

Technical Assistance Webinar to Support State Reporting of the Child, Adult, and Health Home Core Sets: 2025 Updates and Reporting Resources

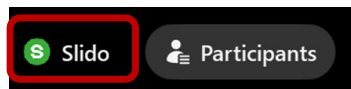
April 10, 2025

Presented by:

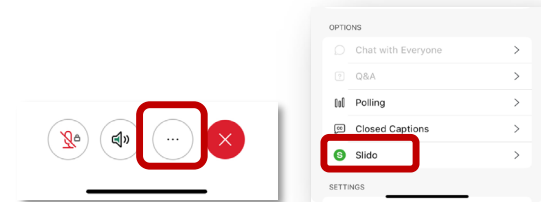
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Technical Instructions

- All participants are muted upon entry.
- You may submit questions through the **Slido Q&A** function. To access the Q&A, click the **Slido** panel in the lower right corner of your screen.



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- The meeting will be recorded and posted on Medicaid.gov after the webinar.
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Objectives

- Summarize key updates to the 2025 Child, Adult, and Health Home Core Sets
- Summary of key 2025 measure specification updates
- Review use of Digital Quality Measures for 2025 Core Sets reporting
- Review reporting of stratified data for 2025
- Review use of alternate data sources for 2025
- Describe 2025 data quality considerations
- Share technical assistance (TA) resources available to states
- Preview timeline for 2025 reporting

2025 Child, Adult, and Health Home Core Set Updates

Updates to the 2025 Child and Adult Core Sets

Core Set	Measures Added for Voluntary Reporting in 2025
Child	<ul style="list-style-type: none"> • Oral Evaluation During Pregnancy: Ages 15 to 20 (OEPV-CH)¹ • Postpartum Depression Screening and Follow-Up: Under Age 21 (PDS-CH)¹ • Prenatal Immunization Status: Under Age 21 (PRS-CH)¹
Adult	<ul style="list-style-type: none"> • Adult Immunization Status (AIS-AD) • Ambulatory Care Sensitive Emergency Department Visits for Non-Traumatic Dental Conditions in Adults (EDV-AD) • Low-Risk Cesarean Delivery: Age 20 and Older (LRCD-AD)² • Oral Evaluation During Pregnancy: Ages 21 to 44 (OEPV-AD) • Postpartum Depression Screening and Follow-Up: Age 21 and Older (PDS-AD)¹ • Prenatal Immunization Status: Age 21 and Older (PRS-AD)
Core Set	Measures Retired for 2025
Child	<ul style="list-style-type: none"> • Ambulatory Care: Emergency Department (ED) Visits (AMB-CH)
Adult	<ul style="list-style-type: none"> • No retired measures

¹ Provisional measures in the 2025 Core Set (voluntary for 2025 reporting).

² This measure is calculated by CMS on behalf of states. Starting with the 2025 Core Set, the Low-Risk Cesarean Delivery measure is included in both the Child and Adult Core Sets. For the Child Core Set, the measure is reported for beneficiaries under age 20. For the Adult Core Set, the measure is reported for beneficiaries age 20 and older.

Updates to the 2025 Child and Adult Core Sets were announced in a May 2024 State Health Official letter, available at <https://www.medicaid.gov/federal-policy-guidance/downloads/sho24001.pdf>.

Updates to the 2025 1945 and 1945A Health Home Core Sets

Core Set	Measures Added for 2025
1945 Health Home	<ul style="list-style-type: none">No added measures
1945A Health Home	<ul style="list-style-type: none">No added measures
Core Set	Measures Retired for 2025
1945 Health Home	<ul style="list-style-type: none">Ambulatory Care: Emergency Department (ED) Visits (AMB-HH)Prevention Quality Indicator (PQI) 92: Chronic Care Composite (PQI92-HH)
1945A Health Home	<ul style="list-style-type: none">Ambulatory Care: Emergency Department (ED) Visits (AMB-HHA)

Guidance related to the 2025 1945 and 1945A Health Home Core Sets was announced in a March 2024 State Medicaid Director Letter, available at <https://www.medicaid.gov/federal-policy-guidance/downloads/smd24002.pdf>.

Summary of Key 2025 Core Set Measure Specification Updates

Data Collection and Reporting Updates

- Updated the instructions for accessing the value set directories for measures based on HEDIS specifications in the Child, Adult, and Health Home Core Sets.
 - The value sets and Value Set Directory User Manual are now accessed through the NCQA website, free of charge: <https://store.ncqa.org/hedis-quality-measurement/hedis-my-2024-publications/2025-core-set-vsds.html>.
- Clarified guidance related to beneficiaries with partial benefits.
 - Added an example about assessing partial benefits for states that only cover the “from conception to end of pregnancy” population for separate CHIP.
- Added additional guidance related to 2025 stratified reporting, 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>.

Data Collection and Reporting Updates (cont.)

- For measures based on HEDIS specifications, updated all exclusions to be required exclusions. Supplemental and medical record data can be used to identify all exclusions.
- Added guidance on reporting separate rates for Medicaid and separate CHIP populations in the Child and Adult Core Sets.
 - 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>.
 - 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>.

Summary of Updates for 2025

- This section highlights key changes to 2025 technical specifications.
- More information is available in the Summary of Updates for each of the Core Sets:
 - Child Core Set: <https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-core-set-updates.pdf>.
 - Adult Core Set: <https://www.medicaid.gov/medicaid/quality-of-care/downloads/adult-core-set-updates.pdf>.
 - 1945 Health Home Core Set: <https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/1945-hh-change-summary-2025.pdf>.

Measure-specific Updates: Admission to a Facility from the Community (AIF-HH)

- Added “enrollee’s home” to the definition of community residence.
- Added a Look-back period definition.
- Added required exclusions, which consist of enrollees who resided in a facility for an entire month and enrollees who died.

