

**Table 1. Number of Health Home Participants, by Provider**

Provider ID	October 2013 - September 2015
	All Enrollees
	#
P10	249
P11	16
P12	11
P23	42
P25	14
P29	53
P31	48
<b>Total</b>	<b>433</b>

Measures are based on eMedicaid data collected by Health Home providers

Data as of November 30, 2015

Participants included in the denominator were continuously enrolled for eight quarters

Since providers can enter new data into eMedicaid for any period of time as well as revise data for a limited time period after entering it, use of these updated datafiles may result in estimates for Quarter 1 through Quarter 6 that differ from prior reports.

**Table 4. Percentage of Health Home Participants Enrolled by Program Type, and by Provider**

Provider ID	October 2013 - September 2015	
	PRP	OTP
P10	100.0%	0.0%
P11	100.0%	0.0%
P12	0.0%	100.0%
P23	0.0%	100.0%
P25	100.0%	0.0%
P29	100.0%	0.0%
P31	100.0%	0.0%
<b>Total</b>	<b>93.1%</b>	<b>6.9%</b>

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**Table 5. Percentage of Health Home Participants with a Counselor, by Provider**

Provider ID	October 2013 - September 2015
	With a Counselor
P10	0.0%
P11	100.0%
P12	100.0%
P23	100.0%
P25	100.0%
P29	0.0%
P31	97.9%
<b>Total</b>	<b>30.0%</b>

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**Table 6. Percentage of Health Home Participants with a Primary Care Physician, by Provider**

Provider ID	October 2013 - September 2015
	With a PCP
P10	54.6%
P11	50.0%
P12	100.0%
P23	92.9%
P25	78.6%
P29	94.3%
P31	79.2%
<b>Total</b>	<b>67.7%</b>

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**Table 7. Percentage of Health Home Participants by Age, and by Provider**

Provider ID	October 2013 - September 2015			
	Ages 15 to 20	Ages 21 to 39	Ages 40 to 64	Ages 65 and older
P10	0.4%	35.3%	57.0%	7.2%
P11	0.0%	18.8%	81.3%	0.0%
P12	0.0%	0.0%	100.0%	0.0%
P23	0.0%	26.2%	66.7%	7.1%
P25	0.0%	7.1%	92.9%	0.0%
P29	0.0%	22.6%	64.2%	13.2%
P31	0.0%	29.2%	66.7%	4.2%
<b>Total</b>	<b>0.2%</b>	<b>29.8%</b>	<b>63.0%</b>	<b>6.9%</b>

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**Table 8. Percentage of Health Home Participants by Race, and by Provider**

Provider ID	October 2013 - September 2015					
	American Indian/Alaskan Native	Asian	Black	White	Unknown	Two or more races
P10	0.4%	2.4%	20.5%	70.7%	6.0%	0.0%
P11	0.0%	0.0%	93.8%	6.3%	0.0%	0.0%
P12	0.0%	0.0%	36.4%	63.6%	0.0%	0.0%
P23	0.0%	0.0%	26.2%	71.4%	2.4%	0.0%
P25	7.1%	0.0%	64.3%	28.6%	0.0%	0.0%
P29	0.0%	0.0%	41.5%	52.8%	3.8%	1.9%
P31	0.0%	10.4%	33.3%	41.7%	6.3%	8.3%
<b>Total</b>	<b>0.5%</b>	<b>2.5%</b>	<b>29.6%</b>	<b>61.4%</b>	<b>4.8%</b>	<b>1.2%</b>

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**Table 9. Percentage of Health Home Participants by Gender, and by Provider**

Provider ID	October 2013 - September 2015	
	Female	Male
	%	%
P10	39.4%	60.6%
P11	56.3%	43.8%
P12	54.5%	45.5%
P23	31.0%	69.0%
P25	71.4%	28.6%
P29	41.5%	58.5%
P31	35.4%	64.6%
<b>Total</b>	<b>40.4%</b>	<b>59.6%</b>

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**Table 10. Percentage of Health Home Participants by Ethnicity, and by Provider**

Provider ID	October 2013 - September 2015
	Hispanic
P10	1.2%
P11	0.0%
P12	0.0%
P23	0.0%
P25	0.0%
P29	1.9%
P31	8.3%
<b>Total</b>	<b>1.8%</b>

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**Table 11. Percentage of Health Home Participants by Primary Mental Health Condition, and by Provider**

