

*Tip Sheet*  
**Assessing Health Plans' NCQA HEDIS Performance**

**Purpose:**

The purpose of this tip sheet is to provide information on how to determine how a specific health plan performed on the National Committee for Quality Assurance's (NCQA) Health Effectiveness Data and Information Set (HEDIS) measures.

**Background:**

NCQA administers the HEDIS performance measurement program for health plans. HEDIS is a set of performance measures utilized by more than 90% of US health plans. HEDIS measures provide a method to directly compare quality and performance across health plans. In addition, health plans must maintain a certain level of HEDIS performance in order to participate in the Medicare Advantage program as well as Medicaid. Health plans that score poorly on HEDIS measures and STAR ratings can face financial and contractual penalties that are imposed by the Centers for Medicare & Medicaid Services (CMS).

HEDIS consists of 81 measures across five (5) domains of care. HEDIS measures are used to compare how well a health plan performed in the following areas:

- Quality of care
- Access to care
- Member satisfaction with the health plan

Additional measures have been added to the HEDIS data set to measure health plan performance in providing preventive care services to their members.

**Procedure:**

1. First, access the NCQA website dedicated to providing health plan report cards using the following link:

<http://healthplanrankings.ncqa.org>

The following screenshot shows the NCQA webpage at that link:



**NCQA Health Insurance Plan Rankings 2013 - 2014**

Search for a Health Plan Here:

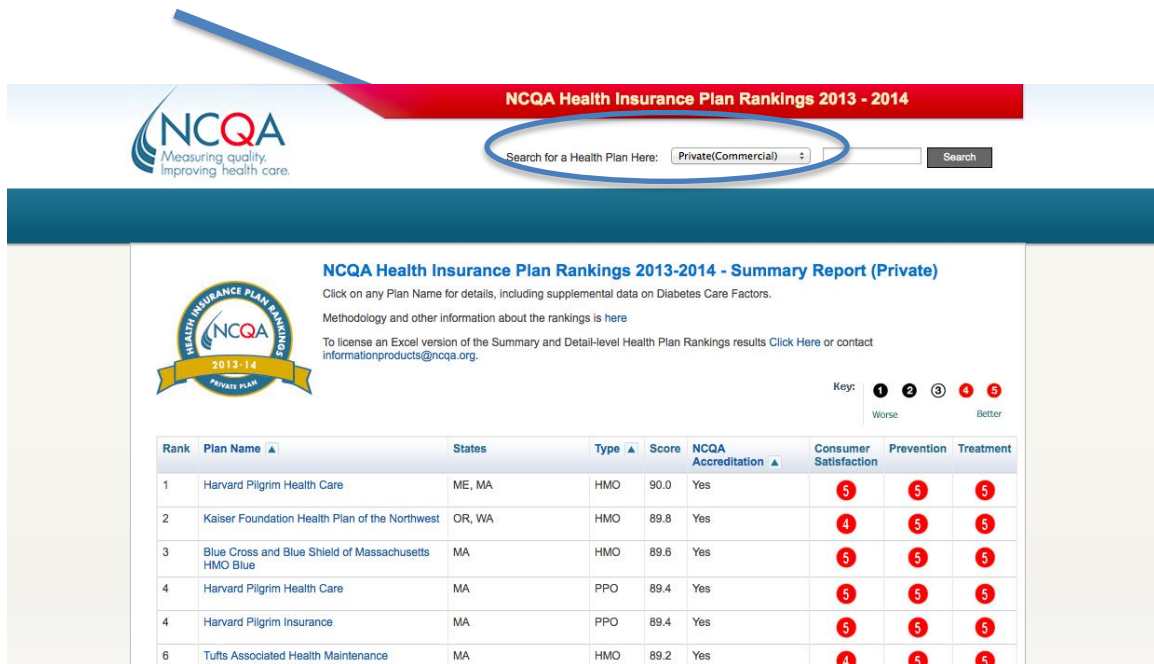
**NCQA Health Insurance Plan Rankings 2013-2014 - Summary Report (Private)**

Click on any Plan Name for details, including supplemental data on Diabetes Care Factors.  
Methodology and other information about the rankings is here  
To license an Excel version of the Summary and Detail-level Health Plan Rankings results Click Here or contact informationproducts@ncqa.org.

