Chlamydia Screening in Women

**Metric Information**

**Metric description:** The percentage of female Medicaid beneficiaries, 16–24 years of age identified as sexually active and who had at least one test for chlamydia during the measurement year.

**Metric specification version:** HEDIS®\(^1\) 2021 Technical Specifications for Health Plans, NCQA.

**Data collection method:** Administrative only.

**Data source:** ProviderOne Medicaid claims/encounter and enrollment data.

**Claim status:** Include only final paid claims or accepted encounters in metric calculation.

**Identification window:** Measurement year.

**Direction of quality improvement:** Higher is better.

**URL of specifications:** [www.ncqa.org/hedis/measures](http://www.ncqa.org/hedis/measures)

**DSRIP Program Summary**

**Metric utility:** ACH Project P4P ■ ACH High Performance □ DSRIP statewide accountability □

**ACH Project P4P – Metric results used for achievement value:** Single metric result.

**ACH Project P4P – improvement target methodology:** gap to goal.

**ACH Project P4P gap to goal - absolute benchmark value:**

<table>
<thead>
<tr>
<th></th>
<th>Value</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>DY 3/performance year 1 (2019)</td>
<td>71.5% 2017 NCQA Quality Compass National Medicaid, 90(^{th}) Percentile</td>
<td></td>
</tr>
<tr>
<td>DY 4/performance year 2 (2020)</td>
<td>71.33% 2018 NCQA Quality Compass National Medicaid, 90(^{th}) Percentile</td>
<td></td>
</tr>
<tr>
<td>DY 5/performance year 3 (2021)</td>
<td>71.42% 2019 NCQA Quality Compass National Medicaid, 90(^{th}) Percentile</td>
<td></td>
</tr>
</tbody>
</table>

**ACH regional attribution:** Residence in the ACH region for 11 out of 12 months in the measurement year.

**DSRIP Metric Details**

**Eligible Population**

| Age          | 16-24 years. Age is as of the last day of the measurement year. |

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\(^1\) The Healthcare Effectiveness Data and Information Set (HEDIS®) is a registered trademark of NCQA.
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<table>
<thead>
<tr>
<th>Gender</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum Medicaid enrollment</td>
<td>Measurement year. Continuous enrollment is required.</td>
</tr>
<tr>
<td>Allowable gap in Medicaid enrollment</td>
<td>One gap of one month during the measurement year.</td>
</tr>
<tr>
<td>Medicaid enrollment anchor date</td>
<td>Last day of measurement year.</td>
</tr>
<tr>
<td>Medicaid benefit and eligibility</td>
<td>Includes Medicaid beneficiaries with comprehensive medical benefits or family planning only benefits. Excludes beneficiaries that are eligible for both Medicare and Medicaid and beneficiaries with primary insurance other than Medicaid.</td>
</tr>
</tbody>
</table>

**Denominator:**

*Data elements required for denominator:* Sexually active females need to be identified for this metric. There are two methods to identify sexually active women: claim/encounter data and pharmacy data. Both methods are used to identify eligible female Medicaid beneficiaries; however, a beneficiary only needs to be identified in one method to be eligible for this metric.

**Required exclusions for denominator.**
- Eligible population exclusions are listed in the eligible population table above.
- Metric specific exclusions:
  - Beneficiaries in hospice care.
  - Excludes women identified as sexually active solely due to a pregnancy test and who had an x-ray or prescription for isotretinoin within seven days of the pregnancy test.

**Deviations from cited specifications for denominator.**
- HEDIS® specifications require no more than one gap in continuous enrollment of up to 45 days during each year of continuous enrollment. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, as is the case for the ProviderOne data source, the Medicaid beneficiary may not have more than a 1-month gap in coverage (i.e., a Medicaid beneficiary whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).

**Numerator:**

Beneficiaries must qualify for inclusion in the denominator to be eligible for inclusion in the numerator.

*Data elements required for numerator.* At least one chlamydia test during the measurement year.

**Required exclusions for numerator.**
- None

**Deviations from cited specifications for numerator.**
- None
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Version Control

July 2018 release: The specification was updated to HEDIS® 2018 specifications.

January 2019 update: Minor formatting updates were made to the metric specification sheet. This includes updating the URL of the source specification and changing HEDIS™ to HEDIS®. No substantive changes were made to the specification.

August 2019 update: The specification sheet has been updated to reflect the current version of the HEDIS® technical specification (from HEDIS® 2018 to HEDIS® 2019). No substantive changes were made to the DSRIP Metric Details. Note that while the names of the value sets included in the specifications have not changed, the underlying values may have been updated. See HEDIS® for specific instructions. DY 4/performance year 2 (2020) benchmark value(s) have been added to the DSRIP Program Summary section.

August 2020 update: The specification sheet has been updated to reflect the current version of the HEDIS® technical specification (from HEDIS® 2019 to HEDIS® 2020). No substantive changes were made to the DSRIP Metric Details. Note that while the names of the value sets included in the specifications have not changed, the underlying values may have been updated. See HEDIS® for specific instructions. DY 5/performance year 3 (2021) benchmark value(s) have been added to the DSRIP Program Summary section.

August 2021 update: The specification sheet has been updated to reflect the current version of the HEDIS® technical specification (from HEDIS® 2020 to HEDIS® 2021). Specification details are proprietary information and are available through NCQA HEDIS®.