



Quality Improvement Strategy: Summary 2024 Submission (Marketplace)

Issuer Name: Molina Healthcare of Washington

QHPs to which this Quality Improvement Strategy (QIS) applies:

- 84481WA0060001
- 84481WA0060002

QIS Title:

Improving Breast Cancer Screening (BCS), Cervical Cancer Screening (CCS), Antidepressant Medication Management (AMM) – Effective Acute Phase, and Effective Continuation Phase among Marketplace members.

QIS Topic Area:

Improve Health Outcomes
Implement Wellness and Health Promotion Activities
Reduce Health and Health Care Disparities

QIS Description:

Breast cancer and cervical cancer are leading causes of disability and death, disproportionately affect racial and ethnic minorities, and are prevalent among Marketplace enrollees. Non-adherence to antidepressant medications is a significant barrier to the successful treatment of depression. Interventions aimed at improvement require a multifaceted approach involving proactive care management, involvement of primary care providers and mental health specialists, and patient education. Engagement of PCPs is essential to the ongoing successful treatment and management of depression. We plan to implement a multifaceted approach to achieve the goals of this QIS, including the use of member incentives to encourage completion of BCS and CCS to meet our goals of reaching the 2021 CMS QRS 75th percentile (71.73%) for BCS, and the 2022 NCQA Commercial All LOB 66th percentile for CCS (76.00%), AMM Acute (79.00%) and AMM Continuation (63.00%).

Rationale for QIS:

Approximately 50% of Molina Healthcare of Washington Marketplace enrollees fall into the parameters for this QIS. Lack of preventive health care screenings can result in short and long-term health complications. Undiagnosed or untreated breast and cervical cancer diagnoses lower life expectancy and impede the quality of life. Preventive health care screenings for breast and cervical cancer can result in improved quality of life for our members and reduce medical costs and burden on the healthcare system.

Adherence to antidepressant medication is crucial for optimal treatment outcomes when treating depression. Poor medication adherence is common among patients prescribed antidepressants. Multi-disciplinary interventions that support patients and prescribers will be deployed. To improve antidepressant medication adherence, interventions will address the need for patient education on depression and the importance of taking medication as prescribed. Provider interventions will address the opportunity for increased HEDIS® education to achieve the goals of this QIS.

Additionally, all WA QHP issuers must include the following National Quality Forum (NQF)-endorsed clinical measures in their QIS submission for 2024; Cervical Cancer Screening (NQF ID: 0032) and Antidepressant Medication Management (NQF ID: 0105).

Activities that Will Be Conducted to Implement the QIS:

- Promotion and utilization of incentive programs for members and providers
- Increased points for member incentive programs
- Performance reports sent to providers that include key actionable members falling into the measures
- Completion of organizational wide cultural competency and sensitivity training for Molina employees
- Preventive screening reminders when members call Member Contact Center
- Telephonic, text, email, and print mail outreach to members missing preventive screenings
- Telephonic, text, email, and print mail outreach to encourage medication adherence
- Outreach calls to encourage completion of annual wellness visits
- Expansion of eligibility for measures to enhance inclusive language and align with 2025 QRS Measure Technical Specifications
- Development of comprehensive women's health campaign to outreach members who are past due for women's health screenings
- MolinaHelpFinder.com for transportation and other resource assistance

QIS Goal 1:

To improve the quality of care among Marketplace female enrollees ages 50-74 by increasing the percentage of enrollees who receive a mammogram to screen for breast cancer to achieve the 2021 CMS QRS 75th percentile (71.73%).

