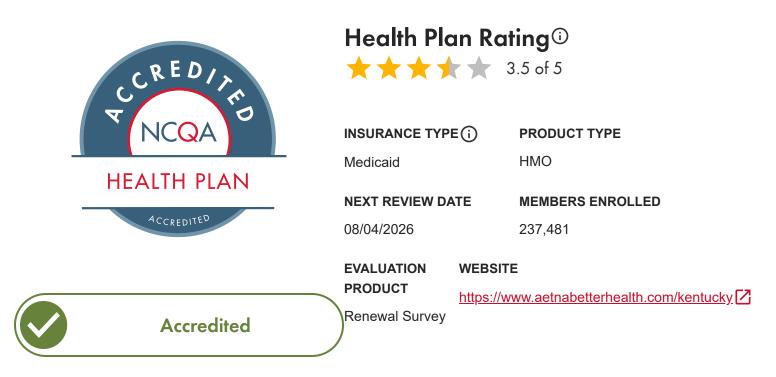
Aetna Better Health of Kentucky

Kentucky



Last update: 09/15/2024

Ratings are updated annually (September)

Other Accreditations, Certifications, and Distinctions

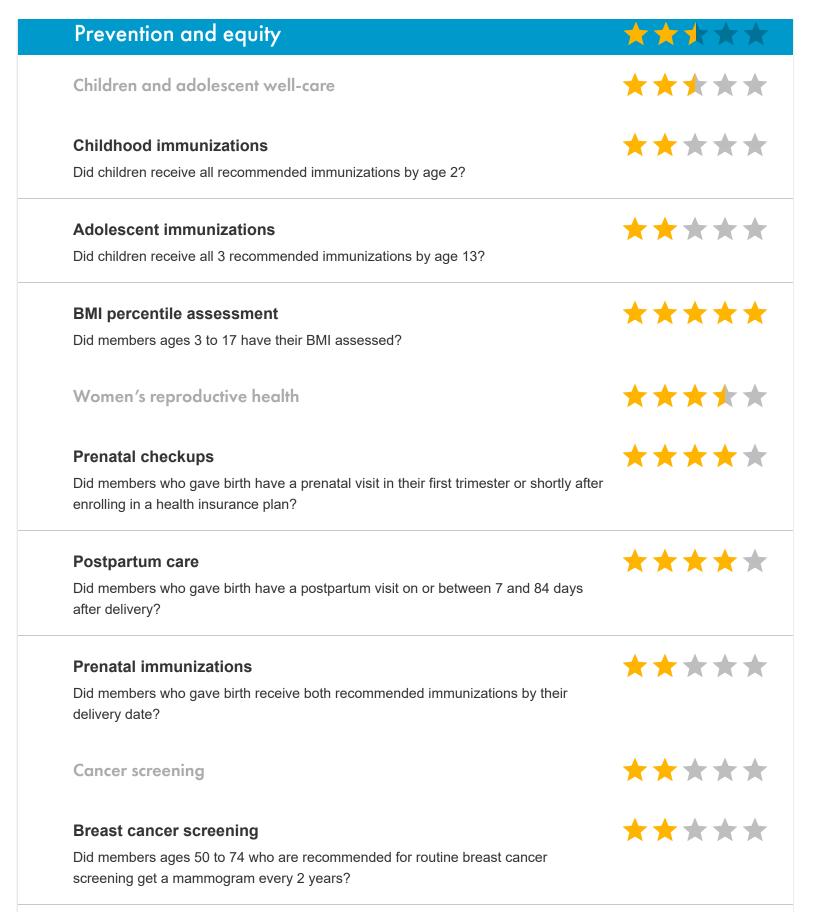
Health Equity Accreditation

Plan Detail Ratings

The overall rating score is the weighted average of all measures, not an average of the three composites (Patient experience, Prevention and equity, Treatment).

Note: NCQA used MY 2023 data and percentiles for commercial and Medicaid HEDIS/CAHPS and Medicare HEDIS. NCQA used MY 2022 data and percentiles for Medicare CAHPS and the Health Outcomes Survey. Several reasons could contribute to a plan having a non-numerical rating (Partial Data Reported, No Data Reported). For details about the Health Plan Ratings display rules, visit the 2024 Health Plan Ratings methodology on the <u>2024 HPR page</u>^[2].

