Medicaid and CHIP Quality Rating System

Prototype B

State.Medicaid.gov
Keeping people healthy

Welcome!

Choosing a Managed Care plan can be confusing.

Use this website to:

- Compare health plans available in your area on covered benefits, cost, and quality of care.
- Search for health plans that cover your doctors, medications, and health care services you need.
- Compare out of pocket expenses you'll pay under each plan.
- View experience ratings from current health plan members and compare plans on how well they provide the services that matter the most for you and your family.

Get started comparing managed care plans.

Enter your zip code to choose your location

03278

Merrimack County, NH 03278

Next

Learn more about Medicaid and CHIP eligibility

Apply for Medicaid and CHIP

Why do we ask for this information?

We will use your zip code to show you all the health plans that are available in your area. This information won't be stored anywhere.

Regulatory Text Citations

1 - A statement of the purpose of the Medicaid managed care quality rating system as proposed at § 438.520(a)(1)(i).

2 - Relevant information on Medicaid, CHIP and Medicare as proposed at § 438.520(a)(1)(i).

3 - Overview of how to use the information available in the display to select a quality managed care plan as proposed at § 438.520(a)(1)(i).

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

5 - If users must input user-specific information to access or use the QRS, an explanation of why the information is requested and whether it is optional or required as proposed at § 438.520(a)(1)(iii).

6 - All available managed care programs and plans for which a user may be eligible based on the user's age, geographic location, and dually eligible status, if applicable, as well as other demographic data identified by CMS as proposed at § 438.520(a)(2)(i).

17 - Certain of the metrics, as specified by CMS, of managed care plan performance that States must make available to the public under § 438 subparts B and D, including data most recently reported to CMS on each managed care program pursuant to § 438.66(e) and the results of the secret shopper survey specified in § 438.68(f) of this part as proposed at § 438.520(a)(3)(v).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

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Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

[Zip Code: 03278 ⊗] [Child ⊗] [Adult under 65 ⊗]

22 **Ready to Enroll in a Plan?
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Select age group **6**

Select whether you're looking for health plans for adults or children.

☑ **Child**
(0-18 years)

☑ **Adult under 65**
(19-64 years)

☐ **Adult 65 and older**
(65+ years)

5 **Why do we ask for this information?**

Health plan services may be different for adults and children. We will use the age you entered to show you all the health plans that are available in your area.

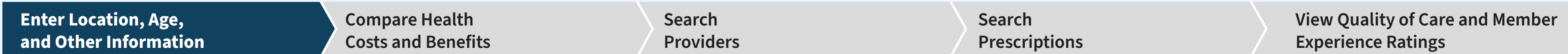This information won't be stored anywhere.

[**Next**]

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

5 - If users must input user-specific information to access or use the QRS, an explanation of why the information is requested and whether it is optional or required as proposed at § 438.520(a)(1)(iii).

6 - All available managed care programs and plans for which a user may be eligible based on the user's age, geographic location, and dually eligible status, if applicable, as well as other demographic data identified by CMS as proposed at § 438.520(a)(2)(i).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

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Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗   Child ⊗   Adult under 65 ⊗

22

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Select all that apply — **6**

☑ **StateCare** (This is the State's Medicaid program for kids)

☐ **CoverKids** (This is the State's Children's Health Insurance Program/CHIP program for kids)

☐ I don't know what type of coverage the child has or the child doesn't currently have coverage

5 **Why do we ask for this information?**

We will use this information to show you plans that may be available to you in your area.

Visit State.Medicaid.gov to learn more about healthcare coverage for children.

Back   **Next**

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

5 - If users must input user-specific information to access or use the QRS, an explanation of why the information is requested and whether it is optional or required as proposed at § 438.520(a)(1)(iii).

6 - All available managed care programs and plans for which a user may be eligible based on the user's age, geographic location, and dually eligible status, if applicable, as well as other demographic data identified by CMS as proposed at § 438.520(a)(2)(i).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

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Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗   Child ⊗   Adult under 65 ⊗

22 **Ready to Enroll in a Plan? Visit State.Medicaid.gov**

Select all that apply ——— **6**

☑ I receive Medicare

☐ I received disability income from Social Security for more than 24 months

☐ I have End Stage Renal Diseases (ESRD) or Amyotrophic Lateral Sclerosis (ALS), also known as Lou Gehrig's disease

☐ I receive long-term services and supports (LTSS)

Back   **Next**

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5   **Why do we ask for this information?**

We will use this information to help you navigate to the Medicare-Medicaid plans website. This is also referred to as dual-eligibility.

For more information visit https://www.medicare.gov/.

This information won't be stored anywhere.

What are long-term services and supports?

Long term services and supports provide help with everyday personal tasks like eating, bathing, dressing, or managing medications. Help can be provided in your home or in a place like a nursing home or group home.

