

HEDIS Summary Measurement Year 2022 - MNCCare



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Healthcare Effectiveness Data and Information Set – MY2022

Description

This report provides Hennepin Health HEDIS® rate analysis for identified measures for the Minnesota Care Program (MNCare). The National Committee for Quality Assurance (NCQA) administers Healthcare Effectiveness Data and Information Set (HEDIS®). It is a tool used in the United States to measure performance on health care dimensions of care and service. HEDIS® is a critical instrument to measure both the quality and quantity of care. Results of the HEDIS® measurements are analyzed to strategically plan and implement QM initiatives, track utilization, and evaluate performance against other health plans. Every year, NCQA updates and releases HEDIS® measures, utilizing a process to ensure the measures remain relevant and feasible for implementation. HEDIS® includes more than 90 measures across six domains as outlined below.

- Effectiveness of Care
- Access and Availability of Care
- Experience of Care
- Utilization and Risk Adjusted Utilization
- Health Plan Descriptive Information
- Measures Reported Using Electronic Clinical Data Systems

Examples of HEDIS® measures are listed below.

- Children and Adolescents: Immunizations, Well-Child/Adolescent Visits
- Adult Preventive Care: Breast cancer screening, Cervical cancer screening
- Chronic Disease Management: Diabetes Care, Controlling Hypertension
- Behavioral Health: Follow-up After Hospitalization for Mental Illness, 7-Day and 30-Day

Data collected for HEDIS® Measurement Year (MY) 2022 is from the calendar year 2022 and is reported by the individual programs. While Hennepin Health has experienced growth and stability in its product offerings, the children and adolescent population for both Hennepin Health PMAP and Hennepin Health MinnesotaCare children remains small. For most children and adolescent measures, the 411 minimal sampling requirement is not met.

The Department of Human Services MNCare contract requires Hennepin Health to report a limited number of HEDIS® performance measures, both hybrid and administratively. Administrative measures use claims and supplemental data sources to determine measure compliance, while hybrid measures combine administrative sources with the ability to also perform chart reviews to determine measure compliance. In

addition, MDH requires Hennepin Health to provide results of additional HEDIS® measures. Minnesota Community Measurement (MNCM) also uses HEDIS® measures for their outcome data measurement.

Hennepin Health, in collaboration with eight Minnesota health plans, creates an annual Minnesota health plan average for each HEDIS® measure to allow for rate comparison between health plans. Minnesota strives to produce high HEDIS® rates, focusing upon the quality of care rather than the quantity of care. The Minnesota average is provided in this report for select HEDIS® measures where an average was created.

Hennepin Health Measure Strengths HEDIS® MY2022

The Hennepin Health MinnesotaCare program scored higher than the Minnesota average for the following measures:

- *Cervical Cancer Screening*
- *Chlamydia Screening in Women (CHL)*
- *Asthma Medication Ratio (AMR) – Ages 51-64, Total*
- *Hemoglobin A1c Control for Patients With Diabetes (HBD) - HA1c Good Control <8*
- *Antidepressant Medication Management (AMM) - Continuation*
- *Use of Opioids from Multiple Prescribers (UOP) – Multiple Prescribers and Multiple Prescribers/Multiple Pharmacies*
- *Risk of Continued Opioid Use (COU) – 15 Days, 30 Days*
- *Initiation and Engagement of Alcohol and Other Drug Dependence Treatment – Initiation and Engagement Phases*
- *Use of Opioids at High Dosage (HDO)*
- *Postpartum Care (PPC)*
- *Well Child Visits (WCV) – 15 - 30 months*

Hennepin Health Measure Opportunities HEDIS® MY2022

Measure opportunities are measures where Hennepin Health's rates fell below the Minnesota average.

The MinnesotaCare program eligible population for most measures continues to be small, not meeting the NCQA minimum sampling size of 411. Therefore, many of the MinnesotaCare program HEDIS® rates are deemed non-reportable per NCQA's HEDIS® sampling/eligible population requirements. As the population grows, NCQA reporting will be possible and comparisons to the Minnesota average will be appropriate.

The Impact of COVID-19 on MY2022

The COVID-19 pandemic continues to have an impact on HEDIS®, from rates to chart reviews. Utilization has continued to increase in MY2022, with rates being more representative of pre-pandemic numbers. Many members are trying to “catch up on care” as they delayed seeking care in 2020 and 2021. As clinics deal with staffing shortages and trying to accommodate members who are past due on care, delays in care have worsened in some specialties. Efforts have been placed on educating members of the past due care and collaborating with them to complete the recommended care. Clinics have provided comment that many members, when in clinic, are interested in getting past due immunizations and screenings for themselves and family members. Telehealth continues to be a common way of how care is delivered, which is reflective in the increasing telehealth utilization rates.

Hennepin Health’s membership increase and stability have continued in 2022. This is related to the extension of the COVID-19 peacetime emergency order, which has suspended the requirement for the completion of annual Medicaid renewal process, allowing Minnesota Health Care Program members to not lose coverage during the pandemic, unless the member makes the request or moves out of Minnesota.