	COLLAPSE ALL –
 Patient experience 	****
Getting care	****
Getting care easily Did members get appointments, preventive care, tests and treatment easily?	****
Getting care quickly Did members get appointments, preventive care, tests and treatments promptly?	****
Satisfaction with plan physicians	
Rating of primary care doctor Did members rate their primary care doctors high overall?	* * * * *
Satisfaction with plan and plan services	* * * * *
Rating of health plan Did members rate their plan services high overall?	* * * * *
Rating of care Did members rate their care high overall?	****



 \star \star \star \star

Cervical cancer screening

Did members ages 21 to 64 who are recommended for routine cervical cancer screening receive it?

Equity		

**** Race and ethnicity of members Did health plans have information about their members' race and ethnicity in order to provide appropriate services? Other preventive services \star \star \star \star Chlamydia screening Did members ages 16 to 24 who are recommended for chlamydia screening get tested? \star \star \star \star Influenza immunizations for adults Did members ages 19 and older receive recommended influenza immunizations? \star \star \star \star Td/Tdap immunizations for adults Did members ages 19 and older receive recommended Td/Tdap immunizations? \star \star \star \star Zoster immunizations for adults Did members ages 50 and older receive recommended zoster immunizations? \star \star \star \star Pneumococcal immunizations for adults Did members 66 and older receive recommended pneumococcal immunizations?

Treatment

Respiratory

Asthma control

Did members, ages 5 to 64, with persistent asthma have an appropriate ratio of asthma medications to help control their symptoms?

Appropriate testing and care for a sore throat

Were members ages 3 years and older with a sore throat given strep tests and appropriately prescribed antibiotics?





Appropriate antibiotic use for acute bronchitis/bronchiolitis

Were members ages 3 months and older with acute bronchitis not prescribed antibiotics in the 3 days after their diagnosis, as recommended?

Steroid after hospitalization for acute COPD

Did members ages 40 and older who were hospitalized or had an ED visit for chronic obstructive pulmonary disease receive systemic corticosteroids within 14 days of discharge?

Bronchodilator after hospitalization for acute COPD

Did members ages 40 and older who were hospitalized or had an ED visit for chronic obstructive pulmonary disease receive a bronchodilator within 30 days of their discharge?

Diabetes

Patients with diabetes—blood pressure control (140/90)

Did members ages 18 to 75 with diabetes have their blood pressure below 140/90 at their last visit?

Patients with diabetes—eye exams

Did members ages 18 to 75 with diabetes have a retinal or dilated eye exam?

Patients with diabetes—glucose control

Did members ages 18 to 75 with diabetes maintain their blood sugar level below 8 percent?

Patients with diabetes—received statin therapy

Did members ages 40 to 75 with diabetes who do not have cardiovascular disease receive a statin medication?

Patients with diabetes—statin adherence 80%

Did members ages 40 to 75 with diabetes who do not have cardiovascular disease stay on statin therapy as prescribed?

Patients with diabetes—kidney health evaluation

Did members ages 18 to 85 with diabetes receive a kidney health evaluation?

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Patients with cardiovascular disease—received statin therapy

Did males ages 21 to 75 and females ages 40 to 75 with cardiovascular disease receive a high or moderate-intensity statin medication?

Patients with cardiovascular disease—statin adherence 80%

Did males ages 21 to 75 and females ages 40 to 75 with cardiovascular disease stay on high or moderate-intensity statin therapy as prescribed?

Controlling high blood pressure

Did members ages 18 to 85 with hypertension have their blood pressure controlled (<140/90 mm Hg)?

Behavioral health—care coordination

Follow-up after hospitalization for mental illness

Were members ages 6 and older hospitalized with a mental illness followed up with, within a week after discharge?

Follow-up after ED for mental illness

Were members ages 6 and older with an ED visit for mental illness followed up with, within a week of their visit?

Follow-up after ED for substance use disorder

Were members ages 13 and older with an ED visit for a diagnosed substance use disorder followed up with, within a week of their visit?

Follow-up after high-intensity care for substance use disorder

Were members ages 13 and older with an inpatient visit, residential treatment visit, or medically managed withdrawal event for a diagnosed substance use disorder followed up with, within a week of their visit or discharge?

Behavioral health—medication adherence

Adherence to antipsychotic medications for individuals with

schizophrenia













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Did members ages 18 and older with schizophrenia or schizoaffective disorder stay on antipsychotic medications as prescribed?

