



MEDICAL SERVICES

North Dakota Medicaid Quality Measures Annual Report Adult Core Set FFY 2022

January 2023

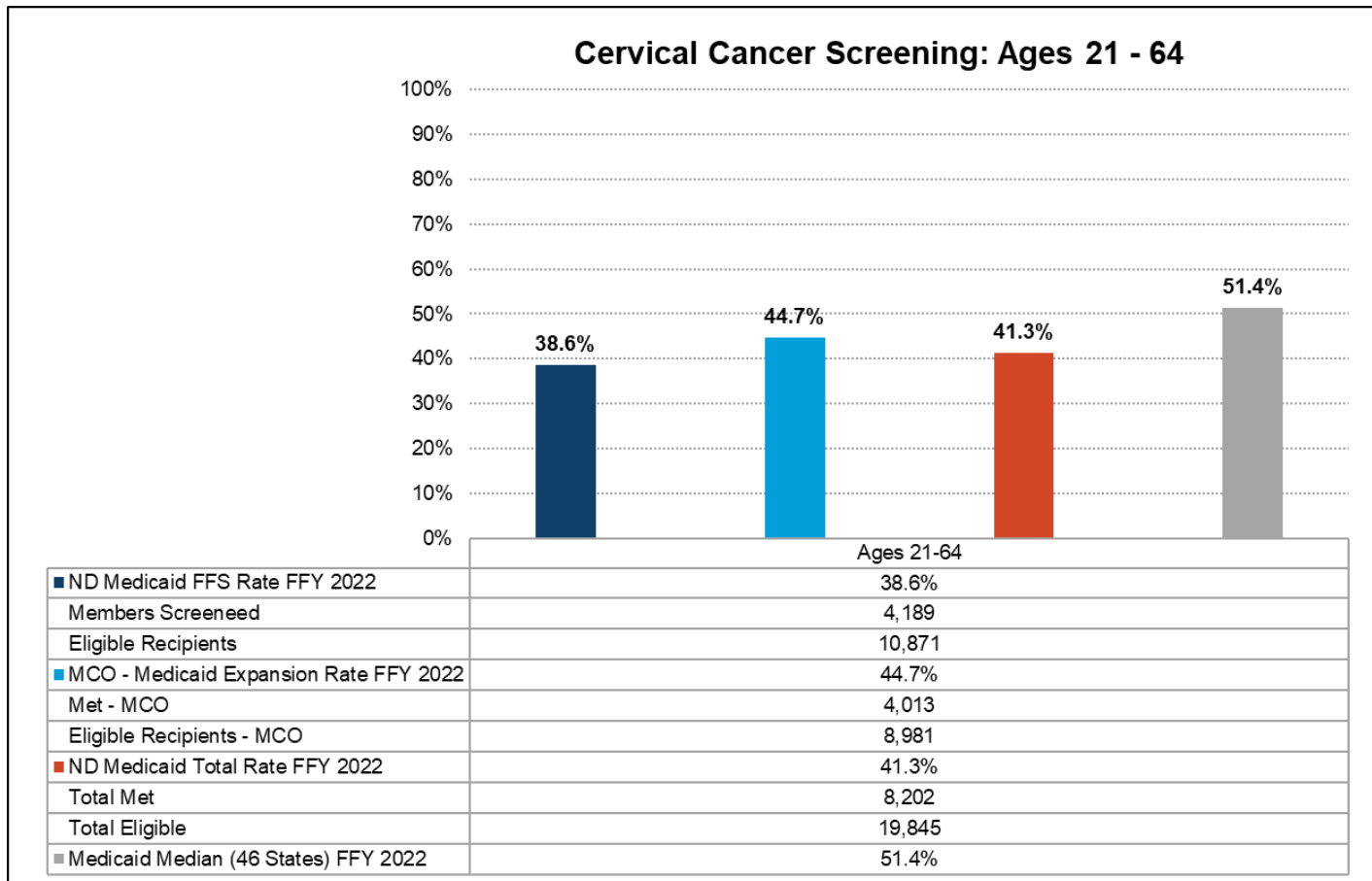
BACKGROUND

Section 1139B of the Social Security Act (the Act) requires the Secretary of Health and Human Services (HHS) to identify and publish a core set of health care quality measures for Medicaid enrolled adults (Adult Core Set). This legislation parallels the requirement under Section 1139A of the Act to identify and publish a core set of quality measures for children enrolled in Medicaid and the Children's Health Insurance Program (CHIP).

Implementation of a standardized Adult Core Set is helping the Centers for Medicare & Medicaid Services (CMS) and states move toward a national system for quality measurement, reporting, and improvement. The data collected from these measures help CMS to better understand the quality of health care that adults enrolled in Medicaid receive. The Act requires the Secretary of HHS to make publicly available the information states voluntarily report to CMS on the quality of health care furnished to adults covered by Medicaid.¹

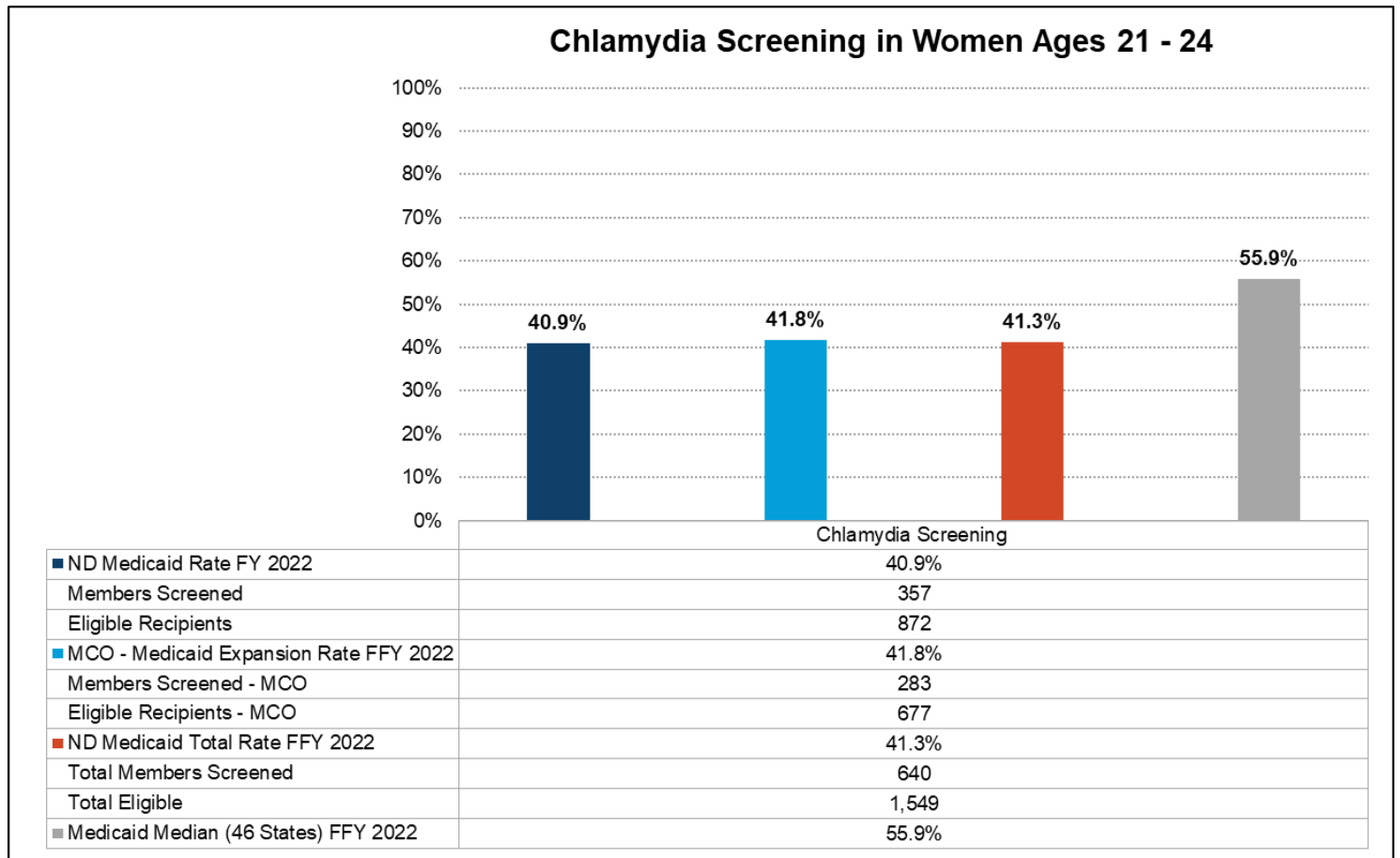
¹ As part of Section 5001 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT for Patients and Communities Act) of 2018, mandatory state reporting of the Behavioral Health measures on the Adult Core Set will take effect in 2024. Mandatory reporting of the Behavioral Health measures on the Adult Core Set will further advance CMS's efforts to ensure a standardized system for quality measurement with the goal of improving the quality of care for beneficiaries in Medicaid and CHIP.

PRIMARY CARE ACCESS AND PREVENTIVE CARE



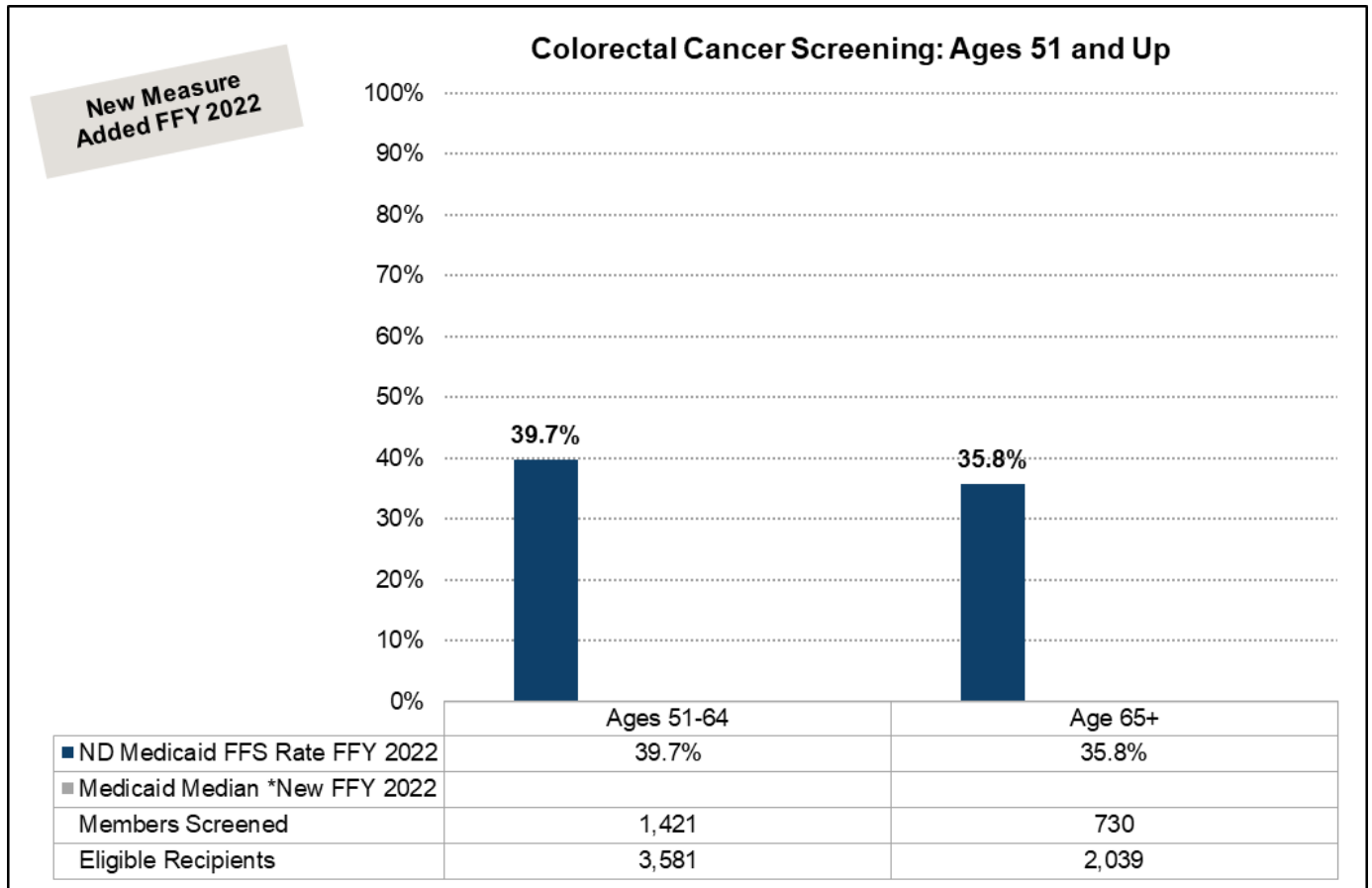
MEASURE DESCRIPTION

This measure shows the percentage of women ages 21 to 64 who were screened for cervical cancer using one of the following criteria: (1) women ages 21 to 64 who had cervical cytology performed within the last 3 years; (2) women ages 30 to 64 who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years; or (3) women ages 30 to 64 who had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last 5 years.



