



Minnesota Disparities by Insurance Type Report

COMMUNITY WEBINAR

TUESDAY, MAY 7, 2024

Welcome!



Thanks for joining us today!



All webinar participants are in “listen-only” mode. To ask a question, please type your question into the “Q&A” box at the bottom of your screen at any time during the webinar.



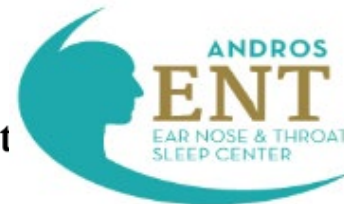
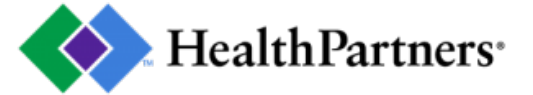
MNCM will send a link to the presentation slides and the recording to webinar attendees later this week.

MNCM Members, Thank you!

Health Plan Members



Medical Group Members



Premier ObGyn of Minnesota

MNCM Mission Supporter Program

Financial support is essential to sustain and grow our objective, unbiased work. Your support helps assure our independent work continues. It's an opportunity for your organization to demonstrate its support and commitment to improving health care quality, equity, and affordability while strengthening our work.

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www.mncm.org/mission-supporter-program

MNCM empowers health care decision makers with meaningful data to drive improvement.

What we do



Multi-stakeholder convening



Measure developer



Data collection, validation



Public transparency



Facilitated Data Sharing

How MNMCM data are used



Quality improvement



Benchmarking



Value-based payment



Reducing disparities



Research partnerships

Presenters

Jess Donovan

Clinical Measurement Analyst
MN Community Measurement

Mark Foresman

*Healthcare Program Quality Manager,
Healthcare Research and Quality*
MN Department of Human Services

Agenda



Report History

Brief overview



Current Report

Care delivered in 2022



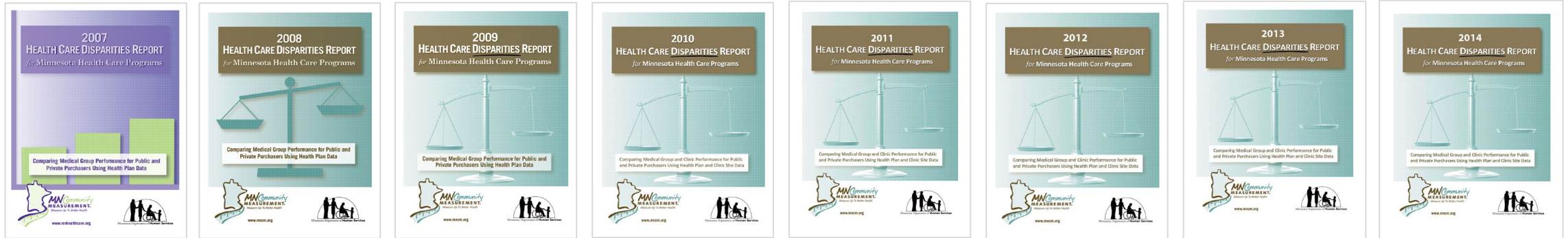
DHS Perspectives

Mark Foresman, PhD



Audience Q&A

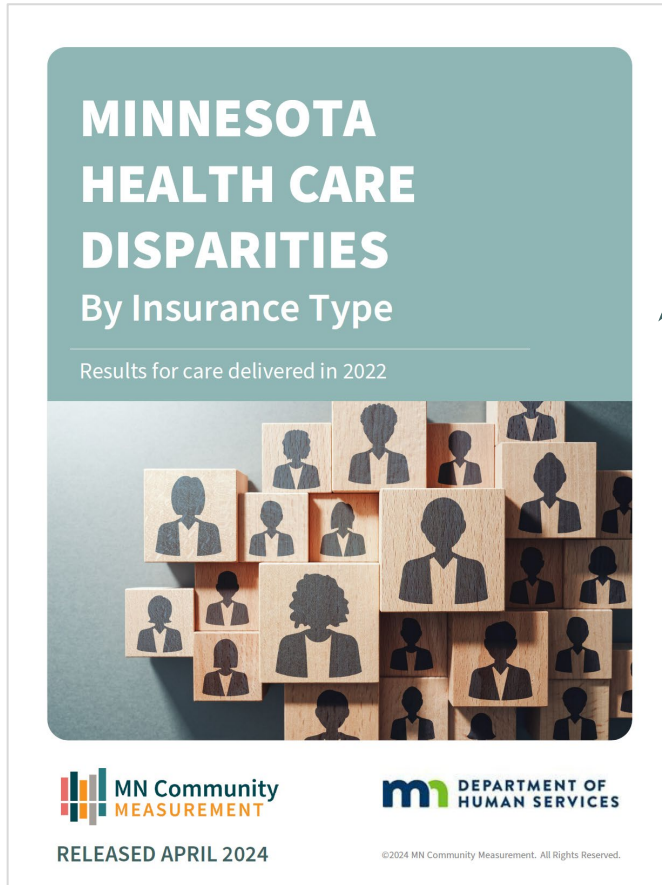
Report History



Many years of collaboration!



