



New Hampshire Medicaid Care Management Quality Performance Report

NH MCM Quality Improvement Priority Update – SFY 2024

A Report Prepared by the Medicaid Quality Program
Division of Medicaid Services
New Hampshire Department of Health and Human Services

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*The Department of Health and Human Services' Mission is to join communities and families
in providing opportunities for citizens to achieve health and independence*

Results at a Glance September 1, 2019 – June 30, 2023 Priorities

In 2021, clinical leadership at the Department agreed upon 11 quality measures that should be considered Quality Improvement Priorities. The goal was to streamline quality activities to assure the selected performance measures would improve to exceed the 75th percentile of National Medicaid Health Plans.

The results below give a quick glance of New Hampshire Medicaid’s progress on the 11 quality measures.

Table 1: Quality Improvement Priorities

| | NH CY 2018 | NH CY 2019 | NH CY 2020 | NH CY 2021 | NH CY 2022 |
|---|--|--|--|------------|------------|
| Continuation of Follow-Up Care for Children Prescribed Attention Deficit/Hyperactivity Disorder Medications (ADD) | 57.3% | 52.3% | 53.6% | 46.5% | 48.9% |
| Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP) | 70.4% | 75.4% | 62.8% | 65.5% | 65.9% |
| Controlling High Blood Pressure Total (CBP) | 66.7% | 62.6% | 52.7% | 57.0% | 62.5% |
| Comprehensive Diabetic Care Control <8% (CDC) Hemoglobin A1c Control for Patients with Diabetes <8% (HBD)¹ | 54.4% | 52.2% | 42.8% | 45.7% | 50.1% |
| Chlamydia Screening in Women (CHL) | 46.5% | 50.1% | 46.5% | 48.3% | 48.6% |
| Immunizations for Adolescents Combination Without HPV (Combination 1) (IMA) | 78.0% | 78.2% | 74.3% | 72.2% | 71.9% |
| Immunizations for Adolescents Combination Including HPV (Combination 2) (IMA) | 33.1% | 33.1% | 31.4% | 29.7% | 29.2% |
| Pharmacotherapy for Opioid Use Disorder (POD) | N/A | 32.2% | 28.0% | 30.1% | 28.3% |
| Prenatal and Postpartum Care – Prenatal Care (PPC) | 82.1% | 87.6% | 77.1% | 82.1% | 81.9% |
| Timely Postpartum Care (PPC) | 61.9% | 79.2% | 73.1% | 79.0% | 80.6% |
| Weight Assessment and Counseling in Adolescents/Children - BMI (WCC) | 72.6% | 71.4% | 63.9% | 70.6% | 73.1% |
| Table Legend | | | | | |
| Performance below the 50 th Percentile | Performance below the 75 th Percentile but above the 50 th Percentile. | Improved performance from the prior year, but below the 75 th Percentile. | Performance equal to or above the 75 th Percentile. | | |

¹ Hemoglobin A1c Control for Patients with Diabetes <8% (HBD) is a new measure beginning in CY 2022, prior years it was contained within the CDC measure.

The table below represents NH Medicaid quality measures that are below the 50th Percentile of National Medicaid Health Plans. Lack of color coding indicates benchmark comparison data is not available for the year.

