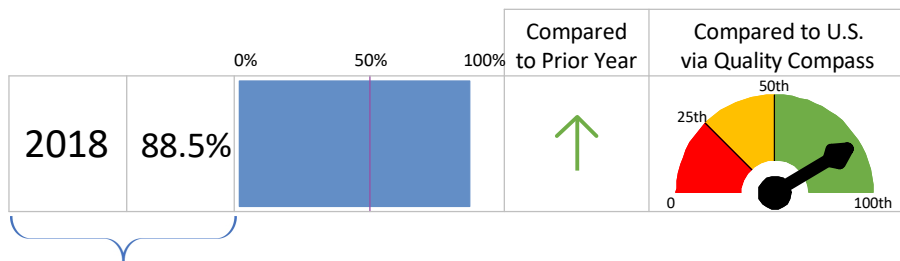


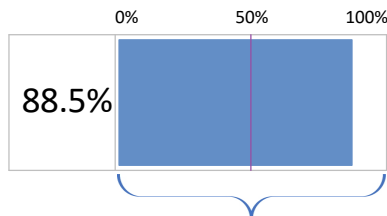
# KanCare Dashboard

KanCare is the Kansas managed care program for Medicaid and the Children’s Health Insurance Program (CHIP). This Dashboard shows how KanCare is doing year to year and compared to other states’ health plans. Sunflower Health Plan and UnitedHealthcare Community Plan of Kansas have been with KanCare since January 2013. Aetna Better Health of Kansas started with KanCare on January 1, 2019.

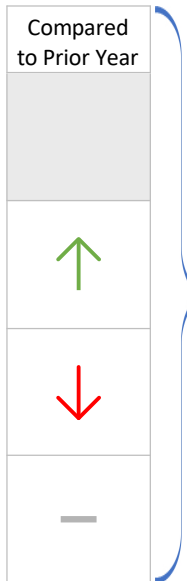
How to read the Dashboard:



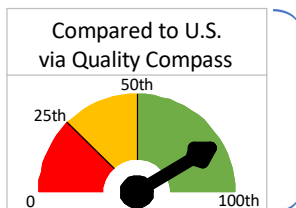
The year is the Measurement Year. The percentage is the KanCare rate. This rate is a combination of the three KanCare health plans.



The blue bar shows the KanCare rate on a scale of 0% to 100%. A line at 50% is used as a reference point.



A percentage point change is the current year's rate minus the prior year's rate. An up arrow (↑) means the rate is at least 2.0 points higher than the prior year. A down arrow (↓) means the rate is at least 2.0 points lower than the prior year. A dash (–) means a small or no change from the prior year. Gray shading means there is nothing to report. This may be because the measure is new that year.



The arrow shows how well KanCare is doing on a scale from 0 to 100 compared to other states' health plans. The lowest 25% of health plan rates form the red zone (0 to 25th). The highest 50% of health plan rates form the green zone (50th to 100th).



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3	Left	CAHPS survey	Rating Personal Doctor, General Child
3	Right	CAHPS survey	Rating of Personal Doctor, Adult
4	Left	CAHPS survey	Rating of Specialist Seen Most Often, General Child
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5	Left	HEDIS	Well-Child Visits in the First 15 Months of Life, 6 or more visits
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## Notes:

- Healthcare Effectiveness Data and Information Set (HEDIS®) measures. HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).
- Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan survey results. CAHPS is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services.
- Quality Compass® provides benchmarks of health plan performance. It is a registered trademark of the National Committee for Quality Assurance.
- Kansas Medicaid Mental Health Consumer Perception Survey, using the Mental Health Statistics Improvement Program (MHSIP) survey questions.
- Amerigroup Kansas, Inc. provided KanCare services from January 2013 through December 2018.

### Rating of Health Plan General Child

CAHPS survey	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	86.7%			
2015	87.6%		—	
2016	88.7%		—	
2017	87.7%		—	
2018	88.5%		—	

Rating of Health Plan, General Child:

Percent rating their child's Health Plan an 8, 9, or 10, where 0 is the worst health plan possible and 10 is the best health plan possible.

### Rating of Health Plan Adult

CAHPS survey	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	72.5%			
2015	73.4%		—	
2016	76.5%		↑	
2017	75.7%		—	
2018	77.8%		↑	

Rating of Health Plan, Adult:

Percent rating their Health Plan an 8, 9, or 10, where 0 is the worst health plan possible and 10 is the best health plan possible.

