

NC Medicaid Quality Measure Performance and Targets for the AMH Measure Set

Table of Contents

- Table 1. Overall NC Medicaid Performance (2020-2024) and Targets (2022-2026)
- Table 2. Overall NC Medicaid Performance (2024) and Targets (2026)
- Table 3. Aggregate Standard Plan Performance (2021-2023) and Targets (2023-2025)
- Table 4. Aggregate Standard Plan Performance (2024) and Targets (2026)
- Table 5. Aggregate Tailored Plan Performance (2024) and Targets (2026)
- Table 6. Amerihealth 2022-2024 Performance and 2024-2025 Targets
- Table 7. Carolina Complete Health 2022-2024 Performance and 2024-2025 Targets
- Table 8. Healthy Blue 2022-2024 Performance and 2024-2025 Targets
- Table 9. United Healthcare 2022-2024 Performance and 2024-2025 Targets
- Table 10. WellCare 2022-2024 Performance and 2024-2025 Targets
- Table 11. Amerihealth, Standard Plan Performance (2024) and Targets (2026)
- Table 12. Carolina Complete Health, Standard Plan Merged Performance (2024) and Targets (2026)
- Table 13. Healthy Blue, Standard Plan Performance (2024) and Targets (2026)
- Table 14. United Healthcare, Standard Plan Performance (2024) and Targets (2026)
- Table 15. Overall NC Medicaid Race and Ethnicity Comparison
- Table 16. Standard Plan Aggregate Priority Population Improvement Targets
- Table 17. Amerihealth Race and Ethnicity Comparison
- Table 18. Carolina Complete Health Race and Ethnicity Comparison
- Table 19. Healthy Blue Race and Ethnicity Comparison
- Table 20. United Healthcare Race and Ethnicity Comparison

Updated April 2026

Introduction

To ensure delivery of high-quality care, the North Carolina Department of Health and Human Services (hereafter referred to as “The Department”) has developed the NC Medicaid Managed Care Quality Strategy and identified a set of quality metrics that it will use to assess Health Plans’ performance across their populations. The Department has identified a subset of these measures for Health Plans to use to monitor Advanced Medical Home (AMH) performance and calculate AMH performance incentive payments, known as the AMH Measure Set. Measures in this set were selected for their relevance to primary care and care coordination.

All quality measures that each Health Plan incorporates into its contracts with AMH practices (all Tiers) must be taken from the AMH Measure Set. While Health Plans are not required to use all of the AMH measures, any quality measure they choose must be drawn from this set. Health Plans are required to offer opportunities for performance incentive payments to Tier 3 AMHs, whereas offering incentives to Tier 1 and Tier 2 AMHs is optional. Incentive programs for non-AMH providers are not limited to this measure set. If Health Plans and AMHs choose to use measures for which clinical data are required (e.g., Glycemic Status Assessment for Patients With Diabetes) the Department encourages Health Plans to use consistent reporting approaches that will minimize burden on AMH practices.

This document provides baseline data and statewide targets for NC Medicaid and for Standard Plans specifically. NC Medicaid-wide performance and targets were calculated for *all* NC Medicaid beneficiaries. Standard Plan performance and targets were reported by the Standard Plans for their enrolled beneficiaries (i.e., a subset of the larger NC Medicaid population). NC Medicaid does NOT set targets for AMHs; these baseline data and targets are shared as a reference for AMHs. An AMH practice (National Provider Identifier (NPI) + location code) will have its own rate that may be above or below the baseline statewide rate and/or the Standard Plan rate. AMHs should negotiate target performance rates directly with Health Plans.

Measurement for all Department-required quality incentive programs, including AMH programs, will be aligned with calendar years. Quality measures are typically specified for measurement based on a calendar year, while the contract year for Health Plans begins July 1. Each contract year, Health Plans will submit quality performance data collected during the calendar year that began immediately before the contract year, e.g., early in contract year four (June 2025), Health Plans will submit quality performance data covering calendar year 2024.

For more information, see North Carolina's Medicaid Quality Measurement Technical Specifications Manual, available here:
<https://medicaid.ncdhhs.gov/medicaid-managed-care-quality-measurement-technical-specifications-manual/download?attachment>.

Methodology

The subsequent tables provide performance and targets for three distinct populations:

1. Overall NC Medicaid (Tables 1, 2 and 15) - this includes *all* NC Medicaid beneficiaries enrolled during the measurement year that meet the inclusion criteria for the respective measure. Starting in MY2023, limited benefit members (MCS 018,20,21,23,24,43) and dual eligibles were excluded from the eligible population.
2. Standard Plan Aggregate (Tables 3, 4 and 16) - this includes beneficiaries enrolled in a Standard Plan during the measurement year that meet continuous enrollment criteria based on each measure's specifications.
3. Tailored Plan Aggregate (Table 5) - this includes beneficiaries enrolled in a Tailored Plan at the end of measurement year 2024. Tailored Plans launched in July 2024, so individual Tailored Plan rates will not be shared until we have MY2025 results.
4. Individual Plan Performance (Tables 6-14 and 17-20) - this includes beneficiaries enrolled in the specified Standard Plan during the measurement year that meet continuous enrollment criteria with that individual plan based on each measure's specifications.

MY2019 and MY2021 data were Department-calculated based on administrative claims and encounters, with supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR) when applicable. Standard Plans launched halfway through MY2021 and, therefore, cannot be held fully accountable for MY2021 performance. However, MY2022, MY2023, and MY2024 Standard Plan data were plan-reported via operational reporting to the Department and validated by the Department's External Quality Review Organization (EQRO). This plan-reported and validated data were used for the MY2022, MY2023 and MY2024 Standard Plan aggregates and MY2022, MY2023 and MY2024 plan-specific performance. The only measures within the AMH measure set that are not plan-reported are *Plan All-Cause Readmission (PCR)* (which is calculated by our EQRO) and *Adults' Access to Preventive/Ambulatory Health Services (AAP)* (which will be plan-reported starting in MY2025).

The Department has historically emphasized inclusion of plan-reported measures that can be reported using only administrative data. However, the Electronic Clinical Data Systems (ECDS) reporting approach was accepted for measures when appropriate as indicated in the measure's specifications. The ECDS reporting method involves the use of both administrative data (such as claims/encounter data) and electronic clinical data (such as electronic health records (EHRs) and health information exchanges (HIEs)). As NCQA HEDIS transitions more measures to ECDS only reporting, the Standard Plan reporting will reflect that.

Each table should be read independently, as corresponding footnotes only apply to the associated table above. An asterisk (*) symbol indicates that data is not yet available for the measure. A (+) symbol indicates that clinical data needed to accurately report the measure is not yet available. A designation of NR appears for measures where a rate was not reported.

Targeting Methodology

The Department has developed a performance benchmarking approach for use in quality measurement. Performance benchmarks are used to drive plan and Department conversations around quality and performance. For MY2023, MY2024, and MY2025 targets, where a reference-year line-of-business performance was available, the Department used a 5% relative improvement formula: (Prior Year Line-of-Business Performance % * 1.05). Starting with 2026 targets, the Department is utilizing a new methodology called Gap-to-Goal. Targets will now be set based on a 10% gap reduction between baseline performance and an external benchmark (either the 50th or 90th national Medicaid percentiles): Target = Baseline + [(goal - baseline) * 0.10]. Targets will have a floor and a ceiling to adjust for cases when gap-to-goal targets result in either very small or very large improvement levels for plans. The minimum relative improvement required is 2% and will only apply to measures with the 50th percentile goal. The maximum relative improvement required is 10%. This approach is more responsive to measure specific national trends and was developed in collaboration with the health plans. Prior year performance refers to the most recent year of measure results that allow for 90-days of claims runout and 90-days for measure production/reporting. For example, MY2023 data are used to set 2025 targets.

[Visit the NC Medicaid Quality Measurement Technical Specifications Manual for more details on the gap-to-goal targeting methodology.](#)

Race and Ethnicity Comparison Methodology

The Department will stratify all measures, with sufficient data quality, by three demographic stratifications: Black and African American binary, American Indian and Alaskan Native Binary, and Hispanic and Latino binary (see Tables 15-21). For any measure with an identified disparity, defined as greater than or equal to 10% relative difference in performance between the priority population and the reference group, the Department will set a priority population specific target. Starting with 2026 targets, the priority population targets will be set using the gap-to-goal methodology. The goal for the priority population will be the same as the goal used for the overall measure. The Department is not identifying disparities or setting disparities targets in instances where the priority is performing better than the reference group.

For measures where a higher rate indicates better performance, a disparity exists when: $((\text{Reference Group Performance \%} - \text{Priority Population Performance \%}) / \text{Reference Group Performance \%})$ is greater than or equal to 10%.

For measures where a lower rate indicates better performance, a disparity exists when: $((\text{Priority Population Performance \%} - \text{Reference Group \%}) / \text{Reference Group Performance \%})$ is greater than or equal to 10%. When a disparity is identified, the associated target for the priority population is: $(\text{Priority Population's Performance \%} * 1.10)$.

Note: For MY2024 results, the Department included administrative Glycemic Status Assessment for Patients with Diabetes (GSD) rates in aggregate and plan-level tables, but did not include GSD results in aggregate or plan-level disparity analysis due to the concerns with administrative data completeness.

[Visit the NC Medicaid Quality Measurement Technical Specifications Manual for more details on the gap-to-goal targeting methodology.](#)

Table 1. Overall NC Medicaid Performance (2019-2024) and Targets (2022-2025)¹

CBE#	Measure Name ²	2021 Rate	2022 Rate	2023 Rate	2024 Rate	2023 Target	2024 Target	2025 Target
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)³	N/A	N/A	N/A	67.92%	N/A	N/A	N/A
0032	Cervical Cancer Screening (CCS-E)	40.72%	38.47%	42.67%	41.95%	46.01%	46.01%	44.80%
0038	Childhood Immunization Status (CIS-E) -- Combination 10	34.30%	28.65%	24.54%	23.72%	36.77%	36.77%	N/A ¹¹
1516	Child and Adolescent Well-Care Visits (WCV)⁴							
	Ages 3-11	N/A	N/A	N/A	61.21%	N/A	N/A	N/A
	Ages 12-17	N/A	N/A	N/A	53.50%	N/A	N/A	N/A
	Ages 18-21	N/A	N/A	N/A	28.50%	N/A	N/A	N/A
	Total (Ages)	47.80%	48.49%	51.51%	53.21%	50.19%	50.19%	54.09%
0033	Chlamydia Screening (CHL)							
	Ages 16 to 20	52.96%	53.04%	56.08%	58.20%	57.67%	57.67%	58.88%
	Ages 21 to 24	62.15%	61.16%	63.92%	65.07%	67.08%	67.08%	67.12%
	Total (All Ages)	56.79%	56.61%	59.50%	61.07%	61.13%	61.13%	62.48%
0034	Colorectal Cancer Screening (COL-E)⁵	N/A	N/A	22.58%	25.38%	N/A	N/A	23.71%
0018	Controlling High Blood Pressure (CBP)⁶	24.62%	40.92%	50.41%	56.14%	25.85%	42.97%	52.93%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁷							
	Glycemic Status (<8.0%)	†	See footnote 7	See footnote 7	34.55%	N/A	N/A	N/A
	Glycemic Status (>9.0%)	†	See footnote 7	See footnote 7	60.13%	N/A	N/A	N/A
1407	Immunizations for Adolescents (IMA-E) -- Combination 2	30.29%	29.63%	29.73%	31.08%	33.13%	33.13%	32.63%
1768	Plan All-Cause Readmissions (PCR)⁸	0.93	0.77	0.77	1.00	0.88	0.73	0.73
1517	Prenatal and Postpartum Care (PPC)⁹							
	Timeliness of Prenatal Care	39.50%	41.86%	43.92%	46.51%	N/A	43.95%	46.12%
	Postpartum Care	53.73%	60.79%	60.71%	64.62%	N/A	63.83%	68.83%
0418/ 0418e	Screening for Depression and Follow-Up Plan (CDF)							
	Ages 12 to 17	†	†	†	†	N/A	N/A	N/A
	Ages 18+	†	†	†	†	N/A	N/A	N/A
	Total (All Ages)	†	†	†	†	N/A	N/A	N/A
N/A	Total Cost of Care¹⁰	*	*	*	*	N/A	N/A	N/A
1392	Well-Child Visits in the First 30 Months of Life (W30)							
	First 15 Months	62.06%	61.56%	63.54%	64.49%	68.99%	68.99%	66.72%
	15-30 Months	66.44%	66.75%	68.98%	71.02%	69.76%	69.76%	72.43%

¹ MY2023 & MY2024 results excluded beneficiaries with limited benefits (MCS018,20,21,23,24,43) and dual eligibles.

