

HEDIS® MY 2022

A Detailed Data Set From the Year 2022

COMMERCIAL PRODUCT



We are pleased to present the AvMed HEDIS MY 2022 Report, a detailed data set designed to give employers and consumers an objective look at how we're keeping members well and how we're caring for members when they're sick.

The National Committee for Quality Assurance developed HEDIS (Healthcare Effectiveness Data and Information Set) as a framework for health plans to collect, analyze and report identical performance measurements each year. In fact, more than 90 percent of America's health plans utilize HEDIS to measure performance on important dimensions of care and service. Quality health care can be defined as the extent to which members get the care they need in a manner that most effectively protects or restores their health. The performance measures in HEDIS are related to many significant public health issues such as cancer, heart disease, smoking, asthma and diabetes. HEDIS allows objective assessment of a health plan's value in comparison with other health plans. HEDIS has gone a long way in showing employers how their employees will be treated in various areas of health care services. Choosing a high-quality health plan plays a significant role in determining whether employees will get high-quality care.

The scope of the NCQA HEDIS Compliance Audit includes the following domains:

- Effectiveness of Care
- Access/Availability of Care
- Experience of Care
- Health Plan Descriptive Information
- Utilization and Risk Adjusted Utilization
- Measures Collected Using Electronic Clinical Data Systems

AvMed has undergone a Full Audit.



Embrace better health®

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Effectiveness of Care

| Childhood immunization Status | |
|---|---|
| 4 DTaP by 2nd birthday | |
| 3 IPV by 2nd birthday | |
| 1 MMR between 1st and 2nd birthday | |
| 3 HiB by 2nd birthday | |
| 1 Hep A by 2nd birthday | |
| 3 Hep B by 2nd birthday | . 90.02% |
| 2 or 3 Rotavirus by 2nd birthday | . 86.62% |
| 2 Influenza by 2nd birthday | |
| 1 VZV between 1st and 2nd birthday | |
| 4 Pneumococcal conjugate | . 89.05% |
| | |
| Combo 7 (DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA, RV) | |
| Combo 10 (DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA, RV, Influenza) | 36 7/19/ |
| kv, iiiiueiizu) | 30.74/0 |
| Immunizations for Adolescents | |
| Meningococcal between 11th and 13th birthday | 83 31% |
| Tdap/TD between 10th and 13th birthday | |
| Human Papillomavirus Vaccine | .,2.,,,, |
| Adolescents (HPV) between 9th and 13th birthday | .32.32% |
| Combo 1 (Meningococcal & Tdap) | |
| Combo 2 (Meningococcal, Tdap & HPV) | . 31.21% |
| , , | |
| Appropriate Testing for Pharyngitis | |
| Members diagnosed with pharyngitis and on an | |
| | |
| antibiotic who received a group A strep test | .50.86% |
| antibiotic who received a group A strep test | 50.86% |
| antibiotic who received a group A strep test Appropriate Treatment for URI | .50.86% |
| antibiotic who received a group A strep test Appropriate Treatment for URI Members ages 3 months and older with a diagnosis | .50.86% |
| antibiotic who received a group A strep test Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed | |
| antibiotic who received a group A strep test Appropriate Treatment for URI Members ages 3 months and older with a diagnosis | |
| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic. | |
| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic Breast Cancer Screening | |
| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic Breast Cancer Screening Women, continuously enrolled for 2 years, who have | 79.52% |
| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic Breast Cancer Screening | 79.52% |
| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic Breast Cancer Screening Women, continuously enrolled for 2 years, who have received a mammogram within a two-year period Cervical Cancer Screening | 79.52% . 75.81% |
| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic Breast Cancer Screening Women, continuously enrolled for 2 years, who have received a mammogram within a two-year period Cervical Cancer Screening Women ages 21-64, continuously enrolled for three year | 79.52% . 75.81% s,who |
| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic Breast Cancer Screening Women, continuously enrolled for 2 years, who have received a mammogram within a two-year period Cervical Cancer Screening | 79.52% . 75.81% s,who |
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| Appropriate Treatment for URI Members ages 3 months and older with a diagnosis of upper respiratory infection who were not dispensed an antibiotic Breast Cancer Screening Women, continuously enrolled for 2 years, who have received a mammogram within a two-year period Cervical Cancer Screening Women ages 21-64, continuously enrolled for three year have received a Pap test within a three-year period Hemoglobin A1c Control for Patients With Diabe | 79.52% . 75.81% s, who . 74.32% tes . 29.20% |
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| Kidney Health Evaluation for Patients With Diabetes |
|---|
| Antidepressant Medication Management Effective acute phase treatment |
| Follow-up After Hospitalization for Mental Illness Received follow-up within 7 days of discharge |
| Controlling High Blood Pressure Adults 18-85 with hypertension who controlled blood pressure to <140/90 mm HG |
| Persistent beta blocker treatment after a heart attack |
| Avoidance of Antibiotic Treatment for Acute Bronchitis Ages 3 months and older diagnosed with acute bronchitis who were not dispensed an antibiotic |
| Use of Spirometry Testing in the Assessment and Diagnosis of COPD |
| Ages 40 and older with new diagnosis of, or newly active, COPD who received spirometry testing to confirm the diagnosis 40.84% |
| Pharmacotherapy Management of COPD Exacerbation Use of systemic corticosteroid |
| Use of Imaging Studies for Low Back Pain Percentage of members who were diagnosed with low back pain who did not have X-ray, MRI or CT scan |
| Colorectal Cancer Screening Ages 50-75 |

