



Georgia Department of Community Health

Validation of Performance Measures

for

Peach State Health Plan

Measurement Period: Calendar Year 2012

Validation Period: State Fiscal Year 2013

Publish Date: September 20, 2013



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Validation of Performance Measures for Peach State Health Plan

Validation Overview

Validation of performance measures is one of three mandatory external quality review (EQR) activities that the Balanced Budget Act of 1997 (BBA) requires state Medicaid agencies to perform. Health Services Advisory Group, Inc. (HSAG), the external quality review organization (EQRO) for the Department of Community Health (DCH), conducted the validation activities. The DCH contracts with three care management organizations (CMOs) to provide services to Medicaid managed care enrollees and PeachCare for Kids[®] enrollees. PeachCare for Kids[®] is the name of Georgia’s stand-alone Children’s Health Insurance Program (CHIP). The DCH identified a set of performance measures that were calculated and reported by the CMOs for validation. HSAG conducted the validation activities as outlined in the Centers for Medicare & Medicaid Services (CMS) publication, *EQR Protocol 2: Validation of Performance Measures Reported by the MCO: A Mandatory Protocol for External Quality Review (EQR)*, Version 2.0, September 2012.

Care Management Organization (CMO) Information

HSAG validated performance measures calculated and reported by Peach State Health Plan (Peach State). Information about Peach State appears in Table 1.

Table 1—Peach State Health Plan Information

CMO Name:	Peach State Health Plan
CMO Location:	3200 Highlands Parkway SE, Suite 300 Smyrna, GA 30082
CMO Contact:	Joyce McElwain, Senior Director, Quality Improvement
Contact Telephone Number:	678.556.2344
Contact E-mail Address:	jmcelwain@centene.com
Site Visit Date:	April 18, 2013

Performance Measures Validated

HSAG validated performance measures identified and selected by DCH for validation. All performance measures were selected from the Centers for Medicare & Medicaid Services’ (CMS) Initial Core Set of Children’s Health Care Quality Measures,¹ the Initial Core Set of Health Care Quality Measures for Adults Enrolled in Medicaid,² or the Agency for Healthcare Research and Quality (AHRQ). The measurement period was identified by DCH as calendar year (CY) 2012 for all measures except the two child core set dental measures. The dental measures were reported for federal fiscal year (FFY) 2012, which covered the time frame of October 1, 2011, through September 30, 2012, per CMS requirements. Table 2 lists the performance measures that HSAG validated and identifies who calculated the performance measure rates.

Table 2—List of CY 2012 Performance Measures for Peach State

	Performance Measure	Method	Specifications	Rate Calculation by:
1.	Annual Pediatric Hemoglobin (HbA1c) Testing (ages 5–17)	Hybrid ³	CMS Child Core Set	Peach State
2.	Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visit (ages 2–20)	Admin	CMS Child Core Set	Peach State
3.	Cesarean Delivery Rate	Admin	AHRQ	Peach State
4.	Cesarean Rate for Nulliparous Singleton Vertex	Admin	CMS Child Core Set ⁴	Peach State
5.	Percentage of Eligibles that Received Dental Treatment Services	Admin	CMS Child Core Set	Peach State
6.	Percentage of Eligibles that Received Preventive Dental Services	Admin	CMS Child Core Set	Peach State
7.	Percentage of Live Births Weighing Less Than 2,500 Grams	Admin	CMS Child Core Set/AHRQ	Peach State
8.	Adult Asthma Admission Rate	Admin	CMS Adult Core Set	Peach State
9.	Chronic Obstructive Pulmonary Disease (COPD) Admission Rate	Admin	CMS Adult Core Set	Peach State
10.	Congestive Heart Failure Admission Rate	Admin	CMS Adult Core Set	Peach State
11.	Diabetes, Short-Term Complications Admission Rate	Admin	CMS Adult Core Set	Peach State

¹ The Centers for Medicare & Medicaid Services. Initial Core Set of Children’s Health Care Quality Measures, November 2012.

² The Centers for Medicare & Medicaid Services. Initial Core Set of Health Care Quality Measures for Adults Enrolled in Medicaid, February 2013.

³ Hybrid measures require both administrative data and medical record review.

⁴ The CMS measure specifications were modified by HSAG.

In addition to the AHRQ and the CMS adult and child core set measures audited by HSAG, DCH required Peach State to report a selected set of Healthcare Effectiveness Data and Information Set (HEDIS[®]) measures to DCH. Peach State was required to contract with an NCQA-licensed audit organization and undergo an NCQA HEDIS Compliance Audit[™]. Final audited HEDIS measure results from NCQA's Interactive Data Submission System (IDSS) were submitted to HSAG and provided to DCH. Appendices D and E display the final audited HEDIS 2013 results for all required measures, covering the 2012 measurement period. HSAG will use these results in addition to the measures HSAG validated and displayed within this report as data sources for the annual EQR technical report.

HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).
HEDIS Compliance Audit[™] is a trademark of the National Committee for Quality Assurance (NCQA).

Description of Validation Activities

Pre-Audit Strategy

HSAG conducted the validation activities as outlined in the CMS performance measure validation protocol. To complete the validation activities for Peach State, HSAG obtained a list of the measures that were selected by DCH for validation.

HSAG then prepared a document request letter that was submitted to Peach State outlining the steps in the performance measure validation process. The document request letter included a request for source code for each performance measure; a completed HEDIS 2013 Record of Administration, Data Management, and Processes (Roadmap); and any additional supporting documentation necessary to complete the audit. HSAG responded to Roadmap-related questions received directly from Peach State during the pre-on-site phase.

For the on-site visit, HSAG prepared an agenda describing all visit activities and indicating the type of staffing needed for each session. HSAG provided the agenda to Peach State approximately one week prior to the on-site visit. HSAG also conducted a pre-on-site conference call with Peach State to discuss any outstanding Roadmap questions and on-site visit activity expectations.

Validation Team

The HSAG Performance Measure Validation Team was composed of a lead auditor and validation team members. HSAG assembled the team based on the skills required for the validation and requirements of Peach State. Some team members, including the lead auditor, participated in the on-site meetings at Peach State; others conducted their work at HSAG’s offices. Table 3 lists the validation team members, their positions, and their skills and expertise.

Name and Role	Skills and Expertise
Patience Hoag, RHIT, CHCA, CHDA, CCS, CCS-P, CPHQ <i>Lead Auditor</i>	Certified HEDIS auditor, certified coder; HEDIS knowledge, interviewing skills, data analysis, abstraction, tool development, and quality improvement.
Judy Yip, PhD <i>Source Code Review Manager and Audit Specialist, Audits</i>	Auditing experience, HEDIS knowledge, performance measure knowledge, and source code review management.
Tammy Gianfrancesco <i>Project Leader, Audits</i>	Performance measure validation coordination, communication, and scheduling.

Technical Methods of Data Collection and Analysis

The CMS performance measures validation protocol identifies key types of data that should be reviewed as part of the validation process. The following list describes the type of data collected and how HSAG conducted an analysis of these data:

- ◆ **NCQA's HEDIS 2013 Roadmap:** Peach State completed and submitted the required and relevant portions of its Roadmap for review by the validation team. The validation team used responses from the Roadmap to complete the pre-on-site assessment of information systems.
- ◆ **Source code (programming language) for performance measures:** Peach State contracted with Inovalon, an NCQA-Certified software vendor, to calculate rates for both HEDIS and non-HEDIS measures. The source code review was conducted via a Web-assisted session where Inovalon explained the process and source code to HSAG's source code review team.
- ◆ **Supporting documentation:** HSAG requested documentation that would provide reviewers with additional information to complete the validation process, including policies and procedures, file layouts, system flow diagrams, system log files, and data collection process descriptions. The validation team reviewed all supporting documentation, identifying issues or areas needing clarification for further follow-up.

On-Site Activities

HSAG conducted an on-site visit with Peach State on April 18, 2013. HSAG collected information using several methods, including interviews, system demonstration, review of data output files, primary source verification, observation of data processing, and review of data reports. The on-site visit activities are described as follows:

- ◆ **Opening meeting:** The opening meeting included an introduction of the validation team and key Peach State staff members involved in the performance measure activities. The review purpose, the required documentation, basic meeting logistics, and queries to be performed were discussed.
- ◆ **Evaluation of system compliance:** The evaluation included a review of the information systems, focusing on the processing of claims and encounter data, provider data, patient data, and inpatient data. Additionally, the review evaluated the processes used to collect and calculate the performance measure rates, including accurate numerator and denominator identification and algorithmic compliance (which evaluated whether rate calculations were performed correctly, all data were combined appropriately, and numerator events were counted accurately).
- ◆ **Review of Roadmap and supporting documentation:** The review included processes used for collecting, storing, validating, and reporting performance measure rates. This session was designed to be interactive with key Peach State staff members so that the validation team could obtain a complete picture of all the steps taken to generate the performance measure rates. The goal of the session was to obtain a confidence level as to the degree of compliance with written documentation compared to the actual process. HSAG conducted interviews to confirm findings from the documentation review, expand or clarify outstanding issues, and ascertain that written policies and procedures were used and followed in daily practice.

- ◆ **Overview of data integration and control procedures:** The overview included discussion and observation of source code logic, a review of how all data sources were combined, and a review of how the analytic file was produced for the reporting of selected performance measure rates. HSAG performed primary source verification to further validate the output files and reviewed backup documentation on data integration. HSAG also addressed data control and security procedures during this session.
- ◆ **Closing conference:** The closing conference included a summation of preliminary findings based on the review of the Roadmap and the on-site visit, and revisited the documentation requirements for any post-visit activities.

HSAG conducted several interviews with key Peach State staff members who were involved with performance measure reporting. Table 4 lists key Peach State interviewees:

Table 4—List of Peach State Health Plan Interviewees	
Name	Title
Alfred Miller	Data Analyst III
Detra Friley-Clark	Director, Provider Data and Credentialing
Joyce McElwain	Senior Director, Quality Improvement
Ron Purisima	Manager, Quality Analytics
Dean Greeson	Senior Vice President, Medical Director
Donna McIntosh	Senior Director, Compliance
Shaywen Hawkins	Quality Improvement Manager
Andrea Stuckey-Hendley	Project Manager, Compliance
Chevron Cardenas	Senior Director, Member and Provider Services
Heather House	Farmington Claims Supervisor
Jessica Silver	Corporate Director, Encounters
Kimberly Weakley	Vice President, Provider Solutions
Debra Peterson-Smith	Senior Vice President, Operations
Luke Ferguson	Encounters Analyst
Tonnette Tucker	Supervisor, Provider Data Management
Inez Sarves	Contract Management
Wanda Lee	Member Service Manager
Jason Rosen	Senior Health Economics Analyst
Brian Daming	Information Technology QSI Technician
Valerie Liserio-Eike	Quality Improvement Specialist—HEDIS
Yolanda Spivey	Senior Director, Data Analytics

Data Integration, Data Control, and Performance Measure Documentation

There are several aspects crucial to the calculation of performance measure rates. These include data integration, data control, and documentation of performance measure calculations. Each of the following sections describes the validation processes used and the validation findings. For more detailed information, see Appendix A of this report.

Data Integration

Accurate data integration is essential for calculating valid performance measure rates. The steps used to combine various data sources (including claims/encounter data, eligibility data, and other administrative data) must be carefully controlled and validated. HSAG validated the data integration process used by Peach State, which included a review of file consolidations or extracts, a comparison of source data to warehouse files, data integration documentation, source code, production activity logs, and linking mechanisms. Overall, the validation team determined that the data integration processes in place at Peach State were:

- Acceptable
- Not acceptable

Data Control

Peach State's organizational infrastructure must support all necessary information systems; and its quality assurance practices and backup procedures must be sound to ensure timely and accurate processing of data, and to provide data protection in the event of a disaster. HSAG validated the data control processes Peach State used which included a review of disaster recovery procedures, data backup protocols, and related policies and procedures. Overall, the validation team determined that the data control processes in place at Peach State were:

- Acceptable
- Not acceptable

Performance Measure Documentation

Sufficient, complete documentation is necessary to support validation activities. While interviews and system demonstrations provided supplementary information, the majority of the validation review findings were based on documentation provided by Peach State. HSAG reviewed all related documentation, which included the completed Roadmap, job logs, computer programming code, output files, work flow diagrams, narrative descriptions of performance measure calculations, and other related documentation. Overall, the validation team determined that the documentation of performance measure calculations by Peach State was:

- Acceptable
- Not acceptable

Validation Results

The validation team evaluated Peach State's data systems for processing of each type of data used for reporting DCH performance measure rates. General findings are indicated below:

Medical Service Data (Claims/Encounters)

There were no concerns with Peach State's medical service data system or processes. The plan continued to use Amisys as its transactional system, which had sufficient edits in place to ensure data were complete and accurate upon entry/loading into the system. All data elements needed for reporting the performance measures were captured. All providers submitted data in standard formats, using industry standard codes. Over 90 percent of Peach State's providers and facilities submitted claims data electronically, which instilled additional confidence in data accuracy. Paper claims were received at the corporate office in Farmington, Missouri; scanned via optical character recognition (OCR) technology; and loaded into Amisys for processing. Minimal data were manually entered into Amisys. The plan's reimbursement structure is fee-for-service (FFS), which serves as a built-in incentive for providers to submit data to the plan. Peach State's claims processors are audited on an ongoing basis, and all processors met standards for the measurement year for payment, financial, and processing accuracy. The entire process from data submission to claims processing is highly automated, with very little manual intervention.

The plan successfully transitioned to the 5010 format, and most of its providers had also transitioned during 2012. Claims submitted by providers using the 4010 format were rejected for reimbursement, which encouraged providers to submit claims with the updated format. The plan was also proactively planning for ICD-10 implementation, having begun mapping and other preparations for the transition in the code set in 2014.

Although the plan's reimbursement structure helps ensure that providers are submitting complete data, the plan also ran various monitoring reports to track providers' claim submission volumes. If a high-volume provider were to suspend submission of claims to the plan, this action would be quickly identified.

Peach State used DentaQuest to process its dental claims. Although DentaQuest underwent a system transition during late 2011, the transition went smoothly, and there were no issues related to data loss. Thorough testing prior to implementation included running dual systems and comparing results to historical data. DentaQuest sent encounter files to Peach State twice each month, and the encounters were then loaded to the data warehouse. There were no issues or concerns with the completeness or integrity of the data in 2012, as ongoing monitoring of volume occurs as a part of data receipt and loading.

Peach State contracted with US Script to serve as its pharmacy vendor. Data were submitted to Peach State at least weekly and included paid, denied, and reversal claims data. These data were loaded to the plan's data warehouse for use in measure reporting. There were no issues with data format, timeliness, or completeness in 2012.

A recommendation for more formal documentation of vendor monitoring was made during the previous performance measure validation review and discussed during the on-site review. Peach State conducted meetings with each of its vendors monthly (weekly for those not meeting performance standards) to discuss any issues or concerns, and maintained documentation of this interaction. The plan's Finance department also performed oversight of pharmacy transactional and payment volumes, which was documented. In addition, the plan submitted a comprehensive document for auditor review, *GA CMO Encounter Report*. The report was produced by an accounting firm and showed detailed financial information based on data provided by each of the plan's vendors.

Enrollment Data

Peach State had effective processes for acquiring and loading enrollment data from the State's fiscal agent. The plan had a highly electronic, well-coordinated, and long-standing method for acquisition and loading of State enrollment files. Daily 834 changes/addition files were acquired via secure file transfer protocol, processed for edit checks, and then uploaded into Amisys, the transactional system. Error reports were generated identifying discrepancies that needed to be manually worked. The plan also received a full monthly enrollment file, which included demographic changes, terminations, additions, and voids. The State's fiscal agent also provided an end-of-month adjustment file that included voided transactions (e.g., the member was not or never was eligible). Any discrepancies requiring research were identified through automated reports and corrected efficiently, with monthly reporting to the State for any member data discrepancies that had not been corrected. There were no backlogs during 2012. The auditor had no concerns with Peach State's enrollment data.

Provider Data

There were no concerns with the plan's provider data system or processes. The plan used the Portico system to house provider data. This software application interfaces seamlessly with Amisys, which helps to eliminate reconciliation concerns. Peach State conducts 100 percent validation of all data entry of its direct providers and continually monitors delegated entities' data. The number of primary care physicians increased during 2012 due to the plan's expansion initiative, which delayed some provider data entry. The delay was quickly remedied, however, because staffing was immediately increased to accommodate the influx.