Key: 1 2 3 4 5  
Worse Better

Rank	Plan Name	States	Type	Score	NCQA Accreditation	Consumer Satisfaction	Prevention	Treatment
1	Harvard Pilgrim Health Care	ME, MA	HMO	90.0	Yes	5	5	5
2	Kaiser Foundation Health Plan of the Northwest	OR, WA	HMO	89.8	Yes	4	5	5
3	Blue Cross and Blue Shield of Massachusetts HMO Blue	MA	HMO	89.6	Yes	5	5	5
4	Harvard Pilgrim Health Care	MA	PPO	89.4	Yes	5	5	5
4	Harvard Pilgrim Insurance	MA	PPO	89.4	Yes	5	5	5
6	Tufts Associated Health Maintenance Organization	MA	HMO	89.2	Yes	4	5	5

- The webpage defaults to provide a listing of health plans that are in the Private (Commercial) category.



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- For a Medicare Advantage plan, select the drop down menu and select the "Medicare" option:



**NCQA Health Insurance Plan Rankings 2013 - 2014**

Search for a Health Plan Here: Private(Commercial) Medicaid ✓ Medicare

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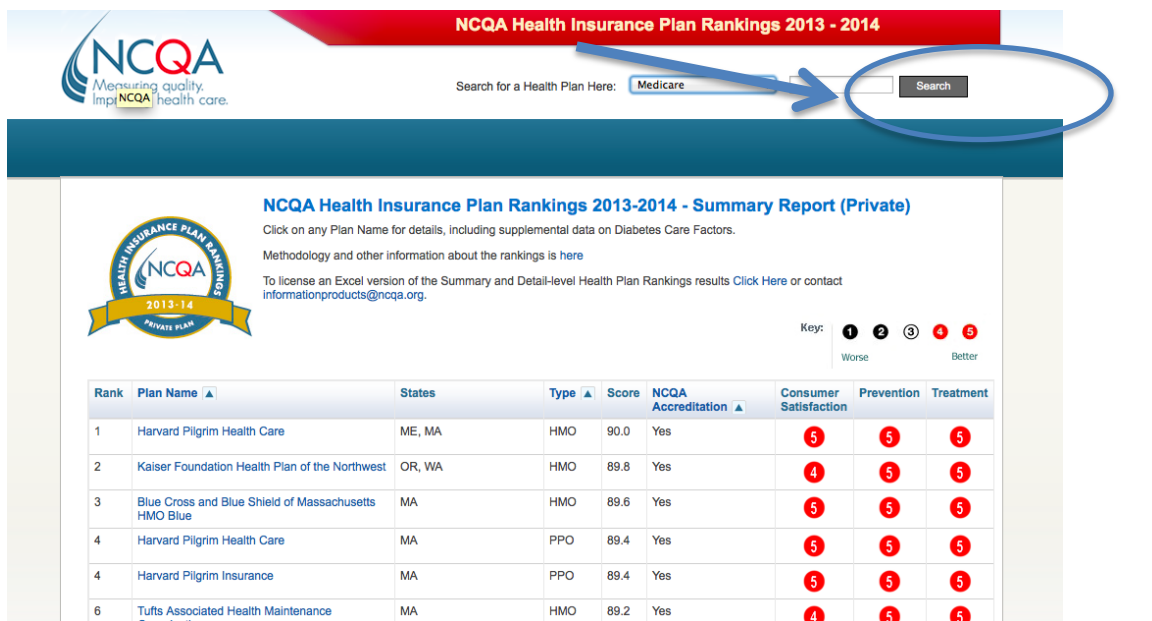
Methodology and other information about the rankings is here

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- Once you select the Medicare option, the list will refresh to remove all plans that are not Medicare health plans. You now have the option of searching for a plan by name by typing the name of the plan in the Search tool:



**NCQA Health Insurance Plan Rankings 2013 - 2014**

Search for a Health Plan Here:

