

# **Consensus Core Set: Obstetrics and Gynecology**

The Core Quality Measures Collaborative (CQMC) core measure sets (core sets) are intended for use in value-based payment (VBP) programs and may also be used to drive improvement in high-priority areas. The core sets can be used in their entirety to holistically assess quality or can serve as a starting point when selecting measures to meet specific goals. The CQMC core sets are developed and maintained using a multistakeholder, consensus-based process and established <u>measure-selection principles</u>. Measure specifications and details are linked in the *CBE Number* column, and additional considerations for use are included in the *Notes* section of the table below.

### **Obstetrics and Gynecology Measures**

The CQMC core set measures focus on ambulatory care measures at the clinician-reporting level. The OB/GYN core set contains nine measures that have been tested for reliability and validity at the clinician- (individual or group/practice) reporting level. The remaining core set measures address important topics related to OB/GYN care, but they have not been tested at the clinician level of analysis. When using measures specified outside of the clinician level of analysis, core set users should ensure adequate measure denominator size based on their patient population.

Measure Topic	CBE Number	Measure	Steward	Level of Analysis	Notes
Prevention and Wellness	<u>0032</u> / <u>eCQM</u>	Cervical Cancer Screening	National Committee for Quality Assurance (NCQA)	Health Plan	eCQM available. * Telehealth eligible for CMS programs in 2024.
	<u>N/A</u>	Non-recommended Cervical Cancer Screening in Adolescent Females (MIPS ID 443)	NCQA	Clinician, Health Plan	-
	<u>2902</u>	Contraceptive Care – Postpartum	U.S. Office of Population Affairs	Clinician, Health Plan, Population: Regional and State	-
	<u>2904</u>	Contraceptive Care – Access to LARC	U.S. Office of Population Affairs	Clinician, Facility, Health Plan, Population: Regional and State	-

Measure Topic	CBE Number	Measure	Steward	Level of Analysis	Notes
Prevention and Wellness	<u>0033</u> / <u>eCQM</u>	Chlamydia Screening in Women (CHL)	NCQA	Health Plan	eCQM available. * Telehealth eligible for CMS programs in 2024.
	<u>2372</u> / <u>eCQM</u>	Breast Cancer Screening	NCQA	Health Plan, Integrated Health Delivery System	eCQM available.* Telehealth eligible.
	<u>N/A</u>	HIV Screening (MIPS ID 475)1	Centers for Disease Control and Prevention (CDC)	Clinician	eCQM available. * Telehealth eligible for CMS programs in 2024.
	<u>0418</u> / <u>0418e</u>	Preventative Care and Screening: Screening for Clinical Depression and Follow-Up Plan	Centers for Medicare & Medicaid Services (CMS)	Clinician	Endorsement removed fall of 2020. Developer plans to maintain measure independently. eCQM available. * Telehealth eligible for CMS programs in 2023. Stratification to focus on pregnant and postpartum women may be considered.
	<u>N/A</u>	Postpartum Depression Screening and Follow-Up (PDS)	NCQA	Health Plan	Telehealth eligible. eCQM available. * Measure use is encouraged where data collection is feasible.
	<u>3543</u>	Person-Centered Contraceptive Counseling (PCCC) Measure	University of California, San Francisco (UCSF)	Clinician, Facility	-
Maternal and Perinatal	<u>N/A</u>	Maternity Care: Postpartum Follow-Up and Care Coordination (MIPS ID 336)	CMS	Clinician	-
Health	<u>0470</u>	Incidence of Episiotomy	Christiana Care Health System	Facility	Inpatient measure.

Measure Topic	CBE Number	Measure	Steward	Level of Analysis	Notes
Maternal and Perinatal Health	<u>0469</u> / <u>0469e</u>	PC-01 Elective Delivery	The Joint Commission (TJC)	Facility, Other	eCQM available. * Inpatient measure. Recommend use of #0716, #0471/0471e, and #0469/0469e as a group.
	<u>0471/</u> 0471e	PC-02 Cesarean Section	TJC	Facility, Other	Inpatient measure. Recommend use of #0716, #0471/0471e, and #0469/0469e as a group.
	<u>0716</u>	Unexpected Complications in Term Newborns	California Maternal Quality Care Collaborative	Facility, Integrated Delivery System, Population: Regional and State	Inpatient measure. Recommend use of #0716, #0471/0471e, and #0469/0469e as a group.
	<u>3484</u>	Prenatal Immunization Status	NCQA	Health Plan	-
Other	<u>3475e</u>	Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture	CMS	Clinician	eCQM. Telehealth eligible for CMS programs in 2023.
	<u>N/A</u>	Proportion of Patients Sustaining a Bowel Injury at the Time of Any Pelvic Organ Prolapse Repair (MIPS ID 433)	American Urogynecologic Society (AUGS)	Clinician	-
	<u>N/A</u>	Maternal Morbidity	CMS	N/A	Structural measure.

\* Separate benchmarks should be used based on the reporting method.

This measure is a cross-cutting measure that may be highly relevant across multiple core sets.

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## **Gap Areas for Future Consideration and Measure Development**

#### Maternal Health Measures

- Maternal morbidity and mortality
- Time of decision for c-section and surgery start time (i.e., measurement of "decision to incision" start times)
- Behavioral health and substance use, including opioid use disorder screening, tobacco, smoking, and vaping measures for pregnant and/or postpartum women
- Comprehensive postpartum visits and postpartum follow-up/comprehensive reproductive care
- Patient education (e.g., encouraging vaccine uptake, early discussion of risks, benefits, and preferences for birth experience and delivery)
- Prevention (e.g., screening and follow-up for cardiovascular disease, obesity, Hepatitis C), especially during the first and second trimester of pregnancy
- Healthy lifestyle behaviors throughout reproductive years
- Pre-conception counseling to promote reproductive health
- Women's health across the lifespan, with a focus on menopause measures that could potentially be added to the core set
- Patient-reported outcomes and patient experience

### **Perinatal Measures**

- Decision-making measures for neonatal care
- Neonatal morbidity and mortality (e.g., appropriate care for infants with Apgar scores <7 at 5 minutes after birth)
- Postpartum visits within the American College of Obstetricians and Gynecologists' recommended timeframe of within 3 weeks of birth
- Impacts of decreasing access to perinatal care, with a focus on the disparities and health equity
- Given the potential impact of the changing reproductive health care access landscape on perinatal health care access, an assessment of
  maternity health care desserts including potential resulting health care disparities

# **Core Set Updates for 2023**

#### Added measure #0471e: PC-02 Cesarean Birth

This outcome measure assesses the number of nulliparous women with a term, singleton baby in a vertex position delivered by Cesarean birth. This measure could reduce burden and allow providers to pull data electronically rather than from charts or claims data. CBE#0469/0469e PC-01 Elective Delivery, CBE#0471 PC-02 Cesarean Birth, and CBE#0716 PC-06 Unexpected Complications in Term Newborns should be kept together because that approach gives the facility a more comprehensive approach to what their Cesarean rates are.