

PARTNERSHIP



HEALTHPLAN
of CALIFORNIA
A Public Agency



Annual Partnership County Data Report 2024: Glenn County

April 2024



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Membership / County Overview

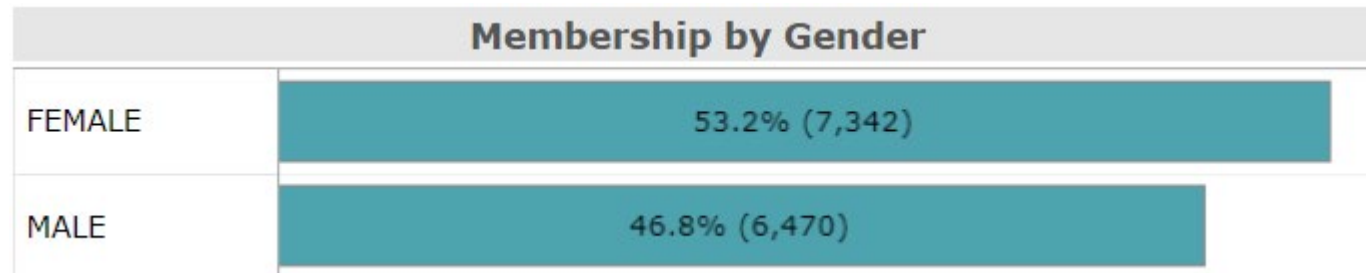
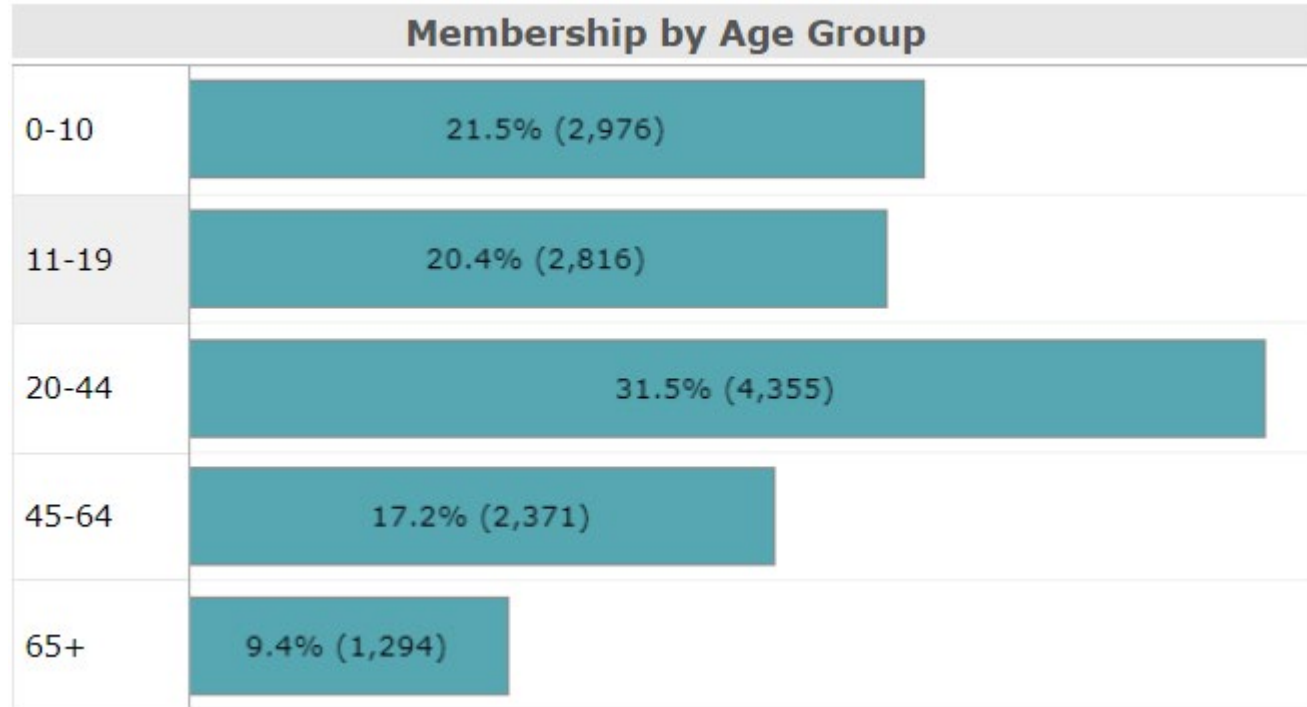


