

EQR Table 6. Primary Care Access and Preventive Care Performance Improvement Projects (PIPs) Included in External Quality Review (EQR) Technical Reports, 2024–2025 Reporting Cycle, by State and by Topic Area

Summary: This table shows Primary Care Access and Preventive Care PIP counts by state and by topic area.^a It also shows the populations included in each topic area's PIPs: adult (A), child (C), or unspecified (U). For purposes of this table, the term “child” includes adolescents. In the 2024–2025 reporting cycle, 26 states reported at least one PIP related to Primary Care Access and Preventive Care. The most common topics were: Well-Child Care (15 states reported at least one PIP focused on this topic), Immunizations (13 states), and Cancer Screening (9 states).

Topic Area	Total States Reporting PIPs	Total PIPs ^b	AR	AZ	CA	CO	DC	KY	LA	MA	MD	MI	MN	MS	NC	NH	NJ	NM	NV	PA	PR	RI	SC	TN	TX	WA	WI	WV
Total PIPs^b	26	256	1	14	22	8	1	6	13	2	9	1	16	5	13	3	16	3	8	8	4	23	5	9	43	9	6	8
Access to Care for Children in Foster Care ^c	2	2	-	-	-	-	-	-	C	-	-	-	-	-	-	-	-	-	-	-	-	-	C	-	-	-	-	-
Cancer Screening	9	27	-	A	A	-	-	A	A	A	-	-	-	-	-	-	-	-	-	-	-	A	-	-	A	A	A	-
EPSDT ^d	3	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	C	-	-	-	C	-	-	C	-	-	-	-
Immunizations ^e	13	80	C	-	-	-	-	-	A, C	-	A, C	-	A, C	-	C	A, C	C	-	-	-	-	A, C	C	C	C	-	C	C
Infant Well-Child Visits ^f	3	21	-	-	-	-	-	-	-	-	A, C	-	A, C	C	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Lead Screening	3	17	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	C	-	C	-	-	-	-	-	C
Primary Care Access ^g	5	20	-	-	-	-	-	-	-	-	-	A	-	-	A, C	-	A, C	-	A, C	-	-	-	A	-	-	-	-	-
SDOH ^h	5	27	-	-	C	A, C	-	-	-	-	-	A	-	-	-	-	-	-	-	-	-	-	-	A, C	-	-	A	-
Sexually Transmitted Diseases	2	5	-	-	-	-	-	-	-	-	-	-	C	-	-	-	-	-	-	-	-	-	-	C	-	-	-	-
Weight/BMI	5	30	-	-	-	-	C	-	-	-	-	-	-	C	-	-	-	A	-	-	-	-	-	-	C	-	-	A, C
Well-Child Care ^f	15	88	-	C	C	C	-	-	-	-	A, C	-	A, C	C	-	-	C	-	C	C	-	C	C	C	-	C	C	C
Other Primary Care Access and Preventive Care Topics Not Classified Elsewhere ^h	2	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	A	-	-	-	-	C	-	-	-	-	-	-

Acronyms: BMI = Body Mass Index; CMS = Centers for Medicare & Medicaid Services; EPSDT= Early and Periodic Screening, Diagnostic, and Treatment; EQR = External Quality Review; EQRO = External Quality Review Organization; GU = Guam; HPV = Human Papillomavirus; MCP = Managed Care Plan; PIP = Performance Improvement Project; PR = Puerto Rico; SDOH = Social Determinants of Health; USVI = United States Virgin Islands.

Source: EQR technical reports for the 2024–2025 reporting cycle. EQR technical reports must be publicly posted by April 30 of each year. Information about the EQR process is available at <https://www.medicare.gov/medicaid/quality-of-care/medicaid-managed-care-quality/quality-of-care-external-quality-review>.

Notes: The following four states did not post EQR technical reports for the 2024-2025 reporting cycle by the April 30 deadline: DE, ID, KS, and UT. DE posted its report in May 2025, and is included in this analysis; ID, KS, and UT are not included. OK began implementing its Medicaid managed care program in 2024; because its first EQR technical report reflected the implementation year, it did not include validated performance measure or performance improvement project data, and therefore does not appear in EQR Tables 3 through 10. During the 2024–2025 reporting cycle, the following eight states and territories did not contract with an MCP subject to EQR: AL, AK, CT, GU, ME, MT, SD, and USVI.

EQR technical reports must include information on the validation of PIPs required by the state that were underway during the preceding 12 months.

An “A,” “C,” or “U” indicates the populations included in the state's PIP in each topic; a dash (-) indicates that the state's MCPs did not conduct a PIP related to the topic. PIPs can focus on an adult (A) population, a child (C) population, or an adult and child population (A, C). For some PIPs, the population could not be determined and therefore is listed as unspecified (U) in the table above.

^a The requirements for states to mandate PIPs and have managed care execution of those mandates validated by an EQRO and reported to the state and CMS are detailed in 42 C.F.R. §§ 438.330, 438.358, and 438.364, respectively. PIP validation means that the EQRO assessed the PIP methodology; confirmed the accuracy of the MCP's reported results; and interpreted PIP results, noting whether the interventions are achieving improvement.

^b PIPs can focus on more than one topic area; thus, the PIPs listed in this table are not mutually exclusive. For example, a PIP focused on cervical cancer prevention could address sexually transmitted diseases and immunizations for adolescents and is counted once in the total PIP count, once in the “Sexually Transmitted Diseases” topic, and once in the “Immunizations” topic. In addition, more than

one MCP in a state may conduct a PIP related to each topic area. In this case, each PIP would be counted in the Total PIPs column but would only appear once in the state column if the PIPs focused on the same population.

^c The “Access to Care for Children in Foster Care” and “Primary Care Access” topics include PIPs focused on improving access to primary care services for their respective populations – children in foster care and the broader enrollee population. These efforts focus on reducing barriers to timely, continuous, and person-centered primary care coordination, expanding provider capacity, and embedding behavioral health and specialty services into primary care settings when appropriate.

^d The “EPSDT” topic includes PIPs that explicitly mention “EPSDT”, but excludes those focused on services covered under EPSDT (e.g., well-child care) that do not explicitly reference EPSDT.

^e The “Immunizations” topic includes PIPs focused on a range of ages and vaccines, including flu, meningococcal meningitis, tetanus, diphtheria, pertussis (whooping cough), and HPV. PIPs could focus on one or more vaccines or one or more age groups (adults, adolescents, children).

^f The “Infant Well-Child Visits” topic includes PIPs focused on infant care, while the “Well-Child Care” topic includes PIPs focused on care for children ages 3 and older. Some PIPs focused on well-child care for all age groups and appear under both topics.

^g The “SDOH” topic includes PIPs focused on addressing SDOH related to primary care access, such as addressing transportation barriers to improve access to well-child care visits.

^h The “Other Primary Care Access and Preventive Care Topics Not Classified Elsewhere” topic includes PIPs focused on primary care access and preventive care topics not specified above. For example, PIPs in this topic focused on improving access to telehealth for primary care and preventive care services (NJ), and increasing functional status assessments for older adults (RI).