Provider Alert: 
Chlamydia Screening Rates Continue to Decline

As part of our 2016-2018 quality improvement initiative, we are working to improve 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 year. We need your help in this collaborative improvement effort. Between 2014 and 2015, the rate of compliant health plan members in this measure declined by nearly six percent.

The case for quality improvement:
- Chlamydia infection is extremely common. It is the leading preventable cause of infertility in the U.S. Regular screenings can prevent health risks that frequently occur among women with untreated chlamydia infections, such as pelvic inflammatory disease, infertility and ectopic pregnancy. (CDC)
- South Carolina ranks 5th highest in Chlamydia infection rates per 100,000 (CDC). Rates are highest among sexually active young females 15 to 19 years of age and those in their early 20s. (CDC)

Best practices on the path to chlamydia screening improvement:
- Normalize chlamydia screening: Making the screening a standard order at least once annually helps to remove the stigma and make the patient more at ease about screening. Add an alert to your EMR so that patients due for an annual screening are flagged. That reduces the possibility of a missed opportunity.
- Use urine-based screening. The availability and effectiveness of urine-based tests has made screening for chlamydia less invasive. This is a particularly good approach in pediatric practices where pelvic exams are not conducted.
- Use all medical visits, including well visits and sick visits as an opportunity to update needed screenings. Health plan data shows less than 52% of adolescents complete an annual well visit, it is important to use every opportunity to get patients up to date for age-appropriate screenings and vaccinations.
- Use your SC HEDIS dashboard and your health plan report card to identify a list of plan members who are in need of an annual chlamydia screening, see your current practice performance on chlamydia screening and other HEDIS measures, and develop goals for your offices. Reach out to your account executive for more information on these provider tools.
- Collaborate with us! Are you interested in block appointments or screening days with a focus on well visits, screenings, and/or immunizations? We’d love to work with you! Reach out to your account executive or email us at value@selecthealthofsc.com. We have a team of dedicated outreach specialists that could help with outreach, appointment coordination, and assisting with transportation. Need a list of members to begin your outreach, email use as value@selecthealthofsc.com. Requests sent to our value mailbox will be complete in 3-5 business days. You can always contact your account executive with questions or for additional information.

Improvement Resources:
- Chlamydia Performance Module (American Board of Pediatrics)  
  https://pim.abp.org/chlamydia/global/demo.php
- National Chlamydia Coalition:  http://ncc.prevent.org/providers
- Center for Disease Control, Chlamydia Screening Self Study:  http://www2a.cdc.gov/stdtraining/self-study/chlamydia/default.htm
- An Implementation Guide for Healthcare Providers:  

Our Efforts: Members who have been identified as needed an annual chlamydia screening and complete screening by December 31, 2016 are eligible for a $25 gift card. We are conducting outreach calls across the population to promote screening, as well as coordinate appointments and transportation for members who need
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assistance. Chlamydia screening education materials will be mailed to plan members, provided and available at all community events, and shared with key community organizations.