

Contraceptive Care – All Women Ages 15-44 (CCW)

Description of Measure

The Contraceptive Care – All Women measure (CCW) looks at women ages 15 to 44 at risk of unintended pregnancy, and among those, the percentage that:

- Were provided a most effective or moderately effective method of contraception.
- Were provided a long-acting reversible method of contraception (LARC)¹

Measure Compliance

The first rate is an intermediate outcome measure, and it is desirable to have a high percentage of women who are provided the most effective or moderately effective contraceptive methods. A state should exercise caution in using this measure for payment purposes, because performance on this measure is a function of a woman's preferences. The goal is to provide an indicator for states to assess the provision of most or moderately effective contraceptive methods within the state, and see where there is room for improvement. The second rate is an access measure, and the focus is on making sure that women have access to LARC methods.¹

Include women who:

- Not pregnant at any point in the measurement year.
- Pregnant during the measurement year but whose pregnancy ended in the first 10 months of the measurement year, since there was adequate time to provide contraception in the postpartum period. First 9 months of the year for ARHOME members
- Pregnant during the measurement year but whose pregnancy ended in an ectopic pregnancy, stillbirth, miscarriage, or induced abortion.

Exclusions

| Exclusions | <ul style="list-style-type: none">▪ Were infecund due to non-contraceptive reasons such as natural menopause or oophorectomy. To do this, use the codes listed in the Infecund table.▪ Had a live birth in the last 3 months of the measurement year because there may not have been an opportunity to provide them with contraception. A two-month period was selected because the American College of Obstetricians and Gynecologists (ACOG) recommends having a postpartum visit by 6 weeks, and an additional 2 weeks was added to allow for reasonable delays in attending the postpartum visit. To identify live births, use the codes listed in the Live birth table.▪ ARHOME members. "A 3-month period was selected because ACOG recommends having a postpartum visit by 12 weeks, and an additional 6 days was added to allow for reasonable delays in attending the postpartum visit."▪ Were still pregnant at the end of the year because they were pregnant (Pregnancy table) but did not have a pregnancy outcome code indicating a non-live birth (Nonlive_birth table) or a live birth (Live_birth table). |
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| Time limit | <ul style="list-style-type: none">▪ Any time during measurement year (MY) |

Strategies for Success

- Discuss with every woman of child-bearing age options for family planning.
- Patients can now receive oral contraception at a pharmacy for 6 months until a visit with a provider. Encourage patients to find a pharmacy that prescribes oral contraception using arkbluecross.com/pharmacy-search.

Resources

- I. <https://opa.hhs.gov/sites/default/files/2020-12/2019-measure-specifications-ccw-for-opa-website.pdf>



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