

**SUMMARY OF UPDATES TO THE CHILD CORE SET MEASURES  
2025 CORE SET TECHNICAL SPECIFICATIONS AND RESOURCE MANUAL  
MARCH 2025**

**Overall Changes**

- Updated the reporting year to 2025, and data collection timeframe to 2024.
- Updated specifications, value set codes, copyright, and table source information to HEDIS Measurement Year (MY) 2024 Vol. 2 for all HEDIS measures.
- Updated specifications, value set codes, and copyright information to correspond to calendar year 2024 for non-HEDIS measures.
- Added Electronic Clinical Data Systems (ECDS) technical specifications and guidelines to Chapter IV.
- For HEDIS measures, updated all exclusions to be required exclusions. Clarified that supplemental and medical record data can be used to identify all exclusions.
- For HEDIS measures, removed the Observation Value Set (and references to observation) from measures because codes in this value set were retired and replaced with codes that combine observation and hospital inpatient care.
- Added specifications for three new provisional measures (voluntary for 2025 reporting):
  - OEVP-CH: Oral Evaluation During Pregnancy: Ages 15 to 20
  - PDS-CH: Postpartum Depression Screening and Follow-Up: Under Age 21
  - PRS-CH: Prenatal Immunization Status: Under Age 21
- Retired one measure:
  - Measure AMB-CH: Ambulatory Care: Emergency Department (ED) Visits
- Removed one appendix:
  - Appendix A: Child Core Set HEDIS Value Set Directory User Manual
  - Renumbered appendices to correspond with the order cited in the Technical Specifications and Resource Manual.

**I. The Core Set of Children's Health Care Quality Measures**

- Inserted information about updates to the 2025 Child Core Set.

**II. Data Collection and Reporting of the Child Core Set**

- Updated the instructions for accessing the value set directories for HEDIS measures in the Child Core Set. The value sets and Value Set Directory User Manual are now accessed through the NCQA website (<https://store.ncqa.org/hedis-2025-child-core-set-hedis-value-set-directory-my-2024.html>).
- Clarified guidance related to beneficiaries with partial benefits:
  - For example, some states may only cover pregnancy-related services for beneficiaries enrolled in the “from conception to end of pregnancy” population in separate CHIP. These states will need to determine if the individuals in this program are eligible to

receive the services assessed in the measure to determine whether the individuals are eligible for each measure.

- Added additional guidance related to 2025 stratified reporting requirements, including the measures subject to mandatory stratified reporting and the stratification categories. More information about the stratification categories and guidance on reporting them to CMS is available at <https://www.medicaid.gov/medicaid/quality-of-care/downloads/QMR-stratification-resource.pdf>.
- Added Electronic Clinical Data Systems (ECDS) to the list of data collection methods:
  - The Electronic Clinical Data Systems (ECDS) method uses multiple data sources to provide complete information about the quality of health services delivered. Data systems that are eligible for HEDIS ECDS reporting include, but are not limited to, member eligibility files, electronic health records (EHRs), personal health records (PHRs), clinical registries, health information exchanges (HIEs), administrative claims systems, electronic laboratory reports (ELR), electronic pharmacy systems, immunization information systems (IIS) and disease/case management registries. Further information on the ECDS method can be found in the Guidelines for Measures Reported Using ECDS (Chapter IV). This data collection method applies to the following measures in the Child Core Set: ADD-CH, APM-CH, CIS-CH, IMA-CH, PDS-CH, and PRS-CH.
- Added guidance on reporting separate rates for Medicaid and CHIP populations.
  - Added reference to a technical assistance resource on reporting Medicaid and CHIP data in the Quality Measure Reporting system: <https://www.medicaid.gov/quality-of-care/downloads/QMRCoreSetCombinedRates.pdf>.
  - Added reference to a technical assistance resource on applying attribution guidance when calculating separate rates for Medicaid and CHIP populations: <https://www.medicaid.gov/medicaid/quality-of-care/downloads/core-set-medicaid-chip-attribution.pdf>.

