

Focused Studies

Description

Following Minnesota state statute requirements, each year South Country Health Alliance (South Country) conducts focused studies to acquire information relevant to quality of care and services provided to our members. Topics selected for these studies are based on areas of high volume of membership where problems are expected, or may have occurred in the past, where issues can be corrected, prevention may have an impact, areas that have potential adverse health outcomes, or topics of frequent member or provider complaints. The goal is to achieve improvement with the issues identified and implement systemic changes to ensure continued success.

Process and Analysis

As part of the ongoing Quality Program evaluation processes described throughout this report, South Country reviews health care service utilization data, network geo access maps, member survey results, care coordination activities, grievances and appeals cases, and quality metrics, such as the Healthcare Effectiveness and Information Set (HEDIS) and Minnesota community measurement data, to identify existing or potential gaps in quality of and access to care. Based on feedback from county partners, including the Public Health & Human Service Advisory Committee and other stakeholders, under the guidance of the Quality Assurance Committee (QAC), targeted interventions and improvement activities are developed with the goal of improving outcomes in the areas identified.

The following three initiatives were selected as specific focused studies for 2025:

1. This focused study is directed at the opportunity to improve routine prevention screening for cervical cancer and early detection of cervical cancer.
2. This focused study is directed at the opportunity for improvement and an area with potential for improvement in care as it relates to chlamydia screenings.
3. This focused study is directed at the opportunity to improve colorectal and breast cancer screenings.

Focused Study #1: Increasing the overall percentage of PMAP, MinnesotaCare, SingleCare, Shared Care, and AbilityCare members ages 21-64 (or as recommended by provider) who receive a cervical cancer screening.

The primary goal of this focused study is to increase the overall percentage of PMAP, MinnesotaCare, SingleCare, Shared Care, and AbilityCare members ages 21-64 or as recommended by providers who receive a cervical cancer screening.

The HEDIS Measurement Year MY 2023 Cervical Cancer Screening measure was used as the baseline rate to determine the expected outcome performance measurement rate. The rate will be calculated for each measurement year, and the methodology will be applied using HEDIS technical specifications.

Using the MY 2023 CCS rate (59.10%) as the baseline, South Country's goal is to increase the PMAP HEDIS MY 2023 hybrid rate to 65.62% during the three-year measurement period which is a 6.52% increase.

Using the MY 2023 CCS rate (56.82%) as the baseline, South Country's goal is to increase the MNCare HEDIS rate to 63.41% over the three-year measurement period, which is a 6.59% increase.

Using the MY 2023 CCS rate (48.18%) as the baseline, South Country’s goal is to increase the SingleCare/ SharedCare HEDIS hybrid rate to 54.48% over the three-year measurement period, which is 6.19%

Using the MY 2023 CCS rate (63.46%) as the baseline, South Country’s goal is to increase the AbilityCare HEDIS rate to 72.60% over the three-year measurement period, which is a 9.14% increase.

Below are the Cervical Cancer Screening rates by product.

Cervical Cancer Screening Hybrid Rate			
Product	HEDIS MY 2022	HEDIS MY 2023	HEDIS MY 2024
PMap	43.50%*	59.10%	64.09%
MNCare	40.43%*	56.82%	63.52%
AbilityCare	54.13%*	63.46%	66.84%
SingleCare_ SharedCare	33.24%*	48.18%	57.18%

*Note that MY2022 rates are administrative-only.

Some factors prevent women from being tested, such as lack of a regular health care provider and lack of transportation. South Country data shows the opportunity for outreach to our eligible members to educate them on the reasons to have a cervical cancer screening, the types of cervical cancer screenings and the South Country coverage for these screenings.

South Country will continue efforts to increase cervical cancer screening through continuing promotion of related wellness programs, provider education, and encouraging members to follow provider recommendations on cervical screenings.

Focused Study #2: Increasing the overall percentage of MinnesotaCare, PMAP, SingleCare and Shared Care members ages 16-24 (or as recommended by provider) who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

The primary goal of this focused study is to increase the overall percentage of MinnesotaCare, PMAP, SingleCare and Shared Care members aged 16-24 (or as recommended by provider) who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

HEDIS Measurement Year (MY) 2023 Chlamydia Screening (CHL) will be used as the baseline rate to determine the expected outcome performance measurement rate. The rate will be calculated for each measurement year, and the methodology will be applied

PMAP

South Country has the goal of increasing the MY 2023 rate by 4.25% to 42.59% during the three-year measurement period.

