

CalPERS PHM Dashboard for All Basic Health Plans, 2016 and 2017

| Year ¹ | 2016 | 2017 | Trend |
|--|------------------|-----------|-------|
| Summary Demographics | | | |
| Number of Members (average) | 1,078,688 | 1,081,367 | ↑ |
| Average Age | 36 | 36 | = |
| Gender (% female) | 53% | 53% | = |
| Gender (% male) | 47% | 47% | = |
| Major Chronic Conditions Prevalence - Percent of Members | | | |
| | Lower is Better | | |
| Asthma | 3.31% | 3.35% | ↑ |
| Chronic Obstructive Pulmonary Disease | 1.44% | 1.45% | ↑ |
| Coronary Artery Disease | 0.98% | 0.95% | ↓ |
| Depression | 4.83% | 4.69% | ↓ |
| Diabetes | 5.86% | 5.60% | ↓ |
| Heart Failure | 0.17% | 0.17% | = |
| Hypertension | 7.30% | 7.02% | ↓ |
| Lower Back Disorders | 6.33% | 6.12% | ↓ |
| Lifestyle Risks (for Kaiser Permanente members only) | | | |
| | Lower is Better | | |
| % of Adults who are Obese ² | 43.05% | 43.28% | ↑ |
| % of Children who are Obese ² | 4.94% | 4.88% | ↓ |
| % of Adults with Blood Pressure >= 140/90 | 5.95% | 6.06% | ↑ |
| Clinical Quality Measures³ (HEDIS Acronym)⁴ | | | |
| | Higher is Better | | |
| Antidepressant Medication Management – Acute Phase (AMM-Acute Phase) | 74.51% | 73.82% | ↓ |
| Antidepressant Medication Management – Continuation Phase (AMM-Continuation Phase) | 58.26% | 56.56% | ↓ |
| Appropriate Treatment for Children with Upper Respiratory Infection (URI) | 92.60% | 93.12% | ↑ |
| Breast Cancer Screening (BCS) | 77.59% | 71.34% | ↓ |
| Cervical Cancer Screening (CCS)* | 69.30% | 69.60% | ↑ |
| Chronic Obstructive Pulmonary Disease - Pharmacotherapy Management of COPD Exacerbation: Systemic Corticosteroid (within 14 days) (PCE-14) | 75.90% | 73.27% | ↓ |
| Chronic Obstructive Pulmonary Disease - Pharmacotherapy Management of COPD Exacerbation: Bronchodilator (within 30 days) (PCE-30) | 84.46% | 85.92% | ↑ |
| Colorectal Cancer Screening (COL)* | 54.12% | 55.58% | ↑ |
| Diabetes – Nephropathy (CDC)* | 87.00% | 85.43% | ↓ |
| Diabetes – Hemoglobin A1c Testing (CDC)* | 88.63% | 89.15% | ↑ |
| Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART) | 83.80% | 84.04% | ↑ |
| Persistence of Beta-Blocker Treatment After a Heart Attack (PBH) | 79.91% | 82.30% | ↑ |
| Use of Imaging Studies for Low Back Pain (LBP) | 84.83% | 84.26% | ↓ |

| Other Measures | Lower is Better | | |
|---|-----------------|--------|---|
| Maternity Outcomes | | | |
| Cesarean Section Delivery Rates | 29.00% | 22.64% | ↓ |
| | | | |
| Inpatient and Emergency Room | | | |
| Inpatient Admits Per 1,000 | 48.5 | 46.4 | ↓ |
| Plan All-Cause Readmission Rate (Total PCR) | 9.73% | 9.27% | ↓ |
| Inpatient Average Length of Stay (days) | 4.65 | 4.50 | ↓ |
| Emergency Room Visits Per 1,000 | 171.23 | 181.50 | ↑ |

Notes:

PHM: Population Health Management

Plans pulled for the data: Anthem EPO, Anthem HMO Select, Anthem HMO Traditional, Blue Shield Access+, Blue Shield Access+ EPO, Blue Shield NetValue, Health Net Salud y Mas, Health Net SmartCare, Kaiser, Sharp, and UHC Alliance HMO.

Information pulled from Health Care Decision Support System (HCDSS) includes dynamic refreshes to the Population Health Management (PHM) dashboard.

¹ Year 2016 data will be different from last year. When comparing data, it is optimal to compare data across the same refreshes.

² "Obese" is defined as Body Mass Index (BMI) ≥ 30.0 .

³ As the Clinical Quality Measure analyses are not audited, these are considered "HEDIS-Like" data as opposed to "HEDIS." Current "HEDIS-Like" definitions are from 2016. 2016 "HEDIS-Like" definitions are used for 2017 year temporarily due to pending data warehouse refreshes.

⁴ "HEDIS Acronyms" are the three-letter designations used by the National Committee for Quality Assurance to uniquely identify HEDIS measures.

* "Hybrid measure" for which carriers gather additional information from patients' medical records for HEDIS. "Hybrid measure" are more difficult for HCDSS to report accurately due to requirement of additional data sets. Some of the previous reported data sets were removed, due to discovery of missing fields sent by the health plans to HCDSS.