

2018 Clinical Indicators Report

2017/2018 Results



The Clinical Indicators Report features comparative provider performance on measures of clinical quality, patient experience and affordability.



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November 2018

Dear friends and colleagues,

Welcome to the HealthPartners 2018 Clinical Indicators Report. This report continues our commitment to the Triple Aim of improving health, experience and cost and the transparent reporting of meaningful measures that reflect the quality of care delivered to our members and patients by our community of providers.

During the years this report has been distributed, we have seen consecutive year-over-year improvement in quality measures due to the impressive work by provider groups focused on quality and effectiveness of care. However, there is still much work to be done. In particular, in the last several years we have seen a national trend towards steady or declining rates on major preventive care screenings including chlamydia, as well as breast, cervical, and colorectal cancer. This trend serves as a call to action to find innovative ways to improve the health of our population and reverse this course. Your partnership and commitment to achieving the Triple Aim in the everyday care of your patients has a significant impact on our members, their families and our communities.

The goal of these measures is to align with and support efforts that are important to our community and the overall health of the population. In collaboration with Minnesota Community Measurement, our measures overlap with the Healthcare Effectiveness Data and Information Set (HEDIS). This combines local and national sources to create a broad list of quality measures that reflect better care for our members and patients and improved outcomes for the populations we serve.

This report would not be possible without the trust, engagement and partnership of all the provider groups that care for our members. Going forward we will continue to improve and innovate by partnering with these groups to strive for the best health and experience of care at the most affordable cost, which is the value our members deserve and expect.

On behalf of HealthPartners and our members, thank you for your ongoing dedication and proven ability to improve the health of our community.

Sincerely,

A handwritten signature in black ink, appearing to read "Andrew Zinkel". The signature is fluid and cursive.

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2018 CLINICAL INDICATORS REPORT

2017/2018 Results

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2018 CLINICAL INDICATORS REPORT

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HEDIS Identification of measures, or elements of measures that are consistent with HEDIS measurement specifications

INTRODUCTION

Purpose


This annual Clinical Indicators Report features comparative provider performance on measures of clinical quality, patient experience and affordability. The Triple Aim approach improves the health of the population, enhances the patient experience of care and helps make care more affordable. Measurement results displayed relate to preventive and chronic care, behavioral health, pharmacy, specialty care, hospital care and total cost of care. The primary purpose is to provide valid and reliable information for providers to use in their efforts to improve patient care and outcomes.

Content

This year's Clinical Indicators Report includes comparative provider performance on 85 measures. Rates are reported by primary care provider group, specialty care provider group, pharmacy chain or hospital.

The HealthPartners Partners in Excellence (PIE) program recognizes providers with consistent high performance in the Health & Patient Experience Quality Dimension quality clusters. This year 25 primary care provider groups, 30 specialty care provider groups and 20 pharmacy chains met the PIE targets.

The report includes:

- Measurement definitions and methodologies based on the following categories: chart review, administrative data, hybrid (combination administrative and chart review), provider self-reported data, provider survey and member survey
- Graphs of provider rates with 95th percentile confidence intervals, where applicable
- HealthPartners rate: weighted population average for measures that are sampled
- Average group/hospital/pharmacy chain: an average provider group rate (the average of the reported provider groups) is displayed on the graph. The average provider group rate is highlighted to allow for easy comparison
- Measures and components that contribute to the HealthPartners Partners in Excellence (PIE) program
- Pharmacy Partners in Excellence goals, where applicable
- Identification of measures, or elements of measures, that are consistent with HEDIS measurement specifications 
- Index of provider groups, clinics, hospitals and pharmacy chains contributing data to this report

Risk Adjustment

Risk adjustment is considered when developing quality measures. The measurement methodology will describe when case-mix or severity adjustment is applied. Clinical measures are consistent with evidenced-based clinical guidelines. Case-mix and severity is only applied when the guideline specifically defines different treatment protocols or expected outcomes based on variations in the health of the population. For the purpose of comparing provider performance, using the same measurement criteria for all patients produces valid comparative provider results when there is no evidence to suggest there is significant variation in patient populations across our provider groups.

Key Impacts

The following clinical indicators statistically improved from the previous year:

- Initiation of Alcohol and Other Drug Dependence Treatment - Primary Care and Behavioral Health Provider Groups
- Initiation of Alcohol and Other Drug Dependence Treatment - Chemical Dependency Programs
- Engagement of Alcohol and Other Drug Dependence Treatment - Chemical Dependency Programs
- Initiation of Alcohol and Other Drug Dependence Treatment - Hospitals
- Diabetic Eye Exam

- Alcohol Assessment - Adult - Primary Care
- Generic Drug Use - Primary Care
- Generic Drug Use - Behavioral Health Providers
- Generic Drug Use - OB/GYN Providers
- Generic Drug Use - Orthopaedic Providers
- Cholesterol Persistence - Pharmacy
- Child & Teen Check-Ups (C&TC)
- Lead Screening

New Measures

- No new measures were added to the report this year.

Retired Measures

The following measures were retired from the report due to outdated measure specifications:

- Evidence-Based Cervical Cancer Screening - Primary Care
- Evidence-Based Cervical Cancer Screening - OB/GYN

The following measures were retired from the report due to removal from patient satisfaction survey:

- Optimal Lifestyle - Adults
- Optimal Lifestyle - Children
- Patient Experience Coordination of Care
- Patient Experience Medication Safety - Primary Care - Explanation for prescribed medications
- Patient Experience Medication Safety - Primary Care - Information received about side effects
- Adult Tobacco Prevalence
- Adult Tobacco Assist Rate
- Second-hand Smoke Exposure

Measurement Changes

- No measurement changes in the report this year.

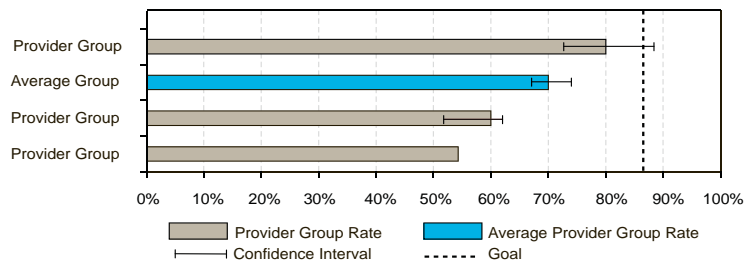
Participating Providers

Rates are displayed for HealthPartners provider groups based on patient volume, Partners in Excellence program participation, geographic location and strategic relationship with HealthPartners. Primary care provider groups included in this year's Clinical Indicators Report serve over 90 percent of HealthPartners membership.

Data Display

Each graph displays provider group performance (gray bars) and average group performance (bright blue bar). Comparative provider data are only made available for a sample size or population denominator of at least 30. If the measure is included in the Pharmacy Partners in Excellence program, target performance is indicated by the dashed black lines. While health plan rates provided on the measure description pages are weighted as described within the measure, the average medical group bar on the graphs represents the unweighted average performance of the displayed provider groups only.

The upper and lower confidence intervals represent the 95th percentile confidence intervals. In addition, for all hybrid measures (those that include chart review) a finite population correction factor is used to best account for the percentage of the total of a provider group's population that the sample represents. For example, when calculating the Optimal Health Management for Severe Mental Illness measure, a group whose sample collected approaches the entire HealthPartners measure eligible population at that group will have a very narrow confidence interval. If the entire HealthPartners measure eligible population of that group is used, there will be no confidence interval. This reflects more confidence that the rate derived from the sample actually constitutes the true rate for their full population. Graphs using a finite population correction factor will include a footnote indicating this application.



The 2018 Clinical Indicators Report Technical Supplement is available online and includes measurement detail, optimal component rates and trended plan rates over time. The 2018 Clinical Indicators Report and Technical Supplement are both available at healthpartners.com/quality.

ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

Follow-Up Visit after New Medication

January 1, 2017 – December 31, 2017

Description

The percentage of children ages six to 17 with an ambulatory prescription dispensed for ADHD medication between January 1, 2017 and December 1, 2017, that had a minimum of one follow-up visit with a practitioner with prescribing authority within 30 days of starting the medication.

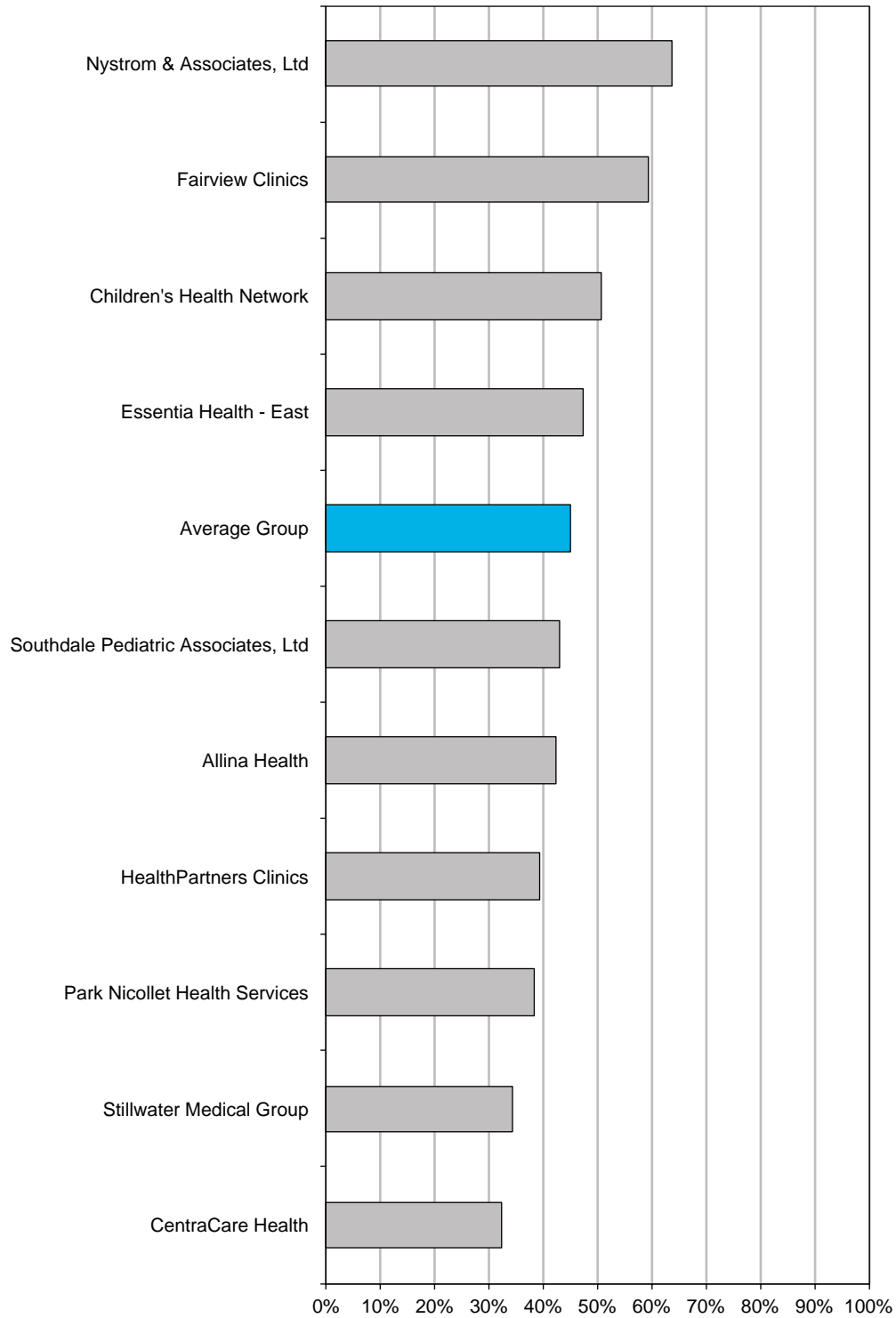
Methodology — Administrative

Elements of this measure are consistent with the HEDIS 2018 Follow-Up Care for Children Prescribed ADHD Medication measure and includes all members ages six to 17 years old as of prescription fill date, from Commercial and Medicaid products with a pharmacy benefit who were continuously enrolled for 120 days prior to starting ADHD medication through 30 days after. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the provider group of the practitioner who prescribed the ADHD medication.

Results

Total eligible members	2,177
Members with follow-up visit(s)	968
ADHD Follow-Up Visit Rate	44.5%

ADHD Follow-up Visit after New Medication
1/1/2017-12/31/2017



Percent with Visits within 30 Days

ANTIDEPRESSANT MEDICATION MANAGEMENT

May 1, 2016 – December 31, 2017

Description

The percentage of members ages 18 and older who were treated with an antidepressant medication, had a diagnosis of major depression and remained on the medication for 90 days (acute phase) and 180 days (continuous phase).

This measure is consistent with the HEDIS 2018 Antidepressant Medication Management measurement specifications.

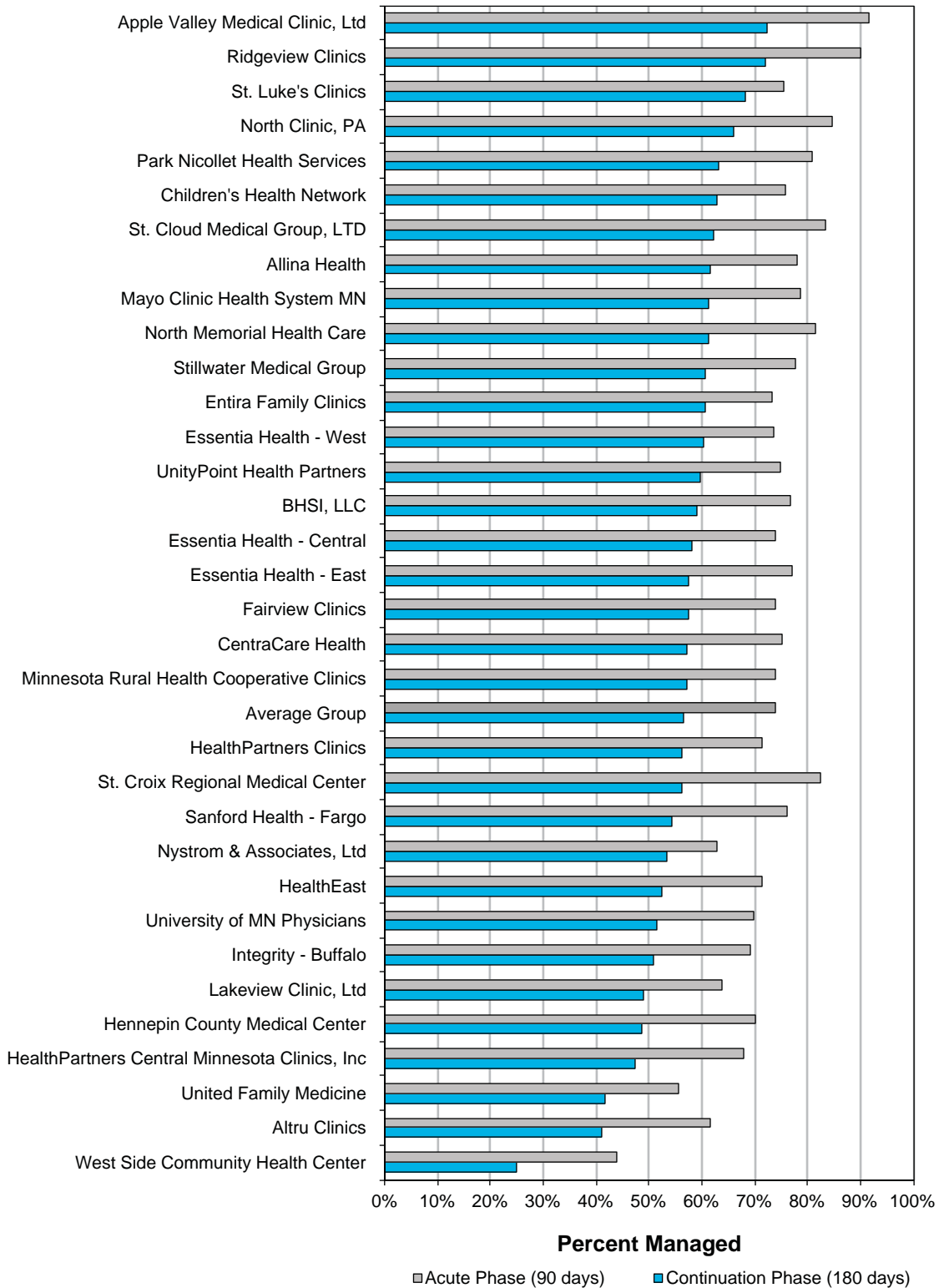
Methodology — Administrative

This measure includes all members ages 18 and older as of April 30, 2017, from all products with a pharmacy benefit who were continuously enrolled for 105 days prior to the prescription start date through 231 days after. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the provider group of the practitioner, regardless of specialty, who diagnosed the new episode of depression.

Results

Total eligible members	8,541
Members remaining on medication for 90 days	6,364
Antidepressant Medication Management Rate - Acute Phase	74.5%
Members remaining on medication for 180 days	4,951
Antidepressant Medication Management Rate - Continuation Phase	58.0%

Antidepressant Medication Management
5/1/2016 - 12/31/2017



INITIATION AND ENGAGEMENT OF ALCOHOL AND OTHER DRUG DEPENDENCE TREATMENT

January 1, 2017 – December 31, 2017

Description

The percentage of members ages 13 and older who were diagnosed with a new episode of alcohol or other drug (AOD) dependence who initiated treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of diagnosis (initiation) and had two or more additional services with an alcohol or other drug dependence diagnosis within 30 days of the initiation visit (engagement).

Methodology — Administrative

This measure is consistent with the HEDIS 2018 Initiation and Engagement of Alcohol and Other Drug Dependence Treatment measurement specifications and includes all members ages 13 and older as of December 31, 2017, from all products who were continuously enrolled for 60 days prior to the new AOD diagnosis through 44 days after. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the provider group or hospital of the practitioner who diagnosed the new episode of AOD dependence.

Results

Members Attributed to Provider Groups

Total eligible members	5,657
Members initiating treatment within 14 days of diagnosis	1269
Members engaged in treatment within 30 days of initiation visit	526
Initiation of AOD Treatment Rate	22.4%
Engagement of AOD Treatment Rate	9.3%

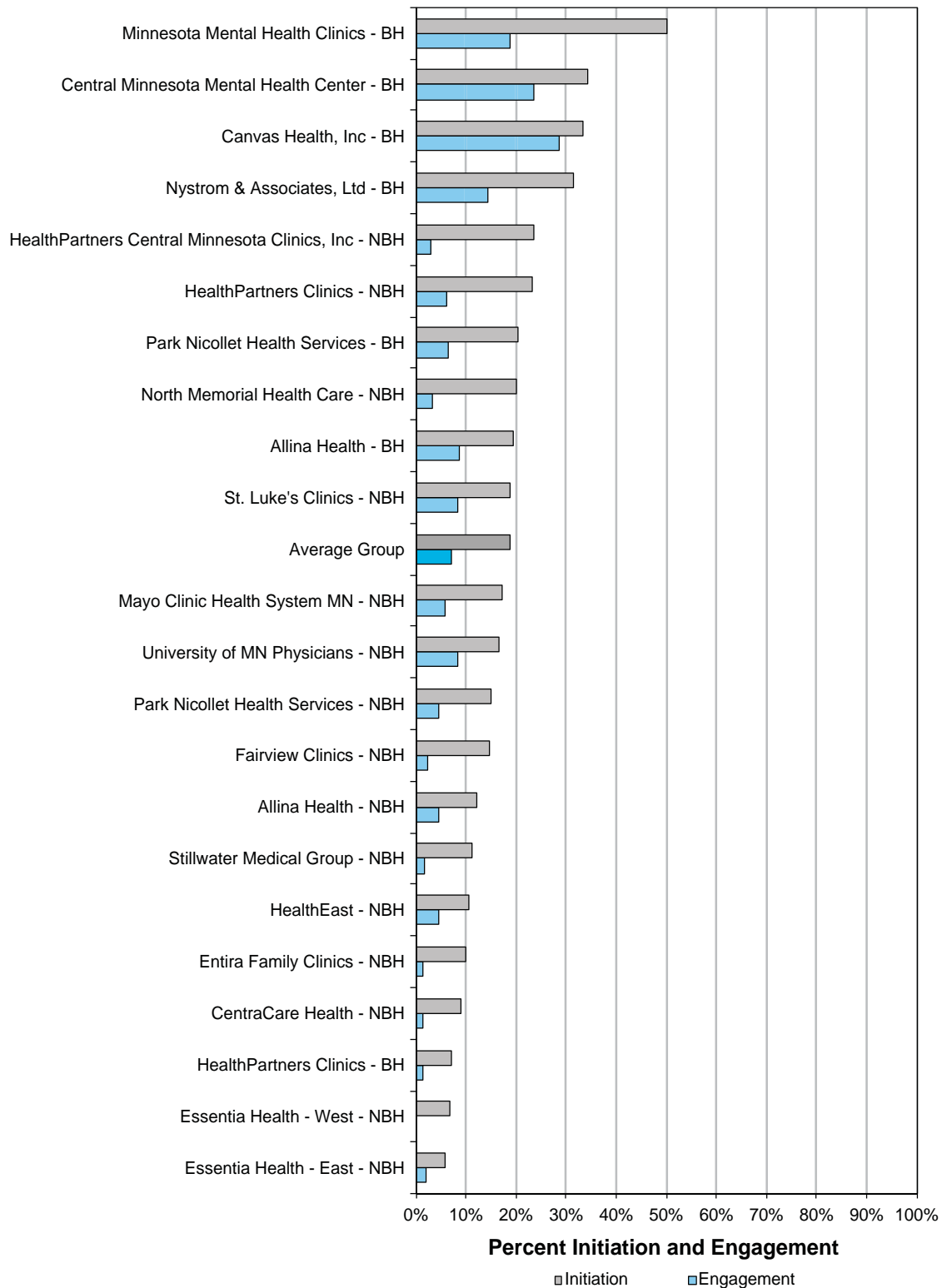
Members Attributed to Chemical Dependency Programs

Total eligible members	554
Members initiating treatment within 14 days of diagnosis	285
Members engaged in treatment within 30 days of initiation visit	223
Initiation of AOD Treatment Rate	51.4%
Engagement of AOD Treatment Rate	40.3%

Members Attributed to Hospitals

Total eligible members	3,478
Members initiating treatment within 14 days of diagnosis	1,891
Members engaged in treatment within 30 days of initiation visit	663
Initiation of AOD Treatment Rate	54.4%
Engagement of AOD Treatment Rate	19.1%

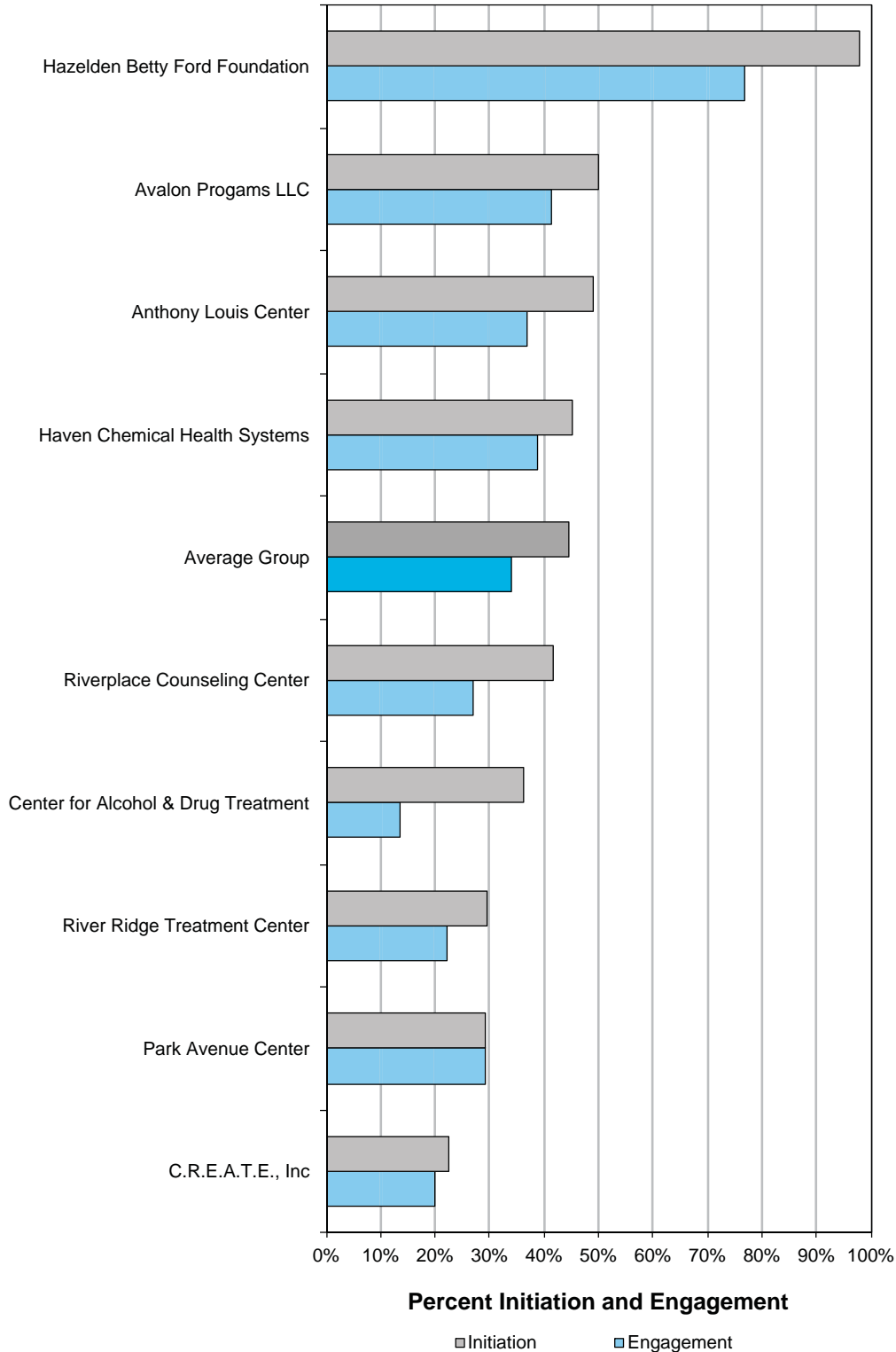
**Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
Primary Care and Behavioral Health Provider Groups
1/1/2017 - 12/31/2017**



Initiation - treatment initiated within 14 days of diagnosis
Engagement - Initiation plus two additional follow-up visits within 30 days

BH – Behavioral Health Provider Group
NBH – Non-Behavioral Health Provider Group

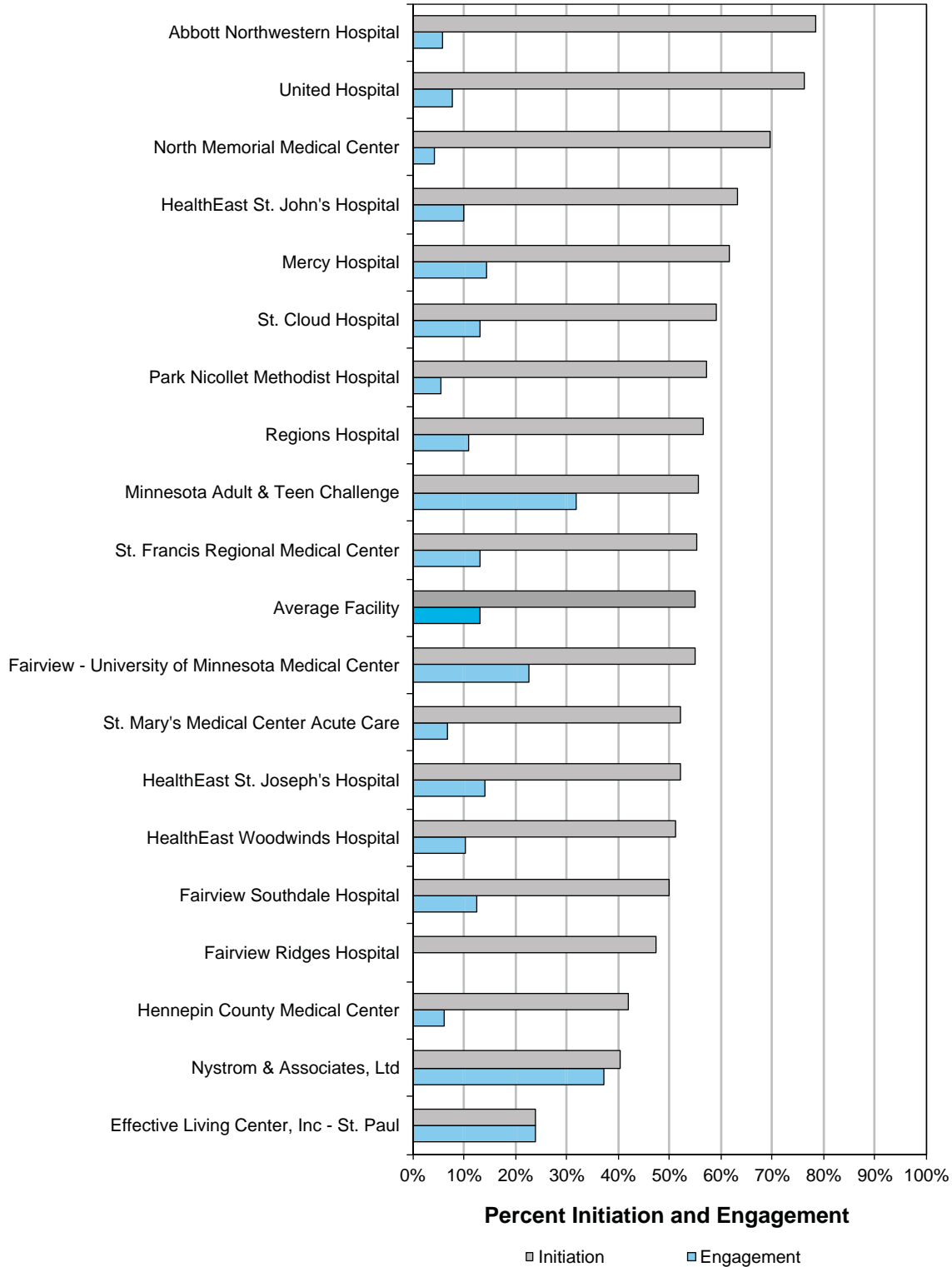
**Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
Chemical Dependency Programs**
1/1/2017 - 12/31/2017



Initiation - treatment initiated within 14 days of diagnosis
 Engagement - Initiation plus two additional follow-up visits within 30 days

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment Hospitals

1/1/2017 - 12/31/2017



FOLLOW-UP AFTER HOSPITALIZATION FOR MENTAL ILLNESS

January 1, 2017 – December 31, 2017

Description

The percentage of members ages six and older who were hospitalized for treatment of selected mental health disorders in 2017, who were seen on an outpatient basis or were in intermediate treatment with a mental health provider within seven days of discharge.

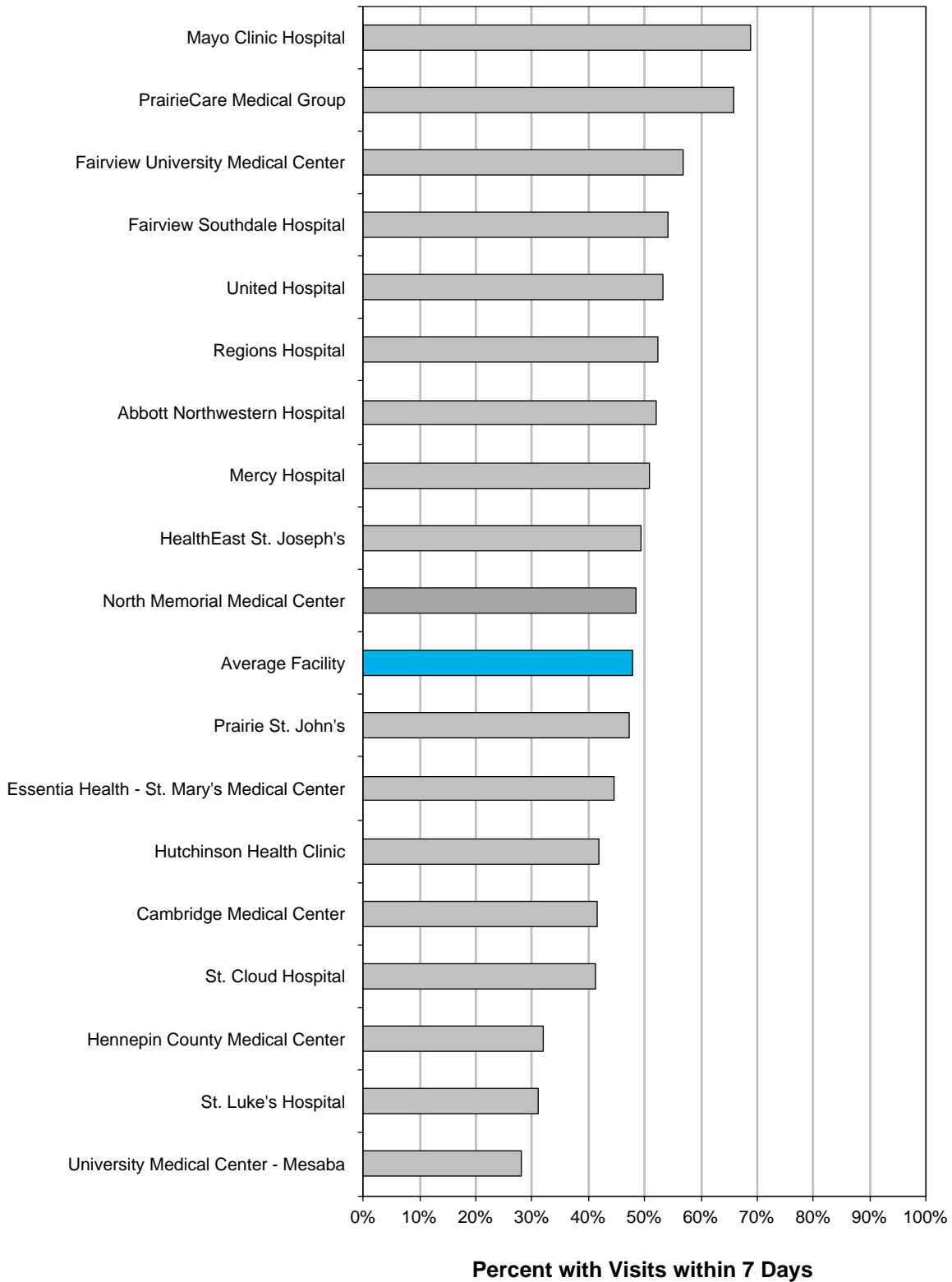
Methodology — Administrative

This measure is consistent with the HEDIS 2018 Follow-Up after Hospitalization for Mental Illness measurement specifications and includes all members ages six years and older as of discharge date from all products who were continuously enrolled for 30 days after hospital discharge date. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the hospital from which they were discharged.

Results

Total eligible members	2,556
Members with follow-up visit(s)	1,288
Follow-Up Visit Rate	50.4%

Follow-up after Hospitalization for Mental Illness
1/1/2017 - 12/31/2017



OPTIMAL HEALTH MANAGEMENT FOR SEVERE MENTAL ILLNESS

January 1, 2017 – December 31, 2017

Description

The percentage of members ages 18 to 65 by December 31, 2017, who have a diagnosis of schizophrenia or bipolar disorder and had at least one fill of an antipsychotic or mood stabilizer medication and have documentation of optimal care.

Methodology — Hybrid

This measure includes members from all products who were continuously enrolled from January 1, 2017 to December 31, 2017, who had a clinic visit in 2017 and were prescribed an antipsychotic or mood stabilizer in 2017. Population identification is based on claim and membership databases. This measure includes a random sample of 66 members (60 + 10% oversample) per medical group. Members are attributed to the provider group with the most office visits during the measurement year. If no office visit, members are attributed to the provider group of the practitioner who prescribed the antipsychotic or mood stabilizer medication.

Results*

Total eligible members	1,547
Members sampled	938
Members optimally managed	347
Members Optimally Managed	36.8% (± 3.7)

Behavioral health provider groups

Total eligible members	772
Members sampled	512
Members optimally managed	164
Members Optimally Managed	30.1% (± 4.5)

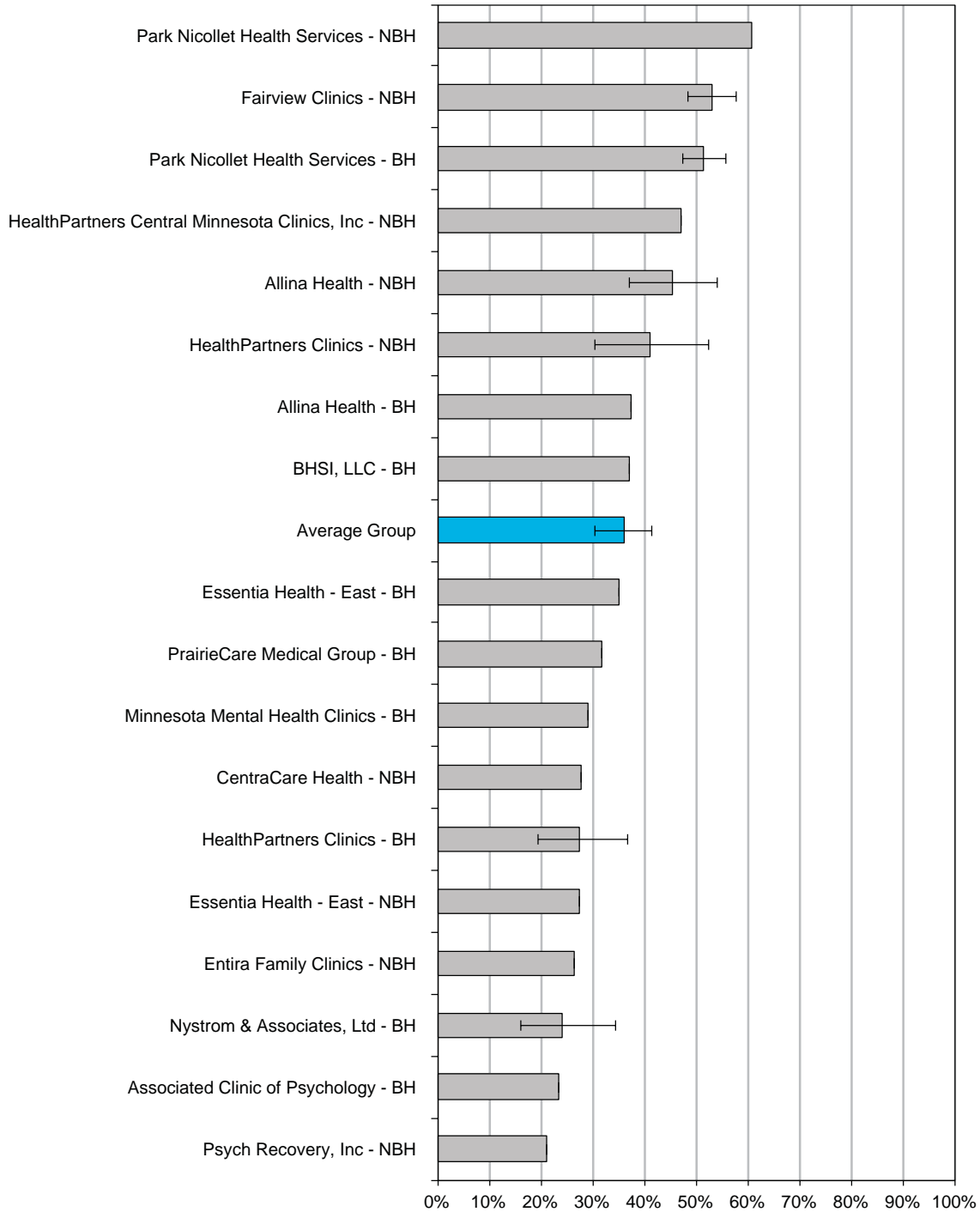
Non-behavioral health provider groups

Total eligible members	775
Members sampled	426
Members optimally managed	183
Members Optimally Managed	43.6% (± 5.8)

Completion Rate by Individual Component	Behavioral Health	Non-Behavioral Health	Total
Alcohol Assessment (<i>in 2017</i>)	74.4% (± 4.4)	88.0% (± 3.5)	81.2% (± 2.8)
Blood Pressure (<i>in 2017</i>)	88.2% (± 3.2)	99.3% (± 0.7)	93.7% (± 1.7)
BMI Assessment (<i>in 2017</i>)	84.0% (± 3.6)	98.0% (± 1.5)	91.0% (± 2.0)
Fasting Glucose or HbA1c [if diabetes] (<i>in 2017</i>)	46.5% (± 5.0)	63.5% (± 5.7)	55.0% (± 3.8)
LDL Screening (<i>in 2017</i>)	44.5% (± 5.0)	59.6% (± 5.7)	52.0% (± 3.8)
Tobacco Assessment (<i>in 2017</i>)	95.0% (± 2.2)	99.0% (± 0.7)	97.0% (± 1.2)

* All rates are weighted by the eligible population of the provider groups displayed.

Optimal Health Management for Severe Mental Illness
1/1/2017 - 12/31/2017



Percent Reaching All Targets

— Confidence Interval
Finite population correction factor applied

BH – Behavioral Health Provider Group
NBH – Non-Behavioral Health Provider Group

DIABETIC EYE EXAM

January 1, 2017 – December 31, 2017

Description

The rate represents the percentage of members with diabetes (Type 1 and Type 2) who had a retinal eye exam performed in the measurement year.

Methodology — Administrative

This measure is consistent with the HEDIS 2018 Comprehensive Diabetes Care measurement specifications and includes members ages 18 to 75 years as of December 31, 2017, from all products who were continuously enrolled from January 1, 2017 to December 31, 2017, and who had during the measurement year or year prior:

- two or more encounters in an ambulatory, non-acute inpatient or emergency room setting, or
- one or more encounters in an acute inpatient setting with a diagnosis of diabetes, or
- who were dispensed insulin or oral hypoglycemic prescriptions.

Population identification is based on pharmacy, claim and membership databases. Members are attributed to the provider group with the most office visits for diabetic care in the measurement year.

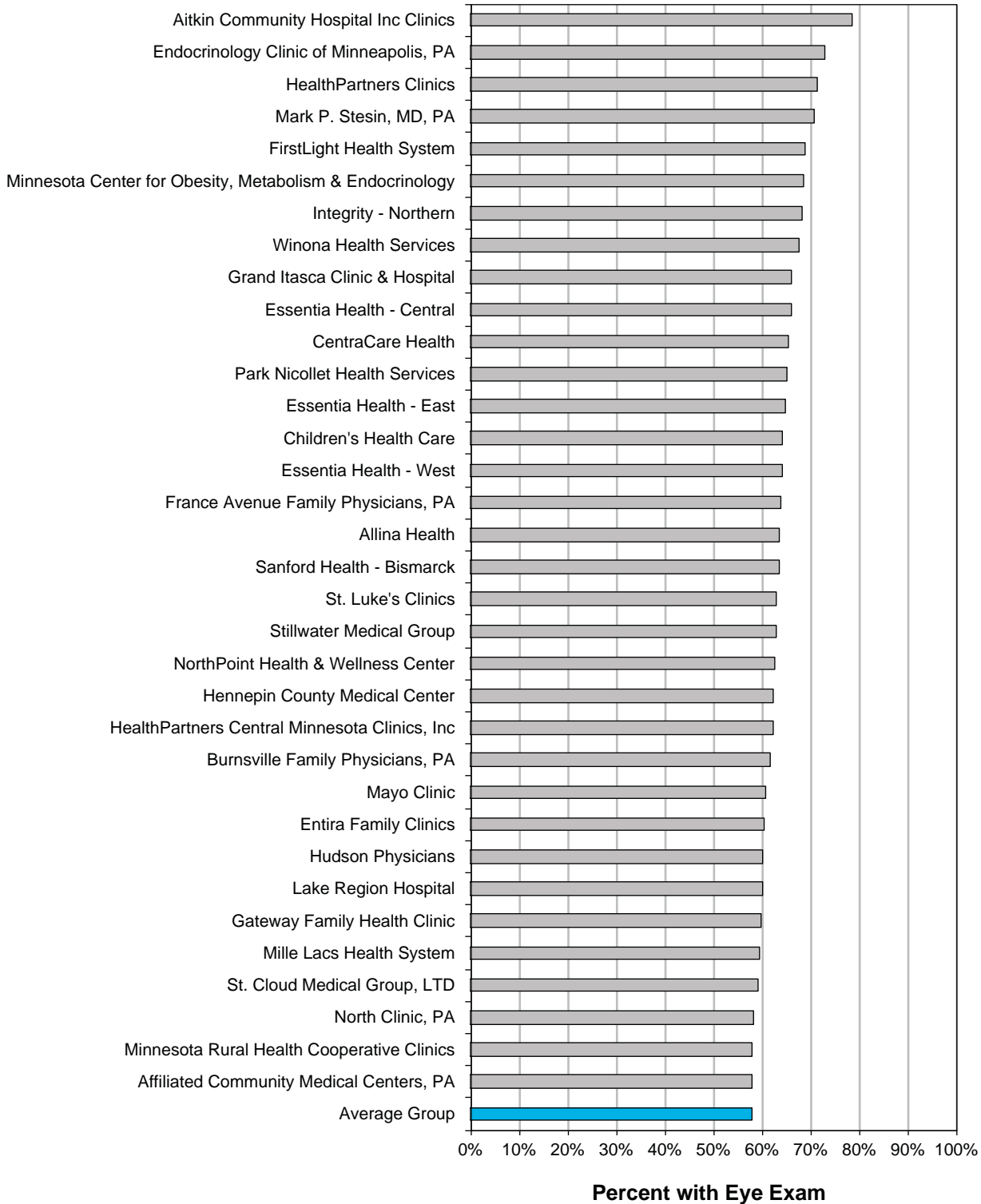
Note: the health plan HEDIS rate reflects a sample population and includes chart review while this is an administrative measure that includes total eligible members.

