

Managed Care Program Annual Report (MCPAR) for Delaware: Diamond State Health Plan

Due date	Last edited	Edited by	Status
06/29/2023	06/29/2023	Richard Holaday	Submitted

Indicator	Response
Exclusion of CHIP from MCPAR Enrollees in separate CHIP programs funded under Title XXI should not be reported in the MCPAR. Please check this box if the state is unable to remove information about Separate CHIP enrollees from its reporting on this program.	Not Selected

Section A: Program Information

Point of Contact

Number	Indicator	Response
A1	State name Auto-populated from your account profile.	Delaware
A2a	Contact name First and last name of the contact person. States that do not wish to list a specific individual on the report are encouraged to use a department or program-wide email address that will allow anyone with questions to quickly reach someone who can provide answers.	Richard Holaday
A2b	Contact email address Enter email address. Department or program-wide email addresses ok.	Richard.Holaday@delaware.gov
A3a	Submitter name CMS receives this data upon submission of this MCPAR report.	Richard Holaday
A3b	Submitter email address CMS receives this data upon submission of this MCPAR report.	Richard.Holaday@delaware.gov
A4	Date of report submission CMS receives this date upon submission of this MCPAR report.	06/29/2023

Reporting Period

Number	Indicator	Response
A5a	Reporting period start date Auto-populated from report dashboard.	01/01/2022
A5b	Reporting period end date Auto-populated from report dashboard.	12/31/2022
A6	Program name Auto-populated from report dashboard.	Diamond State Health Plan

Add plans (A.7)

Enter the name of each plan that participates in the program for which the state is reporting data.

Indicator	Response
Plan name	AmeriHealth Caritas Delaware Highmark Health Options

Add BSS entities (A.8)

Enter the names of Beneficiary Support System (BSS) entities that support enrollees in the program for which the state is reporting data. Learn more about BSS entities at [42 CFR 438.71](#). See Glossary in Excel Workbook for the definition of BSS entities.

Examples of BSS entity types include a: State or Local Government Entity, Ombudsman Program, State Health Insurance Program (SHIP), Aging and Disability Resource Network (ADRN), Center for Independent Living (CIL), Legal Assistance Organization, Community-based Organization, Subcontractor, Enrollment Broker, Consultant, or Academic/Research Organization.

Indicator	Response
BSS entity name	Diamond State Health Plan

Section B: State-Level Indicators

Topic I. Program Characteristics and Enrollment

Number	Indicator	Response
BI.1	<p>Statewide Medicaid enrollment</p> <p>Enter the total number of individuals enrolled in Medicaid as of the first day of the last month of the reporting year. Include all FFS and managed care enrollees, and count each person only once, regardless of the delivery system(s) in which they are enrolled.</p>	311,971
BI.2	<p>Statewide Medicaid managed care enrollment</p> <p>Enter the total, unduplicated number of individuals enrolled in any type of Medicaid managed care as of the first day of the last month of the reporting year. Include enrollees in all programs, and count each person only once, even if they are enrolled in more than one managed care program or more than one managed care plan.</p>	268,107

Topic III. Encounter Data Report

Number	Indicator	Response
BIII.1	Data validation entity Select the state agency/division or contractor tasked with evaluating the validity of encounter data submitted by MCPs. Encounter data validation includes verifying the accuracy, completeness, timeliness, and/or consistency of encounter data records submitted to the state by Medicaid managed care plans. Validation steps may include pre-acceptance edits and post-acceptance analyses. See Glossary in Excel Workbook for more information.	Other state agency staff State actuaries EQRO

Topic X: Program Integrity

Number	Indicator	Response
BX.1	<p data-bbox="313 107 716 180">Payment risks between the state and plans</p> <p data-bbox="313 201 716 359">Describe service-specific or other focused PI activities that the state conducted during the past year in this managed care program.</p> <p data-bbox="313 359 716 705">Examples include analyses focused on use of long-term services and supports (LTSS) or prescription drugs or activities that focused on specific payment issues to identify, address, and prevent fraud, waste or abuse. Consider data analytics, reviews of under/overutilization, and other activities.</p>	<p data-bbox="760 107 1373 296">Chiropractor reviews, Unified Program Integrity Contractor (UPIC) reviews, FWA data mining and analysis with focus on applied behavioral analysis (ABA) and substance abuse disorder (SUD) Services</p>
BX.2	<p data-bbox="313 758 716 831">Contract standard for overpayments</p> <p data-bbox="313 852 716 1010">Does the state allow plans to retain overpayments, require the return of overpayments, or has established a hybrid system? Select one.</p>	<p data-bbox="760 758 1308 787">State requires the return of overpayments</p>
BX.3	<p data-bbox="313 1062 716 1178">Location of contract provision stating overpayment standard</p> <p data-bbox="313 1199 716 1356">Describe where the overpayment standard in the previous indicator is located in plan contracts, as required by 42 CFR 438.608(d)(1)(i).</p>	<p data-bbox="760 1062 902 1092">3.10.2.1.34</p>
BX.4	<p data-bbox="313 1409 716 1482">Description of overpayment contract standard</p> <p data-bbox="313 1503 716 1755">Briefly describe the overpayment standard (for example, details on whether the state allows plans to retain overpayments, requires the plans to return overpayments, or administers a hybrid system) selected in indicator B.X.2.</p>	<p data-bbox="760 1409 1373 1797">Participating providers comply with Federal and State policy regarding overpayments, including, but not limited to, reporting overpayments and, when it is applicable, returning overpayments to the Contractor within sixty calendar days from the date the overpayment is identified. Overpayments that are not reported and returned within sixty calendar days from the date the overpayment was identified may result in a penalty pursuant to State or Federal law.</p>
BX.5	<p data-bbox="313 1850 716 1923">State overpayment reporting monitoring</p> <p data-bbox="313 1944 716 2074">Describe how the state monitors plan performance in reporting overpayments to the state, e.g. does the state track</p>	<p data-bbox="760 1850 1349 1923">PI Tracks overpayments by age using an Excel spreadsheet</p>

compliance with this requirement and/or timeliness of reporting?
The regulations at 438.604(a)(7), 608(a)(2) and 608(a)(3) require plan reporting to the state on various overpayment pieces (whether annually or promptly). This indicator is asking the state how it monitors that reporting.

BX.6	Changes in beneficiary circumstances	DMES is automated to implement Delaware’s policy around timely and accurate reconciliation of enrollment through monthly eligibility reconciliation process, managed care pre-assignment, managed care enrollment and managed care disenrollment processes. 834 x12 transactions are sent daily and monthly to the MCOs. Capitations are created monthly and sent via 820x12 transactions to the MCOs. Appropriate MCO payments can be found in the monthly 820x12 file. The 820 file is a monthly capitation payment file that supplies the MCOs with the capitation summary for the members that are enrolled with the MCO. Accurate information for the member’s Managed Care enrollment can be found in the change/termination section of the monthly 834 file. The monthly 834 file supplies the MCOs with prospective member enrollments. For example, if the member is incarcerated the member would have an INCAR segment in the roster section of the monthly 834 file.
BX.7a	Changes in provider circumstances: Monitoring plans	Yes
BX.7b	Changes in provider circumstances: Metrics	Yes
BX.7c	Changes in provider circumstances: Describe metric	The Contractor shall notify the State of any provider termination, providing documentation of the provider’s name, NPI, State assigned provider identification number, and the

Describe the metric or indicator that the state uses.

number of members affected within five business days of the provider's termination.

BX.8a	Federal database checks: Excluded person or entities	Yes
<p>During the state's federal database checks, did the state find any person or entity excluded? Select one. Consistent with the requirements at 42 CFR 455.436 and 438.602, the State must confirm the identity and determine the exclusion status of the MCO, PIHP, PAHP, PCCM or PCCM entity, any subcontractor, as well as any person with an ownership or control interest, or who is an agent or managing employee of the MCO, PIHP, PAHP, PCCM or PCCM entity through routine checks of Federal databases.</p>		
BX.8b	Federal database checks: Summarize instances of exclusion	All found excluded providers are added to the sanctions list. Those that were registered in the DE program were terminated and MCOs were ordered to also terminate relationships. MCOs report confirmation of termination, when applicable.
<p>Summarize the instances and whether the entity was notified as required in 438.602(d). Report actions taken, such as plan-level sanctions and corrective actions.</p>		
BX.9a	Website posting of 5 percent or more ownership control	No
<p>Does the state post on its website the names of individuals and entities with 5% or more ownership or control interest in MCOs, PIHPs, PAHPs, PCCMs and PCCM entities and subcontractors? Refer to §455.104 and required by 42 CFR 438.602(g)(3).</p>		
BX.10	Periodic audits	N/A
<p>If the state conducted any audits during the contract year to determine the accuracy, truthfulness, and completeness of the encounter and financial data submitted by the plans, what is the link(s) to the audit results? Refer to 42 CFR 438.602(e).</p>		

Section C: Program-Level Indicators

Topic I: Program Characteristics

Number	Indicator	Response
C11.1	<p>Program contract</p> <p>Enter the title of the contract between the state and plans participating in the managed care program.</p>	Managed Care Organization Master Services Agreement
N/A	Enter the date of the contract between the state and plans participating in the managed care program.	05/31/2020
C11.2	<p>Contract URL</p> <p>Provide the hyperlink to the model contract or landing page for executed contracts for the program reported in this program.</p>	https://dhss.delaware.gov/dhss/dmma/files/mco_msa_2020.pdf
C11.3	<p>Program type</p> <p>What is the type of MCPs that contract with the state to provide the services covered under the program? Select one.</p>	Managed Care Organization (MCO)
C11.4a	<p>Special program benefits</p> <p>Are any of the four special benefit types covered by the managed care program: (1) behavioral health, (2) long-term services and supports, (3) dental, and (4) transportation, or (5) none of the above? Select one or more.</p> <p>Only list the benefit type if it is a covered service as specified in a contract between the state and managed care plans participating in the program. Benefits available to eligible program enrollees via fee-for-service should not be listed here.</p>	<p>Behavioral health</p> <p>Long-term services and supports (LTSS)</p> <p>Dental</p> <p>Transportation</p>
C11.4b	<p>Variation in special benefits</p> <p>What are any variations in the availability of special benefits within the program (e.g. by service area or population)? Enter "N/A" if not applicable.</p>	Dental services for adults only
C11.5	<p>Program enrollment</p> <p>Enter the total number of individuals enrolled in the managed care program as of</p>	311,971

the first day of the last month of the reporting year.

C11.6

Changes to enrollment or benefits

Briefly explain any major changes to the population enrolled in or benefits provided by the managed care program during the reporting year.

Continued operating under MOE for PHE (no disenrollment due to PHE). State plan amendment in July 2022 extended post-partum coverage to 12 months

Topic III: Encounter Data Report

Number	Indicator	Response
C1III.1	<p data-bbox="313 107 634 136">Uses of encounter data</p> <p data-bbox="313 161 695 310">For what purposes does the state use encounter data collected from managed care plans (MCPs)? Select one or more.</p> <p data-bbox="313 321 727 569">Federal regulations require that states, through their contracts with MCPs, collect and maintain sufficient enrollee encounter data to identify the provider who delivers any item(s) or service(s) to enrollees (42 CFR 438.242(c)(1)).</p>	<p data-bbox="760 107 911 136">Rate setting</p> <p data-bbox="760 180 1219 210">Quality/performance measurement</p> <p data-bbox="760 254 1089 283">Monitoring and reporting</p> <p data-bbox="760 327 997 357">Contract oversight</p> <p data-bbox="760 401 1219 430">Policy making and decision support</p>
C1III.2	<p data-bbox="313 625 691 697">Criteria/measures to evaluate MCP performance</p> <p data-bbox="313 722 727 905">What types of measures are used by the state to evaluate managed care plan performance in encounter data submission and correction? Select one or more.</p> <p data-bbox="313 915 727 1224">Federal regulations also require that states validate that submitted enrollee encounter data they receive is a complete and accurate representation of the services provided to enrollees under the contract between the state and the MCO, PIHP, or PAHP. 42 CFR 438.242(d).</p>	<p data-bbox="760 625 1240 655">Timeliness of initial data submissions</p> <p data-bbox="760 699 1146 728">Timeliness of data corrections</p> <p data-bbox="760 772 1094 802">Use of correct file formats</p> <p data-bbox="760 846 1094 875">Provider ID field complete</p> <p data-bbox="760 919 1349 982">Overall data accuracy (as determined through data validation)</p>
C1III.3	<p data-bbox="313 1276 716 1348">Encounter data performance criteria contract language</p> <p data-bbox="313 1373 727 1654">Provide reference(s) to the contract section(s) that describe the criteria by which managed care plan performance on encounter data submission and correction will be measured. Use contract section references, not page numbers.</p>	3.18.4.6
C1III.4	<p data-bbox="313 1707 699 1778">Financial penalties contract language</p> <p data-bbox="313 1803 727 2024">Provide reference(s) to the contract section(s) that describes any financial penalties the state may impose on plans for the types of failures to meet encounter data submission and quality</p>	5.7.2 (5.4.3.4)

standards. Use contract section references, not page numbers.

C1III.5 Incentives for encounter data quality N/A

Describe the types of incentives that may be awarded to managed care plans for encounter data quality. Reply with "N/A" if the plan does not use incentives to award encounter data quality.

C1III.6 Barriers to collecting/validating encounter data

Describe any barriers to collecting and/or validating managed care plan encounter data that the state has experienced during the reporting period.

The state is aware of all encounters sent to the MMIS, however there is an ongoing challenge with accepting encounters through gate 2 based on specificity of provider identifying information and matching criteria (i.e., Street/St., Avenue/Ave., etc.).