### Rating of All Health Care General Child

CAHPS survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	87.4%		
2015	85.7%	—	
2016	87.7%	↑	
2017	88.5%	—	
2018	88.3%	—	

Rating of All Health Care, General Child:

Percent rating their child's health care an 8, 9, or 10, where 0 is the worst health care possible and 10 is the best health care possible.

### Rating of All Health Care Adult

CAHPS survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	73.5%		
2015	73.9%	—	
2016	74.1%	—	
2017	74.5%	—	
2018	74.7%	—	

Rating of All Health Care, Adult:

Percent rating their health care an 8, 9, or 10, where 0 is the worst health care possible and 10 is the best health care possible.

### Rating of Personal Doctor General Child

CAHPS survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	88.4%		
2015	87.9%	—	
2016	88.7%	—	
2017	90.5%	—	
2018	90.3%	—	

Rating of Personal Doctor, General Child:

Percent rating their child’s personal doctor an 8, 9, or 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible.

### Rating of Personal Doctor Adult

CAHPS survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	79.6%		
2015	81.5%	—	
2016	80.5%	—	
2017	83.0%	↑	
2018	83.4%	—	

Rating of Personal Doctor, Adult:

Percent rating their personal doctor an 8, 9, or 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible.

### Rating of Specialist Seen Most Often General Child

CAHPS survey	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	85.4%			
2015	82.9%		↓	
2016	87.9%		↑	
2017	88.5%		—	
2018	90.7%		↑	

Rating of Specialist Seen Most Often, General Child:

Percent rating their child's specialist (the one seen most often in the last 6 months) an 8, 9, or 10, where 0 is the worst specialist possible and 10 is the best specialist possible.

### Rating of Specialist Seen Most Often Adult

CAHPS survey	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	80.0%			
2015	80.3%		—	
2016	80.6%		—	
2017	82.7%		↑	
2018	82.4%		—	

Rating of Specialist Seen Most Often, Adult:

Percent rating their specialist (the one seen most often in the last 6 months) an 8, 9, or 10, where 0 is the worst specialist possible and 10 is the best specialist possible.



**Primary Care Access and Preventive Care**

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

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	49.3%		
2015	58.7%	↑	
2016	58.6%	—	
2017	60.7%	↑	
2018	54.8%	↓	

Well-Child Visits in the First 15 Months of Life, 6 or more visits:

Percent of members who turned 15 months old during the measurement year and who had six or more well-child visits with a Primary Care Provider (PCP) during their first 15 months of life.

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

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	65.9%		
2015	64.8%	—	
2016	67.3%	↑	
2017	71.0%	↑	
2018	70.1%	—	

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

Percent of members (ages 3 - 6) who had one or more well-child visits with a Primary Care Provider (PCP) during the measurement year.

### Adolescent Well-Care Visits

HEDIS	Higher rates are better			Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%	100%		
2014	46.7%				
2015	46.8%			—	
2016	47.7%			—	
2017	53.3%			↑	
2018	50.7%			↓	

Adolescent Well-Care Visits:

Percent of enrolled members (ages 12 - 21) who had at least one complete well-care visit with a Primary Care Provider or an Obstetrician/Gynecologist (OB/GYN) during the measurement year.

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### Access to Ambulatory Health Services Adult

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	87.5%		
2015	87.1%	—	
2016	86.1%	—	
2017	86.7%	—	
2018	86.6%	—	

Access to Ambulatory Health Services, Adult:

Percent of members (age 20 and over) who had an ambulatory (outpatient) or preventive care visit.

*Due to changes in the measure in 2018, trend with prior years with caution.*

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### Chlamydia Screening in Women

HEDIS	Higher rates are better			Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%	100%		
2014	45.4%				
2015	45.8%			—	
2016	45.3%			—	
2017	45.1%			—	
2018	43.5%			—	

Chlamydia Screening in Women:

Percent of women (ages 16 - 24) who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

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### Childhood Immunizations Combination 10

HEDIS	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	29.9%			
2015	32.6%		↑	
2016	28.5%		↓	
2017	33.4%		↑	
2018	34.5%		—	

Childhood Immunization Status, Immunizations Combination 10:

Percent of members 2 years of age who were up-to-date on 10 immunizations (DTAP, IPV, MMR, HIB, HEPATITIS A, HEPATITIS B, VZV, PCV, ROTAVIRUS AND INFLUENZA) by their second birthday.

