

MINNESOTA HEALTH CARE QUALITY REPORT

Part 2: Clinical quality measures reported by health plans Part 3: Top performing medical groups across all measures

> **Community Webinar** February 9, 2023

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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.



During the discussion section, you may also use the "raise hand" function to ask a question.



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

MNCM Members, Thank you!

Health Plan Members











🛞 Hennepin Health



Medical Group Members



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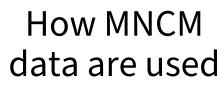
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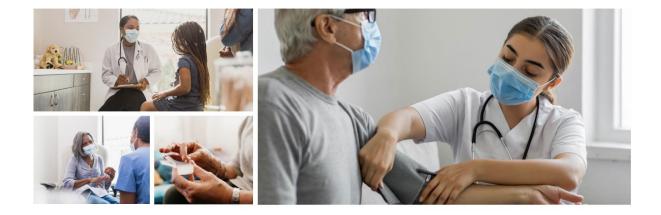


Reducing disparities

-	

Research partnerships





Available on MNCM's website: https://mncm.org/reports/#community-reports

MINNESOTA HEALTH CARE QUALITY REPORT

PART 2: CLINICAL QUALITY MEASURES REPORTED BY PAYERS

Results for care delivered in 2021 | Report released January 2023

MN Community Measurement

INCLUDED IN PART 2 REPORT

- Summary of performance rates by measure
- **RETURNING!** Achievable benchmark goals by measure
- Trend in performance rates across multiple years for each measure
- Statewide results and changes for each measure
- Variation in performance rates across medical groups for each measure

KEY FINDINGS



Most 2021 rates still significantly below 2018 (pre-pandemic) rates but rates for most measures remained stable or increased compared to 2020.



Largest increases in rates compared to 2020 occurred in Osteoporosis Management in Women Who Had a Fracture and Controlling High Blood Pressure.

Significant variation in performance among medical groups, particularly Chlamydia Screening in Women and Avoidance of Antibiotic Treatment in Acute Bronchitis/Bronchiolitis.

ANAN

Childhood Immunization Status had significant decrease compared to 2020, possibly due to disruptions in 2020 and 2021.

STATEWIDE PERFORMANCE & BENCHMARKS Preventive Health

QUALITY MEASURE	2021 Statewide Average	2021 Benchmark	Gap	Minimum	Maximum	Variation Min/Statewide Average/Benchmark/Max
Breast Cancer Screening	72.6%	83.3%	36,912	13.3%	90.2%	
Cervical Cancer Screening	70.2%	83.0%	866	37.6%	91.9%	
Childhood Immunization Status (Combo 10)	53.0%	69.7%	683	24.7%	83.5%	
Chlamydia Screening in Women	47.7%	60.0%	14,573	10.8%	85.2%	
Immunizations for Adolescents (Combo 2)	36.4%	56.4%	797	11.5%	75.5%	

Benchmark: 90th percentile of medical groups or 90th percentile of patients, whichever is lower. This method prevents the benchmark from being too heavily influenced by only a few medical groups or by medical groups with small numbers of patients.

Gap: The additional number of patients who would reach optimal status or goal if all medical groups' rates were at least at benchmark.

RATES OVER TIME Preventive Health

Maria	Measurement Year								
Measure	2016 2017		2018	2019	2020^	2021			
Breast Cancer Screening	76.6%	76.7%	76.5%	-	72.2% ▼	72.6% 🔺			
Cervical Cancer Screening	73.5% 🔺	70.5% 🔻	71.3%	-	64.4% ▼	70.2% 🔺			
Childhood Immunization Status (Combo 10)	53.8%	59.8% 🔺	56.2% ▼	-	56.9%	53.0% 🔻			
Chlamydia Screening in Women	49.8% ▼	50.5% 🔺	51.9% 🔺	51.2% ▼	44.7% ▼	47.7% 🔺			
Immunizations for Adolescents (Combo 2)	-	26.4%	31.2% 🔺	-	33.3%	36.4% 🔺			

▲ Significantly higher than previous year (based on 95% confidence interval)

▼ Significantly lower than previous year (based on 95% confidence interval)

^ Due to the COVID-19 pandemic, we urge caution in using 2020 data for comparison to other years and to draw general conclusions about quality of care. In many respects, 2020 should be considered a new baseline from which recovery should be measured.

