		HEDIS	5				Non-H					
			Mo	st recent (2013	performar data)	ce			ecent perfo (2013 data			
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments	
ASTHMA	-											
General Principles for the Diagnosis	1. Improper use of spacers											
and Management of Asthma	and inhaling devices											
	2. Not using lung volume	Use of Appropriate Medications for					1. Preventive visit in year	92.00%	88.95%			
	measurements to monitor	People with Asthma (ASM)					(5-64 years old)					
	3. Inattention to reversing	a. 5-11 years old	95.70%	88.63%			2. ED visits with a Primary	71.57	222.04			
	asthma symptoms	HEDIS Nati HMO Avg	96.70%	90.20%			diagnosis of					
		c. 12-18 years old	92.62%	84.75%			asthma/ 1000 asthma members (5-64 years old)					
		HEDIS Nati HMO Avg	93.10%	86.90%			members (5-04 years old)					
		d. 19-50 years old	89.47%	72.97%								
		HEDIS Nati HMO Avg		74.46%								
		e. 51-64 years old	93.10%	64.19%								
		HEDIS Natl HMO Avg		70.30%								
		c. Total (sum of all the above)	91.89%	80.77%								
		·		84.10%								
		HEDIS Natl HMO Avg	91.00%	04.10/0								
		Tools: NHLBI EPR3:									1	
		· Classifying Asthma Severity and Initiating The	orany								1	
		Assessing Asthma Control and Adjusting The									1	
		Stepwise Approach for Managing Asthma Lo									1	
		Asthma Action Plan (NIH pub 07-5251)									1	
		Asthma Control Plan for Child										
		Asthma Guideline Implementation Steps & Too	ls (GIST)								1	
		How to Use your Asthma Inhaler										
		Inhaled Quick Relief and Control Medications (U of M)									
		Michigan Asthma Resource Kit (Mark)										
RONCHITIS	T						·					
Management of Uncomplicated		Avoidance of Antibiotic Treatment	25.77%	26.75%								
Acute Bronchitis in Adults		in Adults with Acute Bronchitis (AAB)										
		HEDIS Nati HMO Avg	26.10%	26.50%								
		Tools:									†	
		CDC Get Smart, Know When Antibiotics Work									1	
CHRONIC KIDNEY DISEASE		•										
iagnosis and Management of	GFR calculation						1. Percent members in HEDIS	94.76%	94.20%	98.07%	No HEDIS measure	
dults with Chronic Kidney Disease							Diabetes or HTN					
							populations who had a				Consider HEDIS diabetes and HTN	
							serum creatinine test				populations	
							(necessary for GFR)				Uneven availability of eGFR thru	
											administrative data	
		Tools: none						•		-		