² For overall NC Medicaid MY2024 rates, the following measures transitioned to ECDS reporting: CCS-E, COL-E, CIS-E, and IMA-E.

³ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁴ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁵ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁶ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries.

⁷ In MY2024, the *HbA1c Control for Patients with Diabetes (HBD)* measure changed to *Glycemic Status Assessment for Patients with Diabetes (GSD)*. This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For Glycemic Status (>9%), a lower rate indicates better performance.

⁸ For this measure, a lower observed to expected ratio indicates better performance.

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

¹⁰ The Department released an interactive dashboard in April 2024 for providers to access total cost of care information based on HealthPartners' Total Cost of Care measure. This dashboard was decommissioned in September 2025.

¹¹ MY2025 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 2. Overall NC Medicaid Performance (2024) and Targets (2026)¹

CBE#	Measure Name ²	2024 Rate	Goal ³	Final 2026 Target ⁴
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)⁵	67.92%	National Medicaid 50th Percentile	69.28%
0032	Cervical Cancer Screening (CCS-E)	41.95%	National Medicaid 50th Percentile	42.99%
0038	Childhood Immunization Status (CIS-E) -- Combination 10	23.72%	National Medicaid 50th Percentile	N/A ¹¹
1516	Child and Adolescent Well-Care Visits (WCV)⁶			
	Ages 3-11	61.21%	National Medicaid 90th Percentile	62.43%
	Ages 12-17	53.50%	National Medicaid 90th Percentile	54.57%
	Ages 18-21	28.50%	National Medicaid 90th Percentile	29.07%
	Total (Ages)	53.21%	National Medicaid 90th Percentile	54.27%
0033	Chlamydia Screening (CHL)			
	Ages 16 to 20	58.20%	National Medicaid 90th Percentile	59.27%
	Ages 21 to 24	65.07%	National Medicaid 90th Percentile	65.82%
	Total (All Ages)	61.07%	National Medicaid 90th Percentile	62.03%
0034	Colorectal Cancer Screening (COL-E)⁷	25.38%	National Medicaid 50th Percentile	26.98%
0018	Controlling High Blood Pressure (CBP)⁸	56.14%	National Medicaid 50th Percentile	57.31%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁹			
	Glycemic Status (<8.0%)-Admin	34.55%	National Medicaid 50th Percentile	37.15%
	Glycemic Status (>9.0%)-Admin	60.13%	National Medicaid 50th Percentile	57.16%
1407	Immunizations for Adolescents (IMA-E) -- Combination 2	31.08%	National Medicaid 50th Percentile	31.62%
1517	Prenatal and Postpartum Care (PPC)¹⁰			
	Timeliness of Prenatal Care	46.51%	National Medicaid 50th Percentile	50.50%
	Postpartum Care	64.62%	National Medicaid 50th Percentile	66.41%
1392	Well-Child Visits in the First 30 Months of Life (W30)			
	First 15 Months	64.49%	National Medicaid 90th Percentile	65.21%
	15-30 Months	71.02%	National Medicaid 90th Percentile	71.15%

¹ MY2023 & MY2024 results excluded beneficiaries with limited benefits (MCS018,20,21,23,24,43) and dual eligibles.

² For overall NC Medicaid MY2024 rates, the following measures transitioned to ECDS reporting: CCS-E, COL-E, CIS-E, and IMA-E.

³ The MY2024 NCQA Quality Compass National Medicaid All Lines of Business 50th percentile will serve as the goal for measures where baseline total NC Medicaid performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid All Lines of Business 90th percentile will serve as the goal for measures where baseline total NC Medicaid performance is at or above the 50th percentile.

⁴ Targets are set based on NC Medicaid performance and are calculated using on a 10% gap reduction between the baseline performance and the goal. Final targets include improvement corridor adjustments if applied.

⁵ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁶ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁷ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁸ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. Despite these limitations, the Department has decided to set MY2026 targets for CBP.

⁹ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete. Therefore, this measure may not be a complete representation of overall performance. Despite these limitations, the Department has decided to set MY2026 targets for GSD administrative rates. For Glycemic Status (>9%), a lower rate indicates better performance

¹⁰ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

¹¹ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 3. Aggregate Standard Plan Performance (2021-2023) and Targets (2023-2025)¹

CBE#	Measure Name	2021 Rate	2022 Rate	2023 Rate	2024 Rate ¹¹	2023 Target	2024 Target	2025 Target
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)²	N/A	N/A	N/A	66.25%	N/A	N/A	N/A
0032	Cervical Cancer Screening (CCS)	52.42%	49.03%	53.66%	48.16%	55.04%	55.04%	56.34%
0038	Childhood Immunization Status (CIS) -- Combination 10	34.15%	26.44%	25.11%	24.58%	35.85%	35.85%	N/A ¹⁰
1516	Child and Adolescent Well-Care Visits (WCV)³							
	Ages 3-11	N/A	N/A	N/A	63.82%	N/A	N/A	N/A
	Ages 12-17	N/A	N/A	N/A	56.25%	N/A	N/A	N/A
	Ages 18-21	N/A	N/A	N/A	30.74%	N/A	N/A	N/A
	Total (Ages)	48.46%	50.77%	53.94%	56.27%	50.88%	53.31%	56.64%
0033	Chlamydia Screening (CHL)							
	Ages 16 to 20	52.90%	54.05%	58.16%	59.75%	55.55%	55.55%	61.07%
	Ages 21 to 24	65.73%	64.38%	66.88%	67.57%	69.02%	69.02%	70.22%
	Total (All Ages)	57.73%	58.24%	61.52%	62.92%	60.62%	61.15%	64.60%
0034	Colorectal Cancer Screening (COL-E)⁴	N/A	N/A	31.49%	36.79%	N/A	N/A	33.06%
0018	Controlling High Blood Pressure (CBP)⁵	24.51%	See footnote 5	See footnote 5	47.79%	N/A	N/A	N/A
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁶							
	Glycemic Status (<8.0%)	†	See footnote 6	See footnote 6	36.37%	N/A	N/A	N/A
	Glycemic Status (>9.0%)	†	See footnote 6	See footnote 6	58.30%	N/A	N/A	N/A
1407	Immunizations for Adolescents (IMA) -- Combination 2	29.94%	29.34%	29.94%	31.71%	31.44%	31.44%	31.44%
1768	Plan All-Cause Readmissions (PCR)⁷	N/A	0.81	0.79	0.96	N/A	0.77	0.75
1517	Prenatal and Postpartum Care (PPC)⁸							
	Timeliness of Prenatal Care	39.21%	51.82%	53.07%	60.38%	41.17%	54.41%	55.72%
	Postpartum Care	53.84%	64.59%	66.25%	72.11%	56.53%	67.82%	69.56%
0418/ 0418e	Screening for Depression and Follow-Up Plan (CDF)							
	Ages 12 to 17	†	†	†	†	N/A	N/A	N/A
	Ages 18+	†	†	†	†	N/A	N/A	N/A
	Total (All Ages)	†	†	†	†	N/A	N/A	N/A
N/A	Total Cost of Care (TCOC)⁹	*	*	*	*	N/A	N/A	N/A
1392	Well-Child Visits in the First 30 Months of Life (W30)							
	First 15 Months	62.23%	63.02%	66.44%	68.25%	65.34%	66.17%	69.76%
	15-30 Months	66.10%	69.05%	70.76%	73.28%	69.41%	72.50%	74.30%

¹ 2021 data was Department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Standard Plans only existed for half of measurement year 2021 and, therefore, cannot be held fully accountable for MY2021 performance. MY2022, MY2023 and MY2024 data were plan-reported via operational reporting to the Department. The Standard Plan aggregates in this table represent the sum of all Standard Plan reported data.

² AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are department-calculated, not plan reported. Plan-reported data for AAP will be available starting in MY2025. †

³ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁴ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁵ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2023, the Standard Plan aggregate for Controlling High Blood Pressure (CBP) using the administrative methodology was 33.78%.

⁶ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For Glycemic Status (>9%), a lower rate indicates better performance.

⁷ For this measure, a lower observed to expected ratio indicates better performance.

⁸ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

⁹ The Department released an interactive dashboard in April 2024 for providers to access total cost of care information based on HealthPartners' Total Cost of Care measure. This dashboard was decommissioned in September 2025.

¹⁰ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

¹¹ The administrative version of CIS, IMA and CCS were used for Standard Plan Aggregate, as not all five standard plans reported ECDS versions in MY2024.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 4. Aggregate Standard Plan Performance (2024) and Targets (2026)¹

CBE#	Measure Name	2024 Rate ²	Goal ³	Final 2026 Target ⁴
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)⁵	66.25%	National Medicaid HMO 50th Percentile	67.58%
0032	Cervical Cancer Screening (CCS)	48.16%	National Medicaid HMO 50th Percentile	49.16%
0038	Childhood Immunization Status (CIS) -- Combination 10⁶	24.58%	National Medicaid HMO 50th Percentile	N/A
1516	Child and Adolescent Well-Care Visits (WCV)⁷			
	Ages 3-11	63.82%	National Medicaid HMO 90th Percentile	65.10%
	Ages 12-17	56.25%	National Medicaid HMO 90th Percentile	57.38%
	Ages 18-21	30.74%	National Medicaid HMO 90th Percentile	31.35%
	Total (Ages)	56.27%	National Medicaid HMO 90th Percentile	57.41%
0033	Chlamydia Screening (CHL)			
	Ages 16 to 20	59.75%	National Medicaid HMO 90th Percentile	60.66%
	Ages 21 to 24	67.57%	National Medicaid HMO 90th Percentile	68.07%
	Total (All Ages)	62.92%	National Medicaid HMO 90th Percentile	63.70%
0034	Colorectal Cancer Screening (COL-E)⁸	36.79%	National Medicaid HMO 50th Percentile	37.53%
0018	Controlling High Blood Pressure (CBP)⁹	47.79%	National Medicaid HMO 50th Percentile	49.80%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)¹⁰			
	Glycemic Status (<8.0%)- Admin	36.37%	National Medicaid HMO 50th Percentile	38.79%
	Glycemic Status (>9.0%)- Admin	58.30%	National Medicaid HMO 50th Percentile	55.51%
1407	Immunizations for Adolescents (IMA) -- Combination 2	31.71%	National Medicaid HMO 50th Percentile	32.34%
1517	Prenatal and Postpartum Care (PPC)¹¹			
	Timeliness of Prenatal Care	60.38%	National Medicaid HMO 50th Percentile	62.98%
	Postpartum Care	72.11%	National Medicaid HMO 50th Percentile	73.55%
1392	Well-Child Visits in the First 30 Months of Life (W30)			
	First 15 Months	68.25%	National Medicaid HMO 90th Percentile	68.60%
	15-30 Months	73.28%	National Medicaid HMO 90th Percentile	74.16%

¹ 2021 data was department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Standard Plans only existed for half of measurement year 2021 and, therefore, cannot be held fully accountable for MY2021 performance. MY2022, MY2023 and MY2024 data were plan-reported via operational reporting to the Department. The Standard Plan aggregates in this table represent the sum of all Standard Plan reported data.

² The administrative version of CIS, IMA and CCS were used for Standard Plan Aggregate, as not all five standard plans reported ECDS versions in MY2024.

³ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile.

⁴ Targets are set based on Aggregate Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Aggregate Standard Plan performance and the goal. Final targets include improvement corridor adjustments if applied.

⁵ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan reported. Plan-reported data for AAP will be available starting in MY2025.

⁶ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁷ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁸ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁹ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. Despite these limitations, the Department has decided to set MY2026 targets for CBP.

¹⁰ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete. Therefore, this measure may not be a complete representation of overall performance. Despite these limitations, the Department has decided to set MY2026 targets for GSD administrative rates. For Glycemic Status (>9%), a lower rate indicates better performance

¹¹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 5. Aggregate Tailored Plan Performance (2024) and Targets (2026)¹

CBE#	Measure Name	2024 Rate ²	Goal ³	Final 2026 Target ⁴
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)⁵	N/A	N/A	N/A
0032	Cervical Cancer Screening (CCS-E)	39.89%	National Medicaid HMO 50th Percentile	41.13%
0038	Childhood Immunization Status (CIS-E) -- Combination 10⁶	27.71%	National Medicaid HMO 90th Percentile	N/A
1516	Child and Adolescent Well-Care Visits (WCV)⁷			
	Ages 3-11	66.00%	National Medicaid HMO 90th Percentile	66.74%
	Ages 12-17	52.90%	National Medicaid HMO 50th Percentile	53.96%
	Ages 18-21	30.01%	National Medicaid HMO 50th Percentile	30.61%
	Total (Ages)	53.52%	National Medicaid HMO 50th Percentile	54.59%
0033	Chlamydia Screening (CHL)			
	Ages 16 to 20	55.84%	National Medicaid HMO 90th Percentile	57.14%
	Ages 21 to 24	61.17%	National Medicaid HMO 50th Percentile	62.40%
	Total (All Ages)	57.69%	National Medicaid HMO 90th Percentile	58.98%
0034	Colorectal Cancer Screening (COL-E)⁸	26.40%	National Medicaid HMO 50th Percentile	27.90%
0018	Controlling High Blood Pressure (CBP)⁹	56.33%	National Medicaid HMO 50th Percentile	57.49%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)¹⁰			
	Glycemic Status (<8.0%)- Admin	33.03%	National Medicaid HMO 50th Percentile	35.79%
	Glycemic Status (>9.0%)- Admin	62.61%	National Medicaid HMO 50th Percentile	59.39%
1407	Immunizations for Adolescents (IMA-E) -- Combination 2	30.80%	National Medicaid HMO 50th Percentile	31.42%
1517	Prenatal and Postpartum Care (PPC)¹¹			
	Timeliness of Prenatal Care	46.80%	National Medicaid HMO 50th Percentile	50.76%
	Postpartum Care	51.42%	National Medicaid HMO 50th Percentile	54.53%
1392	Well-Child Visits in the First 30 Months of Life (W30)			
	First 15 Months	55.07%	National Medicaid HMO 50th Percentile	56.17%
	15-30 Months	83.07%	National Medicaid HMO 90th Percentile	83.90%

¹ MY2024 data was department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Tailored Plans only existed for half of MY2024, so the Department does not have plan-reported data for MY2024.

² The ECDS version of CIS, IMA, COL and CCS were used to calculate the Tailored Plan Aggregate for MY2024.

³ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Tailored Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Tailored Plan Aggregate performance is at or above the 50th percentile.

⁴ Targets are set based on Aggregate Tailored Plan performance and are calculated using on a 10% gap reduction between the baseline Aggregate Tailored Plan performance and the goal. Final targets include improvement corridor adjustments if applied.

⁵ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. However, AAP was not added to the Tailored Plan measure set until MY2025, so results for this measure are suppressed for MY2024.

⁶ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁷ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁸ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁹ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. Despite these limitations, the Department has decided to set MY2026 targets for CBP.

¹⁰ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete. Therefore, this measure may not be a complete representation of overall performance. Despite these limitations, the Department has decided to set MY2026 targets for GSD administrative rates. For Glycemic Status (>9%), a lower rate indicates better performance.

¹¹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 6. Amerihealth 2022-2024 Performance and 2024-2025 Targets¹

CBE#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)²	N/A	N/A	62.32%	N/A	N/A
0032	Cervical Cancer Screening (CCS)					
	Administrative Methodology	45.88%	54.14%	49.60%	48.17%	56.85%
	ECDS Methodology	N/A	N/A	NR	N/A	N/A
1516	Child and Adolescent Well-Care Visits (WCV)³					
	Ages 3-11	N/A	N/A	62.69%	N/A	N/A
	Ages 12-17	N/A	N/A	54.95%	N/A	N/A
	Ages 18-21	N/A	N/A	29.61%	N/A	N/A
	Total (Ages)	50.15%	53.61%	55.10%	52.66%	56.29%
0038	Childhood Immunization Status (CIS) -- Combination 10⁴					
	Administrative Methodology	23.90%	23.45%	24.68%	25.10%	N/A
	ECDS Methodology	N/A	N/A	NR	N/A	N/A
0033	Chlamydia Screening (CHL)					
	Ages 16 to 20	54.31%	58.97%	59.99%	57.03%	61.92%
	Ages 21 to 24	65.03%	67.81%	67.57%	68.28%	71.20%
	Total (All Ages)	58.34%	61.46%	62.99%	61.26%	64.53%
0034	Colorectal Cancer Screening (COL-E)⁵	N/A	29.49%	35.05%	N/A	30.96%
0018	Controlling High Blood Pressure (CBP)⁶					
	Administrative Methodology	See footnote ⁶	See footnote ⁶	See footnote ⁶	N/A	N/A
	Hybrid Methodology	48.42%	59.85%	70.35%	N/A	N/A
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁷					
	Glycemic Status (<8.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (>9.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (<8.0%)- Hybrid	33.82%	45.26%	58.88%	N/A	N/A
	Glycemic Status (>9.0%)- Hybrid	58.88%	47.69%	32.85%	N/A	N/A
1407	Immunizations for Adolescents (IMA) -- Combination 2					
	Administrative Methodology	27.27%	28.13%	29.92%	28.63%	29.54%
	ECDS Methodology	N/A	N/A	NR	N/A	N/A
1768	Plan All-Cause Readmissions (PCR)⁸	0.85	0.80	0.92	0.81	0.76
1517	Prenatal and Postpartum Care (PPC)⁹					
	Timeliness of Prenatal Care	55.66%	58.21%	68.19%	58.44%	61.12%
	Postpartum Care	64.97%	67.37%	75.44%	68.22%	70.74%

CBE#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
0418/ 0418e	Screening for Depression and Follow-Up Plan (CDF)					
	Ages 12 to 17	†	†	†	N/A	N/A
	Ages 18+	†	†	†	N/A	N/A
	Total (All Ages)	†	†	†	N/A	N/A
N/A	Total Cost of Care (TCOC)¹⁰	*	*	*	N/A	N/A
1392	Well-Child Visits in the First 30 Months of Life (W30)					
	First 15 Months	62.01%	66.32%	68.28%	65.11%	69.64%
	15-30 Months	66.76%	70.30%	72.75%	70.10%	73.82%

NR indicates that the rate using the hybrid methodology was not reported. Hybrid reporting was not required for MY2022 or MY2023. ECDS reporting was not required for CIS, IMA, and CCS in MY2024.

¹ 2021 data was department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Standard Plans only existed for half of measurement year 2021 and, therefore, cannot be held fully accountable for MY2021 performance. MY2022, MY2023 and MY2024 data was plan-reported via operational reporting to the Department.

² AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

³ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁴ MY2025 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁶ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, Amerihealth's performance for Controlling High Blood Pressure (CBP) using the administrative methodology was 52.10%.

⁷ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, Amerihealth's performance using the administrative methodology was 41.16% for GSD glycemic status (<8.0%) and 52.98% for glycemic status (>9.0%) - for the latter indicator, a lower rate indicates better performance.

⁸ For this measure, a lower observed to expected ratio indicates better performance.

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

¹⁰ The Department released an interactive dashboard in April 2024 for providers to access total cost of care information based on HealthPartners' Total Cost of Care measure. This dashboard was decommissioned in September 2025.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 7. Carolina Complete Health 2022-2024 Performance and 2024-2025 Targets¹**

** Carolina Complete merged with WellCare in April 2026. To more accurately set MY2026 targets, merged rates were calculated for MY2024. Please refer to Table 12 for the merged Carolina Complete Health MY2024 rates and MY2026 targets.

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)²	N/A	N/A		N/A	N/A
0032	Cervical Cancer Screening (CCS)					
	Administrative Methodology	50.93%	54.14%		53.48%	56.85%
	ECDS Methodology	N/A	N/A		N/A	N/A
1516	Child and Adolescent Well-Care Visits (WCV)³					
	Ages 3-11	N/A	N/A		N/A	N/A
	Ages 12-17	N/A	N/A		N/A	N/A
	Ages 18-21	N/A	N/A		N/A	N/A
	Total (Ages)	50.33%	54.03%		52.85%	56.73%
0038	Childhood Immunization Status (CIS) -- Combination 10⁴					
	Administrative Methodology	27.06%	25.04%		28.41%	N/A
	ECDS Methodology	N/A	N/A		N/A	N/A
0033	Chlamydia Screening (CHL)					
	Ages 16 to 20	58.02%	62.54%		60.92%	65.67%
	Ages 21 to 24	65.33%	68.89%		68.60%	72.33%
	Total (All Ages)	61.07%	64.39%		64.12%	67.61%
0034	Colorectal Cancer Screening (COL-E)⁵	N/A	30.65%		N/A	32.18%
0018	Controlling High Blood Pressure (CBP)⁶					
	Administrative Methodology	See footnote ⁶	See footnote ⁶	See footnote ⁶	N/A	N/A
	Hybrid Methodology	41.85%	57.42%		N/A	N/A
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁷					
	Glycemic Status (<8.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (>9.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (<8.0%)- Hybrid	36.01%	47.69%		N/A	N/A
	Glycemic Status (>9.0%)- Hybrid	57.42%	43.80%		N/A	N/A
1407	Immunizations for Adolescents (IMA) -- Combination 2					
	Administrative Methodology	31.60%	32.28%		33.18%	33.89%
	ECDS Methodology	N/A	N/A		N/A	N/A
1768	Plan All-Cause Readmissions (PCR)⁸	0.83	0.79		0.79	0.75
1517	Prenatal and Postpartum Care (PPC)⁹					
	Timeliness of Prenatal Care	51.88%	55.13%		54.47%	57.89%
	Postpartum Care	63.33%	65.58%		66.50%	68.86%

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
0418/ 0418e	Screening for Depression and Follow-Up Plan (CDF)					
	Ages 12 to 17	†	†	†	N/A	N/A
	Ages 18+	†	†	†	N/A	N/A
	Total (All Ages)	†	†	†	N/A	N/A
N/A	Total Cost of Care (TCOC)¹⁰	*	*	*	N/A	N/A
1392	Well-Child Visits in the First 30 Months of Life (W30)					
	First 15 Months	64.62%	67.11%		67.85%	70.47%
	15-30 Months	68.64%	69.92%		72.07%	73.42%

NR indicates that the rate using the hybrid methodology was not reported. Hybrid reporting was not required for MY2022 or MY2023. ECDS reporting was not required for CIS, IMA, and CCS in MY2024.

¹ 2021 data was department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Standard Plans only existed for half of measurement year 2021 and, therefore, cannot be held fully accountable for MY2021 performance. MY2022, MY2023 and MY2024 data was plan-reported via operational reporting to the Department.

² AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

³ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁴ MY2025 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁶ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, Carolina Complete's performance for Controlling High Blood Pressure (CBP) using the administrative methodology was 46.81%.

⁷ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, Carolina Complete Health's performance using the administrative methodology was 36.46% for glycemic status (<8.0%) and 58.29% for glycemic status (>9.0%) - for the latter indicator, a lower rate indicates better performance.

⁸ For this measure, a lower observed to expected ratio indicates better performance.