Results

Total eligible members	36,887
Members with eye exam	22,333
Diabetic Eye Exam Rate	60.5%

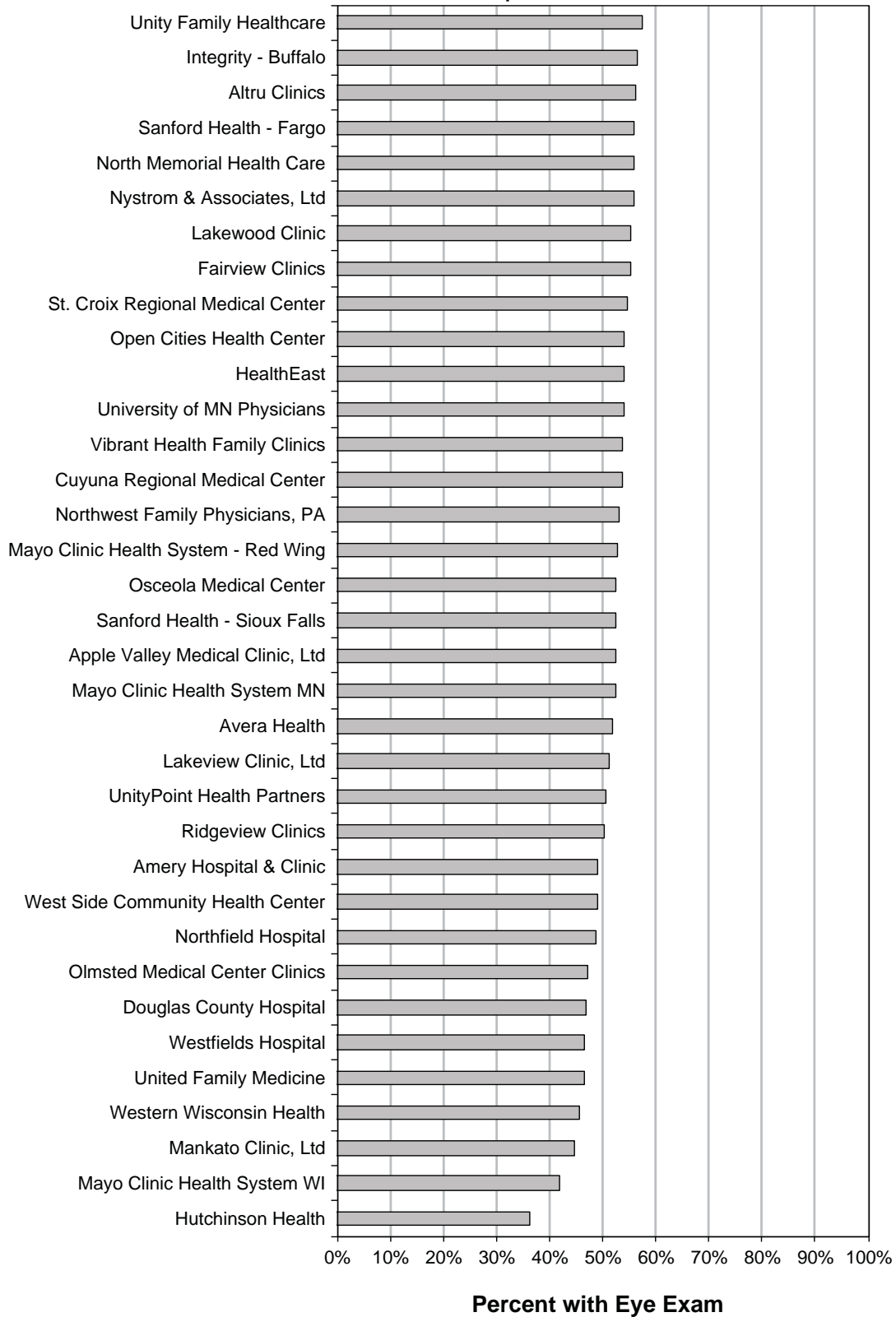
Diabetic Eye Exam
1/1/2017 - 12/31/2017

Part 1 of a 2 Part Graph



Diabetic Eye Exam
1/1/2017 - 12/31/2017

Part 2 of a 2 Part Graph



BODY MASS INDEX (BMI)

January 1, 2017 – December 31, 2017

Description

The rate represents the percent of enrolled members with a documented BMI value in the medical record (BMI Assessment) in the measurement year.

Methodology — Hybrid

Elements of this measure are consistent with the HEDIS 2018 Adult BMI assessment specifications. This measure includes members from all products and all ages three and older who were continuously enrolled from January 1, 2017 to December 31, 2017, who had a clinic visit in 2017. Population identification is based on claim and membership databases. The sample includes members from the adult and child and adolescent preventive services measures.

BMI Assessment - Adult: the percentage of members ages 19 and older within the sample with a documented BMI value in the medical record.

BMI Percentile Rate - Child and Adolescent: the percentage of members ages three to 18 within the sample with a BMI percentile or BMI plotted in the medical record, or for members \geq age 16 with a documented BMI in the medical record.

Results*

BMI Assessment - Adult

Total eligible memberst	395,039
Members sampled	6,093
Members with documented BMI	5,553
BMI Assessment Rate - Adult	91.7% (\pm 1.9)

BMI Percentile - Child and Adolescent

Total eligible members	127,739
Members sampled	5,553
Members with BMI percentile or BMI plotted	4,476
BMI Percentile Rate - Child and Adolescent	83.0% (\pm 2.3)

* All rates are weighted by the eligible population of the provider groups displayed.

Body Mass Index (BMI) Assessment - Adult
1/1/2017 - 12/31/2017

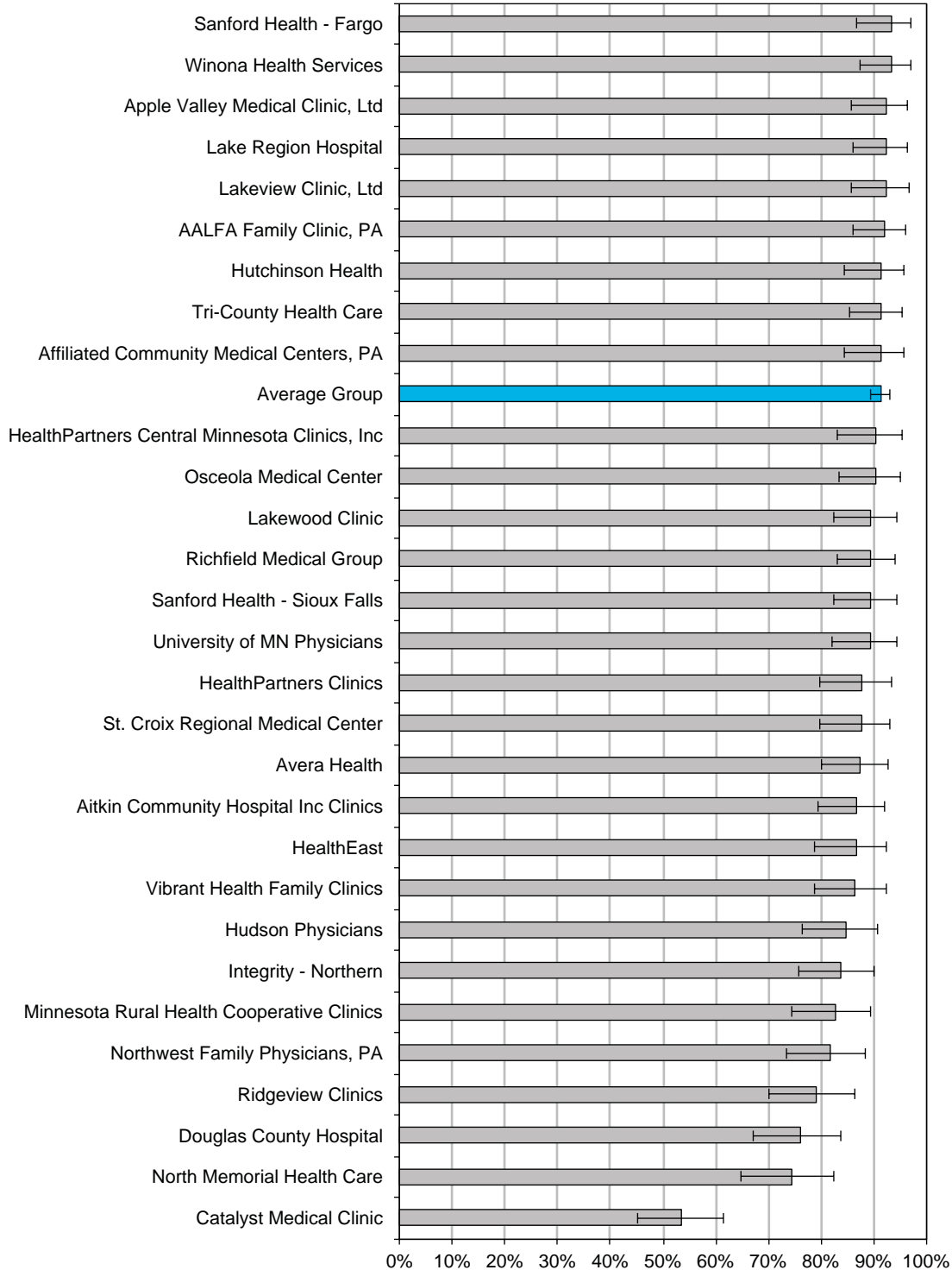
Part 1 of a 2 Part Graph



— Confidence Interval
Finite population correction factor applied

Body Mass Index (BMI) Assessment - Adult
1/1/2017 - 12/31/2017

Part 2 of a 2 Part Graph



Percent with Assessment

— Confidence Interval
Finite population correction factor applied

Body Mass Index (BMI) Assessment - Child and Adolescent
1/1/2017 - 12/31/2017

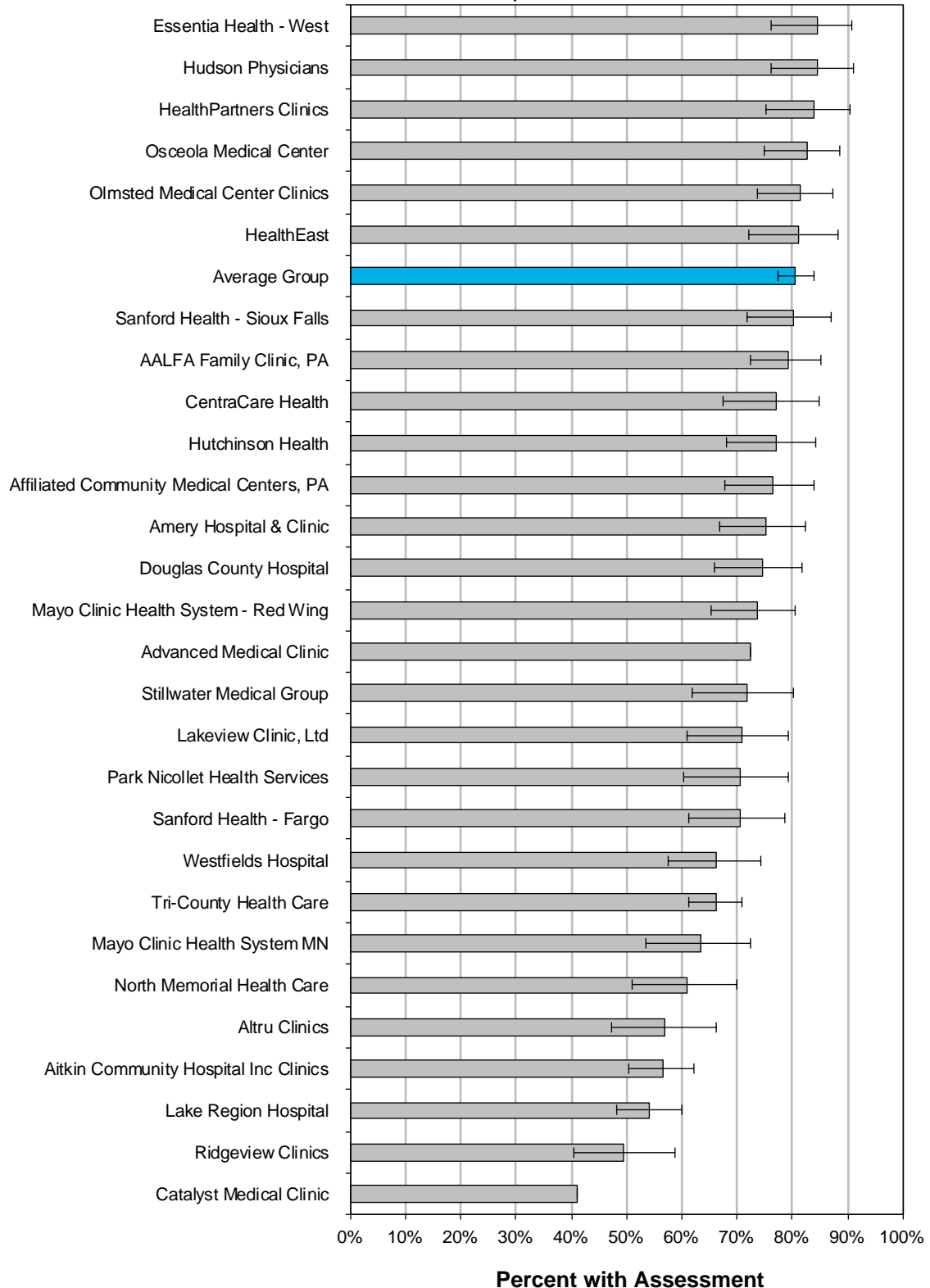
Part 1 of a 2 Part Graph



— Confidence Interval
Finite population correction factor applied

Body Mass Index (BMI) Assessment - Child and Adolescent
1/1/2017 - 12/31/2017

Part 2 of a 2 Part Graph



— Confidence Interval

ALCOHOL ASSESSMENT — ADULT PRIMARY CARE

January 1, 2017 – December 31, 2017

Description

The rate represents the percentage of members ages 19 and older by December 31, 2017, whose alcohol use status is documented in the medical record in the measurement year. Documentation of alcohol assessment must be dated and include the amount and frequency of alcohol use.

Methodology — Chart Review

This measure includes members from all products who were continuously enrolled from January 1, 2017 to December 31, 2017, who had a clinic visit in 2017. Population identification is based on claim and membership databases. The sample includes members from the adult preventive services measure.

Results*

Total eligible members	389,500
Members sampled	5,983
Members with assessment	3,611
Alcohol Assessment Rate	67.8% (± 2.8)

* All rates are weighted by the eligible population of the provider groups displayed.

Alcohol Assessment - Adult - Primary Care
1/1/2017 - 12/31/2017

Part 1 of a 2 Part Graph



Percent with Assessment

— Confidence Interval
Finite population correction factor applied

Alcohol Assessment - Adult - Primary Care
1/1/2017 - 12/31/2017

Part 2 of a 2 Part Graph



— Confidence Interval
Finite population correction factor applied

ALCOHOL ASSESSMENT — ADULT OB/GYN

January 1, 2017 – December 31, 2017

Description

The rate represents the percentage of women ages 19 and older by December 31, 2017, whose alcohol use status is documented in the medical record in the measurement year. Documentation of alcohol assessment must be dated and include the amount and frequency of alcohol use.

Methodology — Chart Review

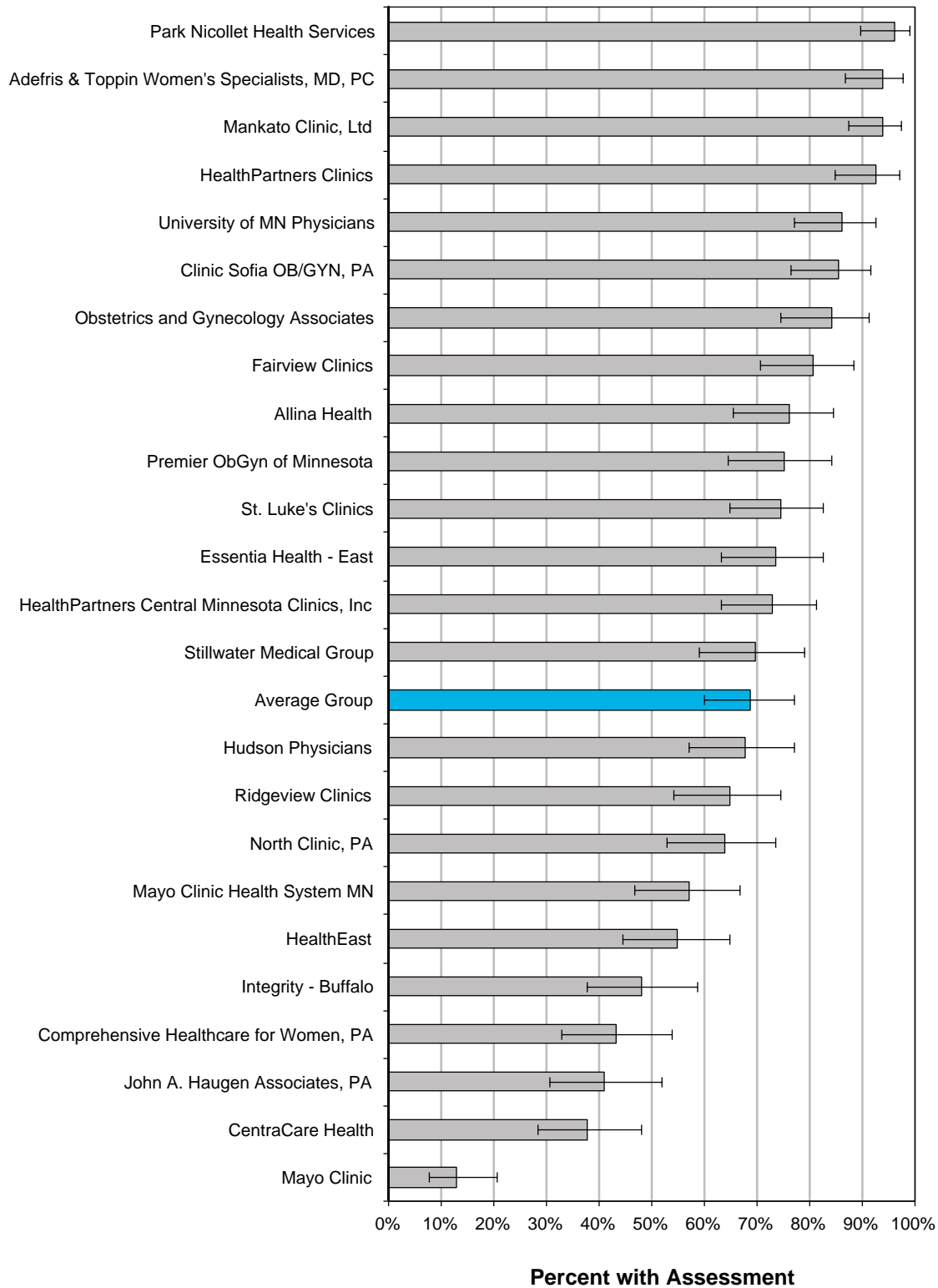
This measure includes women from all products who were continuously enrolled from January 1, 2017 to December 31, 2017, who had a clinic visit in 2017. Population identification is based on claim and membership databases. The sample includes members from the OB/GYN preventive services measure.

Results*

Total eligible members	68,721
Members sampled	1,988
Members with assessment	1,366
Alcohol Assessment Rate	81.7% (± 2.5)

* All rates are weighted by the eligible population of the provider groups displayed.

Alcohol Assessment - Adult - OB/GYN Providers
1/1/2017 - 12/31/2017



— Confidence Interval
Finite population correction factor applied

GENERIC DRUG USE — PRIMARY CARE

January 1, 2018 – June 30, 2018

Description

The rate represents the percentage of all prescriptions filled with generic drugs for HealthPartners members with a drug benefit.

Methodology — Administrative

This measure includes all prescriptions for members with a drug benefit filled between January 1, 2018 and June 30, 2018, whose prescription was filled with a generic drug. This rate is calculated with pharmacy claims data. Members are attributed to the primary provider group of the prescribing physician.

Results*

Total prescriptions	3,973,886
Generic drug prescriptions	3,701,698
Generic Drug Use Rate	93.2%

* Results include all prescriptions regardless of prescribing physician specialty. Results from medical groups who are current or anticipated HealthPartners Partners in Excellence (PIE) participants are graphically displayed.

Generic Drug Use - Primary Care
1/1/2018 - 6/30/2018

Part 1 of a 2 Part Graph



Generic Drug Use - Primary Care
1/1/2018 - 6/30/2018

Part 2 of a 2 Part Graph



GENERIC DRUG USE — SPECIALTY CARE

January 1, 2018 – June 30, 2018

Description

The rate represents the percentage of all prescriptions filled with generic drugs for HealthPartners members with a drug benefit.

Methodology — Administrative

This measure includes all prescriptions for members with a drug benefit filled between January 1, 2018 and June 30, 2018, whose prescription was filled with a generic drug. This rate is calculated with pharmacy claims data. Members are attributed to the specialty provider group of the prescribing physician.

Results*

Behavioral Health

Total prescriptions	133,655
Generic drug prescriptions	132,261
Behavioral Health Generic Drug Use Rate	99.0%

Cardiology

Total prescriptions	172,819
Generic drug prescriptions	160,270
Cardiology Generic Drug Use Rate	92.7%

OB/GYN

Total prescriptions	247,014
Generic drug prescriptions	230,256
OB/GYN Generic Drug Use Rate	93.2%

Orthopaedics

Total prescriptions	40,588
Generic drug prescriptions	40,034
Orthopaedics Generic Drug Use Rate	98.6%

* Results include all prescriptions from applicable provider specialties. Results from medical groups who are current or anticipated HealthPartners Partners in Excellence (PIE) participants are graphically displayed.

Generic Drug Use - Behavioral Health Providers
1/1/2018 - 6/30/2018

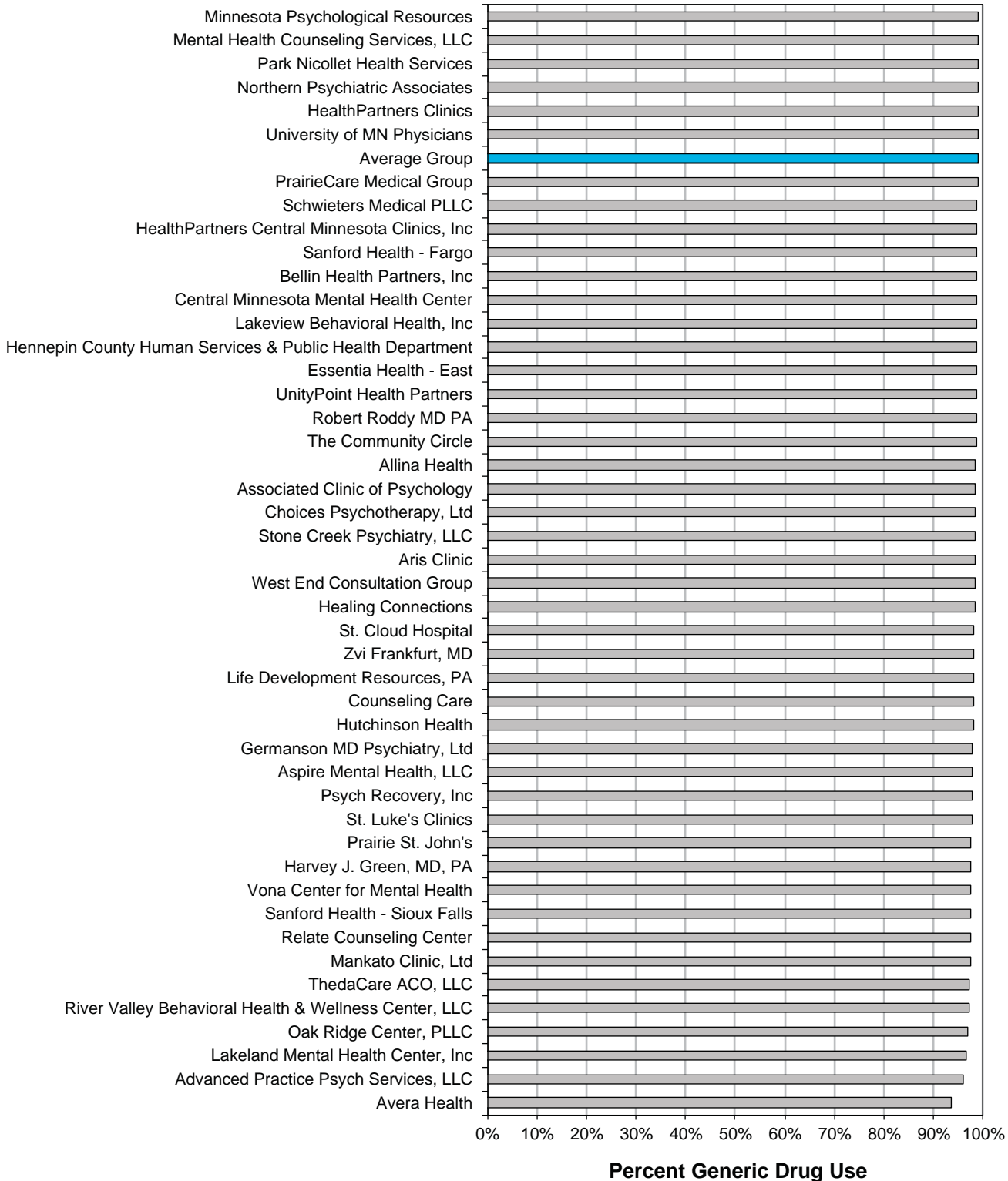
Part 1 of a 2 Part Graph



Medical Groups with <200 prescriptions are not displayed

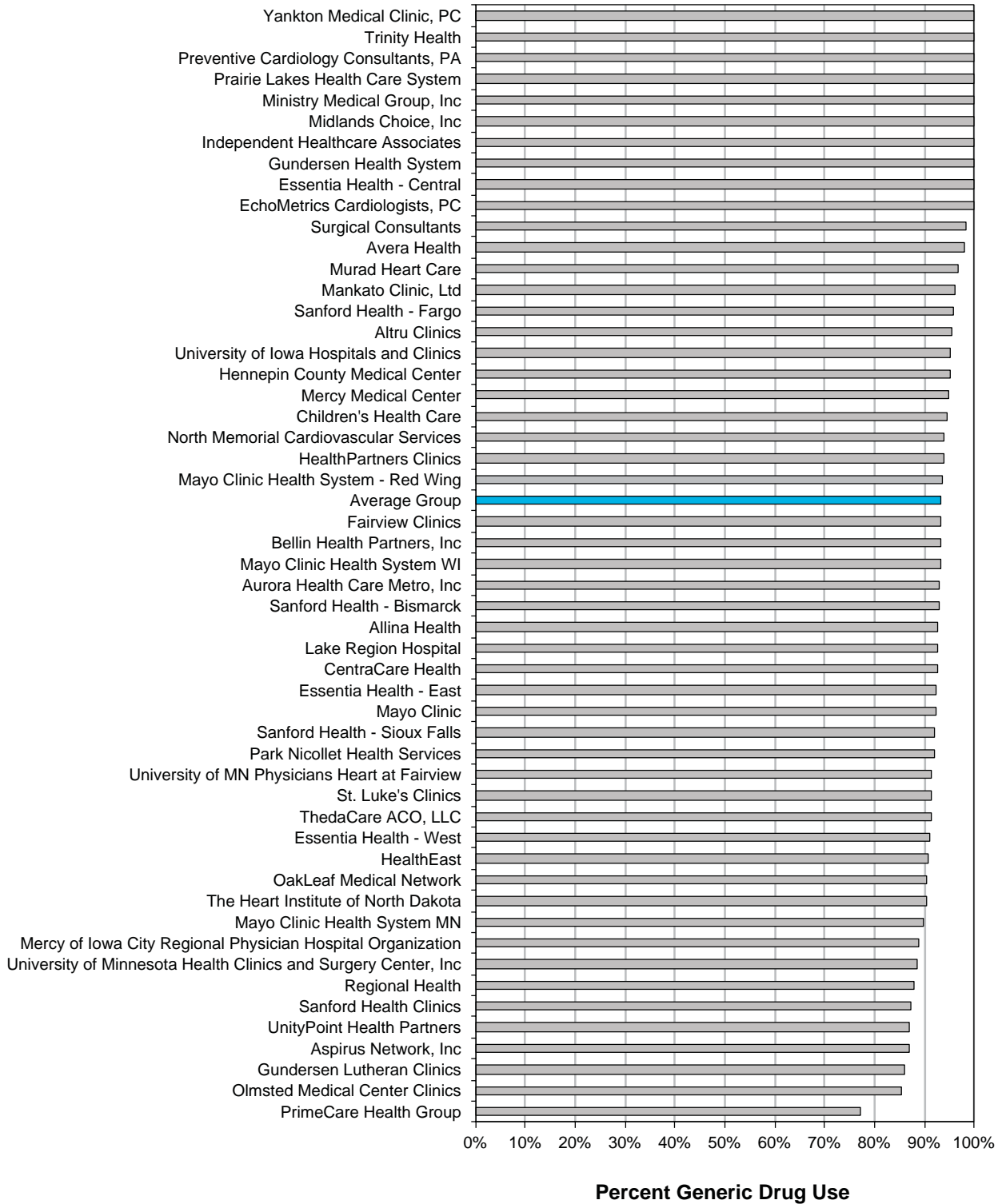
Generic Drug Use - Behavioral Health Providers
1/1/2018 - 6/30/2018

Part 2 of a 2 Part Graph



Medical Groups with <200 prescriptions are not displayed

Generic Drug Use - Cardiology Providers
1/1/2018 - 6/30/2018



Generic Drug Use - OB/GYN Providers
1/1/2018 - 6/30/2018

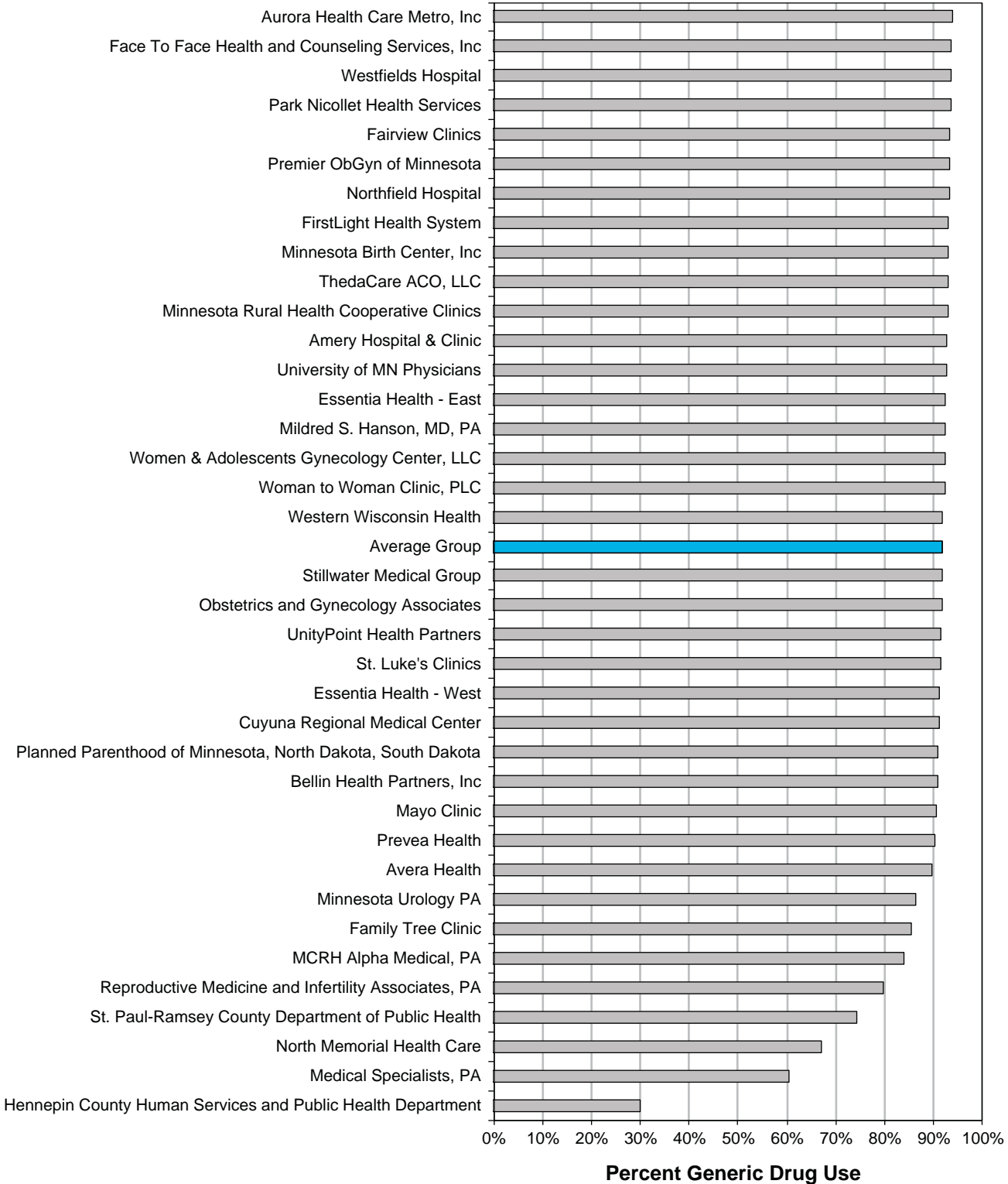
Part 1 of a 2 Part Graph



Medical Groups with <200 prescriptions are not displayed.

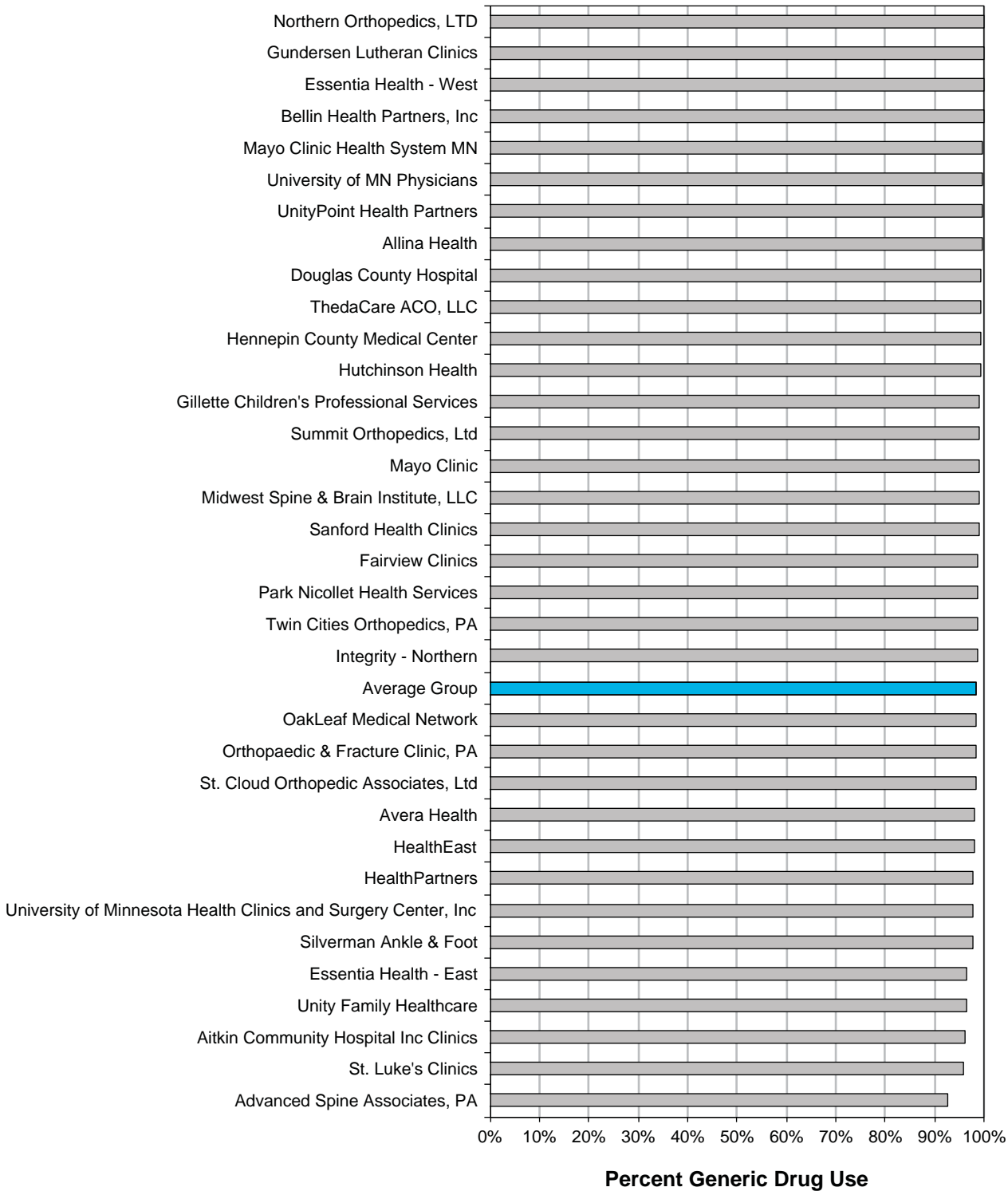
Generic Drug Use - OB/GYN Providers
1/1/2018 - 6/30/2018

Part 2 of a 2 Part Graph



Medical Groups with <200 prescriptions are not displayed.

Generic Drug Use - Orthopaedic Providers
1/1/2018 - 6/30/2018



Medical Groups with <100 prescriptions are not displayed.

ANNUAL MONITORING FOR PATIENTS ON PERSISTENT MEDICATIONS PRIMARY CARE

January 1, 2017 – December 31, 2017

Description

The percentage of members ages 18 and older who received at least a 180-day supply of ambulatory medication therapy for Angiotensin Converting Enzyme (ACE) inhibitors, Angiotensin Receptor Blockers (ARB) and/or diuretics during the measurement year and had at least one therapeutic monitoring event for the therapeutic agent in the measurement year.

A therapeutic monitoring event is defined as:

- At least one serum potassium (K+) and a serum creatinine (SCr) for prescribed ACE inhibitors, ARBs and/or diuretics.

Methodology — Administrative

This measure is consistent with the HEDIS 2018 Annual Monitoring for Patients on Persistent Medications measurement specifications and includes all members ages 18 years and older as of December 31, 2017, from all products except Medicare Cost with a drug benefit who were continuously enrolled from January 1, 2017 to December 31, 2017. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the medical group of the prescribing provider's primary location of the most recent script that qualified the member for the denominator. Only scripts written by a provider with a primary care specialty are included; however, therapeutic monitoring claims from all providers are included.

Results

ACE/ARB monitoring

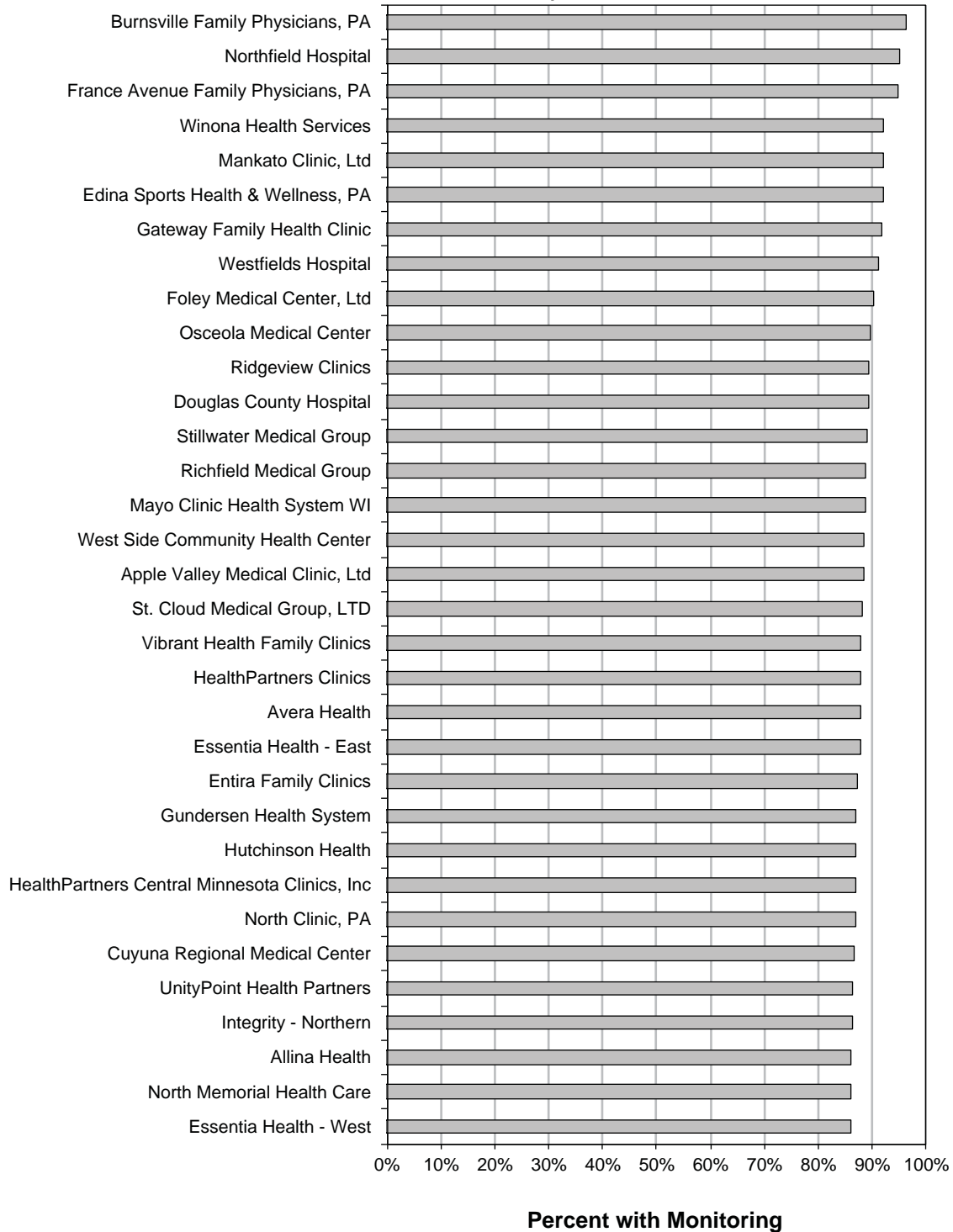
Total eligible members	29,437
Members with monitoring event	25,267
Annual Monitoring Rate	85.8%

Diuretics monitoring

Total eligible members	20,445
Members with monitoring event	17,538
Annual Monitoring Rate	85.8%

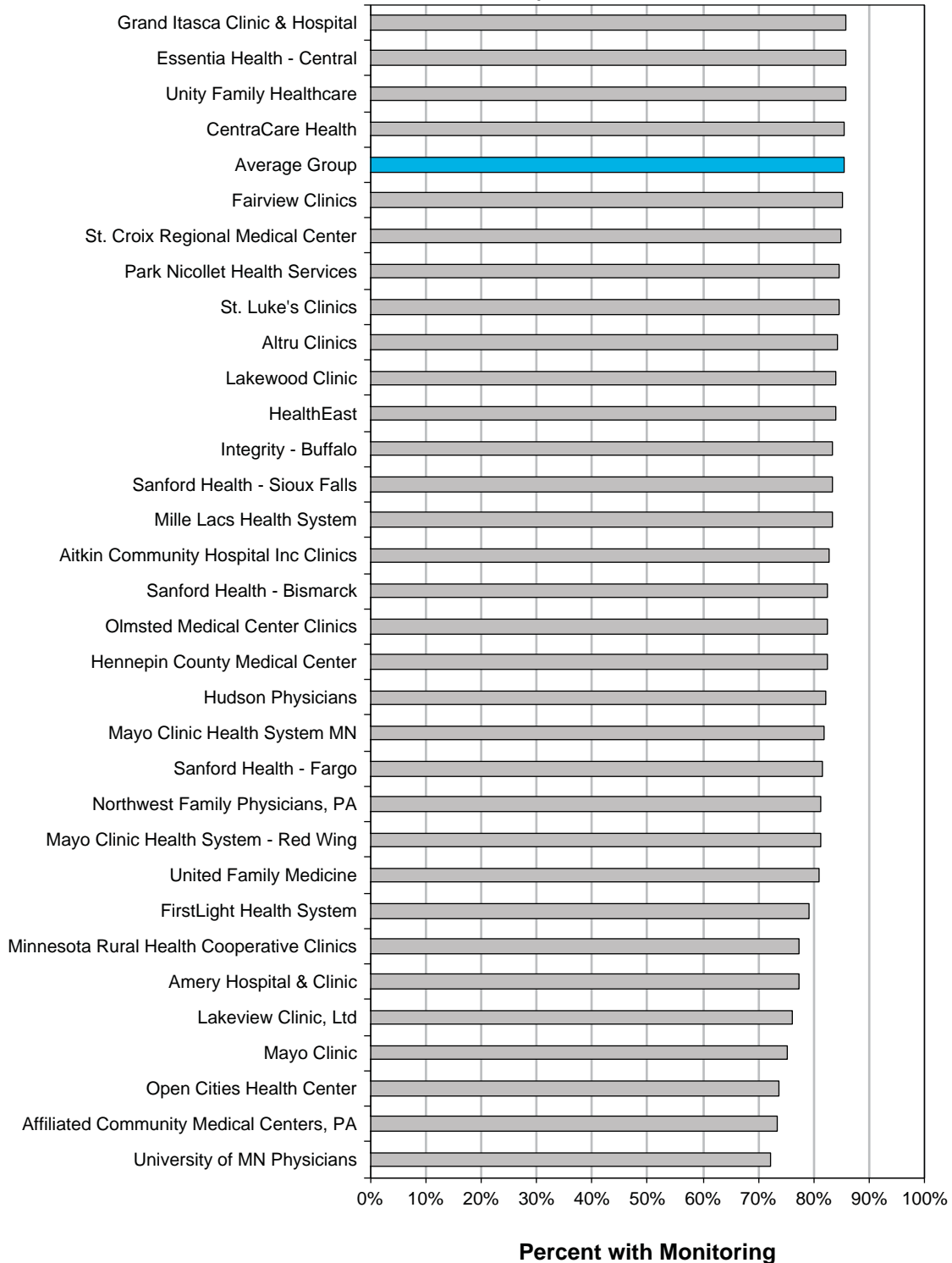
**Annual Monitoring for Patients on Persistent Medications - Primary Care
ACE/ARB
1/1/2017 - 12/31/2017**

Part 1 of a 2 Part Graph



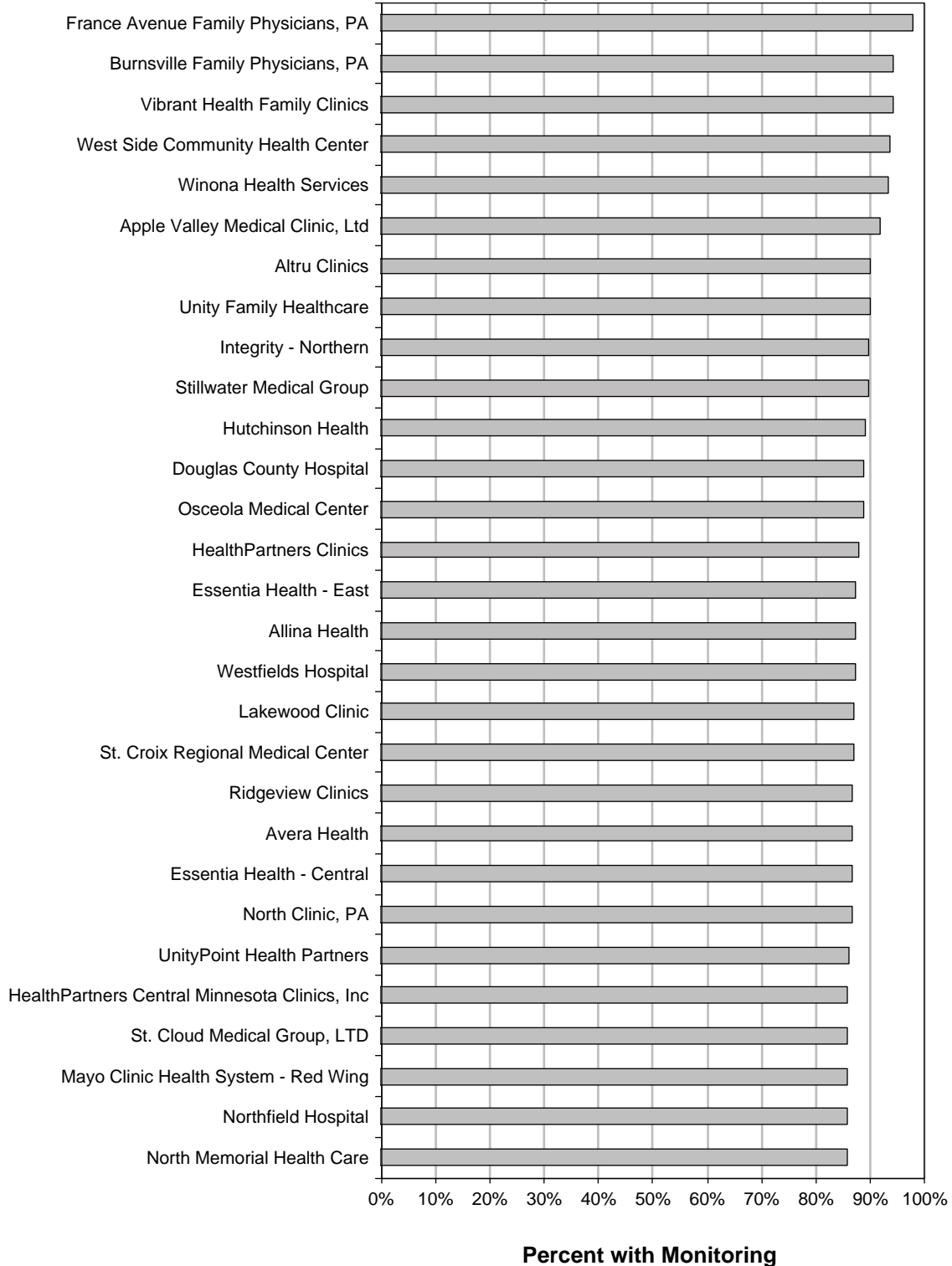
**Annual Monitoring for Patients on Persistent Medications - Primary Care
ACE/ARB
1/1/2017 - 12/31/2017**

Part 2 of a 2 Part Graph



**Annual Monitoring for Patients on Persistent Medications - Primary Care
Diuretics
1/1/2017 - 12/31/2017**

Part 1 of a 2 Part Graph



**Annual Monitoring for Patients on Persistent Medications - Primary Care
Diuretics
1/1/2017 - 12/31/2017**

Part 2 of a 2 Part Graph



ANNUAL MONITORING FOR PATIENTS ON PERSISTENT MEDICATIONS CARDIOLOGY

January 1, 2017 – December 31, 2017

Description

The percentage of members ages 18 and older who received at least a 180-day supply of ambulatory medication therapy for Angiotensin Converting Enzyme (ACE) inhibitors, Angiotensin Receptor Blockers (ARB) and/or diuretics during the measurement year and had at least one therapeutic monitoring event for the therapeutic agent in the measurement year.