Current Report



Report can be found at mncm.org > Reports & Data > Community Reports

What's inside?

- Statewide rates over time by insurance type
- Statewide rates for MHCP MCO population by:
 - Race
 - Ethnicity
 - Preferred Language
 - Country of Origin

What measures are included?

- Breast Cancer Screening
- Childhood Immunization Status (Combo 10)
- Colorectal Cancer Screening
- Controlling High Blood Pressure
- Optimal Asthma Control (Adults & Children)
- Optimal Diabetes Care (+ 5 components)
- Optimal Vascular Care (+ 4 components)
- Adolescent Mental Health and/or Depression Screening
- Adolescent Depression Suite
- Adult Depression Suite

Populations Included

MHCP MCO

*Minnesota Health Care Plans Managed
Care Organization*



- Minnesota residents
- Enrolled in Medicaid Managed Care program (Medical Assistance, MinnesotaCare, Special Needs Basic Care)
- Includes dual eligible patients

Other Purchasers



- Minnesota residents
- Enrolled in commercial (employer-based) insurance coverage and/or Medicare Managed Care

Key Findings

Comparison to 2021



Statewide MHCP rates significantly decreased for **three measures:**

1. Childhood Immunization Status
2. Colorectal Cancer Screening
3. Optimal Asthma Control - Children

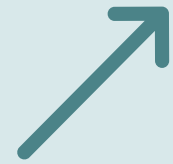


Largest rate **decrease** from 2021 occurred in the Childhood Immunization Status measure **(-6.1 percentage points)**



Statewide MHCP rates significantly increased for **two measures:**

1. Breast Cancer Screening
2. Optimal Diabetes Care



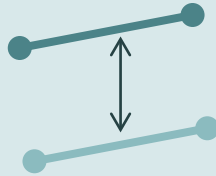
Largest rate **increase** from 2021 occurred in the Breast Cancer Screening measure **(+3.0 percentage points)**

Key Findings

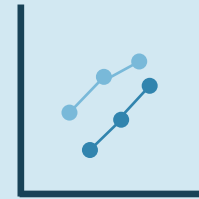
MHCP vs Other Purchasers



Statewide MHCP average rates were consistently **lower** than Other Purchasers' statewide rates for all measures

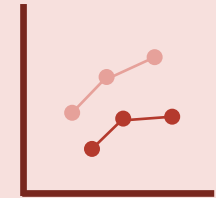


The **largest gap** in rates between MHCP and Other Purchasers occurred in the Childhood Immunization Status (Combo 10) measure (**26.7 percentage points**)



Since 2018, gap between populations significantly **narrowed** for **three measures**:

1. Optimal Asthma Control - Adults
2. Optimal Asthma Control - Children
3. Adolescent Mental Health and/or Depression Screening



Since 2018, gap between populations significantly **widened** for **four measures**:

1. Breast Cancer Screening
2. Childhood Immunization Status
3. Colorectal Cancer Screening
4. Controlling High Blood Pressure*

*Since 2020 for Controlling High BP

Key Findings

Race, Ethnicity, Language & Country of Origin

Within the MHCP population:

14

Number of measures where rates for **Black patients** were *significantly below* the statewide MHCP rates

6

Number of measures where rates for **Indigenous/ Native patients** were *significantly below* the statewide MHCP rates



Rates for **patients from Somalia** were *significantly below* statewide MHCP rates for four measures:

1. Colorectal Cancer Screening
2. Optimal Asthma Control - Adults
3. Adult Depression: Follow-up at Six Months
4. Adult Depression: Follow-up at 12 Months



Rates for **patients who speak Somali** were *significantly below* statewide MHCP rates for four measures:

1. Colorectal Cancer Screening
2. Optimal Asthma Control - Adults
3. Adult Depression: Follow-up at Six Months
4. Adult Depression: Follow-up at 12 Months

Childhood Immunization Status (Combo 10)

Measure Definition



Percentage of children 2 years of age who had the following vaccines by their second birthday:

- 4 DTaP
- 3 polio1 MMR
- 3 HiB
- 3 hepatitis B
- 1 chicken pox
- 4 PCV (pneumonia)
- 1 hepatitis A
- 2-3 rotavirus
- 2 influenza

