



MN Community Measurement

2020 ANNUAL REPORT

LETTER FROM MNCM PRESIDENT

Dear friends,

I am pleased to share MNCM's Annual Report for 2020 with you. While it was a year of more upheaval than most of us could have imagined in our work and our daily lives, we have much to be proud of and grateful for – as an organization and as part of a health care community that has pulled together to solve problems and make more rapid change than previously thought possible.

When the immediate health care crisis recedes, we know that we have a great deal of work remaining that is just as urgent. In addition to addressing gaps in preventive health care and chronic disease management that have happened because of the COVID-19 pandemic, we must focus as never before on improving health equity so that all Minnesotans, regardless of race, ethnicity, gender, region of residence, age, and other factors can reach their full potential. I am inspired by the level of commitment to this effort that I see throughout the health care community, and MNCM is excited to be joining forces with others in this effort.

We must also learn from what worked to deliver care in new ways during the pandemic – expansions in telehealth, innovations in remote patient monitoring, and more. Quality measurement and reporting will play important roles in understanding which innovative care delivery strategies result in the best outcomes for patients. It is clearer than ever that the transition to value-based payments with flexibility and support for managing population health will be key to future success. This is another area where MNCM is eager to support our partners and stakeholders with objective information to drive action and measure improvement.

Throughout 2020 and into 2021, we have been grateful for ongoing support and engagement from our community partners, including health plans, health care providers, state agencies, employers, researchers, and consumers. All these voices have played an important role in shaping MNCM's ongoing work to be an objective, trusted source of relevant and actionable information to drive health care improvement. We look forward to your continued partnership, and we welcome all those who wish to join us in support of this work.

Sincerely,



Julie Sonier
President



CONTENTS

We are pleased to share MNCM's 2020 Annual Report with the community. MNCM is a multi-stakeholder nonprofit organization that empowers health care decision makers with meaningful data to drive improvement. This report describes MNCM's activities and accomplishments in 2020 to achieve this goal. It is organized into several sections as follows:

- » Continued Excellence in Measurement and Transparency
- » Innovation to Drive System Improvement
- » Achieving Broader Impact and Engagement
- » Research Partnerships
- » Advancing National and Regional Alignment
- » Acknowledgements
 - Founding Members
 - Supporting Members
 - Service on MNCM Board of Directors
 - Service on MNCM Committees, Workgroups, and Technical Advisory Groups

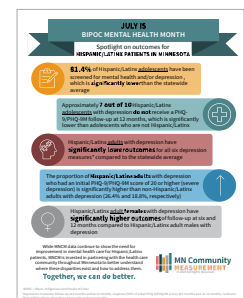
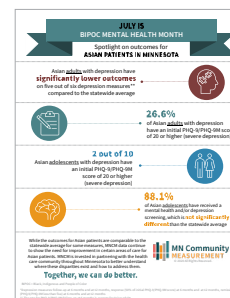
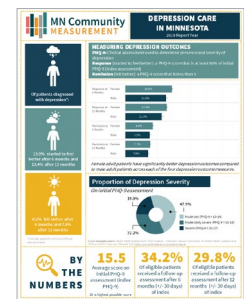
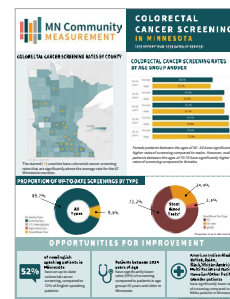
CONTINUED EXCELLENCE IN MEASUREMENT AND TRANSPARENCY

- » MNMCM produced several community reports highlighting statewide performance on health care cost and utilization; disparities by insurance type; disparities by race, ethnicity, language, and country of origin; and health care quality. MNMCM also produced spotlight reports and infographics on depression care and the impact of pharmacist interventions to close care gaps for patients with diabetes. These reports are available to the public free of charge and provide comparative data and analysis that shed light on opportunities for improving performance and care delivery. In the electronic version of this report, click on the images below to link directly to each publication.

