



# Minnesota Health Care Quality Report

Part 1: Clinical Quality Measures Reported by Medical Groups

**COMMUNITY WEBINAR**

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THURSDAY, SEPTEMBER 21, 2023

# Welcome!

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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.



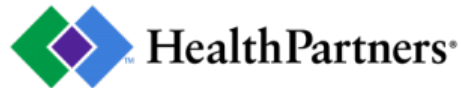
MNCM will send a link to the presentation slides and the recording to webinar attendees later this week.

# MNCM Members, Thank you!

## Health Plan Members



## Medical Group Members



# 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.

## Current Silver Level Supporters



[www.mncm.org/mission-supporter-program](http://www.mncm.org/mission-supporter-program)

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

## What we do



Multi-stakeholder convening



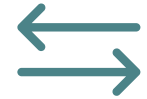
Measure developer



Data collection, validation



Public transparency



Facilitated Data Sharing

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## How MNCM data are used



Quality improvement



Benchmarking



Value-based payment



Reducing disparities



Research partnerships

# Agenda

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## Report Overview



## Key Findings

Care delivered in 2022



## Audience Q&A

# Health Care Quality Report

## Part 1

*Measures reported by medical groups*

- Colorectal Cancer Screening
- Optimal Asthma Control (Adults & Children)
- Optimal Diabetes Care
- Optimal Vascular Care
- Adolescent Mental Health and/or Depression Screening
- Depression Suite (Adults & Adolescents)
  - Follow-up PHQ-9/9M at 6/12 Months
  - Response at 6/12 Months
  - Remission at 6/12 Months

September 2023

## Part 2

*Measures reported by health plans*

- Avoidance of Antibiotic Treatment in Acute Bronchitis/Bronchiolitis
- Breast Cancer Screening
- Cervical Cancer Screening
- Childhood Immunization Status (Combo 10)
- Chlamydia Screening in Women
- Controlling High Blood Pressure
- Eye Exam for Patients with Diabetes
- Follow-up for Children Prescribed ADHD Medication
- Immunization for Adolescents (Combo 2)
- Osteoporosis Management in Women with Fracture
- Spirometry Testing in the Assessment and Diagnosis of COPD

December 2023

## Part 3

*High Performers*

Spotlight report that highlights the top performing medical groups across all quality measures

January 2024



# Current Report

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## What's inside?