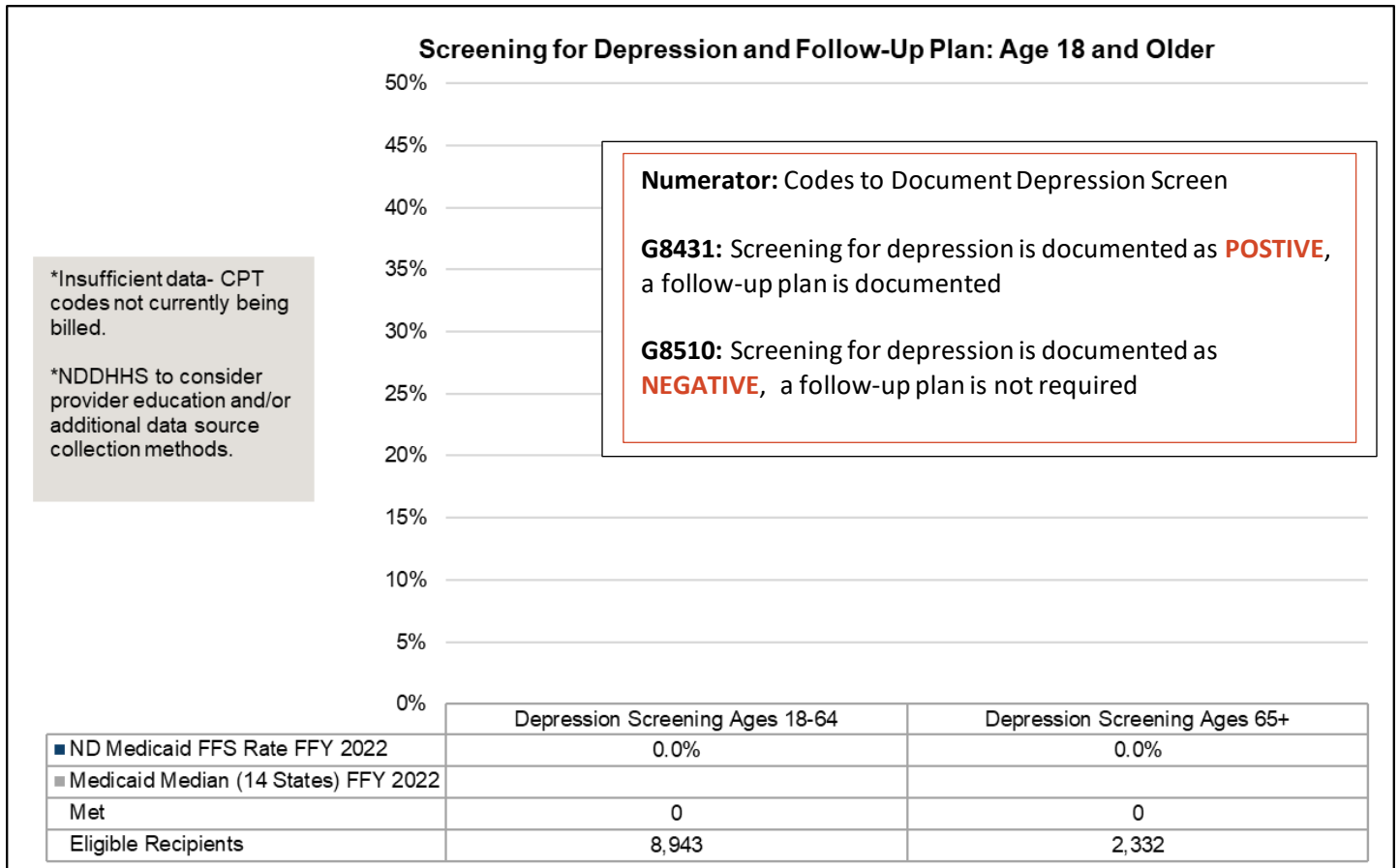
MEASURE DESCRIPTION

This measure shows the percentage of women ages 21 to 24 who were identified as sexually active and who had at least one test for chlamydia during the measurement year.



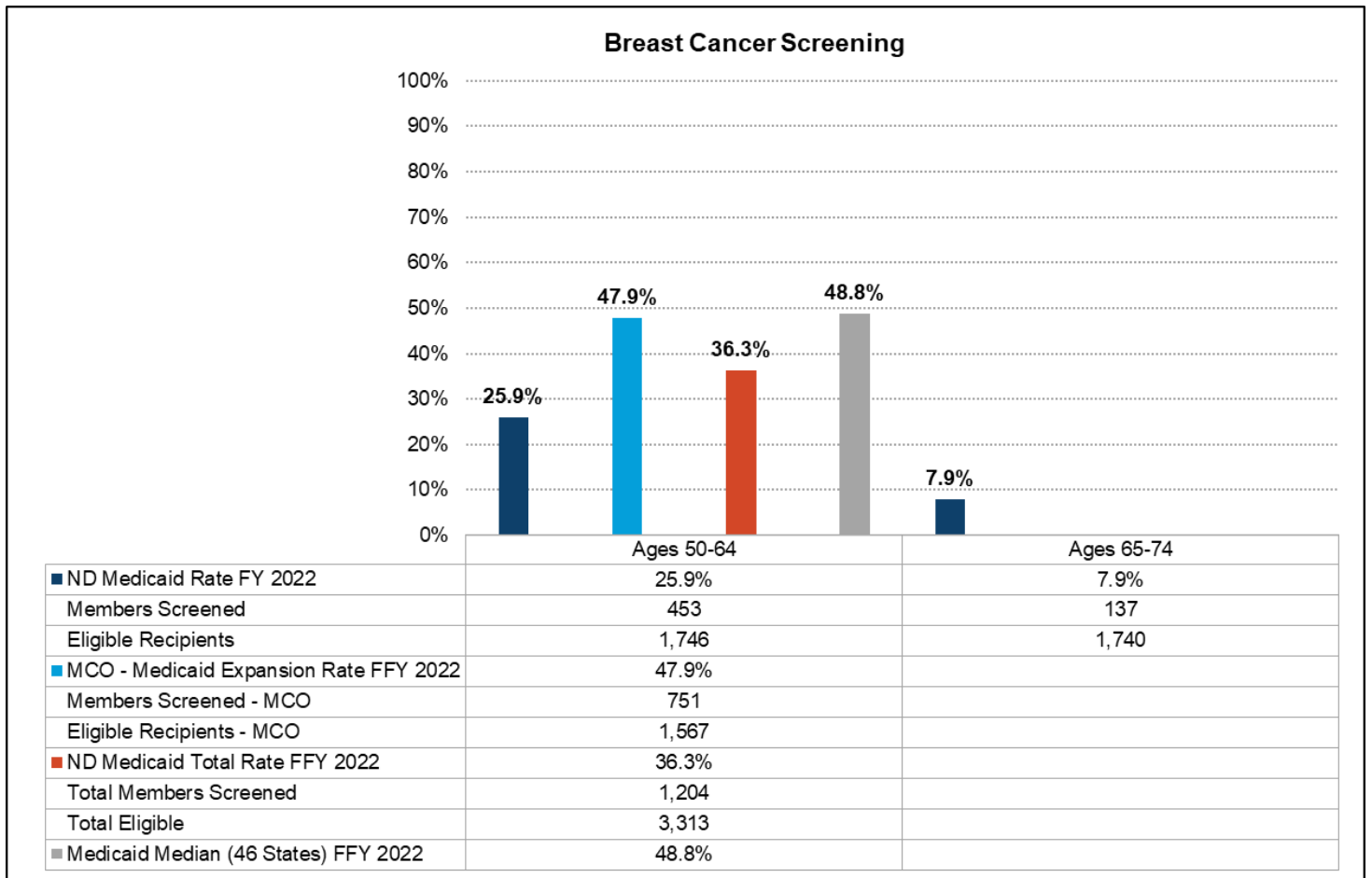
MEASURE DESCRIPTION

This measure shows the percentage of beneficiaries ages 50 to 75 who had appropriate screening for colorectal cancer.



MEASURE DESCRIPTION

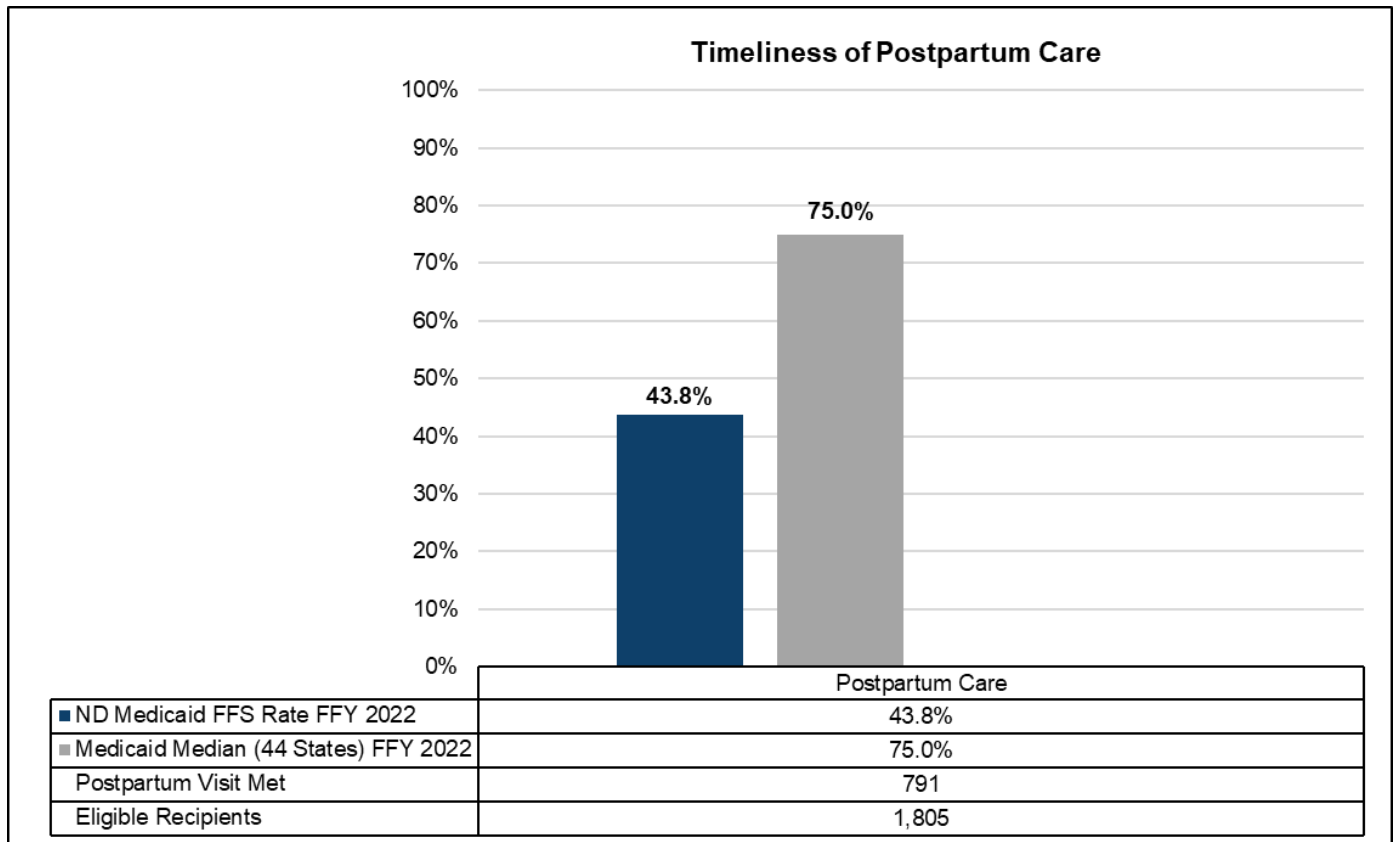
This measure assesses the percentage of beneficiaries ages 18 and older screened for depression on the date of the encounter or 14 days prior to the date of the encounter using an age-appropriate standardized depression screening tool, *and if positive*, a follow-up plan is documented on the date of the eligible encounter.