### **III. Technical Specifications**

#### **Measure AAB-CH: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis: Ages 3 Months to 17 Years**

- Clarified that laboratory claims (claims with POS code 81) should not be included when testing for negative comorbid condition history (Step 3) and testing for negative competing diagnosis (Step 5).

#### **Measure AMR-CH: Asthma Medication Ratio: Ages 5 to 18**

- Clarified that laboratory claims (claims with POS code 81) should not be included when identifying beneficiaries with persistent asthma (Step 2) and when identifying beneficiaries who had a diagnosis that requires a different treatment approach than beneficiaries with asthma (required exclusion).
- Removed Telehealth Modifier Value Set and Telehealth POS Value Set references.
- Updated required exclusions to refer to ‘beneficiaries who had a diagnosis that requires a different treatment approach than beneficiaries with asthma’ rather than ‘beneficiaries who had any diagnosis from any of the following value sets.’ This change reflects consolidated value sets rather than a change to the exclusion criteria.

**Measure APP-CH: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics**

- Updated the required exclusion for identifying beneficiaries for whom first-line antipsychotic medications may be clinically appropriate. Also clarified that that laboratory claims (claims with POS code 81) should not be included for this exclusion.
- Added residential behavioral health treatment to the numerator criteria.

**Measure CDF-CH: Screening for Depression and Follow-up Plan: Ages 12 to 17**

- Removed the exclusion for beneficiaries with a depression diagnosis. Beneficiaries with a previous diagnosis of depression are now counted in the measure.

**Measure CHL-CH: Chlamydia Screening in Women Ages 16 to 20**

- Clarified that laboratory claims (claims with POS code 81) should not be included when identifying diagnoses of sexual activity.

**Measure CIS-CH: Childhood Immunization Status**

- Clarified that the measure is also now specified for the Electronic Clinical Data Systems (ECDS) methodology in addition to the Administrative and Hybrid methodologies. The ECDS specifications are included in Chapter IV. Administrative and Hybrid specifications are included in Chapter III.
- Clarified that laboratory claims (claims with POS code 81) should not be included when identifying beneficiaries with contraindications to a childhood vaccines (required exclusion) and when identifying history of illness for measles, mumps, rubella, hepatitis B, varicella zoster (chicken pox), and hepatitis A.

**Measure CPC-CH: CAHPS® Health Plan Survey 5.1H – Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items**

- Added required exclusion for beneficiaries who die any time during the measurement year.

**Measure DEV-CH: Developmental Screening in the First Three Years of Life**

- Clarified Guidance for Reporting about using modified 96110 claims:
  - If states have policies that clarify if modifiers are used with 96110 for other types of screening (e.g. Autism), then they should exclude claims with a modifier indicating that only a domain-specific screening occurred. Otherwise, all 96110 claims may be used.

**Measure FUA-CH: Follow-Up After Emergency Department Visit for Substance Use: Ages 13 to 17**

- Replaced Partial Hospitalization POS Value Set and Community Health Center POS Value Set with direct reference codes.
- Added the Substance Abuse Counseling and Surveillance Value Set to identify substance use disorder service criteria.

**Measure FUH-CH: Follow-Up After Hospitalization for Mental Illness: Ages 6 to 17**

- Replaced Partial Hospitalization POS Value Set, Community Mental Health Center POS Value Set, and Ambulatory Surgical Center POS Value Set with direct reference codes.

**Measure FUM-CH: Follow-Up After Emergency Department Visit for Mental Illness: Ages 6 to 17**

- Replaced Partial Hospitalization POS Value Set, Community Mental Health Center POS Value Set, and Ambulatory Surgical Center POS Value Set with direct reference codes.

**Measure IMA-CH: Immunizations for Adolescents**

- Clarified that the measure is also now specified for the Electronic Clinical Data Systems (ECDS) methodology, in addition to the Administrative and Hybrid methodologies. The ECDS specifications are included in Chapter IV. Administrative and Hybrid specifications are included in Chapter III.

