MDH - Medical Care Programs Administration

MISSION

The mission of the Medical Care Programs Administration is to improve the health and well-being of low-income Marylanders by assuring access to medically necessary and appropriate health care services. In striving to meet this mission, we serve both customers and taxpayers by ensuring quality services are provided in a cost-effective and timely manner.

VISION

The Medical Care Programs Administration will provide leadership to promote equal access and high quality health care services for all Marylanders.

KEY GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

Goal 1. Improve the health of Maryland's children.

Obj. 1.1 By calendar year (CY) 2019, 82 percent of HealthChoice children will receive necessary immunizations at age two.

Obj. 1.2 By CY 2019, the percentage of HealthChoice children aged 12 through 23 months who received a lead test during the year will reach 63 percent.

Obj. 1.3 By CY 2019, the percentage of HealthChoice children aged 12 through 23 months in Baltimore City who received a lead test during the year will reach 67 percent.

Obj. 1.4 By CY 2021, the percentage of children receiving six or more well-child visits in the first 15 months of life will increase by 1.0 percentage points.

Obj. 1.5 By CY 2021, the percentage of children who received at least one well-child visit in the third, fourth, fifth, and sixth years of life will increase by 1.0 percentage points.

Obj. 1.6 By CY 2021, the percentage of adolescents aged 12 to 21 receiving at least one well-care visit will increase by 1.0 percentage points.

Obj. 1.7 By CY 2021, the percentage of eligibles aged 1 to 20 who received preventive dental services will increase by 1.0 percentage points.

Obj. 1.8 By CY 2021, the percentage of adolescents up to date on the HPV vaccine by their 13th birthday will increase by 1.0 percentage points.

Obj. 1.9 By CY 2021, the percentage of children and adolescents aged 1 to 17 who were on two or more concurrent antipsychotic medications will decrease by 0.1 percent.

Performance Measures (Calendar Year)	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Percent of HealthChoice children age two in sample who had							
received necessary immunizations	82%	78%	80%	79%	80%	77%	78%
Percent of HealthChoice children aged 12-23 months receiving a							
lead test	61%	63%	62%	62%	62%	61%	62%
Percent of HealthChoice children aged 12-23 months in Baltimore							
City receiving a lead test	64%	63%	62%	60%	62%	61%	61%
¹ Percent of children receiving six or more well-child visits in the							
first 15-30 months of life	N/A	N/A	62%	71%	72%	66%	67%
Percent of children receiving at least one well-child visit in the							
third, fourth, fifth, and sixth years of life	N/A	N/A	80%	82%	N/A	N/A	N/A
Percent of children 3-11 years of age who had at least one							
comprehensive well-care visit	N/A	N/A	N/A	N/A	82%	63%	67%
Percent of adolescents aged 12 to 21 receiving at least one well-							
care visit	N/A	N/A	62%	64%	65%	65%	67%
Percent of eligibles aged 1 to 20 years who received preventive							
dental services	N/A	N/A	54%	55%	55%	49%	50%

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Performance Measures (Calendar Year) (Continued)	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Percent of adolescents up to date on HPV vaccine by their 13th							
birthday	N/A	N/A	34%	35%	35%	35%	35%
Percent of children and adolescents aged 1-17 years treated with							
antipsychotic medications that were on two or more concurrent							
antipsychotic medications	N/A	N/A	1.8%	1.7%	1.7%	1.4%	1.3%

Goal 2. Improve the health of Maryland's adults.

- **Obj. 2.1** By fiscal year 2020, the percentage of elderly and individuals with disabilities receiving state-funded services in community alternatives versus nursing facilities will increase by 2.0 percentage points.
- Obj. 2.2 By CY 2021, the percentage of adults hospitalized for treatment of mental illness receiving a follow-up visit within 7 days of discharge will increase by 1.0 percentage points.
- Obj. 2.3 By CY 2021, the percentage of adults hospitalized for treatment of mental illness receiving a follow-up visit within 30 days of discharge will increase by 1.0 percentage points.
- Obj. 2.4 By CY 2021, the percentage of adults with a new episode of alcohol or other drug dependence who initiated treatment within 14 days will increase by 1.0 percentage points.
- **Obj. 2.5** By CY 2021, the percentage of adults with a new episode of alcohol or other drug dependence who initiated treatment and had two or more follow-up visits within 30 days will increase by 1.0 percentage points.
- Obj. 2.6 By CY 2021, the percentage of adults who had a diagnosis of hypertension and whose blood pressure was adequately controlled will increase by 1.0 percentage points.
- Obj. 2.7 By CY 2021, the number of inpatient hospital admission for diabetes short-term complications per 100,000 enrollee months for adults will be 18.
- **Obj. 2.8** By CY 2023, the percentage of adults and children 5-65 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year will increase by 1.0 percentage point.
- Obj. 2.9 By CY23, the percentage of adults 18–75 years of age with diabetes (type 1 and type 2) who had poor control of their Hemoglobin A1c (HbA1c (>9.0%) will decrease by 1.0 percentage point.
- Obj. 2.10 By CY23, the percentage of deliveries in which women had a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization will increase by 0.2 percentage points.
- Obj. 2.11 By CY23, the percentage of deliveries in which women had a postpartum visit on or between 7 and 84 days after delivery will increase by 0.2 percentage points.
- Obj. 2.12 By CY23, the percentage of members with at least 31 days of prescription opioids in a 62-day period will be reduced by 0.1 percentage points.

Performance Measures (Calendar Year)	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
² Percentage of elderly and individuals with disabilities receiving							
state-funded services in community alternatives versus nursing	53%	54%	57%	58%	60%	64%	65%
Percent of adults hospitalized for treatment of mental illness							
receiving a follow-up visit within 7 days of discharge	N/A	N/A	37%	45%	41%	47%	47%
Percent of adults hospitalized for treatment of mental illness							
receiving a follow-up visit within 30 days of discharge	N/A	N/A	60%	71%	68%	73%	73%
Percent of adults with a new episode of alcohol or other drug							
dependence who initiated treatment within 14 days	N/A	N/A	43%	42%	42%	43%	43%

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Performance Measures (Calendar Year) (Continued)	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est
Percent of adults with a new episode of alcohol or other drug							
dependence who initiated treatment and had two or more follow-							
up visits within 30 days	N/A	N/A	30%	23%	22%	24%	24%
Percent of adults who had a diagnosis of hypertension and whose							
blood pressure was adequately controlled	N/A	N/A	60%	62%	55%	63%	63%
Number of inpatient hospital admissions for diabetes short-term							
complications per 100,000 enrollee for adults	N/A	N/A	211	218	207	217	216
The percentage of children and adults with persistent asthma who							
were dispensed appropriate asthma controller medications.	N/A	N/A	N/A	65%	69%	69%	69%
The percentage of adults with Type 1 or Type 2 diabetes who had							
their HbA1c in poor control.	N/A	N/A	N/A	35%	40%	40%	40%
The percentage of women delivering a live birth who had a timely							
prenatal care visit.	N/A	N/A	N/A	88%	87%	88%	88%
The percentage of women delivering a live birth who had a timely							
postpartum care visit.	N/A	N/A	N/A	81%	81%	81%	81%
The percentage of members whose new episode of opioid use lasts							
at least 31 days in a 62-day period.	N/A	N/A	N/A	4%	4%	4%	4%

NOTES

¹ Prior to 2021, this metric only included children receiving six or more well-child visits in the first 15 months of life instead of the first 15-30 months of life.

 2 2021 data is final, and not estimated, because it is reported on a fiscal year basis.