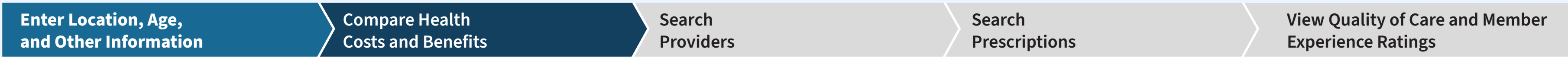
Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

5 - If users must input user-specific information to access or use the QRS, an explanation of why the information is requested and whether it is optional or required as proposed at § 438.520(a)(1)(iii).

6 - All available managed care programs and plans for which a user may be eligible based on the user's age, geographic location, and dually eligible status, if applicable, as well as other demographic data identified by CMS as proposed at § 438.520(a)(2)(i).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

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Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ | Child ⊗ | Adult under 65 ⊗ | Health Plan: Acme Health ⊗ | Health Plan: Blue Ribbon ⊗ | Health Plan: Prime Health ⊗

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What you pay **14**

Out-of-pocket costs may include premiums, copayments, coinsurance, and deductibles. Learn more about out-of-pocket costs by visiting State.Medicaid.gov.

Same costs for all plans

- There is no premium (monthly payment) for any health plan.
- A deductible is a set amount you must pay for covered health care services before your health plan will pay. The deductible amount is set by the State and therefore does not vary by plan.
- Maximum out-of-pocket costs are limited by the State and therefore do not vary by plan.

15

Different costs from plan to plan

- Out-of-pocket costs may differ between plans. Refer to the website for each health plan for more information.

⌃ Hide information on covered services

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

14 -Premium and cost-sharing information among available managed care plans within a single program as proposed at § 438.520(a)(3)(iii).

15 -Premium and cost-sharing information including differences in premium and cost-sharing among available managed care plans within a single program as proposed at § 438.520(a)(3)(iii).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

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Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ Child ⊗ Adult under 65 ⊗ Health Plan: Acme Health ⊗ Health Plan: Blue Ribbon ⊗ Health Plan: Prime Health ⊗

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Services Covered by All Plans ——— **16**

Behavioral health services: mental health and substance use services	Certified pediatric and family nurse practitioner services	EPSDT: early and periodic screening, diagnostic, and treatment services	Emergency department and urgent care services	Family planning services
Federally qualified health center services	Freestanding birth center services (when licensed or otherwise recognized by state)	Home health services	Inpatient hospital services	Laboratory and x-ray services
Nurse midwife services	Nursing facility services	Outpatient hospital services	Physician services	Rural health clinic services
Tobacco cessation counseling for pregnant women	Transportation to medical care (emergent and non-emergent)			

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

16 - A summary of benefits including differences in benefits among available managed care plans within a single program as proposed at § 438.520(a)(3)(iv).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

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④ For Live Assistance
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TTY #711

A A English ▾

| Enter Location, Age, and Other Information | Compare Health Costs and Benefits | Search Providers | Search Prescriptions | View Quality of Care and Member Experience Ratings |

Selected search criteria

Zip Code: 03278 ⊗ Child ⊗ Adult under 65 ⊗ Health Plan: Acme Health ⊗ Health Plan: Blue Ribbon ⊗ Health Plan: Prime Health ⊗

㉒ **Ready to Enroll in a Plan? Visit State.Medicaid.gov**

☑ Add to compare plan ☑ Add to compare plan ☑ Add to compare plan

⑪ ⑫ ⑬

	🏠 Acme Health	🎗 Blue Ribbon	🖨 Prime Health
	acmehealth.com ☎ (222) 312-9182	blueribbon.com ☎ (644) 123-0456	primehealth.com ☎ (222) 867-5309

Cost of covered service ⑮

Service	Acme Health	Blue Ribbon	Prime Health
Ambulance	Per trip $0	Per trip $0	Per trip $0
Dental care	$0	$0	$0
Inpatient hospital	Per day $3 Maximum with limits $21	Per day $3 Maximum with limits $21	Per day $3 Maximum with limits $0
Emergency department and urgent care services Emergency care	$9 copay per visit (always covered)	$5 copay per visit (always covered)	$9 copay per visit (always covered)
Urgent care	$5 copay per visit (always covered)	$5 copay per visit (always covered)	$5 copay per visit (always covered)
Medical centers Ambulatory surgical center	$3	$3	$0
Federal qualified health center/ regional health center	$0	$0	$0
Independent medical/ surgical center	$3	$3	$0
Short procedure unit	$3	$3	$0
Medical equipment Purchase	$3	$1 to $3	$0
Rental	$0	$0	$0
Medical visits Certified nurse practitioner	$0	$0 if PCP $1 in not PCP	$1
Chiropractor	$1	$1	$1
Doctor	$0	$0 if PCP $1 in not PCP	$0
Specialist	$0	$1	$0
Outpatient hospital	$0 if PCP $1 in not PCP	$0 if PCP $1 in not PCP	$0 if PCP $1 in not PCP
X-rays	Per service $1	Per service $1	Per service $1
EPSDT: early and periodic screening, diagnostic, and treatment services	Covers care for those under the age of 21 at no cost to you	Covers care for those under the age of 21 at no cost to you	Covers care for those under the age of 21 at no cost to you
Family planning & pregnancy related services Nurse midwife services	$0	$0	$0
Freestanding birth center services (when licensed or otherwise recognized by state)	$0	$0	$0
Tobacco cessation counseling for pregnant women	$0	$0	$0
Transportation to medical care (emergent and non-emergent)	Free rides to and from your health care visits if you need transportation	Free rides to and from your health care visits if you need transportation	Free rides to and from your health care visits if you need transportation