A therapeutic monitoring event is defined as:

- At least one serum potassium (K+) and a serum creatinine (SCr) for prescribed ACE inhibitors, ARBs and/or diuretics.

Methodology — Administrative

This measure is consistent with the HEDIS 2018 Annual Monitoring for Patients on Persistent Medications measurement specifications and includes all members ages 18 years and older as of December 31, 2017, from all products except Medicare Cost with a drug benefit who were continuously enrolled from January 1, 2017 to December 31, 2017. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the medical group of the prescribing provider's primary location of the most recent script that qualified the member for the denominator. Only scripts written by a provider with a cardiology specialty are included; however, therapeutic monitoring claims from all providers are included.

Results

ACE/ARB monitoring

Total eligible members	2,055
Members with monitoring event	1,748
Annual Monitoring Rate	85.1%

Diuretics monitoring

Total eligible members	1,038
Members with monitoring event	946
Annual Monitoring Rate	91.1%

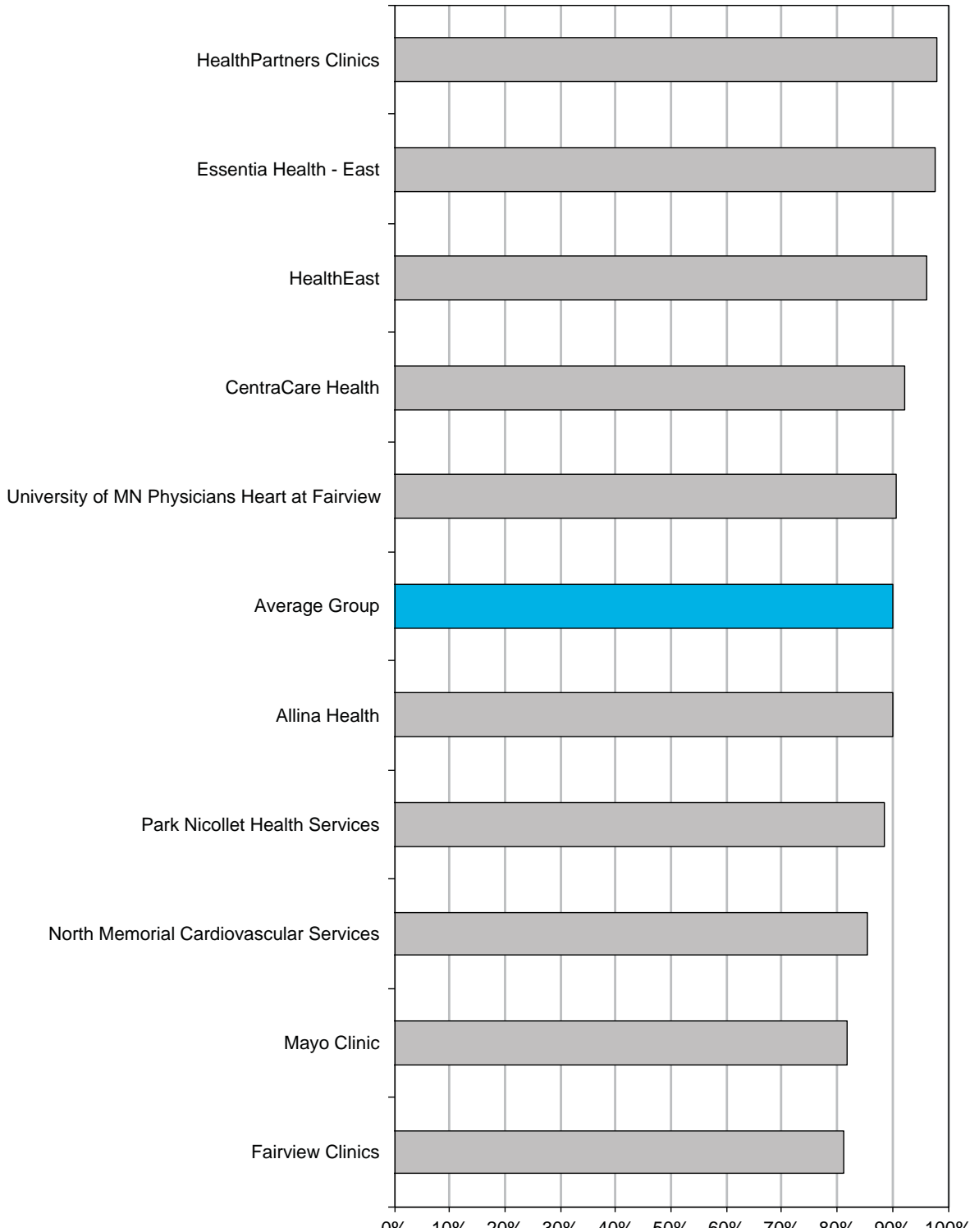
Annual Monitoring for Patients on Persistent Medications - Cardiology
ACE/ARB

1/1/2017 - 12/31/2017



**Annual Monitoring for Patients on Persistent Medications - Cardiology
Diuretics**

1/1/2017 - 12/31/2017



MEDICATION ADHERENCE FOR ASTHMA – PHARMACY

January 1, 2017 – December 31, 2017

Description

The percentage of members with a diagnosis of asthma who remain on a controller medication¹ and meet a 75% portion of days covered (PDC) for the controller medication as measured by the days' supply filled divided by the number of days from the date of the first fill to the end of the measurement period.

Methodology — Administrative

This measure includes members age 5–64 years with a diagnosis of asthma from commercial products who were continuously enrolled from January 1, 2017 to December 31, 2017.

The eligible population for members with a diagnosis of asthma is defined as having had, within the previous 24 months:

- one or more inpatient or emergency department encounters with a discharge diagnosis of asthma, or
- two or more outpatient encounters with a diagnosis of asthma on different dates of service and two or more distinct claim dates for inhaled/oral anti-inflammatory or inhaled/oral bronchodilator medications, or
- three or more distinct claim dates for inhaled bronchodilator or anti-inflammatory medications and no diagnosis of COPD.

Rates are calculated administratively using outpatient claims. Members are attributed to the pharmacy where they have the greatest amount of days' supply filled during the measurement period.

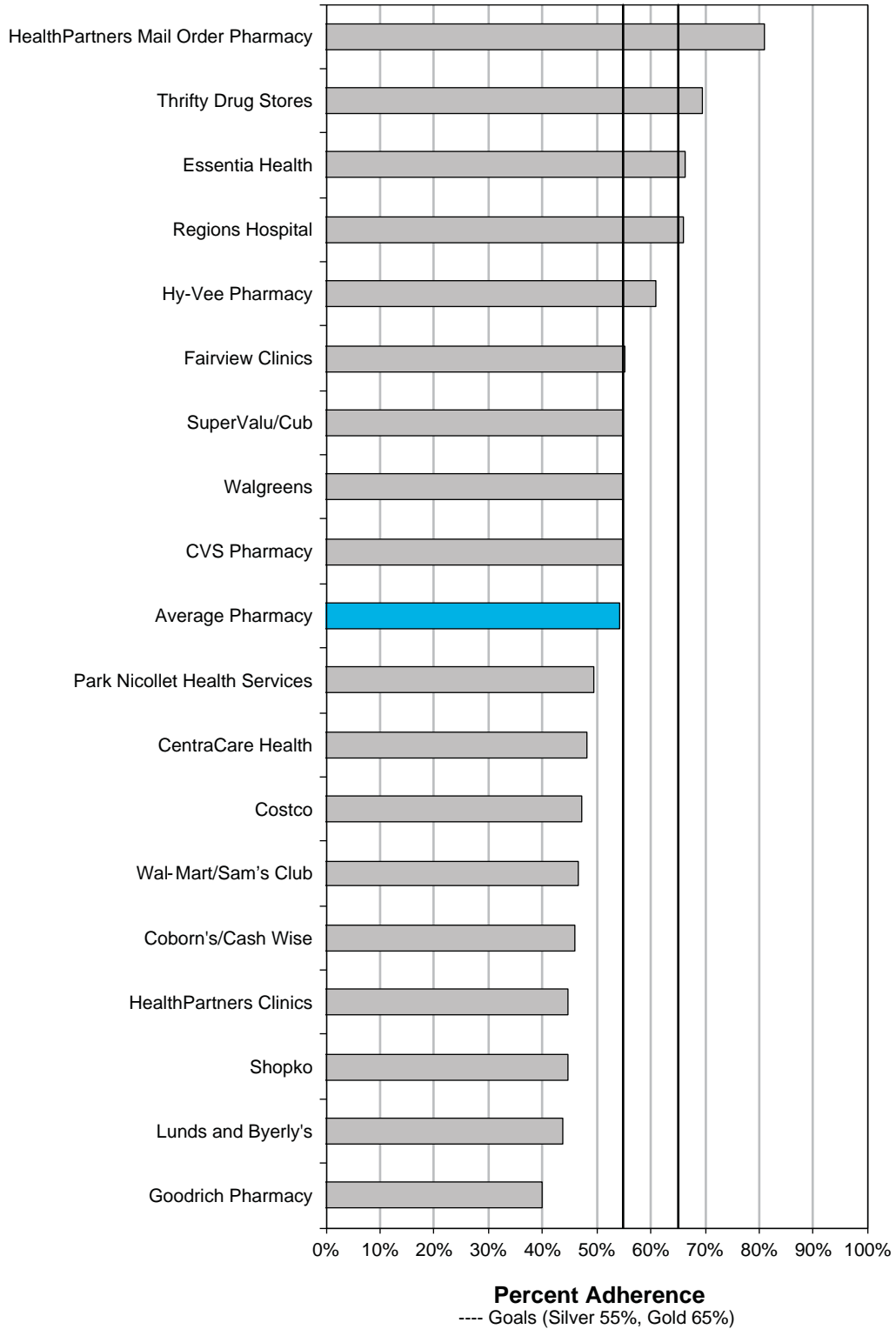
Results

Commercial Members

Total treated members	7,009
Members with 75% portion of days covered	3,880
Medication Adherence Rate	55.4%

¹ *Antiasthmatic combinations, antibody inhibitor, inhaled corticosteroids, Leukotriene modifiers, mast cell stabilizers, bronchodilators, systemic corticosteroids*

**Medication Adherence for Asthma
Pharmacy
1/1/2017 - 12/31/2017**



MEDICATION ADHERENCE FOR DIABETES – PHARMACY

January 1, 2017 – December 31, 2017

Description

The percentage of members with a diagnosis of diabetes who remain on oral hypoglycemic medication¹ and meet an 80 percent portion of days covered (PDC) for the medication as measured by the days' supply filled divided by the number of days from the date of the first fill to the end of the measurement period.

Methodology — Administrative

This measure includes members age 18 and older from commercial products and who were continuously enrolled from January 1, 2017 to December 31, 2017.

The eligible population for members with a diagnosis of diabetes is defined as having had, within the previous 15 months:

- one or more prescription fills of insulin or oral hypoglycemic/antihyperglycemic agents, or
- two or more outpatient or non-acute inpatient encounters with a diagnosis of diabetes on different dates of service, or
- one or more acute inpatient or ED encounters with a diagnosis of diabetes.

Rates are calculated administratively using outpatient pharmacy claims. Members are attributed to the pharmacy where they have the greatest amount of days' supply filled during the measurement period.

Results

Commercial Members

Total treated members	18,553
Members with 80% portion of days covered	15,505
Medication Adherence Rate	83.6%

¹ Oral Hypoglycemic drugs are defined using GPI code 27 and route of admin of Oral

**Medication Adherence for Diabetes
Pharmacy
1/1/2017 - 12/31/2017**



CHOLESTEROL PERSISTENCE — PHARMACY

January 1, 2017 – December 31, 2017

Description

The percentage of members of any age who started cholesterol medications and remained on those medications for 180 days from January 1, 2017 to December 31, 2017.

Methodology — Administrative

This measure includes members from all products with a new prescription for a statin medication in the measurement period of January 1, 2017 to December 31, 2017. Members must be continuously enrolled for the period of 180 days prior to the new prescription start through 216 days following the new prescription state. Population is identified using membership databases. Rates are calculated administratively using outpatient pharmacy claims. Members are attributed to the pharmacy where the antidepressant medication was filled.

Results

Total eligible members	18,639
Members with new statin prescription	10,462
Cholesterol Persistence Rate	56.1%

**Cholesterol Persistence
Pharmacy
1/1/2017 - 12/31/2017**



ANTIDEPRESSANT MEDICATION MANAGEMENT – PHARMACY

May 1, 2016 – December 31, 2017

Description

The percentage of members ages 18 and older who were treated with an antidepressant medication, had a diagnosis of major depression and remained on the medication for 180 days (continuous phase).

This measure is consistent with the HEDIS 2018 Antidepressant Medication Management measurement specifications.

Methodology — Administrative

This measure includes all members ages 18 and older as of April 30, 2017, from all products with a pharmacy benefit who were continuously enrolled for 105 days prior to the prescription start date through 231 days after. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the pharmacy where the antidepressant medication was filled.

Results

Total eligible members	8,541
Members remaining on medication for 180 days (continuation phase)	4,951
Antidepressant Medication Management Rate - Continuation Phase	58.0%

**Antidepressant Medication Management - Continuous Phase
Pharmacy
5/1/2016 - 12/31/2017**



OPTIMAL CARE FOR ACUTE LOW BACK PAIN

January 1, 2017 – December 31, 2017

Description

The rate represents the percentage of members ages 18 and older with newly diagnosed acute low back pain who received optimal care for acute low back pain.

Optimal care for acute low back pain is defined as an initial office visit for low back pain and does NOT include any of the following services in the first six weeks of care:

- Imaging
- Injection therapy referral
- Narcotic prescription
- Surgical consultation

Methodology — Administrative

This measure includes members ages 18 years and older as of December 31, 2017, from commercial and Medicaid products with a pharmacy benefit. A newly diagnosed episode of acute low back pain for a member is defined as having no non-pharmacy low back pain claims at any facility in the 180 days prior to the diagnosis visit. Members with cancer, trauma, neurological impairment, IV drug abuse or pregnancy diagnoses prior to the end of the first six weeks following diagnosis are excluded. Population identification is based on claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the provider group of the diagnosing practitioner.

Results

Total eligible members	13,106
Members with appropriate care	9,435
Members Optimally Managed	72.0%

Rate by Service

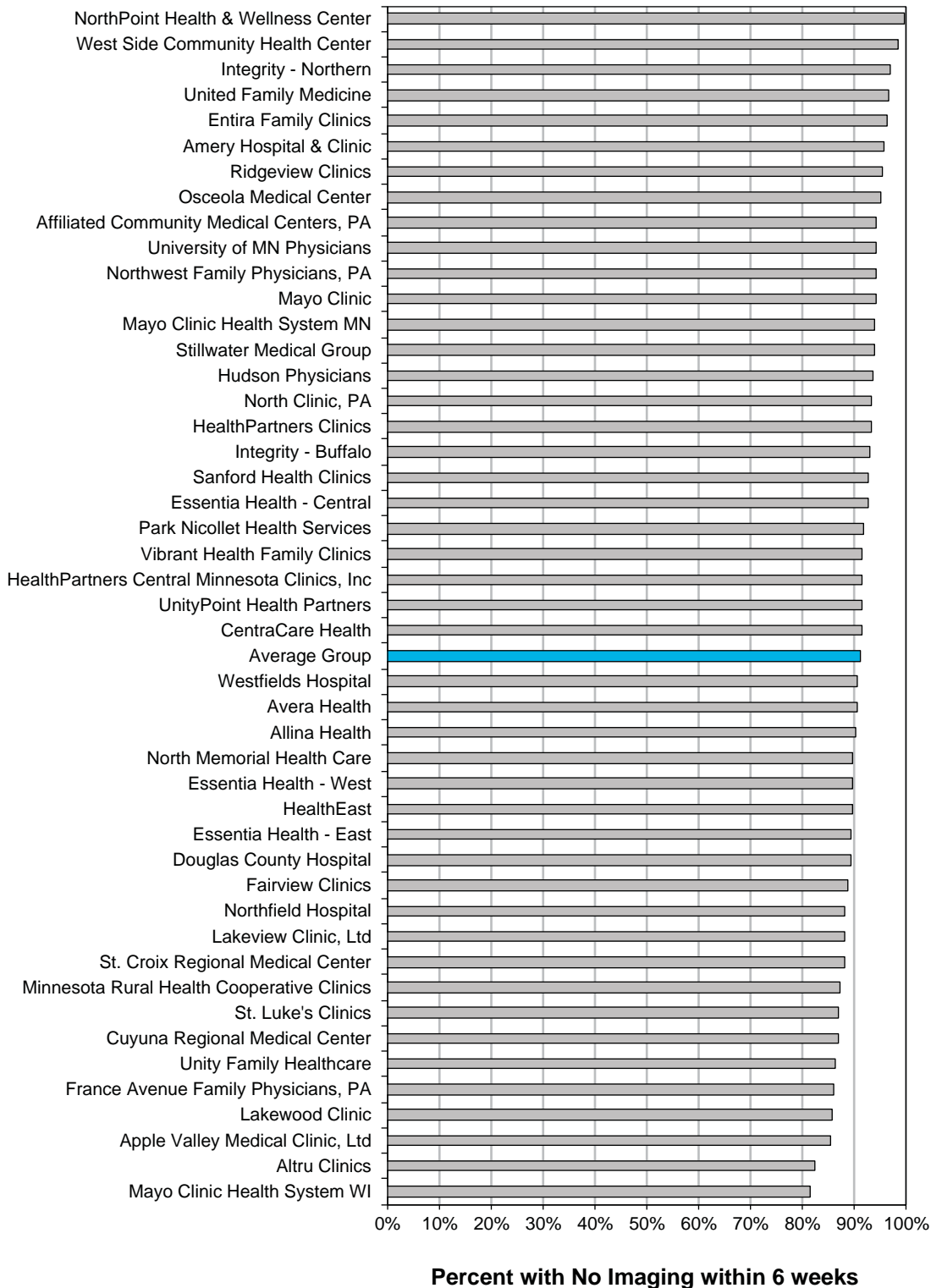
No imaging in first six weeks	91.9%
No injection in first six weeks	98.4%
No narcotic prescription in first six weeks	79.5%
No surgical consultation in first six weeks	98.7%

Optimal Care for Acute Low Back Pain
1/1/2017 - 12/31/2017

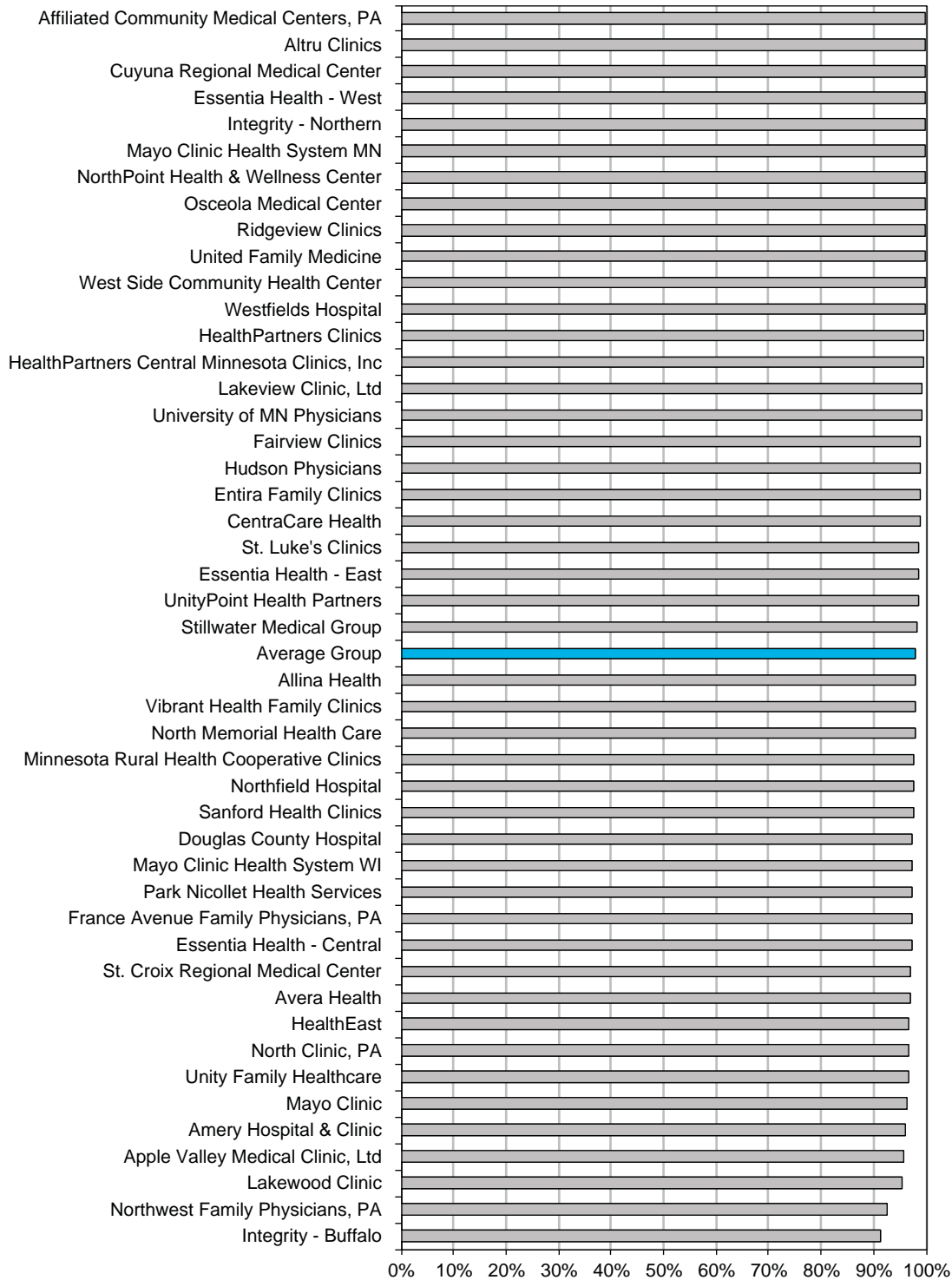


Percent with No Imaging, Injections, Surgery Referral or Narcotics within 6 weeks

Low Back Pain - Imaging
1/1/2017 - 12/31/2017

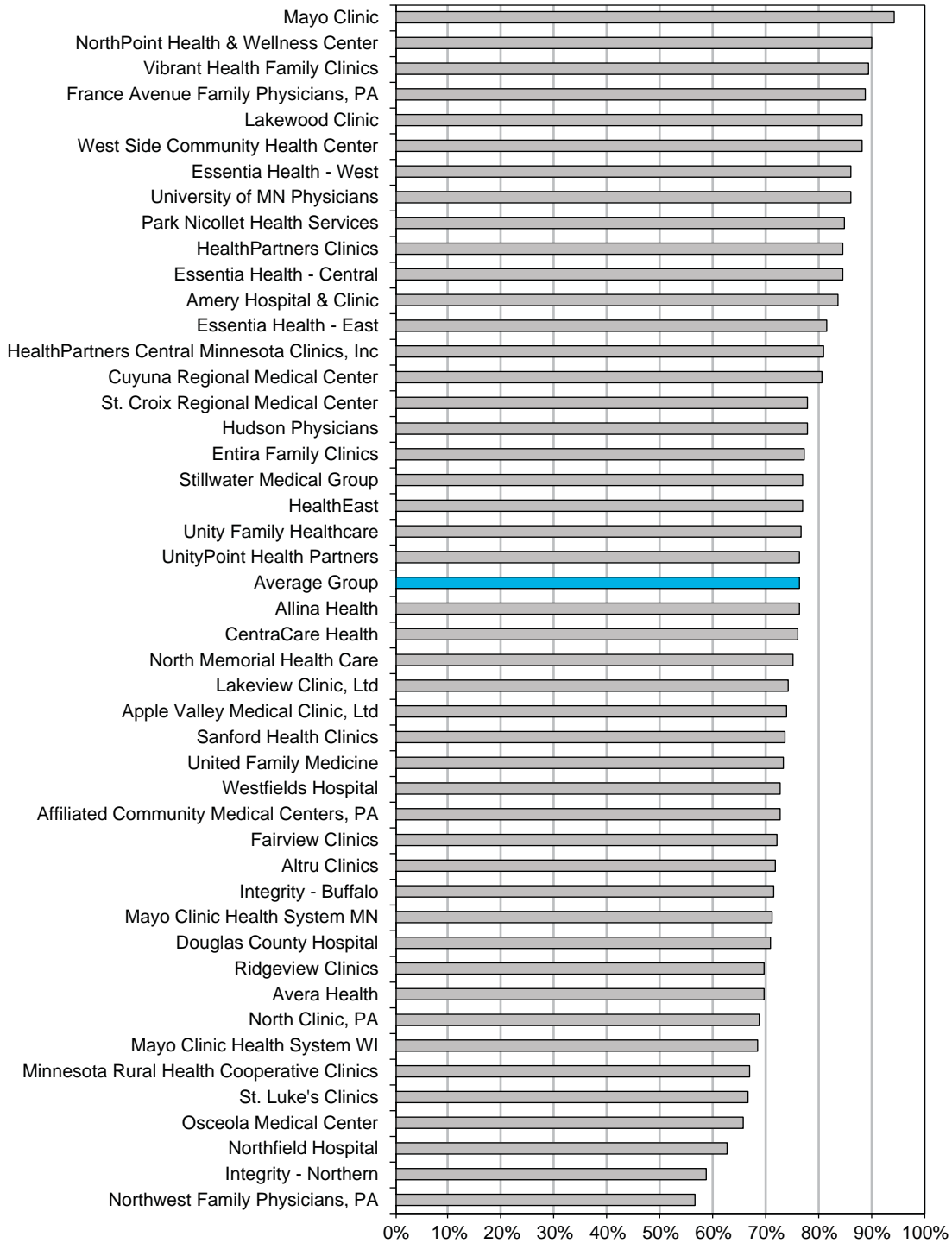


Low Back Pain - Injections
1/1/2017 - 12/31/2017



Percent with No Injection within 6 weeks

Low Back Pain - Narcotics Use
1/1/2017 - 12/31/2017



Percent with No Narcotics within 6 weeks

Low Back Pain - Surgical Consult
1/1/2017 - 12/31/2017



Percent with No Surgical Consult within 6 weeks

PREVENTIVE SERVICES — ADULT PRIMARY CARE

January 1, 2017 – December 31, 2017

Description

The rate represents the percent of enrolled members ages 19 and older by December 31, 2017, who are up-to-date (UTD) for all appropriate preventive services and the percent up-to-date rate by each service type. The measure includes preventive screening appropriate to each member's age and gender. (The Adult Preventive Services matrix of required services by age and gender is included in the 2018 Clinical Indicators Report Technical Supplement at healthpartners.com/quality.)





Methodology — Hybrid

Elements of this measure are consistent with HEDIS 2018 measures. This measure includes members from all products who were continuously enrolled from January 1, 2017 to December 31, 2017, who had a clinic visit in 2017. Population identification is based on claim and membership databases. This measure includes a random sample of 105 members (100 + 5% oversample) per medical group. The UTD rate reflects a combination of administrative and chart abstracted data. Members are attributed to the primary care provider group with the most office visits during the measurement year. In addition to the members UTD rate, also displayed is an UTD rate that includes a tobacco assessment component. The Institute for Clinical Systems Improvement (ICSI) preventive services guideline for adults lists tobacco assessment as a Level I Component.

Results*

Total eligible members	395,039
Members sampled	6,098
Members up-to-date (<i>Combination 6</i>)	4,071
Members Up-to-Date - Primary Care (<i>Combination 6</i>)	69.2% (± 3.0)

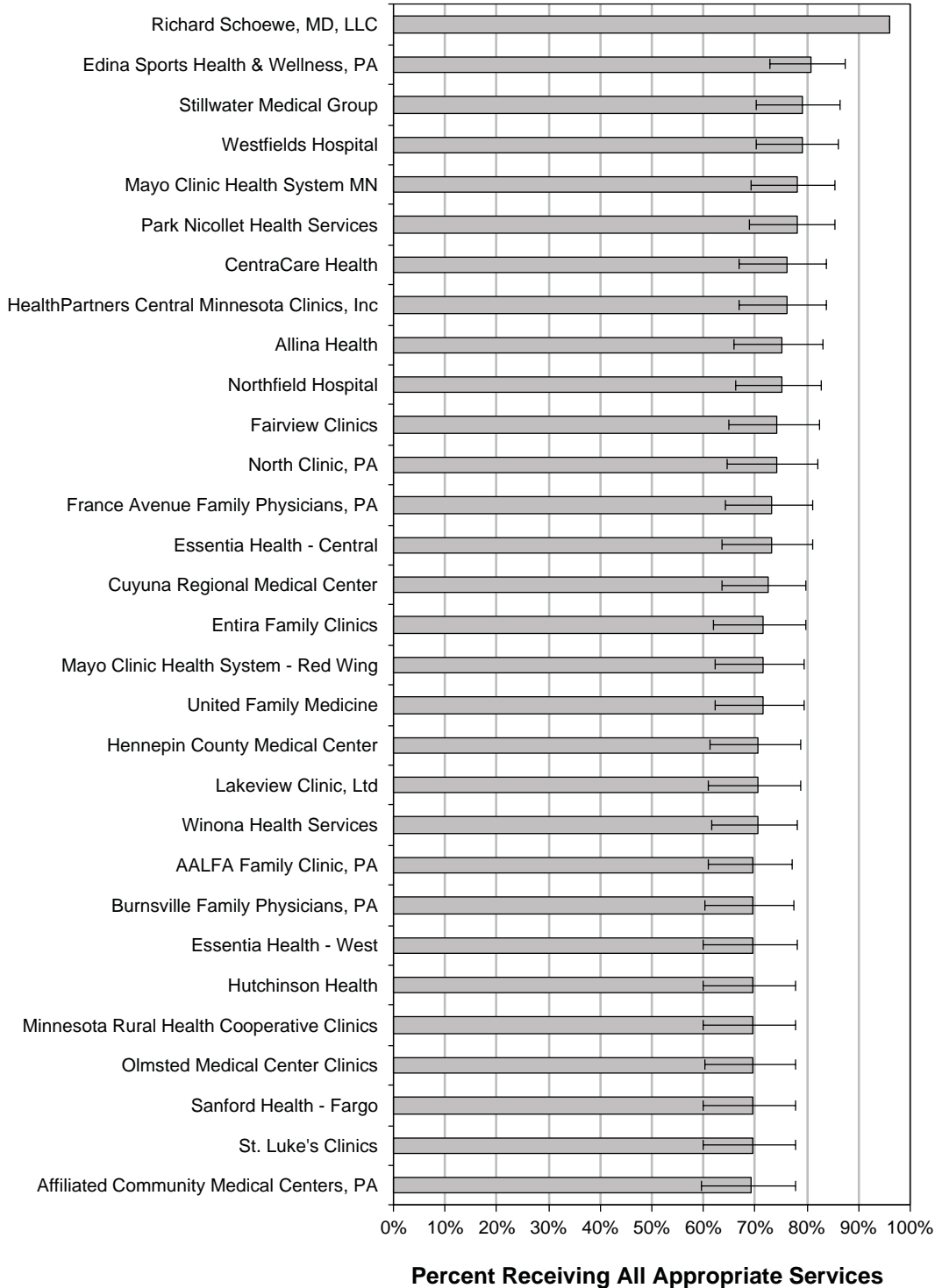
Rate by Service

Blood pressure (<i>last two years</i>)	97.8% (± 0.9)
BMI (<i>in 2017</i>)	91.7% (± 1.9)
Breast cancer screening (<i>last two years</i>) 	81.2% (± 5.5)
Cervical cancer screening (<i>last three years</i>) 	79.4% (± 4.1)
Chlamydia (<i>in 2017</i>)	55.7% (± 20.2)
Cholesterol, total and HDL (<i>last five years</i>)	90.0% (± 2.4)
Colorectal cancer screening (<i>colonoscopy last ten years, flex sig last five years or FOBT in 2017</i>) 	78.7% (± 4.0)
Pneumococcal vaccine (<i>≥ 65 yrs</i>) 	91.3% (± 4.0)
Tobacco assessment (<i>in 2017</i>)	96.9% (± 1.0)

* All rates are weighted by the eligible population of the provider groups displayed.

**Preventive Services - Adult - Primary Care
Members Up-to-Date, Combination 6
1/1/2017 - 12/31/2017**

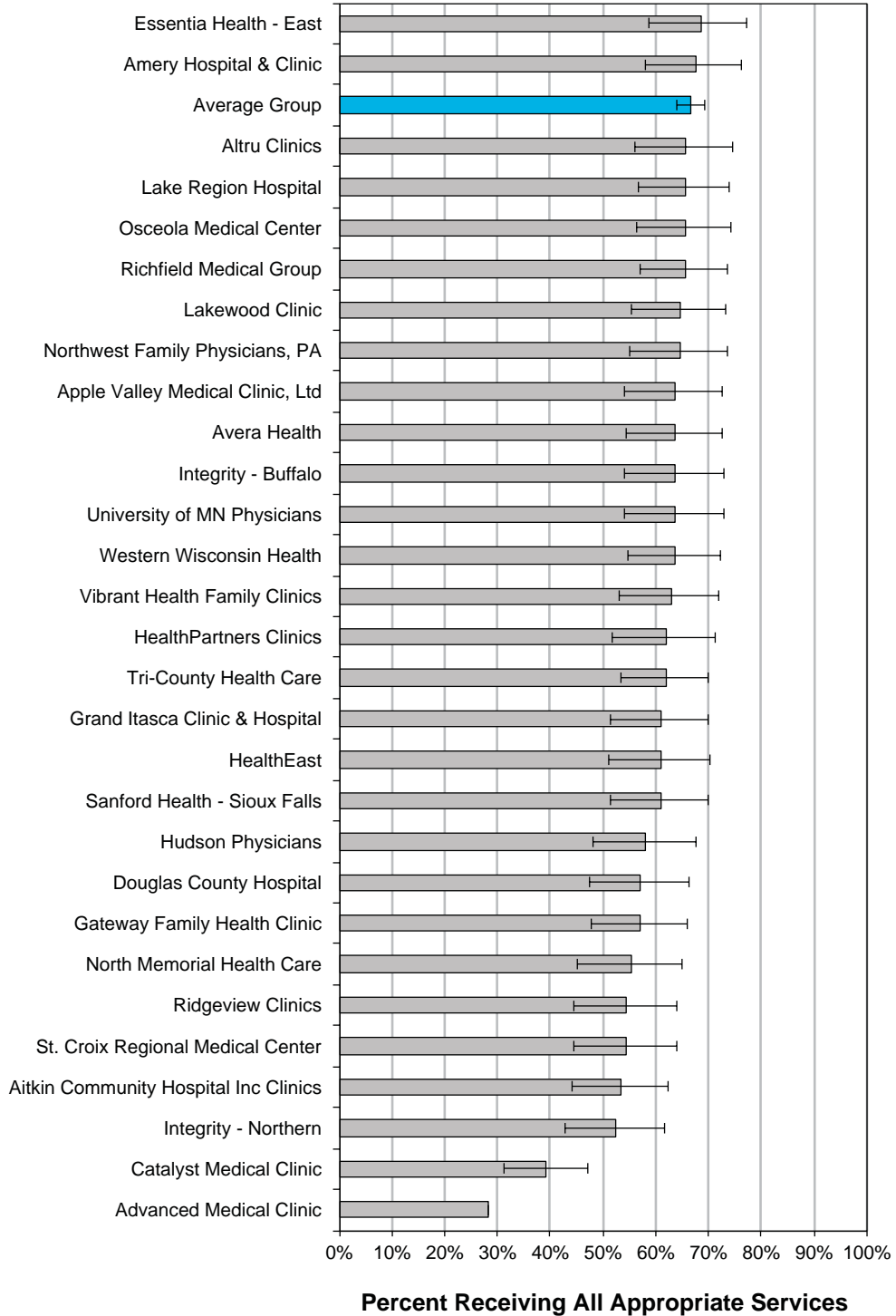
Part 1 of a 2 Part Graph



— Confidence Interval
Finite population correction factor applied

**Preventive Services - Adult - Primary Care
Members Up-to-Date, Combination 6
1/1/2017 - 12/31/2017**

Part 2 of a 2 Part Graph



— Confidence Interval
Finite population correction factor applied

PREVENTIVE SERVICES — ADULT OB/GYN

January 1, 2017 – December 31, 2017

Description

The rate represents the percent of enrolled female members ages 19 and older by December 31, 2017, who are up-to-date (UTD) for all appropriate preventive services and the percent up-to-date rate by each service type. The measure includes preventive screening appropriate to each member's age. (The Adult Preventive Services matrix of required services by age and gender is included in the 2018 Clinical Indicators Report Technical Supplement at healthpartners.com/quality.)

Methodology — Hybrid

Elements of this measure are consistent with HEDIS 2018 measures. This measure includes members from all products who were continuously enrolled from January 1, 2017 to December 31, 2017, who had a clinic visit in 2017. Population identification is based on claim and membership databases. This measure includes a random sample of 84 members (80 + 5% oversample) per medical group. The UTD rate reflects a combination of administrative and chart abstracted data. Members are attributed to the OB/GYN provider group with the most office visits during the measurement year. In addition to the members UTD rate, also displayed is an UTD rate that includes a tobacco assessment component. The Institute for Clinical Systems Improvement (ICSI) preventive services guideline for adults lists tobacco assessment as a Level I Component.

Results*

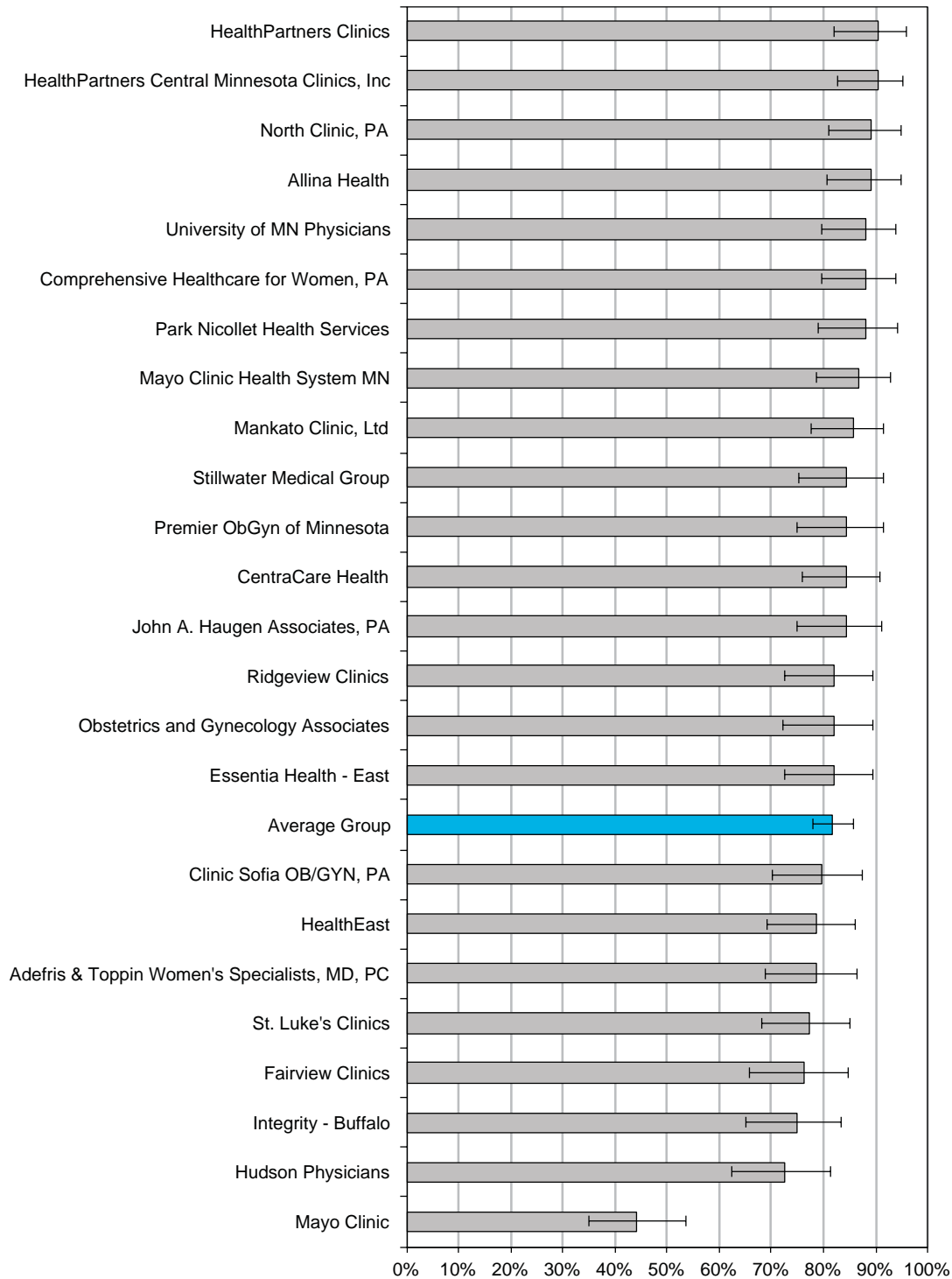
Total eligible members	69,503
Members sampled	2,014
Members up-to-date (<i>Combination 3</i>)	1,647
Members Up-to-Date - OB/GYN (<i>Combination 3</i>)	85.9% (± 2.5)

Rate by Service

Blood pressure (<i>last two years</i>)	99.2% (± 0.5)
Breast cancer screening (<i>last two years</i>) <small>HEDIS</small>	96.0% (± 2.0)
Cervical cancer screening (<i>last three years or last five years with HPV co-test</i>) <small>HEDIS</small>	94.0% (± 1.8)
Chlamydia (<i>in 2017</i>)	69.3% (± 10.6)
Cholesterol, total and HDL (<i>last five years</i>)	89.4% (± 4.8)
Colorectal cancer screening (<i>colonoscopy last ten years, flex sig last five years or FOBT in 2017</i>) <small>HEDIS</small>	84.4% (± 5.4)
Pneumococcal vaccine (<i>≥ 65 yrs</i>) <small>HEDIS</small>	71.4% (± 16.2)
Tobacco assessment (<i>in 2017</i>)	99.0% (± 0.5)

* All rates are weighted by the eligible population of the provider groups displayed.

Preventive Services - Adult - OB/GYN Providers
Members Up-to-Date, Combination 3
 1/1/2017 - 12/31/2017



Percent Receiving All Appropriate Services

— Confidence Interval
 Finite population correction factor applied

PREVENTIVE SERVICES — CHILD AND ADOLESCENT

January 1, 2017 – December 31, 2017

Description

The rate represents the percent of enrolled members ages 18 and younger on December 31, 2017, who are up-to-date (UTD) for all appropriate preventive services and the up-to-date rate by each service type. The measure includes preventive screening appropriate to each member’s age and gender. (The Child and Adolescent Preventive Services matrix of required services by age and gender is included in the 2018 Clinical Indicators Report Technical Supplement at healthpartners.com/quality.)

Methodology — Hybrid

Elements of this measure are consistent with HEDIS 2018 measures. This measure includes members from all products who were continuously enrolled from January 1, 2017 to December 31, 2017, who had a clinic visit in 2017. Population identification is based on claim and membership databases. This measure includes a random sample of 105 members (100 + 5% oversample) per medical group. The UTD rate reflects a combination of administrative and chart abstracted data. Members are attributed to the primary care provider group with the most office visits during the measurement year. In addition to the members UTD rate, also displayed is an UTD rate that includes a tobacco assessment component. The Institute for Clinical Systems Improvement (ICSI) preventive services guideline for adults lists tobacco assessment as a Level I Component.