2020 Reports



2020 Infographics



- » MNMCM enhanced communications and resources for community stakeholders and laid important groundwork for future enhancements:
 - » MNMCM launched a new and enhanced website that increased visibility and eased access to MNHealthScores and the suite of MNMCM Community Reports.
 - » MNMCM delivered a series of free community webinars that drew high levels of attendance and engagement. Topics highlighted included: MNMCM's new approach to measurement leveraging its Process Intelligence Performance Engine (PIPE) data infrastructure, health care cost and utilization in Minnesota during 2019, and the outcomes of pharmacist interventions to close gaps in care for patients with diabetes. All webinars are available for viewing on the MNMCM website.
 - » MNMCM's MNHealthScores website for transparency of health care quality and cost continues to be recognized as one of the best in the nation. In 2020, MNMCM launched an effort to modernize the site and make it easier to find and compare relevant information. This work is currently under way and an initial launch of the new site is anticipated mid-year 2021.
- » MNMCM worked with stakeholders to adapt its quality measurement and reporting activities in response to the COVID-19 pandemic:
 - » MNMCM made changes to several quality measures to reflect rapid changes in how health care is being delivered. These changes included ensuring that services provided via telehealth are appropriately included and updating measures to allow for patient-recorded digital blood pressures. With these changes, MNMCM's quality measures will reflect the realities of changing health care delivery and remain in alignment with national practices.
 - » MNMCM gathered input and led community discussions on how best to adapt its quality measurement and public reporting activities considering the severe disruptions to health care in 2020. With strong community support for continued measurement and public transparency, MNMCM's slate of measures for 2021 data collection was approved by the Board of Directors in December. Public reporting for care provided in 2020 will be at the medical group level rather than the clinic location, with appropriate cautions about comparisons to prior years.
- » MNMCM secured re-endorsement of its Optimal Vascular Care (OVC) measure by the National Quality Forum (NQF).

2023 Slate of Measures

SLATE OF MNMCM MEASURES FOR 2021 REPORTING – NARC RECOMMENDATION FINAL

MEASURE	MEASURE TYPE	DATA COLLECTION METHOD	ENDORSEMENT AND USE					RECOMMENDED PUBLIC REPORTING IN 2021			
			NQF	QIP	HEALTH PLANS	SQMS	CQMC				
HEALTHCARE EFFECTIVENESS DATA AND INFORMATION SET (HEDIS)											
Reported at medical group level											
Avoidance of Antibiotic Prescriptions in Adults with Acute Bronchitis	Process	Claims	•	•	•	•	•	Yes			
Breast Cancer Screening	Process	Claims	•	•	•	•	•	Yes			
Cervical Cancer Screening	Process	Claims	•	•	•	•	•	Yes			
Childhood Immunization Status (Combo 88)	Process	Claims	•	•	•	•	•	Yes			
Chlamydia Screening in Women	Process	Claims	•	•	•	•	•	Yes			
Comprehensive Diabetes Care: Eye Exams	Process	Claims	•	•	•	•	•	Yes			
Controlling High Blood Pressure	Outcome	Claims	•	•	•	•	•	Yes			
Follow-up Children Prescribed ADHD Meds	Process	Claims	•	•	•	•	•	Yes			
Immunizations for Adolescents (Combo 2)	Process	Claims	•	•	•	•	•	Yes			
Outpatient Management in Women with Fracture	Process	Claims	•	•	•	•	•	Yes			
Spirometry Testing Across Specialty of COPD	Process	Claims	•	•	•	•	•	Yes			
CLINICAL DATA SUBMISSION											
Reported at medical group level or group level											
Adolescent Depression/Anxiety Screening	Process	Groups/Clinics					•	Yes (MG only)			
Adult Education & Self-Management – Adults & Children	Process	Groups/Clinics					•	No			
Colorectal Cancer Screening	Process	Groups/Clinics	•	•	•	•	•	Yes (MG only)			
Depression Care Scale: Adults & Adolescents	Outcome	Groups/Clinics	•	•	•	•	•	Yes (MG only)			
12 Month Remission	Outcome	Groups/Clinics	•	•	•	•	•	Yes (MG only)			
22 Month Remission	Outcome	Groups/Clinics	•	•	•	•	•	Yes (MG only)			
18 Month Remission	Outcome	Groups/Clinics	•	•	•	•	•	Yes (MG only)			

* Orthopedic measures (Optimal Surgery & Total Knee Replacement) are reported at medical group level only

• MNMCM is measure standard

• NQF is measure standard

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INNOVATION TO DRIVE SYSTEM IMPROVEMENT

- » MNCM moved into full implementation of its modernized approach to measurement and its new PIPE data infrastructure. The modernized approach to data collection and measurement significantly reduces the burden for medical groups and enhances MNCM's ability to deliver timely and actionable data to help support improvement efforts. The first medical group using PIPE went live in October. Onboarding will be ongoing throughout 2021.
- » MNCM worked with Integrity Health Network (IHN) to successfully develop, test, and implement an automated process to support IHN's work to fill gaps in care for patients with diabetes. In 2021, MNCM will be evaluating how these services can be offered more broadly to support stakeholders in their improvement efforts.
- » MNCM continued work through its Common Health Information Reporting Partnership (CHIRP) and finalized two data standards to streamline data sharing between health care payers and providers to inform improvement efforts. The standards that will move into pilot testing in 2021 include one standard for *Payer-to-Provider* reporting and one standard for *Provider-to-Payer* reporting. Payers and providers can implement the standards on their own or leverage technical support from MNCM using the PIPE data infrastructure.
- » MNCM began exploring the possibility of leveraging its PIPE data infrastructure to support clinical data needs for HEDIS (Healthcare Effectiveness Data and Information Set) measurement. This activity would reduce the need for chart abstraction for HEDIS measures, saving time, effort, and costs for health plans and health care providers.