MEASURE DESCRIPTION

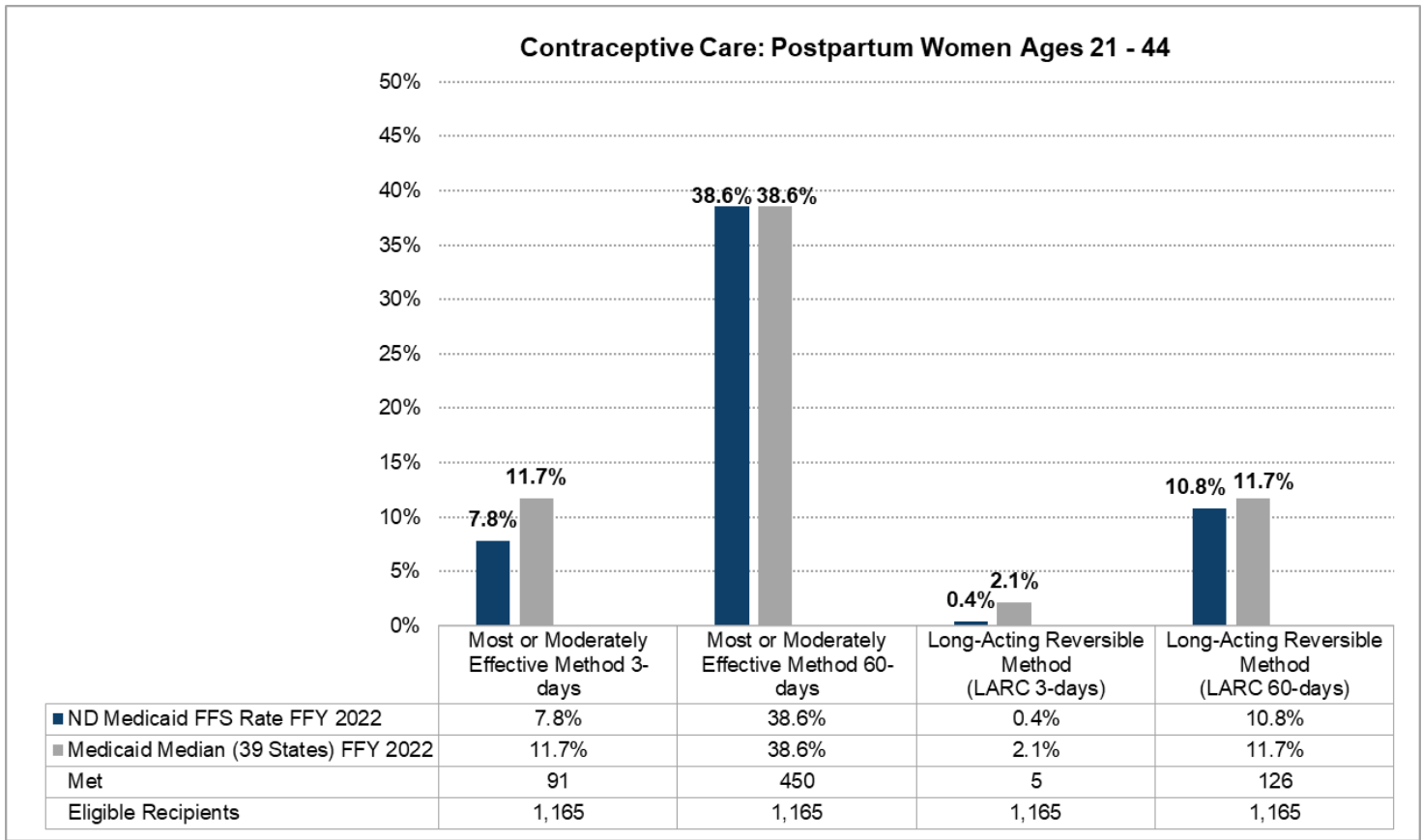
This measure shows the percentage of women ages 50 to 74 who had a mammogram to screen for breast cancer during the measurement year or the two years prior to the measurement year.

MATERNAL AND PERINATAL HEALTH



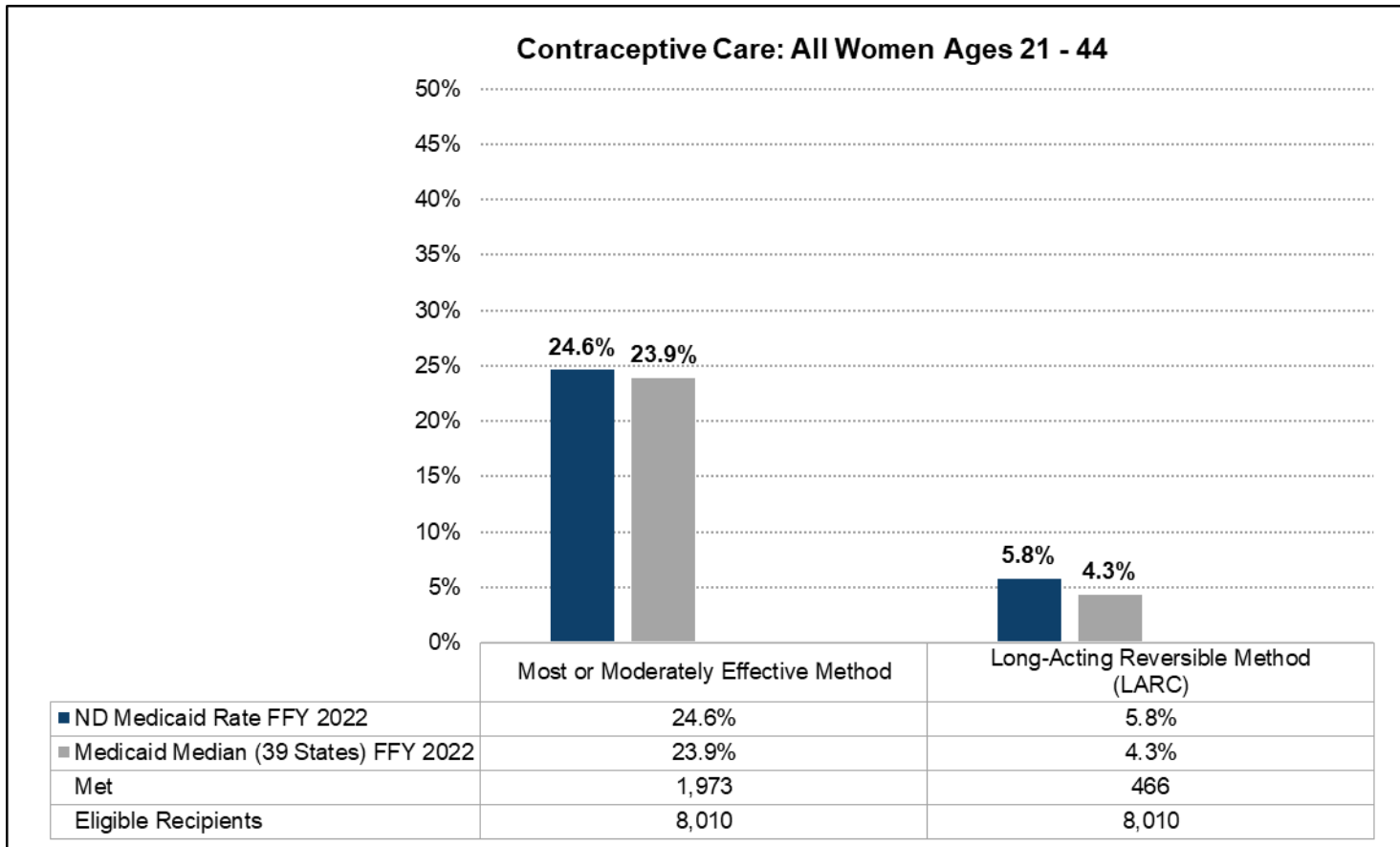
MEASURE DESCRIPTION

This measure assesses how often women delivering a live birth received timely postpartum care (between 7 and 84 days after delivery) of the measurement year.



MEASURE DESCRIPTION

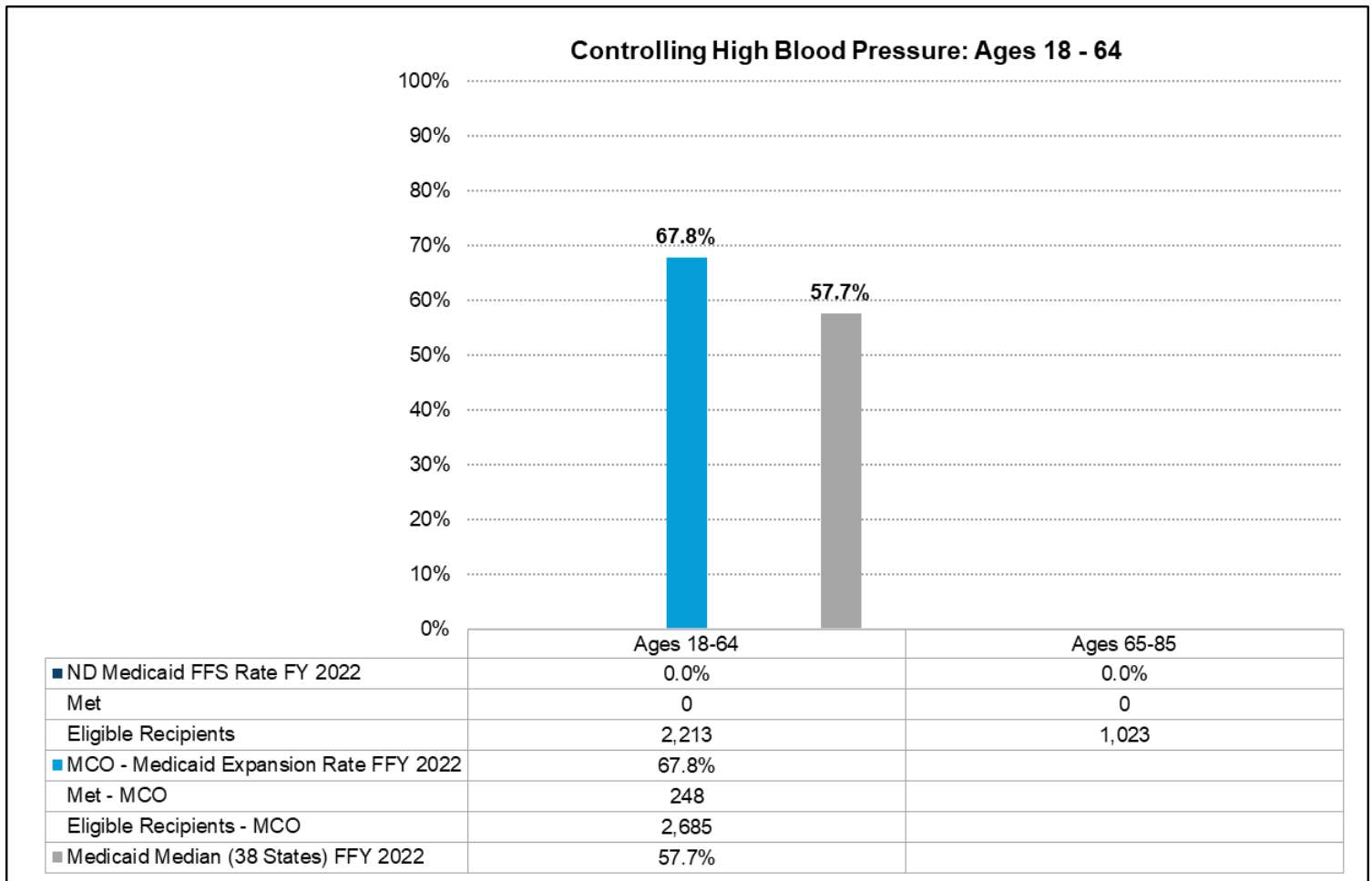
This measure assesses *access to contraceptive care*, including the percentage of postpartum women ages 21 to 44 who had a Live Birth and who were provided most or moderately effective method of contraception as well as the percentage who were provided a long-acting reversible method of contraception (LARC) within 3 and 60 days of delivery.