Medical Record Review Process

Peach State was fully compliant with the medical record review reporting requirements. Peach State used the vendor, RecordFlow, to procure the medical records, and another vendor, Aqurate Health Data Management, to abstract and enter the medical record data into the Aqurate hybrid tool. HSAG reviewed the Aqurate hybrid tool and corresponding instructions. Aqurate's reviewer qualifications, training, and oversight were appropriate. Peach State's oversight of the medical record abstraction and procurement vendors was appropriate. Due to reporting a new State-required hybrid measure, a convenience sample was required and subsequently passed review. Peach State passed the medical record review validation process for the *Annual Pediatric Hemoglobin (HbA1c) Testing (ages 5–17)* measure.

Supplemental Data

Peach State did not use supplemental data to augment rates for the measures under the scope of the audit; therefore, this standard is not applicable.

Data Integration

Peach State contracted with Inovalon to generate the various non-HEDIS performance measure rates for the measures under the scope of the audit, as well as the plan's HEDIS rates. Staff members at Peach State responsible for measure reporting activities were very experienced and well-versed in all aspects of the performance measure reporting process, and they were very responsive to any and all pre-onsite, on-site, and post-onsite requests.

For data integration, all source data were pulled from Peach State's enterprise data warehouse into a staging database prior to loading into Inovalon's certified software, Quality Spectrum Insight (QSI). There were communications with Inovalon to ensure that all data elements needed for deriving the measures were provided. For each file provided to Inovalon, row counts and other automated reports were run to ensure that data transfers into QSI were completed, and no data were lost or corrupted.

In addition to the certified software for HEDIS measures, Inovalon produced the programming code based on the performance measure specifications for the non-HEDIS measures. HSAG reviewed and approved Inovalon's programming code for the non-HEDIS performance measures. There were no further concerns with Peach State's data integration system or processes to generate its rates.

Performance Measure Specific Findings

Based on all validation activities, the HSAG Performance Measure Validation Team determined validation results for each performance measure rate. Table 5 displays the key review results. For detailed information, see Appendix B of this report.

Table 5—Key Review Results for Peach State Health Plan		
Performance Measures		Key Review Findings
1.	Annual Pediatric Hemoglobin (HbA1c) Testing (ages 5–17)	No concerns were identified.
2.	Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visit (ages 2–20)	No concerns were identified.
3.	Cesarean Delivery Rate	No concerns were identified.
4.	Cesarean Rate for Nulliparous Singleton Vertex	No concerns were identified.
5.	Percentage of Eligibles that Received Dental Treatment Services	No concerns were identified.
6.	Percentage of Eligibles that Received Preventive Dental Services	No concerns were identified.
7.	Percentage of Live Births Weighing Less Than 2,500 Grams	No concerns were identified.
8.	Adult Asthma Admission Rate	No concerns were identified.
9.	Chronic Obstructive Pulmonary Disease (COPD) Admission Rate	No concerns were identified.
10.	Congestive Heart Failure Admission Rate	No concerns were identified.
11.	Diabetes, Short-Term Complications Admission Rate	No concerns were identified.

Validation Findings

HSAG provided an audit designation for each performance measure as defined in Table 6:

Table 6—Validation Findings Definitions	
Report (R)	The organization followed the specifications and produced a reportable rate or result for the measure.
Not Reportable (NR)	The calculated rate was materially biased, or the organization chose not to report the measure, or the organization was not required to report the measure.

According to the CMS protocol, the validation finding for each measure is determined by the magnitude of the errors detected for the audit elements, not by the number of audit elements determined to be “Not Reportable.” Consequently, it is possible that an error for a single audit element may result in a designation of “NR” because the impact of the error biased the reported performance measure rate by more than 5 percentage points. Conversely, it is also possible that several audit element errors may have little impact on the reported rate, resulting in a measure designation of “R.”

Table 7 shows the final validation findings for Peach State for each performance measure rate. For additional information regarding performance measure rates, see Appendix C of this report.

Table 7—Key Review Results for Peach State Health Plan		
	Performance Measures	Validation Finding
1.	Annual Pediatric Hemoglobin (HbA1c) Testing (ages 5–17)	R
2.	Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visit (ages 2–20)	R
3.	Cesarean Delivery Rate	R
4.	Cesarean Rate for Nulliparous Singleton Vertex	R
5.	Percentage of Eligibles that Received Dental Treatment Services	R
6.	Percentage of Eligibles that Received Preventive Dental Services	R
7.	Percentage of Live Births Weighing Less Than 2,500 Grams	R
8.	Adult Asthma Admission Rate	R
9.	Chronic Obstructive Pulmonary Disease (COPD) Admission Rate	R
10.	Congestive Heart Failure Admission Rate	R
11.	Diabetes, Short-Term Complications Admission Rate	R

Appendix A. Data Integration and Control Findings for Peach State Health Plan

Documentation Worksheet

CMO Name:	Peach State Health Plan
On-Site Visit Date:	April 18, 2013
Reviewers:	Patience Hoag, RHIT, CHCA, CHDA, CCS, CCS-P, CPHQ

Table A-1—Data Integration and Control Findings for Peach State Health Plan				
Data Integration and Control Element	Met	Not Met	N/A	Comments
Accuracy of data transfers to assigned performance measure data repository.				
The CMO accurately and completely processes transfer data from the transaction files (e.g., membership, provider, encounter/claims) into the performance measure data repository used to keep the data until the calculations of the performance measures have been completed and validated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Samples of data from the performance measure data repository are complete and accurate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Accuracy of file consolidations, extracts, and derivations.				
The CMO's processes to consolidate diversified files and to extract required information from the performance measure data repository are appropriate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Actual results of file consolidations or extracts are consistent with those that should have resulted according to documented algorithms or specifications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Procedures for coordinating the activities of multiple subcontractors ensure the accurate, timely, and complete integration of data into the performance measure database.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Computer program reports or documentation reflect vendor coordination activities, and no data necessary to performance measure reporting are lost or inappropriately modified during transfer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If the CMO uses a performance measure data repository, its structure and format facilitates any required programming necessary to calculate and report required performance measures.				
The performance measure data repository's design, program flow charts, and source codes enable analyses and reports.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper linkage mechanisms are employed to join data from all necessary sources (e.g., identifying a member with a given disease/condition).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Table A-1—Data Integration and Control Findings for Peach State Health Plan				
Data Integration and Control Element	Met	Not Met	N/A	Comments
Assurance of effective management of report production and of the reporting software.				
Documentation governing the production process, including CMO production activity logs and the CMO staff review of report runs, is adequate.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prescribed data cutoff dates are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The CMO retains copies of files or databases used for performance measure reporting in case results need to be reproduced.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The reporting software program is properly documented with respect to every aspect of the performance measure data repository, including building, maintaining, managing, testing, and report production.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The CMO’s processes and documentation comply with the CMO standards associated with reporting program specifications, code review, and testing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Appendix B. Denominator and Numerator Validation Findings for Peach State Health Plan

Reviewer Worksheets

CMO Name:	Peach State Health Plan
On-Site Visit Date:	April 18, 2013
Reviewers:	Patience Hoag, RHIT, CHCA, CHDA, CCS, CCS-P, CPHQ

Table B-1—Denominator Validation Findings for Peach State Health Plan

Audit Element	Met	Not Met	N/A	Comments
For each of the performance measures, all members of the relevant populations identified in the performance measure specifications are included in the population from which the denominator is produced.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate programming logic or source code exists to appropriately identify all relevant members of the specified denominator population for each of the performance measures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The CMO correctly calculates member months and member years if applicable to the performance measure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The CMO properly evaluates the completeness and accuracy of any codes used to identify medical events, such as diagnoses, procedures, or prescriptions, and these codes are appropriately identified and applied as specified in each performance measure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If any time parameters are required by the specifications of the performance measure, they are followed (e.g., cutoff dates for data collection, counting 30 calendar days after discharge from a hospital).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Exclusion criteria included in the performance measure specifications are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Systems or methods used by the CMO to estimate populations when they cannot be accurately or completely counted (e.g., newborns) are valid.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Population estimates were not necessary.

Table B-2—Numerator Validation Findings for Peach State Health Plan				
Audit Element	Met	Not Met	N/A	Comments
The CMO uses the appropriate data, including linked data from separate data sets, to identify the entire at-risk population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Qualifying medical events (such as diagnoses, procedures, prescriptions, etc.) are properly identified and confirmed for inclusion in terms of time and services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The CMO avoids or eliminates all double-counted members or numerator events.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Any nonstandard codes used in determining the numerator are mapped to a standard coding scheme in a manner that is consistent, complete, and reproducible, as evidenced by a review of the programming logic or a demonstration of the program.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Nonstandard codes were not used or reported.
If any time parameters are required by the specifications of the performance measure, they are followed (i.e., the measured event occurred during the time period specified or defined in the performance measure).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Appendix C. Performance Measure Results for Peach State Health Plan

Performance Measure 1—Annual Pediatric Hemoglobin (HbA1c) Testing (ages 5–17)

Table C-1—Performance Measure 1 for Peach State Health Plan	
	Rate
Annual Pediatric Hemoglobin (HbA1c) Testing (ages 5–17)	83.38%

Performance Measure 2—Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visit (ages 2–20)

Table C-2—Performance Measure 2 for Peach State Health Plan	
	Rate
Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visit (ages 2–20)	12.64%

Performance Measure 3—Cesarean Delivery Rate

Table C-3—Performance Measure 3 for Peach State Health Plan	
	Rate
Cesarean Delivery Rate	30.01%

Performance Measure 4—Cesarean Rate for Nulliparous Singleton Vertex

Table C-4—Performance Measure 4 for Peach State Health Plan	
	Rate
Cesarean Rate for Nulliparous Singleton Vertex	19.63%

Performance Measure 5—Percentage of Eligibles that Received Dental Treatment Services

Table C-5—Performance Measure 5 for Peach State Health Plan	
	Rate
Percentage of Eligibles that Received Dental Treatment Services	23.14%

Performance Measure 6—Percentage of Eligibles that Received Preventive Dental Services

Table C-6—Performance Measure 6 for Peach State Health Plan	
	Rate
Percentage of Eligibles that Received Preventive Dental Services	48.06%

Performance Measure 7—Percentage of Live Births Weighing Less Than 2,500 Grams

Table C-7—Performance Measure 7 for Peach State Health Plan	
	Rate
Percentage of Live Births Weighing Less Than 2,500 Grams	8.53%

Performance Measure 8—Adult Asthma Admission Rate

Table C-8—Performance Measure 8 for Peach State Health Plan	
	Rate (Per 100,000)
Adult Asthma Admission Rate	52.17

Performance Measure 9—Chronic Obstructive Pulmonary Disease (COPD) Admission Rate

Table C-9—Performance Measure 9 for Peach State Health Plan	
	Rate (Per 100,000)
Chronic Obstructive Pulmonary Disease (COPD) Admission Rate	18.87

Performance Measure 10—Congestive Heart Failure Admission Rate

Table C-10—Performance Measure 10 for Peach State Health Plan	
	Rate (Per 100,000)
Congestive Heart Failure Admission Rate	25.53

Performance Measure 11—Diabetes, Short-Term Complications Admission Rate

Table C-11—Performance Measure 11 for Peach State Health Plan	
	Rate (Per 100,000)
Diabetes, Short-Term Complications Admission Rate	25.52

Appendix D. Final Audited HEDIS Rates for Peach State Health Plan

**Table D-1—CMO Audited Calendar Year 2012 HEDIS Performance Measure Report
for Peach State Health Plan**

Measure	CMO Rate
Adolescent Well-Care Visits	43.98%
Adults' Access to Preventive/Ambulatory Health Services— Ages 20–44 Years	84.94%
Adults' Access to Preventive/Ambulatory Health Services— Ages 45–64 Years	89.36%
Adults' Access to Preventive/Ambulatory Health Services— Ages 65+ Years	Denominator fewer than 30
Adults' Access to Preventive/Ambulatory Health Services—Total	85.46%
Adult BMI Assessment	66.59%
Annual Dental Visit—Ages 2–3 Years	43.96%
Annual Dental Visit—Ages 4–6 Years	76.01%
Annual Dental Visit—Ages 7–10 Years	78.32%
Annual Dental Visit—Ages 11–14 Years	70.02%
Annual Dental Visit—Ages 15–18 Years	59.42%
Annual Dental Visit—Ages 19–21 Years	38.85%
Annual Dental Visit—Total	67.92%
Annual Monitoring for Patients on Persistent Medications— ACE Inhibitors or ARBs	87.92%
Annual Monitoring for Patients on Persistent Medications— Anticonvulsants	63.41%
Annual Monitoring for Patients on Persistent Medications—Digoxin	Denominator fewer than 30
Annual Monitoring for Patients on Persistent Medications—Diuretics	87.90%
Annual Monitoring for Patients on Persistent Medications—Total	86.87%
Antibiotic Utilization—Percent of Antibiotics of Concern of All Antibiotic Scripts—Total	40.84%
Antidepressant Medication Management—Effective Acute Phase Treatment	43.92%
Antidepressant Medication Management—Effective Continuation Phase Treatment	28.13%
Appropriate Testing for Children with Pharyngitis	73.80%

Table D-1—CMO Audited Calendar Year 2012 HEDIS Performance Measure Report for Peach State Health Plan	
Measure	CMO Rate
Appropriate Treatment for Children with Upper Respiratory Infection (URI)*	80.47%
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis*	17.31%
Breast Cancer Screening	56.46%
Call Answer Timeliness	82.84%
Cervical Cancer Screening	73.54%
Cholesterol Management for Patients with Cardiovascular Conditions—LDL-C Screening	74.55%
Cholesterol Management for Patients with Cardiovascular Conditions—LDL-C Control	23.64%
Childhood Immunization Status—Combo 3	76.74%
Childhood Immunization Status—Combo 6	33.26%
Childhood Immunization Status—Combo 10	27.91%
Children’s and Adolescents’ Access to Primary Care Providers—Ages 12–24 Months	96.98%
Children’s and Adolescents’ Access to Primary Care Practitioners —Ages 25 Months–6 Years	90.43%
Children’s and Adolescents’ Access to Primary Care Practitioners —Ages 7–11 Years	90.81%
Children’s and Adolescents’ Access to Primary Care Practitioners —Ages 12–19 Years	87.97%
Chlamydia Screening in Women	59.60%
Comprehensive Diabetes Care—Blood Pressure Control <140/80	27.30%
Comprehensive Diabetes Care—Blood Pressure Control <140/90	53.74%
Comprehensive Diabetes Care—Eye Exam	57.22%
Comprehensive Diabetes Care—HbA1c Control <7.0	27.61%
Comprehensive Diabetes Care—HbA1c Control <8.0	39.13%
Comprehensive Diabetes Care—HbA1c Poor Control >9.0 **	55.48%
Comprehensive Diabetes Care—HbA1c Testing	79.83%
Comprehensive Diabetes Care—LDL-C Screening	67.83%
Comprehensive Diabetes Care—LDL-C Control	20.35%
Comprehensive Diabetes Care—Medical Attention to Nephropathy	73.39%

Table D-1—CMO Audited Calendar Year 2012 HEDIS Performance Measure Report for Peach State Health Plan	
Measure	CMO Rate
Controlling High Blood Pressure	49.78%
Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis	68.42%
Follow-Up After Hospitalization for Mental Illness—30 Day Follow-Up	70.79%
Follow-Up After Hospitalization for Mental Illness—7 Day Follow-Up	52.52%
Follow-Up Care for Children Prescribed ADHD Medication—Initiation Phase	43.73%
Follow-Up Care for Children Prescribed ADHD Medication—Continuation and Maintenance Phase	58.60%
Frequency of Ongoing Prenatal Care—< 21 Percent	8.62%
Frequency of Ongoing Prenatal Care—21–40 Percent	4.43%
Frequency of Ongoing Prenatal Care—41–60 Percent	6.99%
Frequency of Ongoing Prenatal Care—61–80 Percent	14.92%
Frequency of Ongoing Prenatal Care—81+ Percent	65.03%
Human Papillomavirus Vaccine for Female Adolescents	17.82%
Immunizations for Adolescents—Combo 1	71.30%
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment—Initiation of Treatment	39.74%
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment—Engagement of Treatment	8.27%
Inpatient Utilization—General Hospital/Acute Care—Total	Rates reported in Appendix F
Lead Screening in Children	74.19%
Asthma Medication Ratio—Total: 5–64 Years	60.77%
Medication Management for People with Asthma—Total-Medication Compliance 50%	40.08%
Medication Management for People with Asthma—Total-Medication Compliance 75%	18.44%
Persistence of Beta-Blocker Treatment After a Heart Attack	Denominator fewer than 30
Pharmacotherapy Management of COPD Exacerbation—Systemic Corticosteroid	63.64%
Pharmacotherapy Management of COPD Exacerbation—Bronchodilator	78.18%
Prenatal and Postpartum Care—Postpartum Care	71.56%
Prenatal and Postpartum Care—Timeliness of Prenatal Care	86.71%