Provider ID	October 2013 - September 2015				
	Attention Deficit Disorder	Bipolar I or II	Major Depressive Disorder	Schizophrenia	Other
	%	%	%	%	%
P10	0.0%	10.8%	13.3%	23.3%	4.4%
P11	0.0%	0.0%	0.0%	0.0%	0.0%
P12	0.0%	0.0%	36.4%	45.5%	9.1%
P23	0.0%	19.0%	4.8%	57.1%	0.0%
P25	0.0%	0.0%	0.0%	0.0%	0.0%
P29	0.0%	9.4%	9.4%	77.4%	1.9%
P31	0.0%	12.5%	4.2%	47.9%	37.5%
<b>Total</b>	<b>0.0%</b>	<b>10.6%</b>	<b>10.6%</b>	<b>34.9%</b>	<b>7.2%</b>

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**Table 12. Mean and Median Baseline Body Mass Index (BMI) of Health Home Participants, by Provider**

Provider ID	October 2013 - September 2015	
	BMI	
	Mean	Median
P10	33.0	31.1
P11	29.1	26.3
P12	33.5	35.3
P23	30.4	29.9
P25	28.6	26.7
P29	33.4	32.4
P31	30.6	29.2
<b>Total</b>	<b>32.3</b>	<b>30.4</b>

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**Table 13. Mean and Median Baseline Systolic and Diastolic Blood Pressure (mmHg) of Health Home Participants, by Provider**

Provider ID	October 2013 - September 2015			
	Diastolic Pressure		Systolic Pressure	
	Mean	Median	Mean	Median
P10	77.5	78.0	120.6	118.0
P11	85.8	84.0	137.3	129.0
P12	75.8	74.0	120.1	118.0
P23	75.9	76.0	120.7	120.0
P25	85.9	83.5	143.9	142.5
P29	80.7	80.0	132.7	128.0
P31	63.4	73.0	100.3	120.0
<b>Total</b>	<b>76.5</b>	<b>78.0</b>	<b>120.7</b>	<b>121.0</b>

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**Table 14. Percentage of Health Home Participants Diagnosed with Chronic Conditions, by Provider**

Provider ID	October 2013 - September 2015									
	Mental Health Condition	Substance use disorder	Asthma	COPD	Diabetes	Heart Disease	Hypertension	Obesity	HIV_AIDS	Hepatitis_C
	%	%	%	%	%	%	%	%	%	%
<b>P10</b>	100.0%	0.4%	0.0%	0.0%	0.0%	0.0%	19.3%	80.7%	0.0%	0.0%
<b>P11</b>	37.5%	2.3%	12.5%	0.0%	31.3%	6.3%	43.8%	75.0%	12.5%	0.0%
<b>P12</b>	100.0%	9.1%	27.3%	9.1%	18.2%	9.1%	0.0%	81.8%	0.0%	0.0%
<b>P23</b>	100.0%	2.4%	2.4%	4.8%	4.8%	0.0%	33.3%	81.0%	0.0%	0.0%
<b>P25</b>	78.6%	5.6%	35.7%	7.1%	21.4%	14.3%	57.1%	71.4%	21.4%	42.9%
<b>P29</b>	100.0%	1.9%	28.3%	17.0%	20.8%	15.1%	28.3%	83.0%	0.0%	3.8%
<b>P31</b>	100.0%	2.1%	10.4%	2.1%	16.7%	6.3%	22.9%	77.1%	0.0%	0.0%
<b>Total</b>	<b>97.0%</b>	<b>15.0%</b>	<b>7.2%</b>	<b>3.2%</b>	<b>7.2%</b>	<b>3.5%</b>	<b>23.8%</b>	<b>80.1%</b>	<b>1.2%</b>	<b>1.8%</b>

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**Table 15. Percentage of Health Home (HH) Participants Completing Services and Average Number of Services Received, by Provider and Quarter**