Measure-specific Updates: Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH)

- Updated the required exclusion for identifying beneficiaries for whom first-line antipsychotic medications may be clinically appropriate.
- Added residential behavioral health treatment to the numerator criteria.

Measure-specific Updates: Screening for Depression and Follow-up Plan (CDF-CH/AD/HH)

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

Measure-specific Updates: Glycemic Status Assessment for Patients with Diabetes (GSD-AD)

- Updated the measure name.
- Added glucose management indicator as an option to meet numerator criteria.
- Updated the event/diagnosis criteria for identifying beneficiaries with diabetes.
- Revised the numerator to clarify settings where CPT Category II code modifiers should not be used.
- Clarified that “Unknown” is not considered a result/finding.

Measure-specific Updates: Diabetes Care for People with Serious Mental Illness: Glycemic Status > 9.0% (HPCMI-AD)

- Updated the measure name.
- Added glucose management indicator as an option to meet numerator criteria.

Measure-specific Updates: Oral Evaluation, Dental Services (OEV-CH)

- 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-specific Updates: Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD/HH)

- Changed the measure steward to the Substance Abuse and Mental Health Services Administration (SAMHSA).
- Updated the age range of beneficiaries from ages 18 to 64 to age 18 years and older.

Measure-specific Updates: Prenatal and Postpartum Care (PPC2-CH/AD)

- 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.

Measure-specific Updates: Topical Fluoride for Children (TFL-CH)

- Updated age stratifications 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) rate for each of the three rates are required.

Use of Digital Quality Measures in 2025 Core Sets Reporting

Digital Quality Measures in the Child, Adult, and Health Home Core Sets

- **The 2025 Child, Adult, and Health Home Core Sets include digital quality measures (dQMs), several of which are mandatory.**
- dQMs include measures with electronic clinical quality measure (eCQM) specifications. When eCQM specifications are available for a measure, the resource manuals include a link in the Guidance for Reporting section of the measure specification.
- dQMs also include measures with Electronic Clinical Data Systems (ECDS) specifications. Starting with 2025, the Core Set Resource Manuals include ECDS technical specifications and guidelines for Core Set reporting.
 - The ECDS data collection method uses multiple data sources to provide complete information about the quality of health services delivered. For example, ECDS data sources may include one or more of the following: eligibility files, electronic health records (EHRs), personal health records (PHRs), clinical registries, health information exchanges (HIEs), or administrative claims systems.
 - For the purposes of Core Set reporting, states will report overall results for ECDS measures, rather than by data source.
- **Coming Soon:** TA resource on reporting digital quality measures in the 2025 Child, Adult, and Health Home Core Sets.

Reporting Digital Quality Measures in QMR

- States that use **eCQM specifications** should indicate this by selecting “Electronic Health Records” in the Data Source section.
 - An optional free text field will appear where the state can provide any additional information about the data source.
- States that use the **ECDS specifications** should select “Electronic Clinical Data Systems” in the Data Source section. States will then be encouraged to select from a list of the specific data sources that they used to calculate the measure. States can select all that apply:
 - Electronic health record (EHR)/ personal health registry (PHR)
 - Health information exchange (HIE)/ clinical registry
 - Case management system
 - Administrative
 - An optional free text field will appear where the state can provide any additional information about their data sources.

Measures in the Child, Adult, and Health Home Core Sets that Include ECDS Specifications

Core Set	2025 Core Sets Measures with only ECDS specifications ^a
Child	Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-CH) (Mandatory)
	Postpartum Depression Screening and Follow-Up: Under Age 21 (PDS-CH)
	Prenatal Immunization Status: Under Age 21 (PRS-CH)
Adult	Postpartum Depression Screening and Follow-Up: Age 21 and Older (PDS-AD)
	New: Adult Immunization Status (AIS-AD)
	New: Prenatal Immunization Status: Age 21 and Older (PRS-AD)
	2025 Core Sets measures with administrative, hybrid, EHR, or ECDS specifications ^a
Child	Childhood Immunization Status (CIS-CH) (Mandatory)
Adult	Cervical Cancer Screening (CCS-AD)
	2025 Core Sets measures with ECDS or EHR specifications ^b
Child	Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH) (Mandatory)
Adult	Colorectal Cancer Screening (COL-AD)
	Breast Cancer Screening (BCS-AD)
1945 Health Home	Colorectal Cancer Screening (COL-HH) (Mandatory)
	2025 Core Sets measures with administrative, hybrid, ECDS specifications ^c
Child	Immunizations for Adolescents (IMA-CH) (Mandatory)

^a The 2025 1945 Health Home and 1945A Health Home Core Sets did not have any measures specifications for this category.

^b The 2025 1945A Health Home Core Set did not have any measures specifications for this category.

^c The 2025 Adult, 1945 Health Home and 1945A Health Home Core Sets did not have any measures specifications for this category.

Note: The CIS-HHA and IMA-HHA measures are also specified for ECDS reporting. However, ECDS specifications are not currently available for Health Home Core Set reporting.

Reporting Stratified Data for 2025 Core Set Reporting

Stratification for 2025 Core Set Reporting

- **REMINDER:** For 2025 Core Sets reporting, states must report stratified data for a subset of measures.¹
 - Child Core Set:
 - Well-Child Visits in the First 30 Months of Life (W30-CH)
 - Child and Adolescent Well-Care Visits (WCV-CH)
 - Oral Evaluation, Dental Services (OEV-CH)
 - Follow-Up After Hospitalization For Mental Illness: Ages 6 to 17 (FUH-CH)
 - Prenatal and Postpartum Care: Under Age 21 (PPC2-CH)
 - Live Births Weighting Less Than 2,500 Grams (LBW-CH)
 - CMS calculates on behalf of states
 - Low-Risk Caesarean Delivery: Under Age 20 (LRCD-CH)
 - CMS calculates on behalf of states
 - Adult Core Set:
 - Initiation and Engagement of Substance Use Disorder Treatment (IET-AD)
 - Follow-Up After Emergency Department Visit for Substance Use: Age 18 and Older (FUA-AD)
 - Follow-Up After Hospitalization for Mental Illness: Ages 18 and Older (FUH-AD)

¹ State Health Official Letter: <https://www.medicaid.gov/federal-policy-guidance/downloads/sho24001.pdf>.