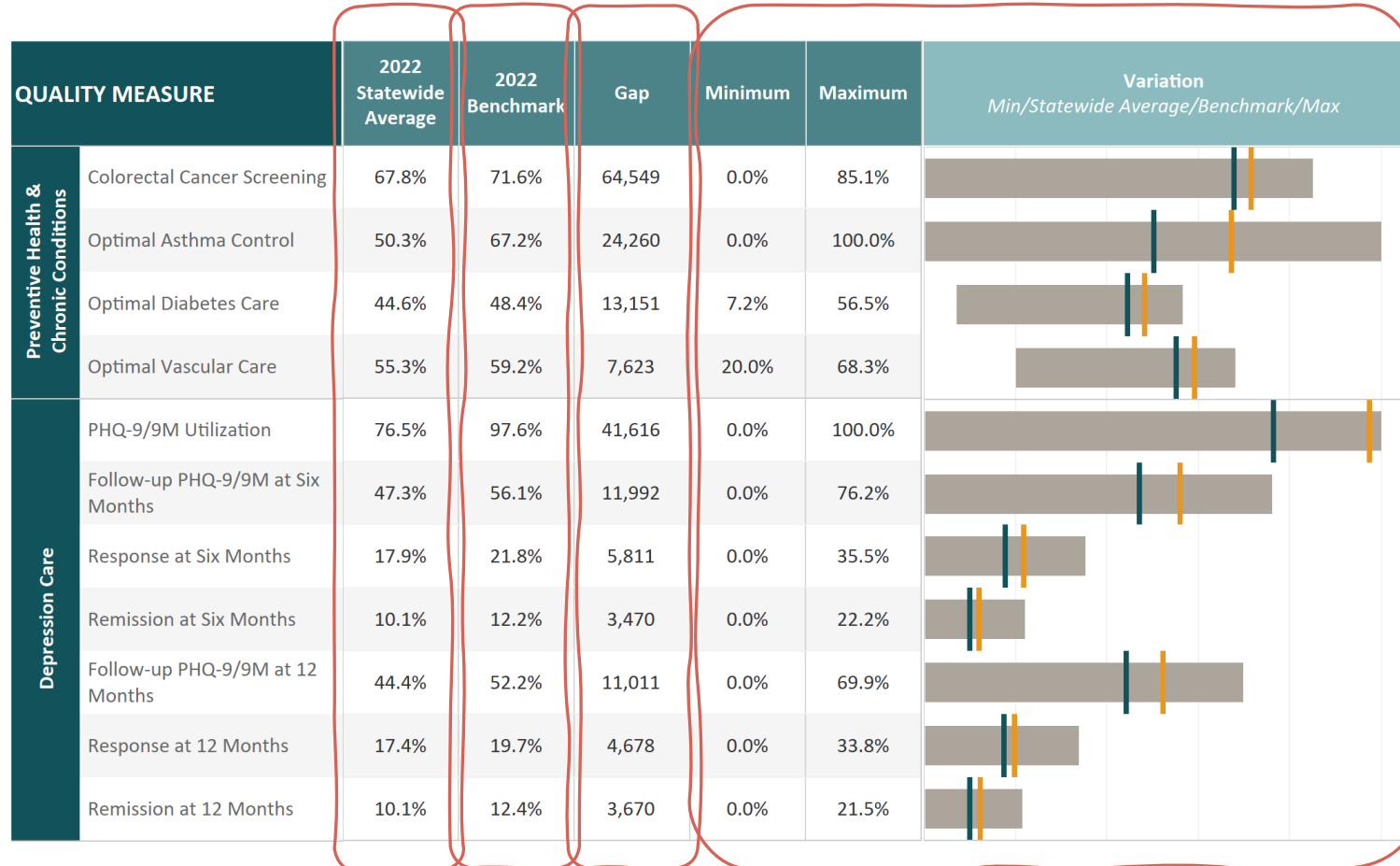
- Summary of performance rates with achievable benchmark goals by measure
- Trend in performance rates across multiple years for each measure, including comparison to 2019 rates (i.e., pre-pandemic)
- Variation in performance rates across medical groups for each measure
- Variation in performance rates across Minnesota three-digit ZIP code regions

Report can be found at [mncm.org](https://mncm.org) > Reports & Data > Community Reports



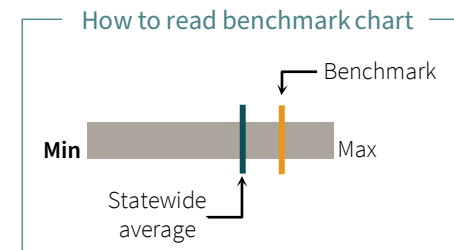
# Benchmark Analysis

## Adults



**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.



# Benchmark Analysis

## Gap Example

QUALITY MEASURE		2022 Statewide Average	2022 Benchmark	Gap
Preventive Health & Chronic Conditions	Colorectal Cancer Screening	67.8%	71.6%	64,549
	Optimal Asthma Control	50.3%	67.2%	24,260
	Optimal Diabetes Care	44.6%	48.4%	13,151
	Optimal Vascular Care	55.3%	59.2%	7,623
Depression Care	PHQ-9/9M Utilization	76.5%	97.6%	41,616
	Follow-up PHQ-9/9M at Six Months	47.3%	56.1%	11,992
	Response at Six Months	17.9%	21.8%	5,811
	Remission at Six Months	10.1%	12.2%	3,470
	Follow-up PHQ-9/9M at 12 Months	44.4%	52.2%	11,011
	Response at 12 Months	17.4%	19.7%	4,678
	Remission at 12 Months	10.1%	12.4%	3,670