Table 2: All Measures With 2022 Rates below National 50th Percentile

| | NH CY 2018 | NH CY 2019 | NH CY 2020 | NH CY 2021 | NH CY 2022 |
|---|------------|------------|------------|------------|------------|
| Follow-Up Care for Children Prescribed ADHD Medication: Continuation and Maintenance Phase (ADD) | 57.4% | 52.3% | 53.6% | 46.5% | 48.9% |
| Asthma Medication Ratio – Total (AMR) | 66.7% | 65.0% | 60.8% | 61.3% | 63.1% |
| Metabolic Monitoring for Children and Adolescents on Antipsychotics – Blood Glucose and Cholesterol Testing Total (APM) | N/A | 35.0% | 30.3% | 35.1% | 32.1% |
| Cervical Cancer Screening (CCS) | 62.5% | 57.1% | 54.0% | 57.3% | 54.3% |
| Comprehensive Diabetic Care Control <8% (CDC) Hemoglobin A1c Control for Patients With Diabetes - HbA1c Control (<8%) (HBD)² | 54.4% | 52.2% | 42.8% | 45.7% | 50.1% |
| Chlamydia Screening in Women (CHL) | 46.5% | 50.1% | 46.5% | 48.3% | 48.6% |
| Risk of Continued Opioid Use >=15 Days (COU)* | 20.3% | 19.6% | 9.3% | 9.0% | 8.6% |
| Risk of Continued Opioid Use >=30 Days (COU)* | 11.2% | 12.5% | 4.7% | 4.8% | 3.7% |
| Eye Exam for Patients with Diabetes (EED) | N/A | N/A | N/A | N/A | 51.2% |
| Use of Opioids at High Dosage (HDO)* | 9.3% | 10.4% | 11.4% | 8.8% | 8.5% |
| Immunizations for Adolescents Combination Without HPV (Combination 1) (IMA) | 78.0% | 78.2% | 74.3% | 72.2% | 71.9% |
| Immunizations for Adolescents Combination Including HPV (Combination 2) (IMA) | 33.1% | 33.1% | 31.4% | 29.7% | 29.2% |
| Immunizations for Adolescents HPV (IMA) | 35.5% | 35.2% | 34% | 32.9% | 33.4% |
| Immunizations for Adolescents Meningococcal Vaccine (IMA) | 79.3% | 79.3% | 74.9% | 75.1% | 76.1% |
| Immunizations for Adolescents Tdap (IMA) | 91.5% | 90% | 86.3% | 83.5% | 82.7% |

² Hemoglobin A1c Control for Patients with Diabetes <8% (HBD) is a new measure beginning in CY 2022, prior years it was contained within the CDC measure.

*For this metric, a lower rate indicates better performance.

| | NH CY 2018 | NH CY 2019 | NH CY 2020 | NH CY 2021 | NH CY 2022 |
|--|--|--|--|------------|------------|
| Medical Assistance with Smoking and Tobacco Use Cessation – Advising Smokers to Quit (MSC) | 84.0% | 81.4% | 76.0% | 75.4% | 72.2% |
| Pharmacotherapy for Opioid Use Disorder (POD) | N/A | 32.2% | 28% | 30.1% | 28.3% |
| Prenatal and Postpartum Care – Timeliness of Prenatal Care (PPC) | 82.1% | 87.6% | 77.1% | 82.1% | 81.9% |
| Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD) | 69.0% | 68.4% | 59.6% | 65.2% | 63.0% |
| Statin Therapy for Patients With Diabetes - Received Statin Therapy (SPD) | 69.3% | 67.1% | 65.6% | 62.3% | 61.1% |
| Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD) | 80.5% | 82.7% | 76.1% | 77.0% | 76.3% |
| Use of Opioids From Multiple Providers - Multiple Pharmacies (UOP)* | 8.1% | 7.7% | 3.7% | 3.3% | 1.9% |
| Use of Opioids From Multiple Providers - Multiple Prescribers (UOP)* | 25.4% | 24.2% | 22.3% | 22.6% | 20.6% |
| Use of Opioids From Multiple Providers - Multiple Prescribers and Multiple Pharmacies (UOP)* | 6.4% | 6.1% | 2.3% | 2.6% | 1.4% |
| Weight Assessment and Counseling in Adolescents/Children - BMI (WCC) | 72.6% | 71.4% | 63.9% | 70.6% | 73.1% |
| Weight Assessment and Counseling in Adolescents/Children – Counseling for Physical Activity (WCC) | 67.8% | 66.2% | 60.3% | 64.6% | 65.5% |
| Table Legend | | | | | |
| Performance below the 50 th Percentile | Performance below the 75 th Percentile but above the 50 th Percentile. | Improved performance from the prior year, but below the 75 th Percentile. | Performance equal to or above the 75 th Percentile. | | |

*For this metric, a lower rate indicates better performance.