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Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

11 - The name of each managed care plan as proposed at § 438.520(a)(3)(i).

12 - An internet hyperlink to each managed care plan's website as proposed at § 438.520(a)(3)(ii).

13 - Each available managed care plan's toll-free customer service telephone number as proposed at § 438.520(a)(3)(ii).

15 - Premium and cost-sharing information including differences in premium and cost-sharing among available managed care plans within a single program as proposed at § 438.520(a)(3)(iii).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

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A A **English** ▼

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

11 - The name of each managed care plan as proposed at § 438.520(a)(3)(i).

12 - An internet hyperlink to each managed care plan's website as proposed at § 438.520(a)(3)(ii).

13 - Each available managed care plan's toll-free customer service telephone number as proposed at § 438.520(a)(3)(ii).

16 - A summary of benefits including differences in benefits among available managed care plans within a single program as proposed at § 438.520(a)(3)(iv).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ | Child ⊗ | Adult under 65 ⊗ | Health Plan: Acme Health ⊗ | Health Plan: Blue Ribbon ⊗ | Health Plan: Prime Health ⊗

(22) Ready to Enroll in a Plan?
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Extra Benefits **(16)**

Extra benefits are free services offered by plans in addition to basic Medicaid benefits covered by all plans. These are sometimes called value-added services.

☑ Add to compare plan ☑ Add to compare plan ☑ Add to compare plan

(11) (12) (13)

	🏠 Acme Health	🎗 Blue Ribbon	🔷 Prime Health
	acmehealth.com 📞 (222) 312-9182	blueribbon.com 📞 (644) 123-0456	primehealth.com 📞 (222) 867-5309

Extra benefits

	Acme Health	Blue Ribbon	Prime Health
Education	$120 GED voucher, including GED testing, tutoring, and reading scholarships	Up to $160 GED exam voucher, materials, and life skills training	$50 annual gift card for school supplies 24 hours of online tutoring for eligible members ages 6 to 18, if qualified
Prenatal	Up to $450 in rewards for baby products; stroller, playpen, car seat, or diapers	Up to $100 in rewards for baby products Free electric breast pump	1 safe sleep kit yearly for members who are pregnant, members with infants under age 1, or members under age 1
Wellness	$75 per year rewards gift cards 24-week voucher for weight loss program 20% pharmacy discount card	$75 per year rewards for doctor visits 13-week voucher for weight loss program	$75 per year rewards for doctor visits 3 months of fresh fruits and vegetables for qualifying members
Youth	Not applicable (youth are not covered by this plan)	Not applicable (youth are not covered by this plan)	Up to $150 for after-school activities
Other	Cell phone with 350 monthly minutes, free texts 3 GB data $100 yearly value in alternative healing, acupuncture, massage therapy Hearing aid (up to $300) Up to $120 yearly for over-the-counter drugs	Cell phone with 350 monthly minutes, free texts 3 GB data $100 yearly value in alternative healing, acupuncture, massage therapy 14 prepared home-delivered meals after a qualified hospital or nursing facility stay, if qualified	Up to $150 for hypoallergenic mattress cover and pillowcase for asthma Pain management education and support

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Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ Child ⊗ Adult under 65 ⊗ Health Plan: Acme Health ⊗ Health Plan: Blue Ribbon ⊗ Health Plan: Prime Health ⊗

22 Ready to Enroll in a Plan? Visit State.Medicaid.gov

Search for your providers — **24**

Search by providers name

🔍 Jane Doe   **Reset**   **Submit**

Providers by plan

Jane Doe, MD ⊗
Internal Medicine

451 5th St, Rose, ST 03278

Phone: 444-546-2878

✓ Provider covered by plan

🏥 Acme Health
Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid.

View health plan provider directory

🎗 Blue Ribbon
Blue Ribbon is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.

View health plan provider directory

⊗ Provider not covered by plan

📦 Prime Health
PrimeHealth is for children and adolescents under age 18.

