ICP Pay for Performance -HEDIS 2013 1/1/2012 to 12/31/2012											
Measure	State Baseline Rate	QISMC Goal	Aetna				Illinicare				
			Aetna Rate	Difference from Baseline	Overall Result	QISMC Goal Status	IlliniCare Rate	Difference from Baseline	Overall Result	QISMC Goal Status	
Follow-up After Hospitalization for Mental Illness (FUH) - 30 day follow-up	55.42%	59.88%	44.03%	-11.39%	Declined	Not Met	40.90%	-14.52%	Declined	Not Met	
Annual Dental Visit (ADV) Total - DD Population	36.01%	42.41%	38.94%	2.93%	Improved	Not Met	28.12%	-7.89%	Declined	Not Met	
Comprehensive Diabetes Care (CDC) The CDC measure requires a Goal Status of MET for 2 of #1-3, and 1 of #4-5											
1. HbA1c Testing	77.13%	79.42%	83.39%	6.26%	Improved	Met	79.69%	2.56%	Improved	Met	
2. Nephropathy Monitoring	75.42%	77.88%	80.47%	5.05%	Improved	Met	82.78%	7.36%	Improved	Met	
3. LDL-C Screening	75.63%	78.07%	80.84%	5.21%	Improved	Met	75.50%	-0.13%	Declined	Not Met	
4. Statin Therapy (80% of Eligible days)	40.85%	46.77%	41.21%	0.36%	Improved	Not Met	38.32%	-2.53%	Declined	Not Met	
5. ACEI / ARB Therapy (80% of Eligible days)	38.38%	44.54%	40.40%	2.02%	Improved	Not Met	38.10%	-0.28%	Declined	Not Met	
Congestive Heart Failure (CHF) The CHF measure requires a Goal Status of MET for 2 of #1-3											
1. ACEI / ARB Therapy 80% of the Time	32.40%	39.16%	44.61%	12.21%	Improved	Met	36.48%	4.08%	Improved	Not Met	
2. Beta Blockers 80% of the Time	30.40%	37.36%	68.90%	38.50%	Improved	Met	78.70%	48.30%	Improved	Met	
3. Diuretics 80% of the Time	34.47%	41.02%	42.65%	8.18%	Improved	Met	42.86%	8.39%	Improved	Met	
Coronary Artery Disease (CAD) The CAD measure requires a Goal Status of MET for 2 of #1-4											
1. Cholesterol Testing	76.01%	78.41%	77.52%	1.51%	Improved	Not Met	74.72%	-1.29%	Declined	Not Met	
2. Statin Therapy 80% of the Time	42.74%	48.47%	45.75%	3.01%	Improved	Not Met	43.38%	0.64%	Improved	Not Met	
3. ACEI / ARB Therapy 80% of the Time	36.59%	42.93%	40.88%	4.29%	Improved	Not Met	37.69%	1.10%	Improved	Not Met	
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	35.00%	41.50%	86.00%	51.00%	Improved	Met	87.80%	52.80%	Improved	Met	
Pharmacotherapy Management of COPD Exacerbation (PCE)				1	he PCE measu	ıre requires a G	oal Status of M	IET for 2 of #1	-3		
Systemic corticosteroid dispensed cortocosteriod within of											
14 days of the event	62.08%	65.87%	69.97%	7.89%	Improved	Met	72.37%	10.29%	Improved	Met	
Bronchodilator dispensed within 30 days of the event Use of Spiromotry Testing in the Assessment and Diagnosis	78.13%	80.32%	89.47%	11.34%	Improved	Met	90.79%	12.66%	Improved	Met	
of COPD (SPR)*	29.67%	36.70%	NA	NA	NA	NA	NA	NA	NA	NA	
Ambulatory Care Follow-up Measures	23.0770	30.7070						10.			