Provider ID	Quarter 1 (October 2013 - December 2013)		Quarter 2 (January 2014 - March 2014)		Quarter 3 (April 2014 - June 2014)		Quarter 4 (July 2014 - September 2014)		Quarter 5 (October 2014 - December 2014)		Quarter 6 (January 2015 - March 2015)		Quarter 7 (April 2015 - June 2015)		Quarter 8 (July 2015 - September 2015)	
	Received a HH Service	Number of Services	Received a HH Service	Number of Services	Received a HH Service	Number of Services	Received a HH Service	Number of Services	Received a HH Service	Number of Services	Received a HH Service	Number of Services	Received a HH Service	Number of Services	Received a HH Service	Number of Services
	%	Avg	%	Avg	%	Avg	%	Avg	%	Avg	%	Avg	%	Avg	%	Avg
P10	100.0%	6.0	100.0%	8.7	100.0%	7.6	100.0%	7.3	100.0%	6.9	100.0%	7.2	100.0%	6.7	100.0%	6.1
P11	31.3%	2.6	68.8%	3.5	100.0%	6.9	100.0%	6.1	100.0%	8.7	100.0%	6.3	100.0%	8.4	100.0%	7.3
P12	0.0%	N/A	72.7%	3.5	81.8%	8.6	100.0%	8.5	90.9%	6.5	81.8%	5.6	81.8%	6.2	90.9%	4.0
P23	100.0%	6.5	97.6%	6.2	100.0%	5.8	100.0%	4.9	97.6%	5.6	83.3%	2.9	90.5%	4.9	85.7%	4.9
P25	100.0%	7.2	100.0%	9.1	100.0%	7.7	100.0%	10.5	100.0%	9.2	100.0%	7.9	100.0%	9.4	100.0%	5.8
P29	52.8%	3.7	62.3%	3.7	98.1%	9.8	96.2%	7.4	100.0%	11.3	100.0%	9.7	100.0%	9.8	100.0%	9.4
P31	100.0%	3.9	100.0%	6.4	100.0%	6.3	100.0%	8.1	100.0%	6.4	100.0%	6.1	100.0%	5.9	100.0%	4.9
<b>Total</b>	<b>89.1%</b>	<b>5.6</b>	<b>93.3%</b>	<b>7.5</b>	<b>99.3%</b>	<b>7.5</b>	<b>99.5%</b>	<b>7.2</b>	<b>99.5%</b>	<b>7.4</b>	<b>97.9%</b>	<b>7.0</b>	<b>98.6%</b>	<b>7.0</b>	<b>98.4%</b>	<b>6.3</b>

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**Table 16. Percentage of Health Home Participants by the Number of Services Received, by Provider and Month**

Provider ID	Number of Services									Number of Services								
	Quarter 1 (October 2013 - December 2013)									Quarter 2 (January 2014 - March 2014)								
	October 2013			November 2013			December 2013			January 2014			February 2014			March 2014		
	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+
P10	60.0%	0.0%	40.0%	49.1%	0.0%	50.9%	94.3%	0.0%	5.7%	94.3%	3.8%	1.9%	79.2%	3.8%	17.0%	43.4%	5.7%	50.9%
P11				0.0%	0.0%	100.0%	10.4%	14.6%	75.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%
P12				81.3%	6.3%	12.5%	75.0%	0.0%	25.0%	68.8%	0.0%	31.3%	81.3%	0.0%	18.8%	68.8%	0.0%	31.3%
P23				0.0%	0.0%	100.0%	7.1%	0.0%	92.9%	0.0%	7.1%	92.9%	7.1%	7.1%	85.7%	0.0%	0.0%	100.0%
P25				100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	45.5%	0.0%	54.5%	27.3%	9.1%	63.6%
P29				4.8%	21.4%	73.8%	9.5%	4.8%	85.7%	4.8%	0.0%	95.2%	7.1%	2.4%	90.5%	4.8%	0.0%	95.2%
P31	74.7%	14.3%	11.0%	12.0%	2.4%	85.5%	0.4%	5.2%	94.4%	0.0%	12.0%	88.0%	0.0%	12.4%	87.6%	0.0%	7.2%	92.8%
<b>Total (Frequency)</b>	<b>118</b>	<b>22</b>	<b>19</b>	<b>82</b>	<b>16</b>	<b>335</b>	<b>84</b>	<b>22</b>	<b>327</b>	<b>74</b>	<b>33</b>	<b>326</b>	<b>64</b>	<b>35</b>	<b>334</b>	<b>39</b>	<b>22</b>	<b>372</b>
<b>Total (Percentage)</b>	<b>74.2%</b>	<b>13.8%</b>	<b>11.9%</b>	<b>18.9%</b>	<b>3.7%</b>	<b>77.4%</b>	<b>19.4%</b>	<b>5.1%</b>	<b>75.5%</b>	<b>17.1%</b>	<b>7.6%</b>	<b>75.3%</b>	<b>14.8%</b>	<b>8.1%</b>	<b>77.1%</b>	<b>9.0%</b>	<b>5.1%</b>	<b>85.9%</b>

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**Table 16. Percentage of Health Home Participants by the Number of Services Received, by Provider and Month**