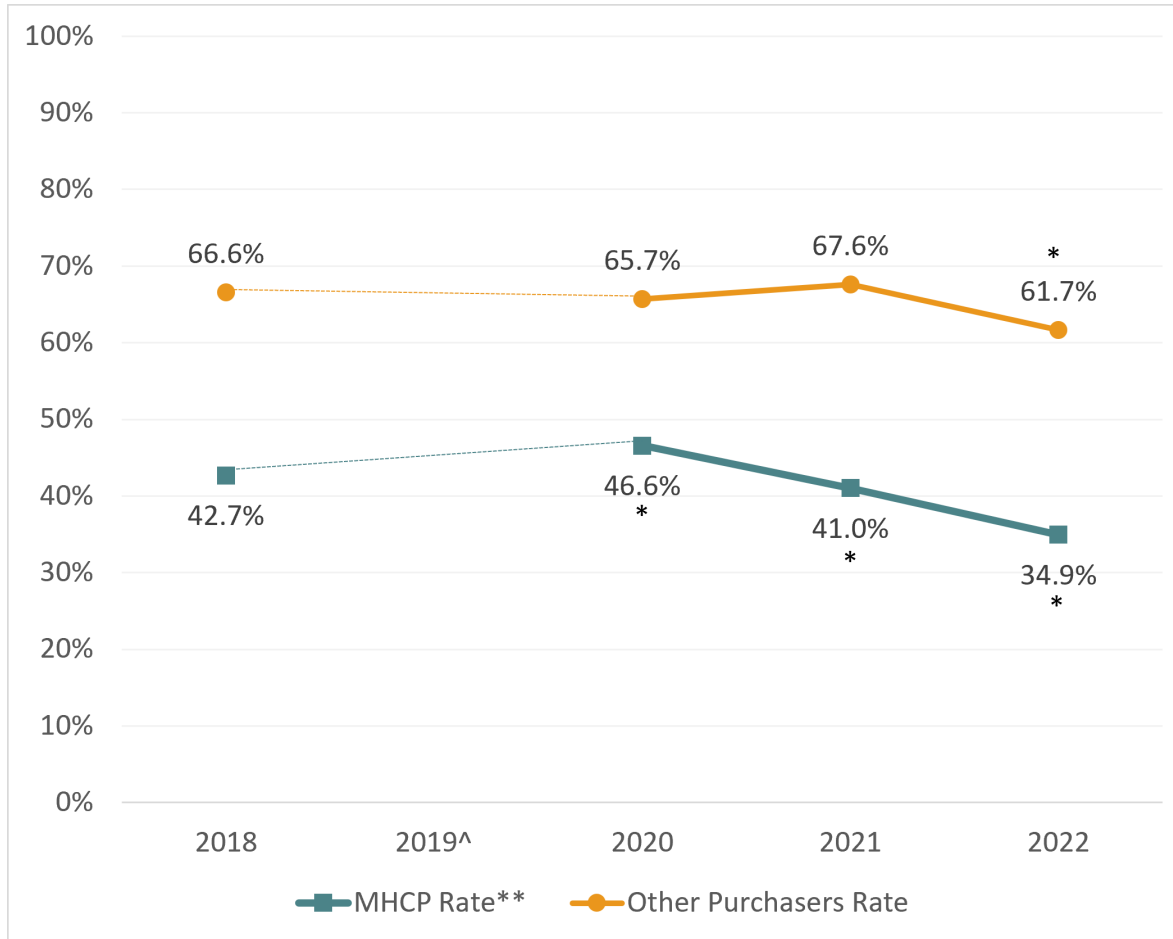
Data Collection Method



- Healthcare Effectiveness Data and Information Set (HEDIS) measure
- Claims/chart abstraction data

Trend Over Time

Childhood Immunization Status (Combo 10)