Measure(s) used to track progress of Goal 1:

- HEDIS[®] Measure: Breast Cancer Screening (BCS)
- Denominator: Continuously enrolled Marketplace enrollees ages 50-74 years
- Numerator: Continuously enrolled Marketplace enrollees ages 50-74 who had one or more mammograms to screen for breast cancer any time on or between
 - October 1, two years prior to the measurement year
 - December 31 of the measurement year

How measure reflects progress toward Goal 1:

Molina Healthcare of Washington is transitioning to the BCS-E measure with the official retirement of the administrative data only BCS measure. Monthly data will be collected for the HEDIS[®] breast cancer screening measure. This will allow monthly tracking of performance on the percentage of enrollees who have received a mammogram screening according to evidence-based guidelines and will be compared to the target goals. Baseline rates were set using final HEDIS[®] MY2021 results and Follow Up Rate was reported using HEDIS[®] MY2022. Interventions will be evaluated for effectiveness and adjusted as needed. Improvement in performance on this measure will ensure high quality of care for Marketplace enrollees.

QIS Goal 2 (if applicable):

Improve the quality of care among Marketplace female enrollees ages 21-64 by increasing the percentage of eligible enrollees who receive a cervical cancer screening achieving the 2022 NCQA 66th percentile Commercial All-LOB percentile rate (76.00%) for this measure by project end. Achieving this goal will improve health outcomes by identifying abnormal cervical cell changes earlier so treatment can begin.

Measure(s) used to track progress of Goal 2:

- HEDIS[®] Measure: Cervical Cancer Screening (CCS)
- Denominator: Continuously enrolled Marketplace enrollees between the ages of 24-64, as of December 31 of the measurement year
- Numerator: Continuously enrolled Marketplace enrollees ages 24-64 who received a cervical cancer screening (per current HEDIS[®] Technical Specifications)

How measure reflect progress toward Goal 2:

Data will be collected monthly for the HEDIS® CCS measure. This will allow monthly tracking of performance of enrollees receiving a cervical cancer screening. The baseline rate is based on MY2021 Final IDSS rates. Interventions will be evaluated for effectiveness and adjusted as needed. Improvement on this measure will ensure the highest quality of care for Marketplace enrollees.

QIS Goal 3 (if applicable):

Improve the quality of care among Marketplace enrollees ages 18 and older who are treated with antidepressant medication, had a diagnosis of major depression and who remain on an antidepressant medication treatment, achieving the 2022 NCQA 66th Percentile Commercial All-LOB percentile for AMM Effective Acute Phase Treatment (79.00%).

Measure(s) used to track progress of Goal 3:

- HEDIS® Measure: Antidepressant Medication Management (AMM) – Acute Phase
- Denominator: Percentage of patients 18 years of age and older who were treated with antidepressant medication
- Numerator: Percentage of patients who remained on an antidepressant medication for at least 84 days (Acute Phase)

How measure reflect progress toward Goal 3:

Monthly data will be collected for the HEDIS® AMM measure. This will allow monthly tracking of performance on the percentage of enrollees who have a diagnosis of major depression and who remain on an antidepressant medication treatment. Interventions will be evaluated for effectiveness and adjusted as needed. Improvement in performance on this measure will ensure high quality of care for Marketplace enrollees.

QIS Goal 4 (if applicable):

To improve the quality of care among Marketplace enrollees ages 18 years of age and older who are treated with antidepressant medication, had a diagnosis of major depression and who remained on an antidepressant medication for at least 180 days, achieving the 2022 NCQA 66th Percentile Commercial All-LOB for AMM Continuation Phase Treatment (63.00%).

Measure(s) used to track progress of Goal 4:

- HEDIS® Measure: Antidepressant Medication Management (AMM) – Continuation Phase

- Denominator: Percentage of patients 18 years of age and older who were treated with antidepressant medication
- Numerator: Percentage of patients who remained on an antidepressant medication for at least 180 days (Continuation Phase)

How measure reflect progress toward Goal 4:

Monthly data will be collected for the HEDIS® AMM measure. This will allow monthly tracking of performance on the percentage of enrollees who have a diagnosis of major depression and who remain on an antidepressant medication treatment. Interventions will be evaluated for effectiveness and adjusted as needed. Improvement in performance on this measure will ensure high quality of care for Marketplace enrollees.