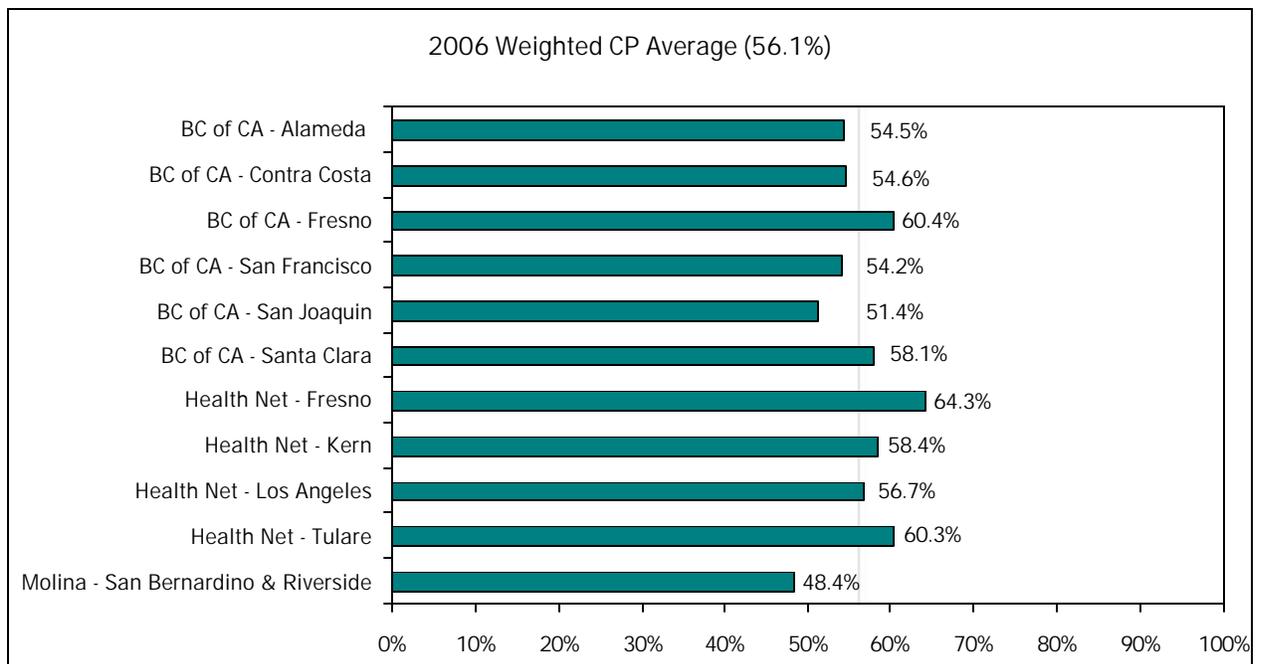


Figure 56. HEDIS 2006 Prenatal and Postpartum Care (Postpartum Care) – GMC North

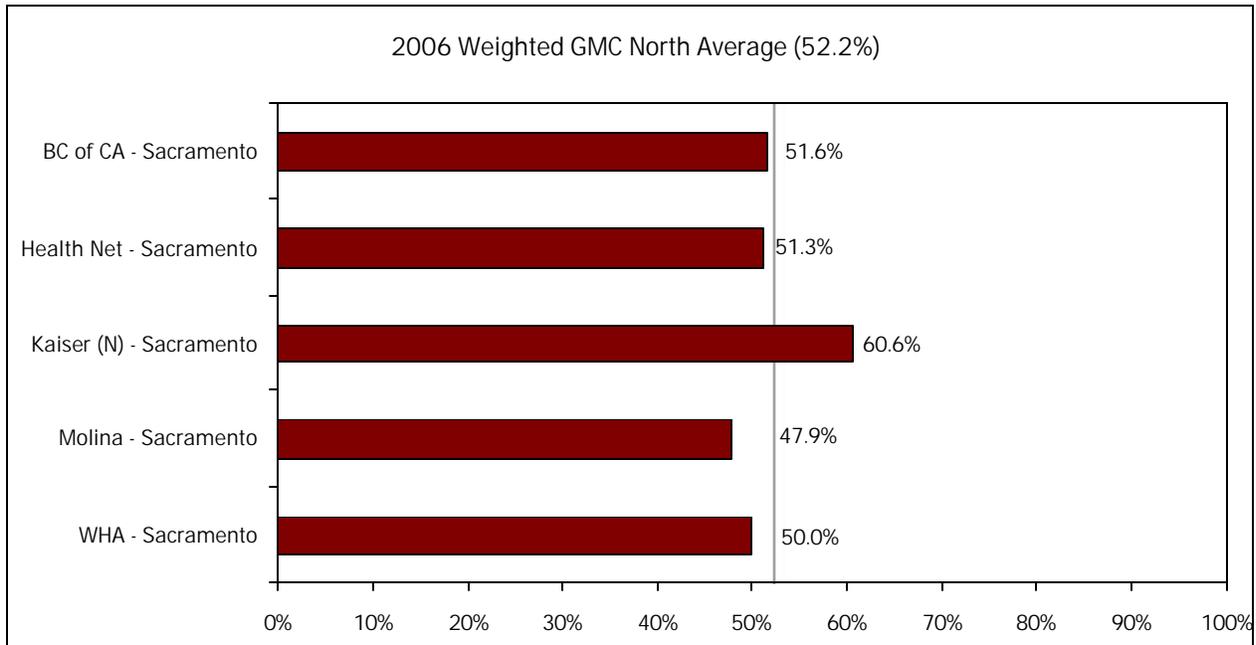


Figure 57. HEDIS 2006 Prenatal and Postpartum Care (Postpartum Care) – GMC South

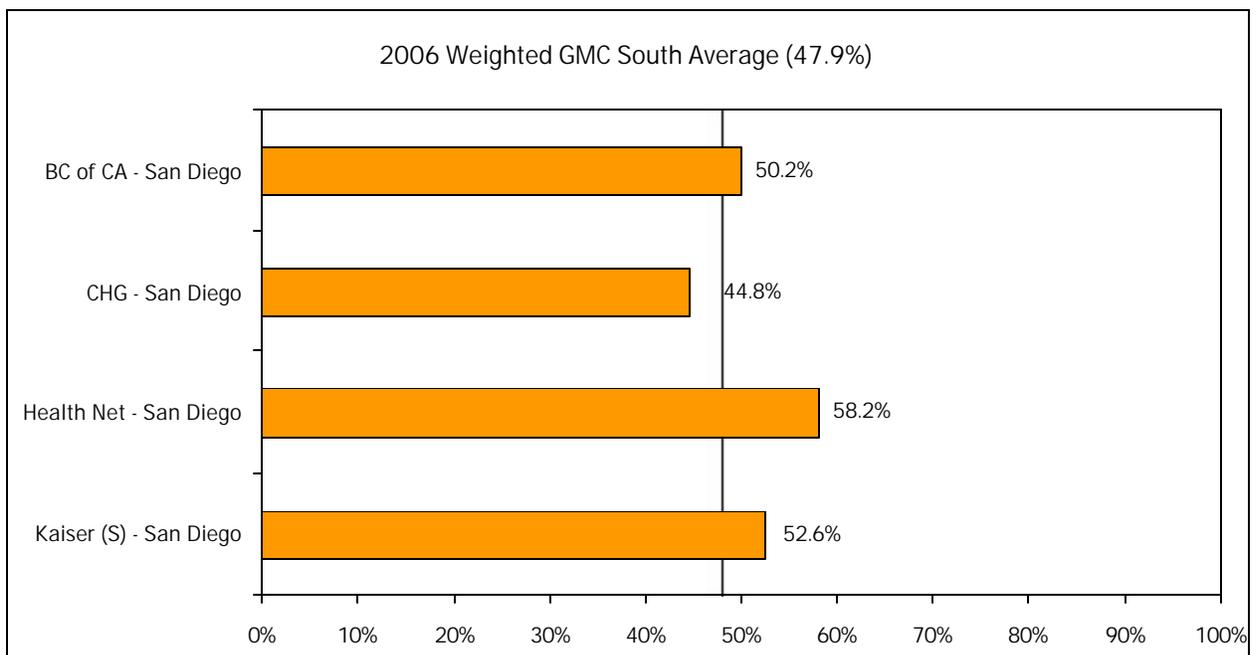


Figure 58. HEDIS 2006 Prenatal and Postpartum Care (Postpartum Care) – LI

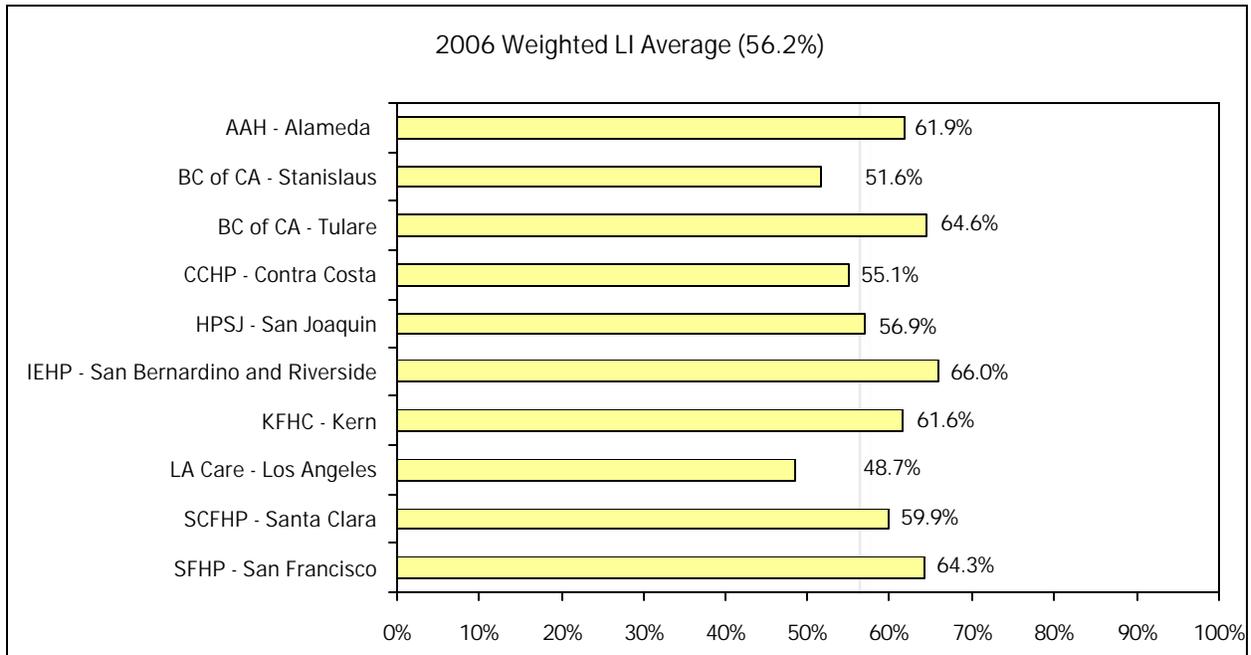


Figure 59. HEDIS 2006 Prenatal and Postpartum Care (Postpartum Care) – Model Type Comparison of Weighted Averages

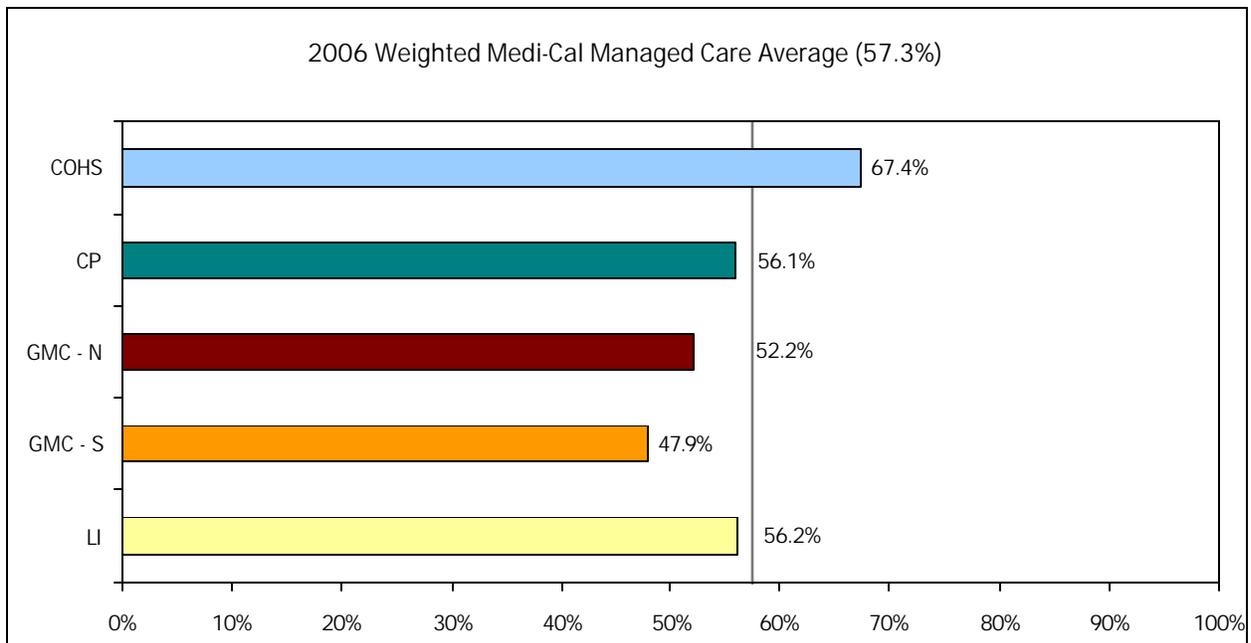


Table 25 presents the trends for Prenatal and Postpartum Care – Postpartum Care. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