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

¹⁰ The Department released an interactive dashboard in April 2024 for providers to access total cost of care information based on HealthPartners' Total Cost of Care measure. This dashboard was decommissioned in September 2025.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 8. Healthy Blue 2022-2024 Performance and 2024-2025 Targets¹

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)²	N/A	N/A	69.73%	N/A	N/A
0032	Cervical Cancer Screening (CCS)					
	Administrative Methodology	50.04%	52.50%	46.77%	52.54%	55.13%
	ECDS Methodology	N/A	N/A	47.89%	N/A	N/A
1516	Child and Adolescent Well-Care Visits (WCV)³					
	Ages 3-11	N/A	N/A	64.96%	N/A	N/A
	Ages 12-17	N/A	N/A	57.82%	N/A	N/A
	Ages 18-21	N/A	N/A	31.56%	N/A	N/A
	Total (Ages)	53.69%	55.43%	57.28%	56.37%	58.20%
0038	Childhood Immunization Status (CIS) -- Combination 10⁴					
	Administrative Methodology	26.48%	25.30%	23.19%	27.80%	N/A
	ECDS Methodology	N/A	N/A	23.38%	N/A	N/A
0033	Chlamydia Screening (CHL)					
	Ages 16 to 20	51.86%	57.53%	56.67%	54.45%	60.41%
	Ages 21 to 24	63.50%	66.48%	65.56%	66.68%	69.80%
	Total (All Ages)	56.56%	60.21%	60.32%	59.39%	63.22%
0034	Colorectal Cancer Screening (COL-E)⁵	N/A	32.15%	37.10%	N/A	33.76%
0018	Controlling High Blood Pressure (CBP)⁶					
	Administrative Methodology	See footnote ⁶	See footnote ⁶	See footnote ⁶	N/A	N/A
	Hybrid Methodology	NR	59.12%	68.61%	N/A	N/A
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁷					
	Glycemic Status (<8.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (>9.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (<8.0%)- Hybrid	NR	52.55%	50.85%	N/A	N/A
	Glycemic Status (>9.0%)- Hybrid	NR	37.47%	38.69%	N/A	N/A
1407	Immunizations for Adolescents (IMA) -- Combination 2					
	Administrative Methodology	30.91%	30.13%	32.54%	32.46%	32.46%
	ECDS Methodology	N/A	N/A	32.85%	N/A	N/A
1768	Plan All-Cause Readmissions (PCR)⁸	0.73	0.74	0.99	0.69	0.69
1517	Prenatal and Postpartum Care (PPC)⁹					
	Timeliness of Prenatal Care	51.64%	53.43%	57.49%	54.22%	56.10%
	Postpartum Care	64.44%	64.80%	69.71%	67.66%	68.04%

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
0418/ 0418e	Screening for Depression and Follow-Up Plan (CDF)					
	Ages 12 to 17	†	†	†	N/A	N/A
	Ages 18+	†	†	†	N/A	N/A
	Total (All Ages)	†	†	†	N/A	N/A
N/A	Total Cost of Care (TCOC)¹⁰	*	*	*	N/A	N/A
1392	Well-Child Visits in the First 30 Months of Life (W30)					
	First 15 Months	65.34%	67.68%	68.84%	68.61%	71.06%
	15-30 Months	71.21%	72.45%	74.08%	74.77%	76.07%

NR indicates that the rate using the hybrid methodology was not reported. Hybrid reporting was not required for MY2022 or MY2023. ECDS reporting was not required for CIS, IMA, and CCS in MY2024.

¹ 2021 data was department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Standard Plans only existed for half of measurement year 2021 and, therefore, cannot be held fully accountable for MY2021 performance. MY2022, MY2023 and MY2024 data was plan-reported via operational reporting to the Department.

² AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

³ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁴ MY2025 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁶ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, Healthy Blue's performance for Controlling High Blood Pressure (CBP) using the administrative methodology was 43.63%.

⁷ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, Healthy Blue's performance using the administrative methodology was 32.12% for glycemic status (<8.0%) and 63.18% for glycemic status (>9.0%) - for the latter indicator, a lower rate indicates better performance.

⁸ For this measure, a lower observed to expected ratio indicates better performance.

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

¹⁰ The Department released an interactive dashboard in April 2024 for providers to access total cost of care information based on HealthPartners' Total Cost of Care measure. This dashboard was decommissioned in September 2025.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 9. United Healthcare 2022-2024 Performance and 2024-2025 Targets¹

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)²	N/A	N/A	66.43%	N/A	N/A
0032	Cervical Cancer Screening (CCS)					
	Administrative Methodology	45.73%	53.22%	48.18%	48.02%	55.88%
	ECDS Methodology	N/A	N/A	50.52%	N/A	N/A
1516	Child and Adolescent Well-Care Visits (WCV)³					
	Ages 3-11	N/A	N/A	62.95%	N/A	N/A
	Ages 12-17	N/A	N/A	54.72%	N/A	N/A
	Ages 18-21	N/A	N/A	29.03%	N/A	N/A
	Total (Ages)	46.70%	52.15%	55.10%	49.04%	54.76%
0038	Childhood Immunization Status (CIS) -- Combination 10⁴					
	Administrative Methodology	25.77%	24.67%	23.47%	27.06%	N/A
	ECDS Methodology	N/A	N/A	23.62%	N/A	N/A
0033	Chlamydia Screening (CHL)					
	Ages 16 to 20	53.26%	57.02%	59.82%	55.92%	59.87%
	Ages 21 to 24	63.66%	68.66%	68.38%	66.84%	72.09%
	Total (All Ages)	57.65%	60.50%	63.24%	60.53%	63.53%
0034	Colorectal Cancer Screening (COL-E)⁵	N/A	31.82%	37.46%	N/A	33.41%
0018	Controlling High Blood Pressure (CBP)⁶					
	Administrative Methodology	See footnote ⁶	See footnote ⁶	See footnote ⁶	N/A	N/A
	Hybrid Methodology	62.04%	59.61%	63.75%	N/A	N/A
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁷					
	Glycemic Status (<8.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (>9.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (<8.0%)- Hybrid	51.34%	54.50%	60.34%	N/A	N/A
	Glycemic Status (>9.0%)- Hybrid	40.88%	35.77%	34.06%	N/A	N/A
1407	Immunizations for Adolescents (IMA) -- Combination 2					
	Administrative Methodology	26.36%	28.01%	30.11%	27.68%	29.41%
	ECDS Methodology	N/A	N/A	30.25%	N/A	N/A
1768	Plan All-Cause Readmissions (PCR)⁸	0.87	0.82	1.00	0.83	0.78
1517	Prenatal and Postpartum Care (PPC)⁹					
	Timeliness of Prenatal Care	48.42%	49.82%	56.78%	50.84%	52.31%
	Postpartum Care	62.63%	66.13%	72.58%	65.76%	69.44%

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
0418/ 0418e	Screening for Depression and Follow-Up Plan (CDF)					
	Ages 12 to 17	†	†	†	N/A	N/A
	Ages 18+	†	†	†	N/A	N/A
	Total (All Ages)	†	†	†	N/A	N/A
N/A	Total Cost of Care (TCOC)¹⁰	*	*	*	N/A	N/A
1392	Well-Child Visits in the First 30 Months of Life (W30)					
	First 15 Months	58.37%	63.91%	66.35%	61.29%	67.11%
	15-30 Months	66.34%	68.42%	71.75%	69.66%	71.84%

NR indicates that the rate using the hybrid methodology was not reported. Hybrid reporting was not required for MY2022 or MY2023. ECDS reporting was not required for CIS, IMA, and CCS in MY2024.

¹ 2021 data was department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Standard Plans only existed for half of measurement year 2021 and, therefore, cannot be held fully accountable for MY2021 performance. MY2022, MY2023 and MY2024 data was plan-reported via operational reporting to the Department.

² AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

³ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁴ MY2025 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁶ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, United Healthcare's performance for Controlling High Blood Pressure (CBP) using the administrative methodology was 48.74%

⁷ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, United Healthcare's performance using the administrative methodology was 36.18% for glycemic status (<8.0%) and 58.35% for glycemic status (>9.0%) - for the latter indicator, a lower rate indicates better performance.

⁸ For this measure, a lower observed to expected ratio indicates better performance.

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

¹⁰ The Department released an interactive dashboard in April 2024 for providers to access total cost of care information based on HealthPartners' Total Cost of Care measure. This dashboard was decommissioned in September 2025.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 10. WellCare 2022-2024 Performance and 2024-2025 Targets¹**

** Carolina Complete merged with WellCare in April 2026. To more accurately set MY2026 targets, merged rates were calculated for MY2024. Please refer to Table 12 for the merged Carolina Complete Health MY2024 rates and MY2026 targets.

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)²	N/A	N/A		N/A	N/A
0032	Cervical Cancer Screening (CCS)					
	Administrative Methodology	52.86%	55.34%		55.50%	58.11%
	ECDS Methodology	N/A	N/A		N/A	N/A
1516	Child and Adolescent Well-Care Visits (WCV)³					
	Ages 3-11	N/A	N/A		N/A	N/A
	Ages 12-17	N/A	N/A		N/A	N/A
	Ages 18-21	N/A	N/A		N/A	N/A
	Total (Ages)	52.11%	53.76%		54.72%	56.45%
0038	Childhood Immunization Status (CIS) -- Combination 10⁴					
	Administrative Methodology	28.60%	26.44%		30.03%	N/A
	ECDS Methodology	N/A	N/A		N/A	N/A
0033	Chlamydia Screening (CHL)					
	Ages 16 to 20	55.34%	60.07%		58.11%	63.07%
	Ages 21 to 24	65.44%	68.77%		68.71%	72.21%
	Total (All Ages)	59.38%	62.73%		62.35%	65.87%
0034	Colorectal Cancer Screening (COL-E)⁵	N/A	32.20%		N/A	33.81%
0018	Controlling High Blood Pressure (CBP)⁶					
	Administrative Methodology	See footnote ⁶	See footnote ⁶	See footnote ⁶	N/A	N/A
	Hybrid Methodology	56.83%	64.48%		N/A	N/A
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁷					
	Glycemic Status (<8.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (>9.0%)	See footnote ⁷	See footnote ⁷	See footnote ⁷	N/A	N/A
	Glycemic Status (<8.0%)- Hybrid	53.04%	57.91%		N/A	N/A
	Glycemic Status (>9.0%)- Hybrid	46.96%	34.06%		N/A	N/A
1407	Immunizations for Adolescents (IMA) -- Combination 2					
	Administrative Methodology	30.79%	31.55%		32.33%	33.13%
	ECDS Methodology	N/A	N/A		N/A	N/A
1768	Plan All-Cause Readmissions (PCR)⁸	0.80	0.81		0.76	0.76
1517	Prenatal and Postpartum Care (PPC)⁹					
	Timeliness of Prenatal Care	53.48%	50.62%		56.15%	56.15%
	Postpartum Care	67.72%	67.99%		71.11%	71.39%

NQF#	Measure Name	2022 Rate	2023 Rate	2024 Rate	2024 Target	2025 Target
0418/ 0418e	Screening for Depression and Follow-Up Plan (CDF)					
	Ages 12 to 17	†	†	†	N/A	N/A
	Ages 18+	†	†	†	N/A	N/A
	Total (All Ages)	†	†	†	N/A	N/A
N/A	Total Cost of Care (TCOC)¹⁰	*	*	*	N/A	N/A
1392	Well-Child Visits in the First 30 Months of Life (W30)					
	First 15 Months	64.56%	66.79%		67.79%	70.13%
	15-30 Months	71.22%	71.59%		74.78%	75.17%

NR indicates that the rate using the hybrid methodology was not reported. Hybrid reporting was not required for MY2022 or MY2023. ECDS reporting was not required for CIS, IMA, and CCS in MY2024.

¹ 2021 data was department-calculated based on administrative claims and encounters, with the option of using supplemental data from NC HealthConnex and the North Carolina Immunization Registry (NCIR). Standard Plans only existed for half of measurement year 2021 and, therefore, cannot be held fully accountable for MY2021 performance. MY2022, MY2023 and MY2024 data was plan-reported via operational reporting to the Department.

² AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

³ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁴ MY2025 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁶ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, WellCare's performance for Controlling High Blood Pressure (CBP) using the administrative methodology was 50.85%.

⁷ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. For 2024, WellCare's performance using the administrative methodology was 39.70% for glycemic status (<8.0%) and 54.50% for glycemic status (>9.0%) - for the latter indicator, a lower rate indicates better performance.

⁸ For this measure, a lower observed to expected ratio indicates better performance.

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

¹⁰ The Department released an interactive dashboard in April 2024 for providers to access total cost of care information based on HealthPartners' Total Cost of Care measure. This dashboard was decommissioned in September 2025.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 11. Amerihealth, Standard Plan Performance (2024) and Targets (2026)

CBE#	Measure Name	2024 Rate	Goal ¹	Final 2026 Target ²
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP) ³	62.32%	National Medicaid HMO 50th Percentile	63.89%
0032	Cervical Cancer Screening (CCS)	49.60%	National Medicaid HMO 50th Percentile	50.59%
0038	Childhood Immunization Status (CIS) -- Combination 10 ⁴	24.68%	National Medicaid HMO 50th Percentile	N/A
1516	Child and Adolescent Well-Care Visits (WCV) ⁵			
	Ages 3-11	62.69%	National Medicaid HMO 90th Percentile	63.76%
	Ages 12-17	54.95%	National Medicaid HMO 90th Percentile	56.15%
	Ages 18-21	29.61%	National Medicaid HMO 90th Percentile	29.85%
	Total (Ages)	55.10%	National Medicaid HMO 90th Percentile	56.35%
0033	Chlamydia Screening (CHL)			
	Ages 16 to 20	59.99%	National Medicaid HMO 90th Percentile	60.88%
	Ages 21 to 24	67.57%	National Medicaid HMO 90th Percentile	68.07%
	Total (All Ages)	62.99%	National Medicaid HMO 90th Percentile	63.76%
0034	Colorectal Cancer Screening (COL-E) ⁶	35.05%	National Medicaid HMO 50th Percentile	35.75%
0018	Controlling High Blood Pressure (CBP) ⁷	52.10%	National Medicaid HMO 50th Percentile	53.68%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD) ⁸			
	Glycemic Status (<8.0%)- Admin	41.16%	National Medicaid HMO 50th Percentile	43.10%
	Glycemic Status (>9.0%)- Admin	52.98%	National Medicaid HMO 50th Percentile	50.72%
1407	Immunizations for Adolescents (IMA) -- Combination 2	29.92%	National Medicaid HMO 50th Percentile	30.58%
1517	Prenatal and Postpartum Care (PPC) ⁹			
	Timeliness of Prenatal Care	68.19%	National Medicaid HMO 50th Percentile	70.01%
	Postpartum Care	75.44%	National Medicaid HMO 50th Percentile	76.95%
1392	Well-Child Visits in the First 30 Months of Life (W30)			
	First 15 Months	68.28%	National Medicaid HMO 90th Percentile	68.62%
	15-30 Months	72.75%	National Medicaid HMO 90th Percentile	73.69%

¹ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile.

² Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Final targets include improvement corridor adjustments if applied.

³ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

⁴ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁷ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. Despite these limitations, the

⁸ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete. Therefore, this measure may not be a complete representation of overall performance. Despite these limitations, the Department has decided to set MY2026 targets for GSD administrative rates. For Glycemic Status (>9%), a lower rate indicates better performance

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 12. (MERGED) Carolina Complete Health, Standard Plan Performance (2024) and Targets (2026)

Carolina Complete merged with WellCare in April 2026. To more accurately set MY2026 targets, merged rates were calculated for MY2024. Table 12 contains merged Carolina Complete Health MY2024 rates and MY2026 targets.

CBE#	Measure Name	2024 Rate ¹⁰	Goal ¹	Final 2026 Target ²
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP)³	65.42%	National Medicaid HMO 50th Percentile	66.73%
0032	Cervical Cancer Screening (CCS)	48.91%	National Medicaid HMO 50th Percentile	49.88%
0038	Childhood Immunization Status (CIS) -- Combination 10⁴	26.22%	National Medicaid HMO 50th Percentile	N/A
1516	Child and Adolescent Well-Care Visits (WCV)⁵			
	Ages 3-11	63.91%	National Medicaid HMO 90th Percentile	64.86%
	Ages 12-17	56.40%	National Medicaid HMO 90th Percentile	56.97%
	Ages 18-21	31.51%	National Medicaid HMO 90th Percentile	34.67%
	Total (Ages)	56.61%	National Medicaid HMO 90th Percentile	57.72%
0033	Chlamydia Screening (CHL)			
	Ages 16 to 20	62.44%	National Medicaid HMO 90th Percentile	63.08%
	Ages 21 to 24	69.01%	National Medicaid HMO 90th Percentile	69.37%
	Total (All Ages)	65.11%	National Medicaid HMO 90th Percentile	65.66%
0034	Colorectal Cancer Screening (COL-E)⁶	36.86%	National Medicaid HMO 50th Percentile	37.60%
0018	Controlling High Blood Pressure (CBP)⁷	49.45%	National Medicaid HMO 50th Percentile	51.29%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD)⁸			
	Glycemic Status (<8.0%)- Admin	38.58%	National Medicaid HMO 50th Percentile	40.78%
	Glycemic Status (>9.0%)- Admin	55.81%	National Medicaid HMO 50th Percentile	53.27%
1407	Immunizations for Adolescents (IMA) -- Combination 2	32.82%	National Medicaid HMO 50th Percentile	33.48%
1517	Prenatal and Postpartum Care (PPC)⁹			
	Timeliness of Prenatal Care	61.66%	National Medicaid HMO 50th Percentile	64.13%
	Postpartum Care	72.62%	National Medicaid HMO 50th Percentile	74.07%
1392	Well-Child Visits in the First 30 Months of Life (W30)			
	First 15 Months	68.80%	National Medicaid HMO 90th Percentile	69.09%
	15-30 Months	73.67%	National Medicaid HMO 90th Percentile	74.52%

¹ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile.

² Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Final targets include improvement corridor adjustments if applied.

³ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

⁴ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁷ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. Despite these limitations, the Department has decided to set MY2026 targets for CBP.

⁸ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete. Therefore, this measure may not be a complete representation of overall performance. Despite these limitations, the Department has decided to set MY2026 targets for GSD administrative rates. For Glycemic Status (>9%), a lower rate indicates better performance.

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 13. Healthy Blue, Standard Plan Performance (2024) and Targets (2026)

CBE#	Measure Name	2024 Rate	Goal ¹	Final 2026 Target ²
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP) ³	69.73%	National Medicaid HMO 50th Percentile	71.12%
0032	Cervical Cancer Screening (CCS)	46.77%	National Medicaid HMO 50th Percentile	47.71%
0038	Childhood Immunization Status (CIS) -- Combination 10 ⁴	23.19%	National Medicaid HMO 50th Percentile	N/A
1516	Child and Adolescent Well-Care Visits (WCV) ⁵			
	Ages 3-11	64.96%	National Medicaid HMO 90th Percentile	65.80%
	Ages 12-17	57.82%	National Medicaid HMO 90th Percentile	58.74%
	Ages 18-21	31.56%	National Medicaid HMO 90th Percentile	31.61%
	Total (Ages)	57.28%	National Medicaid HMO 90th Percentile	58.32%
0033	Chlamydia Screening (CHL)			
	Ages 16 to 20	56.67%	National Medicaid HMO 90th Percentile	57.89%
	Ages 21 to 24	65.56%	National Medicaid HMO 90th Percentile	66.27%
	Total (All Ages)	60.32%	National Medicaid HMO 90th Percentile	61.36%
0034	Colorectal Cancer Screening (COL-E) ⁶	37.10%	National Medicaid HMO 50th Percentile	37.84%
0018	Controlling High Blood Pressure (CBP) ⁷	43.63%	National Medicaid HMO 50th Percentile	46.06%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD) ⁸			
	Glycemic Status (<8.0%)- Admin	32.12%	National Medicaid HMO 50th Percentile	34.97%
	Glycemic Status (>9.0%)- Admin	63.18%	National Medicaid HMO 50th Percentile	59.90%
1407	Immunizations for Adolescents (IMA) -- Combination 2	32.54%	National Medicaid HMO 50th Percentile	33.19%
1517	Prenatal and Postpartum Care (PPC) ⁹			
	Timeliness of Prenatal Care	57.49%	National Medicaid HMO 50th Percentile	60.38%
	Postpartum Care	69.71%	National Medicaid HMO 50th Percentile	71.10%
1392	Well-Child Visits in the First 30 Months of Life (W30)			
	First 15 Months	68.84%	National Medicaid HMO 90th Percentile	69.13%
	15-30 Months	74.08%	National Medicaid HMO 90th Percentile	74.88%

¹ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile.

² Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Final targets include improvement corridor adjustments if applied.

³ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

⁴ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁷ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. Despite these limitations, the

⁸ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete. Therefore, this measure may not be a complete representation of overall performance. Despite these limitations, the Department has decided to set MY2026 targets for GSD administrative rates. For Glycemic Status (>9%), a lower rate indicates better performance

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 14. United Healthcare, Standard Plan Performance (2024) and Targets (2026)

CBE#	Measure Name	2024 Rate	Goal ¹	Final 2026 Target ²
N/A	Adults Access to Preventive/Ambulatory Health Services (AAP) ³	66.43%	NationD114:D125al Medicaid HMO 50th Percentile	67.76%
0032	Cervical Cancer Screening (CCS)	48.18%	National Medicaid HMO 50th Percentile	49.18%
0038	Childhood Immunization Status (CIS) -- Combination 10 ⁴	23.47%	National Medicaid HMO 50th Percentile	N/A
1516	Child and Adolescent Well-Care Visits (WCV) ⁵			
	Ages 3-11	62.95%	National Medicaid HMO 90th Percentile	64.00%
	Ages 12-17	54.72%	National Medicaid HMO 90th Percentile	55.95%
	Ages 18-21	29.03%	National Medicaid HMO 90th Percentile	29.33%
	Total (Ages)	55.10%	National Medicaid HMO 90th Percentile	56.35%
0033	Chlamydia Screening (CHL)			
	Ages 16 to 20	59.82%	National Medicaid HMO 90th Percentile	60.73%
	Ages 21 to 24	68.38%	National Medicaid HMO 90th Percentile	68.80%
	Total (All Ages)	63.24%	National Medicaid HMO 90th Percentile	63.98%
0034	Colorectal Cancer Screening (COL-E) ⁶	37.46%	National Medicaid HMO 50th Percentile	38.21%
0018	Controlling High Blood Pressure (CBP) ⁷	48.74%	National Medicaid HMO 50th Percentile	50.65%
0059/ 0575	Glycemic Status Assessment for Patients with Diabetes (GSD) ⁸			
	Glycemic Status (<8.0%)- Admin	36.18%	National Medicaid HMO 50th Percentile	38.62%
	Glycemic Status (>9.0%)- Admin	58.35%	National Medicaid HMO 50th Percentile	55.56%
1407	Immunizations for Adolescents (IMA) -- Combination 2	30.11%	National Medicaid HMO 50th Percentile	30.75%
1517	Prenatal and Postpartum Care (PPC) ⁹			
	Timeliness of Prenatal Care	56.78%	National Medicaid HMO 50th Percentile	59.74%
	Postpartum Care	72.58%	National Medicaid HMO 50th Percentile	74.03%
1392	Well-Child Visits in the First 30 Months of Life (W30)			
	First 15 Months	66.35%	National Medicaid HMO 90th Percentile	66.89%
	15-30 Months	71.75%	National Medicaid HMO 90th Percentile	72.79%

¹ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile.

² Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Final targets include improvement corridor adjustments if applied.

³ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026. The MY2024 Standard Plan results are Department-calculated, not plan-reported. Plan-reported data for AAP will be available starting in MY2025.

⁴ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁷ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries. Despite these limitations, the

⁸ In MY2024, the HbA1c Control for Patients with Diabetes (HBD) measure changed to Glycemic Status Assessment for Patients with Diabetes (GSD). This measure requires clinical data in the form of hemoglobin A1c lab values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete. Therefore, this measure may not be a complete representation of overall performance. Despite these limitations, the Department has decided to set MY2026 targets for GSD administrative rates. For Glycemic Status (>9%), a lower rate indicates better performance

⁹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December

* Symbol is used when data are not yet available for the measure.

† Symbol is used when clinical data needed to produce measure are not available.

Table 15. Overall NC Medicaid Race and Ethnicity Comparison ¹

2024 Race Comparison to Inform 2026 Priority Population Improvement Targets (All NC Medicaid)						
Measure Name ²	2024 Black/African American Rate	2024 Not Black/African American Rate	Relative Difference	Disparity (Y/N)	Goal ³	Final 2026 Priority Population Target ⁴
Adults Access To Preventive/Ambulatory Services (AAP) ⁵	66.07%	69.22%	4.55%	N	National Medicaid 50th Percentile	
Cervical Cancer Screening (CCS)	45.81%	39.10%	-17.16%	N	National Medicaid 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁶						
Ages 3-11	58.66%	62.89%	6.73%	N	National Medicaid 90th Percentile	
Ages 12-17	50.75%	55.29%	8.21%	N	National Medicaid 90th Percentile	
Ages 18-21	27.01%	29.45%	8.29%	N	National Medicaid 90th Percentile	
Total (Ages)	50.88%	54.74%	7.05%	N	National Medicaid 90th Percentile	
Childhood Immunization Status (CIS-E) -- Combination 10 ⁷	18.13%	27.30%	33.59%	Y	National Medicaid 50th Percentile	N/A
Chlamydia Screening (CHL)						
Ages 16 to 20	64.18%	54.22%	-18.37%	N	National Medicaid 90th Percentile	
Ages 21 to 24	72.19%	59.71%	-20.90%	N	National Medicaid 90th Percentile	
Total (All Ages)	67.67%	56.45%	-19.88%	N	National Medicaid 90th Percentile	
Colorectal Cancer Screening (COL-E) ⁸	25.24%	25.47%	0.90%	N	National Medicaid 50th Percentile	
Controlling High Blood Pressure (CBP) ⁹	51.50%	60.30%	14.59%	Y	National Medicaid 50th Percentile	53.14%
Immunizations for Adolescents (IMA-E) -- Combination 2	29.53%	32.13%	8.09%	N	National Medicaid 50th Percentile	
Plan All-Cause Readmissions (PCR) ¹⁰	0.99	1.00	-1.00%	N		
Prenatal and Postpartum Care (PPC)¹¹						
Timeliness of Prenatal Care	45.14%	47.42%	4.81%	N	National Medicaid 50th Percentile	
Postpartum Care	62.22%	66.19%	6.00%	N	National Medicaid 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	60.32%	67.01%	9.98%	N	National Medicaid 90th Percentile	
15-30 Months	66.51%	73.98%	10.10%	Y	National Medicaid 90th Percentile	67.09%
Measure Name ²	2024 American Indian/Alaskan Native Rate	2024 Not American Indian/Alaskan Native Rate	Relative Difference	Disparity (Y/N)	Goal ³	Final 2026 Priority Population Target ⁴
Adults Access To Preventive/Ambulatory Services (AAP) ⁵	72.97%	67.79%	-7.64%	N	National Medicaid 50th Percentile	
Cervical Cancer Screening (CCS)	45.00%	41.87%	-7.48%	N	National Medicaid 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁶						
Ages 3-11	62.95%	61.17%	-2.91%	N	National Medicaid 90th Percentile	
Ages 12-17	55.18%	53.45%	-3.24%	N	National Medicaid 90th Percentile	
Ages 18-21	26.85%	28.54%	5.92%	N	National Medicaid 90th Percentile	
Total (Ages)	54.91%	53.18%	-3.25%	N	National Medicaid 90th Percentile	
Childhood Immunization Status (CIS-E) -- Combination 10 ⁷	18.68%	23.84%	21.64%	Y	National Medicaid 50th Percentile	N/A
Chlamydia Screening (CHL)						
Ages 16 to 20	63.55%	58.06%	-9.46%	N	National Medicaid 90th Percentile	
Ages 21 to 24	65.52%	65.06%	-0.71%	N	National Medicaid 90th Percentile	
Total (All Ages)	64.38%	60.98%	-5.58%	N	National Medicaid 90th Percentile	
Colorectal Cancer Screening (COL-E) ⁸	23.46%	25.43%	7.75%	N	National Medicaid 50th Percentile	
Controlling High Blood Pressure (CBP) ⁹	52.57%	56.24%	6.53%	N	National Medicaid 50th Percentile	
Immunizations for Adolescents (IMA-E) -- Combination 2	41.90%	30.77%	-36.17%	N	National Medicaid 50th Percentile	
Plan All-Cause Readmissions (PCR) ¹⁰	1.00	1.00	0.00%	N		
Prenatal and Postpartum Care (PPC)¹¹						
Timeliness of Prenatal Care	39.34%	46.72%	15.80%	Y	National Medicaid 50th Percentile	43.27%
Postpartum Care	56.92%	64.84%	12.21%	Y	National Medicaid 50th Percentile	59.48%
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	66.42%	64.44%	-3.07%	N	National Medicaid 90th Percentile	
15-30 Months	66.67%	71.12%	6.26%	N	National Medicaid 90th Percentile	

2024 Ethnicity Comparison to Inform 2026 Priority Population Improvement Targets (All NC Medicaid)

Measure Name ²	2024 Hispanic/Latino Rate	2024 Not Hispanic/Latino Rate	Relative Difference	Disparity (Y/N)	Goal ³	Final 2026 Priority Population Target ⁴
Adults Access To Preventive/Ambulatory Services (AAP)⁵	64.14%	68.36%	6.17%	N	National Medicaid 50th Percentile	
Cervical Cancer Screening (CCS)	46.39%	41.51%	-11.76%	N	National Medicaid 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁶						
Ages 3-11	69.09%	58.91%	-17.28%	N	National Medicaid 90th Percentile	
Ages 12-17	62.41%	50.66%	-23.19%	N	National Medicaid 90th Percentile	
Ages 18-21	34.03%	26.83%	-26.84%	N	National Medicaid 90th Percentile	
Total (Ages)	60.93%	50.88%	-19.75%	N	National Medicaid 90th Percentile	
Childhood Immunization Status (CIS-E) -- Combination 10⁷	35.31%	19.52%	-80.89%	N	National Medicaid 50th Percentile	
Chlamydia Screening (CHL)						
Ages 16 to 20	65.24%	56.28%	-15.92%	N	National Medicaid 90th Percentile	
Ages 21 to 24	66.26%	64.82%	-2.22%	N	National Medicaid 90th Percentile	
Total (All Ages)	65.61%	59.97%	-9.40%	N	National Medicaid 90th Percentile	
Colorectal Cancer Screening (COL-E)⁸	26.49%	25.31%	-4.66%	N	National Medicaid 50th Percentile	
Controlling High Blood Pressure (CBP)⁹	59.09%	55.98%	-5.56%	N	National Medicaid 50th Percentile	
Immunizations for Adolescents (IMA-E) -- Combination 2	42.30%	27.70%	-52.71%	N	National Medicaid 50th Percentile	
Plan All-Cause Readmissions (PCR)¹⁰	0.91	1.00	-9.00%	N		
Prenatal and Postpartum Care (PPC)¹¹						
Timeliness of Prenatal Care	49.03%	46.05%	-6.47%	N	National Medicaid 50th Percentile	
Postpartum Care	71.98%	63.26%	-13.78%	N	National Medicaid 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	68.02%	63.13%	-7.75%	N	National Medicaid 90th Percentile	
15-30 Months	77.49%	68.77%	-12.68%	N	National Medicaid 90th Percentile	

¹ MY2023 & MY2024 results excluded beneficiaries with limited benefits (MCS018,20,21,23,24,43) and dual eligibles.

² For overall NC Medicaid MY2024 rates, the following measures transitioned to ECDS reporting: CCS-E, COL-E, CIS-E, and IMA-E.

³ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile.

⁴ Targets are set based on NC Medicaid performance and are calculated using on a 10% gap reduction between the baseline performance and the goal. Final targets include improvement corridor adjustments if applied.

⁵ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁶ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁷ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁸ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁹ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries.

¹⁰ For this measure, a lower observed to expected ratio indicates better performance.

¹¹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

Table 16: Standard Plan Aggregate Priority Population Improvement Targets ¹

2024 Race Comparison to Inform 2026 Priority Population Improvement Targets (Standard Plan Aggregate)						
Measure Name ²	2024 Black/African American Rate	2024 Not Black/African American Rate	Relative Difference	Disparity (Y/N)	Goal ³	Final 2026 Priority Population Target ⁴
Adults Access To Preventive/Ambulatory Services (AAP)⁵	64.64%	67.41%	4.11%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	52.04%	45.40%	-14.63%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁶						
Ages 3-11	60.63%	65.84%	7.91%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	53.03%	58.25%	8.96%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	29.06%	31.75%	8.47%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	53.41%	58.04%	7.98%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS-E) -- Combination 10⁷	18.43%	28.39%	35.08%	Y	National Medicaid HMO 50th Percentile	N/A
Chlamydia Screening (CHL)						
Ages 16 to 20	65.15%	56.32%	-15.68%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	74.30%	62.65%	-18.60%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	69.04%	58.80%	-17.41%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁸	37.12%	36.58%	-1.48%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁹	43.86%	50.99%	13.98%	Y	National Medicaid HMO 50th Percentile	46.26%
Immunizations for Adolescents (IMA-E) -- Combination 2	29.33%	33.24%	11.76%	Y	National Medicaid HMO 50th Percentile	30.05%
Plan All-Cause Readmissions (PCR)¹⁰	0.95	0.97	-2.06%	N		
Prenatal and Postpartum Care (PPC)¹¹						
Timeliness of Prenatal Care	58.31%	61.71%	5.51%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	68.96%	74.13%	6.97%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	63.58%	70.99%	10.44%	Y	National Medicaid HMO 90th Percentile	64.39%
15-30 Months	68.22%	76.49%	10.81%	Y	National Medicaid HMO 90th Percentile	69.61%
Measure Name ²	2024 American Indian/Alaskan Native Rate	2024 Not American Indian/Alaskan Native Rate	Relative Difference	Disparity (Y/N)	Goal ³	Final 2026 Priority Population Target ⁴
Adults Access To Preventive/Ambulatory Services (AAP)⁵	70.66%	66.16%	-6.80%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	51.85%	48.09%	-7.82%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁶						
Ages 3-11	71.12%	63.70%	-11.65%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	61.58%	56.15%	-9.67%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	33.01%	30.71%	-7.49%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	62.58%	56.16%	-11.43%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS-E) -- Combination 10⁷	19.06%	24.69%	22.80%	Y	National Medicaid HMO 50th Percentile	N/A
Chlamydia Screening (CHL)						
Ages 16 to 20	69.23%	59.55%	-16.26%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	72.34%	67.47%	-7.22%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	70.48%	62.75%	-12.32%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁸	36.43%	36.79%	0.98%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁹	46.57%	47.82%	2.61%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA-E) -- Combination 2	41.15%	31.51%	-30.59%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)¹⁰	0.58	0.97	-40.21%	N		
Prenatal and Postpartum Care (PPC)¹¹						
Timeliness of Prenatal Care	51.69%	60.56%	14.65%	Y	National Medicaid HMO 50th Percentile	55.16%
Postpartum Care	63.97%	72.28%	11.50%	Y	National Medicaid HMO 50th Percentile	65.82%
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	72.05%	68.18%	-5.68%	N	National Medicaid HMO 90th Percentile	
15-30 Months	72.50%	73.29%	1.08%	N	National Medicaid HMO 90th Percentile	