-6.1
percentage points
MHCP rate decrease from 2021

26.7
percentage points
Gap in rates between MHCP and
Other Purchasers in 2022

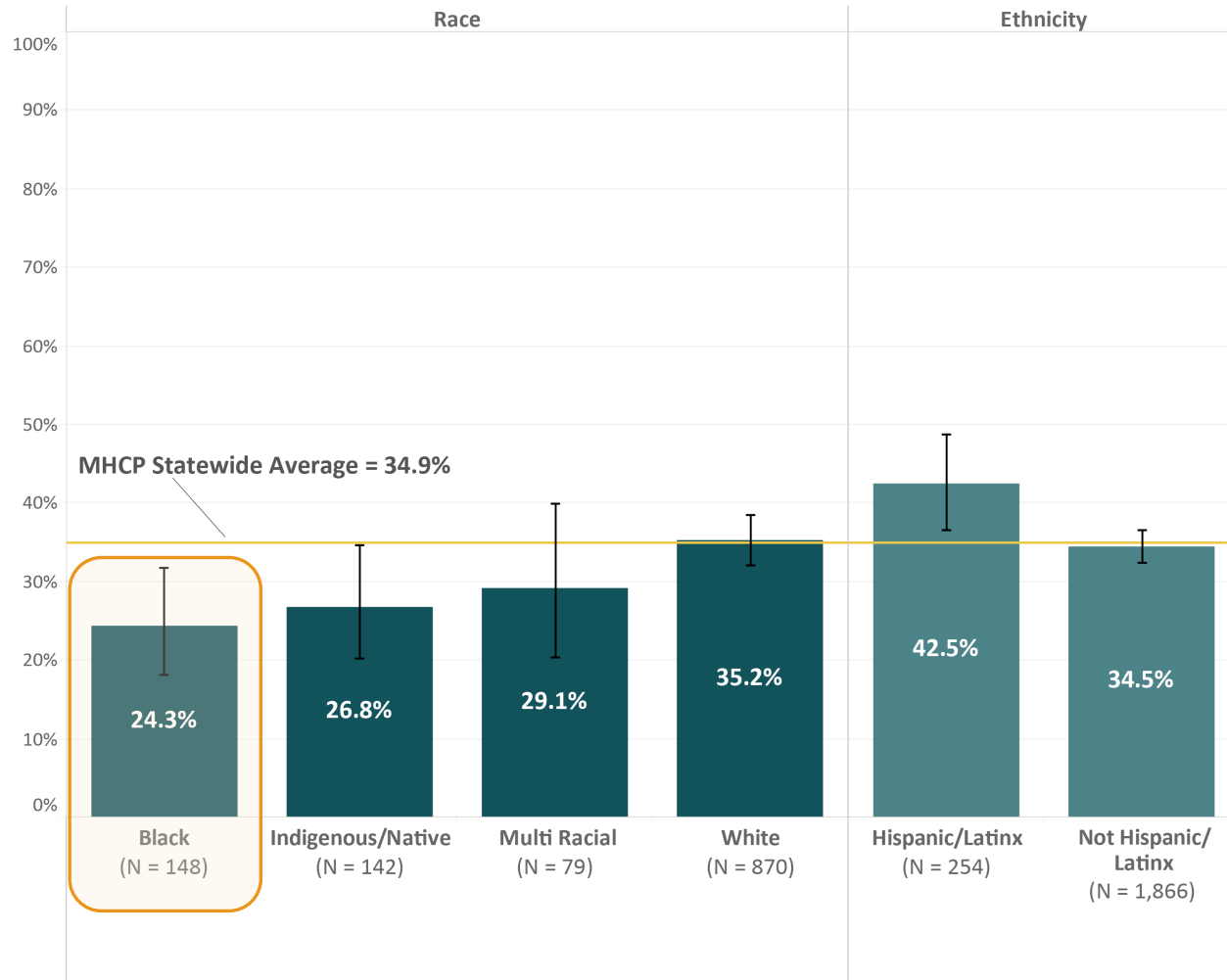
^Due to COVID-19 related interruptions, 2019 performance rates are not available for this measure.

*Rate statistically significantly changed from previous year

**This measure does not allow for separation of MCO and FFS. MHCP here represents both MCO and FFS.

MHCP Rates by Race/Ethnicity

Childhood Immunization Status (Combo 10)



Significantly lower
MHCP rates for Black patients

Note: The Asian and Native Hawaiian/ Pacific Islander categories had less than 60 patients reported, which does not meet the reporting threshold for reliability.

Colorectal Cancer Screening

Measure Definition



The percentage of adults 45 -75 years of age who are up-to-date with one of the following appropriate screenings:

- Colonoscopy within 10 years **OR**
- Flexible sigmoidoscopy within 5 years **OR**
- CT colonography within 5 years **OR**
- Fecal immunochemical test (FIT)-DNA within 3 years **OR**
- Guaiac-based fecal occult blood test (gFOBT) or FIT within 1 year