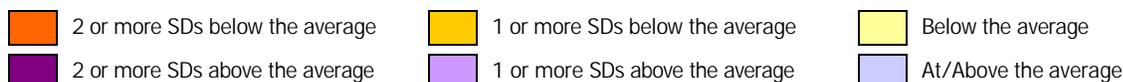


Table 25. Trends for Prenatal and Postpartum Care - Postpartum Care

Model Type	Medi-Cal Managed Care Plans	HEDIS 2000 Rate	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	44.5	52.7	63.3	63.8	62.3	65.6
	CCAH	57.8	55.2	58.4	66.7	69.8	73.2
	HPSM	63.7	65.7	64.9	55.7	55.4	54.3
	PHP of CA	53.2	56.8	62.2	64.3	69.5	63.5
	SBRHA	71.4	74.9	76.7	78.4	73.9	74.9
CP	BC of CA (CP)	54.8	53.4	60.0	58.3	59.1	57.2
	Health Net (CP)	42.6	28.2	36.4	50.4	51.0	57.6
	Molina Healthcare (CP)	15.3	26.2	34.4	51.9	50.8	48.4
GMCN	BC of CA (GMC-North)	56.3	55.5	57.9	55.3	56.7	51.6
	Health Net (GMC-North)	46.6	22.1	47.8	53.8	53.9	51.3
	Kaiser (GMC-North)	53.6	56.0	59.3	59.1	55.4	60.6
	Molina Healthcare (GMC-North)	-----	-----	39.2	43.8	47.6	47.9
	WHA	44.2	42.9	43.4	39.5	44.1	50.0
GMCS	BC of CA (GMC-South)	41.4	48.9	53.3	53.2	53.5	50.2
	CHG	34.8	46.7	46.0	50.6	44.3	44.8
	Health Net (GMC-South)	-----	15.2	28.3	52.1	63.8	58.2
	Kaiser (GMC-South)	67.3	57.6	57.4	53.9	60.6	52.6
	Sharp	20.2	34.2	56.1	58.2	-----	-----
	UCSD	-----	66.4	53.0	-----	-----	-----
	Universal	44.6	29.9	41.5	45.4	-----	-----
LI	AAH	42.9	40.9	59.3	55.7	61.3	61.9
	BC of CA (Stanislaus)	51.4	50.9	50.9	54.1	57.6	51.6
	BC of CA (Tulare)	49.9	47.5	63.2	63.7	62.7	64.6
	CCHP	33.0	45.7	48.0	50.9	53.0	55.1
	HPSJ	44.1	38.3	52.5	60.2	57.2	56.9
	IEHP	40.7	50.0	57.8	58.4	65.7	66.0
	KFHC	54.5	55.1	56.0	56.8	64.6	61.6
	L.A. Care	41.2	45.2	45.8	49.6	52.8	48.7
	SFHP	44.5	48.3	56.1	49.9	58.5	64.3
	SCFHP	56.3	53.1	56.6	58.4	62.4	59.9
Medi-Cal Overall Average*		47.1	47	52.9	55.6	58.1	57.5

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Prenatal and Postpartum Care- Postpartum Care

Both Central Coast Alliance (73.2%) and Santa Barbara Regional Health Authority (74.9%) exceeded the Medi-Cal Managed Care average by more than 15 percentage points.

Molina Healthcare (GMC North) and Community Health Group fell one standard deviation below the Medi-Cal Managed Care average in both 2005 and 2006.

The 2006 rates for Molina Healthcare (CP), Community Health Group, and L.A. Care also fell one standard deviation below the Medi-Cal Managed Care average.

Figure 60. HEDIS 2006 Chlamydia Screening in Women – COHS

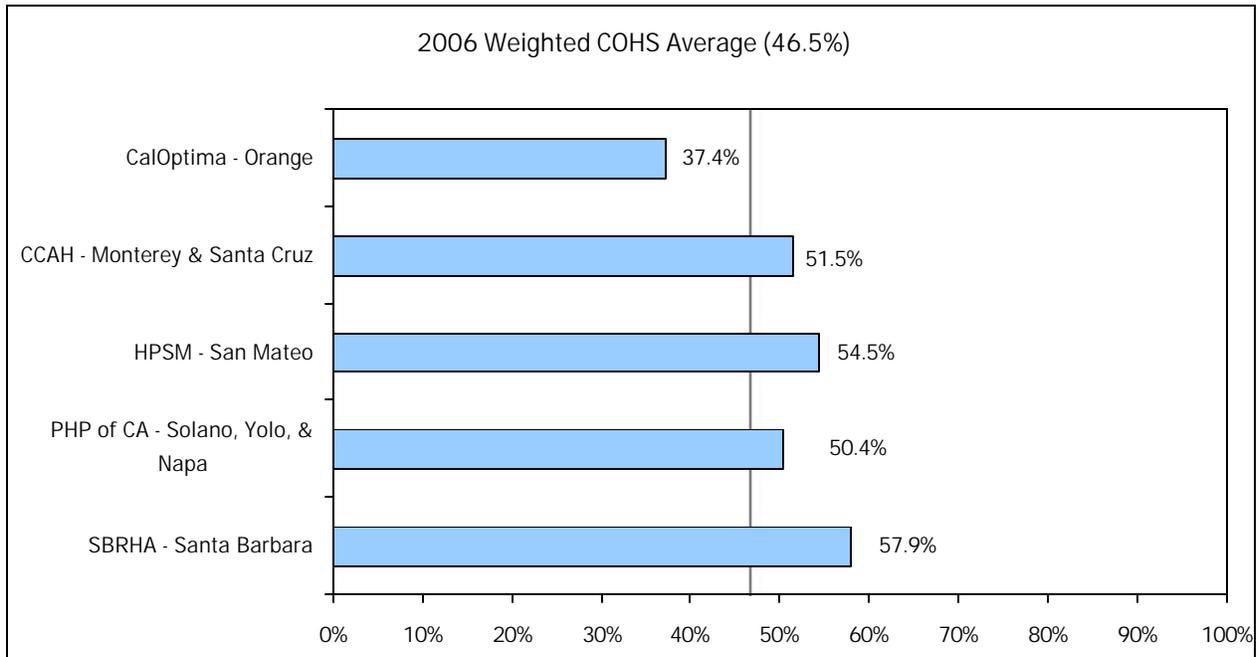


Figure 61. HEDIS 2006 Chlamydia Screening in Women – CP

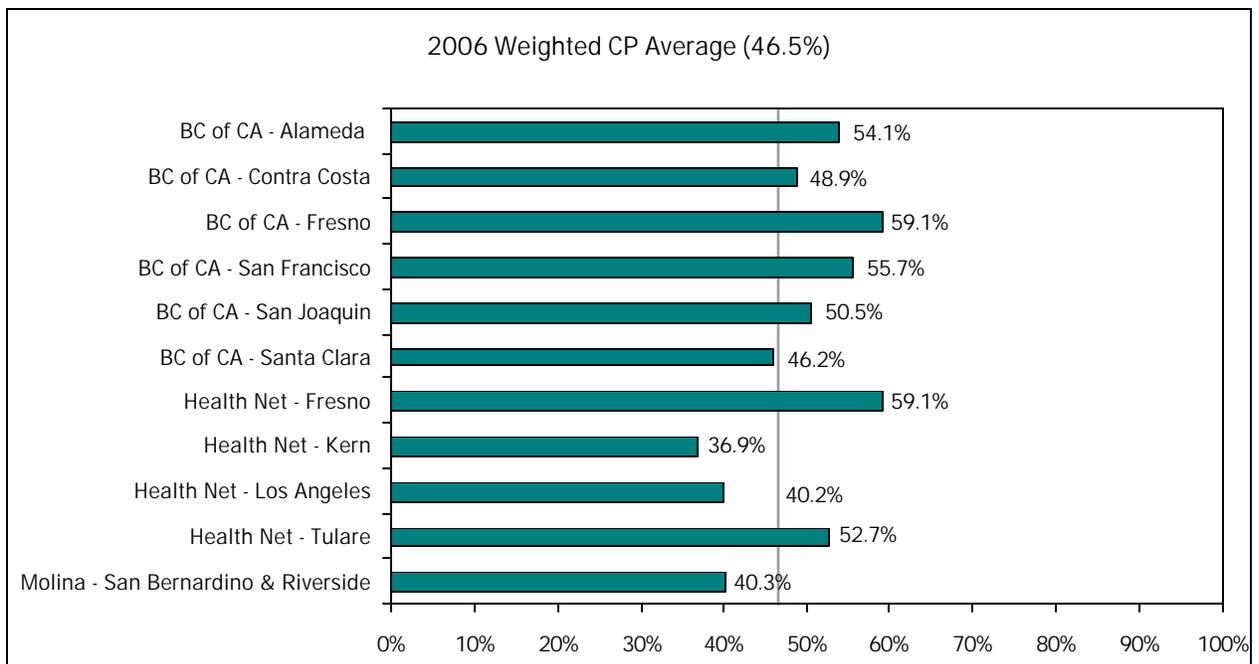


Figure 62. HEDIS 2006 Chlamydia Screening in Women – GMC North

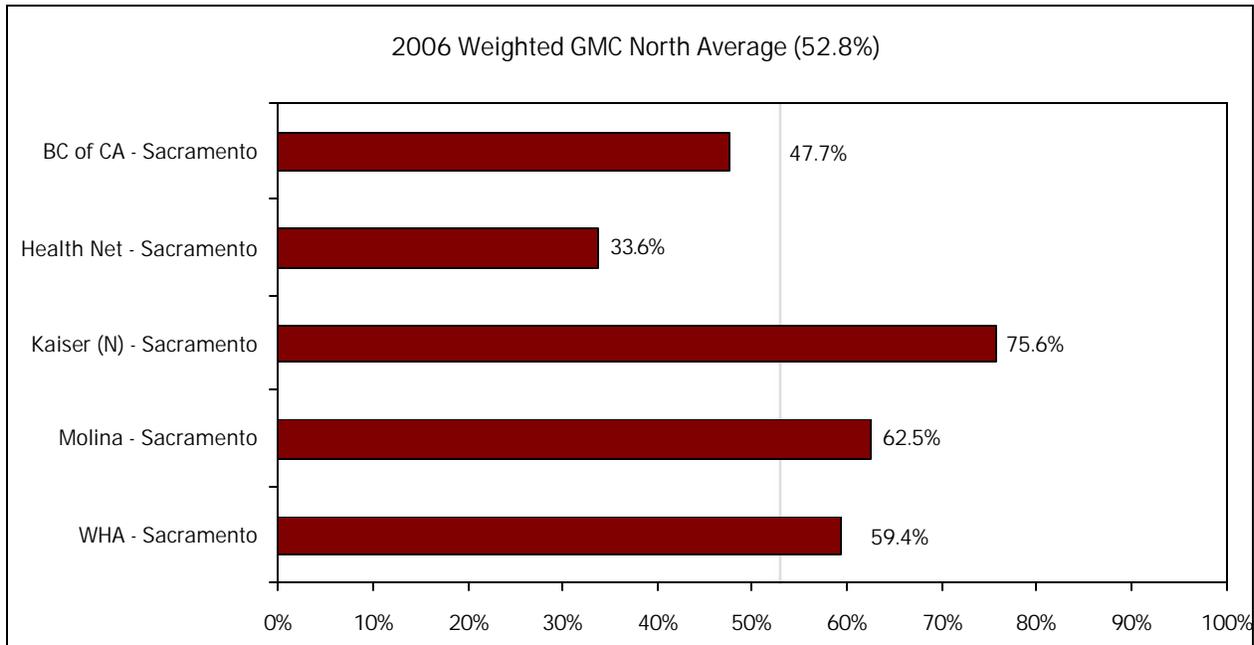


Figure 63. HEDIS 2006 Chlamydia Screening in Women – GMC South

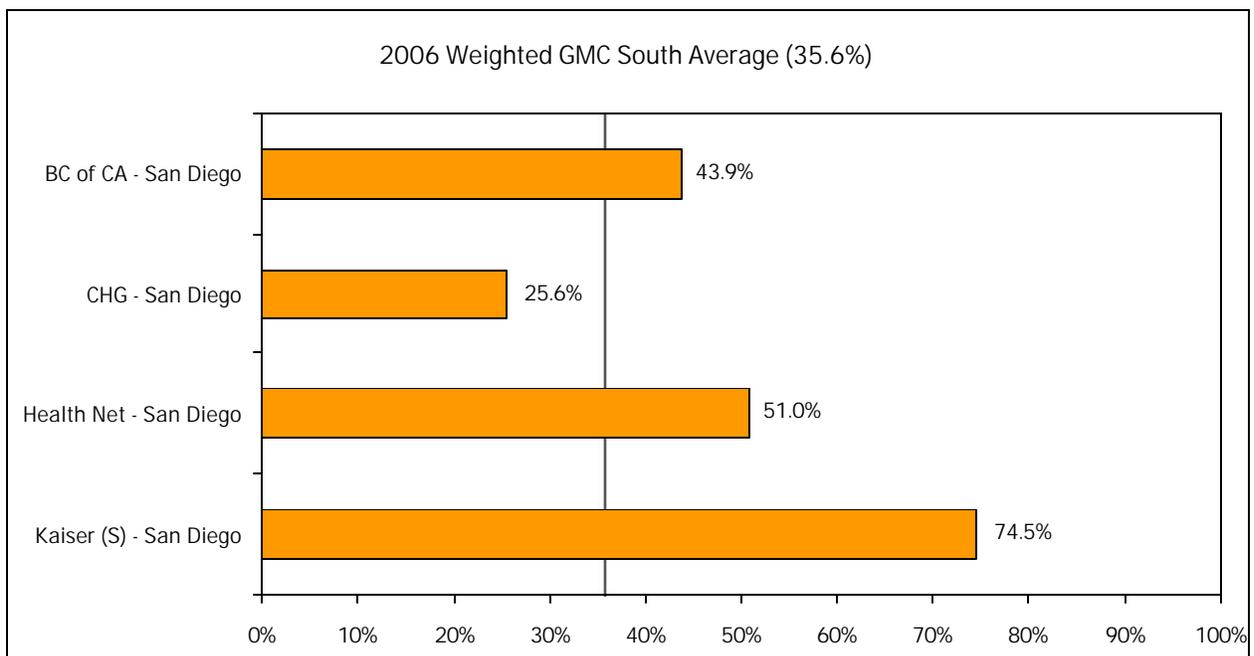


Figure 64. HEDIS 2006 Chlamydia Screening in Women – LI

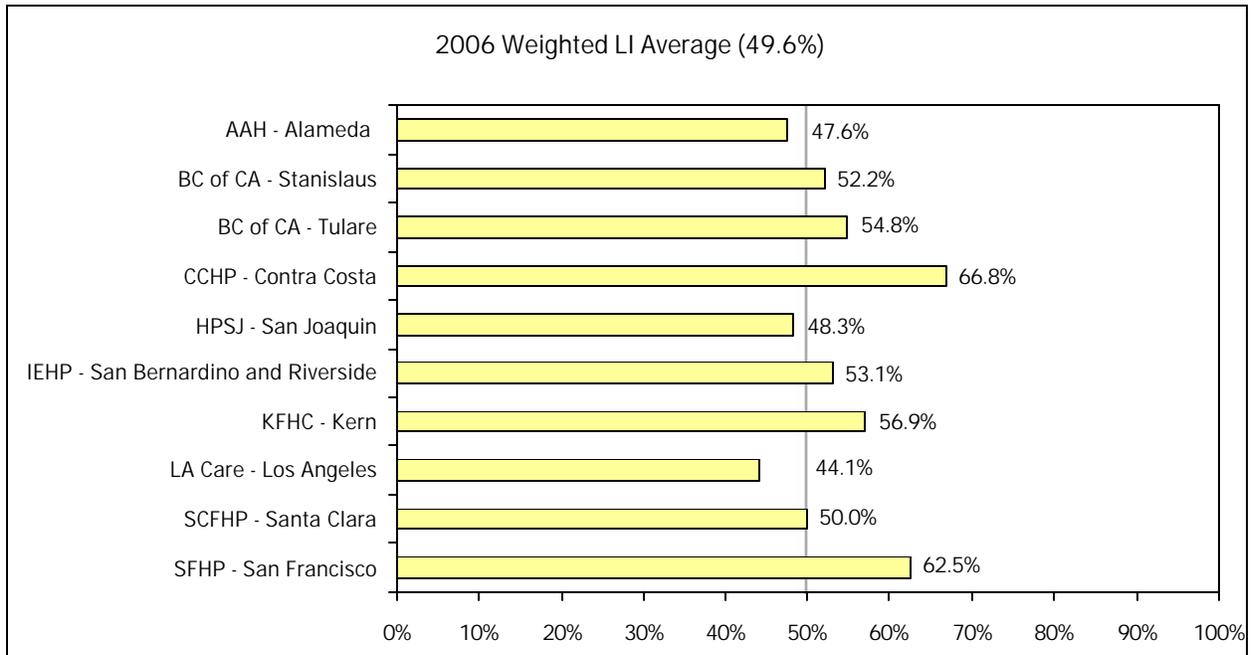


Figure 65. HEDIS 2006 Chlamydia Screening in Women – Model Type Comparison of Weighted Averages