		HEDIS	5				Non-H	IEDIS			
			Mo		performan data)	ce			ecent perfo (2013 data		
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
DEEP VENOUS THROMBOSIS											•
Outpatient Management of Uncomplicated Deep Venous Thrombosis	Pharmacological approaches to outpatient treatment										No HEDIS measure
		Tools: none									
DEPRESSION											
Primary Care Diagnosis and Management of Adults with	 Pharmacological approaches to 	Antidepressant Medication Management (AMM)									Consider dropping HEDIS practitioner contacts as proposed for HEDIS 2009,
Depression	treatment	a. Effective Acute Phase Treatment	69.25%	55.33%	74.03%						although addressed in guideline [D] (dropped)
		HEDIS Natl HMO Avg	64.40%	50.50%	66.80%						(a.oppea)
		b. Effective Continuation Treatment	49.95%	37.83%	57.83%						HEDIS measures for 84 and 180 days, not
		HEDIS Nati HMO Avg		35.20%	53.30%						"9-12" months after acute symptoms resolve [A]
		Tools:	1771070	66.12676	00.0070						resolve [A]
		Edinburgh Postnatal Depression Scale (EPDS) (U	JCSF)								1
		Patient Health Questionnaire (PHQ-9) for Depr									7
DIABETES											-5
Management of Diabetes Mellitus							Statin therapy for persons with Diabetes (one rx filled	58.48%	58.78%	69.95%	Disease burden measures Retired 2011
		Comprehensive Diabetes Care (CDC)					during the measurement				1. Acute Myocardial Infarction (AMI)
		a. HbA1c Testing	92.32%	85.57%	94.77%		vear) Disease Burden mea	asures retir	ed 2011		2. Cerebrovascular Accident (CVA)3. Amputations
		HEDIS Natl HMO Avg		83.80%	92.30%		Disease Burden Measures		7 Perform	ance)	4. Dialysis
		b. HbA1c Poor Control (>9.0%)	26.59%	37.06%	18.13%		a. Acute MI	6.33%	13.01%		
		HEDIS Nati HMO Avg	30.50%	45.60%	25.30%		b. CVA	6.15%	21.01%	9.90%	Statin therapy: measurement per
		c. HbA1c Control (<8.0%)	60.97%	54.07%	70.98%		c. Amputations	1.49%	5.86%	3.51%	specs provided by BCBSM
		HEDIS Natl HMO Avg		45.50%	65.50%		d. Dialysis	6.61%	21.10%	14.38%	Do not massure ACE/ADD for dishetic
		d. HbA1c Good control (<7.0%)	41.01%								Do not measure ACE/ARB for diabetic members with HTN or albuminuria
		HEDIS Natl HMO Avg		34.40%							Themsels with this of albahilitaria
		e. Eye exam, retinal, performed	59.80%	63.62%	74.76%						Do not measure anti-platelet therapy
		HEDIS Natl HMO Avg			68.50%						(low-dose aspirin)
		f. LDL-C screening HEDIS Natl HMO Avg	86.65%	79.24% 76.00%	91.06% 88.90%						
		g. LDL-C control (<100 mg/dL)	47.93%	41.38%	61.34%						Do not measure serum creatinine or calculated GFR
		HEDIS Nati HMO Avg			53.80%						Calculated GFN
		h. Med. Attention for nephropathy	88.11%	71.24%	93.17%						Measure only LDL-C, not fasting lipid
		HEDIS Nati HMO Avg			91.10%						profile
		i. Blood pressure control (<140/90mmHg)	64.33%	63.78%	67.53%						
		HEDIS Natl HMO Avg	65.00%	60.40%	65.60%						I
		j. Blood pressure control (<140/80mmHg)	40.20%	41.48%	52.02%						
		HEDIS Natl HMO Avg	43.00%	39.20%	50.20%						
		Tools: American Diabetes Association Super Foods for	r Diahetics								1
		Diabetes Checklist (PDF)	שומטבנונט								1
		Good Health Club Physician GLs: Prev. & Treatr	nent of Pe	d Obesity 8	& Diabetes						1
		The Impact of Diabetes in Michigan: The Diabetes		-			action Plan 2011-2014				1