Actual Rate  
**67.8%**



Numerator



Denominator

Benchmark Rate  
**71.6%**

**+64,459**



Numerator



Denominator

# Rates Over Time

## Adults

MEASURE		MEASUREMENT YEAR				
		2018	2019	2020^	2021	2022
Preventive Health & Chronic Conditions	Colorectal Cancer Screening	71.2%	73.2% ▲	70.6% ▼	72.2% ▲	67.8% ▼*
	Optimal Asthma Control	53.3%	53.4% ▲	46.6% ▼	50.3% ▲	50.3%
	Optimal Diabetes Care	44.9%	45.4% ▲	40.6% ▼	43.6% ▲	44.6% ▲
	Optimal Vascular Care	61.1%	60.3% ▼	53.8% ▼	56.5% ▲	55.3% ▼
Depression Care	PHQ-9/9M Utilization	N/A	77.7%	68.7% ▼	71.7% ▲	76.5% ▲
	Follow-up PHQ-9/9M at Six Months	N/A	48.5%	47.9% ▼	45.3% ▼	47.3% ▲
	Response at Six Months	N/A	19.4%	18.9%	18.1% ▼	17.9%
	Remission at Six Months	N/A	11.3%	11.0%	10.3% ▼	10.1%
	Follow-up PHQ-9/9M at 12 Months	N/A	41.8%	39.6% ▼	43.9% ▲	44.4%
	Response at 12 Months	N/A	17.0%	16.5% ▼	18.1% ▲	17.4% ▼
	Remission at 12 Months	N/A	10.1%	9.9%	10.6% ▲	10.1% ▼

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

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

N/A Measure underwent significant changes in 2019 so comparison to prior years is not available

^ 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.

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

# Rates Over Time

## Optimal Diabetes & Vascular Care

MEASURE		MEASUREMENT YEAR				
		2018	2019	2020 <sup>^</sup>	2021	2022
Optimal Diabetes Care	<b>Optimal Care (Composite)</b>	44.9%	45.4% ▲	40.6% ▼	43.6% ▲	44.6% ▲
	Blood Pressure Control ( <i>&lt;140/90</i> )	83.1%	83.1%	76.0% ▼	79.0% ▲	79.7% ▲
	Daily Aspirin Use ( <i>If ischemic vascular disease is present</i> )	99.4%	99.3% ▼	99.1% ▼	99.1%	98.7% ▼
	HbA1c Control ( <i>&lt; 8.0</i> )	69.5%	70.2% ▲	67.2% ▼	70.5% ▲	71.8% ▲
	Statin Use ( <i>Unless contraindicated</i> )	88.1%	88.3%	87.4% ▼	87.9% ▲	88.0%
	Tobacco-free ( <i>Not currently using tobacco</i> )	84.0%	84.2%	84.0%	84.1%	84.6% ▲
Optimal Vascular Care	<b>Optimal Care (Composite)</b>	61.1%	60.3% ▼	53.8% ▼	56.5% ▲	55.3% ▼
	Blood Pressure Control ( <i>&lt;140/90</i> )	83.7%	83.9%	76.9% ▼	79.9% ▲	80.5% ▲
	Daily Aspirin Use ( <i>Unless contraindicated</i> )	92.5%	90.9% ▼	88.0% ▼	89.8% ▲	87.3% ▼
	Statin Use ( <i>Unless contraindicated</i> )	91.6%	91.7%	90.9% ▼	91.5% ▲	91.4%
	Tobacco-free ( <i>Not currently using tobacco</i> )	82.4%	82.5%	82.0% ▼	82.4% ▲	82.4%