*Due to changes in the measure in 2018, trend with prior years with caution.*

### Flu Vaccination

CAHPS survey	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	47.5%			
2015	46.5%		—	
2016	43.7%		↓	
2017	48.8%		↑	
2018	50.5%		—	

Received the Influenza Vaccination, Age 18 to 64 (Q38):

Have you had either a flu shot, or flu spray in the nose since July 1 of the prior year?

### Cervical Cancer Screening

HEDIS	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	53.2%			
2015	51.6%		—	
2016	54.8%		↑	
2017	58.3%		↑	
2018	59.1%		—	

Cervical Cancer Screening:

Percent of female members (ages 21 - 64) who were screened and tested for cervical cancer using either of the following criteria:

- Women 21 - 64 years of age who had cervical pap test (pap smear) performed every 3 years.
- Women 30 - 64 years of age who had cervical pap test/human papillomavirus (HPV) co-testing performed every 5 years.

### Breast Cancer Screening

HEDIS	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014				
2015				
2016				
2017	47.0%			
2018	48.0%		—	

Breast Cancer Screening:

Percent of female members (ages 50 - 74) who had at least one mammogram (X-ray) to look for breast cancer in the past two years.

### Annual Dental Visit for Children/Adolescents

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	60.0%		
2015	60.9%	—	
2016	63.7%	↑	
2017	64.8%	—	
2018	65.4%	—	

Annual Dental Visit for Children/Adolescents:

Percent of members (ages 2 - 20) with dental benefits, who had at least one dental visit during the year.

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**Primary Care Access and Preventive Care**

**Weight Assessment/BMI for Children/Adolescents**

HEDIS	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	45.3%			
2015	48.6%		↑	
2016	56.0%		↑	
2017	64.7%		↑	
2018	63.8%		—	

Weight Assessment & Counseling for Nutrition and Physical Activity for Children/Adolescents, Weight Assessment/BMI:

Percent of members (ages 3 - 17) who had an outpatient visit with a Primary Care Provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had their BMI Body Mass Index (BMI - a measure of body fat relating height to weight) noted.

**Counseling for Nutrition for Children/Adolescents**

HEDIS	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	49.5%			
2015	49.1%		—	
2016	54.7%		↑	
2017	59.2%		↑	
2018	57.2%		↓	

Weight Assessment & Counseling for Nutrition and Physical Activity for Children/Adolescents, Counseling for Nutrition:

Percent of members (ages 3 - 17) who had an outpatient visit with a Primary Care Provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had proof of teaching about nutrition (healthy eating).



### Counseling for Physical Activity for Children/Adolescents

HEDIS	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50%		
2014	45.8%			
2015	44.9%		—	
2016	51.5%		↑	
2017	53.9%		↑	
2018	55.0%		—	

Weight Assessment & Counseling for Nutrition and Physical Activity for Children/Adolescents, Counseling for Physical Activity:

Percent of members (ages 3 - 17) who had an outpatient visit with a Primary Care Provider (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had proof of teaching about physical activity.

*Due to changes in the measure in 2015, trend with prior years with caution.*

Intentionally Left Blank

### Adult BMI Assessment

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	72.2%		
2015	77.6%	↑	
2016	80.9%	↑	
2017	86.5%	↑	
2018	90.4%	↑	

Adult BMI Assessment:

Percent of members (ages 18 - 74) who had an outpatient visit and whose body mass index (BMI - a measure of body fat relating height to weight) was noted during the measurement year or the year prior to the measurement year.

Intentionally Left Blank

### Medication Assistance with Smoking and Tobacco Use Cessation

CAHPS survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	48.3%		
2015	43.2%	↓	
2016	46.1%	↑	
2017	51.2%	↑	
2018	52.2%	—	

Advising Smokers and Tobacco Users to Quit, Medication Based Strategy:

In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco?

(Always, Usually, or Sometimes)

Intentionally Left Blank

### Initiation in Treatment for Alcohol or Other Drug Dependence

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	42.6%		
2015	38.9%	↓	
2016	41.4%	↑	
2017	35.8%	↓	
2018	36.2%	—	

Initiation in Treatment for Alcohol or Other Drug Dependence:

Percent of members (age 13 and over) with a new period of alcohol or other drug (AOD) abuse or dependence who began treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication treatment within 14 days of diagnosis.

