



Healthcare Effectiveness Data and Information Set (HEDIS®)

Measurement Year 2024 / Reporting Year 2025

**NCQA HealthPlan Accreditation (HPA) Summary of
Performance**

Partnership – HPA Star Rating

August 2025



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1.0 Introduction

As a Medi-Cal Managed Care Plan, Partnership provides health care coverage for 24 counties in Northern California – the largest geographic footprint of any Medi-Cal Managed Care Plan in California. The health plan covers over 900,000 members who qualify for coverage based on low household income, and who make up a substantial portion of Northern California’s total population. The annual measure performance analysis contained in this Annual Summary of Performance, centered on Healthcare Effectiveness Data and Information Set (HEDIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) measures selected by the National Committee for Quality Assurance (NCQA), supports Partnership’s Health Plan Accreditation and is intended to give the best possible understanding of the status of quality outcomes for the low-income population served in these counties.

Partnership generates a detailed Annual Summary of Performance and distributes it widely so that stakeholders in Northern California – local governments, county public health, medical and behavioral health providers, hospitals, and community foundations - can use current, local, accurate, and audited data to prioritize activities to meet the health care needs of their communities. The Summary of Performance contains regional and county-level data that show local strengths and opportunities for preventative health care, based on national benchmarks. Behind each measure are many community members who were able to access the preventative services they needed to stay healthy, or who faced challenges or struggles to receive care.

In the end, it takes the entire health care delivery system working together to improve the health outcomes contained in this report. Partnership encourages everyone reading this report to review their local data closely, and look for a handful of ways their organization, alone or with others, can drive improvement on one or more measure that is important to them.

Partnership is always happy to connect organizations and community members within our network to resources and activities to help our members, and the communities we serve, be healthy. Please reach out to our Performance Improvement team at ImprovementAcademy@partnershiphp.org if you would like to learn more about activities in your area.

Thank you for your dedication to improving the health of our communities.



2.0 Notable Changes to the MY2024 Annual Summary of Performance Report

MY2024 continued to host two required separate audits:

- DHCS / MCAS required reporting: Health Service Advisory Group (HSAG) Auditor
- NCQA HEDIS Health Plan Accreditation / HPA: Advent Advisory Auditor (this report’s focus)

Partnership HEDIS Reporting Populations – MY2024

In MY2024, Partnership observed an increase in overall membership by approximately 36.7%, to 906,964 assigned members in December 2024. The changes in membership reflect the addition of 10 new counties to the Partnership network, as well as the departure of members assigned to Kaiser sites, who moved to Kaiser as their Medi-Cal Managed Care Plan.

- Incoming counties added approximately 316,000 members to Partnership.
- Approximately 82,000 members assigned to Kaiser departed from Partnership. The decrease in membership primarily impacted Solano, Sonoma, Napa and Yolo Counties.

	Dec 2023	Dec 2024
Total Membership	663,919	906,964
10 Incoming Counties	0	316,096
New membership	0	316,096
14 Legacy Counties	663,919	590,868
Kaiser assigned Partnership members	82,033	0
Non-Kaiser membership	581,886	590,868

The addition of 10 incoming counties to Partnership’s network changes Partnership’s HEDIS Reporting Populations for NCQA’s Health Plan Accreditation (HPA). Starting in MY2024, Partnership reported one Plan-Wide rate for all 24 counties in its network for the HPA measure set to its NCQA auditor, Advent Advisory.

Changes to NCQA HEDIS Measures – MY2024

NCQA released changes to several existing clinical measures used in NCQA HPA for MY2024:

Clinical Measure Changes for MY2024 HPA Required Reporting:

- New Measures:
 - Colorectal Cancer Screening (COL-E) is a new HPA measure
 - Language Diversity of Membership (LDM) is a new HPA measure
- Changed Measures:
 - The former Hemoglobin A1c (HbA1c) Control for Patients with Diabetes (HBD) measure was revised to Glycemic Status Assessment for Patients with Diabetes (GSD).

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- Metabolic Monitoring for Children and Adolescents on Antipsychotics – Blood Glucose and Cholesterol Testing (APM-E) is now an Electronic Clinical Data Systems (ECDS) measure.
- Follow-Up Care for Children Prescribed ADHD Medication – Continuation & Maintenance Phase (ADD-E) is now an Electronic Clinical Data Systems (ECDS) measure.
- **Removed Clinical Measures:**
 - Follow-up After Hospitalization for Mental Illness, 7 Days (FUH) was approved by the Advent Advisory auditor for removal from the HPA measure set as Not a Benefit, since psychiatric hospitalizations are not a Partnership benefit.

Partnership successfully launched our HEDIS® MY2024/RV2025 data collection and reporting audits incorporating all changes as noted above.

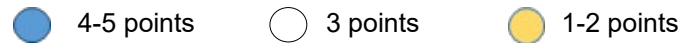
In July 2021, NCQA released the HealthPlan Rating Methodology: (Plan-wide):

As an NCQA Accredited plan, Partnership was required to report HEDIS and CAHPS annually, starting June 2022, for measurement year 2021 (MY2021). The overall Health Plan Rating (HPR) is the weighted average of a plan's HEDIS and CAHPS measure ratings, plus bonus points for plans with current Accreditation status. In MY2024 Partnership chose to be formally scored utilizing the Child CAHPS results.

3.0 HPA Summary of Performance Plan-wide Relative to National All Lines of Business Benchmarks

3.1 HPA Plan-wide Performance Child CAHPS Results – Patient Experience:

This table shows the results of the MY2023 - MY2024 performance on the Patient Experience NCQA Accreditation measures relative to the MY2022 and MY2023 National All Lines of Business 10th, 33.33rd, 66.67th and 90th benchmarks and percentiles that are used for ratings, calculated as whole numbers on a 1–5 scale.



NCQA Accreditation Measures: Child CAHPS Survey Results MY2023-MY2024

NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Patient Experience						
Getting Care						
MY 2023	***Getting Needed Care (Usually + Always)	77.06%	74.98%	79.83%	83.11%	86.50%
MY 2024		77.87%	76.79%	81.10%	85.70%	89.41%
MY 2023	Getting Care Quickly (Usually + Always)	78.92%	73.36%	77.73%	83.78%	86.94%
MY 2024		80.04%	78.92%	84.62%	89.35%	92.10%
Satisfaction with Plan Physicians						
MY 2023	Rating of Personal Doctor (9+10)	75.51%	61.79%	65.38%	70.59%	74.03%
MY 2024		78.64%	70.66%	74.42%	78.53%	82.63%
Satisfaction with Health Plan Services						
MY 2023	Rating of All Health Care (9+10)	68.13%	48.00%	53.48%	58.27%	62.50%
MY 2024		66.40%	62.29%	67.49%	71.90%	76.27%
MY 2023	***Rating of Health Plan (9+10)	58.89%	52.72%	59.30%	64.02%	68.70%
MY 2024		72.87%	64.03%	69.01%	73.76%	78.19%

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

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3.2 HPA Plan-wide Performance Adult CAHPS Results – Patient Experience:

This table shows the results of the MY2023 - MY2024 baseline performance on the Patient Experience NCQA Accreditation measures relative to the MY2022 and MY2023 National All Lines of Business 10th, 33.33rd, 66.67th and 90th benchmarks and percentiles that are used for ratings, calculated as whole numbers on a 1–5 scale.

● 4-5 points
 ○ 3 points
 ● 1-2 points

NCQA Accreditation Measures: Adult CAHPS Survey Results MY2023-MY2024

NCQA Accreditation Measures - Planwide Performance w/Adults CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Patient Experience						
Getting Care						
MY 2023	***Getting Needed Care (Usually + Always)	73.98%	74.98%	79.83%	83.11%	86.50%
MY 2024		74.54%	75.52%	79.75%	83.73%	86.12%
MY 2023	Getting Care Quickly (Usually + Always)	68.09%	73.36%	77.73%	83.78%	86.94%
MY 2024		74.02%	73.26%	78.80%	82.98%	86.40%
Satisfaction with Plan Physicians						
MY 2023	Rating of Personal Doctor (9+10)	70.00%	61.79%	65.38%	70.59%	74.03%
MY 2024		65.75%	63.01%	67.32%	71.05%	74.42%
Satisfaction with Health Plan Services						
MY 2023	Rating of All Health Care (9+10)	54.49%	48.00%	53.48%	58.27%	62.50%
MY 2024		54.43%	50.00%	55.07%	59.47%	63.36%
MY 2023	***Rating of Health Plan (9+10)	46.62%	52.72%	59.30%	64.02%	68.70%
MY 2024		55.76%	53.41%	59.44%	64.05%	68.54%

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

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3.3 HPA HEDIS Plan-wide Performance – Prevention and Population

This table shows the MY2023 – MY2024 baseline performance on the **Prevention and Population** NCQA Accreditation measures relative to the MY2022 and MY2023 National All Lines of Business 10th, 33.33rd, 66.67th and 90th measure benchmarks and percentiles that are used for ratings, calculated as whole numbers on a 1–5 scale.

- 4-5 points
- 3 points
- 1-2 points
- Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures)

NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Prevention and Population						
Children and Adolescent Well-Care						
MY 2023	***CIS - Childhood Immunization Status	29.68%	20.68%	26.76%	35.04%	45.26%
MY 2024	(Combination 10)	28.22%	18.25%	24.39%	31.32%	42.34%
MY 2023	***IMA - Immunizations for Adolescents	43.07%	24.82%	30.66%	38.93%	48.80%
MY 2024	(Combination 2)	39.66%	25.41%	31.39%	38.69%	48.66%
MY 2023	WCC - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	85.99%	62.77%	74.70%	83.21%	89.72%
MY 2024		76.16%	66.91%	76.89%	86.20%	91.24%
Women's Reproductive Health						
MY 2023	***PPC - Prenatal and Postpartum Care—Timeliness of Prenatal Care	90.34%	73.48%	81.75%	86.86%	91.07%
MY 2024		84.43%	73.48%	81.94%	86.89%	91.85%
MY 2023	***PPC - Prenatal and Postpartum Care—Postpartum Care	86.96%	67.31%	75.18%	80.78%	84.59%
MY 2024		88.81%	68.63%	77.37%	82.48%	86.62%
MY 2023	PRS-E - Prenatal Immunization Status - Combination Rate	35.40%	7.94%	15.17%	25.81%	37.75%
MY 2024		29.36%	8.42%	15.96%	24.92%	35.60%
Cancer Screening						
MY 2023	BCS-E - Breast Cancer Screening	55.52%	42.98%	48.33%	54.94%	62.67%
MY 2024		56.29%	42.86%	49.24%	56.66%	63.48%
MY 2023	CCS - Cervical Cancer Screening	58.04%	43.50%	53.37%	59.85%	66.48%
MY 2024		58.64%	43.31%	52.07%	60.10%	67.46%
MY 2023	COL-E - Colorectal Cancer Screening	NR	NR	NR	NR	NR
MY 2024		32.99%	27.27%	34.30%	41.59%	49.35%
Description of Membership						
MY 2023	RDM - Race/Ethnicity Diversity of Membership (Reporting Only)	100.00%	63.20%	95.91%	100.00%	100.00%
MY 2024		100.00%	100.00%	100.00%	100.00%	100.00%
MY 2023	LDM - Language Diversity of Membership	NR	NR	NR	NR	NR
MY 2024		100.00%	0.00%	0.00%	13.07%	100.00%

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NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Prevention and Population						
Other Preventive Services						
MY 2023	CHL - Chlamydia Screening in Women—Total	56.00%	42.61%	51.39%	61.07%	67.39%
MY 2024		55.58%	43.53%	52.40%	61.46%	69.07%
MY 2023	AIS-E - Adult Immunization Status -- Influenza	17.61%	6.50%	10.82%	16.32%	21.05%
MY 2024	Immunizations for Adults	14.33%	7.39%	12.55%	17.91%	26.40%
MY 2023	AIS-E - Adult Immunization	49.15%	N/A	N/A	N/A	N/A
MY 2024	Status—Pneumococcal	44.03%	21.04%	38.73%	55.03%	68.07%
MY 2023	AIS-E - Adult Immunization Status—Td/Tdap	36.43%	18.67%	29.84%	41.54%	56.53%
MY 2024	Immunizations for Adults	32.96%	21.26%	33.40%	47.30%	57.67%
MY 2023	AIS-E - Adult Immunization Status—Zoster	14.63%	1.72%	4.42%	10.27%	14.54%
MY 2024	Immunizations for Adults	14.47%	2.23%	7.15%	13.49%	20.56%

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
• RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

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3.4 HPA HEDIS Plan-wide Performance – Treatment: Respiratory, Diabetes, Heart Disease

This table shows the MY2024 baseline performance on the **Treatment** NCQA Accreditation measures relative to the MY2022 and MY2023 National All Lines of Business 10th, 33.33rd, 66.67th and 90th measure benchmarks and percentiles that are used for whole numbers on a 1–5 scale.

● 4-5 points ○ 3 points ● 1-2 points

NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Treatment						
Respiratory						
MY 2023	AMR - Asthma Medication Ratio- Total	64.01%	55.09%	61.81%	69.41%	75.92%
MY 2024		64.71%	54.56%	62.35%	70.56%	76.65%
MY 2023	CWP - Appropriate Testing for Pharyngitis—Total	71.45%	57.41%	68.76%	77.56%	82.40%
MY 2024		70.27%	61.35%	76.71%	85.11%	89.17%
MY 2023	**AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	74.30%	50.05%	57.16%	66.19%	77.11%
MY 2024		56.00%	49.48%	56.76%	67.03%	77.66%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	73.71%	56.05%	68.39%	75.79%	82.43%
MY 2024		70.93%	55.28%	66.86%	74.78%	82.88%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	88.15%	72.88%	82.35%	86.96%	90.53%
MY 2024		86.18%	67.25%	80.19%	86.54%	89.96%
Diabetes						
MY 2023	EED - Eye Exams for Patients with Diabetes	52.59%	36.74%	46.96%	56.20%	63.33%
MY 2024		52.31%	40.39%	49.15%	57.09%	64.06%
MY 2023	BPD -Blood Pressure Control (<140/90) for Patients with Diabetes	67.50%	52.07%	59.85%	68.61%	74.56%
MY 2024		70.56%	58.15%	65.32%	71.78%	77.37%
MY 2023	HBD -Hemoglobin A1c Control for Patients with Diabetes-- HbA1c Control (<8%)	54.81%	38.93%	49.39%	55.72%	60.34%
MY 2024		GSD -Glycemic Status Assessment for Patients with Diabetes-- HbA1c Control (<8%)	54.26%	44.25%	54.50%	59.64%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Received Statin Therapy	63.12%	54.15%	62.58%	67.07%	72.15%
MY 2024		64.93%	51.96%	62.66%	67.01%	71.41%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Statin Adherence 80%	94.76%	52.67%	62.50%	70.37%	77.97%
MY 2024		67.90%	53.23%	64.18%	70.91%	79.73%
MY 2023	KED - Kidney Health Evaluation for Patients with Diabetes	42.13%	22.73%	29.42%	38.80%	47.55%
MY 2024		40.88%	26.79%	33.00%	42.10%	49.72%

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NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Treatment						
Heart Disease						
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	81.90%	70.02%	78.80%	81.64%	85.04%
MY 2024		81.06%	66.64%	79.82%	83.00%	85.89%
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	95.45%	56.67%	66.48%	73.63%	80.95%
MY 2024		70.33%	59.20%	66.84%	73.75%	81.25%
MY 2023	***CBP - Controlling High Blood Pressure	70.57%	50.36%	57.66%	65.45%	72.22%
MY 2024		61.80%	54.61%	61.43%	67.40%	72.75%

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

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3.5 HPA HEDIS Plan-wide Performance – Behavioral Health

This table shows the MY2024 baseline performance on the **Behavioral Health** NCQA Accreditation measures relative to the MY2022 and MY2023 National All Lines of Business 10th, 33.33rd, 66.67th and 90th measure benchmarks and percentiles that are used for ratings, calculated as whole numbers on a 1–5 scale.

