

## APPENDIX C

### CLINICAL PERFORMANCE

The Medicaid population offers unique challenges in managing care. This RFA seeks to identify those managed care plans with experience in improving and maintaining the optimal health of its members. The purpose of Appendix C is to demonstrate the Applicant's success at improving and/or sustaining high levels of positive health outcomes. While Healthcare Effectiveness Data and Information Set (HEDIS) clinical measures may not be a perfect representation of health outcomes, for the purposes of this Application, ODJFS is using the measures as a proxy.

#### Instructions for Completion of Appendix C:

- (1) The reported results must be have undergone a HEDIS Compliance Audit conducted by an NCQA-Certified HEDIS Compliance Auditor (CHCA). Reported results must be the final, auditor-locked version reported to NCQA's Interactive Data.
- (2) Only HEDIS measures associated with Medicaid populations are to be reported for Appendix C. In addition, the reported HEDIS measures must represent all Medicaid populations within the reported state for which the Applicant provided managed care services. If an Applicant does not have Medicaid HEDIS results for a particular measure then enter "N/A", for "Not Applicable", in the appropriate space(s). If an Applicant does not have CY 2009 and/or CY 2010 results for a measure then the Applicant shall enter a "N/A" in the appropriate box.
- (4) An Applicant must report results associated with the State of Ohio if an Applicant provided services in the State of Ohio for a SFY 2010 Medicaid managed care provider agreement with the Ohio Department of Job and Family Services. If the Applicant has no HEDIS Ohio Medicaid specific results for a either CY 2009 or CY 2010 then the Applicant must report results from the state with the largest number of Medicaid member months for CY 2010 for which there are HEDIS results that meet the requirements set forth in (1) and (2) above.

## Appendix C

### Clinical Performance

#### \*\*\*MEDICAID RESULTS ONLY\*\*\*

The following self-reported, audited HEDIS measure results reflect the Applicant's Medicaid experience in the State of \_\_\_\_\_.

#	Measure ID	Element ID	HEDIS Measure	CY2009 Result	CY2010 Result
1	PPC	ratetime	Prenatal and Postpartum Care Timeliness of Prenatal Care		
2	FPC	rate_81	Frequency of Ongoing Prenatal Care ≥81 Percent of Expected Visits		
3	FUH	rate7	Follow-Up After Hospitalization for Mental Illness, 7-Day Follow- Up		
4	ADD	rateinit	Follow-Up Care for Children Prescribed ADHD Medication Initiation Phase		
5	IET	rengtot	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Engagement of AOD Treatment, Total		
6	AWC	rate	Adolescent Well-Care Visits		
7	CMC	rate100	Cholesterol Management for Patients With Cardiovascular Conditions - LDL-C Control (<100 mg/dL)		
8	PBH	rate	Persistence of Beta-Blocker Treatment After a Heart Attack		
9	CBP	ratetot	Controlling High Blood Pressure		
10	CDC	ratepoo	Comprehensive Diabetes Care - HbA1c Poor Control (>9.0%)		
11	CDC	ratebp130	Comprehensive Diabetes Care - Blood Pressure Control (<140/90 mm Hg)		
12	CDC	ratelpp	Comprehensive Diabetes Care - LDL-C Screening		
13	CDC	rateeye	Comprehensive Diabetes Care - Eye Exam (Retinal) Performed		

Continued on Next Page

14	ASM	ratetot	Use of Appropriate Medications for People With Asthma - Total		
15	URI	rate	Appropriate Treatment for Children with Upper Respiratory Infection		
16	W15	rate6	Well Child Visits in the First 15 Months of Life - Six or More Visits		
17	W34	rate	Well Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life		
18	CAP	rate1224	Children and Adolescents' Access to Primary Care Practitioners - 12-24 Months		
19	CAP	rate256	Children and Adolescents' Access to Primary Care Practitioners - 25 Months - 6 Years		
20	CAP	rate711	Children and Adolescents' Access to Primary Care Practitioners - 7-11 Years		
21	CAP	rate1219	Children and Adolescents' Access to Primary Care Practitioners - 12-19 Years		
22	AAP	ratetot	Adults' Access to Preventive/Ambulatory Health Services - Total		
<b>***END OF MEASURES***</b>					

**Appendix C**  
**Clinical Performance**  
**Scoring**

- (1) ODJFS will select one reported result for each individual measure to score (“Selected Result”). For each individual measure, the CY2010 results will be selected if available. If the CY 2010 result is not available (e.g. reported “N/A”) the CY 2009 result will be used. If there is no reported result for either CY 2010 or CY 2009, a score of “0” will be assigned for the measure.
- (2) For each individual measure, a score shall be assigned according to the values set forth in Appendix C Scoring Key (located at the end of this Appendix).
- (3) The ten (10) highest scored measures above are added together to get a final score for Appendix C.

<b>Top Ten Highest Scores</b>	<b>Measure ID</b>	<b>Element ID</b>	<b>Score</b>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
<b>TOTAL Score</b>			

\*\*\*END\*\*\*

## Worksheet:

#	Measure ID	Element ID	HEDIS Measure	CY2009 Result	CY2010 Result
1	PPC	ratetime	Prenatal and Postpartum Care Timeliness of Prenatal Care		
2	FPC	rate_81	Frequency of Ongoing Prenatal Care ≥81 Percent of Expected Visits		
3	FUH	rate7	Follow-Up After Hospitalization for Mental Illness, 7-Day Follow-Up		
4	ADD	rateinit	Follow-Up Care for Children Prescribed ADHD Medication Initiation Phase		
5	IET	rengtot	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Engagement of AOD Treatment, Total		
6	AWC	rate	Adolescent Well-Care Visits		
7	CMC	rate100	Cholesterol Management for Patients With Cardiovascular Conditions - LDL-C Control (<100 mg/dL)		
8	PBH	rate	Persistence of Beta-Blocker Treatment After a Heart Attack		
9	CBP	ratetot	Controlling High Blood Pressure		
10	CDC	ratepoo	Comprehensive Diabetes Care - HbA1c Poor Control (>9.0%)		
11	CDC	ratebp130	Comprehensive Diabetes Care - Blood Pressure Control (<140/90 mm Hg)		
12	CDC	ratelpp	Comprehensive Diabetes Care - LDL-C Screening		
13	CDC	rateeye	Comprehensive Diabetes Care - Eye Exam (Retinal) Performed		
14	ASM	ratetot	Use of Appropriate Medications for People With Asthma - Total		
15	URI	rate	Appropriate Treatment for Children with Upper Respiratory Infection		
16	W15	rate6	Well Child Visits in the First 15 Months of Life - Six or More Visits		
Continued on Next Page					

17	W34	rate	Well Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life		
18	CAP	rate1224	Children and Adolescents' Access to Primary Care Practitioners - 12-24 Months		
19	CAP	rate256	Children and Adolescents' Access to Primary Care Practitioners - 25 Months - 6 Years		
20	CAP	rate711	Children and Adolescents' Access to Primary Care Practitioners - 7-11 Years		
21	CAP	rate1219	Children and Adolescents' Access to Primary Care Practitioners - 12-19 Years		
22	AAP	ratetot	Adults' Access to Preventive/Ambulatory Health Services - Total		
<b>***END OF MEASURES***</b>					