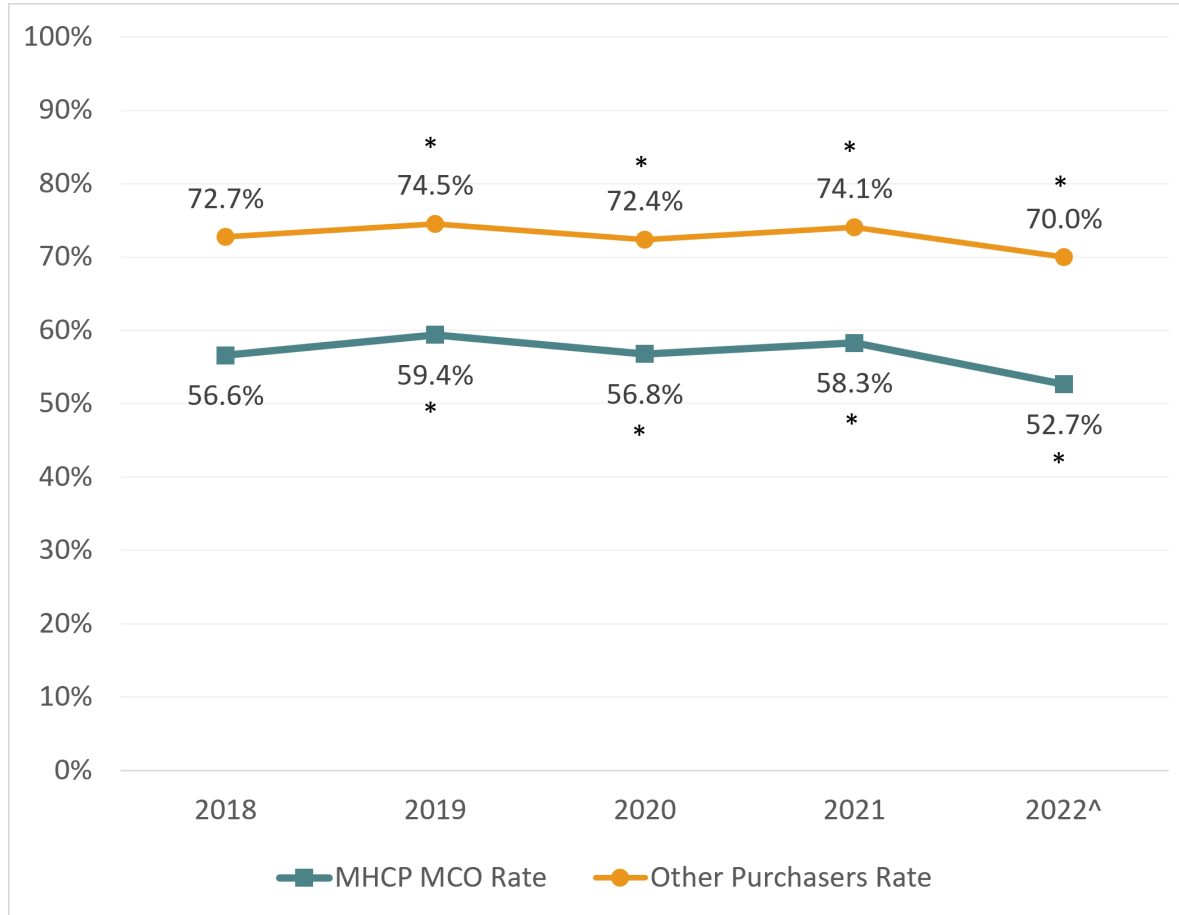
Data Collection Method



- DDS/PIPE measure
- Medical group/clinic data

MHCP Rates by Race/Ethnicity

Colorectal Cancer Screening



-5.6
percentage points
MHCP rate decrease from 2021

17.3
percentage points
Gap in rates between MHCP and
Other Purchasers in 2022

*Rate statistically significantly changed from previous year

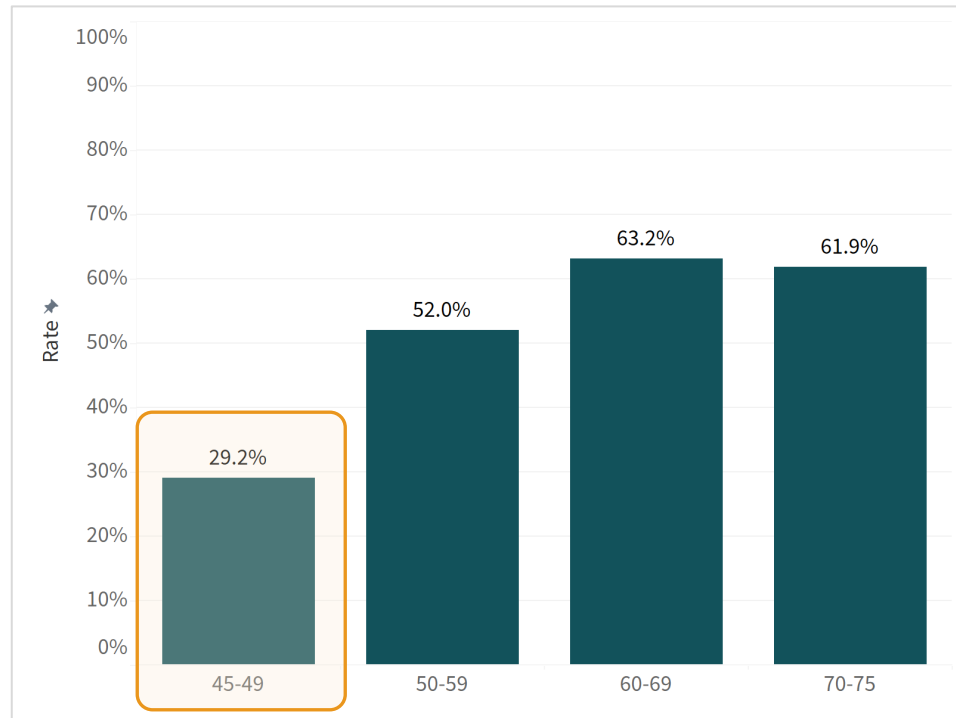
^The eligible age range for the Colorectal Cancer Screening measure was expanded from 50-75 to 45-75 in 2022 to reflect updated USPSTF recommendations and to align with NCQA's measure.