Patients with a new episode of depression—medication adherence

for 6 months

Did members ages 18 and older with a new episode of depression take a prescribed antidepressant medication for at least 6 months?

Patients with opioid use disorder—medication adherence for 6

months

Did members ages 16 and older with a new episode of opioid use disorder treatment stay on recommended medications for at least 6 months?

Behavioral health—access, monitoring and safety

Cholesterol and blood sugar testing for youth on antipsychotic

medications

Did members ages 1 to 17 who were on 2 or more antipsychotic medications have their blood sugar and cholesterol tested?

Continued follow-up after ADHD diagnosis

Did children ages 6 to 12 who were on ADHD medication for at least 210 days have at least 2 follow-up visits within 9 months?

Diabetes screening for individuals with schizophrenia or bipolar

disorder

Were members ages 18 to 64 with schizophrenia or bipolar disorder and on antipsychotic medication screened for diabetes?

First-line psychosocial care for youth on antipsychotic medications

Did members ages 1 to 17 who had a new prescription for an antipsychotic medication have documentation of psychosocial care as first-line treatment?

Substance use disorder treatment engagement

Did members ages 13 and older with a new episode of substance use disorder engage in treatment within 34 days?

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Plan all-cause readmissions

For members ages 18 to 64, how many acute inpatient and observation stays were followed by an unplanned acute readmission within 30 days after discharge compared to the expected?

Other treatment measures

This Plan's

Accreditations,

Certifications

Distinctions

Accreditation status last updated

Other

and

on 09/15/2024

Appropriate use of imaging studies for low back pain

Were imaging tests appropriately not recommended for members ages 18 to 75 with a new episode of low back pain?

Health Equity Accreditation

This program offers distinction to organizations that engage in efforts to improve culturally and linguistically appropriate services and reduce health care disparities.

INSURANCE TYPE	NEXT REVIEW DATE	STATUS
Medicaid HMO	09/23/2025	Accredited

OTHER NAMES FOR THIS HEALTH PLAN

Aetna Better Health of Kentucky

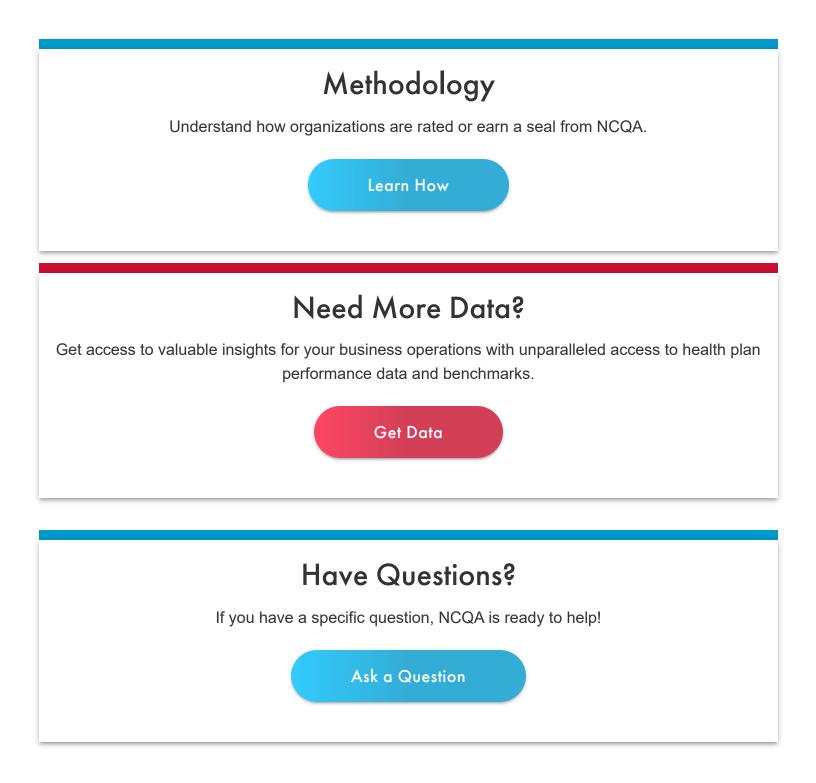
Bonus point calculations for Health Plan Ratings are based on a plan's NCQA Accreditation status as of the last business day in June of the release year.

I = Insufficient data; NC = No Credit; NA = Not Applicable

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