"-" data not available for this year and/or significant measure change.

NOTE: Due to COVID-19 related interruptions, statewide rates for 2019 were not available for any measure, except for Chlamydia Screening in Women.

RATE CHANGES Preventive Health

- Almost all measures have significantly increased since 2020
- Apart from the Immunizations for Adolescents (Combo 2) measure, the rates for all other measures in 2021 remained lower than the rates in 2018.
- 76.5% * Breast Cancer Screening 72.2% * 72.6% * * 71.3% Cervical Cancer Screening 64.5% * 70.2% 56.2% **Childhood Immunization Status** 56.8% * (Combo 10) 53.0% * 51.9% * Chlamydia Screening in Women 44.7% * * 47.7% 31.2% Immunizations for Adolescents 33.3% * (Combo 2) 36.4% *

* Significant change from previous year

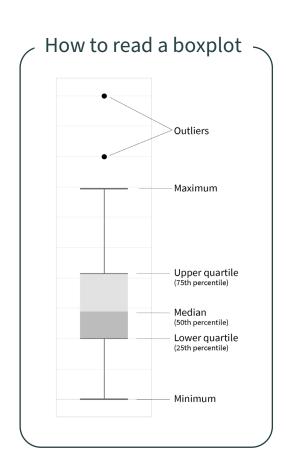
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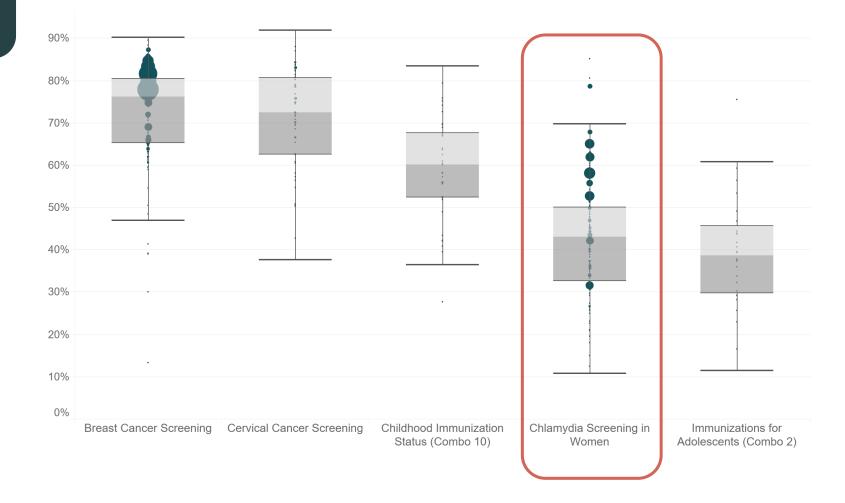
0% 10% 20% 30% 40% 50% 60% 70% 80% 90%

2018 MY Rate 2020 MY Rate 2021 MY Rate

VARIATION BY MEDICAL GROUP

Preventive Health





STATEWIDE PERFORMANCE & BENCHMARKS

Acute & Chronic Conditions

QUALITY MEASURE	2021 Statewide Average	2021 Benchmark	Gap	Minimum	Maximum	Variation Min/Statewide Average/Benchmark/Max
Avoidance of Antibiotic Treatment in Acute Bronchitis/Bronchiolitis	59.3%	75.9%	920	16.7%	95.7%	
Controlling High Blood Pressure	70.2%	79.3%	1,395	23.1%	87.7%	
Diabetes Eye Exam	59.7%	66.6%	12,231	25.8%	78.9%	
Follow-up Care for Children Prescribed ADHD Medication	38.8%	47.6%	437	24.6%	58.1%	
Osteoporosis Management in Women who had a Fracture	29.9%	37.3%	144	18.4%	45.5%	
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	29.9%	35.2%	295	17.1%	47.0%	

Benchmark: 90th percentile of medical groups or 90th percentile of patients, whichever is lower. This method prevents the benchmark from being too heavily influenced by only a few medical groups or by medical groups with small numbers of patients.

Gap: The additional number of patients who would reach optimal status or goal if all medical groups' rates were at least at benchmark.