*Due to changes in the measure in 2017, do not trend with prior years.*

### Engagement in Treatment for Alcohol or Other Drug Dependence

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	14.8%		
2015	12.9%	—	
2016	14.3%	—	
2017	12.0%	↓	
2018	11.6%	—	

Engagement in Treatment for Alcohol or Other Drug Dependence:

Percent of members (age 13 and over) with a new period of alcohol or other drug (AOD) abuse or dependence who began treatment and who had two or more additional AOD services or medication treatment within 34 days of the first visit.

*Due to changes in the measure in 2017, do not trend with prior years.*

### Medication Management for People with Asthma

HEDIS	Higher rates are better		Compared to Prior Year	Compared to U.S. via Quality Compass
	0%	50% 100%		
2014	28.1%			
2015	29.9%		—	
2016	33.7%		↑	
2017	39.2%		↑	
2018	40.4%		—	

**Medication Management for People with Asthma:**

Percent of members (ages 5 - 64) who are known to have chronic asthma and were given proper medications (asthma controller) that they remained on for at least 75% of their treatment period.

*Due to changes in the measure in 2018, trend with prior years with caution.*

Intentionally Left Blank

### Timeliness of Prenatal Care

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	70.4%		
2015	67.4%	↓	
2016	68.4%	—	
2017	69.3%	—	
2018	75.5%	↑	

Timeliness of Prenatal Care:

Percent of women that received a prenatal care visit in the first three months of pregnancy (first trimester), on the health plan enrollment start date or within 42 days of enrollment in the health plan.

### Postpartum Care

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	55.8%		
2015	57.5%	—	
2016	58.0%	—	
2017	61.1%	↑	
2018	58.2%	↓	

Postpartum Care:

Percent of women that had a health care visit on or between 21 and 56 days after having a baby.

# Getting Needed Care/Getting Care Quickly

## Getting Needed Care General Child



Getting Needed Care, General Child:

A combination of responses to the following questions regarding the last 6 months:

- How often was it easy to get the care, tests, or treatment your child needed?
- How often did you get an appointment for your child to see a specialist as soon as your child needed?

## Getting Needed Care Adult



Getting Needed Care, Adult:

A combination of responses to the following questions regarding the last 6 months:

- How often was it easy to get the care, tests, or treatment you needed?
- How often did you get an appointment to see a specialist as soon as you needed?

### Controlling High Blood Pressure

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	51.5%		
2015	48.2%	↓	
2016	52.1%	↑	
2017	53.6%	—	
2018	58.6%	↑	

Controlling High Blood Pressure:

Percent of members (ages 18 - 75) with diabetes (type 1 and type 2) who had their Blood Pressure under control (<140/90 mm Hg).

*Due to changes in the measure in 2018, do not trend with prior years.*

### HbA1C Control (<8.0%)

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	39.3%		
2015	46.6%	↑	
2016	51.0%	↑	
2017	55.0%	↑	
2018	54.9%	—	

Comprehensive Diabetes Care, HbA1C Control (<8.0%):

Percent of members (ages 18 - 75) with diabetes (type 1 and type 2) who had their Hemoglobin A1c (average level of blood sugar over the past two to three months) considered under control (<8.0%).

*Due to changes in the measure in 2015, trend with prior years with caution.*

*Due to changes in the measure in 2018, trend with prior years with caution.*



### Follow-Up Care for Children Prescribed ADHD Medication within the Initiation Phase



Follow-Up Care for Children Prescribed ADHD Medication within the Initiation Phase:

Percent of members (ages 6 - 12) who had a follow-up provider visit within 30 days of the first order for ADHD (Attention Deficit Hyperactivity Disorder) medicine.

*Due to changes in the measure in 2017, trend with prior years with caution.*

### Follow-Up Care for Children Prescribed ADHD Medication within the Continuation and Maintenance Phase



Follow-Up Care for Children Prescribed ADHD Medication within the Continuation and Maintenance Phase:

Percent of children who were ages 6 - 12 years when first given medicine for ADHD (Attention Deficit Hyperactivity Disorder), who were on the medication 210 days and had at least 2 follow-up provider visits 9 months after the first dose.

