Utah Health Status Update:

Health Plan Performance

December 1997

Utah Department of Health

This Health Status Update contains highlights from the Utah Health Data Committee's first report on HMO performance. That report is intended to provide consumers, purchasers, and health plans with accurate, comparative, and standardized data to guide choices among health plans in Utah. The performance measures used were based on the Health Plan Employer Data and Information Set (HEDIS version 3.0) and calculated based on calendar year 1996 data.

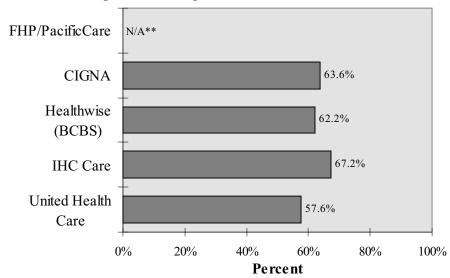
The National Committee for Quality Assurance (NCQA) was selected to assess health plans' information system capacity and to conduct a compliance audit of HEDIS measurement. The compliance audit was designed to provide health insurance purchasers and consumers with confidence in the accuracy of health plan performance data, and will also guide improvements in data quality and provide opportunities for data sharing among public health agencies, employers, and health plans. In the first year, the following HMO plans voluntarily provided both Medicaid and commercial plan data for the compliance audit: Blue Cross/Blue Shield of Utah (Healthwise and Med-Utah), CIGNA Healthcare of Utah, Intermountain Health Care (IHC Care and IHC Access), United HealthCare and United MedChoice of Utah. FHP/PacificCare of Utah withdrew from the audit and public reporting.

Highlights:

- The four participating plans were able to report most measures--for both commercial and Medicaid plans.
- Only 17% of adolescents received well care visits in the Medicaid HMO reporting the best performance on that measure.
- Member disenrollment rates reported by commercial HMOs ranged from 21% to 45%.
- A high percentage of adults received preventive/ambulatory health services in all the commercial HMOs-- 93% to 97% for elderly (65 years or older), 90% 94% for adults 54 to 64 years of age, and 87% 90% for adults 20 to 44 years of age.
- Two out of four plans were unable to report childhood immunization rates using methods that complied with NCQA's audit standards.
- Average maternity length of stay varied from 1.5 to 2 days among plans; that result is comparable to stays for all deliv-eries in Utah.
- © The percentage of infants who did not receive well child visits in the first 15 months of life ranged from 5% to 31% among Medicaid HMOs.

Cervical Cancer Screening

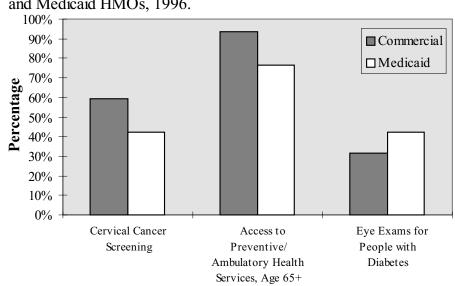
Plan level comparisons among Utah commercial HMOs*, 1996.



- *These results apply only to HMO plans offered by these organizations.
- **FHP/PacificCare withdrew from the audit and public reporting process for the 1996 reporting year.

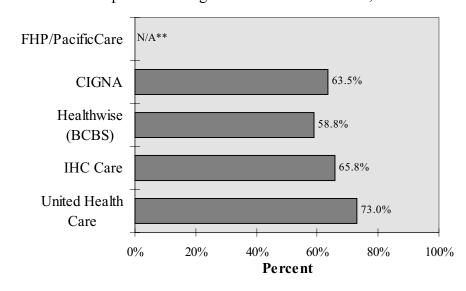
Preventive Health Care

Proportion of members receiving selected services in Utah commercial and Medicaid HMOs, 1996.



Breast Cancer Screening

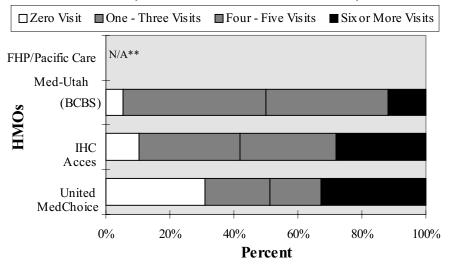
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Well Child Care

Percentages of children according to number of well child visits during first 15 months of life, Utah Medicaid-contracted HMOs*, 1996.



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What's Next:

This year's pilot project has provided useful information on overall quality of health plan data and on comparative measures of health plan performance. This HEDIS audit project was intended to contribute to consumer awareness and to assist health plans in their efforts to improve service and care. A complete report of plan level, comparative results will be released in December 1997. Based on 1996 audit findings, the Utah Health Data Committee hopes that the performance measurement project will expand to cover other managed care plans in Utah.

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Prepared in cooperation with the Utah Health Data Committee

The data for this update came from the recent report, *Utah HMO Performance Report*. The complete report is available on the Internet at http://hlunix.hl.state.ut.us/hda and copies can be obtained from the Office of Health Data Analysis, Utah Department of Health, 288 North 1460 West, P O Box 142854, Salt Lake City, Utah 84114-2854, (801) 538-7048, FAX (801) 538-9916, or email: hlhda.dlove@state.ut.us.



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