Table D-1—CMO Audited Calendar Year 2012 HEDIS Performance Measure Report for Peach State Health Plan	
Measure	CMO Rate
Use of Appropriate Medications for People with Asthma—Ages 5–11 Years	90.58%
Use of Appropriate Medications for People with Asthma—Ages 12–18 Years	88.40%
Use of Appropriate Medications for People with Asthma—Ages 19–50 Years	72.39%
Use of Appropriate Medications for People with Asthma—Ages 51–64 Years	Denominator fewer than 30
Use of Appropriate Medications for People with Asthma—Total	89.22%
Use of Imaging Studies for Low Back Pain*	78.26%
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	40.82%
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Total BMI	47.69%
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Total Nutrition	56.02%
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Total Physical Activity	47.69%
Well-Child Visits in the First 15 Months of Life—Zero Visits	4.63%
Well-Child Visits in the First 15 Months of Life—One Visit	3.24%
Well-Child Visits in the First 15 Months of Life—Two Visits	4.86%
Well-Child Visits in the First 15 Months of Life—Three Visits	4.63%
Well-Child Visits in the First 15 Months of Life—Four Visits	11.34%
Well-Child Visits in the First 15 Months of Life—Five Visits	15.97%
Well-Child Visits in the First 15 Months of Life—Six or More Visits	55.32%
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life	67.59%
Ambulatory Care	Rates reported in Appendix F
Board Certification	Rates reported in Appendix F
Enrollment by Product Line—Total	Rates reported in Appendix F
Enrollment by State	Rates reported in Appendix F
Frequency of Selected Procedures	Rates reported in Appendix F
Identification of Alcohol and Other Drug Services—Total	Rates reported in Appendix F
Language Diversity of Membership	Rates reported in Appendix F
Mental Health Utilization	Rates reported in Appendix F

Table D-1—CMO Audited Calendar Year 2012 HEDIS Performance Measure Report for Peach State Health Plan	
Measure	CMO Rate
Race/Ethnicity Diversity of Membership	Rates reported in Appendix F
Total Membership	Rates reported in Appendix F
Weeks of Pregnancy at Time of Enrollment	Rates reported in Appendix F

* The measure is reported as an inverted rate. A higher rate indicates appropriate treatment of children with URI, for example (i.e., the proportion for whom antibiotics were not prescribed). The rate is calculated as 1 minus the numerator divided by the eligible population.

** Lower rate is better.

Appendix E. Performance Measure Validation Reporting Spreadsheet for Peach State Health Plan

Appendix E contains Peach State Health Plan's performance measure validation reporting spreadsheet.

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

2013 Validation of Performance Measures Rate Reporting Template	
CMO Name:	Peach State Health Plan
CMO Contact Name and Title:	Joyce McElwain, Senior Director of QI
CMO Contact Email:	jmcelwain@centene.com
Comments:	FINAL Rates for 5/24/2013

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Cesarean Delivery Rate	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	14830
Numerator events by administrative data	4451
Reported rate	30.01

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Percentage of Eligibles that Received Preventive Dental Services	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	318356
Numerator events by administrative data	153003
Reported rate	48.06%

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Percentage of Eligibles that Received Dental Treatment Services	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	318356
Numerator events by administrative data	73680
Reported rate	23.14%

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Cesarean Rate for Nulliparous Singleton Vertex	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	5410
Numerator events by administrative data	1062
Reported rate	19.63%

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Percentage of Live Births Weighing Less Than 2,500 Grams	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	16875
Numerator events by administrative data	1440
Reported rate	8.53

Appendix E: Department of Community Health, State of Georgia
 Validated CY 2012 Performance Measures for Peach State

Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visit (ages 2-20)	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	34088
Numerator events by administrative data	4309
Reported rate	12.64%

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Annual Pediatric Hemoglobin (HbA1c) Testing (ages 5-17)	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (hybrid)	H
Eligible population	368
Denominator	361
Numerator events by administrative data	295
Numerator events by medical records	6
Numerator Total	301
Reported rate	83.38%

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Diabetes, Short-Term Complications Admission Rate	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	199874
Numerator events by administrative data	51
Reported rate (Per 100,000 Members)	26

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Chronic Obstructive Pulmonary Disease (COPD) Admission Rate	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	90097
Numerator events by administrative data	17
Reported rate (Per 100,000 Members)	19

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Congestive Heart Failure (CHF) Admission Rate	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	90097
Numerator events by administrative data	23
Reported rate (Per 100,000 Members)	26

Appendix E: Department of Community Health, State of Georgia
Validated CY 2012 Performance Measures for Peach State

Adult Asthma Admission Rate	
Data Element	General Measure Data
Reporting Year	2013
Data collection methodology (administrative)	A
Eligible population	90097
Numerator events by administrative data	47
Reported rate (Per 100,000 Members)	52

Appendix F. HEDIS Interactive Data Submission System Data for Peach State Health Plan

Appendix F contains Peach State Health Plan's reported IDSS data.

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Audit Review Table						
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None); Measurement Year - 2012						
The Auditor lock has been applied to this submission.						
Pharmacy Reversal - Pharmacy Reversals NOT Included						
Measure/Data Element	Report Measure	Benefit Offered	Rotated Measure	Rate	Reportable	Comment
Effectiveness of Care: Prevention and Screening						
Adult BMI Assessment (aba)	Y		N	66.59%	R	Reportable
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (wcc)	Y		N			
<i>BMI Percentile</i>				47.69%	R	Reportable
<i>Counseling for Nutrition</i>				56.02%	R	Reportable
<i>Counseling for Physical Activity</i>				47.69%	R	Reportable
Childhood Immunization Status (cis)	Y		N			
<i>DTaP</i>				81.86%	R	Reportable
<i>IPV</i>				94.65%	R	Reportable
<i>MMR</i>				95.12%	R	Reportable
<i>HiB</i>				94.19%	R	Reportable
<i>Hepatitis B</i>				96.05%	R	Reportable
<i>VZV</i>				94.42%	R	Reportable
<i>Pneumococcal Conjugate</i>				82.79%	R	Reportable
<i>Hepatitis A</i>				90.23%	R	Reportable
<i>Rotavirus</i>				70.23%	R	Reportable
<i>Influenza</i>				38.14%	R	Reportable
<i>Combination #2</i>				80.47%	R	Reportable
<i>Combination #3</i>				76.74%	R	Reportable
<i>Combination #4</i>				74.88%	R	Reportable
<i>Combination #5</i>				60.00%	R	Reportable
<i>Combination #6</i>				33.26%	R	Reportable
<i>Combination #7</i>				58.60%	R	Reportable
<i>Combination #8</i>				32.79%	R	Reportable
<i>Combination #9</i>				28.37%	R	Reportable
<i>Combination #10</i>				27.91%	R	Reportable
Immunizations for Adolescents (ima)	Y					
<i>Meningococcal</i>				72.92%	R	Reportable

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

<i>Tdap/Td</i>				85.19%	R	Reportable
<i>Combination #1</i>				71.30%	R	Reportable
Human Papillomavirus Vaccine for Female Adolescents (hvp)	Y			17.82%	R	Reportable
Lead Screening in Children (lsc)	Y		N	74.19%	R	Reportable
Breast Cancer Screening (bcs)	Y			56.46%	R	Reportable
Cervical Cancer Screening (ccs)	Y			73.54%	R	Reportable
Chlamydia Screening in Women (chl)	Y					
<i>16-20 Years</i>				54.68%	R	Reportable
<i>21-24 Years</i>				72.93%	R	Reportable
<i>Total</i>				59.60%	R	Reportable
Effectiveness of Care: Respiratory Conditions						
Appropriate Testing for Children with Pharyngitis (cwp)	Y	Y		73.80%	R	Reportable
Appropriate Treatment for Children With URI (uri)	Y	Y		80.47%	R	Reportable
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (aab)	Y	Y		17.31%	R	Reportable
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (spr)	Y			40.82%	R	Reportable
Pharmacotherapy Management of COPD Exacerbation (pce)	Y	Y				
<i>Systemic Corticosteroid</i>				63.64%	R	Reportable
<i>Bronchodilator</i>				78.18%	R	Reportable
Use of Appropriate Medications for People With Asthma (asm)	Y	Y				
<i>5-11 Years</i>				90.58%	R	Reportable
<i>12-18 Years</i>				88.40%	R	Reportable
<i>19-50 Years</i>				72.39%	R	Reportable
<i>51-64 Years</i>				NA	R	Denominator fewer than 30
<i>Total</i>				89.22%	R	Reportable
Medication Management for People With Asthma (mma)	Y	Y				
<i>5-11 Years - Medication Compliance 50%</i>				40.43%	R	Reportable
<i>5-11 Years - Medication Compliance 75%</i>				19.27%	R	Reportable
<i>12-18 Years - Medication Compliance 50%</i>				38.32%	R	Reportable

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

12-18 Years - Medication Compliance 75%				16.75%	R	Reportable
19-50 Years - Medication Compliance 50%				50.00%	R	Reportable
19-50 Years - Medication Compliance 75%				16.67%	R	Reportable
51-64 Years - Medication Compliance 50%				NA	R	Denominator fewer than 30
51-64 Years - Medication Compliance 75%				NA	R	Denominator fewer than 30
Total - Medication Compliance 50%				40.08%	R	Reportable
Total - Medication Compliance 75%				18.44%	R	Reportable
Asthma Medication Ratio (amr)	Y	Y				
5-11 Years				62.68%	R	Reportable
12-18 Years				58.92%	R	Reportable
19-50 Years				40.60%	R	Reportable
51-64 Years				NA	R	Denominator fewer than 30
Total				60.77%	R	Reportable
Effectiveness of Care: Cardiovascular						
Cholesterol Management for Patients With Cardiovascular Conditions (cmc)	Y		N			
LDL-C Screening Performed				74.55%	R	Reportable
LDL-C Control (<100 mg/dL)				23.64%	R	Reportable
Controlling High Blood Pressure (cbp)	Y			49.78%	R	Reportable
Persistence of Beta-Blocker Treatment After a Heart Attack (pbh)	Y	Y		NA	R	Denominator fewer than 30
Effectiveness of Care: Diabetes						
Comprehensive Diabetes Care (cdc)	Y		N			
Hemoglobin A1c (HbA1c) Testing				79.83%	R	Reportable
HbA1c Poor Control (>9.0%)				55.48%	R	Reportable
HbA1c Control (<8.0%)				39.13%	R	Reportable
HbA1c Control (<7.0%)				27.61%	R	Reportable
Eye Exam (Retinal) Performed				57.22%	R	Reportable
LDL-C Screening Performed				67.83%	R	Reportable
LDL-C Control (<100 mg/dL)				20.35%	R	Reportable
Medical Attention for Nephropathy				73.39%	R	Reportable
Blood Pressure Control (<140/80 mm Hg)				27.30%	R	Reportable
Blood Pressure Control (<140/90 mm Hg)				53.74%	R	Reportable
Effectiveness of Care: Musculoskeletal						
Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis (art)	Y	Y		68.42%	R	Reportable

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Use of Imaging Studies for Low Back Pain (lbp)	Y			78.26%	R	Reportable
Effectiveness of Care: Behavioral Health						
Antidepressant Medication Management (amm)	Y	Y				
<i>Effective Acute Phase Treatment</i>				43.92%	R	Reportable
<i>Effective Continuation Phase Treatment</i>				28.13%	R	Reportable
Follow-Up Care for Children Prescribed ADHD Medication (add)	Y	Y				
<i>Initiation Phase</i>				43.73%	R	Reportable
<i>Continuation and Maintenance (C&M) Phase</i>				58.60%	R	Reportable
Follow-Up After Hospitalization for Mental Illness (fuh)	Y	Y				
<i>30-Day Follow-Up</i>				70.79%	R	Reportable
<i>7-Day Follow-Up</i>				52.52%	R	Reportable
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (ssd)	Y	Y		82.79%	R	Reportable
Diabetes Monitoring for People With Diabetes and Schizophrenia (smd)	Y			NA	R	Denominator fewer than 30
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (smc)	Y			NA	R	Denominator fewer than 30
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (saa)	Y	Y		30.43%	R	Reportable
Effectiveness of Care: Medication Management						
Annual Monitoring for Patients on Persistent Medications (mpm)	Y	Y				
<i>ACE Inhibitors or ARBs</i>				87.92%	R	Reportable
<i>Digoxin</i>				NA	R	Denominator fewer than 30
<i>Diuretics</i>				87.90%	R	Reportable
<i>Anticonvulsants</i>				63.41%	R	Reportable
<i>Total</i>				86.87%	R	Reportable
Access/Availability of Care						
Adults' Access to Preventive/Ambulatory Health Services (aap)	Y					
<i>20-44 Years</i>				84.94%	R	Reportable
<i>45-64 Years</i>				89.36%	R	Reportable
<i>65+ Years</i>				NA	R	Denominator fewer than 30

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

<i>Total</i>				85.46%	R	Reportable
Children and Adolescents' Access to Primary Care Practitioners (cap)	Y					
<i>12-24 Months</i>				96.98%	R	Reportable
<i>25 Months - 6 Years</i>				90.43%	R	Reportable
<i>7-11 Years</i>				90.81%	R	Reportable
<i>12-19 Years</i>				87.97%	R	Reportable
Annual Dental Visit (adv)	Y	Y				
<i>2-3 Years</i>				43.96%	R	Reportable
<i>4-6 Years</i>				76.01%	R	Reportable
<i>7-10 Years</i>				78.32%	R	Reportable
<i>11-14 Years</i>				70.02%	R	Reportable
<i>15-18 Years</i>				59.42%	R	Reportable
<i>19-21 Years</i>				38.85%	R	Reportable
<i>Total</i>				67.92%	R	Reportable
Initiation and Engagement of AOD Dependence Treatment (iet)	Y	Y				
<i>Initiation of AOD Treatment: 13-17 Years</i>				34.86%	R	Reportable
<i>Engagement of AOD Treatment: 13-17 Years</i>				14.79%	R	Reportable
<i>Initiation of AOD Treatment: 18+ Years</i>				41.00%	R	Reportable
<i>Engagement of AOD Treatment: 18+ Years</i>				6.58%	R	Reportable
<i>Initiation of AOD Treatment: Total</i>				39.74%	R	Reportable
<i>Engagement of AOD Treatment: Total</i>				8.27%	R	Reportable
Prenatal and Postpartum Care (ppc)	Y					
<i>Timeliness of Prenatal Care</i>				86.71%	R	Reportable
<i>Postpartum Care</i>				71.56%	R	Reportable
Call Answer Timeliness (cat)	Y			82.84%	R	Reportable
Utilization						
Frequency of Ongoing Prenatal Care (fpc)	Y					
<i><21 Percent</i>				8.62%	R	Reportable
<i>21-40 Percent</i>				4.43%	R	Reportable
<i>41-60 Percent</i>				6.99%	R	Reportable
<i>61-80 Percent</i>				14.92%	R	Reportable
<i>81+ Percent</i>				65.03%	R	Reportable
Well-Child Visits in the First 15 Months of Life (w15)	Y		N			

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

0 Visits				4.63%	R	Reportable
1 Visit				3.24%	R	Reportable
2 Visits				4.86%	R	Reportable
3 Visits				4.63%	R	Reportable
4 Visits				11.34%	R	Reportable
5 Visits				15.97%	R	Reportable
6+ Visits				55.32%	R	Reportable
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (w34)	Y		N	67.59%	R	Reportable
Adolescent Well-Care Visits (awc)	Y		N	43.98%	R	Reportable
Frequency of Selected Procedures (fsp)	Y				R	Reportable
Ambulatory Care: Total (amba)	Y				R	Reportable
Ambulatory Care: Dual Eligibles (ambb)	N				NR	Measure Unselected
Ambulatory Care: Disabled (ambc)	N				NR	Measure Unselected
Ambulatory Care: Other (ambd)	N				NR	Measure Unselected
Inpatient Utilization--General Hospital/Acute Care: Total (ipua)	Y				R	Reportable
Inpatient Utilization--General Hospital/Acute Care: Dual Eligibles (ipub)	N				NR	Measure Unselected
Inpatient Utilization--General Hospital/Acute Care: Disabled (ipuc)	N				NR	Measure Unselected
Inpatient Utilization--General Hospital/Acute Care: Other (ipud)	N				NR	Measure Unselected
Identification of Alcohol and Other Drug Services: Total (iada)	Y	Y			R	Reportable
Identification of Alcohol and Other Drug Services: Dual Eligibles (iadb)	N	N			NR	Measure Unselected
Identification of Alcohol and Other Drug Services: Disabled (iadc)	N	N			NR	Measure Unselected
Identification of Alcohol and Other Drug Services: Other (iadd)	N	N			NR	Measure Unselected
Mental Health Utilization: Total (mpta)	Y	Y			R	Reportable
Mental Health Utilization: Dual Eligibles (mptb)	N	N			NR	Measure Unselected
Mental Health Utilization: Disabled (mptc)	N	N			NR	Measure Unselected
Mental Health Utilization: Other (mptd)	N	N			NR	Measure Unselected
Antibiotic Utilization: Total (abxa)	Y	Y			R	Reportable
Antibiotic Utilization: Dual Eligibles (abxb)	N	N			NR	Measure Unselected