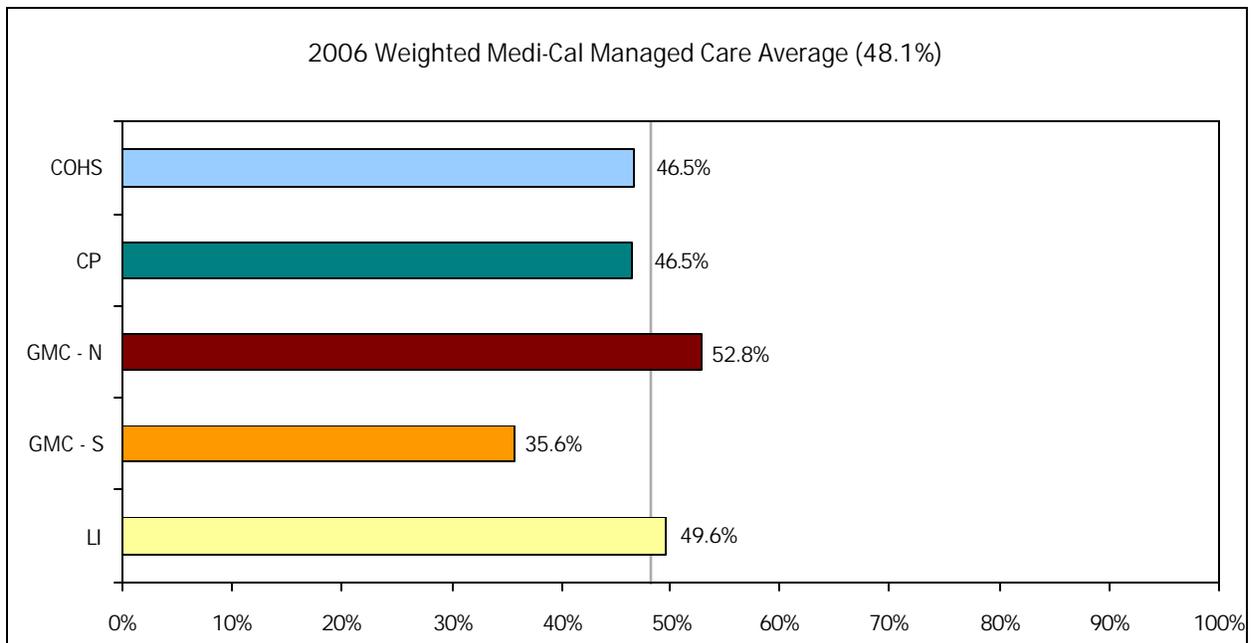


Table 26 presents the trends for Chlamydia Screening in Women. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

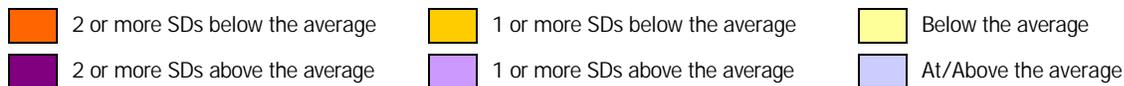


Table 26. Trends for Chlamydia Screening in Women

Model Type	Medi-Cal Managed Care Plans	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	28.9	32.5	37.4
	CCAH	48.1	49.4	51.5
	HPSM	49.6	55.2	54.5
	PHP of CA	27.3	38.4	50.4
	SBRHA	53.1	48.1	57.9
CP	BC of CA (CP)	49.1	56.5	56.0
	Health Net (CP)	38.2	44.9	41.6
	Molina Healthcare (CP)	30.0	31.0	40.3
GMCN	BC of CA (GMC-North)	31.7	38.6	47.7
	Health Net (GMC-North)	26.4	30.3	33.6
	Kaiser (GMC-North)	68.9	73.6	75.6
	Molina Healthcare (GMC-North)	53.0	53.3	62.5
	WHA	58.7	58.5	59.4
GMCS	BC of CA (GMC-South)	46.4	48.0	43.9
	CHG	39.0	36.2	25.6
	Health Net (GMC-South)	38.3	45.0	51.0
	Kaiser (GMC-South)	67.2	73.6	74.5
	Sharp	45.0	----	----
	Universal	44.2	----	----
LI	AAH	48.6	55.0	47.6
	BC of CA (Stanislaus)	40.3	53.3	52.2
	BC of CA (Tulare)	53.9	60.7	54.8
	CCHP	37.5	48.8	66.8
	HPSJ	44.9	42.3	48.3
	IEHP	30.2	42.6	53.1
	KFHC	38.9	49.8	56.9
	L.A. Care	32.6	33.4	44.1
	SFHP	45.9	53.5	62.5
	SCFHP	34.9	42.8	50.0
Medi-Cal Overall Average*		43.1	48.0	51.8

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for the year evaluated.

Chlamydia Screening

The Medi-Cal Managed Care average increased 8.7 percentage points from 43.1% in 2004 to 51.8% in 2006. Kaiser (GMC-North) and Kaiser (GMC-South) rates were the highest at 75.6 and 74.6, respectively.

Community Health Group had the lowest rate with 25.6% and greater than two standard deviations below the Medi-Cal Managed Care average.