● 4-5 points ○ 3 points ● 1-2 points ○ Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures).

NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Treatment						
Behavioral Health--Care Coordination						
MY 2023	FUH - Follow-Up After Hospitalization for	29.05%	21.77%	31.23%	41.03%	52.90%
MY 2024	Mental Illness-7 days	NB	23.55%	32.71%	42.86%	57.69%
MY 2023	FUM - Follow-Up After Emergency Department	18.92%	23.74%	33.61%	46.35%	61.68%
MY 2024	Visit for Mental Illness 7 days total	13.39%	21.19%	33.01%	44.33%	59.95%
MY 2023	FUA - Follow-Up After Emergency Department	22.68%	13.83%	20.00%	27.73%	38.15%
MY 2024	Visit for Alcohol and Other Drug Abuse or Dependence—7 days—Total	22.88%	12.73%	18.76%	27.62%	37.47%
MY 2023	FUI - Follow-Up After High-Intensity Care for	32.29%	15.16%	23.12%	37.31%	49.55%
MY 2024	Substance Use Disorder—7 days—Total	29.83%	15.91%	26.90%	37.64%	50.80%
Behavioral Health--Medication Adherence						
MY 2023	AMM - Antidepressant Medication Management—Effective Continuation Phase	81.49%	31.59%	40.01%	46.74%	58.06%
MY 2024	Treatment	48.04%	31.52%	41.00%	48.16%	61.06%
MY 2023	POD - Pharmacotherapy for Opioid Use	41.53%	14.94%	23.38%	31.93%	40.34%
MY 2024	Disorder—Total	15.84%	12.05%	21.36%	29.01%	36.71%
MY 2023	SAA - Adherence to Antipsychotic Medications	73.46%	41.24%	57.79%	64.90%	72.61%
MY 2024	for Individuals With Schizophrenia	68.58%	44.65%	58.60%	66.15%	74.83%

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NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Treatment						
Behavioral Health-- Access, Monitoring and Safety						
MY 2023	APM - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total	32.80%	26.36%	31.97%	40.50%	53.58%
MY 2024	APM-E - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total (ECDS)	32.18%	25.86%	30.92%	41.41%	52.57%
MY 2023	ADD -Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase	31.45%	40.38%	50.98%	57.90%	63.92%
MY 2024	ADD-E -Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase (ECDS)	40.36%	37.19%	48.94%	56.83%	63.49%
MY 2023	SSD - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	81.90%	72.83%	77.40%	80.86%	85.52%
MY 2024		83.85%	75.46%	79.51%	83.51%	87.27%
MY 2023	APP - Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	25.95%	36.65%	55.19%	63.89%	73.87%
MY 2024		41.38%	41.57%	54.55%	64.10%	74.14%
MY 2023	IET - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment—Engagement - Total	8.50%	7.05%	11.11%	16.94%	24.37%
MY 2024		7.63%	6.08%	10.51%	16.78%	26.72%

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

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3.6 HPA HEDIS Plan-wide Performance – Risk Adjusted / Other

This table shows the MY2024 baseline performance on the **Risk Adjusted / Other** NCQA Accreditation measures relative to the MY2022 and MY2023 National All Lines of Business 10th, 33.33rd, 66.67th and 90th measure benchmarks and percentiles that are used for ratings, calculated as whole numbers on a 1–5 scale.

● 4-5 points ○ 3 points ● 1-2 points ○ Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures).

NCQA Accreditation Measures - Planwide Performance w/Child CAHPS Survey Results						
Year	Measure	Plan-level Performance	National Medicaid Benchmarks			
			10th	33.33rd	66.67th	90th
Risk-Adjusted Utilization						
MY 2023	PCR - Plan All-Cause Readmission - Observed to	0.8951	No Bench Marks Use for Scoring			
MY 2024	- Expected Ratio (18-64 years)	0.9944				
Other Treatment Measure						
MY 2023	**LBP - Use of Imaging Studies for Low Back	76.71%	67.72%	71.32%	75.44%	79.96%
MY 2024	Pain	73.67%	64.77%	67.84%	72.74%	78.72%

Note: PCR calculations are based on the scoring algorithm for risk-adjusted utilization measures as defined by NCQA. NCQA calculates the Confidence Limits (CLs) for all health plans.

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

4.0 MY 2024 HPA HEDIS Rate Performance by County

The following tables show MY2024 county-level performance on HPA HEDIS measures in Partnership's six (6) Regions. For the fourteen (14) legacy counties in Partnership's Eureka, Fairfield, Redding and Santa Rosa Regions, MY2023 county-level performance is also included, showing year-over-year performance trends by county.

HPA measures not included in the county-level performance tables are:

- CAHPS Measures, which only have plan-wide rates;
- Description of Membership measures, which only have plan-wide rates

All tables show the MY2024 baseline performance on NCQA Accreditation measures relative to the MY2022 and MY2023 National All Lines of Business 10th, 33.33rd, 66.67th and 90th measure benchmarks and percentiles that are used for ratings, calculated as whole numbers on a 1–5 scale.

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4.1 HPA HEDIS Rate Performance by County, Auburn Region: Nevada, Placer, Plumas, Sierra Counties

● 4-5 points
 ○ 3 points
 ● 1-2 points
 ○ Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures).

Year	Measure	County Performance				National Medicaid Benchmarks			
		Nevada	Placer	Plumas	Sierra	10th	33.33rd	66.67th	90th
Prevention and Population									
Children and Adolescent Well-Care									
MY 2024	***CIS - Childhood Immunization Status (Combination 10)	100.00%	0.00%	0.00%	0.00%	18.25%	24.39%	31.32%	42.34%
MY 2024	***IMA - Immunizations for Adolescents (Combination 2)	0.00%	12.50%	0.00%	0.00%	25.41%	31.39%	38.69%	48.66%
MY 2024	WCC - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	73.33%	90.48%	0.00%	0.00%	66.91%	76.89%	86.20%	91.24%
Women's Reproductive Health									
MY 2024	***PPC - Prenatal and Postpartum Care—Timeliness of Prenatal Care	100.00%	75.00%	100.00%	73.33%	73.48%	81.94%	86.89%	91.85%
MY 2024	***PPC - Prenatal and Postpartum Care—Postpartum Care	100.00%	83.33%	100.00%	86.67%	68.63%	77.37%	82.48%	86.62%
MY 2024	PRS-E - Prenatal Immunization Status - Combination Rate	11.28%	21.29%	31.11%	25.00%	8.42%	15.96%	24.92%	35.60%
Cancer Screening									
MY 2024	BCS-E- Breast Cancer Screening	66.67%	0.00%	0.00%	0.00%	42.86%	49.24%	56.66%	63.48%
MY 2024	CCS - Cervical Cancer Screening	62.50%	50.00%	33.33%	50.00%	43.31%	52.07%	60.10%	67.46%
MY 2024	COL-E - Colorectal Cancer Screening	18.18%	0.00%	33.33%	0.00%	27.27%	34.30%	41.59%	49.35%
Other Preventive Services									
MY 2024	CHL - Chlamydia Screening in Women—Total	48.06%	60.67%	23.26%	27.27%	43.53%	52.40%	61.46%	69.07%
MY 2024	AIS-E-Adult Immunization Status—Influenza - Total	8.48%	11.84%	10.38%	12.12%	7.39%	12.55%	17.91%	26.40%
MY 2024	AIS-E-Adult Immunization Status—Pneumococcal - 66+	35.21%	30.02%	31.25%	0.00%	21.04%	38.73%	55.03%	68.07%
MY 2024	AIS-E-Adult Immunization Status—Td/Tdap - Total	26.37%	24.48%	30.03%	37.12%	21.26%	33.40%	47.30%	57.67%
MY 2024	AIS-E-Adult Immunization Status—Zoster - Total	13.02%	14.60%	6.87%	8.60%	2.23%	7.15%	13.49%	20.56%

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Year	Measure	County Performance				National Medicaid Benchmarks			
		Nevada	Placer	Plumas	Sierra	10th	33.33rd	66.67th	90th
Treatment									
Respiratory									
MY 2024	AMR - Asthma Medication Ratio- Total	0.00%	0.00%	100.00%	0.00%	54.56%	62.35%	70.56%	76.65%
MY 2024	CWP - Appropriate Testing for Pharyngitis—Total	77.18%	72.08%	80.74%	100.00%	61.35%	76.71%	85.11%	89.17%
MY 2024	**AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	76.67%	65.22%	57.69%	0.00%	49.48%	50.98%	67.03%	77.66%
MY 2024	PCE - Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	81.25%	62.00%	87.50%	100.00%	55.28%	66.86%	74.78%	82.88%
MY 2024	PCE - Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	75.00%	82.00%	87.50%	0.00%	67.25%	80.19%	86.54%	89.96%
Diabetes									
MY 2024	EED - Eye Exams for Patients with Diabetes	20.00%	44.44%	0.00%	0.00%	40.39%	49.15%	57.09%	64.06%
MY 2024	BPD -Blood Pressure Control (<140/90) for Patients with Diabetes	70.00%	72.22%	0.00%	0.00%	58.15%	65.32%	71.78%	77.37%
MY 2024	GSD -Glycemic Status Assessment for Patients with Diabetes-- HbA1c Control (<8%)	50.00%	44.44%	0.00%	0.00%	44.25%	54.50%	59.64%	63.50%
MY 2024	SPD - Statin Therapy for Patients With Diabetes—Received Statin Therapy	100.00%	0.00%	50.00%	0.00%	51.96%	62.66%	67.01%	71.41%
MY 2024	SPD - Statin Therapy for Patients With Diabetes—Statin Adherence 80%	0.00%	0.00%	100.00%	0.00%	53.23%	64.18%	70.91%	79.73%
MY 2024	KED - Kidney Health Evaluation for Patients with Diabetes	45.34%	49.73%	14.62%	0.00%	26.79%	33.00%	42.10%	49.72%
Heart Disease									
MY 2024	SPC - Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	100.00%	0.00%	0.00%	0.00%	66.64%	79.82%	83.00%	85.89%
MY 2024	SPC - Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	100.00%	0.00%	0.00%	0.00%	59.95%	67.42%	74.07%	81.79%
MY 2024	***CBP - Controlling High Blood Pressure	71.43%	50.00%	0.00%	0.00%	54.61%	61.43%	67.40%	72.75%

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Year	Measure	County Performance				National Medicaid Benchmarks			
		Nevada	Placer	Plumas	Sierra	10th	33.33rd	66.67th	90th
Treatment									
Behavioral Health - Care Coordination									
MY 2024	FUH - Follow-Up After Hospitalization for Mental Illness-7 days	NB	NB	NB	NB	23.74%	33.61%	46.35%	61.68%
MY 2024	FUM - Follow-UP After Emergency Department Visit for Mental Illness 7 days total	17.58%	9.04%	10.71%	0.00%	21.19%	33.01%	44.33%	59.95%
MY 2024	FUA - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence—7 days—Total	22.25%	22.72%	17.31%	87.50%	12.73%	18.76%	27.62%	37.47%
MY 2024	FUI - Follow-Up After High-Intensity Care for Substance Use Disorder—7 days—Total	13.46%	12.05%	33.33%	50.00%	15.91%	26.90%	37.64%	50.80%
Behavioral Health - Medication Adherence									
MY 2024	AMM - Antidepressant Medication Management—Effective Continuation Phase Treatment	38.71%	46.34%	0.00%	100.00%	31.52%	41.00%	48.16%	61.06%
MY 2024	POD - Pharmacotherapy for Opioid Use Disorder—Total	9.76%	12.50%	0.00%	0.00%	12.05%	21.36%	29.01%	36.71%
MY 2024	SAA - Adherence to Antipsychotic Medications for Individuals With Schizophrenia	65.45%	79.66%	72.73%	100.00%	44.65%	58.60%	66.15%	74.83%

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Behavioral Health - Access, Monitoring and Safety									
MY 2024	APM - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total	39.29%	35.92%	38.46%	0.00%	25.86%	30.92%	41.41%	52.57%
MY 2024	ADD -Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase	0.00%	0.00%	0.00%	0.00%	37.19%	48.94%	56.83%	63.49%
MY 2024	SSD - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	85.08%	85.07%	89.29%	80.00%	75.46%	79.51%	83.51%	87.27%
MY 2024	APP - Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	80.00%	6.25%	0.00%	0.00%	41.57%	54.55%	64.10%	74.14%
MY 2024	IET - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment—Engagement - Total	3.82%	5.83%	3.08%	14.29%	6.08%	10.51%	16.78%	26.72%
Risk-Adjusted Utilization									
MY 2024	PCR - Plan All-Cause Readmission - Observed to - Expected Ratio (18-64 years)	2.0801	1.7290	0.0000	12.8852	No Bench Marks Use For Scoring			
Other Treatment Measures									
MY 2024	**LBP - Use of Imaging Studies for Low Back Pain	70.18%	71.43%	79.17%	40.00%	64.77%	67.84%	72.74%	78.72%

Note: PCR calculations are based on the scoring algorithm for risk-adjusted utilization measures as defined by NCQA. NCQA calculates the Confidence Limits (CLs) for all health plans.

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

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4.2 HPA HEDIS Rate Performance by County, Chico Region: Butte, Colusa, Glenn, Sutter, Yuba Counties

● 4-5 points
 ○ 3 points
 ● 1-2 points
 ○ Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures).