View health plan provider directory

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Keeping people healthy

Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ Child ⊗ Adult under 65 ⊗ Health Plan: Acme Health ⊗ Health Plan: Blue Ribbon ⊗ Health Plan: Prime Health ⊗

(22) Ready to Enroll in a Plan? Visit State.Medicaid.gov

Search for your prescriptions ———— (23)

Search by keyword
🔍

Dosage
▼

Frequency
▼

Quantity
▼

Submit

Browse drugs A-Z   ☐ Include generic medication

Medicaid Pharmacy Coverage ⊗

All state plans cover the same prescriptions medications. See the list of covered prescription medications.

All plans require prior authorization before they will pay for some prescription medications. See the list of prescription medications that require prior authorization.

The amount you pay for the same prescription medicines (copay) may vary by plan. Use the search tool to see how much you will pay for your prescription medications under each plan.

⌃
View information about pharmacy cost and coverage

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

23 - A search tool that enables users to identify available managed care plans that provide coverage for a drug identified by the user as proposed at § 438.520(a)(6)(i).

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Keeping people healthy

Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

(Zip Code: 03278 ⊗) (Child ⊗) (Adult under 65 ⊗) (Health Plan: Acme Health ⊗) (Health Plan: Blue Ribbon ⊗) (Health Plan: Prime Health ⊗)

(22) **Ready to Enroll in a Plan?**
Visit State.Medicaid.gov

Search for your prescriptions ——— (23)

Search by keyword	Dosage	Frequency	Quantity	
🔍 Lexapro	10 mg/daily ▼	Monthly ▼	30 ▼	**Submit**

Browse drugs A-Z

☑ Include generic medication

View information about pharmacy cost and coverage
⌄

Prescriptions by plan

Prescription medication copays may vary by plan and by drug.

🏠 Acme Health	🎗 Blue Ribbon	🖨 Prime Health
Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid.	**Blue Ribbon** is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.	**PrimeHealth** is for children and adolescents under age 18.
View health plan drug list	**View health plan drug list** (7)	**View health plan drug list**

Lexapro ⊗	**Lexapro** ⊗	**Lexapro** ⊗
Dosage: 10 mg/daily	**Dosage:** 10 mg/daily	**Dosage:** 10 mg/daily
Frequency: Monthly	**Frequency:** Monthly	**Frequency:** Monthly
Quantity: 30 tablets	**Quantity:** 30 tablets	**Quantity:** 30 tablets
Copay: $1	**Copay: $3**	**Copay: $2**

Escitalopram (Lexapro generic) ⊗	**Escitalopram** (Lexapro generic) ⊗	**Escitalopram** (Lexapro generic) ⊗
Dosage: 10 mg/daily	**Dosage:** 10 mg/daily	**Dosage:** 10 mg/daily
Frequency: Monthly	**Frequency:** Monthly	**Frequency:** Monthly
Quantity: 30 tablets	**Quantity:** 30 tablets	**Quantity:** 30 tablets
Copay: $0	**Copay: $3**	**Copay: $1**

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

7 - A description of the drug coverage for each managed care plan, including the formulary information specified in § 438.10(i) and other similar information as specified by CMS as proposed at § 438.520(a)(2)(ii).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

23 - A search tool that enables users to identify available managed care plans that provide coverage for a drug identified by the user as proposed at § 438.520(a)(6)(i).

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1-800-555-555
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A A **English ▼**

| Enter Location, Age, and Other Information | Compare Health Costs and Benefits | Search Providers | Search Prescriptions | View Quality of Care and Member Experience Ratings |

Selected search criteria

Zip Code: 03278 ⊗ Child ⊗ Adult under 65 ⊗ Health Plan: Acme Health ⊗ Health Plan: Blue Ribbon ⊗ Health Plan: Prime Health ⊗

(22) Ready to Enroll in a Plan?
Visit State.Medicaid.gov

Quality Measures **(9)**

This page shows how the health plans performed on a wide range of quality measures.
Select a domain and a view to show the quality measures of interest to you and your family.

(20) This information includes data collected from January to December 2021

(21) Annual quality ratings have been independently validated by one or more organizations not related to the health plans.

Select a domain **(10) (25) (26)**

Chronic Conditions ▼

Select a view

Adult Measures ▲

- Child and Adolescent Measures
- Adult Measures
- By Dual Eligibility for Medicare and Medicaid
- By Race and Ethnicity
- By Sex
- By Preferred Language

(11) (12) (13)

🏠 **Acme Health**
🌐 acmehealth.com
📞 (222) 312-9182

🎗 **Blue Ribbon**
🌐 blueribbon.com
📞 (644) 123-0456

🖨 **Prime Health**
🌐 primehealth.com
📞 (222) 867-5309

Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid. View the plan's five-star quality rating for Medicare services here. **(18)**

Blue Ribbon is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.