Results*

Total eligible members	136,502
Members sampled	5,904
Members up-to-date (<i>Combination 6</i>)	2,721
Members Up-to-Date - Child and Adolescent (<i>Combination 6</i>)	55.5% (± 2.9)

Rate by Service

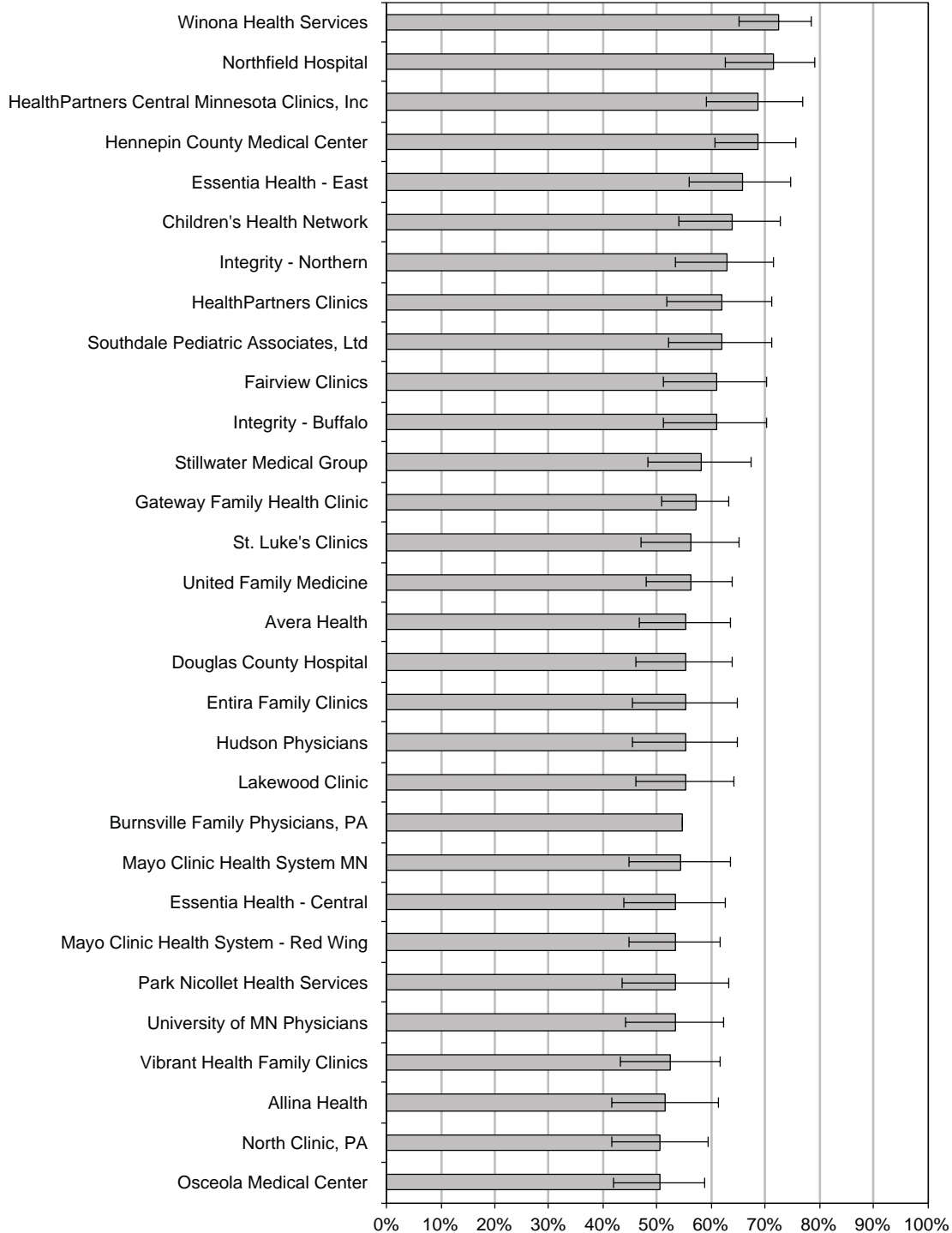
BMI (<i>in 2017</i>)	83.0% (± 2.3)
Chlamydia (<i>in 2017</i>)	27.5% (± 10.5)
HPV ages 13-18 (<i>UTD by 12/31/2017</i>) series of 3	39.0% (± 5.1)
Imm combination ages 2–4 (<i>UTD by 12/31/2017</i>) 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 HepB, 1 VZV, 4 Pneumococcal) <small>HEDIS</small>	87.2% (± 4.6)
Imm combination ages 2–4 (<i>UTD by 12/31/2017</i>) 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 HepB, 1 VZV, 4 Pneumococcal, 1 HepA, 2-3 Rotavirus, 2 Influenza) <small>HEDIS</small>	68.1% (± 6.2)
Imm combination ages 7–8 (<i>UTD by age 7</i>) DTaP #5, MMR #2, Polio #4, VZV #2	79.1% (± 6.9)
Meningococcal immunization (<i>by age 13</i>) <small>HEDIS</small>	82.7% (± 8.1)
Tetanus, adolescent (<i>by age 13</i>) <small>HEDIS</small>	85.1% (± 8.0)
Tobacco assessment (<i>in 2017</i>)	85.2% (± 1.9)
Vision screening (<i>by 12/31/2017</i>)	78.8% (± 9.9)

¹ Ages 16–18 if member meets HEDIS criteria as sexually active.

* All rates are weighted by the eligible population of the provider groups displayed.

**Preventive Services - Child and Adolescent
Members Up-to-Date, Combination 6
1/1/2017 - 12/31/2017**

Part 1 of a 2 Part Graph

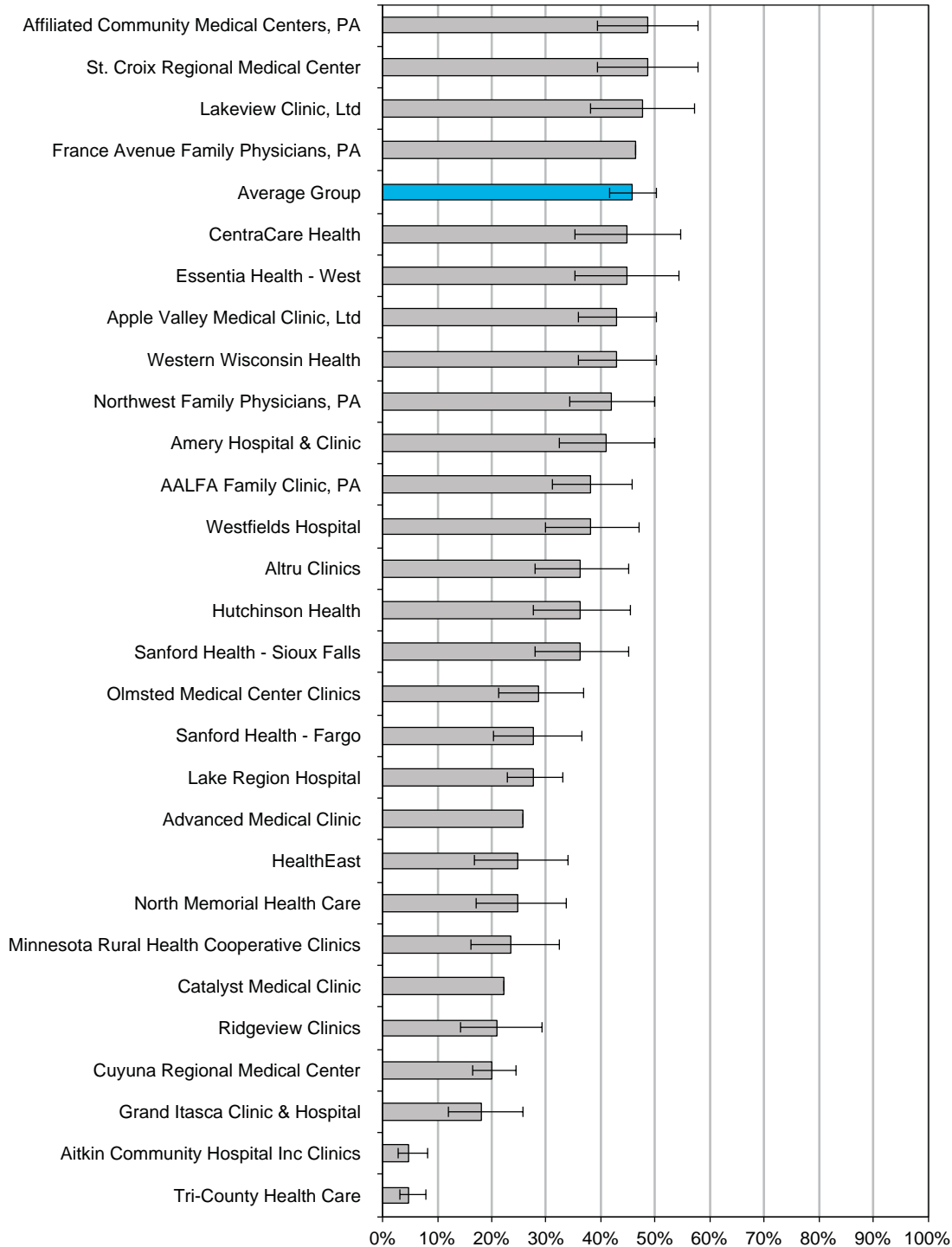


Percent Receiving All Appropriate Services

— Confidence Interval
Finite population correction factor applied

**Preventive Services - Child and Adolescent
Members Up-to-Date, Combination 6
1/1/2017 - 12/31/2017**

Part 2 of a 2 Part Graph



Percent Receiving All Appropriate Services

— Confidence Interval
Finite population correction factor applied

CHILD & TEEN CHECK-UPS

July 1, 2016 – June 30, 2018

Description

The rate represents the percentage of children ages six months to 20 years as of June 30, 2018, enrolled in Prepaid Medical Assistance Program (PMAP) or MinnesotaCare (MNCare) who had a preventive care visit within Child & Teen Check-Ups (C&TC) defined time periods:

- Last six months if age is six months through 17 months
- Last one year if age is 18 months through six years
- Last two years if age is seven years through 20 years

Methodology — Administrative

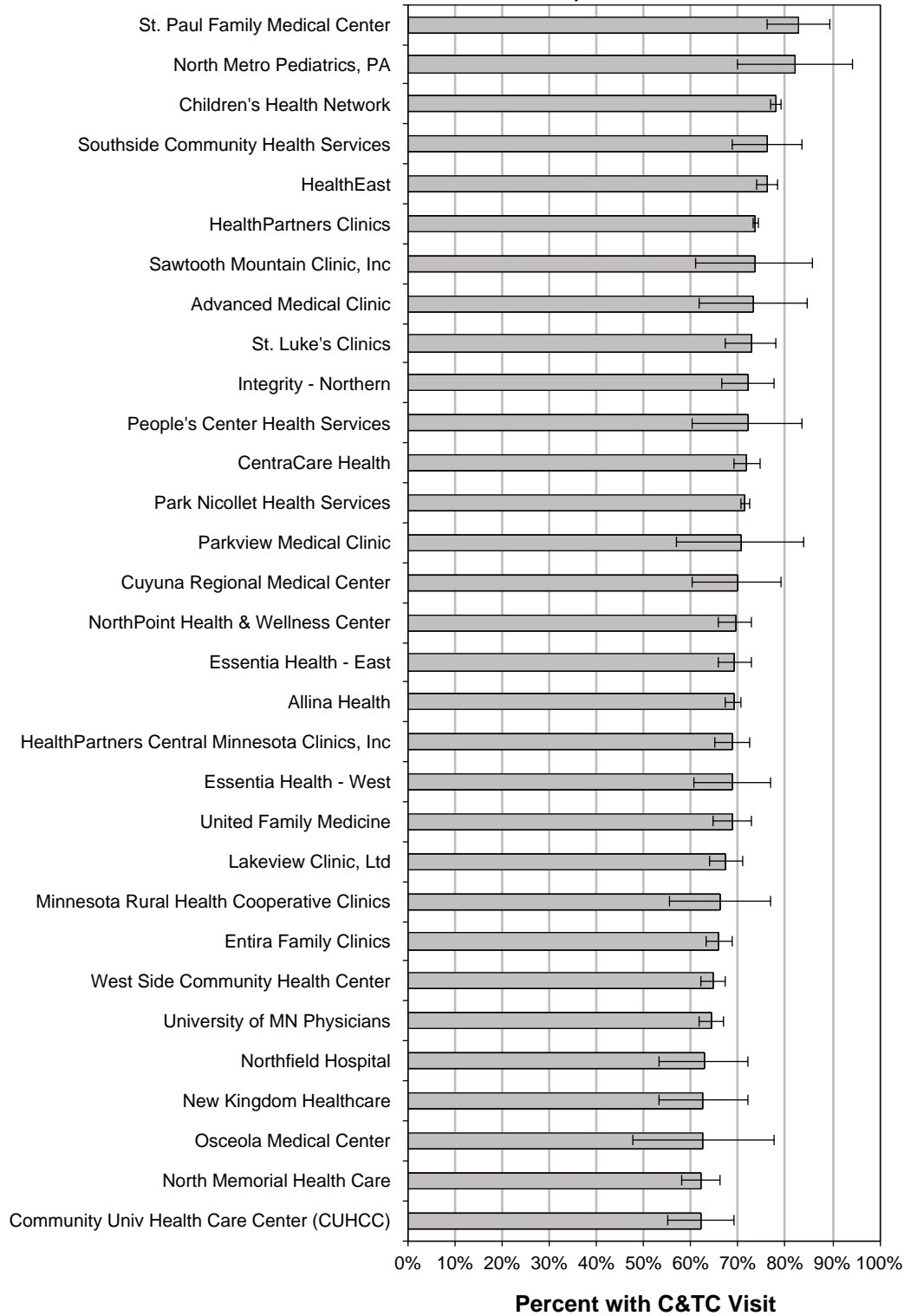
This measure includes all children ages six months to 20 years old from PMAP or MNCare products who were enrolled on June 30, 2018. Population identification is based on encounter, claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the primary care provider group with the most office visits during the measurement year.

Results

Total eligible members	75,789
Preventive visits	42,191
C&TC Rate	55.7% (± 0.4)

Child & Teen Check-Ups (C&TC)
7/1/2016 - 6/30/2018

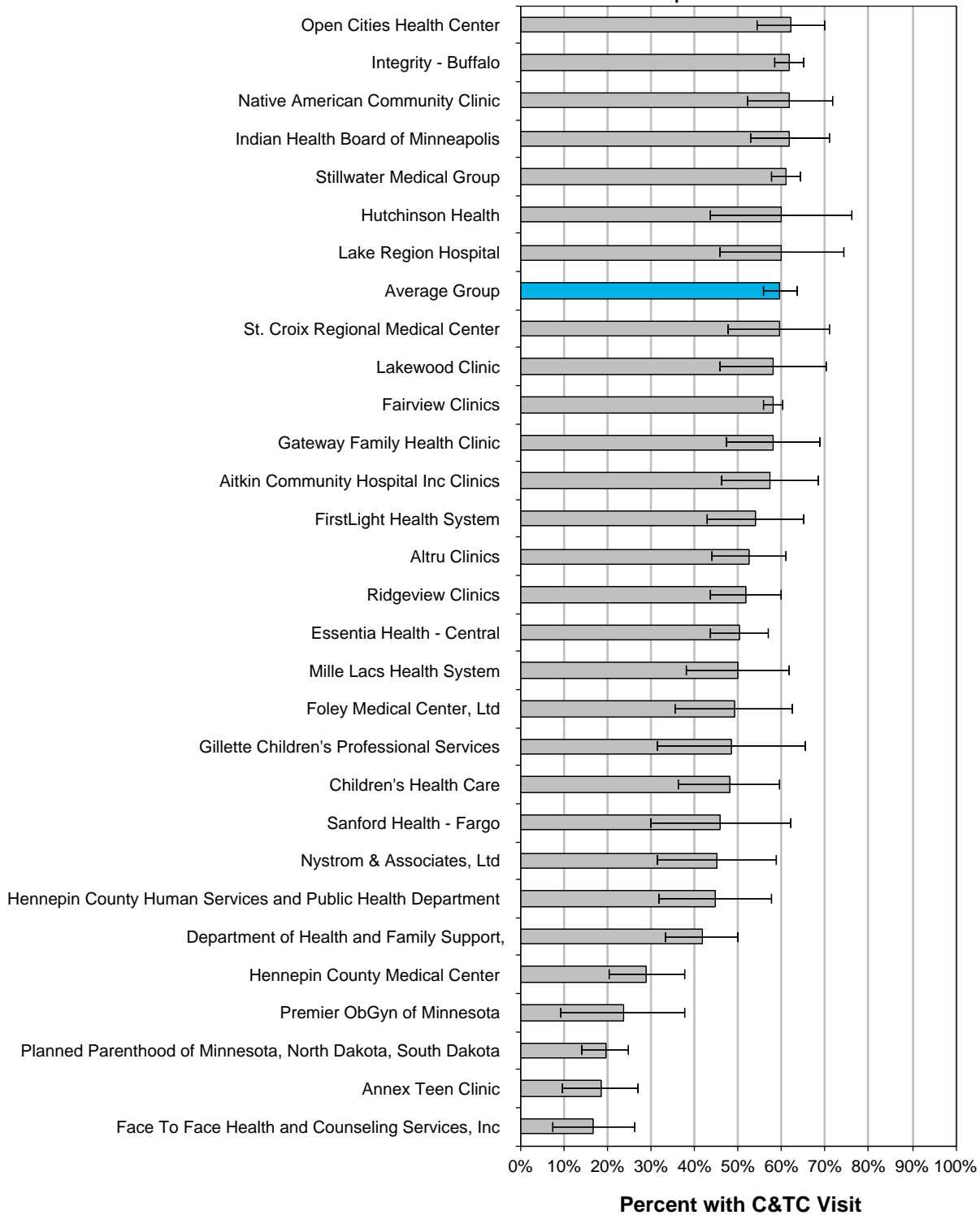
Part 1 of a 2 Part Graph



— Confidence Interval

Child & Teen Check-Ups (C&TC)
7/1/2016 - 6/30/2018

Part 2 of a 2 Part Graph



— Confidence Interval

LEAD SCREENING

July 1, 2017 – June 30, 2018

Description

The rate represents the percentage of children ages 12 to 30 months as of June 30, 2018, enrolled in Prepaid Medical Assistance Program (PMAP) or MinnesotaCare (MNCare) who had at least one lead test between July 1, 2017 and June 30, 2018.

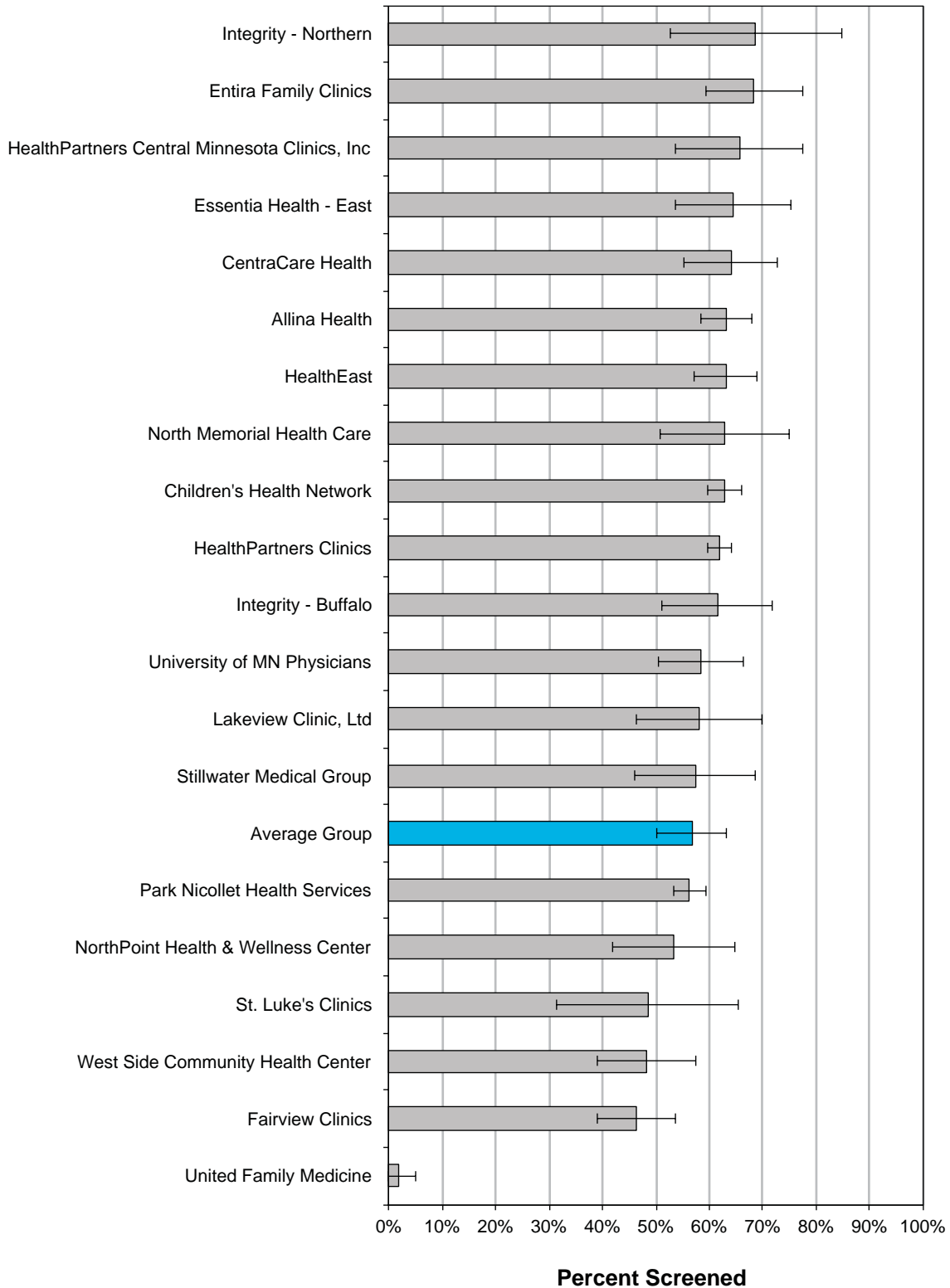
Methodology — Administrative

This measure includes all children ages 12 to 30 months from PMAP or MNCare products who were enrolled on June 30, 2018. Population identification is based on encounter, claim and membership databases. Rates are calculated using administrative data only. Members are attributed to the primary care provider group with the most office visits during the measurement year.

Results

Total eligible members	6,884
Lead screening test	3,749
Lead Screening Rate	54.5% (± 1.2)

Lead Screening
7/1/2017 - 6/30/2018



— Confidence Interval

CLINIC SAFETY ASSESSMENT SURVEY 2018

Description

This measure displays current provider group efforts related to six ambulatory patient safety topics.

Methodology — Provider Group Survey

Primary care and specialty providers are surveyed on an annual basis. Results are self-reported. The six topics and related survey questions are:

1. Has your provider group developed and completed a Safety Culture Assessment Survey?

- No assessment Assessment completed; includes reporting system of incidents and near misses Assessment and implementation of action plan(s) based on analysis of reported incidents

2. Has your provider group established a protocol for dispensing sample medications?

- No protocol If samples are provided to patients, there is a protocol established and implemented at all clinic sites. Sampling eliminated at all clinic sites

3. Has your provider group established a protocol for members on chronic anticoagulation therapy?

- No protocol Protocol established and implemented at all clinic sites 100% of all patients on chronic anticoagulation therapy are managed by protocol; protocol compliance monitored and documented

NA = We do not manage patients on anticoagulation therapy.

4. Has your provider group established a protocol for safe use of abbreviations?

- No protocol Protocol established or EMR support implemented at all clinic sites Compliance monitored and documented

5. Has your provider group established a protocol for medication refills?

- No protocol Protocol established and implemented at all clinic sites Compliance monitored and documented

6. Has your provider group established a protocol for use of controlled substances?

- No protocol Protocol established and implemented at all clinic sites Compliance monitored and documented

































**Clinic Safety Assessment Survey Results
Self Reported as of June, 2018**

Part 1 of a 3 Part Graph

 Compliance with protocol monitored  Protocol Established  Skipped question, or no protocol or procedure Chose not to participate NA Not Applicable		Safety Clinic Assessm	Medication Sampling	Anticoagulation Protoc	Abbreviations	Medication Refills	Controlled Substances
Provider Group		#1	#2	#3	#4	#5	#6
AALFA Family Clinic, PA							
Adefris & Toppin Women's Specialists, MD, PC							
Advanced Medical Clinic							
Affiliated Community Medical Centers, PA							
Aitkin Community Hospital Inc Clinics							
Allina Health							
Altru Clinics							
Amery Hospital & Clinic							
Apple Valley Medical Clinic, Ltd							
Avera Health							
Catalyst Medical Clinic							
CentraCare Health							
Children's Health Network			NA				
Clinic Sofia OB/GYN, PA			NA				
Comprehensive Healthcare for Women, PA			NA				
Cuyuna Regional Medical Center							
Douglas County Hospital							
Duluth Family Medicine Clinic							
Edina Sports Health & Wellness, PA							
Entira Family Clinics							
Essentia Health - Central							
Essentia Health - East							
Essentia Health - West							
Fairview Clinics							
France Avenue Family Physicians, PA							
Gateway Family Health Clinic							
Gillette Children's Professional Services							
Grand Itasca Clinic & Hospital							

**Clinic Safety Assessment Survey Results
Self Reported as of June, 2018**

Part 2 of a 3 Part Graph

 Compliance with protocol monitored <hr/>  Protocol Established <hr/>  Skipped question, or no protocol or procedure <hr/> Chose not to participate <hr/> NA Not Applicable		Safety Clinic Assessm	Medication Sampling	Anticoagulation Protoc	Abbreviations	Medication Refills	Controlled Substances
Provider Group	#1	#2	#3	#4	#5	#6	
Gundersen Health System							
HealthEast							
HealthPartners Central Minnesota Clinics, Inc							
HealthPartners Clinics							
Hennepin County Medical Center							
Hudson Physicians							
Hutchinson Health							
Ilko Family Medicine, PA							
Integrity - Buffalo							
Integrity - Northern							
John A. Haugen Associates, PA			NA				
Lake Region Hospital							
Lakeview Clinic, Ltd							
Lakewood Health System							
Mankato Clinic, Ltd							
Mayo Clinic							
Mayo Clinic Health System - Red Wing							
Mayo Clinic Health System MN							
Mesaba Clinic							
Mille Lacs Health System							
Minnesota Rural Health Cooperative Clinics							
Minnesota Women's Care, PA							
New Kingdom Healthcare							
North Clinic, PA							
North Memorial Health Care							
Northfield Hospital							
Northwest Family Physicians, PA							
OakLeaf Medical Network							

**Clinic Safety Assessment Survey Results
Self Reported as of June, 2018**

Part 3 of a 3 Part Graph

 Compliance with protocol monitored <hr/>  Protocol Established <hr/>  Skipped question, or no protocol or procedure <hr/> Chose not to participate <hr/> NA Not Applicable		Safety Clinic Assessment	Medication Sampling	Anticoagulation Protocol	Abbreviations	Medication Refills	Controlled Substances
Provider Group		#1	#2	#3	#4	#5	#6
Obstetrics and Gynecology Associates							
Olmsted Medical Center Clinics							
Osceola Medical Center							
Park Nicollet Health Services							
Perham Health							
Premier ObGyn of Minnesota							
Richfield Medical Group							
Ridgeview Clinics							
Sanford Health - Fargo							
Sanford Health - Sioux Falls							
Southdale Pediatric Associates, Ltd				NA			
St. Croix Regional Medical Center							
St. Luke's Clinics							
St. Paul Family Medical Center							
Stillwater Medical Group							
Tri-County Health Care							
Twin Cities Orthopedics, PA							
United Family Medicine							
Unity Family Healthcare							
UnityPoint Health Partners							
University of MN Physicians							
Valley Family Practice							
Vibrant Health Family Clinics							
West Side Community Health Center							
Western Wisconsin Health							
Westfields Hospital							
Winona Health Services							

PATIENT EXPERIENCE — MEDICATION SAFETY — SPECIALTY CARE

2018 Member Survey

Description

On an annual basis, members with medications prescribed by specialty care physicians are asked if they are satisfied with the explanation provided by their clinic concerning the reasons for and side effects of the prescribed medication. The rate represents the percent of surveyed members responding with “very satisfied” on questions related to medication safety.

Methodology — Member Survey

Patient experience was determined through mail surveys conducted by HealthPartners in February and March 2018. Results were distributed to provider groups second quarter, 2018. OB/GYN includes a random sample of members ages 18 years and older. Cardiology, ENT and Orthopaedics include a random sample of members that includes both adults and children. Specialty care results include members enrolled in commercial, Medicare or Medicaid products. The data were weighted to equal sample sizes of 100. The results were also weighted to control for self-reported health status. Results are reported for 12 cardiology, 16 ENT, 20 OB/GYN and 15 orthopaedic groups.

Survey Questions - Specialty Care

1. How satisfied are you with the explanations you received about the reason for the prescribed medicines?
2. How satisfied are you with the information you received about any side effects of the medicines?

Results

Cardiology

Total members responding	1,127
Total members with prescribed medications	672
Very satisfied - explanation for prescribed medications	64%
Very satisfied - information received about side effects	56%

ENT

Total members responding	1,030
Total members with prescribed medications	517
Very satisfied - explanation for prescribed medications	63%
Very satisfied - information received about side effects	54%

OB/GYN

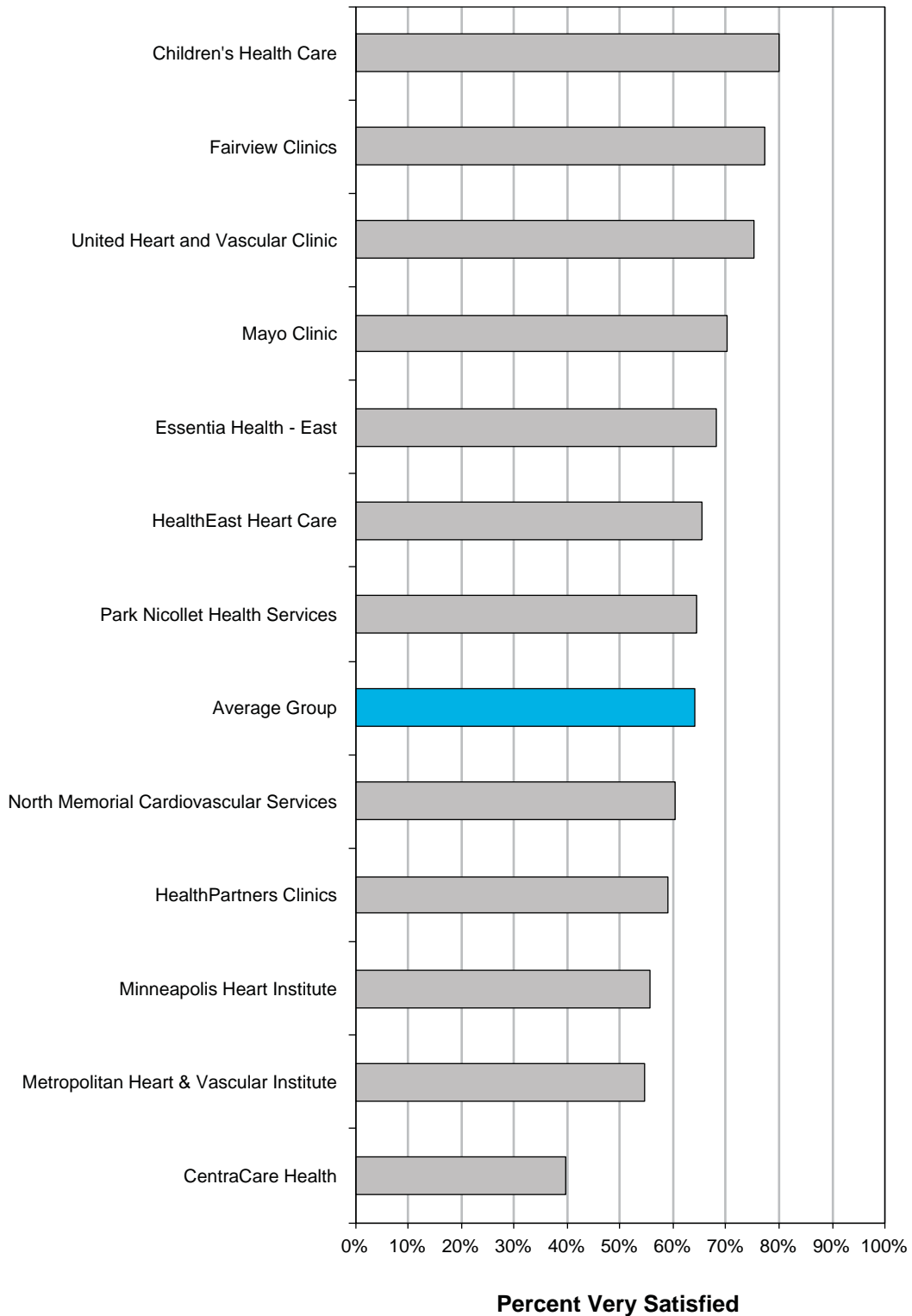
Total members responding	1,343
Total members with prescribed medications	747
Very satisfied - explanation for prescribed medications	72%
Very satisfied - information received about side effects	64%

Orthopaedics

Total members responding	1,290
Total members with prescribed medications	574
Very satisfied - explanation for prescribed medications	64%
Very satisfied - information received about side effects	57%

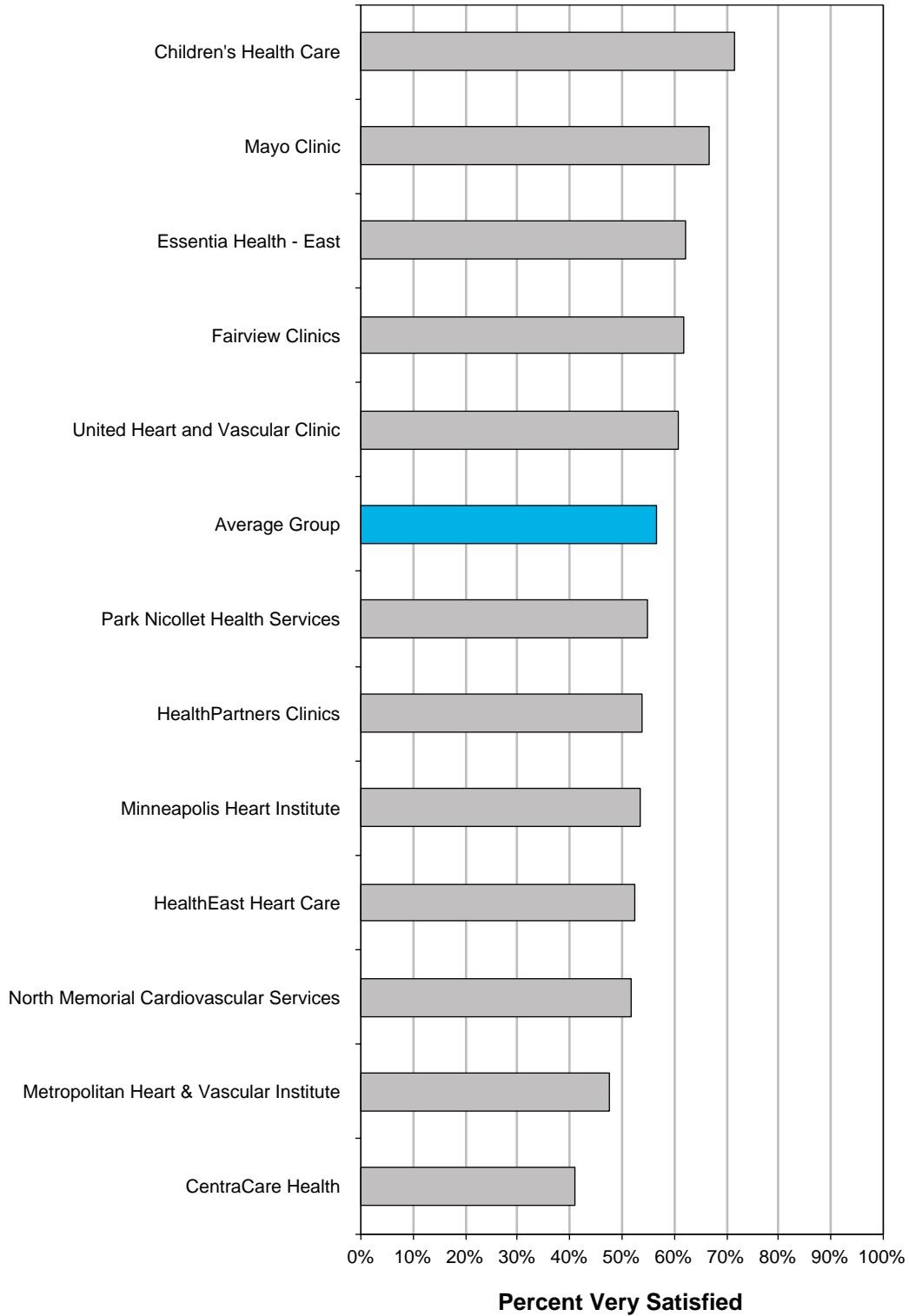
Patient Experience Medication Safety - Cardiology Providers
2018 Member Survey

How satisfied are you with the explanations you received
 about the reason for the prescribed medicines?



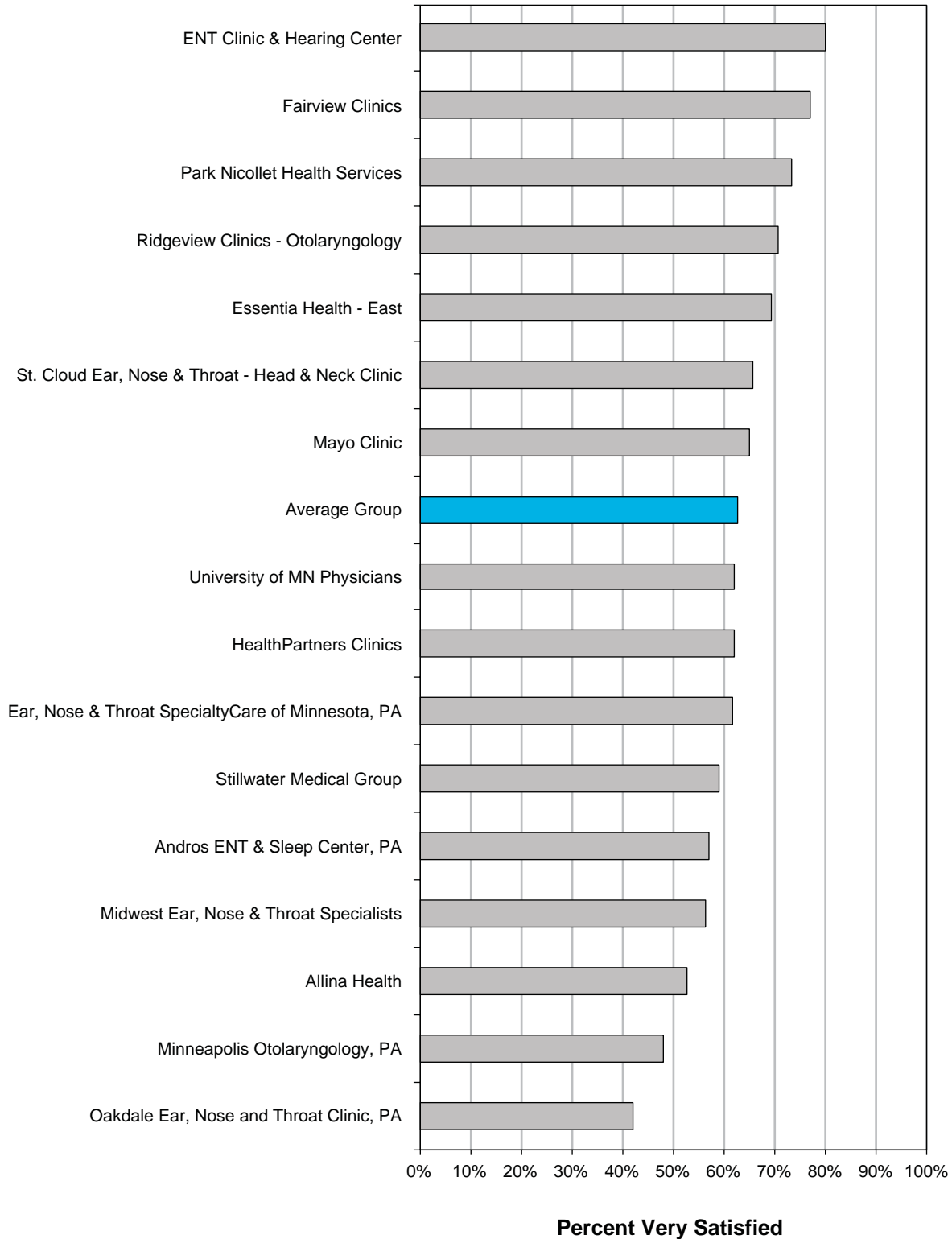
Patient Experience Medication Safety - Cardiology Providers
2018 Member Survey

How satisfied are you with the information you received about any side effects of the medicines?



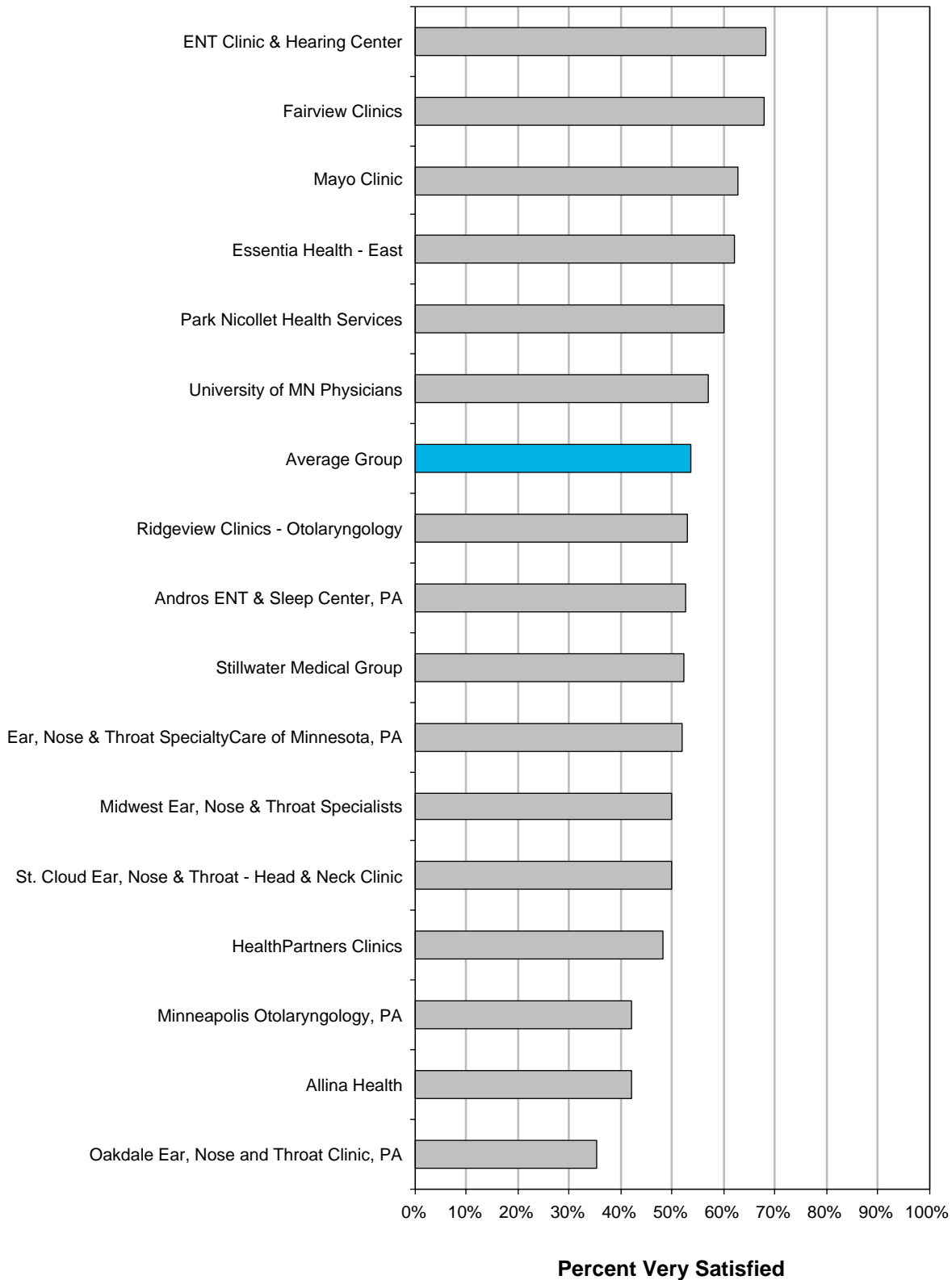
**Patient Experience Medication Safety - ENT Providers
2018 Member Survey**

How satisfied are you with the explanations you received
about the reason for the prescribed medicines?



Patient Experience Medication Safety - ENT Providers
2018 Member Survey

How satisfied are you with the information you received
 about any side effects of the medicines?



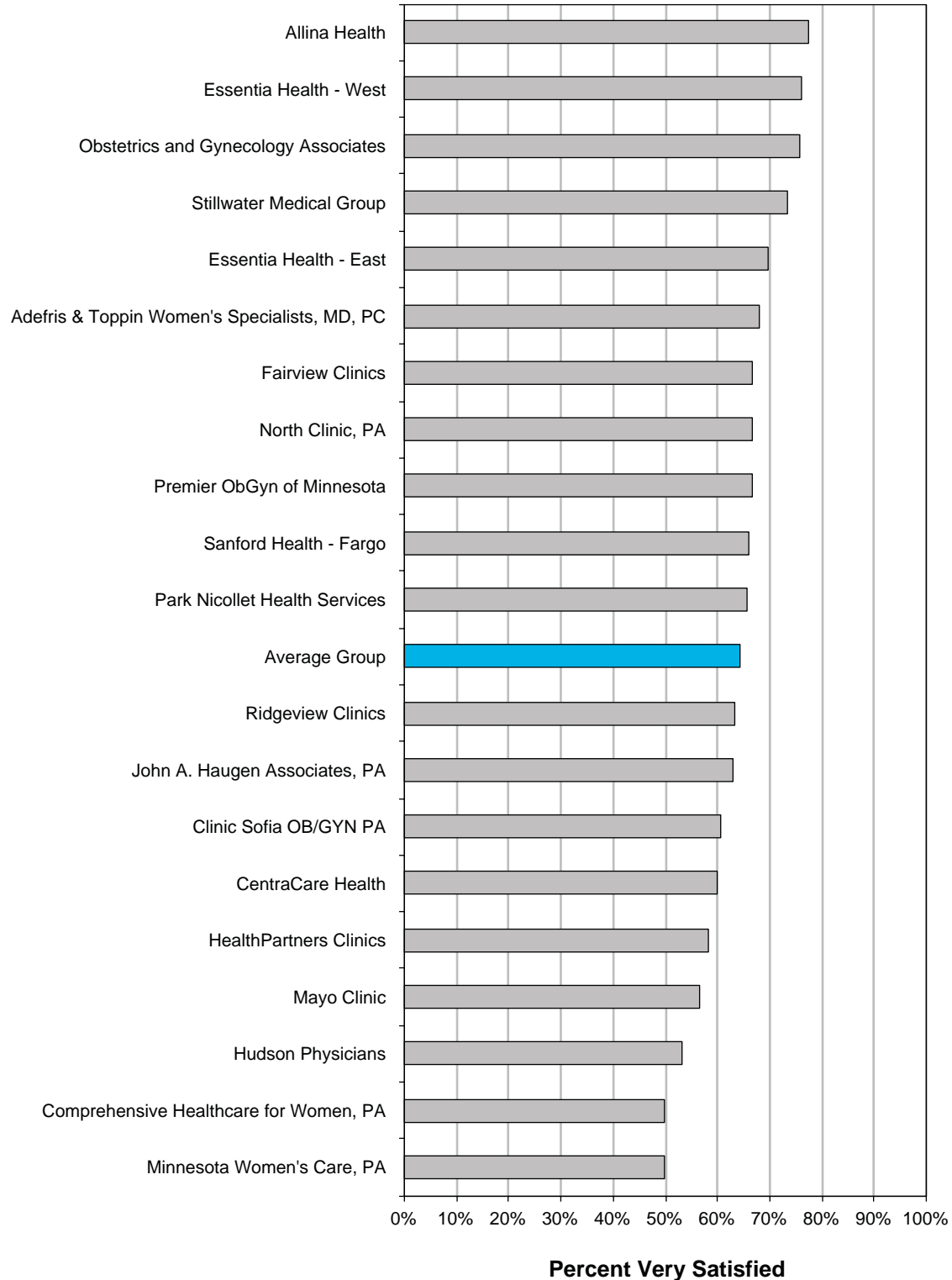
**Patient Experience Medication Safety - OB/GYN Providers
2018 Member Survey**

How satisfied are you with the explanations you received
about the reason for the prescribed medicines?