Final Rule: <https://www.federalregister.gov/documents/2023/08/31/2023-18669/medicaid-program-and-chipmandatory-medicaid-and-childrens-health-insurance-program-chip-core-set>.

Stratification for 2025 Core Set Reporting (cont.)

- **REMINDER:** For 2025 Core Sets reporting, states must report stratified data for a subset of measures.¹
 - 1945 Health Home
 - Colorectal Cancer Screening (COL-HH)
 - Follow-Up After Hospitalization for Mental Illness (FUH-HH)
 - Controlling High Blood Pressure (CBP-HH)
 - 1945A Health Home
 - Child and Adolescent Well-Care Visits (WCV-HHA)
 - Oral Evaluation, Dental Services (OEV-HHA)

¹ State Medicaid Director Letter: <https://www.medicaid.gov/federal-policy-guidance/downloads/smd24002.pdf>.
Final Rule: <https://www.federalregister.gov/documents/2023/08/31/2023-18669/medicaid-program-and-chipmandatory-medicaid-and-childrens-health-insurance-program-chip-core-set>.

Stratification for 2025 Core Set Reporting (cont.)

- For 2025 Core Set Reporting, states can stratify race and ethnicity data using either of two reporting options:
 - (1) the 1997 Office of Management and Budget minimum race and ethnicity categories, as specified in the 2011 HHS standards; or
 - (2) the 2024 OMB Statistical Policy Directive No. 15 (Directive No. 15): Standards for Maintaining, Collecting, and Presenting Federal Data on Race and Ethnicity.¹
- **Now Available:** TA Resource on Reporting Stratified Results in the Quality Measure Reporting System for the 2025 Child, Adult, and Health Home Core Sets.
 - This TA resource provides additional guidance on stratification categories, including the two reporting options for Race/Ethnicity.
 - <https://www.medicaid.gov/medicaid/quality-of-care/downloads/QMR-stratification-resource.pdf>

¹ <https://www.medicaid.gov/federal-policy-guidance/downloads/sho24001.pdf> and <https://www.medicaid.gov/federal-policy-guidance/downloads/smd24002.pdf>.

QMR Stratification Categories for 2025 Reporting:

Race Categories Option 1:

1997 OMB Categories, as Specified in the 2011 HHS Standards

- Race¹:
 - American Indian or Alaska Native
 - Asian*
 - Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian, Add Another Sub-Category
 - Black or African American
 - Native Hawaiian or Other Pacific Islander*
 - Native Hawaiian, Guamanian or Chamorro, Samoan, Other Pacific Islander, Add Another Sub-Category
 - White
 - Two or More Races**
 - Some Other Race
 - Missing or Not Reported
 - Another Race

* For these categories, states have the option of reporting aggregate data (e.g., Asian) or disaggregated data (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian).

** States should collect race information in a disaggregated way. For example, an individual who identifies as being both "White" and "Asian" should be offered the option to select both response options rather than a single "two or more races" option. However, states may choose to later aggregate this information and code these individuals as "two or more races" for purposes of Core Set stratification.

¹ Defined using the disaggregation of the 1997 Office of Management and Budget (OMB) minimum race and ethnicity categories, as specified in the 2011 Health and Human Services (HHS) standards.

QMR Stratification Categories for 2025 Reporting:

Ethnicity Categories Option 1:

1997 OMB Categories, as Specified in the 2011 HHS Standards

- Ethnicity¹:
 - Not Hispanic, Latino/a, or Spanish origin
 - Hispanic, Latino/a, or Spanish origin*
 - Mexican, Mexican American, Chicano/a, Puerto Rican, Cuban, Another Hispanic, Latino/a, or Spanish origin, Add Another Sub-Category
 - Missing or Not Reported
 - Another Ethnicity

* For this category, states have the option of reporting aggregate data (e.g., Hispanic, Latino/a, or Spanish) or disaggregated data (e.g., Mexican, Mexican American, Chicano/a, Puerto Rican, Cuban, Another Hispanic, Latino/a, or Spanish origin).

¹ Defined using the disaggregation of the 1997 Office of Management and Budget (OMB) minimum race and ethnicity categories, as specified in the 2011 HHS standards.

QMR Stratification Categories for 2025 Reporting:

Race and Ethnicity Categories Option 2:

2024 OMB Statistical Policy Directive No. 15

- Race and ethnicity¹:
 - American Indian or Alaska Native alone or in combination*
 - Asian alone or in combination*
 - Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, Another group
 - Black or African American alone or in combination*
 - African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, Another group
 - Hispanic or Latino alone or in combination*
 - Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, Another group
 - Middle Eastern or North African alone or in combination*
 - Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, Another group
 - Native Hawaiian or Other Pacific Islander alone or in combination*
 - Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, Another group
 - White alone or in combination*
 - English, German, Irish, Italian, Polish, Scottish, Another group
 - Missing or Not Reported

* For race and ethnicity categories marked with an asterisk, states can choose to report aggregate data for the category or further stratify by subcategory.

¹ Defined using 2024 OMB Statistical Policy Directive No. 15: Standards for Maintaining, Collecting, and Presenting Federal Data on Race and Ethnicity.



QMR Stratification Categories for 2025 Reporting: Sex

- Sex¹:
 - Male
 - Female
 - Missing or Not Reported

¹ Note, that if a measure is only specified for female beneficiaries, there will not be a reporting option for sex stratification.

