

Table AMR-CH. Percentage of Children Ages 5 to 18 with Persistent Asthma who had a Ratio of Controller Medications to Total Asthma Medications of 0.50 or Greater, as Submitted by States for the FFY 2018 Child Core Set Report (n = 32 states)

State	Population	Methodology	Denominator			Rate		
			Ages 5-11	Ages 12-18	Total (Ages 5-18)	Ages 5-11	Ages 12-18	Total (Ages 5-18)
State Mean						71.3	63.2	67.7
State Median						73.0	63.8	69.6
Alabama	Medicaid only	Administrative	5,626	3,863	9,489	85.5	78.2	82.5
Alabama	CHIP only	Administrative	493	314	807	61.3	54.1	58.5
Alaska	Medicaid & CHIP	Administrative	1,079	901	1,980	59.3	54.2	57.0
Arkansas	Medicaid & CHIP	Administrative	4,109	2,761	6,870	70.9	64.8	68.5
California	Medicaid & CHIP	Administrative	36,867	25,392	62,259	68.0	61.6	65.4
Connecticut	Medicaid & CHIP	Administrative	5,361	3,584	8,945	71.9	68.2	70.4
Delaware	Medicaid & CHIP	Administrative	882	561	1,443	60.2	53.3	57.5
Dist. of Col.	Medicaid & CHIP	Administrative	1,150	630	1,780	57.8	56.7	57.4
Florida	Medicaid & CHIP	Administrative	16,399	9,505	25,904	74.5	64.1	70.7
Indiana	Medicaid & CHIP	Administrative	3,756	3,049	6,805	76.9	62.7	70.6
Iowa	Medicaid only	Administrative	2,714	2,219	4,933	18.2	26.6	22.0
Iowa	CHIP only	Administrative	331	263	594	13.3	25.5	18.7
Kansas	Medicaid & CHIP	Administrative	2,896	2,427	5,323	73.9	63.5	69.2
Kentucky	Medicaid & CHIP	Administrative	5,525	4,324	9,849	84.3	75.4	80.4
Louisiana	Medicaid & CHIP	Administrative	6,579	4,840	11,419	73.7	64.0	69.6
Massachusetts	Medicaid & CHIP	Administrative	4,929	3,373	8,302	66.7	60.8	64.3
Michigan	Medicaid only	Administrative	5,791	4,976	10,767	79.0	69.1	74.4
Mississippi	Medicaid only	Administrative	3,119	2,350	5,469	76.8	65.1	71.8
Mississippi	CHIP only	Administrative	262	257	519	89.7	78.2	84.0
New Hampshire	Medicaid & CHIP	Administrative	701	626	1,327	74.9	66.3	70.8
New Jersey	Medicaid & CHIP	Administrative	5,643	4,508	10,151	71.9	61.3	67.2
New Mexico	Medicaid & CHIP	Administrative	2,215	2,000	4,215	72.3	56.5	64.8
New York	Medicaid & CHIP	Administrative	20,847	14,792	35,639	66.5	59.7	63.6
North Carolina	Medicaid only	Administrative	13,574	9,551	23,125	67.1	59.7	64.0
North Carolina	CHIP only	Administrative	1,712	1,184	2,896	75.4	63.3	70.6
Ohio	Medicaid & CHIP	Administrative	10,140	7,610	17,750	76.5	67.4	72.6
Oklahoma	Medicaid & CHIP	Administrative	7,154	4,792	11,946	66.3	60.8	64.1
Pennsylvania	Medicaid only	Administrative	11,888	8,878	20,766	72.1	67.9	70.3
South Carolina	Medicaid & CHIP	Administrative	7,192	4,856	12,048	78.5	68.7	74.6
Tennessee	Medicaid only	Administrative	8,549	5,723	14,272	79.2	72.1	76.4
Tennessee	CHIP only	Administrative	564	509	1,073	70.9	65.6	68.4
Texas	Medicaid only	Administrative	28,854	19,404	48,258	64.0	54.6	60.2
Texas	CHIP only	Administrative	720	535	1,255	79.0	66.5	73.7
Utah	Medicaid only	Administrative	568	497	1,065	80.1	66.0	73.5
Utah	CHIP only	Administrative	45	37	82	88.9	67.6	79.3
Vermont	Medicaid & CHIP	Administrative	563	493	1,056	76.4	62.1	69.7
Virginia	Medicaid & CHIP	Administrative	NR	NR	NR	76.0	65.9	NR