Hennepin Health’s HEDIS® MY 2022 Rates

The following table provides an analysis of change for Hennepin Health’s HEDIS® rates for MY2021 and MY2022. The absolute change captures the difference in rates between the two measurement years. The Minnesota average is provided for comparison. Hennepin Health – MNCare HEDIS® rates for 2021 and 2022 are displayed in Table 1. Some HEDIS® measures are not reflected in the charts below as they were deemed as not reportable due to an insufficient eligible population in a particular measure.

Table 1. Hennepin Health MinnesotaCare HEDIS® Rates, Measurement Years 2021 – 2022

Table 1. Hennepin Health - MinnesotaCare HEDIS® Rates MY2021 and MY2022				
HEDIS® Measure	CY 2021	CY 2022	Absolute Change	Minnesota Average
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents**				
a. BMI Percentile	0.00%	0.00%	0.00%	76.17%
b. Counseling for Nutrition	0.00%	0.00%	0.00%	66.61%
c. Counseling for Physical Activity	0.00%	10.00%	10.00% ↑	65.39%
Breast Cancer Screening	48.78%	59.34%	10.56% ↑	61.80%
Cervical Cancer Screening	56.20%	56.45%	0.25% ↑	55.70%
Chlamydia Screening in Women	66.67%	65.79%	-0.88% ↓	56.53%
Colorectal Cancer Screening	N/A	32.68%	N/A	42.94%
Asthma Medication Ratio				
a. Ages 19-50	60.00%	57.14%	-2.86% ↓	62.70%
b. Ages 51-64	75.00%	83.33%	8.33% ↑	72.89%

c. Total	66.67%	71.43%	4.76% ↑	66.50%
Controlling High Blood Pressure**	66.29%	52.28%	-14.01% ↓	64.99%
Persistence of Beta Blocker Treatment After Heart Attack**	100.00%	33%	-66.67% ↓	83.33%
Hemoglobin A1c Control for Patients With Diabetes**				
a. HA1c Good Control <8	67.19%	58.78%	-8.41% ↓	58.38%
b. HA1c Poor control (lower is better)	18.75%	30.41%	11.66% ↑	30.25%
Eye Exam for Patients with Diabetes	50.78%	52.03%	1.25% ↑	61.74%
Blood Pressure Control for Patients With Diabetes <140/90	75.00%	62.16%	-12.84% ↓	74.06%
Antidepressant Medication Management				
a. Acute phase (84 days)	70.91%	70.91%	0.00%	72.14%
b. Continuation phase (180 days)	54.55%	56.36%	1.81% ↑	53.26%
Follow-up After Hospitalization for Mental Illness				
a. Follow-up after 7 days	36.36%	12.50%	-23.86% ↓	46.91%
b. Follow-up after 30 days	54.55%	50.00%	-4.55% ↓	66.05%
Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence				
a. Follow-up after 7 days	9.09%	28.57%	19.48% ↑	36.42%
b. Follow-up after 30 days	18.18%	28.57%	10.39% ↑	49.70%
Follow-up After Emergency Department Visit for Mental Illness				
a. Follow-up after 7 days	26.67%	33.33%	6.66% ↑	56.69%
b. Follow-up after 30 days	53.33%	33.33%	-20.00% ↓	64.08%
Use of Opioids at High Dosage (lower is better)	0.00%	0.00%	0.00%	4.11%
Use of Opioids from Multiple Providers				
a. Multiple Prescribers (lower is better)	18.18%	25.00%	6.82% ↑	25.26%
b. Multiple Pharmacies (lower is better)	9.00%	8.33%	-0.67% ↓	3.60%
c. Multiple Prescribers and Multiple Pharmacies (lower is better)	5.00%	0.00%	-5.00% ↓	2.89%
Risk of Continued Opioid Use				
a. 15 Day Total (lower is better)	6.19%	0.83%	-5.36% ↓	2.37%
b. 30 Day Total (lower is better)	2.06%	0.00%	-2.06% ↓	1.18%
Adults' Access to Preventive/Ambulatory Health Services				
a. Ages 20-44	70.60%	62.80%	-7.80% ↓	72.54%
b. Ages 45-64	78.16%	76.81%	-1.35% ↓	83.31%
c. Ages 65+	76.22%	74.59%	-1.63% ↓	77.02%
d. Total	73.52%	68.15%	-5.37% ↓	76.95%
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment				
a. Initiation of AOD Treatment	35.82%	37.78%	1.96% ↑	37.43%
b. Engagement of AOD Treatment	8.96%	17.78%	8.82% ↑	15.28%
Prenatal and Postpartum Care**				

a. Prenatal Care	88.89%	83.33%	-5.56% ↓	84.85%
b. Postpartum Care	100.00%	91.67%	-8.33% ↓	79.29%
Annual Dental Visit-Children (Ages 2-20)	38.89%	13.04%	-25.85% ↓	34.60%
Well-Child Visits in the First 30 Months of Life**				
a. Well-Child Visits in the First 15 Months	Not Reported	Not Reported	NA	Not Reported
b. Well-Child Visits for Age 15 Months–30 Months	NA	100.00%	NA	76.67%
Child and Adolescent Well-Care Visits	26.56%	27.91%	1.35% ↑	31.17%
Enrollment by Product Line (Member Months)	26,007	28,163	2156	NR