Topic IV. Appeals, State Fair Hearings & Grievances

Number	Indicator	Response
C1IV.1	<p data-bbox="313 107 727 258">State's definition of "critical incident," as used for reporting purposes in its MLTSS program</p> <p data-bbox="313 279 727 562">If this report is being completed for a managed care program that covers LTSS, what is the definition that the state uses for "critical incidents" within the managed care program? Respond with "N/A" if the managed care program does not cover LTSS.</p>	<p data-bbox="760 107 1377 617">Critical Incidents shall include but not be limited to the following incidents: a) Unexpected death of a member, including deaths occurring in any suspicious or unusual manner, or suddenly when the deceased was not attended by a physician; b) Suspected physical, mental or sexual mistreatment, abuse and/or neglect of a member; c) Suspected theft or financial exploitation of a member; d) Severe injury sustained by a member; e) Medication error involving a member; or f) Inappropriate/unprofessional conduct by a provider involving a member.</p>
C1IV.2	<p data-bbox="313 669 727 783">State definition of "timely" resolution for standard appeals</p> <p data-bbox="313 804 727 1157">Provide the state's definition of timely resolution for standard appeals in the managed care program. Per 42 CFR §438.408(b)(2), states must establish a timeframe for timely resolution of standard appeals that is no longer than 30 calendar days from the day the MCO, PIHP or PAHP receives the appeal.</p>	<p data-bbox="760 669 1377 827">For standard resolution of an Appeal and notice to the affected parties, the timeframe shall not exceed 30 calendar days from the day the Contractor receives the Appeal.</p>
C1IV.3	<p data-bbox="313 1203 727 1316">State definition of "timely" resolution for expedited appeals</p> <p data-bbox="313 1337 727 1690">Provide the state's definition of timely resolution for expedited appeals in the managed care program. Per 42 CFR §438.408(b)(3), states must establish a timeframe for timely resolution of expedited appeals that is no longer than 72 hours after the MCO, PIHP or PAHP receives the appeal.</p>	<p data-bbox="760 1203 1377 1444">For expedited resolution of an Appeal, the Contractor shall resolve the Appeal and notice the affected parties as expeditiously as the member's health condition requires, but no longer than 72 hours after the Contractor receives the Appeal.</p>
C1IV.4	<p data-bbox="313 1736 727 1812">State definition of "timely" resolution for grievances</p> <p data-bbox="313 1833 727 2087">Provide the state's definition of timely resolution for grievances in the managed care program. Per 42 CFR §438.408(b)(1), states must establish a timeframe for timely resolution of grievances that is no longer than 90 calendar days from the</p>	<p data-bbox="760 1736 1377 1894">For standard resolution of Grievance and notice to the affected parties, the timeframe shall not exceed 30 calendar days from the day the Contractor receives the Grievance.</p>

Topic V. Availability, Accessibility and Network Adequacy

Network Adequacy

Number	Indicator	Response
C1V.1	<p>Gaps/challenges in network adequacy</p> <p>What are the state's biggest challenges? Describe any challenges MCPs have maintaining adequate networks and meeting standards.</p>	<p>While maintaining an adequate network, Delaware faces challenges similar to other states in rural access as well as attendant care services.</p>
C1V.2	<p>State response to gaps in network adequacy</p> <p>How does the state work with MCPs to address gaps in network adequacy?</p>	<p>Through enhanced contractual requirements, Delaware has encouraged the MCOs to invest in workforce development, ongoing provider training and recruitment and single case agreements as needed.</p>

Access Measures

Describe the measures the state uses to monitor availability, accessibility, and network adequacy. Report at the program level.

Revisions to the Medicaid managed care regulations in 2016 and 2020 built on existing requirements that managed care plans maintain provider networks sufficient to ensure adequate access to covered services by: (1) requiring states to develop quantitative network adequacy standards for at least eight specified provider types if covered under the contract, and to make these standards available online; (2) strengthening network adequacy monitoring requirements; and (3) addressing the needs of people with long-term care service needs (42 CFR 438.66; 42 CFR 438.68).

42 CFR 438.66(e) specifies that the MCPAR must provide information on and an assessment of the availability and accessibility of covered services within the MCO, PHIP, or PAHP contracts, including network adequacy standards for each managed care program.



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

1 / 35

C2.V.2 Measure standard

Contract shall offer participation agreements to all FQHCs enrolled with DMAP that are located in the State of Delaware, and such participation agreements must include at least the same service array as the State Medicaid FFS contracts with FQHCs.

C2.V.3 Standard type

Minimum number of network providers

C2.V.4 Provider

FQHC

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Geomapping Review of grievances related to access; Plan provider directory; MCO provider counts statewide and by county; Review of MCO PNDMP and MCO PNDMP Evaluation Report

C2.V.8 Frequency of oversight methods

Monthly /Biannually/Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

2 / 35

C2.V.2 Measure standard

Contractor shall offer participation agreements to all School-Based Wellness Centers (SBWCs) enrolled with DMAP, and such participation agreements must include at least the same service array covered by the State's Medicaid FFS program for the applicable SBWC.

C2.V.3 Standard type

Minimum number of network providers

C2.V.4 Provider

Primary care

C2.V.5 Region

Statewide

C2.V.6 Population

Pediatric

C2.V.7 Monitoring Methods

Geomapping, Geomapping, Review of grievances related to access; Plan provider directory; MCO provider counts statewide and by county; Review

C2.V.8 Frequency of oversight methods

Monthly Biannually, Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

3 / 35

C2.V.2 Measure standard

Contractor shall offer a participation agreement to the mobile vision vendor specified by the State to provide eye exams and eyeglasses to elementary school age children. Agreement must include at least the same service array covered by the State’s Medicaid FFS program for that vendor.

C2.V.3 Standard type

Minimum number of network providers

C2.V.4 Provider

Vision

C2.V.5 Region

Statewide

C2.V.6 Population

Pediatric

C2.V.7 Monitoring Methods

Geomapping, Geomapping, Review of grievances related to access; Plan provider directory; MCO provider counts statewide and by county; Review of MCO PNDMP and MCO PNDMP Evaluation Report

C2.V.8 Frequency of oversight methods

Monthly Biannually Annually-



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

4 / 35

C2.V.2 Measure standard

Contractor shall offer participation agreements to all providers that meet evidence-based criteria established by the Maternal, Infant, and Early Childhood Home Visiting program for the Nurse Family Partnership or Healthy Families America models in accordance with national and State standards (as established by DPH).

C2.V.3 Standard type

Minimum number of network providers

C2.V.4 Provider

C2.V.5 Region

C2.V.6 Population

Statewide

Adult and pediatric

Home Visiting
Providers

C2.V.7 Monitoring Methods

Geomapping, Geomapping, Review of grievances related to access; Plan provider directory; MCO provider counts statewide and by county; Review of MCO PNDMP and MCO PNDMP Evaluation Report

C2.V.8 Frequency of oversight methods

Monthly, Biannually, Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

5 / 35

C2.V.2 Measure standard

Contractor shall have provider participation agreements with mobile and facility-based crisis intervention providers certified by DSAMH.

C2.V.3 Standard type

Minimum number of network providers

C2.V.4 Provider

Behavioral health

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Geomapping, Review of grievances related to access; Plan provider directory; MCO provider counts statewide and by county; Review of MCO PNDMP and MCO PNDMP Evaluation Report

C2.V.8 Frequency of oversight methods

Monthly, Biannually, Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

6 / 35

C2.V.2 Measure standard

Contractor shall contract with an adequate number of prescribers that provide Medication for Opioid Use Disorder (MOUD) including Office Based Opioid Treatment (OBOT) and Opioid Treatment Programs (OTPs).

C2.V.3 Standard type

Minimum number of network providers

C2.V.4 Provider

Behavioral health

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Geomapping, Review of grievances related to access; Plan provider directory; MCO provider counts statewide and by county; Review of MCO PNDMP and MCO PNDMP Evaluation Report

C2.V.8 Frequency of oversight methods

Monthly, Biannually, Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

7 / 35

C2.V.2 Measure standard

1 full time equivalent PCP for every 2,500 DSHP/DSHP Plus members

C2.V.3 Standard type

Provider to enrollee ratios

C2.V.4 Provider

Primary care

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Geomapping; Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

8 / 35

C2.V.2 Measure standard

2 in 30 miles or 45 mins

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

Primary care

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

9 / 35

C2.V.2 Measure standard

1 in 30 miles or 45 mins

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

Specialist

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Review of grievances related to access, Geomapping

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

10 / 35

C2.V.2 Measure standard

1 in 30 miles or 45 mins

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

OBGYN

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



C2.V.1 General category: General quantitative availability and accessibility standard

11 / 35

C2.V.2 Measure standard

1 in 30 miles or 45 mins

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

Behavioral health

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



C2.V.1 General category: General quantitative availability and accessibility standard

12 / 35

C2.V.2 Measure standard

1 in 30 miles or 45 mins

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

Substance Use
Disorder

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



C2.V.1 General category: General quantitative availability and accessibility standard

13 / 35

C2.V.2 Measure standard

1 in 15 miles or 20 min

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

Hospital

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

14 / 35

C2.V.2 Measure standard

1 in 15 miles or 20 min

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

Pharmacy

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

15 / 35

C2.V.2 Measure standard

1 in 30 miles or 45 mins

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

C2.V.5 Region

C2.V.6 Population

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Monthly; Bi-Annually; Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

16 / 35

C2.V.2 Measure standard

Available 24/7

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Emergency services

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

17 / 35

C2.V.2 Measure standard

Available same day

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Emergency primary
care

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

18 / 35

C2.V.2 Measure standard

Available within 2 calendar days

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Urgent primary care

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

19 / 35

C2.V.2 Measure standard

Immediate

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Specialty emergency services

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

20 / 35

C2.V.2 Measure standard

Available within 48 hours of referral

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Urgent care specialty
primary care

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

21 / 35

C2.V.2 Measure standard

Available within 3 weeks of member request

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Specialty

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

22 / 35

C2.V.2 Measure standard

Immediate

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Maternity
emergency services

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

23 / 35

C2.V.2 Measure standard

1st Trimester: Within 3 weeks of first request

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

OB/GYN

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

24 / 35

C2.V.2 Measure standard

2nd Trimester: Within 7 calendar days of first request

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

OB/GYN

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

25 / 35

C2.V.2 Measure standard

3rd Trimester: Within 3 calendar days of first request

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

OB/GYN

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

26 / 35

C2.V.2 Measure standard

3rd Trimester: Within 3 calendar days of identification of high risk

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

OB/GYN

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

27 / 35

C2.V.2 Measure standard

Within 24 hrs. of request; immediate treatment for a potentially suicidal individual

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Behavioral health
emergency services

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

28 / 35

C2.V.2 Measure standard

Within one hour of request

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Mobile crisis team

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

29 / 35

C2.V.2 Measure standard

Within 7 calendar days of request

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

Behavioral health

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

30 / 35

C2.V.2 Measure standard

Contractor shall contract with sufficient providers such that DSHP Plus LTSS members have a travel distance of no more than 30 miles or 45 minutes between an appropriate facility placement for their individualized needs (such as, a nursing facility, assisted living facility, or adult day program) and the member's residence before entering the placement.

C2.V.3 Standard type

Maximum time or distance

C2.V.4 Provider

LTSS

C2.V.5 Region

Statewide

C2.V.6 Population

Adult and pediatric

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

31 / 35

C2.V.2 Measure standard

Contractor shall contract with sufficient providers to enable DSHP Plus LTSS members to have, at a minimum, a choice between two providers of personal care attendant services.

C2.V.3 Standard type

Minimum number of network providers

C2.V.4 Provider

LTSS

C2.V.5 Region

Statewide

C2.V.6 Population

Adult

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

32 / 35

C2.V.2 Measure standard

No more than 60 calendar days for minor home modifications.

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

LTSS

C2.V.5 Region

STATEWIDE

C2.V.6 Population

Adult

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



C2.V.1 General category: General quantitative availability and accessibility standard

33 / 35

C2.V.2 Measure standard

No more than ten calendar days for home delivered meals.

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

LTSS

C2.V.5 Region

Statewide

C2.V.6 Population

Adult

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

34 / 35

C2.V.2 Measure standard

No more than ten calendar days for personal care attendant services for new members.

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

LTSS-personal care
assistant

C2.V.5 Region

Statewide

C2.V.6 Population

Adult

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually



Complete

C2.V.1 General category: General quantitative availability and accessibility standard

35 / 35

C2.V.2 Measure standard

Immediately upon authorization for personal care attendant services for members currently placed in a nursing facility and transitioning to the community other than to assisted living.

C2.V.3 Standard type

Appointment wait time

C2.V.4 Provider

LTSS

C2.V.5 Region

Statewide

C2.V.6 Population

Adult

C2.V.7 Monitoring Methods

Geomapping, Review of grievances related to access

C2.V.8 Frequency of oversight methods

Annually

Topic IX: Beneficiary Support System (BSS)

Number	Indicator	Response
C1IX.1	<p>BSS website</p> <p>List the website(s) and/or email address that beneficiaries use to seek assistance from the BSS through electronic means. Separate entries with commas.</p>	N/A
C1IX.2	<p>BSS auxiliary aids and services</p> <p>How do BSS entities offer services in a manner that is accessible to all beneficiaries who need their services, including beneficiaries with disabilities, as required by 42 CFR 438.71(b)(2)? CFR 438.71 requires that the beneficiary support system be accessible in multiple ways including phone, Internet, in-person, and via auxiliary aids and services when requested.</p>	Telephone services include TTY, translation, and interpreter services
C1IX.3	<p>BSS LTSS program data</p> <p>How do BSS entities assist the state with identifying, remediating, and resolving systemic issues based on a review of LTSS program data such as grievances and appeals or critical incident data? Refer to 42 CFR 438.71(d)(4).</p>	N/A
C1IX.4	<p>State evaluation of BSS entity performance</p> <p>What are steps taken by the state to evaluate the quality, effectiveness, and efficiency of the BSS entities' performance?</p>	Contractual agreement requires monthly and quarterly reports that include call metrics, new member packet count, complaints, and requests to change plans

Topic X: Program Integrity

Number	Indicator	Response
C1X.3	Prohibited affiliation disclosure Did any plans disclose prohibited affiliations? If the state took action, enter those actions under D: Plan-level Indicators, Section VIII - Sanctions (Corresponds with Tab D3 in the Excel Workbook). Refer to 42 CFR 438.610(d).	No