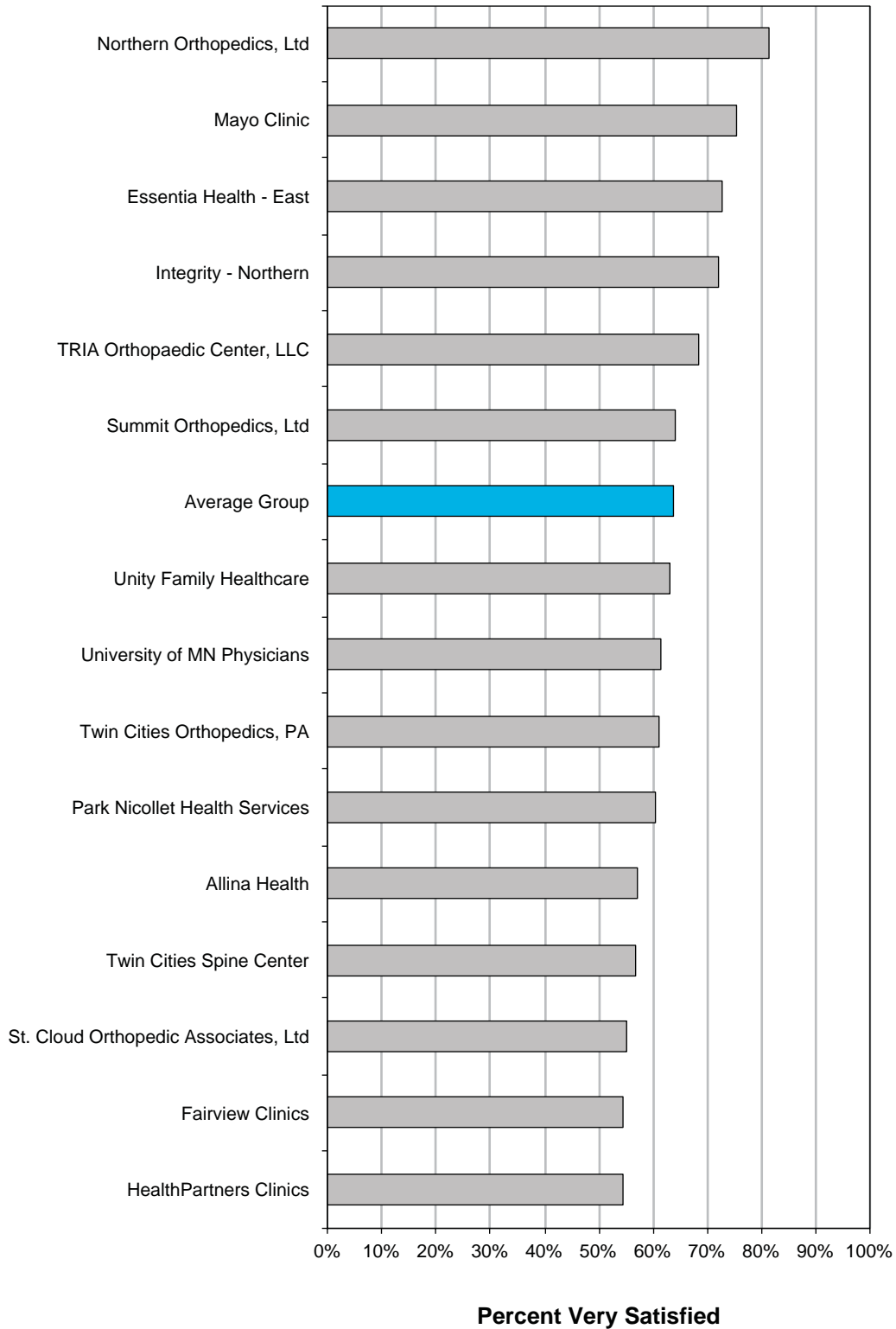
**Patient Experience Medication Safety - OB/GYN Providers
2018 Member Survey**

How satisfied are you with the information you received
about any side effects of the medicines?



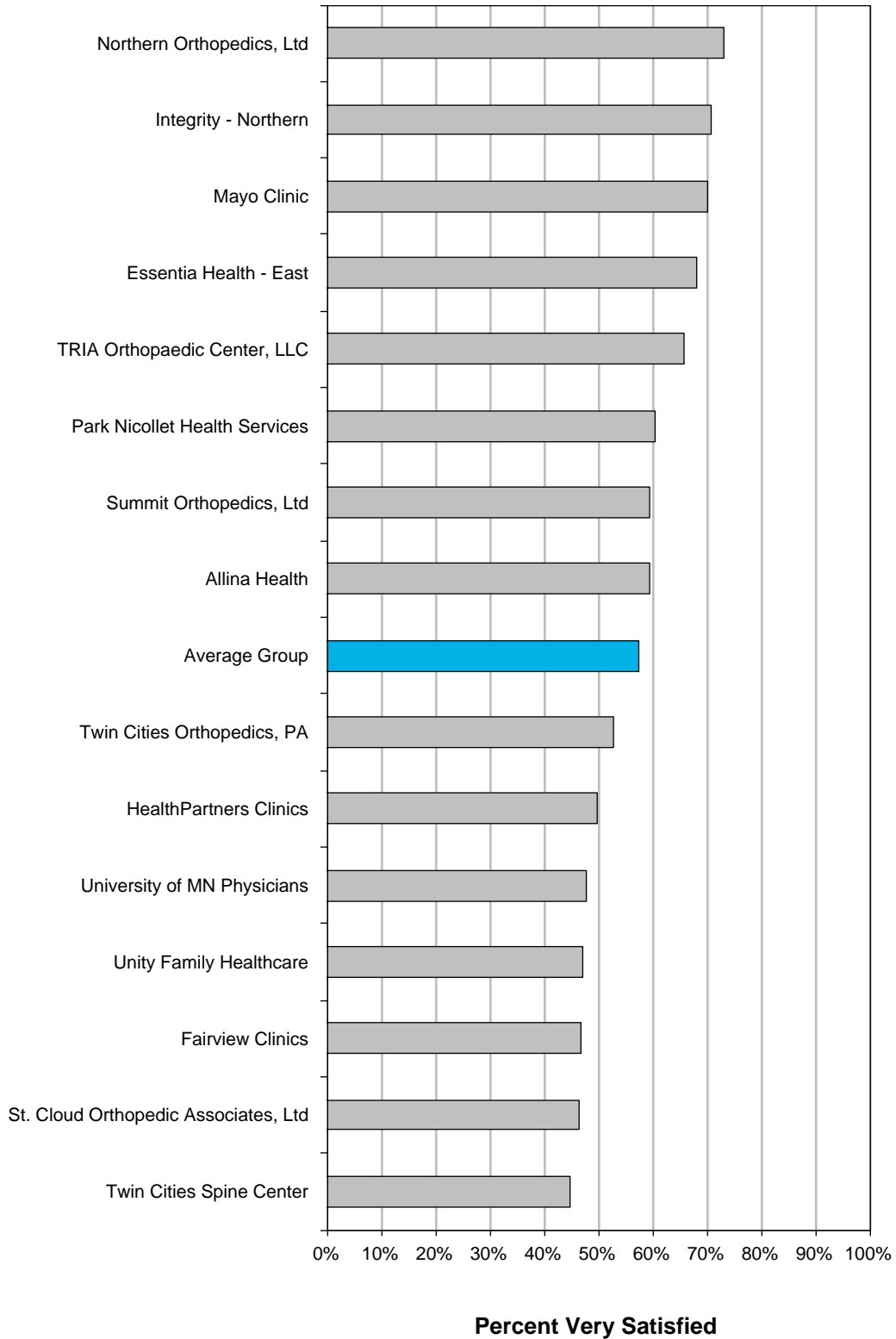
**Patient Experience Medication Safety - Orthopaedic Providers
2018 Member Survey**

How satisfied are you with the explanations you received
about the reason for the prescribed medicines?



**Patient Experience Medication Safety - Orthopaedic Providers
2018 Member Survey**

How satisfied are you with the information you received
about any side effects of the medicines?



TOTAL COST OF CARE AND RESOURCE USE — PRIMARY CARE

January 1, 2017 – December 31, 2017

Description

Medical groups risk adjusted cost and resource use effectiveness at managing their primary care attributed population. Total cost of care is a measure of efficiency, intensity and price of care delivered compared to the average for similar primary care providers while resource use is a measure of efficiency and intensity, removing the effects of price. The total cost and resource use measures include all services and procedures across all sectors of care (e.g. physician services, lab tests, x-rays, pharmacy, specialists, and hospitals). In 2017, this HealthPartners-developed measure became one of the first measures of resource use and cost to be endorsed by the National Quality Forum.

Methodology

These measures are based on commercial fully insured and self insured members ages 64 and under who are enrolled for a minimum of nine months. These members are attributed to the medical group that provides the majority of primary care office visits as determined by the specialty of the servicing physician. These include family practice, internal medicine, pediatrics, geriatrics and obstetrics and gynecology specialties. All care members receive is assigned a relative resource use value using HealthPartners' patented algorithm, Total Care Relative Resource Values or TCRRVs. These values quantify resource use for all procedures and services across all sectors of the health care system.

Attributed members are assigned Adjusted Clinical Groups (ACG) risk adjustment scores based on all diagnoses, age and gender and are aggregated to the provider group level. ACGs, developed by Johns Hopkins University, represent the illness burden of a population and allow comparisons between populations with varying illness burdens.

Medical costs, pharmacy costs and resources use for each attributed member are totaled with outliers being capped at \$100,000. Each provider group's attributed member costs, resource use and risk scores are aggregated to create risk adjusted per member per month values. Total cost of care and resource use indices are created by dividing each provider's risk adjusted per member per month value by the respective 13 county metro area risk adjusted per member per month value.

Results

HealthPartners 13 county Metro Network Average: 1.000

Total Cost Indices > 1.000 represent providers that are more expensive than average

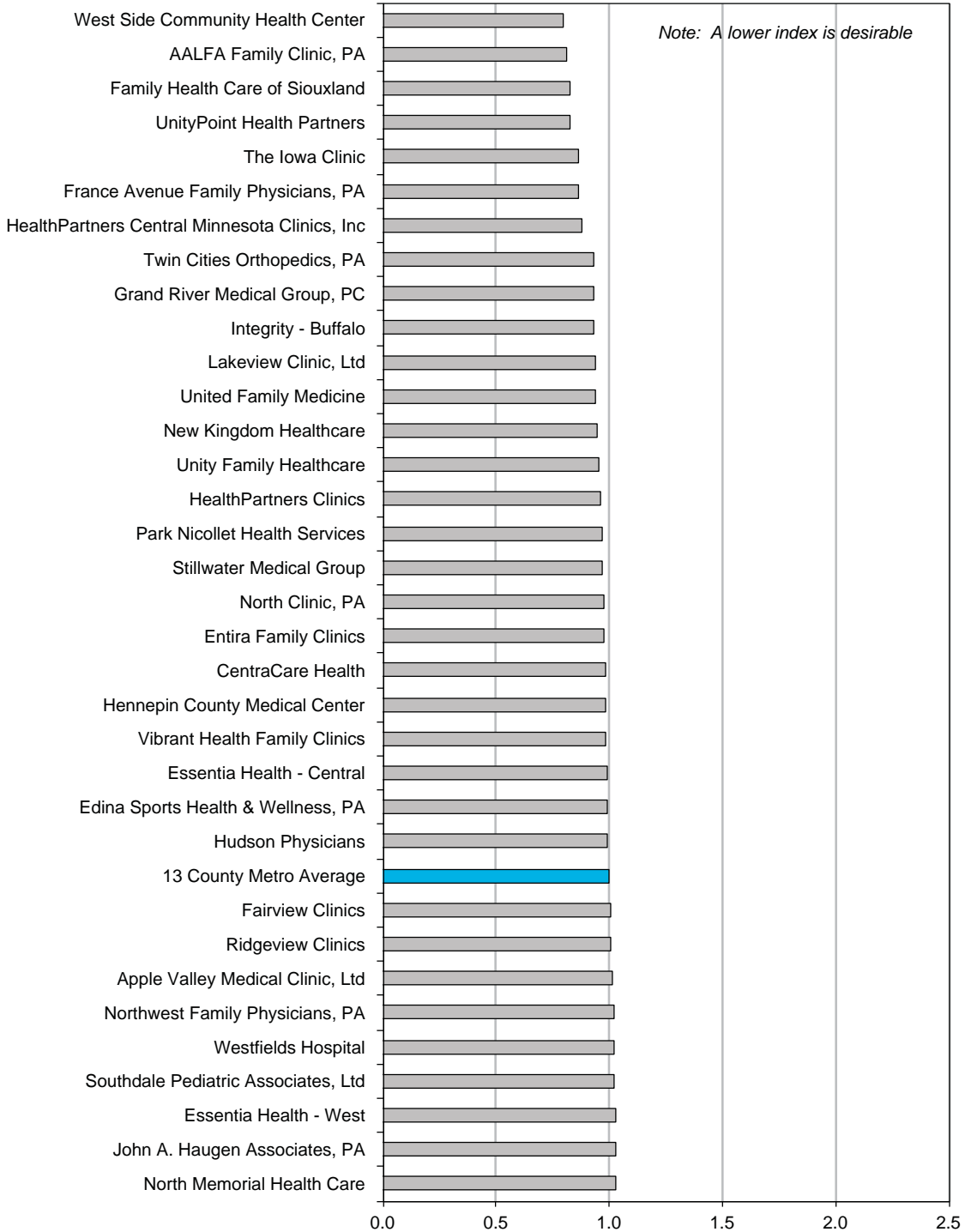
Total Cost Indices < 1.000 represent providers that are less expensive than average

Resource Use Indices > 1.000 represent providers that have higher resource use than average

Resource Use Indices < 1.000 represent providers that have lower resource use than average

Total Cost of Care - Primary Care, Total Cost Index (TCI)
1/1/2017 - 12/31/2017

Part 1 of a 2 Part Graph



Total Cost Index (TCI)

Providers with <600 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost of Care - Primary Care, Total Cost Index (TCI)
1/1/2017 - 12/31/2017

Part 2 of a 2 Part Graph



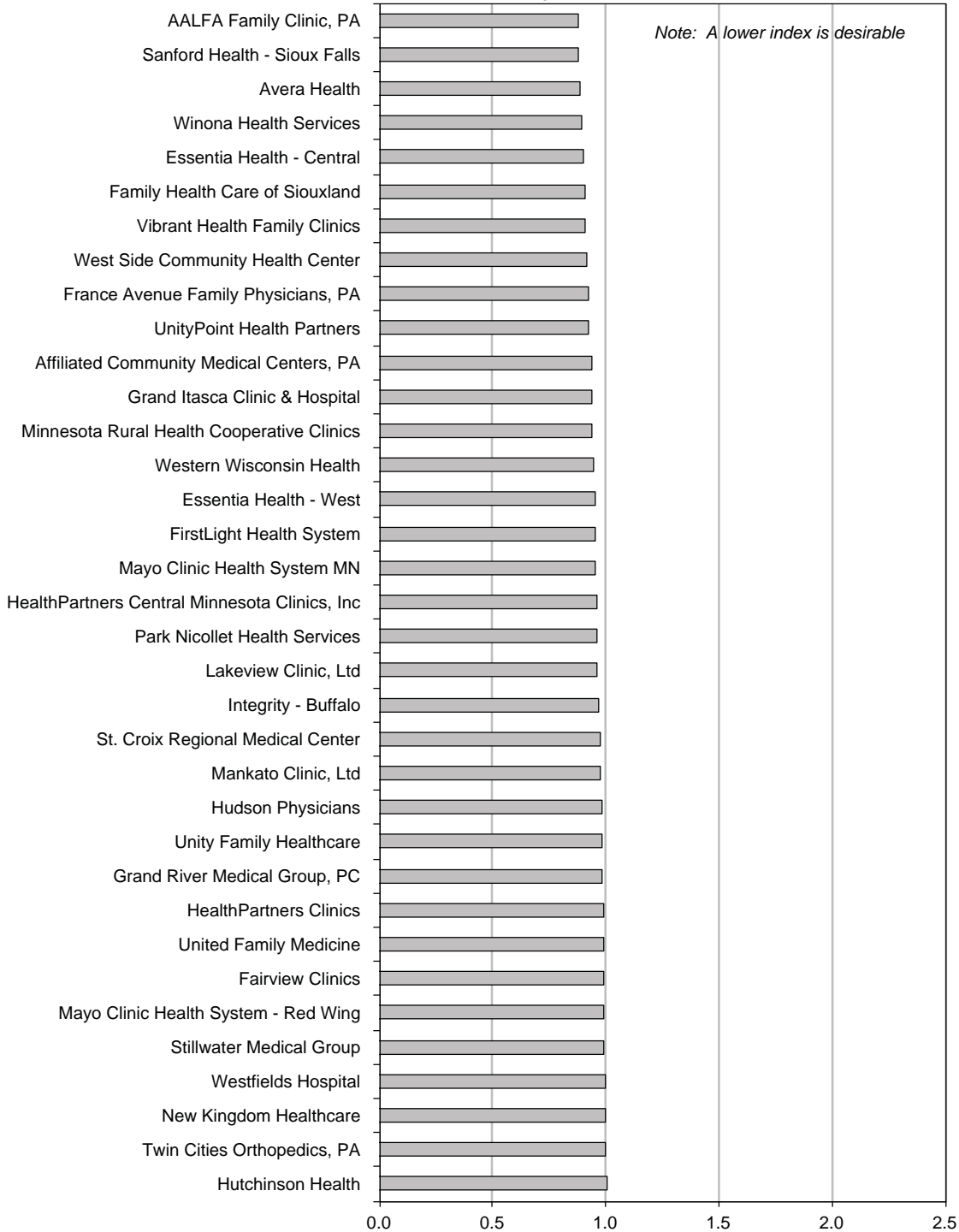
Total Cost Index (TCI)

Providers with <600 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost of Care - Primary Care, Total Cost Index (RUI)
1/1/2017 - 12/31/2017

Part 1 of a 2 Part Graph



Total Cost Index (RUI)

Providers with <600 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost of Care - Primary Care, Total Cost Index (RUI)
1/1/2017 - 12/31/2017

Part 2 of a 2 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

TOTAL COST INDEX AND RESOURCE USE — SPECIALTY CARE

October 1, 2015 – September 30, 2017

Description

Medical group's case mix and risk adjusted cost and resource use effectiveness at managing their attributed patients' episodes of care.

The total cost index is a measure of the efficiency, intensity and price of care delivered compared to the same specialty average for the same case mix and risk profile of episodes. The resource use index is identical to the total cost index; however it removes the effects of price. Total cost and resource use measures include all care including: hospital, professional, ancillary and pharmacy costs.

Methodology

These measures are based on episodes treatment groups (ETGs) for commercial fully insured and self insured members where episodes are completed, non outliers and the member is continuously enrolled throughout the duration of the episode. ETGs group all care received related to a condition into a defined episode of care. All care members receive is assigned a relative resource use value using HealthPartners' patented algorithm, Total Care Relative Resource Values or TCRRVs. These values quantify resource use for all procedures and services across all sectors of the health care system. Providers are attributed to episodes where they represent at least 25% of management and surgery resources for the episode. The episodes included in the measures are case mix and severity adjusted by specialty and excludes all trauma and transplants. Total cost of care and resource use indices are created for each specialty by dividing each provider's risk actual cost or resource use by the 13 county metro expected values.

Results

HealthPartners 13 county Metro Network Average: 1.000

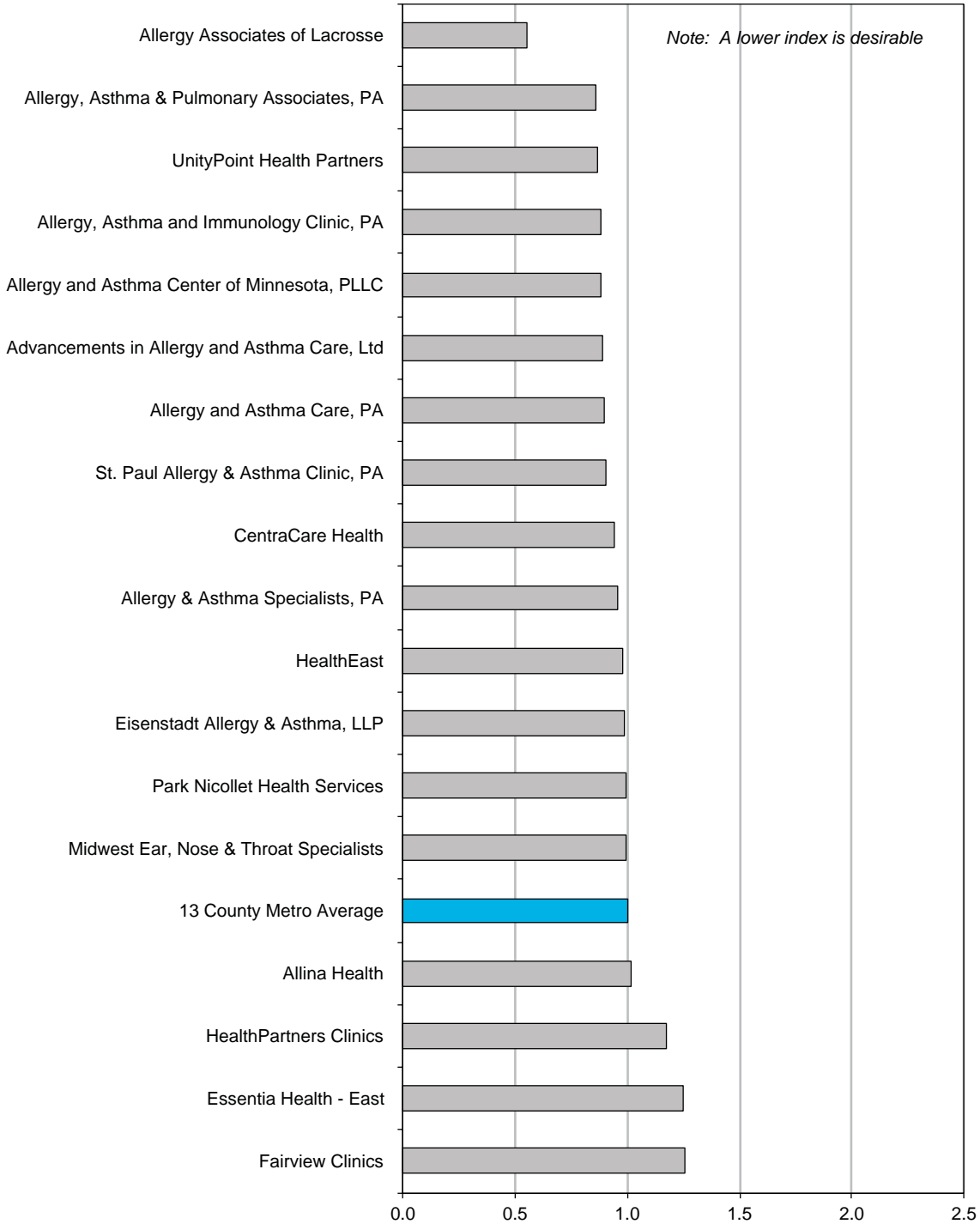
Total Cost Indices > 1.000 represent providers that are more expensive than average

Total Cost Indices < 1.000 represent providers that are less expensive than average

Resource Use Indices > 1.000 represent providers that have higher resource use than average

Resource Use Indices < 1.000 represent providers that have lower resource use than average

Total Cost Index (TCI) - Allergy & Immunology Providers
10/1/2015 - 9/30/2017

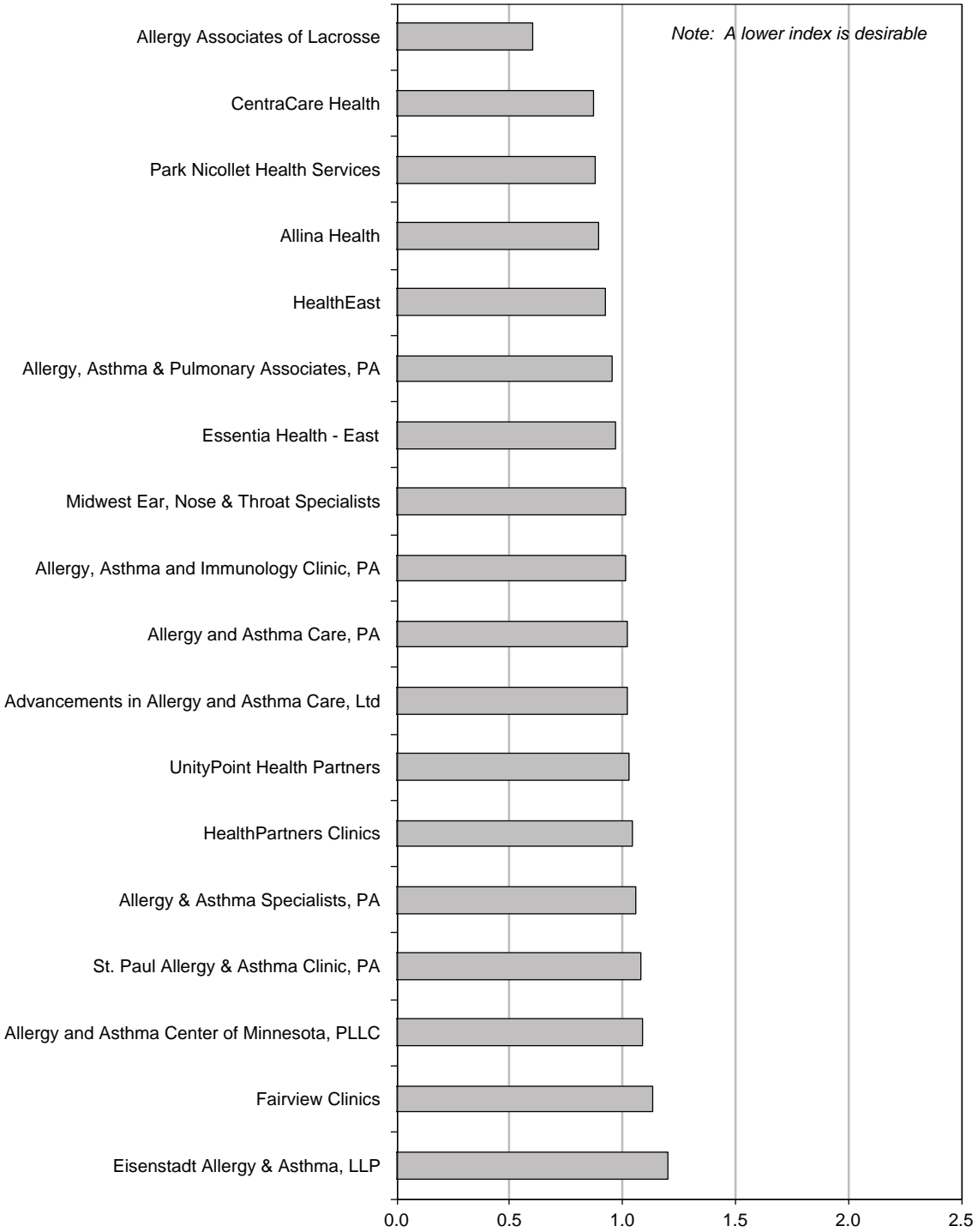


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Allergy & Immunology Providers
10/1/2015 - 9/30/2017

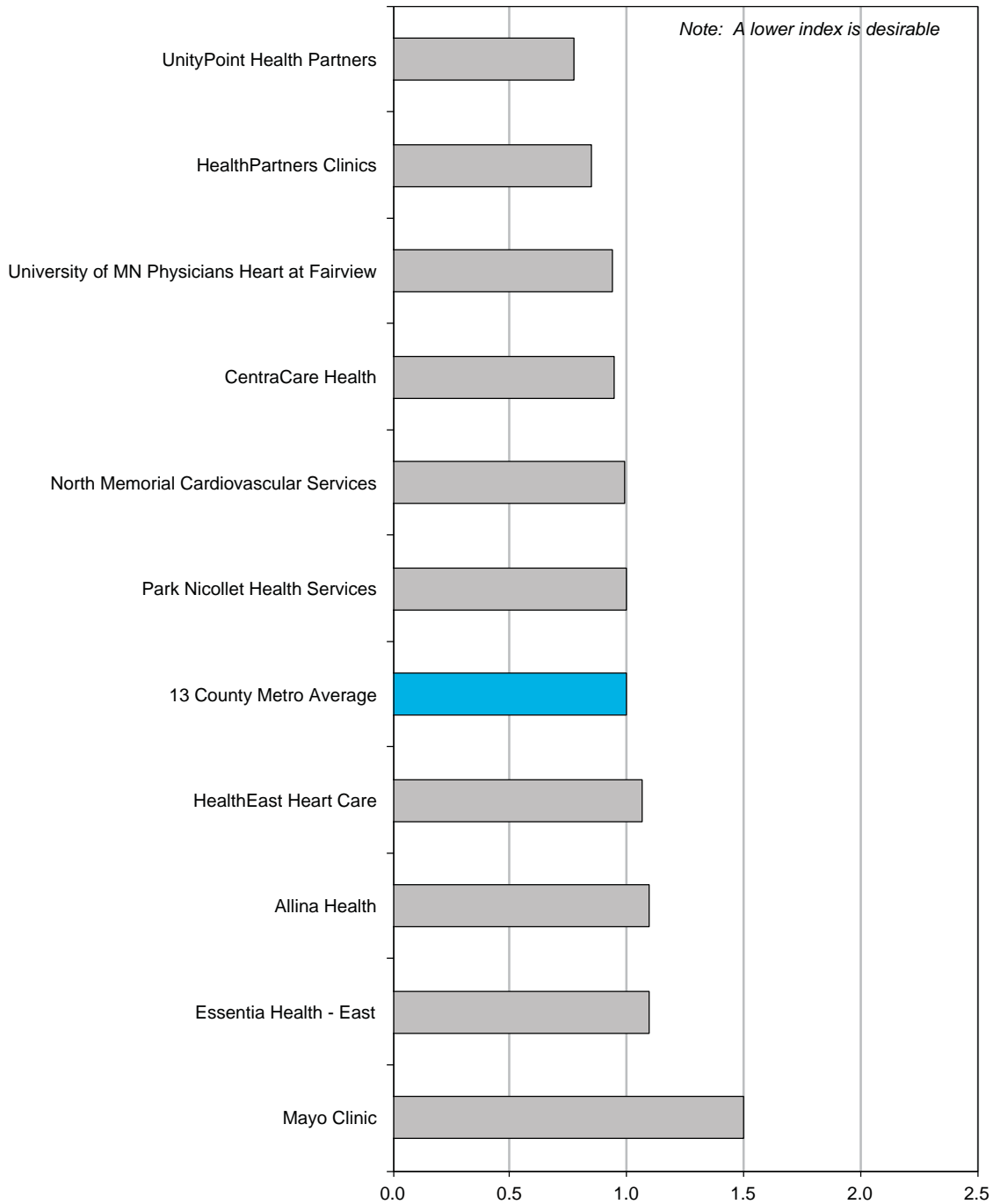


Resource Use Index (RUI)

Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Cardiology Providers
10/1/2015 - 9/30/2017

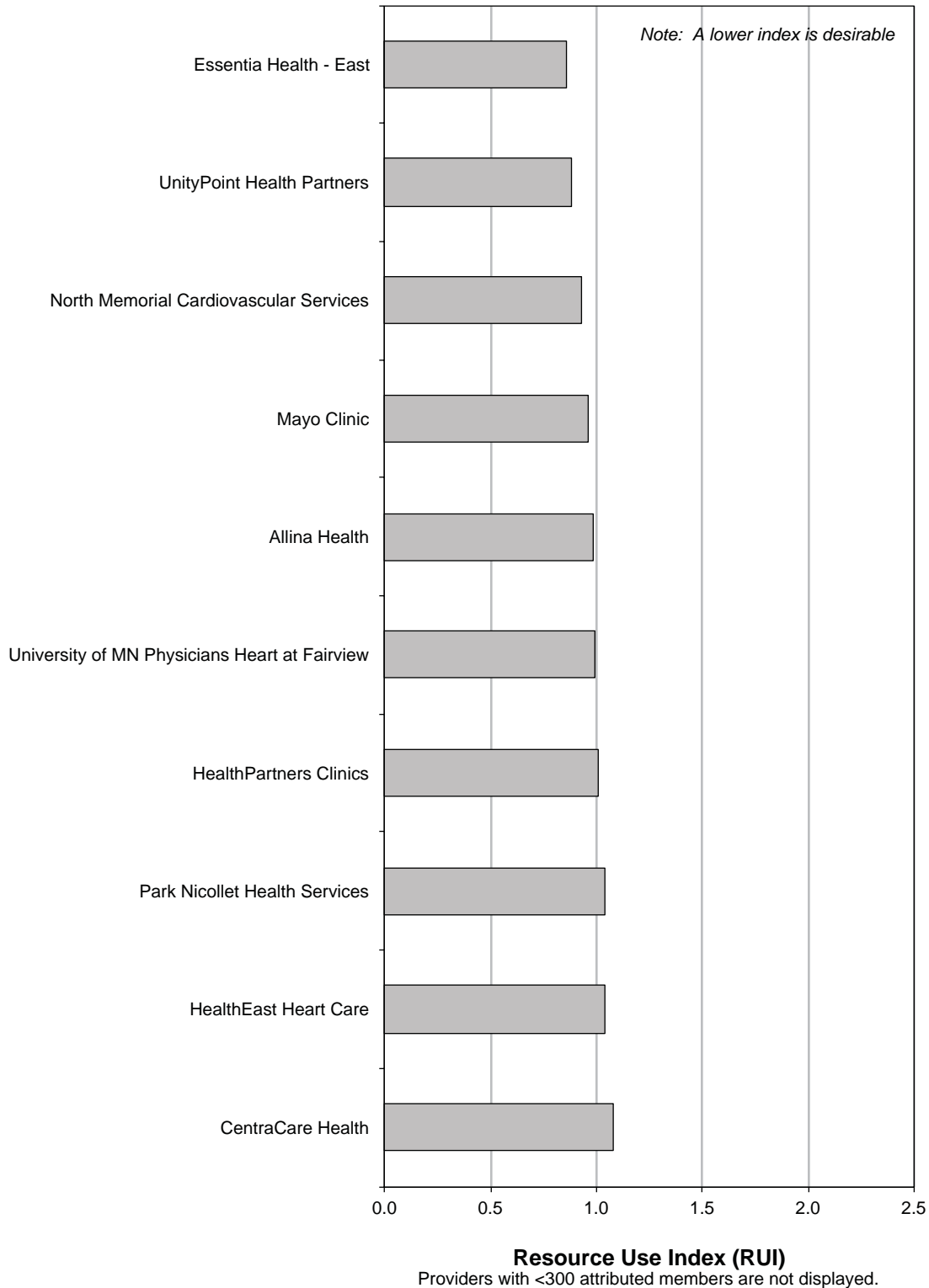


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Cardiology Providers
10/1/2015 - 9/30/2017



Indices > 1.000 represent providers that have higher than average resource use
 Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Dermatology Providers
10/1/2015 - 9/30/2017

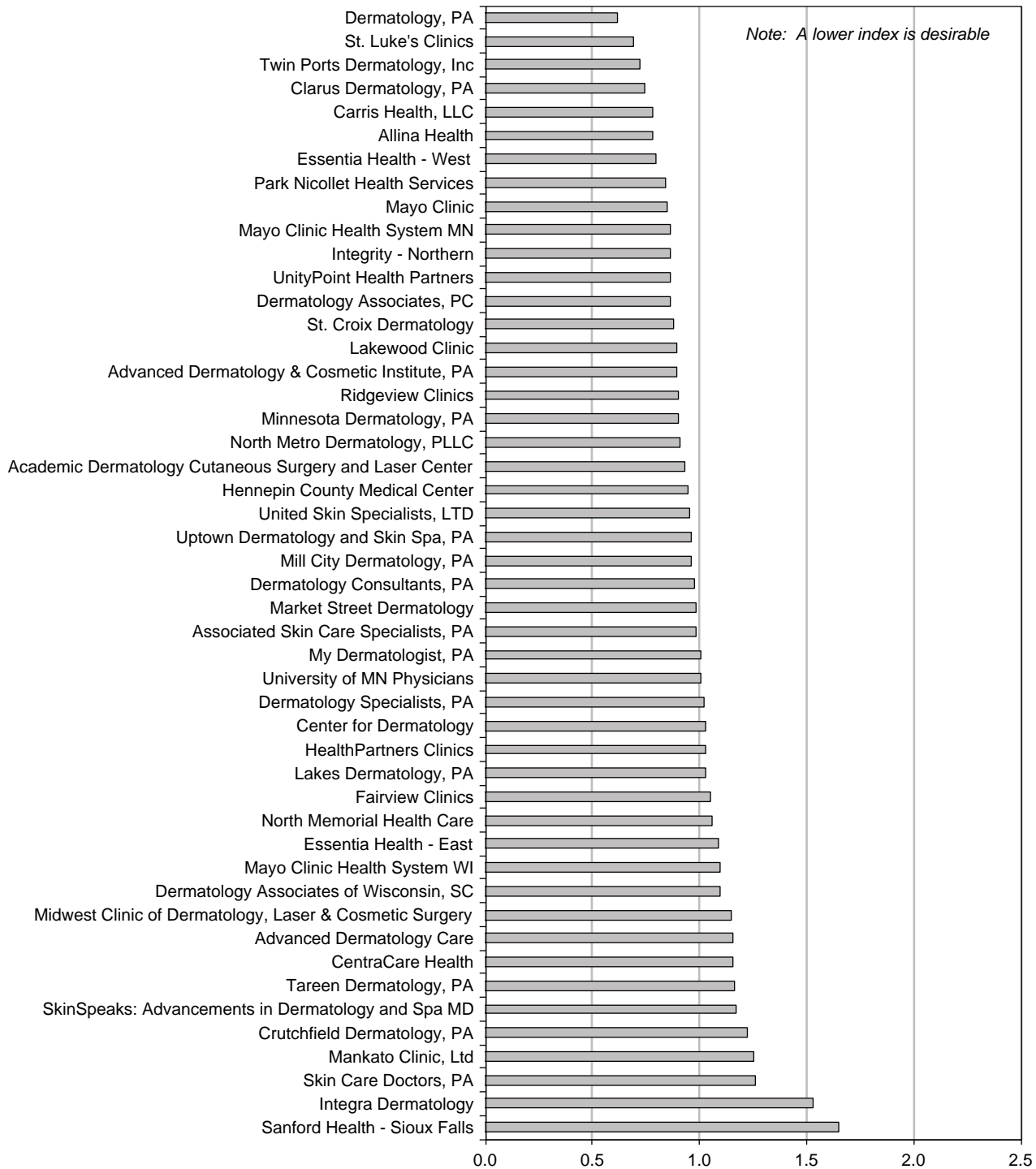


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Dermatology Providers
10/1/2015 - 9/30/2017

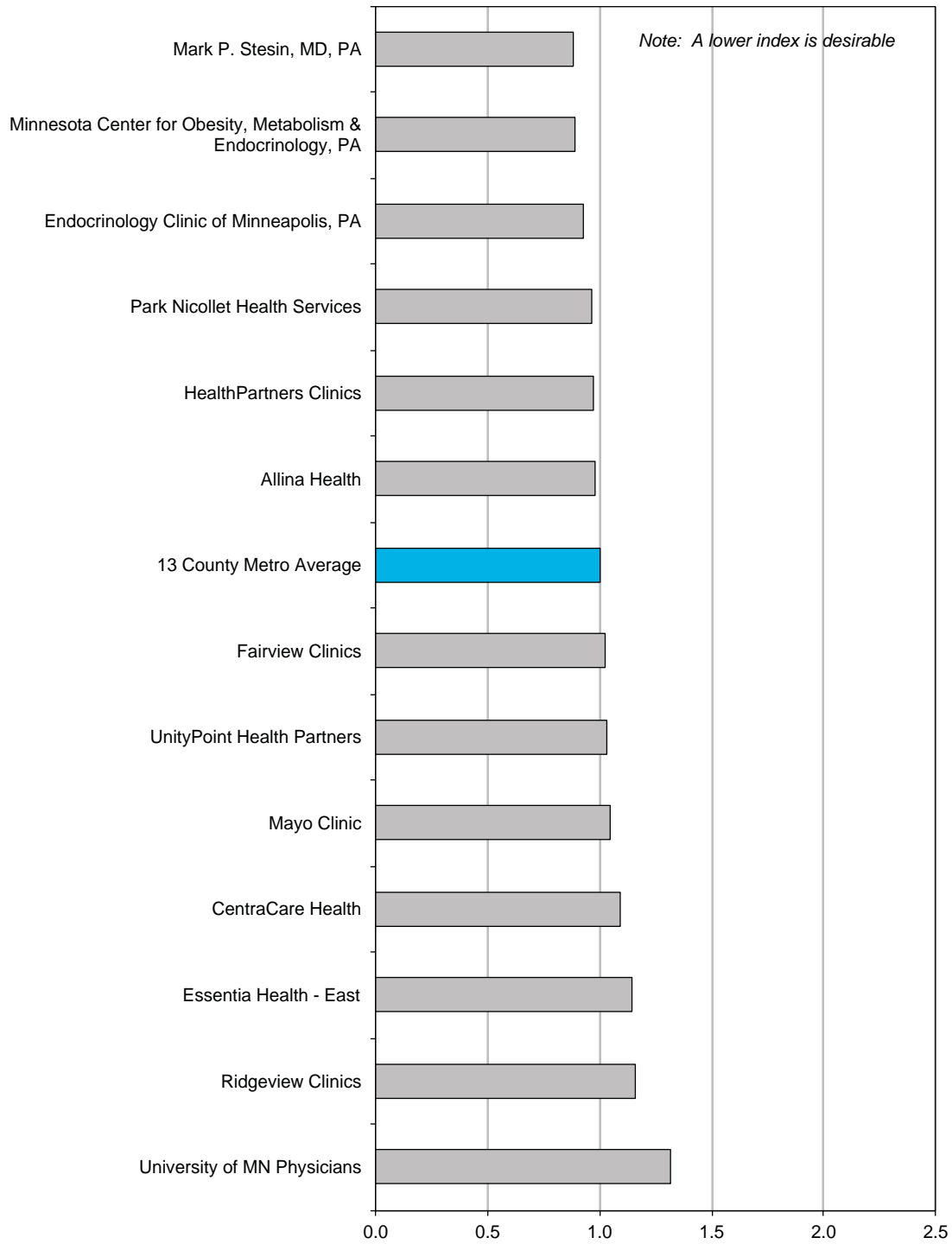


Resource Use Index (RUI)

Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Endocrinology Providers
10/1/2015 - 9/30/2017



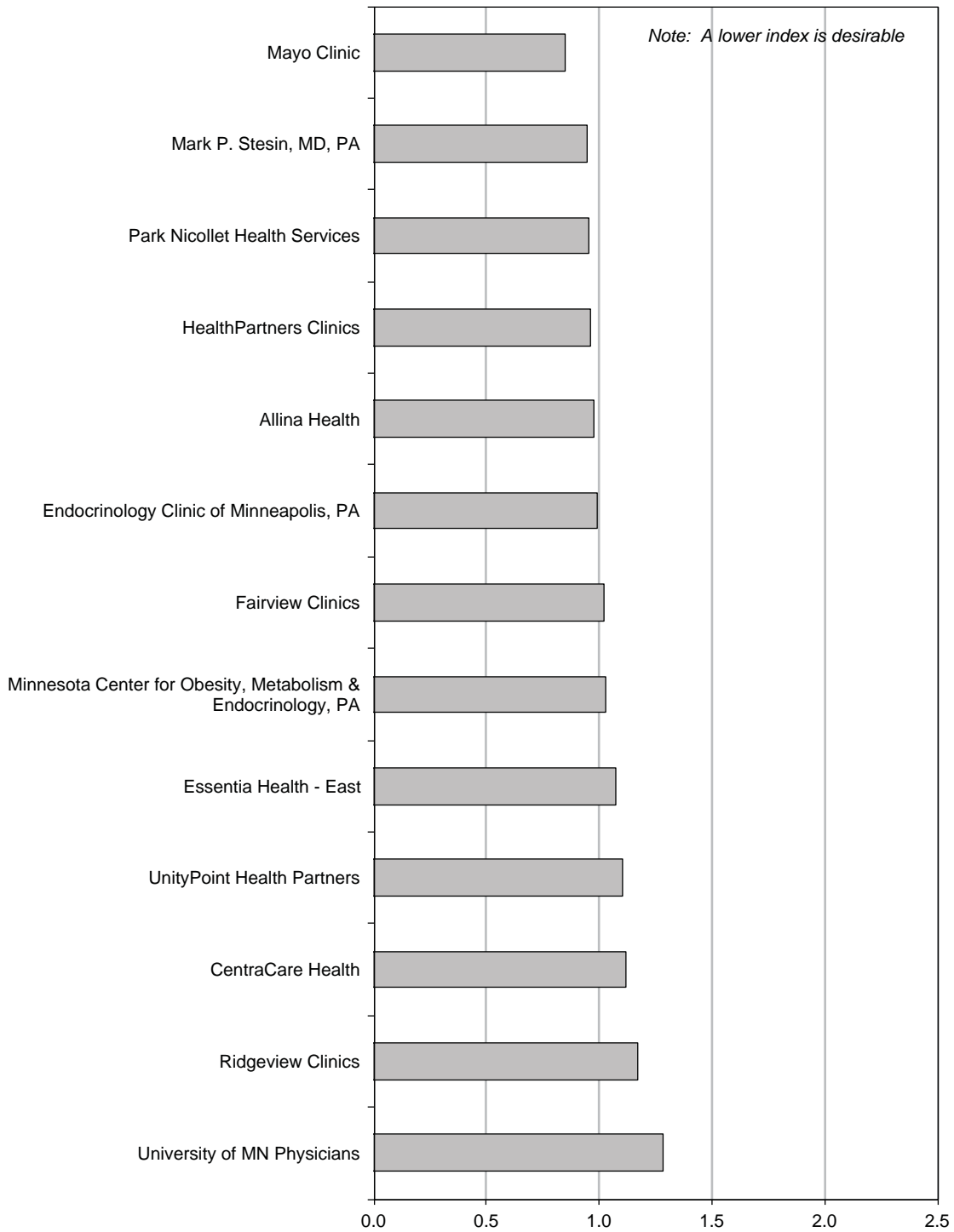
Note: A lower index is desirable

Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Endocrinology Providers
10/1/2015 - 9/30/2017

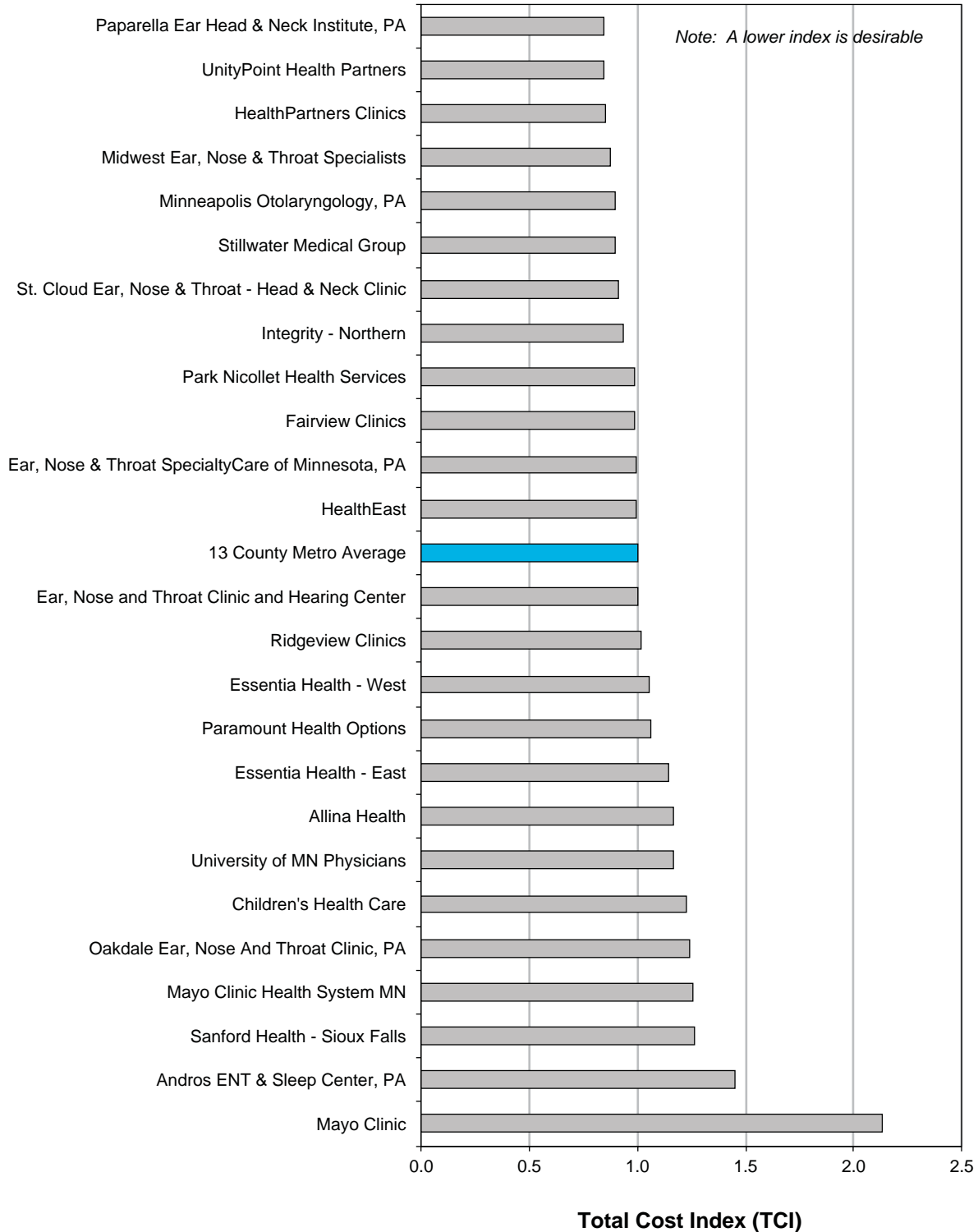


Resource Use Index (RUI)

Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - ENT Providers
10/1/2015 - 9/30/2017



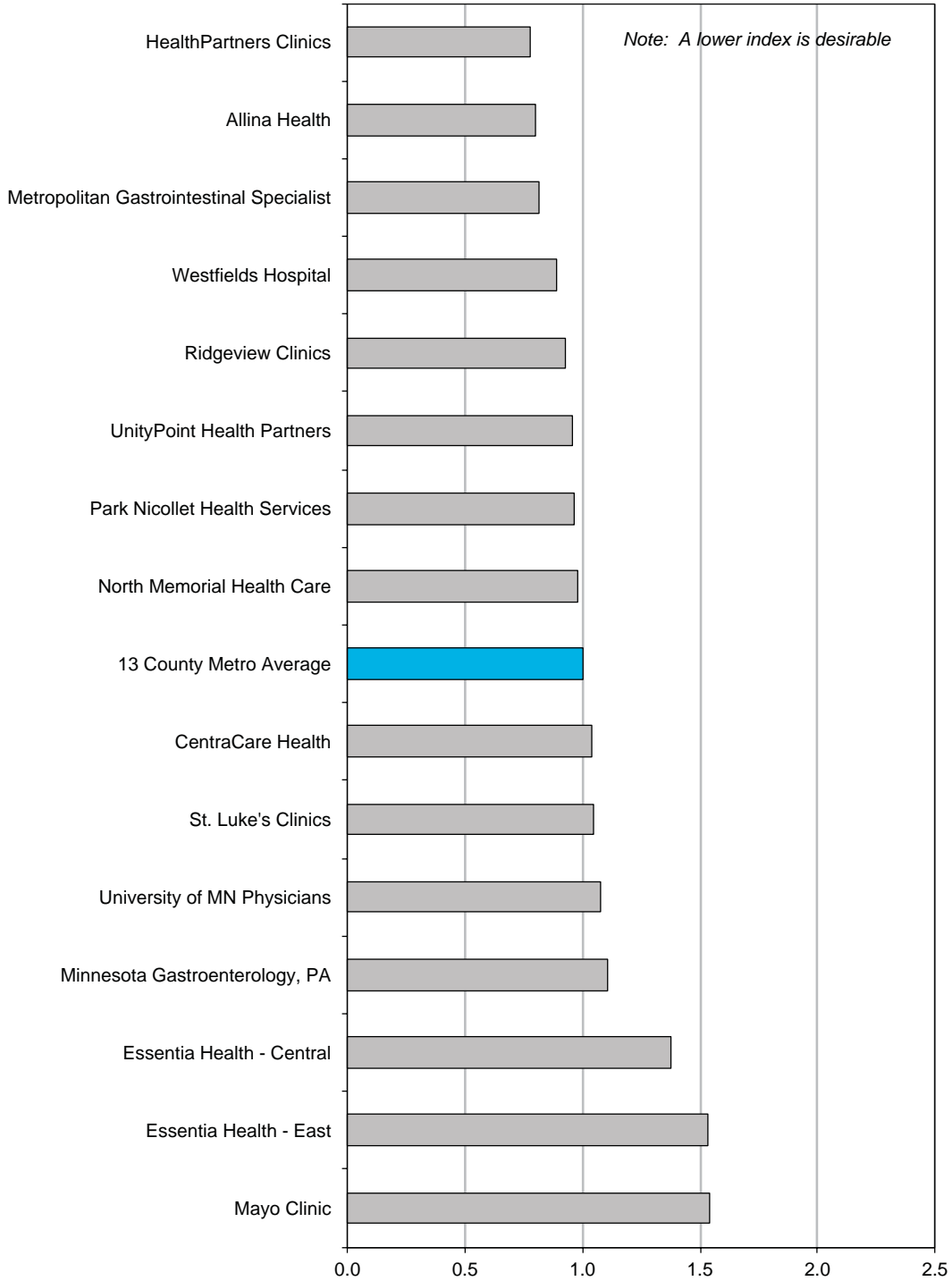
HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - ENT Providers
10/1/2015 - 9/30/2017



Indices > 1.000 represent providers that have higher than average resource use
 Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Gastroenterology Providers
10/1/2015 - 9/30/2017

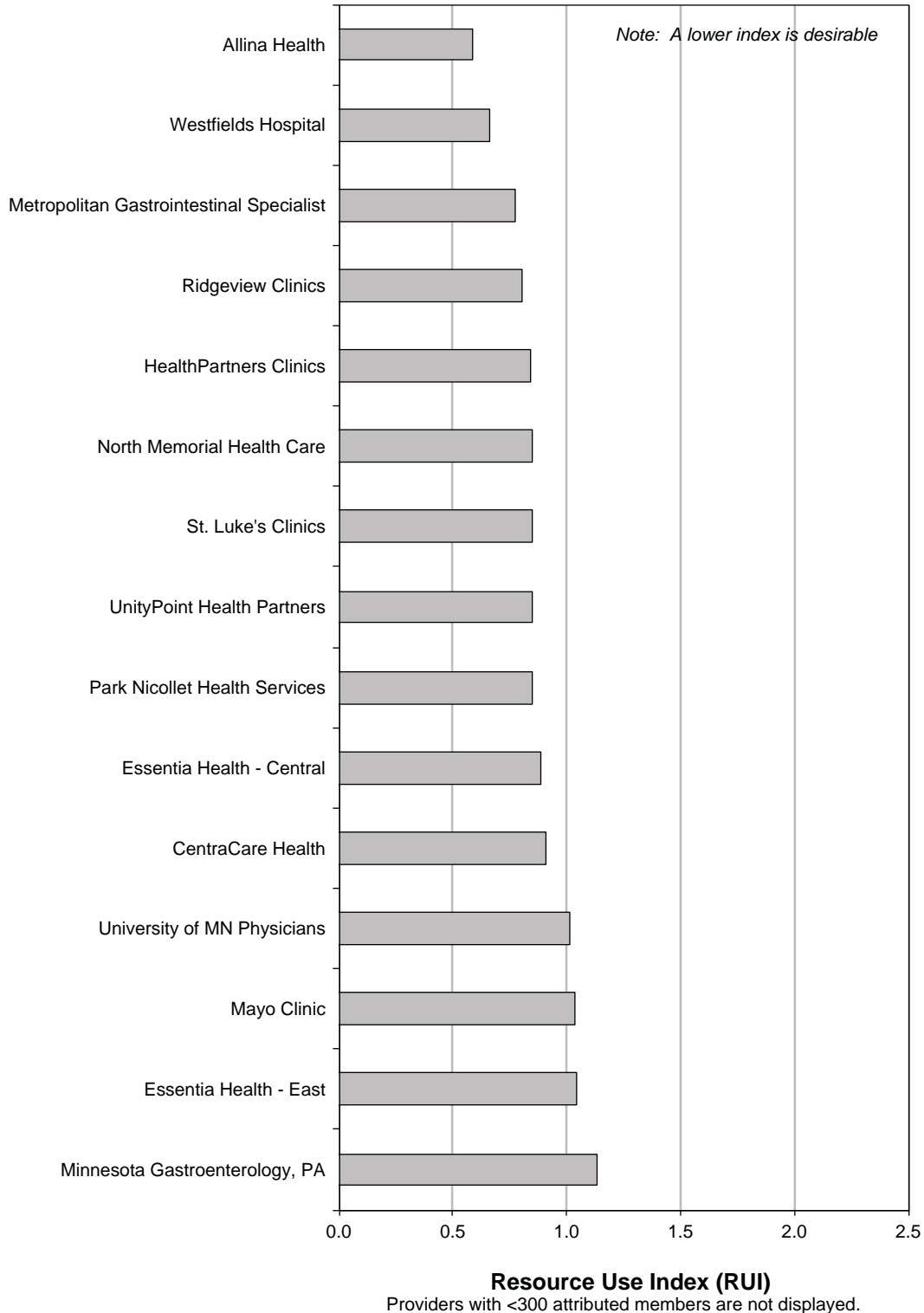


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

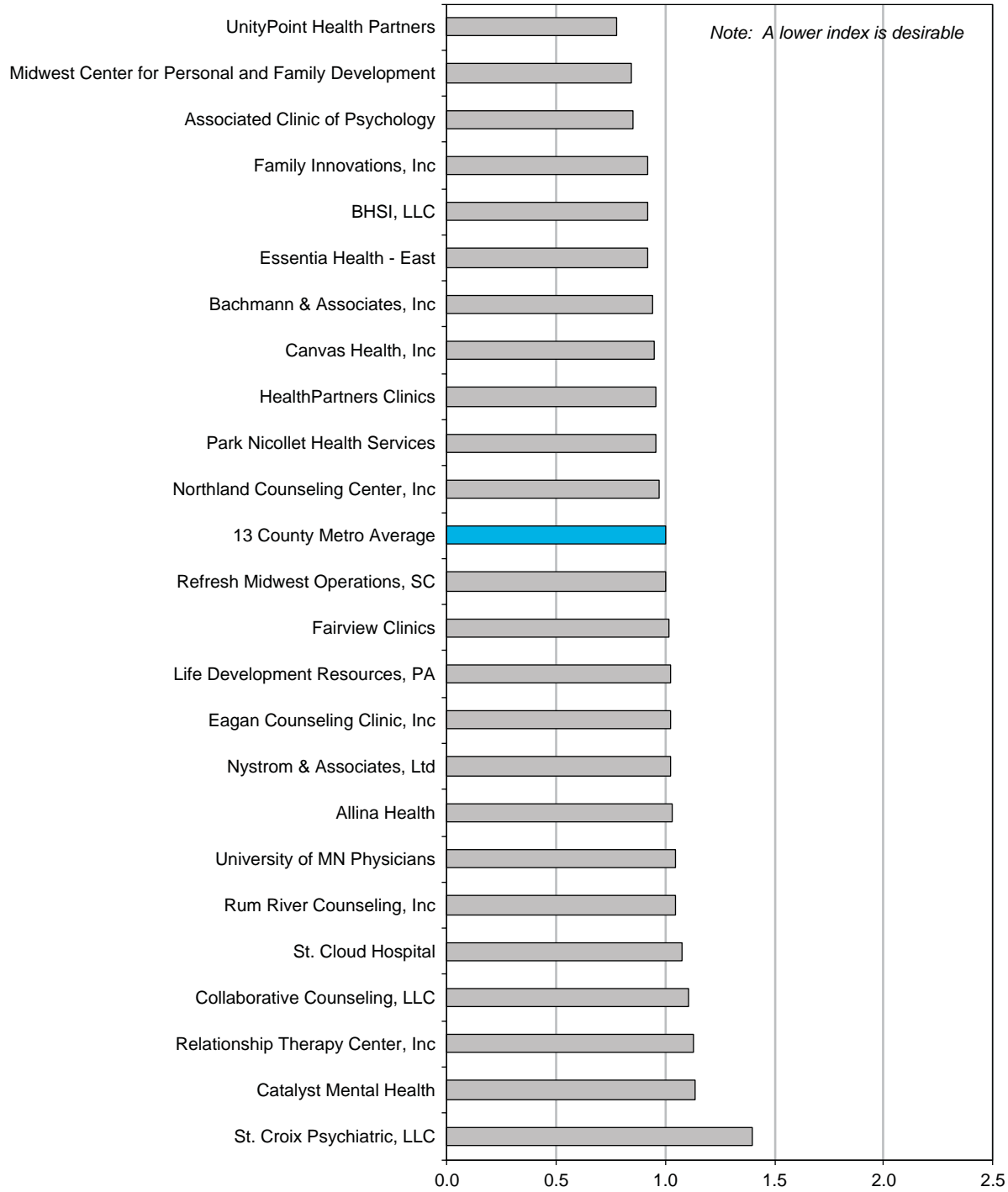
HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Gastroenterology Providers
10/1/2015 - 9/30/2017



Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Mental Health Providers
10/1/2015 - 9/30/2017



Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

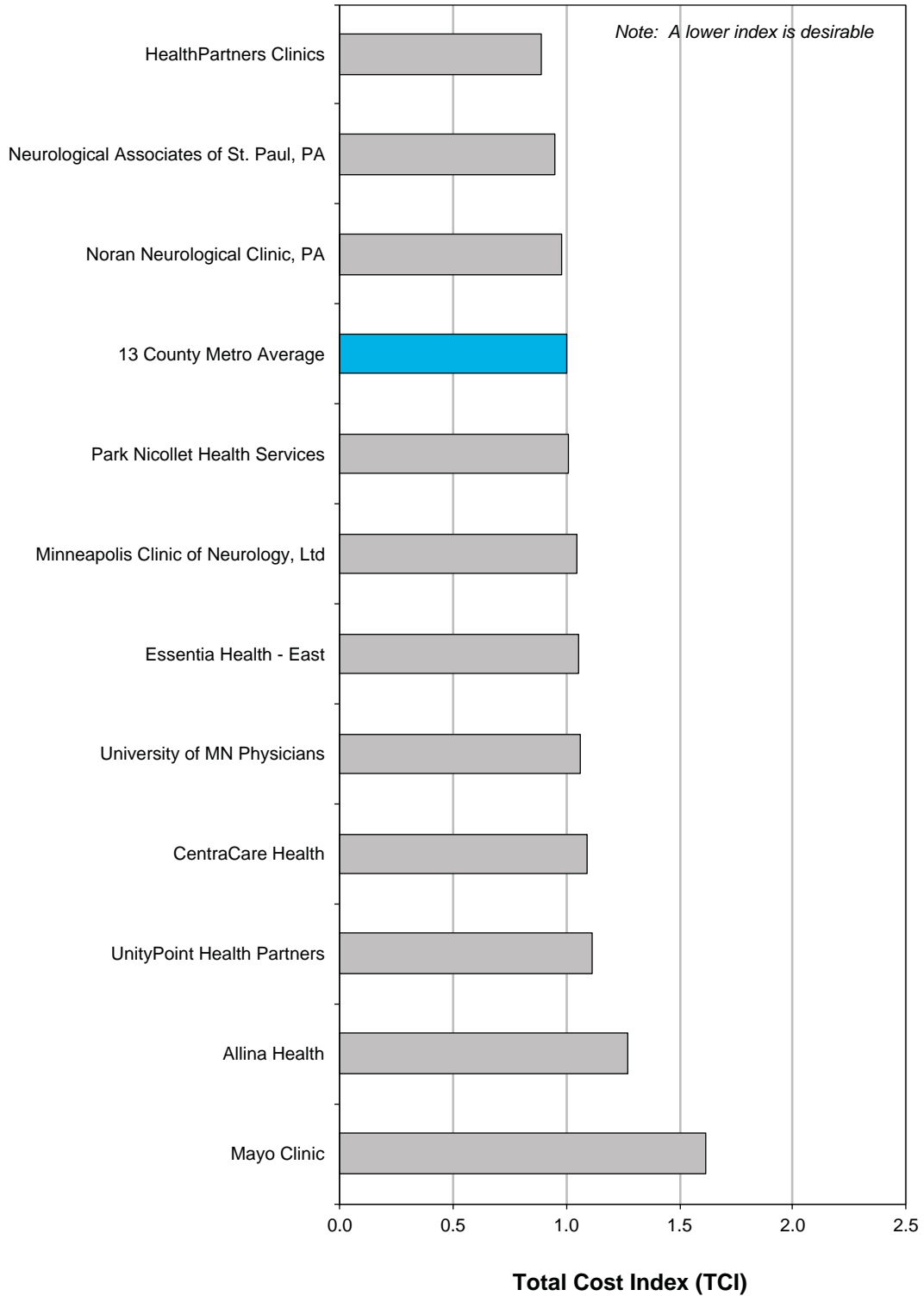
Resource Use Index (RUI) - Mental Health Providers
10/1/2015 - 9/30/2017



Resource Use Index (RUI)
Providers with <300 attributed members are not displayed.

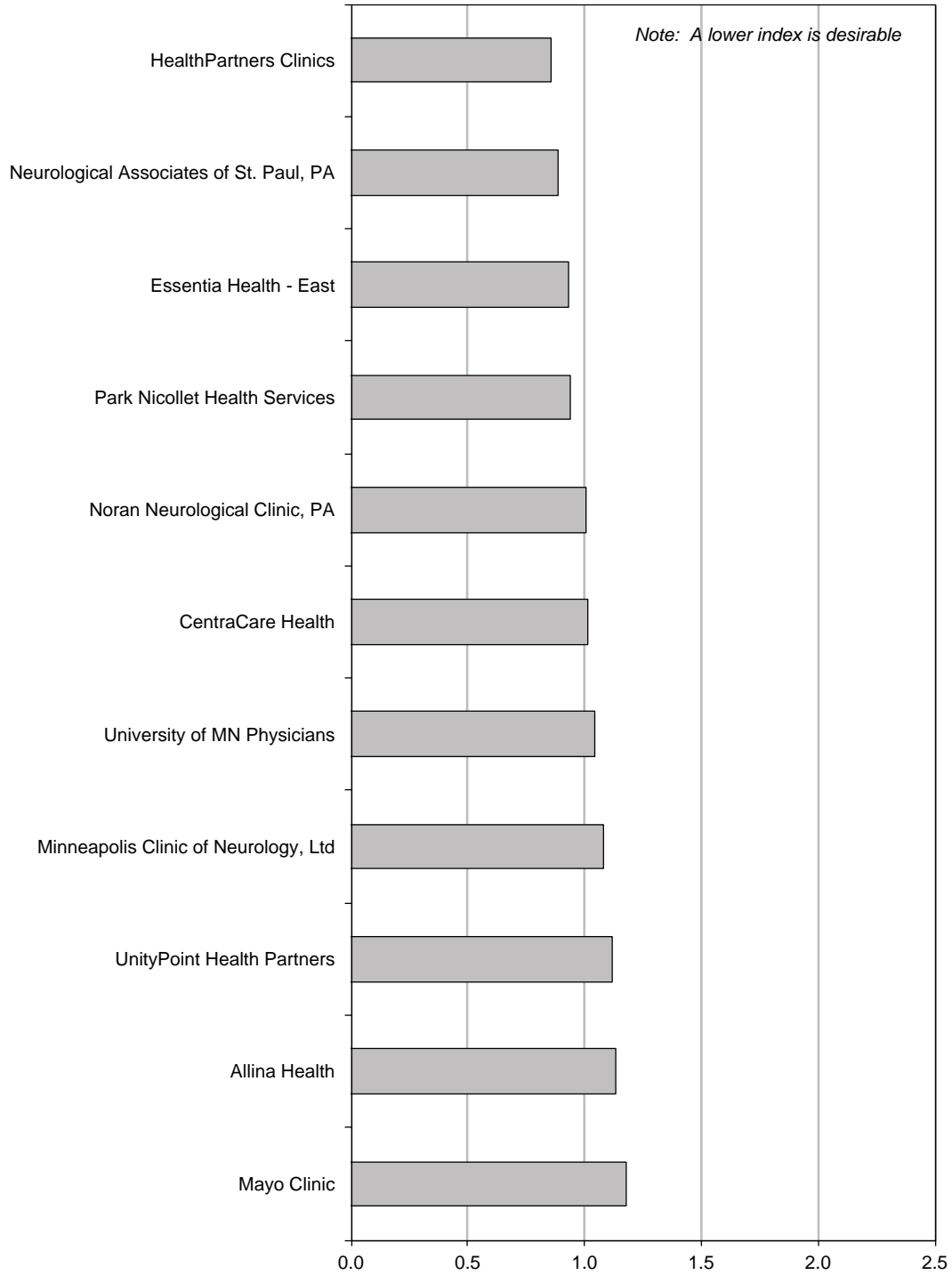
Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Neurology Providers
10/1/2015 - 9/30/2017



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

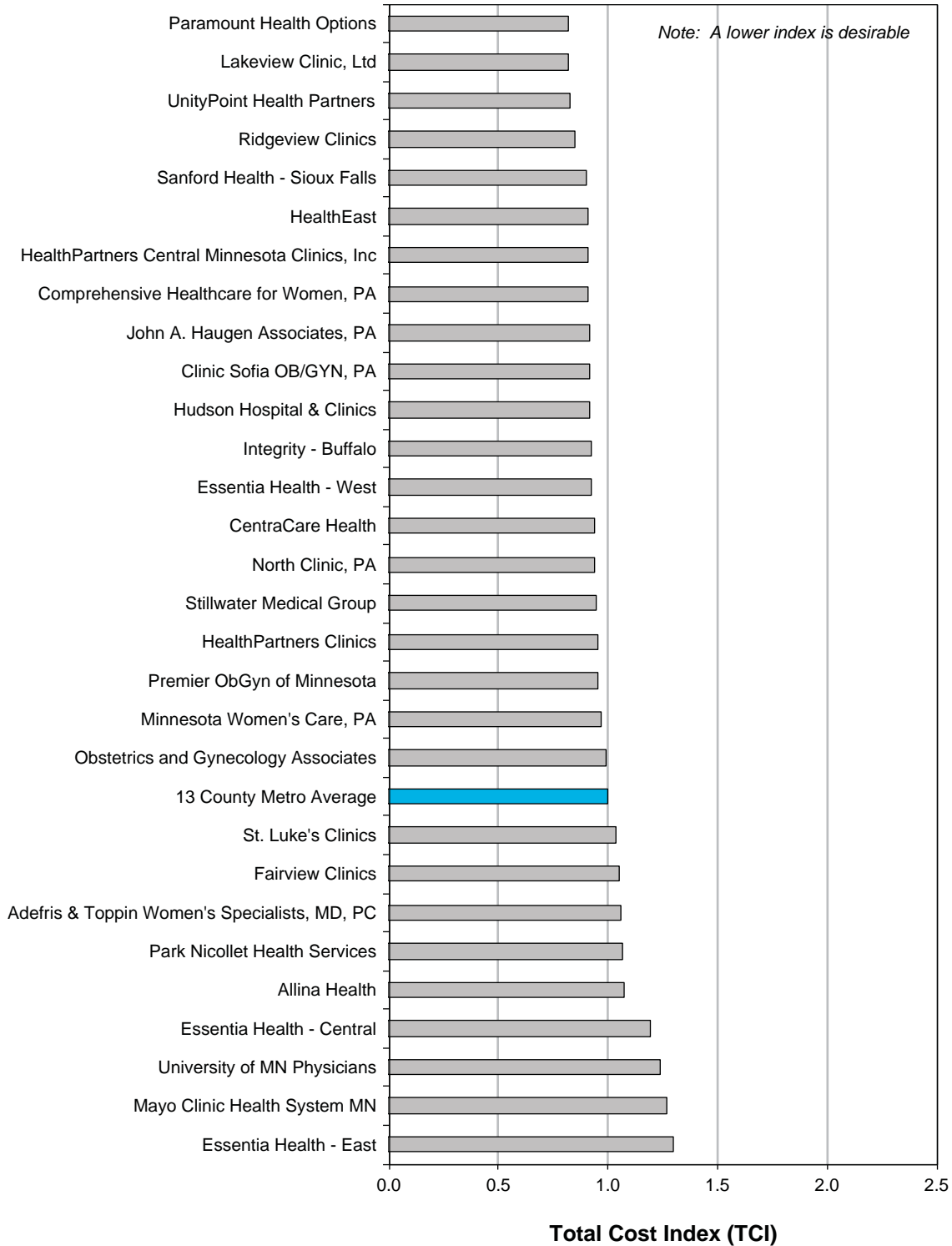
Resource Use Index (RUI) - Neurology Providers
10/1/2015 - 9/30/2017



Resource Use Index (RUI)
Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - OB/GYN Providers
10/1/2015 - 9/30/2017



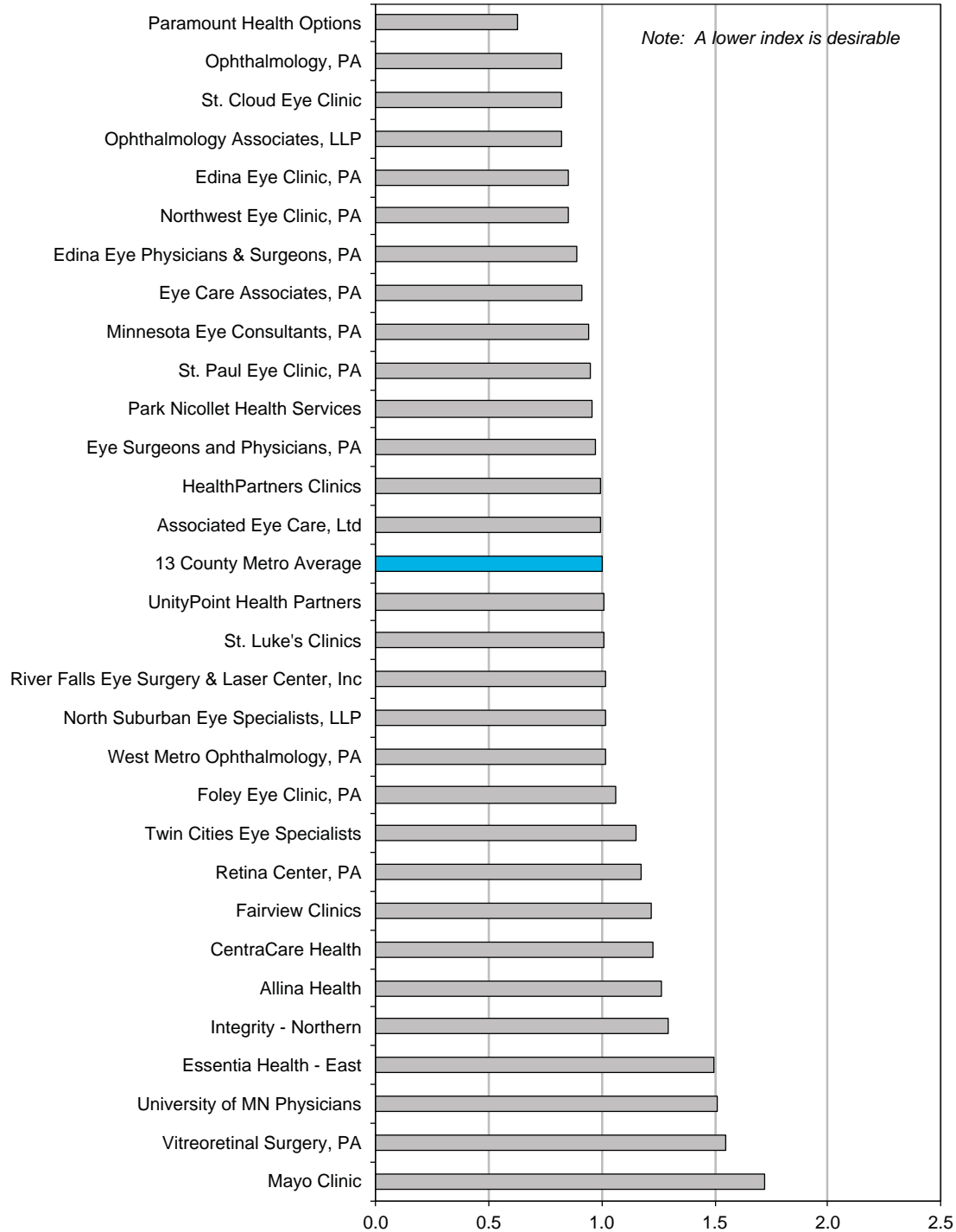
HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - OB/GYN Providers
10/1/2015 - 9/30/2017



Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Ophthalmology & Ophthalmic Surgery Providers
 10/1/2015 - 9/30/2017



Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Ophthalmology & Ophthalmic Surgery
 10/1/2015 - 9/30/2017

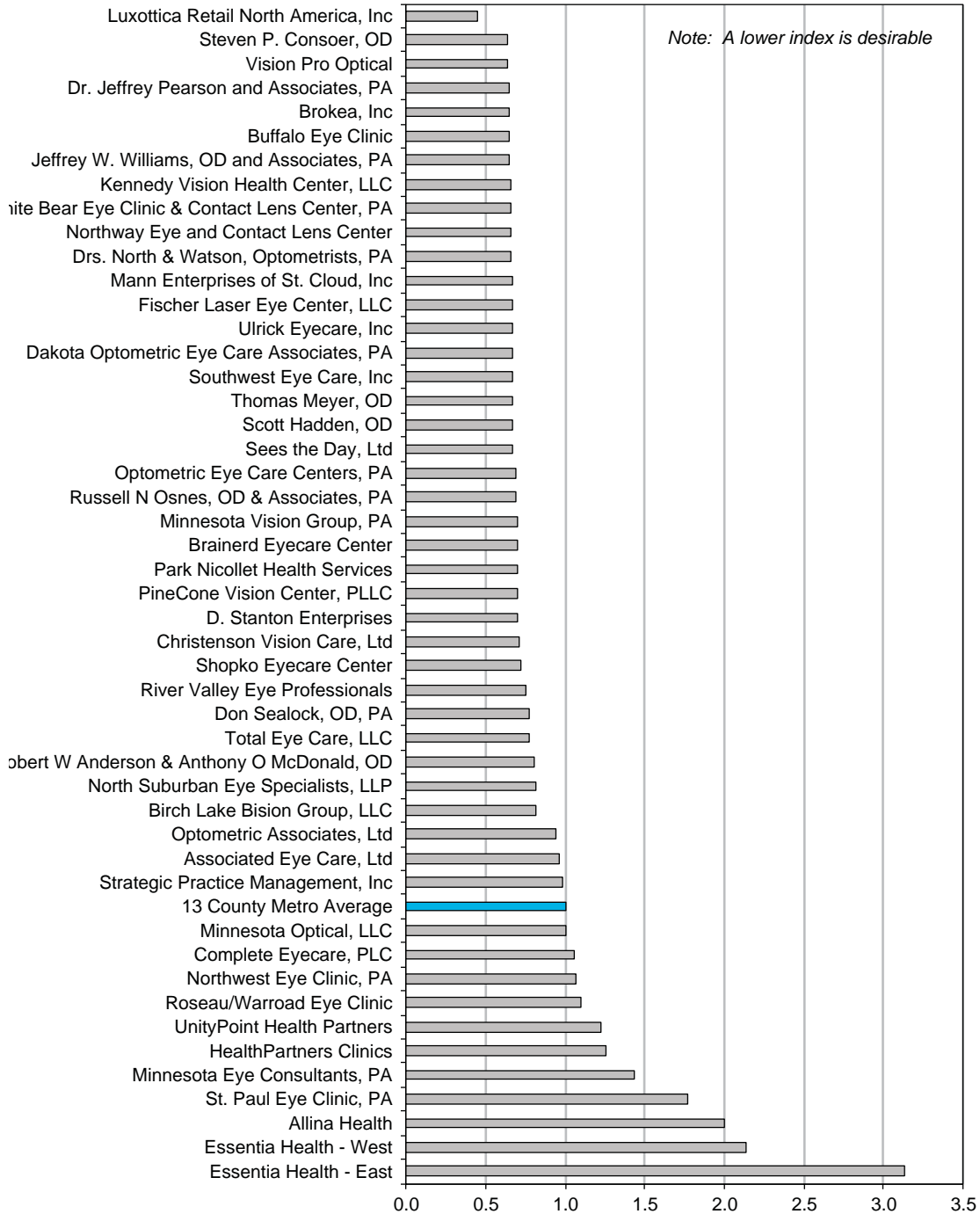


Resource Use Index (RUI)

Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
 Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Optometry Providers
10/1/2015 - 9/30/2017



Total Cost Index (TCI)

Providers with <1000 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Providers > 1.000 represent providers that are more expensive than average
 Providers < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Optometry Providers
10/1/2015 - 9/30/2017

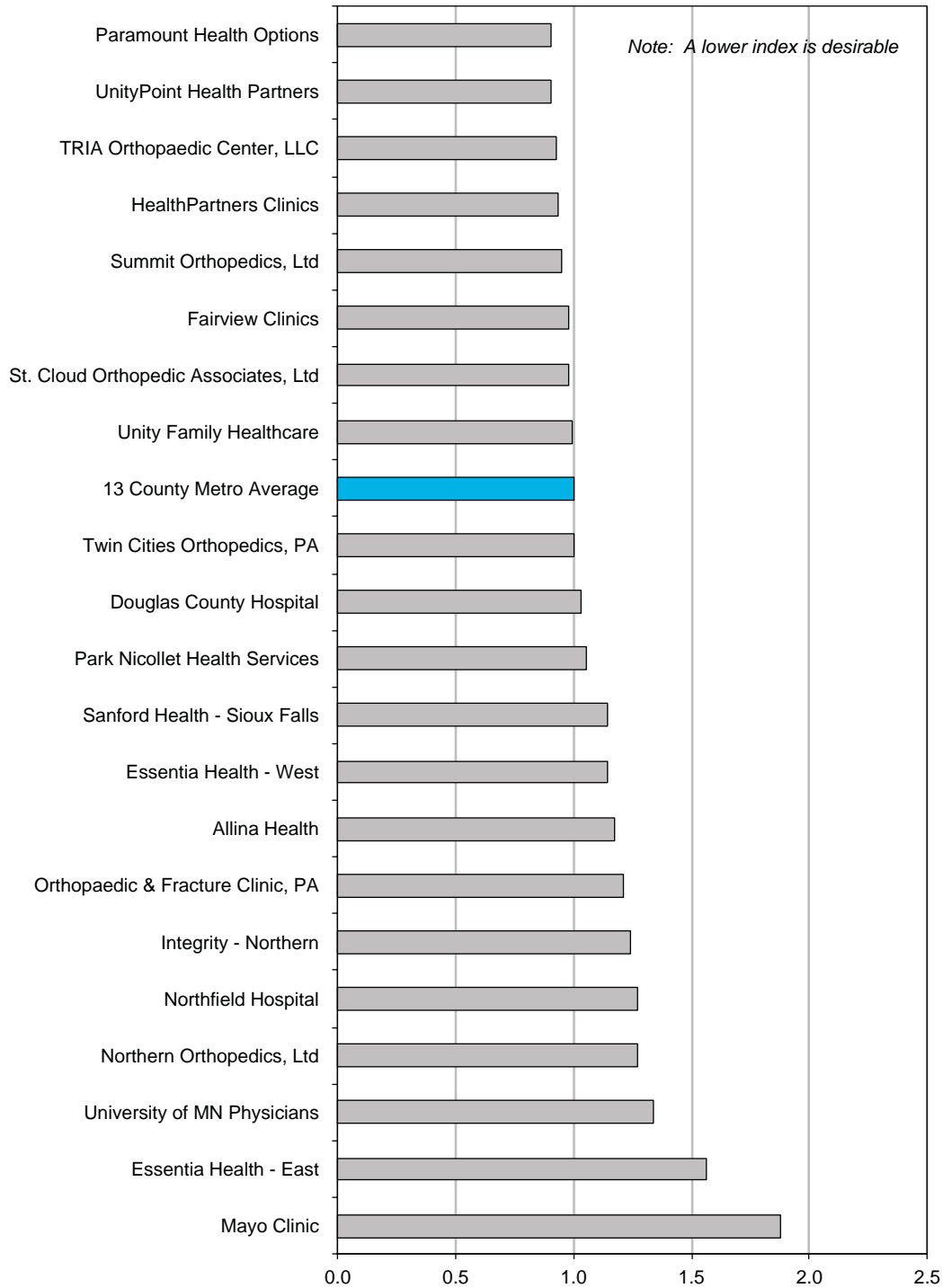


Resource Use Index (RUI)

Providers with <1000 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Orthopaedic Providers
10/1/2015 - 9/30/2017

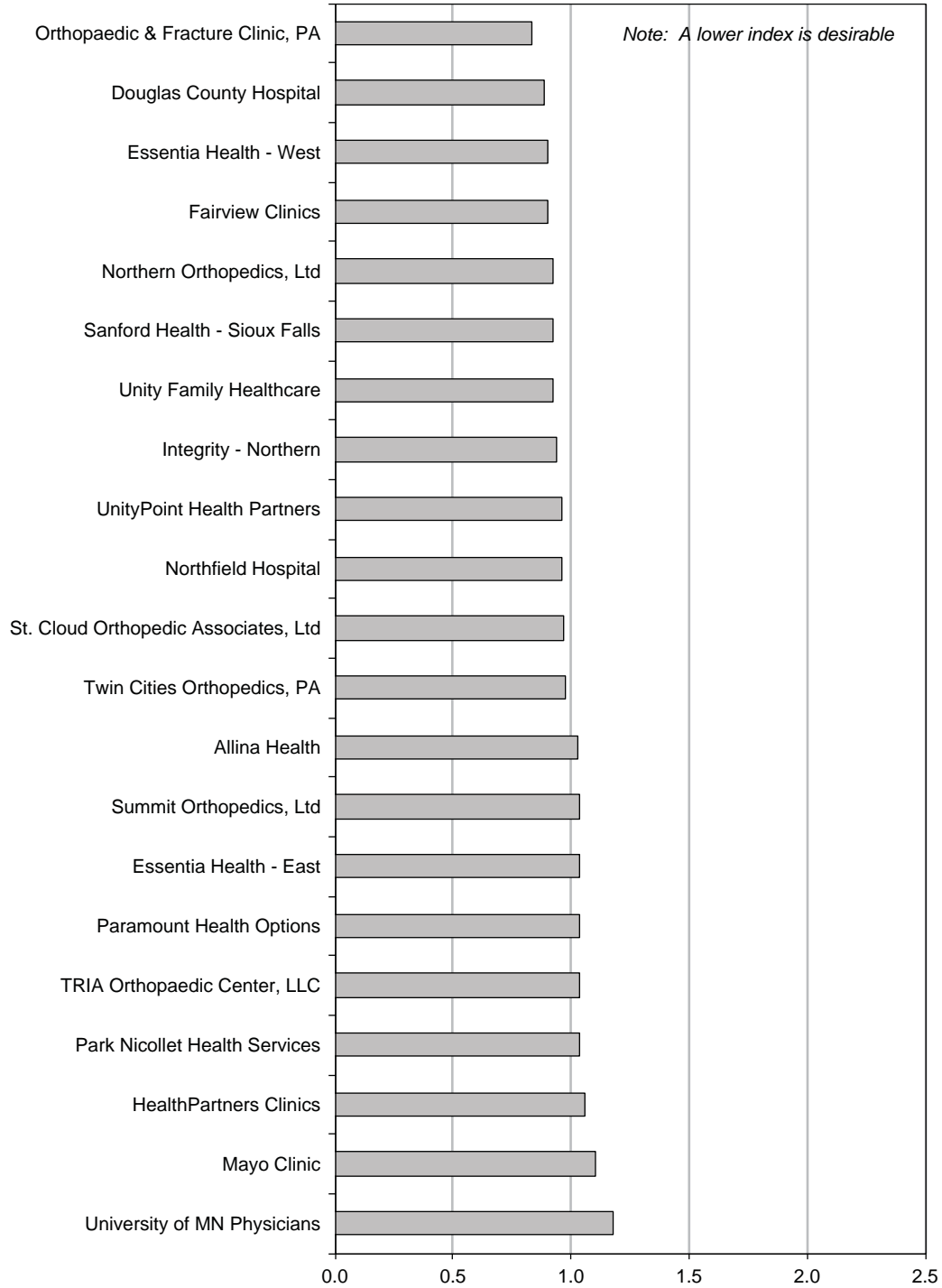


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

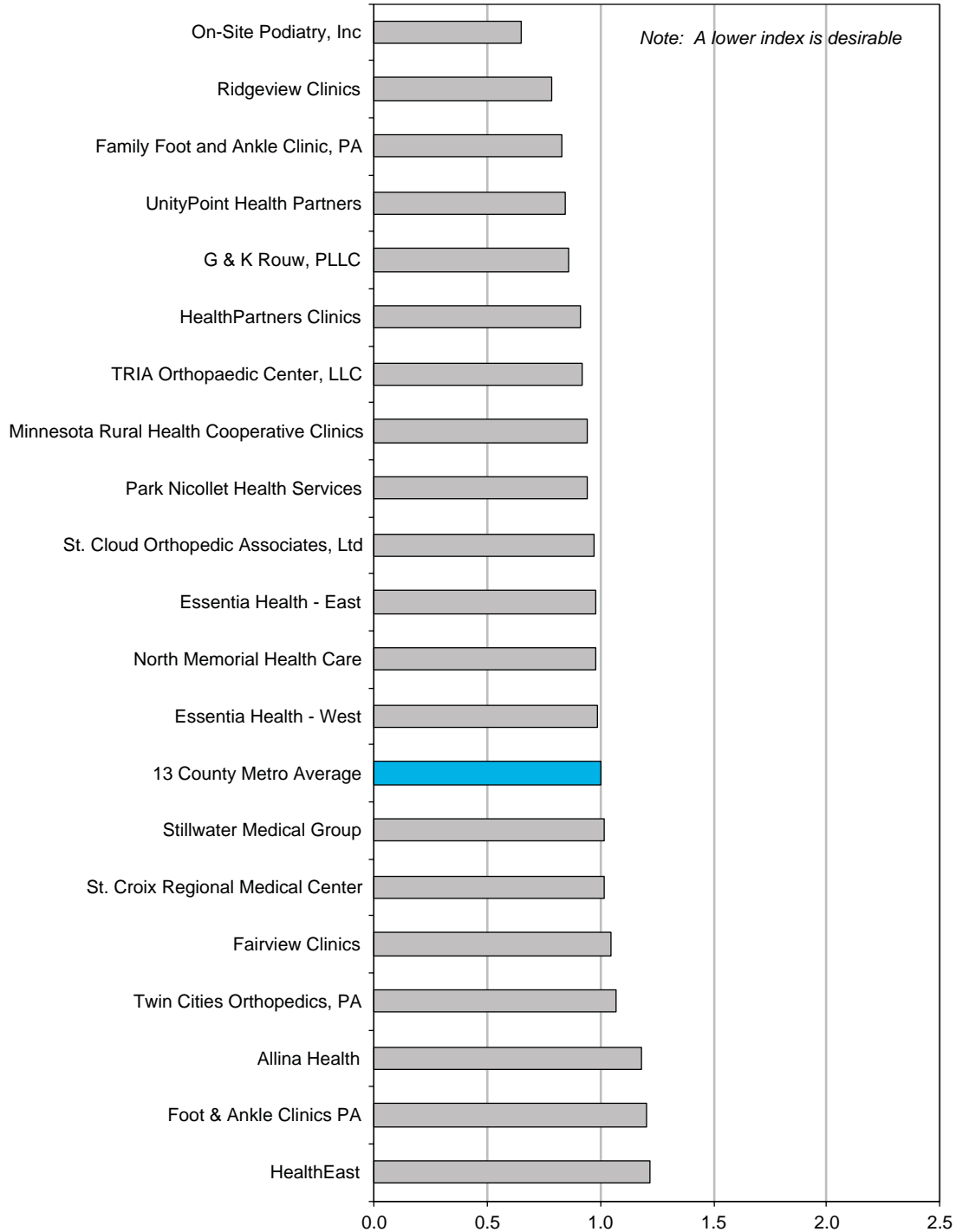
Resource Use Index (RUI) - Orthopaedic Providers
10/1/2015 - 9/30/2017



Resource Use Index (RUI)
Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Podiatry Providers
10/1/2015 - 9/30/2017

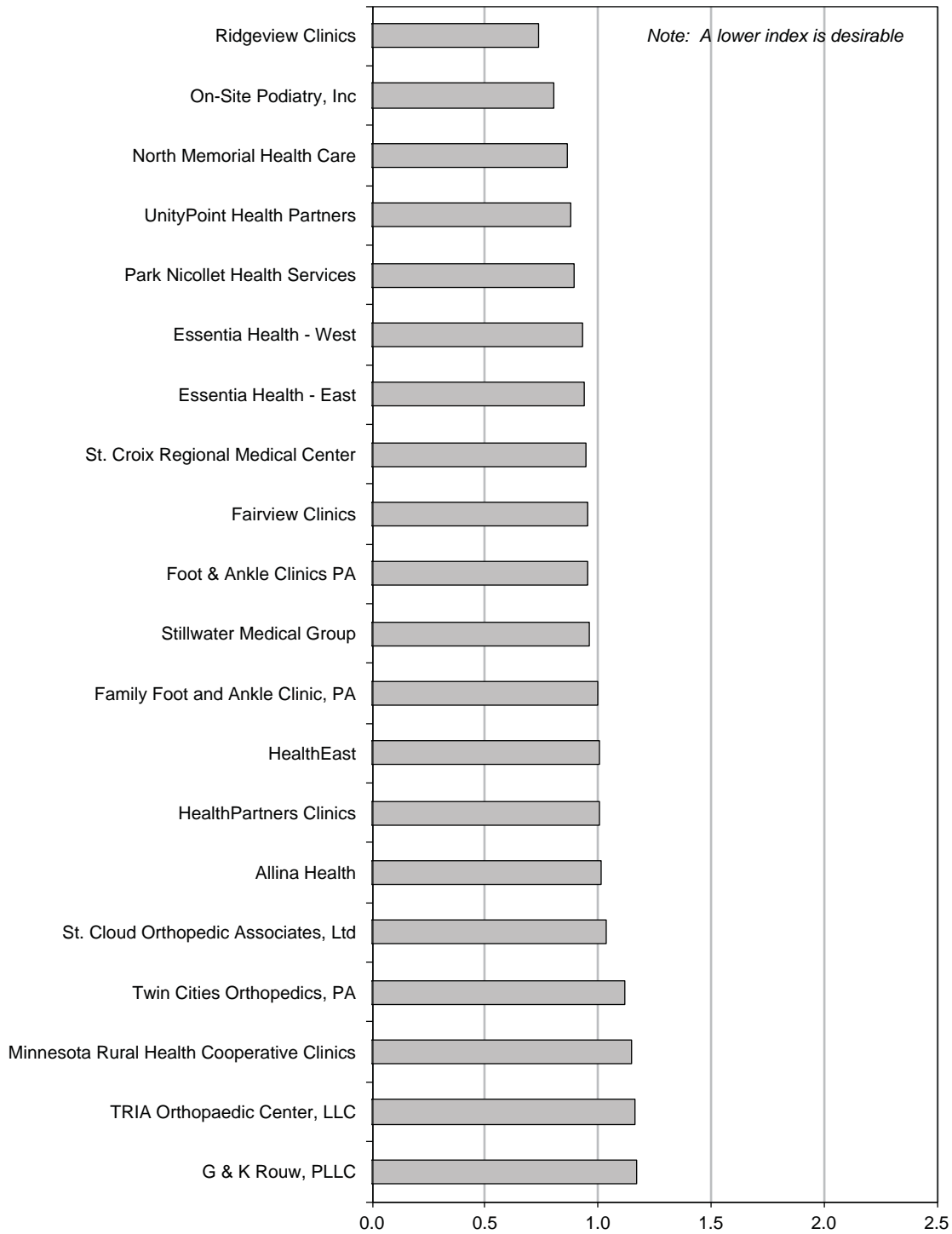


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Podiatry Providers
10/1/2015 - 9/30/2017

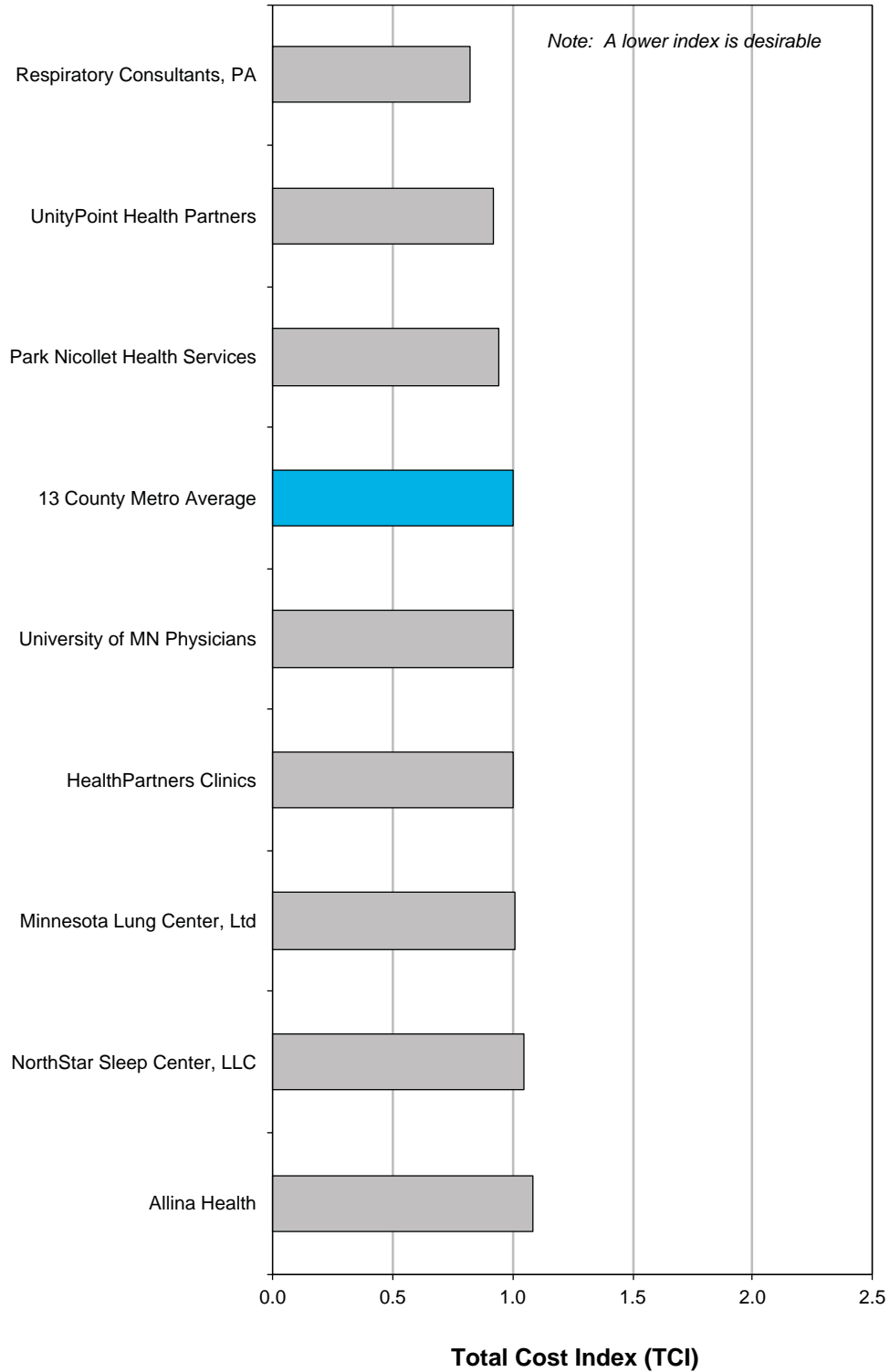


Resource Use Index (RUI)

Providers with <300 attributed members are not displayed.