Figure 66. HEDIS 2006 Cervical Cancer Screening – COHS

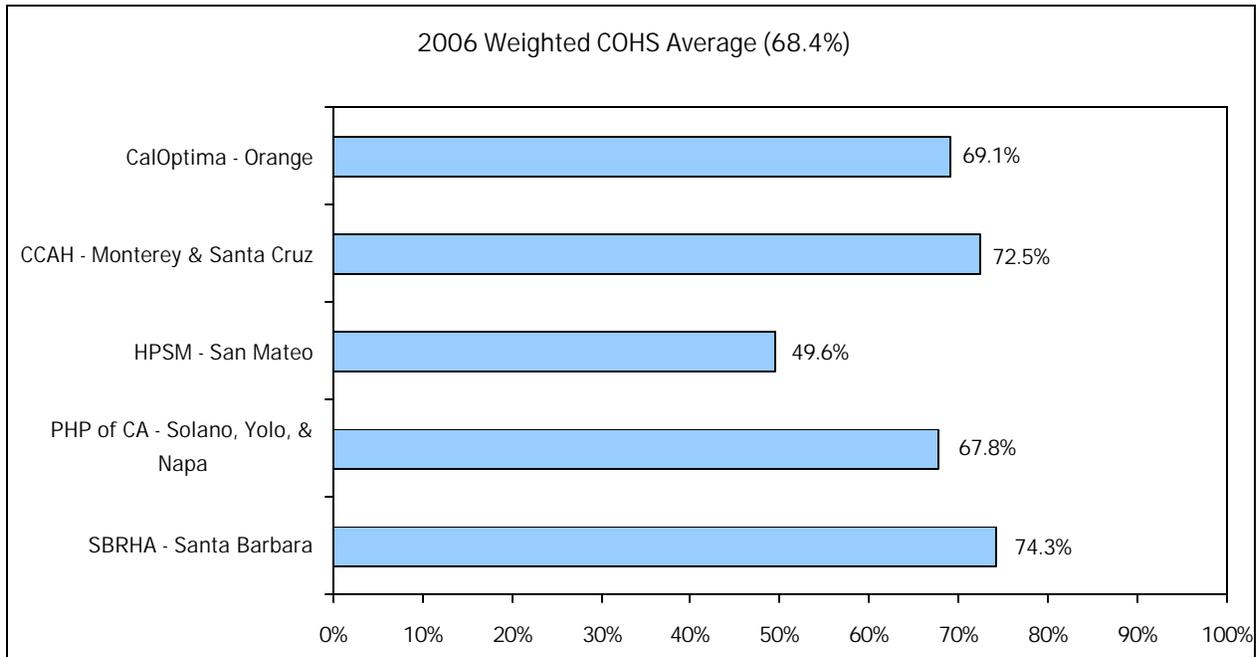


Figure 67. HEDIS 2006 Cervical Cancer Screening – CP

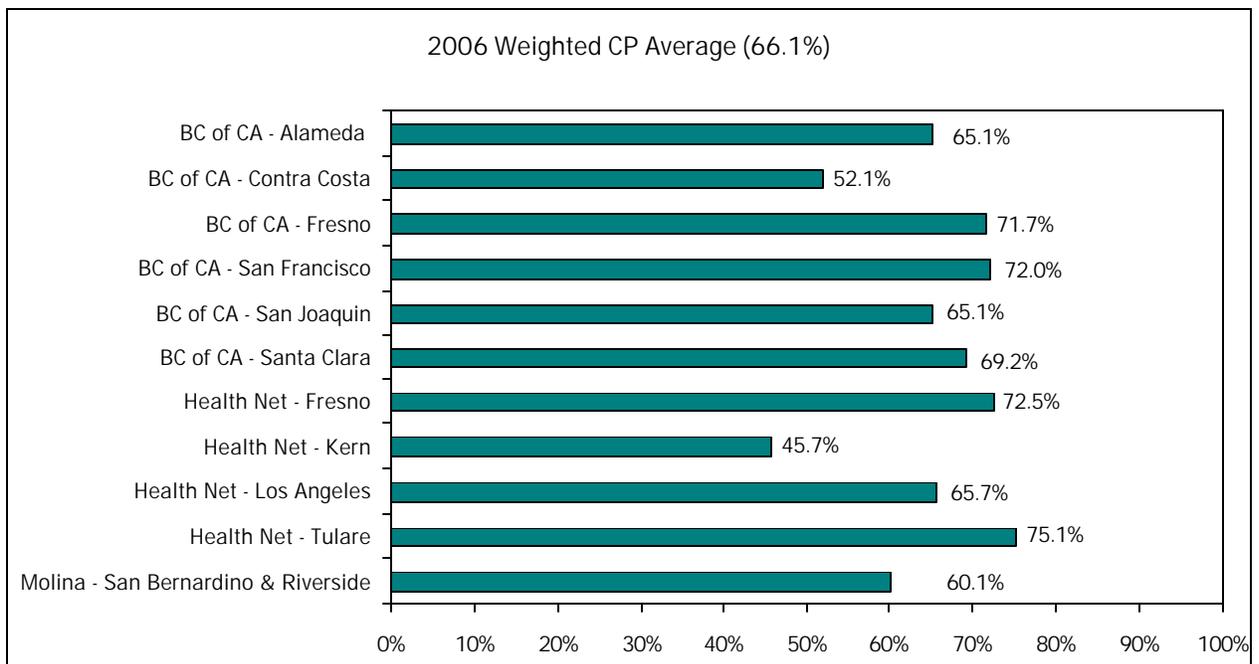


Figure 68. HEDIS 2006 Cervical Cancer Screening – GMC North

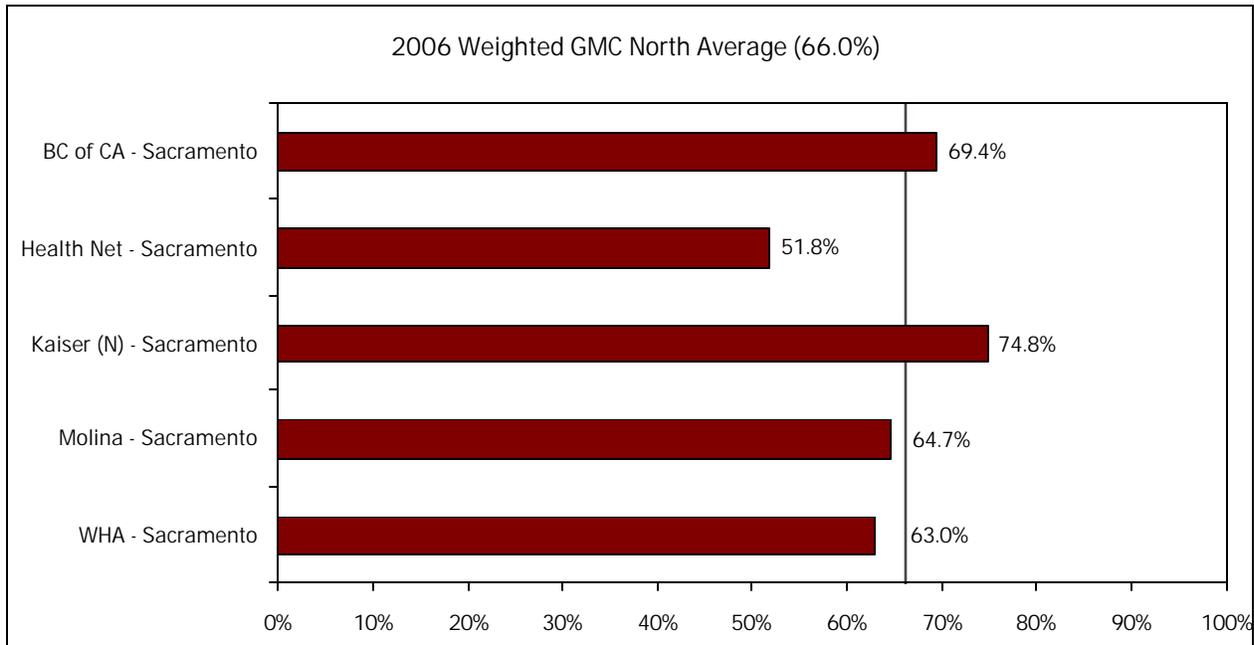


Figure 69. Cervical Cancer Screening – GMC South

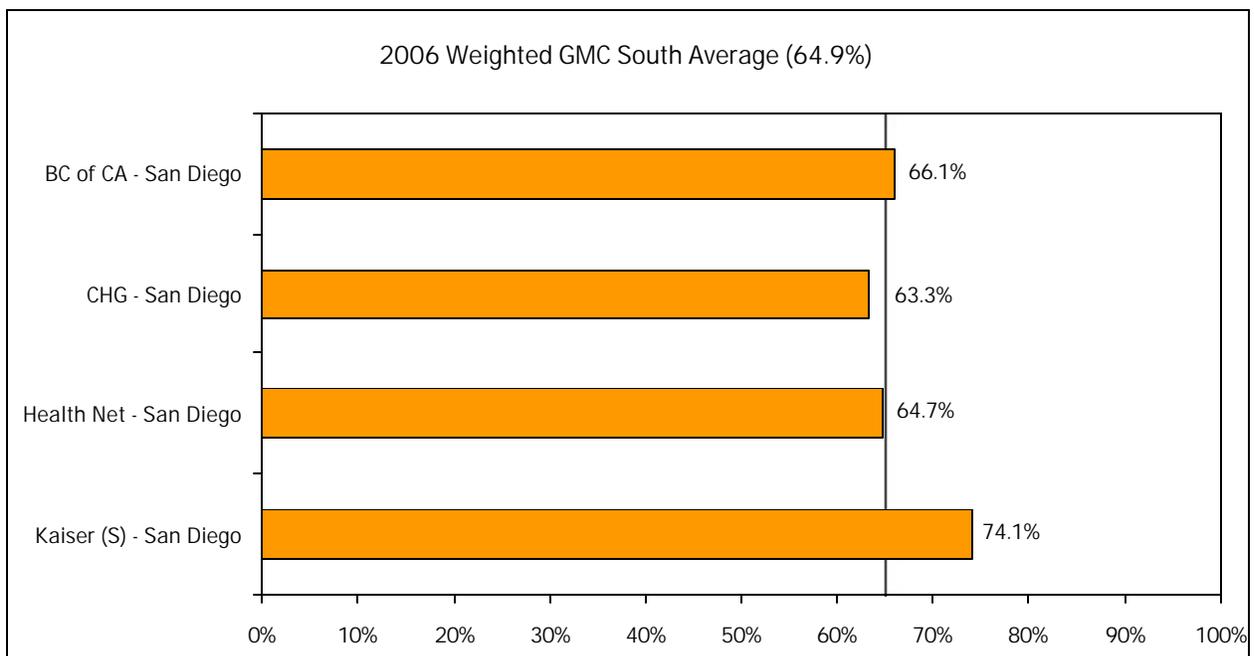


Figure 70. HEDIS 2006 Cervical Cancer Screening – LI

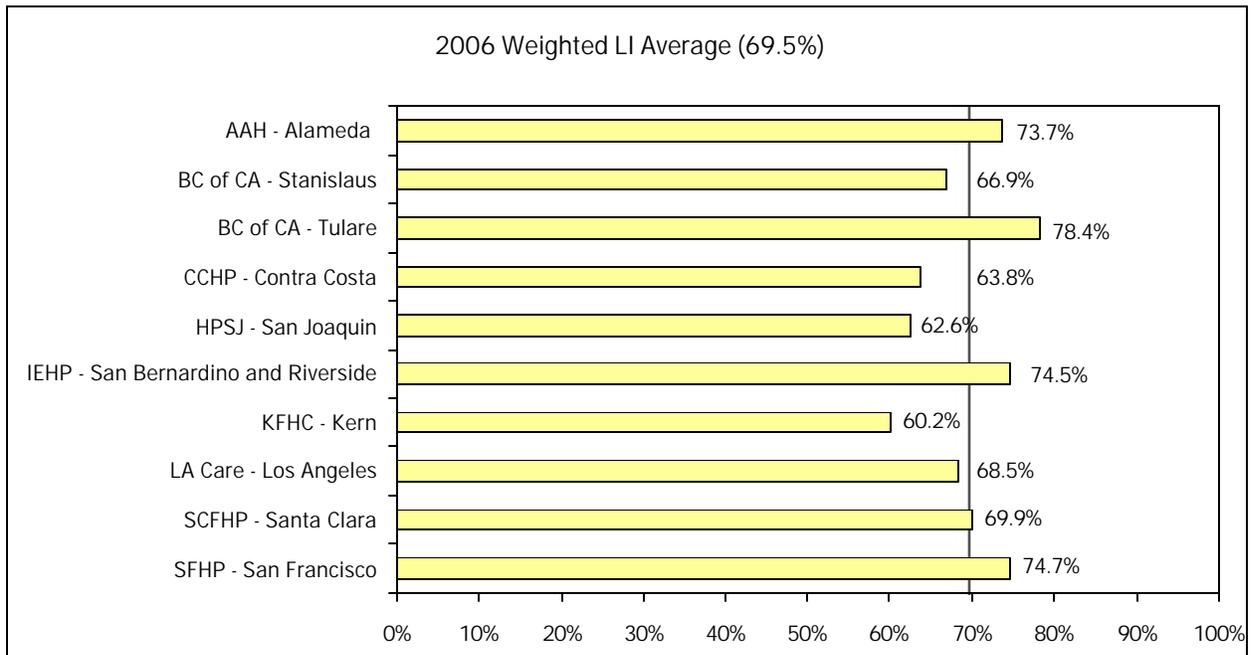


Figure 71. HEDIS 2006 Cervical Cancer Screening – Model Type Comparison of Weighted Averages

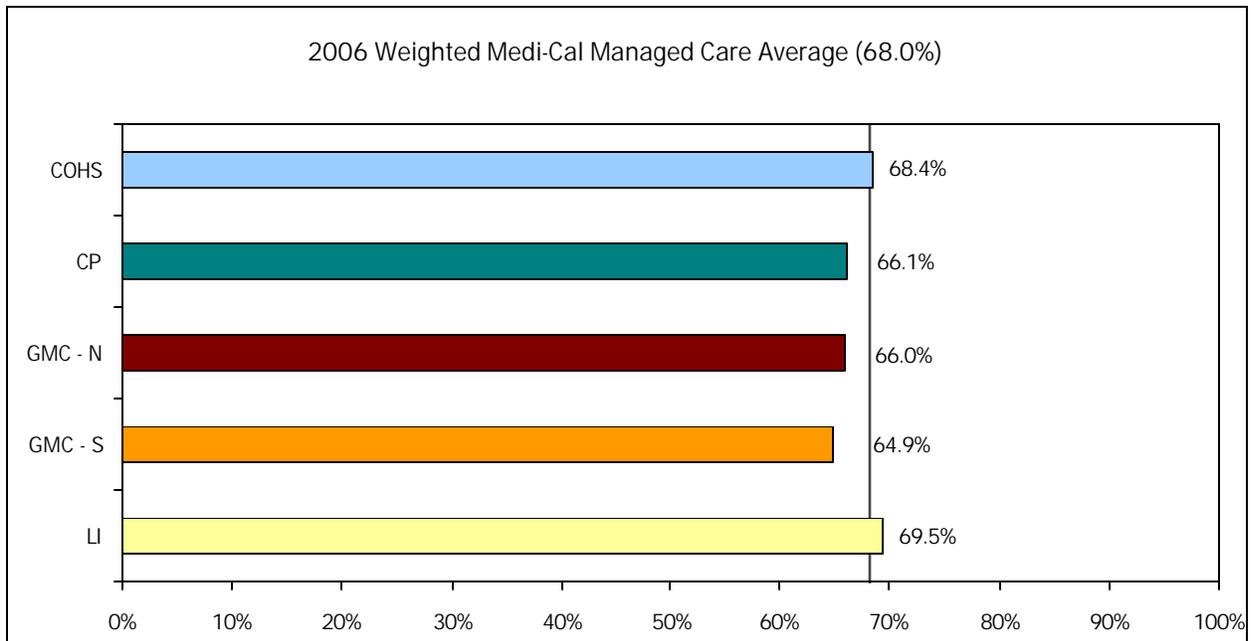


Table 27 presents the trends for Cervical Cancer Screening. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

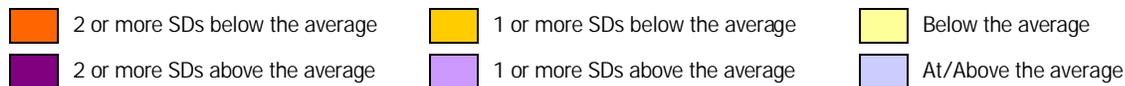


Table 27. Trends for Cervical Cancer Screening

Model Type	Medi-Cal Managed Care Plans	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	59.3	64.1	69.1
	CCAH	65.2	70.6	72.5
	HPSM	45	50.4	49.6
	PHP of CA	53.6	68.2	67.8
	SBRHA	64.6	74.5	74.3
CP	BC of CA (CP)	69.5	72.2	69.4
	Health Net (CP)	51.9	62.7	65.3
	Molina Healthcare (CP)	60.9	62.9	60.1
GMCN	BC of CA (GMC-North)	69	68.7	69.4
	Health Net (GMC-North)	36.1	49.2	51.8
	Kaiser (GMC-North)	74.2	75.8	74.8
	Molina Healthcare (GMC-North)	61.3	66.5	64.7
	WHA	58.2	68.1	63.0
GMCS	BC of CA (GMC-South)	66.1	66.7	66.1
	CHG	66.4	64	63.3
	Health Net (GMC-South)	53.1	60.5	64.7
	Kaiser (GMC-South)	75.5	75.7	74.1
	Sharp	61.6	-----	-----
	Universal	56.1	-----	-----
LI	AAH	65	69	73.7
	BC of CA (Stanislaus)	64.4	60.5	66.9
	BC of CA (Tulare)	76.8	76.6	78.4
	CCHP	68.6	63.9	63.8
	HPSJ	44.9	61.9	62.6
	IEHP	71.1	69.7	74.5
	KFHC	57.3	57.7	60.2
	L.A. Care	60.2	65.6	68.5
	SFHP	61	60.3	74.7
SCFHP	68.4	72.3	69.9	
Medi-Cal Overall Average*		61.6	65.9	67.2

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for the year evaluated.

Cervical Cancer Screening

The Cervical Cancer Screening Medi-Cal Managed Care average increased from 61.6% in 2004 to 67.2% in 2006. Rates for 10 plans were above the Medi-Cal Managed Care average consistently from 2004 through 2006.

Health Plan of San Mateo and Health Net (GMC-North) each were greater than two standard deviations below the Medi-Cal Managed Care average in both 2005 and 2006.

Figure 72. HEDIS 2006 Breast Cancer Screening– COHS

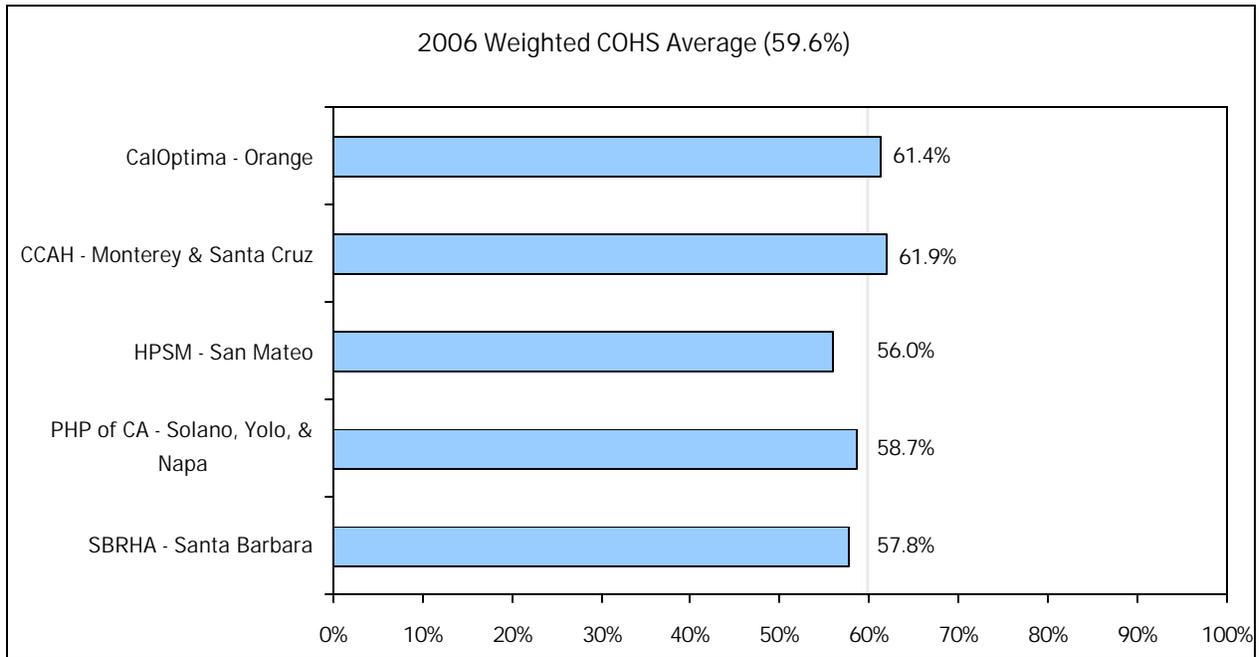
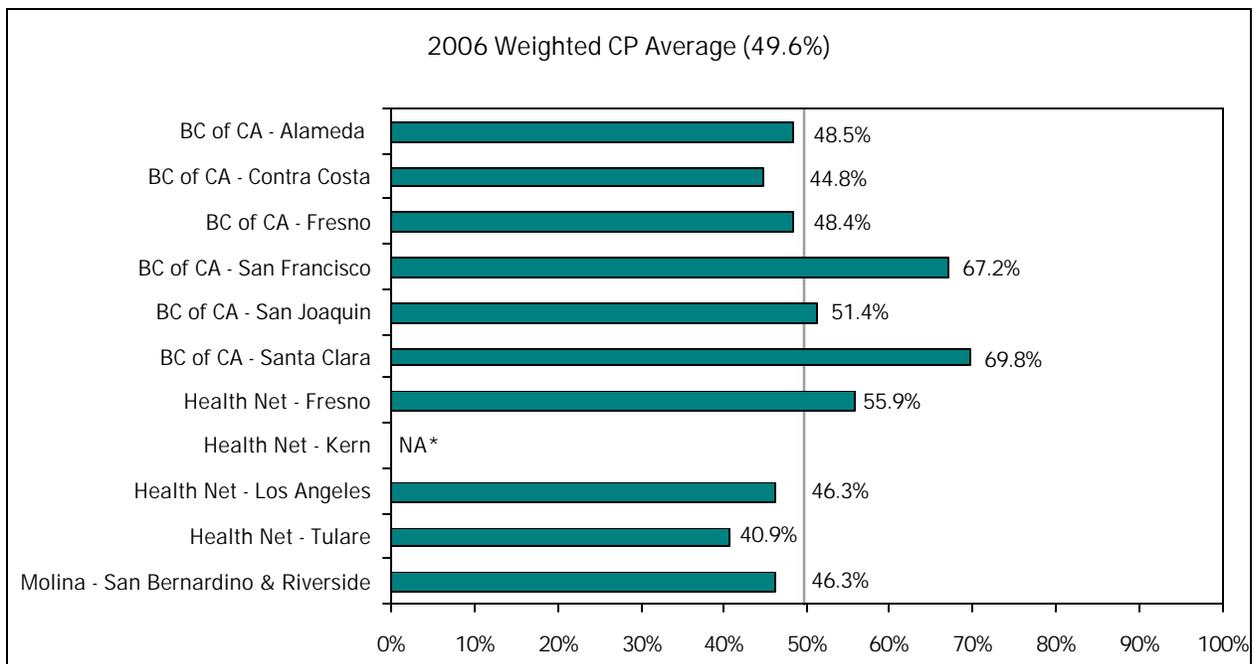