**Measure LRCD-CH: Low-Risk Cesarean Delivery: Under Age 20**

- Updated measure name and description to clarify the measure now only includes births to mothers under age 20.
- Added Guidance for Reporting:
  - This measure is included in the Child Core Set for births to mothers under age 20 at the time of birth. This measure is included in the Adult Core Set for births to mothers age 20 and older at the time of birth.”
- Added “Age of Mother is less than 20 years” to numerator and denominator criteria.

**Measure LSC-CH: Lead Screening in Children**

- Clarified that “Unknown” is not considered a result/finding for medical record reporting.

**Measure OEV-CH: Oral Evaluation, Dental Services**

- Updated the age stratifications from 9 age stratifications and a total rate to 4 age stratifications and a total rate.
- Clarified that for 2025 Child Core Set reporting, the Total (< Age 21) stratification is required.

**Measure PPC2-CH: Prenatal and Postpartum Care: Under Age 21**

- Updated the event/diagnosis criteria to clarify which delivery is counted when there are multiple deliveries.
- Revised the numerator to clarify settings where CPT Category II code modifiers should not be used.
- Added ‘encounter for postpartum care’ to the criteria for meeting the postpartum care visit numerator. Clarified that that laboratory claims (claims with POS code 81) should not be included when identifying encounters for postpartum care.

**Measure SFM-CH: Sealant Receipt on Permanent First Molars**

- Updated the exclusions for beneficiaries that have any prosthodontic code to include an additional CDT code.

**Measure TFL-CH: Topical Fluoride for Children**

- Updated age stratifications to from 8 age stratifications and a total rate to 4 age stratifications and a total rate for each of the three rates: (1) Dental or oral health services; (2) Dental services; and (3) Oral health services.
- Clarified that for 2025 Child Core Set reporting, the Total (Ages 1 through 20) stratifications for each of the three rates are required.

**Measure W30-CH: Well-Child Visits in the First 30 Months of Life**

- Updated numerator criteria to include well-care visits and encounters for well-care. Clarified that that laboratory claims (claims with POS code 81) should not be included when identifying encounters for well-care.

**Measure WCC-CH: Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents**

- Clarified that that laboratory claims (claims with POS code 81) should not be included when identifying beneficiaries with a diagnosis of pregnancy (required exclusion) and when identifying BMI percentile documentation, counseling for nutrition, and counseling for physical activity (numerators).
- Updated numerator criteria for counseling for nutrition and counseling for physical activity.

**Measure WCV-CH: Child And Adolescent Well-Care Visits**

- Updated numerator criteria to include well-care visits and encounters for well-care. Clarified that that laboratory claims (claims with POS code 81) should not be included when identifying encounters for well-care.

**IV. Core Set Measures Reported Using Electronic Clinical Data Systems**

- Added reporting guidelines for Core Set measures reported using ECDS.
- The following measures previously included in the Child Core Set have only ECDS specifications starting with the 2025 Core Set: ADD-CH and APM-CH. States can also use electronic clinical quality measure (eCQM) specifications to report the ADD-CH measure.
- The following measures previously included in the Child Core Set have administrative and hybrid specifications (Chapter III) and ECDS specifications (Chapter IV) starting with the 2025 Core Set: CIS-CH and IMA-CH.
- The following new provisional measures which are voluntary for 2025 Child Core Set reporting only have ECDS specifications: PRS-CH and PDS-CH.

**Measure ADD-CH: Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication**

- Updated specification from Administrative methodology to Electronic Clinical Data Systems (ECDS) methodology. Note that the ECDS data collection method includes use of administrative data, such as claims and encounters.
- Added a laboratory claim exclusion (POS 81).

**Measure APM-CH: Metabolic Monitoring for Children and Adolescents on Antipsychotics**

- Updated specification from Administrative methodology to Electronic Clinical Data Systems (ECDS) methodology. Note that the ECDS data collection method includes use of administrative data, such as claims and encounters.
- Added a laboratory claim exclusion (POS 81).