QMR Stratification Categories for 2025 Reporting: Geography

- Geography¹:
 - Urban
 - Rural
 - Add Another Geography*
 - Missing or Not Reported

* States can add additional geography categories but should give them a descriptive label, such as “Frontier.”

¹ Defined using a minimum standard of core-based statistical area (CBSA) with recommendation to move toward Rural-Urban Commuting Area (RUCA) codes.

Use of Alternate Data Sources for 2025 Core Sets Reporting

Alternate Data Source: AHRQ CAHPS Database CPC-CH, CPA-AD, and MSC-AD

- CMS is collaborating with the Agency for Healthcare Research and Quality (AHRQ) to use data from the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey Database to streamline reporting of the CPC-CH, CPA-AD, and MSC-AD measures.
- **CMS will use data from the AHRQ CAHPS Database for public reporting of Core Set measures.**
- All Medicaid and CHIP state agencies and health plans should submit CAHPS Health Plan Survey data to the 2025 AHRQ CAHPS Database in June 2025. This includes surveys administered between June 29, 2024 and June 27, 2025. These data correspond to the 2025 Core Set reporting cycle. States that cannot meet this deadline can report that they conducted a CAHPS survey for the Child and/or Adult Medicaid population for 2025 in the QMR system.
- In Spring 2026, states will receive a customized preview report showing the state-level results that were calculated for the state based on submissions to the AHRQ CAHPS Database prior to 2025 Core Set public reporting.
- Entities that submit data in the AHRQ CAHPS Database will be invited to approve the sharing of CAHPS data with CMS for the purpose of 2025 Core Set reporting.
- Fact Sheet on CAHPS Reporting Requirements and Data Submission:
<https://www.medicaid.gov/medicaid/quality-of-care/downloads/cahpsfactsheet.pdf>.
- For more information on the AHRQ CAHPS Database, please visit <https://www.ahrq.gov/cahps/cahps-database/index.html> or contact us at MAC-CAHPS-TA@mathematica-mpr.com.

Alternate Data Source: CDC WONDER LBW-CH and LRCD-CH/AD

- CMS will continue to calculate the Live Births Weighing Less than 2,500 Grams (LBW-CH) and Low-Risk Cesarean Delivery (LRCD-CH/AD) measures for all states using natality data submitted by states and compiled by the National Center for Health Statistics (NCHS) in the CDC's Wide-ranging Online Data for Epidemiologic Research (CDC WONDER).
- Starting with 2025 Core Set reporting, the LRCD measure is included in the Child Core Set for births to women under age 20 and in the Adult Core Set for women age 20 and older.
- In Spring 2026, CMS will send states a preview of the 2025 LBW-CH and LRCD-CH/AD measures prior to 2025 Core Set public reporting. The measures will be calculated using calendar year 2024 natality data.

Alternate Data Source: NCI National Team NCIIDD-AD

- The National Core Indicators (NCI®) – Intellectual and Developmental Disabilities (NCI-IDD®) provide information on beneficiaries' experience and self-reported outcomes of long-term services and supports for individuals with intellectual and developmental disabilities and their families.
- State agencies voluntarily submit the NCI-IDD In-Person Survey results to the NCI National Team using the Online Data Entry System (ODESA).
- State agencies that submit data in ODESA will be invited to approve the sharing of NCI-IDD In-Person Survey data with CMS for the purpose of 2025 Adult Core Set reporting.
- In Spring 2026, CMS will send states a preview of the NCI-IDD data prior to 2025 Core Set public reporting.

2025 Data Quality Considerations

Data Quality Considerations

- Overview of data quality considerations for 2025 Core Sets reporting:
 - Data completeness
 - Data accuracy
 - Data consistency
 - Data documentation
- Combined data quality checklist for the Child, Adult, and Health Home Core Sets can be found on Medicaid.gov.
 - <https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-adult-healthhomes-data-quality-checklist.pdf>

2025 Data Quality Considerations

- Ensure that measures included in multiple Core Sets are reported for all applicable Core Sets for the specified ages.
- Documentation of any variations from the Core Set specifications, including age groups, data sources, and methods.

2025 Data Quality Considerations (continued)

- Documentation of which populations and services are excluded from the measures:
 - Programs (Medicaid, Medicaid-expansion CHIP, separate CHIP)
 - Delivery systems (managed care, fee-for-service, PCCM)
 - Special populations (for example, dually eligible beneficiaries or individuals in foster care)
 - Health care settings (for example, services provided at federally-qualified health centers, rural health clinics, or Indian Health Service facilities)
- If your state did not include some measure-eligible populations, please select “No” to the question that asks: “Does this denominator represent your total measure-eligible population as defined by the technical specifications for this measure?”
 - Then please describe the missing population and the size of the excluded population in the provided fields.

2025 Data Quality Considerations:

Tips for Text Fields

- The QMR system includes text fields that are combined into “state-specific comments (SSC),” which accompany state rates in public reporting (including the Core Set Data Dashboard and Scorecard for applicable measures).
- Information in the following text fields are included in SSCs:
 - Data source descriptions
 - Descriptions of other populations and excluded populations
 - Variations
 - Additional notes/comments on measure
 - Other delivery systems
- Text fields that are used to create the SSCs are indicated in the QMR system with a note.
- Text entered in these fields should be concise and only include context that is necessary for understanding a state’s data.
- Use complete sentences; avoid using special formatting (bullets, tables).
- Additional information on how the SSCs are automated is available at <https://www.medicaid.gov/quality-of-care/downloads/QMRCoreSetReportingGuidance.pdf>.

Technical Assistance Resources

State Reporting Letters

- CMS will be sending out letters to each state in late Spring 2025 to identify any gaps in 2024 reporting and to support states in meeting 2025 mandatory reporting requirements.
- The letter will indicate whether the state met key mandatory reporting requirements, including whether the state reported all populations for mandatory measures.
- The letter will also include reminders and guidance about requirements for 2025 mandatory reporting.