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Antibiotic Utilization: Disabled (abxc)	N	N			NR	Measure Unselected
Antibiotic Utilization: Other (abxd)	N	N			NR	Measure Unselected
Relative Resource Use						
Relative Resource Use for People With Diabetes (rdi)	Y				R	Reportable
Relative Resource Use for People With Asthma (ras)	Y	Y			R	Reportable
Relative Resource Use for People With Cardiovascular Conditions (rca)	Y				R	Reportable
Relative Resource Use for People With Hypertension (rhy)	Y				R	Reportable
Relative Resource Use for People With COPD (rco)	Y				R	Reportable
Health Plan Descriptive Information						
Board Certification (bcr)	N				NR	Measure Unselected
Total Membership (t1m)	Y				R	Reportable
Enrollment by Product Line: Total (enpa)	Y				R	Reportable
Enrollment by Product Line: Dual Eligibles (enpb)	N				NR	Measure Unselected
Enrollment by Product Line: Disabled (enpc)	N				NR	Measure Unselected
Enrollment by Product Line: Other (enpd)	N				NR	Measure Unselected
Enrollment by State (ebs)	Y				R	Reportable
Race/Ethnicity Diversity of Membership (rdm)	Y				R	Reportable
Language Diversity of Membership (ldm)	Y				R	Reportable
Weeks of Pregnancy at Time of Enrollment in MCO (wop)	Y				R	Reportable

Appendix F: Department of Community Health, State of Georgia
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Adult BMI Assessment (ABA)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative or hybrid)	H
Eligible population	7401
Number of numerator events by administrative data in eligible population (before exclusions)	370
Current year's administrative rate (before exclusions)	5.00%
Minimum required sample size (MRSS) or other sample size	411
Oversampling rate	0.05
Final sample size (FSS)	432
Number of numerator events by administrative data in FSS	29
Administrative rate on FSS	6.71%
Number of original sample records excluded because of valid data errors	0
Number of administrative data records excluded	0
Number of medical records excluded	1
Number of employee/dependent medical records excluded	0
Records added from the oversample list	0
Denominator	431
Numerator events by administrative data	29
Numerator events by medical records	258
Reported rate	66.59%
Lower 95% confidence interval	62.02%
Upper 95% confidence interval	71.16%

Appendix F: Department of Community Health, State of Georgia
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Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)							
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)							
Data Element	BMI Percentile			Counseling for Nutrition			Counseling for Physical Activity
	3-11 years	12-17 years	Total	3-11 years	12-17 years	Total	3-11 years
Measurement year	2012			2012			
Data collection methodology (administrative or hybrid)	H			H			
Eligible population	77173	34466	111,639	77173	34466	111,639	77173
Number of numerator events by administrative data in eligible population (before exclusions)	7682	3119	10,801	2587	1286	3,873	2114
Current year's administrative rate (before exclusions)	9.95%	9.05%	9.67%	3.35%	3.73%	3.47%	2.74%
Minimum required sample size (MRSS) or other sample size	411			411			
Oversampling rate	0.05			0.05			
Final sample size	432			432			
Number of numerator events by administrative data in FSS	43	28	71	9	10	19	8
Administrative rate on FSS	9.95%	6.48%	16.44%	2.08%	2.31%	4.40%	1.85%
Number of original sample records excluded because of valid data errors	0			0			
Number of administrative data records excluded	0			0			
Number of medical records excluded	0			0			
Number of employee/dependent medical records excluded	0			0			
Records added from the oversample list	0			0			
Denominator	303	129	432	303	129	432	303
Numerator events by administrative data	43	28	71	9	10	19	8
Numerator events by medical records	101	34	135	165	58	223	129
Reported rate	47.52%	48.06%	47.69%	57.43%	52.71%	56.02%	45.21%
Lower 95% confidence interval	41.74%	39.05%	42.86%	51.69%	43.71%	51.22%	39.45%
Upper 95% confidence interval	53.31%	57.07%	52.51%	63.16%	61.72%	60.82%	50.98%

Appendix F: Department of Community Health, State of Georgia
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ng for Physical Activity	
12-17 years	Total
2012	
H	
34466	111,639
1060	3,174
3.08%	2.84%
411	
0.05	
432	
7	15
1.62%	3.47%
0	
0	
0	
0	
0	
129	432
7	15
62	191
53.49%	47.69%
44.49%	42.86%
62.48%	52.51%

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Childhood Immunization Status (CIS)							
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)							
Data Element	General Measure Data	DTaP	IPV	MMR	HiB	Hepatitis B	VZV
Measurement year	2012						
Data collection methodology (administrative or hybrid)	H						
Eligible population	7800						
Number of numerator events by admin data in eligible population (before exclusions)		6290	7189	7159	7237	7081	7213
Current year's administrative rate (before exclusions)		80.64%	92.17%	91.78%	92.78%	90.78%	92.47%
Minimum required sample size (MRSS) or other sample Size	411						
Oversampling rate	0.05						
Final sample size	432						
Number of numerator events by admin data in FSS		334	393	406	397	385	401
Administrative rate on FSS		77.31%	90.97%	93.98%	91.90%	89.12%	92.82%
Number of original records excluded because of valid data errors	1						
Number of administrative data records excluded	0						
Number of medical data records excluded	1						
Number of employee/dependent medical records excluded	0						
Records added from the oversample list	0						
Denominator	430						
Numerator events by administrative data		334	393	406	397	385	401
Number of numerator events by medical records		18	14	3	8	28	5
Reported rate		81.86%	94.65%	95.12%	94.19%	96.05%	94.42%
Lower 95% confidence interval		78.10%	92.41%	92.96%	91.86%	94.09%	92.13%
Upper 95% confidence interval		85.62%	96.89%	97.27%	96.51%	98.00%	96.70%

Appendix F: Department of Community Health, State of Georgia
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Pneumo- coccal Conjugate	Hepatitis A	Rotavirus	Influenza	Combination 2	Combination 3	Combination 4	Combination 5	Combination 6	Combination 7	Combination 8	Combination 9
6304	7124	5115	2971	5950	5637	5556	4239	2524	4177	2497	2042
80.82%	91.33%	65.58%	38.09%	76.28%	72.27%	71.23%	54.35%	32.36%	53.55%	32.01%	26.18%
338	388	268	161	325	307	301	225	132	220	130	107
78.24%	89.81%	62.04%	37.27%	75.23%	71.06%	69.68%	52.08%	30.56%	50.93%	30.09%	24.77%
338	388	268	161	325	307	301	225	132	220	130	107
18	0	34	3	21	23	21	33	11	32	11	15
82.79%	90.23%	70.23%	38.14%	80.47%	76.74%	74.88%	60.00%	33.26%	58.60%	32.79%	28.37%
79.11%	87.31%	65.79%	33.43%	76.60%	72.63%	70.67%	55.25%	28.69%	53.83%	28.24%	23.99%
86.47%	93.15%	74.67%	42.85%	84.33%	80.85%	79.10%	64.75%	37.83%	63.38%	37.34%	32.75%

Appendix F: Department of Community Health, State of Georgia
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Combination 10
2018
25.87%
105
24.31%
105
15
27.91%
23.55%
32.26%

Appendix F: Department of Community Health, State of Georgia
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Immunizations for Adolescents (IMA)				
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)				
Data Element	General Measure Data	Meningococcal	Tdap/Td	Combination 1
Measurement year	2012			
Data collection methodology (administrative or hybrid)	H			
Eligible population	8264			
Number of numerator events by admin data in eligible population (before exclusions)		6084	6894	5971
Current year's administrative rate (before exclusions)		73.62%	83.42%	72.25%
Minimum required sample size (MRSS) or other sample Size	411			
Oversampling rate	0.05			
Final sample size	432			
Number of numerator events by admin data in FSS		310	363	303
Administrative rate on FSS		71.76%	84.03%	70.14%
Number of original records excluded because of valid data errors	0			
Number of administrative data records excluded	0			
Number of medical data records excluded	0			
Number of employee/dependent medical records excluded	0			
Records added from the oversample list	0			
Denominator	432			
Numerator events by administrative data		310	363	303
Number of numerator events by medical records		5	5	5
Reported rate		72.92%	85.19%	71.30%
Lower 95% confidence interval		68.61%	81.72%	66.91%
Upper 95% confidence interval		77.22%	88.65%	75.68%

Appendix F: Department of Community Health, State of Georgia
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Human Papillomavirus Vaccine for Female Adolescents (HPV)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative or hybrid)	H
Eligible population	4063
Number of numerator events by administrative data in eligible population (before exclusions)	755
Current year's administrative rate (before exclusions)	18.58%
Minimum required sample size (MRSS) or other sample size	411
Oversampling rate	0.05
Final sample size (FSS)	432
Number of numerator events by administrative data in FSS	76
Administrative rate on FSS	17.59%
Number of original sample records excluded because of valid data errors	0
Number of administrative data records excluded	0
Number of medical data records excluded	0
Number of employee/dependent medical records excluded	0
Records added from the oversample list	0
Denominator	432
Numerator events by administrative data	76
Numerator events by medical records	1
Reported rate	17.82%
Lower 95% confidence interval	14.10%
Upper 95% confidence interval	21.55%

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Lead Screening in Children (LSC)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Lead Screening in Children	
Data Elements which do not apply to the selected data collection methodology will not appear	General Measure Data
Measurement year	2012
Data collection methodology (administrative or hybrid)	H
Eligible population	7800
Number of numerator events by admin data in eligible population (before exclusions)	5618
Current year's administrative rate (before exclusions)	72.03%
Minimum required sample size (MRSS) or other sample size	411
Oversampling rate	0.05
Final sample size (FSS)	432
Number of numerator events by administrative data in FSS	310
Administrative rate on FSS	71.76%
Number of original sample records excluded because of valid data errors	1
Number of administrative data records excluded	0
Number of medical data records excluded	1
Number of employee/dependent medical records excluded	0
Records added from the oversample list	0
Denominator	430
Numerator events by administrative data	310
Numerator events by medical records	9
Reported rate	74.19%
Lower 95% confidence interval	69.93%
Upper 95% confidence interval	78.44%

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Breast Cancer Screening (BCS)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	General Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	1371
Numerator events by administrative data	774
Reported rate	56.46%
Lower 95% confidence interval	53.79%
Upper 95% confidence interval	59.12%

Appendix F: Department of Community Health, State of Georgia
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Cervical Cancer Screening (CCS)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative or hybrid)	H
Eligible population	12187
Number of numerator events by administrative data in eligible population (before exclusions)	8091
Current year's administrative rate (before exclusions)	66.39%
Minimum required sample size (MRSS) or other sample size	411
Oversampling rate	0.05
Final sample size (FSS)	432
Number of numerator events by administrative data in FSS	296
Administrative rate on FSS	68.52%
Number of original sample records excluded because of valid data errors	0
Number of administrative data records excluded	1
Number of medical data records excluded	4
Number of employee/dependent medical records excluded	0
Records added from the oversample list	0
Denominator	427
Numerator events by administrative data	296
Numerator events by medical records	18
Reported rate	73.54%
Lower 95% confidence interval	69.23%
Upper 95% confidence interval	77.84%

Appendix F: Department of Community Health, State of Georgia
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Chlamydia Screening in Women (CHL)				
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)				
Data Element	General Measure Data	16-20 years	21-24 years	Total
Measurement year	2012			
Data collection methodology (administrative)	A			
Eligible population		5139	1895	7,034
Numerator events by administrative data		2810	1382	4,192
Reported rate		54.68%	72.93%	59.60%
Lower 95% confidence interval		53.31%	70.90%	58.44%
Upper 95% confidence interval		56.05%	74.96%	60.75%

Appendix F: Department of Community Health, State of Georgia
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Appropriate Testing for Children with Pharyngitis (CWP)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	11779
Numerator events by administrative data	8693
Reported rate	73.80%
Lower 95% confidence interval	73.00%
Upper 95% confidence interval	74.60%

Appendix F: Department of Community Health, State of Georgia
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Appropriate Treatment for Children With URI (URI)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	19042
Numerator events by administrative data	3719
Reported rate	80.47%
Lower 95% confidence interval	79.90%
Upper 95% confidence interval	81.04%

Appendix F: Department of Community Health, State of Georgia
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Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	595
Total numerator events by administrative data	492
Reported rate	17.31%
Lower 95% confidence interval	14.19%
Upper 95% confidence interval	20.44%

Appendix F: Department of Community Health, State of Georgia
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Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	49
Numerator events by administrative data	20
Reported rate	40.82%
Lower 95% confidence interval	26.03%
Upper 95% confidence interval	55.60%

Appendix F: Department of Community Health, State of Georgia
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Pharmacotherapy Management of COPD Exacerbation (PCE)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Pharmacotherapy Management of COPD Exacerbation			
Data Elements	Measure Data	Systemic corticosteroid	Bronchodilator
Measurement year	2012		
Data collection methodology (administrative)	A		
Eligible population	55		
Numerator events by administrative data		35	43
Reported rate		63.64%	78.18%
Lower 95% confidence interval		50.01%	66.36%
Upper 95% confidence interval		77.26%	90.01%

Appendix F: Department of Community Health, State of Georgia
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Use of Appropriate Medications for People With Asthma (ASM)						
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)						
Data Element	General Measure Data	5-11 years	12-18 years	19-50 years	51-64 years	Total
Measurement year	2012					
Data collection methodology (administrative)	A					
Eligible population		2644	1319	134	12	4,109
Number of required exclusions		240	133	90	24	487
Numerator events by administrative data		2395	1166	97	8	3,666
Reported rate		90.58%	88.40%	72.39%	NA	89.22%
Lower 95% confidence interval		89.45%	86.63%	64.45%	NA	88.26%
Upper 95% confidence interval		91.71%	90.17%	80.33%	NA	90.18%

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Medication Management for People With Asthma (MMA)									
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)									
Data Element	General Measure Data	5-11 years		12-18 years		19-50 years		51-64 years	
		Medication Compliance 50%	Medication Compliance 75%	Medication Compliance 50%	Medication Compliance 75%	Medication Compliance 50%	Medication Compliance 75%	Medication Compliance 50%	Medication Compliance 75%
Measurement year	2012								
Data collection methodology (administrative)	A								
Eligible population		2387		1164		96		8	
Number of required exclusions		497		288		128		28	
Numerator events by administrative data		965	460	446	195	48	16	6	3
Reported rate		40.43%	19.27%	38.32%	16.75%	50.00%	16.67%	NA	NA
Lower 95% confidence interval		38.44%	17.67%	35.48%	14.56%	39.48%	8.69%	NA	NA
Upper 95% confidence interval		42.42%	20.87%	41.15%	18.94%	60.52%	24.64%	NA	NA

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Total	
Medication Compliance 50%	Medication Compliance 75%
3,655	
941	
1,465	674
40.08%	18.44%
38.48%	17.17%
41.68%	19.71%

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Asthma Medication Ratio (AMR)						
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)						
Data Element	Measure Data	5-11 years	12-18 years	19-50 years	51-64 years	Total
Measurement year	2012					
Data collection methodology (administrative)	A					
Eligible population		2634	1312	133	12	4,091
Number of required exclusions		250	140	91	24	505
Numerator events by administrative data		1651	773	54	8	2,486
Reported rate		62.68%	58.92%	40.60%	NA	60.77%
Lower 95% confidence interval		60.81%	56.22%	31.88%	NA	59.26%
Upper 95% confidence interval		64.55%	61.62%	49.32%	NA	62.28%