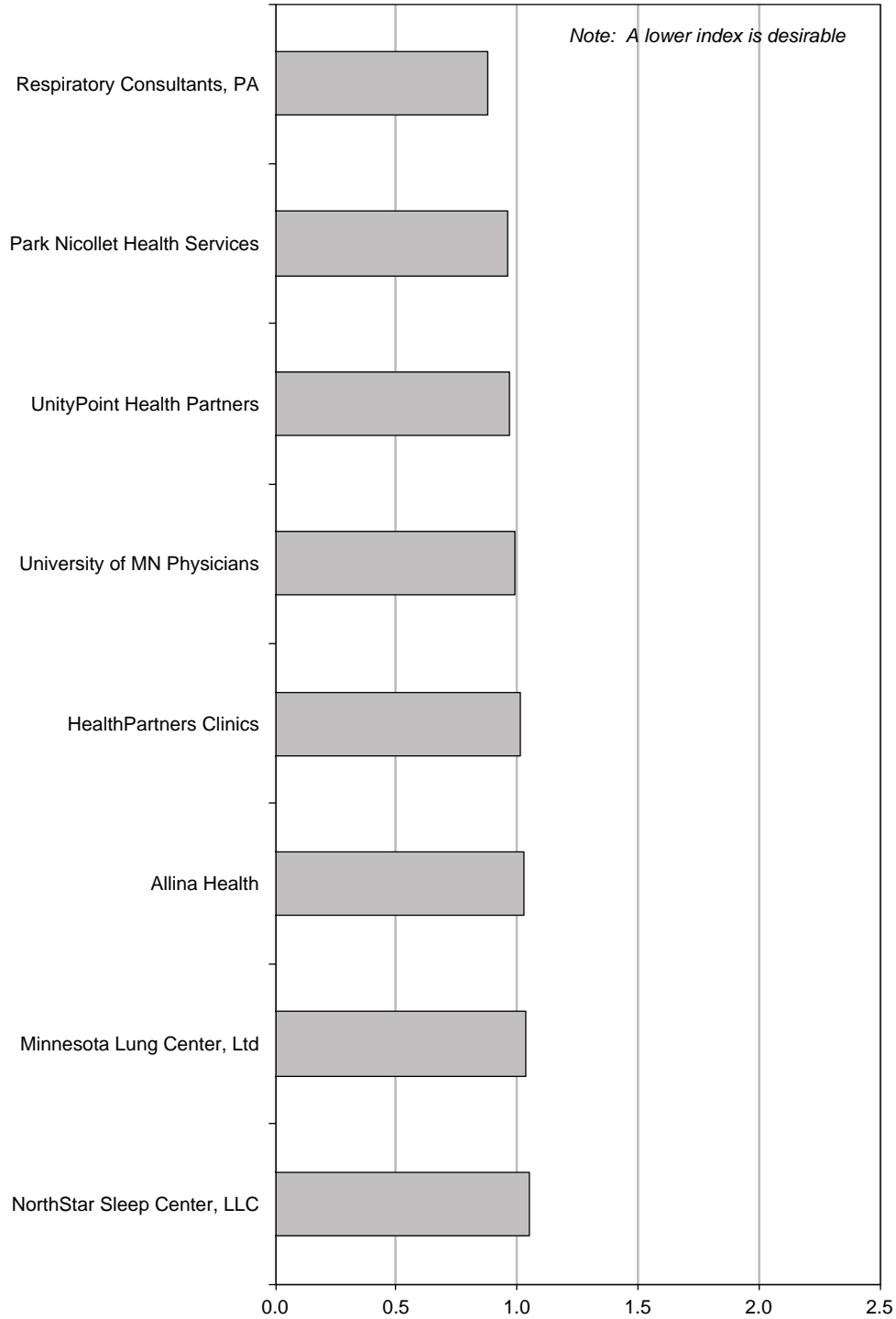
Indices > 1.000 represent providers that have higher than average resource use
 Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Pulmonary Medicine Providers
10/1/2015 - 9/30/2017



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

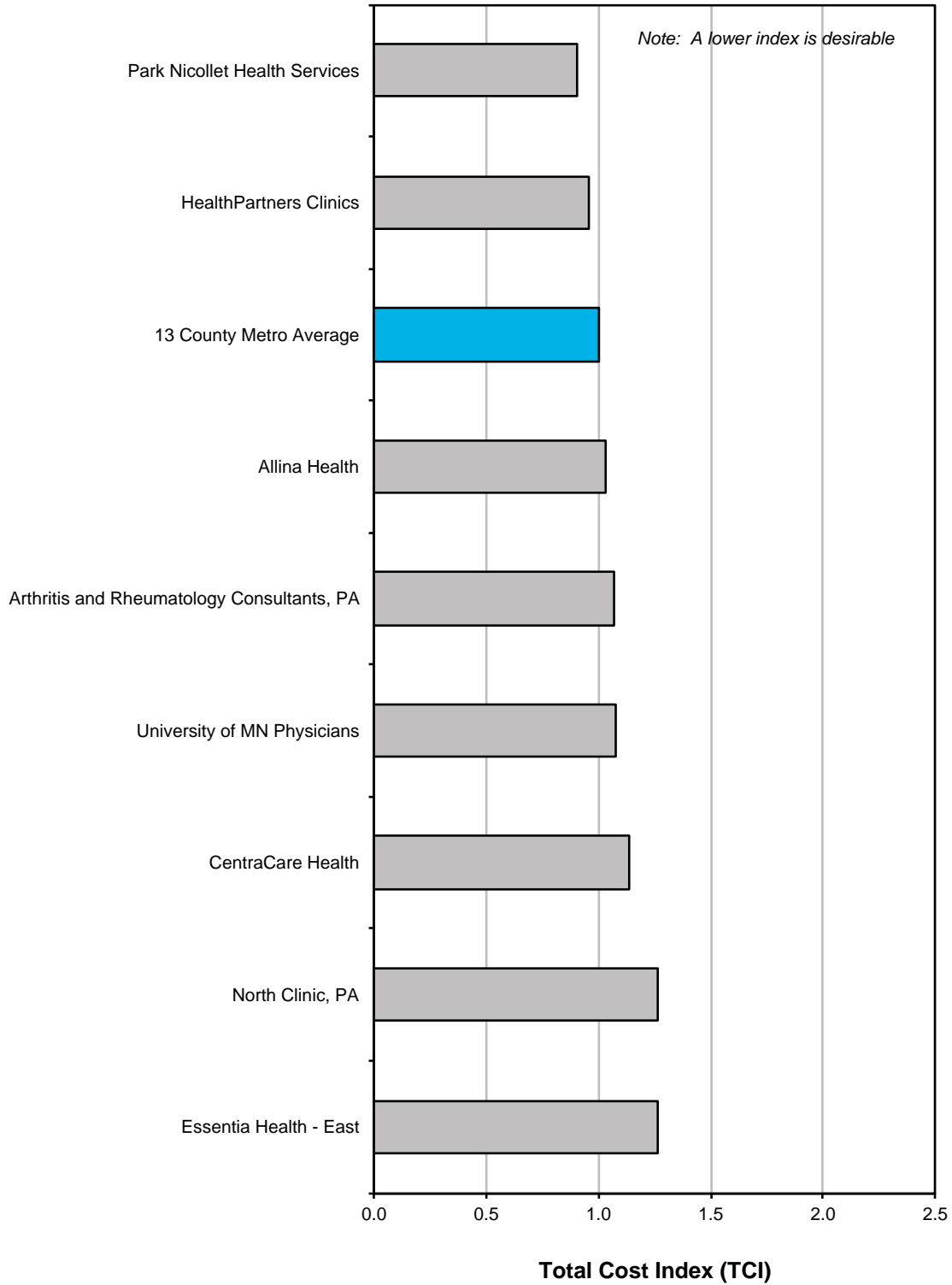
Resource Use Index (RUI) - Pulmonary Medicine Providers
10/1/2015 - 9/30/2017



Resource Use Index (RUI)
Providers with <300 attributed members are not displayed.

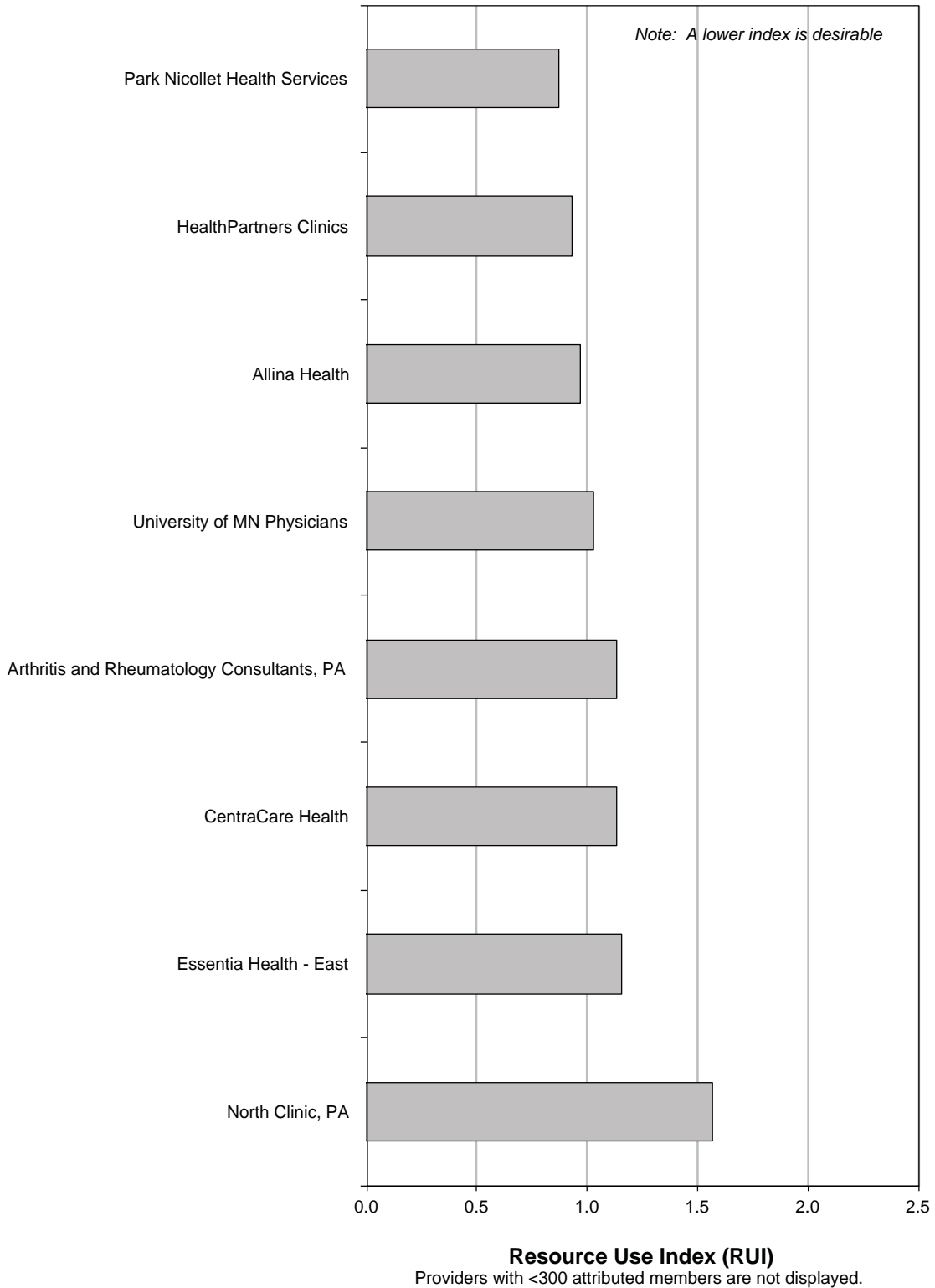
Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Rheumatology Providers
10/1/2015 - 9/30/2017



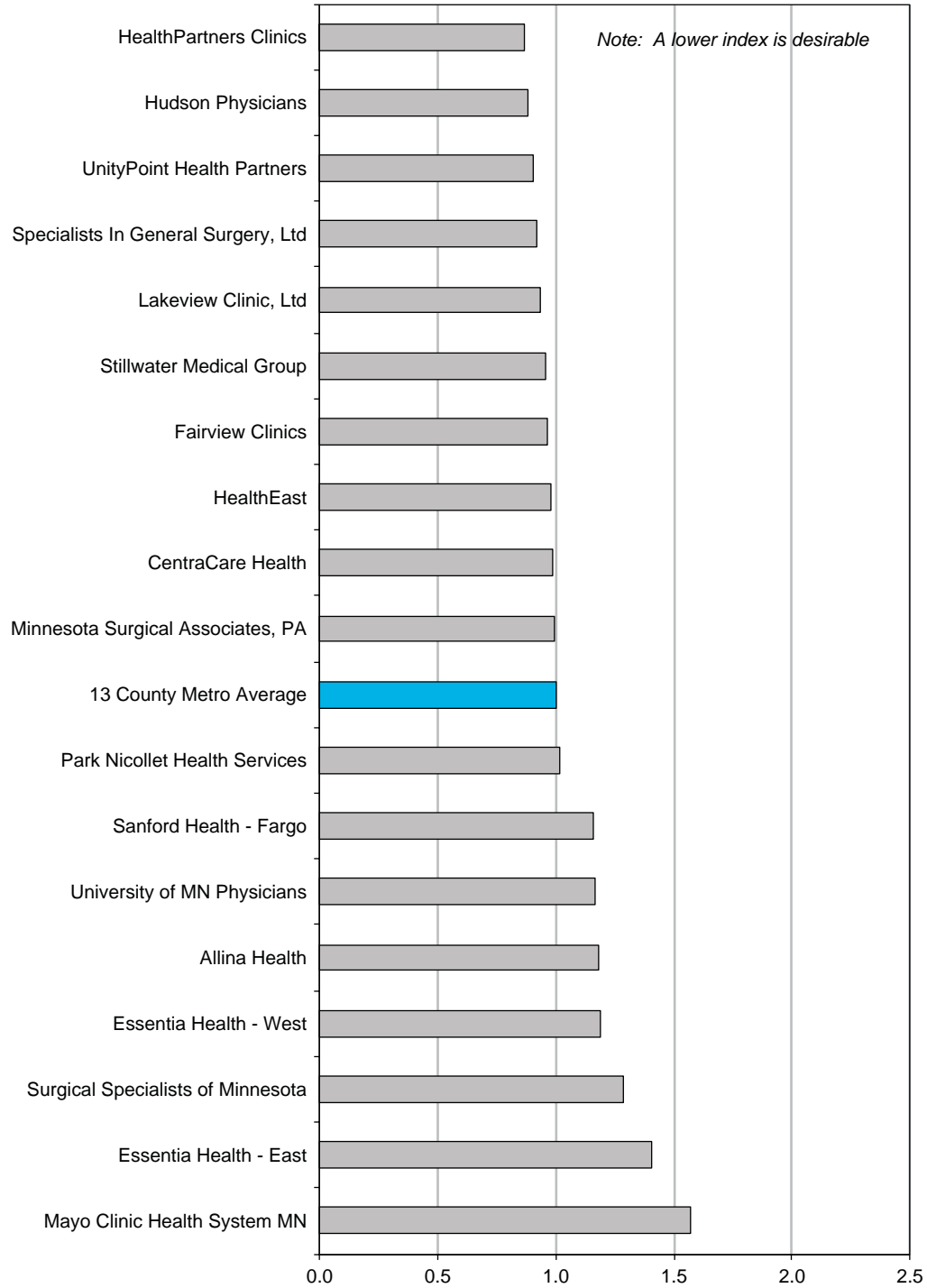
HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Rheumatology Providers
10/1/2015 - 9/30/2017



Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Surgery Providers
10/1/2015 - 9/30/2017

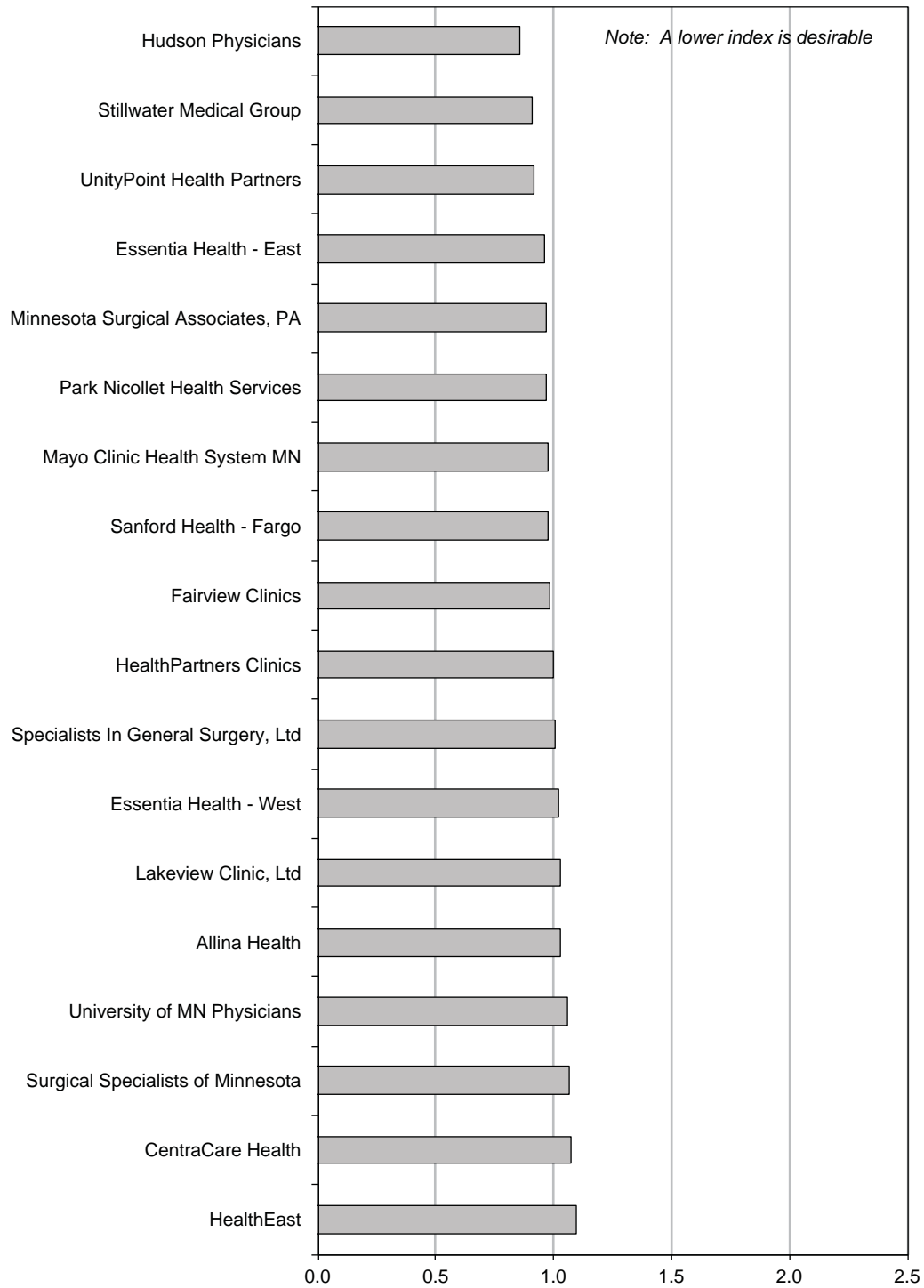


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

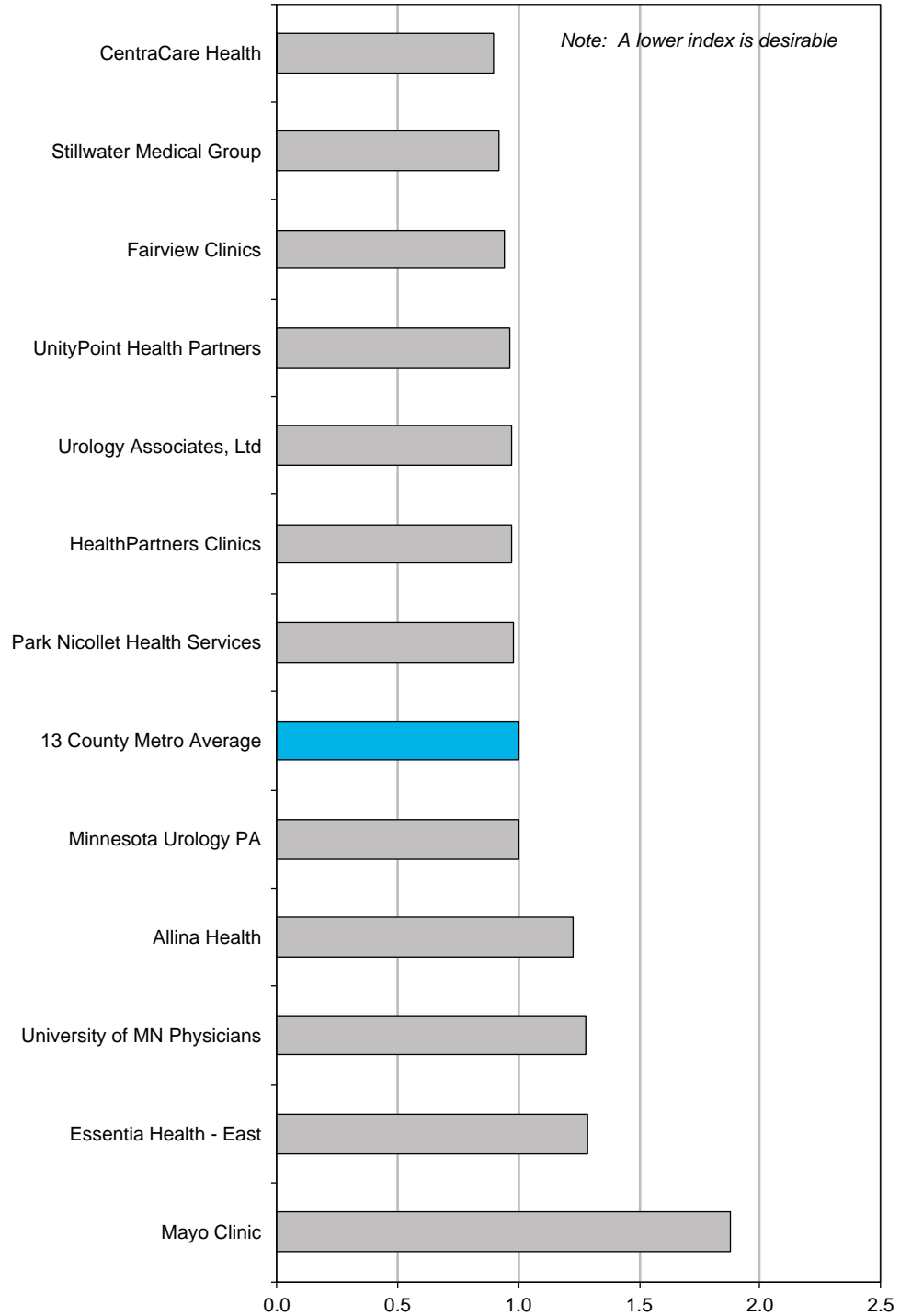
Resource Use Index (RUI) - Surgery Providers
10/1/2015 - 9/30/2017



Resource Use Index (RUI)
Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
Indices < 1.000 represent providers that have lower than average resource use

Total Cost Index (TCI) - Urology Providers
10/1/2015 - 9/30/2017

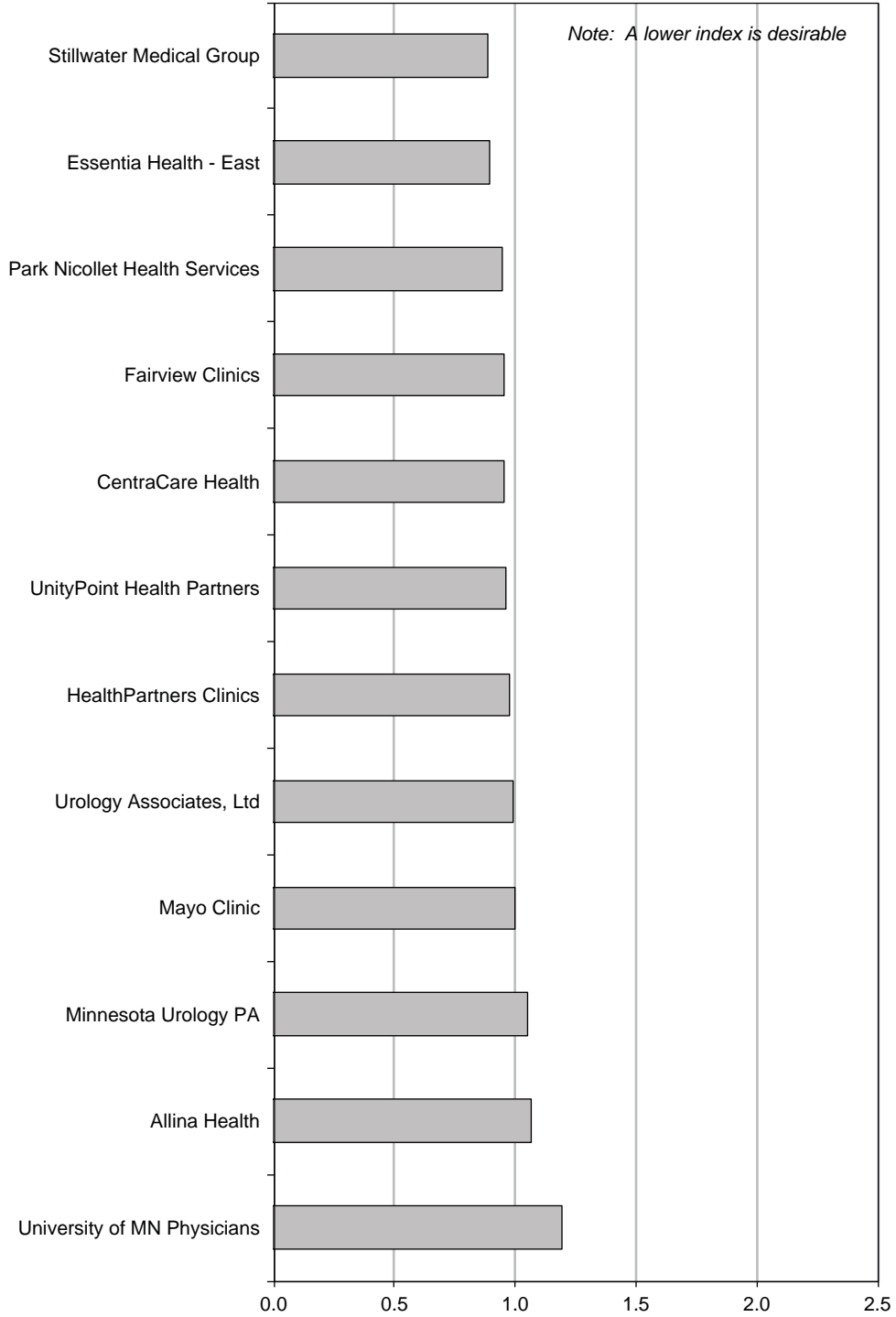


Total Cost Index (TCI)

Providers with <300 attributed members are not displayed.

HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Resource Use Index (RUI) - Urology Providers
10/1/2015 - 9/30/2017



Resource Use Index (RUI)

Providers with <300 attributed members are not displayed.

Indices > 1.000 represent providers that have higher than average resource use
 Indices < 1.000 represent providers that have lower than average resource use

TOTAL COST INDEX — HOSPITALS AND SURGERY CENTERS

January 1, 2017 – December 31, 2017

Description

Hospitals and surgery centers case mix and place of service mix adjusted cost index. The cost index measures a facility's inpatient and outpatient total costs relative to all other facilities.

Methodology

This measure is based on inpatient and outpatient commercial fully insured and self insured non-outlier inpatient admissions and outpatient visits. Facility case mix is adjusted by DRG for inpatient admissions and APC and RVUs for outpatient visits. The inpatient/outpatient case mix is accounted for by weighting the percent of business in each component by facility. Total cost of care indices are created for each facility by dividing each facility's case and place of service risk actual costs by the 13 county metro expected values.

Results

HealthPartners 13 county Metro Network Average: 1.000

Total Cost Indices > 1.000 represent hospitals and surgery centers that are more expensive than average

Total Cost Indices < 1.000 represent hospitals and surgery centers that are less expensive than average

Total Cost Index (TCI) - Hospitals and Surgery Centers
1/1/2017 - 12/31/2017

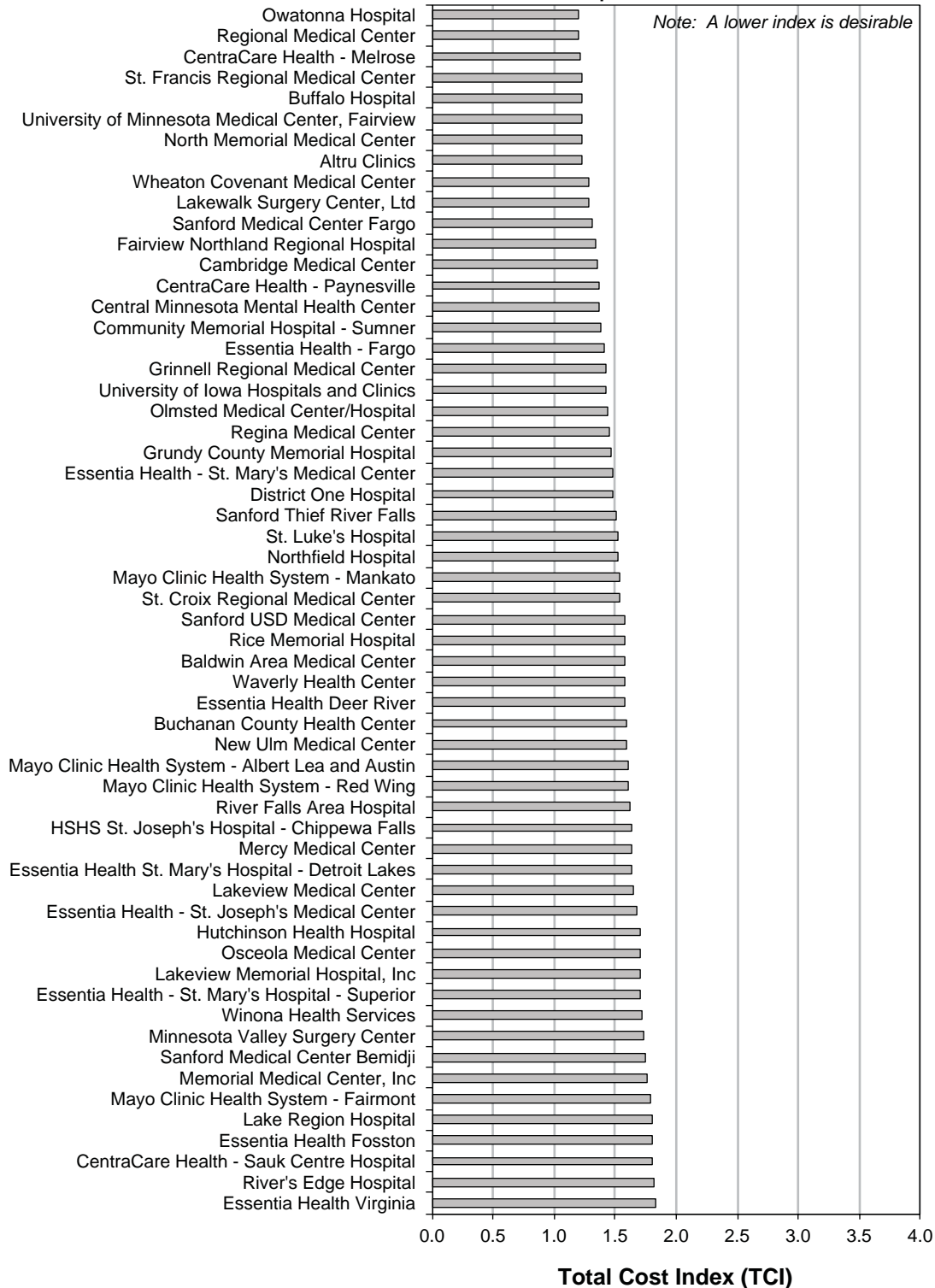
Part 1 of a 3 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost Index (TCI) - Hospitals and Surgery Centers
1/1/2017 - 12/31/2017

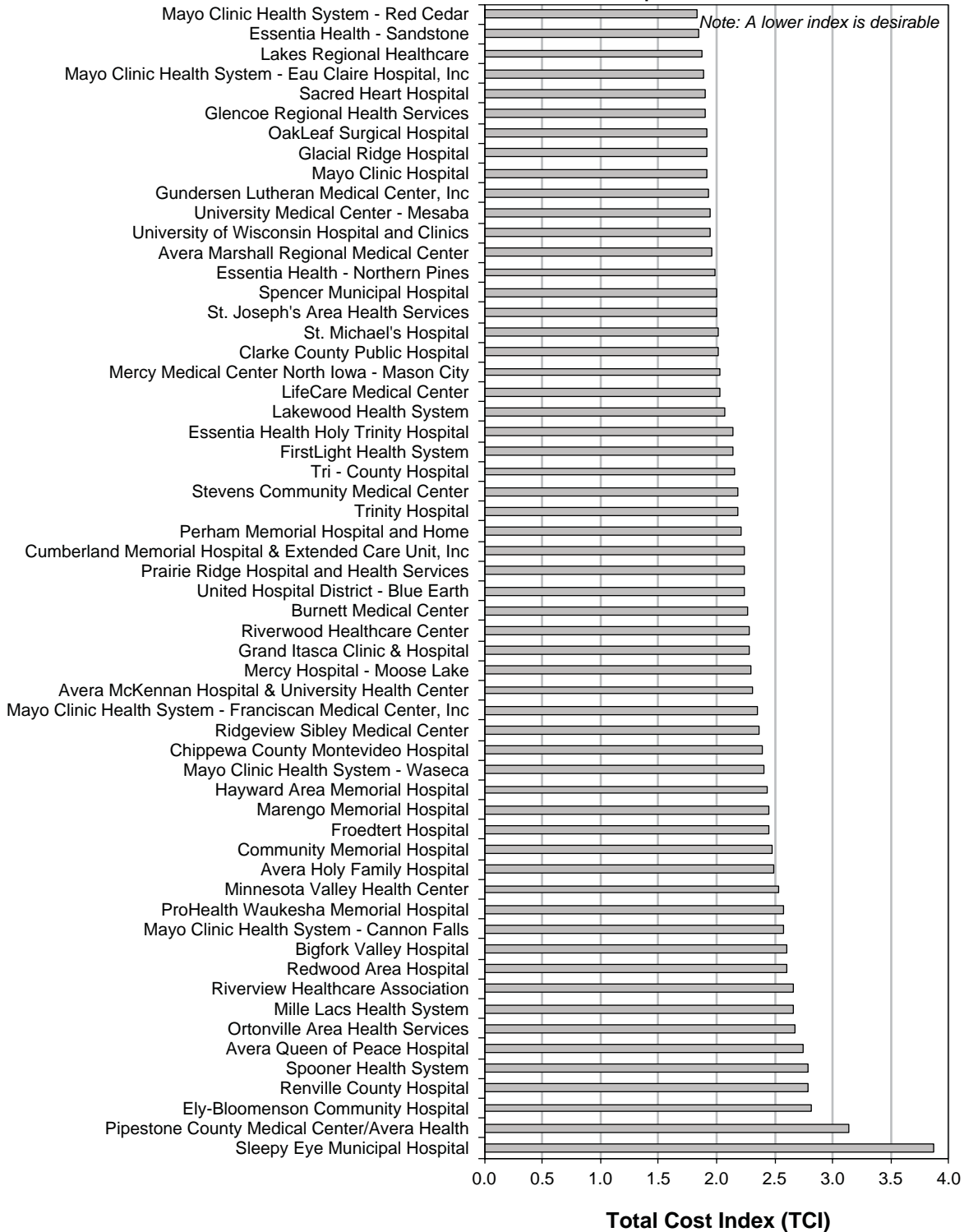
Part 2 of a 3 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost Index (TCI) - Hospitals and Surgery Centers
1/1/2017 - 12/31/2017

Part 3 of a 3 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

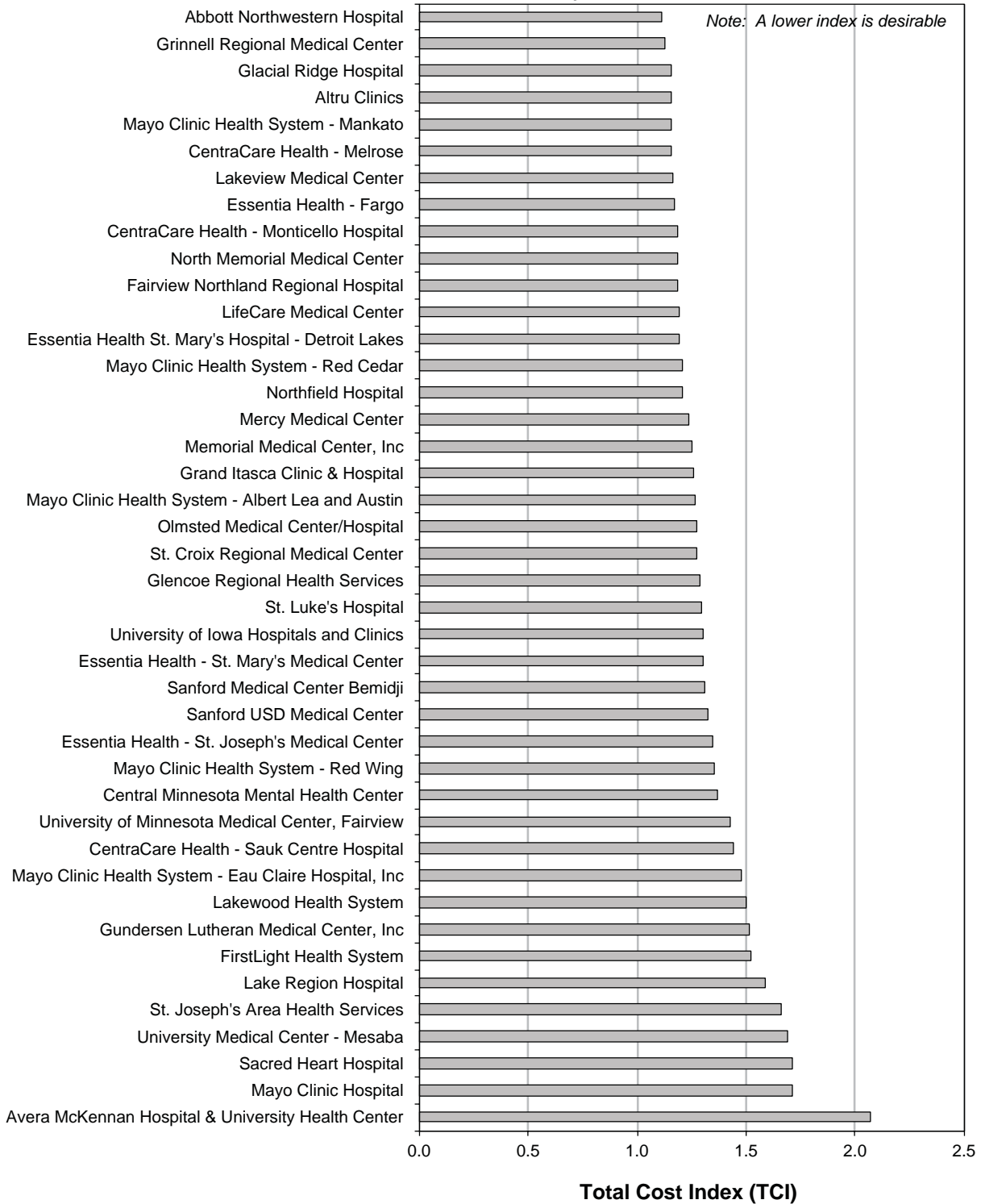
Total Cost Index (TCI) - Hospital Inpatient
1/1/2017 - 12/31/2017



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost Index (TCI) - Hospital Inpatient
1/1/2017 - 12/31/2017

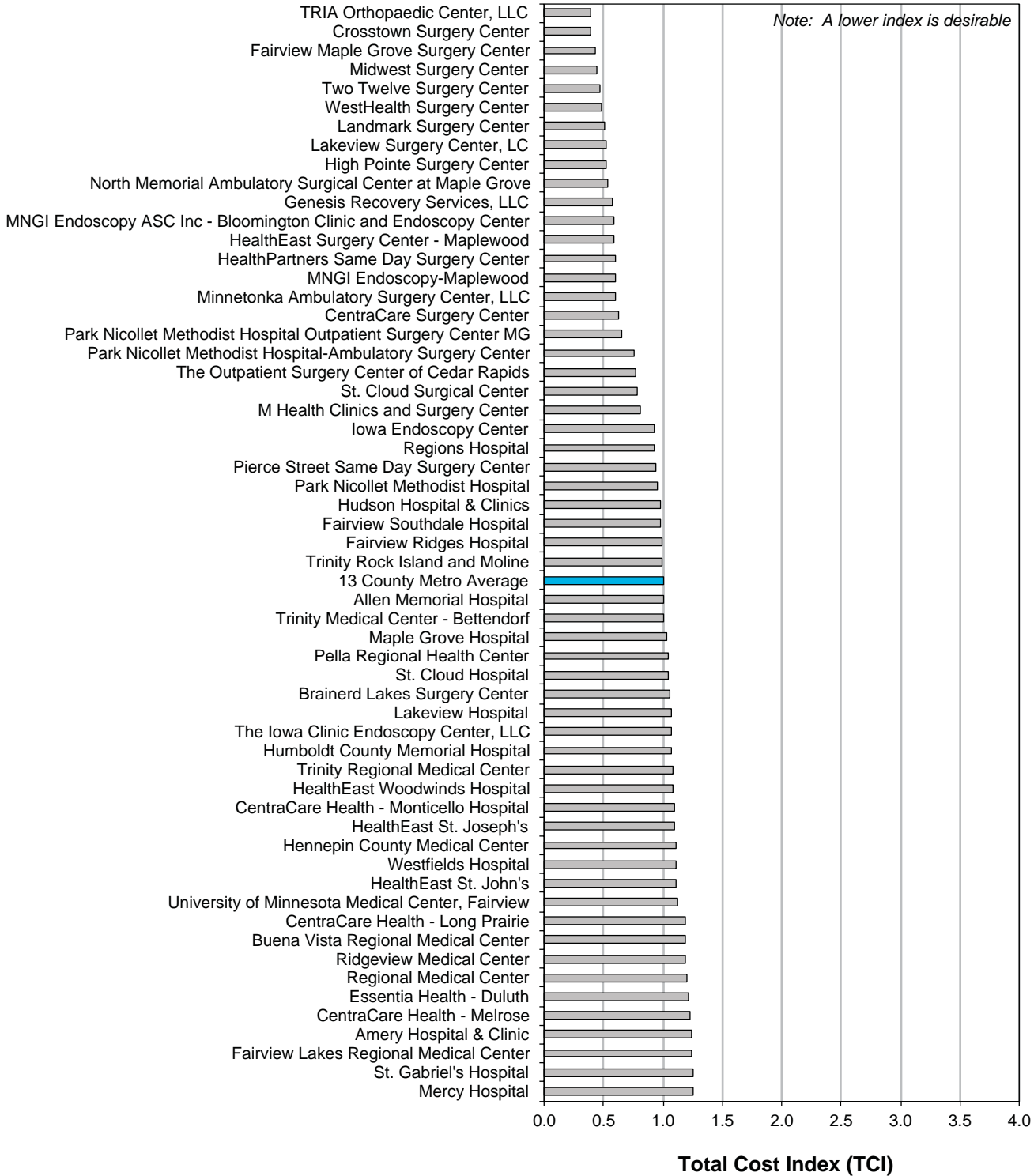
Part 2 of a 2 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost Index (TCI) - Outpatient Hospitals and Surgery Centers
1/1/2017 - 12/31/2017