Colorectal Cancer Screening

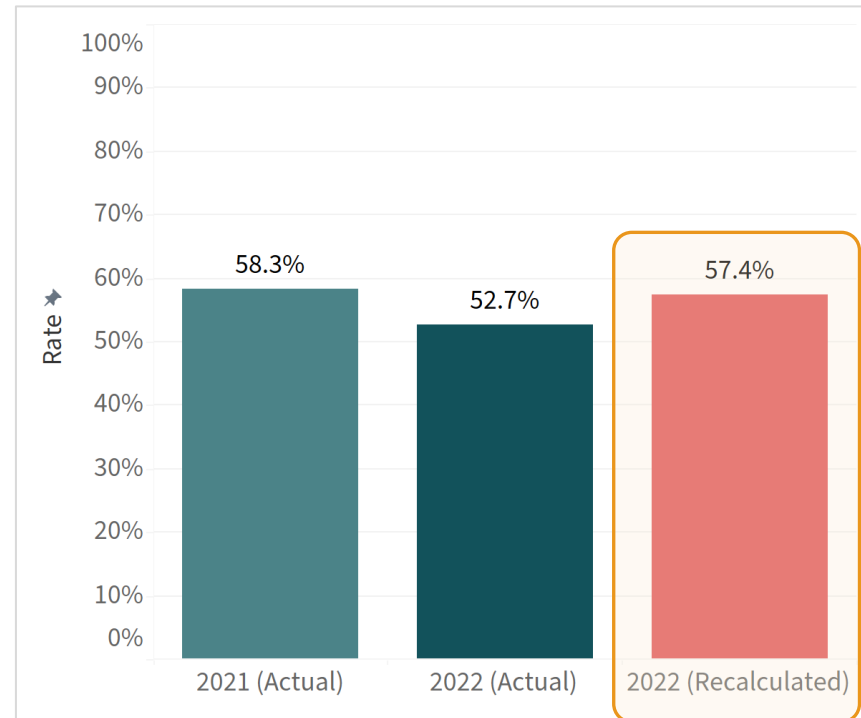
Age Expansion

In 2022, the eligible age range for the Colorectal Cancer Screening measure was expanded from 50-75 to 45-75 to reflect updated USPSTF recommendations and to align with NCQA's Colorectal Cancer Screening measure.