Access/Availability

| Adults' Access to Preventive/Ambulatory Health Ages 20-44 | | | | |
|--|---------|--|--|--|
| Ages 20-44Ages 45-64 | 96.43% | | | |
| Ages 65+ | 95.96% | | | |
| Prenatal and Postpartum Care | | | | |
| Timely prenatal care in first trimester | 70.37% | | | |
| Postpartum care between 7 and 84 days after delivery | 70.74% | | | |
| Well-Child Visits in the First 30 Months of Life | | | | |
| First 15 Months | 83.69% | | | |
| 15 Months - 30 Months | 85.83% | | | |
| Child and Adolescent Well-Care Visits | | | | |
| Percentage of children or adolescent aged 3-21 with more visits during the year. | one or | | | |
| Ages 3-11 | 69.81% | | | |
| Ages 12-17 | 60.96% | | | |
| Ages 18-21 | 40 20% | | | |
| 7,900 10 21 | 40.2070 | | | |

Satisfaction With the Experience of Care

The following results are from the National Committee for Quality Assurance's standardized member satisfaction survey, administered by DSS Research, an independent vendor.

Participants Responding "Usually" and "Always"

| Doctors communicate well | N/A |
|-----------------------------|-----|
| Easy to get care quickly | N/A |
| Claims processing efficient | |
| Customer service at AvMed | |
| Getting needed care | |

Participants Who Rated AvMed 8, 9, or 10 on a 10-Point scale with 10 Being Highest

Health Plan Stability

| Total Membership Product/Product Line HMO/POS Combined | Members* |
|--|----------|
| Commercial | |
| Medicare Exchange (HMO only) | • |
| TOTAL | |