MNCare

South Country has the goal of increasing the MY 2023 rate by 21.43% to 57.14% during the three-year measurement period.

SingleCare/SharedCare

South Country has the goal of increasing the MY 2023 rate by 28.00% to 52.00% during the three-year measurement period.

Below are the Chlamydia screening rates by product.

Chlamydia Screening Rate			
Product	HEDIS MY 2022	HEDIS MY 2023	HEDIS MY 2024
PMAP	38.82%	38.34%	30.18%
MNCare	38.89%	35.71%	30.65%
SingleCare/SharedCare	28.57%	24.00%	15.00%

South Country believes there is an opportunity for outreach to members to enhance prevention by providing education and information and continuing promotion of wellness program incentive that promotes and encourages testing per the provider’s recommendations.

Focused Study #3: Increase the number of South Country PMAP, MNCare, SingleCare, SharedCare, and MSC+ members who are up to date on their colorectal and breast cancer screenings for early detection.

HEDIS Measurement Year (MY) 2023 Colorectal Cancer Screening (COL) measure will be used as the baseline rate to determine the expected outcome performance measurement rate. The rate will be calculated for each measurement year, and the methodology will be applied.

PMAP

South Country has a goal to increase the PMAP HEDIS MY 2023 rate by 2.68% (38.25%) during the three-year measurement period.

MNCare

South Country has a goal to increase the MNCare HEDIS MY 2023 rate by 5.55% (43.74%) during the three-year measurement period.

SingleCare/SharedCare

South Country has a goal to increase the SingleCare/ SharedCare HEDIS MY 2023 rate by 5.52% (51.58%) during the three-year measurement period.

MSC+

South Country has a goal to increase the MSC+ HEDIS MY 2023 rate by 6.71% (52.77%) during the three-year measurement period.

Below are the Colorectal Cancer screening administrative rates (MY 2022-MY 2023) and ECDS rates (MY 2024) by product.

Colorectal Cancer Screening Rate			
Product	HEDIS MY 2022	HEDIS MY 2023	HEDIS MY 2024
PMAP	23.81%	35.57%	41.39%
MNCare	25.36%	38.19%	50.59%
SingleCare/SharedCare	31.19%	46.06%	49.81%
MSC+	28.41%	46.06%	44.86%

HEDIS Measurement Year (MY) 2023 Breast Cancer Screening (BCS) measure will be used as the baseline rate to determine the expected outcome performance measurement rate. The rate will be calculated for each measurement year, and the methodology will be applied.

PMAP

South Country has a goal to increase the PMAP HEDIS MY 2023 rate by 4.71% (62.54%) during the three-year measurement period.

MNCare

South Country has a goal to increase the MNCare HEDIS MY 2023 rate by 8.88% (71.96%) during the three-year measurement period.

SingleCare/SharedCare

South Country has a goal to increase the SingleCare/ SharedCare HEDIS MY 2023 rate by 8.12% (71.59%) during the three-year measurement period.

MSC+

South Country has a goal to increase the MSC+ HEDIS MY 2023 rate by 8.75% (64.17%) during the three-year measurement period.

Below are the Breast Cancer screening administrative rates (MY 2022) and ECDS rates (MY 2023-MY 2024) by product.

Breast Cancer Screening Rate			
Product	HEDIS MY 2022	HEDIS MY 2023	HEDIS MY 2024
PMAP	59.66%	57.83%	59.38%
MNCare	61.70%	63.08%	64.09%
SingleCare/SharedCare	61.70%	63.47%	57.37%
MSC+	54.87%	55.42%	52.91%

Next Steps

The focused studies will continue efforts to identify member barriers and collaborate with various stakeholders to decrease these barriers with an emphasis on targeting specific populations of need. We plan to continue the collaboration with the American Cancer Society through participating in cancer coalitions that provide a place to identify ongoing or new barriers and opportunities to support efforts for cancer screenings in Minnesota. These collaborative efforts are highly valuable due to the variety of organizations that participate and information that is shared.

South Country will conduct and monitor our focused studies regularly through internal meetings and determine the appropriateness of current interventions and assess appropriateness of new or continued initiatives and interventions. We will implement these focused studies in 2026 with a continued focus on cancer screenings and chlamydia testing.