*Due to changes in the measure in 2017, trend with prior years with caution.*

### Follow-Up after Hospitalization for Mental Illness within seven days of discharge

HEDIS	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	56.2%		
2015	62.8%	↑	
2016	64.4%	—	
2017	59.0%	↓	
2018	55.3%	↓	

Follow-Up after Hospitalization for Mental Illness within 7 days of discharge:

Percent of discharges for members (age 6 and over) who were in a hospital for treatment of selected mental illness or intentional self-harm, who had a follow-up visit with a mental health provider within 7 days after discharge.

*Due to changes in the measure in 2017, do not trend with prior years.*

*Due to changes in the measure in 2018, trend with prior years with caution.*

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**Coordination of Care/Communication**

**Coordination of Care  
General Child**

CAHPS survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	82.0%		
2015	82.3%	—	
2016	81.5%	—	
2017	84.9%	↑	
2018	81.4%	↓	

Coordination of Care, General Child:

For children who received care from a doctor or other health provider besides their personal doctor:

- In the last 6 months, how often did your child’s personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?

**Coordination of Care  
Adult**

CAHPS survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	83.0%		
2015	82.7%	—	
2016	85.0%	↑	
2017	84.6%	—	
2018	83.8%	—	

Coordination of Care, Adult:

For adults who received care from a doctor or other health provider besides their personal doctor:

- In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

**Coordination of Care/Communication**

**How Well Doctors Communicate  
General Child**



How Well Doctors Communicate, General Child:

A combination of responses to the following questions regarding the last 6 months:

- How often did your child’s personal doctor explain things about your child’s health in a way that was easy to understand?
- How often did your child’s personal doctor listen carefully to you?
- How often did your child’s personal doctor show respect for what you had to say?
- How often did your child’s personal doctor spend enough time with your child?

**How Well Doctors Communicate  
Adult**



How Well Doctors Communicate, Adult:

A combination of responses to the following questions regarding the last 6 months:

- How often did your personal doctor explain things in a way that was easy to understand?
- How often did your personal doctor listen carefully to you?
- How often did your personal doctor show respect for what you had to say?
- How often did your personal doctor spend enough time with you?

### Shared Decision Making General Child



Shared Decision Making, General Child:

A combination of responses to the following questions regarding the last 6 months:

- Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?
- Did you and a doctor or other health provider talk about the reasons you might not want your child to take a medicine?
- When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

### Shared Decision Making Adult

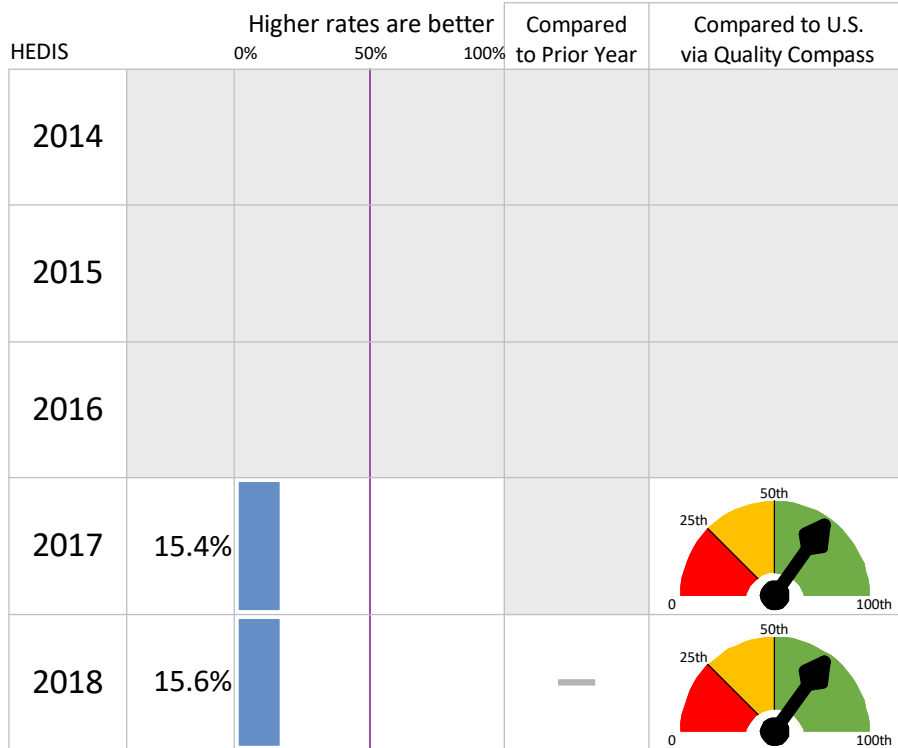


Shared Decision Making, Adult:

A combination of responses to the following questions regarding the last 6 months:

- Did you and a doctor or other health provider talk about the reasons you might want to take a medicine?
- Did you and a doctor or other health provider talk about the reasons you might not want to take a medicine?
- When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

### Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence within seven days

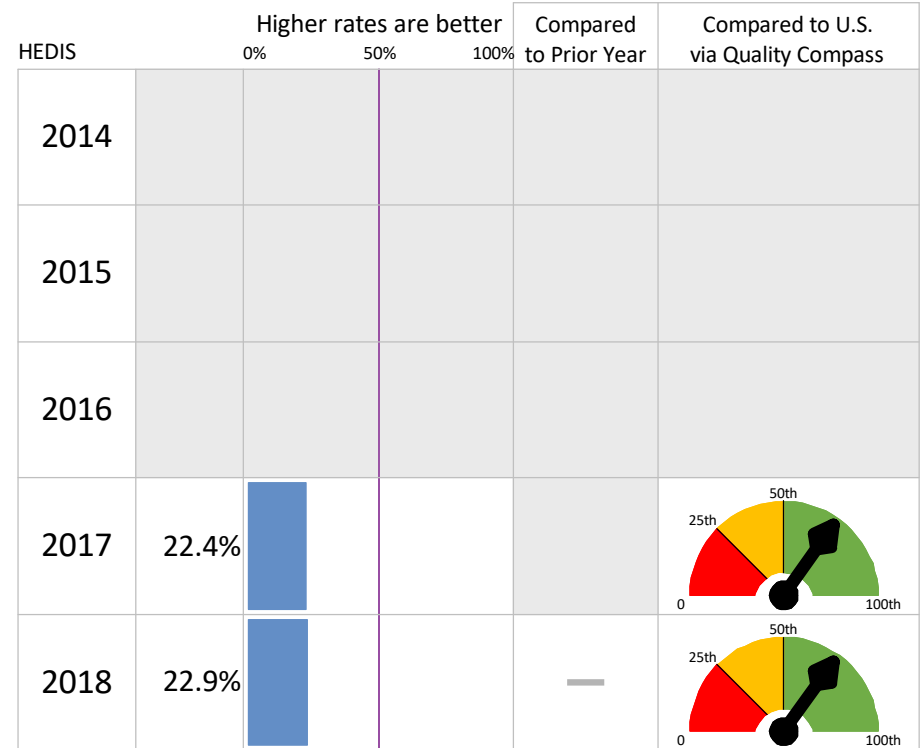


Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence, 7 days:

Percent of emergency room visits for members (age 13 and over) with a principal diagnosis (main reason for visit) of alcohol or other drug (AOD) abuse or dependence, who had a follow-up visit for AOD within 7 days of the emergency room visit.