Year	Measure	County Performance					National Medicaid Benchmarks			
		Butte	Colusa	Glenn	Sutter	Yuba	10th	33.33rd	66.67th	90th
Prevention and Population										
Children and Adolescent Well-Care										
MY 2024	***CIS - Childhood Immunization Status (Combination 10)	0.00%	0.00%	0.00%	0.00%	0.00%	18.25%	24.39%	31.32%	42.34%
MY 2024	***IMA - Immunizations for Adolescents (Combination 2)	0.00%	0.00%	100.00%	40.00%	37.50%	25.41%	31.39%	38.69%	48.66%
MY 2024	WCC - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	64.52%	100.00%	77.78%	63.33%	58.82%	66.91%	76.89%	86.20%	91.24%
Women's Reproductive Health										
MY 2024	***PPC - Prenatal and Postpartum Care—Timeliness of Prenatal Care	93.33%	33.33%	83.33%	92.00%	90.00%	73.48%	81.94%	86.89%	91.85%
MY 2024	***PPC - Prenatal and Postpartum Care—Postpartum Care	96.67%	100.00%	100.00%	88.00%	80.00%	68.63%	77.37%	82.48%	86.62%
MY 2024	PRS-E - Prenatal Immunization Status - Combination Rate	19.02%	24.19%	25.82%	18.15%	17.99%	8.42%	15.96%	24.92%	35.60%
Cancer Screening										
MY 2024	BCS-E- Breast Cancer Screening	26.32%	20.00%	0.00%	0.00%	100.00%	42.86%	49.24%	56.66%	63.48%
MY 2024	CCS - Cervical Cancer Screening	53.19%	75.00%	30.00%	55.56%	60.00%	43.31%	52.07%	60.10%	67.46%
MY 2024	COL-E - Colorectal Cancer Screening	26.67%	20.00%	25.00%	50.00%	50.00%	27.27%	34.30%	41.59%	49.35%
Other Preventive Services										
MY 2024	CHL - Chlamydia Screening in Women—Total	55.64%	53.02%	51.47%	57.24%	57.89%	43.53%	52.40%	61.46%	69.07%
MY 2024	AIS-E-Adult Immunization Status—Influenza - Total	11.00%	17.54%	13.04%	12.57%	9.16%	7.39%	12.55%	17.91%	26.40%
MY 2024	AIS-E-Adult Immunization Status—Pneumococcal - 66+	39.50%	43.21%	32.31%	51.35%	36.51%	21.04%	38.73%	55.03%	68.07%
MY 2024	AIS-E-Adult Immunization Status—Td/Tdap - Total	28.86%	30.82%	32.27%	30.26%	27.31%	21.26%	33.40%	47.30%	57.67%
MY 2024	AIS-E-Adult Immunization Status—Zoster - Total	13.42%	15.10%	17.50%	14.44%	9.08%	2.23%	7.15%	13.49%	20.56%

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Year	Measure	County Performance					National Medicaid Benchmarks			
		Butte	Colusa	Glenn	Sutter	Yuba	10th	33.33rd	66.67th	90th
Treatment										
Respiratory										
MY 2024	AMR - Asthma Medication Ratio- Total	66.67%	0.00%	100.00%	0.00%	0.00%	54.56%	62.35%	70.56%	76.65%
MY 2024	CWP - Appropriate Testing for Pharyngitis—Total	61.62%	46.31%	37.55%	38.27%	44.70%	61.35%	76.71%	85.11%	89.17%
MY 2024	**AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	20.23%	46.67%	24.29%	42.38%	31.59%	49.48%	50.98%	67.03%	77.66%
MY 2024	PCE - Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	71.58%	62.50%	75.00%	79.69%	55.00%	55.28%	66.86%	74.78%	82.88%
MY 2024	PCE - Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	83.68%	62.50%	93.75%	95.31%	84.00%	67.25%	80.19%	86.54%	89.96%
Diabetes										
MY 2024	EED - Eye Exams for Patients with Diabetes	59.09%	100.00%	60.00%	39.13%	52.94%	40.39%	49.15%	57.09%	64.06%
MY 2024	BPD -Blood Pressure Control (<140/90) for Patients with Diabetes	79.55%	100.00%	60.00%	65.22%	70.59%	58.15%	65.32%	71.78%	77.37%
MY 2024	GSD -Glycemic Status Assessment for Patients with Diabetes-- HbA1c Control (<8%)	68.18%	50.00%	60.00%	56.52%	52.94%	44.25%	54.50%	59.64%	63.50%
MY 2024	SPD - Statin Therapy for Patients With Diabetes—Received Statin Therapy	63.64%	75.00%	50.00%	0.00%	0.00%	51.96%	62.66%	67.01%	71.41%
MY 2024	SPD - Statin Therapy for Patients With Diabetes—Statin Adherence 80%	57.14%	0.00%	100.00%	0.00%	0.00%	53.23%	64.18%	70.91%	79.73%
MY 2024	KED - Kidney Health Evaluation for Patients with Diabetes	33.96%	37.39%	28.71%	32.35%	29.28%	26.79%	33.00%	42.10%	49.72%
Heart Disease										
MY 2024	SPC - Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	100.00%	100.00%	100.00%	0.00%	0.00%	66.64%	79.82%	83.00%	85.89%
MY 2024	SPC - Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	100.00%	100.00%	100.00%	0.00%	0.00%	59.95%	67.42%	74.07%	81.79%
MY 2024	***CBP - Controlling High Blood Pressure	72.00%	75.00%	66.67%	61.11%	37.50%	54.61%	61.43%	67.40%	72.75%

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Year	Measure	County Performance					National Medicaid Benchmarks			
		Butte	Colusa	Glenn	Sutter	Yuba	10th	33.33rd	66.67th	90th
Treatment										
Behavioral Health - Care Coordination										
MY 2024	FUH - Follow-Up After Hospitalization for Mental Illness-7 days	NB	NB	NB	NB	NB	23.74%	33.61%	46.35%	61.68%
MY 2024	FUM - Follow-UP After Emergency Department Visit for Mental Illness 7 days total	10.45%	22.22%	10.71%	12.32%	10.11%	21.19%	33.01%	44.33%	59.95%
MY 2024	FUA - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence—7 days—Total	26.69%	15.38%	28.26%	23.38%	22.71%	12.73%	18.76%	27.62%	37.47%
MY 2024	FUI - Follow-Up After High-Intensity Care for Substance Use Disorder—7 days—Total	15.91%	30.00%	33.33%	17.65%	16.67%	15.91%	26.90%	37.64%	50.80%
Behavioral Health - Medication Adherence										
MY 2024	AMM - Antidepressant Medication Management—Effective Continuation Phase Treatment	43.28%	28.57%	66.67%	36.84%	35.00%	31.52%	41.00%	48.16%	61.06%
MY 2024	POD - Pharmacotherapy for Opioid Use Disorder—Total	14.88%	0.00%	28.57%	25.00%	11.63%	12.05%	21.36%	29.01%	36.71%
MY 2024	SAA - Adherence to Antipsychotic Medications for Individuals With Schizophrenia	67.83%	83.33%	87.50%	86.96%	69.81%	44.65%	58.60%	66.15%	74.83%
Behavioral Health - Access, Monitoring and Safety										
MY 2024	APM - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total	35.56%	50.00%	25.81%	28.26%	34.44%	25.86%	30.92%	41.41%	52.57%
MY 2024	ADD -Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase	0.00%	0.00%	0.00%	0.00%	0.00%	37.19%	48.94%	56.83%	63.49%
MY 2024	SSD - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	86.90%	90.91%	86.36%	89.57%	85.26%	75.46%	79.51%	83.51%	87.27%
MY 2024	APP - Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	45.16%	100.00%	44.44%	33.33%	29.63%	41.57%	54.55%	64.10%	74.14%
MY 2024	IET - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment—Engagement - Total	4.59%	5.77%	3.28%	6.01%	5.12%	6.08%	10.51%	16.78%	26.72%

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Year	Measure	County Performance					National Medicaid Benchmarks			
		Butte	Colusa	Glenn	Sutter	Yuba	10th	33.33rd	66.67th	90th
		Treatment								
		Risk-Adjusted Utilization								
MY 2024	PCR - Plan All-Cause Readmission - Observed to - Expected Ratio (18-64 years)	2.6863	1.3132	0.0000	1.5553	2.337	No Bench Marks Use For Scoring			
		Other Treatment Measures								
MY 2024	**LBP - Use of Imaging Studies for Low Back Pain	72.62%	67.92%	75.58%	75.72%	77.56%	64.77%	67.84%	72.74%	78.72%

Note: PCR calculations are based on the scoring algorithm for risk-adjusted utilization measures as defined by NCQA. NCQA calculates the Confidence Limits (CLs) for all health plans.

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCOA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

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4.3 HPA HEDIS Rate Performance by County, Eureka Region: Del Norte, Humboldt, Lake, Mendocino Counties

● 4-5 points ○ 3 points ● 1-2 points ○ Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures). Denominators less than 20 at the county level are suppressed.

Year	Measure	County Performance				National Medicaid Benchmarks			
		Del Norte	Humboldt	Lake	Mendocino	10th	33.33rd	66.67th	90th
Prevention and Population									
Children and Adolescent Well-Care									
MY 2023	***CIS - Childhood Immunization Status (Combination 10)	10.00%	19.44%	18.75%	21.88%	20.68%	26.76%	35.04%	45.26%
MY 2024		0.00%	26.47%	26.09%	31.43%	18.25%	24.39%	31.32%	42.34%
MY 2023	***IMA - Immunizations for Adolescents (Combination 2)	50.00%	40.48%	28.57%	33.33%	24.82%	30.66%	38.93%	48.80%
MY 2024		16.67%	36.36%	50.00%	35.71%	25.41%	31.39%	38.69%	48.66%
MY 2023	WCC - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	100.00%	88.89%	92.86%	91.67%	62.77%	74.70%	83.21%	89.72%
MY 2024		85.71%	88.00%	100.00%	80.00%	66.91%	76.89%	86.20%	91.24%
Women's Reproductive Health									
MY 2023	***PPC - Prenatal and Postpartum Care—Timeliness of Prenatal Care	100.00%	80.00%	100.00%	92.31%	25.86%	30.92%	41.41%	52.57%
MY 2024		55.56%	76.00%	86.67%	90.91%	73.48%	81.94%	86.89%	91.85%
MY 2023	***PPC - Prenatal and Postpartum Care—Postpartum Care	100.00%	80.00%	85.71%	92.31%	67.31%	75.18%	80.78%	84.59%
MY 2024		44.44%	88.00%	93.33%	90.91%	68.63%	77.37%	82.48%	86.62%
MY 2023	PRS-E - Prenatal Immunization Status - Combination Rate	19.67%	19.46%	32.27%	38.89%	7.94%	15.17%	25.81%	37.75%
MY 2024		14.05%	20.24%	28.69%	37.32%	8.42%	15.96%	24.92%	35.60%
Cancer Screening									
MY 2023	BCS-E- Breast Cancer Screening	38.88%	47.35%	47.56%	50.43%	42.98%	48.33%	54.94%	62.67%
MY 2024		46.83%	51.35%	48.55%	56.75%	42.86%	49.24%	56.66%	63.48%
MY 2023	CCS - Cervical Cancer Screening	30.00%	48.78%	65.52%	66.67%	43.50%	53.37%	59.85%	66.48%
MY 2024		50.00%	75.00%	30.00%	50.00%	43.31%	52.07%	60.10%	67.46%
MY 2023	COL- Colorectal Cancer Screening	NR	NR	NR	NR	NR	NR	NR	NR
MY 2024	COL-E - Colorectal Cancer Screening	25.14%	28.05%	33.41%	31.50%	27.27%	34.30%	41.59%	49.35%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance				National Medicaid Benchmarks			
		Del Norte	Humboldt	Lake	Mendocino	10th	33.33rd	66.67th	90th
		Treatment							
		Respiratory							
MY 2023	AMR - Asthma Medication Ratio- Total	46.79%	60.64%	51.71%	60.71%	55.09%	61.81%	69.41%	75.92%
MY 2024		60.83%	63.41%	57.84%	62.50%	54.56%	62.35%	70.56%	76.65%
MY 2023	CWP - Appropriate Testing for Pharyngitis—Total	68.86%	72.81%	60.75%	69.21%	57.41%	68.76%	77.56%	82.40%
MY 2024		63.05%	78.86%	58.17%	80.02%	61.35%	76.71%	85.11%	89.17%
MY 2023	**AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	73.28%	71.76%	58.58%	68.16%	50.05%	57.16%	66.19%	77.11%
MY 2024		56.25%	56.86%	55.52%	62.08%	49.48%	50.98%	67.03%	77.66%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	75.76%	79.26%	75.20%	74.47%	56.05%	68.39%	75.79%	82.43%
MY 2024		62.75%	68.84%	74.82%	74.00%	55.28%	66.86%	74.78%	82.88%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	87.88%	88.89%	83.20%	87.94%	72.88%	82.35%	86.96%	90.53%
MY 2024		82.35%	84.06%	92.09%	88.00%	67.25%	80.19%	86.54%	89.96%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance				National Medicaid Benchmarks			
		Del Norte	Humboldt	Lake	Mendocino	10th	33.33rd	66.67th	90th
Treatment									
Diabetes									
MY 2023	EED - Eye Exams for Patients with Diabetes	22.22%	44.12%	56.52%	44.00%	36.74%	46.96%	56.20%	63.33%
MY 2024		0.00%	33.33%	50.00%	70.00%	40.39%	49.15%	57.09%	64.06%
MY 2023	BPD -Blood Pressure Control (<140/90) for Patients with Diabetes	75.00%	59.09%	68.00%	75.00%	52.07%	59.85%	68.61%	74.56%
MY 2024		66.67%	66.67%	92.86%	60.00%	58.15%	65.32%	71.78%	77.37%
MY 2023	HBD -Hemoglobin A1c Control for Patients with Diabetes-- HbA1c Control (<8%)	77.78%	55.88%	52.17%	44.00%	38.93%	49.39%	55.72%	60.34%
MY 2024		33.33%	59.26%	78.57%	60.00%	44.25%	54.50%	59.64%	63.50%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Received Statin Therapy	54.32%	54.86%	58.43%	53.94%	54.15%	62.58%	67.07%	72.15%
MY 2024		59.47%	59.20%	61.94%	55.91%	51.96%	62.66%	67.01%	71.41%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Statin Adherence 80%	95.45%	96.36%	92.39%	92.45%	52.67%	62.50%	70.37%	77.97%
MY 2024		73.25%	70.16%	61.03%	65.32%	53.23%	64.18%	70.91%	79.73%
MY 2023	KED - Kidney Health Evaluation for Patients with Diabetes	25.32%	31.69%	19.91%	19.26%	22.73%	29.42%	38.80%	47.55%
MY 2024		29.02%	37.62%	35.38%	31.95%	26.79%	33.00%	42.10%	49.72%
Heart Disease									
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	77.78%	83.72%	80.12%	83.33%	70.02%	78.80%	81.64%	85.04%
MY 2024		69.44%	75.83%	85.71%	77.78%	66.64%	79.82%	83.00%	85.89%
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	91.43%	95.37%	92.70%	96.25%	56.67%	66.48%	73.63%	80.95%
MY 2024		64.00%	74.73%	71.67%	61.04%	59.95%	67.42%	74.07%	81.79%
MY 2023	***CBP - Controlling High Blood Pressure	37.50%	78.13%	72.22%	74.07%	50.36%	57.66%	65.45%	72.22%
MY 2024		83.33%	48.00%	68.18%	78.95%	54.61%	61.43%	67.40%	72.75%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance				National Medicaid Benchmarks			
		Del Norte	Humboldt	Lake	Mendocino	10th	33.33rd	66.67th	90th
Treatment									
Behavioral Health - Care Coordination									
MY 2023	FUH ¹ - Follow-Up After Hospitalization for Mental Illness-7 days	0.00%	0.00%	0.00%	0.00%	23.74%	33.61%	46.35%	61.68%
MY 2024		NB	NB	NB	NB	23.74%	33.61%	46.35%	61.68%
MY 2023	FUM - Follow-UP After Emergency Department Visit for Mental Illness 7 days total	10.89%	22.04%	10.78%	5.69%	23.74%	33.61%	46.35%	61.68%
MY 2024		11.61%	17.14%	10.36%	12.77%	21.19%	33.01%	44.33%	59.95%
MY 2023	FUA - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence—7 days—Total	14.97%	26.22%	19.35%	22.27%	13.83%	20.00%	27.73%	38.15%
MY 2024		18.24%	31.70%	13.33%	21.08%	12.73%	18.76%	27.62%	37.47%
MY 2023	FUI - Follow-Up After High-Intensity Care for Substance Use Disorder—7 days—Total	20.00%	35.39%	8.00%	53.69%	15.16%	23.12%	37.31%	49.55%
MY 2024		15.79%	37.24%	6.67%	52.52%	15.91%	26.90%	37.64%	50.80%
Behavioral Health - Medication Adherence									
MY 2023	AMM - Antidepressant Medication Management—Effective Continuation Phase Treatment	86.96%	82.99%	73.58%	79.39%	31.59%	40.01%	46.74%	58.06%
MY 2024		53.62%	52.91%	40.89%	44.49%	31.52%	41.00%	48.16%	61.06%
MY 2023	POD - Pharmacotherapy for Opioid Use Disorder—Total	61.90%	40.96%	48.40%	47.30%	14.94%	23.38%	31.93%	40.34%
MY 2024		16.95%	20.75%	13.82%	17.47%	12.05%	21.36%	29.01%	36.71%
MY 2023	SAA - Adherence to Antipsychotic Medications for Individuals With Schizophrenia	76.92%	73.83%	67.38%	71.65%	41.24%	57.79%	64.90%	72.61%
MY 2024		67.57%	68.39%	68.12%	62.81%	44.65%	58.60%	66.15%	74.83%