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Cholesterol Management for Patients With Cardiovascular Conditions (CMC)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Data Element	General Measure Data	LDL-C Screening	LDL-C level <100 mg/dL
Measurement year	2012		
Data collection methodology (administrative or hybrid)	H		
Eligible population	55		
Number of numerator events by administrative data in eligible population (before exclusions)		40	3
Current year's administrative rate (before exclusions)		72.73%	5.45%
Minimum required sample size (MRSS) or other sample size	55		
Oversampling rate	0		
Final sample size (FSS)	55		
Number of numerator events by administrative data in FSS		40	3
Administrative rate on FSS		72.73%	5.45%
Number of original sample records excluded because of valid data errors	0		
Number of employee/dependent medical records excluded	0		
Records added from the oversample list	0		
Denominator	55		
Numerator events by administrative data		40	3
Numerator events by medical records		1	10
Reported rate		74.55%	23.64%
Lower 95% confidence interval		62.12%	11.50%
Upper 95% confidence interval		86.97%	35.77%

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Controlling High Blood Pressure (CBP)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	General Measure Data
Measurement year	2012
Data collection methodology (hybrid)	H
Eligible population	2288
Number of numerator events by administrative data in eligible population (before exclusions)	0
Current year's administrative rate (before exclusions)	0.00%
Minimum required sample size (MRSS) or other sample size	411
Oversampling rate	0.1
Final sample size (FSS)	453
Number of numerator events by administrative data in FSS	0
Administrative rate on FSS	0.00%
Number of original sample records excluded because of valid data errors	0
Number of records excluded because of false positive diagnoses	0
Number of administrative data records excluded	0
Number of medical data records excluded	1
Number of employee/dependent medical records excluded	0
Records added from the oversample list	0
Denominator	452
Numerator events by administrative data	0
Numerator events by medical records	225
Reported rate	49.78%
Lower 95% confidence interval	45.06%
Upper 95% confidence interval	54.50%

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Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	9
Numerator events by administrative data	6
Reported rate	NA
Lower 95% confidence interval	NA
Upper 95% confidence interval	NA

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Comprehensive Diabetes Care (CDC)									
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)									
Data Element	HbA1c Testing	HbA1c Poor Control (>9.0%)	HbA1c Control (<8.0%)	HbA1c Control (<7.0%) for a Selected Population	Eye Exam	LDL-C Screening	LDL-C Level <100 mg/dL	Medical Attention for Nephropathy	Blood Pressure Controlled <140/80 mm Hg
Measurement year	2012	2012	2012	2012	2012	2012	2012	2012	2012
Data collection methodology (administrative or hybrid)	H	H	H	H	H	H	H	H	H
Eligible population	1286	1286	1286	1106	1286	1286	1286	1286	1286
Number of numerator events by administrative data in eligible population (before optional exclusions)	940	1055	199	126	575	809	134	877	0
Current year's administrative rate (before optional exclusions)	73.09%	82.04%	15.47%	11.39%	44.71%	62.91%	10.42%	68.20%	0.00%
Minimum required sample size (MRSS) or other sample size	548	548	548	548	548	548	548	548	548
Oversampling rate	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05	0.05
Final sample size (FSS)	576	576	576	576	576	576	576	576	576
Number of numerator events by administrative data in FSS	448	472	91	55	258	382	58	402	0
Administrative rate on FSS	77.78%	81.94%	15.80%	9.55%	44.79%	66.32%	10.07%	69.79%	0.00%
Number of original sample records excluded because of valid data errors	0	0	0	0	0	0	0	0	0
Number of optional administrative data records excluded	0	0	0	0	0	0	0	0	0
Number of optional medical data records excluded	1	1	1	1	1	1	1	1	1
Number of HbA1c <7 required medical records excluded				4					
Number of HbA1c <7 required administrative data records excluded				82					
Number of employee/dependent medical records excluded	0	0	0	0	0	0	0	0	0
Records added from the oversample list	0	0	0	0	0	0	0	0	0
Denominator	575	575	575	489	575	575	575	575	575

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Numerator events by administrative data	448	256	91	55	258	382	58	402	0
Numerator events by medical records	11	63	134	80	71	8	59	20	157
Reported rate	79.83%	55.48%	39.13%	27.61%	57.22%	67.83%	20.35%	73.39%	27.30%
Lower 95% confidence interval	76.46%	51.33%	35.05%	23.54%	53.09%	63.92%	16.97%	69.69%	23.58%
Upper 95% confidence interval	83.19%	59.63%	43.21%	31.67%	61.35%	71.73%	23.73%	77.09%	31.03%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Blood Pressure Controlled <140/90 mm Hg
2012
H
1286
1
0.08%
548
0.05
576
0
0.00%
0
0
1
0
0
575

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

0
309
53.74%
49.58%
57.90%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Disease Modifying Anti-Rheumatic Drug therapy in Rheumatoid Arthritis (ART)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	38
Numerator events by administrative data	26
Reported rate	68.42%
Lower 95% confidence interval	52.33%
Upper 95% confidence interval	84.52%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Use of Imaging Studies for Low Back Pain (LBP)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	943
Numerator events by administrative data	205
Reported rate	78.26%
Lower 95% confidence Interval	75.58%
Upper 95% confidence Interval	80.95%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Antidepressant Medication Management (AMM)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Data Element	General Measure Data	Effective Acute Phase Treatment	Effective Continuation Phase Treatment
Measurement year	2012		
Data collection methodology (administrative)	A		
Eligible population	551		
Numerator events by administrative data		242	155
Reported rate		43.92%	28.13%
Lower 95% confidence interval		39.69%	24.29%
Upper 95% confidence interval		48.15%	31.98%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Follow-Up Care for Children Prescribed ADHD Medication (ADD)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Data Element	General Measure Data	Initiation Phase	Continuation and Maintenance Phase
Measurement year	2012		
Data collection methodology (administrative)	A		
Eligible population		3126	500
Numerator events by administrative data		1367	293
Reported rate		43.73%	58.60%
Lower 95% confidence interval		41.98%	54.18%
Upper 95% confidence interval		45.48%	63.02%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Follow-Up After Hospitalization for Mental Illness (FUH)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Data Element	General Measure Data	30-day follow-up	7-day follow-up
Measurement year	2012		
Data collection methodology (administrative)	A		
Eligible population	1051		
Numerator events by administrative data		744	552
Reported rate		70.79%	52.52%
Lower 95% confidence interval		67.99%	49.45%
Upper 95% confidence interval		73.59%	55.59%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	215
Number of required exclusions	174
Numerator events by administrative data	178
Reported rate	82.79%
Lower 95% confidence interval	77.51%
Upper 95% confidence interval	88.07%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	14
Number of optional exclusions	0
Numerator events by administrative data	12
Reported rate	NA
Lower 95% confidence interval	NA
Upper 95% confidence interval	NA

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	0
Numerator events by administrative data	0
Reported rate	NA
Lower 95% confidence interval	NA
Upper 95% confidence interval	NA

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	46
Number of required exclusions	27
Numerator events by administrative data	14
Reported rate	30.43%
Lower 95% confidence interval	16.05%
Upper 95% confidence interval	44.82%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Annual Monitoring for Patients on Persistent Medications (MPM)						
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)						
Data Element	General Measure Data	ACE Inhibitors or ARBs	Digoxin	Diuretics	Anti-convulsants	Total
Measurement year	2012					
Data collection methodology (administrative)	A					
Eligible population		960	6	909	82	1,957
Numerator events by administrative data		844	5	799	52	1,700
Reported rate		87.92%	NA	87.90%	63.41%	86.87%
Lower 95% confidence interval		85.80%	NA	85.72%	52.38%	85.35%
Upper 95% confidence interval		90.03%	NA	90.07%	74.45%	88.39%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Adults' Access to Preventive/Ambulatory Health Services (AAP)					
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)					
Data Element	General Measure Data	20-44 years	45-64 years	65+ years	Total
Measurement year	2012				
Data collection methodology (administrative)	A				
Eligible population		13623	1871	2	15,496
Numerator events by administrative data		11571	1672	0	13,243
Reported rate		84.94%	89.36%	NA	85.46%
Lower 95% confidence interval		84.33%	87.94%	NA	84.90%
Upper 95% confidence interval		85.54%	90.79%	NA	86.02%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Children and Adolescents' Access to Primary Care Practitioners (CAP)					
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)					
Data Element	General Measure Data	12-24 months	25 months - 6 years	7-11 years	12-19 years
Measurement year	2012				
Data collection methodology (administrative)	A				
Eligible population		10453	53713	34089	38693
Numerator events by administrative data		10137	48575	30956	34038
Reported rate		96.98%	90.43%	90.81%	87.97%
Lower 95% confidence interval		96.64%	90.18%	90.50%	87.64%
Upper 95% confidence interval		97.31%	90.68%	91.12%	88.29%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Annual Dental Visit (ADV)								
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)								
Data Element	Measure Data	2-3 Years	4-6 Years	7-10 Years	11-14 Years	15-18 Years	19-21 Years	Total
Measurement year	2012							
Data collection methodology (administrative)	A							
Eligible population		20313	34095	37981	34689	26133	1197	154,408
Numerator events by administrative data		8929	25917	29748	24288	15529	465	104,876
Reported rate		43.96%	76.01%	78.32%	70.02%	59.42%	38.85%	67.92%
Lower 95% confidence interval		43.27%	75.56%	77.91%	69.53%	58.83%	36.04%	67.69%
Upper 95% confidence interval		44.64%	76.47%	78.74%	70.50%	60.02%	41.65%	68.15%

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Initiation and Engagement of AOD Dependence Treatment (IET)							
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)							
Data Elements	General Measure Data	13-17 years		18+ years		Total	
		Initiation of AOD Treatment	Engagement of AOD Treatment	Initiation of AOD Treatment	Engagement of AOD Treatment	Initiation of AOD Treatment	Engagement of AOD Treatment
Measurement year	2012						
Data collection methodology (administrative)	A						
Eligible population		284		1095		1,379	
Numerator events by administrative data		99	42	449	72	548	114
Reported rate		34.86%	14.79%	41.00%	6.58%	39.74%	8.27%
Lower 95% confidence interval		29.14%	10.48%	38.05%	5.06%	37.12%	6.78%
Upper 95% confidence interval		40.58%	19.09%	43.96%	8.09%	42.36%	9.76%

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Prenatal and Postpartum Care (PPC)		
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)		
Data Element	Timeliness of Prenatal Care	Postpartum Care
Measurement year	2012	2012
Data collection methodology (administrative or hybrid)	H	H
Eligible population	14968	14968
Number of numerator events by administrative data in eligible population (before exclusions)	5262	5919
Current year's administrative rate (before exclusions)	35.15%	39.54%
Minimum required sample size (MRSS) or other sample size	411	411
Oversampling rate	0.05	0.05
Final sample size (FSS)	432	432
Number of numerator events by administrative data in FSS	147	171
Administrative rate on FSS	34.03%	39.58%
Number of original sample records excluded because of valid data errors	3	3
Number of employee/dependent medical records excluded	0	0
Records added from the oversample list	0	0
Denominator	429	429
Numerator events by administrative data	147	171
Numerator events by medical records	225	136
Reported rate	86.71%	71.56%
Lower 95% confidence interval	83.38%	67.18%
Upper 95% confidence interval	90.04%	75.95%

Appendix F: Department of Community Health, State of Georgia
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Call Answer Timeliness (CAT)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative)	A
Eligible population	258424
Numerator events by administrative data	214083
Reported rate	82.84%
Lower 95% confidence interval	82.70%
Upper 95% confidence interval	82.99%

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Frequency of Ongoing Prenatal Care (FPC)						
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)						
Data Element	General Measure Data	<21 Percent	21-40 Percent	41-60 Percent	61-80 Percent	81+ Percent
Measurement year	2012					
Data collection methodology (administrative or hybrid)	H					
Eligible population	14968					
Number of numerator events by administrative data in eligible population (before exclusions)		10631	2354	786	561	636
Current year's administrative rate (before exclusions)		71.02%	15.73%	5.25%	3.75%	4.25%
Minimum required sample size (MRSS) or other sample size	411					
Oversampling rate	0.05					
Final sample size (FSS)	432					
Number of numerator events by administrative data in FSS		35	14	10	5	18
Administrative rate on FSS		8.10%	3.24%	2.31%	1.16%	4.17%
Number of original sample records excluded because of valid data errors	3					
Number of employee/dependent medical records excluded	0					
Records added from the oversample list	0					
Denominator	429					
Numerator events by administrative data		35	14	10	5	18
Numerator events by medical records		2	5	20	59	261
Reported rate		8.62%	4.43%	6.99%	14.92%	65.03%
Lower 95% confidence interval		5.85%	2.37%	4.46%	11.43%	60.41%
Upper 95% confidence interval		11.40%	6.49%	9.52%	18.41%	69.66%

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Well-Child Visits in the First 15 Months of Life (W15)							
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)							
Data Element	Measure Data	0 visits	1 visit	2 visits	3 visits	4 visits	5 visits
Measurement year	2012						
Data collection methodology (administrative or hybrid)	H						
Eligible population	8894						
Number of numerator events by administrative data in eligible population (before exclusions)		530	548	711	833	1173	1658
Current year's administrative rate (before exclusions)		5.96%	6.16%	7.99%	9.37%	13.19%	18.64%
Minimum required sample size (MRSS) or other sample size	411						
Oversampling rate	0.05						
Final sample size (FSS)	432						
Number of numerator events by administrative data in FSS		24	32	42	39	64	68
Administrative rate on FSS		5.56%	7.41%	9.72%	9.03%	14.81%	15.74%
Number of original sample records excluded because of valid data errors	0						
Number of employee/dependent medical records excluded	0						
Records added from the oversample list	0						
Denominator	432						
Numerator events by administrative data		20	14	15	13	28	31
Numerator events by medical records		0	0	6	7	21	38
Reported rate		4.63%	3.24%	4.86%	4.63%	11.34%	15.97%
Lower 95% confidence interval		2.53%	1.46%	2.72%	2.53%	8.24%	12.40%
Upper 95% confidence interval		6.73%	5.03%	7.00%	6.73%	14.45%	19.54%

Appendix F: Department of Community Health, State of Georgia
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6 or more visits
3441
38.69%
163
37.73%
166
73
55.32%
50.52%
60.13%

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Adolescent Well-Care Visits (AWC)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative or hybrid)	H
Eligible population	53061
Number of numerator events by administrative data in eligible population (before exclusions)	20725
Current year's administrative rate (before exclusions)	39.06%
Minimum required sample size (MRSS) or other sample size	411
Oversampling rate	0.05
Final sample size (FSS)	432
Number of numerator events by administrative data in FSS	170
Administrative rate on FSS	39.35%
Number of original sample records excluded because of valid data errors	0
Number of employee/dependent medical records excluded	0
Records added from the oversample list	0
Denominator	432
Numerator events by administrative data	170
Numerator events by medical records	20
Reported rate	43.98%
Lower 95% confidence interval	39.18%
Upper 95% confidence interval	48.78%

Appendix F: Department of Community Health, State of Georgia
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Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Data Element	Measure Data
Measurement year	2012
Data collection methodology (administrative or hybrid)	H
Eligible population	45189
Number of numerator events by administrative data in eligible population (before exclusions)	28394
Current year's administrative rate (before exclusions)	62.83%
Minimum required sample size (MRSS) or other sample size	411
Oversampling rate	0.05
Final sample size (FSS)	432
Number of numerator events by administrative data in FSS	281
Administrative rate on FSS	65.05%
Number of original sample records excluded because of valid data errors	0
Number of employee/dependent medical records excluded	0
Records added from the oversample list	0
Denominator	432
Numerator events by administrative data	281
Numerator events by medical records	11
Reported rate	67.59%
Lower 95% confidence interval	63.06%
Upper 95% confidence interval	72.12%

Appendix F: Department of Community Health, State of Georgia
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Frequency of Selected Procedures (FSP)				
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)				
Age	Male	Female	Total	
0-9	981,633	959,960	1,941,593	
10-19	587,271	615,903	1,203,174	
15-44		631,816		
20-44	35,722	386,763		
30-64	31,171			
45-64	8,727	29,486		
Procedure	Age	Sex	Number of Procedures	Procedures / 1,000 Member Years
Bariatric weight loss surgery	0-19	Male	0	0.00
		Female	0	0.00
	20-44	Male	0	0.00
		Female	15	0.04
	45-64	Male	0	0.00
		Female	2	0.07
Tonsillectomy	0-9	Male & Female	1413	0.73
	10-19	Male & Female	339	0.28
Hysterectomy, Abdominal	15-44	Female	124	0.20
	45-64	Female	30	1.02
Hysterectomy, Vaginal	15-44	Female	80	0.13
	45-64	Female	6	0.20
Cholecystectomy, Open	30-64	Male	0	0.00
	15-44	Female	6	0.01
	45-64	Female	3	0.10
Cholecystectomy (laparoscopic)	30-64	Male	12	0.38
	15-44	Female	397	0.63
	45-64	Female	22	0.75
Back Surgery	20-44	Male	9	0.25
		Female	29	0.07
	45-64	Male	3	0.34