Section D: Plan-Level Indicators

Topic I. Program Characteristics & Enrollment

Number	Indicator	Response
D11.1	<p>Plan enrollment</p> <p>What is the total number of individuals enrolled in each plan as of the first day of the last month of the reporting year?</p>	<p>AmeriHealth Caritas Delaware</p> <p>106,478</p> <p>Highmark Health Options</p> <p>161,629</p>
D11.2	<p>Plan share of Medicaid</p> <p>What is the plan enrollment (within the specific program) as a percentage of the state's total Medicaid enrollment?</p> <ul style="list-style-type: none"> • Numerator: Plan enrollment (D1.I.1) • Denominator: Statewide Medicaid enrollment (B.I.1) 	<p>AmeriHealth Caritas Delaware</p> <p>34%</p> <p>Highmark Health Options</p> <p>52%</p>
D11.3	<p>Plan share of any Medicaid managed care</p> <p>What is the plan enrollment (regardless of program) as a percentage of total Medicaid enrollment in any type of managed care?</p> <ul style="list-style-type: none"> • Numerator: Plan enrollment (D1.I.1) • Denominator: Statewide Medicaid managed care enrollment (B.I.2) 	<p>AmeriHealth Caritas Delaware</p> <p>40%</p> <p>Highmark Health Options</p> <p>60%</p>

Topic II. Financial Performance

Number	Indicator	Response
D1II.1a	<p>Medical Loss Ratio (MLR)</p> <p>What is the MLR percentage? Per 42 CFR 438.66(e)(2)(i), the Managed Care Program Annual Report must provide information on the Financial performance of each MCO, PIHP, and PAHP, including MLR experience. If MLR data are not available for this reporting period due to data lags, enter the MLR calculated for the most recently available reporting period and indicate the reporting period in item D1.II.3 below. See Glossary in Excel Workbook for the regulatory definition of MLR.</p>	<p>AmeriHealth Caritas Delaware</p> <p>92%</p> <p>Highmark Health Options</p> <p>91%</p>
D1II.1b	<p>Level of aggregation</p> <p>What is the aggregation level that best describes the MLR being reported in the previous indicator? Select one. As permitted under 42 CFR 438.8(i), states are allowed to aggregate data for reporting purposes across programs and populations.</p>	<p>AmeriHealth Caritas Delaware</p> <p>Statewide all programs & populations</p> <p>Highmark Health Options</p> <p>Statewide all programs & populations</p>
D1II.2	<p>Population specific MLR description</p> <p>Does the state require plans to submit separate MLR calculations for specific populations served within this program, for example, MLTSS or Group VIII expansion enrollees? If so, describe the populations here. Enter "N/A" if not applicable. See glossary for the regulatory definition of MLR.</p>	<p>AmeriHealth Caritas Delaware</p> <p>The State requires plans to submit separate MLR calculations for the SCHIP population and All Other Medicaid population. The percentage reported reflects the aggregate MLR for the SCHIP and All Other Medicaid population in total.</p> <p>Highmark Health Options</p> <p>The State requires plans to submit separate MLR calculations for the SCHIP population and All Other Medicaid population. The percentage reported reflects the aggregate MLR for the SCHIP and All Other Medicaid population in total.</p>
D1II.3	<p>MLR reporting period discrepancies</p> <p>Does the data reported in item D1.II.1a cover a different time period than the MCPAR report?</p>	<p>AmeriHealth Caritas Delaware</p> <p>Yes</p> <p>Highmark Health Options</p>

Yes

N/A

Enter the start date.

AmeriHealth Caritas Delaware

01/01/2021

Highmark Health Options

01/01/2021

N/A

Enter the end date.

AmeriHealth Caritas Delaware

12/31/2021

Highmark Health Options

12/31/2021

Topic III. Encounter Data

Number	Indicator	Response
D1III.1	<p>Definition of timely encounter data submissions</p> <p>Describe the state's standard for timely encounter data submissions used in this program. If reporting frequencies and standards differ by type of encounter within this program, please explain.</p>	<p>AmeriHealth Caritas Delaware</p> <p>The Contractor shall meet the State Encounter Data timeliness requirements by submitting to the State at least 90% of its claims, originals and adjustments, within 30 calendar days of the date of adjudication, and 99% within 60 calendar days of the date of adjudication in accord with the specifications included in the HIPAA Technical Review Guides, regardless of whether the Encounter Data is from a Subcontractor or subcapitated arrangement. The Contractor may not withhold submission of required Encounter Data without State approval.</p>
		<p>Highmark Health Options</p> <p>The Contractor shall meet the State Encounter Data timeliness requirements by submitting to the State at least 90% of its claims, originals and adjustments, within 30 calendar days of the date of adjudication, and 99% within 60 calendar days of the date of adjudication in accord with the specifications included in the HIPAA Technical Review Guides, regardless of whether the Encounter Data is from a Subcontractor or subcapitated arrangement. The Contractor may not withhold submission of required Encounter Data without State approval.</p>
D1III.2	<p>Share of encounter data submissions that met state's timely submission requirements</p> <p>What percent of the plan's encounter data file submissions (submitted during the reporting period) met state requirements for timely submission? If the state has not yet received any encounter data file submissions for the entire contract period when it submits this report, the state should enter here the percentage of encounter data submissions that were compliant out of the file submissions it has received</p>	<p>AmeriHealth Caritas Delaware</p> <p>99%</p> <p>Highmark Health Options</p> <p>99%</p>

from the managed care plan for the reporting period.

D1III.3	Share of encounter data submissions that were HIPAA compliant	AmeriHealth Caritas Delaware
		100%
	What percent of the plan's encounter data submissions (submitted during the reporting period) met state requirements for HIPAA compliance?	Highmark Health Options
	If the state has not yet received encounter data submissions for the entire contract period when it submits this report, enter here percentage of encounter data submissions that were compliant out of the proportion received from the managed care plan for the reporting period.	100%

Topic IV. Appeals, State Fair Hearings & Grievances

Appeals Overview

Number	Indicator	Response
D1IV.1	<p>Appeals resolved (at the plan level)</p> <p>Enter the total number of appeals resolved as of the first day of the last month of the reporting year. An appeal is "resolved" at the plan level when the plan has issued a decision, regardless of whether the decision was wholly or partially favorable or adverse to the beneficiary, and regardless of whether the beneficiary (or the beneficiary's representative) chooses to file a request for a State Fair Hearing or External Medical Review.</p>	<p>AmeriHealth Caritas Delaware</p> <p>343</p> <p>Highmark Health Options</p> <p>839</p>
D1IV.2	<p>Active appeals</p> <p>Enter the total number of appeals still pending or in process (not yet resolved) as of the first day of the last month of the reporting year.</p>	<p>AmeriHealth Caritas Delaware</p> <p>N/A</p> <p>Highmark Health Options</p> <p>N/A</p>
D1IV.3	<p>Appeals filed on behalf of LTSS users</p> <p>Enter the total number of appeals filed during the reporting year by or on behalf of LTSS users. Enter "N/A" if not applicable. An LTSS user is an enrollee who received at least one LTSS service at any point during the reporting year (regardless of whether the enrollee was actively receiving LTSS at the time that the appeal was filed).</p>	<p>AmeriHealth Caritas Delaware</p> <p>32</p> <p>Highmark Health Options</p> <p>95</p>
D1IV.4	<p>Number of critical incidents filed during the reporting period by (or on behalf of) an LTSS user who previously filed an appeal</p> <p>For managed care plans that cover LTSS, enter the number of critical incidents filed within the reporting period by (or on behalf of) LTSS users who previously filed appeals in the reporting year. If the managed care plan does not cover LTSS, enter "N/A".</p>	<p>AmeriHealth Caritas Delaware</p> <p>N/A</p> <p>Highmark Health Options</p> <p>N/A</p>

Also, if the state already submitted this data for the reporting year via the CMS readiness review appeal and grievance report (because the managed care program or plan were new or serving new populations during the reporting year), and the readiness review tool was submitted for at least 6 months of the reporting year, enter "N/A".

The appeal and critical incident do not have to have been "related" to the same issue - they only need to have been filed by (or on behalf of) the same enrollee. Neither the critical incident nor the appeal need to have been filed in relation to delivery of LTSS — they may have been filed for any reason, related to any service received (or desired) by an LTSS user.

To calculate this number, states or managed care plans should first identify the LTSS users for whom critical incidents were filed during the reporting year, then determine whether those enrollees had filed an appeal during the reporting year, and whether the filing of the appeal preceded the filing of the critical incident.

D1IV.5a	Standard appeals for which timely resolution was provided	AmeriHealth Caritas Delaware 336
	Enter the total number of standard appeals for which timely resolution was provided by plan during the reporting period. See 42 CFR §438.408(b)(2) for requirements related to timely resolution of standard appeals.	Highmark Health Options 822
D1IV.5b	Expedited appeals for which timely resolution was provided	AmeriHealth Caritas Delaware N/A
	Enter the total number of expedited appeals for which timely resolution was provided by plan during the reporting period. See 42 CFR §438.408(b)(3) for requirements related to timely resolution of standard appeals.	Highmark Health Options N/A

D1IV.6a	Resolved appeals related to denial of authorization or limited authorization of a service	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to the plan's denial of authorization for a service not yet rendered or limited authorization of a service. (Appeals related to denial of payment for a service already rendered should be counted in indicator D1.IV.6c).	N/A Highmark Health Options
		N/A
D1IV.6b	Resolved appeals related to reduction, suspension, or termination of a previously authorized service	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to the plan's reduction, suspension, or termination of a previously authorized service.	N/A Highmark Health Options
		N/A
D1IV.6c	Resolved appeals related to payment denial	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to the plan's denial, in whole or in part, of payment for a service that was already rendered.	N/A Highmark Health Options
		N/A
D1IV.6d	Resolved appeals related to service timeliness	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to the plan's failure to provide services in a timely manner (as defined by the state).	N/A Highmark Health Options
		N/A
D1IV.6e	Resolved appeals related to lack of timely plan response to an appeal or grievance	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to the plan's	N/A Highmark Health Options

failure to act within the timeframes provided at 42 CFR §438.408(b)(1) and (2) regarding the standard resolution of grievances and appeals.

N/A

D1IV.6f

Resolved appeals related to plan denial of an enrollee's right to request out-of-network care

Enter the total number of appeals resolved by the plan during the reporting year that were related to the plan's denial of an enrollee's request to exercise their right, under 42 CFR §438.52(b)(2)(ii), to obtain services outside the network (only applicable to residents of rural areas with only one MCO).

AmeriHealth Caritas Delaware

N/A

Highmark Health Options

N/A

D1IV.6g

Resolved appeals related to denial of an enrollee's request to dispute financial liability

Enter the total number of appeals resolved by the plan during the reporting year that were related to the plan's denial of an enrollee's request to dispute a financial liability.

AmeriHealth Caritas Delaware

N/A

Highmark Health Options

N/A

Appeals by Service

Number of appeals resolved during the reporting period related to various services. Note: A single appeal may be related to multiple service types and may therefore be counted in multiple categories.

Number	Indicator	Response
D1IV.7a	<p data-bbox="313 107 699 180">Resolved appeals related to general inpatient services</p> <p data-bbox="313 205 727 470">Enter the total number of appeals resolved by the plan during the reporting year that were related to general inpatient care, including diagnostic and laboratory services.</p> <p data-bbox="313 485 727 751">Do not include appeals related to inpatient behavioral health services – those should be included in indicator D1.IV.7c. If the managed care plan does not cover general inpatient services, enter "N/A".</p>	<p data-bbox="760 107 1182 134">AmeriHealth Caritas Delaware</p> <p data-bbox="760 163 808 191">N/A</p> <p data-bbox="760 268 1117 296">Highmark Health Options</p> <p data-bbox="760 325 808 352">N/A</p>
D1IV.7b	<p data-bbox="313 806 699 879">Resolved appeals related to general outpatient services</p> <p data-bbox="313 905 727 1346">Enter the total number of appeals resolved by the plan during the reporting year that were related to general outpatient care, including diagnostic and laboratory services. Please do not include appeals related to outpatient behavioral health services – those should be included in indicator D1.IV.7d. If the managed care plan does not cover general outpatient services, enter "N/A".</p>	<p data-bbox="760 806 1182 833">AmeriHealth Caritas Delaware</p> <p data-bbox="760 863 808 890">N/A</p> <p data-bbox="760 968 1117 995">Highmark Health Options</p> <p data-bbox="760 1024 808 1052">N/A</p>
D1IV.7c	<p data-bbox="313 1400 699 1509">Resolved appeals related to inpatient behavioral health services</p> <p data-bbox="313 1535 727 1814">Enter the total number of appeals resolved by the plan during the reporting year that were related to inpatient mental health and/or substance use services. If the managed care plan does not cover inpatient behavioral health services, enter "N/A".</p>	<p data-bbox="760 1400 1182 1428">AmeriHealth Caritas Delaware</p> <p data-bbox="760 1457 808 1484">N/A</p> <p data-bbox="760 1562 1117 1589">Highmark Health Options</p> <p data-bbox="760 1619 808 1646">N/A</p>
D1IV.7d	<p data-bbox="313 1869 727 1978">Resolved appeals related to outpatient behavioral health services</p> <p data-bbox="313 2003 727 2100">Enter the total number of appeals resolved by the plan during the reporting year that</p>	<p data-bbox="760 1869 1182 1896">AmeriHealth Caritas Delaware</p> <p data-bbox="760 1925 808 1953">N/A</p> <p data-bbox="760 2030 1117 2058">Highmark Health Options</p>

were related to outpatient mental health and/or substance use services. If the managed care plan does not cover outpatient behavioral health services, enter "N/A".