		HEDIS	S				Non-H	EDIS			
			M		performan data)	ce			ecent perfo (2013 data		
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
HEART				=					=	=	-
Adults with Systolic Heart Failure	 Underuse ACE & ARBs Treatment for special populations (e.g. African-Americans) Electrolyte monitoring Admission and re-admission avoidance 	Tools: none									No HEDIS measure Consider specifications based on BCBSM PGIP
Screening and Management of Hypercholesterolemia	Pharmacogical management with statin therapy	Cholesterol Management for Patients with Cardiovascular Conditions (CMC) a. LDL-C screening	88.00%	83.87%	89.85%		Statin therapy for persons with Cardiovascular Conditions (one rx filled during the measurement year)	78.14%	73.53%	80.81%	HEDIS includes post-event (1/1-11/1) and IVD members (measurement year or year prior) HEDIS is ages 18-75; guideline is 18+
		HEDIS Natl HMO Avg	86.70%	81.10%	89.60%						HEDIS is screening for LDL-C onlyl
		b. LDL-C control (<100mg/dL)	58.35%	47.98%	62.02%						
		HEDIS Natl HMO Avg	57.50%	40.50%	58.60%						Statin therapy: measurement per specs provided by BCBSM
		Tools:									i i
		ATP III Cholesterol Mgt Implementation Tool fo	or Palm OS								1
		ATP III Guidelines At-A-Glance Quick Desk Refe	rence								1
		NHLBI Assessment Tool - Estimating your 10-ye	ear risk of l	naving a he	art attack						1
Medical Management of Adults with Hypertension	Pharmacological approaches to treatment	1. Controlling High Blood Pressure (CBP) (<140/90 mm Hg)	64.49%		69.97%		Percent members (adult) with any diagnosis of HTN	13.75%	15.87%	44.52%	HEDIS is 18-85; guideline is 18+ HEDIS denominator includes (only) members with dx of HTN during first 6
		HEDIS Natl HMO Avg	64.40%	56.50%	65.50%						months of the measurement year
		Tools:									1
		Essential Guide to HTN: Accurate Blood Pressu	ıre Readin	gs (AMA)							1
		DASH Diet									4
		Hypertension Encounter Form (AAFP)									4
		Michigan Hypertension Core Curriculum Reference card from the 7th Report of the Join	t Notl Cor	of an Drave	ntion Dot	action Fu	Justian and Treatment of LIDD (INC	7)			-
LOW BACK PAIN		Reference card from the 7th Report of the John	it ivati. Coi	ii. Oli Fleve	illion, Dec	ection, Eva	didation, and Treatment of FIBF (JINC	7)			1
Management of Acute Low Back		Use of Imaging Studies for Low Back	73.46%	76.12%							
Pain		Pain (LBP)	73.40%	70.12/6							
		HEDIS Nati HMO Avg	75.20%	75.50%							
		Tools: none									
OSTEOARTHRITIS											
Medical Management of Adults with Osteoarthritis	 Pharmacological approaches to 										HEDIS measure is for DMARD for RA
	treatment	Tools: none									
OSTEOPOROSIS											
Management and Prevention of Osteoporosis		Osteoporosis Management in Women Who Had a Fracture (OMW) HEDIS Natl HMO Avg			42.28% 29.20%						HEDIS measures not sufficient - Medicare and women only - Following fracture, not preventive
		Tools: FRAX (WHO Fracture Risk Assessment Tool)									- Osteoporosis testing - from Health Outcomes Survey

		HEDI	S				Non-H				
			Me		performar data)	ce			ecent perfo (2013 data		
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
OVERWEIGHT/OBESITY		•						•		•	
Management of Overweight and Obesity in the Adult	Non-surgical interventions for weight loss and	1. Adult BMI Assessment (ABA)	85.68%	86.17%	93.70%						
	weight management	HEDIS Natl HMO Avg	75.70%	75.90%	89.60%						
		Tools:									
		CDC Adult BMI Calculator ages 20 and up									
		Communication GLs to Promote Health Behavi	ior Change	(PDF) (Per	manente N	1edical Gro	oup)				
		MI Steps Up Healthy People (comprehensive p	atient and	physician ı	materials)						
		NHLBI Adult BMI Online Calculator and downlo									
		NHLBI Obesity Education Initiative <u>Slide Sets</u> :	Portion Dis	tortion and	d Adult Clin	ical Practio	ce Guidelines				
Prevention and Identification of		Weight Assessment and Counseling									
Childhood Overweight and Obesity		for Nutrition and Physical Activity									
		for Children/Adolescents (WCC) a. BMI Assessment ages 3-11	73.39%	68.35%							
Treatment of Childhood Overweight		_									
and Obesity		HEDIS Natl HMO Avg		n/a							
and Obesity		b. BMI Assessment ages 12-17	75.82%	73.06%							
		HEDIS Natl HMO Avg	n/a	n/a							
		c. BMI Assessment all ages 3-17	75.92%	69.98%							
		HEDIS Nati HMO Avg	57.70%	56.90%							
		d. Nutrition Counseling 3-11	70.39%	67.23%							
		HEDIS Nati HMO Avg		n/a							
			64.10%	63.77%							
		e. Nutrition Counseling 12-17									
		HEDIS Natl HMO Avg		n/a							
		f. Nutrition Counseling all ages 3-17	67.40%	65.97%							
		HEDIS Natl HMO Avg	56.70%	58.70%							
		g. Counseling for Phys. Activity 3-11	60.83%	51.66%							
		HEDIS Nati HMO Avg	n/a	n/a							
		h. Counseling for Phys. Activity 12-17	64.64%	59.69%							
				n/a							
		i. Couns. for Phys. Activity Total	62.52%	54.45%							
		All years HEDIS Natl HMO Avg	53 60%	50.50%							
		Tools:	33.0070	30.3070		-					
		AAP White House Obscitu Initiative									
		AAP White House Obesity Initiative	10								
		CDC BMI Calculator for Children and Teens 2-2	-								
		CDC BMI for age and other clinical growth char									
		Communication GLs to Promote Health Behavi					pup)				
		Good Health Club Physician GLs: Prev. & Treat									
		MI Steps Up Healthy People (comprehensive p									
		NHLBI Obesity Education Initiative: Portion Dis	stortion an	d Adult Cli	nical Guide	lines Slide	Sets				