PrimeHealth is for children and adolescents under age 18.

Measure		Acme Health	Blue Ribbon	Prime Health
...to avoid serious medical problems resulting from diabetes.	Higher is better	66%	54%	This measure does not apply to the population covered by this plan.
Asthma Medication Percentage of people with asthma who had the right level of medication Ages: 19 - 64 **Why it matters? (19)** Asthma is a treatable and reversible condition and when properly managed people may avoid having to use emergency medications, visits to the emergency department, and missed days of work or school.	↑ Higher is better	64%	52%	This measure does not apply to the population covered by this plan.
Controlling High Blood Pressure Percentage of people with hypertension whose blood pressure was controlled (140/90 or less) Ages: 18 - 85 **Why it matters? (19)** Controlling high blood pressure is important for preventing stroke and heart disease.	↑ Higher is better	77%	65%	This measure does not apply to the population covered by this plan.

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

9 - Quality ratings described at § 438.515(a)(4) that are calculated by the State for each managed care plan in accordance with § 438.515 of this subpart for mandatory measures identified by CMS as proposed at § 438.520(a)(2)(iv).

10 - The quality ratings described in 438.520(a)(iv) calculated by the State for each managed care plan in accordance with 438.515 of this subpart for mandatory measures identified by CMS stratified by dual eligibility status, race and ethnicity, and sex as proposed at § 438.520(a)(2)(v).

11 - The name of each managed care plan as proposed at § 438.520(a)(3)(i).

12 - An internet hyperlink to each managed care plan's website as proposed at § 438.520(a)(3)(ii).

13 - Each available managed care plan's toll-free customer service telephone number as proposed at § 438.520(a)(3)(ii).

18 -If a managed care plan offers an integrated Medicare-Medicaid plan, a denotation that an integrated D-SNP is available and a link to the plan's most recent rating under the Medicare Advantage 5-Star Rating System as proposed at § 438.520(a)(3)(vi).

19 - A plain language description of the importance and impact of each performance measure assigned a quality rating as proposed at § 438.520(a)(4)(i).

20 - The measurement period during which the data used to calculate the quality rating was produced as proposed at § 438.520(a)(4)(ii).

21 - Information on quality ratings data validation, including a plain language description of when, how and by whom the data were validated as proposed at § 438.520(a)(4)(iii).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

25 -The quality ratings described in 438.520(a)(iv) calculated by the State for each managed care plan in accordance with 438.515 of this subpart for mandatory measures identified by CMS, including the display of such measures stratified by dual eligibility status, race and ethnicity, sex, age, rural/urban status, disability, language of the enrollee, or other factors specified by CMS in the annual technical resource manual described in § 438.530 as proposed at § 438.520(a)(6)(iii).

26 -An interactive tool that enables users to view the quality ratings described at § 438.520(a)(iv) stratified by the factors described in paragraph (a)(6)(iii) of this section as proposed at § 438.520(a)(6)(iv).

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A A English ▼

| Enter Location, Age, and Other Information | Compare Health Costs and Benefits | Search Providers | Search Prescriptions | View Quality of Care and Member Experience Ratings |

Selected search criteria

Zip Code: 03278 ⊗ Child ⊗ Adult under 65 ⊗ Health Plan: Acme Health ⊗ Health Plan: Blue Ribbon ⊗ Health Plan: Prime Health ⊗

(22) **Ready to Enroll in a Plan? Visit State.Medicaid.gov**

Quality Measures (9)

This page shows how the health plans performed on a wide range of quality measures.
Select a domain and a view to show the quality measures of interest to you and your family.

(20) This information includes data collected from January to December 2021

(21) Annual quality ratings have been independently validated by one or more organizations not related to the health plans.

Select a domain (25) (26)

Chronic Conditions ▲
Behavioral Health and Substance Use
Chronic Conditions
Home and Community Based Service
Preventive Health Care
Member Experience with Plan
Ease of Accessing Providers

(11) (12) (13)

	🏠 **Acme Health** acmehealth.com (222) 312-9182	🎗 **Blue Ribbon** blueribbon.com (644) 123-0456	🖥 **Prime Health** primehealth.com (222) 867-5309
	Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid. View the plan's five-star quality rating for Medicare services here. (18)	**Blue Ribbon** is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.	**PrimeHealth** is for children and adolescents under age 18.
Ages: 19 - 64 **Why it matters?** (19) Managing diabetes correctly is the best way to avoid serious medical problems resulting from diabetes. ↑ Higher is better	66%	54%	This measure does not apply to the population covered by this plan.
Asthma Medication Percentage of people with asthma who had the right level of medication Ages: 19 - 64 ↑ Higher is better **Why it matters?** (19) Asthma is a treatable and reversible condition and when properly managed people may avoid having to use emergency medications, visits to the emergency department, and missed days of work or school.	64%	52%	This measure does not apply to the population covered by this plan.
Controlling High Blood Pressure Percentage of people with hypertension whose blood pressure was controlled (140/90 or less) Ages: 18 - 85 ↑ Higher is better **Why it matters?** (19) Controlling high blood pressure is important for preventing stroke and heart disease.	77%	65%	This measure does not apply to the population covered by this plan.