MEASURE DESCRIPTION

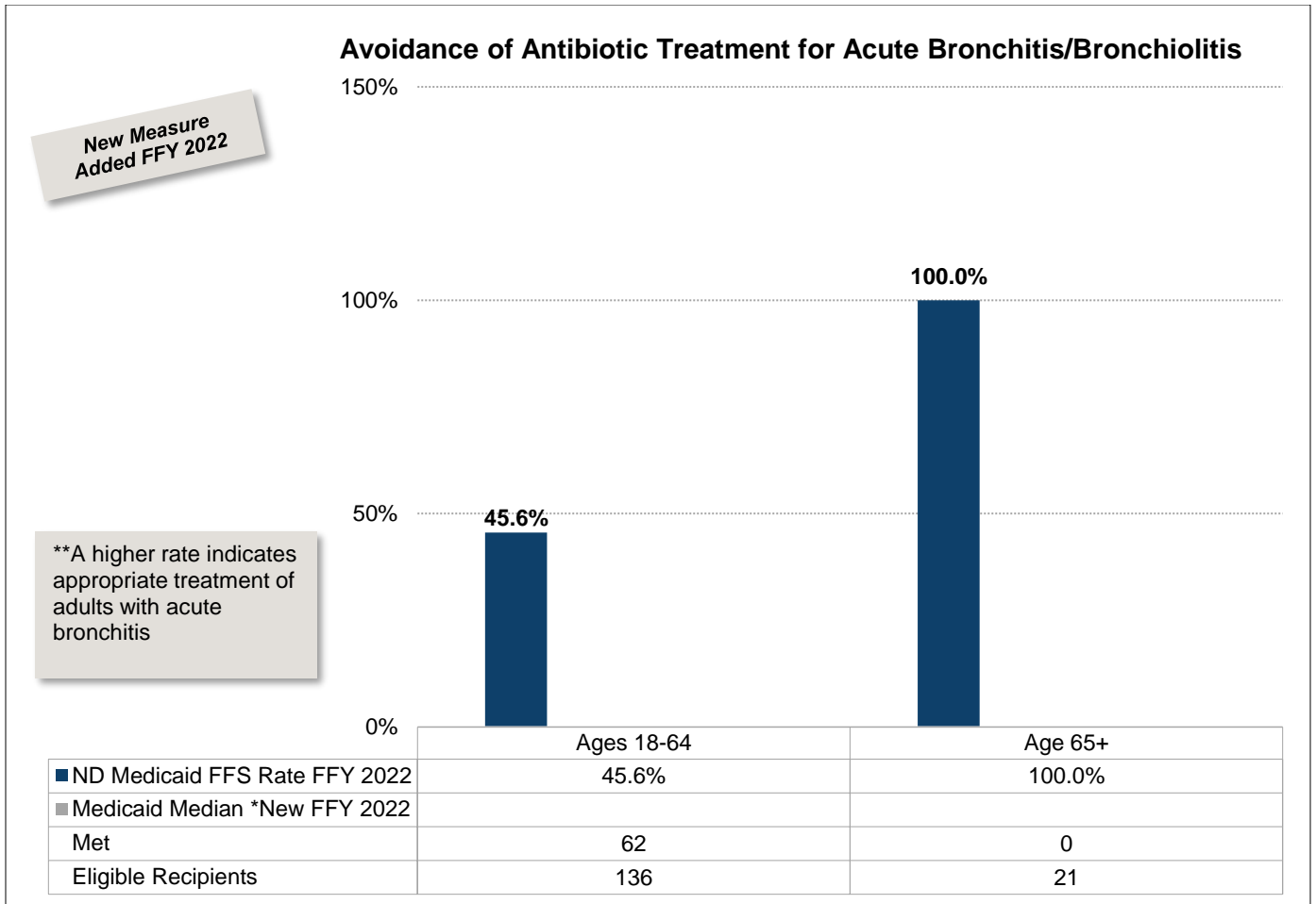
This measure assesses the percentage of women ages 21 to 44 at risk of unintended pregnancy who were provided a most or moderately effective method of contraception as well as the percentage who were provided a long-acting reversible method of contraception (LARC).

CARE OF ACUTE AND CHRONIC CONDITIONS



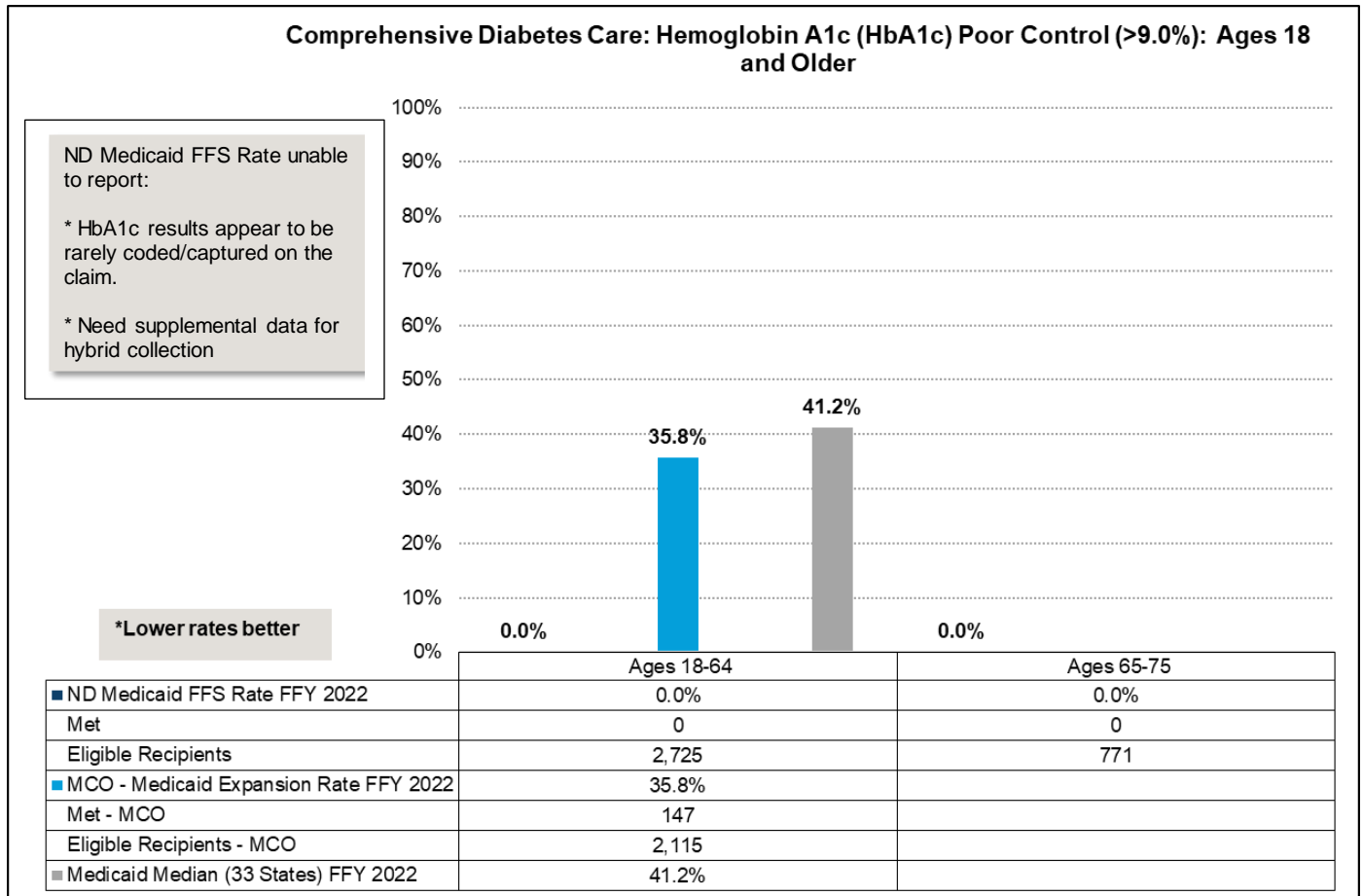
MEASURE DESCRIPTION

This measure shows the percentage of beneficiaries ages 18 to 85 who had a diagnosis of hypertension and whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement year.



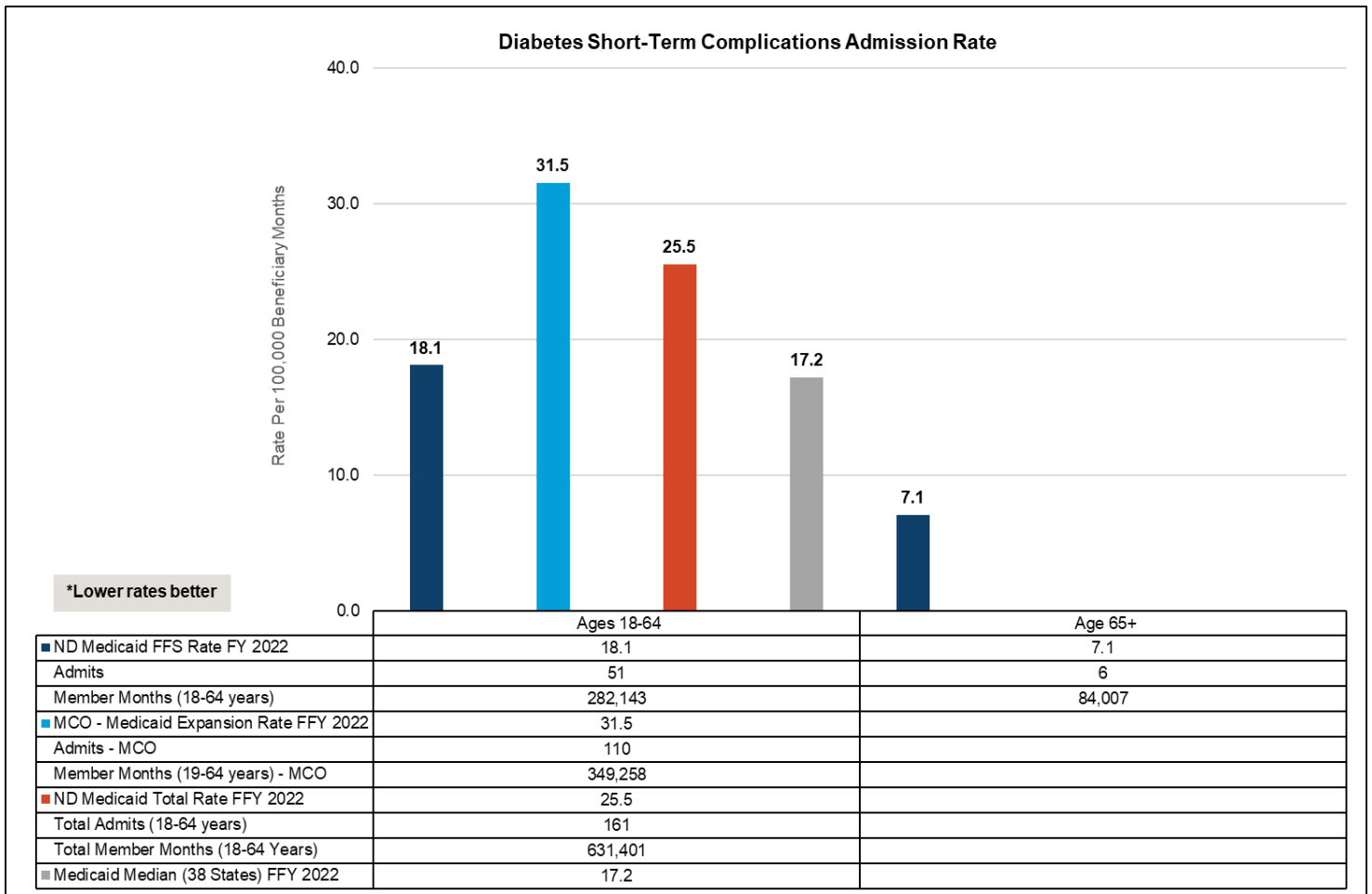
MEASURE DESCRIPTION

This measure shows a percentage of episodes for adults ages 18 and older with a diagnosis of acute bronchitis/bronchiolitis that did not result in an antibiotic dispensing event.