ACHIEVING BROADER IMPACT AND ALIGNMENT

- » The MNCM Board completed a strategic planning effort to develop recommendations for how MNCM can partner with others to drive health care improvement more proactively. The recommendations of the task force were approved by the Board in February. The areas of highest priority identified include mental health, opioids/substance use, and appropriate use of care.
- » MNCM engaged in a collaborative effort to advance high-value care spearheaded by the Minnesota Chamber of Commerce, Minnesota Council of Health Plans, and Minnesota Hospital Association. In 2021, MNCM will serve as the analytic backbone for a pilot project that is aimed at improving the efficiency of health care spending in Minnesota.
- » MNCM led a best practices study of Minnesota clinics and care systems, funded by a Eugene B. Washington Community Engagement award from the Patient Centered Outcomes Research Institute (PCORI). The study is focused on identifying clinical practices, enablers of success, challenges to address, and opportunities for collective action to improve depression care. Results of the study will be shared with the community during second quarter of 2021.

» MNMCM supported three Minnesota state agencies in their work to advance health care quality and affordability, by:

- » Collecting and delivering data for the Statewide Quality Reporting and Measurement System administered by the Minnesota Department of Health and redesigning and delivering enhanced benchmarking reports to support the Health Care Homes program.
- » Producing an annual report on statewide disparities by insurance type in partnership with the Minnesota Department of Human Services (DHS), delivering analysis needed for administration of the Integrated Health Partnership Program, and launching a pilot project with DHS to better understand underlying causes behind health care disparities.
- » Providing Minnesota Management and Budget with data specific to its health care provider network and supporting efforts to promote access to high value health care through the State Employee Group Insurance Program.



» MNMCM remained actively engaged at the national level to represent and share Minnesota stakeholder perspectives on priorities for measurement and alignment by:

- » Serving on the National Quality Forum's Measure Application Partnership (MAP) Coordinating Committee and Rural Health Workgroup. MAP advises the Centers for Medicare & Medicaid Services (CMS) on the selection of quality measures for use in federal programs.
 - » Participating in the Core Quality Measures Collaborative (CQMC) Steering Committee and workgroups focused on orthopedics, pediatrics, and oncology. CQMC is a public-private collaborative focused on aligning quality measures across payers. Nine MNMCM measures are included in the 2020 CQMC core measure sets.
- » Nine MNMCM measures continue to be included in CMS programs, including measures for depression remission, asthma, total knee replacement, and spine surgery.

PARTNERING WITH RESEARCHERS TO ADVANCE IMPROVEMENT

» MNCM partnered with HealthPartners Institute and MDH on a research project funded by the Patient-Centered Outcomes Research Institute (PCORI) to study the effect of care coordination on patient outcomes. The project is named the *Minnesota Care Coordination Effectiveness Study* (MNCARES). MNCM is responsible for providing input into the study design and operational plan of data flow – and is responsible for aggregating data from all sources relevant to the study and producing the final data set for HealthPartners Institute to conduct the analysis.



» MNCM administered a study focused on measuring the impact of expanding pharmacy enhanced services in Minnesota to improve health care outcomes for patients with diabetes. The study was carried out in collaboration with Blue Cross and Blue Shield of Minnesota, Thrifty White Pharmacy and Pfizer, in addition to independent pharmacies engaged in a network administered by Thrifty White Pharmacy. In December, MNCM published a community report and hosted a webinar to share the results with the community.



- » MNCM participated in the Minnesota EHR (Electronic Health Record) Consortium, a collaborative effort among Minnesota health systems and other organizations (MNCM, ICSI, MDH, and others) that aims to leverage clinical data from multiple providers to inform research. MNCM's role includes exploring how best to make participation possible for medical groups that may not have internal resources to do so.
- » MNCM entered an agreement with the University of North Carolina (UNC) Chapel Hill for a collaborative data sharing effort related to the Symptom Control During Chemotherapy measures. The joint effort will combine two sets of pilot data to increase statistical power to demonstrate measure reliability.

ACKNOWLEDGEMENTS

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HealthPartners

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Minnesota Hospital Association
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PrimeWest Health System

South Country Health Alliance
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**Continuing in 2021*

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