Populations and Population Exemption Process

- States are required to report the mandatory measures for all Medicaid and CHIP beneficiaries unless exempted by CMS.
- The following populations, which were identified as exempt in the Initial Mandatory Core Set SHO Letter, will remain exempt from Child and Adult Core Set mandatory reporting for 2025 due to states' systematic challenges with data access:
 - Beneficiaries who have other insurance coverage as a primary payer before Medicaid or CHIP, including individuals dually eligible for Medicare and Medicaid.
 - Individuals whose Medicaid or CHIP coverage is limited to payment of liable third-party coverage premiums and/or cost sharing.
- A population exemption request is not required if the population is not eligible to receive services assessed in the measure.
 - 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.
- States can request a one-year exemption from reporting for specific populations for one or more Child and/or Adult Core Set measures.*
 - Exemption requests must come from the State Medicaid Director and provide a reasonable timeline of the actions underway to resolve the issue if applicable so that the population can be included in state reporting in future years.
 - 2025 Core Set population exemption requests are for one year and must be submitted no later than September 1, 2025.

* There are no population exemptions for Health Home Core Sets reporting



Resources for 2025 Child Core Set Reporting

Resource	Medicaid.gov Link
2025 Core Set Resource Pages	https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/child-core-set-reporting-resources/index.html
2025 Core Set Measure List	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2025-child-core-set.pdf
2025 Resource Manual and Technical Specifications*	https://www.medicaid.gov/medicaid/quality-of-care/downloads/medicaid-and-chip-child-core-set-manual.pdf
Summary of updates to the resource manual and technical specifications for 2025	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-core-set-updates.pdf
2025 Data Quality Checklist	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-adult-healthhomes-data-quality-checklist.pdf
2025 Measurement Period Table	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2025-child-core-set-measurement-periods.pdf

* Some users have reported difficulties opening the Resource Manuals in Chrome due to Chrome settings. If this occurs, CMS recommends trying another web browser.

Resources for 2025 Adult Core Set Reporting

Resource	Medicaid.gov Link
2025 Core Set Resource Pages	https://www.medicaid.gov/medicaid/quality-of-care/quality-of-care-performance-measurement/adult-and-child-health-care-quality-measures/adult-core-set-reporting-resources/index.html
2025 Core Set Measure List	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2025-adult-core-set.pdf
2025 Resource Manual and Technical Specifications*	https://www.medicaid.gov/medicaid/quality-of-care/downloads/medicaid-adult-core-set-manual.pdf
Summary of updates to the resource manual and technical specifications for 2025	https://www.medicaid.gov/medicaid/quality-of-care/downloads/adult-core-set-updates.pdf
2025 Data Quality Checklist	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-adult-healthhomes-data-quality-checklist.pdf
2025 Measurement Period Table	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2025-adult-core-set-measurement-periods.pdf

* Some users have reported difficulties opening the Resource Manuals in Chrome due to Chrome settings. If this occurs, CMS recommends trying another web browser.

Resources for 2025

1945 Health Home Core Set Reporting

Resource	Medicaid.gov Link
2025 1945 Health Home Core Set Resource Pages	https://www.medicaid.gov/resources-for-states/medicaid-state-technical-assistance/health-home-information-resource-center/health-home-quality-reporting/index.html
2025 1945 Health Home Core Set Measure List	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2025-1945-health-home-core-set.pdf
2025 1945 Health Home Resource Manual and Technical Specifications*	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/2025-1945-HH-Core-Set-Manual.pdf
Summary of updates to the resource manual and technical specifications for 2025	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/1945-hh-change-summary-2025.pdf
2025 Data Quality Checklist	https://www.medicaid.gov/medicaid/quality-of-care/downloads/child-adult-healthhomes-data-quality-checklist.pdf
2025 1945 Health Home Measurement Period Table	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/1945-hh-core-set-measurement-period-table-2025.pdf
2025 1945 Health Home Health Home Expected Reporting Table	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/1945-health-home-reporting-table.pdf

* Some users have reported difficulties opening the Resource Manuals in Chrome due to Chrome settings. If this occurs, CMS recommends trying another web browser.

Resources for 2025 1945A Health Home Core Set Reporting

Resource	Medicaid.gov Link
2025 1945A Health Home Core Set Measure List	https://www.medicaid.gov/medicaid/quality-of-care/downloads/2025-1945a-health-home-core-set.pdf
2025 1945A Health Home Resource Manual and Technical Specifications*	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/2025-1945A-HH-Core-Set-Manual.pdf
2025 1945A Health Home Measurement Period Table	https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/downloads/1945A-hh-core-set-measurement-period-table-2025.pdf

* Some users have reported difficulties opening the Resource Manuals in Chrome due to Chrome settings. If this occurs, CMS recommends trying another web browser.

Additional Resources for 2025 Child, Adult, and Health Home Core Set Reporting

Measure(s)	Resource
All	Updated: Calculating State-Level Rates Using Data from Multiple Reporting Units (https://www.medicaid.gov/medicaid/quality-of-care/downloads/state-level-rates-brief.pdf)
All	Updated: Allowance of Telehealth in the 2025 Child, Adult, and Health Home Core Set Measure Specifications (https://www.medicaid.gov/medicaid/quality-of-care/downloads/telehealth-ta-resource.pdf)
All	Updated: Reporting Stratified Results in the Quality Measure Reporting System for the 2025 Child, Adult, and Health Home Core Sets (https://www.medicaid.gov/medicaid/quality-of-care/downloads/QMR-stratification-resource.pdf)
All Child and Adult Measures	Updated: Measure-Specific Attribution Guidance for the 2025 Core Set Measures (https://www.medicaid.gov/medicaid/quality-of-care/downloads/Core-Set-Medicaid-CHIP-Attribution.pdf)
AIF-HH	Updated: Calculating the Admission to a Facility from the Community (AIF-HH) Measure in the Health Home Core Set
CPC-CH, CPA-AD, MSC-AD	Reminder: The CAHPS Health Plan Survey: Reporting Requirements and Data Submission for the Medicaid and the Children's Health Insurance Program (CHIP) Core Sets and State CHIP Annual Reporting https://www.medicaid.gov/medicaid/quality-of-care/downloads/cahpsfactsheet.pdf