2024 Ethnicity Comparison to Inform 2026 Priority Population Improvement Targets (Standard Plan Aggregate)

Measure Name ²	2024 Hispanic/Latino Rate	2024 Not Hispanic/Latino Rate	Relative Difference	Disparity (Y/N)	Goal ³	Final 2026 Priority Population Target ⁴
Adults Access To Preventive/Ambulatory Services (AAP)⁵	63.48%	66.60%	4.68%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	53.26%	47.60%	-11.89%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁶						
Ages 3-11	70.61%	61.66%	-14.52%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	63.98%	53.40%	-19.81%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	35.88%	28.91%	-24.11%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	62.79%	54.05%	-16.17%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS-E) -- Combination 10⁷	37.12%	19.86%	-86.91%	N	National Medicaid HMO 50th Percentile	
Chlamydia Screening (CHL)						
Ages 16 to 20	66.69%	57.55%	-15.88%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	67.31%	67.63%	0.47%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	66.90%	61.80%	-8.25%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁸	42.35%	36.44%	-16.22%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁹	48.94%	47.72%	-2.56%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA-E) -- Combination 2	43.48%	27.66%	-57.19%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)¹⁰	0.88	0.97	-9.28%	N		
Prenatal and Postpartum Care (PPC)¹¹						
Timeliness of Prenatal Care	61.68%	60.12%	-2.59%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	77.72%	70.97%	-9.51%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	71.12%	67.09%	-6.01%	N	National Medicaid HMO 90th Percentile	
15-30 Months	78.95%	71.20%	-10.88%	N	National Medicaid HMO 90th Percentile	

¹ MY2023 & MY2024 results excluded beneficiaries with limited benefits (MCS018,20,21,23,24,43) and dual eligibles.

² For overall NC Medicaid MY2024 rates, the following measures transitioned to ECDS reporting: CCS-E, COL-E, CIS-E, and IMA-E.

³ The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile.

⁴ Targets are set based on NC Medicaid performance and are calculated using on a 10% gap reduction between the baseline performance and the goal. Final targets include improvement corridor adjustments if applied.

⁵ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁶ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁷ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁸ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁹ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries.

¹⁰ For this measure, a lower observed to expected ratio indicates better performance.

¹¹ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

Table 17. Amerihealth Race and Ethnicity Comparison¹

2024 Race Comparison to Inform 2026 Priority Population Improvement Targets (Amerihealth)						
Measure Name	2024 Black/African American Rate	2024 Not Black/African American Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	60.62%	63.54%	4.60%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	53.53%	47.12%	-13.60%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	59.12%	64.69%	8.61%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	51.09%	57.08%	10.49%	Y	National Medicaid HMO 90th Percentile	52.68%
Ages 18-21	28.21%	30.35%	7.05%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	51.88%	56.89%	8.81%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	17.81%	28.16%	36.75%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	65.83%	56.66%	-16.18%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	74.66%	62.80%	-18.89%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	69.54%	58.99%	-17.88%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	34.90%	35.13%	0.65%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	46.90%	55.75%	15.87%	Y	National Medicaid HMO 50th Percentile	49.00%
Immunizations for Adolescents (IMA) -- Combination 2	26.78%	31.77%	15.71%	Y	National Medicaid HMO 50th Percentile	27.75%
Plan All-Cause Readmissions (PCR)⁹	0.99	0.87	13.79%	Y		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	65.23%	69.93%	6.72%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	71.52%	77.75%	8.01%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	61.81%	71.42%	13.46%	Y	National Medicaid HMO 90th Percentile	62.80%
15-30 Months	66.46%	76.07%	12.63%	Y	National Medicaid HMO 90th Percentile	68.03%

Measure Name	2024 American Indian/Alaskan Native Rate	2024 Not American Indian/Alaskan Native Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	64.26%	62.29%	-3.16%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	50.51%	49.59%	-1.86%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	63.30%	62.69%	-0.97%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	47.29%	55.00%	14.02%	Y	National Medicaid HMO 90th Percentile	49.26%
Ages 18-21	26.86%	29.62%	9.32%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	52.41%	55.12%	4.92%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	21.98%	24.71%	11.05%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	62.90%	59.97%	-4.89%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	72.73%	67.51%	-7.73%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	67.97%	62.95%	-7.97%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	40.88%	34.94%	-17.00%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	47.74%	52.18%	8.51%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA) -- Combination 2	29.23%	29.93%	2.34%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹	0.42	0.93	-54.84%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	68.09%	68.19%	0.15%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	72.34%	75.47%	4.15%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	71.91%	68.24%	-5.38%	N	National Medicaid HMO 90th Percentile	
15-30 Months	69.66%	72.78%	4.29%	N	National Medicaid HMO 90th Percentile	

2024 Ethnicity Comparison to Inform 2026 Priority Population Improvement Targets (Amerihealth)						
Measure Name	2024 Hispanic/Latino Rate	2024 Not Hispanic/Latino Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	60.02%	62.63%	4.17%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	54.94%	48.91%	-12.33%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	70.50%	59.76%	-17.97%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	63.67%	51.14%	-24.50%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	34.66%	27.39%	-26.54%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	62.37%	52.17%	-19.55%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	36.52%	19.21%	-90.11%	N	National Medicaid HMO 50th Percentile	
Chlamydia Screening (CHL)						
Ages 16 to 20	65.94%	57.70%	-14.28%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	66.74%	67.79%	1.55%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	66.21%	61.90%	-6.96%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	42.78%	34.51%	-23.96%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	56.16%	51.81%	-8.40%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA) -- Combination 2	41.79%	25.21%	-65.77%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹	0.77	0.93	-17.20%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	69.27%	67.93%	-1.97%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	82.25%	73.82%	-11.42%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	72.07%	66.43%	-8.49%	N	National Medicaid HMO 90th Percentile	
15-30 Months	79.32%	69.79%	-13.66%	N	National Medicaid HMO 90th Percentile	

¹ With the exception of Plan All-Cause Readmission (PCR) and Adults Access to Preventive/Ambulatory Services (AAP) that are Department-calculated, MY024 stratified results for Standard Plans are calculated using plan-reported (QAV007) data.

² The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile. For more information please refer to the NC Medicaid technical specifications manual linked here: <https://medicaid.ncdhhs.gov/medicaid-managed-care-quality-measurement-technical-specifications-manual/download?attachment>.

³ Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Targets for the Black and African American population are set for Immunizations for Adolescents (IMA) Combo 2 and Well-Child Visits in the First 30 Months of Life (W30), regardless of an indentified disparity, due to their inclusion in the 2026 Standard Plan Withhold Program.

⁴ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁷ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁸ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries.

⁹ For this measure, a lower observed to expected ratio indicates better performance.

¹⁰ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

Table 18. Merged Carolina Complete Health Race and Ethnicity Comparison¹**

** Carolina Complete merged with WellCare in April 2026. To more accurately set MY2026 targets, merged rates were calculated for MY2024. Table 18 contains merged Carolina Complete Health MY2024 stratified rates and MY2026 targets.

2024 Race Comparison to Inform 2026 Priority Population Improvement Targets (Carolina Complete Health)						
Measure Name	2024 Black/African American Rate	2024 Not Black/African American Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	64.16%	66.38%	3.35%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	52.61%	46.18%	-13.94%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	60.38%	66.21%	8.81%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	53.12%	58.52%	9.22%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	29.47%	32.75%	10.01%	Y	National Medicaid HMO 90th Percentile	32.42%
Total (Ages)	53.55%	58.58%	8.59%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	18.98%	30.72%	38.21%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	66.55%	59.78%	-11.33%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	62.57%	59.92%	-4.41%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	70.28%	61.59%	-14.11%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	36.87%	36.86%	-0.01%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	45.95%	52.36%	12.25%	Y	National Medicaid HMO 50th Percentile	48.14%
Immunizations for Adolescents (IMA) -- Combination 2	29.81%	34.82%	14.39%	Y	National Medicaid HMO 50th Percentile	30.48%
Plan All-Cause Readmissions (PCR)⁹						
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	60.60%	62.37%	2.85%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	68.90%	75.12%	8.28%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	64.62%	71.29%	9.36%	N	National Medicaid HMO 90th Percentile	65.92%
15-30 Months	68.04%	77.33%	12.00%	Y	National Medicaid HMO 90th Percentile	69.45%

Measure Name	2024 American Indian/Alaskan Native Rate	2024 Not American Indian/Alaskan Native Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP) ⁴	70.46%	65.30%	-7.90%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	54.12%	48.80%	-10.91%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	72.68%	63.72%	-14.06%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	64.08%	56.23%	-13.96%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	33.52%	31.48%	-6.47%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	64.80%	56.44%	-14.81%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	18.85%	26.37%	28.54%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	69.90%	62.24%	-12.31%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	71.28%	68.96%	-3.36%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	70.41%	64.97%	-8.37%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	35.95%	36.89%	2.53%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	51.81%	49.39%	-4.89%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA) -- Combination 2	41.51%	32.59%	-27.36%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹						
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	52.88%	61.86%	14.52%	Y	National Medicaid HMO 50th Percentile	56.23%
Postpartum Care	61.87%	72.86%	15.09%	Y	National Medicaid HMO 50th Percentile	63.93%
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	71.49%	68.73%	-4.01%	N	National Medicaid HMO 90th Percentile	
15-30 Months	71.93%	73.71%	2.41%	N	National Medicaid HMO 90th Percentile	

2024 Ethnicity Comparison to Inform 2026 Priority Population Improvement Targets (Carolina Complete Health)						
Measure Name	2024 Hispanic/Latino Rate	2024 Not Hispanic/Latino Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	63.02%	65.75%	4.16%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	55.50%	48.21%	-15.13%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	70.86%	61.48%	-15.24%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	63.82%	53.37%	-19.57%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	37.73%	29.16%	-29.40%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	63.38%	54.10%	-17.15%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	39.20%	20.78%	-88.69%	N	National Medicaid HMO 50th Percentile	
Chlamydia Screening (CHL)						
Ages 16 to 20	69.28%	60.03%	-15.41%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	68.85%	69.05%	0.30%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	69.14%	63.90%	-8.20%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	41.21%	36.60%	-12.61%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	52.07%	49.30%	-5.61%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA) -- Combination 2	43.88%	28.60%	-53.43%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹						
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	62.33%	61.52%	-1.32%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	78.58%	71.34%	-10.15%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	71.62%	67.57%	-6.00%	N	National Medicaid HMO 90th Percentile	
15-30 Months	80.07%	71.10%	-12.61%	N	National Medicaid HMO 90th Percentile	

¹ With the exception of Plan All-Cause Readmission (PCR) and Adults Access to Preventative/Ambulatory Services (AAP) that are Department-calculated, MY024 stratified results for Standard Plans are calculated using plan-reported (QAV007) data. The merged rates for Carolina Complete were calculated by adding the MY2024 numerators and denominators for each individual plan (WellCare and CCH) together.

² The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile. For more information please refer to the NC Medicaid technical specifications manual linked here: <https://medicaid.ncdhhs.gov/medicaid-managed-care-quality-measurement-technical-specifications-manual/download?attachment>.

³ Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Targets for the Black and African American population are set for Immunizations for Adolescents (IMA) Combo 2 and Well-Child Visits in the First 30 Months of Life (W30), regardless of an identified disparity, due to their inclusion in the 2026 Standard Plan Withhold Program.

⁴ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁷ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁸ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid beneficiaries.

⁹ For this measure, a lower observed to expected ratio indicates better performance. Merged PCR data is not available for MY2024.