Current County Enrollment (March 2024)

| Membership by County | |
|----------------------|-----------------|
| SONOMA | 12.0% (110,241) |
| SOLANO | 11.3% (103,547) |
| BUTTE | 9.4% (86,393) |
| SHASTA | 7.6% (70,125) |
| PLACER | 6.5% (60,013) |
| HUMBOLDT | 6.5% (59,588) |
| YOLO | 6.0% (54,972) |
| MARIN | 5.1% (47,110) |
| SUTTER | 4.8% (44,294) |
| MENDOCINO | 4.5% (41,461) |
| YUBA | 4.0% (36,680) |
| LAKE | 3.8% (34,930) |
| TEHAMA | 3.4% (31,250) |
| NEVADA | 3.1% (28,772) |
| NAPA | 3.0% (27,425) |
| SISKIYOU | 2.0% (18,208) |
| GLENN | 1.5% (13,818) |
| DEL NORTE | 1.4% (12,439) |
| COLUSA | 1.2% (10,598) |
| LASSEN | 0.9% (8,632) |
| PLUMAS | 0.7% (5,964) |
| TRINITY | 0.6% (5,666) |
| MODOC | 0.4% (4,015) |
| SIERRA | 0.1% (874) |

**Planwide enrollment:
~917,000 in March 2024**

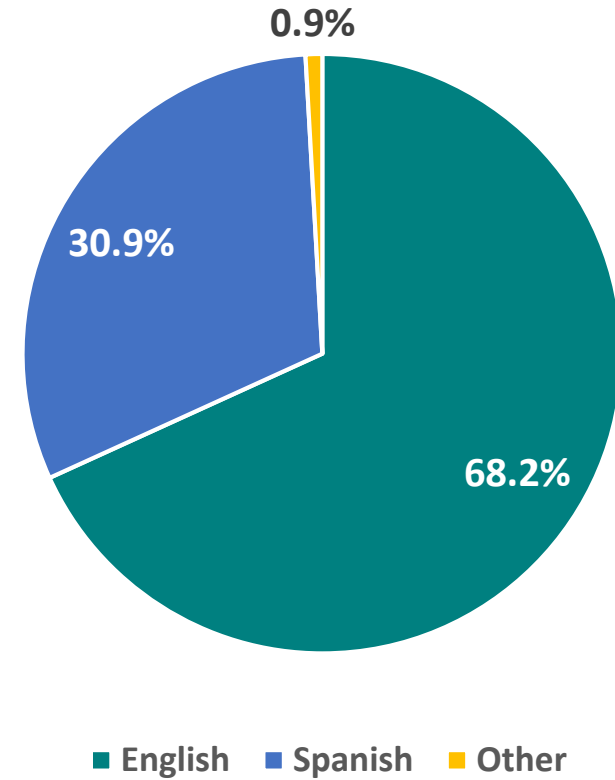
County Age Groups and Gender (March 2024)



County Member Ethnicity & Preferred Language (March 2024)

| Membership by Ethnicity | |
|-------------------------|---------------|
| HISPANIC | 54.4% (7,504) |
| WHITE | 31.8% (4,395) |
| UNKNOWN | 8.0% (1,107) |
| OTHER | 2.3% (317) |
| NATIVE AMERICAN | 1.6% (226) |
| ASIAN/PACIFIC ISLANDER | 0.7% (93) |
| BLACK | 0.6% (89) |
| ASIAN INDIAN | 0.3% (36) |
| FILIPINO | 0.2% (29) |
| VIETNAMESE | 0.1% (7) |

Preferred Language





County Membership Assignment Status (April 2024)

Provider Panel Capacity

This report shows the number of PHC members assigned to each clinic and their capacity to accept new members. Includes only clinics currently serving members.