*Due to changes in the measure in 2018, trend with prior years with caution.*

### Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence within thirty days

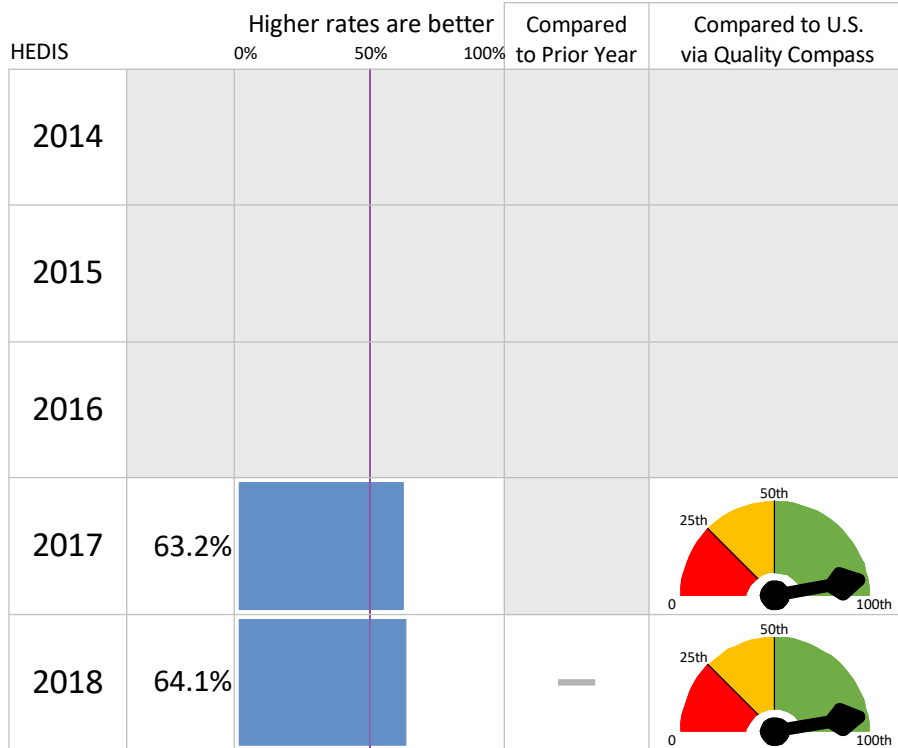


Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence, 30 days:

Percent of emergency room visits for members (age 13 and over) with a principal diagnosis (main reason for visit) of alcohol or other drug (AOD) abuse or dependence, who had a follow-up visit for AOD within 30 days of the emergency room visit.

*Due to changes in the measure in 2018, trend with prior years with caution.*

### Follow-Up After Emergency Department Visit for Mental Illness within seven days

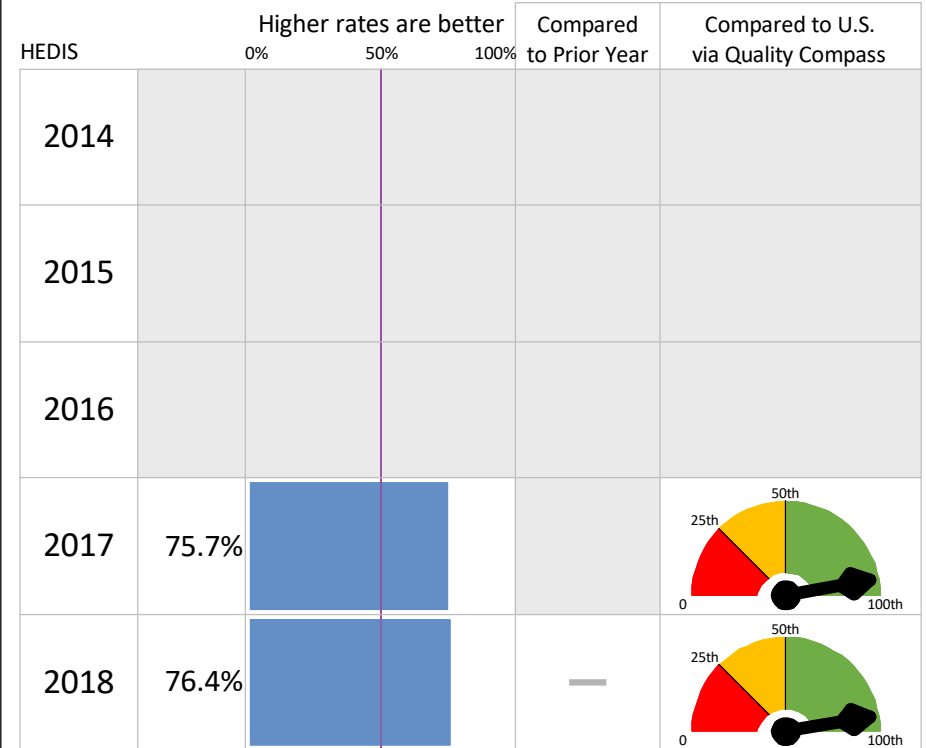


Follow-Up After Emergency Department Visit for Mental Illness, 7 days:

Percent of emergency room visits for members (age 6 and over) with a mental illness, who had a follow-up visit for mental illness within 7 days of the emergency department visit.

*Due to changes in the measure in 2018, do not trend with prior years.*

### Follow-Up After Emergency Department Visit for Mental Illness within thirty days



Follow-Up After Emergency Department Visit for Mental Illness, 30 days:

Percent of emergency department visits for members (age 6 and over) with a mental illness, who had a follow-up visit for mental illness within 30 days of the emergency department visit.