Additional Resources for 2025 Child, Adult, and Health Home Core Set Reporting (continued)

Measure(s)	Resource
CCP-CH/AD, CCW-CH/AD	Coming soon: SAS code for calculating contraceptive care measures (https://opa.hhs.gov/claims-data-sas-program-instructions)
CPU-AD	Updated: Calculating the Long-Term Services and Supports Comprehensive Care Plan and Update (CPU-AD) Measure in the 2025 Adult Core Set (https://www.medicaid.gov/medicaid/quality-of-care/downloads/cpu-ta-resource.pdf)
OEV-CH/HHA, OEVP-CH/AD, TFL-CH, SFM-CH, EDV-AD	Updated: Overview of the Dental and Oral Health Services Measures in the 2025 Child, Adult, and 1945A Health Home Core Sets (https://www.medicaid.gov/quality-of-care/downloads/dentaloralhealth-ta-resource.pdf)
PCR-AD/HH	Updated: Calculating the Plan All-Cause Readmissions (PCR) Measure in the 2025 Adult and Health Home Core Sets (https://www.medicaid.gov/medicaid/quality-of-care/downloads/pcr-ta-resource.pdf)
PQI01-AD, PQI05-AD, PQI08-AD, PQI15-AD	Free software for calculating the PQI measures (http://www.qualityindicators.ahrq.gov/Software/Default.aspx) <i>Note that the PQI measures in the Adult Core Set are reported as a rate per 100,000 beneficiary/enrollee months (not per 100,000 beneficiaries/enrollees)</i>

Upcoming Technical Assistance (TA) for 2025 Core Sets Reporting

- One-on-one virtual TA on Core Sets reporting is available upon request from the TA mailbox: MACQualityTA@cms.hhs.gov.
- In Fall 2025, CMS will host a webinar on calculating and reporting the Core Set measures in the online reporting system.
- Stay tuned: Updates on additional webinars and TA resources will be announced through MACQualityTA@cms.hhs.gov.

Timeline for 2025 Reporting

- CMS will open reporting for the Child, Adult, and Health Home Core Sets for 2025 reporting in September 2025.
- CMS anticipates that Core Sets reporting for 2025 will close by December 31, 2025.

Q&A

To ask a question, please enter it into the **Slido Q&A** panel on the righthand side of the Webex platform.

Thank you for attending the webinar!

Appendix A: 2025 Core Set Measure Lists

2025 Child Core Set Measures

Measure Name	Measure Steward	Data Collection Method
Behavioral Health Care		
Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH)	NCQA	ECDS or EHR
Screening for Depression and Follow-Up Plan: Ages 12 to 17 (CDF-CH)	CMS	Administrative or EHR
Follow-Up After Hospitalization for Mental Illness: Ages 6 to 17 (FUH-CH)	NCQA	Administrative
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-CH)	NCQA	ECDS
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP-CH)	NCQA	Administrative
Follow-Up After Emergency Department Visit for Substance Use: Ages 13 to 17 (FUA-CH)	NCQA	Administrative
Follow-Up After Emergency Department Visit for Mental Illness: Ages 6 to 17 (FUM-CH)	NCQA	Administrative
Primary Care Access and Preventative Care		
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC-CH)	NCQA	Administrative, hybrid, or EHR
Chlamydia Screening in Women Ages 16 to 20 (CHL-CH)	NCQA	Administrative or EHR
Childhood Immunization Status (CIS-CH)	NCQA	Administrative, hybrid, ECDS, or EHR
Well-Child Visits in the First 30 Months of Life (W30-CH)	NCQA	Administrative
Immunizations for Adolescents (IMA-CH)	NCQA	Administrative, hybrid, or ECDS
Developmental Screening in the First Three Years of Life (DEV-CH)	OHSU	Administrative or hybrid
Child and Adolescent Well-Care Visits (WCV-CH)	NCQA	Administrative
Lead Screening in Children (LSC-CH)	NCQA	Administrative or hybrid

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2025 Child Core Set Measures (cont.)

Measure Name	Measure Steward	Data Collection Method
Maternal and Perinatal Health		
Live Births Weighing Less Than 2,500 Grams (LBW-CH)	CDC/NCHS	State vital records
Prenatal and Postpartum Care: Under Age 21 (PPC2-CH)	NCQA	Administrative or hybrid
Contraceptive Care – Postpartum Women Ages 15 to 20 (CCP-CH)	OPA	Administrative
Contraceptive Care – All Women Ages 15 to 20 (CCW-CH)	OPA	Administrative
Low-Risk Cesarean Delivery: Under Age 20 (LRCD-CH) ^a	CDC/NCHS	State vital records
Care of Acute and Chronic Conditions		
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis: Ages 3 Months to 17 Years (AAB-CH)	NCQA	Administrative
Asthma Medication Ratio: Ages 5 to 18 (AMR-CH)	NCQA	Administrative
Dental and Oral Health Services		
Oral Evaluation, Dental Services (OEV-CH)	DQA (ADA)	Administrative
Topical Fluoride for Children (TFL-CH)	DQA (ADA)	Administrative
Sealant Receipt on Permanent First Molars (SFM-CH)	DQA (ADA)	Administrative
Experience of Care		
Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey 5.1H – Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items (CPC-CH)	AHRQ	Survey

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2025 Child Core Set Measures (cont.)