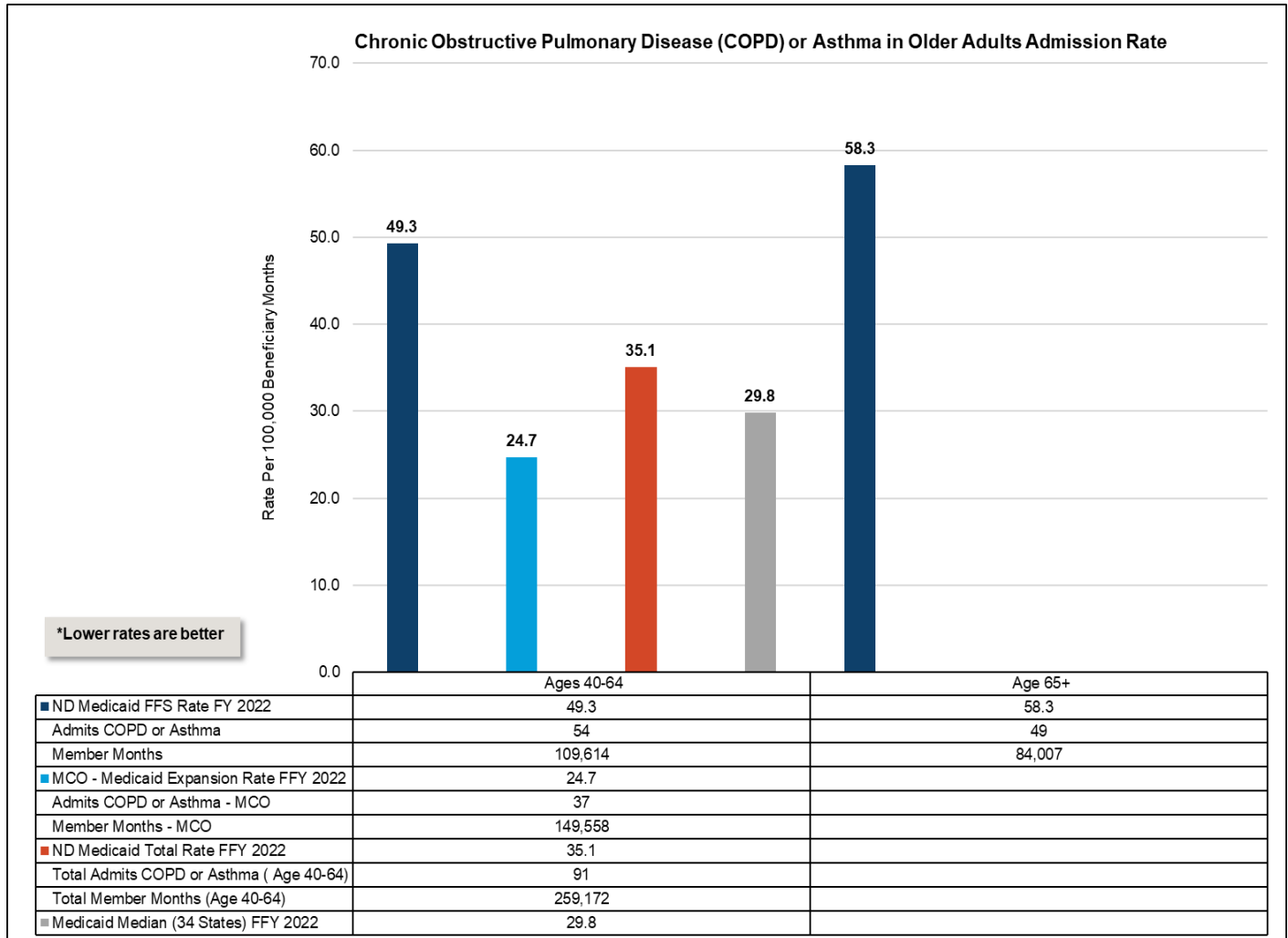
MEASURE DESCRIPTION

This measure shows a percentage of adults ages 18 to 75 with diabetes (type 1 and type 2) who had hemoglobin A1c (HbA1c) in poor control (> 9.0%).



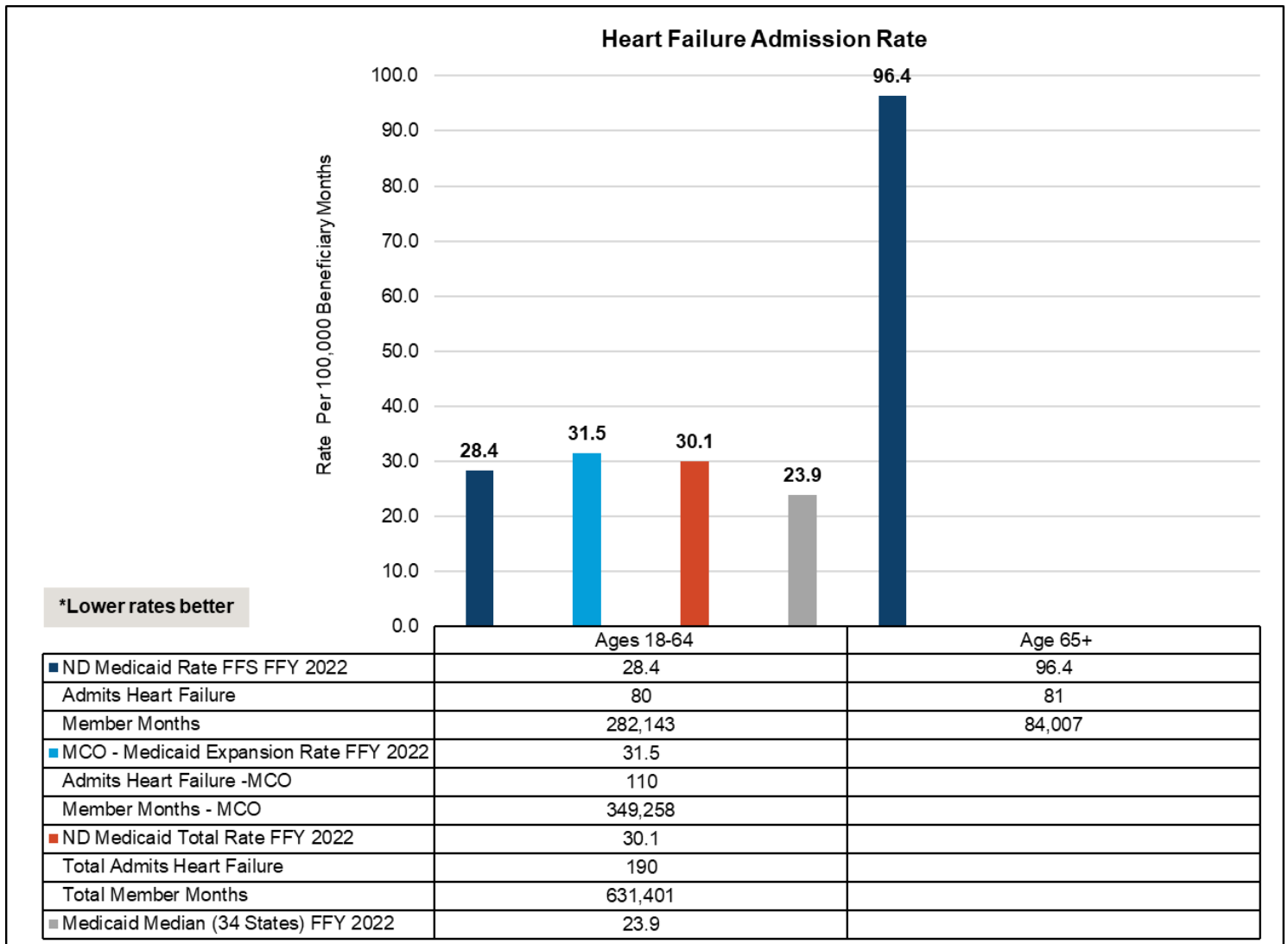
MEASURE DESCRIPTION

This measure assesses the frequency of inpatient hospital admissions to treat short-term complications of diabetes among adult Medicaid beneficiaries by the number of inpatient hospital admissions for diabetes short-term complications (ketoacidosis, hyperosmolarity, or coma) per 100,000 beneficiary months in adults ages 18 and older.



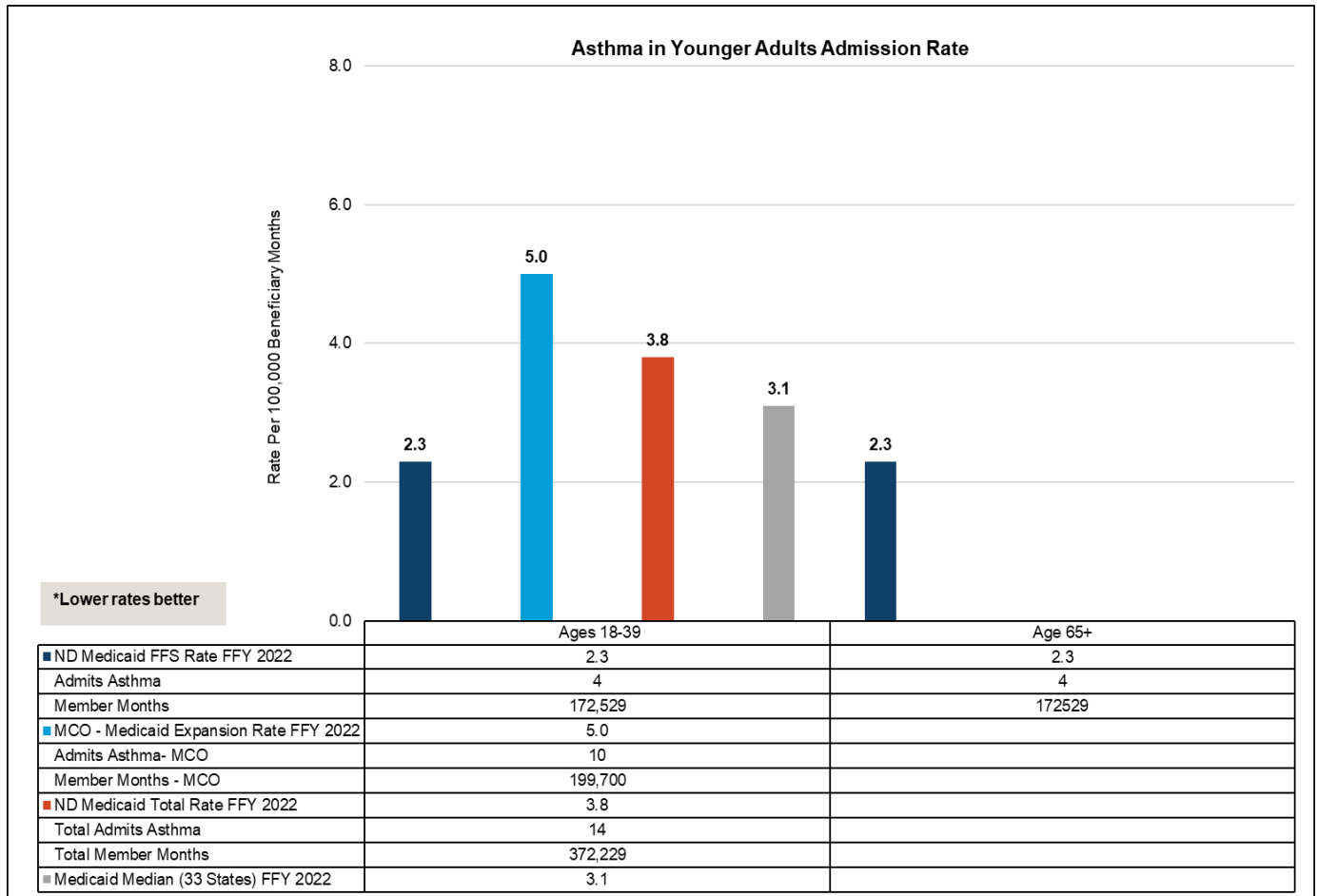
MEASURE DESCRIPTION

This measure assesses the frequency of hospital admissions to treat COPD or asthma among Medicaid adults ages 40 and older by the number of inpatient hospital admissions for chronic obstructive pulmonary disease (COPD) or asthma per 100,000 beneficiary months for beneficiaries ages 40 and older.



MEASURE DESCRIPTION

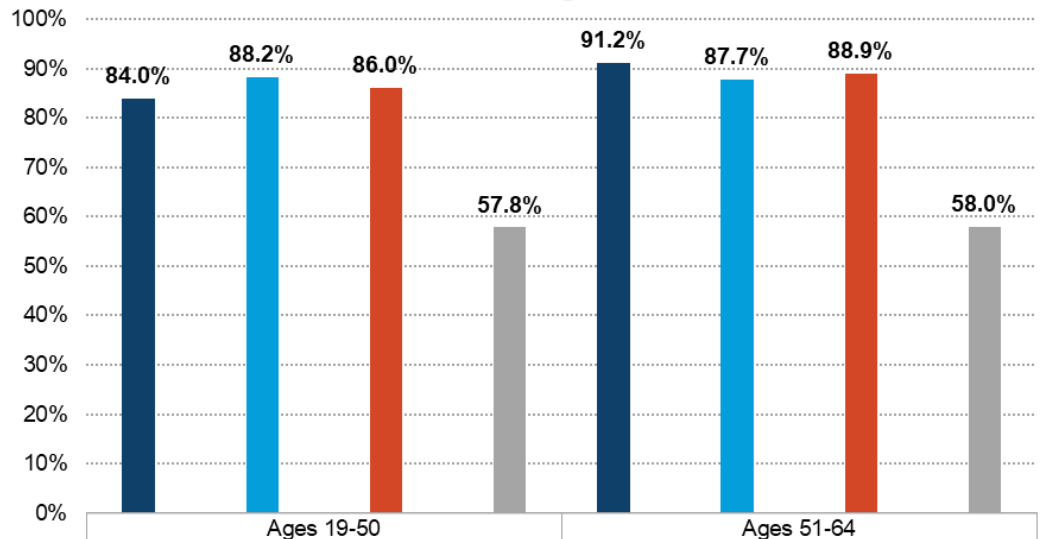
This measure assesses the frequency of inpatient hospital admissions for heart failure among adult Medicaid beneficiaries by the number of inpatient hospital admissions for heart failure per 100,000 beneficiary months for adults ages 18 and older.