**NCQA Health Insurance Plan Rankings 2013-2014 - Summary Report (Private)**

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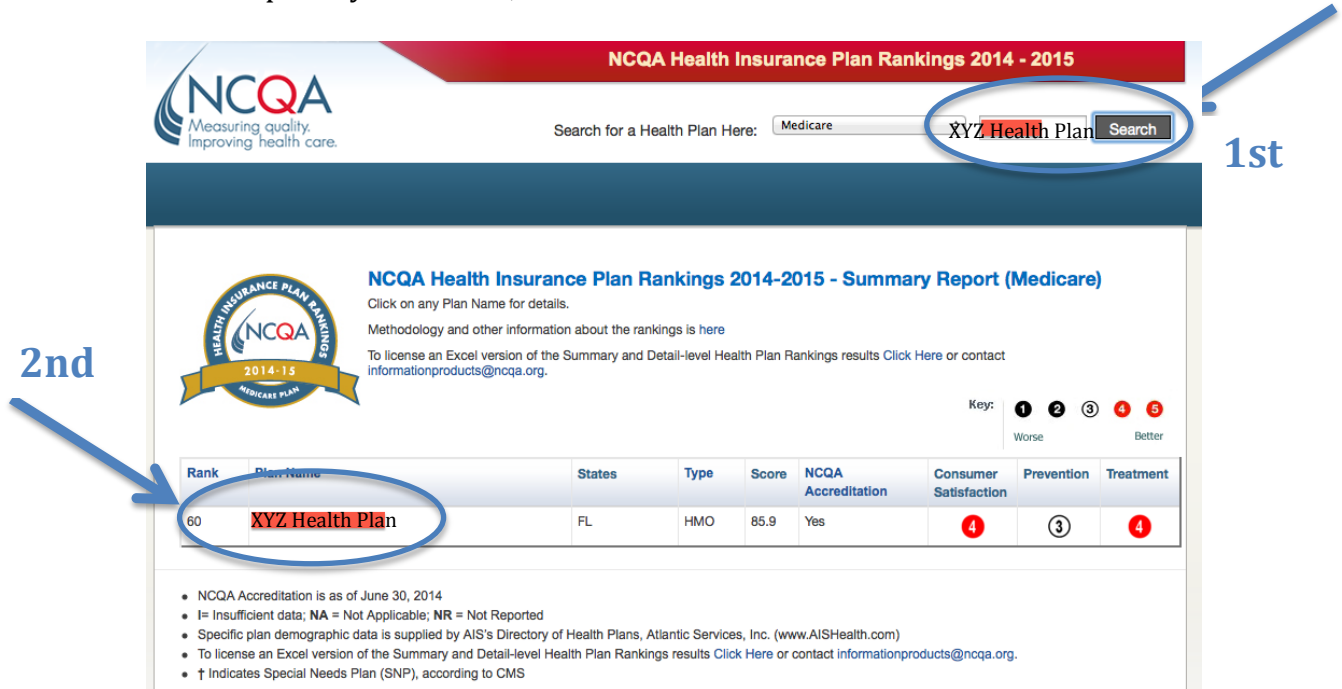
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- First, type in the name of the plan you are interested in, and a listing of plans with that name will be provided. Second, select the health plan you're interested in from that list. In this example, we searched for XYZ Health Plan, and found there is one plan by that name, which is located in Florida.



**1st**

**2nd**

NCQA Health Insurance Plan Rankings 2014 - 2015

Search for a Health Plan Here: Medicare **XYZ Health Plan** Search

**NCQA**  
Measuring quality.  
Improving health care.

**NCQA Health Insurance Plan Rankings 2014-2015 - Summary Report (Medicare)**  
Click on any Plan Name for details.  
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Key: 1 2 3 4 5  
Worse Better

Rank	Plan Name	States	Type	Score	NCQA Accreditation	Consumer Satisfaction	Prevention	Treatment
60	<b>XYZ Health Plan</b>	FL	HMO	85.9	Yes	4	3	4

- NCQA Accreditation is as of June 30, 2014
- I= Insufficient data; NA = Not Applicable; NR = Not Reported
- Specific plan demographic data is supplied by AIS's Directory of Health Plans, Atlantic Services, Inc. ([www.AISHealth.com](http://www.AISHealth.com))
- To license an Excel version of the Summary and Detail-level Health Plan Rankings results [Click Here](#) or contact [informationproducts@ncqa.org](mailto:informationproducts@ncqa.org).
- † Indicates Special Needs Plan (SNP), according to CMS

- The summary report will open when you select the plan, which provides the overall score that the health plan obtained for each domain. The scores are rated from 1 to 5. 1 is the lowest score and 5 is the highest score. Health plans want to move as many scores as possible to the 5 category. Identify areas where the health plan scored poorly to target your marketing efforts.