Figure 73. HEDIS 2006 Breast Cancer Screening – CP



*NA indicates that a plan had fewer than 30 members eligible for the indicator. Rates are not reported for measures where less than 30 members are eligible

Figure 74. HEDIS 2006 Breast Cancer Screening – GMC North

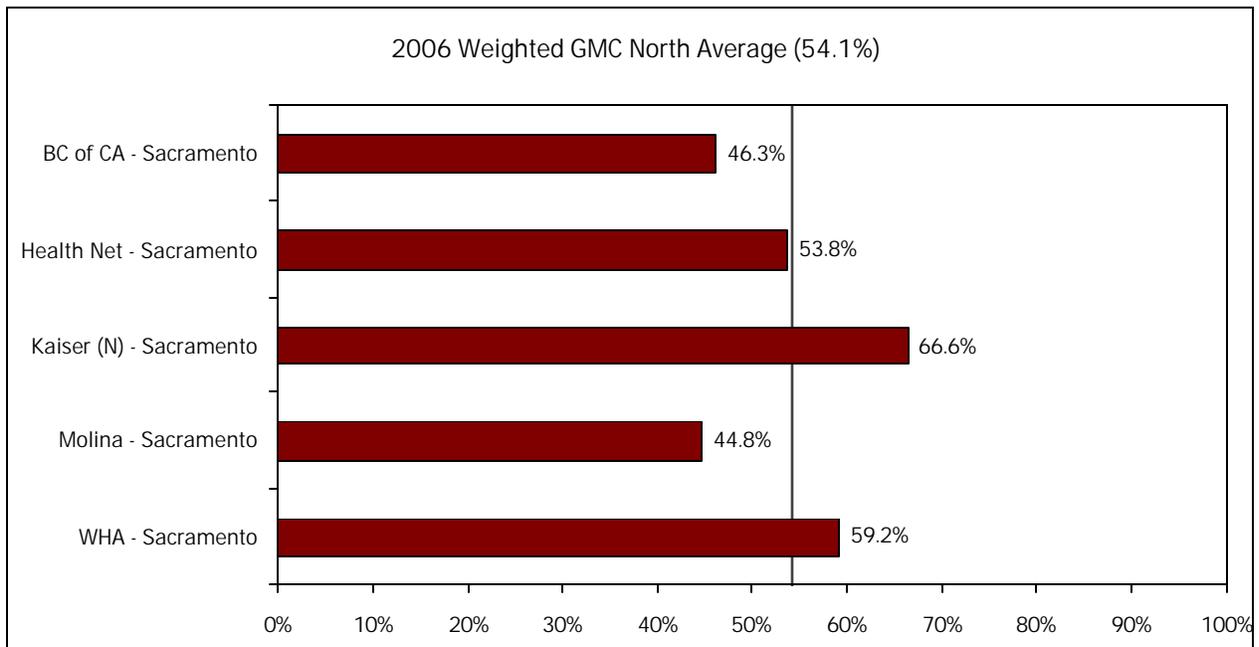


Figure 75. HEDIS 2006 Breast Cancer Screening – GMC South

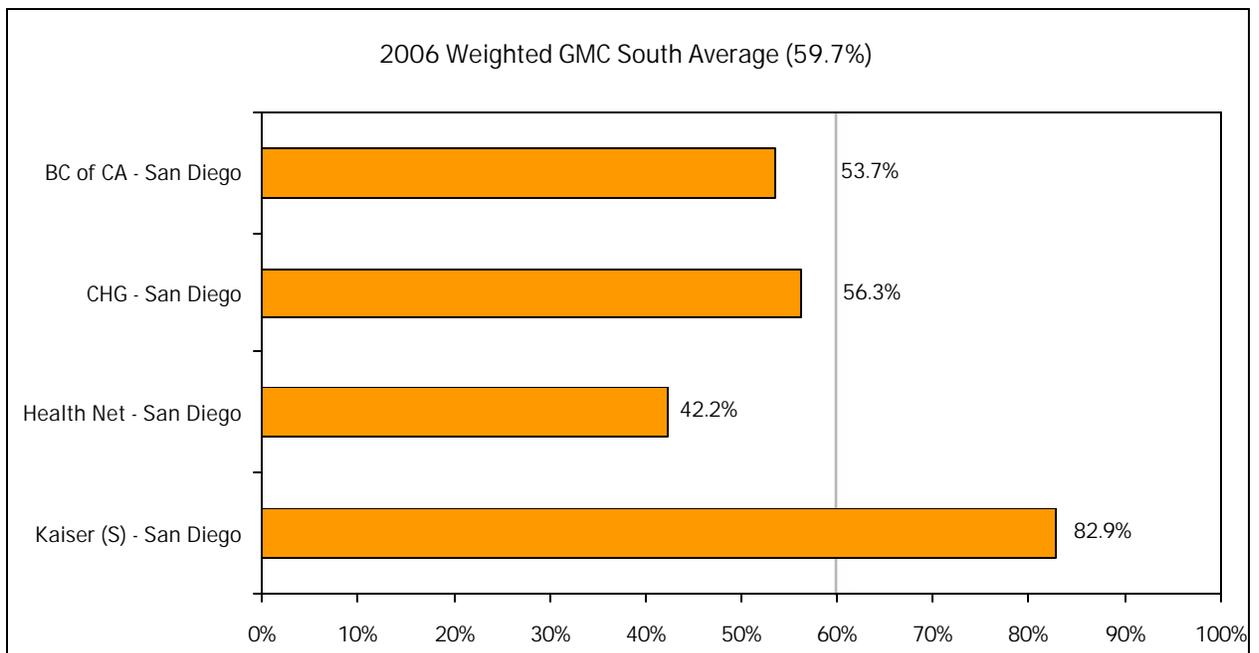


Figure 76. HEDIS 2006 Breast Cancer Screening – LI

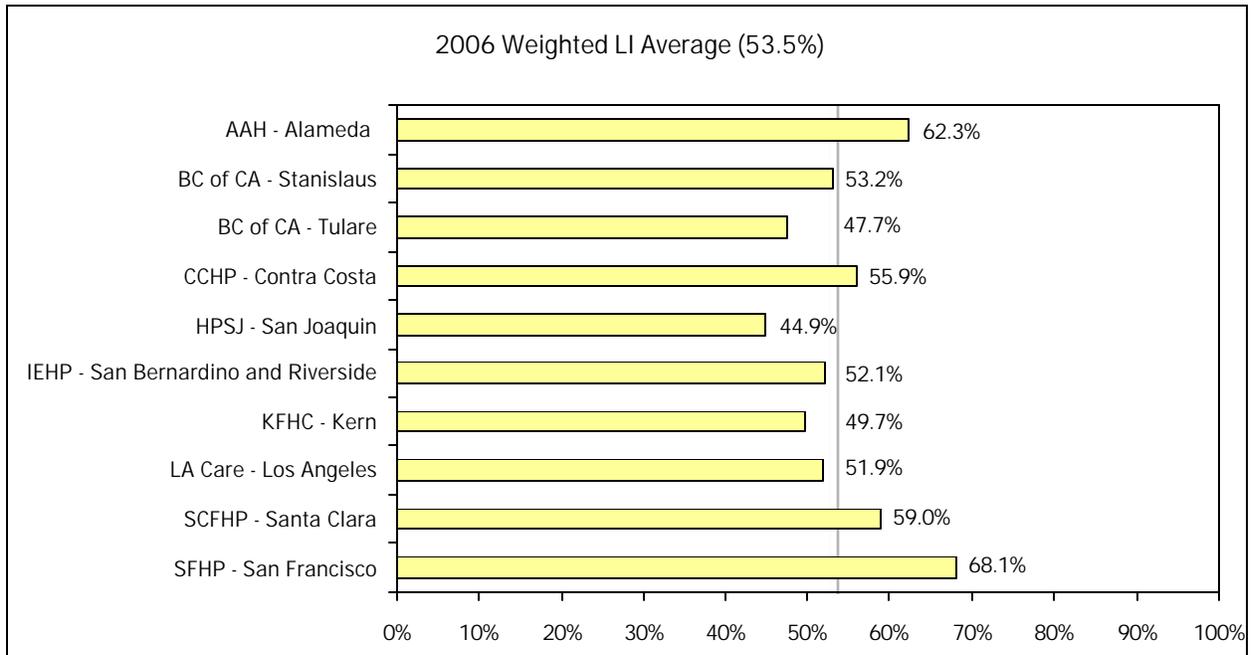


Figure 77. HEDIS 2006 Breast Cancer Screening – Model Type Comparison of Weighted Averages

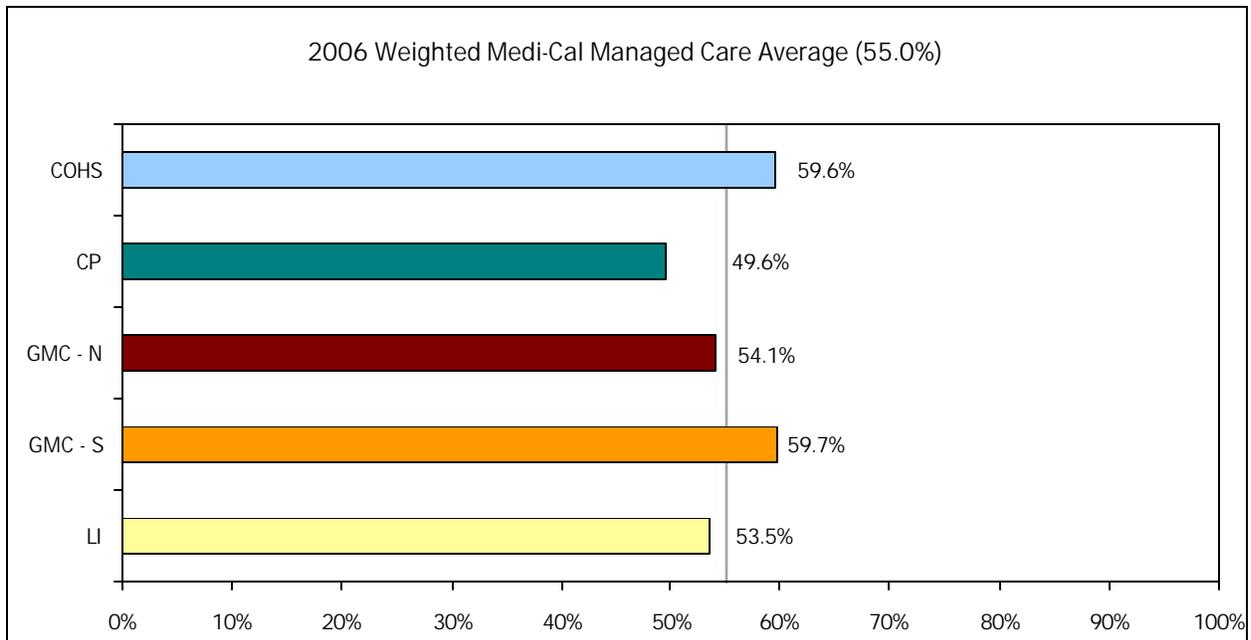


Table 28 presents the trends for Breast Cancer Screening. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

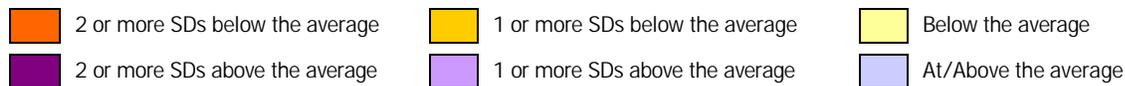


Table 28. Trends for Breast Cancer Screening

Model Type	Medi-Cal Managed Care Plans	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	49.5	52.2	61.4
	CCAH	56.2	56.5	61.9
	HPSM	55.1	56.1	56.0
	PHP of CA	52.4	57.1	58.7
	SBRHA	60.2	59.9	57.8
CP	BC of CA (CP)	57.8	54.9	54.7
	Health Net (CP)	46.9	53.0	46.5
	Molina Healthcare (CP)	58.5	58.8	46.3
GMCN	BC of CA (GMC-North)	51.7	49.3	46.3
	Health Net (GMC-North)	52.0	58.9	53.8
	Kaiser (GMC-North)	63.9	59.1	66.6
	Molina Healthcare (GMC-North)	52.5	45.5	44.8
	WHA	56.0	61.3	59.2
GMCS	BC of CA (GMC-South)	52.6	56.6	53.7
	CHG	57.4	57.9	56.3
	Health Net (GMC-South)	42.6	50.8	42.2
	Kaiser (GMC-South)	66.7	69.7	82.9
	Sharp	54.8	----	----
	Universal	43.4	----	----
LI	AAH	57.6	59.8	62.3
	BC of CA (Stanislaus)	48.4	49.7	53.2
	BC of CA (Tulare)	55.0	57.4	47.7
	CCHP	62.7	56.7	55.9
	HPSJ	43.2	43.3	44.9
	IEHP	52.0	51.4	52.1
	KFHC	47.4	47.4	49.7
	L.A. Care	54.1	56.3	51.9
	SFHP	68.8	68.3	68.1
	SCFHP	69.6	68.5	59.0
Medi-Cal Overall Average*		54.8	56.2	55.3

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for the year evaluated.