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Keeping people healthy

Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ | Child ⊗ | Adult under 65 ⊗ | Health Plan: Acme Health ⊗ | Health Plan: Blue Ribbon ⊗ | Health Plan: Prime Health ⊗

(22) Ready to Enroll in a Plan? Visit State.Medicaid.gov

Quality Measures **(9)**

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Select a domain and a view to show the quality measures of interest to you and your family.

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Select a domain **(25) (26)**

Chronic Conditions ▾

Select a view **(10)**

By Sex ▾

(11) (12) (13)

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	acmehealth.com	blueribbon.com	primehealth.com
	📞 (222) 312-9182	📞 (644) 123-0456	📞 (222) 867-5309
	Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid. View the plan's five-star quality rating for Medicare services here. **(18)**	**Blue Ribbon** is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.	**PrimeHealth** is for children and adolescents under age 18.

		Acme Health	Blue Ribbon	Prime Health
Controlling Diabetes Percentage of people whose diabetes was not controlled (HBA1c >9%) Ages: 18 - 75	↓ Lower is better			
Why it matters? **(19)** Managing diabetes correctly is the best way to avoid serious medical problems resulting from diabetes.				
Male		66%	52%	This measure does not apply to the population covered by this plan.
Female		61%	54%	This measure does not apply to the population covered by this plan.
Asthma Medication Percentage of people with asthma who had the right level of medication Ages: 5 - 64	↑ Higher is better			
Why it matters? **(19)** Asthma is a treatable and reversible condition and when properly managed people may avoid having to use emergency medications, visits to the emergency department, and missed days of work or school.				
Male		54%	77%	60%
Female		54%	81%	63%
Controlling High Blood Pressure Percentage of people with hypertension whose blood pressure was controlled (140/90 or less) Ages: 18 - 85	↑ Higher is better			
Why it matters? **(19)** Controlling high blood pressure is important for preventing stroke and heart disease.				
Male		57%	67%	This measure does not apply to the population covered by this plan.
Female		55%	62%	This measure does not apply to the population covered by this plan.

(4) For Live Assistance
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TTY #711

A A English ▼

| Enter Location, Age, and Other Information | Compare Health Costs and Benefits | Search Providers | Search Prescriptions | View Quality of Care and Member Experience Ratings |

Selected search criteria

Zip Code: 03278 ⊗ Child ⊗ Adult under 65 ⊗ Health Plan: Acme Health ⊗ Health Plan: Blue Ribbon ⊗ Health Plan: Prime Health ⊗

(22) Ready to Enroll in a Plan? Visit State.Medicaid.gov

Quality Measures (9)

This page shows how each health plan performed on quality measures by race and ethnicity. For each measure shown, the plan's rating is based on care provided only to those members with the identified race or ethnicity. Race and ethnicity data are self-reported by plan members. Members are given the option not to identify their race or ethnicity; therefore, race and ethnicity are missing or unknown for some members.

(20) This information includes data collected from January to December 2021

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Select a domain (25) (26)

Chronic Conditions ▼

(11) (12) (13)

🏠 **Acme Health**
🌐 acmehealth.com
📞 (222) 312-9182

⚕ **Blue Ribbon**
🌐 blueribbon.com
📞 (644) 123-0456

🖨 **Prime Health**
🌐 primehealth.com
📞 (222) 867-5309

Select a view (10)

By Race and Ethnicity ▼

Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid. View the plan's five-star quality rating for Medicare services here. (18)

Blue Ribbon is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.

PrimeHealth is for children and adolescents under age 18.

Controlling Diabetes
Percentage of people whose diabetes was not controlled (HBA1c >9%)
Ages: 18 - 75

↓ Lower is better

Why it matters? (19)
Managing diabetes correctly is the best way to avoid serious medical problems resulting from diabetes.

Race

	Acme Health	Blue Ribbon	Prime Health
American Indian or Alaska Native *Data Suppressed - This category cannot be reported due to the small size*	DS	DS	This measure does not apply to the population covered by this plan.
Asian	37%	46%	This measure does not apply to the population covered by this plan.
Black or African American	49%	57%	This measure does not apply to the population covered by this plan.
Native Hawaiian or Other Pacific Islander	45%	56%	This measure does not apply to the population covered by this plan.
White	52%	57%	This measure does not apply to the population covered by this plan.
Some Other Race	52%	56%	This measure does not apply to the population covered by this plan.
Two or More Races	45%	50%	This measure does not apply to the population covered by this plan.
Missing or Unknown	52%	61%	This measure does not apply to the population covered by this plan.

