

Effective Contraceptive Use

Measure Basic Information

Name and date of specifications used: OHA developed these specifications in 2014 based on national specifications that were under development with the Centers for Disease Control and Prevention (CDC) and the Centers for Medicare and Medicaid Services (CMS), and in collaboration with the Oregon Preventive Reproductive Health Advisory Council and the CCO Metrics Technical Advisory Workgroup.

As CMS has formally adopted the Contraceptive Care - All Women ages 15-44 (CCW) measure for FFY2016 Maternal and Infant Health Initiative reporting, OHA has decided to continue using its own algorithm for the Effective Contraceptive Use (ECU) measure, but make additional changes to align most of the numerator and denominator codes with the CMS CCW measure.

The main differences between CCW and ECU are:

Population:

- CMS CCW reports on women age 15-44; OHA ECU includes women age 15-50.

Denominator exclusion:

- OHA ECU includes more denominator exclusion codes based on the Oregon Medicaid Hysterectomy and Sterilization Consent Audit Criteria, and CCO feedback on the draft 2017 specifications released in November 2016.
- CMS CCW uses denominator exclusion criteria to address postpartum contraceptive use, and the remaining women in the denominator are not pregnant in the measurement year, or had a pregnancy that ended in the first 10 months of the measurement year, or had an ectopic pregnancy, stillbirth, miscarriage, or induced abortion. OHA ECU specifications address postpartum contraceptive use by excluding only the non-numerator compliant members from the denominator, if there is pregnancy history in the year.

Numerator:

- While both measures only include tier 1 and 2 contraceptive methods, CMS CCW reports separate rates for the two tiers, and the OHA ECU measure reports a combined rate.
- CMS CCW specifications adjust for LARC removals and re-insertions in the numerator logic, whereas OHA ECU specifications look for evidence of LARC in the numerator logic.
- OHA ECU includes more numerator codes for indirect evidence and surveillance of effective contraceptive methods, as well as appropriate ICD-10 codes new to 2017 that CMS CCW has not yet included.

URL of Specifications: n/a. For more information on CMS' Maternal and Infant Health Initiative and the CCW measure: <https://www.medicaid.gov/medicaid/quality-of-care/improvement-initiatives/maternal-and-infant-health/contraception/index.html>

Measure Type:

HEDIS PQI Survey Other Specify: OHA-developed

Measure Utility:

CCO Incentive State Quality Measure CMS Adult Core Set CMS Child Core Set
 Other Specify:

Data Source: MMIS/DSSURS

Measurement Period: January 1, 2018 - December 31, 2018

2015 Benchmark: 50%. Metrics & Scoring Committee consensus.

2016 Benchmark: 50%. Metrics & Scoring Committee consensus.

2017 Benchmark: 50%. Metrics & Scoring Committee consensus.

2018 Benchmark: 50%. Metrics & Scoring Committee consensus.

2018 Improvement Targets: Minnesota method with 3 percentage point floor.

Incentive Measure changes in specifications from 2017 to 2018:

- Modified the incentive measure age range from 18 – 50 years old, to 15 – 50 years old.
- Women who have had tubal ligation (Female Sterilization category numerator codes) are now counted as permanent numerator hits for the CCO that they are continuously enrolled with during the measurement year.
- Moved the ‘pregnancy non-compliant exclusion’ to the ‘denominator exclusion’ section; also modified to only use the HEDIS 2018 Pregnancy Value Set (with the updates in HEDIS 2018, Pregnancy Diagnosis Value Set is now a complete subset of Pregnancy Value Set; no additional codes are identified in the Pregnancy Diagnosis Value Set, so there is no need for using the ‘union’ of two value sets).

Member type: CCO A CCO B CCO G

Specify claims used in the calculation:

| ECU | Claim from matching CCO | Denied claims included |
|-----------------------|-------------------------|------------------------|
| Denominator exclusion | N | Y |
| Numerator event | N | Y |

Measure Details

Data elements required denominator: All women ages 15-50 as of December 31 of the measurement year who were continuously enrolled in a CCO for the 12-month measurement period.