Ambulatory Care Follow- up with a Provider within 14 Days of											
Emergency Department Visit	40.25%	46.23%	40.92%	0.67%	Improved	Not Met	40.11%	-0.14%	Declined	Not Met	
Ambulatory Care Follow-up with a Provider within 14 Days of	4C 0E0/	52.17%	54.10%	7.25%	Improved	Mot	50.96%	4.11%	Improved	Not Mot	
Inpatient Discharge (FPID) Behavioral Health Measures	46.85%	52.17%	54.10%	7.25%	Improved	Met	50.96%	4.11%	Improved	Not Met	
Antidepressant Medication Management (AMM) Effective Acute											
Phase Treatment	52.05%	56.85%	55.44%	3.39%	Improved	Not Met	49.31%	-2.74%	Declined	Not Met	
Antidepressant Medication Management (AMM) Effective											
Continuation Phase Treatment Utilization rates per 1,000 Member Months	41.52%	47.37%	47.67%	6.15%	Improved	Met	36.11%	-5.41%	Declined	Not Met	
Other dies per 1,000 Member Months											
Ambulatory Care - ED Visits per 1000 Member Months	178.23	160.41	76.93	(101.30)	Improved	Met	80.55	-97.68	Improved	Met	

Ambulatory Care - ED Visits per 1000 Member Months 178.23 160.41 76.93 (101.30) Improved

* The SPR measure required two years of continuous enrollment for members. Rates with fewer than 30 eligible cases are reported as NA

ICP Nor	-Pay for	Performar	nce -HEDIS 2013 1/1/2012 to 12/31/2012								
Measure	State Baseline Rate	QISMC Goal	Ae Difference		tna		Illinicare Difference Outre U.S.M.C. Cool				
			Aetna Rate	from Baseline	Overall Result	QISMC Goal Status	IlliniCare Rate	from Baseline	Overall Result	QISMC Goal Status	
Access to Care Measures (percentages)											
Annual Dental Visit (ADV)	23.92%	31.53%	23.15%	-0.77%	Declined	Not Met	20.47%	-3.45%	Declined	Not Met	
Inpatient Hospital 30-Day Readmission Rate (IPR)	8.31%	7.48%	7.91%	-0.40%	Improved	Not Met	12.82%	4.51%	Declined	Not Met	
Inpatient Mental Hospital 30-Day Readmission Rate (IMR)	24.20%	21.78%	23.34%	-0.86%	Improved	Not Met	27.61%	3.41%	Declined	Not Met	
Preventative Care Measures (percentages)					•	•					
Influenza Immunization (FLU)	9.92%	18.93%	13.08%	3.16%	Improved	Not Met	10.72%	0.80%	Improved	Not Met	
Cervical Cancer Screening (CCS)	40.81%	46.73%	31.87%	-8.94%	Declined	Not Met	37.55%	-3.26%	Declined	Not Met	
Appropriate Care Measures (percentages)	l							l			
Annual Monitoring for Patients on Persistent Medications (MPM)	86.00%	87.40%	89.59%	3.59%	Improved	Met	89.21%	3.21%	Improved	Met	
ACE Inhibiters or ARBS Annual Monitoring for Patients on Persistent Medications (MPM)	81.46%	83.31%	94.04%	12.58%	Improved	Met	91.61%	10.15%	Improved	Met	
<u>Digoxin</u> Annual Monitoring for Patients on Persistent Medications (MPM)	86.60%	87.94%	89.38%	2.78%	Improved	Met	89.66%	3.06%	Improved	Met	
<u>Diuretics</u> Annual Monitoring for Patients on Persistent Medications (MPM)	74.49%	77.04%	80.72%	6.23%	Improved	Met	78.77%	4.28%	Improved	Met	
Anti-convulsants Annual Monitoring for Patients on Persistent Medications (MPM)	84.12%	85.71%	87.84%	3.72%	Improved	Met	87.67%	3.55%	Improved	Met	
Total Comprehensive Diabetes Care (CDC) - Hemoglobin A1c (HbA1c)	79.05%	81.15%	80.26%	1.21%	Improved	Not Met	79.03%	-0.02%	Declined	Not Met	