MEASURE DESCRIPTION

This measure assesses the frequency of hospital admissions to treat asthma among Medicaid beneficiaries by the number of inpatient hospital admissions for asthma per 100,000 beneficiary months for adults ages 18 to 39.

Asthma Medication Ratio: Ages 19 and Older

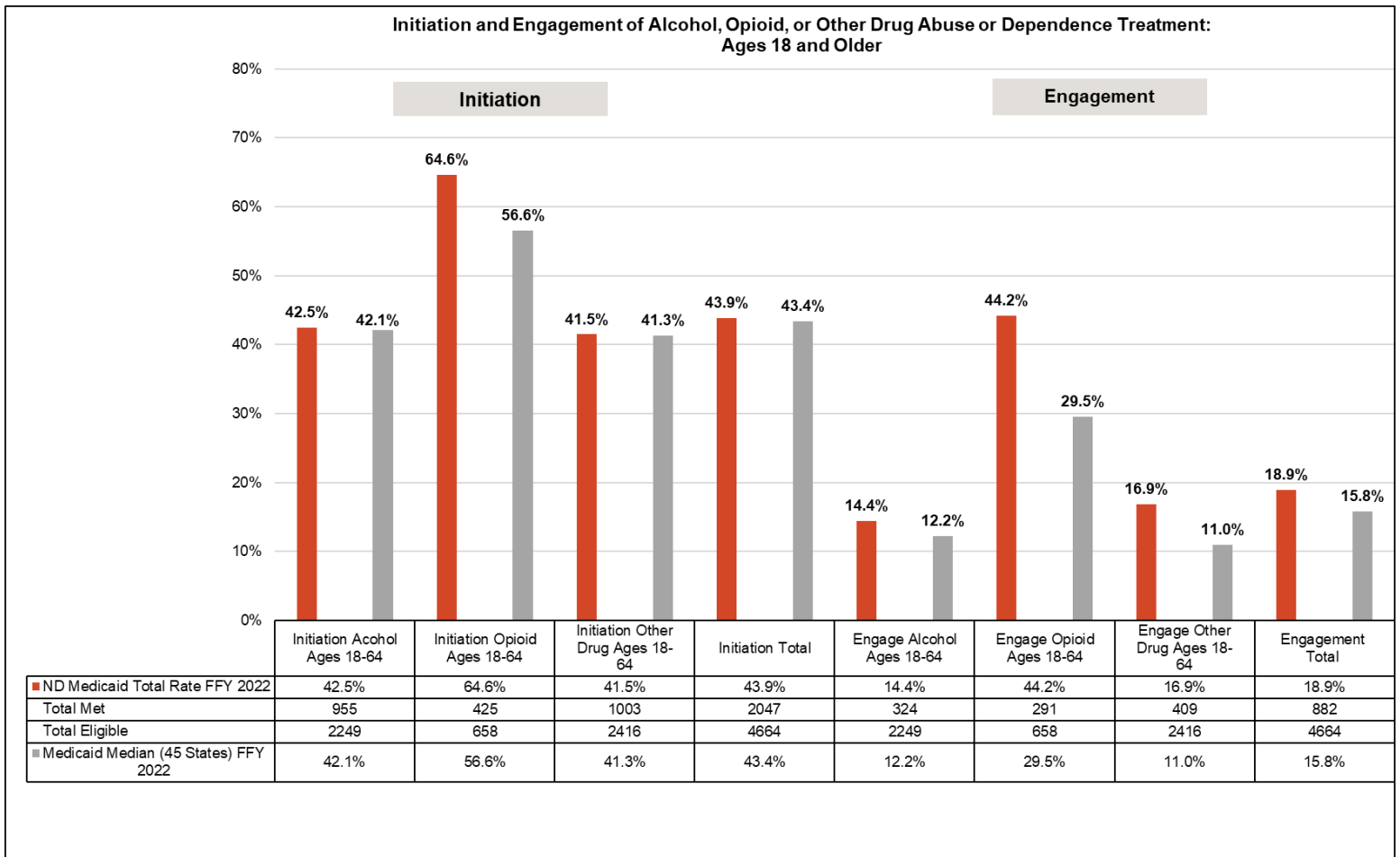


	Ages 19-50	Ages 51-64
■ ND Medicaid FFS Rate FFY 2022	84.0%	91.2%
Met	157	31
Eligible Recipients	187	34
■ MCO - Medicaid Expansion Rate FFY 2022	88.2%	87.7%
Met - MCO	157	57
Eligible Recipients - MCO	178	65
■ ND Medicaid Total Rate FFY 2022	86.0%	88.9%
Total Met	314	88
Total Eligible	365	99
■ Medicaid Median (45 States) FFY 2022	57.8%	58.0%

MEASURE DESCRIPTION

This measure assesses the percentage of adults with persistent asthma who were dispensed appropriate asthma controller medications by the percentage of beneficiaries ages 19 to 64 who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

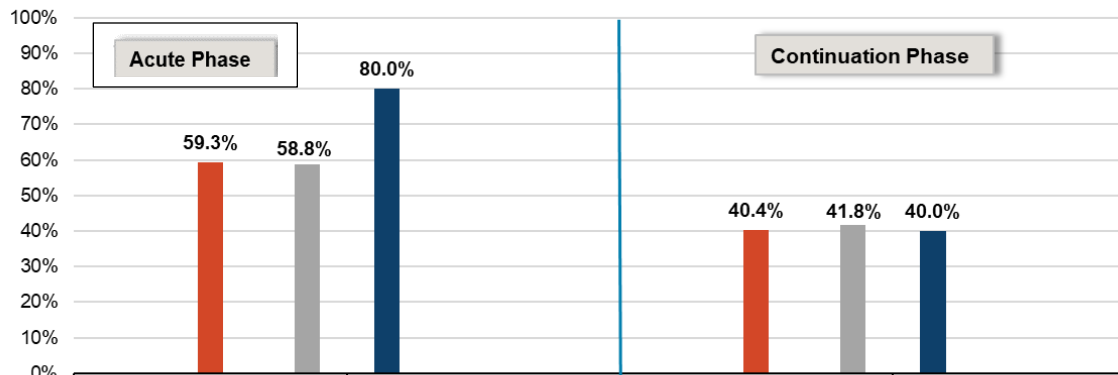
BEHAVIORAL HEALTH CARE



MEASURE DESCRIPTION

This measure shows how often adults ages 18 and older with newly diagnosed AOD dependence initiated timely treatment within 14 days of diagnosis (initiation rate), and then continued that treatment two or more additional services or medication treatment within 34 days of the initiation visit (engagement rate).

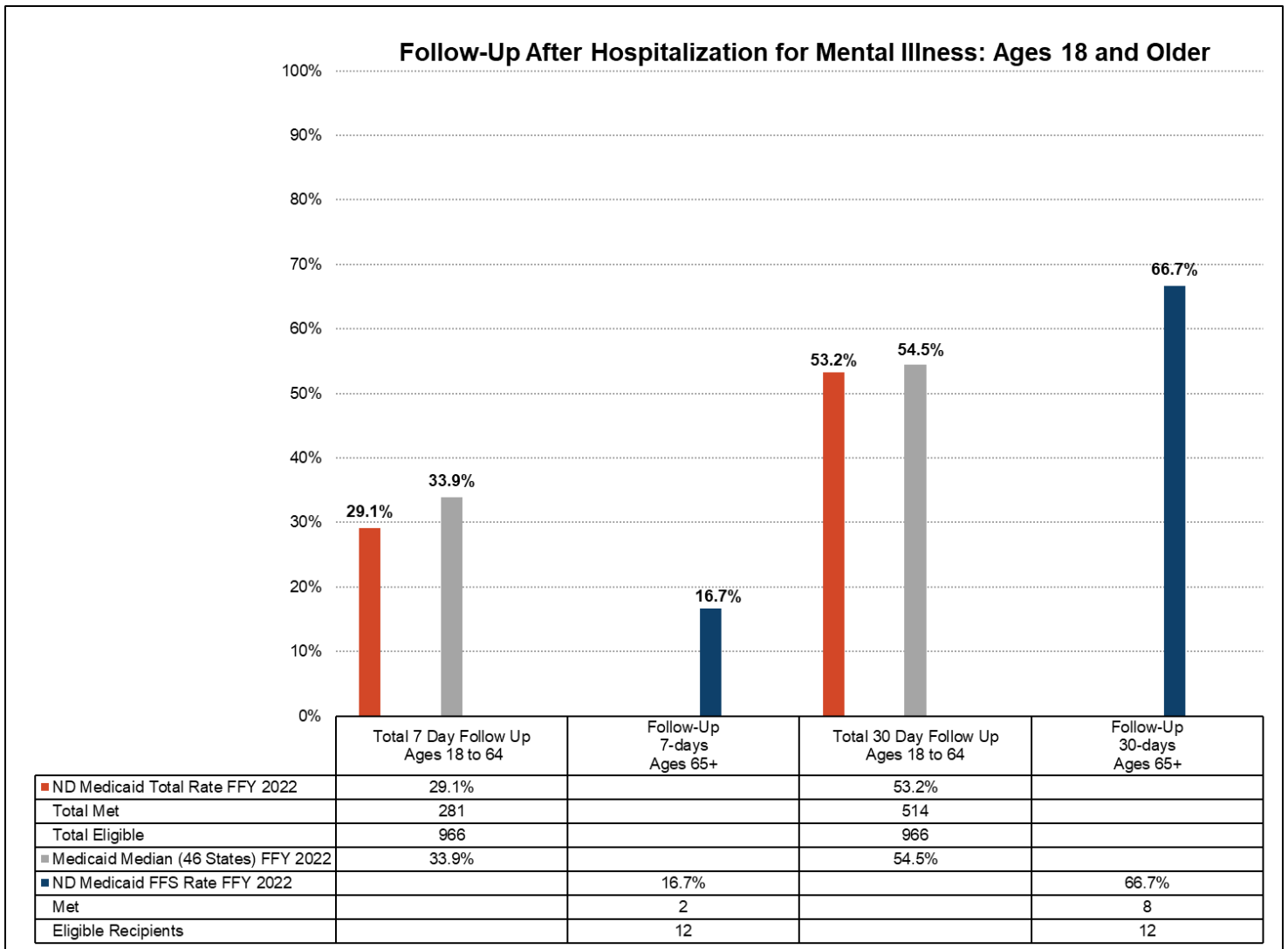
Antidepressant Medication Management: Ages 18 and Older



	Acute Phase Ages 18-64	Acute Phase Age 65+	Continuation Phase Ages 18-64	Continuation Phase Age 65+
■ ND Medicaid FFS Rate FY 2022		80.0%		40.0%
Met		8		4
Eligible Recipients		10		10
■ ND Medicaid Total Rate FFY 2022	59.3%		40.4%	
Total Met	1,647		1,121	
Total Eligible	2,776		2,776	
■ Medicaid Median (43 States) FFY 2022	58.8%		41.8%	

