

Contraceptive Care – Most and Moderately Effective Methods (LARC)

Metric Information

Metric description: The percentage of female Medicaid beneficiaries, 15 - 44 years of age, at risk of unintended pregnancy that are provided a long-acting reversible method of contraception (provision of contraceptive implants, intrauterine devices or systems [IUD/IUS]).

Metric specification version: U.S. Department of Health and Human Services, Office of Population Affairs 2019 Specifications (as included in the FY2020 Child and Adult Core Measure Sets)

Data collection method: Administrative only.

Data source: ProviderOne Medicaid claims/encounters 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: <https://www.hhs.gov/opa/performance-measures/index.html>

DSRIP Program Summary

Metric utility: ACH Project P4P ACH High Performance DSRIP statewide accountability

This is an information only metric.

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

DSRIP Metric Details

Eligible Population	
Age	15 – 44 years. Age is as of the last day of the measurement year.
Gender	Female.
Minimum Medicaid enrollment	Measurement year. Continuous enrollment is required.
Allowable gap in Medicaid enrollment	One gap of one month during the measurement year.
Medicaid enrollment anchor date	Last day of the measurement year. Must be enrolled on anchor date.
Medicaid benefit and eligibility	Includes Medicaid beneficiaries with comprehensive medical benefits or family planning medical benefits. Excludes beneficiaries

Contraceptive Care – Most and Moderately Effective Methods (LARC)

	that are eligible for both Medicare and Medicaid and beneficiaries with primary insurance other than Medicaid.
--	--

Denominator:

Data elements required for denominator: Female, Medicaid beneficiary, aged 15-44 as of the last day of the measurement year who are:

- Not pregnant at any point in the measurement year;
- Pregnant during the measurement year, but whose pregnancy ended in the first 10 months of the measurement year, since there would then be adequate time to provide contraception in the postpartum period; OR
- Pregnant during the measurement year but whose pregnancy ended in an ectopic pregnancy, stillbirth, miscarriage, or induced abortion.

Required exclusions for denominator.

- Eligible population exclusions are listed in the eligible population table above.
- Metric specific exclusions:
 - o Female, Medicaid beneficiaries, aged 15-44 as of the last day of the measurement year who are not at risk of unintended pregnancy because they:
 - Were infecund due to non-contraceptive reasons such as natural menopause or oophorectomy;
 - Had a live birth in the last two months of the measurement year because there may not have been an opportunity to provide them with contraception. A two month time period was selected because the American College of Obstetricians and Gynecologists recommends having a postpartum visit by six weeks. An additional two weeks were added to allow for reasonable delays in attending the postpartum visit;
 - Were still pregnant at the end of the year because they were pregnant but did not have a pregnancy outcome code indicating a live or non-live birth.

Deviations from cited specifications for denominator.

- None.

Numerator:

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

Data elements required for numerator.

- Female, Medicaid beneficiaries, aged 15-44 as of the last day of the measurement year who were provided an FDA-approved a long-acting reversible method of contraception (contraceptive implants, intrauterine devices or systems [IUD/IUS]) in the measurement year. Note: surveillance codes can no longer be used for numerator compliance.

Required exclusions for numerator.

- None.

Contraceptive Care – Most and Moderately Effective Methods (LARC)

Deviations from cited specifications for numerator.

- Generic Product Identifier used instead of NDC to identify the applicable NDCs for specific methods.
- For service dates as of July 2017, required FP modifier for 11981 and 11983 to verify contraceptive use per Washington State protocol.

Version Control

October 2018 Healthier Washington Dashboard release: The specification was updated to U.S. Department of Health and Human Services, Office of Population Affairs FY2018 specifications.

August 2019 update: The specification sheet has been updated to reflect the current version of the technical specification from the measure steward. Surveillance codes can no longer be used for numerator compliance.

August 2020 update: The specification sheet has been updated to reflect the current version of the technical specification from the measure steward. Additional numerator and denominator exclusions were specified. Note that while the names of the value sets included in the specifications have not changed, the underlying values may have been updated.