Partnership HealthPlan of California Measurement Year 2024 - Reporting Year 2025



Year	Measure	County Performance				National Medicaid Benchmarks			
		Del Norte	Humboldt	Lake	Mendocino	10th	33.33rd	66.67th	90th
Treatment									
Behavioral Health - Access, Monitoring and Safety									
MY 2023	APM - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total	54.05%	21.32%	29.52%	37.04%	26.36%	31.97%	40.50%	53.58%
MY 2024		45.95%	21.14%	26.47%	29.09%	25.86%	30.92%	41.41%	52.57%
MY 2023	ADD -Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase	55.00%	36.00%	25.00%	43.33%	40.38%	50.98%	57.90%	63.92%
MY 2024		18.18%	43.24%	50.00%	33.33%	37.19%	48.94%	56.83%	63.49%
MY 2023	SSD - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	88.76%	81.56%	78.73%	86.96%	72.83%	77.40%	80.86%	85.52%
MY 2024		81.11%	79.15%	80.07%	88.03%	75.46%	79.51%	83.51%	87.27%
MY 2023	APP - Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	40.00%	30.36%	16.67%	11.11%	36.65%	55.19%	63.89%	73.87%
MY 2024		0.00%	48.98%	33.33%	75.00%	41.57%	54.55%	64.10%	74.14%
MY 2023	IET - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment—Engagement - Total	6.85%	10.11%	8.55%	10.44%	7.05%	11.11%	16.94%	24.37%
MY 2024		5.94%	8.06%	3.82%	8.25%	6.08%	10.51%	16.78%	26.72%
Risk-Adjusted Utilization									
MY 2023	PCR - Plan All-Cause Readmission - Observed to - Expected Ratio (18-64 years)	0.7160	0.8959	0.9614	0.7823	No Bench Marks Use For Scoring			
MY 2024		0.6596	0.9967	0.9747	0.9901				
Other Treatment Measures									
MY 2023	**LBP - Use of Imaging Studies for Low Back Pain	66.82%	82.27%	72.25%	79.77%	67.72%	71.32%	75.44%	79.96%
MY 2024		69.04%	78.28%	70.45%	74.30%	64.77%	67.84%	72.74%	78.72%

Note: PCR calculations are based on the scoring algorithm for risk-adjusted utilization measures as defined by NCQA. NCQA calculates the Confidence Limits (CLs) for all health plans.

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



4.4 HPA HEDIS Rate Performance by County, Fairfield Region: Solano, Yolo, and Napa Counties

● 4-5 points ○ 3 points ● 1-2 points ○ Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures). Denominators less than 20 at the county level are suppressed.

Year	Measure	County Performance			National Medicaid Benchmarks			
		Napa	Solano	Yolo	10th	33.33rd	66.67th	90th
Prevention and Population								
Children and Adolescent Well-Care								
MY 2023	***CIS - Childhood Immunization Status	45.00%	33.33%	41.38%	20.68%	26.76%	35.04%	45.26%
MY 2024	(Combination 10)	47.06%	34.85%	21.62%	18.25%	24.39%	31.32%	42.34%
MY 2023	***IMA - Immunizations for Adolescents	70.37%	39.13%	37.93%	24.82%	30.66%	38.93%	48.80%
MY 2024	(Combination 2)	50.00%	38.03%	55.56%	25.41%	31.39%	38.69%	48.66%
MY 2023	WCC - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	100.00%	97.22%	69.23%	62.77%	74.70%	83.21%	89.72%
MY 2024		100.00%	80.65%	45.00%	66.91%	76.89%	86.20%	91.24%
Women's Reproductive Health								
MY 2023	***PPC - Prenatal and Postpartum Care—Timeliness of Prenatal Care	90.91%	90.70%	89.47%	25.86%	30.92%	41.41%	52.57%
MY 2024		88.24%	87.76%	76.00%	73.48%	81.94%	86.89%	91.85%
MY 2023	***PPC - Prenatal and Postpartum Care—Postpartum Care	81.82%	93.02%	94.74%	67.31%	75.18%	80.78%	84.59%
MY 2024		100.00%	85.71%	68.00%	68.63%	77.37%	82.48%	86.62%
MY 2023	PRS-E - Prenatal Immunization Status - Combination Rate	35.87%	41.85%	38.39%	7.94%	15.17%	25.81%	37.75%
MY 2024		38.62%	37.70%	40.00%	8.42%	15.96%	24.92%	35.60%
Cancer Screening								
MY 2023	BCS-E- Breast Cancer Screening	67.20%	58.12%	59.99%	42.98%	48.33%	54.94%	62.67%
MY 2024		66.84%	54.14%	60.29%	42.86%	49.24%	56.66%	63.48%
MY 2023	CCS - Cervical Cancer Screening	77.27%	66.07%	48.78%	43.50%	53.37%	59.85%	66.48%
MY 2024		75.00%	64.71%	47.62%	43.31%	52.07%	60.10%	67.46%
MY 2023	COL- Colorectal Cancer Screening	NR	NR	NR	NR	NR	NR	NR
MY 2024	COL-E - Colorectal Cancer Screening	38.24%	31.74%	32.50%	27.27%	34.30%	41.59%	49.35%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance			National Medicaid Benchmarks			
		Napa	Solano	Yolo	10th	33.33rd	66.67th	90th
Prevention and Population								
Other Preventive Services								
MY 2023	CHL - Chlamydia Screening in Women—Total	55.05%	62.67%	53.32%	42.61%	51.39%	61.07%	67.39%
MY 2024		49.58%	62.14%	51.37%	43.53%	52.40%	61.46%	69.07%
MY 2023	AIS-E-Adult Immunization Status—Influenza - Total	24.34%	19.23%	22.72%	6.50%	10.82%	16.32%	21.05%
MY 2024		21.99%	16.50%	21.83%	7.39%	12.55%	17.91%	26.40%
MY 2023	AIS-E-Adult Immunization Status—Pneumococcal - 66+	51.43%	56.30%	50.46%	N/A	N/A	N/A	N/A
MY 2024		51.67%	51.11%	47.74%	21.04%	38.73%	55.03%	68.07%
MY 2023	AIS-E-Adult Immunization Status—Td/Tdap - Total	39.23%	38.95%	41.62%	18.67%	29.84%	41.54%	56.53%
MY 2024		35.69%	34.58%	39.96%	21.26%	33.40%	47.30%	57.67%
MY 2023	AIS-E-Adult Immunization Status—Zoster - Total	21.55%	17.94%	18.53%	1.72%	4.42%	10.27%	14.54%
MY 2024		24.27%	17.30%	19.20%	2.23%	7.15%	13.49%	20.56%
Treatment								
Respiratory								
MY 2023	AMR - Asthma Medication Ratio- Total	78.34%	68.85%	65.93%	55.09%	61.81%	69.41%	75.92%
MY 2024		79.82%	65.79%	67.84%	54.56%	62.35%	70.56%	76.65%
MY 2023	CWP - Appropriate Testing for Pharyngitis—Total	65.48%	62.85%	89.19%	57.41%	68.76%	77.56%	82.40%
MY 2024		74.40%	71.69%	88.25%	61.35%	76.71%	85.11%	89.17%
MY 2023	**AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	76.10%	81.13%	78.71%	50.05%	57.16%	66.19%	77.11%
MY 2024		68.79%	80.34%	80.77%	49.48%	50.98%	67.03%	77.66%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	69.70%	74.00%	75.00%	56.05%	68.39%	75.79%	82.43%
MY 2024		78.26%	76.19%	68.35%	55.28%	66.86%	74.78%	82.88%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	100.00%	89.50%	84.52%	72.88%	82.35%	86.96%	90.53%
MY 2024		91.30%	87.07%	84.81%	67.25%	80.19%	86.54%	89.96%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance			National Medicaid Benchmarks			
		Napa	Solano	Yolo	10th	33.33rd	66.67th	90th
Treatment								
Diabetes								
MY 2023	EED - Eye Exams for Patients with Diabetes	69.57%	58.76%	43.24%	36.74%	46.96%	56.20%	63.33%
MY 2024		46.67%	59.65%	44.83%	40.39%	49.15%	57.09%	64.06%
MY 2023	BPD -Blood Pressure Control (<140/90) for Patients with Diabetes	66.67%	71.23%	67.86%	52.07%	59.85%	68.61%	74.56%
MY 2024		86.67%	84.21%	68.97%	58.15%	65.32%	71.78%	77.37%
MY 2023	HBD -Hemoglobin A1c Control for Patients with Diabetes-- HbA1c Control (<8%)	52.17%	56.70%	48.65%	38.93%	49.39%	55.72%	60.34%
MY 2024	GSD -Glycemic Status Assessment for Patients with Diabetes-- HbA1c Control (<8%)	66.67%	52.63%	55.17%	44.25%	54.50%	59.64%	63.50%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Received Statin Therapy	69.71%	69.35%	68.62%	54.15%	62.58%	67.07%	72.15%
MY 2024		67.58%	68.90%	69.47%	51.96%	62.66%	67.01%	71.41%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Statin Adherence 80%	94.88%	96.63%	94.49%	52.67%	62.50%	70.37%	77.97%
MY 2024		65.16%	70.86%	71.09%	53.23%	64.18%	70.91%	79.73%
MY 2023	KED - Kidney Health Evaluation for Patients with Diabetes	59.81%	55.47%	47.04%	22.73%	29.42%	38.80%	47.55%
MY 2024		48.46%	50.53%	39.00%	26.79%	33.00%	42.10%	49.72%
Heart Disease								
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	85.26%	82.35%	84.31%	70.02%	78.80%	81.64%	85.04%
MY 2024		87.84%	77.89%	82.48%	66.64%	79.82%	83.00%	85.89%
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	97.53%	96.94%	93.80%	56.67%	66.48%	73.63%	80.95%
MY 2024		64.62%	69.87%	81.42%	59.95%	67.42%	74.07%	81.79%
MY 2023	***CBP - Controlling High Blood Pressure	86.67%	65.71%	63.64%	50.36%	57.66%	65.45%	72.22%
MY 2024		52.38%	62.75%	78.13%	54.61%	61.43%	67.40%	72.75%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance			National Medicaid Benchmarks			
		Napa	Solano	Yolo	10th	33.33rd	66.67th	90th
Treatment								
Behavioral Health - Care Coordination								
MY 2023	FUH ¹ - Follow-Up After Hospitalization for Mental Illness-7 days	16.67%	58.10%	0.00%	23.74%	33.61%	46.35%	61.68%
MY 2024		NB	NB	NB	23.74%	33.61%	46.35%	61.68%
MY 2023	FUM - Follow-Up After Emergency Department Visit for Mental Illness 7 days total	20.59%	19.43%	15.58%	23.74%	33.61%	46.35%	61.68%
MY 2024		13.04%	9.98%	10.69%	21.19%	33.01%	44.33%	59.95%
MY 2023	FUA - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence—7 days—Total	17.37%	24.81%	17.45%	13.83%	20.00%	27.73%	38.15%
MY 2024		10.83%	20.83%	17.30%	12.73%	18.76%	27.62%	37.47%
MY 2023	FUI - Follow-Up After High-Intensity Care for Substance Use Disorder—7 days—Total	17.39%	36.08%	11.76%	15.16%	23.12%	37.31%	49.55%
MY 2024		12.90%	32.17%	15.07%	15.91%	26.90%	37.64%	50.80%
Behavioral Health - Medication Adherence								
MY 2023	AMM - Antidepressant Medication Management—Effective Continuation Phase Treatment	86.92%	84.74%	79.92%	31.59%	40.01%	46.74%	58.06%
MY 2024		49.62%	51.75%	50.22%	31.52%	41.00%	48.16%	61.06%
MY 2023	POD - Pharmacotherapy for Opioid Use Disorder—Total	38.46%	42.53%	39.68%	14.94%	23.38%	31.93%	40.34%
MY 2024		3.57%	13.07%	3.85%	12.05%	21.36%	29.01%	36.71%
MY 2023	SAA - Adherence to Antipsychotic Medications for Individuals With Schizophrenia	78.02%	73.23%	67.11%	41.24%	57.79%	64.90%	72.61%
MY 2024		65.67%	65.96%	64.89%	44.65%	58.60%	66.15%	74.83%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance			National Medicaid Benchmarks			
		Napa	Solano	Yolo	10th	33.33rd	66.67th	90th
Treatment								
Behavioral Health - Access, Monitoring and Safety								
MY 2023	APM - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total	47.73%	33.57%	21.18%	26.36%	31.97%	40.50%	53.58%
MY 2024		40.00%	41.57%	23.88%	25.86%	30.92%	41.41%	52.57%
MY 2023	ADD -Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase	37.50%	16.22%	38.78%	40.38%	50.98%	57.90%	63.92%
MY 2024		28.57%	25.00%	48.84%	37.19%	48.94%	56.83%	63.49%
MY 2023	SSD - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	82.55%	85.45%	83.85%	72.83%	77.40%	80.86%	85.52%
MY 2024		83.85%	87.32%	80.00%	75.46%	79.51%	83.51%	87.27%
MY 2023	APP - Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	28.00%	20.37%	17.39%	36.65%	55.19%	63.89%	73.87%
MY 2024		9.09%	58.33%	28.00%	41.57%	54.55%	64.10%	74.14%
MY 2023	IET - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment—Engagement - Total	6.32%	9.24%	4.34%	7.05%	11.11%	16.94%	24.37%
MY 2024		4.79%	8.85%	3.50%	6.08%	10.51%	16.78%	26.72%
Risk-Adjusted Utilization								
MY 2023	PCR - Plan All-Cause Readmission - Observed to - Expected Ratio (18-64 years)	1.0566	0.8160	0.9892	No Bench Marks Use For Scoring			
MY 2024		0.8874	1.1087	1.0775				
Other Treatment Measures								
MY 2023	**LBP - Use of Imaging Studies for Low Back Pain	75.78%	77.01%	76.37%	67.72%	71.32%	75.44%	79.96%
MY 2024		65.19%	71.39%	74.62%	64.77%	67.84%	72.74%	78.72%