N/A

D1IV.7e	Resolved appeals related to covered outpatient prescription drugs	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to outpatient prescription drugs covered by the managed care plan. If the managed care plan does not cover outpatient prescription drugs, enter "N/A".	130
		Highmark Health Options
		388

D1IV.7f	Resolved appeals related to skilled nursing facility (SNF) services	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to SNF services. If the managed care plan does not cover skilled nursing services, enter "N/A".	N/A
		Highmark Health Options
		N/A

D1IV.7g	Resolved appeals related to long-term services and supports (LTSS)	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to institutional LTSS or LTSS provided through home and community-based (HCBS) services, including personal care and self-directed services. If the managed care plan does not cover LTSS services, enter "N/A".	N/A
		Highmark Health Options
		N/A

D1IV.7h	Resolved appeals related to dental services	AmeriHealth Caritas Delaware
	Enter the total number of appeals resolved by the plan during the reporting year that were related to dental services. If the managed care plan does not cover dental services, enter "N/A".	12
		Highmark Health Options
		7

D1IV.7i	Resolved appeals related to non-emergency medical transportation (NEMT) Enter the total number of appeals resolved by the plan during the reporting year that were related to NEMT. If the managed care plan does not cover NEMT, enter "N/A".	AmeriHealth Caritas Delaware N/A Highmark Health Options N/A
D1IV.7j	Resolved appeals related to other service types Enter the total number of appeals resolved by the plan during the reporting year that were related to services that do not fit into one of the categories listed above. If the managed care plan does not cover services other than those in items D1.IV.7a-i, enter "N/A".	AmeriHealth Caritas Delaware N/A Highmark Health Options N/A

State Fair Hearings

Number	Indicator	Response
D1IV.8a	State Fair Hearing requests Enter the total number of requests for a State Fair Hearing filed during the reporting year by plan that issued the adverse benefit determination.	AmeriHealth Caritas Delaware 38
		Highmark Health Options 9
D1IV.8b	State Fair Hearings resulting in a favorable decision for the enrollee Enter the total number of State Fair Hearing decisions rendered during the reporting year that were partially or fully favorable to the enrollee.	AmeriHealth Caritas Delaware 0
		Highmark Health Options 1
D1IV.8c	State Fair Hearings resulting in an adverse decision for the enrollee Enter the total number of State Fair Hearing decisions rendered during the reporting year that were adverse for the enrollee.	AmeriHealth Caritas Delaware 0
		Highmark Health Options 2
D1IV.8d	State Fair Hearings retracted prior to reaching a decision Enter the total number of State Fair Hearing decisions retracted (by the enrollee or the representative who filed a State Fair Hearing request on behalf of the enrollee) prior to reaching a decision.	AmeriHealth Caritas Delaware 1
		Highmark Health Options 3
D1IV.9a	External Medical Reviews resulting in a favorable decision for the enrollee If your state does offer an external medical review process, enter the total number of external medical review decisions rendered during the reporting year that were partially or fully favorable to the enrollee. If your state does not offer an external medical review process, enter "N/A". External medical review is defined and described at 42 CFR §438.402(c)(i)(B).	AmeriHealth Caritas Delaware N/A
		Highmark Health Options N/A

D1IV.9b

**External Medical Reviews
resulting in an adverse
decision for the enrollee**

AmeriHealth Caritas Delaware

N/A

If your state does offer an external medical review process, enter the total number of external medical review decisions rendered during the reporting year that were adverse to the enrollee. If your state does not offer an external medical review process, enter "N/A".

Highmark Health Options

N/A

External medical review is defined and described at 42 CFR §438.402(c)(i)(B).

Grievances Overview

Number	Indicator	Response
D1IV.10	<p data-bbox="313 107 592 134">Grievances resolved</p> <p data-bbox="313 163 722 394">Enter the total number of grievances resolved by the plan during the reporting year. A grievance is "resolved" when it has reached completion and been closed by the plan.</p>	<p data-bbox="760 107 1182 134">AmeriHealth Caritas Delaware</p> <p data-bbox="760 163 808 191">154</p> <p data-bbox="760 268 1117 296">Highmark Health Options</p> <p data-bbox="760 323 808 350">951</p>
D1IV.11	<p data-bbox="313 449 557 476">Active grievances</p> <p data-bbox="313 506 722 663">Enter the total number of grievances still pending or in process (not yet resolved) as of the first day of the last month of the reporting year.</p>	<p data-bbox="760 449 1182 476">AmeriHealth Caritas Delaware</p> <p data-bbox="760 506 808 533">N/A</p> <p data-bbox="760 611 1117 638">Highmark Health Options</p> <p data-bbox="760 665 808 693">N/A</p>
D1IV.12	<p data-bbox="313 785 722 856">Grievances filed on behalf of LTSS users</p> <p data-bbox="313 886 722 1388">Enter the total number of grievances filed during the reporting year by or on behalf of LTSS users. An LTSS user is an enrollee who received at least one LTSS service at any point during the reporting year (regardless of whether the enrollee was actively receiving LTSS at the time that the grievance was filed). If this does not apply, enter N/A.</p>	<p data-bbox="760 785 1182 812">AmeriHealth Caritas Delaware</p> <p data-bbox="760 842 792 869">62</p> <p data-bbox="760 947 1117 974">Highmark Health Options</p> <p data-bbox="760 1001 808 1029">541</p>
D1IV.13	<p data-bbox="313 1446 722 1640">Number of critical incidents filed during the reporting period by (or on behalf of) an LTSS user who previously filed a grievance</p> <p data-bbox="313 1669 722 2091">For managed care plans that cover LTSS, enter the number of critical incidents filed within the reporting period by (or on behalf of) LTSS users who previously filed grievances in the reporting year. The grievance and critical incident do not have to have been "related" to the same issue - they only need to have been</p>	<p data-bbox="760 1446 1182 1474">AmeriHealth Caritas Delaware</p> <p data-bbox="760 1503 808 1530">N/A</p> <p data-bbox="760 1608 1117 1635">Highmark Health Options</p> <p data-bbox="760 1663 808 1690">N/A</p>

filed by (or on behalf of) the same enrollee. Neither the critical incident nor the grievance need to have been filed in relation to delivery of LTSS - they may have been filed for any reason, related to any service received (or desired) by an LTSS user.

If the managed care plan does not cover LTSS, the state should enter "N/A" in this field.

Additionally, if the state already submitted this data for the reporting year via the CMS readiness review appeal and grievance report (because the managed care program or plan were new or serving new populations during the reporting year), and the readiness review tool was submitted for at least 6 months of the reporting year, the state can enter "N/A" in this field.

To calculate this number, states or managed care plans should first identify the LTSS users for whom critical incidents were filed during the reporting year, then determine whether those enrollees had filed a grievance during the reporting year, and whether the filing of the grievance preceded the filing of the critical incident.

D1IV.14

Number of grievances for which timely resolution was provided

Enter the number of grievances for which timely resolution was provided by plan during the reporting period.

See 42 CFR §438.408(b)(1) for requirements related to the timely resolution of grievances.

AmeriHealth Caritas Delaware

N/A

Highmark Health Options

N/A

Grievances by Service

Report the number of grievances resolved by plan during the reporting period by service.

Number	Indicator	Response
D1IV.15a	<p data-bbox="316 105 722 178">Resolved grievances related to general inpatient services</p> <p data-bbox="316 199 722 640">Enter the total number of grievances resolved by the plan during the reporting year that were related to general inpatient care, including diagnostic and laboratory services. Do not include grievances related to inpatient behavioral health services — those should be included in indicator D1.IV.15c. If the managed care plan does not cover this type of service, enter "N/A".</p>	<p data-bbox="763 105 1185 189">AmeriHealth Caritas Delaware N/A</p> <p data-bbox="763 262 1185 346">Highmark Health Options N/A</p>
D1IV.15b	<p data-bbox="316 693 722 808">Resolved grievances related to general outpatient services</p> <p data-bbox="316 829 722 1270">Enter the total number of grievances resolved by the plan during the reporting year that were related to general outpatient care, including diagnostic and laboratory services. Do not include grievances related to outpatient behavioral health services — those should be included in indicator D1.IV.15d. If the managed care plan does not cover this type of service, enter "N/A".</p>	<p data-bbox="763 693 1185 777">AmeriHealth Caritas Delaware N/A</p> <p data-bbox="763 850 1185 934">Highmark Health Options N/A</p>
D1IV.15c	<p data-bbox="316 1323 722 1438">Resolved grievances related to inpatient behavioral health services</p> <p data-bbox="316 1459 722 1743">Enter the total number of grievances resolved by the plan during the reporting year that were related to inpatient mental health and/or substance use services. If the managed care plan does not cover this type of service, enter "N/A".</p>	<p data-bbox="763 1323 1185 1407">AmeriHealth Caritas Delaware N/A</p> <p data-bbox="763 1480 1185 1564">Highmark Health Options N/A</p>

D1IV.15d	Resolved grievances related to outpatient behavioral health services	AmeriHealth Caritas Delaware
	Enter the total number of grievances resolved by the plan during the reporting year that were related to outpatient mental health and/or substance use services. If the managed care plan does not cover this type of service, enter "N/A".	N/A Highmark Health Options N/A
D1IV.15e	Resolved grievances related to coverage of outpatient prescription drugs	AmeriHealth Caritas Delaware
	Enter the total number of grievances resolved by the plan during the reporting year that were related to outpatient prescription drugs covered by the managed care plan. If the managed care plan does not cover this type of service, enter "N/A".	22 Highmark Health Options 4
D1IV.15f	Resolved grievances related to skilled nursing facility (SNF) services	AmeriHealth Caritas Delaware
	Enter the total number of grievances resolved by the plan during the reporting year that were related to SNF services. If the managed care plan does not cover this type of service, enter "N/A".	N/A Highmark Health Options N/A
D1IV.15g	Resolved grievances related to long-term services and supports (LTSS)	AmeriHealth Caritas Delaware
	Enter the total number of grievances resolved by the plan during the reporting year that were related to institutional LTSS or LTSS provided through home and community-based (HCBS) services, including personal care and self-directed services. If the managed care plan does not cover this type of service, enter "N/A".	N/A Highmark Health Options N/A
D1IV.15h	Resolved grievances related to dental services	AmeriHealth Caritas Delaware
	Enter the total number of grievances resolved by the plan	11

during the reporting year that were related to dental services. If the managed care plan does not cover this type of service, enter "N/A".

Highmark Health Options

22

D1IV.15i

Resolved grievances related to non-emergency medical transportation (NEMT)

AmeriHealth Caritas Delaware

N/A

Enter the total number of grievances resolved by the plan during the reporting year that were related to NEMT. If the managed care plan does not cover this type of service, enter "N/A".

Highmark Health Options

N/A

D1IV.15j

Resolved grievances related to other service types

AmeriHealth Caritas Delaware

8

Enter the total number of grievances resolved by the plan during the reporting year that were related to services that do not fit into one of the categories listed above. If the managed care plan does not cover services other than those in items D1.IV.15a-i, enter "N/A".

Highmark Health Options

64

Grievances by Reason

Report the number of grievances resolved by plan during the reporting period by reason.

Number	Indicator	Response
D1IV.16a	<p>Resolved grievances related to plan or provider customer service</p> <p>Enter the total number of grievances resolved by the plan during the reporting year that were related to plan or provider customer service. Customer service grievances include complaints about interactions with the plan's Member Services department, provider offices or facilities, plan marketing agents, or any other plan or provider representatives.</p>	<p>AmeriHealth Caritas Delaware</p> <p>2</p> <p>Highmark Health Options</p> <p>39</p>
D1IV.16b	<p>Resolved grievances related to plan or provider care management/case management</p> <p>Enter the total number of grievances resolved by the plan during the reporting year that were related to plan or provider care management/case management. Care management/case management grievances include complaints about the timeliness of an assessment or complaints about the plan or provider care or case management process.</p>	<p>AmeriHealth Caritas Delaware</p> <p>N/A</p> <p>Highmark Health Options</p> <p>N/A</p>
D1IV.16c	<p>Resolved grievances related to access to care/services from plan or provider</p> <p>Enter the total number of grievances resolved by the plan during the reporting year that were related to access to care.</p>	<p>AmeriHealth Caritas Delaware</p> <p>77</p> <p>Highmark Health Options</p> <p>93</p>

Access to care grievances include complaints about difficulties finding qualified in-network providers, excessive travel or wait times, or other access issues.

D1IV.16d	Resolved grievances related to quality of care Enter the total number of grievances resolved by the plan during the reporting year that were related to quality of care. Quality of care grievances include complaints about the effectiveness, efficiency, equity, patient-centeredness, safety, and/or acceptability of care provided by a provider or the plan.	AmeriHealth Caritas Delaware 13 Highmark Health Options 217
D1IV.16e	Resolved grievances related to plan communications Enter the total number of grievances resolved by the plan during the reporting year that were related to plan communications. Plan communication grievances include grievances related to the clarity or accuracy of enrollee materials or other plan communications or to an enrollee's access to or the accessibility of enrollee materials or plan communications.	AmeriHealth Caritas Delaware N/A Highmark Health Options N/A
D1IV.16f	Resolved grievances related to payment or billing issues Enter the total number of grievances resolved during the reporting period that were filed for a reason related to payment or billing issues.	AmeriHealth Caritas Delaware 46 Highmark Health Options 188
D1IV.16g	Resolved grievances related to suspected fraud Enter the total number of grievances resolved during the reporting year that were	AmeriHealth Caritas Delaware N/A Highmark Health Options

related to suspected fraud. Suspected fraud grievances include suspected cases of financial/payment fraud perpetrated by a provider, payer, or other entity. Note: grievances reported in this row should only include grievances submitted to the managed care plan, not grievances submitted to another entity, such as a state Ombudsman or Office of the Inspector General.

N/A

D1IV.16h

Resolved grievances related to abuse, neglect or exploitation

AmeriHealth Caritas Delaware

N/A

Enter the total number of grievances resolved during the reporting year that were related to abuse, neglect or exploitation.

Highmark Health Options

N/A

Abuse/neglect/exploitation grievances include cases involving potential or actual patient harm.

D1IV.16i

Resolved grievances related to lack of timely plan response to a service authorization or appeal (including requests to expedite or extend appeals)

AmeriHealth Caritas Delaware

N/A

Enter the total number of grievances resolved during the reporting year that were filed due to a lack of timely plan response to a service authorization or appeal request (including requests to expedite or extend appeals).

Highmark Health Options

N/A

D1IV.16j

Resolved grievances related to plan denial of expedited appeal

AmeriHealth Caritas Delaware

N/A

Enter the total number of grievances resolved during the reporting year that were related to the plan's denial of an enrollee's request for an expedited appeal.

Highmark Health Options

N/A

Per 42 CFR §438.408(b)(3), states must establish a timeframe for timely resolution of expedited appeals that is no longer than 72 hours after the MCO, PIHP or PAHP receives the appeal. If a plan denies a request for an expedited appeal, the enrollee or their representative have the right to file a grievance.