Breast Cancer Screening

Kaiser (GMC-South) exceeded their 2005 rate of 69.7% by 13.2 percentage points to 82.9% in 2006, the highest rate among all the plans.

For HEDIS 2006, COHS plans continued to report the Comprehensive Diabetes Care – Eye Exam (Retinal) Performed indicator. Thus, plan specific results are provided in Table 29. The remaining MCOs were required to report this indicator for the first time in 2006. Additionally, CDHS required three additional Comprehensive Diabetes Care indicators for the first time in 2006. In accordance with the CDHS policy of publicly reporting only aggregate data for first year measures, Figures 80 through 82 report the Medi-Cal Managed Care average by model types only. The Medi-Cal overall averages for the remaining Comprehensive Diabetes care indicators are presented in Tables 30 through 32. Plan specific data for all Comprehensive Diabetes Care indicators will be published in 2007.

Figure 78. HEDIS 2006 Comprehensive Diabetes Care (Eye Exam (retinal) Performed) – COHS

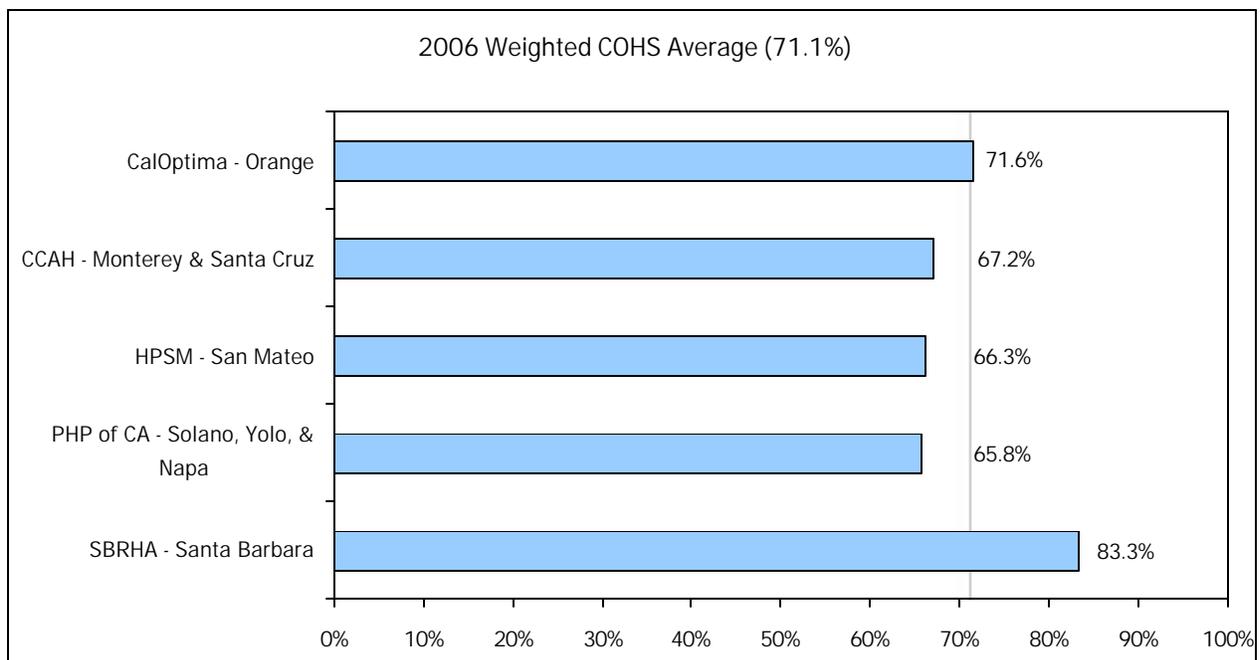


Figure 79. HEDIS 2006 Comprehensive Diabetes Care (Eye Exam (Retinal) Performed) – Model Type Comparison of Weighted Averages

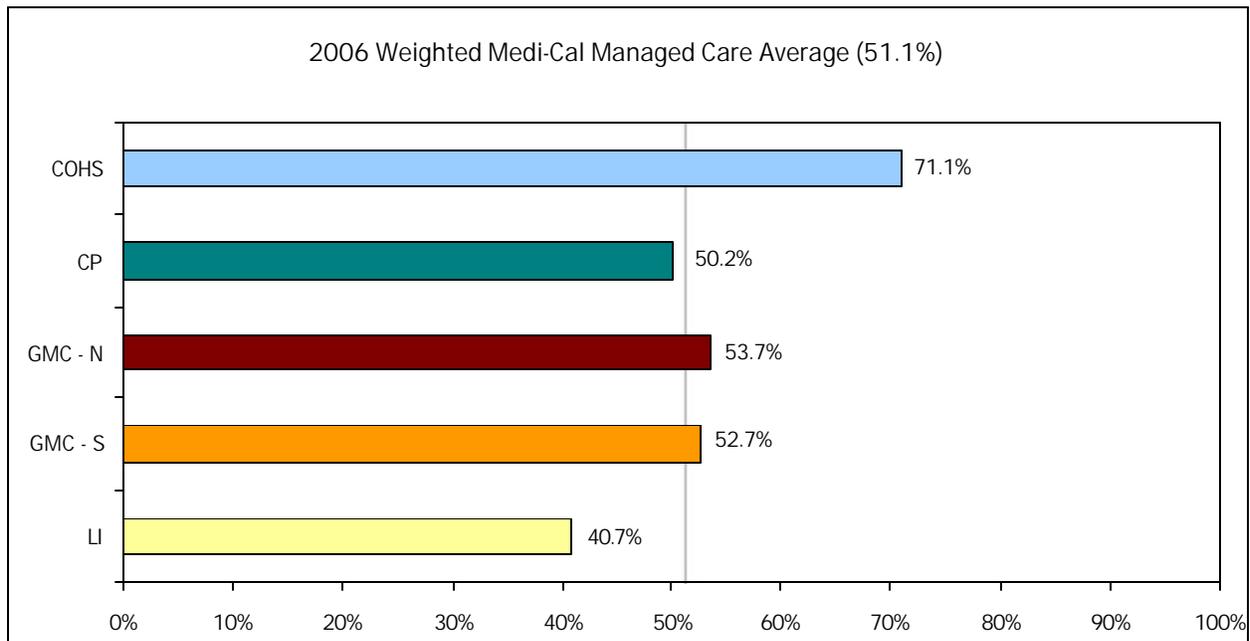


Table 29 presents the trends for Comprehensive Diabetes Care – Eye Exam (Retinal) Performed. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

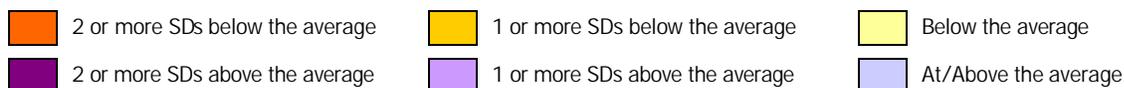


Table 29. Trends for Comprehensive Diabetes Care - Eye Exam (retinal) Performed

Model Type	Medi-Cal Managed Care Plans	HEDIS 2000 Rate	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	47.7	45.7	59.8	53.3	57.0	71.6
	CAAH	29.4	54.5	61.1	64.0	66.2	67.2
	HPSM	61.9	57.4	52.9	56.0	54.9	66.3
	PHP of CA	56.6	58.2	55.0	54.8	60.9	65.8
	SBRHA	68.7	75.4	83.1	75.9	77.6	83.3
Medi-Cal Overall Average*		52.9	58.2	62.4	60.8	63.3	54.3

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Comprehensive Diabetic Care (Eye Exam (Retinal) Performed)

The trend analysis for 2006 was conducted on the COHS plans which are the only plans that have been reporting this measure for enough years to show a trend. All COHS plans trended better than prior years and above the Medical Managed Care average (54.3%) for 2006.

In 2006, the Santa Barbara Regional Health Authority (83.3%) was 12.5 percentage points (two standard deviations) above the Medi-Cal Managed Care average. CalOptima's rate (71.66%) was one standard deviation above the Medi-Cal Managed Care average in 2006.

Figure 80. HEDIS 2006 Comprehensive Diabetes Care (HbA1c Testing)
 – Model Type Comparison of Weighted Averages

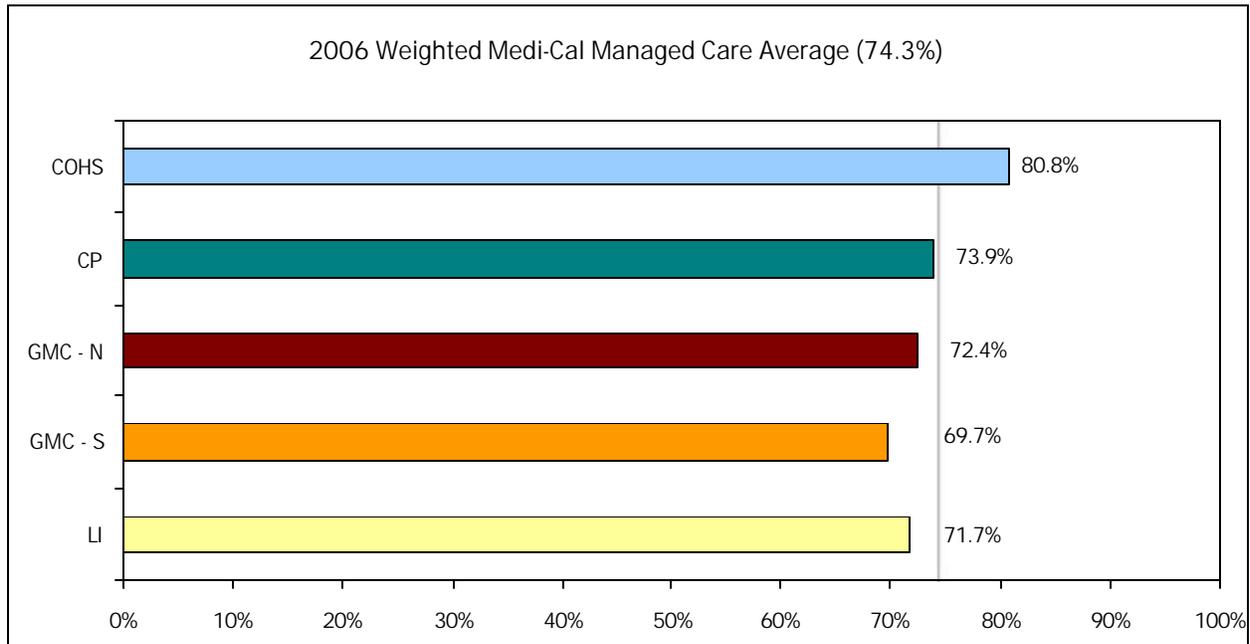


Table 30 presents the Medi-Cal Overall Average for Comprehensive Diabetes Care – HbA1c Testing.

Table 30. Comprehensive Diabetes Care - HbA1c Testing

Medi-Cal Managed Care Plans	HEDIS 2006 Rate
Medi-Cal Overall Average*	75.2%

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Figure 81. HEDIS 2006 Comprehensive Diabetes Care (LDL-C Screening Performed) – Model Type Comparison of Weighted Averages

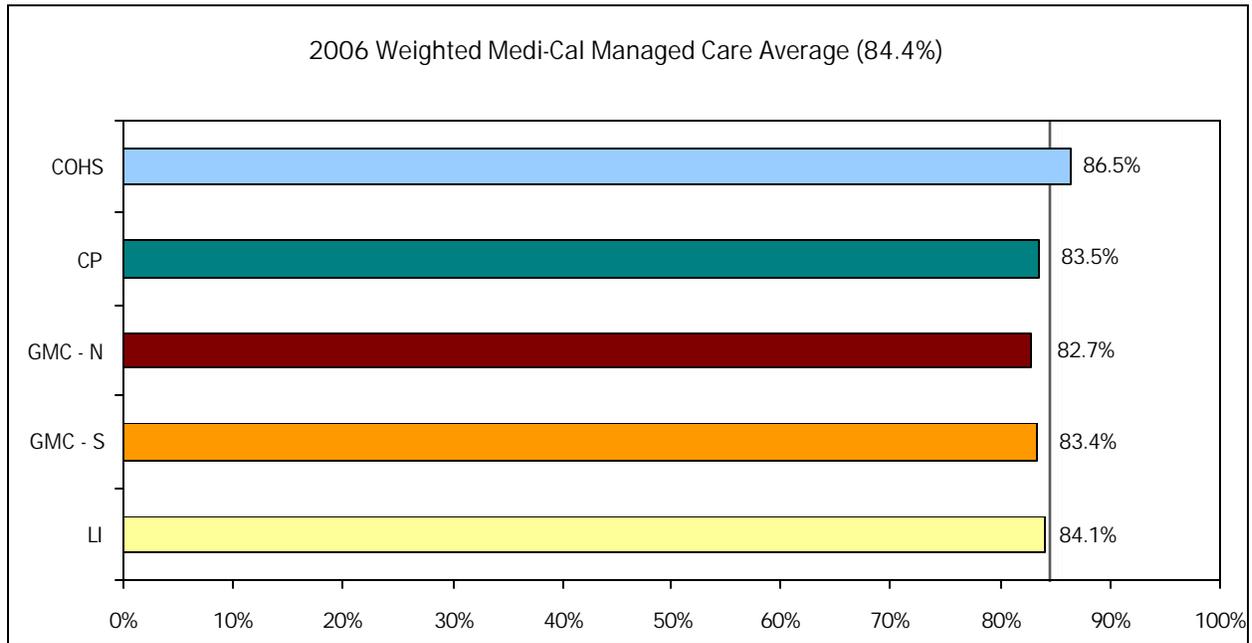


Table 31 presents the Medi-Cal Overall Average for Comprehensive Diabetes Care – LDL-C Screening Performed.