Ethnicity

	Acme Health	Blue Ribbon	Prime Health
Hispanic or Latino	67%	76%	This measure does not apply to the population covered by this plan.
Not Hispanic or Latino	72%	81%	This measure does not apply to the population covered by this plan.
Missing or Unknown	60%	71%	This measure does not apply to the population covered by this plan.

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A A English ▾

Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ | Child ⊗ | Adult under 65 ⊗ | Health Plan: Acme Health ⊗ | Health Plan: Blue Ribbon ⊗ | Health Plan: Prime Health ⊗

(22) **Ready to Enroll in a Plan?**
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Quality Measures (9)

This page shows how each health plan performed on quality measures by race and ethnicity. For each measure shown, the plan's rating is based on care provided only to those members with the identified race or ethnicity. Race and ethnicity data are self-reported by plan members. Members are given the option not to identify their race or ethnicity; therefore, race and ethnicity are missing or unknown for some members.

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Select a domain (25) (26)

Chronic Conditions ▾

(11) (12) (13)

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📞 (222) 312-9182

🎗 **Blue Ribbon**
🌐 blueribbon.com
📞 (644) 123-0456

🖨 **Prime Health**
🌐 primehealth.com
📞 (222) 867-5309

Select a view (10)

By Race and Ethnicity ▾

Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid. View the plan's five-star quality rating for Medicare services here. (18)

Blue Ribbon is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.

PrimeHealth is for children and adolescents under age 18.

Asthma Medication
Percentage of people with asthma who had the right level of medication
Ages: 5 - 64

↑ Higher is better

Why it matters? (19)
Asthma is a treatable and reversible condition and when properly managed people may avoid having to use emergency medications, visits to the emergency department, and missed days of work or school

Race

	Acme Health	Blue Ribbon	Prime Health
American Indian or Alaska Native	64%	78%	62%
Asian	67%	74%	69%
Black or African American	67%	74%	62%
Native Hawaiian or Other Pacific Islander	60%	78%	62%
White	64%	76%	68%
Some Other Race	60%	74%	64%
Two or More Races	68%	77%	72%
Missing or Unknown	62%	71%	67%

Ethnicity

	Acme Health	Blue Ribbon	Prime Health
Hispanic or Latino	67%	76%	63%
Not Hispanic or Latino	72%	81%	76%
Missing or Unknown	60%	71%	63%

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A A **English** ▾

Enter Location, Age, and Other Information	Compare Health Costs and Benefits	Search Providers	Search Prescriptions	View Quality of Care and Member Experience Ratings

Selected search criteria

Zip Code: 03278 ⊗ | Child ⊗ | Adult under 65 ⊗ | Health Plan: Acme Health ⊗ | Health Plan: Blue Ribbon ⊗ | Health Plan: Prime Health ⊗

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Quality Measures **9**

This page shows how each health plan performed on quality measures by race and ethnicity. For each measure shown, the plan's rating is based on care provided only to those members with the identified race or ethnicity. Race and ethnicity data are self-reported by plan members. Members are given the option not to identify their race or ethnicity; therefore, race and ethnicity are missing or unknown for some members.

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Select a domain **25** **26**

Chronic Conditions ▾

Select a view **10**

By Race and Ethnicity ▾

11 **12** **13**

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	Acme Health is for people age 65 and older and those 18 and older with a disability, including those who are dually eligible for Medicare and Medicaid. View the plan's five-star quality rating for Medicare services here. **18**	**Blue Ribbon** is for people under age 65, excluding those who are dually eligible for Medicare and Medicaid.	**PrimeHealth** is for children and adolescents under age 18.

Controlling High Blood Pressure
Percentage of people with hypertension whose blood pressure was controlled (140/90 or less)
Ages: 18 - 85

↑ Higher is better

Why it matters? —— **19**
Controlling high blood pressure is important for preventing stroke and heart disease.

Race

	Acme Health	Blue Ribbon	Prime Health
American Indian or Alaska Native	67%	76%	This measure does not apply to the population covered by this plan.
Asian	72%	81%	This measure does not apply to the population covered by this plan.
Black or African American	60%	71%	This measure does not apply to the population covered by this plan.
Native Hawaiian or Other Pacific Islander	64%	76%	This measure does not apply to the population covered by this plan.
White	60%	74%	This measure does not apply to the population covered by this plan.
Some Other Race	68%	77%	This measure does not apply to the population covered by this plan.
Two or More Races	65%	70%	This measure does not apply to the population covered by this plan.
Missing or Unknown	62%	71%	This measure does not apply to the population covered by this plan.