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCOA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

Note: PCR calculations are based on the scoring algorithm for risk-adjusted utilization measures as defined by NCQA. NCQA calculates the Confidence Limits (CLs) for all health plans.

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



4.5 HPA HEDIS Rate Performance by County, Redding Region: Lassen, Modoc, Shasta, Siskiyou, Tehama, Trinity Counties

● 4-5 points
 ○ 3 points
 ● 1-2 points
 ○ Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures). Denominators less than 20 at the county level are suppressed.

Year	Measure	County Performance						National Medicaid Benchmarks			
		Lassen	Modoc	Shasta	Siskiyou	Tehama	Trinity	10th	33.33rd	66.67th	90th
Prevention and Population											
Children and Adolescent Well-Care											
MY 2023	***CIS - Childhood Immunization Status (Combination 10)	10.00%	0.00%	13.95%	20.00%	N/A	0.00%	20.68%	26.76%	35.04%	45.26%
MY 2024		50.00%	0.00%	16.00%	18.18%	0.00%	25.00%	18.25%	24.39%	31.32%	42.34%
MY 2023	***IMA - Immunizations for Adolescents (Combination 2)	0.00%	50.00%	21.82%	18.18%	N/A	33.33%	24.82%	30.66%	38.93%	48.80%
MY 2024		12.50%	0.00%	21.57%	10.00%	0.00%	33.33%	25.41%	31.39%	38.69%	48.66%
MY 2023	WCC - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	66.67%	100.00%	86.67%	66.67%	N/A	66.67%	62.77%	74.70%	83.21%	89.72%
MY 2024		100.00%	100.00%	95.12%	66.67%	56.25%	0.00%	66.91%	76.89%	86.20%	91.24%
Women's Reproductive Health											
MY 2023	***PPC - Prenatal and Postpartum Care—Timeliness of Prenatal Care	100.00%	75.00%	93.75%	66.67%	N/A	0.00%	25.86%	30.92%	41.41%	52.57%
MY 2024		100.00%	100.00%	84.38%	100.00%	61.54%	50.00%	73.48%	81.94%	86.89%	91.85%
MY 2023	***PPC - Prenatal and Postpartum Care—Postpartum Care	100.00%	25.00%	83.38%	33.33%	N/A	0.00%	67.31%	75.18%	80.78%	84.59%
MY 2024		100.00%	50.00%	0.00%	100.00%	92.31%	75.00%	68.63%	77.37%	82.48%	86.62%
MY 2023	PRS-E - Prenatal Immunization Status - Combination Rate	11.70%	15.63%	14.29%	20.00%	N/A	8.51%	7.94%	15.17%	25.81%	37.75%
MY 2024		26.67%	17.14%	24.12%	27.33%	22.51%	15.38%	8.42%	15.96%	24.92%	35.60%
Cancer Screening											
MY 2023	BCS-E- Breast Cancer Screening	45.98%	45.65%	50.90%	51.66%	N/A	43.46%	42.98%	48.33%	54.94%	62.67%
MY 2024		43.08%	48.52%	54.90%	52.64%	38.46%	49.39%	42.86%	49.24%	56.66%	63.48%
MY 2023	CCS - Cervical Cancer Screening	33.33%	0.00%	39.47%	66.67%	N/A	66.67%	43.50%	53.37%	59.85%	66.48%
MY 2024		50.00%	100.00%	53.85%	72.73%	36.84%	100.00%	43.31%	52.07%	60.10%	67.46%
MY 2023	COL- Colorectal Cancer Screening	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
MY 2024	COL-E - Colorectal Cancer Screening	23.17%	31.51%	32.16%	27.63%	25.00%	27.13%	27.27%	34.30%	41.59%	49.35%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance						National Medicaid Benchmarks			
		Lassen	Modoc	Shasta	Siskiyou	Tehama	Trinity	10th	33.33rd	66.67th	90th
Prevention and Population											
Other Preventive Services											
MY 2023	CHL - Chlamydia Screening in Women—Total	37.37%	30.39%	53.06%	46.15%	N/A	35.96%	42.61%	51.39%	61.07%	67.39%
MY 2024		41.55%	32.89%	52.12%	45.38%	54.34%	34.72%	43.53%	52.40%	61.46%	69.07%
MY 2023	AIS-E-Adult Immunization Status—Influenza - Total	7.70%	9.76%	9.31%	9.63%	N/A	7.89%	6.50%	10.82%	16.32%	21.05%
MY 2024		12.02%	10.14%	8.49%	10.20%	9.42%	8.18%	7.39%	12.55%	17.91%	26.40%
MY 2023	AIS-E-Adult Immunization Status—Pneumococcal - 66+	30.00%	25.00%	32.17%	33.33%	N/A	0.00%	N/A	N/A	N/A	N/A
MY 2024		30.00%	46.15%	36.81%	32.43%	27.00%	9.09%	21.04%	38.73%	55.03%	68.07%
MY 2023	AIS-E-Adult Immunization Status—Td/Tdap - Total	28.52%	29.97%	31.04%	29.73%	N/A	27.09%	18.67%	29.84%	41.54%	56.53%
MY 2024		28.42%	31.51%	33.87%	31.68%	29.20%	31.10%	21.26%	33.40%	47.30%	57.67%
MY 2023	AIS-E-Adult Immunization Status—Zoster - Total	3.76%	8.95%	9.25%	4.65%	N/A	5.99%	1.72%	4.42%	10.27%	14.54%
MY 2024		4.50%	10.87%	10.49%	5.84%	9.87%	6.96%	2.23%	7.15%	13.49%	20.56%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance						National Medicaid Benchmarks			
		Lassen	Modoc	Shasta	Siskiyou	Tehama	Trinity	10th	33.33rd	66.67th	90th
Treatment											
Respiratory											
MY 2023	AMR - Asthma Medication Ratio- Total	54.64%	46.88%	49.94%	49.05%	N/A	48.00%	55.09%	61.81%	69.41%	75.92%
MY 2024		58.70%	63.16%	57.28%	59.62%	0.00%	50.00%	54.56%	62.35%	70.56%	76.65%
MY 2023	CWP - Appropriate Testing for Pharyngitis—Total	83.33%	74.39%	60.26%	52.12%	N/A	47.44%	57.41%	68.76%	77.56%	82.40%
MY 2024		77.47%	75.18%	63.34%	64.94%	50.37%	43.96%	61.35%	76.71%	85.11%	89.17%
MY 2023	**AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	71.01%	46.67%	69.48%	67.18%	N/A	72.41%	50.05%	57.16%	66.19%	77.11%
MY 2024		59.62%	60.00%	61.78%	65.66%	53.05%	64.71%	49.48%	50.98%	67.03%	77.66%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	90.48%	75.00%	66.06%	61.11%	N/A	77.78%	56.05%	68.39%	75.79%	82.43%
MY 2024		58.62%	30.77%	74.31%	70.83%	77.00%	81.82%	55.28%	66.86%	74.78%	82.88%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	95.24%	75.00%	87.27%	86.11%	N/A	88.89%	72.88%	82.35%	86.96%	90.53%
MY 2024		86.21%	84.62%	85.42%	83.33%	90.00%	81.82%	67.25%	80.19%	86.54%	89.96%
Diabetes											
MY 2023	EED - Eye Exams for Patients with Diabetes	100.00%	100.00%	68.42%	85.71%	N/A	50.00%	36.74%	46.96%	56.20%	63.33%
MY 2024		20.00%	100.00%	58.33%	71.43%	30.77%	0.00%	40.39%	49.15%	57.09%	64.06%
MY 2023	BPD -Blood Pressure Control (<140/90) for Patients with Diabetes	66.67%	80.00%	73.81%	70.00%	N/A	66.67%	52.07%	59.85%	68.61%	74.56%
MY 2024		20.00%	0.00%	62.50%	57.14%	30.77%		58.15%	65.32%	71.78%	77.37%
MY 2023	HBD -Hemoglobin A1c Control for Patients with Diabetes-- HbA1c Control (<8%)	0.00%	100.00%	65.79%	42.86%	N/A	25.00%	38.93%	49.39%	55.72%	60.34%
MY 2024	GSD -Glycemic Status Assessment for Patients with Diabetes-- HbA1c Control (<8%)	60.00%	50.00%	54.17%	42.86%	38.46%	0.00%	44.25%	54.50%	59.64%	63.50%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Received Statin Therapy	55.29%	64.13%	54.82%	56.68%	N/A	47.73%	54.15%	62.58%	67.07%	72.15%
MY 2024		53.90%	60.61%	57.12%	61.60%	46.15%	51.09%	51.96%	62.66%	67.01%	71.41%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Statin Adherence 80%	93.62%	98.31%	93.45%	93.50%	N/A	97.62%	52.67%	62.50%	70.37%	77.97%
MY 2024		67.47%	73.33%	71.68%	67.71%	66.67%	82.98%	53.23%	64.18%	70.91%	79.73%
MY 2023	KED - Kidney Health Evaluation for Patients with Diabetes	18.15%	25.00%	38.24%	26.56%	N/A	24.83%	22.73%	29.42%	38.80%	47.55%
MY 2024		17.08%	24.22%	42.26%	38.86%	37.70%	31.72%	26.79%	33.00%	42.10%	49.72%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance						National Medicaid Benchmarks			
		Lassen	Modoc	Shasta	Siskiyou	Tehama	Trinity	10th	33.33rd	66.67th	90th
		Treatment									
		Heart Disease									
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	72.73%	50.00%	75.22%	87.50%	N/A	78.57%	70.02%	78.80%	81.64%	85.04%
MY 2024		78.95%	100.00%	80.65%	76.67%	66.67%	78.95%	66.64%	79.82%	83.00%	85.89%
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	100.00%	100.00%	96.46%	91.43%	N/A	100.00%	56.67%	66.48%	73.63%	80.95%
MY 2024		60.00%	57.14%	68.00%	60.87%	50.00%	73.33%	59.95%	67.42%	74.07%	81.79%
MY 2023	***CBP - Controlling High Blood Pressure	100.00%	75.00%	80.65%	80.00%	N/A	100.00%	50.36%	57.66%	65.45%	72.22%
MY 2024		54.55%	0.00%	51.52%	50.00%	33.33%		54.61%	61.43%	67.40%	72.75%
		Behavioral Health - Care Coordination									
MY 2023	FUH ¹ - Follow-Up After Hospitalization for Mental Illness-7 days	0.00%	0.00%	0.00%	0.00%	N/A	0.00%	23.74%	33.61%	46.35%	61.68%
MY 2024		NB	NB	NB	NB	NB	NB	23.74%	33.61%	46.35%	61.68%
MY 2023	FUM - Follow-UP After Emergency Department Visit for Mental Illness 7 days total	10.00%	0.00%	17.44%	13.58%	N/A	21.05%	23.74%	33.61%	46.35%	61.68%
MY 2024		9.38%	5.88%	18.90%	23.61%	6.67%	6.25%	21.19%	33.01%	44.33%	59.95%
MY 2023	FUA - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence—7 days—Total	6.67%	35.29%	34.58%	18.37%	N/A	21.05%	13.83%	20.00%	27.73%	38.15%
MY 2024		14.52%	27.27%	34.01%	22.29%	22.94%	20.93%	12.73%	18.76%	27.62%	37.47%
MY 2023	FUI - Follow-Up After High-Intensity Care for Substance Use Disorder—7 days—Total	26.09%	40.00%	31.27%	40.00%	N/A	0.00%	15.16%	23.12%	37.31%	49.55%
MY 2024		37.04%	31.25%	36.40%	39.29%	25.00%	0.00%	15.91%	26.90%	37.64%	50.80%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance						National Medicaid Benchmarks			
		Lassen	Modoc	Shasta	Siskiyou	Tehama	Trinity	10th	33.33rd	66.67th	90th
Treatment											
Behavioral Health - Medication Adherence											
MY 2023	AMM - Antidepressant Medication Management—Effective Continuation Phase Treatment	81.05%	72.41%	81.78%	86.41%	N/A	86.36%	31.59%	40.01%	46.74%	58.06%
MY 2024		54.29%	22.22%	46.21%	44.66%	44.00%	55.56%	31.52%	41.00%	48.16%	61.06%
MY 2023	POD - Pharmacotherapy for Opioid Use Disorder—Total	52.94%	66.67%	33.63%	37.63%	N/A	46.15%	14.94%	23.38%	31.93%	40.34%
MY 2024		5.56%	55.56%	16.40%	27.83%	4.00%	10.00%	12.05%	21.36%	29.01%	36.71%
MY 2023	SAA - Adherence to Antipsychotic Medications for Individuals With Schizophrenia	75.00%	73.68%	72.43%	84.38%	N/A	50.00%	41.24%	57.79%	64.90%	72.61%
MY 2024		73.91%	46.15%	66.19%	57.58%	60.53%	70.00%	44.65%	58.60%	66.15%	74.83%
Behavioral Health - Access, Monitoring and Safety											
MY 2023	APM - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total	30.43%	11.11%	29.11%	34.78%	N/A	37.50%	26.36%	31.97%	40.50%	53.58%
MY 2024		31.03%	0.00%	29.56%	29.73%	29.52%	50.00%	25.86%	30.92%	41.41%	52.57%
MY 2023	ADD -Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase	15.38%	25.00%	32.43%	37.50%	N/A	37.50%	40.38%	50.98%	57.90%	63.92%
MY 2024		20.00%	50.00%	48.53%	53.85%	0.00%	40.00%	37.19%	48.94%	56.83%	63.49%
MY 2023	SSD - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	67.92%	96.15%	78.12%	87.62%	N/A	76.47%	72.83%	77.40%	80.86%	85.52%
MY 2024		80.43%	90.48%	81.42%	82.76%	84.08%	88.89%	75.46%	79.51%	83.51%	87.27%
MY 2023	APP - Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	20.83%	14.29%	31.97%	18.18%	N/A	20.00%	36.65%	55.19%	63.89%	73.87%
MY 2024		6.25%	33.33%	54.55%	50.00%	20.69%	50.00%	41.57%	54.55%	64.10%	74.14%
MY 2023	IET - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment—Engagement - Total	6.51%	2.59%	9.95%	11.13%	N/A	5.00%	7.05%	11.11%	16.94%	24.37%
MY 2024		9.57%	8.94%	12.24%	11.41%	4.96%	2.87%	6.08%	10.51%	16.78%	26.72%