*Due to changes in the measure in 2018, do not trend with prior years.*

**Behavioral Health**

**Participation in Treatment Planning  
Adults**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	83.8%		Not Available
2015	85.2%	—	Not Available
2016	78.3%	↓	Not Available
2017	84.0%	↑	Not Available
2018	78.7%	↓	Not Available

Participation in Treatment Planning, Adults (Ages 18+):

The Participation in Treatment Planning composite (combined) score for adults (age 18 and over) includes the following survey items:

- I felt comfortable asking questions about my treatment and medication;
- I, not my mental health providers, decided my treatment goals.

**Participation in Treatment Planning  
Youth**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	93.0%		Not Available
2015	94.1%	—	Not Available
2016	95.0%	—	Not Available
2017	96.0%	—	Not Available
2018	94.6%	—	Not Available

Participation in Treatment Planning, Youth (Ages 0–17), Family Responding:

The Participation in Treatment Planning composite (combined) score for youth (age 17 and under) as noted by their family, includes the following questions:

- I helped to choose my child's services;
- I helped to choose my child's treatment goals;
- I participated in my child's treatment.



**Behavioral Health**

**Medication Available Timely  
Adults**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	92.7%		Not Available
2015	90.3%	↓	Not Available
2016	92.9%	↑	Not Available
2017	91.0%	—	Not Available
2018	92.1%	—	Not Available

Medication Available Timely, Adults (Ages 18+):

If you are on medication for emotional/behavioral problems, were you able to get it timely?

**Medication Available Timely  
Youth**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	85.3%		Not Available
2015	88.0%	↑	Not Available
2016	83.7%	↓	Not Available
2017	95.6%	↑	Not Available
2018	96.0%	—	Not Available

Medication Available Timely, Youth (Ages 0–17), Family Responding:

If you are on medication for emotional/behavioral problems, were you able to get it timely?

**Behavioral Health**

**Service Access  
Adults (Ages 18+)**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	88.1%		Not Available
2015	88.7%	—	Not Available
2016	81.0%	↓	Not Available
2017	88.2%	↑	Not Available
2018	87.0%	—	Not Available

**Service Access, Adults (Ages 18+):**

The Service Access composite (combined) score for adults (age 18 and over) includes the following survey items:

- The location of services was convenient (parking, public transportation, distance, etc.);
- My mental health providers were willing to see me as often as I felt was necessary;
- My mental Health providers returned my calls in 24 hours;
- Services were available at times that were good for me;
- I was able to get all the services I thought I needed;
- I was able to see a psychiatrist when I wanted to.

**Service Access  
Youth (Ages 0–17), Family Responding**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	84.1%		Not Available
2015	87.3%	↑	Not Available
2016	82.9%	↓	Not Available
2017	87.5%	↑	Not Available
2018	86.4%	—	Not Available

**Service Access, Youth (Ages 0–17), Family Responding:**

The Service Access composite (combined) score for youth (age 17 and under) as noted by their family, includes the following survey items:

- The location of services was convenient for us;
- Services were available at times that were convenient for us.

**Behavioral Health**

**General Satisfaction  
Adults (Ages 18+)**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	92.0%		Not Available
2015	92.0%	—	Not Available
2016	88.8%	↓	Not Available
2017	91.5%	↑	Not Available
2018	90.4%	—	Not Available

General Satisfaction, Adults (Ages 18+):

The General Satisfaction composite (combined) score for adults (age 18 and over) includes the following survey items:

- I like the services that I received;
- If I had other choices, I would still get services from my mental health providers;
- I would recommend my mental health providers to a friend or family member.

**General Satisfaction  
Youth (Ages 0–17), Family Responding**

Mental Health Survey	Higher rates are better 0% 50% 100%	Compared to Prior Year	Compared to U.S. via Quality Compass
2014	87.3%		Not Available
2015	91.3%	↑	Not Available
2016	88.0%	↓	Not Available
2017	89.6%	—	Not Available
2018	90.3%	—	Not Available

General Satisfaction, Youth (Ages 0–17), Family Responding:

The General Satisfaction composite (combined) score for youth (age 17 and under) as noted by their family, includes the following survey items:

- Overall, I am satisfied with the services my child received;
- The staff helping my child stuck with us no matter what;
- I felt my child had someone to talk to when he/she was troubled;
- The services my child and/or family received were right for us;
- My family got the help we wanted for my child;
- My family got as much help as we needed for my child.