Letter from MNCM President and CEO Julie Sonier
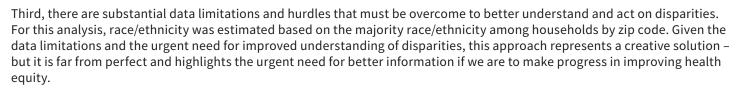
I recently came across an interesting *report* on racial disparities in depression treatment by the Blue Cross Blue Shield Association. Published in May 2022, I found this report noteworthy for several reasons.

First, it directly addresses two topics that have been much in the news and the focus of attention from health care stakeholders of all types in the last couple of years: mental health, and racial disparities in health and health care. Both topics have taken on increased urgency considering the COVID-19 pandemic and the increased attention to racial disparities and racial justice since the murder of George Floyd in Minneapolis in May 2020.

Second, several of the findings are quite striking. The analysis suggests that major depression is likely significantly underdiagnosed in Black and Hispanic communities, especially in communities where there were fewer behavioral health care providers. Among those who do receive a diagnosis, the analysis showed disparities in treatment of depression, for both prescription drug treatment and counseling.

Third, there are substantial data limitations and hurdles that must be overcome to better understand and act on disparities. For this analysis, race/ethnicity was estimated based on the majority race/ethnicity among households by zip code. Given the data limitations and the urgent need for improved understanding of disparities, this approach represents a creative solution – but it is far from perfect and highlights the urgent need for better information if we are to make progress in improving health equity.

Though not directly comparable to the data analyzed in the Blue Cross Blue Shield Association study, the data on depression outcomes collected by MNCM also show disparities by race and ethnicity, as well as language and country of origin (RELC). In May, we published our annual *report on disparities in quality metrics by RELC* using data collected in 2021 (largely reflecting 2020 dates of service). Among adults diagnosed with depression, rates of remission at six months for Black, Hispanic/Latinx, and Indigenous Minnesotans were well below the statewide average (at 59 percent, 72 percent, and 73 percent of the statewide average, respectively).

MNCM is frequently sought out as a national leader in the collection of high-quality, comprehensive data on RELC that we use to understand disparities in care and health outcomes. We are proud of the collective work of our entire community to get to this point but know that there is so much more that needs to be done – related to improving the availability and reliability of data, but also in how data are leveraged to drive knowledge and action.

Given MNCM's focus on data to drive improvement, we are interested in hearing your stories about using the data for improvement in health and health equity. We also seek to partner with researchers, health care stakeholders, government agencies, and others on leveraging data in ways that generate insights and action. Please email us at *support@mncm.org* to find out more about potential ways to partner with MNCM on leveraging data or to share your stories of data-driven strategies for improvement in health care quality and health equity.

Best,

Opportunity for Public Comment: New Measures for Obesity Management

Starting in late summer, MNCM will update its release schedule for the reports it publishes. This new cadence of releases will improve timeliness – with reports released closer to the dates of service reflected in the measures.

This change will split the Health Care Quality Report into three parts. Part 1 will be released in late summer with a focus on measures calculated from clinical data submitted to MNCM. Part 2 will be released in early winter with a focus on HEDIS measures. Part 3 will be released at the beginning of the year and will highlight the top performers from the previous year.

- Late Summer 2022: Heath Care Quality Report, Part 1 (Clinical Data Submission Measures)
- Mid-Fall 2022: Disparities by Race, Ethnicity, Language, and Country of Origin Report
- Late Fall 2022: Health Care Cost and Utilization Report
- Early Winter 2022: Heath Care Quality Report, Part 2 (HEDIS Measures)
- Mid-Winter 2023: Health Care Quality Report, Part 3 (Top Performers)
- Mid-Spring 2023: Disparities by insurance Type Report

All reports are available on the *MNCM Website*.

MNCM 2022 Annual Conference a Resounding Success

MNCM held its Annual Conference in April. More than 200 attendees joined the online sessions, with important topics such as Leveraging Data to Tackle Health Disparities, The Future of Measurement: National Landscape, and Minnesota's Priorities in the Future of Measurement.

We want to thank everyone who participated. We hope you found the sessions insightful and valuable. Thank you, also, to our exhibitors and sponsors who joined us for this year's event. Your support is appreciated!

THANK YOU 2022 SPONSORS!

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We Would Love to Hear Your Stories

As mentioned above, MNCM is proud to provide statewide measurement and reporting. The data provided are critical to many of our members, who use it in their everyday work. We are looking for comments or stories about how you use these data and how they benefit the work you do. If you would like to provide a comment or story, please feel free to contact Joe Flannigan at *flannigan@mncm.org* with your story. We may also use these examples and stories as ideas for future webinars and Annual Conference presentations, so we especially encourage you to share initiatives and successes that you think others would be interested in hearing about.