Table 31. Comprehensive Diabetes Care - LDL-C Screening Performed

Medi-Cal Managed Care Plans	HEDIS 2006 Rate
Medi-Cal Overall Average*	83.8%

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Figure 82. HEDIS 2006 Comprehensive Diabetes Care Kidney Disease (Nephropathy) Monitored – Model Type Comparison of Weighted Averages

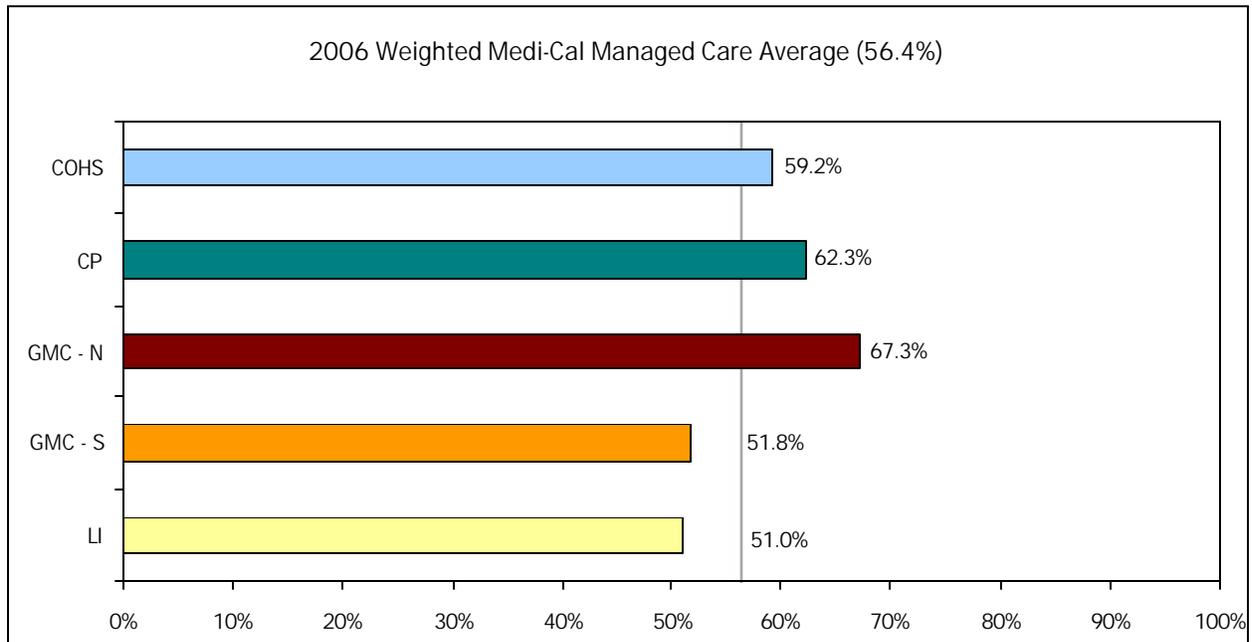


Table 32 presents the Medi-Cal Overall Average for Comprehensive Diabetes Care – Monitoring for Diabetic Nephropathy.

Table 32. Trends for Comprehensive Diabetes Care - Monitoring for Diabetic Nephropathy

Medi-Cal Managed Care Plans	HEDIS 2006 Rate
Medi-Cal Overall Average*	58.4%

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Figure 83. HEDIS 2006 Use of Appropriate Medications for People with Asthma – COHS

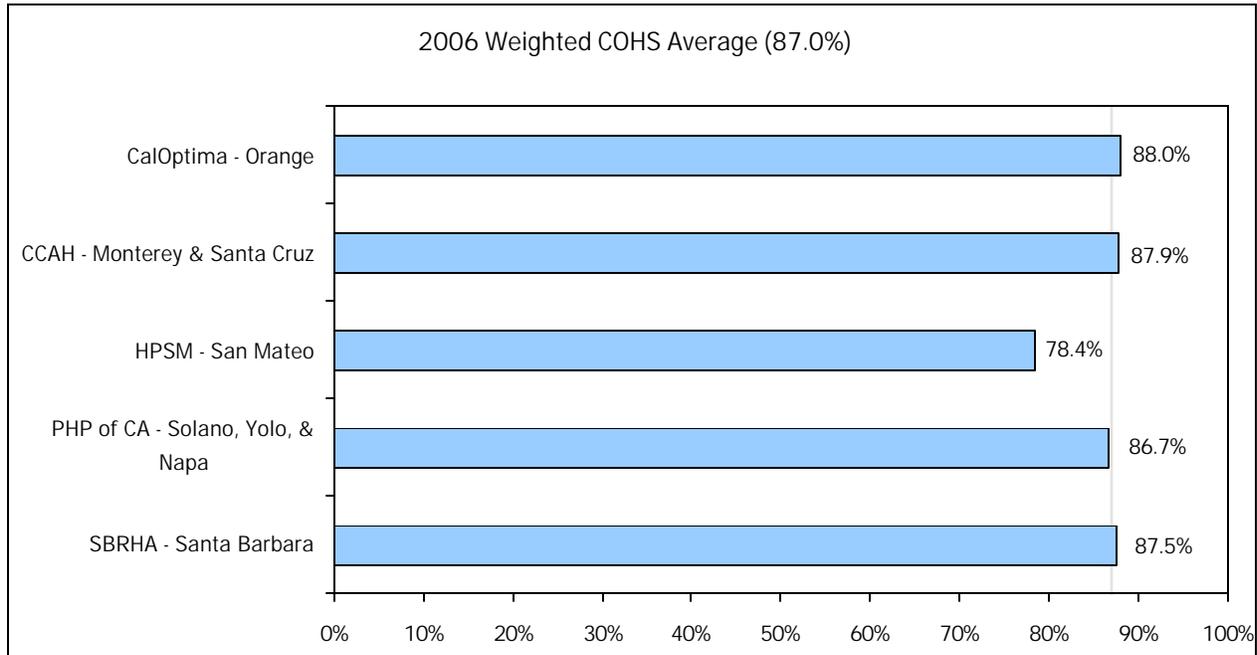
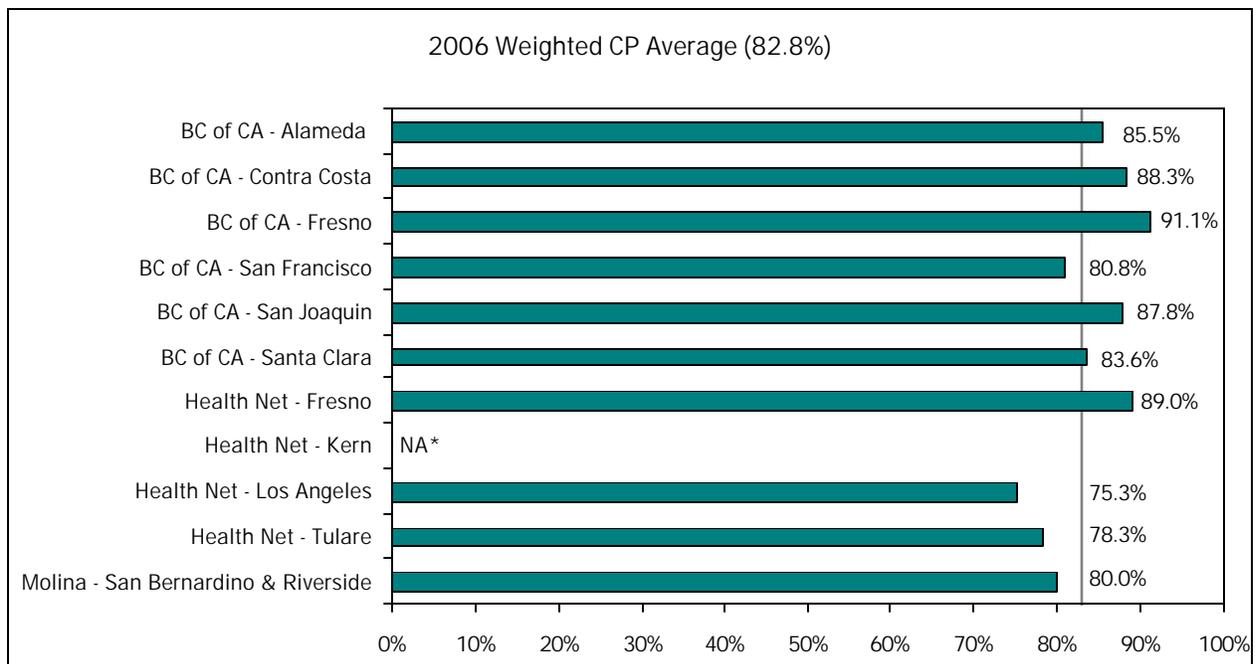


Figure 84. HEDIS 2006 Use of Appropriate Medications for People with Asthma – CP



*NA indicates that a plan had fewer than 30 members eligible for the indicator. Rates are not reported for measures where less than 30 members are eligible

Figure 85. HEDIS 2006 Use of Appropriate Medications for People with Asthma – GMC North

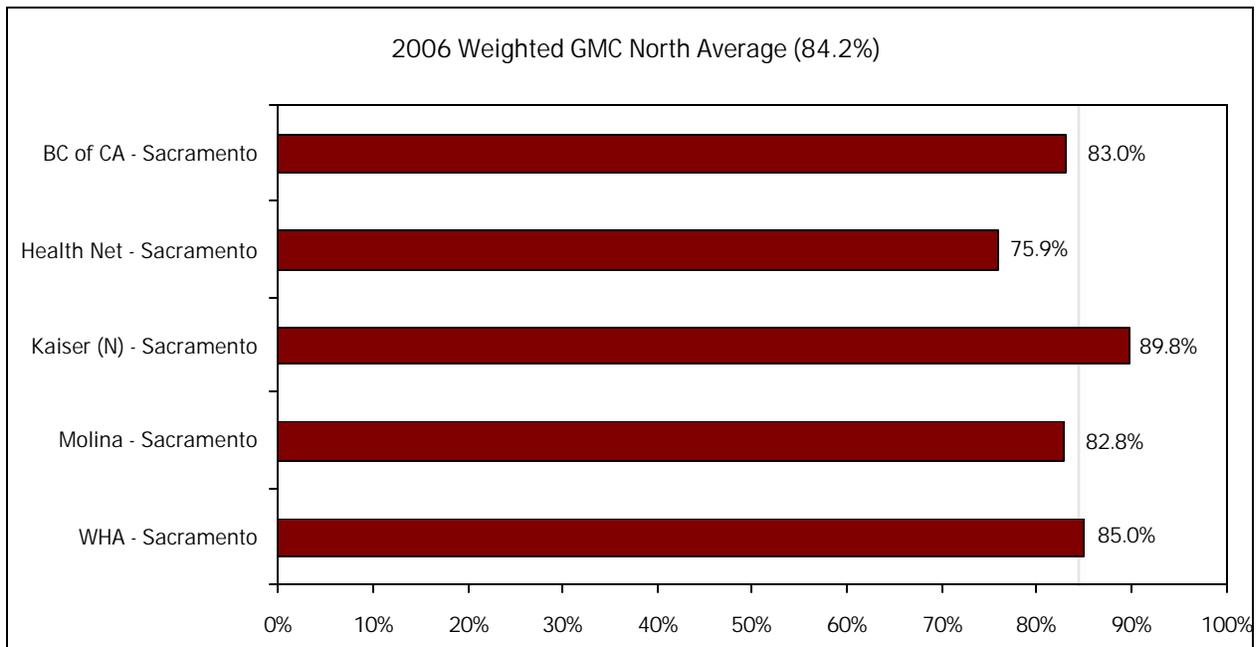


Figure 86. HEDIS 2006 Use of Appropriate Medications for People with Asthma – GMC South

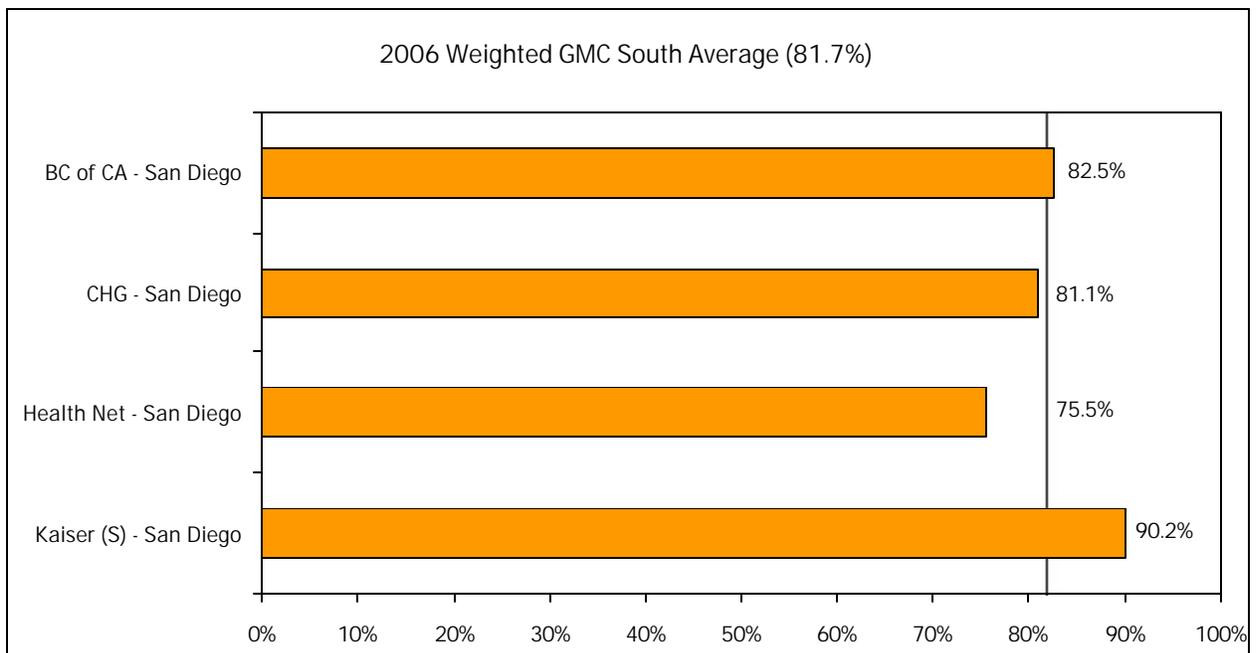


Figure 87. HEDIS 2006 Use of Appropriate Medications for People with Asthma – LI

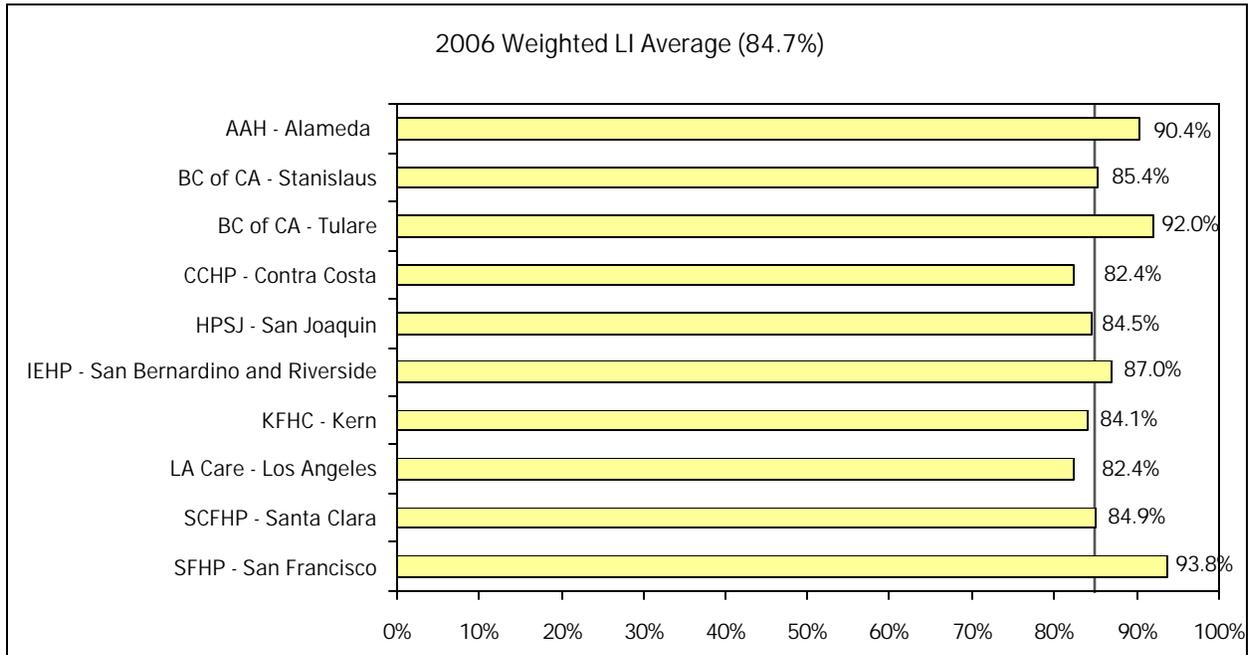


Figure 88. HEDIS 2006 Use of Appropriate Medications for People with Asthma – Model Type Comparison of Weighted Averages

