

# Memorandum

**To:** Gold Coast Health Plan Primary Care Providers

**From:** Kim Timmerman, MHA, CPHQ, Director of Quality Improvement  
Nancy R. Wharfield, M.D., Chief Medical Officer

**Re:** **Chlamydia Screening for Women 16-24 Years of Age**

**Date:** **August 27, 2019**

Chlamydia is the most commonly reported bacterial Sexually Transmitted Infection (STI) in the United States, according to the Centers for Disease Control and Prevention (CDC). Infection rates are highest in young women, yet many do not realize they are infected as chlamydia is often asymptomatic.

Untreated chlamydia in women can have long-term complications of infertility, chronic pelvic pain and life-threatening ectopic pregnancy. Chlamydia screening is one of the most valuable, yet underutilized, preventive services, according to a recent statement by the U.S. Preventative Services Task Force (USPTF).

Gold Coast Health Plan (GCHP) encourages Plan providers to implement clinical best practices to identify sexually active patients and perform chlamydia screenings at routine check-ups.

## **Managed Care Accountability Set (MCAS) Performance Measure: Chlamydia Screening in Women (CHL)**

In Measurement Year (MY) 2019, GCHP is required to report the Managed Care Accountability Set (MCAS) performance measure, Chlamydia Screening in Women (CHL), to the state Department of Health Care Services (DHCS).

The National Committee for Quality Assurance (NCQA) CHL performance measure looks at the percentage of women 16-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

## **MCAS CHL Performance Rate**

The rates below show how GCHP performed for the CHL measure in MY 2018 and where the Plan currently stands for MY 2019. Also displayed is the Minimum Performance Level (MPL) for MY 2018 – a benchmark enforced by DHCS at the 50<sup>th</sup> percentile – which wasn't met.



### Best Practices and Resources for Chlamydia Screening

The CDC emphasizes screening for chlamydia starts with providers engaging their patients in an appropriate, approachable dialogue about sexual health, including sexual history and the risk of STIs. Research conducted by the CDC found the following two concepts resonate with young women when discussing STI testing:

- 1) Using an emotional approach that engages women's values by making them think about their future, including the possibility of family and children.
- 2) Presenting the subject as a normal test that everyone needs.

In addition, the Family Planning National Training Center (FPNTC) provides language clinicians can use when talking with their patients.

- **AVOID:** Questions associated with assumptions, "Do you want / need to be screened?"
- **USE:** Normalizing and open-ended language such as, "What do you know about STIs?" and, "I talk to all of my patients about chlamydia screening. Preventive health is so important."

The following resources will help develop best practices for you and your staff:

- CDC:
  - [Tips for Developing Chlamydia Screening Messages and Materials for Young Women](#)
  - [Guide to Taking a Sexual History](#)
- Family Planning National Training Center:
  - [Discussion Guide: Using Normalizing and Opt-out Language Training Activity](#)
  - [PowerPoint – Using Normalizing and Opt-out Language for Chlamydia Screening](#)

### Contact

For more information on the CHL MCAS performance measure or if you and your clinic staff would like to discuss your individual clinic performance, contact the Quality Improvement Department at [QualityImprovement@goldchp.org](mailto:QualityImprovement@goldchp.org).