Provider ID	Number of Services									Number of Services								
	Quarter 3 (April 2014 - June 2014)									Quarter 4 (July 2014 - September 2014)								
	April 2014			May 2014			June 2014			July 2014			August 2014			September 2014		
	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+
P10	13.2%	0.0%	86.8%	5.7%	0.0%	94.3%	5.7%	13.2%	81.1%	3.8%	5.7%	90.6%	3.8%	1.9%	94.3%	17.0%	9.4%	73.6%
P11	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	2.1%	97.9%	0.0%	0.0%	100.0%
P12	0.0%	0.0%	100.0%	43.8%	0.0%	56.3%	6.3%	0.0%	93.8%	50.0%	0.0%	50.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%
P23	7.1%	0.0%	92.9%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	14.3%	0.0%	85.7%	0.0%	7.1%	92.9%	0.0%	0.0%	100.0%
P25	18.2%	0.0%	81.8%	18.2%	0.0%	81.8%	18.2%	0.0%	81.8%	0.0%	18.2%	81.8%	0.0%	18.2%	81.8%	9.1%	9.1%	81.8%
P29	14.3%	0.0%	85.7%	4.8%	0.0%	95.2%	11.9%	0.0%	88.1%	40.5%	2.4%	57.1%	4.8%	33.3%	61.9%	9.5%	0.0%	90.5%
P31	0.0%	4.0%	96.0%	0.0%	5.2%	94.8%	0.0%	3.2%	96.8%	0.0%	0.8%	99.2%	0.0%	3.2%	96.8%	0.0%	2.0%	98.0%
<b>Total (Frequency)</b>	<b>16</b>	<b>10</b>	<b>407</b>	<b>14</b>	<b>13</b>	<b>406</b>	<b>11</b>	<b>15</b>	<b>407</b>	<b>29</b>	<b>8</b>	<b>396</b>	<b>4</b>	<b>27</b>	<b>402</b>	<b>14</b>	<b>11</b>	<b>408</b>
<b>Total (Percentage)</b>	<b>3.7%</b>	<b>2.3%</b>	<b>94.0%</b>	<b>3.2%</b>	<b>3.0%</b>	<b>93.8%</b>	<b>2.5%</b>	<b>3.5%</b>	<b>94.0%</b>	<b>6.7%</b>	<b>1.8%</b>	<b>91.5%</b>	<b>0.9%</b>	<b>6.2%</b>	<b>92.8%</b>	<b>3.2%</b>	<b>2.5%</b>	<b>94.2%</b>

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**Table 16. Percentage of Health Home Participants by the Number of Services Received, by Provider and Month**

Provider ID	Number of Services									Number of Services								
	Quarter 5 (October 2014 - December 2014)									Quarter 6 (January 2015 - March 2015)								
	October 2014			November 2014			December 2014			January 2015			February 2015			March 2015		
	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+
P10	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	7.5%	92.5%	0.0%	0.0%	100.0%	0.0%	5.7%	94.3%	0.0%	5.7%	94.3%
P11	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	4.2%	95.8%
P12	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	25.0%	25.0%	50.0%	6.3%	37.5%	56.3%
P23	0.0%	0.0%	100.0%	7.1%	0.0%	92.9%	0.0%	0.0%	100.0%	0.0%	0.0%	100.0%	14.3%	0.0%	85.7%	7.1%	0.0%	92.9%
P25	18.2%	0.0%	81.8%	9.1%	9.1%	81.8%	18.2%	0.0%	81.8%	18.2%	0.0%	81.8%	27.3%	0.0%	72.7%	36.4%	0.0%	63.6%
P29	2.4%	7.1%	90.5%	50.0%	7.1%	42.9%	66.7%	4.8%	28.6%	83.3%	14.3%	2.4%	59.5%	0.0%	40.5%	35.7%	0.0%	64.3%
P31	0.0%	2.8%	97.2%	0.0%	6.8%	93.2%	0.0%	5.2%	94.8%	0.0%	4.4%	95.6%	0.0%	8.8%	91.2%	0.0%	16.1%	83.9%
<b>Total (Frequency)</b>	<b>3</b>	<b>10</b>	<b>420</b>	<b>23</b>	<b>21</b>	<b>389</b>	<b>30</b>	<b>19</b>	<b>384</b>	<b>37</b>	<b>17</b>	<b>379</b>	<b>34</b>	<b>29</b>	<b>370</b>	<b>21</b>	<b>51</b>	<b>361</b>
<b>Total (Percentage)</b>	<b>0.7%</b>	<b>2.3%</b>	<b>97.0%</b>	<b>5.3%</b>	<b>4.8%</b>	<b>89.8%</b>	<b>6.9%</b>	<b>4.4%</b>	<b>88.7%</b>	<b>8.5%</b>	<b>3.9%</b>	<b>87.5%</b>	<b>7.9%</b>	<b>6.7%</b>	<b>85.5%</b>	<b>4.8%</b>	<b>11.8%</b>	<b>83.4%</b>

Measures are based on eMedicaid data collected by Health Home providers

Data as of November 30, 2015

Participants included in the denominator were continuously enrolled for eight quarters

Since providers can enter new data into eMedicaid for any period of time as well as revise data for a limited time period after entering it, use of these updated datafiles may result in estimates for Quarter 1 through Quarter 6 that differ from prior reports.