| PCP Affiliation ID | PCP Full Name | PCP County | Clinic Type | Current Enrollment Status | April 2024 | |
|---|----------------------------|------------|-----------------|---------------------------|---------------|---------------|
| | | | | | Member Count | % of Members |
| Total Members Assigned to Primary Care Sites | | | | | 13,756 | 100.0% |
| 24803 0004 | ORLAND CHILDRENS CTR | GLENN | FQHC/ RHC | Open | 2,894 | 21.0% |
| 20328 0004 | JOANNE E REID MD INC | GLENN | FQHC/ RHC | Open | 2,619 | 19.0% |
| 34145 0004 | AMPLA HEALTH HAMILTON CITY | GLENN | FQHC/ RHC | Open | 2,086 | 15.2% |
| 12117 0004 | AMPLA HEALTH ORLAND MED | GLENN | FQHC/ RHC | Open | 1,579 | 11.5% |
| 83870 0001 | FIRST CARE MEDICAL ASSOC | GLENN | FQHC/ RHC | Open | 1,101 | 8.0% |
| 11670 0004 | NORTHERN VLY INDIAN HEALTH | GLENN | FQHC TRIBAL APM | Open | 972 | 7.1% |
| 13368 0005 | JAMES CORONA | GLENN | FQHC/ RHC | Open | 899 | 6.5% |
| 10464 0005 | FAMILY CARE CLINIC | GLENN | FQHC/ RHC | Open | 795 | 5.8% |
| 17642 0004 | GLENN FAMILY MEDICAL GROUP | GLENN | FQHC/ RHC | Open | 486 | 3.5% |
| 24803 0005 | ORLAND CHILDRENS CTR | GLENN | FQHC/ RHC | Open | 141 | 1.0% |
| 20328 0005 | JOANNE E REID MD INC | GLENN | FQHC/ RHC | Open | 128 | 0.9% |
| 34145 0005 | AMPLA HEALTH HAMILTON CITY | GLENN | FQHC/ RHC | Open | 26 | 0.2% |
| 12117 0005 | AMPLA HEALTH ORLAND MED | GLENN | FQHC/ RHC | Open | 12 | 0.1% |
| 83870 0004 | FIRST CARE MEDICAL ASSOC | GLENN | FQHC/ RHC | Open | 7 | 0.1% |
| 13368 0008 | JAMES CORONA | GLENN | FQHC/ RHC | Open | 5 | 0.0% |
| 10464 0008 | FAMILY CARE CLINIC | GLENN | FQHC/ RHC | Open | 3 | 0.0% |
| 17642 0007 | GLENN FAMILY MEDICAL GROUP | GLENN | FQHC/ RHC | Open | 3 | 0.0% |

Enrollment Status

- All
- Open
- Current Patients Only
- Closed



Obstetrics / Maternity Data





County Maternity Data & Resources (2022)

- **Hospitals with maternity services (does not include Kaiser):**
 - N/A. Primary Delivery Hospital: Enloe Medical Center
- **Glenn County births by residence of mother: 367**
 - Source: CDPH
- **Prenatal care providers:**
 - No known prenatal care in county

If you have corrections for this info, please email:
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Maternity Data by Provider (2022)