MHCP MCO COLORECTAL CANCER SCREENING RATES BY AGE GROUP

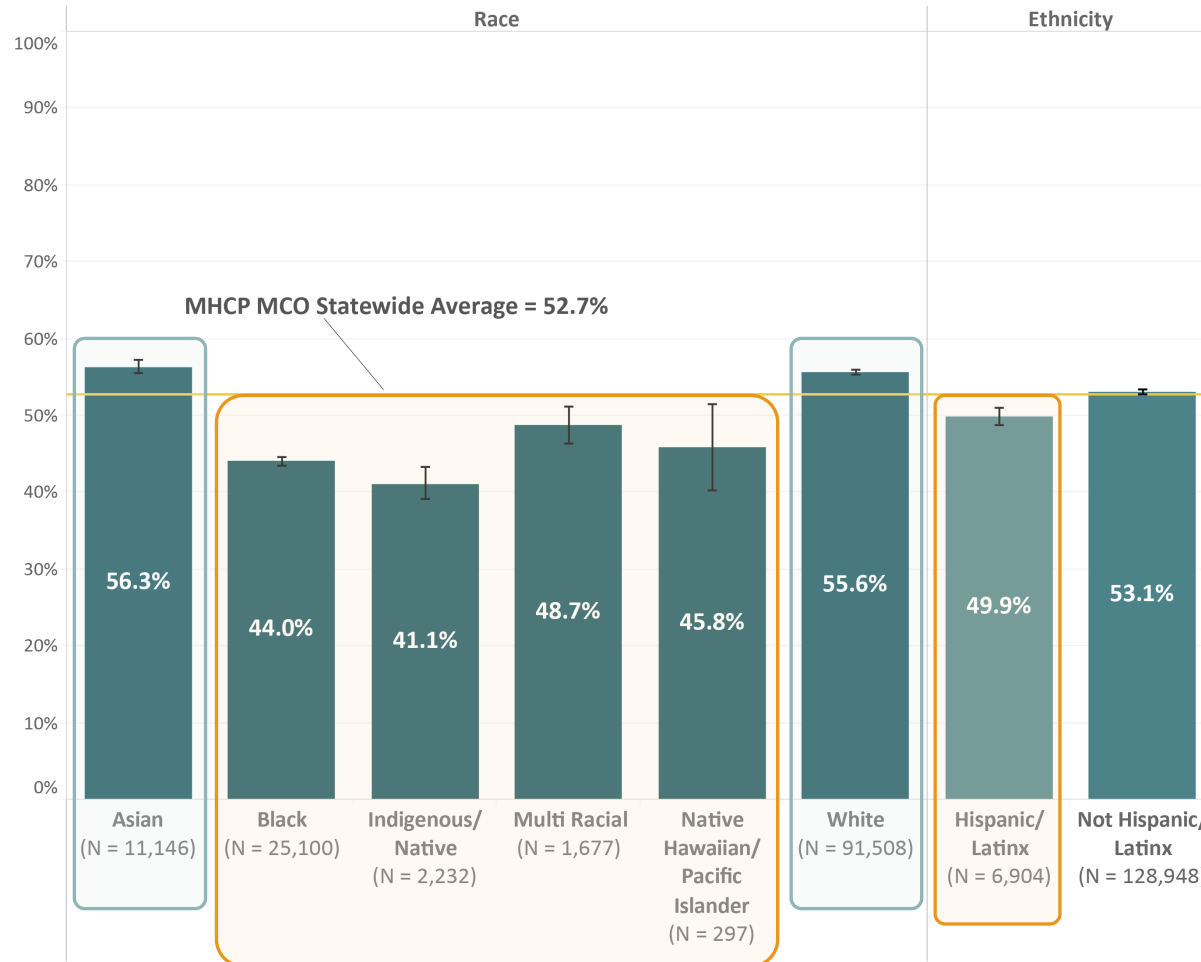


MHCP MCO COLORECTAL CANCER SCREENING RATE COMPARISON



MHCP Rates by Race/Ethnicity

Colorectal Cancer Screening



Significantly lower

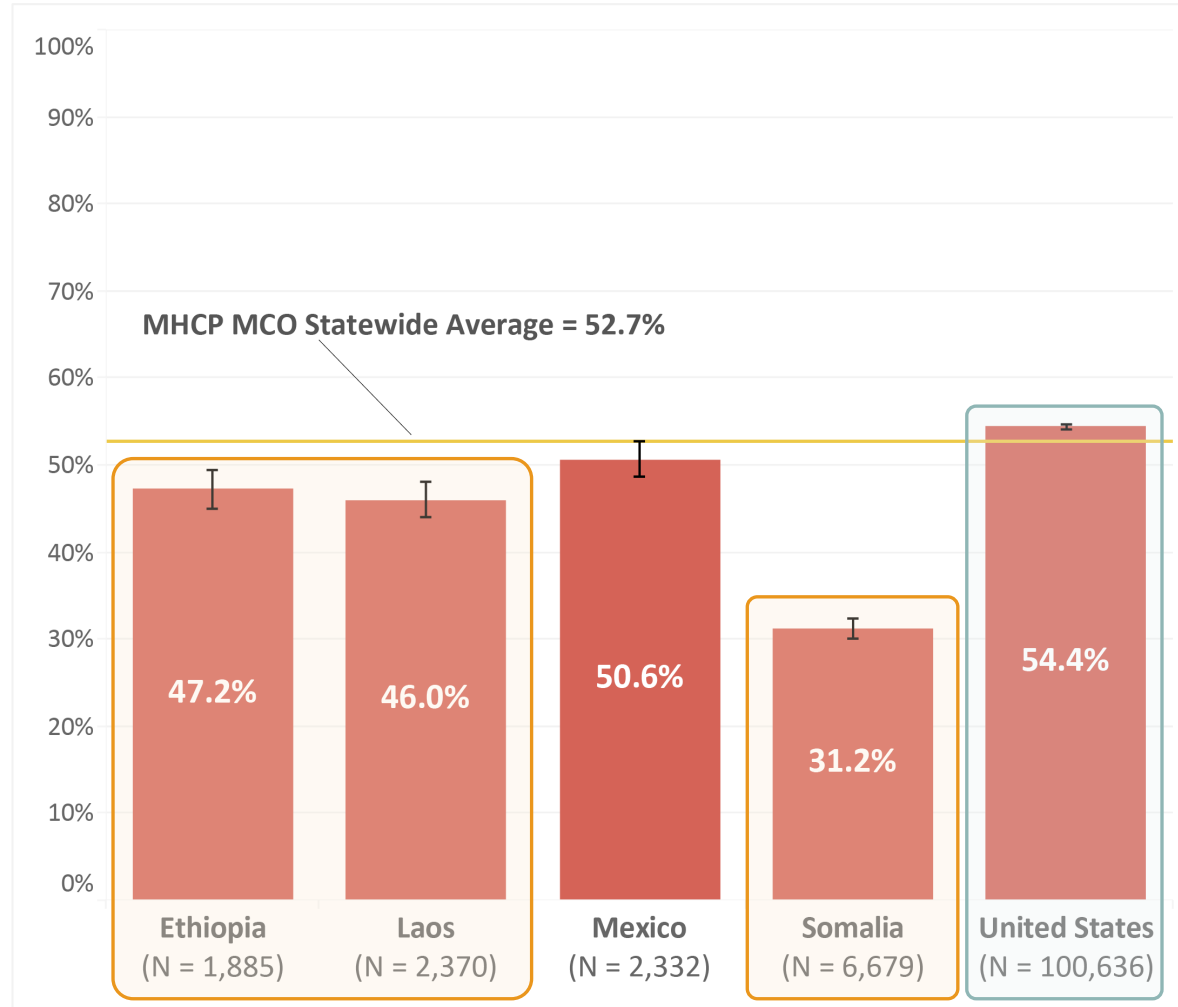
MHCP rates for Black, Indigenous/Native, Multi Racial, Native Hawaiian/Pacific Islander, and Hispanic/Latinx patients

Significantly higher

MHCP rates for Asian or White patients

MHCP Rates by Country of Origin

Colorectal Cancer Screening



80%

of eligible MHCP population is from Ethiopia, Laos, Mexico, Somalia or the United States for the Colorectal Cancer Screening measure