**Table 16. Percentage of Health Home Participants by the Number of Services Received, by Provider and Month**

Provider ID	Number of Services									Number of Services								
	Quarter 7 (April 2015 - June 2015)									Quarter 8 (July 2015 - September 2015)								
	April 2015			May 2015			June 2015			July 2015			August 2015			September 2015		
	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+	0	1	2+
P10	1.9%	1.9%	96.2%	0.0%	0.0%	100.0%	0.0%	7.5%	92.5%	0.0%	3.8%	96.2%	0.0%	0.0%	100.0%	15.1%	24.5%	60.4%
P11	2.1%	2.1%	95.8%	0.0%	2.1%	97.9%	0.0%	2.1%	97.9%	0.0%	6.3%	93.8%	0.0%	10.4%	89.6%	6.3%	87.5%	6.3%
P12	0.0%	18.8%	81.3%	0.0%	50.0%	50.0%	0.0%	37.5%	62.5%	0.0%	31.3%	68.8%	0.0%	62.5%	37.5%	0.0%	43.8%	56.3%
P23	0.0%	0.0%	100.0%	0.0%	7.1%	92.9%	0.0%	0.0%	100.0%	0.0%	7.1%	92.9%	21.4%	0.0%	78.6%	71.4%	0.0%	28.6%
P25	18.2%	9.1%	72.7%	18.2%	0.0%	81.8%	18.2%	0.0%	81.8%	9.1%	27.3%	63.6%	18.2%	0.0%	81.8%	100.0%	0.0%	0.0%
P29	9.5%	0.0%	90.5%	40.5%	2.4%	57.1%	23.8%	23.8%	52.4%	16.7%	16.7%	66.7%	26.2%	0.0%	73.8%	28.6%	31.0%	40.5%
P31	0.0%	15.7%	84.3%	0.0%	30.9%	69.1%	0.0%	27.7%	72.3%	0.4%	32.5%	67.1%	0.0%	26.9%	73.1%	0.0%	12.9%	87.1%
<b>Total (Frequency)</b>	<b>8</b>	<b>45</b>	<b>380</b>	<b>19</b>	<b>88</b>	<b>326</b>	<b>12</b>	<b>90</b>	<b>331</b>	<b>9</b>	<b>102</b>	<b>322</b>	<b>16</b>	<b>82</b>	<b>335</b>	<b>44</b>	<b>107</b>	<b>282</b>
<b>Total (Percentage)</b>	<b>1.8%</b>	<b>10.4%</b>	<b>87.8%</b>	<b>4.4%</b>	<b>20.3%</b>	<b>75.3%</b>	<b>2.8%</b>	<b>20.8%</b>	<b>76.4%</b>	<b>2.1%</b>	<b>23.6%</b>	<b>74.4%</b>	<b>3.7%</b>	<b>18.9%</b>	<b>77.4%</b>	<b>10.2%</b>	<b>24.7%</b>	<b>65.1%</b>

Measures are based on eMedicaid data collected by Health Home providers

Data as of November 30, 2015

Participants included in the denominator were continuously enrolled for eight quarters

Since providers can enter new data into eMedicaid for any period of time as well as revise data for a limited time period after entering it, use of these updated datafiles may result in estimates for Quarter 1 through Quarter 6 that differ from prior reports.