Measure Name	Measure Steward	Data Collection Method
2025 Provisional Child Core Set Measures (Voluntary for 2025 Reporting)		
Postpartum Depression Screening and Follow-Up: Under Age 21 (PDS-CH)	NCQA	ECDS
Prenatal Immunization Status: Under Age 21 (PRS-CH)	NCQA	ECDS
Oral Evaluation During Pregnancy: Ages 15 to 20 (OEP-CH)	DQA (ADA)	Administrative

More information on Updates to the 2025 Child and Adult Core Health Care Quality Measurement Sets is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/childrens-health-care-quality-measures/index.html>. A resource that provides a history of the measures included in the Child and Adult Core Sets is available at <https://www.medicaid.gov/medicaid/quality-of-care/downloads/core-set-history-table.pdf>.

It is important to note that these measures reflect high quality comprehensive care provided across health care providers and settings. Domains are intended to categorize measure topic areas and are not intended to define the type of providers or the health care settings in which care is provided.

^a This measure is calculated by CMS on behalf of states. Starting with the 2025 Core Set, the Low-Risk Cesarean Delivery measure is included in both the Child and Adult Core Sets. For the Child Core Set, the measure is reported for beneficiaries under age 20. For the Adult Core Set, the measure is reported for beneficiaries age 20 and older.

AHRQ = Agency for Healthcare Research & Quality; CDC = Centers for Disease Control and Prevention; CHIP = Children's Health Insurance Program; CMS = Centers for Medicare & Medicaid Services; DQA (ADA) = Dental Quality Alliance (American Dental Association); ECDS = Electronic Clinical Data Systems; EHR = Electronic Health Record; NCHS = National Center for Health Statistics; NCQA = National Committee for Quality Assurance;; OHSU = Oregon Health and Science University; OPA = U.S. Office of Population Affairs.

2025 Adult Core Set Measures

2025 Mandatory Adult Core Set Measures

Measure Name	Measure Steward	Data Collection Method
Behavioral Health Care		
Initiation and Engagement of Substance Use Disorder Treatment (IET-AD)	NCQA	Administrative or EHR
Medical Assistance with Smoking and Tobacco Use Cessation (MSC-AD)	NCQA	Survey
Antidepressant Medication Management (AMM-AD)	NCQA	Administrative or EHR
Screening for Depression and Follow-Up Plan: Age 18 and Older (CDF-AD)	CMS	Administrative or EHR
Follow-Up After Hospitalization for Mental Illness: Age 18 and Older (FUH-AD)	NCQA	Administrative
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)	NCQA	Administrative
Diabetes Care for People with Serious Mental Illness: Glycemic Status > 9.0% (HPCMI-AD) ^a	NCQA	Administrative or hybrid
Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD)	SAMHSA	Administrative
Follow-Up After Emergency Department Visit for Substance Use: Age 18 and Older (FUA-AD)	NCQA	Administrative
Follow-Up After Emergency Department Visit for Mental Illness: Age 18 and Older (FUM-AD)	NCQA	Administrative
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA-AD)	NCQA	Administrative

2025 Voluntary Adult Core Set Measures

Measure Name	Measure Steward	Data Collection Method
Primary Care Access and Preventative Care		
Cervical Cancer Screening (CCS-AD)	NCQA	Administrative, hybrid, ECDS or EHR
Chlamydia Screening in Women Ages 21 to 24 (CHL-AD)	NCQA	Administrative or EHR
Colorectal Cancer Screening (COL-AD)	NCQA	ECDS or EHR
Breast Cancer Screening (BCS-AD)	NCQA	ECDS or EHR
Adult Immunization Status (AIS-AD) ^b	NCQA	ECDS

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2025 Adult Core Set Measures (cont.)

2025 Voluntary Adult Core Set Measures (Continued)

Measure Name	Measure Steward	Data Collection Method
Maternal and Perinatal Health		
Prenatal and Postpartum Care: Age 21 and older (PPC2-AD)	NCQA	Administrative or hybrid
Contraceptive Care – Postpartum Women Ages 21 to 44 (CCP-AD)	OPA	Administrative
Contraceptive Care – All Women Ages 21 to 44 (CCW-AD)	OPA	Administrative
Low-Risk Cesarean Delivery: Age 20 and Older (LRCD-AD) ^c	CDC/NCHS	State Vital Records
Prenatal Immunization Status: Age 21 and Older (PRS-AD) ^b	NCQA	ECDS
Care of Acute and Chronic Conditions		
Controlling High Blood Pressure (CBP-AD)	NCQA	Administrative, hybrid, or EHR
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis: Age 18 and Older (AAB-AD)	NCQA	Administrative
Glycemic Status Assessment for Patients with Diabetes (GSD-AD) ^d	NCQA	Administrative or hybrid
PQI 01: Diabetes Short-Term Complications Admission Rate (PQI01-AD)	AHRQ	Administrative
PQI 05: Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate (PQI05-AD)	AHRQ	Administrative
PQI 08: Heart Failure Admission Rate (PQI08-AD)	AHRQ	Administrative
PQI 15: Asthma in Younger Adults Admission Rate (PQI15-AD)	AHRQ	Administrative
Plan All-Cause Readmissions (PCR-AD)	NCQA	Administrative
Asthma Medication Ratio: Ages 19 to 64 (AMR-AD)	NCQA	Administrative
HIV Viral Load Suppression (HVL-AD)	HRSA	Administrative or EHR
Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)	PQA	Administrative
Concurrent Use of Opioids and Benzodiazepines (COB-AD)	PQA	Administrative

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2025 Adult Core Set Measures (cont.)