As displayed in the tables above, improvements and opportunities for improvement were seen in several HEDIS® measures in MY2022 compared to MY2021. In addition, several HEDIS® measures were below the Minnesota average. MY2022 HEDIS® rates have been shared with Clinical Quality Outcomes Committee (CQOC), Hennepin Health Board, Executive Leadership and several internal Hennepin Health departments in fourth quarter 2023. In 2023, Hennepin Health implemented rewards for childhood immunizations (Combo-10), adolescent immunizations and colorectal cancer screening in 2023. The dollar amount for the eye exams for members living with diabetes was increased. Strategies continued to be implemented to improve the HEDIS® behavioral health and substance use disorder measures, such as hiring a Peer Support Specialist to see members at the Hennepin Healthcare Emergency department or if hospitalized with a substance use disorder diagnosis.

The CQOC established clinical priority workgroups to advance the Accountable Health Model (AHM) partners clinical and quality management priorities in 2022. Annually, the AHM partners reviewed their organizations’ clinical priorities and identified the clinical priorities for the AHM. The clinical priorities in 2023 were unchanged from 2022 and the workgroups continued to meet in 2023. These clinical priorities align with several HEDIS® measures.

Hennepin Health continued to focus its outreach on closing preventative care gap closures in 2023. Barriers to care, such as transportation, were addressed. Reminders about annual preventative health exams were posted on the Hennepin Health website, social media, and promoted in brochures. Prenatal and New Mom packets were sent to the members, as appropriate.

Hennepin Health also continued its birthday card postcard distribution to remind parents, children, and teenagers of having an annual preventative and dental exam.

Hennepin Health continued to offer the rewards program to increase the HEDIS® rates for measures identified in Table 2. Hennepin Health has seen an increase in the number of reward vouchers submitted over the years. Please see the Healthy Lifestyles section for more information. The impact of these rewards on HEDIS® measure rates has been minimal, however.

Table 2. Hennepin Health’s Rewards Program for Health by Measure and Product				
HEDIS® Measure	Incentive	PMAP	MNCare	SNBC
PPC Prenatal and Postpartum Care	First Pregnancy Visit within given time frames	X	X	X
	Postpartum Visit within given time frames	X	X	X
W30 Well-Child Visits in the First 30 Months of Life WCV Child and Adolescent Well-Care Visits	Child and Teen Check-Up, ages 0 -14 months (6 visits), 15 months, 18 months, 24 months, 30 months, and 3-17 years	X	X	
	Young Adult Check-Up, ages 18-21			X
CIS Childhood Immunization Status	Early Childhood Immunizations	X	X	
IMA Immunizations for Adolescents	Adolescent Immunizations	X	X	
ADV Annual Dental Visit	Annual Dental Visit for children ages 1-21 and adults ages 22 and up	X	X	
	Annual Dental Visit for adolescents ages 18-20 and adults ages 22 and up			X
HBD Hemoglobin A1c Control for Patients With Diabetes	Annual Blood Glucose (A1c) Test ages 18 and older	X	X	X
EED Eye Exam for Patients With Diabetes	Annual Eye Exam ages 18 and older	X	X	X
CCS Cervical Cancer Screening	Cervical Cancer Screening ages 21 to 64	X	X	X
BCS Breast Cancer Screening	Mammogram Screening ages 40 to 74	X	X	X
COL Colorectal Cancer Screening	Colorectal Cancer Screening ages 45 to 75	X	X	X

Next Steps and Recommendations

Hennepin Health will continue to offer the rewards program for several HEDIS® measures as a means to improve scores. The rewards program’s incentives are reviewed and updated annually, as appropriate. Outreach efforts in 2024 will continue to promote the rewards program and member awareness of their existence. Hennepin Health is also exploring contracting with an external organization to conduct outreach activities as a way to improve HEDIS® rates.

Hennepin Health will continue to focus on member education and preventive care gap closures. Hennepin Health’s PMAP/MinnesotaCare and SNBC care coordination teams promote annual preventive health exams and connect members with primary care clinics and practitioners to receive seamless care. Reminders about annual preventive health exams are posted on the Hennepin Health website, social media, and promoted in brochures.

Next steps include sharing MY2023 HEDIS® rates with the Hennepin Health Board, CQOC, Executive Leadership, and internal Hennepin Health departments in fourth quarter 2024. Hennepin Health plans to actively work with its network providers to collaborate, in an effort to improve scores for the HEDIS® measures.

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