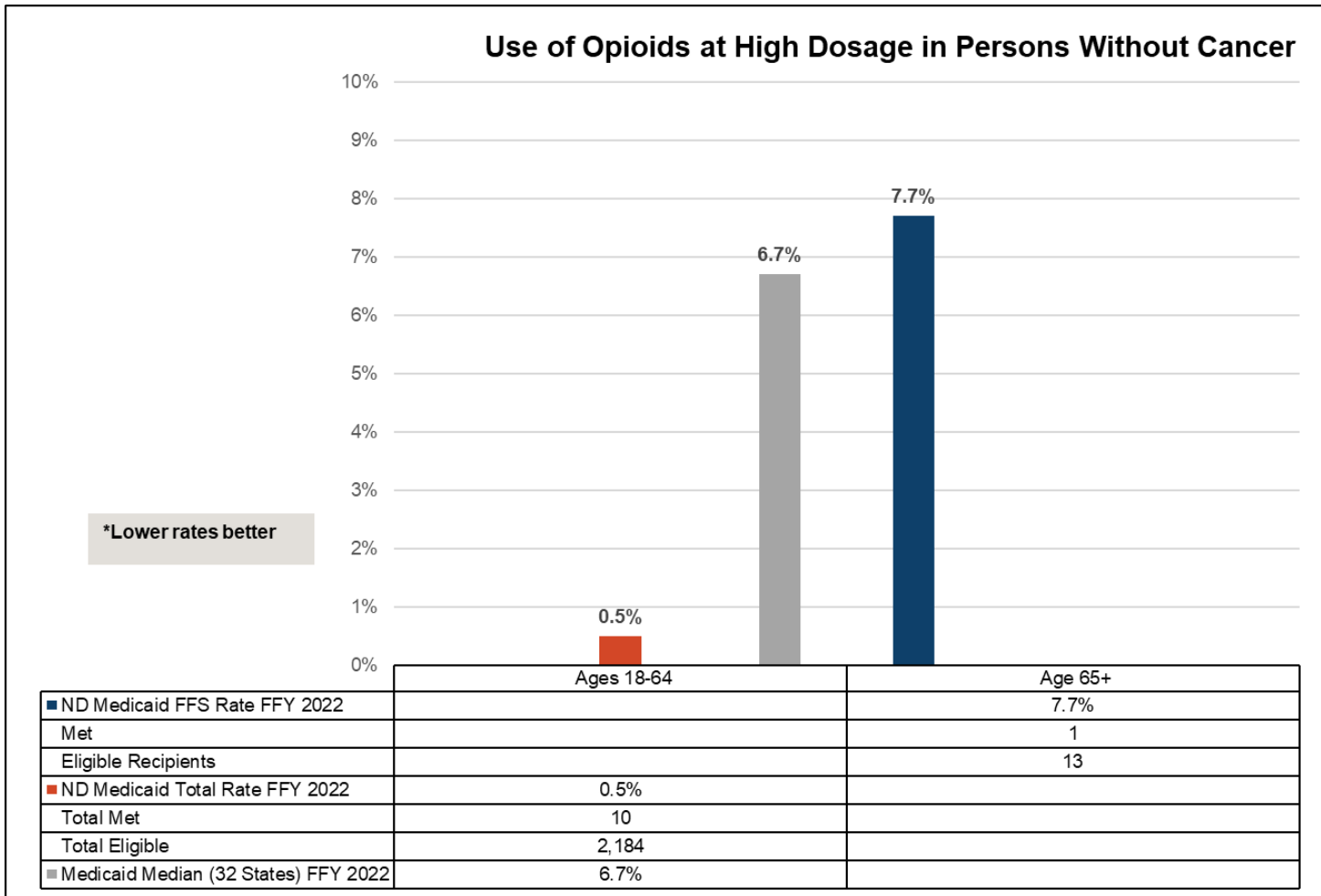
MEASURE DESCRIPTION

This measure shows the percentage of adults ages 18 and older diagnosed with major depression who were treated with antidepressant medication and who remained on antidepressant medication treatment. Two rates are reported: (1) the percentage who remained on antidepressant medication treatment for the 12-week *effective acute phase treatment*; and (2) the percentage who remained on antidepressant medication treatment for the 6-month *effective continuation phase treatment*.



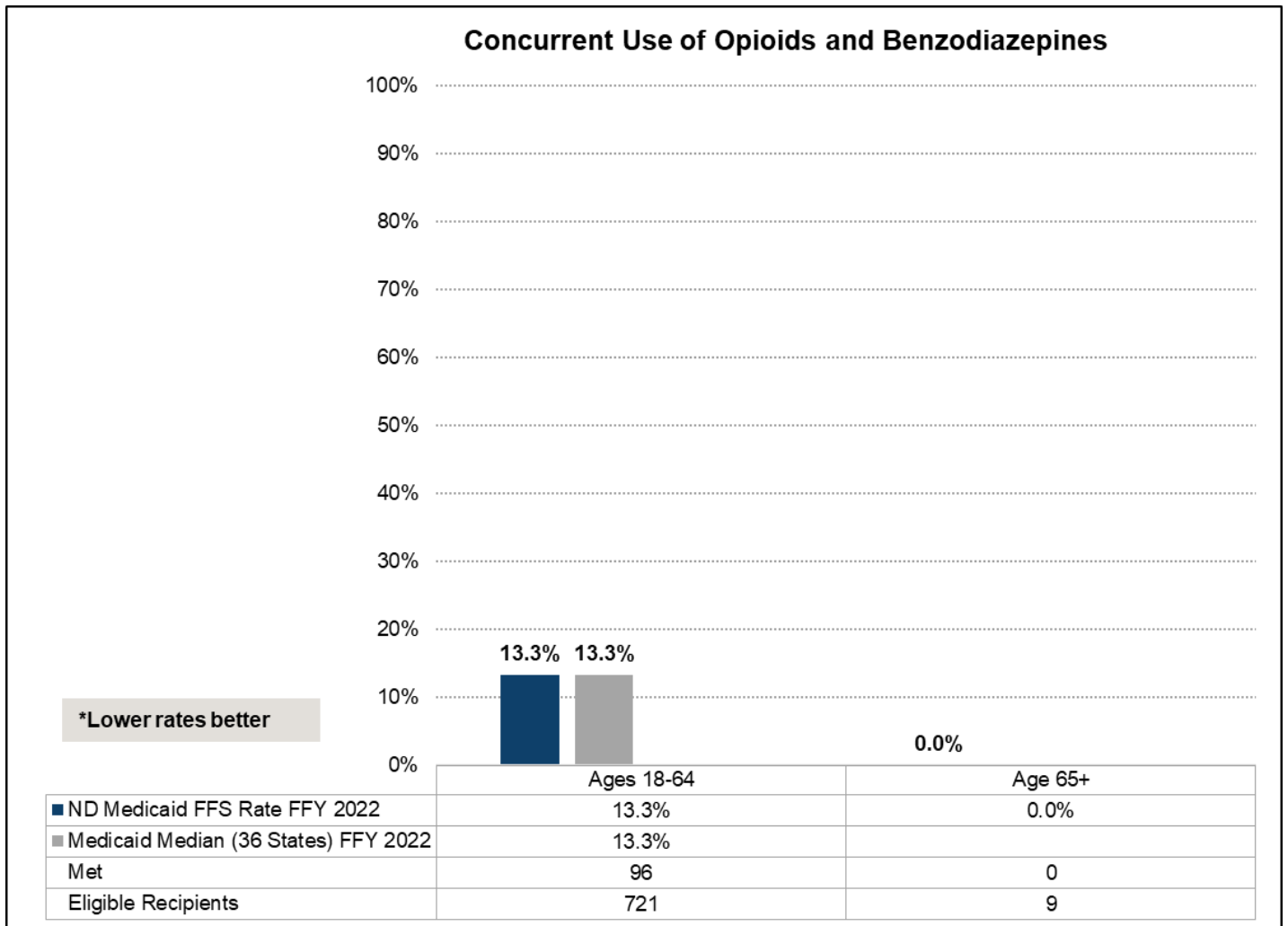
MEASURE DESCRIPTION

This measure shows the percentage of discharges for adults ages 18 and older who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses who had a follow -up visit with a mental health practitioner within 30 days after discharge and ideally, within 7 days after discharge.



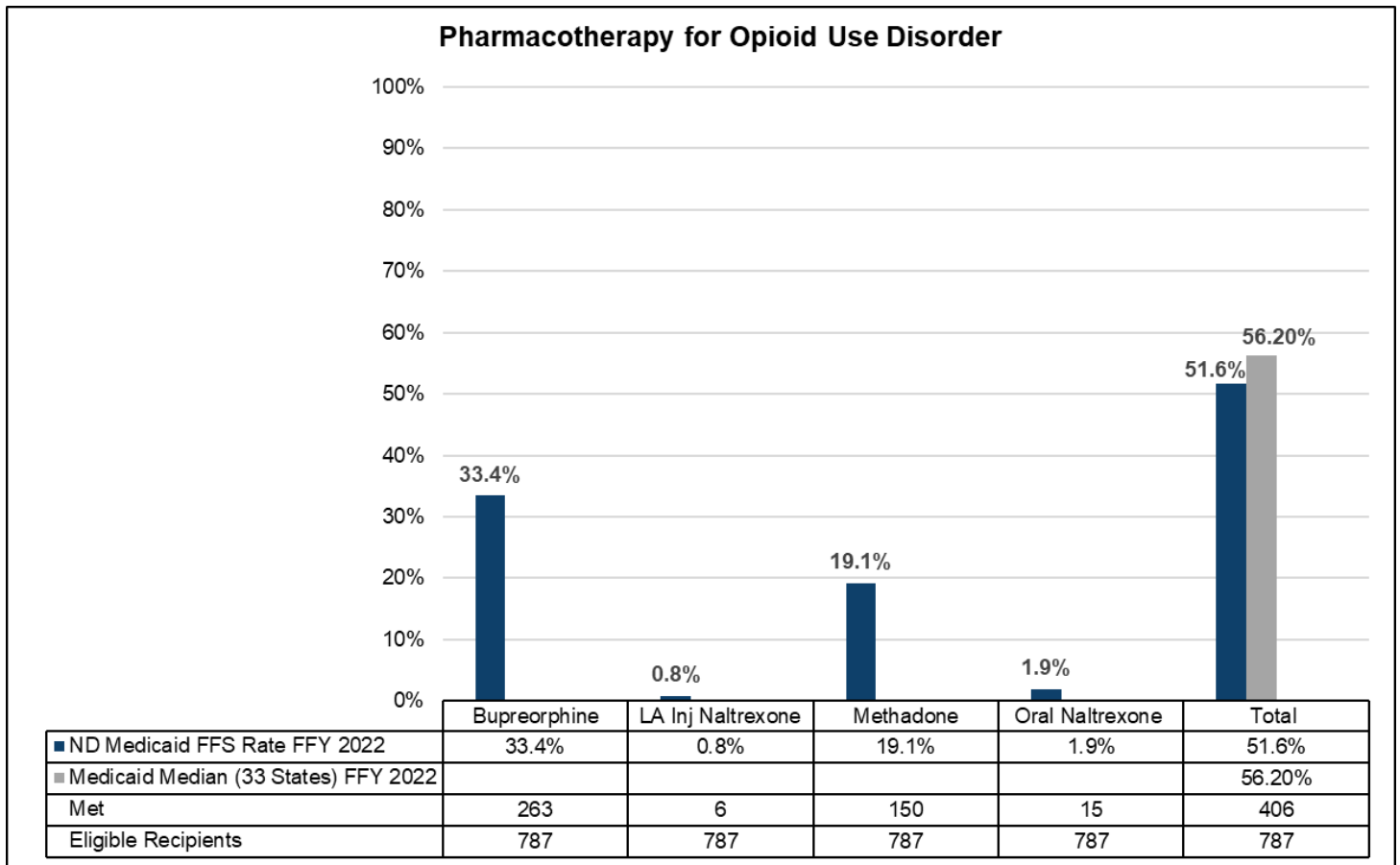
MEASURE DESCRIPTION

This measure shows the percentage of adults age 18 and older who received prescriptions for opioids with an average daily dosage greater than or equal to 90 morphine milligram equivalents over a period of 90 consecutive days or more during the measurement year.



MEASURE DESCRIPTION

This measure assesses the percentage of adults age 18 and older that were prescribed both opioids and benzodiazepines for 30 or more cumulative days during the measurement year.

