



## **Quality Improvement Strategy: Summary 2025 Submission (Marketplace)**

**Issuer Name:** Molina Healthcare of Washington

**QHPs to which this Quality Improvement Strategy (QIS) applies:**

- 84481WA0060001
- 84481WA0060002

**QIS Title:**

Improving Breast Cancer Screening (BCS), Cervical Cancer Screening (CCS). Note: Antidepressant Medication Management (AMM) measures were removed with final performance and learning reported for Measurement Year (MY) 2024 in accordance with the updated QIS requirements for Plan Year (PY) 2026.

**QIS Topic Area:**

Improve Health Outcomes  
Implement Wellness and Health Promotion Activities  
Reduce Health and Health Care Disparities

**QIS Description:**

Breast cancer and cervical cancer are leading causes of disability and death, disproportionately affect racial and ethnic minorities, and are prevalent among Marketplace enrollees. Interventions aimed at improvement require a multifaceted approach involving proactive care management, involvement of primary care providers (PCPs), and patient education. Engagement of PCPs is essential to providing members with exams, procedures and evidence-based patient education.

We plan to implement a multifaceted approach to achieve the goals of this QIS, including the use of member incentives to encourage completion of breast and cervical cancer screening to meet our goals of reaching the 2021 CMS QRS 75<sup>th</sup> percentile (71.73%) for BCS, and the 2022 CMS QRS 75<sup>th</sup> percentile for CCS-E (65.00%).

## **Rationale for QIS:**

This QIS is geared towards Marketplace members aged 21-74, with the objective of improving breast and cervical cancer screening rates. Approximately 42% of Molina Healthcare of Washington Marketplace enrollees fall into the parameters for this QIS. Lack of preventive health care screenings can result in short and long-term health complications. Undiagnosed or untreated breast and cervical cancer diagnoses lower life expectancy and impedes the quality of life. Preventive health care screenings for breast and cervical cancer can result in improved quality of life for our members and reduce medical costs and burden on the healthcare system.

Additionally, all WA QHP issuers must include Cervical Cancer Screening (NQF ID: 0032) as part of the National Quality Forum (NQF)-endorsed clinical measures in their QIS submission for 2025.

## **Activities that Will Be Conducted to Implement the QIS:**

- Promotion and utilization of incentive programs for members and providers
- Completion of organizational wide cultural competency and sensitivity training for Molina employees
- Preventive screening reminders when members call Member Contact Center
- Telephonic, text, secure Molina Member Portal messaging, email, and print mail outreach to educate members who just turned 40 on the importance of breast cancer screening, and to notify members missing preventive screenings
- Outreach calls to encourage completion of annual wellness visits
- Comprehensive women's health campaign to outreach members who are past due for women's health screenings
- MolinaHelpFinder.com for transportation and other resource assistance

## **QIS Goal 1:**

To improve the quality of care among Marketplace female enrollees ages 40-74 by increasing the percentage of enrollees who receive a mammogram to screen for breast cancer to achieve the 2021 CMS QRS 75<sup>th</sup> percentile (71.73%).

## **Measure(s) used to track progress of Goal 1:**

- HEDIS® Measure: Breast Cancer Screening (BCS-E)
- Denominator: Continuously enrolled Marketplace enrollees aged 40-74 years who were recommended for routine breast cancer screening and met the criteria for participation.
  - Note: Age ranges were updated from 50-74 to 40-74 to align with the BCS-E measure update for MY2025, as outlined by NCQA.

- Numerator: Continuously enrolled Marketplace enrollees ages 40-74 who had one or more mammograms to screen for breast cancer any time on or between
  - October 1, two years prior to the measurement year
  - December 31 of the measurement year

### **How measure reflects progress toward Goal 1:**

Monthly data will be collected for the HEDIS® breast cancer screening measure. This will allow monthly tracking of performance on the percentage of enrollees who have received a mammogram screening according to evidence-based guidelines and will be compared to the target goals. Baseline rates were set using final HEDIS® MY2022 results and Follow Up Rate was reported using HEDIS® MY2023 and HEDIS® MY2024. Interventions will be evaluated for effectiveness and adjusted as needed. Improvement in performance on this measure will ensure high quality of care for Marketplace enrollees.

### **QIS Goal 2 (if applicable):**

Improve the quality of care among Marketplace female enrollees ages 21-64 by increasing the percentage of eligible enrollees who receive a cervical cancer screening achieving the 2022 NCQA 75<sup>th</sup> percentile Commercial All-LOB percentile rate (65.00%) for this measure by project end. Achieving this goal will improve health outcomes by identifying abnormal cervical cell changes earlier so treatment can begin. Note: Beginning MY 2025, MHW transitioned to the CCS-E measure with the official retirement of the administrative and hybrid CCS measure.

### **Measure(s) used to track progress of Goal 2:**

- HEDIS® Measure: Cervical Cancer Screening (CCS-E)
- Denominator: Continuously enrolled Marketplace enrollees between the ages of 21-64 who were recommended for routine cervical cancer screenings, as of December 31 of the measurement year.
- Numerator: Continuously enrolled Marketplace enrollees ages 21-64 who received an appropriate cervical cancer screening (per current HEDIS® Technical Specifications)

### **How measure reflect progress toward Goal 2:**

Data for the HEDIS® CCS-E measure will be collected monthly to allow for continuous tracking of performance of the percentage of members who have received cervical cancer screening according to evidence-based guidelines as compared to target goals. Baseline rates were set using MY2021 Final IDSS rates and Follow Up Rate was reported using HEDIS® MY2024. We will continue to evaluate interventions for effectiveness and adjust as needed. Continued improvement in this measure will support the delivery of high-quality care to Marketplace enrollees.