^{*}Enrollment as of Dec. 31, 2022

Use of Services

Frequency of selected procedures

| Procedure | Age | Sex | Number of Procedures | Procedures/1,000 Members |
|-------------------------------|----------------------|-------------------------|----------------------|--------------------------|
| Tonsillectomy | 0-9 | M&F | 91 | 6.08 |
| <u> </u> | 10-19 | M&F | 31 | 1.47 |
| Hysterectomy, Abdominal | 15-44 | Female | 33 | 0.85 |
| | 45-64 | Female | 68 | 2.02 |
| | 65+ | Female | 4 | 1.29 |
| Hysterectomy, Vaginal | 15-44 | Female | 18 | 0.46 |
| | 45-64 | Female | 34 | 1.01 |
| | 65+ | Female | 3 | 0.97 |
| Cholecystectomy, Open | 30-64 | Male | 5 | 0.11 |
| | 15-44 | Female | i i | 0.03 |
| | 45-64 | Female | 4 | 0.12 |
| | 65+ 65+ | <u>Male</u> Female | <u>3</u> 3 | 0.82 0.97 |
| | 00+ | remale | <u> </u> | - |
| Cholecystectomy, Closed | 30-64 | _Male | 113 | 2.43 3.72 |
| (Laparoscopic) | 15-44 45-64 | <u>Female</u> Female | 145 | 3.72 4.40 |
| | 45- <u>64</u> 65+ | Male | 148 8 | 2.19 |
| | 65+ | Female | 11 | 3.56 |
| Deals Commons | 00.44 | | 0.4 | |
| Back Surgery | 20-44 20-44 | <u>Male</u> Female | <u>34</u> 31 | 1.21 0.93 |
| | 45-64 | Male | 103 | 3.48 |
| | 45-64 | Female | 107 | 3.18 |
| | 65+ | Male | 23 | 6.29 |
| | 65+ | Female | 15 | 4.85 |
| PCI | 45-64 | Male | 128 | 4.32 |
| | 45-64 | Female | 33 | 0.98 |
| | 65+ 65+ | <u>Male</u> Female | 39 10 | 10.67 3.23 |
| Cardiac Catheterization | 45-64 | Mala | 222 | 7.50 |
| Cararac Camererization | 45-64 | <u>Male</u> Female | <u>222</u> 151 | 4.49 |
| | 65+ | Male | 55 | 15.04 |
| | 65+ | Female | 27 | 8.73 |
| Coronary Artery Bypass Graft | 45-64 | Male | 39 | 1.32 |
| Colonary Ariery Bypass Gran | 45-64 | Female | 11 | 0.33 |
| | 65+ | Male | 15 | 4.10 |
| | 65+ | Female | 2 | 0.65 |
| Prostatectomy | 45-64 | Male | 75 | 2.53 |
| | 65+ | Male | 75 35 | 2.53 9.57 |
| Mastostomy | 15-44 | Eomalo | 28 | 0.72 |
| Mastectomy | 45-64 | <u>Female</u> Female | <u>20</u> 74 | 0.72 2.20 |
| | 65+ | Female | 10 | 3.23 |
| Lumpectomy | 15-44 | Female | 46 | 1.18 |
| | 45-64 | Female | 142 | 4.23 |
| | 65+ | Female | 20 | 6.47 |
| Bariatric Weight Loss Surgery | 0-19 | Male | 0 | 0 |
| | 0-19 | Female | 1 | 0.06 |
| | 20-44 | Male | 32 | 1.14 |
| | 20-44 45-64 | Female Male | 114 31 | 3.41 1.05 |
| | 45-64 | Female | <u></u> | 3.48 |
| | 65+ | Male | Ő | 0 |
| | 65+ | Female | 0 | 0 |

Plan Description

Member Enrollment by Age

| Age | Total |
|--------------------|---------|
| <1 | 1,459 |
| 1-4 | 5,551 |
| 5-9 | 7,957 |
| 10-14 | 9,612 |
| 15-17 | 6,733 |
| 18-19 | 4,734 |
| 0-19 Subtotal | 36,046 |
| 0-19 Subtotal % | 21.50% |
| | |
| 20-24 | 12,906 |
| 25-29 | 10,632 |
| 30-34 | 11,607 |
| 35-39 | 12,973 |
| 40-44 | 13,498 |
| 20-44 Subtotal | 61,616 |
| 20-44 Subtotal % | 36.75% |
| 45-49 | 14,825 |
| 50-54 | 16,494 |
| 55-59 | 17,018 |
| 60-64 | 14,907 |
| 45-64 Subtotal | 63,244 |
| 45-64 Subtotal % | 37.72% |
| 65-69 | 4,501 |
| 70-74 | 1,402 |
| 75-79 | 563 |
| 80-84 | 206 |
| 85-89 | 67 |
| >=90 | 32 |
| >=65 Subtotal | 6,771 |
| >=65 Subtotal % | 4.04% |
| >=00 Jubilitiui /0 | 4.0470 |
| Total | 167,677 |



AVMED CORPORATE OFFICES

3470 NW 82nd Avenue Suite 1100 Doral, FL 33122 305-671-5437

4300 NW 89th Blvd. Gainesville, FL 32606 352-372-8400

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