Table AMR-CH (continued)

State	Population	Methodology	Denominator			Rate		
			Ages 5-11	Ages 12-18	Total (Ages 5-18)	Ages 5-11	Ages 12-18	Total (Ages 5-18)
Washington	Medicaid & CHIP	Administrative	3,205	2,942	6,147	65.5	55.6	60.8
West Virginia	CHIP only	Administrative	612	479	1,091	95.8	89.6	93.0

Source: Mathematica analysis of MACPro reports for the FFY 2018 reporting cycle. More information on the Child Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/child-core-set/index.html>.

Notes: This measure identifies the percentage of children ages 5 to 18 with persistent asthma who had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

The term "states" includes the 50 states and the District of Columbia.

Means are calculated as the unweighted average of all state rates. When a state reported separate rates for its Medicaid and CHIP populations, the mean and median rates were calculated using the rate for the larger measure-eligible population.

Unless otherwise specified, states used Child Core Set specifications, based on National Committee for Quality Assurance 2018 specifications.

Unless otherwise specified, the measurement period for this measure was January 1, 2016 to December 31, 2017. IA reported data for CY 2017.

The Child Core Set specifications include guidance for calculating this measure using the administrative method. Unless otherwise specified, the administrative data source is the state's MMIS and/or data submitted by managed care plans, including behavioral health plans.

Denominators are assumed to be the measure-eligible population for states using the administrative method. Some states reported exclusions from the denominator, as noted in the state-specific comments below.

ADHD = Attention-Deficit/Hyperactivity Disorder; CCO = Coordinated Care Organization; CHIP = Children's Health Insurance Program; CMS = Centers for Medicare & Medicaid Services; CPT = Current Procedural Terminology; CY = Calendar Year; ED = Emergency Department; EPSDT = Early and Periodic Screening, Diagnostic, and Treatment; EQRO = External Quality Review Organization; FFS = Fee for Service; FFY = Federal Fiscal Year; HEDIS = Healthcare Effectiveness Data and Information Set; HMO = Health Maintenance Organization; ICD = International Classification of Diseases; LOINC = Logical Observation Identifiers Names and Codes; MACPro = Medicaid and CHIP Program System; MCO = Managed Care Organization; MMIS = Medicaid Management Information System; NCQA = National Committee for Quality Assurance; NR = Not Reported; PCCM = Primary Care Case Management; PCP = Primary Care Practitioner.

State-Specific Comments:

AL: Medicaid rates include FFS and PCCM populations.

AL: CHIP rates include separate CHIP population. Rates exclude children enrolled in Medicaid-expansion CHIP; these children are included in the state's Medicaid rates.

AK: Rates include FFS population.

AR: Rates include FFS and PCCM populations. Rates were audited by the state's data contractor.

CA: Rates include FFS and managed care populations (26 MCOs).

CT: Rates include FFS population. Rates were audited by a certified HEDIS auditor.

DE: Rates include managed care population (1 MCO), representing 86 percent of the population. Rates exclude FFS population and enrollees in one MCO, representing 14 percent of the population.

DC: Rates include managed care population (3 MCOs), representing 66 percent of the population. Rates exclude FFS population and one MCO, representing 34 percent of the population. MCO rates were audited by certified HEDIS auditors.

FL: Rates include FFS, PCCM, and managed care populations (21 MCOs). MCO rates were audited by a certified HEDIS auditor.

IN: Rates include managed care population (3 MCOs), representing more than 90 percent of the population. Rates exclude FFS population, representing less than 10 percent of the population. MCO rates were audited by certified HEDIS auditors.