Significantly higher

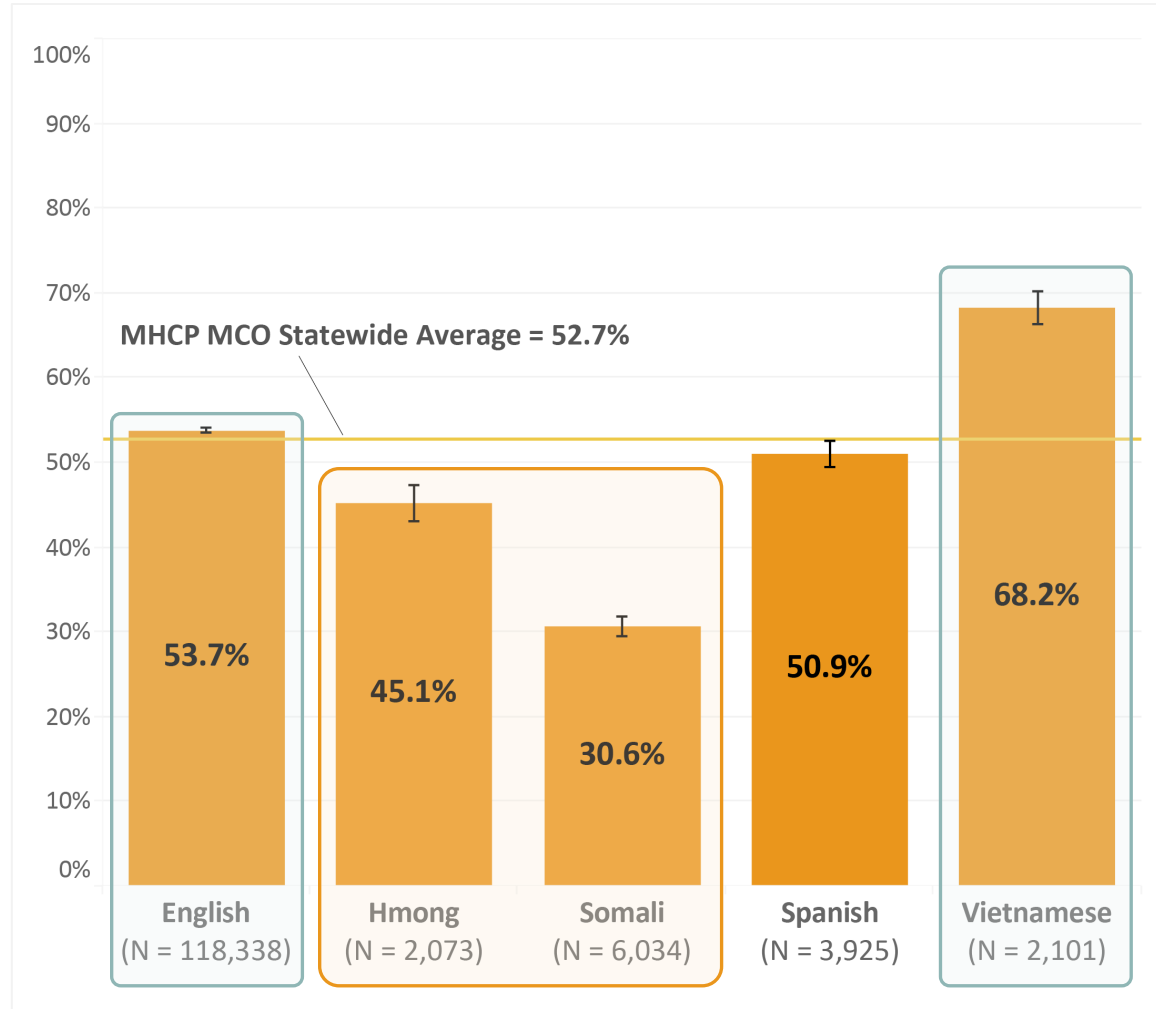
MHCP rates for patients from the United States

Significantly lower

MHCP rates for patients from Ethiopia, Laos, or Somalia

MHCP Rates by Preferred Language

Colorectal Cancer Screening



92%

of eligible MHCP population prefers to speak English, Hmong, Somali, Spanish or Vietnamese for the Colorectal Cancer Screening measure

Significantly higher

MHCP rates for patients who speak English or Vietnamese

Significantly lower

MHCP rates for patients who speak Hmong or Somali

DHS Perspectives

Report in action

1

What kind of work is DHS currently doing or planning on doing to address disparities in health care?

2

How does DHS engage with communities that are experiencing health disparities?

3

In the report, the MHCP population falls behind those with other insurance types in all quality measures. Can you provide some insights into why that is the case?

4

How do you use this report/data in your work?

5

Was there anything that surprised you about the report/data this year?

6

Are there other health topics not included in this report that DHS is focused on to reduce disparities?

Audience Q & A



*Please type your questions into the “Q&A”
box at the bottom of your screen*

Coming Attractions

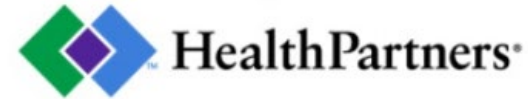
MNCM 2024 Annual Conference

Date:
9/25/2024

Location:
Minneapolis Marriott Northwest
Brooklyn Park, MN

[Conference 2024 - MN Community Measurement \(mncm.org\)](https://mncm.org)

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