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

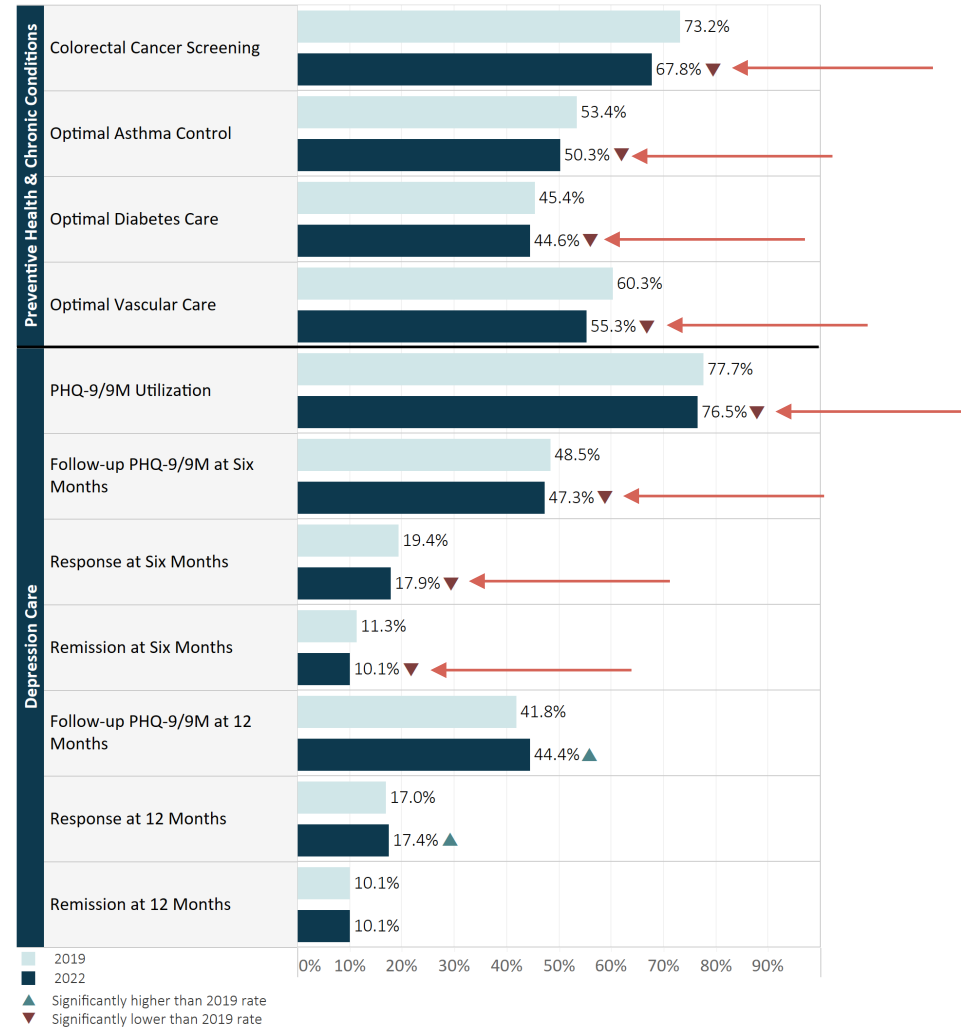
▼ Significantly lower than previous year (based on 95% confidence interval)

N/A Measure underwent significant changes in 2019 so comparison to prior years is not available

<sup>^</sup> 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.