D1IV.16k	Resolved grievances filed for other reasons	AmeriHealth Caritas Delaware
	Enter the total number of grievances resolved during the reporting period that were filed for a reason other than the reasons listed above.	14
		Highmark Health Options
		65

Topic VII: Quality & Performance Measures

Report on individual measures in each of the following eight domains: (1) Primary care access and preventive care, (2) Maternal and perinatal health, (3) Care of acute and chronic conditions, (4) Behavioral health care, (5) Dental and oral health services, (6) Health plan enrollee experience of care, (7) Long-term services and supports, and (8) Other. For composite measures, be sure to include each individual sub-measure component.



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI percentile (12-17)

1 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number
24

D2.VII.4 Measure Reporting and D2.VII.5 Programs
Cross-program rate: Medicaid Chip

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range
Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware
77.61

Highmark Health Options
72.66



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI percentile (3-11)

2 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number
24

D2.VII.4 Measure Reporting and D2.VII.5 Programs
Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range
Yes

D2.VII.8 Measure Description

NA

Measure results

AmeriHealth Caritas Delaware

87.98

Highmark Health Options

83.75



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI percentile (Total)

3 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.92

Highmark Health Options

80.29



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Nutrition (12-17)

4 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

74.63

Highmark Health Options

59.38



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Nutrition (3-11)

5 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

87.50

Highmark Health Options

77.39



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Nutrition (Total)

6 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

82.46

Highmark Health Options

71.78



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Physical Activity (12-17)

7 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

HEDIS

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

77.61

Highmark Health Options

62.50



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Physical Activity (3-11)

8 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

79.81

Highmark Health Options

73.50



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Physical Activity (Total)

9 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

78.95

Highmark Health Options

70.07



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - DTaP

10 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

73.24

Highmark Health Options

76.64



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - IPV

11 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

85.64

Highmark Health Options

92.21



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - MMR

12 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.7

Highmark Health Options

88.56



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - HiB

13 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

85.4

Highmark Health Options

90.27



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Hepatitis B 14 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

85.64

Highmark Health Options

92.48



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - VZV

15 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.21

Highmark Health Options

88.81



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Pneumococcal Conjugate

16 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

72.99

Highmark Health Options

76.64



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Hepatitis A 17 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

80.78

Highmark Health Options

84.67



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Rotavirus 18 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

67.15

Highmark Health Options

72.51



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Influenza 19 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

51.82

Highmark Health Options

52.55



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Combo 3

20 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

68.37

Highmark Health Options

72.02



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Combo 7 21 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

56.45

Highmark Health Options

59.61



Complete

D2.VII.1 Measure Name: Childhood Immunization Status - Combo 10 22 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

38.69

Highmark Health Options

40.63



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents - Meningococcal

23 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

66.18

Highmark Health Options

76.89



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents - Tdap

24 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

72.99

Highmark Health Options

82.73



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents - HPV

25 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

35.52

Highmark Health Options

51.82



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents - Combination 1 26 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

65.69

Highmark Health Options

76.4



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents - Combination 2 27 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

30.66

Highmark Health Options

47.2



Complete

D2.VII.1 Measure Name: Lead Screening in Children

28 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

62.6

Highmark Health Options

78.1



Complete

D2.VII.1 Measure Name: Breast Cancer Screening

29 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

2372

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

48.09

Highmark Health Options

52.52



Complete

D2.VII.1 Measure Name: Cervical Cancer Screening

30 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

32

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

52.8

Highmark Health Options

63.5



Complete

D2.VII.1 Measure Name: Chlamydia Screening in Women (16-20)

31 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

32

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

57.17

Highmark Health Options

60.58



Complete

D2.VII.1 Measure Name: Chlamydia Screening in Women (21-24)

32 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

32

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

69.22

Highmark Health Options

66.38



Complete

D2.VII.1 Measure Name: Chlamydia Screening in Women (Total)

33 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

33

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

63.83

Highmark Health Options

62.93



Complete

D2.VII.1 Measure Name: Appropriate Testing for Pharyngitis (18-64)

34 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

33

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

49.74

Highmark Health Options

57.00



Complete

D2.VII.1 Measure Name: Appropriate Testing for Pharyngitis (3-17)

35 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

33

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

77.73

Highmark Health Options

72.78



Complete

D2.VII.1 Measure Name: Appropriate Testing for Pharyngitis (Total) 36 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

33

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

61.87

Highmark Health Options

65.27



Complete

D2.VII.1 Measure Name: Use of Spirometry Testing in the Assessment and Diagnosis of COPD 37 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

577

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

22.16

Highmark Health Options

26.91



Complete

D2.VII.1 Measure Name: Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid

38 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

2856

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

73.32

Highmark Health Options

77.53



Complete

D2.VII.1 Measure Name: Pharmacotherapy Management of COPD Exacerbation - Bronchodilator

39 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

2856

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

90.91

Highmark Health Options

85.9



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio (12-18)

40 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

38.40

Highmark Health Options

60.95



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio (19-50)

41 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

44.05

Highmark Health Options

61.22



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio (5-11)

42 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

64.42

Highmark Health Options

70.44



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio (51-64)

43 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

47.77

Highmark Health Options

65.55



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio (Total)

44 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.26

Highmark Health Options

64.04



Complete

D2.VII.1 Measure Name: Controlling High Blood Pressure

45 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

18

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

51.09



Complete

D2.VII.1 Measure Name: Persistence of Beta-Blocker Treatment After Heart Attack 16 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

71

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

85.37

Highmark Health Options

76.6



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Cardiovascular Disease - Received Statin Therapy (Total)

47 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

81.51

Highmark Health Options

80.25



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Cardiovascular Disease - Statin Adherence 80% (Total)

48 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

69.75

Highmark Health Options

63.86



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Initiation (18-64)

49 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.64

Highmark Health Options

1.90



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Initiation (65+)

50 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.0

Highmark Health Options

0.0



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Initiation (Total)

51 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.58

Highmark Health Options

1.89



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Engagement1 (18-64) 52 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

8.61

Highmark Health Options

3.81



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Engagement1 (65+) 53 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.0

Highmark Health Options

0.0



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Engagement1 (Total) 54 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

8.5

Highmark Health Options

3.77



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Engagement2 (18-64)^{55 / 329}

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

7.28

Highmark Health Options

4.29



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Engagement2 (65+) 56 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.0

Highmark Health Options

0.0



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Engagement2 (Total) 57 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

7.19

Highmark Health Options

4.25



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Achievement (18-64) 58 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

1.99

Highmark Health Options

2.38



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Achievement (65+) 59 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.0

Highmark Health Options

0.0



Complete

D2.VII.1 Measure Name: Cardiac Rehabilitation - Achievement (Total) 60 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

1.96



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care - HbA1c Testing 1 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

80.29

Highmark Health Options

88.32



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care - Poor HbA1c Control 62 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

59

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.74

Highmark Health Options

35.04



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care - HbA1c Control 63 / 329
(<8%)

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

575

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.96

Highmark Health Options

55.47



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care - Eye Exams 64 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

55

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

55.96

Highmark Health Options

45.74



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care - Blood Pressure Control (greater than 140/90)

65 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

61

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

60.34

Highmark Health Options

58.39



Complete

D2.VII.1 Measure Name: Kidney Health Evaluation for Patients With Diabetes (18-64) 66 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

32.66

Highmark Health Options

36.08



Complete

D2.VII.1 Measure Name: Kidney Health Evaluation for Patients With Diabetes (65-74) 67 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

12.90

Highmark Health Options

31.88



Complete

D2.VII.1 Measure Name: Kidney Health Evaluation for Patients With Diabetes (75-85) 68 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.0

Highmark Health Options

54.55



Complete

D2.VII.1 Measure Name: Kidney Health Evaluation for Patients With Diabetes (Total) 69 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

32.17

Highmark Health Options

36.01



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Cardiovascular Disease - Received Statin Therapy (F 40-75)

70 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

78.13



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Cardiovascular Disease - Received Statin Therapy (M 21-75)

71 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.45

Highmark Health Options

82.90



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Diabetes - Received Statin Therapy

72 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

66.32

Highmark Health Options

64.71



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Cardiovascular Disease - Statin Adherence 80% (F 40-75)

73 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

71.20

Highmark Health Options

62.50



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Cardiovascular Disease - Statin Adherence 80% (M 21-75)

74 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

68.97

Highmark Health Options

64.76



Complete

D2.VII.1 Measure Name: Statin Therapy for Patients With Diabetes - Statin Adherence 80% 75 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

63.31

Highmark Health Options

59.24



Complete

D2.VII.1 Measure Name: Antidepressant Medication Management - Effective Acute Phase Treatment 76 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

105

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

57.05

Highmark Health Options

56.88



Complete

D2.VII.1 Measure Name: Antidepressant Medication Management - Effective Continuation Phase Treatment 77 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

105

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

42.14

Highmark Health Options

39.83



Complete

D2.VII.1 Measure Name: Follow-Up Care for Children Prescribed ADHD⁷⁸ / 329 Medication - Initiation Phase

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

108

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

38.74

Highmark Health Options

32.15



Complete

D2.VII.1 Measure Name: Follow-Up Care for Children Prescribed ADHD⁷⁹ / 329 Medication - Continuation and Maintenance Phase

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

108

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

51.06

Highmark Health Options

39.49



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸⁰ / 329 for Alcohol and Other Drug Abuse or Dependence - 30 days (13-17)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.0

Highmark Health Options

0.0



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸¹ / 329 for Alcohol and Other Drug Abuse or Dependence - 30 days (18+)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

24.43

Highmark Health Options

16.94



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸² / 329 for Alcohol and Other Drug Abuse or Dependence - 30 days (Total)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

24.27

Highmark Health Options

16.48



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸³ / 329 for Alcohol and Other Drug Abuse or Dependence - 7 days (13-17)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.0

Highmark Health Options

0.0



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸⁴ / 329 for Alcohol and Other Drug Abuse or Dependence - 7 days (18+)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

12.67

Highmark Health Options

8.99



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸⁵ / 329 for Alcohol and Other Drug Abuse or Dependence - 7 days (Total)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

12.58

Highmark Health Options

8.74



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸⁶ / 329 for Mental Illness - 30 days (18-64)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

39.86

Highmark Health Options

43.43



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸⁷ / 329 for Mental Illness - 30 days (6-17)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

57.32

Highmark Health Options

55.17



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸⁸ / 329 for Mental Illness - 30 days (Total)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

43.85

Highmark Health Options

49.03



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁸⁹ / 329 for Mental Illness - 7 days (18-64)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

29.71

Highmark Health Options

30.58



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit⁹⁰ / 329 for Mental Illness - 7 days (6-17)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

31.71

Highmark Health Options

25.17



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit for Mental Illness - 7 days (Total) 91 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

30.17

Highmark Health Options

28.16



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization For Mental Illness - 30 days (18-64) 92 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

48.26

Highmark Health Options

43.80



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization For Mental Illness - 30 days (65+) 93 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid Chip LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

25.00

Highmark Health Options

40.82



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization For Mental Illness - 30 days (Total) 94 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

48.17

Highmark Health Options

43.61



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization For Mental Illness - 7 days (18-64) 95 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

30.14

Highmark Health Options

27.72



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization For Mental Illness - 7 days (65+) 96 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

25.0

Highmark Health Options

8.16



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization For Mental Illness - 7 days (Total) 97 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

30.12

Highmark Health Options

26.91



Complete

D2.VII.1 Measure Name: Follow-Up After High-Intensity Care for Substance Use Disorder - 30 Days (18-64)

98 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

62.17

Highmark Health Options

56.83



Complete

D2.VII.1 Measure Name: Follow-Up After High-Intensity Care for Substance Use Disorder - 30 Days (65+)

99 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.33

Highmark Health Options

100.0



Complete

D2.VII.1 Measure Name: Follow-Up After High-Intensity Care for Substance Use Disorder - 30 Days (Total)

100 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

62.10

Highmark Health Options

56.85



Complete

D2.VII.1 Measure Name: Follow-Up After High-Intensity Care for Substance Use Disorder - 7 Days (18-64)

101 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

42.90

Highmark Health Options

39.32



Complete

D2.VII.1 Measure Name: Follow-Up After High-Intensity Care for Substance Use Disorder - 7 Days (65+)

102 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.33

Highmark Health Options

100.0



Complete

D2.VII.1 Measure Name: Follow-Up After High-Intensity Care for Substance Use Disorder - 7 Days (Total)

103 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

42.87

Highmark Health Options

39.35



Complete

D2.VII.1 Measure Name: Pharmacotherapy for Opioid Use Disorder (164 / 329 64)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.04

Highmark Health Options

72.67



Complete

D2.VII.1 Measure Name: Pharmacotherapy for Opioid Use Disorder (65+) 105 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

57.14

Highmark Health Options

60.0



Complete

D2.VII.1 Measure Name: Pharmacotherapy for Opioid Use Disorder (Total) 106 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid Chip LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.15

Highmark Health Options

58.9



Complete

D2.VII.1 Measure Name: Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications 107 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

1932

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

68.73

Highmark Health Options

71.13



Complete

D2.VII.1 Measure Name: Diabetes Monitoring for People With Diabetes and Schizophrenia 188 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

54.69

Highmark Health Options

72.67



Complete

D2.VII.1 Measure Name: Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia 109 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid Chip LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

44.44

Highmark Health Options

61.74



Complete

D2.VII.1 Measure Name: Adherence to Antipsychotic Medications for Individuals With Schizophrenia 110 / 329**D2.VII.2 Measure Domain**

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

63.46

Highmark Health Options



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose Testing (1-11)

111 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

69.57

Highmark Health Options

63.68



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose Testing (12-17)

112 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

57.14

Highmark Health Options

60.66



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose Testing (Total)

113 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

60.76

Highmark Health Options

61.74



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Cholesterol Testing (1-11)

114 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

56.52

Highmark Health Options

55.13



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Cholesterol Testing (12-17)

115 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

42.86

Highmark Health Options

55.92



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Cholesterol Testing (Total)

116 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.84

Highmark Health Options

55.64



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose and Cholesterol Testing (1-11)

117 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

56.25

Highmark Health Options

51.71



Complete

D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose and Cholesterol Testing (12-17)

118 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

40.18

Highmark Health Options

50.71



D2.VII.1 Measure Name: Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose and Cholesterol Testing (Total)

119 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number
2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs
Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range
Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware
44.94

Highmark Health Options
51.07



D2.VII.1 Measure Name: Non-Recommended Cervical Cancer Screening in Adolescent Females

120 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number
N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs
Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range
Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.27