**NCQA Health Insurance Plan Rankings 2014 - 2015**

**NCQA**  
Measuring quality. Improving health care.

Search for a Health Plan Here:

[← return to summary results](#)

**NCQA Health Insurance Plan Rankings 2014-2015 - Detail Report (Medicare)**

Plan Name: ██████████  
 URL: **XYZ Health Plan**  
 States: **www.xyzhealth.com**  
 FL

Ranked: 60  
 Overall Score: 85.9  
 NCQA Accreditation: Yes

Key: 1 2 3 4 5  
 Worse Better

Plan Details	Score
+ Consumer Satisfaction	4
+ Prevention	3
+ Treatment	4

9. In order to obtain the detailed scoring for a specific domain, select the plus (+) sign next to that category. That category will expand to list specific measures.

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 States: **FL**

Ranked: 60  
 Overall Score: 85.9  
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Key: 1 2 3 4 5  
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Plan Details	Score
+ Consumer Satisfaction	4
+ Prevention	3
+ Treatment	4



Treatment		4
Diabetes		4
<b>Blood pressure control (140/80)</b> Did diabetic members 75 and younger have their blood pressure below 140/80 at their last visit?		2
<b>Blood pressure control (140/90)</b> Did diabetic members 75 and younger have their blood pressure below 140/90 at their last visit?		2
<b>Retinal eye exams</b> Did diabetic members 75 and younger have a retinal eye exam?		4
<b>Glucose testing</b> Did diabetic members 75 and younger have their blood sugar level checked?		3
<b>Glucose control</b> Did diabetic members 75 and younger maintain their blood sugar level at 9 percent or below?		4
<b>LDL cholesterol screening</b> Did diabetic members 75 and younger have their LDL cholesterol level checked?		4
<b>LDL cholesterol control</b> Did diabetic members 75 and younger maintain their LDL cholesterol below 100 milligrams per deciliter?		4
<b>Monitoring kidney disease</b> Did diabetic members 75 and younger have their kidney function checked?		4
Heart disease		3
<b>Beta blocker after heart attack</b> Did heart-attack patients 35 or older receive beta blockers for at least six months?		3
<b>Controlling high blood pressure</b> Did hypertensive patients 85 and younger have their blood pressure below 140/90 at their last visit?		3
<b>Smoking advice</b> Were smokers advised to stop?		NA
<b>LDL cholesterol screening</b> Did members 75 and younger with heart disease have their LDL cholesterol checked?		5
<b>LDL cholesterol control</b> Did members 75 and younger with heart disease keep their LDL cholesterol below 100 milligrams per deciliter?		4

10. Additional detail shows that this health plan has deficiencies in the area of “Managing risk of falls”, among others.

Other treatment measures	
<b>Managing risk of falls</b> Were members with balance or walking problems with balance or walking seen by a practitioner and receive intervention to lower their risk?	3
<b>Avoiding harmful drug and disease interactions</b> Were members not prescribed drugs considered potentially harmful because of their disease or condition?	3
<b>Medication for rheumatoid arthritis</b> Did members newly diagnosed with rheumatoid arthritis get the right drug?	2
<b>Monitoring key long-term medications</b> Were adults with six-month prescriptions for certain drugs monitored appropriately?	4
<b>Steroid after hospitalization for acute COPD</b> Did members who were hospitalized for chronic obstructive pulmonary disease receive systemic corticosteroids within 14 days?	4
<b>Bronchodilator after hospitalization for acute COPD</b> Did members who were hospitalized for chronic obstructive pulmonary disease receive a bronchodilator within 30 days of their discharge?	4
<b>Testing for osteoporosis</b> Did women undergo bone-density testing?	5
<b>Managing osteoporosis in women after fracture</b> Did women 67 and older with a fracture get a bone mineral density test or appropriate drugs in next six months?	3
<b>Testing for COPD</b> Did members have a spirometry test to confirm chronic obstructive pulmonary disease?	5
<b>Discussing urinary incontinence</b> Did members discuss urinary incontinence with a physician in the last six months?	3

**Utility of the Data:**

Knowing how a plan performed in a specific HEDIS measure can provide a direct opportunity to propose an evidence-based intervention to help the plan improve its HEDIS score. In this example, their current score in the area of managing risk of falls could improve. An evidence-based falls prevention program could be a welcome service that the plan may wish to purchase from a community-based organization.