Testing - DD Population Only Behavioral Health Measures (percentages)	73.0370	01.1370	00.20%	1.21/0	mproved	Notwice	73.0370	0.0270	Decimed	Not wet	
Adherence to Antipsychotic Medications for Individuals With			00.000/		1		70.070/				
Schizophrenia (SAA) Behavioral Health Risk Assessment (BHRA) and Completed Within	NA	NA	80.89%	NA	NA	NA	70.97%	NA	NA	NA	
60 Davs of Enrollment*	NA	NA	24.89%	NA	NA	NA	27.70%	NA	NA	NA	
Follow-up Completed within 30 Days of Positive BHRA*	NA	NA	29.41%	NA	NA	NA	38.77%	NA	NA	NA	
Initiation and Engagement of AOD Dependence Treatment (IET) 18+ years - Initiation of AOD Treatment	45.71%	51.14%	51.53%	5.82%	Improved	Met	53.56%	7.85%	Improved	Met	
Initiation and Engagement of AOD Dependence Treatment (IET) 18+ years - Engagement of AOD Treatment	8.97%	18.07%	6.12%	-2.85%	Declined	Not Met	5.00%	-3.97%	Declined	Not Met	
Follow-Up After Hospitalization for Mental Illness (FUH) - 7-Day follow up	34.67%	41.20%	25.93%	-8.74%	Declined	Not Met	23.03%	-11.64%	Declined	Not Met	
Utilization Measures (Per 1,000 Member Months)											
Ambulatory Care (AMB) - ED Visits Per 1,000 MM (DD Population	112.06	100.85	46.36	-65.70	Improved	Met	Rate Unavailable	Rate Unavailable	NA	NA	
Only) Dental ED Visits Per 1,000 MM (DERV)	11.37	10.23	0.80	-10.57	Improved	Met	0.73	-10.64	Improved	Met	
Inpatient Utilization (Per 1,000 Member Months)											
Inpatient Utilization (IPU) - Genreal Hospital/Acute Care: Total	40.35	36.32	27.65	-12.70	Improved	Met	27.32	-13.03	Improved	Met	
Inpatient Discharges (Per 1.000 MM) Inpatient Utilization (IPU) - Genreal Hospital/Acute Care: Total	28.95	26.06	19.34	-9.61	Improved	Met	19.29	-9.66	Improved	Met	
Medical Discharges (Per 1,000 MM) Inpatient Utilization (IPU) - Genreal Hospital/Acute Care: Total	10.78	9.70	7.79	-2.99	Improved	Met	7.61	-3.17	Improved	Met	
Surgery Discharges (Per 1,000 MM) Mental Health Utilization Inpatient and Outpatient Utilization (perce											
Mental Health Utilization (MPT) Any Services Total	25.04%	NA	22.92%	-2.12%	NA	NA	16.84%	-8.20%	NA	NA	
Mental Health Utilization (MPT) Inpatient Total	6.11%	NA	5.62%	-0.49%	NA	NA	4.20%	-1.91%	NA	NA	
Mental Health Utilization (MPT) Intensive outpatient/partial	2.74%	NA NA	0.24%	-2.50%	NA NA	NA NA	0.12%	-2.62%	NA NA	NA NA	
Hospitalization Total Mental Health Utilization (MPT) Outpatient Total	23.32%	NA NA	21.03%	-2.30%	NA NA	NA NA	15.19%	-8.13%	NA NA	NA NA	
	25.52/0	IVA	21.03/0	-2.23/0	IVA	IVA	13.13/0	-0.13/0	IVA	IVA	
Long Term Care (Per 1,000 Member Months)		1.0=	0.45	. =-	lu-		2.15	1.55	l		
Long Term Care Urinary Tract Infection Admission Rate (UTI) Long Term Care Bacterial Pneumonia Infection Admission Rate	2.17	1.95	0.42	-1.75	Improved	Met	0.48	-1.69	Improved	Met	
(BPAR) * There were no baseline rates established for the Behavioral Health	2.42	2.18	0.76	-1.66	Improved	Met	0.83	-1.59	Improved	Met	
baseline rates.	I NISK ASSESSIT	ieni (brika) De	cause the FFS	aid flot collec	ic ans measur	e. The rates for	uns reporting	periou wili be	useu to establ	isii uie	