Highmark Health Options

91.38



Complete

D2.VII.1 Measure Name: Appropriate Treatment for Upper Respiratory Infection (18-64) 121 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

69

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

81.06

Highmark Health Options

81.81



Complete

D2.VII.1 Measure Name: Appropriate Treatment for Upper Respiratory Infection (3 Months-17 Years) 122 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

69

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

69

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

96.24

Highmark Health Options

94.84



Complete

D2.VII.1 Measure Name: Appropriate Treatment for Upper Respiratory Infection (65+) 123 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

69

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

100.00

Highmark Health Options

100.00



D2.VII.1 Measure Name: Appropriate Treatment for Upper Respiratory Infection (Total) 124 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

69

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicare CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

92.39

Highmark Health Options

91.38



D2.VII.1 Measure Name: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (18-64) 125 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

36.11

Highmark Health Options

30.86



Complete

**D2.VII.1 Measure Name: Avoidance of Antibiotic Treatment for Acute¹²⁶ / 329
Bronchitis/Bronchiolitis (3 Months-17 Years)**

D2.VII.2 Measure Domain

Overuse/Appropriateness

**D2.VII.3 National Quality
Forum (NQF) number**

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

**D2.VII.7a Reporting Period and D2.VII.7b Reporting
period: Date range**

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

77.31

Highmark Health Options

59.53



Complete

**D2.VII.1 Measure Name: Avoidance of Antibiotic Treatment for Acute¹²⁷ / 329
Bronchitis/Bronchiolitis (Total)**

D2.VII.2 Measure Domain

Overuse/Appropriateness

**D2.VII.3 National Quality
Forum (NQF) number**

58

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

57.03

Highmark Health Options

43.40



Complete

D2.VII.1 Measure Name: Use of Imaging Studies for Low Back Pain

128 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

79.45

Highmark Health Options

78.23



D2.VII.1 Measure Name: Use of Opioids at High Dosage

129 / 329

Complete

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.7

Highmark Health Options

8.37



D2.VII.1 Measure Name: Use of Opioids From Multiple Providers - Multiple Prescribers

130 / 329

Complete

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

28.24

Highmark Health Options

3.41



Complete

D2.VII.1 Measure Name: Use of Opioids From Multiple Providers - Multiple Pharmacies 131 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

2.26

Highmark Health Options

28.87



Complete

D2.VII.1 Measure Name: Use of Opioids From Multiple Providers - Multiple Prescribers and Multiple Pharmacies 132 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

N/A

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.98

Highmark Health Options

2.01



D2.VII.1 Measure Name: Risk of Continued Opioid Use - >=15 Days (18⁴³³ / 329 64)

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set
HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

6.62

Highmark Health Options

7.34



D2.VII.1 Measure Name: Risk of Continued Opioid Use - >=15 Days (65134 / 329)

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.30

Highmark Health Options

7.69



D2.VII.1 Measure Name: Risk of Continued Opioid Use - >=15 Days (Total) 135 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

6.65

Highmark Health Options

7.34



Complete

D2.VII.1 Measure Name: Risk of Continued Opioid Use - >=31 Days (18436 / 32964)

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.74

Highmark Health Options

5.42



Complete

D2.VII.1 Measure Name: Risk of Continued Opioid Use - >=31 Days (6517 / 32964)

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

0.00

Highmark Health Options

0.00



Complete

D2.VII.1 Measure Name: Risk of Continued Opioid Use - >=31 Days (Total)

138 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

4.73

Highmark Health Options

5.41



D2.VII.1 Measure Name: Adults' Access to Preventive/Ambulatory Health Services (20-44)

139 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

68.34

Highmark Health Options

74.79



D2.VII.1 Measure Name: Adults' Access to Preventive/Ambulatory Health Services (45-64)

140 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

79.56

Highmark Health Options

82.83



Complete

D2.VII.1 Measure Name: Adults' Access to Preventive/Ambulatory Health Services (65+)

141 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

80.91

Highmark Health Options

81.52



Complete

D2.VII.1 Measure Name: Adults' Access to Preventive/Ambulatory Health Services (Total)

142 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

N/A

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

72.23

Highmark Health Options

77.45



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Alcohol Abuse or Dependence (18+)

143 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

16.15

Highmark Health Options

16.67



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Engagement of AOD - Alcohol Abuse or Dependence (Total) 144 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

16.15

Highmark Health Options

14.37



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Opioid Abuse or Dependence (18+) 145 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

34.87

Highmark Health Options

43.07



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Engagement of AOD - Opioid Abuse or Dependence (Total) 146 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

34.87

Highmark Health Options

42.94



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Other Drug Abuse or Dependence (18+) 147 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

15.68

Highmark Health Options

11.93



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Engagement of AOD - Other Drug Abuse or Dependence (Total) 148 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

15.68

Highmark Health Options

11.65



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Total (18+) 149 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

22.47

Highmark Health Options

23.14



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Engagement of AOD - Total (Total) 150 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

HEDIS

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

22.47

Highmark Health Options

22.73



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Opioid Abuse or Dependence (18+) 151 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.24

Highmark Health Options

45.49



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Alcohol Abuse or Dependence (Total) 152 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.24

Highmark Health Options

45.27



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Opioid Abuse or Dependence (18+) 153 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

55.85

Highmark Health Options

68.89



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Opioid Abuse or Dependence (Total) 154 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

55.85

Highmark Health Options

68.83



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Other Drug Abuse or Dependence (Total) 155 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

44.41

Highmark Health Options

44.49



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Other Drug Abuse or Dependence (Total) 156 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

44.41

Highmark Health Options

43.35



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Total (18+) 157 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.67

Highmark Health Options

51.02



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - Initiation of AOD - Total (Total) 158 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

HEDIS Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.67

Highmark Health Options

50.33

 Complete

D2.VII.1 Measure Name: Prenatal and Postpartum Care - Timeliness of Prenatal Care 159 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

1517

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.67

Highmark Health Options

75.86

 Complete

D2.VII.1 Measure Name: Prenatal and Postpartum Care - Postpartum Care 160 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

83.7

Highmark Health Options

93.10



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (1-11)

161 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

2801

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

Medicaid CHIP LTSS

Measure results**AmeriHealth Caritas Delaware**

73.91

Highmark Health Options



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (12-17)

162 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

2801

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

57.78%

Highmark Health Options

47.52%



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (Total)

163 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

2801

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

63.24

Highmark Health Options

51.46



Complete

D2.VII.1 Measure Name: Well-Child Visits in the First 30 Months of Life (First 15 Months) 164 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1392

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

61.59

Highmark Health Options

62.02



Complete

D2.VII.1 Measure Name: Well-Child Visits in the First 30 Months of Life (15 Months-30 Months) 165 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1392

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

71.55

Highmark Health Options

75.50



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (12-17)^{166 / 329}

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

56.58

Highmark Health Options

59.50



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (18-21) 167 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

25.57

Highmark Health Options

29.99



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (3-11) 168 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

63.60

Highmark Health Options

66.49



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (Total) 169 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

HEDIS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

55.00

Highmark Health Options

58.41



Complete

D2.VII.1 Measure Name: 30-day hospital Readmission Rate

170 / 329

D2.VII.2 Measure Domain

Overuse/Appropriateness

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Cross-program rate: Medicaid CHIP LTSS

D2.VII.6 Measure Set

Re-admission event occurring within 30 days of discharge from a prior qualifying admission event/Discreet count of admission events, regardless of diagnosis, age, sex, and/or qualifying facility type

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

11.42

Highmark Health Options

15.99



Complete

D2.VII.1 Measure Name: Adult Survey: Getting Needed Care (Usually +71 / 329 Always)

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

82.70

Highmark Health Options

82.50



Complete

D2.VII.1 Measure Name: Adult Survey: Getting Care Quickly (Usually + Always) #72 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

81.90

Highmark Health Options

82.80



Complete

D2.VII.1 Measure Name: Adult Survey: How Well Doctors Communicate (Usually + Always) #73 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

6

D2.VII.6 Measure Set
CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

92.60

Highmark Health Options

92.20



Complete

D2.VII.1 Measure Name: Adult Survey: Rating of All Health Care (9+10)⁷⁴ / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

50.40

Highmark Health Options

60.30



D2.VII.1 Measure Name: Adult Survey: Rating of Personal Doctor (9+10) 5 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

63.80

Highmark Health Options

68.80



D2.VII.1 Measure Name: Adult Survey: Rating of Specialist Seen Most Often (9+10) 176 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

61.90

Highmark Health Options

67.40



Complete

D2.VII.1 Measure Name: Adult Survey: Rating of Health Plan (9+10) 177 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

66.10

Highmark Health Options

69.10



Complete

D2.VII.1 Measure Name: Child Survey - CCC Population: Getting Needed Care (Usually + Always) 178 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

82.90

Highmark Health Options

86.50



Complete

D2.VII.1 Measure Name: Child Survey - CCC Population: Getting Care Quickly (Usually + Always) 179 / 329**D2.VII.2 Measure Domain**

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

87.50

Highmark Health Options

87.30



D2.VII.1 Measure Name: Child Survey - CCC Population: How Well Doctors Communicate (Usually + Always)

180 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

92.10

Highmark Health Options

95.90



D2.VII.1 Measure Name: Child Survey - CCC Population: Rating of All Health Care (9+10)

181 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

76.40

Highmark Health Options

79.80



Complete

D2.VII.1 Measure Name: Child Survey - CCC Population: Rating of Personal Doctor (9+10)

182 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

80.00

Highmark Health Options

82.10



Complete

D2.VII.1 Measure Name: Child Survey - CCC Population: Rating of Specialist Seen Most often (9+10)

183 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

78.40

Highmark Health Options

82.50



Complete

D2.VII.1 Measure Name: Child Survey - CCC Population: Rating of Health Plan (9+10)

184 / 329

D2.VII.2 Measure Domain

Health plan enrollee experience of care

D2.VII.3 National Quality Forum (NQF) number

6

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

CAHPS

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

79.30

Highmark Health Options

85.10



D2.VII.1 Measure Name: Cervical Cancer Screening (CCS-AD):

185 / 329

Percentage of women ages 21 to 64 who were screened for cervical cancer using either of the following criteria: Women ages 21 to 64 who had cervical cytology performed within the last 3 years.

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

32

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

47.93

Highmark Health Options

53.77



D2.VII.1 Measure Name: Cervical Cancer Screening (CCS-AD):

186 / 329

Percentage of women ages 21 to 64 who were screened for cervical cancer using either of the following criteria: Women ages 30 to 64 who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years.

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

32

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.87

Highmark Health Options

9.73



Complete

D2.VII.1 Measure Name: Cervical Cancer Screening (CCS-AD):

187 / 329

Percentage of women ages 21 to 64 who were screened for cervical cancer using either of the following criteria: Women ages 30 to 64 who had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting within the last 5 years.

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

32

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

38.20

Highmark Health Options

9.73



Complete

D2.VII.1 Measure Name: Chlamydia Screening in Women Ages 21 to 24 (CHL-AD)

188 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

33

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

69.22

Highmark Health Options

66.38



Complete

D2.VII.1 Measure Name: Flu Vaccinations for Adults Ages 18 to 64 (FVA⁸⁹ / 329 AD)

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

39

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

36.75

Highmark Health Options

45.65



Complete

D2.VII.1 Measure Name: Breast Cancer Screening (BCS-AD): Percentage of women ages 50 to 74 who had a mammogram to screen for breast cancer. (Ages 50-64) 10 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

2372

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

48.45

Highmark Health Options

52.63



Complete

D2.VII.1 Measure Name: Breast Cancer Screening (BCS-AD): Percentage of women ages 50 to 74 who had a mammogram to screen for breast cancer. (Ages 65-74) 11 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

2372

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Medicaid Adult Core Set Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

35.96

Highmark Health Options

50.54



D2.VII.1 Measure Name: Breast Cancer Screening (BCS-AD): Percentage of women ages 50 to 74 who had a mammogram to screen for breast cancer. (Ages 50 - 74) 02 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

2372

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

48.09

Highmark Health Options

52.52



Complete

D2.VII.1 Measure Name: Prenatal and Postpartum Care: Postpartum Care (PPC-AD) 193 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

1517

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.70

Highmark Health Options

75.86



Complete

D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 21 to 44 (CCP-AD): Total, Ages 21–44: Most or moderately effective contraception – 3 days 184 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2902

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

22.73

Highmark Health Options

24.17



Complete

D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 21 to 44 (CCP-AD): Total, Ages 21–44: Most or moderately effective contraception – 60 days 165 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2902

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

47.86

Highmark Health Options

48.42



Complete

D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 21 to 44 (CCP-AD): Total, Ages 21–44: LARC – 3 days 165 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

D2.VII.4 Measure Reporting and D2.VII.5 Programs

2902 Program-specific rate

D2.VII.6 Measure Set **D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range**
Medicaid Adult Core Set

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

10.38

Highmark Health Options

8.88



D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 21 to 44 (CCP-AD): Total, Ages 21–44: LARC – 60 days 167 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2902

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

18.62

Highmark Health Options

16.18



D2.VII.1 Measure Name: Contraceptive Care – All Women Ages 21 to 44 408 / 329
(CCW-AD): Among women ages 21 to 44 at risk of unintended pregnancy, the percentage that: Were provided a most effective or moderately effective method of contraception.

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number
2903

D2.VII.4 Measure Reporting and D2.VII.5 Programs
Program-specific rate

D2.VII.6 Measure Set
Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range
Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware
23.85

Highmark Health Options
24.71



D2.VII.1 Measure Name: Contraceptive Care – All Women Ages 21 to 44 409 / 329
(CCW-AD): Among women ages 21 to 44 at risk of unintended pregnancy, the percentage that: Were provided a long-acting reversible method of contraception (LARC).