# Comparison to Pre-Pandemic Rates

## Adults

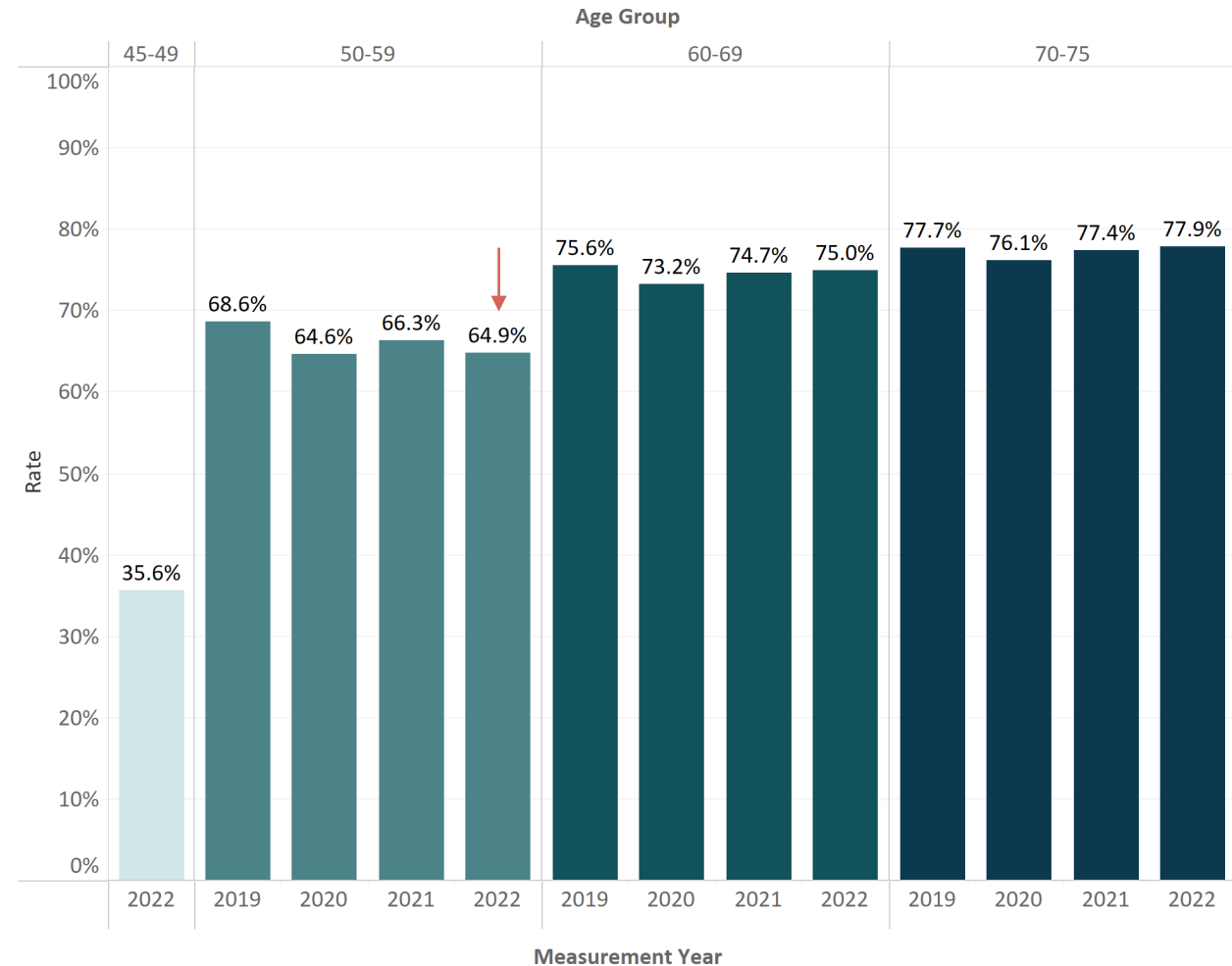


# Colorectal Cancer Screening

## Update to Age Range

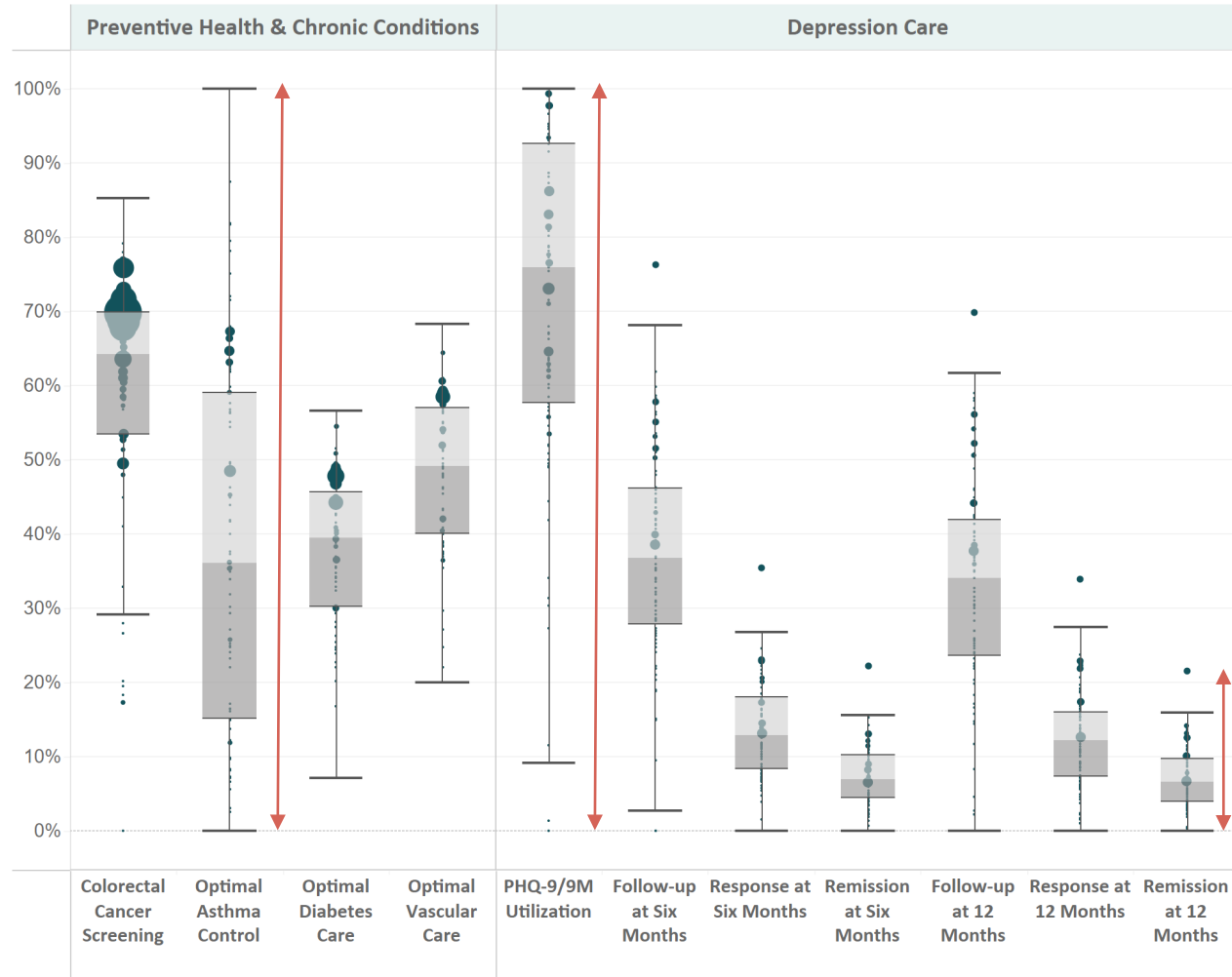
Percentage of adults ages ~~50-75~~<sup>45-75</sup> who are up-to-date with the appropriate screening for colorectal cancer. Appropriate screenings include one of the following:

- **Colonoscopy** during measurement period or nine years prior
- **Flexible sigmoidoscopy** during the measurement period or four years prior
- **CT colonography** during the measurement year or four years prior
- **FIT-DNA** during measurement year or two years prior
- **gFOBT or FIT** during measurement year