Ethnicity

	Acme Health	Blue Ribbon	Prime Health
Hispanic or Latino	67%	66%	This measure does not apply to the population covered by this plan.
Not Hispanic or Latino	52%	71%	This measure does not apply to the population covered by this plan.
Missing or Unknown	60%	71%	This measure does not apply to the population covered by this plan.

Regulatory Text Citations

4 - Information on how to access the beneficiary support system identified in § 438.71 to answer questions about using the State's managed care quality rating system to select a managed care plan as proposed at § 438.520(a)(1)(ii).

9 - Quality ratings described at § 438.515(a)(4) that are calculated by the State for each managed care plan in accordance with § 438.515 of this subpart for mandatory measures identified by CMS as proposed at § 438.520(a)(2)(iv).

11 - The name of each managed care plan as proposed at § 438.520(a)(3)(i).

12 - An internet hyperlink to each managed care plan's website as proposed at § 438.520(a)(3)(ii).

13 - Each available managed care plan's toll-free customer service telephone number as proposed at § 438.520(a)(3)(ii).

17 - Certain of the metrics, as specified by CMS, of managed care plan performance that States must make available to the public under § 438 subparts B and D, including data most recently reported to CMS on each managed care program pursuant to § 438.66(e) and the results of the secret shopper survey specified in § 438.68(f) of this part as proposed at § 438.520(a)(3)(v).

18 -If a managed care plan offers an integrated Medicare-Medicaid plan, a denotation that an integrated D-SNP is available and a link to the plan's most recent rating under the Medicare Advantage 5-Star Rating System as proposed at § 438.520(a)(3)(vi).

19 - A plain language description of the importance and impact of each performance measure assigned a quality rating as proposed at § 438.520(a)(4)(i).

20 - The measurement period during which the data used to calculate the quality rating was produced as proposed at § 438.520(a)(4)(ii).

21 - Information on quality ratings data validation, including a plain language description of when, how and by whom the data were validated as proposed at § 438.520(a)(4)(iii).

22 - Information or hyperlinks directing users to resources on how and where to apply for Medicaid and enroll in a Medicaid or CHIP plan as proposed at § 438.520(a)(5).

25 -The quality ratings described in 438.520(a)(iv) calculated by the State for each managed care plan in accordance with 438.515 of this subpart for mandatory measures identified by CMS, including the display of such measures stratified by dual eligibility status, race and ethnicity, sex, age, rural/urban status, disability, language of the enrollee, or other factors specified by CMS in the annual technical resource manual described in § 438.530 as proposed at § 438.520(a)(6)(iii).

26 -An interactive tool that enables users to view the quality ratings described at § 438.520(a)(iv) stratified by the factors described in paragraph (a)(6)(iii) of this section as proposed at § 438.520(a)(6)(iv).

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Selected search criteria

Zip Code: 03278 ⊗   Child ⊗   Adult under 65 ⊗   Health Plan: Acme Health ⊗   Health Plan: Blue Ribbon ⊗   Health Plan: Prime Health ⊗

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Quality Measures **9**

This page shows how each health plan performed on quality measures by a member's dual eligibility status. A member is dually eligible when they receive coverage through both Medicare and Medicaid. Dually eligible individuals often have unique health concerns as compared to other members.

20 This information includes data collected from January to December 2021

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Select a domain **25** **26**

Chronic Conditions ▼

Select a view **10**

By Dual Eligibility for Medicare and Medicaid ▼

11 **12** **13**

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Controlling Diabetes Percentage of people whose diabetes was not controlled (HBA1c >9%) Ages: 18 - 75 ↓ Lower is better **Why it matters?** **19** Managing diabetes correctly is the best way to avoid serious medical problems resulting from diabetes.			
Dually Eligible for Medicare and Medicaid	53%	This measure does not apply to the population covered by this plan.	This measure does not apply to the population covered by this plan.
Not Dually Eligible for Medicare and Medicaid	63%	54%	This measure does not apply to the population covered by this plan.
Asthma Medication Percentage of people with asthma who had the right level of medication Ages: 5 - 64 ↑ Higher is better **Why it matters?** **19** Asthma is a treatable and reversible condition and when properly managed people may avoid having to use emergency medications, visits to the emergency department, and missed days of work or school.			
Dually Eligible for Medicare and Medicaid	54%	This measure does not apply to the population covered by this plan.	This measure does not apply to the population covered by this plan.
Not Dually Eligible for Medicare and Medicaid	54%	77%	65%
Controlling High Blood Pressure Percentage of people with hypertension whose blood pressure was controlled (140/90 or less) Ages: 18 - 85 ↑ Higher is better **Why it matters?** **19** Controlling high blood pressure is important for preventing stroke and heart disease.			
Dually Eligible for Medicare and Medicaid	57%	This measure does not apply to the population covered by this plan.	This measure does not apply to the population covered by this plan.
Not Dually Eligible for Medicare and Medicaid	55%	62%	This measure does not apply to the population covered by this plan.