2025 Voluntary Adult Core Set Measures (continued)

Measure Name	Measure Steward	Data Collection Method
Dental and Oral Health Services		
Oral Evaluation During Pregnancy: Ages 21 to 44 (O EVP-AD) ^b	DQA (ADA)	Administrative
Ambulatory Care Sensitive Emergency Department Visits for Non-Traumatic Dental Conditions in Adults (EDV-AD) ^b	DQA (ADA)	Administrative
Experience of Care		
Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey 5.1H, Adult Version (Medicaid) (CPA-AD)	AHRQ	Survey
Long-Term Services and Supports		
Long-Term Services and Supports Comprehensive Care Plan and Update (CPU-AD)	NCQA	Case management record review
National Core Indicators Survey (NCIIDD-AD)	NASDDDS/ HSRI	Survey

Measure Name	Measure Steward	Data Collection Method
2025 Provisional Adult Core Set Measures (Voluntary for 2025 Reporting)		
Postpartum Depression Screening and Follow-Up: Age 21 and Older (PDS-AD)	NCQA	ECDS

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2025 Adult Core Set Measures (cont.)

More information on Updates to the 2025 Child and Adult Core Health Care Quality Measurement Sets is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/adult-health-care-quality-measures/index.html>. A resource that provides a history of the measures included in the Child and Adult Core Sets is available at <https://www.medicaid.gov/medicaid/quality-of-care/downloads/core-set-history-table.pdf>.

It is important to note that these measures reflect high quality comprehensive care provided across health care providers and settings. Domains are intended to categorize measure topic areas and are not intended to define the type of providers or the health care settings in which care is provided.

^a The Diabetes Care for People with Serious Mental Illness: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) measure was modified by the measure steward and is now the Diabetes Care for People with Serious Mental Illness: Glycemic Status > 9.0% (HPCMI-AD) measure.

^b This measure was added to the 2025 Adult Core Set.

^c This measure is calculated by CMS on behalf of states. Starting with the 2025 Core Set, the Low-Risk Cesarean Delivery measure is included in both the Child and Adult Core Sets. For the Child Core Set, the measure is reported for beneficiaries under age 20. For the Adult Core Set, the measure is reported for beneficiaries age 20 and older.

^d The Hemoglobin A1c Control for Patients With Diabetes (HBD-AD) measure was modified by the measure steward and is now the Glycemic Status Assessment for Patients with Diabetes (GSD-AD) measure.

AHRQ = Agency for Healthcare Research & Quality; CMS = Centers for Medicare & Medicaid Services; DQA (ADA) = Dental Quality Alliance (American Dental Association); ECDS = Electronic Clinical Data Systems; EHR = Electronic Health Record; HRSA = Health Resources and Services Administration; HSRI = Human Services Research Institute; NASDDDS = National Association of State Directors of Developmental Disabilities Services; NCQA = National Committee for Quality Assurance; OPA = U.S. Office of Population Affairs; PQA = Pharmacy Quality Alliance; SAMHSA = Substance Abuse and Mental Health Services Administration.

2025 1945 Health Home Core Set Measures

Measure Name	Measure Steward	Data Collection Method
Core Set Measures		
Initiation and Engagement of Substance Use Disorder Treatment (IET-HH)	NCQA	Administrative or EHR
Controlling High Blood Pressure (CBP-HH)	NCQA	Administrative, EHR, or hybrid
Colorectal Cancer Screening (COL-HH)	NCQA	ECDS or EHR
Screening for Depression and Follow-Up Plan (CDF-HH)	CMS	Administrative or EHR
Follow-Up After Hospitalization for Mental Illness (FUH-HH)	NCQA	Administrative
Plan All-Cause Readmissions (PCR-HH)	NCQA	Administrative
Use of Pharmacotherapy for Opioid Use Disorder (OUD-HH)	SAMHSA	Administrative
Follow-Up After Emergency Department Visit for Substance Use (FUA-HH)	NCQA	Administrative
Follow-Up After Emergency Department Visit for Mental Illness (FUM-HH)	NCQA	Administrative
Utilization Measures		
Admission to an Institution from the Community (AIF-HH)	CMS	Administrative
Inpatient Utilization (IU-HH)	CMS	Administrative

More information on updates to the 2025 Health Home Core Sets is available at <https://www.medicaid.gov/resources-for-states/medicaid-state-technical-assistance/health-home-information-resource-center/health-home-quality-reporting/index.html>. A resource that provides a history of the measures included in the Health Home Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/downloads/2025-health-home-core-set-history-table.pdf>.

CMS = Centers for Medicare & Medicaid Services; EHR = Electronic Health Record; NCQA = National Committee for Quality Assurance; SAMHSA = Substance Abuse and Mental Health Services Administration.

2025 1945A Health Home Core Set Measures

Measure Name	Measure Steward	Data Collection Method
Core Set Measures		
Well-Child Visits in the First 30 Months of Life (W30-HHA)	NCQA	Administrative
Child and Adolescent Well-Care Visits (WCV-HHA)	NCQA	Administrative
Childhood Immunization Status (CIS-HHA)	NCQA	Administrative, EHR, or hybrid ^a
Immunizations for Adolescents (IMA-HHA)	NCQA	Administrative or hybrid ^a
Oral Evaluation, Dental Services (OEV-HHA)	DQA (ADA)	Administrative
Inpatient Utilization (IU-HHA)	CMS	Administrative

More information on the 2025 Health Home Core Sets is available at <https://www.medicaid.gov/resources-for-states/medicaid-state-technical-assistance/health-home-information-resource-center/1945a-health-home-resources>

^a The Childhood Immunization Status and Immunizations for Adolescents measures are also specified for Electronic Clinical Data System (ECDS) reporting. ECDS specifications are not currently available for Health Home Core Set reporting.

CMIT = CMS Measures Inventory Tool; CMS = Centers for Medicare & Medicaid Services; DQA (ADA) = Dental Quality Alliance (American Dental Association); EHR = Electronic Health Record; NCQA = National Committee for Quality Assurance