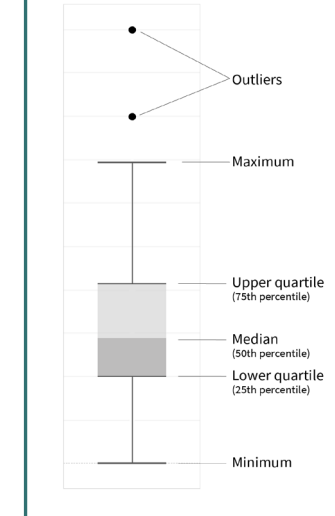


# Rate Variation by Medical Group

## Adults



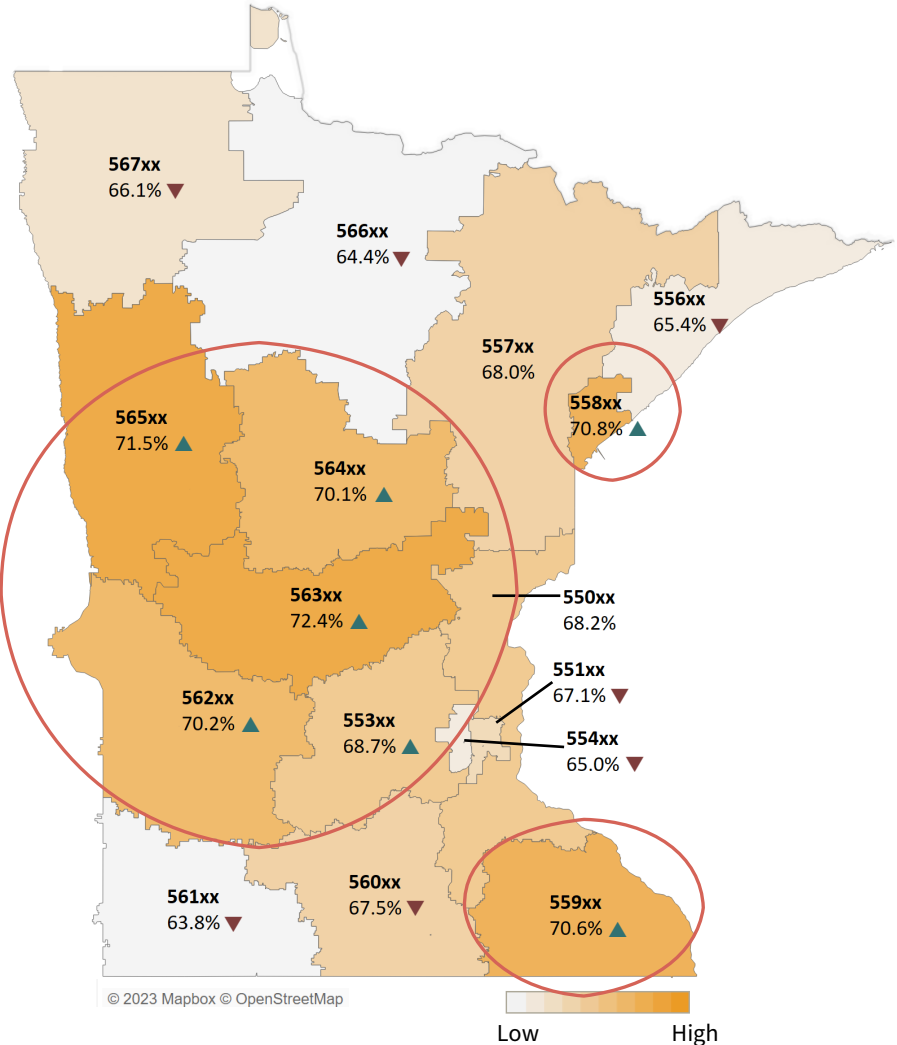
### How to read a box plot





# Rate Variation by Geography

## Colorectal Cancer Screening



3-digit ZIP Code	Major City	Rate
Minnesota Resident Average		68.0%
550xx	Stillwater	68.2%
551xx	St. Paul	67.1% ▼
553xx	Minnetonka	68.7% ▲
554xx	Minneapolis	65.0% ▼
556xx	Two Harbors	65.4% ▼
557xx	Cloquet	68.0%
558xx	Duluth	70.8% ▲
559xx	Rochester	70.6% ▲
560xx	Mankato	67.5% ▼
561xx	Windom	63.8% ▼
562xx	Willmar	70.2% ▲
563xx	St. Cloud	72.4% ▲
564xx	Brainerd	70.1% ▲
565xx	Detroit Lakes	71.5% ▲
566xx	Bemidji	64.4% ▼
567xx	Thief River Falls	66.1% ▼

Minnesota resident average includes only patients submitted with a Minnesota ZIP code as their place of residence.