RATES OVER TIME Acute & Chronic Conditions

	Measurement Year								
Measure	2016	2017	2018	2019	2020^	2021			
Avoidance of antibiotic treatment in acute bronchitis/bronchiolitis	-	-	-	-	57.8%	59.3%			
Controlling High Blood Pressure	-	-	-	-	62.3%	70.2% 🔺			
Diabetes Eye Exam	-	65.6%	64.4%	-	56.4% ▼	59.7% 🔺			
Follow up care for children prescribed ADHD Medication	42.7%	41.3%	39.5%	-	38.8%	38.8%			
Osteoporosis management in women who had a fracture	-	-	31.5%	-	20.1% 🔻	29.9% 🔺			
Use of spirometry testing in the assessment and diagnosis of COPD	39.2%	37.5%	37.6%	-	32.4% ▼	29.9% 🔻			

▲ Significantly higher than previous year (based on 95% confidence interval)

▼ Significantly lower than previous year (based on 95% confidence interval)

^ Due to the COVID-19 pandemic, we urge caution in using 2020 data for comparison to other years and to draw general conclusions about quality of care. In many respects, 2020 should be considered a new baseline from which recovery should be measured.

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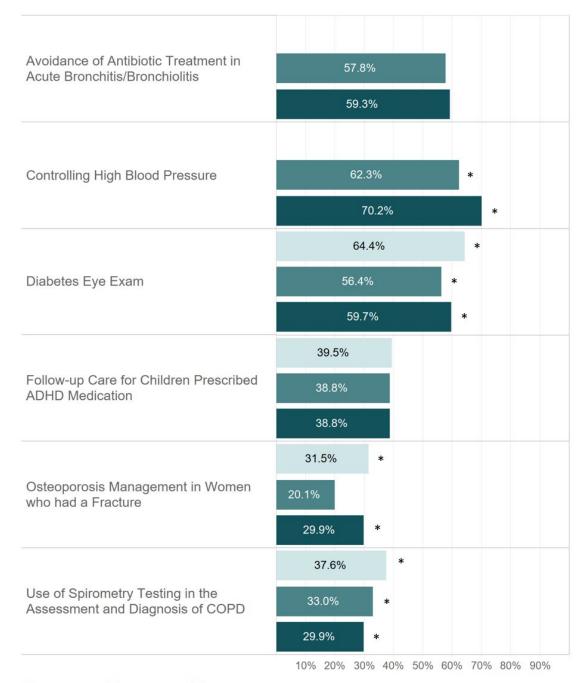
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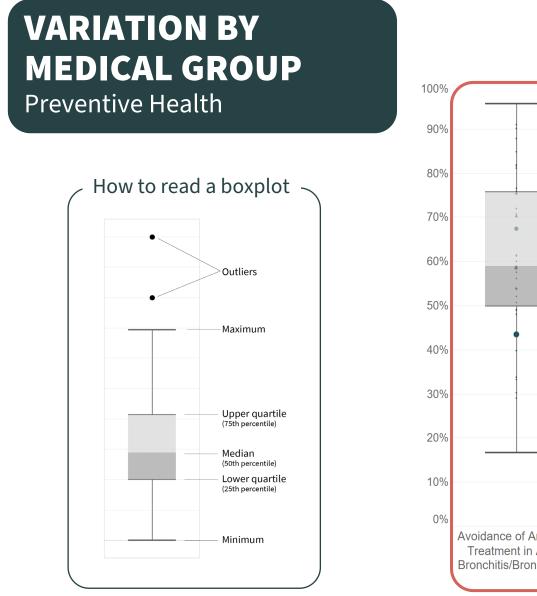
RATE CHANGES Acute & Chronic Conditions

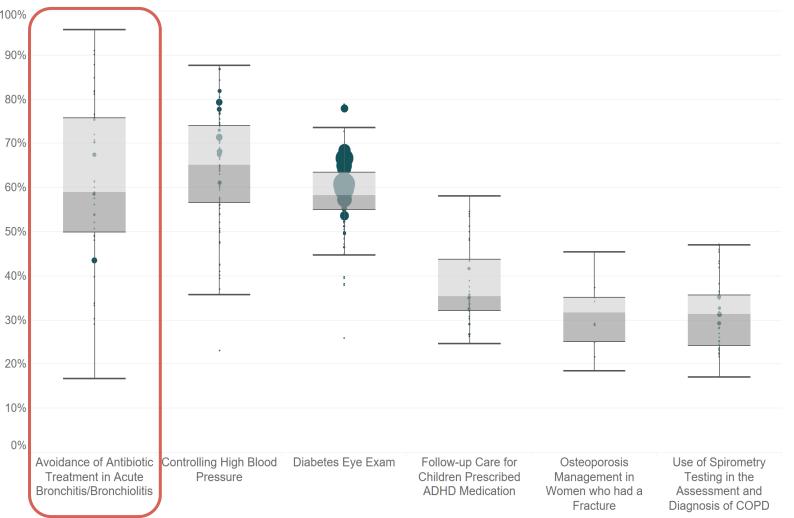
- Almost all measures have increased since 2020.
- The rates for all measures in 2021 remained lower than the rates in 2018 (when data available).