| HOSPITAL NAME | Partnership Region | County | City | NTSV C-Section Rate | | | Early Elective Delivery (22-23 CMQCC Data) | | | Breastfeeding Rate (CDPH) | | | Episiotomy Rate | | | VBAC Rate | | | VBAC Routinely Available | Certified Nurse Midwife Delivery Rate | |
|--|--------------------|-----------|---------------|---------------------|-----------|---------------|--|-----------|---------------|---------------------------|-----------|---------------|-----------------|-----------|---------------|-------------|-----------|---------------|--------------------------|---------------------------------------|-----------|
| | | | | Denominator | Score [%] | Rating | Denominator | Score (%) | Rating | Denominator | Score [%] | Rating | Denominator | Score [%] | Rating | Denominator | Score [%] | Rating | Yes/No | Denominator | Score [%] |
| Adventist Health Clear Lake | Southwest | Lake | Clearlake | 40 | 10 | Above Average | 21 | 0% | Above Average | 158 | 72.2 | Average | 130 | 2.3 | Average | | | No | 155 | 0 | |
| Sutter Lakeside Hospital | Southwest | Lake | Lakeport | 72 | 20.8 | Above Average | 47 | 2.10% | Below Average | 236 | 62.3 | Below Average | 171 | 0.6 | Above Average | | | No | 246 | 0 | |
| Marin Health Medical Center | Southwest | Marin | Greenbrae | 480 | 21 | Above Average | 63 | 0% | Above Average | 1077 | 89.4 | Superior | 1093 | 0.5 | Superior | 207 | 37.2 | Superior | Yes | 1490 | 43.6 |
| Adventist Health Ukiah Valley | Southwest | Mendocino | Ukiah | 227 | 22.5 | Average | | | | 715 | 81.5 | Above Average | 537 | 1.7 | Average | | | No | 748 | 47.1 | |
| Sutter Santa Rosa Regional Hospital | Southwest | Sonoma | Santa Rosa | 525 | 21.3 | Above Average | | | | 1264 | 74.8 | Average | 1053 | 0.9 | Above Average | | | No | 1552 | 1.4 | |
| Santa Rosa Memorial Hospital | Southwest | Sonoma | Santa Rosa | 175 | 21.1 | Above Average | 30.0 | 3.3% | Below Average | 459 | 90.2 | Superior | 368 | 0.0 | Superior | 91 | 36.3 | Superior | Yes | 534 | 50.2 |
| Providence Queen of the Valley Medical Center | Southeast | Napa | Napa | 228 | 22.4 | Average | 34 | 5.90% | Below Average | 630 | 83 | Above Average | 478 | 0.6 | Above Average | 108 | 25 | Above Average | Yes | 688 | 0 |
| NorthBay Medical Center | Southeast | Solano | Fairfield | 489 | 26.4 | Below Average | 144 | 1.40% | Average | 1089 | 72.5 | Average | 1078 | 1.3 | Average | 260 | 12.7 | Average | Yes | 1619 | 0 |
| Dignity Health Woodland Memorial Hospital | Southeast | Yolo | Woodland | 176 | 16.5 | Above Average | 40 | 0% | Above Average | 457 | 82.5 | Above Average | 382 | 1.6 | Average | | | No | 521 | 0 | |
| Sutter Davis Hospital | Southeast | Yolo | Davis | 403 | 17.4 | Superior | | | | 1063 | 91.6 | Superior | 894 | 1.1 | Above Average | 142 | 34.5 | Superior | Yes | 1143 | 59.4 |
| Sutter Coast Hospital | Northwest | Del Norte | Crescent City | 79 | 21.5 | Above Average | | | | 211 | 74.9 | Average | 169 | 5.9 | Below Average | | | No | 242 | 0 | |
| Mad River Community Hospital | Northwest | Humboldt | Arcata | 135 | 20.7 | Above Average | 20 | 0% | Above Average | 447 | 83.9 | Above Average | 304 | 1.6 | Average | | | No | 398 | 22.9 | |
| Providence St. Joseph Hospital Eureka | Northwest | Humboldt | Eureka | 240 | 20.8 | Above Average | 41 | 0% | Above Average | 379 | 67.5 | Below Average | 515 | 2.3 | Average | 104 | 19.2 | Average | Yes | 723 | 17.7 |
| Banner Lassen Medical Center | Northeast | Lassen | Susanville | 72 | 22.2 | Average | 22 | 0% | Above Average | 218 | 74.8 | Average | 136 | 7.4 | Below Average | | | No | 197 | 0 | |
| Dignity Health Mercy Medical Center Redding | Northeast | Shasta | Redding | 524 | 22.9 | Average | 213 | 1.40% | Average | 1507 | 75 | Above Average | 1124 | 1.7 | Average | | | No | 1677 | 0 | |
| Dignity Health Mercy Medical Center Mount Shasta | Northeast | Siskiyou | Mount Shasta | 41 | 34.1 | Below Average | 9 | 11.10% | Below Average | 99 | 80.8 | Average | 78 | 1.3 | Average | | | No | 119 | 0 | |
| Fairchild Medical Center | Northeast | Siskiyou | Yreka | 36 | 36.1 | Below Average | 11 | 9.10% | Below Average | 170 | 80 | Average | 104 | 6.7 | Below Average | 41 | 17.1 | Average | Yes | 182 | 0 |
| Dignity Health St. Elizabeth Community Hospital | Northeast | Tehama | Red Bluff | 190 | 18.9 | Above Average | 47.0 | 0.0 | Above Average | 453 | 72.8 | Average | 403 | 2.2 | Average | | | No | 556 | 18.3 | |
| Oroville Hospital | Eastern | Butte | Oroville | 121 | 25.6 | Below Average | | | | 465 | 60.2 | Below Average | 253 | 5.1 | Average | | | No | 429 | 43.8 | |
| Enloe Medical Center - Esplanade Campus | Eastern | Butte | Chico | 635 | 20.5 | Above Average | | | | 1730 | 86.6 | Above Average | 1380 | 1.8 | Average | 260 | 22.3 | Average | Yes | 1916 | 22.9 |
| Dignity Health Sierra Nevada Memorial Hospital | Eastern | Nevada | Grass Valley | 133 | 25.6 | Below Average | | | | 281 | 90.7 | Superior | 245 | 3.7 | Average | | | No | 339 | 10.6 | |
| Tahoe Forest Hospital | Eastern | Nevada | Truckee | 140 | 15 | Superior | | | | 290 | 94.5 | Superior | 278 | 4.3 | Average | | | No | 375 | 0 | |
| Sutter Roseville Medical Center | Eastern | Placer | Roseville | 853 | 23.3 | Average | | | | 2068 | 74.2 | Average | 1704 | 2.7 | Average | 310 | 13.5 | Average | Yes | 2402 | 0 |
| Adventist Health and Rideout | Eastern | Yuba | Marysville | 508 | 21.9 | Above Average | | | | 1641 | 67.2 | Below Average | 1254 | 2 | Average | 288 | 10.8 | Average | Yes | 1791 | 0.7 |