Note: OHA will also be measuring and reporting on adolescent and adult women separately, by ages 15-17 and ages 18-50. *The all-age rate (age 15-50) will be tied to the CCO’s incentive payment.*

Required exclusions for denominator: Remove from the denominator any women with history through December 31 of the measurement year for the following:

| Denominator Exclusion | ICD-9 Diagnosis Codes | ICD-9 Procedure Codes | ICD-10 Diagnosis Codes | ICD-10 Procedure Codes | CPT/HCPCS |
|--|------------------------------|--|-------------------------------|---|---|
| Hysterectomy | V45.77, V88.01, V88.02 | 68.31, 68.39, 68.41, 68.49, 68.51, 68.59, 68.61, 68.69, 68.71, 68.79, 68.9 | N99.3, Z90.710, Z90.711 | (conversions of the ICD-9 procedure codes are included in the two categories below) | 51925, 58150, 58152, 58180, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290, 58291-58294, 58541-58544, 58548, 58550, 58552-58554, 58570-58573, 58943, 58950- 58954, 58956-58958, 58960, 59135, 59525 |
| Bilateral oophorectomy | | 65.51, 65.52, 65.53, 65.54 | | OUT00ZZ, OUT04ZZ, OUT08ZZ, OUT0FZZ, OUT10ZZ, OUT14ZZ, OUT17ZZ, OUT18ZZ, OUT1FZZ, OUT20ZZ, OUT24ZZ, OUT27ZZ, OUT28ZZ, OUT2FZZ | 58700, 58720, 58940 |
| Other female reproductive system removal, destruction, resection related to hysterectomy | | 66.31, 66.32, 66.39, 66.51, 66.52 | Z90.722 | 0U520ZZ, 0U523ZZ, 0U524ZZ, 0U570ZZ, 0U573ZZ, 0U577ZZ, 0UB20ZZ, 0UB23ZZ, 0UB24ZZ, 0UB27ZZ, 0UB28ZZ, 0UB70ZZ, 0UB73ZZ, 0UB74ZZ, 0UB77ZZ, 0UB78ZZ, 0UL70CZ, 0UL70DZ, 0UL70ZZ, 0UL73CZ, 0UL73DZ, 0UL73ZZ, 0UL77DZ, 0UL77ZZ, 0UT07ZZ, 0UT40ZZ, 0UT44ZZ, 0UT47ZZ, 0UT48ZZ, 0UT70ZZ, 0UT74ZZ, 0UT77ZZ, 0UT78ZZ, 0UT7FZZ, 0UT90ZZ, 0UT94ZZ, 0UT97ZZ, 0UT98ZZ, 0UT9FZZ | |

| Denominator Exclusion | ICD-9 Diagnosis Codes | ICD-9 Procedure Codes | ICD-10 Diagnosis Codes | ICD-10 Procedure Codes | CPT/HCPCS |
|--|--|-----------------------|---|------------------------|-----------|
| Natural menopause | 627.0-627.9, V49.81 | | N92.4, N95.0, N95.1, N95.2, N95.8, N95.9, Z78.0 | | |
| Premature menopause due to survey, radiation, or other factors | 256.1, 256.2, 256.31, 256.39, 256.8 | | E28.310, E28.319, E28.39, E28.8, E28.9, E89.40, E89.41, N98.1 | | |
| Congenital anomalies of female genital organs | 752.0, 752.31, 752.49 | | Q50.02, Q51.0 | | |
| Female infertility | 628.0, 628.2, 628.3, 628.4, 628.8, 628.9 | | N97.0, N97.1, N97.2, N97.8, N97.9 | | |

Note: existence of any of these codes “count” independently; they do not need to be used in combination for exclusion. The denominator exclusion criteria utilize all historical claims in OHA’s system (which dates back to 2002). That is, providers do not need to document evidence of exclusions every measurement year, as long as there is existing Medicaid claims history with evidence of the exclusion. OHA compiles an ‘ECU permanent exclusion table’ using all OHP claims, and apply exclusions to CCOs in rolling reports. If CCOs identify additional members who qualify for the permanent exclusion, from non-OHP claims, EHR, or other sources, OHA accepts submission for supplemental information to exclude members from the measure. The template, evidence requirement and submission timeline will be available on <http://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Baseline-Data.aspx>

Among women in the denominator who were *not numerator compliant*, exclude those with a pregnancy claim from the measurement year.

| ICD-9 Diagnosis | ICD-10 Diagnosis | CPT |
|---|---|--|
| See HEDIS 2018 Pregnancy Value Set (total of 1,136 ICD-9 diagnosis codes) | See HEDIS 2018 Pregnancy Value Set (total of 2,243 ICD-10 diagnosis codes) | 59400, 59409, 59410, 59510, 59514, 59515, 59610, 59612, 59614, 59618, 59620, 59622, 59425, 59426 |

