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High Marks for California’s HMOs in State Report Card

Statement from CAHP Leadership

SACRAMENTO – Today the California Office of the Patient Advocate released its 2014 HMO, PPO and Medical Group Report Cards, which rate plan performance based on national criteria that measure how health plans’ contracted doctors meet standards in assessing and treating specific health conditions. Overall, California’s health plans received high ratings on providing recommended care. California Association of Health Plans President and CEO Patrick Johnston issued the following statement on today’s release of the annual HMO Report Card:

“The high marks received by California’s health plans demonstrate that their continued work with providers has raised the bar on the quality of care provided to patients. The data also reveals that health plans and doctors are effectively monitoring care, but controlling chronic conditions like diabetes is a three-way partnership between individuals, doctors and plans.

“With health care costs continuing to rise, health plans and providers are partnering on new strategies that help advance the dual goals of increasing the quality care while containing costs. Medical homes and bundling payment for each episode of care are two such efforts that both improve health care outcomes while also curbing costs.”

CAHP is a statewide trade association representing 43 full-service health plans. Through legislative advocacy, education and collaboration with other member organizations, CAHP works to sustain a strong environment in which our member plans can provide access to products that offer choice and flexibility to the more than 24 million members they serve. For more information, please visit www.calhealthplans.org or call (916) 552-2910.