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their First Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	5.6%	1.1	1	2
P11	6.3%	1.0	1	1
P12	9.1%	1.0	1	1
P23	7.1%	1.3	1	2
P25	7.1%	2.0	2	2
P29	3.8%	1	1	1
P31	10.4%	1.2	1	2
<b>Total</b>	<b>6.2%</b>	<b>1.2</b>	<b>1</b>	<b>2</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their Second Quarter After Enrollment and Summary Statistics, by Provide**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	6.4%	1.3	1	5
P11	18.8%	1.0	1	1
P12	9.1%	1.0	1	1
P23	7.1%	1.0	1	1
P25	21.4%	1.7	1	2
P29	5.7%	1.0	1	1
P31	6.3%	1.0	1	1
<b>Total</b>	<b>7.4%</b>	<b>1.2</b>	<b>1</b>	<b>5</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their Third Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	6.8%	1.2	1	2
P11	12.5%	1.5	1	2
P12	0.0%			
P23	7.1%	1.0	1	1
P25	7.1%	1.0	1	1
P29	11.3%	1	1	1
P31	8.3%	1.5	1	3
<b>Total</b>	<b>7.6%</b>	<b>1.2</b>	<b>1</b>	<b>3</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their Fourth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	8.8%	1.1	1	2
P11	0.0%			
P12	18.2%	1.0	1	1
P23	11.9%	1.0	1	1
P25	14.3%	1.0	1	1
P29	1.9%	1	1	1
P31	8.3%	1.0	1	1
<b>Total</b>	<b>8.3%</b>	<b>1.1</b>	<b>1</b>	<b>2</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their Five Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	6.0%	1.1	1	2
P11	0.0%			
P12	0.0%			
P23	7.1%	1.0	1	1
P25	14.3%	1.0	1	1
P29	7.5%	1.5	1	2
P31	6.3%	1	1	1
<b>Total</b>	<b>6.2%</b>	<b>1.1</b>	<b>1</b>	<b>2</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their Sixth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	7.6%	1.1	1	3
P11	6.3%	1.0	1	1
P12	18.2%	1.0	1	1
P23	9.5%	1.0	1	1
P25	0.0%			
P29	3.8%	1	1	1
P31	14.6%	1	1	1
<b>Total</b>	<b>8.1%</b>	<b>1.1</b>	<b>1</b>	<b>3</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their Seventh Quarter After Enrollment and Summary Statistics, by Provid**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	4.8%	1.2	1	2
P11	0.0%			
P12	0.0%			
P23	7.1%	1.0	1	1
P25	7.1%	1.0	1	1
P29	3.8%	1	1	1
P31	12.5%	1	1	1
<b>Total</b>	<b>5.5%</b>	<b>1.1</b>	<b>1</b>	<b>2</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 17. Number and Percentage of Health Home Participants with at Least One Inpatient Hospital Admission during Their Eighth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Inpatient Admission	Summary Statistics for Those with at Least One Inpatient Admission		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	7.2%	1.1	1	2
P11	6.3%	1.0	1	1
P12	0.0%			
P23	19.0%	1.0	1	1
P25	7.1%	1.0	1	1
P29	5.7%	1.3	1	2
P31	8.3%	2.0	1	5
<b>Total</b>	<b>8.1%</b>	<b>1.2</b>	<b>1</b>	<b>5</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their First Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	20.5%	1.6	1	9
P11	31.3%	1.2	1	2
P12	27.3%	1.7	1	2
P23	35.7%	2.1	1	5
P25	21.4%	2.3	1	4
P29	11.3%	1.3	1	2
P31	18.8%	1.1	1	2
<b>Total</b>	<b>21.2%</b>	<b>1.6</b>	<b>1</b>	<b>9</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their Second Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	21.3%	1.9	1	16
P11	31.3%	1.4	1	3
P12	18.2%	2.0	1	3
P23	28.6%	1.8	1	4
P25	28.6%	2.0	1	4
P29	18.9%	1.0	1	1
P31	14.6%	1.4	1	3
<b>Total</b>	<b>21.5%</b>	<b>1.7</b>	<b>1</b>	<b>16</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their Third Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	19.7%	3.0	1	33
P11	25.0%	1.5	1	2
P12	9.1%	1.0	1	1
P23	28.6%	1.8	1	5
P25	21.4%	1.0	1	1
P29	18.9%	1.3	1	2
P31	25.0%	1.4	1	3
<b>Total</b>	<b>21.0%</b>	<b>2.3</b>	<b>1</b>	<b>33</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their Fourth Quarter After Enrollment and Summary Statistics, by Provide**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	22.9%	2.0	1	21
P11	37.5%	1.8	1	3
P12	18.2%	1.0	1	1
P23	33.3%	1.4	1	3
P25	14.3%	1.5	1	2
P29	15.1%	1.3	1	2
P31	14.6%	1.4	1	4
<b>Total</b>	<b>22.2%</b>	<b>1.8</b>	<b>1</b>	<b>21</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their Fifth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	20.5%	2.5	1	40
P11	25.0%	1.0	1	1
P12	9.1%	1.0	1	1
P23	19.0%	1.5	1	3