IA: Medicaid rates include FFS and managed care populations (3 MCOs).

Table AMR-CH (continued)

IA:	CHIP rates include managed care population (3 MCOs).
KS:	Rates include managed care population (3 MCOs).
KY:	Rates include managed care population (5 MCOs), representing 95 percent of the population. Rates exclude FFS population, representing 5 percent of the population. Rates were validated by certified HEDIS auditors.
LA:	Rates include FFS and managed care populations (5 MCOs).
MA:	Rates include PCCM and managed care populations (5 MCOs), representing 74 percent of the population. Rate excludes FFS population, representing 26 percent of the Medicaid population and 18 percent of the CHIP population, but the majority of these children would not have been measure-eligible, including children who have other primary insurance, children with limited Medicaid benefits, children in premium assistance programs, new enrollees who have not yet enrolled in an MCO, and children in state custody.
MI:	Rates include managed care population (11 MCOs), representing 80 percent of the population. Rates exclude FFS population, representing 20 percent of the population. MCO rates were validated by the state's EQRO.
MS:	Medicaid rates include managed care population (2 MCOs), representing 64 percent of the population. Rates exclude FFS population, representing 36 percent of the population.
MS:	CHIP rates include managed care population (1 MCO), representing 50 percent of the population.
NH:	Rates include managed care population (2 MCOs), representing 88 percent of the population. Rates exclude FFS population, representing 12 percent of the population. MCO rates were audited by certified HEDIS auditors.
NJ:	Rates include managed care population (5 MCOs), representing 93 percent of the population. Rates exclude FFS population, representing 7 percent of the population.
NM:	Rates include managed care population (4 MCOs). MCO rates were audited by certified HEDIS auditors.
NY:	Rates include managed care population (18 MCOs), representing more than 90 percent of the population. Rates exclude FFS population, representing less than 10 percent of the population. State conducted an internal validation of the data.
NC:	Medicaid rates include FFS and PCCM populations. Rates were validated by an NCQA-certified vendor.
NC:	CHIP rates include FFS and PCCM populations. Rates were validated by an NCQA-certified vendor.
OH:	Rates include managed care population (5 MCOs), representing 93 percent of the population. Rates exclude FFS population, representing 7 percent of the population.
OK:	Rates include FFS and PCCM populations. Rates exclude enrollees in home- and community-based services waivers.
PA:	Rates include managed care population (9 MCOs). Data were submitted by MCOs and compiled by the state's EQRO.
SC:	Rates include managed care population (5 MCOs).
TN:	Medicaid rates include managed care population (4 MCOs). Rates were validated by the state's EQRO.
TN:	CHIP rates include the CHIP Health Plan Administrators and Medical Benefits Managers population. Rates were validated by the state's EQRO.
TX:	Medicaid rates include FFS and managed care populations (34 MCOs). Rates were validated by the state's EQRO.
TX:	CHIP rates include managed care population (17 MCOs). Rates were validated by the state's EQRO.
UT:	Medicaid rates include managed care population (4 MCOs), representing 85 percent of the population. Rates exclude FFS population, representing 15 percent of the population. MCO rates were audited by certified HEDIS auditors.
UT:	CHIP rates include managed care population (2 MCOs). MCO rates were audited by certified HEDIS auditors.
VT:	Rates include statewide 1115 waiver population enrolled in a public non-risk prepaid inpatient health plan population, representing the total Medicaid population.
VA:	Rates include managed care population (6 MCOs). State obtained rates from the NCQA Quality Compass and denominators are not available. State is unable to report the Total rate for FFY 2018.
WA:	Rates include managed care population (5 MCOs), representing 97 percent of the population. Rates exclude FFS and PCCM populations, representing 3 percent of the population. Rates also exclude managed care populations who met the continuous eligibility requirement for Medicaid or CHIP but who were not enrolled in a single plan during the continuous enrollment period. Rates were audited by the state's EQRO.

Table AMR-CH (continued)

WV: Rates include FFS population.