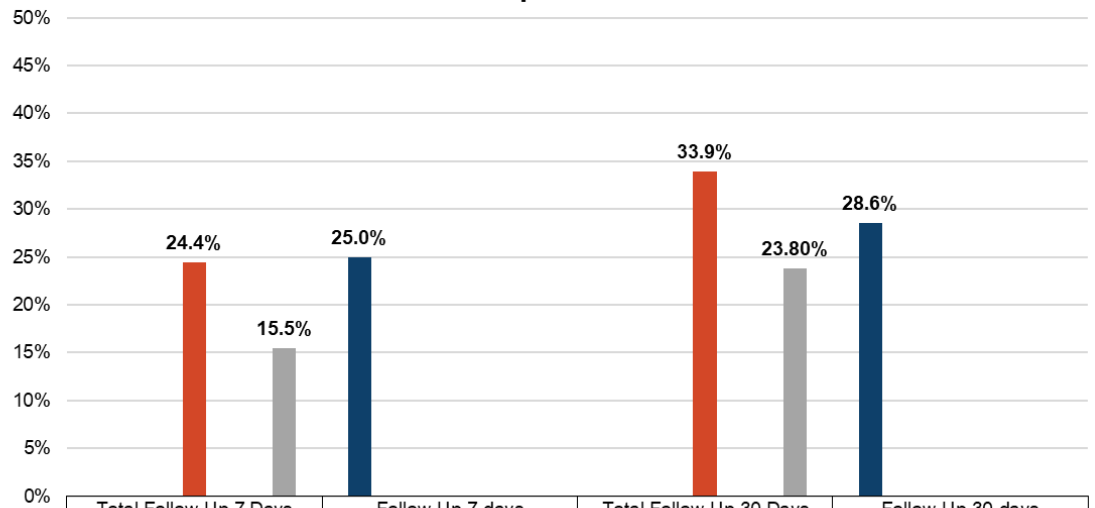


MEASURE DESCRIPTION

This measure shows the percentage of adults age 18 to 64 with an opioid use disorder (OUD) who filled a prescription for or were administered or dispensed an FDA-approved medication for the disorder during the measurement year. Five rates are reported:

- A total (overall) rate capturing any medications used in medication assisted treatment of opioid dependence and addiction (Rate 1)
- Four separate rates representing the following types of FDA-approved drug products:
 - Buprenorphine (Rate 2)
 - Oral naltrexone (Rate 3)
 - Long-acting, injectable naltrexone (Rate 4)
 - Methadone (Rate 5)

Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence

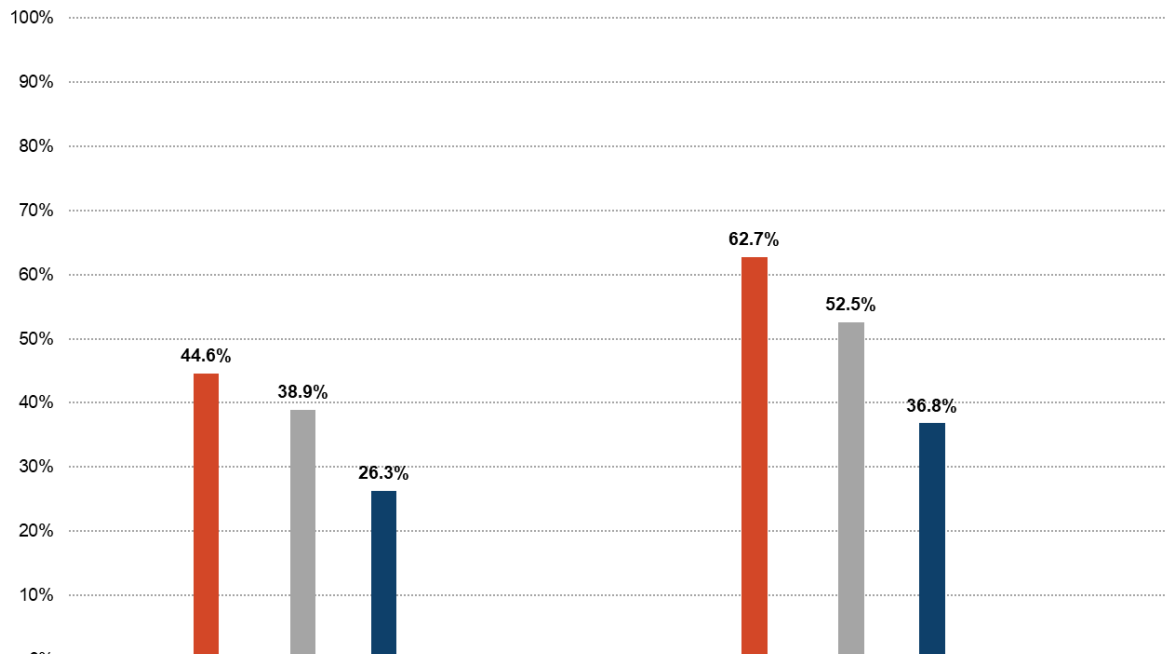


	Total Follow-Up 7 Days Ages 18 to 64	Follow-Up 7-days Ages 65+	Total Follow-Up 30 Days Ages 18 to 64	Follow-Up 30-days Ages 65+
■ ND Medicaid FFS Rate FFY 2022		25.0%		28.6%
ED Visit Follow-Up Met		7		8
Eligible Recipients		28		28
■ Medicaid Total Rate FFY 2022	24.4%		33.9%	
Total ED Visit Follow-Up Met	401		557	
Total Eligible	1,645		1,645	
■ Medicaid Median (47 States) FFY 2022	15.5%		23.80%	

MEASURE DESCRIPTION

This measure shows the percentage of adults age 18 and Older who had a follow-up visit with any practitioner within 7 and 30 days of an ED visit for Alcohol and Other Drug Abuse or dependence.

Follow-Up After Emergency Department Visit for Mental Illness: Ages 18 and Older

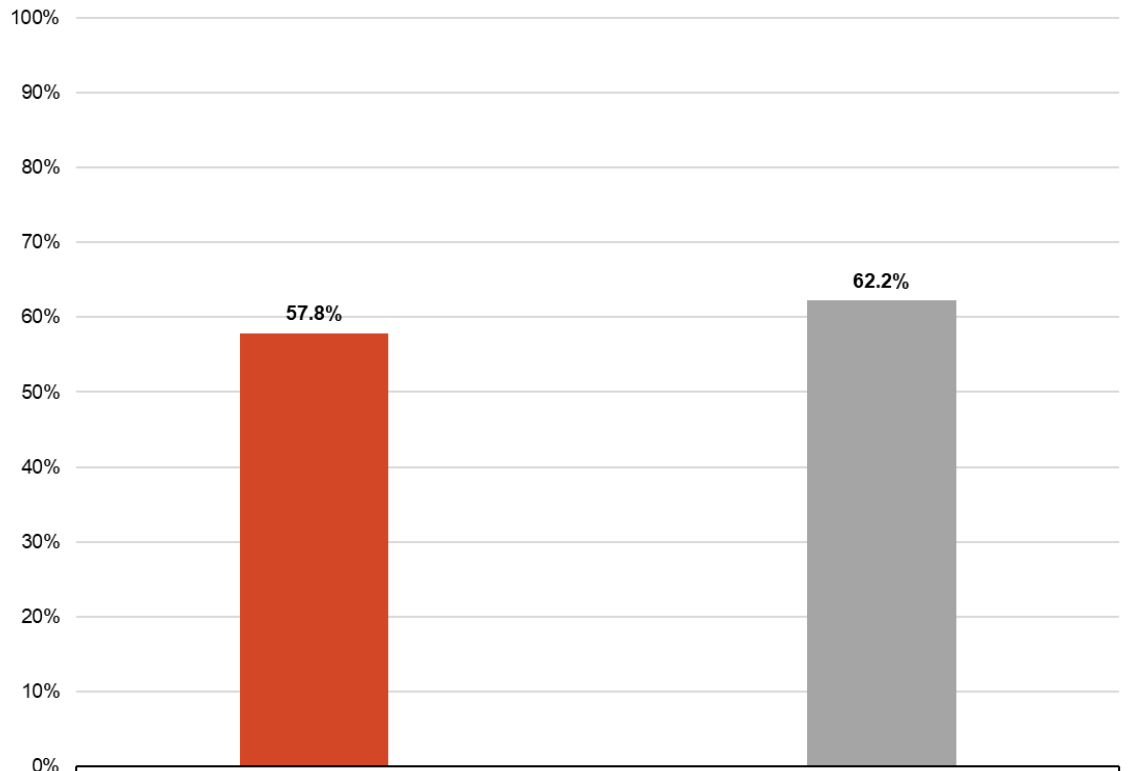


	Total 7 Day Follow-Up Ages 18 to 64	Follow-Up 7-days Ages 65+	Total 30 Day Follow-Up Ages 18 to 64	Follow-Up 30-days Ages 65+
■ ND Medicaid FFS Rate FFY 2022		26.3%		36.8%
ED Visit Follow-Up Met		5		7
Eligible Recipients		19		19
■ ND Medicaid Total Rate FFY 2022	44.6%		62.7%	
Total ED Visit Follow-Up Met	388		545	
Total Eligible	869		869	
■ Medicaid Median (48 States) FFY 2022	38.9%		52.5%	

MEASURE DESCRIPTION

This measure shows the percentage of adults age 18 and Older who had a follow-up visit with any practitioner within 7 and 30 days of an Emergency Department (ED) visit for mental illness or intentional self-harm.

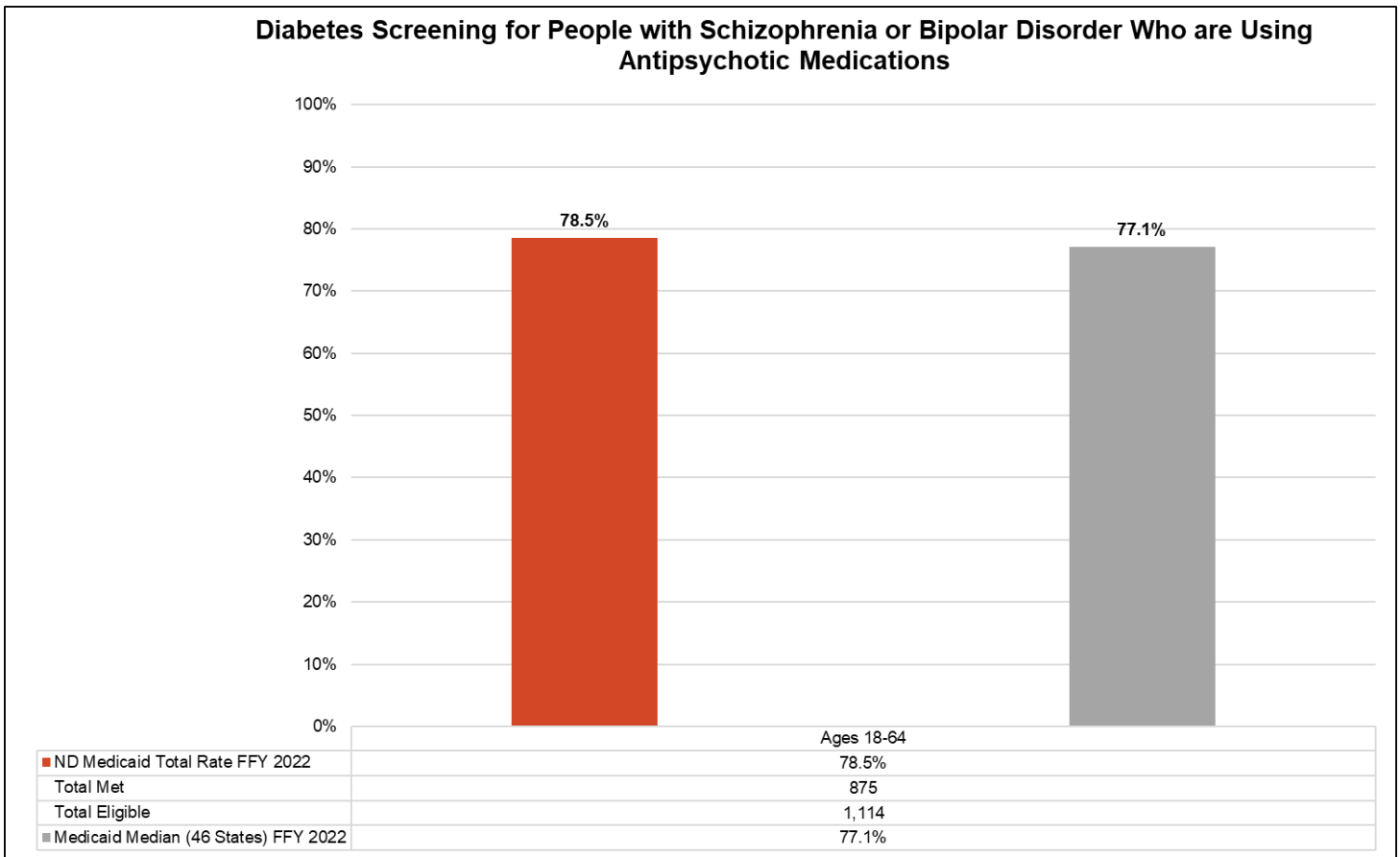
Adherence to Antipsychotic Medications for Individuals with Schizophrenia



	Ages 18+
■ ND Medicaid Total Rate FFY 2022	57.8%
Total Met	271
Total Eligible	469
■ Medicaid Median (46 States) FFY 2022	62.2%

MEASURE DESCRIPTION

Adherence to antipsychotics for the treatment of schizophrenia can reduce the risk of relapse or hospitalization. This measure shows the percentage of adults ages 18 and older with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.



MEASURE DESCRIPTION

This measure assesses adults age 18 to 64 with schizophrenia, schizoaffective disorder, or bipolar disorder who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.