P25	35.7%	1.2	1	2
P29	15.1%	1.6	1	3
P31	18.8%	1.2	1	2
<b>Total</b>	<b>19.9%</b>	<b>2.1</b>	<b>1</b>	<b>40</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their Sixth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	21.7%	2.0	1	27
P11	25.0%	2.3	1	4
P12	27.3%	1.0	1	1
P23	21.4%	1.7	1	4
P25	14.3%	1.0	1	1
P29	11.3%	1.3	1	2
P31	14.6%	1.7	1	5
<b>Total</b>	<b>19.6%</b>	<b>1.9</b>	<b>1</b>	<b>27</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their Seventh Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	22.5%	2.7	1	30
P11	25.0%	1.3	1	2
P12	9.1%	1.0	1	1
P23	26.2%	1.8	1	4
P25	28.6%	1.0	1	1
P29	18.9%	1.2	1	3
P31	20.8%	1.3	1	3
<b>Total</b>	<b>22.2%</b>	<b>2.1</b>	<b>1</b>	<b>30</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 18. Number and Percentage of Health Home Participants with at Least One Emergency Department Visit during Their Eighth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an ED Visit	Summary Statistics for Those with at Least One ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	20.1%	2.7	1	25
P11	18.8%	1.3	1	2
P12	0.0%			
P23	28.6%	1.8	1	6
P25	28.6%	1.0	1	1
P29	15.1%	1.3	1	3
P31	22.9%	1.5	1	3
<b>Total</b>	<b>20.3%</b>	<b>2.1</b>	<b>1</b>	<b>25</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their First Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	63.5%	3.1	1	18
P11	43.8%	1.4	1	3
P12	72.7%	3.9	1	13
P23	47.6%	1.6	1	3
P25	64.3%	2.7	1	12
P29	75.5%	2.7	1	9
P31	41.7%	2.5	1	16
<b>Total</b>	<b>60.5%</b>	<b>2.8</b>	<b>1</b>	<b>18</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their Second Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	66.3%	2.8	1	24
P11	43.8%	2.3	1	4
P12	81.8%	6.6	1	29
P23	31.0%	2.5	1	6
P25	85.7%	3.3	1	8
P29	79.2%	3.3	1	15
P31	43.8%	2.0	1	5
<b>Total</b>	<b>62.1%</b>	<b>2.9</b>	<b>1</b>	<b>29</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their Third Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	67.1%	3.0	1	22
P11	50.0%	2.3	1	5
P12	54.5%	7.5	1	24
P23	33.3%	2.1	1	4
P25	64.3%	3.0	1	9
P29	88.7%	3.5	1	16
P31	54.2%	2.0	1	5
<b>Total</b>	<b>64.0%</b>	<b>3.0</b>	<b>1</b>	<b>24</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their Fourth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	70.3%	3.1	1	21
P11	43.8%	1.6	1	4
P12	90.9%	6.8	1	29
P23	31.0%	1.9	1	4
P25	57.1%	4.0	1	9
P29	81.1%	3.7	1	19
P31	41.7%	2.0	1	4
<b>Total</b>	<b>63.7%</b>	<b>3.2</b>	<b>1</b>	<b>29</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their Fifth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	64.7%	3.0	1	13
P11	56.3%	1.4	1	3
P12	63.6%	6.3	1	21
P23	26.2%	2.2	1	4
P25	50.0%	3.7	1	7
P29	79.2%	3.0	1	14
P31	47.9%	1.7	1	3
<b>Total</b>	<b>60.0%</b>	<b>2.9</b>	<b>1</b>	<b>21</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their Sixth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	69.9%	2.8	1	16
P11	37.5%	1.2	1	2
P12	90.9%	3.8	1	17
P23	42.9%	1.6	1	4
P25	57.1%	3.8	1	12
P29	84.9%	3.7	1	19
P31	39.6%	2.1	1	5
<b>Total</b>	<b>64.7%</b>	<b>2.8</b>	<b>1</b>	<b>19</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their Seventh Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	65.5%	2.7	1	18
P11	43.8%	3.0	1	6
P12	90.9%	3.3	1	10
P23	23.8%	1.3	1	3
P25	57.1%	2.8	1	6
P29	77.4%	4.0	1	17
P31	50.0%	1.6	1	4
<b>Total</b>	<b>60.7%</b>	<b>2.8</b>	<b>1</b>	<b>18</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 19. Number and Percentage of Health Home Participants with at Least One Ambulatory Care Visit during Their Eighth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with an Ambulatory Care Visit	Summary Statistics for Those with at Least One Ambulatory Care Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	58.2%	3.0	1	13
P11	18.8%	3.7	3	4
P12	81.8%	3.4	1	8
P23	35.7%	1.8	1	4
P25	57.1%	3.0	1	8
P29	73.6%	3.1	1	13
P31	41.7%	2.0	1	5
<b>Total</b>	<b>55.2%</b>	<b>2.9</b>	<b>1</b>	<b>13</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 20. Number and Percentage of Health Home Participants with at Least One Avoidable Inpatient Hospital Admission and Summary Statistics, by Quarter**