Partnership HealthPlan of California Measurement Year 2024 - Reporting Year 2025



		Risk-Adjusted Utilization										
MY 2023	PCR - Plan All-Cause Readmission - Observed to - Expected Ratio (18-64 years)	0.7435	1.2776	0.8396	0.9745	N/A	0.8752	No Bench Marks Use For Scoring				
MY 2024		0.9224	0.9456	0.8900	0.4606	2.7723	0.6961					
		Other Treatment Measures										
MY 2023	**LBP - Use of Imaging Studies for Low Back Pain	68.93%	73.91%	76.68%	61.90%	N/A	75.76%	67.72%	71.32%	75.44%	79.96%	
MY 2024		71.59%	57.78%	75.10%	63.19%	76.58%	64.44%	64.77%	67.84%	72.74%	78.72%	

Note: PCR calculations are based on the scoring algorithm for risk-adjusted utilization measures as defined by NCQA. NCQA calculates the Confidence Limits (CLs) for all health plans.

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



4.6 HPA HEDIS Rate Performance by County, Santa Rosa Region: Marin, Sonoma Counties

Note: CAHPS is not captured by County

- 4-5 points
- 3 points
- 1-2 points
- Administrative measures: The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures). Denominators less than 20 at the county level are suppressed.

Year	Measure	County Performance		National Medicaid Benchmarks			
		Marin	Sonoma	10th	33.33rd	66.67th	90th
Prevention and Population							
Children and Adolescent Well-Care							
MY 2023	***CIS - Childhood Immunization Status	28.13%	44.74%	20.68%	26.76%	35.04%	45.26%
MY 2024	(Combination 10)	35.14%	34.25%	18.25%	24.39%	31.32%	42.34%
MY 2023	***IMA - Immunizations for Adolescents	64.29%	65.43%	24.82%	30.66%	38.93%	48.80%
MY 2024	(Combination 2)	57.14%	53.85%	25.41%	31.39%	38.69%	48.66%
MY 2023	WCC - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	89.47%	77.50%	62.77%	74.70%	83.21%	89.72%
MY 2024		90.91%	69.49%	66.91%	76.89%	86.20%	91.24%
Women's Reproductive Health							
MY 2023	***PPC - Prenatal and Postpartum Care—Timeliness of Prenatal Care	88.89%	91.67%	25.86%	30.92%	41.41%	52.57%
MY 2024		100.00%	90.00%	73.48%	81.94%	86.89%	91.85%
MY 2023	***PPC - Prenatal and Postpartum Care—Postpartum Care	100.00%	88.89%	67.31%	75.18%	80.78%	84.59%
MY 2024		100.00%	96.67%	68.63%	77.37%	82.48%	86.62%
MY 2023	PRS-E - Prenatal Immunization Status - Combination Rate	57.21%	45.31%	7.94%	15.17%	25.81%	37.75%
MY 2024		46.87%	39.15%	8.42%	15.96%	24.92%	35.60%
Cancer Screening							
MY 2023	BCS-E- Breast Cancer Screening	58.02%	61.94%	42.98%	48.33%	54.94%	62.67%
MY 2024		63.44%	59.17%	42.86%	49.24%	56.66%	63.48%
MY 2023	CCS - Cervical Cancer Screening	75.00%	58.62%	43.50%	53.37%	59.85%	66.48%
MY 2024		71.43%	68.00%	43.31%	52.07%	60.10%	67.46%
MY 2023	COL- Colorectal Cancer Screening	NR	NR	NR	NR	NR	NR
MY 2024	COL-E - Colorectal Cancer Screening	34.44%	38.68%	27.27%	34.30%	41.59%	49.35%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance		National Medicaid Benchmarks			
		Marin	Sonoma	10th	33.33rd	66.67th	90th
Prevention and Population							
Other Preventive Services							
MY 2023	CHL - Chlamydia Screening in Women—Total	72.34%	54.05%	42.61%	51.39%	61.07%	67.39%
MY 2024		77.63%	51.89%	43.53%	52.40%	61.46%	69.07%
MY 2023	AIS-E-Adult Immunization Status—Influenza - Total	24.30%	23.75%	6.50%	10.82%	16.32%	21.05%
MY 2024		21.41%	18.25%	7.39%	12.55%	17.91%	26.40%
MY 2023	AIS-E-Adult Immunization Status—Pneumococcal - 66+	48.51%	44.70%	N/A	N/A	N/A	N/A
MY 2024		49.58%	40.21%	21.04%	38.73%	55.03%	68.07%
MY 2023	AIS-E-Adult Immunization Status—Td/Tdap - Total	41.23%	35.03%	18.67%	29.84%	41.54%	56.53%
MY 2024		40.27%	31.66%	21.26%	33.40%	47.30%	57.67%
MY 2023	AIS-E-Adult Immunization Status—Zoster - Total	22.92%	15.55%	1.72%	4.42%	10.27%	14.54%
MY 2024		27.44%	13.98%	2.23%	7.15%	13.49%	20.56%
Treatment							
Respiratory							
MY 2023	AMR - Asthma Medication Ratio- Total	65.65%	71.78%	55.09%	61.81%	69.41%	75.92%
MY 2024		61.27%	70.42%	54.56%	62.35%	70.56%	76.65%
MY 2023	CWP - Appropriate Testing for Pharyngitis—Total	77.41%	75.36%	57.41%	68.76%	77.56%	82.40%
MY 2024		80.68%	82.89%	61.35%	76.71%	85.11%	89.17%
MY 2023	**AAB - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	87.50%	79.66%	50.05%	57.16%	66.19%	77.11%
MY 2024		88.02%	77.33%	49.48%	50.98%	67.03%	77.66%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	72.22%	75.00%	56.05%	68.39%	75.79%	82.43%
MY 2024		55.26%	71.52%	55.28%	66.86%	74.78%	82.88%
MY 2023	PCE - Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	86.11%	91.88%	72.88%	82.35%	86.96%	90.53%
MY 2024		86.84%	87.42%	67.25%	80.19%	86.54%	89.96%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



		Diabetes					
MY 2023	EED - Eye Exams for Patients with Diabetes	50.00%	41.77%	36.74%	46.96%	56.20%	63.33%
MY 2024		63.16%	65.52%	40.39%	49.15%	57.09%	64.06%
MY 2023	BPD -Blood Pressure Control (<140/90) for Patients with Diabetes	66.67%	59.76%	52.07%	59.85%	68.61%	74.56%
MY 2024		89.47%	67.24%	58.15%	65.32%	71.78%	77.37%
MY 2023	HBD -Hemoglobin A1c Control for Patients with Diabetes-- HbA1c Control (<8%)	73.08%	49.37%	38.93%	49.39%	55.72%	60.34%
MY 2024	GSD -Glycemic Status Assessment for Patients with Diabetes-- HbA1c Control (<8%)	52.63%	44.83%	44.25%	54.50%	59.64%	63.50%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Received Statin Therapy	65.65%	65.80%	54.15%	62.58%	67.07%	72.15%
MY 2024		67.69%	68.61%	51.96%	62.66%	67.01%	71.41%
MY 2023	SPD - Statin Therapy for Patients With Diabetes—Statin Adherence 80%	95.35%	93.54%	52.67%	62.50%	70.37%	77.97%
MY 2024		69.25%	62.65%	53.23%	64.18%	70.91%	79.73%
MY 2023	KED - Kidney Health Evaluation for Patients with Diabetes	43.55%	44.30%	22.73%	29.42%	38.80%	47.55%
MY 2024		50.23%	47.24%	26.79%	33.00%	42.10%	49.72%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance		National Medicaid Benchmarks			
		Marin	Sonoma	10th	33.33rd	66.67th	90th
		Treatment					
		Heart Disease					
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	87.74%	83.18%	70.02%	78.80%	81.64%	85.04%
MY 2024		89.01%	82.29%	66.64%	79.82%	83.00%	85.89%
MY 2023	SPC - Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	100.00%	93.38%	56.67%	66.48%	73.63%	80.95%
MY 2024		72.84%	70.46%	59.95%	67.42%	74.07%	81.79%
MY 2023	***CBP - Controlling High Blood Pressure	62.07%	71.64%	50.36%	57.66%	65.45%	72.22%
MY 2024		62.07%	62.67%	54.61%	61.43%	67.40%	72.75%
		Behavioral Health - Care Coordination					
MY 2023	FUH ¹ - Follow-Up After Hospitalization for Mental Illness-7 days	11.11%	15.79%	23.74%	33.61%	46.35%	61.68%
MY 2024		NB	NB	23.74%	33.61%	46.35%	61.68%
MY 2023	FUM - Follow-UP After Emergency Department Visit for Mental Illness 7 days total	28.49%	26.91%	23.74%	33.61%	46.35%	61.68%
MY 2024		20.50%	16.83%	21.19%	33.01%	44.33%	59.95%
MY 2023	FUA - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence—7 days—Total	22.95%	17.08%	13.83%	20.00%	27.73%	38.15%
MY 2024		21.33%	18.89%	12.73%	18.76%	27.62%	37.47%
MY 2023	FUI - Follow-Up After High-Intensity Care for Substance Use Disorder—7 days—Total	17.81%	13.57%	15.16%	23.12%	37.31%	49.55%
MY 2024		10.53%	22.86%	15.91%	26.90%	37.64%	50.80%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Year	Measure	County Performance		National Medicaid Benchmarks			
		Marin	Sonoma	10th	33.33rd	66.67th	90th
Treatment							
Behavioral Health - Medication Adherence							
MY 2023	AMM - Antidepressant Medication Management—Effective Continuation Phase Treatment	82.33%	80.13%	31.59%	40.01%	46.74%	58.06%
MY 2024		49.81%	45.43%	31.52%	41.00%	48.16%	61.06%
MY 2023	POD - Pharmacotherapy for Opioid Use Disorder—Total	47.22%	46.89%	14.94%	23.38%	31.93%	40.34%
MY 2024		5.19%	12.62%	12.05%	21.36%	29.01%	36.71%
MY 2023	SAA - Adherence to Antipsychotic Medications for Individuals With Schizophrenia	85.71%	73.57%	41.24%	57.79%	64.90%	72.61%
MY 2024		77.88%	68.80%	44.65%	58.60%	66.15%	74.83%
Behavioral Health - Access, Monitoring and Safety							
MY 2023	APM - Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total	40.00%	41.84%	26.36%	31.97%	40.50%	53.58%
MY 2024		51.72%	35.29%	25.86%	30.92%	41.41%	52.57%
MY 2023	ADD - Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase	27.03%	33.74%	40.38%	50.98%	57.90%	63.92%
MY 2024		50.00%	31.82%	37.19%	48.94%	56.83%	63.49%
MY 2023	SSD - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	79.34%	81.45%	72.83%	77.40%	80.86%	85.52%
MY 2024		78.61%	85.90%	75.46%	79.51%	83.51%	87.27%
MY 2023	APP - Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	22.73%	32.47%	36.65%	55.19%	63.89%	73.87%
MY 2024		77.78%	31.48%	41.57%	54.55%	64.10%	74.14%
MY 2023	IET - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment—Engagement - Total	6.69%	7.17%	7.05%	11.11%	16.94%	24.37%
MY 2024		5.39%	8.69%	6.08%	10.51%	16.78%	26.72%

**Partnership HealthPlan of California
Measurement Year 2024 - Reporting Year 2025**



Risk-Adjusted Utilization							
MY 2023	PCR - Plan All-Cause Readmission - Observed to - Expected Ratio (18-64 years)	0.9021	0.9640	No Bench Marks Use For Scoring			
MY 2024		0.9704	0.8308				
Other Treatment Measures							
MY 2023	**LBP - Use of Imaging Studies for Low Back Pain	75.28%	78.80%	67.72%	71.32%	75.44%	79.96%
MY 2024		72.67%	77.55%	64.77%	67.84%	72.74%	78.72%

Note: PCR calculations are based on the scoring algorithm for risk-adjusted utilization measures as defined by NCQA. NCQA calculates the Confidence Limits (CLs) for all health plans.

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

NB Not a Benefit - Auditor Approval required
NR Not Rated - Not included in the MY's measurement set
N/A No NCQA benchmark to apply in Measurement Year
* RDM and LDM are reporting only measures, full credit received for reporting.
** Inverted measures, a lower rate results in better performance
*** DHCS Withhold Measures
BOLD Indicates MCAS measures held to the MPL

5.0 HEDIS HealthPlan Accreditation (HPA) – Health plan Rating Methodology

Health plans are rated in three categories: private/commercial plans in which people enroll through employers or on their own; plans that serve Medicare beneficiaries in the Medicare Advantage program (not supplemental plans); and plans that serve Medicaid beneficiaries.