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number
2903

D2.VII.4 Measure Reporting and D2.VII.5 Programs
Program-specific rate

D2.VII.6 Measure Set
Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range
Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.30

Highmark Health Options

3.83



Complete

D2.VII.1 Measure Name: Controlling High Blood Pressure (CBP-AD): 200 / 329
Ages 18 - 64 whose BP was <140/90mmHg

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

18

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

51.13

Highmark Health Options

64.42



Complete

D2.VII.1 Measure Name: Controlling High Blood Pressure (CBP-AD): 201 / 329
Ages 65 - 85 whose BP was <140/90 mm Hg

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

18

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

50.00

Highmark Health Options

34.62



Complete

D2.VII.1 Measure Name: Controlling High Blood Pressure (CBP-AD): 202 / 329
(Ages 18 - 85 whose BP was < 140/90 mm Hg)

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

18

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

51.09

Highmark Health Options

62.53



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPC-AD): Ages 18 - 64 203 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

58

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.17

Highmark Health Options

35.26



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPC-AD): Ages 65-75 204 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

58

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

16.67

Highmark Health Options

28.57



Complete

D2.VII.1 Measure Name: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPC-AD): Ages 18 - 75 205 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

59

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.74

Highmark Health Options

35.04



Complete

D2.VII.1 Measure Name: PQI 01: Diabetes Short-Term Complications Admission Rate (PQI01-AD): Ages 18 - 64 206 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

0272

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

14.81

Highmark Health Options

27.10



Complete

D2.VII.1 Measure Name: PQI 01: Diabetes Short-Term Complications Admission Rate (PQI01-AD): Ages 65 and older 207 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

0272

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

22.81

Highmark Health Options

16.04



Complete

D2.VII.1 Measure Name: Plan All-Cause Readmissions (PCR-AD)

208 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1768

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

9.42

Highmark Health Options

9.54



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio: Ages 19 to 64 (AMR-AD): Ages 19-50

209 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

44.05

Highmark Health Options

61.22



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio: Ages 19 to 64 (AMR⁴⁰ / 329 AD): Ages 51-64

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

47.77

Highmark Health Options

65.55



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio: Ages 19 to 64 (AMR⁴¹ / 329 AD): Total (Ages 19 - 64)

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.11

Highmark Health Options

62.44



Complete

D2.VII.1 Measure Name: HIV Viral Load Suppression (HVL-AD): Ages 18⁺² / 329 64

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

2082

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.79



Complete

D2.VII.1 Measure Name: HIV Viral Load Suppression (HVL-AD): Ages 65¹³ / 329 and older

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

2082

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

16.67

Highmark Health Options

7.14



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis; Alcohol abuse or dependence, Ages 18 -64 214 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

4

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.19

Highmark Health Options

45.90



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis; Alcohol abuse or dependence, Ages 65 and older 215 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

50.00

Highmark Health Options



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis; Opioid abuse or dependence, Ages 18-64 216 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

55.8

Highmark Health Options

69.11



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis; Opioid abuse or dependence, Ages 65 and older 217 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

60.00

Highmark Health Options

40.00



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis; Other drug abuse or dependence, Ages 18-64 218 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

44.27

Highmark Health Options

44.50



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis; Other drug abuse or dependence, Ages 65 and older 219 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

80.00

Highmark Health Options

50.00



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis; Ages 18-64 220 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.61

Highmark Health Options

51.20



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis, Ages 65 and older 221 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

53.85



D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Alcohol abuse or dependence, Ages 18-64 222 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

16.31

Highmark Health Options

14.50



D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Alcohol abuse or dependence, Ages 65 and older 223 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

D2.VII.4 Measure Reporting and D2.VII.5 Programs

4 Program-specific rate

D2.VII.6 Measure Set **D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range**

Medicaid Adult Core Set

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

8.00



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Opioid abuse or dependence, Ages 18-64 224 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

34.98



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Opioid abuse or dependence, Ages 65 and older 225 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

20.00

Highmark Health Options

20.00



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Other drug abuse or dependence, Ages 18-64 226 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

D2.VII.4 Measure Reporting and D2.VII.5 Programs

4 Program-specific rate

D2.VII.6 Measure Set **D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range**
Medicaid Adult Core Set

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

15.67

Highmark Health Options

12.01



D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Other drug abuse or dependence, Ages 65 and older 227 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

20.00



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Ages 18-64 228 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

4

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

22.55

Highmark Health Options

23.32



Complete

D2.VII.1 Measure Name: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD): Engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit; Ages 65 and older 229 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

D2.VII.4 Measure Reporting and D2.VII.5 Programs

4 Program-specific rate

D2.VII.6 Measure Set **D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range**

Medicaid Adult Core Set

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

11.54

Highmark Health Options

9.52



D2.VII.1 Measure Name: Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD): Advising Smokers and Tobacco Users to Quit. 280 / 329
A rolling average represents the percentage of beneficiaries age 18 and older who were current smokers or tobacco users and who received advice to quit during the measurement year. (Ages 18 - 64)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

27

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

70.28

Highmark Health Options

76.00



Complete

D2.VII.1 Measure Name: Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD): Advising Smokers and Tobacco Users to Quit. 201 / 329
A rolling average represents the percentage of beneficiaries age 18 and older who were current smokers or tobacco users and who received advice to quit during the measurement year. (Ages 65 and older)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

27

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

100.00



Complete

D2.VII.1 Measure Name: Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD): Discussing Cessation Medications. 202 / 329
A rolling average represents the percentage of beneficiaries age 18 and older who were current smokers or tobacco users and who discussed or were recommended cessation medications during the measurement year. (Ages 18 - 64)

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

27

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

47.62

Highmark Health Options

56.00



Complete

D2.VII.1 Measure Name: Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD): Discussing Cessation Medications. A rolling average represents the percentage of beneficiaries age 18 and older who were current smokers or tobacco users and who discussed or were recommended cessation medications during the measurement year. (Ages 65 and older) 263 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

27

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.33

Highmark Health Options

80.00



Complete

D2.VII.1 Measure Name: Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD): Discussing Cessation Strategies. A rolling average represents the percentage of beneficiaries age 18 and older who were current smokers or tobacco users and who discussed or were provided cessation methods or strategies during the measurement year. (Ages 18 - 64) 264 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

27

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.97

Highmark Health Options

51.49



Complete

D2.VII.1 Measure Name: Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD): Discussing Cessation Strategies. A rolling average represents the percentage of beneficiaries age 18 and older who were current smokers or tobacco users and who discussed or were provided cessation methods or strategies during the measurement year. (Ages 65 and older) 265 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

27

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

60.00



Complete

D2.VII.1 Measure Name: Antidepressant Medication Management (AMM-AD): Effective Acute Phase Treatment. Percentage of beneficiaries who remained on an antidepressant medication for at least 84 days (12 weeks) (Ages 18-64) 236 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

105

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

57.01

Highmark Health Options



Complete

D2.VII.1 Measure Name: Antidepressant Medication Management (AMM-AD): Effective Acute Phase Treatment. Percentage of beneficiaries who remained on an antidepressant medication for at least 84 days (12 weeks) (Ages 65 and older) 237 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

105

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

75.00

Highmark Health Options

66.67



Complete

D2.VII.1 Measure Name: Antidepressant Medication Management (AMM-AD): Effective Continuation Phase Treatment. Percentage of beneficiaries who remained on an antidepressant medication for at least 180 days (6 months) (Ages 18-64) 238 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

105

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Medicaid Adult Core Set Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

42.07

Highmark Health Options

39.81



D2.VII.1 Measure Name: Antidepressant Medication Management (AMM-AD): Effective Continuation Phase Treatment. Percentage of beneficiaries who remained on an antidepressant medication for at least 180 days (6 months) (Ages 65 and older) 239 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

105

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

75.00

Highmark Health Options

50.00



D2.VII.1 Measure Name: Follow-Up After Hospitalization for Mental Illness: Age 18 and Older (FUH-AD): Received follow-up within 30 days after discharge; Ages 18-64 240 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

48.26

Highmark Health Options

43.80



D2.VII.1 Measure Name: Follow-Up After Hospitalization for Mental Illness: Age 18 and Older (FUH-AD): Received follow-up within 30 days after discharge; Ages 65 and older 241 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

25.00%

Highmark Health Options

0.00%



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization for Mental Illness: Age 18 and Older (FUH-AD): Received follow-up within 7 days after discharge; Ages 18-64 242 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

30.14

Highmark Health Options

27.72



Complete

D2.VII.1 Measure Name: Follow-Up After Hospitalization for Mental Illness: Age 18 and Older (FUH-AD): Received follow-up within 7 days after discharge; Ages 65 and older 243 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

576

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

25.00

Highmark Health Options

0.00



Complete

D2.VII.1 Measure Name: Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)

244 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

1932

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

68.73

Highmark Health Options

71.13



Complete

D2.VII.1 Measure Name: Diabetes Care for People with Serious Mental Illness: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPCMI-AD): Ages 18-64 145 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2607

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.11

Highmark Health Options

33.90



Complete

D2.VII.1 Measure Name: Diabetes Care for People with Serious Mental Illness: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (HPCMI-AD): Ages 65 and older 146 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2607

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Medicaid Adult Core Set Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

75.00

Highmark Health Options

0.00



D2.VII.1 Measure Name: Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD); Ages 18-64 247 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2940

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.70

Highmark Health Options

8.38



D2.VII.1 Measure Name: Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD); Ages 65 and older 248 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2940

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

0.00



Complete

D2.VII.1 Measure Name: Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD); Total, Ages 18 and older

249 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2940

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

4.70

Highmark Health Options



Complete

D2.VII.1 Measure Name: Concurrent Use of Opioids and Benzodiazepines (COB-AD); Ages 18-64

250 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3389

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

5.63

Highmark Health Options

13.40



Complete

D2.VII.1 Measure Name: Concurrent Use of Opioids and Benzodiazepines (COB-AD); Ages 65 and older

251 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3389

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

0.00



Complete

D2.VII.1 Measure Name: Concurrent Use of Opioids and Benzodiazepines (COB-AD); Total: (Age 18 and Older)

252 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3389

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

5.63

Highmark Health Options

13.40



Complete

D2.VII.1 Measure Name: Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD); Total Rate, Ages 18 - 64 (Rate 1)

253 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3400

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

70.80

Highmark Health Options

61.63



Complete

D2.VII.1 Measure Name: Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD); Buprenorphine, Ages 18 - 64 (Rate 2)

254 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3400

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

29.69

Highmark Health Options

26.66



Complete

D2.VII.1 Measure Name: Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD); Oral naltrexone, Ages 18 - 64 (Rate 3)

255 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3400

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

2.97

Highmark Health Options

1.67



Complete

D2.VII.1 Measure Name: Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD); Long-acting, injectable naltrexone, Ages 18 - 64 (Rate 4)

256 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3400

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

3.81

Highmark Health Options

2.38



Complete

D2.VII.1 Measure Name: Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD); Methadone, Ages 18 - 64 (Rate 5)

257 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3400

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

45.30

Highmark Health Options

38.47



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence: Age 18 and Older

258 / 329

(FUA-AD); received follow-up within 30 days of the ED visit (31 total days) ages 18 - 64

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

24.43

Highmark Health Options

16.97



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence: Age 18 and Older (FUA-AD); received follow-up within 30 days of the ED visit (31 total days) ages 65 and older 259 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

0.00



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit^{60 / 329} for Alcohol and Other Drug Abuse or Dependence: Age 18 and Older (FUA-AD); received follow-up within 7 days of the ED visit (8 total days) ages 18 - 64

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

12.67

Highmark Health Options

9.00



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit^{61 / 329} for Alcohol and Other Drug Abuse or Dependence: Age 18 and Older (FUA-AD); received follow-up within 7 days of the ED visit (8 total days) ages 65 and older

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3488

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

0.00



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit for Mental Illness: Age 18 and Older (FUM-AD); Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days), ages 18-64 262 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

39.86

Highmark Health Options



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit^{63 / 329} for Mental Illness: Age 18 and Older (FUM-AD); Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days), ages 65 and older

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

100.00



Complete

D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit^{64 / 329} for Mental Illness: Age 18 and Older (FUM-AD); Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days), ages 18-64

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Medicaid Adult Core Set Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

29.71

Highmark Health Options

30.58



D2.VII.1 Measure Name: Follow-Up After Emergency Department Visit^{65 / 329} for Mental Illness: Age 18 and Older (FUM-AD); Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days), ages 65 and older

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

3489

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

0.00

Highmark Health Options

100.00



Complete

**D2.VII.1 Measure Name: Adherence to Antipsychotic Medications for
Individuals with Schizophrenia (SAA-AD)** 266 / 329

D2.VII.2 Measure Domain

Behavioral health care

**D2.VII.3 National Quality
Forum (NQF) number**

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Adult Core Set

**D2.VII.7a Reporting Period and D2.VII.7b Reporting
period: Date range**

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

63.46

Highmark Health Options

58.90



Complete

**D2.VII.1 Measure Name: Weight Assessment and Counseling for
Nutrition and Physical Activity for Children/Adolescents (WCC-CH);
Body mass index (BMI) percentile documentation; Ages 3 to 11 years** 267 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

**D2.VII.3 National Quality
Forum (NQF) number**

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

**D2.VII.7a Reporting Period and D2.VII.7b Reporting
period: Date range**

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

87.98

Highmark Health Options

83.75



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Body mass index (BMI) percentile documentation; Ages 12 to 17 years

268 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

77.81

Highmark Health Options

72.66



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Body mass index (BMI) percentile documentation; Ages 3 to 17 years

269 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.92

Highmark Health Options

80.29



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Counseling for nutrition; Ages 3 to 11 years

270 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

87.50

Highmark Health Options

77.39



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Counseling for nutrition; Ages 12 to 17 years

271 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

74.63

Highmark Health Options

59.38



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Counseling for nutrition; Ages 3 to 17 years

272 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Medicaid Child Core Set Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

82.46

Highmark Health Options

71.78



Complete

D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Counseling for physical activity; Ages 3 to 11 years

273 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

79.81

Highmark Health Options

73.50



D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Counseling for physical activity; Ages 12 to 17 years

274 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

NA

Measure results

AmeriHealth Caritas Delaware

77.61

Highmark Health Options

62.50



D2.VII.1 Measure Name: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH); Counseling for physical activity; Ages 3 to 17 years

275 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

24

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

78.95

Highmark Health Options

70.07



Complete

D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 276 / 329
Childhood Immunization Status - Dtap

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

73.24

Highmark Health Options

76.64



Complete

D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 277 / 329
Childhood Immunization Status - IPV

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

38

D2.VII.6 Measure Set
Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

85.64

Highmark Health Options

92.21



Complete

D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 278 / 329
Childhood Immunization Status - MMR

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.70

Highmark Health Options

88.56



D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 279 / 329
Childhood Immunization Status - HiB