Quarter	Number of Participants	Number with a Potentially Avoidable Hospitalization	Percentage with a Potentially Avoidable Hospitalization	Summary Statistics for Those with at Least One Potentially Avoidable Hospitalization		
				Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
At least 1 Quarter After Enrollment	433	1	0.2%	2.0	2	2
At least 2 Quarters After Enrollment	433	4	0.9%	1.3	1	2
At least 3 Quarters After Enrollment	433	5	1.2%	1.2	1	2
At least 4 Quarters After Enrollment	433	2	0.5%	1.0	1	1
At least 5 Quarters After Enrollment	433	2	0.5%	1.5	1	2
At least 6 Quarters After Enrollment	433	0	0.0%			
At least 7 Quarters After Enrollment	433	1	0.2%	1.0	1	1
At least 8 Quarters After Enrollment	433	2	0.5%	1.0	1	1

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their First Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	8.8%	1.3	1	3
P11	12.5%	1.0	1	1
P12	9.1%	2.0	2	2
P23	14.3%	1.7	1	3
P25	21.4%	1.3	1	2
P29	7.5%	1.0	1	1
P31	4.2%	1.0	1	1
<b>Total</b>	<b>9.2%</b>	<b>1.3</b>	<b>1</b>	<b>3</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their Second Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	10.8%	1.5	1	6
P11	12.5%	1.5	1	2
P12	18.2%	1.0	1	1
P23	7.1%	1.3	1	2
P25	7.1%	1.0	1	1
P29	5.7%	1.0	1	1
P31	4.2%	1.0	1	1
<b>Total</b>	<b>9.2%</b>	<b>1.4</b>	<b>1</b>	<b>6</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their Third Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	10.0%	2.0	1	10
P11	6.3%	1.0	1	1
P12	0.0%			
P23	14.3%	1.2	1	2
P25	14.3%	1.0	1	1
P29	3.8%	1.0	1	1
P31	6.3%	1.3	1	2
<b>Total</b>	<b>9.0%</b>	<b>1.7</b>	<b>1</b>	<b>10</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their Fourth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	7.6%	1.4	1	4
P11	25.0%	1.3	1	2
P12	0.0%			
P23	11.9%	1.0	1	1
P25	0.0%			
P29	3.8%	1.5	1	2
P31	2.1%	2.0	2	2
<b>Total</b>	<b>7.2%</b>	<b>1.4</b>	<b>1</b>	<b>4</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their Fifth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	9.6%	2.0	1	16
P11	12.5%	1.0	1	1
P12	0.0%			
P23	7.1%	1.7	1	2
P25	21.4%	1.3	1	2
P29	5.7%	1.0	1	1
P31	0.0%			
<b>Total</b>	<b>8.1%</b>	<b>1.8</b>	<b>1</b>	<b>16</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their Sixth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	8.8%	1.9	1	15
P11	25.0%	1.3	1	2
P12	9.1%	1.0	1	1
P23	9.5%	1.0	1	1
P25	0.0%			
P29	1.9%	1.0	1	1
P31	4.2%	1.0	1	1
<b>Total</b>	<b>7.9%</b>	<b>1.6</b>	<b>1</b>	<b>15</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their Seventh Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	11.2%	1.9	1	11
P11	12.5%	1.5	1	2
P12	9.1%	1.0	1	1
P23	7.1%	1.0	1	1
P25	7.1%	1.0	1	1
P29	3.8%	1.0	1	1
P31	6.3%	2	1	3
<b>Total</b>	<b>9.2%</b>	<b>1.7</b>	<b>1</b>	<b>11</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 21. Number and Percentage of Health Home Participants with at Least One Non-Emergent Emergency Department Visit during Their Eighth Quarter After Enrollment and Summary Statistics, by Provider**

Provider ID	Percentage with Non-Emergent ED visits	Summary Statistics for Those with at Least One Non-Emergent ED Visit		
		Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
P10	9.6%	2.0	1	13
P11	6.3%	2.0	2	2
P12	0.0%			
P23	9.5%	1.5	1	2
P25	0.0%			
P29	5.7%	1.0	1	1
P31	0.0%			
<b>Total</b>	<b>7.4%</b>	<b>1.8</b>	<b>1</b>	<b>13</b>

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters

**Table 22. Number and Percentage of Health Home Participants with at Least One 30-Day All-Cause-Hospital Readmission and Summary Statistics, by Quarter**

Quarter	Number of Participants	Number with a 30-Day Readmission	Percentage with a 30-Day Readmission	Summary Statistics for Those with at Least One 30-Day Readmission		
				Average Visits per Person	Minimum Visits per Person	Maximum Visits per Person
At least 1 Quarter After Enrollment	433	3	0.7%	1.0	1	1
At least 2 Quarters After Enrollment	433	2	0.5%	1.0	1	1
At least 3 Quarters After Enrollment	433	1	0.2%	1.0	1	1
At least 4 Quarters After Enrollment	433	3	0.7%	1.0	1	1
At least 5 Quarters After Enrollment	433	1	0.2%	1.0	1	1
At least 6 Quarters After Enrollment	433	1	0.2%	1.0	1	1
At least 7 Quarters After Enrollment	433	2	0.5%	1.0	1	1
At least 8 Quarters After Enrollment	433	1	0.2%	1.0	1	1

Measures are based on MMIS2 data

Data as of November 30, 2015

Please consider the utilization data as preliminary because there is insufficient run-out for claims/encounter submission.

MCO encounters require at least 6 months of run-out, and FFS claims require at least 12 months of run-out. These measures will be revised to include complete data in future reports.

Participants included in the denominator were continuously enrolled for eight quarters