| Key: | NTSV C-section | Early Elective Delivery | Breastfeeding at discharge | Episiotomy Rate | VBAC rate | CNM delivery rate |
|-----------|----------------|-------------------------|----------------------------|-----------------|-----------|-------------------|
| Above Avg | <21.9% | <1% | >75% | <1.2% | >25% | >10% |
| Avg | 22-23.6% | 1-2% | 70-75% | 1.5 - 5.0% | 10 - 25% | |
| Below Avg | >23.6% | >2% | <70% | >5.0% | <10% | <10% |





Attachment: HEDIS Information

Report Year 2023, Measurement Year 2022

- **Managed Care Accountability Site (MCAS) Measurement Set Descriptions**
- **Performance on MCAS Measures**



7.0 Measurement Year 2022 Managed Care Accountability Site (MCAS) Measurement Set Descriptions

| HEDIS Measure | Measure Indicator | Measure Definition |
|--|--|--|
| *Breast Cancer Screening (BCS) | <ul style="list-style-type: none"> Non-Medicare Total | <ul style="list-style-type: none"> The percentage of women 52–74 years of age who had a mammogram to screen for breast cancer as of December 31 of the measurement year. |
| Cervical Cancer Screening (CCS) | <ul style="list-style-type: none"> Total | <ul style="list-style-type: none"> The percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: <ul style="list-style-type: none"> Women 21–64 years of age who had cervical cytology performed within the last 3 years Women 30–64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years Women 30–64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting within the last 5 years |
| *Child and Adolescent Well-Care Visits (WCV) | <ul style="list-style-type: none"> Total | <ul style="list-style-type: none"> The percentage of members 3–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year. <ul style="list-style-type: none"> Total. The sum of the age stratifications (ages 3–21) as of December 31 of the measurement year. |
| Childhood Immunization Status (CIS) | <ul style="list-style-type: none"> Combination 10 | <ul style="list-style-type: none"> The percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates. <ul style="list-style-type: none"> Combination 10. Children who have had all ten indicators (DTaP, IPV, MMR, HiB, HepB, VZV, PCV, HepA, RV and Influenza). |
| *Chlamydia Screening in Women (CHL) | <ul style="list-style-type: none"> Total | <ul style="list-style-type: none"> The percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year. <ul style="list-style-type: none"> Total. The sum of the age stratifications. |

