

Chlamydia Screening in Women

Blue Cross and Blue Shield of Illinois (BCBSIL) collects quality data from our providers to measure and improve the quality of care our members receive. Chlamydia screening in women (CHL) is one aspect of care we measure in our quality programs.*

What We Measure

We capture the percentage of women ages 16 to 24 years who were identified as sexually active and who had at least one test for chlamydia during the measurement year. Sexual activity is identified through pharmacy data and claim/encounter data.

CHL is a Healthcare Effectiveness Data and Information Set (HEDIS®) measure. See the **National Committee for Quality Assurance (NCQA) website** for more details.

Why It Matters

Chlamydia is the most commonly reported bacterial sexually transmitted disease (STD) in the United States. It occurs most often among adolescent and young adult women. Untreated chlamydia infections can lead to serious and irreversible complications, including pelvic inflammatory disease (PID), infertility and increased risk of becoming infected with HIV.

Screening is important, as approximately 75% of chlamydia infections in women and 95% of infections in men are asymptomatic. This results in delayed medical care and treatment. According to the National Commission on Prevention Priorities, if 90% of eligible young women were screened for chlamydia, 30,000 cases of PID could be prevented each year. Learn more from **NCQA**.

Eligible Population

Women ages 16 to 24 as of Dec. 31 of the measurement year are included in this measure.

Report two age groups (ages 16 to 20, and 21 to 24) and a total rate.

Exclusions: Members are excluded who:

- Have either of the following:
 - Evidence of a pregnancy test during the measurement year and a prescription for retinoids (Isotretinoin) on the date of the pregnancy test or 6 days after the pregnancy test
 - A pregnancy test and an X-ray on the date of the pregnancy test or 6 days after the pregnancy test
- Were in hospice care during the measurement year
- Used retinoid medications

Ways to Improve

- Consider the best practice of screening all women ages 16 to 24 with a urine test.
- Be aware that screenings should occur whether or not members have symptoms. Screenings may be performed at routine annual preventive visits and at acute care visits. They should occur at any visit where oral contraceptives, STDs or urinary symptoms are discussed.
- Remind members to come in for their routine yearly visit through emails, calls or other means.
- Have a lab available for testing or a follow-up plan when the member cannot give a sample in the office.

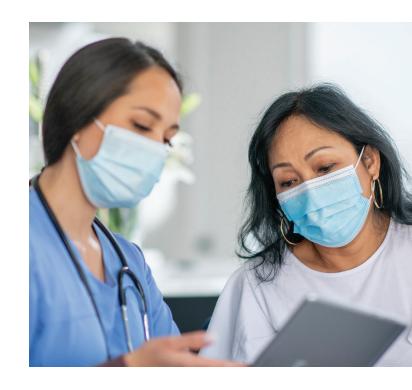
How to Document

CHL data is collected through claims data.

For more information, see NCQA's HEDIS Measures and Technical Resources.



Questions?Contact your BCBSIL Provider Network
Consultant.



* Quality measures evaluate a prior calendar year performance. Measure specifications are from the National Quality Forum (NQF) and/or National Committee for Quality Assurance (NCQA).

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