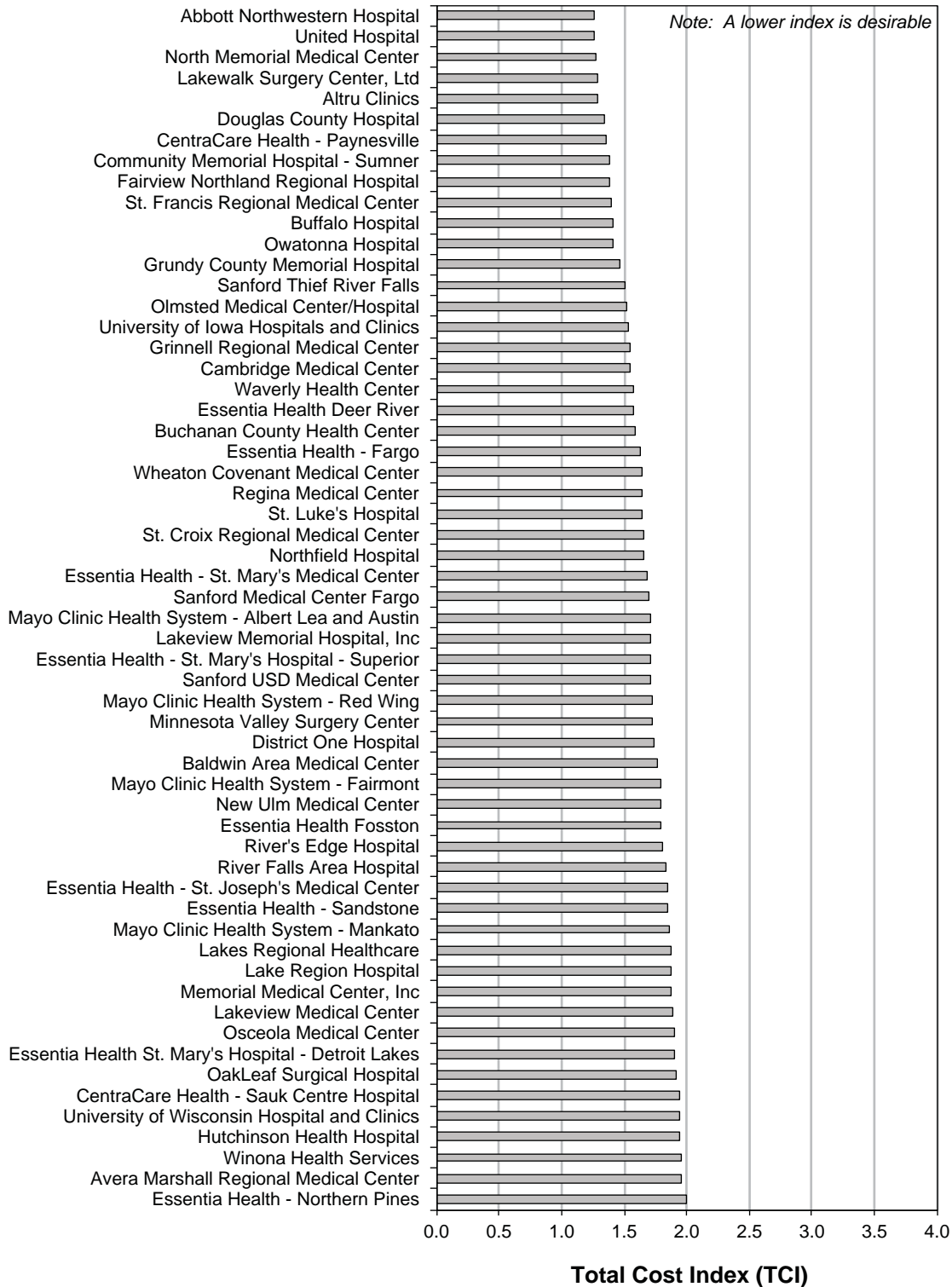
Part 1 of a 3 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost Index (TCI) - Outpatient Hospitals and Surgery Centers
1/1/2017 - 12/31/2017

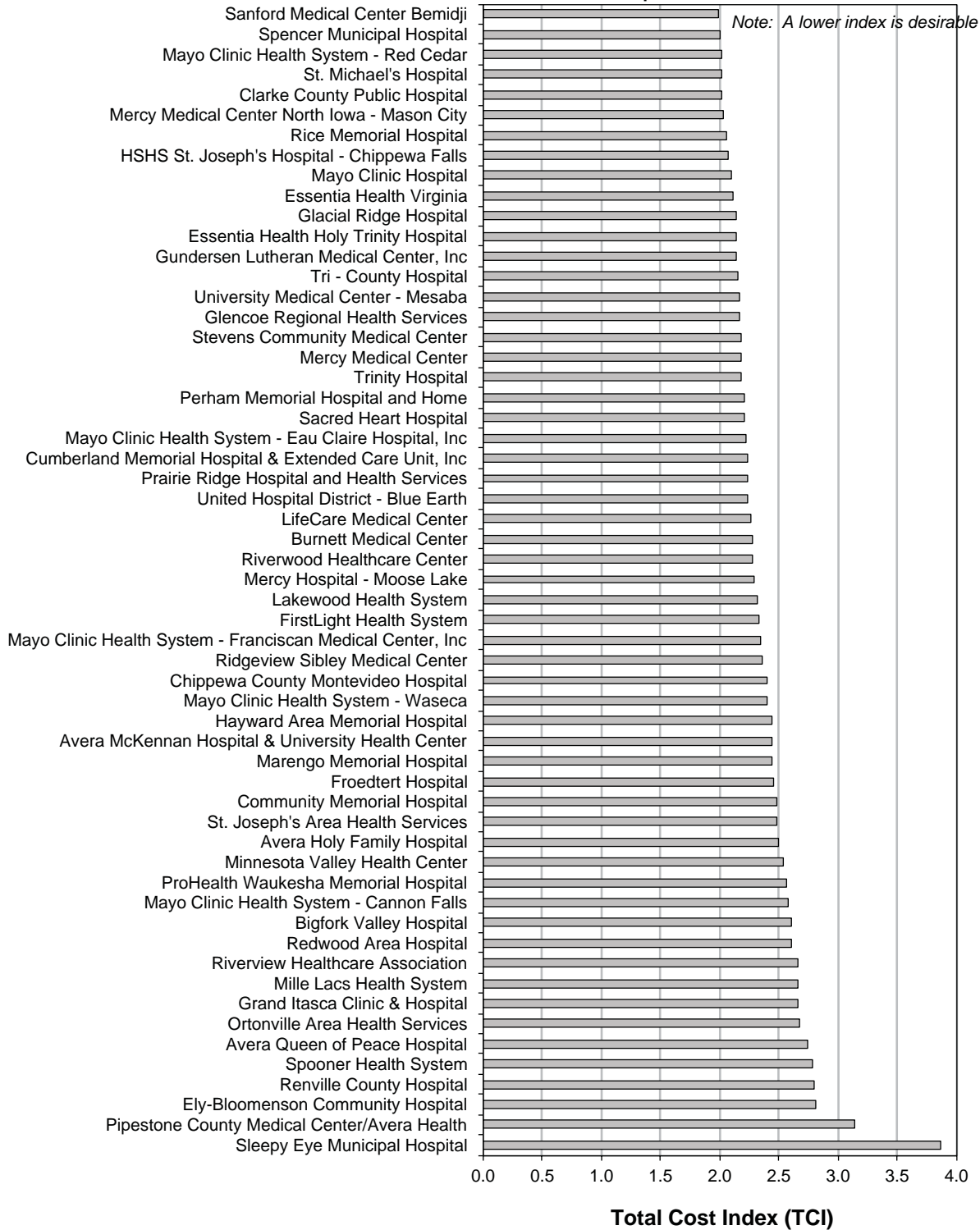
Part 2 of a 3 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

Total Cost Index (TCI) - Outpatient Hospitals and Surgery Centers
1/1/2017 - 12/31/2017

Part 3 of a 3 Part Graph



HealthPartners 13 County Metro Network Average: 1.000
 Indices > 1.000 represent providers that are more expensive than average
 Indices < 1.000 represent providers that are less expensive than average

PARTICIPATING PROVIDERS

Recognition must be extended to participating provider groups whose cooperation and support make this report possible and whose efforts to improve care are reflected in these results.

AALFA Family Clinic, PA (21, 23, 25, 31, 36, 62, 68, 75, 88, 90)
Abbott Northwestern Hospital (11, 13, 128, 132, 134)
Academic Dermatology Cutaneous Surgery and Laser Center (97, 98)
Adefris & Toppin Women's Specialists, MD, PC (28, 36, 65, 75, 83, 84, 109, 110)
Advanced Dermatology & Cosmetic Institute, PA (97, 98)
Advanced Dermatology Care (97, 98)
Advanced Medical Clinic (20, 23, 25, 31, 63, 68, 70, 75)
Advanced Practice Psych Services, LLC (34)
Advanced Spine Associates, PA (38)
Advancements in Allergy and Asthma Care, Ltd (93, 94)
Affiliated Community Medical Centers, PA (17, 21, 23, 26, 30, 36, 41, 43, 56, 57, 58, 59, 60, 62, 68, 75, 89, 90)
Aitkin Community Hospital Inc Clinics (17, 21, 23, 25, 31, 36, 38, 41, 43, 63, 68, 71, 75, 89, 91)
Allen Memorial Hospital (128, 131, 133)
Allergy & Asthma Specialists, PA (93, 94)
Allergy and Asthma Care, PA (93, 94)
Allergy and Asthma Center of Minnesota, PLLC (93, 94)
Allergy Associates of Lacrosse (93, 94)
Allergy, Asthma & Pulmonary Associates, PA (93, 94)
Allergy, Asthma and Immunology Clinic, PA (93, 94)
Allina Health (5, 7, 9, 15, 17, 20, 22, 25, 28, 30, 34, 35, 36, 38, 40, 42, 45, 46, 50, 52, 54, 56, 57, 58, 59, 60, 62, 65, 67, 70, 73, 75, 81, 82, 83, 84, 85, 86, 89, 91, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126)
Altru Clinics (7, 18, 20, 23, 25, 31, 35, 41, 42, 56, 57, 58, 59, 60, 63, 68, 71, 75, 89, 91, 129, 132, 134)
Amery Hospital & Clinic (18, 20, 23, 25, 31, 33, 37, 41, 43, 56, 57, 58, 59, 60, 63, 68, 75, 89, 91, 128, 131, 133)
Andros ENT & Sleep Center, PA (81, 82, 101, 102)
Annex Teen Clinic (71)
Anthony Louis Center (10)
Apple Valley Medical Clinic, Ltd (7, 18, 21, 22, 26, 30, 40, 42, 56, 57, 58, 59, 60, 63, 68, 75, 88, 91)
Aris Clinic (34)
Arthritis and Rheumatology Consultants, PA (121, 122)
Aspire Mental Health, LLC (34)
Aspirus Network, Inc (35)
Associated Clinic of Psychology (15, 34, 105, 106)
Associated Eye Care, Ltd (111, 112, 113, 114)
Associated Skin Care Specialists, PA (97, 98)
Astrup Sterling (50, 52)
Aurora Health Care Metro, Inc (35, 52)
Avalon Programs LLC (10)
Avera Health (18, 21, 22, 26, 30, 34, 35, 37, 38, 40, 42, 56, 57, 58, 59, 60, 63, 67, 75, 89, 90)
Avera Holy Family Hospital (130, 135)
Avera Marshall Regional Medical Center (130, 134)
Avera McKennan Hospital & University Health Center (130, 132, 135)
Avera Queen of Peace Hospital (130, 135)
Bachmann & Associates, Inc (105, 106)
Baldwin Area Medical Center (129, 131, 134)
Bellin Health Partners, Inc (34, 35, 37, 38)
BHSI, LLC (7, 15, 33, 105, 106)
Bigfork Valley Hospital (130, 135)
Birch Lake Bison Group, LLC (113, 114)
Brainerd Eyecare Center (113, 114)
Brainerd Lakes Surgery Center (128, 133)
Brokea, Inc (113, 114)
Buchanan County Health Center (129, 134)
Buena Vista Regional Medical Center (128, 133)
Buffalo Eye Clinic (113, 114)
Buffalo Hospital (129, 131, 134)
Burnett Medical Center (130, 135)
Burnsville Family Physicians, PA (17, 20, 22, 25, 30, 40, 42, 62, 67)
C.R.E.A.T.E., Inc (10)
Cambridge Medical Center (13, 129, 131, 134)
Canvas Health, Inc (9, 33, 105, 106)
Carris Health, LLC (97, 98)
Carver County Mental Health Program (33)
Cashman Center (33)
Catalyst Medical Clinic (21, 23, 26, 30, 63, 68, 75, 105, 106)
Center for Alcohol & Drug Treatment (10)
Center for Dermatology (97, 98)
CentraCare Health - Long Prairie (128, 133)
CentraCare Health - Melrose (129, 132, 133)
CentraCare Health - Monticello Hospital (128, 132, 133)
CentraCare Health - Paynesville (129, 134)
CentraCare Health - Sauk Centre Hospital (129, 132, 134)
CentraCare Health (5, 7, 9, 15, 17, 20, 23, 26, 28, 31, 35, 36, 41, 43, 45, 46, 48, 50, 52, 54, 56, 57, 58, 59, 60, 62, 65, 68, 70, 73, 75, 79, 80, 83, 84, 88, 91, 93, 94, 95, 96, 97, 98, 99, 100, 103, 104, 107, 108, 109, 110, 111, 112, 121, 122, 123, 124, 125, 126)
CentraCare Surgery Center (128, 133)
Central Minnesota Mental Health Center (9, 34, 129, 132)
Children's Health Care (17, 33, 35, 36, 71, 79, 80, 101, 102)
Children's Health Network (5, 7, 22, 31, 33, 36, 67, 70, 73, 75, 89, 91)
Chippewa County Montevideo Hospital (130, 135)
Choices Psychotherapy, Ltd (34)
Christenson Vision Care, Ltd (113, 114)
City of Minneapolis dba Department of Health and Family Support, School Bas (71)
Clarke County Public Hospital (130, 135)
Clarus Dermatology, PA (97, 98)
Clinic Sofia OB/GYN PA (83, 84, 28, 36, 65, 75, 109, 110)
Coborn's/Cash Wise (48, 50, 52, 54)
Collaborative Counseling, LLC (105, 106)

PARTICIPATING PROVIDERS

Community Memorial Hospital (130, 135, 129, 134)
 Community Univ Health Care Center (CUHCC) (33, 70)
 Complete Eyecare, PLC (113, 114)
 Comprehensive Healthcare for Women, PA (28, 65, 75, 83, 84, 109, 110)
 Costco (48, 50, 52, 54)
 Counseling Care (34)
 Covenant Medical Center (131)
 Crosstown Surgery Center (128, 133)
 Crutchfield Dermatology, PA (97, 98)
 Cumberland Memorial Hospital & Extended Care Unit, Inc (130, 135)
 Cuyuna Regional Medical Center (18, 20, 22, 25, 31, 37, 40, 56, 57, 58, 59, 60, 62, 68, 70, 75)
 CVS Pharmacy (48, 50, 52, 54)
 D. Stanton Enterprises (113, 114)
 Dakota Optometric Eye Care Associates, PA (113, 114)
 Deborah Coen, MD Psychiatric Services LLC (33)
 Dermatology Associates of Wisconsin, SC (97, 98)
 Dermatology Associates, PC (97, 98)
 Dermatology Consultants, PA (97, 98)
 Dermatology Specialists, PA (97, 98)
 Dermatology, PA (97, 98)
 District One Hospital (129, 131, 134)
 Don Sealock, OD, PA (113, 114)
 Douglas County Hospital (18, 21, 23, 25, 30, 36, 38, 40, 42, 56, 57, 58, 59, 60, 63, 67, 75, 89, 91, 115, 116, 128, 131, 134)
 Dr. Jeffrey Pearson and Associates, PA (113, 114)
 Drs. North & Watson, Optometrists, PA (113, 114)
 Duluth Family Medicine Clinic (75)
 Eagan Counseling Clinic, Inc (105, 106)
 Ear, Nose & Throat SpecialtyCare of Minnesota, PA (81, 82, 101, 102)
 Ear, Nose and Throat Clinic and Hearing Center (101, 102)
 EchoMetrics Cardiologists, PC (35)
 Edina Eye Clinic, PA (111, 112)
 Edina Eye Physicians & Surgeons, PA (111, 112)
 Edina Sports Health & Wellness, PA (20, 26, 31, 40, 62, 75, 88, 91)
 Effective Living Center, Inc - St. Paul (11)
 Eisenstadt Allergy & Asthma, LLP (93, 94)
 Ely-Bloomenson Community Hospital (130, 135)
 Emily Program, The (33)
 Endocrinology Clinic of Minneapolis, PA (17, 99, 100)
 ENT Clinic & Hearing Center (81, 82)
 Entira Family Clinics (7, 9, 15, 17, 20, 22, 25, 30, 40, 43, 56, 57, 58, 59, 60, 62, 67, 70, 73, 75, 88, 91)
 Essentia Health - Central (7, 17, 20, 22, 26, 30, 35, 36, 41, 42, 56, 57, 58, 59, 60, 62, 67, 71, 75, 88, 90, 103, 104, 109, 110)
 Essentia Health - Duluth (128, 131, 133)
 Essentia Health - East (5, 7, 9, 15, 17, 20, 22, 25, 28, 31, 34, 35, 37, 38, 40, 42, 45, 46, 56, 57, 58, 59, 60, 63, 65, 67, 70, 73, 75, 79, 80, 81, 82, 83, 84, 85, 86, 89, 91, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 121, 122, 123, 124, 125, 126)
 Essentia Health - Fargo (129, 132, 134)
 Essentia Health - Northern Pines (130, 134)
 Essentia Health - Sandstone (130, 134)
 Essentia Health - St. Joseph's Medical Center (129, 132, 134)
 Essentia Health - St. Mary's Hospital - Superior (129, 134)
 Essentia Health - St. Mary's Medical Center (13, 129, 132, 134)
 Essentia Health - Virginia Clinic (131)
 Essentia Health - West (7, 9, 17, 20, 23, 26, 31, 33, 35, 37, 38, 40, 43, 56, 57, 58, 59, 60, 62, 68, 70, 75, 83, 84, 88, 90, 97, 98, 101, 102, 109, 110, 113, 114, 115, 116, 117, 118, 123, 124)
 Essentia Health (48, 50, 52, 54)
 Essentia Health Deer River (129, 134)
 Essentia Health Fosston (129, 134)
 Essentia Health Holy Trinity Hospital (130, 135)
 Essentia Health St. Mary's Hospital - Detroit Lakes (129, 132, 134)
 Essentia Health Virginia (129, 135)
 Eye Care Associates, PA (111, 112)
 Eye Surgeons and Physicians, PA (111, 112)
 Face To Face Health and Counseling Services, Inc (37, 71)
 Fairview - University of Minnesota Medical Center (11)
 Fairview Clinics (5, 7, 9, 15, 18, 20, 22, 25, 28, 30, 33, 35, 37, 38, 41, 43, 45, 46, 48, 50, 52, 54, 56, 57, 58, 59, 60, 62, 65, 67, 71, 73, 75, 79, 80, 81, 82, 83, 84, 85, 86, 88, 90, 93, 94, 97, 98, 99, 100, 101, 102, 105, 106, 109, 110, 111, 112, 115, 116, 117, 118, 123, 124, 125, 126)
 Fairview Lakes Regional Medical Center (128, 131, 133)
 Fairview Maple Grove Surgery Center (128, 133)
 Fairview Northland Regional Hospital (129, 132, 134)
 Fairview Ridges Hospital (11, 128, 131, 133)
 Fairview Southdale Hospital (11, 13, 128, 131, 133)
 Fairview University Medical Center (13)
 Family Foot and Ankle Clinic, PA (117, 118)
 Family Health Care of Siouxland (88, 90)
 Family Innovations, Inc (105, 106)
 Family Tree Clinic (37)
 FirstLight Health System (17, 37, 41, 43, 71, 89, 90, 130, 132, 135)
 Fischer Laser Eye Center, LLC (113, 114)
 Foley Eye Clinic, PA (111, 112)
 Foley Medical Center, Ltd (40, 71)
 Foot & Ankle Clinics PA (117, 118)
 France Avenue Family Physicians, PA (17, 20, 22, 25, 30, 40, 42, 56, 57, 58, 59, 60, 62, 68, 75, 88, 90)
 Froedtert Hospital (130, 135)
 G & K Rouw, PLLC (117, 118)
 Gateway Family Health Clinic (17, 20, 22, 26, 31, 40, 63, 67, 71, 75, 89, 91)
 Genesis Recovery Services, LLC (128, 133)

PARTICIPATING PROVIDERS

Germanson MD Psychiatry, Ltd (34)
Gillette Children's Professional Services (38, 71, 75)
Glacial Ridge Hospital (130, 132, 135)
Glencoe Regional Health Services (130, 132, 135)
Goodrich Pharmacy (48, 50, 52, 54)
Grand Itasca Clinic & Hospital (17, 20, 22, 25, 30, 41, 43, 63, 68, 75, 89, 90, 130, 132, 135)
Grand River Medical Group, PC (88, 90)
Grinnell Regional Medical Center (129, 132, 134)
Grundy County Memorial Hospital (129, 134)
Gundersen Health System (30, 35, 40, 76, 89, 91)
Gundersen Lutheran Clinics (35, 38)
Gundersen Lutheran Medical Center, Inc (130, 132, 135)
Hamm Clinic (33)
Harvey J. Green, MD, PA (34)
Haven Chemical Health Systems (10)
Hayward Area Memorial Hospital (130, 135)
Hazelden Betty Ford Foundation (10, 33)
Healing Connections (34)
HealthEast (7, 9, 18, 21, 23, 26, 28, 30, 33, 35, 36, 38, 41, 43, 45, 46, 56, 57, 58, 59, 60, 63, 65, 68, 70, 73, 76, 89, 91, 93, 94, 101, 102, 109, 110, 117, 118, 123, 124)
HealthEast Heart Care (79, 80, 95, 96)
HealthEast St. John's (128, 133)
HealthEast St. John's Hospital (11, 131)
HealthEast St. Joseph's (13, 128, 133)
HealthEast St. Joseph's Hospital (11, 131)
HealthEast Surgery Center - Maplewood (128, 133)
HealthEast Woodwinds Hospital (11, 128, 131, 133)
HealthPartners Central Minnesota Clinics, Inc (7, 9, 15, 17, 21, 22, 25, 28, 30, 34, 36, 40, 42, 50, 52, 54, 56, 57, 58, 59, 60, 62, 65, 67, 70, 73, 76, 88, 90, 109, 110)
HealthPartners Clinics (5, 7, 9, 15, 17, 21, 23, 25, 28, 31, 34, 35, 36, 38, 40, 42, 45, 46, 48, 50, 52, 54, 56, 57, 58, 59, 60, 63, 65, 67, 70, 73, 76, 79, 80, 81, 82, 83, 84, 85, 86, 88, 90, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126)
HealthPartners Mail Order Pharmacy (48, 50, 52, 54)
HealthPartners Same Day Surgery Center (128, 133)
Hennepin County Medical Center (7, 11, 13, 17, 20, 22, 25, 31, 33, 35, 36, 38, 41, 43, 62, 67, 71, 76, 88, 91, 97, 98, 128, 131, 133)
High Pointe Surgery Center (128, 133)
HSHS St. Joseph's Hospital - Chippewa Falls (129, 131, 135)
Hudson Hospital & Clinics (109, 110, 128, 131, 133)
Hudson Physicians (17, 21, 23, 26, 28, 30, 36, 41, 43, 56, 57, 58, 59, 60, 63, 65, 67, 76, 83, 84, 88, 90, 123, 124)
Humboldt County Memorial Hospital (128, 133)
Hutchinson Health (18, 21, 23, 26, 30, 34, 36, 38, 40, 42, 62, 68, 71, 76, 89, 90)
Hutchinson Health Clinic (13)
Hutchinson Health Hospital (129, 131, 134)
Hy-Vee Pharmacy (48, 50, 52, 54)
Ilko Family Medicine, PA (76)
Independent Healthcare Associates (35)
Indian Health Board of Minneapolis (71)
Innovative Psychological Consultants (33)
Integra Dermatology (97, 98)
Integrity - Buffalo (7, 18, 20, 22, 26, 28, 31, 36, 41, 43, 56, 57, 58, 59, 60, 63, 65, 67, 71, 73, 76, 88, 90, 109, 110)
Integrity - Northern (17, 21, 22, 26, 31, 38, 40, 42, 56, 57, 58, 59, 60, 63, 67, 70, 73, 76, 85, 86, 89, 91, 97, 98, 101, 102, 111, 112, 115, 116)
Iowa Endoscopy Center (128, 133)
Jeffrey W. Williams, OD and Associates, PA (113, 114)
John A. Haugen Associates, PA (28, 36, 65, 76, 83, 84, 88, 91, 109, 110)
Kennedy Vision Health Center, LLC (113, 114)
Lake Region Hospital (17, 21, 23, 26, 31, 35, 63, 68, 71, 76, 89, 91, 129, 132, 134)
Lakeland Mental Health Center, Inc (34)
Lakes Dermatology, PA (97, 98)
Lakes Regional Healthcare (130, 134)
Lakeview Behavioral Health, Inc (34)
Lakeview Clinic, Ltd (7, 18, 21, 23, 26, 30, 36, 41, 43, 56, 57, 58, 59, 60, 62, 68, 70, 73, 76, 88, 90, 109, 110, 123, 124)
Lakeview Hospital (128, 131, 133)
Lakeview Medical Center (129, 132, 134)
Lakeview Memorial Hospital, Inc (129, 134)
Lakeview Surgery Center, LC (128, 133)
Lakewalk Surgery Center, Ltd (129, 134)
Lakewood Clinic (18, 21, 22, 26, 30, 36, 41, 42, 56, 57, 58, 59, 60, 63, 67, 71, 89, 91, 97, 98)
Lakewood Health System (76, 130, 132, 135)
Landmark Surgery Center (128, 133)
Life Development Resources, PA (34, 105, 106)
LifeCare Medical Center (130, 132, 135)
Lunds and Byerly's (48, 50, 52, 54)
Luxottica Retail North America, Inc (113, 114)
M Health Clinics and Surgery Center (128, 133)
Mankato Clinic, Ltd (18, 28, 34, 35, 36, 40, 65, 76, 89, 90, 97, 98)
Mann Enterprises of St. Cloud, Inc (113, 114)
Maple Grove Hospital (128, 131, 133)
Maren Schiess Rinker, LLC (33)
Marengo Memorial Hospital (130, 135)
Mark P. Stesin, MD, PA (17, 99, 100)
Market Street Dermatology (97, 98)
Mattson Pharmacy (50, 52)
Mayo Clinic (17, 28, 33, 35, 37, 38, 41, 43, 45, 46, 56, 57, 58, 59, 60, 65, 76, 79, 80, 81, 82, 83, 84, 85, 86, 89, 91, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 107, 108, 111, 112, 115, 116, 125, 126)
Mayo Clinic Health System - Albert Lea and Austin (129, 132, 134)
Mayo Clinic Health System - Cannon Falls (130, 135)
Mayo Clinic Health System - Eau Claire Hospital, Inc (130, 132, 135)
Mayo Clinic Health System - Fairmont (129, 134)
Mayo Clinic Health System - Franciscan Medical Center, Inc (130, 135)

PARTICIPATING PROVIDERS

Mayo Clinic Health System - Mankato (129, 132, 134)
Mayo Clinic Health System - Red Cedar (130, 132, 135)
Mayo Clinic Health System - Red Wing (18, 20, 23, 26, 31, 35, 36, 41, 42, 62, 67, 76, 89, 90, 129, 132, 134)
Mayo Clinic Health System - Waseca (130, 135)
Mayo Clinic Health System MN (7, 9, 18, 20, 23, 26, 28, 30, 35, 36, 38, 41, 43, 56, 57, 58, 59, 60, 62, 65, 67, 89, 90, 97, 98, 101, 102, 109, 110, 123, 124)
Mayo Clinic Health System WI (18, 35, 36, 40, 43, 56, 57, 58, 59, 60, 97, 98)
Mayo Clinic Hospital (13, 130, 132, 135)
Mayo Health System Clinics MN (76)
MCRH Alpha Medical, PA (37)
Medical Specialists, PA (37)
Memorial Medical Center, Inc (129, 132, 134)
Mental Health Counseling Services, LLC (34)
Mercy Hospital (11, 13, 128, 131)
Mercy Hospital (133, 130)
Mercy Medical Center (35, 129, 132, 135)
Mercy Medical Center North Iowa - Mason City (130, 135)
Mercy of Iowa City Regional Physician Hospital Organization (35)
Mesaba Clinic (76)
Metropolitan Gastrointestinal Specialist (103, 104)
Metropolitan Heart & Vascular Institute (79, 80)
Midlands Choice, Inc (35)
Midwest Center for Personal and Family Development (105, 106)
Midwest Clinic of Dermatology, Laser & Cosmetic Surgery (97, 98)
Midwest Ear, Nose & Throat Specialists (81, 82, 93, 94, 101, 102)
Midwest Spine & Brain Institute, LLC (38)
Midwest Surgery Center (128, 133)
Mildred S. Hanson, MD, PA (37)
Mill City Dermatology, PA (97, 98)
Mille Lacs Health System (17, 41, 71, 76, 130, 135)
Ministry Medical Group, Inc (35)
Minneapolis Clinic of Neurology, Ltd (107, 108)
Minneapolis Clinical Assoc In Psych (33)
Minneapolis Heart Institute (79, 80)
Minneapolis Otolaryngology, PA (81, 82, 101, 102)
Minnesota Adult & Teen Challenge (11)
Minnesota Birth Center, Inc (37)
Minnesota Center for Obesity, Metabolism & Endocrinology, PA (17, 99, 100)
Minnesota Dermatology, PA (97, 98)
Minnesota Eye Consultants, PA (111, 112, 113, 114)
Minnesota Gastroenterology, PA (103, 104)
Minnesota Lung Center, Ltd (119, 120)
Minnesota Mental Health Clinics (9, 15, 33)
Minnesota Optical, LLC (113, 114)
Minnesota Psychological Resources (34)
Minnesota Rural Health Cooperative Clinics (7, 17, 21, 22, 26, 30, 37, 41, 43, 56, 57, 58, 59, 60, 62, 68, 70, 76, 89, 90, 117, 118)
Minnesota Surgical Associates, PA (123, 124)
Minnesota Urology PA (37, 125, 126)
Minnesota Valley Health Center (130, 135, 129, 134)
Minnesota Vision Group, PA (113, 114)
Minnesota Women's Care, PA (83, 84, 36, 76, 109, 110)
Minnetonka Ambulatory Surgery Center, LLC (128, 133)
MNGI Endoscopy ASC Inc - Bloomington Clinic and Endoscopy Center (128, 133)
MNGI Endoscopy-Maplewood (128, 133)
Molly V. Silas, MD (33)
Murad Heart Care (35)
My Dermatologist, PA (97, 98)
Natalis Counseling & Psychology Solutions (33)
Native American Community Clinic (71)
Neurological Associates of St. Paul, PA (107, 108)
New Kingdom Healthcare (70, 88, 90, 76)
New Ulm Medical Center (129, 131, 134)
Noran Neurological Clinic, PA (107, 108)
North Clinic, PA (7, 17, 20, 22, 26, 28, 30, 36, 40, 42, 56, 57, 58, 59, 60, 62, 65, 67, 76, 83, 84, 88, 91, 109, 110, 121, 122)
North Memorial Ambulatory Surgical Center at Maple Grove (128, 133)
North Memorial Cardiovascular Services (35, 45, 46, 79, 80, 95, 96)
North Memorial Health Care (7, 9, 18, 21, 23, 26, 31, 33, 37, 40, 42, 56, 57, 58, 59, 60, 63, 68, 70, 73, 76, 88, 91, 97, 98, 103, 104, 117, 118)
North Memorial Medical Center (11, 13, 129, 132, 134)
North Metro Dermatology, PLLC (97, 98)
North Metro Pediatrics, PA (70)
North Suburban Eye Specialists, LLP (111, 112, 113, 114)
Northern Orthopedics, LTD (38, 85, 86, 115, 116)
Northern Psychiatric Associates (34)
Northfield Hospital (18, 20, 22, 25, 30, 37, 40, 42, 56, 57, 58, 59, 60, 62, 67, 70, 76, 89, 91, 115, 116, 129, 132, 134)
Northland Counseling Center, Inc (105, 106)
NorthPoint Health & Wellness Center (17, 36, 56, 57, 58, 59, 60, 70, 73)
NorthStar Sleep Center, LLC (119, 120)
Northway Eye and Contact Lens Center (113, 114)
Northwest Eye Clinic, PA (111, 112, 113, 114)
Northwest Family Physicians, PA (18, 21, 22, 26, 30, 41, 43, 56, 57, 58, 59, 60, 63, 68, 76, 88, 91)
Nystrom & Associates, Ltd (5, 7, 9, 11, 15, 18, 33, 71, 105, 106)
Oak Ridge Center, PLLC (34)
Oakdale Ear, Nose and Throat Clinic, PA (81, 82, 101, 102)
OakLeaf Medical Network (35, 38, 76, 130, 134)
Obstetrics and Gynecology Associates (28, 37, 65, 77, 83, 84, 89, 91, 109, 110)
Olmsted Medical Center Clinics (18, 20, 23, 25, 30, 33, 35, 36, 41, 62, 68, 77, 89, 91)
Olmsted Medical Center/Hospital (129, 132, 134)
On-Site Podiatry, Inc (117, 118)
Open Cities Health Center (18, 41, 43, 71)
Ophthalmology Associates, LLP (111, 112)

PARTICIPATING PROVIDERS

Ophthalmology, PA (111, 112)
Optometric Associates, Ltd (113, 114)
Optometric Eye Care Centers, PA (113, 114)
Orthopaedic & Fracture Clinic, PA (38, 115, 116)
Ortonville Area Health Services (130, 135)
Osceola Medical Center (18, 21, 23, 26, 31, 40, 42, 56, 57, 58, 59, 60, 63, 67, 70, 77, 89, 91, 129, 131, 134)
Owatonna Hospital (129, 131, 134)
Paparella Ear Head & Neck Institute, PA (101, 102)
Paramount Health Options (101, 102, 109, 110, 111, 112, 115, 116)
Park Avenue Center (10)
Park Nicollet Health Services (5, 7, 9, 15, 17, 20, 23, 25, 28, 31, 34, 35, 37, 38, 41, 43, 45, 46, 48, 50, 52, 54, 56, 57, 58, 59, 60, 62, 65, 67, 70, 73, 77, 79, 80, 81, 82, 83, 84, 85, 86, 88, 90, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126)
Park Nicollet Methodist Hospital (11, 128, 131, 133)
Park Nicollet Methodist Hospital Outpatient Surgery Center MG (128, 133)
Park Nicollet Methodist Hospital-Ambulatory Surgery Center (128, 133)
Parkview Medical Clinic (70)
Paul T. Richardson, MD LLC (33)
Pella Regional Health Center (128, 133)
People Incorporated (33)
People's Center Health Services (70)
Perham Health (77)
Perham Memorial Hospital and Home (130, 135)
Pierce Street Same Day Surgery Center (128, 133)
PineCone Vision Center, PLLC (113, 114)
Pinnacle Behavioral Healthcare, LLC (33)
Pipestone County Medical Center/Avera Health (130, 135)
Planned Parenthood of Minnesota, North Dakota, South Dakota (37, 71)
Plymouth Psych Group, LLC (33)
Prairie Lakes Health Care System (35)
Prairie Ridge Hospital and Health Services (130, 135)
Prairie St. John's (13, 34)
PrairieCare Medical Group (13, 15, 34)
Premier ObGyn of Minnesota (28, 37, 65, 71, 77, 83, 84, 89, 91, 109, 110)
Prevea Health (37)
Preventive Cardiology Consultants, PA (35)
PrimeCare Health Group (35)
ProHealth Waukesha Memorial Hospital (130, 135)
Psych Recovery, Inc (15, 135)
Psychiatric Consultants, SC (33)
Psychotherapy & Healing Associates, Ltd (33)
Redwood Area Hospital (130, 135)
Refresh Midwest Operations, SC (33, 105, 106)
Regina Medical Center (129, 131, 134)
Regional Health (35)
Regional Medical Center (129, 133)
Regions Hospital (11, 13, 48, 50, 52, 128, 131, 133)
Relate Counseling Center (34)
Relationship Therapy Center, Inc (105, 106)
Renville County Hospital (130, 135)
Reproductive Medicine and Infertility Associates, PA (37)
Respiratory Consultants, PA (119, 120)
Retina Center, PA (111, 112)
Rice Memorial Hospital (129, 131, 135)
Richard Schoewe, MD, LLC (20, 25, 30, 62)
Richfield Medical Group (21, 25, 30, 40, 63, 77)
Ridgeview Clinics - Otolaryngology (81, 82)
Ridgeview Clinics (7, 18, 21, 23, 26, 28, 30, 36, 40, 42, 56, 57, 58, 59, 60, 63, 65, 68, 71, 77, 83, 84, 88, 91, 97, 98, 99, 100, 101, 102, 103, 104, 109, 110, 117, 118)
Ridgeview Medical Center (128, 131, 133)
Ridgeview Sibley Medical Center (130, 135)
River Falls Area Hospital (129, 131, 134)
River Falls Eye Surgery & Laser Center, Inc (111, 112)
River Ridge Treatment Center (10)
River Valley Behavioral Health & Wellness Center, LLC (34)
River Valley Eye Professionals (113, 114)
Riverplace Counseling Center (10)
River's Edge Hospital (129, 134)
Riverview Healthcare Association (130, 135)
Riverwood Healthcare Center (130, 135)
Robert Roddy MD PA (34)
Robert W Anderson & Anthony O McDonald, OD (113, 114)
Roots Community Birth Center (36)
Roseau/Warroad Eye Clinic (113, 114)
Rum River Counseling, Inc (105, 106)
Russell N Osnes, OD & Associates, PA (113, 114)
Sacred Heart Hospital (130, 132, 135)
Sanford Health - Bismarck (17, 33, 35, 36, 41, 43)
Sanford Health - Fargo (7, 18, 21, 23, 25, 31, 34, 35, 36, 41, 43, 62, 68, 71, 77, 83, 84, 89, 91, 123, 124)
Sanford Health - Sioux Falls (18, 21, 23, 26, 30, 34, 35, 36, 41, 43, 63, 68, 77, 89, 90, 97, 98, 101, 102, 109, 110, 115, 116)
Sanford Health Clinics (35, 38, 56, 57, 58, 59, 60)
Sanford Medical Center Bemidji (129, 132, 135)
Sanford Medical Center Fargo (129, 131, 134)
Sanford Thief River Falls (129, 134)
Sanford USD Medical Center (129, 132, 134)
Sawtooth Mountain Clinic, Inc (70)
Schwieters Medical PLLC (34)
Scott Hadden, OD (113, 114)
Scott M. Yarosh, MD (33)
Sees the Day, Ltd (113, 114)
Setzer Pharmacy (50, 52)
Shopko (48, 50, 52, 54)
Shopko Eyecare Center (113, 114)
Silverman Ankle & Foot (38)
Sioux Trails Mental Health Center, Inc (33)
Skin Care Doctors, PA (97, 98)
SkinSpeaks: Advancements in Dermatology and Spa MD (97, 98)
Sleepy Eye Municipal Hospital (130, 135)
Southdale Pediatric Associates, Ltd (5, 22, 31, 67, 77, 88, 91)

PARTICIPATING PROVIDERS

Southside Community Health Services (70)
Southwest Eye Care, Inc (113, 114)
Specialists In General Surgery, Ltd (123, 124)
Spencer Municipal Hospital (130, 135)
Spooner Health System (130, 135)
St Paul Clinic, LLC (36)
St. Cloud Ear, Nose & Throat - Head & Neck Clinic (81, 82, 101, 102)
St. Cloud Eye Clinic (111, 112)
St. Cloud Hospital (11, 13, 34, 105, 106, 128, 131, 133)
St. Cloud Medical Group, LTD (7, 17, 40, 42)
St. Cloud Orthopedic Associates, Ltd (38, 85, 86, 115, 116, 117, 118)
St. Cloud Surgical Center (128, 133)
St. Croix Dermatology (97, 98)
St. Croix Psychiatric, LLC (105, 106)
St. Croix Regional Medical Center (7, 18, 21, 22, 26, 31, 33, 36, 41, 42, 56, 57, 58, 59, 60, 63, 68, 71, 77, 89, 90, 117, 118, 129, 132, 134, 11, 129, 131, 134)
St. Gabriel's Hospital (128, 131, 133)
St. Joseph's Area Health Services (130, 132, 135)
St. Joseph's Medical Center (33)
St. Luke's Clinics (7, 9, 17, 20, 22, 26, 28, 30, 34, 35, 37, 38, 41, 43, 56, 57, 58, 59, 60, 62, 65, 67, 70, 73, 77, 89, 91, 97, 98, 103, 104, 109, 110, 111, 112)
St. Luke's Hospital (13, 129, 132, 134)
St. Mary's Medical Center Acute Care (11)
St. Michael's Hospital (130, 135)
St. Paul Allergy & Asthma Clinic, PA (93, 94)
St. Paul Eye Clinic, PA (111, 112, 113, 114)
St. Paul Family Medical Center (70, 77)
St. Paul-Ramsey County Department of Public Health (37)
St. Sophie's, LLC (33)
Steven P. Consoer, OD (113, 114)
Stevens Community Medical Center (130, 135)
Stillwater Medical Group (5, 7, 9, 17, 20, 23, 25, 28, 31, 37, 40, 42, 56, 57, 58, 59, 60, 62, 65, 67, 71, 73, 77, 81, 82, 83, 84, 88, 90, 101, 102, 109, 110, 117, 118, 123, 124, 125, 126)
Stone Creek Psychiatry, LLC (34)
Strategic Practice Management, Inc (113, 114)
Summit Orthopedics, Ltd (38, 85, 86, 115, 116)
SuperValu/Cub (48, 50, 52, 54)
Surgical Consultants (35)
Surgical Specialists of Minnesota (123, 124)
Tareen Dermatology, PA (97, 98)
The Calli Institute, LLC (33)
The Community Circle (34)
The Heart Institute of North Dakota (35)
The Iowa Clinic (88, 91)
The Iowa Clinic Endoscopy Center, LLC (128, 133)
The Outpatient Surgery Center of Cedar Rapids (128, 133)
ThedaCare ACO, LLC (34, 35, 37, 38)
Thomas Meyer, OD (113, 114)
Thrifty Drug Stores (48, 50, 52, 54)
Total Eye Care, LLC (113, 114)
Tri - County Hospital (130, 135)
TRIA Orthopaedic Center, LLC (85, 86, 115, 116, 117, 118, 128, 133)
Tri-County Health Care (21, 23, 26, 31, 63, 68, 77)
Trinity Health (35)
Trinity Hospital (130, 135)
Trinity Medical Center - Bettendorf (128, 131, 133)
Trinity Regional Medical Center (128, 131, 133)
Trinity Rock Island and Moline (128, 131, 133)
Twin Cities Eye Specialists (111, 112)
Twin Cities Orthopedics, PA (38, 77, 85, 86, 88, 90, 115, 116, 117, 118)
Twin Cities Spine Center (85, 86)
Twin Ports Dermatology, Inc (97, 98)
Two Twelve Surgery Center (128, 133)
Ulrick Eyecare, Inc (113, 114)
United Family Medicine (7, 18, 20, 22, 25, 31, 33, 41, 43, 56, 57, 58, 59, 60, 62, 67, 70, 73, 77, 88, 90)
United Heart and Vascular Clinic (79, 80)
United Hospital (13, 128, 131, 134, 11)
United Hospital District - Blue Earth (130, 135)
United Skin Specialists, LTD (97, 98)
Unity Family Healthcare (18, 38, 41, 42, 56, 57, 58, 59, 60, 77, 85, 86, 88, 90, 115, 116)
UnityPoint Health Partners (7, 18, 34, 35, 37, 38, 40, 42, 56, 57, 58, 59, 60, 77, 88, 90, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 123, 124, 125, 126)
University Medical Center - Mesaba (13, 130, 132, 135)
University of Iowa Hospitals and Clinics (35, 129, 132, 134)
University of Minnesota Health Clinics and Surgery Center, Inc (33, 35, 38)
University of Minnesota Medical Center, Fairview (129, 132, 133)
University of MN Physicians (7, 9, 18, 21, 22, 25, 28, 31, 34, 37, 38, 41, 43, 56, 57, 58, 59, 60, 63, 65, 67, 70, 73, 77, 81, 82, 85, 86, 89, 91, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 115, 116, 119, 120, 121, 122, 123, 124, 125, 126)
University of MN Physicians Heart at Fairview (35, 45, 46, 95, 96)
University of Wisconsin Hospital and Clinics (130, 134)
Uptown Dermatology and Skin Spa, PA (97, 98)
Urology Associates, Ltd (125, 126)
Valley Family Practice (77)
Vibrant Health Family Clinics (18, 21, 22, 25, 31, 36, 40, 42, 56, 57, 58, 59, 60, 63, 67, 77, 88, 90)
Vision Pro Optical (113, 114)
Vitreoretinal Surgery, PA (111, 112)
Vona Center for Mental Health (34)
Walgreens (48, 50, 52, 54)
Wal-Mart/Sam's Club (48, 50, 52, 54)
Washburn Center For Children (33)
Water's Edge Counseling and Healing Center (33)
Waverly Health Center (129, 134)
West End Consultation Group (34)
West Metro Ophthalmology, PA (111, 112)
67, 77, 89, 90, 129, 131, 134)
West Side Community Health Center (7, 18, 33, 36, 40, 42, 56, 57, 58, 59, 60, 70, 73, 77, 88, 90)

PARTICIPATING PROVIDERS

Western Wisconsin Health (18, 20, 22, 26, 31, 33, 37, 63, 68, 77, 89, 90)

Westfields Hospital (18, 20, 23, 25, 30, 37, 40, 42, 56, 57, 58, 59, 60, 62, 68, 77, 88, 90, 103, 104, 128, 131, 133)

WestHealth Surgery Center (128, 133)

Wheaton Covenant Medical Center (129, 134)

White Bear Eye Clinic & Contact Lens Center, PA (113, 114)

William L. Clapp, MD (33)

Winona Health Services (17, 21, 22, 25, 30, 36, 40, 42, 62, 67, 77, 89, 90, 129, 131, 134)

Woman to Woman Clinic, PLC (37)

Women & Adolescents Gynecology Center, LLC (37)

Yankton Medical Clinic, PC (35)

Zvi Frankfurt, MD (34)



Achieving an accreditation status of Commendable from NCQA is a sign that a health plan is serious about quality. It is awarded to plans whose service and clinical quality meet or exceed NCQA's rigorous requirements for consumer protection and quality improvement.



The NCQA HEDIS Compliance Audit verifies compliance with HEDIS specifications and assures a managed care organization has adequate and sound capabilities for processing medical, member and provider information as a foundation for accurate and automated performance measurement.

2018

Our mission is to improve health and well-being in partnership with our members, patients and community.



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