		HEDIS	S				Non-H	IEDIS			
			Most recent performance (2013 data)			ce		Most recent performance (2013 data)			
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
PHARYNGITIS											
Acute Pharyngitis in Children 2-18 years	 Inappropriate use of antibiotics 	Appropriate testing for children with pharyngitis (CWP)	77.92%	58.92%							
		HEDIS Natl HMO Avg	80.70%	66.50%							
		Tools:									
		CDC Get Smart, Know When Antibiotics Work.	Pharyngit	s: Treat O	nly Proven	Group A Str	г ер				
PREGNANCY PREVENTION											
Prevention of Unintended Pregnancy in Adults18 Years and	Interventions to decrease risk of										No HEDIS measure
Older	unintended pregnancy										No meaningful measures from administrative data
		Tools:									
		Preventing Unintended Pregnancy in Adults Pro	ovider Too	lkit (mi.gov)						
		Patient Fact Sheets (mi.gov)									
Prevention of Pregnancy in Adolescents 12-17 years	Interventions to decrease risk of unintended										
	pregnancy in	Tools:									
	adolescents	MDCH Teen Pregnancy Prevention Initiative									1
		Provider Tool for Dialogue									1
PRENATAL AND POSTPARTUM	CARF										
Routine Prenatal and Postnatal Care		Prenatal and Postpartum Care (PPC)									HEDIS frequency of on-going prenatal
		a. Prenatal: % deliveries that received a prenatal care visit in 1st trimester or within 42 days after enrollment HEDIS Natl HMO Avg	88.79% 90.90%								care is Medicaid only. Differences exist among health plans in the use of hybric method, or report based on administrative data only, thereby
		b. Postpartum: % deliveries that had postpartum visit on or between 21-56 davs after delivery HEDIS Natl HMO Avg	80.13%								foregoing "lift" and reporting lower rates.
		Tools:									
		Preconception Screening & Counseling Checklis	st (March o	of Dimes)							

are Measure			performan	60					
are Measure		(2013	Most recent performance (2013 data)			Most recent performance (2013 data)			
	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
Colorectal Cancer Screening (COL)	71.52%		76.62%						Consider HEDIS Adults' Access to
HEDIS Natl HMO Avg	63.30%		64.30%						Preventive/Ambulatory Health Services
2. Breast Cancer Screening (BCS) (2014 ages 50-74)	80.74%	63.48%	82.62%						
HEDIS Natl HMO Avg	74.30%	57.90%	71.30%						ISSUES:
3. Cervical Cancer Screening (CCS)									- Specs differ regarding frequency of
HEDIS Natl HMO Avg	n/a	n/a							preventive services
4. Chlamydia Screening in Women (21-24) (CHL)	54.11%	70.75%							Commercial every three years Medicare/Medicaid annually
HEDIS Nati HMO Avg	50.30%	61.60%							- Age stratifications at 20-44, 45-64,
Flu Vaccinations for Adults ages 18-64 (CAHPS) (FVA)	50.26%	41.61%							65+
HEDIS Natl HMO Avg	50.30%	n/a							Change for colorectal cancer screening
Flu Vaccinations for Older Adults 65+ (CAHPS) (FVO) [Medicare only]			76.45%						for 2010: Age range and dropped DCBE from numerator criteria
HEDIS Natl HMO Avg			n/a						
7. Pneumonia Vaccination Status for Older Adults 65+ (CAHPS) (PNU) [Medicare only]			75.81%						
HEDIS Nati HMO Avg	-		n/a						
8. Aspirin Use	46.11%								
HEDIS Nati HMO Avg	46.50%	n/a	-						
	50.85%	44.30%	-						
	n/a	n/a	-						
Tools: none	<u>.</u>					•			
									Care for Older Adults (COA) Four components: Advance Care Planning doc. Medication review Functional status assessment Pain assessment
	_	HEDIS Nati HMO Avg n/a Tools: none	HEDIS Natl HMO Avg n/a n/a Tools: none	HEDIS Nati HMO Avg n/a n/a Tools: none	HEDIS Natl HMO Avg n/a n/a Tools: none	HEDIS Natl HMO Avg n/a n/a Tools: none	HEDIS Nati HMO Avg n/a n/a Tools: none	HEDIS Natl HMO Avg n/a n/a Tools: none	HEDIS Nati HMO Avg n/a n/a Tools: none