- ▲ Significantly higher than Minnesota resident average (based on 95% confidence interval)
- ▼ Significantly lower than Minnesota resident average (based on 95% confidence interval)

# Key Findings

Comparison of 2022 rates to 2021 rates



## Significant Increases

- Adolescent Mental Health and/or Depression Screening
- Optimal Diabetes Care
- Adult Dep: Follow-up at 6 Months
- Adol Dep: Follow-up at 6 Months
- Adult Dep: PHQ-9/9M Utilization
- Adol Dep: PHQ-9/ 9M Utilization

**+6.0**



## Significant Decreases

- Adult Dep: Remission at 12 Months
- Adult Dep: Response at 12 Months
- Optimal Vascular Care
- Optimal Asthma Control – Children
- Colorectal Cancer Screening

**-4.4**

*Age expansion contributed to significant decrease, but other factors contributed as well*

# Key Findings

Comparison of 2022 rates to 2019 rates (pre-pandemic)



## Significantly Higher

- Adult Dep: Response at 12 Months
- Adol Dep: Follow-up PHQ-9/9M at Six Months
- Adult Dep: Follow-up PHQ-9/9M at 12 Months
- Adol Dep: PHQ-9/9M Utilization
- Adolescent Mental Health and/or Depression Screening

+3.3



## Significant Decreases

- Optimal Diabetes Care
- Adol Dep: Remission at 12 Months
- Adol Dep: Remission at Six Months
- Adult Dep: Follow-up PHQ-9/9M at Six Months
- Adult Dep: Remission at Six Months
- Adult Dep: PHQ-9/9M Utilization
- Adol Dep: Response at Six Months
- Adult Dep: Response at Six Months
- Optimal Asthma Control – Adults
- Optimal Asthma Control – Children
- Optimal Vascular Care

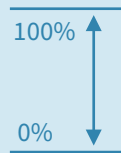
-5.4 • Colorectal Cancer Screening

# Key Findings

## Variation among Medical Groups

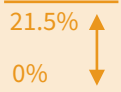
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### Adults



#### **Largest variation:**

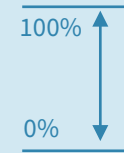
- Optimal Asthma Control
- PHQ-9/9M Utilization



#### **Smallest variation:**

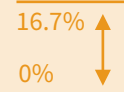
Depression – Remission at 12 Months

### Children/Adolescents



#### **Largest variation:**

- AMH Screening
- PHQ-9/9M Utilization



#### **Smallest variation:**

Depression – Remission at 12 Months

# Key Findings

## Variation among Three-Digit ZIP Code Regions



### Minnetonka area (553xx)

- Colorectal Cancer Screening
- Optimal Asthma Control – Adults
- Optimal Diabetes Care
- Optimal Vascular Care
- AMH Screening
- Optimal Asthma Control - Children



### Windom area (561xx)

- Colorectal Cancer Screening
- Optimal Asthma Control – Adults
- Optimal Diabetes Care
- Optimal Vascular Care
- AMH Screening
- Optimal Asthma Control – Children
- Adol Dep: Remission at Six Months



### Thief River Falls area (567xx)

- Colorectal Cancer Screening
- Optimal Asthma Control – Adults
- Optimal Diabetes Care
- Optimal Vascular Care
- Adult Dep: Remission at Six Months
- AMH Screening
- Optimal Asthma Control – Children

## Audience Q & A



*Please type your questions into the “Q&A”  
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# Thank you for joining us!

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Please reach out to us at [support@mncm.org](mailto:support@mncm.org) with additional questions related to available data or how our data can support your work.



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