¹⁰ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

Table 19. Healthy Blue Race and Ethnicity Comparison¹

2024 Race Comparison to Inform 2026 Priority Population Improvement Targets (Healthy Blue)						
Measure Name	2024 Black/African American Rate	2024 Not Black/African American Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	67.87%	71.00%	4.41%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	50.72%	43.89%	-15.56%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	62.65%	66.41%	5.66%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	55.34%	59.36%	6.77%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	30.30%	32.34%	6.31%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	55.14%	58.62%	5.94%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	18.36%	26.44%	30.56%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	62.80%	52.69%	-19.19%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	72.31%	60.47%	-19.58%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	66.92%	55.76%	-20.01%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	37.37%	36.92%	-1.22%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	40.46%	46.39%	12.78%	Y	National Medicaid HMO 50th Percentile	43.20%
Immunizations for Adolescents (IMA) -- Combination 2	31.33%	33.30%	5.92%	N	National Medicaid HMO 50th Percentile	31.96%
Plan All-Cause Readmissions (PCR)⁹	0.94	1.01	-6.93%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	55.28%	58.86%	6.08%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	68.25%	70.62%	3.36%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	64.56%	71.52%	9.73%	N	National Medicaid HMO 90th Percentile	65.28%
15-30 Months	70.13%	76.77%	8.65%	N	National Medicaid HMO 90th Percentile	71.33%

Measure Name	2024 American Indian/Alaskan Native Rate	2024 Not American Indian/Alaskan Native Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP) ⁴	72.21%	69.68%	-3.63%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	48.29%	46.74%	-3.32%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	71.99%	64.85%	-11.01%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	64.66%	57.70%	-12.06%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	33.92%	31.53%	-7.58%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	63.42%	57.18%	-10.91%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	19.10%	23.26%	17.88%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	70.41%	56.37%	-24.91%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	72.05%	65.42%	-10.13%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	71.08%	60.09%	-18.29%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	32.43%	37.18%	12.78%	Y	National Medicaid HMO 50th Percentile	33.33%
Controlling High Blood Pressure (CBP)⁸	42.61%	43.65%	2.38%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA) -- Combination 2	42.35%	32.34%	-30.95%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹	0.58	0.99	-41.41%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	48.77%	57.68%	15.45%	Y	National Medicaid HMO 50th Percentile	52.53%
Postpartum Care	60.25%	69.92%	13.83%	Y	National Medicaid HMO 50th Percentile	62.47%
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	74.58%	68.76%	-8.46%	N	National Medicaid HMO 90th Percentile	
15-30 Months	76.00%	74.05%	-2.63%	N	National Medicaid HMO 90th Percentile	

2024 Ethnicity Comparison to Inform 2026 Priority Population Improvement Targets (Healthy Blue)						
Measure Name	2024 Hispanic/Latino Rate	2024 Not Hispanic/Latino Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	66.69%	70.09%	4.85%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	50.52%	46.38%	-8.93%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	72.57%	63.02%	-15.15%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	66.20%	55.38%	-19.54%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	36.38%	30.18%	-20.54%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	64.32%	55.37%	-16.16%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	34.53%	19.96%	-73.00%	N	National Medicaid HMO 50th Percentile	
Chlamydia Screening (CHL)						
Ages 16 to 20	63.95%	54.85%	-16.59%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	65.24%	65.63%	0.59%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	64.43%	59.38%	-8.50%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	44.29%	36.64%	-20.88%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	40.98%	43.79%	6.42%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA) -- Combination 2	45.67%	28.87%	-58.19%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹	0.92	0.99	-7.07%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	60.31%	57.00%	-5.81%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	74.81%	68.82%	-8.70%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	73.46%	67.36%	-9.06%	N	National Medicaid HMO 90th Percentile	
15-30 Months	79.73%	72.47%	-10.02%	N	National Medicaid HMO 90th Percentile	

¹ With the exception of Plan All-Cause Readmission (PCR) and Adults Access to Preventative/Ambulatory Services (AAP) that are Department-calculated, MY024 stratified results for Standard Plans are calculated using plan-reported (QAV007) data.

² The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile. For more information please refer to the NC Medicaid technical specifications manual linked here: <https://medicaid.ncdhhs.gov/medicaid-managed-care-quality-measurement-technical-specifications-manual/download?attachment>.

³ Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Targets for the Black and African American population are set for Immunizations for Adolescents (IMA) Combo 2 and Well-Child Visits in the First 30 Months of Life (W30), regardless of an identified disparity, due to their inclusion in the 2026 Standard Plan Withhold Program.

⁴ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁷ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁸ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid

⁹ For this measure, a lower observed to expected ratio indicates better performance.

¹⁰ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.

Table 20. United Healthcare Race and Ethnicity Comparison¹**2024 Race Comparison to Inform 2026 Priority Population Improvement Targets (United Healthcare)**

Measure Name	2024 Black/African American Rate	2024 Not Black/African American Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP)⁴	64.84%	67.58%	4.05%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	52.35%	45.30%	-15.56%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	59.30%	65.33%	9.23%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	50.92%	57.14%	10.89%	Y	National Medicaid HMO 90th Percentile	52.53%
Ages 18-21	26.99%	30.29%	10.89%	Y	National Medicaid HMO 90th Percentile	27.49%
Total (Ages)	51.80%	57.23%	9.49%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	17.94%	26.98%	33.51%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	65.95%	55.81%	-18.17%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	75.57%	63.08%	-19.80%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	69.96%	58.63%	-19.32%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	38.65%	36.73%	-5.23%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	44.18%	52.32%	15.56%	Y	National Medicaid HMO 50th Percentile	46.55%
Immunizations for Adolescents (IMA) -- Combination 2	27.64%	31.75%	12.94%	Y	National Medicaid HMO 50th Percentile	28.52%
Plan All-Cause Readmissions (PCR)⁹	0.96	1.04	-7.69%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	53.94%	58.63%	8.00%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	68.31%	75.36%	9.36%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	61.49%	69.27%	11.23%	Y	National Medicaid HMO 90th Percentile	62.51%
15-30 Months	66.89%	74.84%	10.62%	Y	National Medicaid HMO 90th Percentile	68.41%

Measure Name	2024 American Indian/Alaskan Native Rate	2024 Not American Indian/Alaskan Native Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP) ⁴	72.72%	66.29%	-9.70%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	53.63%	48.06%	-11.59%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	69.58%	62.80%	-10.80%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	57.28%	54.66%	-4.79%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	32.93%	28.96%	-13.71%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	60.54%	54.98%	-10.11%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	18.38%	23.59%	22.09%	Y	National Medicaid HMO 50th Percentile	N/A ⁶
Chlamydia Screening (CHL)						
Ages 16 to 20	67.88%	59.61%	-13.87%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	74.21%	68.23%	-8.76%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	70.47%	63.05%	-11.77%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	39.14%	37.42%	-4.60%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	43.52%	48.88%	10.97%	Y	National Medicaid HMO 50th Percentile	45.96%
Immunizations for Adolescents (IMA) -- Combination 2	42.03%	29.79%	-41.09%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹	0.64	1.01	-36.63%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	49.42%	56.96%	13.24%	Y	National Medicaid HMO 50th Percentile	53.12%
Postpartum Care	70.35%	72.64%	3.15%	N	National Medicaid HMO 50th Percentile	
Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	70.91%	66.24%	-7.05%	N	National Medicaid HMO 90th Percentile	
15-30 Months	70.85%	71.77%	1.28%	N	National Medicaid HMO 90th Percentile	

2024 Ethnicity Comparison to Inform 2026 Priority Population Improvement Targets (United Healthcare)						
Measure Name	2024 Hispanic/Latino Rate	2024 Not Hispanic/Latino Rate	Relative Difference	Disparity (Y/N)	Goal ²	Final 2026 Priority Population Target ³
Adults Access to Preventive/Ambulatory Services (AAP) ⁴	63.47%	66.79%	4.97%	N	National Medicaid HMO 50th Percentile	
Cervical Cancer Screening (CCS)	52.47%	47.69%	-10.02%	N	National Medicaid HMO 50th Percentile	
Child and Adolescent Well-Care Visits (WCV)⁵						
Ages 3-11	67.77%	61.41%	-10.36%	N	National Medicaid HMO 90th Percentile	
Ages 12-17	61.73%	52.14%	-18.39%	N	National Medicaid HMO 90th Percentile	
Ages 18-21	33.02%	27.58%	-19.72%	N	National Medicaid HMO 90th Percentile	
Total (Ages)	60.15%	53.38%	-12.68%	N	National Medicaid HMO 90th Percentile	
Childhood Immunization Status (CIS) -- Combination 10	36.55%	18.51%	-97.46%	N	National Medicaid HMO 50th Percentile	
Chlamydia Screening (CHL)						
Ages 16 to 20	66.19%	57.76%	-14.59%	N	National Medicaid HMO 90th Percentile	
Ages 21 to 24	68.31%	68.40%	0.13%	N	National Medicaid HMO 90th Percentile	
Total (All Ages)	66.88%	62.23%	-7.47%	N	National Medicaid HMO 90th Percentile	
Colorectal Cancer Screening (COL-E)⁷	40.43%	37.29%	-8.42%	N	National Medicaid HMO 50th Percentile	
Controlling High Blood Pressure (CBP)⁸	51.17%	48.60%	-5.29%	N	National Medicaid HMO 50th Percentile	
Immunizations for Adolescents (IMA) -- Combination 2	41.51%	26.22%	-58.31%	N	National Medicaid HMO 50th Percentile	
Plan All-Cause Readmissions (PCR)⁹	1.08	1.00	8.00%	N		
Prenatal and Postpartum Care (PPC)¹⁰						
Timeliness of Prenatal Care	56.01%	56.94%	1.63%	N	National Medicaid HMO 50th Percentile	
Postpartum Care	76.35%	71.76%	-6.40%	N	National Medicaid HMO 50th Percentile	

Well-Child Visits in the First 30 Months of Life (W30)						
First 15 Months	66.33%	66.36%	0.05%	N	National Medicaid HMO 90th Percentile	
15-30 Months	75.34%	70.44%	-6.96%	N	National Medicaid HMO 90th Percentile	

¹ With the exception of Plan All-Cause Readmission (PCR) and Adults Access to Preventative/Ambulatory Services (AAP) that are Department-calculated, MY024 stratified results for Standard Plans are calculated using plan-reported (QAV007) data.

² The MY2024 NCQA Quality Compass National Medicaid HMO 50th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is below the 50th percentile. The MY2024 NCQA Quality Compass National Medicaid HMO 90th percentile will serve as the goal for measures where baseline Standard Plan Aggregate performance is at or above the 50th percentile. For more information please refer to the NC Medicaid technical specifications manual linked here: <https://medicaid.ncdhhs.gov/medicaid-managed-care-quality-measurement-technical-specifications-manual/download?attachment>.

³ Targets are set based on Standard Plan performance and are calculated using on a 10% gap reduction between the baseline Standard Plan performance and the goal. Targets for the Black and African American population are set for Immunizations for Adolescents (IMA) Combo 2 and Well-Child Visits in the First 30 Months of Life (W30), regardless of an identified disparity, due to their inclusion in the 2026 Standard Plan Withhold Program.

⁴ AAP was added to the AMH Measure Set in the 2025 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2026 through December 2026.

⁵ Starting with MY2024 results, the Department will share the age stratifications for WCV.

⁶ MY2026 targets for Childhood Immunization Status (CIS) Combination 10 are not included here. The Department began using an adjusted scoring methodology, "beat the trend," for this measure to account for declining national trends for CIS Combination 10 in MY2023 and will continue applying this for MY2024. For more information on this methodology, please refer to the 2026 NC Medicaid Technical Specifications Manual.

⁷ COL was added to the AMH Measure Set in the 2024 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2025 through December 2025.

⁸ This measure requires clinical data in the form of blood pressure values. While substantial progress has been made in collecting more complete data, administrative data used to calculate this measure is not complete and therefore this measure may not be an accurate representation of overall performance. The Department continues to work with NC HealthConnex to stand up the necessary systems to capture this data for NC Medicaid

⁹ For this measure, a lower observed to expected ratio indicates better performance.

¹⁰ The PPC measure was added to the AMH Measure Set in the 2023 Tech Specs. As such, the first measurement year in which this measure can be incentivized as an AMH measure is the claims-year running from January 2024 through December 2024.