Ways to Support MNCM

MNCM values engagement by its members, employers, and industry partners to support MNCM's mission. Below are several options to support MNCM and engage with us.

Supporting Membership (for Medical Groups and Advocacy Organizations)

Supporting membership is a great way to show your support and commitment to improving the quality and affordability of health care in our community through collaboration with other stakeholders. It also supports MNCM's efforts to make quality measurement easier so clinic staff can spend more time on improvement activities. Annual membership dues are designed to be affordable and for medical groups are based on the number of providers reported by the medical group through annual registration for data submission.
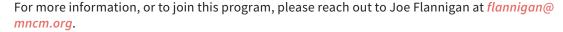
View details about supporting membership

Mission Supporter Program (for Industry Partners)

MNCM recently announced a new Mission Supporter Program for companies that support MNCM's mission and want to demonstrate support and commitment to improving health care quality, equity, and affordability in our community. This program is designed for those who are not directly involved with the services MNCM provides, but still support the efforts of our organization and those who will benefit from those efforts.

Supporters will have access to several benefits at two distinct levels. These benefits include recognition through our newsletter, on our website and on social media. Exclusive benefits are also offered to our gold level supporters. *View Mission Supporter Program Details*.

We'd like to extend a very special thank you to our first Mission Supporter, who joined us at the Silver Level, Novo Nordisk. Their support is greatly appreciated!

For more information, or to join this program, please reach out to Joe Flannigan at *flannigan@ mncm.org*.

Best Wishes to Deb Olson, MNCM Director, HR & Administration, on Her Retirement

MNCM is both happy and sad to announce that Deb Olson, 17-year veteran of MNCM is retiring. Her thoughtfulness, dedication, and pleasant demeanor were a true bright spot for MNCM over the years. We will miss her dearly, but wish her well on this next exciting chapter and cannot be more thrilled for her.

MNCM Welcomes New Staff

MNCM is pleased to welcome two new staff members. Kathie Pugaczewski, CAE, CMP, joined the team in April as Director of Business Transformation & Growth. Ma Xiong re-joined the MNCM team in June as Director, Data Strategy & Analytics. Ma previously worked for MNCM in 2012-2017.

Kathie Pugaczewski, CAE, CMP, Director of Business Transformation & Growth

Ma Xiong, MPH, Director, Data Strategy & Analytics

In Case You Missed It

Recent Reports Released by MNCM

Minnesota Health Care Disparities by Race, Ethnicity, Language and Country of Origin
Results for care delivered in 2020

The report documents continued wide disparities in health care quality and outcomes by race, ethnicity, language, and country of origin using data collected by MNCM in 2021 that reflects care provided in 2020.

View Report

2021 Minnesota Health Care Disparities By Insurance Type
Results for care delivered in 2020

This report, summarizes quality measures for patients enrolled in Minnesota Health Care Programs (MHCP) and makes comparisons by insurance type. It focuses on the managed care components of Minnesota's Medical Assistance and MinnesotaCare programs. As enrollment in these programs continues to increase, this report helps the state and health care providers identify opportunities to improve the health care and health outcomes for people served by state programs. The Minnesota Department of Human Services (DHS) contracts with MNCM to produce this report.

View Report

Leveraging Data to Understand and Address Disparities in Vascular and Diabetes Care — Preparedness and Treatment Equity Coalition (PTEC) Project Report

This report analyzes and shows disparities in vascular care and diabetes care in Minnesota for Black, Hispanic/Latinx, Asian, and Native American communities, including detailed demographic and geographic analysis within each of these groups. Using the results of the data analysis, the report develops and prioritizes action strategies that can be used by health care stakeholders to close gaps in care and reduce disparities.

View Report

MNCM Webinar Archive

Health Inequities in Optimal Diabetes Care and Optimal Vascular Care Measures

Chronic conditions such as diabetes and vascular disease have disproportionate impacts on people who are Black, Hispanic/Latinx, Asian, and Native American. This is due to higher prevalence of disease and a lower likelihood that these conditions are managed optimally to result in better outcomes. Better understanding the reasons for these disparities in health outcomes is essential to developing health care delivery and payment strategies that will reduce these known disparities.

This webinar provided an overview of the results of a grant-funded project to leverage the data that MNCM collects to better understand and address disparities in diabetes and vascular care, and to use the data to develop strategies to reduce disparities. The webinar included key findings from the analysis as well as the strategies identified by a community advisory group.

View Recording