Data elements required numerator:

Women in the denominator with evidence of **female sterilization anytime throughout the claims history in OHA's system**, or one of the following methods of contraception during the measurement year: IUD, implant, contraception injection, contraceptive pills, patch, ring, or diaphragm using the following Numerator Code Table, and the National Drug Codes (NDC) table (posted online separately):

| Numerator | ICD-9 Diagnosis Codes | ICD-9 Procedure Codes | ICD-10 Diagnosis Codes | ICD-10 Procedure Codes | CPT/HCPCS |
|--|--|-----------------------|---|---|---|
| Female Sterilization (permanent numerator hits) | V25.2, V26.51 | 66.2x | Z30.2, Z98.51 | 0U574ZZ, 0U578ZZ, 0UL74CZ, 0UL74DZ, 0UL74ZZ, 0UL78DZ, 0UL78ZZ | 58340, 58565, 58600, 58605, 58611, 58615, 58670, 58671, 74740, A4264 |
| Intrauterine Device (IUD/IUS) | 996.32, 996.65, V25.11, V25.13, V25.42, V45.51 | 69.7 | T83.31xA, T83.32xA, T83.39xA, T83.59xA, T83.69xA, Z30.014, Z30.430, Z30.431, Z30.433, Z97.5 | 0UH97HZ, 0UH98HZ, 0UHC7HZ, 0UHC8HZ | 58300, J7300, J7301, J7302 , J7297, J7298, Q0090, S4981, S4989 |
| Hormonal Implant | 996.30, V25.43, V25.5, V45.52 | | Z30.016, Z30.017 | | 11981, 11983, J7306, J7307 |
| Injectable (1-month/ 3-month) | | | Z30.013 | | J1050, J1051, J1055, J1056 |
| Oral Contraceptive Pills | V25.01, V25.41 | | Z30.011 | | S4993 |
| Patch | | | Z79.3 | | J7304 |
| Vaginal Ring | | | Z30.015 | | J7303 |
| Diaphragm | | | | | 57170, A4266 |
| Surveillance of a contraceptive method | | | Z30.41, Z30.42, Z30.44, Z30.45, Z30.46, Z30.49 | | |
| Unspecified Contraception | V25.02, V25.40, V25.49, V25.9, V45.59 | | Z30.018, Z30.019, Z30.40, Z30.8, Z30.9 | | |

Notes:

- Women who had claims indicating female sterilization would count as a numerator hit in the measurement year, as well as the subsequent years. OHA will compile a 'female sterilization permanent numerator table' using all the OHP claims history (which dates back to 2002), and give numerator credits to the CCO that the member is continuously enrolled with during the measurement year.
- The rest of the numerator categories are identified using claims only during the measurement year; no look back periods are applied. However, a number of surveillance codes are included in the specifications to account for women utilizing long-acting reversible contraception or permanent contraceptive options who would not otherwise have a pharmacy claim or procedure code during the 12-month measurement period.
- The surveillance and diagnosis codes listed in the Numerator Code Table do not need to be primary diagnoses; they can be in any position on the claim for credit toward this measure.
- The use of any of the codes "count" independently; codes do not have to be used in combination (e.g., CPT and NDC) for inclusion in the numerator.
- The Numerator Code Table includes some expired codes (e.g., J1051, code expired 2013). These codes are included in case they are still in use anywhere in Oregon; however, they may be removed from the measure specifications in future years and providers should only utilize current codes. This also applies for ICD-9 codes listed in the specifications.
- National Drug Codes (NDC) included in the measure are based on Therapeutic Classes 36 and 63. See ECU NDC Code Table posted separately online for additional details. NDCs are reviewed annually for potential updates and may be refreshed prior to final calculation for a measurement year to ensure most accurate results. Note the NDC code table has not yet been updated for 2018.

Required exclusions for numerator: N/A. Please see denominator exclusions for women who are not numerator compliant, but had a pregnancy claim in the measurement year.

What are the continuous enrollment criteria: the 12-month measurement period.

What are allowable gaps in enrollment: No more than one gap in enrollment of up to 45 days during the measurement period.

Define Anchor Date (if applicable): December 31st of the measurement year.