* Significant change from previous year

^ Due to the COVID-19 pandemic, we urge caution in using 2020 data for comparison to other years and to draw general conclusions about quality of care. In many respects, 2020 should be considered a new baseline from which recovery should be measured.







TOP PERFORMERS

Included if eligible for at least 5 measures

- Above average
- Below average or average
- < Not reportable (too few patients for measure)
- Not assigned to measure

NEW THIS YEAR

Reduced number of depression measures included to Follow-up and Remission at 12 months only for both populations

QUALITY MEASURE		CentraCare Health	Central Pediatrics	Child and Teen Medical Center	Entira Family Clinics	Essentia Health	Health Partners Clinics	Mankato Clinic, Ltd.	Park Nicollet Health Services	Pediatric & Young Adult Medicine
.0	Adolescent Depression: Follow-up PHQ-9/9M at 12 Months	•	•	0	•	•	•	•	•	0
GROUPS	Adolescent Depression: Remission at 12 Months	•	0	•	0	•	0	0	0	•
DICAL	Adolescent Mental Health and/or Depression Screening	•	•	•	0	•	0	•	0	•
MEASURES REPORTED BY MEDICAL GROUPS DDS/PIPE	Adult Depression: Follow-up PHQ-9/9M at 12 Months	0	0	~	•	•	•	•	•	<
PORTE DD:	Adult Depression: Remission at 12 Months	0	0	<	•	•	•	•	•	<
RE	Colorectal Cancer Screening	•	-	-	•	•	•	•	•	-
URES	Optimal Asthma Control - Adults	•	•	•	•	•	•	•	•	•
MEAS	Optimal Asthma Control - Children	0	•	•	•	•	•	0	•	•
	Optimal Diabetes Care	•	-	-	•	•	•	•	0	-
	Optimal Vascular Care	0	-	-	•	•	•	0	0	-
	Avoidance of Antibiotic Treatment in Acute Bronchitis/Bronchiolitis	•	<	<	0	0	•	•	•	<
<u>د</u>	Breast Cancer Screening	•	<	<	0	•	•	•	•	<
AN	Cervical Cancer Screening	•	<	<	0	0	•	•	0	-
TH PL	Childhood Immunization Status (Combo 10)	0	•	0	0	0	0	•	0	<
HEAL	Chlamydia Screening in Women	•	•	0	•	0	•	0	•	0
RTED BY HEDIS	Controlling High Blood Pressure	0	~	<	•	•	0	•	0	<
	Diabetes Eye Exam	•	<	<	•	•	•	0	•	<
MEASURES REPORTED BY HEALTH PLANS HEDIS	Follow-up Care for Children Prescribed ADHD Medication	0	•	0	0	0	0	0	0	0
ASURE	Immunizations for Adolescents (Combo 2)	•	•	<	0	0	0	<	0	<
MEA	Osteoporosis Management in Women Who Had a Fracture	0	<	<	<	0	0	<	0	<
	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	0	۷	<	0	0	0	0	•	<
TOTAL MEASURES ABOVE STATEWIDE AVERAGE		12	8	4	11	13	13	12	11	4
TOTAL	ELIGIBLE MEASURES	21	11	8	20	21	21	19	21	7
% OF M	IEASURES ABOVE STATEWIDE GE	57%	73%	50%	55%	62%	62%	63%	52%	57%



Please type your questions into the "Q&A" box at the bottom of your screen

Upcoming Events

March 1 Webinar on the MNCM Cost & Utilization Report

March 22 Webinar on Social Risk Factors Data Collection

April 26MNCM 2023 Annual ConferenceCrowne Plaza Minneapolis West | Plymouth, MN

THANK YOU!



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

Please reach out to us at <u>support@mncm.org</u> with additional questions related to available data or how our data can support your work.





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