NCQA ratings are based on three types of quality measures: 1) measures of clinical quality from NCQA's Healthcare Effectiveness Data and Information Set (HEDIS®) and Health Outcomes Survey (HOS); 2) measures of patient experience using the Consumer Assessment of Healthcare Providers and Systems (CAHPS®); and 3) results from NCQA's review of a health plan's health quality processes (NCQA Accreditation). NCQA rates health plans that choose to report measures publicly.

The overall rating is the weighted average of a plan's HEDIS, HOS, and CAHPS measure ratings, plus Accreditation bonus points (if the plan is Accredited by NCQA), rounded to the nearest half point displayed as stars.

The overall rating is based on performance on dozens of measures of care and is calculated on a 0–5 scale in half points (5 is highest). Performance includes three subcategories:

1. **Patient Experience:** Patient-reported experience of care, including experience with doctors, services and customer service (measures in the Patient Experience category).
2. **Rates for Clinical Measures:** The proportion of eligible members who received preventive services (prevention measures) and the proportion of eligible members who received recommended care for certain conditions (treatment measures).
3. **NCQA Health Plan Accreditation:** For a plan with an Accredited or Provisional status, 0.5 bonus points are added to the overall rating before rounding to the nearest half point and displayed as stars.

6.0 HEDIS/CAHPS Measures Required for HP Accreditation—Medicaid

Measure Name		Display Name	Weight
PATIENT EXPERIENCE			
Getting Care			
	Getting Needed Care (Usually + Always)	Getting care easily	1.5
	Getting Care Quickly (Usually + Always)	Getting care quickly	1.5
Satisfaction With Plan Physicians			
	Rating of Personal Doctor (9 + 10)	Rating of primary care doctor	1.5
Satisfaction With Plan and Plan Services			
	Rating of Health Plan (9 + 10)	Rating of health plan	1.5
	Rating of All Health Care (9 + 10)	Rating of care	1.5
PREVENTION AND POPULATION			
Children and Adolescent Well-Care			
CIS	Childhood Immunization Status—Combination 10	Childhood immunizations	3
IMA	Immunizations for Adolescents—Combination 2	Adolescent immunizations	3
WCC	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	BMI percentile assessment	1
Women’s Reproductive Health			
PPC	Prenatal and Postpartum Care—Timeliness of Prenatal Care	Prenatal checkups	1
	Prenatal and Postpartum Care—Postpartum Care	Postpartum care	1
PRS-E	Prenatal Immunization Status—Combination Rate	Prenatal immunizations	1
Cancer Screening			
BCS-E	Breast Cancer Screening	Breast cancer screening	1
COL-E	Colorectal Cancer Screening—Total <i>(NEW MEASURE)</i>	Colorectal cancer screening	1
CCS	Cervical Cancer Screening	Cervical cancer screening	1
Description of Membership			
RDM	Race/Ethnicity Diversity of Membership	Race and ethnicity of members	1
LDM	Language Diversity of Membership <i>(NEW MEASURE)</i>	Language preferences of members	0.5
Other Preventive Services			
CHL	Chlamydia Screening in Women—Total	Chlamydia screening	1
AIS-E	Adult Immunization Status—Influenza—Total	Influenza immunizations for adults	1
	Adult Immunization Status—Td/Tdap—Total	Td/Tdap immunizations for adults	1
	Adult Immunization Status—Zoster—Total	Zoster immunizations for adults	1
	Adult Immunization Status—Pneumococcal—66+	Pneumococcal immunizations for adults	1

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TREATMENT			
Respiratory			
AMR	Asthma Medication Ratio—Total	Asthma control	1
CWP	Appropriate Testing for Pharyngitis—Total	Appropriate testing and care for a sore throat	1
AAB	Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis—Total	Appropriate antibiotic use for acute bronchitis/bronchiolitis	1
PCE	Pharmacotherapy Management of COPD Exacerbation—Systemic Corticosteroid	Steroid after hospitalization for acute COPD	1
	Pharmacotherapy Management of COPD Exacerbation—Bronchodilator	Bronchodilator after hospitalization for acute COPD	1
Diabetes			
BPD	Blood Pressure Control for Patients With Diabetes	Patients with diabetes—blood pressure control (140/90)	3
EED	Eye Exam for Patients With Diabetes	Patients with diabetes—eye exams	1
GSD	Glycemic Status Assessment for Patients With Diabetes—Glycemic Status (<8%) <i>(NEW MEASURE)</i>	Patients with diabetes—glycemic status	3
SPD	Statin Therapy for Patients With Diabetes—Received Statin Therapy	Patients with diabetes—received statin therapy	1
	Statin Therapy for Patients With Diabetes—Statin Adherence 80%	Patients with diabetes—statin adherence 80%	1
KED	Kidney Health Evaluation for Patients With Diabetes—Total	Patients with diabetes—kidney health evaluation	1
Heart Disease			
SPC	Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy—Total	Patients with cardiovascular disease—received statin therapy	1
	Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%—Total	Patients with cardiovascular disease—statin adherence 80%	1
CBP	Controlling High Blood Pressure	Controlling high blood pressure	3

**Partnership HealthPlan of California
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Measure Name		Display Name	Weight
Behavioral Health—Care Coordination			
FUM	Follow-Up After Emergency Department Visit for Mental Illness—7 days—Total	Follow-up after ED for mental illness	1
FUA	Follow-Up After Emergency Department Visit for Substance Use—7 days—Total	Follow-up after ED for substance use disorder	1
FUI	Follow-Up After High-Intensity Care for Substance Use Disorder—7 days—Total	Follow-up after high-intensity care for substance use disorder	1
Behavioral Health—Medication Adherence			
SAA	Adherence to Antipsychotic Medications for Individuals With Schizophrenia	Adherence to antipsychotic medications for individuals with schizophrenia	1
AMM	Antidepressant Medication Management—Effective Continuation Phase Treatment	Patients with a new episode of depression—medication adherence for 6 months	1
POD	Pharmacotherapy for Opioid Use Disorder—Total	Patients with opioid use disorder—medication adherence for 6 months	1
Behavioral Health—Access, Monitoring and Safety			
APM-E	Metabolic Monitoring for Children and Adolescents on Antipsychotics—Blood Glucose and Cholesterol Testing—Total (NEW REPORTING METHOD)	Cholesterol and blood sugar testing for youth on antipsychotic medications	1
ADD-E	Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase (NEW REPORTING METHOD)	Continued follow-up after ADHD diagnosis	1
SSD	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	Diabetes screening for individuals with schizophrenia or bipolar disorder	1
APP	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total	First-line psychosocial care for youth on antipsychotic medications	1
IET	Initiation and Engagement of Substance Use Disorder Treatment—Engagement of SUD Treatment—Total	Substance use disorder treatment engagement	1
Risk-Adjusted Utilization			
PCR	Plan All-Cause Readmissions—Observed-to-Expected Ratio—18-64	Plan all-cause readmissions	1
Other Treatment Measures			
LBP	Use of Imaging Studies for Low Back Pain—Total	Appropriate use of imaging studies for low back pain	1

7.0 HEDIS/CAHPS MY2024 / RY2025 HPA Overall Star Rating Results: with Child CAHPS Survey Results (Projected)

On August 15, 2025, Partnership received NCQA’s projected MY2024 HPA Star Rating of 3.0 Stars. This rating is calculated based on the MY2024 Child CAHPS® (regulated) survey results and plan-wide HEDIS rates per the NCQA Health Plan scoring methodology. Final scores will be published by NCQA in Fall of 2025. Because NCQA’s scoring methodology uses rates that are proprietary to NCQA and will not be published until Fall 2025, Partnership’s scoring calculations are not published in the MY2024 Annual Summary of Performance at this time.



As the MY2024 scoring summary below shows, Partnership’s score was very close to a 3.5 Star Rating and missed the 3.5 Star Rating cut-point by 8/1000 of a point.

Rounding Rules	
0.000–0.249 → 0.0	2.750–3.249 → 3.0
0.250–0.749 → 0.5	3.250–3.749 → 3.5
0.750–1.249 → 1.0	3.750–4.249 → 4.0
1.250–1.749 → 1.5	4.250–4.749 → 4.5
1.750–2.249 → 2.0	≥4.750 → 5.0
2.250–2.749 → 2.5	

Overall Rating Source	
Measure points	164.5
Overall Rating Not Rounded	2.741666667
Final Overall Rating +.5 Bonus	3.242
Final Score Rounded	3.0

7.1 Factors in MY2024 HPA Star Rating

Partnership’s Star Rating declined from 3.5 Stars in MY2023 to 3.0 Stars in MY2024. The following factors were important drivers of Partnership’s performance on the MY2024 HPA measures:

Improved Performance on CAHPS Surveys: Both the Child and Adult CAHPS survey scores

improved plan-wide between MY2023 and MY2024. Partnership saw significant improvements in year-over-year scores on the questions “Rating of Health Plan” and “Rating of Personal Doctor” on both surveys. This reflects Partnership’s sustained focus on improving the Partnership member experience in several key areas, including staff trainings to improve member benefits literacy; improvements in the transportation benefit; and digital platform enhancements such as the launch of a member texting platform. Partnership has also invested significant resources into a Healthcare Access Strategy and Tactical Plan, which includes provider recruitment and retention initiatives, network gap analyses, and telehealth integration strategies. All of these efforts combined led to survey results that show an improvement in reported member experience within the provider network.

Population Shifts within the Network: As described in Section 2, Partnership grew its membership by 36.7 percent in January 2024, by adding ten additional counties to its network. Neither of the legacy Managed Care Plans departing these counties were NCQA Accredited Health Plans before 2024, so HPA HEDIS measures were less familiar and less prioritized for these incoming primary care providers. Additionally, incoming PCPs were challenged by data completeness issues, which gave them limited historical data for multi-year measures. Incoming PCPs also experienced significant member assignment mismatches at the beginning of 2024, which limited their ability to impact the members on their panels and impacted their HEDIS measure rates.

Approximately 82,000 Partnership members assigned to Kaiser also departed Partnership in January, 2024. These members have had high rates on the HPA HEDIS measures, and their departure impacted measure rates in Solano, Sonoma, Napa and Yolo Counties.

Finally, the disruption in Partnership’s contract with Dignity Health in early 2024 impacted members in Nevada, Shasta, Siskiyou, Tehama, and Yolo Counties. Though these 64,000 members were assigned to other PCPs in their regions, the disruption in their primary care impacted many of the chronic condition and behavioral health management measures that make up the HPA measure set.

Resolution of Medi-Cal Rx Data Issues: In late 2024, Partnership identified and resolved several prescription duplication issues within the Medi-Cal Rx dataset, provided to Partnership by DHCS pharmacy benefit administrator Magellen. These issues had the effect of inflating the reported rates for several HPA measures centered on medication management during MY2022 and MY2023, including Antidepressant Medication Management—Effective Continuation Phase Treatment (AMM), Pharmacotherapy for Opioid Use Disorder (POD), Statin Therapy for Patients with Cardiovascular Disease – Adherence (SPC), and Statin Therapy for Patients with Diabetes – Adherence (SPD). The MY2024 measure rates reflects a more accurate Medi-Cal Rx prescription dataset but also reflects a drop in reported rates between MY2023 – MY2024.

Annual Changes to NCQA HEDIS Benchmarks: Partnership uses the most recent NCQA published benchmarks available to project measure scores and calculate a Projected Star Rating. For

MY2024, the most recently published benchmarks available are the Quality Compass MY2023 Medicaid National Benchmarks. NCQA, however, uses the MY2024 rates they receive from Medicaid plans nationwide in June 2025 to produce a more recent set of benchmarks based on MY2024 rates, that they then use to calculate the MY2024 Star Ratings for Medicaid plans. For MY2024, Partnership saw several measure benchmarks increase significantly, which resulted in a lower Star Rating projection than Partnership calculated internally using the MY2023 benchmarks. The HPA measures with benchmarks that increased most significantly in MY2024 include:

- Immunizations for Adolescents - Combination 2 (IMA-2)
- Prenatal and Postpartum Care - Timeliness of Prenatal Care (PPC-Pre)
- Adult Immunization Status - Zoster (Total) (AIS-E)
- Eye Exam for Patients With Diabetes (EED)
- Controlling High Blood Pressure (CBP)
- Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SSA)
- Metabolic Monitoring for Children and Adolescents on Antipsychotics - Blood Glucose and Cholesterol Testing (Total) (APM-E)
- Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

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7.2 MY2024 HEDIS HealthPlan Accreditation (HPA) – HealthPlan Rating Score Child CAHPS - Change from Prior Year

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

Rounding Rules	
0.000–0.249 → 0.0	2.750–3.249 → 3.0
0.250–0.749 → 0.5	3.250–3.749 → 3.5
0.750–1.249 → 1.0	3.750–4.249 → 4.0
1.250–1.749 → 1.5	4.250–4.749 → 4.5
1.750–2.249 → 2.0	≥4.750 → 5.0
2.250–2.749 → 2.5	

MY2024 Projected Star Rating w/Child CAHPS survey results (submitted for HPA):

Final Overall Rating +.5 Bonus	3.24166667
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HEDIS HealthPlan Accreditation Star Rating Scoring MY2024 With Child CAHPS Survey Results	TOTAL Weight	TOTAL ACCRD Score MY2024	TOTAL Measure Score (Weight*Score)	Calculated Score (Not-Rounded)	Star Rating (Rounded) + 0.5 Bonus points overall	
Overall Rating (CAHPS + Accreditation Measures)	60	135	164.5	2.741666667	3.0	★ ★ ★ ☆ ☆
Patient Experience	7.5	12	18	2.400	2.5	★ ★ ★ ☆ ☆
Prevention and Population	19.5	52	61.5	3.154	3.0	★ ★ ★ ☆ ☆
Treatment	33	71	85	2.576	2.5	★ ★ ★ ☆ ☆

MY2023 Star Rating w/Child CAHPS survey results (not submitted for HPA):

Final Overall Rating +.5 Bonus	3.752101
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HEDIS HealthPlan Accreditation Star Rating Scoring MY2023 With Child CAHPS Survey Results	TOTAL Weight	TOTAL ACCRD Score MY2022	TOTAL ACCRD Score MY2023	TOTAL Measure Score (Weight*Score)	Calculated Score (Not-Rounded)	Star Rating (Rounded) + 0.5 Bonus points	
Overall Rating (CAHPS + Accreditation Measures)	59.5	153	155	193.5	3.252101	4.0	★ ★ ★ ★ ☆
Child CAHPS Rating	7.5	12	9	13.5			
Patient Experience	7.5	12	9	13.5	1.800	2	★ ★ ★ ☆ ☆
Prevention and Equity	18	39	52	66	3.667	3.5	★ ★ ★ ☆ ☆
Treatment	34	102	94	114	3.353	3.5	★ ★ ★ ☆ ☆