Appendix F: Department of Community Health, State of Georgia
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	75-94	Female	11	0.37
Mastectomy	15-44	Female	25	0.04
	45-64		35	1.19
Lumpectomy	15-44	Female	130	0.21
	45-64		35	1.19

Appendix F: Department of Community Health, State of Georgia
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Ambulatory Care: Total (AMBA)				
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)				
Age	Member Months			
<1	252,355			
1-9	1,689,238			
10-19	1,203,174			
20-44	422,485			
45-64	38,213			
65-74	81			
75-84	12			
85+	3			
Unknown	0			
Total	3,605,561			
Age	Outpatient Visits		ED Visits	
	Visits	Visits/ 1,000 Member Months	Visits	Visits/ 1,000 Member Months
<1	194296	769.93	22354	88.58
1-9	548448	324.67	84939	50.28
10-19	272090	226.14	45547	37.86
20-44	169557	401.33	49842	117.97
45-64	25868	676.94	3226	84.42
65-74	41	506.17	2	24.69
75-84	17	1,416.67	1	83.33
85+	1	333.33	0	0.00
Unknown	0		0	
Total	1,210,318	335.68	205,911	57.11

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Ambulatory Care: Dual Eligibles (AMBB)				
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)				
Age	Member Months			
<1	NR			
1-9	NR			
10-19	NR			
20-44	NR			
45-64	NR			
65-74	NR			
75-84	NR			
85+	NR			
Unknown	NR			
Total	NR			
Age	Outpatient Visits		ED Visits	
	Visits	Visits/ 1,000 Member Months	Visits	Visits/ 1,000 Member Months
<1	NR	NR	NR	NR
1-9	NR	NR	NR	NR
10-19	NR	NR	NR	NR
20-44	NR	NR	NR	NR
45-64	NR	NR	NR	NR
65-74	NR	NR	NR	NR
75-84	NR	NR	NR	NR
85+	NR	NR	NR	NR
Unknown	NR		NR	
Total	NR	NR	NR	NR

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Ambulatory Care: Disabled (AMBC)				
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)				
Age	Member Months			
<1	NR			
1-9	NR			
10-19	NR			
20-44	NR			
45-64	NR			
65-74	NR			
75-84	NR			
85+	NR			
Unknown	NR			
Total	NR			
Age	Outpatient Visits		ED Visits	
	Visits	Visits/ 1,000 Member Months	Visits	Visits/ 1,000 Member Months
<1	NR	NR	NR	NR
1-9	NR	NR	NR	NR
10-19	NR	NR	NR	NR
20-44	NR	NR	NR	NR
45-64	NR	NR	NR	NR
65-74	NR	NR	NR	NR
75-84	NR	NR	NR	NR
85+	NR	NR	NR	NR
Unknown	NR		NR	
Total	NR	NR	NR	NR

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Ambulatory Care: Other (AMBD)				
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)				
Age	Member Months			
<1	NR			
1-9	NR			
10-19	NR			
20-44	NR			
45-64	NR			
65-74	NR			
75-84	NR			
85+	NR			
Unknown	NR			
Total	NR			
Age	Outpatient Visits		ED Visits	
	Visits	Visits/ 1,000 Member Months	Visits	Visits/ 1,000 Member Months
<1	NR	NR	NR	NR
1-9	NR	NR	NR	NR
10-19	NR	NR	NR	NR
20-44	NR	NR	NR	NR
45-64	NR	NR	NR	NR
65-74	NR	NR	NR	NR
75-84	NR	NR	NR	NR
85+	NR	NR	NR	NR
Unknown	NR		NR	
Total	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
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Inpatient Utilization--General Hospital/Acute Care: Total (IPUA)					
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)					
Age	Member Months				
<1	252,355				
1-9	1,689,238				
10-19	1,203,174				
20-44	422,485				
45-64	38,213				
65-74	81				
75-84	12				
85+	3				
Unknown	0				
Total	3,605,561				
Total Inpatient					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	1760	6.97	12680	50.25	7.20
1-9	1959	1.16	5721	3.39	2.92
10-19	3384	2.81	9793	8.14	2.89
20-44	15846	37.51	44671	105.73	2.82
45-64	479	12.54	2323	60.79	4.85
65-74	1	12.35	1	12.35	1.00
75-84	0	0.00	0	0.00	NA
85+	0	0.00	0	0.00	NA
Unknown	0		0		NA

Appendix F: Department of Community Health, State of Georgia
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Total	23,429	6.50	75,189	20.85	3.21
Medicine					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	1345	5.33	5634	22.33	4.19
1-9	1506	0.89	3892	2.30	2.58
10-19	623	0.52	1836	1.53	2.95
20-44	750	1.78	2666	6.31	3.55
45-64	242	6.33	942	24.65	3.89
65-74	1	12.35	1	12.35	1.00
75-84	0	0.00	0	0.00	NA
85+	0	0.00	0	0.00	NA
Unknown	0		0		NA
Total	4,467	1.24	14,971	4.15	3.35
Surgery					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	415	1.64	7046	27.92	16.98
1-9	453	0.27	1829	1.08	4.04
10-19	399	0.33	1852	1.54	4.64
20-44	563	1.33	2735	6.47	4.86
45-64	215	5.63	1319	34.52	6.13
65-74	0	0.00	0	0.00	NA
75-84	0	0.00	0	0.00	NA
85+	0	0.00	0	0.00	NA
Unknown	0		0		NA
Total	2,045	0.57	14,781	4.10	7.23

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Maternity*					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
10-19	2362	1.96	6105	5.07	2.58
20-44	14533	34.40	39270	92.95	2.70
45-64	22	0.58	62	1.62	2.82
Unknown	0		0		NA
Total	16,917	10.17	45,437	27.31	2.69
*The maternity category is calculated using member months for members 10-64 years.					

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Inpatient Utilization--General Hospital/Acute Care: Dual Eligibles (IPUB)					
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)					
Age	Member Months				
<1	NR				
1-9	NR				
10-19	NR				
20-44	NR				
45-64	NR				
65-74	NR				
75-84	NR				
85+	NR				
Unknown	NR				
Total	NR				
Total Inpatient					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Total	NR	NR	NR	NR	NR
Medicine					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR
Surgery					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR
Maternity*					

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR

*The maternity category is calculated using member months for members 10-64 years.

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Inpatient Utilization--General Hospital/Acute Care: Disabled (IPUC)					
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)					
Age	Member Months				
<1	NR				
1-9	NR				
10-19	NR				
20-44	NR				
45-64	NR				
65-74	NR				
75-84	NR				
85+	NR				
Unknown	NR				
Total	NR				
Total Inpatient					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR
Medicine					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR
Surgery					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Maternity*					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR

*The maternity category is calculated using member months for members 10-64 years.

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Inpatient Utilization--General Hospital/Acute Care: Other (IPUD)					
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)					
Age	Member Months				
<1	NR				
1-9	NR				
10-19	NR				
20-44	NR				
45-64	NR				
65-74	NR				
75-84	NR				
85+	NR				
Unknown	NR				
Total	NR				
Total Inpatient					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Total	NR	NR	NR	NR	NR
Medicine					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR
Surgery					
Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
<1	NR	NR	NR	NR	NR
1-9	NR	NR	NR	NR	NR
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
65-74	NR	NR	NR	NR	NR
75-84	NR	NR	NR	NR	NR
85+	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR
Maternity*					

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Age	Discharges	Discharges / 1,000 Member Months	Days	Days / 1,000 Members Months	Average Length of Stay
10-19	NR	NR	NR	NR	NR
20-44	NR	NR	NR	NR	NR
45-64	NR	NR	NR	NR	NR
Unknown	NR		NR		NR
Total	NR	NR	NR	NR	NR

*The maternity category is calculated using member months for members 10-64 years.

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Identification of Alcohol and Other Drug Services: Total (IADA)										
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)										
Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Total)
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male
0-12	1214384	1191808	2,406,192	1214384	1191808	2,406,192	1214384	1191808	2,406,192	1214384
13-17	311821	322183	634,004	311821	322183	634,004	311821	322183	634,004	311821
18-24	47851	176261	224,112	47851	176261	224,112	47851	176261	224,112	47851
25-34	16997	191628	208,625	16997	191628	208,625	16997	191628	208,625	16997
35-64	22300	110232	132,532	22300	110232	132,532	22300	110232	132,532	22300
65+	38	58	96	38	58	96	38	58	96	38
Unknown	0	0	0	0	0	0	0	0	0	0

Total	1,613,391	1,992,170	3,605,561	1,613,391	1,992,170	3,605,561	1,613,391	1,992,170	3,605,561	1,613,391
Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED		
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	
0-12	M	35	0.03%	6	0.01%	0	0.00%	30	0.03%	
	F	34	0.03%	3	0.00%	0	0.00%	31	0.03%	
	Total	69	0.03%	9	0.00%	0	0.00%	61	0.03%	
13-17	M	364	1.40%	42	0.16%	21	0.08%	336	1.29%	
	F	171	0.64%	34	0.13%	5	0.02%	154	0.57%	
	Total	535	1.01%	76	0.14%	26	0.05%	490	0.93%	
18-24	M	114	2.86%	13	0.33%	3	0.08%	110	2.76%	
	F	383	2.61%	139	0.95%	7	0.05%	283	1.93%	
	Total	497	2.66%	152	0.81%	10	0.05%	393	2.10%	
25-34	M	113	7.98%	22	1.55%	4	0.28%	106	7.48%	
	F	782	4.90%	221	1.38%	29	0.18%	655	4.10%	
	Total	895	5.15%	243	1.40%	33	0.19%	761	4.38%	
35-64	M	145	7.80%	34	1.83%	4	0.22%	131	7.05%	
	F	521	5.67%	117	1.27%	13	0.14%	471	5.13%	
	Total	666	6.03%	151	1.37%	17	0.15%	602	5.45%	
65+	M	0	0.00%	0	0.00%	0	0.00%	0	0.00%	
	F	0	0.00%	0	0.00%	0	0.00%	0	0.00%	

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

	Total	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Unknown	M	0	NA	0	NA	0	NA	0	NA
	F	0	NA	0	NA	0	NA	0	NA
	Total	0	NA	0	NA	0	NA	0	NA
Total	M	771	0.57%	117	0.09%	32	0.02%	713	0.53%
	F	1,891	1.14%	514	0.31%	54	0.03%	1,594	0.96%
	Total	2,662	0.89%	631	0.21%	86	0.03%	2,307	0.77%

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Months (Outpatient/ED)	
Female	Total
1191808	2,406,192
322183	634,004
176261	224,112
191628	208,625
110232	132,532
58	96
0	0
1,992,170	3,605,561

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Identification of Alcohol and Other Drug Services: Dual Eligibles (IADB)												
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)												
Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Outpatient/ED)		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
0-12	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
13-17	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
18-24	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
25-34	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
35-64	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
65+	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Total	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED				
		Number	Percent	Number	Percent	Number	Percent	Number	Percent			
0-12	M	NR	NR	NR	NR	NR	NR	NR	NR			
	F	NR	NR	NR	NR	NR	NR	NR	NR			
	Total	NR	NR	NR	NR	NR	NR	NR	NR			
13-17	M	NR	NR	NR	NR	NR	NR	NR	NR			
	F	NR	NR	NR	NR	NR	NR	NR	NR			
	Total	NR	NR	NR	NR	NR	NR	NR	NR			
18-24	M	NR	NR	NR	NR	NR	NR	NR	NR			
	F	NR	NR	NR	NR	NR	NR	NR	NR			
	Total	NR	NR	NR	NR	NR	NR	NR	NR			
25-34	M	NR	NR	NR	NR	NR	NR	NR	NR			
	F	NR	NR	NR	NR	NR	NR	NR	NR			
	Total	NR	NR	NR	NR	NR	NR	NR	NR			
35-64	M	NR	NR	NR	NR	NR	NR	NR	NR			
	F	NR	NR	NR	NR	NR	NR	NR	NR			
	Total	NR	NR	NR	NR	NR	NR	NR	NR			
65+	M	NR	NR	NR	NR	NR	NR	NR	NR			
	F	NR	NR	NR	NR	NR	NR	NR	NR			
	Total	NR	NR	NR	NR	NR	NR	NR	NR			

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Identification of Alcohol and Other Drug Services: Disabled (IADC)

Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)

Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Outpatient/ED)	
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
0-12	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
13-17	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
18-24	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
25-34	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
35-64	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
65+	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Total	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR

Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
0-12	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
13-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-24	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
25-34	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
35-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

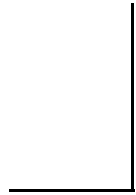
Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

patient/ED)
Total
NR
NR
NR
NR
NR
NR
NR
NR
NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State



Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Identification of Alcohol and Other Drug Services: Other (IADD)

Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)

Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Outpatient/ED)	
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
0-12	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
13-17	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
18-24	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
25-34	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
35-64	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
65+	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Total	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR

Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
0-12	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
13-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-24	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
25-34	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
35-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

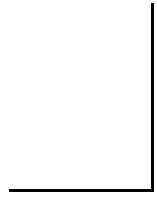
Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

atient/ED)
Total
NR
NR
NR
NR
NR
NR
NR
NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State



Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Mental Health Utilization: Total (MPTA)											
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)											
Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Outpatient/ED)	
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
0-12	1214384	1191808	2,406,192	1214384	1191808	2,406,192	1214384	1191808	2,406,192	1214384	1191808
13-17	311821	322183	634,004	311821	322183	634,004	311821	322183	634,004	311821	322183
18-64	87148	478121	565,269	87148	478121	565,269	87148	478121	565,269	87148	478121
65+	38	58	96	38	58	96	38	58	96	38	58
Unknown	0	0	0	0	0	0	0	0	0	0	0
Total	1,613,391	1,992,170	3,605,561	1,613,391	1,992,170	3,605,561	1,613,391	1,992,170	3,605,561	1,613,391	1,992,170
Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED			
		Number	Percent	Number	Percent	Number	Percent	Number	Percent		
0-12	M	8814	8.71%	127	0.13%	90	0.09%	8806	8.70%		
	F	5523	5.56%	86	0.09%	40	0.04%	5511	5.55%		
	Total	14,337	7.15%	213	0.11%	130	0.06%	14,317	7.14%		
13-17	M	3407	13.11%	202	0.78%	85	0.33%	3380	13.01%		
	F	3224	12.01%	309	1.15%	98	0.37%	3188	11.87%		
	Total	6,631	12.55%	511	0.97%	183	0.35%	6,568	12.43%		
18-64	M	633	8.72%	66	0.91%	16	0.22%	617	8.50%		
	F	4284	10.75%	323	0.81%	72	0.18%	4185	10.50%		
	Total	4,917	10.44%	389	0.83%	88	0.19%	4,802	10.19%		
65+	M	2	63.16%	0	0.00%	0	0.00%	2	63.16%		
	F	0	0.00%	0	0.00%	0	0.00%	0	0.00%		
	Total	2	25.00%	0	0.00%	0	0.00%	2	25.00%		
Unknown	M	0	NA	0	NA	0	NA	0	NA		
	F	0	NA	0	NA	0	NA	0	NA		
	Total	0	NA	0	NA	0	NA	0	NA		
Total	M	12,856	9.56%	395	0.29%	191	0.14%	12,805	9.52%		
	F	13,031	7.85%	718	0.43%	210	0.13%	12,884	7.76%		
	Total	25,887	8.62%	1,113	0.37%	401	0.13%	25,689	8.55%		

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

atient/ED)
Total
2,406,192
634,004
565,269
96
0
3,605,561

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Mental Health Utilization: Dual Eligibles (MPTB)

Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)

Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Outpatient/ED)	
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
0-12	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
13-17	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
18-64	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
65+	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Total	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR

Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
0-12	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
13-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

atient/ED)
Total
NR
NR
NR
NR
NR
NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Mental Health Utilization: Disabled (MPTC)											
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)											
Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Outpatient/ED)	
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
0-12	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
13-17	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
18-64	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
65+	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Total	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED			
		Number	Percent	Number	Percent	Number	Percent	Number	Percent		
0-12	M	NR	NR	NR	NR	NR	NR	NR	NR		
	F	NR	NR	NR	NR	NR	NR	NR	NR		
	Total	NR	NR	NR	NR	NR	NR	NR	NR		
13-17	M	NR	NR	NR	NR	NR	NR	NR	NR		
	F	NR	NR	NR	NR	NR	NR	NR	NR		
	Total	NR	NR	NR	NR	NR	NR	NR	NR		
18-64	M	NR	NR	NR	NR	NR	NR	NR	NR		
	F	NR	NR	NR	NR	NR	NR	NR	NR		
	Total	NR	NR	NR	NR	NR	NR	NR	NR		
65+	M	NR	NR	NR	NR	NR	NR	NR	NR		
	F	NR	NR	NR	NR	NR	NR	NR	NR		
	Total	NR	NR	NR	NR	NR	NR	NR	NR		
Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR		
	F	NR	NR	NR	NR	NR	NR	NR	NR		
	Total	NR	NR	NR	NR	NR	NR	NR	NR		
Total	M	NR	NR	NR	NR	NR	NR	NR	NR		
	F	NR	NR	NR	NR	NR	NR	NR	NR		
	Total	NR	NR	NR	NR	NR	NR	NR	NR		

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

atient/ED)
Total
NR
NR
NR
NR
NR
NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Mental Health Utilization: Other (MPTD)

Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)

Age	Member Months (Any)			Member Months (Inpatient)			Member Months (Intensive Outpatient/Partial Hospitalization)			Member Months (Outpatient/ED)	
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
0-12	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
13-17	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
18-64	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
65+	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
Total	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR

Age	Sex	Any Services		Inpatient		Intensive Outpatient/Partial Hospitalization		Outpatient/ED	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
0-12	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
13-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

atient/ED)
Total
NR
NR
NR
NR
NR
NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Antibiotic Utilization: Total (ABXA)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Pharmacy Benefit Member Months			
Age	Male	Female	Total
0-9	981633	959960	1,941,593
10-17	544572	554031	1,098,603
18-34	64848	367889	432,737
35-49	18172	96185	114,357
50-64	4128	14047	18,175
65-74	30	51	81
75-84	5	7	12
85+	3	0	3
Unknown	0	0	0
Total	1,613,391	1,992,170	3,605,561

Antibiotic Utilization								
Age	Sex	Total Antibiotic Scrips	Average Scrips PMPY for Antibiotics	Total Days Supplied for All Antibiotic Scrips	Average Days Supplied per Antibiotic Scrip	Total Number of Scrips for Antibiotics of Concern	Average Scrips PMPY for Antibiotics of Concern	Percentage of Antibiotics of Concern of all Antibiotic Scrips
0-9	M	108170	1.32	993560	9.19	47696	0.58	44.09%
	F	104930	1.31	979072	9.33	42998	0.54	40.98%
	Total	213,100	1.32	1,972,632	9.26	90,694	0.56	42.56%
10-17	M	28550	0.63	288498	10.11	12923	0.28	45.26%
	F	38727	0.84	371855	9.60	15983	0.35	41.27%
	Total	67,277	0.73	660,353	9.82	28,906	0.32	42.97%
18-34	M	3998	0.74	39152	9.79	1601	0.30	40.05%
	F	58649	1.91	454899	7.76	18641	0.61	31.78%
	Total	62,647	1.74	494,051	7.89	20,242	0.56	32.31%
35-49	M	1691	1.12	15085	8.92	766	0.51	45.30%
	F	15660	1.95	129488	8.27	6331	0.79	40.43%
	Total	17,351	1.82	144,573	8.33	7,097	0.74	40.90%
50-64	M	349	1.01	3156	9.04	177	0.51	50.72%
	F	2144	1.83	17906	8.35	1063	0.91	49.58%

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

	Total	2,493	1.65	21,062	8.45	1,240	0.82	49.74%
65-74	M	3	1.20	22	7.33	2	0.80	66.67%
	F	1	0.24	10	10.00	0	0.00	0.00%
	Total	4	0.59	32	8.00	2	0.30	50.00%
75-84	M	0	0.00	0	NA	0	0.00	NA
	F	3	5.14	20	6.67	2	3.43	66.67%
	Total	3	3.00	20	6.67	2	2.00	66.67%
85+	M	0	0.00	0	NA	0	0.00	NA
	F	0	NA	0	NA	0	NA	NA
	Total	0	0.00	0	NA	0	0.00	NA
Unknown	M	0	NA	0	NA	0	NA	NA
	F	0	NA	0	NA	0	NA	NA
	Total	0	NA	0	NA	0	NA	NA
Total	M	142,761	1.06	1,339,473	9.38	63,165	0.47	44.25%
	F	220,114	1.33	1,953,250	8.87	85,018	0.51	38.62%
	Total	362,875	1.21	3,292,723	9.07	148,183	0.49	40.84%

Antibiotics of Concern Utilization

Age	Sex	Total Quinolone Scripts	Average Scripts PMPY for Quinolones	Total Cephalosporin 2nd-4th Generation Scripts	Average Scripts PMPY for Cephalosporins 2nd-4th Generation	Total Azithromycin and Clarithromycin Scripts	Average Scripts PMPY for Azithromycins and Clarithromycins	Total Amoxicillin/Clavulanate Scripts	Average Scripts PMPY for Amoxicillin/Clavulanates	Total Ketolides Scripts
0-9	M	42	0.00	8072	0.10	20350	0.25	17703	0.22	0
	F	73	0.00	7549	0.09	18087	0.23	15900	0.20	0
	Total	115	0.00	15,621	0.10	38,437	0.24	33,603	0.21	0
10-17	M	259	0.01	1006	0.02	6933	0.15	3914	0.09	0
	F	669	0.01	1269	0.03	8585	0.19	4440	0.10	0
	Total	928	0.01	2,275	0.02	15,518	0.17	8,354	0.09	0
18-34	M	257	0.05	50	0.01	815	0.15	303	0.06	0
	F	4316	0.14	620	0.02	9027	0.29	2642	0.09	0
	Total	4,573	0.13	670	0.02	9,842	0.27	2,945	0.08	0
35-49	M	252	0.17	20	0.01	292	0.19	135	0.09	0
	F	2034	0.25	168	0.02	2690	0.34	869	0.11	0
	Total	2,286	0.24	188	0.02	2,982	0.31	1,004	0.11	0

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

50-64	M	54	0.16	5	0.01	69	0.20	35	0.10	0
	F	402	0.34	24	0.02	400	0.34	168	0.14	0
	Total	456	0.30	29	0.02	469	0.31	203	0.13	0
65-74	M	1	0.40	0	0.00	1	0.40	0	0.00	0
	F	0	0.00	0	0.00	0	0.00	0	0.00	0
	Total	1	0.15	0	0.00	1	0.15	0	0.00	0
75-84	M	0	0.00	0	0.00	0	0.00	0	0.00	0
	F	0	0.00	0	0.00	2	3.43	0	0.00	0
	Total	0	0.00	0	0.00	2	2.00	0	0.00	0
85+	M	0	0.00	0	0.00	0	0.00	0	0.00	0
	F	0	NA	0	NA	0	NA	0	NA	0
	Total	0	0.00	0	0.00	0	0.00	0	0.00	0
Unknown	M	0	NA	0	NA	0	NA	0	NA	0
	F	0	NA	0	NA	0	NA	0	NA	0
	Total	0	NA	0	NA	0	NA	0	NA	0
Total	M	865	0.01	9,153	0.07	28,460	0.21	22,090	0.16	0
	F	7,494	0.05	9,630	0.06	38,791	0.23	24,019	0.14	0
	Total	8,359	0.03	18,783	0.06	67,251	0.22	46,109	0.15	0

All Other Antibiotics Utilization

Age	Sex	Total Absorbable Sulfonamide Scrips	Average Scrips PMPY for Absorbable Sulfonamides	Total Aminoglycoside Scrips	Average Scrips PMPY for Aminoglycosides	Total 1st Generation Cephalosporin Scrips	Average Scrips PMPY for 1st Generation Cephalosporins	Total Lincosamide Scrips	Average Scrips PMPY for Lincosamides	Total Macrolides (not azith. or clarith.) Scrips
0-9	M	5181	0.06	5	0.00	5853	0.07	0	0.00	120
	F	7945	0.10	6	0.00	6331	0.08	0	0.00	95
	Total	13,126	0.08	11	0.00	12,184	0.08	0	0.00	215
10-17	M	2104	0.05	8	0.00	2461	0.05	0	0.00	85
	F	4071	0.09	2	0.00	2996	0.06	0	0.00	113
	Total	6,175	0.07	10	0.00	5,457	0.06	0	0.00	198
18-34	M	385	0.07	0	0.00	317	0.06	0	0.00	25
	F	5185	0.17	0	0.00	3867	0.13	0	0.00	216
	Total	5,570	0.15	0	0.00	4,184	0.12	0	0.00	241
35-49	M	176	0.12	0	0.00	124	0.08	0	0.00	4
	F	1620	0.20	0	0.00	1008	0.13	0	0.00	71

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

	Total	1,796	0.19	0	0.00	1,132	0.12	0	0.00	75
50-64	M	32	0.09	0	0.00	21	0.06	0	0.00	3
	F	211	0.18	0	0.00	170	0.15	0	0.00	9
	Total	243	0.16	0	0.00	191	0.13	0	0.00	12
65-74	M	0	0.00	0	0.00	0	0.00	0	0.00	0
	F	0	0.00	0	0.00	1	0.24	0	0.00	0
	Total	0	0.00	0	0.00	1	0.15	0	0.00	0
75-84	M	0	0.00	0	0.00	0	0.00	0	0.00	0
	F	0	0.00	0	0.00	0	0.00	0	0.00	0
	Total	0	0.00	0	0.00	0	0.00	0	0.00	0
85+	M	0	0.00	0	0.00	0	0.00	0	0.00	0
	F	0	NA	0	NA	0	NA	0	NA	0
	Total	0	0.00	0	0.00	0	0.00	0	0.00	0
Unknown	M	0	NA	0	NA	0	NA	0	NA	0
	F	0	NA	0	NA	0	NA	0	NA	0
	Total	0	NA	0	NA	0	NA	0	NA	0
Total	M	7,878	0.06	13	0.00	8,776	0.07	0	0.00	237
	F	19,032	0.11	8	0.00	14,373	0.09	0	0.00	504
	Total	26,910	0.09	21	0.00	23,149	0.08	0	0.00	741

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

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Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Average Scripts PMPY for Ketolides	Total Clindamycin Scripts	Average Scripts PMPY for Clindamycins	Total Misc. Antibiotics of Concern Scripts	Average Scripts PMPY for Misc. Antibiotics of Concern
0.00	1527	0.02	2	0.00
0.00	1385	0.02	4	0.00
0.00	2,912	0.02	6	0.00
0.00	809	0.02	2	0.00
0.00	1017	0.02	3	0.00
0.00	1,826	0.02	5	0.00
0.00	175	0.03	1	0.00
0.00	2032	0.07	4	0.00
0.00	2,207	0.06	5	0.00
0.00	67	0.04	0	0.00
0.00	569	0.07	1	0.00
0.00	636	0.07	1	0.00

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

0.00	14	0.04	0	0.00
0.00	66	0.06	3	0.00
0.00	80	0.05	3	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
0.00	0	0.00	0	0.00
NA	0	NA	0	NA
0.00	0	0.00	0	0.00
NA	0	NA	0	NA
NA	0	NA	0	NA
NA	0	NA	0	NA
0.00	2,592	0.02	5	0.00
0.00	5,069	0.03	15	0.00
0.00	7,661	0.03	20	0.00

Average Scrips PMPY for Macrolides (not azith. or clarith.)	Total Penicillin Scrips	Average Scrips PMPY for Penicillins	Total Tetracycline Scrips	Average Scrips PMPY for Tetracyclines	Total Misc. Antibiotic Scrips	Average Scrips PMPY for Misc. Antibiotics
0.00	49151	0.60	23	0.00	141	0.00
0.00	47134	0.59	10	0.00	411	0.01
0.00	96,285	0.60	33	0.00	552	0.00
0.00	8513	0.19	2243	0.05	213	0.00
0.00	10707	0.23	2559	0.06	2296	0.05
0.00	19,220	0.21	4,802	0.05	2,509	0.03
0.00	1045	0.19	506	0.09	119	0.02
0.01	10663	0.35	3926	0.13	16151	0.53
0.01	11,708	0.32	4,432	0.12	16,270	0.45
0.00	398	0.26	139	0.09	84	0.06
0.01	2825	0.35	1081	0.13	2724	0.34

Appendix F: Department of Community Health, State of Georgia
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0.01	3,223	0.34	1,220	0.13	2,808	0.29
0.01	73	0.21	32	0.09	11	0.03
0.01	394	0.34	128	0.11	169	0.14
0.01	467	0.31	160	0.11	180	0.12
0.00	0	0.00	1	0.40	0	0.00
0.00	0	0.00	0	0.00	0	0.00
0.00	0	0.00	1	0.15	0	0.00
0.00	0	0.00	0	0.00	0	0.00
0.00	0	0.00	1	1.71	0	0.00
0.00	0	0.00	1	1.00	0	0.00
0.00	0	0.00	0	0.00	0	0.00
NA	0	NA	0	NA	0	NA
0.00	0	0.00	0	0.00	0	0.00
NA	0	NA	0	NA	0	NA
NA	0	NA	0	NA	0	NA
NA	0	NA	0	NA	0	NA
0.00	59,180	0.44	2,944	0.02	568	0.00
0.00	71,723	0.43	7,705	0.05	21,751	0.13
0.00	130,903	0.44	10,649	0.04	22,319	0.07

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Antibiotic Utilization: Dual Eligibles (ABXB)

Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)

Member Months			
Age	Member Months		
	Male	Female	Total
0-9	NR	NR	NR
10-17	NR	NR	NR
18-34	NR	NR	NR
35-49	NR	NR	NR
50-64	NR	NR	NR
65-74	NR	NR	NR
75-84	NR	NR	NR
85+	NR	NR	NR
Unknown	NR	NR	NR
Total	NR	NR	NR

Antibiotic Utilization								
Age	Sex	Total Antibiotic Scrips	Average Scrips PMPY for Antibiotics	Total Days Supplied for All Antibiotic Scrips	Average Days Supplied per Antibiotic Scrip	Total Number of Scrips for Antibiotics of Concern	Average Scrips PMPY for Anitbiotics of Concern	Percentage of Antibiotics of Concern of all Antibiotic Scrips
0-9	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
35-49	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

50-64	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
75-84	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
85+	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR

Antibiotics of Concern Utilization

Age	Sex	Total Quinolone Scrips	Average Scrips PMPY for Quinolones	Total Cephalosporin 2nd-4th Generation Scrips	Average Scrips PMPY for Cephalosporins 2nd-4th Generation	Total Azithromycin and Clarithromycin Scrips	Average Scrips PMPY for Azithromycins and Clarithromycins	Total Amoxicillin/Clavulanate Scrips	Average Scrips PMPY for Amoxicillin/Clavulanates
0-9	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
35-49	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

	Total	NR	NR	NR	NR	NR	NR	NR	NR
50-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
75-84	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
85+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
All Other Antibiotics Utilization									
Age	Sex	Total Absorbable Sulfonamide Scrips	Average Scrips PMPY for Absorbable Sulfonamides	Total Aminoglycoside Scrips	Average Scrips PMPY for Aminoglycosides	Total 1st Generation Cephalosporin Scrips	Average Scrips PMPY for 1st Generation Cephalosporins	Total Lincosamide Scrips	Average Scrips PMPY for Lincosamides
0-9	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

35-49	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
50-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
75-84	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
85+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

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Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Total Ketolides Scrips	Average Scrips PMPY for Ketolides	Total Clindamycin Scrips	Average Scrips PMPY for Clindamycins	Total Misc. Antibiotics of Concern Scrips	Average Scrips PMPY for Misc. Antibiotics of Concern
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR

Total Macrolides (not azith. or clarith.) Scrips	Average Scrips PMPY for Macrolides (not azith. or clarith.)	Total Penicillin Scrips	Average Scrips PMPY for Penicillins	Total Tetracycline Scrips	Average Scrips PMPY for Tetracyclines	Total Misc. Antibiotic Scrips	Average Scrips PMPY for Misc. Antibiotics
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Antibiotic Utilization: Disabled (ABXC)								
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)								
Member Months								
Age	Member Months							
	Male	Female	Total					
0-9	NR	NR	NR					
10-17	NR	NR	NR					
18-34	NR	NR	NR					
35-49	NR	NR	NR					
50-64	NR	NR	NR					
65-74	NR	NR	NR					
75-84	NR	NR	NR					
85+	NR	NR	NR					
Unknown	NR	NR	NR					
Total	NR	NR	NR					
Antibiotic Utilization								
Age	Sex	Total Antibiotic Scripts	Average Scripts PMPY for Antibiotics	Total Days Supplied for All Antibiotic Scripts	Average Days Supplied per Antibiotic Scrip	Total Number of Scripts for Antibiotics of Concern	Average Scripts PMPY for Antibiotics of Concern	Percentage of Antibiotics of Concern of all Antibiotic Scripts
0-9	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
35-49	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

50-64	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
75-84	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR
85+	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
Total	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR
Total	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR

Antibiotics of Concern Utilization

Age	Sex	Total Quinolone Scrips	Average Scrips PMPY for Quinolones	Total Cephalosporin 2nd-4th Generation Scrips	Average Scrips PMPY for Cephalosporins 2nd-4th Generation	Total Azithromycin and Clarithromycin Scrips	Average Scrips PMPY for Azithromycins and Clarithromycins	Total Amoxicillin/Clavulanate Scrips
0-9	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
35-49	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

	Total	NR	NR	NR	NR	NR	NR	NR
50-64	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
75-84	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
85+	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR

All Other Antibiotics Utili:

Age	Sex	Total Absorbable Sulfonamide Scrips	Average Scrips PMPY for Absorbable Sulfonamides	Total Aminoglycoside Scrips	Average Scrips PMPY for Aminoglycosides	Total 1st Generation Cephalosporin Scrips	Average Scrips PMPY for 1st Generation Cephalosporins	Total Lincosamide Scrips
0-9	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

35-49	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
50-64	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
75-84	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
85+	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

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Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Average Scrips PMPY for Amoxicillin/Clavulanates	Total Ketolides Scrips	Average Scrips PMPY for Ketolides	Total Clindamycin Scrips	Average Scrips PMPY for Clindamycins	Total Misc. Antibiotics of Concern Scrips	Average Scrips PMPY for Misc. Antibiotics of Concern
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
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Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
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NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR

ization								
Average Scrips PMPY for Lincosamides	Total Macrolides (not azith. or clarith.) Scrips	Average Scrips PMPY for Macrolides (not azith. or clarith.)	Total Penicillin Scrips	Average Scrips PMPY for Penicillins	Total Tetracycline Scrips	Average Scrips PMPY for Tetracyclines	Total Misc. Antibiotic Scrips	Average Scrips PMPY for Misc. Antibiotics
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
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NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
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NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
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NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Antibiotic Utilization: Other (ABXD)								
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)								
Member Months								
Age	Member Months							
	Male	Female	Total					
0-9	NR	NR	NR					
10-17	NR	NR	NR					
18-34	NR	NR	NR					
35-49	NR	NR	NR					
50-64	NR	NR	NR					
65-74	NR	NR	NR					
75-84	NR	NR	NR					
85+	NR	NR	NR					
Unknown	NR	NR	NR					
Total	NR	NR	NR					
Antibiotic Utilization								
Age	Sex	Total Antibiotic Scripts	Average Scripts PMPY for Antibiotics	Total Days Supplied for All Antibiotic Scripts	Average Days Supplied per Antibiotic Scrip	Total Number of Scripts for Antibiotics of Concern	Average Scripts PMPY for Antibiotics of Concern	Percentage of Antibiotics of Concern of all Antibiotic Scripts
0-9	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
35-49	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

50-64	F	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
75-84	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
85+	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
Unknown	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR
Total	Total	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR

Antibiotics of Concern Utilization

Age	Sex	Total Quinolone Scrips	Average Scrips PMPY for Quinolones	Total Cephalosporin 2nd-4th Generation Scrips	Average Scrips PMPY for Cephalosporins 2nd-4th Generation	Total Azithromycin and Clarithromycin Scrips	Average Scrips PMPY for Azithromycins and Clarithromycins	Total Amoxicillin/Clavulanate Scrips	Average Scrips PMPY for Amoxicillin/Clavulanates
0-9	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
35-49	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

	Total	NR	NR	NR	NR	NR	NR	NR	NR
50-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
75-84	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
85+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

All Other Antibiotics Utilization

Age	Sex	Total Absorbable Sulfonamide Scrips	Average Scrips PMPY for Absorbable Sulfonamides	Total Aminoglycoside Scrips	Average Scrips PMPY for Aminoglycosides	Total 1st Generation Cephalosporin Scrips	Average Scrips PMPY for 1st Generation Cephalosporins	Total Lincosamide Scrips	Average Scrips PMPY for Lincosamides
0-9	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
10-17	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
18-34	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
	M	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

35-49	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
50-64	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
65-74	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
75-84	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
85+	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Unknown	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR
Total	M	NR	NR	NR	NR	NR	NR	NR	NR
	F	NR	NR	NR	NR	NR	NR	NR	NR
	Total	NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Total Ketolides Scrips	Average Scrips PMPY for Ketolides	Total Clindamycin Scrips	Average Scrips PMPY for Clindamycins	Total Misc. Antibiotics of Concern Scrips	Average Scrips PMPY for Misc. Antibiotics of Concern
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR

Total Macrolides (not azith. or clarith.) Scrips	Average Scrips PMPY for Macrolides (not azith. or clarith.)	Total Penicillin Scrips	Average Scrips PMPY for Penicillins	Total Tetracycline Scrips	Average Scrips PMPY for Tetracyclines	Total Misc. Antibiotic Scrips	Average Scrips PMPY for Misc. Antibiotics
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR
NR	NR	NR	NR	NR	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Board Certification (BCR)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Type of Physician	Number of Physicians in Each Practice Area	Board Certification	
		Number	Percent
Family Medicine	NR	NR	NR
Internal Medicine	NR	NR	NR
OB/GYN physicians	NR	NR	NR
Pediatricians	NR	NR	NR
Geriatricians	NR	NR	NR
Other physician specialists	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Total Membership (TLM)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
Product/Product Line	Total Number of Members*
HMO (Total)	313,692
Medicaid	313647
Commercial	0
Medicare (cost or risk)	45
Other	0
PPO (Total)	0
Medicaid	0
Commercial	0
Medicare (cost or risk)	0
Other	0
POS (Total)	0
Medicaid	0
Commercial	0
Medicare (cost or risk)	0
Other	0
FFS (Total)	0
Medicaid	0
Commercial	0
Medicare (cost or risk)	0
Other	0
Total	313,692

* Total number of members in each category as of December 31 of the measurement year.

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Enrollment by Product Line: Total (ENPA)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Age	Male Member Months	Female Member Months	Total Member Months
<1	127864	124491	252,355
1-4	404326	391071	795,397
5-9	449443	444398	893,841
10-14	370160	370850	741,010
15-17	174412	183181	357,593
18-19	42699	61872	104,571
0-19 Subtotal	1,568,904	1,575,863	3,144,767
0-19 Subtotal: %	97.24%	79.10%	87.22%
20-24	5152	114389	119,541
25-29	8126	108026	116,152
30-34	8871	83602	92,473
35-39	7442	51597	59,039
40-44	6131	29149	35,280
20-44 Subtotal	35,722	386,763	422,485
20-44 Subtotal: %	2.21%	19.41%	11.72%
45-49	4599	15439	20,038
50-54	2601	8146	10,747
55-59	1151	3914	5,065
60-64	376	1987	2,363
45-64 Subtotal	8,727	29,486	38,213
45-64 Subtotal: %	0.54%	1.48%	1.06%
65-69	12	46	58
70-74	18	5	23
75-79	3	7	10
80-84	2	0	2
85-89	1	0	1
>=90	2	0	2
>=65 Subtotal	38	58	96
>=65 Subtotal: %	0.00%	0.00%	0.00%
Age Unknown	0	0	0

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Total	1,613,391	1,992,170	3,605,561
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Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Enrollment by Product Line: Dual Eligibles (ENPB)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Age	Male Member Months	Female Member Months	Total Member Months
<1	NR	NR	NR
1-4	NR	NR	NR
5-9	NR	NR	NR
10-14	NR	NR	NR
15-17	NR	NR	NR
18-19	NR	NR	NR
0-19 Subtotal	NR	NR	NR
0-19 Subtotal: %	NR	NR	NR
20-24	NR	NR	NR
25-29	NR	NR	NR
30-34	NR	NR	NR
35-39	NR	NR	NR
40-44	NR	NR	NR
20-44 Subtotal	NR	NR	NR
20-44 Subtotal: %	NR	NR	NR
45-49	NR	NR	NR
50-54	NR	NR	NR
55-59	NR	NR	NR
60-64	NR	NR	NR
45-64 Subtotal	NR	NR	NR
45-64 Subtotal: %	NR	NR	NR
65-69	NR	NR	NR
70-74	NR	NR	NR
75-79	NR	NR	NR
80-84	NR	NR	NR
85-89	NR	NR	NR
>=90	NR	NR	NR
>=65 Subtotal	NR	NR	NR
>=65 Subtotal: %	NR	NR	NR
Age Unknown	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Total	NR	NR	NR
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Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Enrollment by Product Line: Disabled (ENPC)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Age	Male Member Months	Female Member Months	Total Member Months
<1	NR	NR	NR
1-4	NR	NR	NR
5-9	NR	NR	NR
10-14	NR	NR	NR
15-17	NR	NR	NR
18-19	NR	NR	NR
0-19 Subtotal	NR	NR	NR
0-19 Subtotal: %	NR	NR	NR
20-24	NR	NR	NR
25-29	NR	NR	NR
30-34	NR	NR	NR
35-39	NR	NR	NR
40-44	NR	NR	NR
20-44 Subtotal	NR	NR	NR
20-44 Subtotal: %	NR	NR	NR
45-49	NR	NR	NR
50-54	NR	NR	NR
55-59	NR	NR	NR
60-64	NR	NR	NR
45-64 Subtotal	NR	NR	NR
45-64 Subtotal: %	NR	NR	NR
65-69	NR	NR	NR
70-74	NR	NR	NR
75-79	NR	NR	NR
80-84	NR	NR	NR
85-89	NR	NR	NR
>=90	NR	NR	NR
>=65 Subtotal	NR	NR	NR
>=65 Subtotal: %	NR	NR	NR
Age Unknown	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Total	NR	NR	NR
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Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Enrollment by Product Line: Other (ENPD)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Age	Male Member Months	Female Member Months	Total Member Months
<1	NR	NR	NR
1-4	NR	NR	NR
5-9	NR	NR	NR
10-14	NR	NR	NR
15-17	NR	NR	NR
18-19	NR	NR	NR
0-19 Subtotal	NR	NR	NR
0-19 Subtotal: %	NR	NR	NR
20-24	NR	NR	NR
25-29	NR	NR	NR
30-34	NR	NR	NR
35-39	NR	NR	NR
40-44	NR	NR	NR
20-44 Subtotal	NR	NR	NR
20-44 Subtotal: %	NR	NR	NR
45-49	NR	NR	NR
50-54	NR	NR	NR
55-59	NR	NR	NR
60-64	NR	NR	NR
45-64 Subtotal	NR	NR	NR
45-64 Subtotal: %	NR	NR	NR
65-69	NR	NR	NR
70-74	NR	NR	NR
75-79	NR	NR	NR
80-84	NR	NR	NR
85-89	NR	NR	NR
>=90	NR	NR	NR
>=65 Subtotal	NR	NR	NR
>=65 Subtotal: %	NR	NR	NR
Age Unknown	NR	NR	NR

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Total	NR	NR	NR
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Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Enrollment by State (EBS)	
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)	
State	Number
Alabama	16
Alaska	0
Arizona	0
Arkansas	0
California	2
Colorado	1
Connecticut	0
Delaware	0
District of Columbia	0
Florida	22
Georgia	306046
Hawaii	0
Idaho	0
Illinois	3
Indiana	1
Iowa	1
Kansas	0
Kentucky	1
Louisiana	3
Maine	0
Maryland	0
Massachusetts	0
Michigan	0
Minnesota	4
Mississippi	4
Missouri	1
Montana	0
Nebraska	0
Nevada	1
New Hampshire	0
New Jersey	2
New Mexico	0

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

New York	2
North Carolina	6
North Dakota	1
Ohio	3
Oklahoma	0
Oregon	0
Pennsylvania	2
Rhode Island	0
South Carolina	11
South Dakota	0
Tennessee	5
Texas	7
Utah	0
Vermont	0
Virginia	7
Washington	2
West Virginia	0
Wisconsin	0
Wyoming	0
American Samoa	0
Federated States of Micronesia	0
Guam	0
Commonwealth of Northern Marianas	0
Puerto Rico	0
Virgin Islands	0
Other	8
TOTAL	306,162

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Race/Ethnicity Diversity of Membership (RDM)									
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)									
Race/Ethnicity Diversity of Membership									
Total Unduplicated Membership During the Measurement Year		433574							
Percentage of Members for Whom the Organization has Race/Ethnicity Information by Data Collection									
Direct Data Collection Method			Indirect Data Collection Method		Unknown				
Race	Direct Total	0.00%	Indirect Total*	0.0000	Total*	1.0000			
	Health Plan Direct*	0.0000							
	CMS/State Database*	0.0000							
	Other*	0.0000							
Ethnicity	Direct Total	0.00%	Indirect Total*	0.0000	Total*	1.0000			
	Health Plan Direct*	0.0000							
	CMS/State Database*	0.0000							
	Other*	0.0000							
*Enter percentage as a value between 0 and 1.									
Race	Hispanic or Latino		Not Hispanic or Latino		Unknown Ethnicity		Declined Ethnicity		To
	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage	Number
White	27198	79.34%	74257	30.71%	66	0.04%	0	NR	101,521
Black or African American	766	2.23%	158422	65.52%	81	0.05%	0	NR	159,269
American-Indian and Alaska Native	52	0.15%	130	0.05%	0	0.00%	0	NR	182
Asian	168	0.49%	7375	3.05%	5	0.00%	0	NR	7,548
Native Hawaiian and Other Pacific Islanders	94	0.27%	69	0.03%	0	0.00%	0	NR	163
Some Other Race	6002	17.51%	1528	0.63%	3	0.00%	0	NR	7,533
Two or More Races	0	0.00%	0	0.00%	0	0.00%	0	NR	0
Unknown	0	0.00%	0	0.00%	157358	99.90%	0	NR	157,358
Declined	0	0.00%	0	0.00%	0	0.00%	0	NR	0
Total	34,280	100.00%	241,781	100.00%	157,513	100.00%	0	NR	433,574

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Percentage
23.41%
36.73%
0.04%
1.74%
0.04%
1.74%
0.00%
36.29%
0.00%
100.00%

Appendix F: Department of Community Health, State of Georgia
Audited CY 2012 HEDIS Measure Results for Peach State

Language Diversity of Membership (LDM)			
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)			
Percentage of Members With Known Language Value from Each Data Source			
Category	Health Plan Direct	CMS/State Databases	Other Third-Party Source
Spoken Language Preferred for Health Care*	0.0000	0.0000	1.0000
Preferred Language for Written Materials*	0.0000	0.0000	1.0000
Other Language Needs*	0.0000	0.0000	1.0000
*Enter percentage as a value between 0 and 1.			
Spoken Language Preferred for Health Care			
	Number	Percentage	
English	253553	58.48%	
Non-English	19108	4.41%	
Unknown	160913	37.11%	
Declined	0	0.00%	
Total*	433,574	100.00%	
Language Preferred for Written Materials			
	Number	Percentage	
English	0	0.00%	
Non-English	0	0.00%	
Unknown	433574	100.00%	
Declined	0	0.00%	
Total*	433,574	100.00%	
Other Language Needs			
	Number	Percentage	
English	0	0.00%	
Non-English	0	0.00%	
Unknown	433574	100.00%	
Declined	0	0.00%	
Total*	433,574	100.00%	
*Should sum to 100%			

Appendix F: Department of Community Health, State of Georgia
 Audited CY 2012 HEDIS Measure Results for Peach State

Weeks of Pregnancy at Time of Enrollment in MCO (WOP)		
Peach State Health Plan (Org ID: 6625, SubID: 9227, Medicaid, Spec Area: None, Spec Proj: None)		
Measurement Year		
Measurement Year	2012	
Weeks of Pregnancy	Number	Percentage
< 0 weeks	46	10.70%
1-12 weeks	54	12.56%
13-27 weeks	252	58.60%
28 or more weeks	73	16.98%
Unknown	5	1.16%
Total	430	100.00%