Partnership HealthPlan of California
Measurement Year 2022 / Reporting Year 2023



| HEDIS Measure | Measure Indicator | Measure Definition |
|---|---|--|
| Controlling High Blood Pressure (CBP) | <ul style="list-style-type: none"> Total | <ul style="list-style-type: none"> The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm Hg) during the measurement year. |
| *Follow-Up After ED Visit for Mental Illness – 30 days (FUM) | <ul style="list-style-type: none"> Total | <ul style="list-style-type: none"> The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness. <ul style="list-style-type: none"> The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days). |
| *Follow-Up After ED Visit for Substance Abuse – 30 days (FUA) | <ul style="list-style-type: none"> Total | <ul style="list-style-type: none"> The percentage of emergency department (ED) visits among members age 13 years and older with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, for which there was follow-up. <ul style="list-style-type: none"> The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days). |
| Immunizations for Adolescents (IMA) | <ul style="list-style-type: none"> Combination 2 | <ul style="list-style-type: none"> The percentage of adolescents 13 years of age who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday. The measure calculates a rate for each vaccine and two combination rates. <ul style="list-style-type: none"> Combination 2. Adolescents who have had all three indicators (meningococcal, Tdap and HPV). |
| Hemoglobin A1c Control for Patients With Diabetes (HBD) | <ul style="list-style-type: none"> HbA1c poor control (>9.0%) | <ul style="list-style-type: none"> The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had each of the Measure Indicators performed. <ul style="list-style-type: none"> HbA1c poor control (>9.0%). The most recent HbA1c level is >9.0% or is missing a result, or if an HbA1c test was not done during the measurement year. |
| Lead Screening in Children (LSC) | <ul style="list-style-type: none"> Total | <ul style="list-style-type: none"> The percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday. <ul style="list-style-type: none"> At least one lead capillary or venous blood test (Lead Tests Value Set) on or before the child's second birthday. |

**Partnership HealthPlan of California
Measurement Year 2022 / Reporting Year 2023**



| HEDIS Measure | Measure Indicator | Measure Definition |
|---|--|---|
| Prenatal and Postpartum Care (PPC) | <ul style="list-style-type: none"> • <i>Timeliness of Prenatal Care</i> • <i>Postpartum Care</i> | <ul style="list-style-type: none"> • <i>The percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care.</i> <ul style="list-style-type: none"> ○ <i>Timeliness of Prenatal Care. The percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization.</i> ○ <i>Postpartum Care. The percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery.</i> |
| *Well-Child Visits in the First 30 Months of Life (W30) | <ul style="list-style-type: none"> • <i>Well-Child Visits in the First 15 Months</i> • <i>Well-Child Visits for Age 15 Months–30 Months.</i> | <ul style="list-style-type: none"> • <i>The percentage of members who had the following number of well-child visits with a PCP during the last 15 months. The following rates are reported:</i> <ul style="list-style-type: none"> ○ <i>Well-Child Visits in the First 15 Months. Children who turned 15 months old during the measurement year: Six or more well-child visits.</i> ○ <i>Well-Child Visits for Age 15 Months–30 Months. Children who turned 30 months old during the measurement year: Two or more well-child visits.</i> |

**-Administrative Measures. The entire eligible population is used in calculating performance (versus a systematic sample drawn from the eligible population for the hybrid measures)*



Performance on MCAS Measures (2022)

| MCP Name | MCAS Measures | | | | | | | | | | | | | | |
|--|--------------------------|--------|--------|--------|--------|--------|----------------------------|----------|---------|--------------------------|--------|----------------------------|---------------------|--------------------------|-----------|
| | Children's Health Domain | | | | | | Reproductive Health Domain | | | Cancer Prevention Domain | | Chronic Disease Management | | Behavioral Health Domain | |
| | CIS-10 | IMA-2 | LSC | W30-6 | W30-2 | WCV | CHL-Tot | PPC-Post | PPC-Pre | BCS | CCS | CBP | HBD-H9 ⁸ | FUA-30Day | FUM-30Day |
| Blue Cross of California Partnership Plan, Inc., DBA Anthem Blue Cross Partnership Plan | 29.93% | 29.68% | 53.04% | 49.10% | 69.45% | 45.49% | 49.66% | 87.60% | 89.60% | 43.35% | 49.39% | 61.56% | 33.58% | 34.23% | 59.71% |
| California Health & Wellness Plan | 31.14% | 28.95% | 39.66% | 51.10% | 66.10% | 44.61% | 53.23% | 82.19% | 92.24% | 47.67% | 52.80% | 62.63% | 32.22% | 33.93% | 51.28% |
| NCQA 2023 50th percentile | 30.90% | 34.30% | 63% | 58.38% | 66.76% | 48.07% | 56.04% | 78.10% | 84.23% | 52.20% | 57.11% | 61.31% | 37.96% | 36.34% | 54.87% |