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

85.40

Highmark Health Options

90.27



D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 280 / 329
Childhood Immunization Status - Hep B

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

85.64%

Highmark Health Options

92.46%



Complete

D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH), 281 / 329
Childhood Immunization Status - VZV

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

83.21

Highmark Health Options

88.81



Complete

D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 282 / 329
Childhood Immunization Status - PCV

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

72.99

Highmark Health Options

76.64



D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 283 / 329
Childhood Immunization Status - Hep A

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

80.78

Highmark Health Options

84.67



D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 284 / 329
Childhood Immunization Status - RV

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

67.15

Highmark Health Options

72.51



D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 285 / 329
Childhood Immunization Status - Flu

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

51.82

Highmark Health Options

52.55



Complete

D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 286 / 329
Childhood Immunization Status - Combo 3

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

68.37

Highmark Health Options

72.02



Complete

D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH); 287 / 329
Childhood Immunization Status - Combo 7

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

56.45

Highmark Health Options

59.61



Complete

**D2.VII.1 Measure Name: Childhood Immunization Status (CIS-CH);
Childhood Immunization Status - Combo 10**

288 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

38

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

38.69

Highmark Health Options

40.63



D2.VII.1 Measure Name: Screening for Depression and Follow-Up Plan Ages 12 to 17 (CDF-CH) 289 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

418

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

3.78

Highmark Health Options

2.00



D2.VII.1 Measure Name: Well-Child Visits in the First 30 Months of Life (W30-CH): Well-Child Visits in the First 15 Months. Children who turned age 15 months during the measurement year: Six or more well-child visits. 290 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1392

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

61.59

Highmark Health Options

62.02



Complete

D2.VII.1 Measure Name: Well-Child Visits in the First 30 Months of Life (W30-CH): Well-Child Visits for Age 15 Months - 30 Months. Children who turned age 30 months during the measurement year: Two or more well-child visits. 291 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1392

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

71.55

Highmark Health Options

75.50



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents (IMA-CH): Immunization Adolescents - Meningococcal 292 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

66.18

Highmark Health Options

76.89



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents (IMA-CH): 293 / 329
Diphtheria, Tdap, or Td

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

72.99

Highmark Health Options

82.73



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents (IMA-CH): 294 / 329
Immunization Adolescents - HPV

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

35.52

Highmark Health Options

51.82



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents (IMA-CH): 295 / 329
Combination 1

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

65.69

Highmark Health Options

76.40



Complete

D2.VII.1 Measure Name: Immunizations for Adolescents (IMA-CH): Combination 2 296 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1407

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

30.66

Highmark Health Options

47.20



Complete

D2.VII.1 Measure Name: Developmental Screening in the First Three Years of Life (DEV-CH): Children who turned one by the measurement year 297 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1448

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

64.23

Highmark Health Options

97.14



Complete

D2.VII.1 Measure Name: Developmental Screening in the First Three Years of Life (DEV-CH): Children who turned two by the end of the measurement year 298 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1448

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

58.39

Highmark Health Options

92.47



Complete

D2.VII.1 Measure Name: Developmental Screening in the First Three Years of Life (DEV-CH): Children who turned three by the end of the measurement year 299 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1448

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

61.31

Highmark Health Options

85.00



Complete

D2.VII.1 Measure Name: Developmental Screening in the First Three Years of Life (DEV-CH): All children who turned 1, 2, or 3.during the measurement year 300 / 329

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1448

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Medicaid Child Core Set Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

61.31

Highmark Health Options

90.75



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (WCV- 301 / 329 CH): Ages 3 to 11

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1516

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

63.60

Highmark Health Options

66.49



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (WCV- 302 / 329 CH): Ages 12 to 17

D2.VII.2 Measure Domain

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1516

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

56.58

Highmark Health Options

59.50



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (WCV- 303 / 329 CH): Ages 18 to 21**D2.VII.2 Measure Domain**

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1516

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

25.57

Highmark Health Options



Complete

D2.VII.1 Measure Name: Child and Adolescent Well-Care Visits (WCV- 304 / 329 CH): Ages 3 to 21**D2.VII.2 Measure Domain**

Primary care access and preventative care

D2.VII.3 National Quality Forum (NQF) number

1516

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

55.00

Highmark Health Options

58.41



Complete

D2.VII.1 Measure Name: Prenatal and Postpartum Care: Timeliness of Prenatal Care (PPC-CH) 105 / 329**D2.VII.2 Measure Domain**

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

1517

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

89.26

Highmark Health Options

93.10



Complete

D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 15 to 20 (CCP-CH): Ages 15–20: Most or moderately effective contraception – 3 days 285 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2902

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

18.48

Highmark Health Options

15.31



Complete

D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 15 to 20 (CCP-CH): Ages 15–20: Most or moderately effective contraception – 60 days 285 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2902

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.74

Highmark Health Options

48.33



Complete

D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 15 to 20 (CCP-CH): Ages 15–20: LARC – 3 days 208 / 329

D2.VII.2 Measure Domain

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2902

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

10.87

Highmark Health Options



Complete

D2.VII.1 Measure Name: Contraceptive Care – Postpartum Women Ages 15 to 20 (CCP-CH): Ages 15–20: LARC – 60 days 289 / 329**D2.VII.2 Measure Domain**

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2902

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results**AmeriHealth Caritas Delaware**

15.22

Highmark Health Options

15.31



Complete

D2.VII.1 Measure Name: Contraceptive Care – All Women Ages 15 to 20 (CCW-CH): Ages 15–20: Most or moderately effective contraception 310 / 329**D2.VII.2 Measure Domain**

Maternal and perinatal health

D2.VII.3 National Quality Forum (NQF) number

2903

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

24.18

Highmark Health Options

23.56



Complete

**D2.VII.1 Measure Name: Contraceptive Care – All Women Ages 15 to 20¹ / 329
(CCW-CH): Ages 15–20: LARC**

D2.VII.2 Measure Domain

Maternal and perinatal health

**D2.VII.3 National Quality
Forum (NQF) number**

2903

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

**D2.VII.7a Reporting Period and D2.VII.7b Reporting
period: Date range**

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

3.31

Highmark Health Options

3.48



Complete

**D2.VII.1 Measure Name: Asthma Medication Ratio: Ages 5 to 18 (AMR³¹² / 329
CH): Ages 5 to 11**

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

64.42

Highmark Health Options

70.44



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio: Ages 5 to 18 (AMR³¹³ / 329 CH): Ages 12 to 18

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

38.40

Highmark Health Options

60.95



Complete

D2.VII.1 Measure Name: Asthma Medication Ratio: Ages 5 to 18 (AMR³¹⁴ / 329 CH): Ages 5 to 18 (TOTAL)

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

1800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

50.22

Highmark Health Options

65.55



Complete

D2.VII.1 Measure Name: Ambulatory Care: Emergency Department (ED) / 329 Visits (AMB-CH): Less than age 1

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

74.92

Highmark Health Options

82.32



Complete

D2.VII.1 Measure Name: Ambulatory Care: Emergency Department (ED) / 329 Visits (AMB-CH): Ages 1 to 9

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

36.74

Highmark Health Options

34.39



Complete

D2.VII.1 Measure Name: Ambulatory Care: Emergency Department (ED) / 329 Visits (AMB-CH): Ages 10 to 19

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

24.08

Highmark Health Options

28.15



Complete

D2.VII.1 Measure Name: Ambulatory Care: Emergency Department (ED) Visits (AMB-CH): Total, Children up to age 19 / 329

D2.VII.2 Measure Domain

Care of acute and chronic conditions

D2.VII.3 National Quality Forum (NQF) number

0

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

33.99

Highmark Health Options

32.95



Complete

D2.VII.1 Measure Name: Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH): Initiation Phase: Ages 6 - 12 319 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

108

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

38.74

Highmark Health Options

32.15



Complete

D2.VII.1 Measure Name: Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH): Continuation and Maintenance (C&M) Phase: Ages 6 - 12 320 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

108

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Medicaid Child Core Set Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

51.06

Highmark Health Options

39.49



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received blood glucose testing, Ages 1-11

321 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

69.57

Highmark Health Options

63.66



D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received blood glucose testing; Ages 12-17

322 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

57.14

Highmark Health Options

60.66



D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received blood glucose testing; Ages 12-17

323 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

60.76

Highmark Health Options

61.74



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received cholesterol testing; Ages 1-11

324 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

56.52

Highmark Health Options

55.13



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received cholesterol testing, Ages 12-17

325 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

42.86

Highmark Health Options

55.92



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received cholesterol testing, Ages 1-17

326 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

46.84

Highmark Health Options

55.64



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received blood glucose and cholesterol testing; Ages 1-11

327 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

56.25

Highmark Health Options

51.71



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received blood glucose and cholesterol testing, Ages 12-17

328 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set
Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

40.18

Highmark Health Options

50.71



Complete

D2.VII.1 Measure Name: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH): Percentage of children and adolescents on antipsychotics who received blood glucose and cholesterol testing, Ages 1-17

329 / 329

D2.VII.2 Measure Domain

Behavioral health care

D2.VII.3 National Quality Forum (NQF) number

2800

D2.VII.4 Measure Reporting and D2.VII.5 Programs

Program-specific rate

D2.VII.6 Measure Set

Medicaid Child Core Set

D2.VII.7a Reporting Period and D2.VII.7b Reporting period: Date range

Yes

D2.VII.8 Measure Description

N/A

Measure results

AmeriHealth Caritas Delaware

44.94

Highmark Health Options

51.07

Topic VIII. Sanctions

Describe sanctions that the state has issued for each plan. Report all known actions across the following domains: sanctions, administrative penalties, corrective action plans, other. Include any pending or unresolved actions.

42 CFR 438.66(e)(2)(viii) specifies that the MCPAR include the results of any sanctions or corrective action plans imposed by the State or other formal or informal intervention with a contracted MCO, PIHP, PAHP, or PCCM entity to improve performance.

Sanction total count:

0 - No sanctions entered

Topic X. Program Integrity

Number	Indicator	Response
D1X.1	<p>Dedicated program integrity staff</p> <p>Report or enter the number of dedicated program integrity staff for routine internal monitoring and compliance risks. Refer to 42 CFR 438.608(a)(1)(vii).</p>	<p>AmeriHealth Caritas Delaware</p> <p>31</p> <p>Highmark Health Options</p> <p>10</p>
D1X.2	<p>Count of opened program integrity investigations</p> <p>How many program integrity investigations have been opened by the plan in the past year?</p>	<p>AmeriHealth Caritas Delaware</p> <p>62</p> <p>Highmark Health Options</p> <p>95</p>
D1X.3	<p>Ratio of opened program integrity investigations to enrollees</p> <p>What is the ratio of program integrity investigations opened by the plan in the past year per 1,000 beneficiaries enrolled in the plan on the first day of the last month of the reporting year?</p>	<p>AmeriHealth Caritas Delaware</p> <p>0.57:1,000</p> <p>Highmark Health Options</p> <p>0.58:1,000</p>
D1X.4	<p>Count of resolved program integrity investigations</p> <p>How many program integrity investigations have been resolved by the plan in the past year?</p>	<p>AmeriHealth Caritas Delaware</p> <p>67</p> <p>Highmark Health Options</p> <p>22</p>
D1X.5	<p>Ratio of resolved program integrity investigations to enrollees</p> <p>What is the ratio of program integrity investigations resolved by the plan in the past year per 1,000 beneficiaries enrolled in the plan at the beginning of the reporting year?</p>	<p>AmeriHealth Caritas Delaware</p> <p>0.66:1,000</p> <p>Highmark Health Options</p> <p>0.13:1,000</p>
D1X.6	<p>Referral path for program integrity referrals to the state</p> <p>What is the referral path that the plan uses to make program</p>	<p>AmeriHealth Caritas Delaware</p> <p>Makes some referrals to the SMA and others directly to the MFCU</p>

integrity referrals to the state?
Select one.

Highmark Health Options

Makes some referrals to the SMA and others directly to the MFCU

D1X.7

Count of program integrity referrals to the state

Enter the count of program integrity referrals that the plan made to the state in the past year. Enter the count of referrals made to the SMA and the MFCU in aggregate.

AmeriHealth Caritas Delaware

18

Highmark Health Options

41

D1X.8

Ratio of program integrity referral to the state

What is the ratio of program integrity referral listed in the previous indicator made to the state in the past year per 1,000 beneficiaries, using the plan's total enrollment as of the first day of the last month of the reporting year (reported in indicator D1.I.1) as the denominator.

AmeriHealth Caritas Delaware

0.17:1,000

Highmark Health Options

0.25:1,000

D1X.9

Plan overpayment reporting to the state

Describe the plan's latest annual overpayment recovery report submitted to the state as required under 42 CFR 438.608(d)(3).

Include, for example, the following information:

- The date of the report (rating period or calendar year).
- The dollar amount of overpayments recovered.
- The ratio of the dollar amount of overpayments recovered as a percent of premium revenue as defined in MLR reporting under 438.8(f)(2).

AmeriHealth Caritas Delaware

Report date 01/01/2022 through 12/31/22 Total recovered was \$71,210.92. Ratio is .0069%

Highmark Health Options

Report date 1/1/2022-12/31/2022

Overpayments recovered - \$11,624,719 Ratio of the dollar amount of overpayments recovered as a percent of premium revenue - 1%

D1X.10

Changes in beneficiary circumstances

Select the frequency the plan reports changes in beneficiary circumstances to the state.

AmeriHealth Caritas Delaware

Monthly

Highmark Health Options

Weekly

Section E: BSS Entity Indicators

Topic IX. Beneficiary Support System (BSS) Entities

Per 42 CFR 438.66(e)(2)(ix), the Managed Care Program Annual Report must provide information on and an assessment of the operation of the managed care program including activities and performance of the beneficiary support system. Information on how BSS entities support program-level functions is on the Program-Level BSS page.

Number	Indicator	Response
EIX.1	BSS entity type What type of entity was contracted to perform each BSS activity? Check all that apply. Refer to 42 CFR 438.71(b).	Diamond State Health Plan Enrollment Broker
EIX.2	BSS entity role What are the roles performed by the BSS entity? Check all that apply. Refer to 42 CFR 438.71(b).	Diamond State Health Plan Enrollment Broker/Choice Counseling