		T GOIDELINES, WEASURES and							<u>'</u>		Γ
		HEDIS	5				Non-H				
			Most recent performance (2013 data)			Most recent performance (2013 data)					
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
ADOLESCENTS AND CHILDREN											
Adolescent Health Risk Behavior Assessment											
		Tools:				-					
		Bright Futures Guidelines for Health Supervisio	n								
		Rapid Assessment for Adolescent Preventive Se	ervices (RA	APS)							
Routine Preventive Services for Children and Adolescents (Ages 2-	Parent/Child education and counseling	1. Well-Child visits in the 3rd, 4th, 5th and 6th years of life (W34)	77.39%	78.25%							HEDIS Well-Child visits 3-6 omits 2-yea olds.
21)	2. Vaccinations	HEDIS Nati HMO Avg	74.30%	71.50%							Consider HEDIC Children's and
		2. Adolescent Well-Care visits (AWC)	46.90%	58.49%							Consider HEDIS Children's and Adolescent's access to primary care providers. NOTES: Annual visits for
		HEDIS Natl HMO Avg		50.00%							ages 25 months to 6 years (no
		3. Chlamydia screening in Women	48.03%	61.85%							stratification break at 3 years). HEDIS
		16-20 years of age (CHL)									includes up to age 19 - no stratificatior
		HEDIS Natl HMO Avg	41.40%	51.30%							break at 18.
		4. Immunizations for Adolescents (IMA)									ALSO, guideline does not indicate ANNUAL visits.
		a. Meningococcal	91.31%	91.21%							ANNOAL VISIES.
		HEDIS Nati HMO Avg	69.50%	71.90%							
		b. Tdap/Td	93.00%	90.57%							
		HEDIS Nati HMO Avg		83.60%							
		c. Combo 1	90.37%	88.27%							
		HEDIS Natl HMO Avg		70.20%							
		5. HPV Vaccine for Female Adolescents	13.97%	23.15%							
		HEDIS Natl HMO Avg	14.20%	19.80%							
		Tools:									
		Alliance for Immunization in Michigan Toolkit	at Van N	- d & - 1/							
		CDC Vaccines and Immunizations: Parents, Wh			<u> </u>						
		CDC Video: Put Your Hands Together (proper h		ng)							
		EPSDT Physician Toolkit inc. HME forms 0-20 ye	ears								