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7.3 MY2024 HEDIS HealthPlan Accreditation (HPA) – HealthPlan Rating Score Adults CAHPS - Change from Prior Year

Percentile	Score Rating
> 90th Percentile	5
67th – 90th Percentile	4
33rd – 66th Percentile	3
10th – 32nd Percentile	2
< 10th Percentile	1

Rounding Rules	
0.000–0.249 → 0.0	2.750–3.249 → 3.0
0.250–0.749 → 0.5	3.250–3.749 → 3.5
0.750–1.249 → 1.0	3.750–4.249 → 4.0
1.250–1.749 → 1.5	4.250–4.749 → 4.5
1.750–2.249 → 2.0	≥4.750 → 5.0
2.250–2.749 → 2.5	

MY2024 Projected Star Rating w/Adult CAHPS survey results (not submitted for HPA):

Final Overall Rating +.5 Bonus	3.19166667
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HEDIS HealthPlan Accreditation Star Rating Scoring MY2024 With Adult CAHPS Survey Results	MY 2024 Final Rate	TOTAL Weight	TOTAL ACCRD Score MY2024	TOTAL Measure Score (Weight*Score)	Calculated Score (Not-Rounded)	Star Rating (Rounded) + 0.5 Bonus points	
Overall Rating (CAHPS + Accreditation Measures)		60	133	161.5	2.691666667	3.0	☆☆☆☆☆
Patient Experience		7.5	10	15	2.000	2.0	☆☆☆☆☆
Prevention and Population		19.5	52	61.5	3.154	3.0	☆☆☆☆☆
Treatment		33	71	85	2.576	2.5	☆☆☆☆☆

MY2023 Final Health Plan Rating w/Adult CAHPS survey results (submitted for HPA):

Final Overall Rating +.5 Bonus	3.62605042
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HEDIS HealthPlan Accreditation Star Rating Scoring MY2023 With Adult CAHPS Survey Results	TOTAL Weight	TOTAL ACCRD Score MY2023	TOTAL Measure Score (Weight*Score)	Calculated Score (Not-Rounded)	Star Rating (Rounded) + 0.5 Bonus points	
Overall Rating (CAHPS + Accreditation Measures)	59.5	148	186	3.12605042	3.5	☆☆☆☆☆
Patient Experience	7.5	8	12	1.600	1.5	☆☆☆☆☆
Prevention and Equity	18	50	64	3.556	3.5	☆☆☆☆☆
Treatment	34	90	110	3.235	3.5	☆☆☆☆☆

8.0 MY2024 HEDIS HealthPlan Accreditation (HPA) – Measurement Set Descriptions

HEDIS Measure	Measure Indicator	Measure Definition
Antidepressant Medication Management (AMM)	<ul style="list-style-type: none"> Continuation Phase Treatment Acute Phase Treatment 	<ul style="list-style-type: none"> The percentage of members 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression and who remained on an antidepressant medication treatment. <ul style="list-style-type: none"> Effective Acute Phase Treatment. The percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks). Effective Continuation Phase Treatment. The percentage of members who remained on an antidepressant medication for at least 180 days (6 months).
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)	<ul style="list-style-type: none"> Total 	<ul style="list-style-type: none"> The percentage of episodes for members ages 3 months and older with a diagnosis of acute bronchitis/ bronchiolitis that did not result in an antibiotic dispensing event. <p>Note: This measure is reported as an inverted rate [1-(numerator/eligible population)]. A higher rate indicates appropriate acute bronchitis/bronchiolitis treatment (i.e., the proportion for episodes that did not result in an antibiotic dispensing event).</p>
Adult Immunization Status (AIS-E)	<ul style="list-style-type: none"> Influenza immunizations for adults Td/Tdap immunizations for adults Zoster immunizations for adults Pneumococcal immunizations for adults 	<ul style="list-style-type: none"> The percentage of members 19 years of age and older who are up to date on recommended routine vaccines for influenza, tetanus and diphtheria (Td) or tetanus, diphtheria and acellular pertussis (Tdap), zoster and pneumococcal.

HEDIS Measure	Measure Indicator	Measure Definition
Follow-Up Care for Children Prescribed ADHD Medication—Continuation & Maintenance Phase (ADD-E)	<ul style="list-style-type: none"> • Initiation Phase • Continuation and Maintenance (C&M) Phase 	<ul style="list-style-type: none"> • The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed. Two rates are reported. <ul style="list-style-type: none"> ○ Initiation Phase. The percentage of members 6–12 years of age with a prescription dispensed for ADHD medication, who had one follow-up visit with a practitioner with prescribing authority during the 30-day Initiation Phase. ○ Continuation and Maintenance (C&M) Phase. The percentage of members 6–12 years of age with a prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.
Asthma Medication Ratio (AMR)	<ul style="list-style-type: none"> • 5–64 years • Total 	<ul style="list-style-type: none"> • The percentage of members 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics—Total (APP)	<ul style="list-style-type: none"> • Total 	<ul style="list-style-type: none"> • The percentage of children and adolescents 1–17 years of age who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.
Breast Cancer Screening (BCS-E)	<ul style="list-style-type: none"> • Total 	<ul style="list-style-type: none"> • The percentage of women 50–74 years of age who had a mammogram to screen for breast cancer.

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HEDIS Measure	Measure Indicator	Measure Definition
Cervical Cancer Screening (CCS)	<ul style="list-style-type: none"> Total 	<ul style="list-style-type: none"> The percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: <ul style="list-style-type: none"> Women 21–64 years of age who had cervical cytology performed within the last 3 years Women 30–64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years Women 30–64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting within the last 5 years
Childhood Immunization Status (CIS)	<ul style="list-style-type: none"> Combination 10 	<ul style="list-style-type: none"> The percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates. <ul style="list-style-type: none"> Combination 10. Children who have had all ten indicators (DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA, RV and Influenza).
Chlamydia Screening in Women (CHL)	<ul style="list-style-type: none"> Total 	<ul style="list-style-type: none"> The percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.
Colorectal Cancer Screening (COL-E)	<ul style="list-style-type: none"> Total 	<ul style="list-style-type: none"> The percentage of members 45–75 years of age who had appropriate screening for colorectal cancer.
Controlling High Blood Pressure (CBP)	<ul style="list-style-type: none"> Total 	<ul style="list-style-type: none"> The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm Hg) during the measurement year.

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HEDIS Measure	Measure Indicator	Measure Definition
Appropriate Testing for Pharyngitis(CWP)	<ul style="list-style-type: none"> Total 	<ul style="list-style-type: none"> The percentage of episodes for members 3 years and older where the member was diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)	<ul style="list-style-type: none"> Diabetes Screening 	<ul style="list-style-type: none"> The percentage of members 18–64 years of age with schizophrenia, schizoaffective disorder or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	<ul style="list-style-type: none"> 7 days Total 	<ul style="list-style-type: none"> The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness. <ul style="list-style-type: none"> The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse Dependence (FUA)	<ul style="list-style-type: none"> 7 days Total 	<ul style="list-style-type: none"> The percentage of emergency department (ED) visits for members 13 years of age and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, who had a follow up visit for AOD. <ul style="list-style-type: none"> The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).
Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)	<ul style="list-style-type: none"> 7 days Total 	<ul style="list-style-type: none"> The percentage of acute inpatient hospitalizations, residential treatment or detoxification visits for a diagnosis of substance use disorder among members 13 years of age and older that result in a follow-up visit or service for substance use disorder. <ul style="list-style-type: none"> The percentage of visits or discharges for which the member received follow-up for substance use disorder within the 7 days after the visit or discharge.

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HEDIS Measure	Measure Indicator	Measure Definition
Blood Pressure Control (<140/90) for Patients With Diabetes (BPD)	<ul style="list-style-type: none"> • Total 	<ul style="list-style-type: none"> • The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.
Glycemic Status Assessment for Patients With Diabetes (GSD)	<ul style="list-style-type: none"> • HbA1c Control (<8%) 	<ul style="list-style-type: none"> • The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose hemoglobin A1c (HbA1c) was at the following levels during the measurement year: <ul style="list-style-type: none"> ○ HbA1c Control (<8%) ○ HbA1c poor control (>9.0%). <p><i>Note: Organizations must use the same data collection method (Administrative or Hybrid) to report these indicators.</i></p>
Eye Exam for Patients With Diabetes (EED)	<ul style="list-style-type: none"> • Eye Exam for Patients With Diabetes 	<ul style="list-style-type: none"> • The percentage of members 18–75 years of age with diabetes (types 1 and 2) who had a retinal eye exam.
Kidney Health Evaluation for Patients with Diabetes (KED)	<ul style="list-style-type: none"> • Kidney Health Evaluation for Patients With Diabetes—Total 	<ul style="list-style-type: none"> • The percentage of members 18–85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR), during the measurement year.

HEDIS Measure	Measure Indicator	Measure Definition
Initiation and Engagement of Substance Use Disorder Treatment— (IET)	<ul style="list-style-type: none"> • Engagement of SUD Treatment • Total 	<ul style="list-style-type: none"> • The percentage of new substance use disorder (SUD) episodes that result in treatment initiation and engagement. Two rates are reported: <ul style="list-style-type: none"> ○ Initiation of SUD Treatment. The percentage of new SUD episodes that result in treatment initiation through an inpatient SUD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visits or medication treatment within 14 days. ○ Engagement of SUD Treatment. The percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation.
Use of Imaging Studies for Low Back Pain (LBP)	<ul style="list-style-type: none"> • Imaging for Low Back Pain 	<ul style="list-style-type: none"> • The percentage of members with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis. <ul style="list-style-type: none"> ○ The measure is reported as an inverted rate [1–(numerator/eligible population)]. A higher score indicates appropriate treatment of low back pain (i.e., the proportion for whom imaging studies did not occur).
Immunizations for Adolescents (IMA)	<ul style="list-style-type: none"> • Combination 2 	<ul style="list-style-type: none"> • The percentage of adolescents 13 years of age who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday. The measure calculates a rate for each vaccine and two combination rates. <ul style="list-style-type: none"> ○ Combination 2. Adolescents who have had all three indicators (meningococcal, Tdap and HPV).
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)	<ul style="list-style-type: none"> • Total 	<ul style="list-style-type: none"> • The percentage of children and adolescents 1–17 years of age who had two or more antipsychotic prescriptions and had metabolic testing. Three rates are reported, the percentage of children and adolescents on antipsychotics who received blood glucose testing, cholesterol testing, and both blood glucose and cholesterol testing. <ul style="list-style-type: none"> ○ Total. The sum of the age stratifications (1-17) as of December 31 of the measurement year.

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HEDIS Measure	Measure Indicator	Measure Definition
Prenatal and Postpartum Care (PPC)	<ul style="list-style-type: none"> • Timeliness of Prenatal Care • Postpartum Care 	<ul style="list-style-type: none"> • The percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care. <ul style="list-style-type: none"> ○ Timeliness of Prenatal Care. The percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization. ○ Postpartum Care. The percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery.
Prenatal Immunization Status (PRS-E)	<ul style="list-style-type: none"> • Combination Rate 	<ul style="list-style-type: none"> • The percentage of deliveries in the Measurement Period in which women had received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations.
Pharmacotherapy Management of COPD Exacerbation (PCE)	<ul style="list-style-type: none"> • Systemic Corticosteroid • Bronchodilator 	<ul style="list-style-type: none"> • The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1–November 30 of the measurement year and who were dispensed appropriate medications. Two rates are reported: <ol style="list-style-type: none"> 1. Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of the event. 2. Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event. <ul style="list-style-type: none"> ○ Note: <i>The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.</i>
Pharmacotherapy for Opioid Use Disorder (POD)	<ul style="list-style-type: none"> • Total 	<ul style="list-style-type: none"> • The percentage of new opioid use disorder (OUD) pharmacotherapy events with OUD pharmacotherapy for 180 or more days among members age 16 and older with a diagnosis of OUD. <ul style="list-style-type: none"> ○ A 12-month period that begins on July 1 of the year prior to the measurement year and ends on June 30 of the measurement year.

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HEDIS Measure	Measure Indicator	Measure Definition
Plan All-Cause Readmissions— (PCR)	<ul style="list-style-type: none"> • Observed-to-Expected Ratio • 18-64 years • Total 	<ul style="list-style-type: none"> • For members 18 years of age and older, the number of acute inpatient and observation stays during the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days and the predicted probability of an acute readmission. <p><i>Note: For commercial and Medicaid, report only members 18–64 years of age.</i></p>
Race/Ethnicity Diversity of Membership- (RDM)	<ul style="list-style-type: none"> • Race/Ethnicity Direct 	<ul style="list-style-type: none"> • An unduplicated count and percentage of members enrolled any time during the measurement year, by race and ethnicity.
Language Diversity of Membership (LDM)	<ul style="list-style-type: none"> • Spoken Language Preferred • Preferred Language for Written Materials 	<ul style="list-style-type: none"> • An unduplicated count and percentage of members enrolled at any time during the measurement year by spoken language preferred for health care and preferred language for written materials.
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	<ul style="list-style-type: none"> • Non-Medicare 80% Coverage 	<ul style="list-style-type: none"> • The percentage of members 18 years of age and older during the measurement year with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.
Statin Therapy for Patients With Cardiovascular Disease (SPC)	<ul style="list-style-type: none"> • Total. • Statin Therapy • Statin Adherence 80% 	<ul style="list-style-type: none"> • The percentage of males 21–75 years of age and females 40–75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria. The following rates are reported: <ul style="list-style-type: none"> ○ Received Statin Therapy. Members who were dispensed at least one high-intensity or moderate-intensity statin medication during the measurement year. ○ Statin Adherence 80%. Members who remained on a high-intensity or moderate-intensity statin medication for at least 80% of the treatment period.

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HEDIS Measure	Measure Indicator	Measure Definition
Statin Therapy for Patients With Diabetes (SPD)	<ul style="list-style-type: none"> • Received Statin Therapy • Statin Adherence 80% 	<ul style="list-style-type: none"> • The percentage of members 40–75 years of age during the measurement year with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. Two rates are reported: <ul style="list-style-type: none"> ○ Received Statin Therapy. Members who were dispensed at least one statin medication of any intensity during the measurement year. ○ Statin Adherence 80%. Members who remained on a statin medication of any intensity for at least 80% of the treatment period.
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	<ul style="list-style-type: none"> • BMI Percentile Documentation 	<ul style="list-style-type: none"> • The percentage of members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year. <ul style="list-style-type: none"> ○ BMI Percentile Documentation. Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.