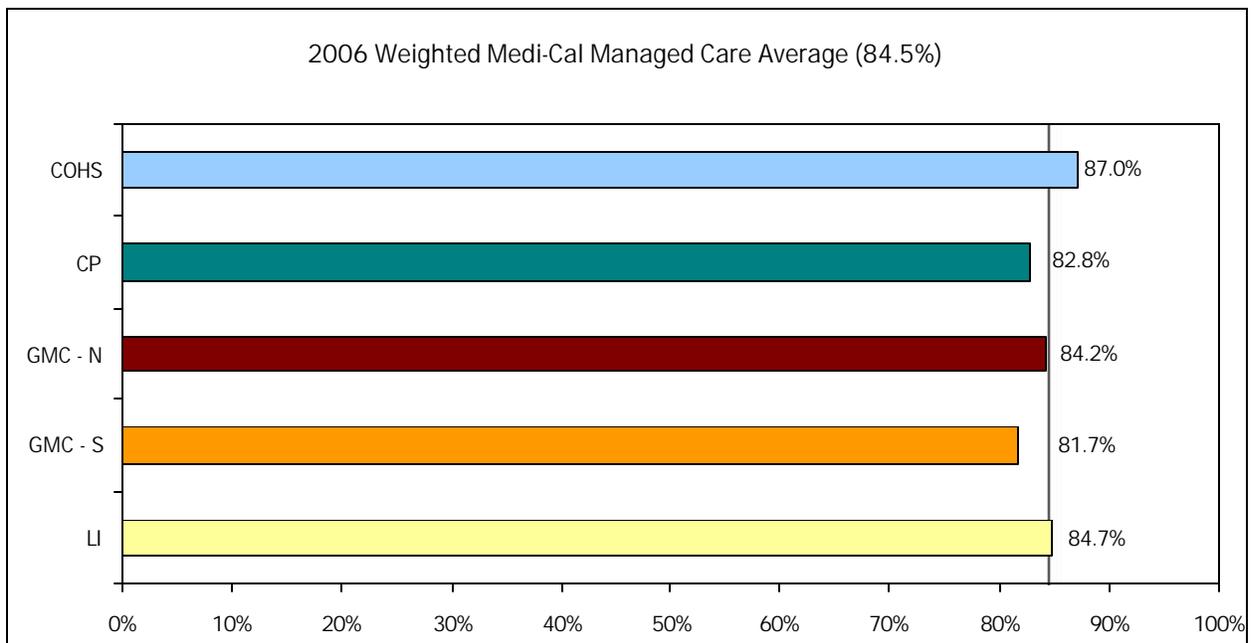


Table 33 presents the trends for Use of Appropriate Medications for People with Asthma. The cell shading represents the rate in relation to the Medi-Cal Managed Care average for that year. The colors are defined as follows (SD = standard deviation):

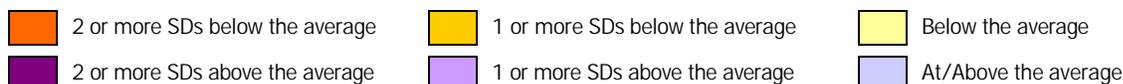


Table 33. Trends for Use of Appropriate Medications for People with Asthma

Model Type	Medi-Cal Managed Care Plans	HEDIS 2001 Rate	HEDIS 2002 Rate	HEDIS 2004 Rate	HEDIS 2005 Rate	HEDIS 2006 Rate
COHS	CalOptima	67.2	62.2	63.2	61.8	88.0
	CCAH	55.2	54.5	62.6	68.4	87.9
	HPSM	57.5	68.9	55.4	55.5	78.4
	PHP of CA	64.6	66.9	68.8	67.9	86.7
	SBRHA	58.0	64.3	68.7	71.5	87.5
CP	BC of CA (CP)	56.0	66.5	72.0	69.0	89.3
	Health Net (CP)	45.0	43.2	48.4	56.5	76.0
	Molina Healthcare (CP)	51.9	52.9	59.8	56.4	80.0
GMCN	BC of CA (GMC-North)	49.2	57.8	60.1	59.0	83.0
	Health Net (GMC-North)	48.9	55.4	47.2	62.5	75.9
	Kaiser (GMC-North)	54.1	58.7	68.8	65.6	89.8
	Molina Healthcare (GMC-North)	-----	-----	49.4	51.0	82.8
	WHA	52.0	54.5	61.4	64.2	85.0
GMCS	BC of CA (GMC-South)	50.7	56.4	64.1	55.7	82.5
	CHG	56.5	58.4	55.7	60.0	81.1
	Health Net (GMC-South)	47.5	50.6	47.9	62.7	75.5
	Kaiser (GMC-South)	-----	44.2	59.9	61.9	90.2
	Sharp	50.0	56.8	64.6	-----	-----
	UCSD	66.1	66.9	-----	-----	-----
	Universal	55.9	62.7	64.2	-----	-----
LI	AAH	36.1	60.7	65.3	67.4	90.4
	BC of CA (Stanislaus)	54.9	61.6	64.9	63.3	85.4
	BC of CA (Tulare)	-----	62.9	68.1	66.6	92.0
	CCHP	49.6	85.3	60.9	60.5	82.4
	HPSJ	83.5	53.8	59.2	54.8	84.5
	IEHP	55.7	59.4	63.7	64.0	87.0
	KFHC	85.3	48.9	63.1	64.9	84.1
	L.A. Care	49.3	41.8	61.1	58.9	82.4
	SFHP	59.0	57.8	68.4	68.5	93.8
	SCFHP	51.6	64.0	61.6	58.5	84.9
Medi-Cal Overall Average*		56.0	58.6	61.3	62.1	84.7

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

Use of Appropriate Medications for Asthma

The individual rates for 11 of the 27 plans were above the Medi-Cal Managed Care averages in 2004 (61.3%), 2005 (62.1%) and 2006 (84.7%). San Francisco Health Plan had the highest rate in 2006 with 93.8%. The rates for all but four plans were above 80% in 2006. Plans below 80% were Health Plan of San Mateo (78.4%), Health Net (CP) (76.0%), Health Net (GMC-North) (75.9%), and Health Net (GMC-South) (75.5%).

Figure 89. HEDIS 2006 Inappropriate Treatment for Adults with Acute Bronchitis
Model Type Comparison of Weighted Averages

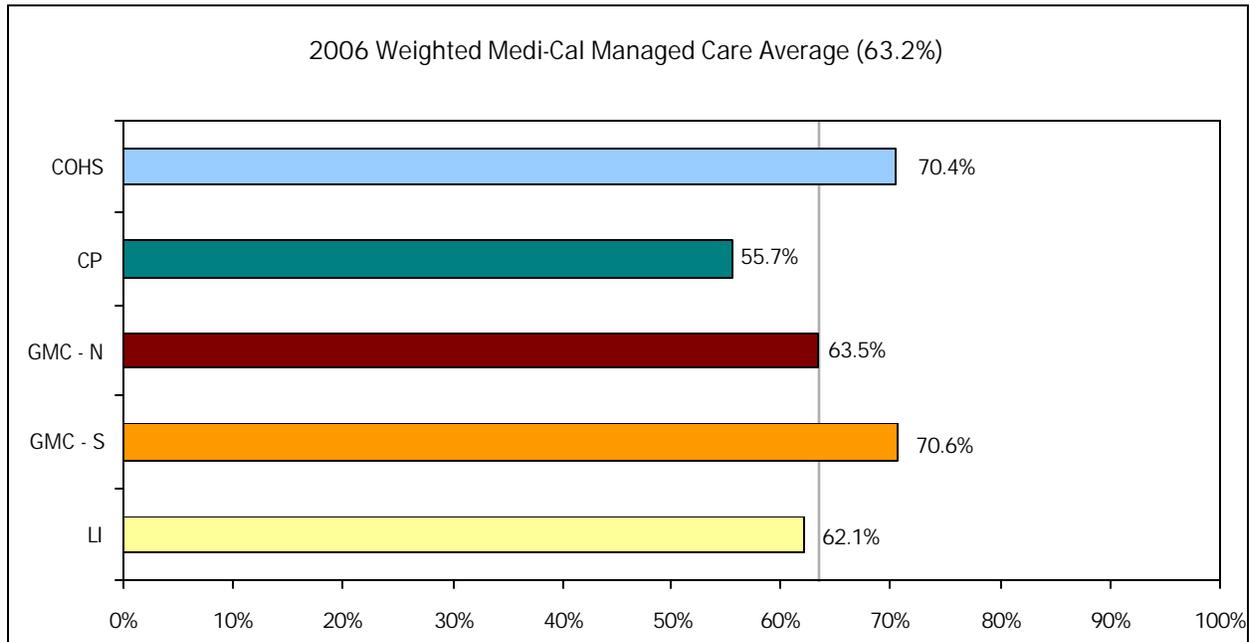


Table 34 presents the Medi-Cal Overall Average for Inappropriate Treatment for Adults with Acute Bronchitis. The Inappropriate Treatment for Adults with Acute Bronchitis measure was new in HEDIS 2006. Plan level results are not provided for measures reported in the first year.

Table 34. Inappropriate Treatment for Adults with Acute Bronchitis

Medi-Cal Managed Care Plans	HEDIS 2006 Rate
Medi-Cal Overall Average*	64.4%

*The Medi-Cal Managed Care Average presented in this table is not weighted. It is the average of the plans' HEDIS rates for each year evaluated.

For more information about HEDIS, please see <http://www.ncqa.org/Programs/HEDIS/index.htm>

For more information about the California Healthy Families program, please see <http://www.healthyfamilies.ca.gov/hf/hfhome.jsp>

For other Medi-Cal Managed Care reports, please see <http://www.dhs.ca.gov/mcs/mcmcd/htm/ManagedCareReports.htm>

Comments and questions regarding the format or content of this report are welcome.

Please contact Rita Marowitz, Chief, Performance Measurement Unit, Medi-Cal Managed Care Division, California Department of Health Services at rmarowit@dhs.ca.gov.

Appendix

Measure Descriptions¹

Well-Child Visits in the First 15 Months of Life (6 or more visits)

The percentage of enrolled members who turned 15 months old during the measurement year and who had the following number of well-child visits with a primary care practitioner during their first 15 months of life: zero; one; two; three; four; five; six or more.

Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life

The percentage of members who were three, four, five or six years of age during the measurement year who received one or more well-child visits with a primary care practitioner during the measurement year.

Childhood Immunization Status (Combination 2)

The percentage of enrolled children 2 years of age who had four DTaP/DT, three IPV, one MMR, three H influenza type B, three hepatitis B, and one chicken pox vaccine (VZV) vaccines by their second birthday.

Adolescent Well-Care Visits

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

Appropriate Treatment for Children with Upper Respiratory Infection

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 on or three days after the Episode Date.

Prenatal and Postpartum Care

For women delivering live births between November 6 of the year prior to the measurement year and November 5 of the measurement year, the measure assesses the following facets of prenatal and postpartum care::

- *Timeliness of Prenatal Care.* The percentage of deliveries that received a prenatal care visit as a member of the MCO in the first trimester *or* within 42 days of enrollment in the MCO.
- *Postpartum Care.* The percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.

¹National Committee for Quality Assurance (2005). HEDIS 2006 Volume 2 Technical Specifications. Washington DC. Delmarva Foundation

Chlamydia Screening in Women

The percentage of women 16–25 years of age who were identified as sexually active who had at least one test for chlamydia during the measurement year.

Cervical Cancer Screening

The percentage of women 18–64 years of age who received one or more Pap tests during the measurement year or the two years prior to the measurement year.

Breast Cancer Screening

The percentage of women 50–69 years of age who had a mammogram during the measurement year or the year prior to the measurement year.

Comprehensive Diabetes Care

The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had each of the following:

- Eye exam (retinal) performed
- Hemoglobin A1c (HbA1c) testing
- LDL-C screening performed
- Kidney disease (nephropathy) monitored.

Use of Appropriate Medications for People with Asthma

The percentage of enrolled members 5–56 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year.

Inappropriate Treatment for Adults with Acute Bronchitis

The percentage of healthy adults 18–64 years of age with a diagnosis of acute bronchitis who were dispensed an antibiotic prescription on or within three days after the Episode Date.

Antibiotics are not indicated in clinical guidelines for the treatment of adults with acute bronchitis who do not have a comorbidity or other infection for which antibiotics may be appropriate. This misuse measure assesses if antibiotics were inappropriately prescribed for healthy adults with acute bronchitis. A lower rate represents better performance.