		HEDIS	S				Non-H				
			Mo	ost recent (2013	performan data)	ce			ecent perfo (2013 data		
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
Routine Preventive Services for	1. Parental education and	1. Childhood Immunization Status (CIS)									
Infants and Children (Birth-24	counseling	a. DTaP/DT	88.55%	83.32%							
months)	2. Vaccinations	HEDIS Natl HMO Avg	86.70%	79.00%							
		b. IPV	93.87%	93.42%							
		HEDIS Natl HMO Avg		90.00%							
		c. MMR	90.93%	92.61%							
		HEDIS Natl HMO Avg		90.50%							
		d. Hib	94.59%	92.72%							
		HEDIS Natl HMO Avg		90.70%							
		е. НерВ	91.44%	93.71%							
		f. VZV	91.23%	88.60% 92.15%							
		HEDIS Nati HMO Avg		90.20%							
		g. Pneumococcal	87.31%	82.26%							
		HEDIS Natl HMO Avg		79.20%							
		h. HepA	78.21%	82.86%							
		HEDIS Natl HMO Avg		81.90%							
		i. Rotavirus	77.66%	69.33%							
		HEDIS Natl HMO Avg	79.90%	67.70%							
		j. Influenza	56.40%	46.33%							
		HEDIS Natl HMO Avg	65.30%	50.00%							
		k. Combo 2	82.09%	80.79%							
		HEDIS Natl HMO Avg	78.80%	74.00%							
		I. Combo 3	79.06%	76.72%							
		HEDIS Natl HMO Avg		70.80%							
		s. Combo 10	42.96%	33.90%							
		HEDIS Natl HMO Avg		34.70%							
		2. Well-Child visits in the first 15 months	82.66%	72.43%							
		of life 6+visits (W15) HEDIS Natl HMO Avg	79.00%	61.60%							
		3. Lead Screening in Children (LSC)	75.00/8	80.00%							
		[Medicaid only]		23.23/0							
		HEDIS Natl HMO Avg		66.50%							
		Tools:									
		Alliance for Immunization in Michigan Toolkit									
		CDC Vaccines and Immunizations: Parents, What You Need to Know									
		CDC Video: Put Your Hands Together (proper l		ng)							
		EPSDT Physician Toolkit inc. HME forms 0-20 years									
		WHO Child Growth Charts (Birth to 24 months))								

		HEDIS	5				Non-l	HEDIS			
			Me	ost recent (2013	performan data)	ce			ecent perfo (2013 data		
Guideline	Gaps in Care	Measure	Comm	Caid	Care	SNP	Measure	Comm	Caid	Care	Comments
SEDATION USE, OFFICE											
In Office Use of Sedation											
		Tools: none									
SUBSTANCE USE		•									•
Screening, Diagnosis and Referral for Substance Use Disorders 1. Assessment and identification of substance use disorders	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) a. Initiation of AOD treatment	35.24%		42.99%						Guideline addresses referral consideration [D], but does not specify 14-day timeframe. Addresses "appropriate" follow-up, not	
	disorders	HEDIS Nati HMO Avg			38.20%						2 visits.
		b. Engagement of AOD treatment	12.29%		4.24%						
		HEDIS Natl HMO Avg	13.70%		10.60%						
		Tools:									
		CAGE & CAGE-AID Questionnaires									
		DAST (Drug Abuse Screening Test)									
TOBACCO USE											
Tobacco Control	 Identification of tobacco use and exposure Interventions to decrease tobacco use 	Medical Assistance with Smoking Cessation (MSC) NOTE: Adult CAHPS - 18+ a. Advising Smokers to Quit	81.36%	80.15%			Percent Current Smokers (calculated in Quality Compass) - Age 18+	14.80%	37.57%	10.85%	Guideline: Age 12+ Project to total number of current adu smokers (18+) based on % current
		HEDIS Nati HMO Avg	77.30%	75.80%							smokers and number of adults 18+
		b. Discussing Smoking Cessation Medications	58.52%	53.64%							(available in HEDIS)
		HEDIS Natl HMO Avg	51.70%	46.60%							
		c. Discussion Smoking Cessation Strategies	45.81%	46.39%							
		HEDIS Natl HMO Avg	46.50%	41.90%							
		Tools:									
		Guide Your Patients to a Smoke-Free Future (PDF) (Canada) MI Steps Up "Don't Smoke" (comprehensive patient and physician materials)									
		MI Cancer Consortium Tobacco Cessation Prov	_								
		MI Insurers Tobacco Cessation Benefits									

Other Tools:

chigan Department of Community Health - Reporting Requirements and Wellness 4x4 Plan	
ichigan Care Improvement Registry	
eportable Diseases in Michigan	
equirements for Reporting Abuse and Neglect	
chigan Health and Wellness 4x4 Plan	
ease Management Program Information for MQIC Health Plans	

No measure or no data	
Guideline does not apply	
Outperformed 2014 HEDIS Natl Average	
Underperformed 2014 HEDIS Natl Average	
2014 HEDIS Natl Avg not avail	n/a
MQIC results (previous year comparison)	
Decline from last result	
Increase from last result	
Not previously reported no comparison	
Not reported on MQIC Annual report	